

## **Fremington Medical Centre**

11/13 Beards Road Fremington Barnstaple EX31 2PG

Tel: 01271 376655 Email: d-ccg.fremington@nhs.net www.fremington.org

# Fremington Medical Centre Registration Pack

In this pack you will find the following:

- Application form for GP Online Services
- Getting started with GP Online Services information
- Protecting your GP online records information
- New Patient Questionnaire
- Information on how your NHS data is shared for your care
- NHS data sharing preference form
- Repeat prescription information & pharmacy nomination form for prescription collections
- Family doctor registration form (GMS1)

Please complete all the necessary forms, including the family doctor registration form (GMS1), information on sharing your NHS data form, new patient questionnaire, prescription information and pharmacy nomination form and should you wish to have online access to your records, the GP Online Services application form. Please read through all the information contained within the registration pack carefully and retain for your records.

To register, you will need to attend the surgery in person. Please return all the completed application forms along with photographic ID to Reception. For patients aged under 16, please supply a birth certificate. The Receptionist will photocopy your ID and give it back to you. Please note that the Receptionist will most likely not be able to register you on the spot and it may take a couple of days for your registration to be complete. If you are in need of an urgent appointment with a clinician, please let the Receptionist know and they will do their best to get you registered as soon as possible.



# **Fremington Medical Centre**

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# **Application for GP Online Services**

Please read the GP online services information before completing this form!

Full Name:					Date of Birth:		
Address:							
					Post Code:		
Telephone:					Please tick and how to indicate ye	nur.	
Mobile:			Please tick <u>one</u> box to indicate you preferred contact number				
Email Addres	ss:				,		
Lv	wish	to have access to the following online	e servi	ces	(please tick all that apply):		
Booking ap	point	ments					
Requesting	g repe	eat prescriptions					
<ul> <li>Accessing</li> </ul>	my m	nedical record - Summary Record Acces	s <b>(Age</b>	16+	)		
		nedical record - <b>Full</b> or <b>Detailed</b> Record of the options below:	Access	(A	ge 16+)		
Flease lick	One	•					
		Full  Deta	ailed 🗆				
Ιv	wish	to access my medical record online a	nd agr	ee v	vith each statement (tick):		
I have read	d and	understood the information leaflet provide	ded by t	the	practice		
• I will be res	spons	ible for the security of the information th	at I see	or (	download		
• If I choose	to sh	are my information with anyone else, thi	s is at n	ny c	own risk		
If I suspect that my account has been accessed by someone without my agreement, I will contact the							
	practice as soon as possible						
If I see information in my record that is not about me or is inaccurate, I will contact the practice as soon as possible							
	If I think that I may come under pressure to give access to someone else unwillingly I will contact the						
practice as	soor	n as possible.					
Signature:					Date:		
		FOR PRACTICE U	SE ONL	Υ.			
Patient NHS N	o:		ID verifi	ed b	y (initials):		
Date:			Method	:			
					Vouching Vouching Vouching With information in record		
					Photo ID and proof of residence		
Access Grante	d:	Appointment booking □	Comme	nts:			
		Repeat prescription ordering □					
		Summary Record Access (Age 16+) □					
		Full Record Access (Age 16+) □ Detailed Record Access (Age 16+) □					

#### IMPORTANT INFORMATION

#### Please read the following before filling out the online services registration form

#### **Getting Started**

With GP online services you no longer need to wait on the phone to speak to your GP surgery. Just like online banking, you can look at your GP records on a computer, a tablet or a smartphone, using a website or app.

#### You can choose to:

- Book and cancel appointments with your doctor or nurse online when it suits you (your surgery will choose which appointments can be booked online)
- Order repeat prescriptions online. You don't need to make a journey to the practice or wait on the phone, you can see which repeat prescriptions need to be ordered and only order the ones that you need
- Look at your GP records online. You can you look at your records whenever you want, from the comfort of your home and find answers to questions you may have without ringing the doctor. This includes blood test results, your medications, allergies, illnesses and immunisations.
- Update your personal details including telephone numbers and email addresses to make sure that you receive reminders and information.

