

Provide a second parent with access to a child’s health care records

This user guide has been created to assist you with the process of giving another family member, who already has a CHIP account, access to the health care records of one or two children.

In this scenario, a mother created an account in CHIP (see the instruction guide ‘**Create a New CHIP Account**’) and created an account for her child (see the instruction guide ‘**Create a CHIP Account for Dependants**’) and now wants to share the child’s health care records with the father, who is also in the CHIP pilot.

PLEASE NOTE: You can share your health care records with a user who is not part of the CHIP pilot, but you have to follow a different process. To complete that process, see the instruction guide ‘**Share Your CHIP Account with Another User.**’

For the purpose of this document, Domingo Holley (the mother) will be giving Gertude Shier (the father) access to Beau Sherring’s (the child) health care records.

This document is divided into TWO sections:

Section one will be used by the person who currently has access to the child’s health care records.

Section two will be used by the person who is looking to gain access to the child’s health care record.

Section one – Sending an access invitation to another user

Step 1: Log into the account of the parent who already has access to the child’s records. See the support document ‘**Sign into Your CHIP Account**’ for more information.

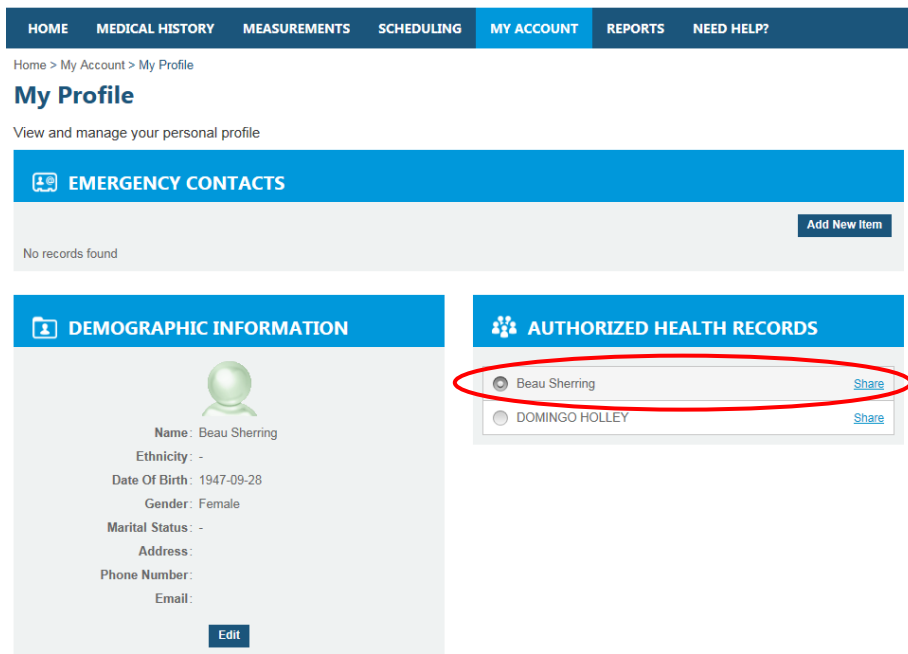
Step 2: Select the child record in the ‘Current record’ section in the top right side of CHIP.



Step 3: in the “I want to ...” menu in the top right of the page, select **Share my Data > With family & friends**



Step 4: Under ‘Authorized Health Records,’ make sure the child record is selected, then click **Share**.



Step 5: In the next window, enter the following information:

1. enter the email address of the person with whom you intend to share the account
2. create a passcode that they will use to access the record (you will need to provide this passcode to the other person using another mechanism so that they can log in)
3. identify if the email recipient is the child
4. select a sharing level
5. select an access expiration date or leave it set at 'No expiration'
6. add a note, if required
7. click **Send invitation**

The screenshot shows a web interface for sharing health information. On the left, there is a profile card for 'Beau' with a grey silhouette icon. The main content area is titled 'Invite someone to access Beau's information' and includes a breadcrumb trail: 'Home > Sharing > Share health information'. Below the title, there is a paragraph explaining that the user controls the information and that clicking 'Send Invitation' will send an email with a link to add the record to the recipient's TELUS health space account. A small asterisk indicates that certain fields are required. The form contains the following fields and options:

- *Recipient's email address:** A text input field containing 'testuser@ehealthsask.ca'.
- *Retype email address:** A text input field containing 'testuser@ehealthsask.ca'.
- *Create a passcode:** A text input field containing '123456' with a note '(Minimum 6 characters)'. Below this is a paragraph: 'The email recipient will need to enter the passcode to accept this invitation. To protect your invitation, don't email the passcode. Use another method to tell the recipient the passcode. If you forget the passcode, you'll need to resend the invitation with a new passcode.'
- *Is the email recipient Beau Sherring?** Two radio button options: 'Yes' (unselected) and 'No' (selected).
- Select sharing level:** Three radio button options: 'View Beau's information' (unselected), 'View and modify Beau's information' (selected), and 'Act as a custodian of Beau's record (What can a record custodian do?)' (unselected).

