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**New Patient Registration and Health Check Policy**

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| **Policy** | **New Patient Registration and Health Check Policy** |
| **Version** | **V1.0** |
| **Author** | **Sophie Ladds** |
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**Introduction**

## Policy statement

Maple Surgery has equitable access for all patients who wish to register themselves as a patient with the organisation. In conjunction with this, new registrants will be invited to attend a new patient health check appointment within one month of joining the organisation.

The full regulations that this guidance is based on can be found at both:

* Part 13 of the NHS England [general medical services contract](https://www.england.nhs.uk/wp-content/uploads/2020/12/20-21-GMS-Contract-October-2020.pdf)
* Schedule 3, part 2 of the NHS [general medical services contract regulations 2015](https://www.legislation.gov.uk/uksi/2015/1862/contents/made)

For existing patients, the organisation will offer an NHS Health Check which is a prevention programme aimed at reducing the chance of a heart attack, stroke or of developing some form of dementia in the patient age group 40-74.

This is achieved by assessing the seven most relevant risk factors which result in increases in the prevalence of non-communicable disease in England by providing patients with behavioural support and, if required, pharmacological treatment.

This policy will outline the requirements and process for registration and at Maple Surgery.

## Principles

The registration process must be diligently followed, especially as this is one that is often misinterpreted. Whilst the BMA advises that the main principle is that anyone, regardless of nationality and residential status, may register and consult with a GP without charge[[1]](#footnote-2), there is also a requirement that patients may register without having any form of identity.

## Status

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/section/6). Consideration has been given to the impact this policy might have regarding the individual protected characteristics of those to whom it applies.

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

## Training and support

The organisation will provide guidance and support to help those to whom it applies to understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

# Scope

## Who it applies to

This document applies to all employees of the organisation and other individuals performing functions in relation to the organisation such as agency workers, locums and contractors.

Furthermore, it applies to clinicians who may or may not be employed by the organisation but who are working under the Additional Roles Reimbursement Scheme (ARRS).[[2]](#footnote-3) For the purpose of this document, ARRS employees are considered to be employees of Maple Surgery

## Why and how it applies to them

All staff involved in the registration process at this organisation are to be familiar with the requirements contained in this policy and in particular the rights of those patients who may not have any available form of identity.

# Patient registration

## Legislative compliance

Maple Surgery will adhere to the terms of its contract and not refuse patients’ applications to join the organisation on the following grounds:

* Race
* Gender
* Social class
* Age
* Religion
* Sexual orientation
* Appearance
* Disability
* Medical conditions

## Declining applications

The organisation is, however, permitted to decline a patient’s application to join the practice if:

* The commissioner is in agreement that the organisation list may be closed to new patients
* There are reasonable grounds to do so, e.g., the patient has previously been removed from the organisation list

Any refusals will be confirmed in writing to the patient, with the reasons fully stated, within 14 days of the refusal. The date and reason for refusal will be recorded along with the name of the patient and this information will be made available to commissioners if requested.

Patients will not be refused if they are registered with another local organisation, nor will they be refused if they do not have appropriate identification (see [Section 3.12](#_Assessing_patient_ID_1))

## Out of practice area registrations

The practice area is defined by Cambridgeshire and Peterborough ICS and essentially includes the villages of:

|  |
| --- |
| Bar Hill  Longstanton  Northstowe  Lolworth  Dry Drayton  Willingham  Over  Swavesey  Girton |

**We will only be accepting full registrations from within the practice area.** **We strongly recommend that any patients from outside of our practice area register with a local practice.**

**Patients registering with Maple Surgery as an Out of Area Patient, without Home Visits**

If any patients are accepted who live outside of the practice catchment area they will be issued with a patient letter (Appendix A) and a patient contract (Appendix B). The patient letter gives the patient a clear explanation of the out of area registration, the patient contract requires a signature from the patient to demonstrate their understanding of the surgery policy regarding home visits for out of area patients.

