

Application booklet to register with

**Parkview Surgery
Cleckheaton Health Centre
Greenside
Cleckheaton
BD19 5AP**



This booklet contains information required for the registration process together with various forms; all of which need to be completed and signed.

Please find throughout this booklet information required to enable you to register with the practice. You will also find additional forms attached which you will need to read, complete fully, and return to us to enable your registration to be processed.

We will also need to see photographic identity i.e. Passport, driving licence.

What is your preferred method of contact: Please give appropriate numbers and email address.

Email address:.....

Mobile phone no:.....

Are you happy to received text messages YES / NO

Landline no:.....

Who is your next of kin:

Relationship to you.....

Name.

Address.

.....

Post Code.....

Do you have a disability, impairment or sensory loss? If so, please state

.....

Do you have a Carer? If so please give details below

Name:

Address:

.....

.....

Post Code:.....

Telephone:.....

Mobile

Are you a services veteran? if so which:

Army Air Force Navy Marines (please circle)

Do you require any additional communication support from the practice?

If yes, please advise a member of the staff.

Sharing of GP Patient Identifiable Data (adult)

In addition to sharing your full electronic record across different NHS Care Services where they are being treated, there may be instances where identifiable information from your record may be extracted to enable the planning of services for all patients.

By linking information from all the different places where you receive such care, such as your GP, hospital and community services we can compare the care you received in one area against the care you received in another, so that we can see what worked best.

Information such as your postcode and NHS number, but not your name, will be used to link your records in a secure system. Information which does not reveal your identity can then be used by others, such as researchers and those planning health services.

You have the right to prevent confidential information about you being shared or used for any purpose other than providing your healthcare, except in special circumstances. Your choice will not affect the care you receive.

If you do not want information that identifies you to be share outside your GP practice, please tick the box below and it will be noted on medical record.

You can change you mind at any time.

I refuse consent for my child's identifiable information to be transferred from your practice systems for any purpose other than their medical care.

This includes adding the following codes to their electronic medical record

- Dissent from disclosure of personal confidential data by Health & Social Care Information Centre code (XaaVL)
- Dissent from secondar use of GP patient identifiable data code (XaZ89)

Signed.....**Dated**.....

Please note that as well as the information and forms included in this booklet you should also receive the following

GMS1 Registration Form

NAMED GP

All practices are now required to provide their patients with a named GP

Dr Yasar Mahmood

Will be your named GP and will have overall responsibility for the care and support our surgery provides during opening hours. This means that you can be seen by any doctor or nurse in the practice but your named GP will oversee your care.

You do not need to take any further action, but if you have any questions, please contact the practice

YOUR ELECTRONIC PATIENT RECORD & THE SHARING OF INFORMATION

A Patient's Guide— (children under 16 years)

Please read this leaflet carefully. It will give you information about the sharing of your electronic patient record and the choices you need to make.

Summary Care Record

A summary care record (SCR) contains patient demographics (name, date of birth, address etc..) This gives other users access to this information who may need it in emergencies i.e. Emergency Departments at hospital or the Ambulance Service. It is your decision if this SCR for your child is shared as described . You must state your preference below:

Opt In (SCR shared) Opt Out (not shared)

Full name of Parent / carer.....

SignedDate.....

Please note that you can change your mind at any time please speak to the Practice Manager.

Sharing of Clinical Information between services where your are treated

Electronic records are kept in all the places where your child receives healthcare These NHS Services can usually only share information from your child's record by letter or email, fax, or phone. At times, this can slow down your child's treatment and mean information is hard to access.

Your GP practice uses a computer system called SystmOne that allows the sharing of full electronic records across different NHS Care Services. You have a choice to make about how your practice shares information about your child's care from their electronic patient record. This is not about their Summary Care Record (SCR), it is asking for the sharing preferences regarding their full electronic GP record. You can choose to share or not to share your child's electronic GP record with other NHS services.

There are two settings that allow you to control how your child's medical information is shared.