### GP online services are FREE to use and are just another way of contacting your surgery.

#### **How To Register**

Fremington Medical Centre uses SystmOnline for its GP online services. It is not hard to start using SystmOnline. The surgery will need to check who you are to make sure you only see your record and not someone else's. Just like your bank or the post office when you pick up a parcel, the practice wants to protect your records from people who are not allowed to see them.

- Complete the online services registration form, tick and sign to confirm you agree with the information on the form.
- The surgery will then check you are who you say you are, so you will need to supply some
  Photo ID and proof of address, for example a passport or driving license and a bank statement
  or council tax statement.
- If you do not have any ID but are well known to the practice, a member of staff may be able to confirm your identity
- If you do not have any ID and are not well known to the surgery, they may ask you questions about the information in your record to confirm the record is really yours.
- The practice will then either email or post out a letter to you with your unique username and password. It will also tell you about the website where you can log in and start using SystmOnline. You will need to change your unique allocated password the first time you login into SystmOnline and change it to one you will remember.
- The practice is not able to provide online access to records for children under the age of 16, however parents or guardians of children under 16 can have parental access to their GP Online Services until the child is 16. This only includes booking appointments or requesting repeat medication on their behalf. You will need to fill out a separate application form for GP Online Services as well as provide a birth certificate for proof of ID.

When you ask the surgery to register you for online services, they might discuss with you why you want to use these services, for example, if they think your record may be seen by someone who shouldn't see it, they might decide to give you access to book appointments or order your repeat prescriptions only. If the practice doesn't think it is in your best interest to use GP online services, they will discuss their reasons with you.

#### **Things To Remember**

- The surgery has a responsibility to look after your GP records. You must also take care online and make sure that your personal information is not seen by anyone who should not see it.
- SystmOnline has been developed and tested using standards set out by a government body, NHS Connecting for Health. All personal information used by SystmOnline is secure and protected.
- Please allow one hour after the registration has been made before you log on.
- You can access the service at any time of the day or night from anywhere in the UK. However, if
  you are travelling overseas, you will not be able to access the service from outside the UK.
- No one should force you to share your username, password or GP records. You have the right
  to say no. If someone asks to see your records and you don't want them to, tell the practice as
  soon as you can.
- You can choose to let another person see your medical records, for example members of your family or carer. To do this safely, speak to the practice.
- You can choose to stop using online services at any time by telling the surgery.
- If you change surgeries, you will need to register again for online services at your new surgery.
- If you lose or forget your login details, please contact the surgery to find out how to reset your account.

#### **Keeping Your Username & Password Safe**

When you register to use GP online services, the surgery will give you a username and password, which you will use to login. You should not share your login details with others.

To protect your information from other people:

- You should keep your password secret and it is best not to write it down. If you must write it down, keep a reminder of the password, not the password itself. This should be kept in a secure place.
- You should not share your username or password. If you think someone has seen your
  password, you should change it as soon as possible. You may want to call the surgery if you
  are not able to change it right away, for example when you do not have access to the internet.

#### **Incorrect Information In Your Records**

On rare occasions, information in your GP records might be incorrect.

If you find any incorrect information, you should let the practice know as soon as possible.

If you see information about anyone else in your records, log out immediately and let the surgery know as soon as possible.

#### **Using A Shared Computer**

You need to take extra care when using a shared computer to look at your GP records online. This could be at the library, at work, at university or at home. To protect your personal information from others when using a shared computer, you should:

- Look around to see if other people can see what is on your computer screen. Remember, your GP records contain your personal information.
- Keep your username and password secret. Just like your bank account PIN, you would not want others to know how to get into your GP records,
- Make sure you log out when you finish looking at your records, so that no one else can see your personal information or change your password without your knowledge.

#### Remember!

Your GP records are important and you should keep them safe and secure, just like your bank account details.

No one should force you to share your GP records. You have the right to say no. If this happens, tell your surgery as soon as you can.

Take care when using a shared computer. Keep your login details in a safe place and remember to log out.