The surgery must code the patient with an out of area read code to their medical record:

*Snomed Code****: Registered Patient lives outside practice area 824381000000105***

Patients moving address outside the practice area:

Once we have been informed of a change of address, patients will be informed that they have 30 days to register with a new practice, after which they will be automatically deregistered from Maple Surgery.

Registered patients living out of the practice area prior to 1st July 2023 will not be deregistered. However, if they change address to another out of area address (even if the new address is closer to the surgery), they will be subject to the same process as any patient moving out of area and will be deregistered 30 days after informing Maple Surgery of their new address.

## Registering the patient

All new patients will be required to complete a new patient registration form which includes a new patient health questionnaire at [Annex A](#_Annex_A_–), NHS [GMS1 Form](https://www.gov.uk/government/publications/gms1) which can be found on the practice website or obtained from practice.

Completed forms are to be passed to Maple Surgery who will carry out the necessary administrative action and facilitate the transfer of the patient’s records using GP2GP.

## Assessing patient ID at registration[[3]](#footnote-4)

**IMPORTANT NOTE**

While seeing some form of ID will help to confirm the correct identification of a patient, there is no contractual duty to seek evidence of identity, immigration status or proof of address.

Organisations should not refuse registration on the grounds that a patient is unable to produce such evidence and staff are reminded that they do not have to make any assessment of immigration status or eligibility for NHS care.

The BMA advises that *“practice staff should not be expected to act as immigration officials*”[[4]](#footnote-5).

Therefore, should any patient not possess any form of identity, at Maple Surgery we must be equally non-discriminatory in our approach to any prospective patients as this may affect the registration of certain groups within the community.

While the majority of patients will not find it difficult to produce ID/residence documentation, there may be some patients who do live in our area but who are legitimately unable to produce any of the listed documentation.

Examples of this may be people:

* Fleeing domestic violence who are staying with friends or family
* Living on a boat, in unstable accommodation or they are street homeless
* Staying long-term with friends or family but they are not receiving bills
* Working in exploitative situations and their documents have been taken by their employer
* Who have submitted their documents to the Home Office as part of an application process
* Who were trafficked into the country whose documents were taken on arrival, or
* Children born in the UK to parents without documentation

Reasonable exceptions therefore need to be considered and the individual registered with sensitivity to their situation. If a patient cannot produce any supportive documentation but states that they reside within the organisation’s boundary then the organisation is to accept the registration.

Where necessary, e.g., for homeless patients, the organisation can use the organisation’s address to register them if they wish. Additionally, for patient safety reasons, where possible, at registration we will ensure that we have a way of contacting the patient should the need arise.

## Registering for online services

It should be noted that whilst there is no requirement for ID when initially registering at this organisation, this should not be confused with those patients that wish to have access to online services.

Should any patients request online access, then full identification is required and the process should be followed as detailed within the [Access to online services policy](https://practiceindex.co.uk/gp/forum/resources/access-to-online-services.1077/).

## Registering children

If a child under the age of 16 attempts to register alone, or with an adult who does not have parental responsibility for the child, the safeguarding lead Dr Lisa Lim is to be informed.

It is recommended that the organisation gains assurance by:

* Obtaining proof of identify for each child (i.e., birth certificate) \*
* Ensuring that an adult with parental responsibility is present at registration (and that the adult can prove they have parental responsibility)
* Offering the child a new patient health check
* Obtaining supporting documentation from official sources, e.g., previous GP, social workers, etc.

Where doubt exists, the organisation’s safeguarding lead is to be informed and appropriate actions taken.

The template at [Annex B](#_Annex_B_–) should be used when registering children.

\* Note, should a child not have any form of ID, they may still be registered as detailed within [Section 3.5](#_Assessing_patient_ID_2). Whilst this must not be a disbar to registering, the safeguarding lead is to be made aware of the registration.

## Registering veterans

A veteran is an ex-service person or reservist who has served in the Armed Forces for at least one day.

