

Brandon Medical Practice

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CHILDRENS NEW PATIENT QUESTIONNAIRE

Please complete as many questions as you can about your child. The information that you provide will help the Practice give better care for your family.

Contact Details			
Full Name:			
Date of Birth:			
Address:			
Home Phone Number:	Parents Mobile Number:	Childs Mobile No:	
Email:			
Next of Kin	Name:	Relationship:	Tel:
Who has Parental Responsibility?	Name:		
We would like to contact you SMS messaging or email for reminders and appointments & information. Please tick the box if you DO NOT want us to contact you this way <input type="checkbox"/>			
Ethnic Origin (please tick the relevant box)			
White		British	
		Irish	
		Any other white background	
Mixed		White & Black Caribbean	
		White & Black African	
		Any other mixed background	
Other		Chinese	
		Any other ethnic group	
		Black	
			Caribbean
			African
			Any Other Black background
		Asian	
			Indian
			Bangladesh
			Any other Asian background
		Not Stated	
			Not stated/unknown
1st Spoken Language:			
Is the child a carer?: If the child spends time looking after a relative; child; partner or friend who is frail, disabled or has a mental health difficulty, they are a carer.			
<input type="checkbox"/> Yes <input type="checkbox"/> No		Name of person being cared for:	
		Are they registered at this surgery? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Medical History Do they suffer from any of the following?

<input type="checkbox"/> Asthma	Please List any allergies or Sensitivities below:
<input type="checkbox"/> COPD	
<input type="checkbox"/> Diabetes	
<input type="checkbox"/> Epilepsy	
<input type="checkbox"/> Heart Disease	
<input type="checkbox"/> High Blood Pressure	
<input type="checkbox"/> Kidney Disease	
<input type="checkbox"/> Cancer (Type)	
<input type="checkbox"/> Mental Health	

Electronic Prescribing

We encourage prescriptions to be sent electronically to our local pharmacies, Please choose an option	<input type="checkbox"/> Boots High Street <input type="checkbox"/> Boots Market Square <input type="checkbox"/> Other Please specify
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Named Accountable GP

Every Patient is allocated a named accountable GP, You can find your named GP on your repeat prescription or you can contact our reception team who will be happy to help

Signatures: Please sign below on behalf of the child you are registering

Signature	I confirm that the information I have provided is true to the best of my knowledge _____
Name	
Date	

Who can see my health record?

To treat you safely and well, it is important that professionals you see can access your health record.

Only by letting your GP surgery know it is ok will your notes be available to be seen by other professionals such as hospital clinicians, paramedics or district nurses.

How do I make my record available to health professionals?

Simple. **Complete this form and hand it into your GP surgery.** There are two ways that this sharing can happen and it's important you understand what they are so you can make the right decision for you.

A. Summary Care Record with Additional Information
A Summary Care Record has basic information on that is useful for NHS clinicians. It shows if you have allergies and it lists your medications. 98% of people have this. By including "Additional Information", this will add your illnesses and any health problems, vaccinations, operations and information on how you would like to be treated.
B. Full Electronic Health Record
Your full electronic health record is held by your GP surgery. It can also be made available to health and social care staff, if they are involved in your direct care. Staff must still ask for your permission before they look at your record. This also allows your surgery to see what other staff are doing to support and treat you. If there are certain parts of your record that you wish to keep private, your surgery can do this.

Does this mean anyone can just look at my record?

No. Your record can only be seen by staff who are **currently involved in your direct care, have a need to see it, and have asked for your permission.** The only exception to this is in case of an emergency. For instance, if you were taken to hospital unconscious, a doctor could look at your record without your permission. If this happens, a permanent alert is created showing who looked at the record and why.



Are you going to sell the information in my record?

Never. If your record is shared, it's only ever available to staff for the purposes of your care, nothing else.

Can I change my mind?

Yes. Just tell your surgery and they can update your decision at any time.

