

# Patient online records access in England

Brian McMillan, Gail Davidge, Lindsey Brown, Moira Lyons,  
Tjeerd Van Staa, Peter Bower  
*brian.mcmillan@manchester.ac.uk*

Centre for Primary Care and Health Services Research  
University of Manchester, UK

# The journey

How did we get from this... to this...



Secure access 24 hours a day

Access a range of NHS services  
anytime, anywhere

## How did we get here?

- 1990 – Access to Health Records Act
- 1998 – Data Protection Act
- 2003 – trial of Kiosks in GP surgeries
- 2007 – NHS ‘HealthSpace’
- 2010 – DfH ‘Liberating the NHS’ / Systematic reviews / RCGP ‘Patient online toolkit’
- 2018 – GDPR
- 2019 – GP contract
- 2022 – Full prospective access to become the default

# Before 1<sup>st</sup> Nov 2022

**Summary Record Access**

Enable summary patient record access

---

**Detailed Coded Record**

Enable detailed coded record access

By default the detailed coded record will include  all consultations

consultations from the date of consent onwards

consultations from

---

**Full Clinical Record**

Enable full clinical record access

By default the online record will include  all consultations

consultations from the date of consent onwards

consultations from

Allow patients to request access to their records via SystemOnline

- Allow appointment booking
- Allow medication requesting
- Allow completing questionnaires
- Allow online messaging
- Allow viewing summary record
- Allow coded or full record  Detailed coded record  Full clinical record  Full record with coded record before review date

\* indicates that the service isn't currently offered here

## Detailed coded record (2)

	<b>Demographics</b>		<b>Immunisations</b>		<b>Procedure codes (medical or surgical) and codes in consultation (signs, symptoms)</b>
	<b>Allergies/adverse reactions</b>		<b>Results (numerical values and normal range)</b>		<b>Codes showing referral made or letters received (no attachments)</b>
	<b>Medication (dose, quantity and last issued date)</b>		<b>Values (BP, PEFR)</b>		<b>Other codes (ethnicity, QOF)</b>
			<b>Problems/diagnoses</b>		

13.9% had access to this in August 2022

# Patient online management information (POMI)

National summary



Month view

Select reporting period

Select system supplier (optional)

Timeseries

31 August 2022

All

(!) indicates that some services are provided by subsidiary supplier Informatica

Online appointment  
booking/cancelling:

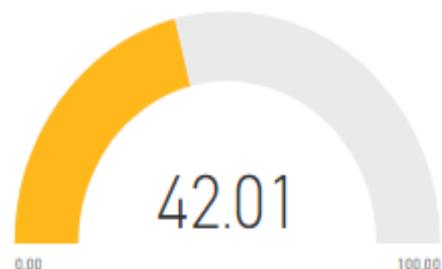
Online repeat prescription ordering:

Online detailed coded record view:

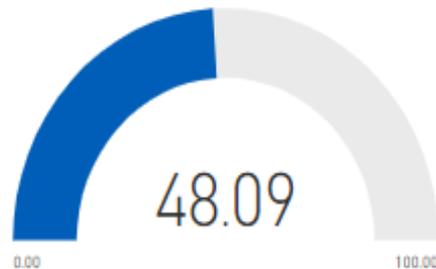
Totals:



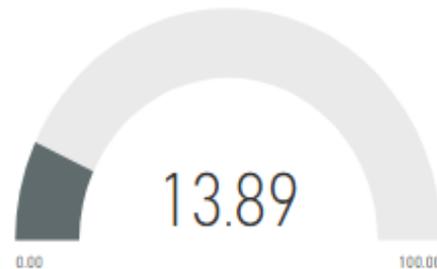
The percentage of patients enabled to book/cancel appointments online:



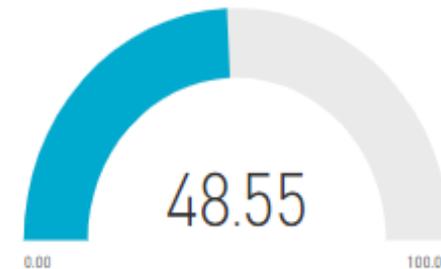
The percentage of patients enabled to order repeat prescriptions online:



The percentage of patients enabled to view detailed coded records online:



The percentage of patients enabled for at least one online service:



Number of transactions this month:

858.44K

Number of transactions this month:

6.53M

Number of transactions this month:

33.40M

Total transactions this month:

41M

# How and where?

Register for

- Beat the phone
- Online 24 hours
- Appointment booking
- Repeat prescriptions
- Free mobile app
- **To register, just ask at reception**

evergreen life | Start your wellness journey today

NHS Providing NHS services

Customised Care  
Communicate directly back-and-forth with your doctors and wider care team.