Select information type

- Share only the types of information Citizen Health Information Portal (CHIP) uses
- Share only the types of information selected below

Information Types

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Advance Directive | <input checked="" type="checkbox"/> Diabetes Insulin Injection Use | <input type="checkbox"/> Life goal |
| <input type="checkbox"/> Aerobic Profile | <input type="checkbox"/> Diabetic profile | <input type="checkbox"/> Meal Definition |
| <input type="checkbox"/> Allergic Episode | <input type="checkbox"/> Dietary Intake | <input type="checkbox"/> Medical Annotation |
| <input checked="" type="checkbox"/> Allergy | <input checked="" type="checkbox"/> Discharge summary | <input type="checkbox"/> Medical Device |
| <input type="checkbox"/> Application Data Reference | <input checked="" type="checkbox"/> Documents (File) | <input type="checkbox"/> Medical Image Study |
| <input checked="" type="checkbox"/> Application-Specific Information | <input checked="" type="checkbox"/> Emergency or Provider Contact | <input type="checkbox"/> Medical Problem |
| <input checked="" type="checkbox"/> Appointment | <input type="checkbox"/> Emotional State | <input checked="" type="checkbox"/> Medication |
| <input checked="" type="checkbox"/> Asthma inhaler | <input checked="" type="checkbox"/> Encounter | <input checked="" type="checkbox"/> Medication Fill |
| <input checked="" type="checkbox"/> Asthma Inhaler Usage | <input checked="" type="checkbox"/> Exercise | <input checked="" type="checkbox"/> Message |
| <input checked="" type="checkbox"/> Basic Demographic Information | <input type="checkbox"/> Exercise Samples | <input type="checkbox"/> Microbiology Lab Test Result |
| <input checked="" type="checkbox"/> Blood Glucose Measurement | <input type="checkbox"/> Explanation of benefits | <input type="checkbox"/> PAP Session |
| <input checked="" type="checkbox"/> Blood Oxygen Saturation | <input checked="" type="checkbox"/> Family History | <input type="checkbox"/> Password protected package |
| <input checked="" type="checkbox"/> Blood Pressure Measurement | <input type="checkbox"/> Family history condition | <input checked="" type="checkbox"/> Peak Flow Measurement |
| <input type="checkbox"/> Body composition | <input type="checkbox"/> Family history person | <input checked="" type="checkbox"/> Personal Contact Information |
| <input checked="" type="checkbox"/> Body dimension | <input type="checkbox"/> Genetic SNP Result | <input checked="" type="checkbox"/> Personal demographic information |
| <input type="checkbox"/> Calorie guideline | <input type="checkbox"/> Group membership | <input checked="" type="checkbox"/> Personal Image |
| <input type="checkbox"/> Cardiac Profile | <input type="checkbox"/> Group membership activity | <input type="checkbox"/> Pregnancy |
| <input type="checkbox"/> Care Plan | <input checked="" type="checkbox"/> HbA1C Measurement | <input checked="" type="checkbox"/> Procedure |
| <input checked="" type="checkbox"/> Cholesterol Measurement | <input checked="" type="checkbox"/> Health Assessment | <input checked="" type="checkbox"/> Question Answer |
| <input type="checkbox"/> Clinical Document Architecture (CDA) | <input checked="" type="checkbox"/> Health Event | <input type="checkbox"/> Radiology Lab Result |
| <input type="checkbox"/> Comment | <input type="checkbox"/> Health Goal | <input type="checkbox"/> Respiratory profile |
| <input checked="" type="checkbox"/> Concern | <input checked="" type="checkbox"/> Health Journal Entry | <input type="checkbox"/> Sleep Related Activity |
| <input checked="" type="checkbox"/> Condition | <input type="checkbox"/> Healthcare proxy | <input checked="" type="checkbox"/> Sleep Session |
| <input checked="" type="checkbox"/> Continuity of Care Document (CCD) | <input type="checkbox"/> Heart rate | <input checked="" type="checkbox"/> Status |
| <input checked="" type="checkbox"/> Continuity of Care Record (CCR) | <input checked="" type="checkbox"/> Height Measurement | <input checked="" type="checkbox"/> Vital signs |
| <input type="checkbox"/> Contraindication | <input checked="" type="checkbox"/> Immunization | <input type="checkbox"/> Web Resource (Link) |
| <input checked="" type="checkbox"/> Daily Dietary Intake | <input checked="" type="checkbox"/> Insulin injection | <input type="checkbox"/> Weekly Aerobic Exercise Goal |
| <input checked="" type="checkbox"/> Daily Medication Usage | <input type="checkbox"/> Insurance Plan | <input type="checkbox"/> Weight Goal |
| <input type="checkbox"/> Defibrillator Episode | <input checked="" type="checkbox"/> Lab Test Results | <input checked="" type="checkbox"/> Weight Measurement |

*Set access expiration

- ex: 2016-01-12
- No expiration

Add optional note

Important: Some information stored in the records you manage may be highly sensitive. Before you grant access to a record, consider carefully which people should be allowed to see the information. Learn more about sharing records.