For more information on how you can protect your GP records, go to:

https://www.nhs.uk/nhsengland/thenhs/records/healthrecords/documents/patientguidancebooklet.pdf

#### **GP Online Services App**

If you would like to access your SystmOnline account from your smartphone or tablet, you can download the Android app from Google Play or the Apple app from the app store.

The NHS App also links in with your SystmOnline account. You can also download the NHS App for Android from Google Play or for an Apple device from the app store.

## Fremington Medical Centre New Patient Questionnaire

YOUR DETAILS	FAMILY HISTORY
Name:	Heart disease under 60 yrs old, if yes, then who:
Date of Birth:	Heart disease over 60 yrs old, if yes, then who:
Are you a carer? ☐ Yes ☐ No	
If yes, what is your relationship to the person you	Diabetes:
care for? (e.g. wife, friend, etc):	Stroke:
	High Blood Pressure:
Are you a Military Veteran? ☐ Yes ☐ No	High Cholesterol:
Have you previously been allocated a social worker? ☐ Yes ☐ No	Others (please specify):
If yes, what are their details:	Others (please specify).
	SMOKING
EXERCISE	Do you smoke? ☐ Yes ☐ No
How much exercise do you do?	Have you ever smoked? ☐ Yes ☐ No
(Please tick <u>one</u> of the following)	If yes, when did you give up?
I exercise regularly	Cigarette smoker (number per day)
I do a bit of exercise □	Rolls own cigarettes (ounces per week)
I don't do any exercise □	Cigar smoker (number per day)
I am unable to exercise	Pipe smoker (ounces per day)
	Do you use e-cigarettes? (vaping)
If you are on repeat medications, please attach a copy of your repeat slip from your previous surgery	
copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication	ALCOHOL
copy of your repeat slip from your previous surgery	
copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication list. It may be appropriate to review your medication	ALCOHOL  How much alcohol do you have? (Please circle your answers)
copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication list. It may be appropriate to review your medication with you & the reception team will contact you to	ALCOHOL  How much alcohol do you have? (Please circle your answers)  1. How often do you have a drink containing alcohol?
copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication list. It may be appropriate to review your medication with you & the reception team will contact you to arrange this.  YOUR MEDICAL HISTORY  If you have any serious illnesses or chronic	ALCOHOL  How much alcohol do you have? (Please circle your answers)
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copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication list. It may be appropriate to review your medication with you & the reception team will contact you to arrange this.  YOUR MEDICAL HISTORY  If you have any serious illnesses or chronic conditions then please specify:	ALCOHOL  How much alcohol do you have? (Please circle your answers)  1. How often do you have a drink containing alcohol?  Never / Monthly or less / 2-4 times a month 2-3 times a week / 4+ times a week  2. How many standard alcoholic drinks do you have on a typical day when you are drinking?  1-2 / 3-4 / 5-6 / 7-8 / 10+  3. How often do you have 6 or more standard drinks on one occasion?  Never / Monthly or less / Monthly / Weekly /
copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication list. It may be appropriate to review your medication with you & the reception team will contact you to arrange this.  YOUR MEDICAL HISTORY  If you have any serious illnesses or chronic conditions then please specify:  ALLERGIES	ALCOHOL  How much alcohol do you have? (Please circle your answers)  1. How often do you have a drink containing alcohol?  Never / Monthly or less / 2-4 times a month 2-3 times a week / 4+ times a week  2. How many standard alcoholic drinks do you have on a typical day when you are drinking?  1-2 / 3-4 / 5-6 / 7-8 / 10+  3. How often do you have 6 or more standard drinks on one occasion?
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copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication list. It may be appropriate to review your medication with you & the reception team will contact you to arrange this.  YOUR MEDICAL HISTORY  If you have any serious illnesses or chronic conditions then please specify:  ALLERGIES  List any allergies you have below:	ALCOHOL  How much alcohol do you have? (Please circle your answers)  1. How often do you have a drink containing alcohol?  Never / Monthly or less / 2-4 times a month 2-3 times a week / 4+ times a week  2. How many standard alcoholic drinks do you have on a typical day when you are drinking?  1-2 / 3-4 / 5-6 / 7-8 / 10+  3. How often do you have 6 or more standard drinks on one occasion?  Never / Monthly or less / Monthly / Weekly / Daily or almost daily  SUPPORT
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copy of your repeat slip from your previous surgery for the GP to review & add to your repeat medication list. It may be appropriate to review your medication with you & the reception team will contact you to arrange this.  YOUR MEDICAL HISTORY  If you have any serious illnesses or chronic conditions then please specify:  ALLERGIES  List any allergies you have below:  ACCESSABLE INFORMATION STANDARD  If you require communication support such as by	ALCOHOL  How much alcohol do you have? (Please circle your answers)  1. How often do you have a drink containing alcohol?  Never / Monthly or less / 2-4 times a month 2-3 times a week / 4+ times a week  2. How many standard alcoholic drinks do you have on a typical day when you are drinking?  1-2 / 3-4 / 5-6 / 7-8 / 10+  3. How often do you have 6 or more standard drinks on one occasion?  Never / Monthly or less / Monthly / Weekly / Daily or almost daily  SUPPORT  Would you like support from OneSmallStep to help maintain a healthy lifestyle? (Please tick one of the following)

