

#### Your child's appointment details:

Name:	
Registration Date:	
Registration Time:	
With:	

It is very important that you arrive on time for your child's registration. We will not be able to register your child if you are late.

What you need to bring to your child's appointment:

- 1. Completed purple 'GMS1' form
- 2. Completed new patient questionnaire
- 3. Any medication your child is taking
- 4. Official photographic ID for both yourself and your child
- 5. An original copy of a utility bill dated within the last 3 month
- 6. Immunisation records for your child
- 7. Urine sample

If you are unable to attend this new appointment please cancel it in advance. Patients who do not attend will not be offered another appointment.

#### If you are phoning on a Saturday please call 07532 035077

### If you need this form in large print, different format, easy read or via email please let us know at reception and we can sort this out for you.





Dear Patient,

Welcome to the West Road Medical Centre. We would like to provide you with a high standard of care whilst you are registered with us.

- Attached you will find a practice booklet, a young person's booklet and a health status questionnaire. The practice booklet provides you with all the information you need to know about the practice and the services we offer including opening times and the procedure for ordering repeat prescriptions.
- You <u>MUST</u> complete the attached health questionnaire and bring it to your appointment. This information is vital and will provide us with the necessary knowledge to plan your health care appropriately prior to receiving your patient records from your previous practice (if this applies).
- In this pack is a urine sample bottle. Please bring this to your appointment.
- If you are currently taking any medication, please bring them with you to your appointment.
- Please inform us if you are living with or moving to an address with someone who is already registered with us.
- Please tell us if you are a carer for somebody or if somebody cares for you.
- You must provide proof of identity such as a passport, driving licence, previous medical card etc. We will be unable to process your registration further until these are provided.
- If you need an **interpreter/translator** please let us know as quickly as possible and we can book this in.
- Please remember this appointment is for your child only. If you also wish another member of your family to be registered please contact our Reception Staff.
- The practice is participating in Summary Care Record. If you choose to have a summary care record you do not need to do anything, this will happen automatically. If you choose not to have a summary care record then you need to let us know by filling in an opt-out form which you can collect from reception.
- The practice is compliant with National Data Opt-Out. You do not need to do anything if you are happy about how your confidential patient information is used. If you do not want your confidential patient information to be used for research and planning, you can choose to opt out securely online by visiting nhs.uk/your-nhs-data-matters or by calling 0300 303 5678.

The reception team are there to help you if you wish to clarify anything about the service we offer, please ask.

Yours sincerely,

Blutone

<u>Dr Palmer</u> Senior Partner



#### CHILD NEW PATIENT QUESTIONNAIRE

Welcome to West Road Medical Centre. We would be grateful if you could spend a few minutes answering the following questions. It will give the doctors and nurses important information about your child's medical history and will help us to provide a better service.

You must complete this form and bring it to your child's new patient appointment along with the purple GMS1 form or medical card. You will not be registered without this form.

Today's date:	Date of Birth:		Gender e.g boy or girl	
Surname:		First Name:		
Address: Home Telephone Number: Mobile Number ( we will use this number to send text reminders):				
Name of Parent(s) or guardian: Relationship to child: Is your child a carer for anybod				
Next of kin Name: Address: Telephone number:				
Is your child at school? Yes / N number	No If Yes – plea	se provide name	e of school and telephone	
Does your child need any help braille etc	with communica	tion? Eg large p	print, easy read, sign language,	
Has your child had any serious Please detail:	Has your child had any serious illness, accidents or operations? Yes / No Please detail:			
Please detail any <b>regular</b> medications your child is taking (either on prescription or bought over the counter) Please bring all boxes/bottles/packets of your child's medication to their appointment				
Name of medicine	Dose / Strengt	h	How many times a day	
Please detail any allergies that your child suffers from:				
Is there any serious illness in the family? Yes / No Please detail:				
Has your child had a hearing test (aged about 7-9 months)? Yes / No				
Has your child had an eye test (aged about 3 years)? Yes / No				
Do you think you child has had all his/her immunisations? Yes / No				
Do you have any worries about your child's health? Yes / No Please detail:				



STANDARD BRITISH IMMUNISATIONS: Please record in the table below which immunisations your child has had and the date they were given.

Please bring your child's immunisation record card with you when you return this questionnaire or when you bring your child for his/her new patient appointment.

When to immunise	What vaccine is given	Date given
2 months old	Diphtheria, Tetanus, Pertussis (whooping cough), Polio, Hib and Hepatitis B (DtaP/IPV/Hib/Hep B) – one injection	
	Meningococcal B – one injection	
	Rotavirus - oral	
3 months old	Diphtheria, Tetanus, Pertussis (whooping cough), Polio, Hib and Hepatitis B (DtaP/IPV/Hib/Hep B) – one injection	
	Pneumococcal (PCV) – one injection	
	Rotavirus - oral	
4 months old	Diphtheria, Tetanus, Pertussis (whooping cough), Polio, Hib and Hepatitis B (DtaP/IPV/Hib/Hep B) – one injection	
	Meningococcal B – one injection	
12 months old	Measles, Mumps and Rubella (MMR) – one injection	
	Pneumococcal (PCV) – one injection	
	Hib/MenC – one injection	
	Meningococcal B – one injection	
3 years 4 months to 5 years old	Diphtheria, Tetanus, Pertussis and Polio – one injection	
(Pre-School Booster)	Measles, Mumps and Rubella (MMR) – one injection	

Please list an additional vaccinations your child has had:

Do you need an interpreter? Yes / No Which ethnic group does your child belong to? Which language does/will your child speak? What is your child's religion?