The responsibility for the provision of healthcare to Armed Forces personnel rests with Defence Primary Health Care (DPHC). When service personnel leave and become Armed Forces veterans, their primary healthcare becomes an NHS responsibility. Veterans will be provided with copies of their medical records which they will give to their new practice during registration.

Armed Forces veterans are entitled to priority treatment if their injury or condition came about because of their service (subject to clinical need). This is regardless of whether they receive a war pension. Further guidance can be found [here](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/49469/the_armed_forces_covenant.pdf) and within the [Priority treatment for veterans](https://practiceindex.co.uk/gp/forum/resources/priority-treatment-for-veterans.1015/) document.

Prior service should be recorded on registration and allocated the correct SNOMED code[[5]](#footnote-6):

Military veteran SCTID: 753651000000107. Having this code will enable access to specialist care or charity support as necessary for the patient.

## Registering Commonwealth, Gurkha or Nepali veterans

The following veterans are not entitled to receive free healthcare from the NHS after their discharge date from the UK Armed Forces:

* A citizen of a member of the Commonwealth
* A Gurkha citizen
* A Nepali citizen

In order to receive free healthcare through the NHS after this date, these groups must gain indefinite leave by using the [immigration rules and process](https://www.gov.uk/guidance/immigration-rules/immigration-rules-appendix-armed-forces).

## Registering asylum seekers, refugees and other migrants

At Maple Surgery we have a contractual duty to provide emergency and immediately necessary treatment free of charge for everyone and this is detailed in our NHS contract and alluded to in [GP Mythbuster No 36: Registration and treatment of asylum seekers, refugees and other migrants](https://www.cqc.org.uk/guidance-providers/gps/gp-mythbuster-36-registration-treatment-asylum-seekers-refugees-other).

This includes groups of patients whose circumstances may make them vulnerable, such as asylum seekers, refugees and other vulnerable migrants. It should be noted that the CQC will inspect the organisation to ensure that the fundamental standards relating to patient equality are being upheld within both:

* [Regulation 10](https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-10-dignity-respect) – treating people with dignity and respect
* [Regulation 13](https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-13-safeguarding-service-users-abuse-improper) – protecting people from abuse and improper treatment

The Refugee Council has produced an [explanation of refugee terminology](https://www.refugeecouncil.org.uk/information/refugee-asylum-facts/the-truth-about-asylum/).

In addition to the services mentioned above, some overseas visitors are also exempt from the charges that would otherwise apply to overseas visitors:

* Refugees and their dependents
* Asylum seekers and their dependents
* Individuals receiving support from the Home Office. This is under section 95 of the [Immigration and Asylum Act 1999](https://www.legislation.gov.uk/ukpga/1999/33/contents)
* Those whose application for asylum was rejected, but they are supported:
* By the Home Office under section 4(2) of the Immigration and Asylum Act 1999
  + Under Part 1 (Care and Support) of the [Care Act 2014](https://www.legislation.gov.uk/ukpga/2014/23/contents/enacted)
* Children looked after by a local authority
* Victims, and suspected victims, of modern slavery or human trafficking (determined by the UK Human Trafficking Centre or the Home Office) and their dependents provided they are lawfully present in the UK
* Those receiving compulsory treatment under a court order or who are liable to be detained in an NHS hospital or deprived of their liberty
* Prisoners and immigration detainees

GP Mythbuster No 36 further states that organisations:

* Cannot refuse to register someone because of any *protected characteristic* under the [Equality Act 2010](https://www.gov.uk/guidance/equality-act-2010-guidance) or other grounds such as social class, appearance or medical condition as per the [NHS Constitution for England](https://www.gov.uk/government/publications/supplements-to-the-nhs-constitution-for-england)
* Will not require overseas visitors to provide proof of identity or immigration status. Asylum seekers may have an [application registration card (ARC)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/699750/application-registration-card-v4.0ext.pdf) from the Immigration Services.