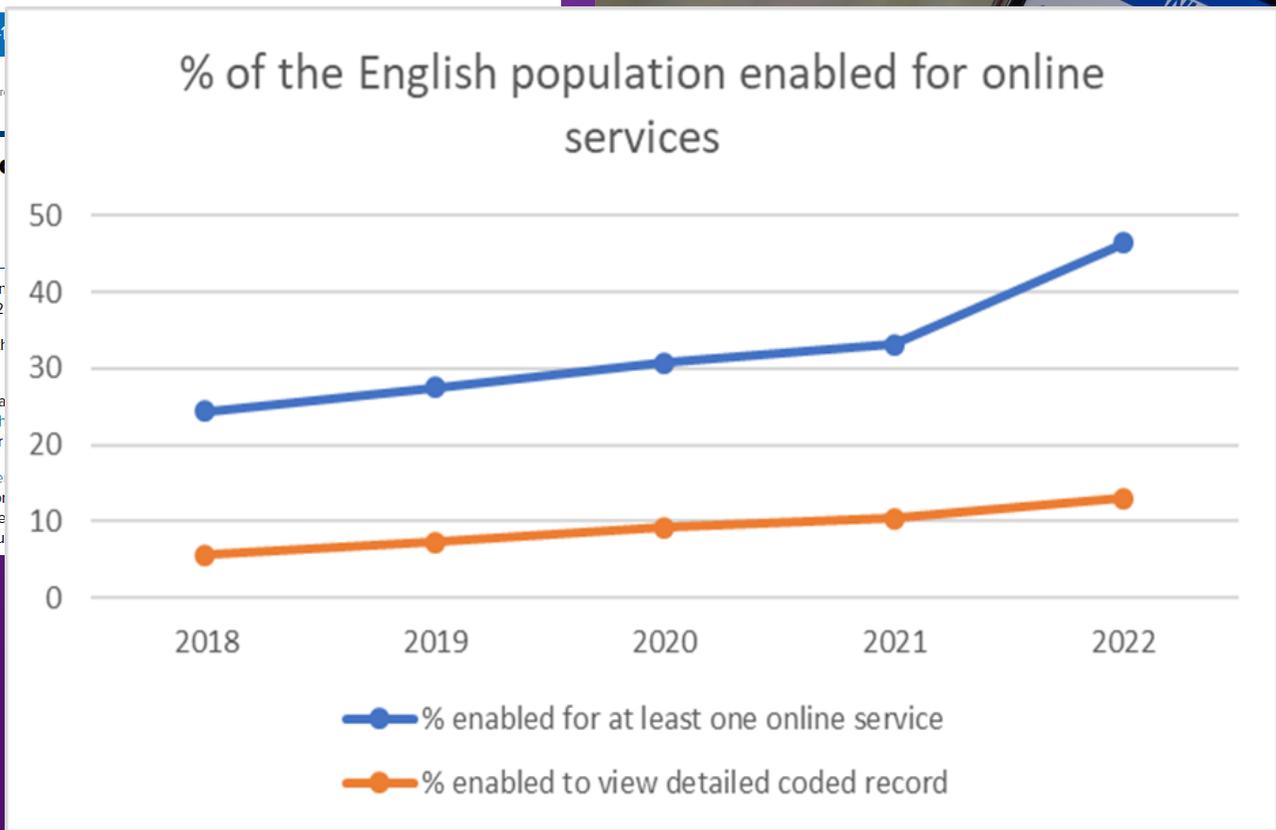
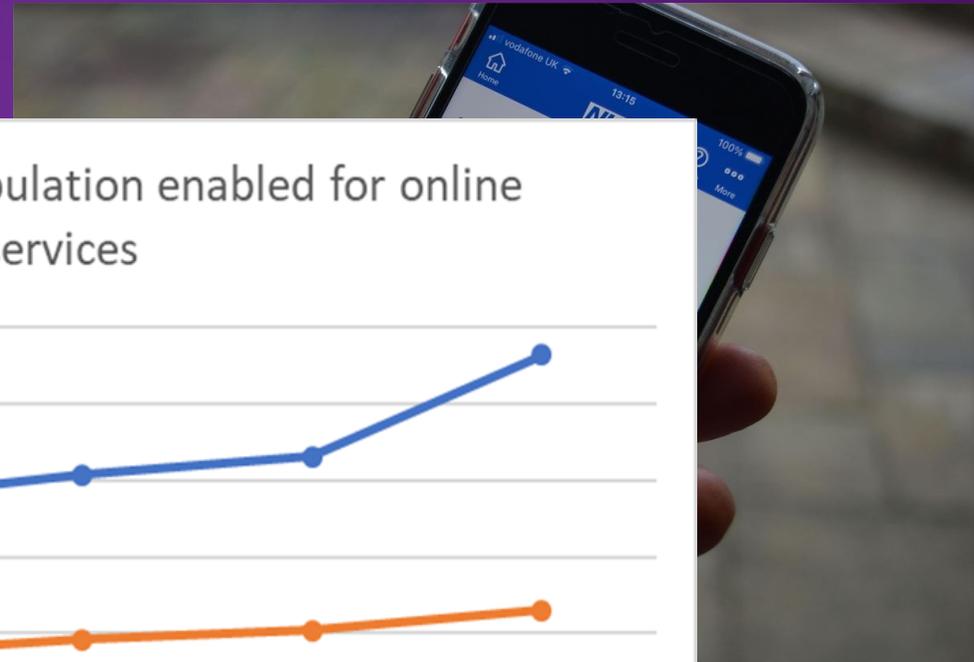
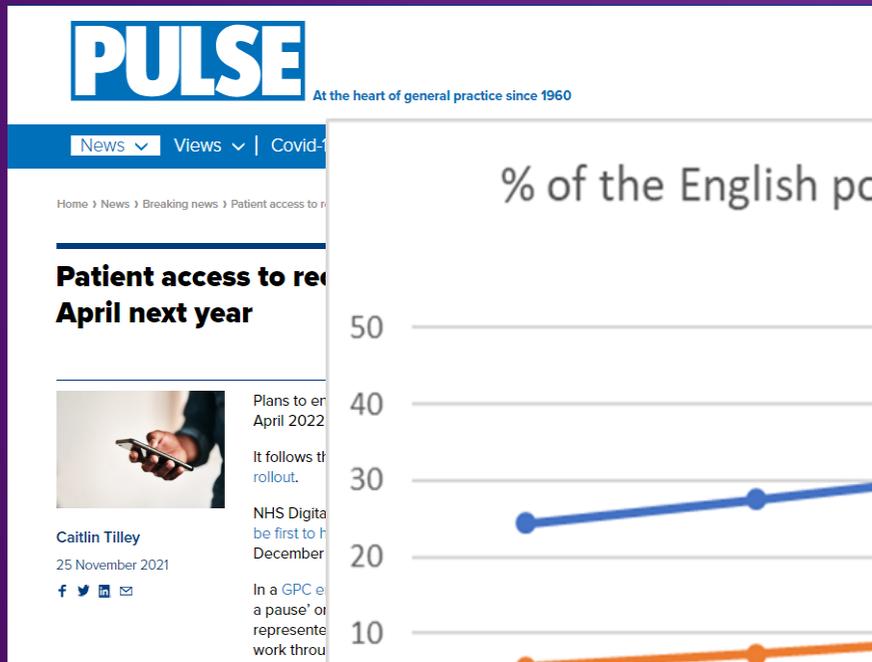
Access your NHS account