Thank you for taking the time to complete this questionnaire.

If you are unable to attend your new patient appointment please let us know as soon as possible.



#### When returning this form both the Patient and Parent Applicant MUST bring photographic ID. If English is not your spoken language it may be necessary for us to arrange to have an interpreter present when you return this form for understanding.

Practice policy states that West Road Medical Centre has 21 calendar days to deal with any requests for online access to medical records. You will be notified via your preferred method of contact when access has been granted / denied.

# Application for online parent access to my medical record

Patient Details	
Surname	Date of birth
First name	
Address	
Telephone number	
	Preferred method of contact
Mobile number	
Email address	

Parent Applicant Details	
Surname	Date of birth
First name	
Address	
Telephone number	
	Preferred method of contact
Mobile number	
Email address	

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

1.	Booking appointments	
2.	Requesting repeat prescriptions	
3.	Accessing my medical record	

I wish to grant parent access my medical record online and understand and agree with each statement (tick)

1. I have read and understood the information leaflet provided by the practice	
2. I understand that by viewing my record online I might see something that may	
be bad news, that I find upsetting or that I may misunderstand before the doctor	
has been able to contact me	
3. I will be responsible for the security of the information that I see or download	
4. If I choose to share my information with anyone else, this is at my own risk	
5. If I suspect that my account has been accessed by someone without my	
agreement, I will contact the practice as soon as possible	



6. If I see information in my record that is not about me or is inac	curate, I will	
contact the practice as soon as possible	-	
7. 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.		
Signature of Patient	Date	
Signature of Parent Applicant		

### For practice use only

Patient NHS number	Date
Identity verified by (Staff Member)	Method Photo ID □ Verified with Interpreter present □
Notes / explanation	



#### Online Services Records Access Patient information leaflet 'It's your choice'

If you wish to, you can now use the internet to book appointments with a GP, request repeat prescriptions for any medications you take regularly and look at your medical record online. You can also still use the telephone or call in to the surgery for any of these services as well. It's your choice.

Being able to see your record online might help you to manage your medical conditions. It also means that you can even access it from anywhere in the world should you require medical treatment on holiday. If you decide not to join or wish to withdraw, this is your choice and practice staff will continue to treat you in the same way as before. This decision will not affect the quality of your care.

When requesting records you will see all coded entries backdated in your notes and codes and notes going forwards from the date access is grated.

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.

Before you apply for online access to your record, there are some other things to consider.

Although the chances of any of these things happening are very small, you will be asked that you have read and understood the following before you are given login details.

#### 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.

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.

#### 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.

#### Identification

In order to request access to online services you will need to provide photographic evidence of identification (ID) in the form of:

Passport

• Driving licence

If you cannot provide either of the above then a combination of two of the following will be considered as suitable forms of identification:

- Paid utility bills
- Local authority rent card
- Marriage certificate
- Full Birth certificate
- Papers from the Home Office or UK Borders Agency
- Bank/building society cards/statements
- Payslip / P45 / National Insurance number card
- Letter from Benefits Agency/benefit book/signing on card
- Photographic student card

We will not accept the following documents as proof of identification:

- Library card
- Video/DVD rental card
- Health club card



## Online services: Parent or Guardian information

AGE	DEFAULT STATUS OF ONLINE ACCESS	IMPLICATIONS and EXCEPTIONS
< 11	Adult with parental responsibility (see table below) controls full access to the child's record. Parents to be advised that access to their child's record will be automatically switched off at 11 without warning	The child has no control of access over their medical record.
11 - 13	Full access is automatically switched off on the child's 11 <sup>th</sup> birthday – the parent no longer have access to their child's record	<ul> <li>Parents may view the child's record if:</li> <li>a competent young person* has granted them access, or</li> <li>the practice has granted the parents proxy access having assessed the young person as not being competent to do so</li> <li>*a (Gillick) competent young person is one who understands the implications and responsibilities of having access to their medical record</li> </ul>
> 13	All remaining proxy access is automatically switched off and only the young person can access their online record	It is assumed that a 13 year old is competent to access their own medical record (or appoint a proxy such as their parent to do so), although this may not be the case for those with learning disabilities. It may also not be safe to offer online access in families where coercion is a concern. Pre-existing proxy will remain in place and will not need to be 're-granted'.

Parental responsibility		
The child's mother	automatically has parental responsibility unless removed by a Court	
The child's father	has parental responsibility if any of the following are true	
	• he is married to the mother at the time of the child's birth; or	
	• he is listed as the father on the birth certificate; <i>or</i>	
	both the father and mother complete an appropriate form	
	witnessed by a court officer	
Social services	has parental responsibility for a child in a care home or in foster care	
Adoptive parents	have parental responsibility once the adoption is confirmed	

#### Child Safeguarding and Online Access

It may usually be appropriate to block online access to a child's record when they are the subject of a child protection plan. The decision rests with the practice and must be assessed on a case-by-case basis.

Likewise, in fragmented families in which there is parental disagreement over issues concerning a child's health, then blocking access to the whole family may limit the risk of the child being coerced by one or both parents.