Further information on the ARC process and what the card looks like can be found at: [www.cambridgeshireandpeterboroughccg.nhs.uk](https://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=12&cad=rja&uact=8&ved=2ahUKEwiBjbWv167hAhWhsXEKHexjDg0QFjALegQIARAC&url=https%3A%2F%2Fwww.cambridgeshireandpeterboroughccg.nhs.uk%2Feasysiteweb%2Fgetresource.axd%3Fassetid%3D7761%26type%3D0%26servicetype%3D1&usg=AOvVaw1x5oUR7wt2gnD3oT9Lj2R5)

* Can register asylum seekers and refugees who are not in permanent housing as a [temporary resident](https://www.nhs.uk/common-health-questions/nhs-services-and-treatments/how-do-i-register-as-a-temporary-resident-with-a-gp/) for up to three months

Registration requirements are discussed in greater detail at [Section 3.5](#_Assessing_patient_ID_2).

The following further reading supports this section:

NHS England

Advice is provided on how to [improve access](https://www.england.nhs.uk/gp/gpfv/redesign/improving-access/) for specific groups and [how to register with a GP surgery](https://www.nhs.uk/nhs-services/gps/how-to-register-with-a-gp-surgery/).

PCSE

This [webpage](https://pcse.england.nhs.uk/services/patient-registrations/), including FAQs, provides guidance on PCSE processes for new patient registrations and de-registrations at GP practices.

Furthermore, it provides advice on how to register a refugee from Afghanistan.

Public Health England

Gives advice in the [online migrant health guide](https://www.gov.uk/government/collections/migrant-health-guide) and covers entitlement plus other health issues.

## Registering a homeless patient

In accordance with [GP Mythbuster 29: Looking after homeless patients in General Practice,](https://www.cqc.org.uk/guidance-providers/gps/gp-mythbuster-29-looking-after-homeless-patients-general-practice) homeless patients have several health inequalities including:

* Significantly reduced life expectancy
* Greater incidence of long-term physical health conditions
* High prevalence of mental health problems

Therefore, practices have a responsibility to register people who are homeless, have no fixed abode or who are legitimately unable to provide evidence of living within the organisation’s catchment area.

At Maple Surgery we will allow any homeless patient to register by using either a temporary address, such as a friend's address or a day centre. Furthermore, this vulnerable group can also use the practice address to register as we require a method of contact say, for example, should they need to be advised of a secondary care appointment or test results.

This organisation will consider our homeless community and has established the following:

* Provision of double appointments
* Reducing prescriptions to as short a duration as possible
* Promoting clear boundaries for consultations
* Providing fast access to a named GP
* Waiving normal charges for housing letters or medical reports

NICE are conducting a consultation into [integrated health and social care for people experiencing homelessness](https://www.nice.org.uk/guidance/indevelopment/gid-ng10170/documents) and this is expected to be completed and published in March 2022.

Pathway, a charity working in conjunction with the wider NHS, offers a training package for GP receptionists[[6]](#footnote-7) on how to best manage the registration of homeless patients.

Following a recent NHS England study, a vast proportion of homeless patients were found to have been refused access to registration due to not having any identity when they attempted to register at practices. Therefore, a campaign to raise awareness for both patient and practice has been undertaken that includes this leaflet titled [How to register with a doctor (GP)](https://assets.nhs.uk/prod/documents/how-to-register-with-a-gp-homeless.pdf) that can assist with the registration process.

It should be noted that should any homeless person be refused registration, there is a section in this leaflet that advises the recipient who they should contact at NHS England, Citizen Advice Bureau or Healthwatch.

Registration requirements are discussed in greater detail at [Section 3.5](#_Assessing_patient_ID_2).

## Registering under the Mental Capacity Act

The [Mental Capacity Act 2005](https://www.legislation.gov.uk/ukpga/2005/9/contents) is designed to protect and empower people aged over 16 who are unable to make decisions about their care and treatment.