Log in Create an account

You can login with your SystmOnline username and password.

GET IT ON Google Play  
Download on the App Store

# The times they are a changin'



# Views of primary care staff in England

Turner *et al.* (2022) Unintended consequences <sup>[2]</sup> 16 staff, 13 patients

- Patient distress
- Workload (preparing patients, redaction, queries, safeguarding)
- Jargon
- Reduced documentation

Louch *et al.* (2022) Focus group study - 19 staff <sup>[3]</sup>

- Information – level, usage
- Changing behaviours - ↓ documentation, ↓ reporting, relationships
- Secure access and safeguarding – coercion and abuse, equity

## Methods

- Semi structured interviews (Nov 21 – Mar 22)
- Good spread of IMD & levels of records access
- 30 Primary care staff, 10 ♂, 20 ♀ (25 practices)
- Aged 25-64 (mean 44.8, SD 11.7) years
- GPs (9), GP trainee (1), Receptionists (3), Admin (2), Practice Managers (3), Nurses (7), HCAs (2), Physio (1), Pharmacist (1), Physician Associate (1)
- Mostly White British (27)
- Interviews audio recorded and transcribed

# Analysis & findings

- Verbatim interview transcripts analysed and coded using Nvivo 12
- Thematic analysis: Iterative, 'bottom-up' approach



## Theme 2: Opportunities and challenges for Patient-Centred Care

- Patient ownership, empowerment and control
- Patient activation & health literacy
- Confirmation & reassurance
- Communication, integration and involvement of others in patient centred care
- Equity of access for all patients

## **Theme 3: Keeping ourselves and our patients safe**

- **May make patients feel worse or put safety at risk**
- **Safeguarding and unauthorised access**
- **Improving patient safety and continuity of care**
- **What about us? Staff well-being and workload**

## Theme 4: Navigating change

- Changing relationships: transparency & trust
- Changing the function and purpose of the health record
- Navigating cultural shifts: changing how we work and relate to patients
- Training & support needs

## Next steps

- Developing more support materials for staff
  - eLearning modules
- Building topic into medical / allied professions undergraduate curriculums
- Developing tools for patients
  - Understanding test results
  - Managing long term conditions
  - Interactive risk calculators

# Acknowledgements

This project is funded by the NIHR Advanced Fellowship programme (NIHR300887). The views expressed are those of the authors and not necessarily those of the NIHR or the Department of Health and Social Care.

## References

1. DesRoches et al. (2020). The Views and Experiences of Clinicians Sharing Medical Record Notes With Patients. *JAMA Netw Open*. 2020;3(3):e201753. [doi:10.1001/jamanetworkopen.2020.1753](https://doi.org/10.1001/jamanetworkopen.2020.1753)
2. Turner et al (2022). Unintended consequences of patient online access to health records: a qualitative study in UK primary care <https://doi.org/10.21203/rs.3.rs-1256673/v1>
3. Louch et al. (2022). What do primary care staff think about patients accessing electronic health records? A focus group study. *BMC Health Services Research* <https://doi.org/10.1186/s12913-022-07954-y>