Send invitation

Step 6: You will see confirmation of the invitation in the 'Authorized Health Records' section.


My Profile

View and manage your personal profile

EMERGENCY CONTACTS

No records found [Add New Item](#)

DEMOGRAPHIC INFORMATION


Name: Beau Sherring
Ethnicity: -
Date Of Birth: 1947-09-28
Gender: Female
Marital Status: -
Address:
Phone Number:
Email:
[Edit](#)

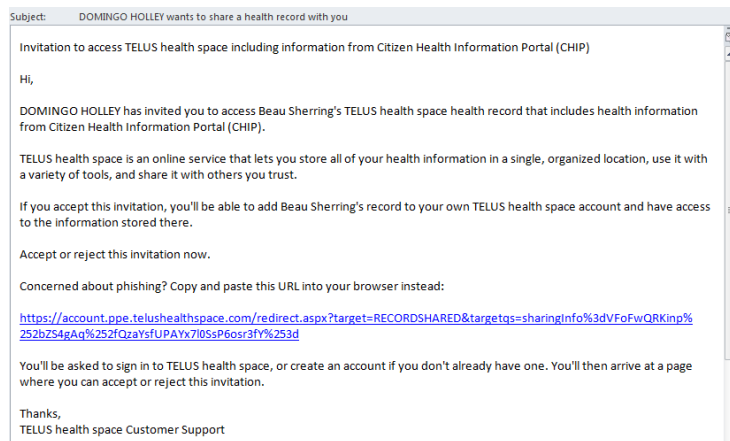
AUTHORIZED HEALTH RECORDS

An Invitation to share the record has been sent successfully

<input checked="" type="radio"/> Beau Sherring	Share
<input type="radio"/> DOMINGO HOLLEY	Share

Section two – Accepting an invitation to view a record

Step 1: The receiving parent will see an email in their inbox, similar to the example below. Click on the URL contained in the email, or copy and paste it into a new browser window.



Step 2: Click on the eHealth Logo and then click **Sign in**.




Take control of your health

TELUS health space is a trusted place for people to gather, store, use, and share health information online.

[Learn more](#)

More sign-in options



TELUS health space®

Sign in using
Use your credentials to sign in to TELUS health space.



Step 4: Enter the second parent's (in this case the father, Gertrude Shier) CHIP username and password, then click **Sign in**.

Thank you for signing up for the
Citizen Health Information Portal
(CHIP)

To access CHIP, please enter the username and
password you created during the registration process.

Shier001!

Sign in

[Forgot Username or Password?](#)
[Reset Password?](#)

Step 5: Enter the passcode that was provided by the initiating parent and click **Accept**.

TELUS health space®

Your account | Sign out | Help

Do you accept access to Beau Sherring's record?

DOMINGO HOLLEY has offered to let you see and change Beau Sherring's record.
Learn more about sharing records.

* Access code: 123456 (If you don't have the passcode, please ask DOMINGO HOLLEY.)

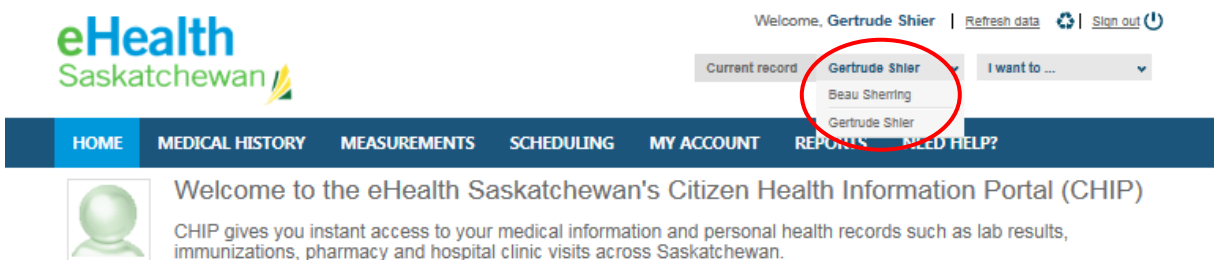
Accept Reject Cancel

Step 6: Ensure that the child’s username is selected and then click **Authorize Access**.



Congratulations! The second parent will now have access to the child’s health care records. This can be confirmed by looking at the records available under the section ‘Current Record’ in the top right section of CHIP. You can now view this user’s health care records by clicking on their name.

PLEASE NOTE: After registering a new user, it may take up to two hours for their data to appear in CHIP .



If you need any assistance setting up your account, please call the CHIP support line at 1-844-767-8259.