If a person is unable to register with a GP because they cannot make decisions about their care, registration can be done by:

* A relative
* The main carer
* A lasting power of attorney
* A person appointed by a court under the Mental Capacity Act

Further reading can be sought from the NHS document titled [Mental Capacity Act](https://www.nhs.uk/conditions/social-care-and-support-guide/making-decisions-for-someone-else/mental-capacity-act/) and the [Mental Capacity Act Policy](https://practiceindex.co.uk/gp/forum/resources/mental-capacity-act-policy.1105/).

## Rights to treatment and services

People who are not ‘ordinarily resident’ may be charged for some NHS services and the [NHS (Charges to Overseas Visitors) Regulations 2015](http://www.legislation.gov.uk/uksi/2015/238/contents/made) apply to all courses of treatment commenced on or after 6 April 2015. Amendments to these regulations were published in [2017](http://www.legislation.gov.uk/uksi/2017/756/contents/made).

People covered by reciprocal healthcare agreements, such as the European Health Insurance Card (EHIC), or who have paid the immigration health surcharge may also be exempt from payment.

Further information can be sought from the following Gov.uk documents:

* [Healthcare for visitors to the UK from the EU](https://www.gov.uk/guidance/healthcare-for-eu-and-efta-citizens-visiting-the-uk)
* [Pay for UK healthcare as part of your immigration application](https://www.gov.uk/healthcare-immigration-application)
* [How to access NHS services in England if you are visiting from abroad](https://www.nhs.uk/nhs-services/visiting-or-moving-to-england/how-to-access-nhs-services-in-england-if-you-are-visiting-from-abroad/)

Maple Surgery will refer overseas visitors where a referral is clinically appropriate.

If it is considered that a charge will apply for treatment following a referral, the referral should still be made to enable the secondary care clinical teams to decide if treatment is urgent and therefore should be provided in advance of payment.

This organisation will ensure that patients are made aware that they may be charged for treatment for which they are to be referred by using the following guidance:

[Overseas NHS visitors: implementing the charging regulations](https://www.gov.uk/government/publications/overseas-nhs-visitors-implementing-the-charging-regulations)

## Temporary residents

Temporary residents (TR) are entitled to the full range of services provided by this organisation and are classified as patients who are in the local area for a period of more than 24 hours but no longer than three months. As these patients cannot access their own GP practice, there is a need for them to register with a practice, albeit on a temporary basis.

When a patient registers as a temporary resident, the registration period will last for 14 days.[[7]](#footnote-8)

There is a general rule and that is, should the patient who is requesting treatment be within a 25-mile radius of their own practice, unless in an emergency, we would expect them to be seen at their own practice.

The following are examples why a patient local to the area may need to temporarily register at Maple Surgery

* If there is an acute need such as chest infection
* If the patient has sustained a minor injury and needs assistance
* If the patient is a student home from university
* If the patient is a service person on leave[[8]](#footnote-9)

Where a temporary registration is not suitable for continuity of care purposes:

* Repeat medication as patients can ask the regular GP practice to send a repeat prescription electronically to a local pharmacy via EPS
* Ongoing or chronic conditions such as diabetes management, mental health issues or a health check

Further information regarding temporary residents can be found in the useful NHS patient document titled [How do I register as a temporary resident with a GP?](https://www.nhs.uk/common-health-questions/nhs-services-and-treatments/how-do-i-register-as-a-temporary-resident-with-a-gp/)

## Emergency treatment

The BMA advises the following in their [Patient Registration](https://www.bma.org.uk/advice-and-support/gp-practices/managing-your-practice-list/patient-registration) document:

All GP practices have a contractual duty to provide emergency treatment and immediately necessary treatment free of charge for up to 14 days.

This applies to any person within their practice area who:

* Has been refused application for inclusion in the practice’s list of patients
* Is not registered with another provider of essential services
* Has had their application for acceptance as a temporary resident rejected

Immediately necessary treatment in relation to people who are visiting England should be viewed as treatment of new and pre-existing conditions that have become worse during their stay.

This is subject to the GP’s clinical judgement.