Physical Activity

#### Fremington Medical Centre New Patient Questionnaire

We are now required to collect ethnicity information and first language details for all our patients when registering with the Practice. Please indicate your ethnicity group and first language by ticking one option from each table below. If you do not wish to state your ethnicity group, please tick the last box.

Please return this form with the rest of the forms to reception.

#### **ETHNICITY**

White British	
White Irish	
Other white ethnic group	
Pakistani/British Pakistani	
Indian/British Indian	
Bangladeshi/British Bangladeshi	
Chinese	
Other Asian ethnic group	
Black African	

Black Caribbean	
Other black ethnic group	
Black African and white	
White and Asian	
Black Caribbean and white	
Other mixed	
Other ethnic group	
Ethnic group not stated	

#### **LANGUAGE**

English	
British Sign Language	
Welsh	
French	
German	
Italian	
Spanish	
Cantonese	
Dutch	
Gaelic	
Greek	
Polish	
Akan (Ashanti)	
Albanian	
Amharic	
Bengali & Sylheti	
Brawa & Somali	
Cantonese or Vietnamese	
Creole	
Ethiopan	
Farsi (Persian)	
Finnish	
Flemish	
French Creole	
Gujarati	
Hakka	
Hausa	
Hebrew	
Hindi	
Igbo (Ibo)	

Japanese	
Korean	
Kurdish	
Lingala	
Luganda	
Makaton (sign language)	
Malayalam	
Mandarin	
Norwegian	
Pashto	
Patois	
Portuguese	
Punjabi	
Russian	
Serbian/Croatian	
Sinhala	
Somali	
Swahili	
Swedish	
Wylheti	
Tagalog (Filipino)	
Tamil	
Thai	
Tigrinya	
Turkish	
Urdu	
Vietnamese	
Yoruba	
Other	



# SHARING YOUR NHS PATIENT DATA

#### Sharing your data for your own individual care

Information sharing in the NHS is subject to rigorous regulation and governance to ensure your full identifiable and personal medical data is kept confidential and only ever seen by carefully vetted doctors, nurses and administrative staff responsible for overseeing your care.

With the development of information technology the NHS will increasingly be sharing key information from your GP medical notes with Out of Hours GP Services, Hospital A&E Units, Community Hospitals, Community Nurses, all of whom may at various times in your life be looking after you. Sharing information can improve both the quality and safety of care you receive, and in some cases can be vital in making life-saving decisions about your treatment.

There are currently two different elements of sharing NHS patient information

- 1. SCR = The NHS Summary Care Record
- 2. EDSM = The Enhanced Data Sharing Model

#### SCR = NHS Summary Care Record

The NHS Summary Care Record was introduced many years ago to help deliver better and safer care; it contains basic information about:

- Any allergies you may have,
- Unexpected reactions to medications, and
- Any prescriptions you have recently received

The intention of the SCR is to help clinicians in Hospital A&E Departments and GP "Out of Hours" health services to give you safe, timely and effective treatment. Clinicians are only allowed to access your SCR record if they are authorised to do so and, even then, only if you give your express permission. You will be asked if healthcare staff can look at your Summary Care Record every time they need to, unless it is an emergency, for instance if you are unconscious. You can refuse if you think access is unnecessary.