Sharing out- this controls whether your child's full GP electronic patient record can be shared with other NHS Care Services where they are treated (please tick appropriate boxes)

YES (full GP record shared with other healthcare teams NO (not shared)

SHARING IN this controls whether you agree for this practice to view information you've Agreed to share about your child at other NHS Services

YES (information from other services viewable by GP surgery) NO (not shared)

FULL NAME OF PARENT/CARER.....

Signed.....Date.....

Do you have any CLINICALLY CONFIRMED allergies?

If so please give details:

1.....

.....

2.....

.....

Are you taking medication on a regular basis?

If so we will need a list of your repeat medication, your previous practice should be able to supply you with this, or you may have the details on the counterfoil of your most recent prescription.

FAMILY HISTORY

Is there any of the following in your family (Father, Mother, Brother, Sister) before the age of 65?

Heart Disease (heart attacks/angina Yes / No	If yes which family member
Diabetes? Yes / No	If yes which family member
Stroke? Yes / No	If yes which family member
Cancer? Yes / No	If yes which family member

	Site of cancer.....

Ethnic Origin

Your ethnicity describes how you see yourself. It is a mixture of culture, religion, skin colour, language, the origins of yourself and your family. It is not the same as nationality

It is used to decide where services should be developed, to ensure all sectors of the community have equal access to our services. Please tick which ethnicity best describes you.

Do you speak English YES / NO (please circle)

If English is not your first language, please state your first language:

.....

White		Black or Black British	
British		Caribbean	
Irish		African	
Any other White background		Any other Black background	
Asian or Asian British		Mixed	
British		White and Black Caribbean	
Irish		White and Black African	
Any other White background		White and Asian	
Any other Asian background		Any other mixed background	
Other Ethnic Groups			
Chinese			
Any other ethnic group			
Not stated			

YOUR ELECTRONIC PATIENT RECORD & THE SHARING OF INFORMATION

A Patient's Guide— adult

Please read this leaflet carefully. It will give you information about the sharing of your electronic patient record and the choices you need to make.

Summary Care Record

A summary care record (SCR) contains patient demographics (name, date of birth, address etc.) This gives other users access to this information who may need it in emergencies i.e. Emergency Departments at hospital or the Ambulance Service. It is your decision if this SCR is shared as described. You must state your preference below:

Opt In (SCR shared) Opt Out (not shared)

SignedDate.....

Please note that you can change your mind at any time please speak to the Practice Manager.

Sharing of Clinical Information between services where you are treated

Electronic records are kept in all the places where you receive healthcare. These NHS Services can usually only share information from your record by letter or email, fax, or phone. At times, this can slow down your treatment and mean information is hard to access. Your GP practice uses a computer system called SystemOne that allows the sharing of full electronic records across different NHS Care Services. You have a choice to make about how your practice shares information about your care from their electronic patient record. This is not about your Summary Care Record (SCR), it is asking for the sharing preferences regarding their full electronic GP record. You can choose to share or not to share your electronic GP record with other NHS services.

There are two settings that allow you to control how your medical information is shared.

Sharing out- this controls whether your full GP electronic patient record can be shared with other NHS Care Services where you are treated (please record your preferences)

YES (full GP record shared with other healthcare teams) NO (not shared)

SHARING IN this controls whether you agree for this practice to view information you've Agreed to share at other NHS Services

YES (information from other services viewable by GP surgery) NO (not shared)

Signed.....Date.....

**Online Services Records Access—
Patient Information
ITS YOUR CHOICE**

If you wish to, you can now use the internet to book appointments with a GP or an Advanced Nurse Practitioner, request repeat prescriptions for any medications you take regularly and look at your medical record online.

You will be given login details, so you will need to think of a password which is unique to you. This will ensure that only you are able to access your record – unless you choose to share your details with a family member or carer.

The practice has the right to remove online access to services. This is rarely necessary but may be the best option if you do not use them responsibly or if there is evidence that access may be harmful to you. This may occur if someone else is forcing you to give them access to your record or if the record may contain something that may be upsetting or harmful to you. The practice will explain the reason for withdrawing access to you and will re-instate access as quickly as possible.

