

# BELMONT HEALTH CENTRE (Dr J J Wijeratne & Partners)

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## **ACCESS TO MEDICAL RECORDS PATIENT INFORMATION AND REQUEST FORM**

This information has been put together to help us to help you access your medical records. After reading this information, please confirm which is your preferred method of accessing your information by completing the form on the last page and returning it to the surgery.

If you have any queries please call and speak to one of our reception team.

### **General Information**

The General Data Protection Regulation gives every living person (or authorised representative) the right to apply for access to their health records.

If you are using an authorised representative, you need to be aware that in doing so, they may gain access to all health records concerning you, which may not all be relevant. If this is a concern, you should inform your representative of what information you wish them to specifically request when they are applying for access.

### **To make a subject access request**

Please complete the form attached, this should be returned to the reception desk as soon as possible to avoid delay and will be processed by the reception co-ordinator. In most cases this will be within one month. If there is a large number of notes, this may take longer and you will be advised.

### **Costs**

Under the General Data Protection Regulation you **will not normally be** charged a fee to view your health records or to be provided with a copy of them unless the request is judged to be unfounded.

### **If you ever need to access your medical records:**

#### **Option 1**

You can register for online access to your computerised medical records. All of the data held in electronic format, including results and problem titles, will be accessible to you. You can then decide which information to share with a third party – not all of your medical record will be relevant to your case. To register for online access you need to come into the surgery, with proof of ID. The forms can be completed online from our website ([www.thepinn.co.uk](http://www.thepinn.co.uk)) in advance. This will also allow you access to booking appointments and ordering medication.

## Option 2

You can request a Targeted Subject Access Request (TSAR). This means:

We can provide you with a copy of anything we hold electronically rather than your complete record dating back to birth.

- 1) We can provide information between specific dates.
- 2) We can provide information regarding a specific problem

### Future SARs

- As you will already have been provided with a copy of your records, any repeated SARs will generally only cover additional information added to your record since the date of the last request.
- Any request for a further copy of full or partial records will be subject to an administration charge of up to £50.

**Please be aware that no action will be taken towards processing your request until we have received a completed request form. This must be signed by the patient.**

## Option 3

You can request a full copy of your medical record. As this will involve us photocopying all of your historic records we may need additional time to process this request. This can take up to one month. We will let you know when they are ready to collect and you will need to show ID.

## Option 4

You can contact your insurance company/solicitor and ask that they request **a medical report** directly from us rather than copies of your records. **A medical report** will be completed by your GP and will only focus on the information in your record that is relevant to your case – not the whole of your medical record. **A medical report may well be chargeable, as it may involve your GP giving their professional, objective, opinion, and is not just a printout of your records.**

## Complaints or Concerns

If you have any queries please do not hesitate to ask at the practice.

If you are unhappy with any aspect of the process please speak to the reception team. Anything that cannot be sorted out can be raised as a complaint with the Practice Manager.

You can also lodge your complaint through the ICO (Information Commissioners Office). Tel 01625 545745 or [www.ico.org.uk/](http://www.ico.org.uk/)

All complaints will be acknowledged within three days and a full response will be within 20 days.

## ACCESS TO MEDICAL RECORDS - PATIENT REQUEST FORM

Please return this form to the practice as soon as possible to avoid delaying in

processing. Full Name :

Date of Birth:

Contact Phone Number:

Address:

Email Address:

***Would you like to receive SMS notifications for clinical services eg Test results/Recalls***

**Yes..... No.....**

Details of the Person who wishes to access the records, if different to

above Surname:

Forenames:

Address:

Relationship to the patient:

Tick whichever of the following statements apply:

- I am the patient
- I have been asked to act by the patient and attach patient's consent
- I am acting in Loco Parentis as the patient is under age of sixteen and is either incapable of understanding the request or has consented for me to make this request on their behalf (attached patient's written consent)
- I have a claim arising from the patient's death and wish to access information relevant to my claim on the grounds that (PLEASE SUPPLY YOUR REASONS BELOW)

**Please place a tick in  the only tick the option you would like the practice to undertake:**

**Option 1:** I would like to register for online access to my computerised medical record and will come to the surgery with ID after completing the forms online at [www.thepinn.co.uk](http://www.thepinn.co.uk)

I already have online access and want my computerised records made available (if not visible already)

**Option 2:** I would like to request a Targeted Subject Access Request (TSAR) and I ask that you provide me with a copy of my medical record:

With regards to a particular

problem. Please state which:

Between specific dates. Please state which:

From:

To:

I would like this in paper format

**You must confirm your email address on this form and it must match that on your records. You accept responsibility for safeguarding your own records if a non-secure email address is used**

**Option 3:** I would like a full copy of my medical record including all paper held records. I understand that this will take longer to process and allow up one month from the date shown below for this to be provided to me.

**Option 4:** I will inform my insurers that I no longer wish you to forward a copy of my records and will ask that they should request a medical report from The Pinn Medical Centre instead.

**Signed:**

**Name (print):**