Over time, health professionals treating you may add details about any health problems and summaries of your care. Every time further information is added to your record, you will be asked if you agree (explicit consent).

Patients under 16 years have an NHS Summary Care Record created for them, so if you are the parent or guardian of a child please either make this information available to them or decide and act on their behalf.

#### EDSM = Enhanced Data Sharing Model "SystmOne"

The database and software used to store your GP health record is called "SystmOne". It is a very secure national system used by over 2000 GP practices and 4800 NHS organisations including GP out of hour's services, children's services, community services and some hospitals. The system gives your GP the facility to share your record with other health providers who are involved in your care, for example the local Community Nurses who may look after you when you leave hospital or become housebound. Allowing your GP to share your record in the "SystmOne" database helps to deliver better and safer care for you. It is the policy of all local GP practices to automatically opt registered patients into "SystmOne" sharing unless they expressly decline. Those patients who choose to decline are able to determine if their data is "shared out" and/or "shared in".

**Sharing OUT -** controls whether information recorded at our GP practice can be shared with other health care providers.

**Sharing IN** determines whether or not our GP practice can view information in your record that has been entered by other services who are providing care for you or who may provide care for you in the future (*that you have consented to share out*).

### Sharing your data for purposes not related to your individual care

Your confidential patient information can be used for research and planning, unless you have chosen to opt out. You are able to make or change your decision at any time. Most of the time, anonymised data is used for research and planning, so your confidential patient information isn't always needed. If you DO opt out, data that does not identify you may still be used.

Your confidential patient information provides numerous benefits. It is used in research to find cures and better treatments for diseases like diabetes and cancer, or can be used to plan health and care services more effectively. With your data, the NHS is better able to develop and improve health and care services for the future, which helps to improve health and social care for you and your family.

The NHS collects health and care data from all NHS organisations, trusts & local authorities, & also from private organisations, such as private hospitals providing NHS funded care. Research bodies & organisations can request access to this data. Further information: https://www.nhs.uk/using-the-nhs/about-the-nhs/your-health-records

There are very strict rules on how your data can and cannot be used, and you have clear data rights. Access to confidential patient information will not be given for marketing purposes or insurance purposes - unless you specifically request this. Protection of your confidential patient information is taken very seriously and is looked after in accordance with good practice and the law.

Every organisation that provides health and care services will take every step to:

- ensure data remains secure
- use anonymised data whenever possible
- use confidential patient information to benefit health and care
- not use confidential patient information for marketing or insurance purposes (unless you <u>specifically</u> request this)
- make it clear why and how data is being used respect your decision if you decide to opt out
- only use information about you when allowed by the law

All NHS organisations must provide information on the type of data they collect and how it is used. Data release registers are published by NHS Digital and Public Health England, showing records of the data they have shared with other organisations.

#### Manage your choices

#### Sharing your data for purposes not related to your individual care

Online: https://www.nhs.uk/your-nhs-data-matters/

Use this service to request that your confidential patient information is not used beyond your own

individual care.

Telephone: 0300 303 5678 Open: 9am to 5pm Monday to Friday (excluding bank holidays).

You may contact the NHS Digital Contact Centre to verify your identity and discuss your data sharing choices. We may be able to guide you through the online service or set a choice on your behalf.

Parents or legal guardians may also set and manage a choice on behalf of their child under the age of 13. You can set and manage a choice on behalf of another individual, who is unable to manage their choice independently, for example if you have power of attorney.

If you decide to opt out, this will be respected and applied by NHS Digital and Public Health England. These organisations collect, process and release health and adult social care data on a national basis. Your decision will also be respected and applied by all other organisations that are responsible for health and care information by March 2020. An opt-out will only apply to the health and care system in England and does not apply to your health data where you have accessed health or care services outside of England, such as in Scotland and Wales. If you choose to opt out, your data may still be used during some specific situations, for example, during an epidemic where there might be a risk to the health of other people.