Your decision to agree to either one, or both

A	Yes, I am happy for additional information to be added to my Summary Care Record, this means healthcare staff treating me can see a summary of my medical history in addition to my medication and allergies*.		Please Tick
B	Yes, I am happy for my full health record to be shared by my GP surgery. This will be available to health and social care professionals who are currently treating me, and have my permission to view it.		

**If you already have a basic summary care record and now wish to opt out of this completely, please ask your practice for an SCR consent form.*

Name: _____

Date of Birth: ____ / ____ / ____

Signature: _____

If you are filling in this form on behalf of another person, please ensure that you fill in their details above; you sign the form above and provide your details below:

Name: _____ Parent Legal Guardian Lasting power of attorney

For more information about the Summary Care Record and health record sharing, please refer to www.bit.ly/whocanseemyrecord or call PALS on 0800 389 6819.



Application for online access for under 11s

PATIENT USE ONLY

Surname:	Forename:	
Date of Birth:	Email:	
Address:		
Telephone No:	Mobile No:	

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

1. Booking and cancelling appointments	<input type="checkbox"/>
2. Requesting repeat prescriptions	<input type="checkbox"/>
3. Accessing my child's medical record, medications, allergies and immunisations	<input type="checkbox"/>
4. Accessing my child's detailed coded data	<input type="checkbox"/>
5. Full access to medical records	<input type="checkbox"/>

I wish to access my child's medical record online and understand and agree with each statement (tick):

1. I have read and understood the information leaflet provided by the practice	<input type="checkbox"/>
2. I will be responsible for the security of the information that I see or download	<input type="checkbox"/>
3. If I choose to share their information with anyone else, this is at my own risk	<input type="checkbox"/>
4. If I suspect that their account has been accessed by someone without my agreement, I will contact the practice as soon as possible	<input type="checkbox"/>
5. If I see information in their record that is not about them or is inaccurate, I will contact the practice	<input type="checkbox"/>
6. If I think that I may come under pressure to give access to someone else unwillingly, I will contact the practice as soon as possible	<input type="checkbox"/>

Terms and Conditions

<ul style="list-style-type: none">I have parental responsibility of this childI have read and understand that on the child's 11th birthday, SystmOnline access will be stopped and if necessary, I will need to re-apply.	<input type="checkbox"/> <input type="checkbox"/>
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Signature:	Date:
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RECEPTION USE ONLY

NHS No:	Date verified:
ID verified by (print name):	
Method: Vouching <input type="checkbox"/> Photo ID <input type="checkbox"/>	

Accessing GP Records Online for Under 11's – Patient Information Leaflet

Practices have enabled patients to be able to request repeat prescriptions and book appointments online.

When requesting online access to a child's record, we must ensure that you have parental responsibility and right of access to the child's records.

On the child's 11th birthday, SystmOnline will automatically end proxy access. Parental proxy access may be reinstated if after discussion with the parent, the child's GP believes it is in the child's best interest.

PLEASE NOTE:

It will be your responsibility to keep your login details and password safe and secure. If you know or suspect that your child's record has been accessed by somebody 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 child's 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 practice may not be able to offer online access due to a number of reasons such as concerns that it could cause harm to physical or mental health or where this is reference to third parties. The practice has the right to remove online access to services for anyone that doesn't use them responsibly.

Key considerations

Forgotten history

There may be something that you have forgotten about in your child's record that you might find upsetting. If you are unsure about a term or condition on the medical record, click on the information symbol adjacent to the entry and information will be displayed about the condition or procedure.

Abnormal results or bad news

If your GP has given you access to test results, you may see something that you find upsetting to you. It is important to remember that out of range results do not always mean something is wrong – they could be normal for you.

Choosing to share your information with someone

It's up to you whether or not you share your child's information with others – perhaps family members or carers. It's your choice, but also your responsibility to keep the information safe and secure.

Coercion

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

Misunderstood information

A medical record is designed to be used by clinical professionals to ensure you receive the best possible care. Some of the information within your child's medical record may be highly technical, written by specialists and not easily understood. If you require further clarification, please email the practice

Surgery to insert

Information about someone else

If you spot something in the record that is not about your child or notice any other errors, please log out of the system immediately and email the practice at

Surgery to insert

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