

SystemOne - Children Application form for online services

For parents/guardians applying for proxy access for under 11's

The Mayflower Medical Practice will allow parents or guardians proxy access to SystemOne Online for their child under the age of 11. Please note that due to complex confidentiality laws and online access guidance The Mayflower Medical Practice does not allow access for children aged 11 – 16 years old. At 16 the child can register themselves for online access.

To apply for proxy online access for your child you will need to already be registered for SystemOne online yourself. You will then need to bring along this form, together with photographic ID for yourself and proof of relationship to the child (eg birth certificate or proof of guardianship) and if possible, ID for your child.

Details of Child you are applying access for:

Name of person for the online access	Age	Date of Birth

Your details:

Name:
Relationship to child:
Email Address:
Mobile Number:
Landline Number:

I wish to have access to the following online services (please tick all that apply):

1. Booking appointments	• <input type="checkbox"/>
2. Requesting repeat prescriptions	• <input type="checkbox"/>
3. Questionnaire	• <input type="checkbox"/>
4. Accessing my summary care record	• <input type="checkbox"/>
5. Accessing my detailed coded access to my medical record. This is not full record access. Please consider there may be sensitive data in your records. Please read attached sheet 'Things to consider' before ticking this box.	• <input type="checkbox"/>

Patient Disclaimer	
I am the parent/guardian of	
And I am applying for online access for my child. I will adhere to The Mayflower Medical Practice Guidance notes which I have been given for the use of SystemOne Online. I understand that it is my responsibility to keep the account secure by keeping the log in details confidential. I understand that at the age 11 the online access will automatically expire as no access is given for children aged 11 – 16 years old. At 16 the child will need to register themselves in person.	
Signature	Date

Surgery staff to complete

ID for parent seen <input type="checkbox"/> type of id		Staff Name
Proof of relationship (birth certificate or proof of guardianship seen <input type="checkbox"/>	Amend the account for patient not child and add child 'proxy access' <input type="checkbox"/>	<p>Checklist - IMPORTANT Action</p> <p>User and password done <input type="checkbox"/></p> <p>Access to all services <input type="checkbox"/></p> <p>Scan document <input type="checkbox"/></p> <p>Send Application Form to Finningley <input type="checkbox"/></p>