For more information on where opt outs do not apply visit: <a href="https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/where-opt-outs-dont-apply/">https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/where-opt-outs-dont-apply/</a>



#### Sharing your data for your own individual care

Please complete the form below to detail your personal decisions regarding the aspects of NHS patient data sharing for health care purposes. It is very important you sign this form to say that you understand and accept the risks to your personal health care if you do decide to opt out of SCR or EDSM. Hand the completed form in to Reception, who will scan this form into your NHS GP Medical Records and enter the appropriate computer codes.

GP Practice:	Fremington Medical Centre							
Full Name:								
Date of Birth:								
SCR - NHS SUMMARY CAR	E RECORD							
Please tick only one box.								
Express consent for medical	ation, allergies and adverse reactions only	,						
Express consent for medical	ation, allergies, adverse reactions & additi	ional info (rec	ommended)					
Express dissent – Patient d with this decision	oes not want a summary care record and	fully understa	ands the risks involved					
EDSM - ENHANCED DATA S	SHARING MODEL "SystmOne"							
Please tick only one box for Sha	ring Out and one box for Sharing In.							
Sharing Out - Do you consent to may care for you?	the sharing of data recorded by your GP	practice with	other organisations that					
YES share data with other	organisations (recommended)							
NO do NOT share any data recorded by my GP Practice; I fully accept the risks associated with this decision								
<b>Sharing In -</b> Do you consent to your GP practice viewing data that is recorded with other organisations and care services that may care for you?								
Consent Given (recommended)								
Consent Refused; I fully accept the risks associated with this decision								
Signature:		Date:						

# Fremington Medical Centre Prescriptions

Full Name:			
Date of Birth:			
Please nominate one of the ph	rmacies below to receive your pr	escriptions electronically once signed:	
Boots Fremington			
Boots Roundswell			
<b>Boots High Street Barnstaple</b>			
Lloyds (Inside Sainsburys)			
Tesco Severn Brethren			
Other (Please specify):			
Please tick <b>YES</b> of	NO if you regularly receive medica	tion by repeat prescription:	
	☐ Yes ☐ No		
The practice will need to add any re- each time your medication is ordered		criptions list. This allows easy re-ordering	
listing your medication for the Ph	rmacy Team to review and add to	registering any repeat prescription slip your repeat medication list. It may be which case one of the Reception Tean	

# Fremington Medical Centre Registration Form

PART 1

PARTI												
Title:	□M	∕lr [	] Mrs		⁄liss	☐ Ms	0,	Surname:				
Date of Birth:							F	First Names:				
NHS Number:							F	Previous Surnam	e(s):			
Gender:			Male	□ Fe	emale	)	٦	Town & Country	of Birth	:		
Address: (Including Post Code)												
☐ Landline Number:							E	Email Address:				
☐ Mobile Number:								Please tick one	box to	indicate	e your p	referred contact number.
To be completed by nurs	sing / r	resid	ential	hon	nes o	nly: ls t	the	person being regi	stered h	ouseb	ound?	☐ Yes ☐ No
PART 2												
Please he	lp us t	trace	your	prev	vious	medic	al r	ecords by provid	ling the	follow	ing info	ormation:
Previous Address in UK (Including Post Code)												
Name of Previous Surger	y:							Name of Previ	ous GP	) <b>:</b>		
PART 3  Are you a previous UK resident returning from living abroad?  If yes, enter your previous address in PART 2  See No							u returned to the UK:					
Have you been in the armed forces?	D	)ate y	ou jo	ined	I the f	orces:		Date you left t	he forc	es:		Personnel number:
☐ Yes ☐ No												
Ploa	so tick	k if v		uld i	nrofo	r NOT t	0 r	eceive appointme	ont rom	indore	via tov	·4• □
PART 4	Se lich	VII Y	Ju wo	uiu	preie	INOIL	0 10	eceive appointme	ent rem	illuers	VIA LEX	
☐ Signature of patient:												
☐ Signature on behalf of p	oatient	t:								Date	:	
FOR PRACTICE USE ONLY									,			
				то і	BE C	OMPLE	TE	D BY THE DOCTO	OR			
Doc	tor's Na	ame								НА	Code	
☐ I have accepted this patient for general medical services ☐ For the provision of contraceptive services												
☐ I have accepted this patient for general medical services on behalf of the doctor named below who is a member of this practice												
I declare to the best of my belief this information is correct and I claim the appropriate payment as set out in the Statement of Fees and Allowances. An audit trail is available at the practice for inspection by the HA's authorised officers and auditors appointed by the Audit Commission.						actice Stamp:						
Authorised Signat	ure:						Dat	e:				
					_	/_		/				