It will be your responsibility to keep your login details and password safe and secure. If you know or suspect that your record has been accessed by someone that you have not agreed should see it, then you should change your password immediately.

If you can't do this for some reason, we recommend that you contact the practice so that they can remove online access until you are able to reset your password.

If you print out any information from your record, it is also your responsibility to keep this secure. If you are at all worried about keeping printed copies safe, we recommend that you do not make copies at all.

The information that you can see online may be misleading if you rely on it alone to complete insurance, employment or legal reports or forms. Be careful that nobody can see your records on screen when you are using Patient Online and be especially careful if you use a public computer to shut down the browser and switch off the computer after you have finished.

THINGS TO CONSIDER

Forgotten history

There may be something you have forgotten about in your record that you might find upsetting.

Abnormal results or bad news

If your GP has given you access to test results or letters, you may see something that you find upsetting. This may occur before you have spoken to your doctor or while the surgery is closed and you cannot contact them. If this happens please contact your surgery as soon as possible. The practice may set your record so that certain details are not displayed online. For example, they may do this with test results that you might find worrying until they have had an opportunity to discuss the information with you.

Choosing to share your information with someone

It's up to you whether or not you share your information with others – perhaps family members or carers. It's your choice, but also your responsibility to keep the information safe and secure. If it would be helpful to you, you can ask the practice to provide another set of login details to your Online services for another person to act on your behalf. They would be able to book appointments or order repeat prescriptions. They may be able to see your record to help with your healthcare if you wish. Tell your practice what access you would like them to have.

Coercion

If you think you may be pressured into revealing details from your patient record to someone else against your will, it is best that you do not register for access at this time.

Misunderstood information

Your medical record is designed to be used by clinical professionals to ensure that you receive the best possible care. Some of the information within your medical record may be highly technical, written by specialists and not easily understood. If you require further clarification, please contact the surgery for a clearer explanation.

Information about someone else

If you spot something in the record that is not about you or notice any other errors, please log out of the system immediately and contact the practice as soon as possible.

More information

For more information about keeping your healthcare records safe and secure, you will find a helpful leaflet produced by the NHS in conjunction with the British Computer Society:

Keeping your online health and social care records safe and secure
<http://www.nhs.uk/NHSEngland/thenhs/records/healthrecords/Documents/PatientGuidanceBooklet.pdf>

**Application for online services
(including children aged 11 years and over)**

Surname	Date of birth
First Name	
Address	
Post Code	
Preferred Telephone No:	
Email address:	

**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.Access to a summary of my medical record	<input type="checkbox"/>

FOR PRACTICE USE ONLY

Patient NHS number	Practice computer ID number
Identity verified by (initials)	Method: Vouching <input type="checkbox"/> Vouching with information in record <input type="checkbox"/> Photo ID and proof of residence <input type="checkbox"/>
Date:	
Authorised by	Date
Date account created	
Date pass phrase sent	

LIFESTYLE QUESTIONNAIRE

Alcohol consumption

Patient name	DOB								
Email address									
1. How often do you have a drink that contains alcohol									
Never	<input type="checkbox"/>	Monthly or less	<input type="checkbox"/>	2-4 times per month	<input type="checkbox"/>	2-3 times per week	<input type="checkbox"/>	4+times per week	<input type="checkbox"/>
2. How many units do you have on a typical day when you are drinking?									
1-2	<input type="checkbox"/>	2-3	<input type="checkbox"/>	5-6	<input type="checkbox"/>	7-8	<input type="checkbox"/>	10+	<input type="checkbox"/>
3. How often do you have (6 if female) or (8 if male) or more standard drinks on one occasion									
Never	<input type="checkbox"/>	Less than monthly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Daily or almost daily	<input type="checkbox"/>
1 unit = 1/2 pint of beer or lager / 1 pub measure of spirits / 1 glass of wine									
Official Use - XaORP - XacWQ - Xab9D									

SMOKING

Cigarettes how many per day.....	Cigars how many per day	Tobacco ounces per day
How old were you when you started smoking	 years
EX SMOKERS		
How old were you when you stopped smoking	years
How much did you smoke A day		