## Registering patients prior to release from prison etc.

The process for registering patients prior to their release from the “secure residential estate” which includes prison, immigration removal centres, young offender institutions or secure training centres, is outlined in this flow diagram.[[9]](#footnote-10)

All staff are to ensure that they accurately record invitations and use the appropriate SNOMED / read code for a new patient health check in each patient’s healthcare record.

# Summary

It is the responsibility of all staff at Maple Surgery to ensure that patients are registered appropriately and that staff specifically understand the requirements, as detailed within this policy, surrounding inclusivity in relation to those patients who may not have access to any identification. Staff should also understand the difference between ID requirements between a patient who wishes to register and those that wish to access to online services.

Appendix A

**MAPLE SURGERY**

Hanover Close

Bar Hill

Cambridge

CB23 8EH

Tel : 01954 780442

Ref: **Out-of-Area Patient**

To XXXXXXX

Dear XXXXXXXX

**Patients registering with Maple Surgery as an Out-of-Area Patient, without Home Visits:**

Registering youas an out-of-area patient means that **Maple Surgery** would have no contractual obligation to provide home visits or urgent treatment.

With this type of registration, you would remain registered with the practice, and we would continue to fulfil the range of services currently provided within the practice setting, the only **exception would be that we would not provide home visits.**

Should patients on occasion develop an urgent illness or injury at home that means attending the Practice as normal would not be possible, patients would be requested to call NHS 111.

NHS 111 would put patients in touch with a local service (this may be a face-to-face appointment with a local healthcare professional or a home visit where necessary). This local service could be a GP practice near to where the patient lives, the local walk-in or urgent care centre, A&E or minor injuries unit.

If this is in the out-of-hours period when GP surgeries are normally closed – between 6:30pm and 8:00am weekdays, bank holidays or weekends – NHS 111 will direct patients to the local out-of-hours provider.

Yours sincerely

**Administration Team**

**Maple Surgery**

Appendix B – Patient Signatory for OOA

I (Insert Name) am now residing outside of Maple Surgery’s catchment area; this will mean that the surgery will continue to fulfil the range of services currently provided within the practice setting **with the exception of home visits.**

**Should I develop an urgent illness nor injury at home that means attending the Practice as normal would not be possible I will need to call NHS 111.**

*Signed*

*Date*

1. [www.bma.org.uk](https://www.bma.org.uk/advice-and-support/gp-practices/managing-your-practice-list/patient-registration) [↑](#footnote-ref-2)
2. [Network DES Contract specification 2021/22](https://www.england.nhs.uk/publication/network-contract-des-specification-2021-22) [↑](#footnote-ref-3)
3. [Patient Registration SOPs for Primary Medical Care (General Practice)](https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2018/08/guidance-on-registering-with-a-gp-practice.pdf) [↑](#footnote-ref-4)
4. [www.bma.org.uk](https://www.bma.org.uk/advice-and-support/gp-practices/managing-your-practice-list/patient-registration) [↑](#footnote-ref-5)
5. [SNOMED CT Browser](https://termbrowser.nhs.uk/?perspective=full&conceptId1=404684003&edition=uk-edition&release=v20210901&server=https://termbrowser.nhs.uk/sct-browser-api/snomed&langRefset=999001261000000100,999000691000001104) [↑](#footnote-ref-6)
6. [GP Receptionist homelessness training](https://www.pathway.org.uk/4403-2/) [↑](#footnote-ref-7)
7. [NHS E - How can I see a GP when away from home?](https://www.nhs.uk/common-health-questions/nhs-services-and-treatments/how-can-i-see-a-gp-if-i-am-away-from-home/) [↑](#footnote-ref-8)
8. [NHS advice for serving members of the UK armed forces](https://www.nhs.uk/nhs-services/armed-forces-community/access-healthcare-in-active-service/) [↑](#footnote-ref-9)
9. [Process for registering patients prior to their release from the secure residential estate](https://www.england.nhs.uk/wp-content/uploads/2019/06/Process-for-registering-patients-prior-to-their-release-from-prison-October-2019.pdf) [↑](#footnote-ref-10)