#### Fremington Medical Centre Registration Form

#### PART 5

#### PATIENT DECLARATION for all patients who are not ordinarily resident in the UK

Anybody in England can register with a GP practice and receive free medical care from that practice.

However, if you are not 'ordinarily resident' in the UK you may have to pay for NHS treatment outside of the GP practice. Being ordinarily resident broadly means living lawfully in the UK on a properly settled basis for the time being. In most cases, nationals of countries outside the European Economic Area must also have the status of 'indefinite leave to remain' in the UK.

Some services, such as diagnostic tests of suspected infectious diseases and any treatment of those diseases are free of charge to all people, while some groups who are not ordinarily resident here are exempt from all treatment charges.

from your GP practice. You may be asked to provide proof for your treatment. Even if you have regardless of advance payment. The information you give on this fo	•	NHS treatment outside of the GP practice provided with any immediately necessyour chargeable status, and may be sh	ce, otherwise you may be charged sary or urgent treatment,					
a) I understand that I may need to pay for NHS treatment outside of the GP practice								
b) I understand I have a valid exemption from paying for NHS treatment outside of the GP practice. This includes for example, an EHIC, or payment of the Immigration Health Charge ("the Surcharge"), when accompanied by a valid visa. I can provide documents to support this when requested								
c) I do not know my chargeable status  I declare that the information I give on this form is correct and complete. I understand that if it is not correct, appropriate action may be taken against me.								
A parent/guardian should complete the form on behalf of a child under 16.								
Signed:		Date:						
Print Name:		Relationship to patient:						
On Behalf Of:		Relationship to patient.						
PART 6								
Complete this specific if you live in greather FFA country or how moved to the LIV to study or retire or if you live in the LIV hat work in greather FFA								

Complete this section if you live in another EEA country, or have moved to the UK to study or retire, or if you live in the UK but work in another EEA member state. Do not complete this section if you have an EHIC issued by the UK.

#### NON-UK EUROPEAN HEALTH INSURANCE CARD (EHIC), PROVISIONAL REPLACEMENT CERTIFICATE (PRC) DETAILS and S1 FORMS

Do you have a <u>non-UK</u> EHIC or PRC:		Yes	0	If yes, pleas	se enter detai :	ls from your	EHIC or				
	Country Code:										
	3: Name:										
If you are visiting from another EEA country and	4: Given Names:										
do not hold a current EHIC (or Provisional Replacement Certificate (PRC)/S1, you may be	5: Date of Birth:										
billed for the cost of any treatment received outside of the GP practice, including at a	6: Personal Identification Number:										
hospital.	7: Identification number of the institution:										
	8: Identification number of the card:										
	9: Expiry Date:										
PRC validity period (a) From:	DD	MM	YY	(b) To:	DD	MM	YY				

Please tick  $\square$  if you have an S1 (e.g. you are retiring to the UK or you have been posted here by your employer for work or you live in the UK but work in another EEA member state). Please give your S1 form to the practice staff.

How will your EHIC/PRC/S1 data be used? By using your EHIC or PRC for NHS treatment costs your EHIC or PRC data and GP appointment data will be shared with NHS secondary care (hospitals) and NHS Digital solely for the purposes of cost recovery. Your clinical data will not be shared in the cost recovery process.

Your EHIC, PRC or S1 information will be shared with The Department for Work and Pensions for the purpose of recovering your NHS cost from your home country.