

New Patient Registration Information

Please complete the GMS1 Registration form and the following pages in full. This will form your medical record until we receive your full records.

Then take you blood pressure using the machine in the reception area and give it to the receptionist with your completed forms.

You will need proof of address i.e. a recent utility bill, council tax bill, or tenancy agreement (business headed letter) and Proof of I.D or student card.

If you were born outside of the UK, bring your Passport and Visa with you.

Use the area checker on our website to see if you are residing within our practice catchment area: www.rmgmc.co.uk

Please do not attend the surgery for registrations until after 10.30am to allow us to deal with clinical matters.

123 Rectory Lane
Chelmsford
CM1 1TR
Tel: 01245 348688

(Branch site)
158 Wood Street
Chelmsford
CM2 8BN
Tel: 01245 354732

rivermeadgate.admin@nhs.net

Title: Surname:

Forenames: Middle Name:

Date of Birth: Town of Birth:.....

Country of Birth:

NHS Number (if known):

Address:.....

..... Post code

Tel: Home:..... Mob:.....

Do you consent to receiving SMS messages ? Yes No

If no box is ticked it will be assumed that your consent is given.

Would you like to join our virtual patient group? Yes No

This is only via email and we send about five emails per year.

Email:

Occupation:

Ethnic Origin please tick:

White	<input type="checkbox"/>	British	<input type="checkbox"/>	Irish	<input type="checkbox"/>
European	<input type="checkbox"/>	Black	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
African	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Asian	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	Pakistani Mixed	<input type="checkbox"/>	White/Black Caribbean	<input type="checkbox"/>
White +Asian	<input type="checkbox"/>	Mixed	<input type="checkbox"/>		<input type="checkbox"/>

Other: Please specify:

Lifestyle Information:

Never smoked Smoker How many a day?

Ex-smoker Date stopped?

How many units of alcohol do you drink per week?
(1 unit = a half pint of normal strength beer or 1 measure of spirits and 2 units = one small glass of wine).

Physical Exercise: Daily Weekly Occasional

Height: Weight:

Are you currently receiving care elsewhere? Yes No

Current Medication:

Kindly attach your repeat medication list. - Please list any known allergies:
.....

Do you currently have or had any of the following?

Diabetes	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Heart Attack	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Asthma/COPD	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Stroke	Yes <input type="checkbox"/>	No <input type="checkbox"/>
High Blood Pressure	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Angina	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Females Only: Date of your last smear test:

Have you had any children? Yes No

Please give dates of birth:.....

Have you had a hysterectomy? Yes No

If 'yes' please state date:

Do you have a coil or implant? Yes No

If 'yes' please state date fitted.....

Family History: Are you adopted? Yes No

Does anyone in your family have or previously had any of the following:

Cancer	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Diabetes	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Asthma/COPD	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Stroke	Yes <input type="checkbox"/>	No <input type="checkbox"/>
High Blood Pressure	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Heart Disease	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Next of Kin: Name:

Relationship:

Contact No:

Do you have a carer?

Yes

No

If 'yes' carer's name:

Are you a carer for someone?

Yes

No

If 'yes' person's name..... Contact No:.....

Responsible GP:

You will be allocated a GP who will be responsible for your overall care at the practice. However, you do not have to see this GP and have the choice to see any of the doctors for your care.

If you are taking regular medication you will need to book an appointment with the doctor for your first Repeat Prescription.

Zero Tolerance

We have a policy of zero tolerance of verbal or physical violence towards our staff or other patients. Patients who ignore this will be removed from the list and may face police action.

On-Line Services

Would you like to register for On-line services: Yes No

You can book/cancel appointments, order prescriptions and see your read coded record and results.

If 'yes' ask the receptionist for a registration form and information leaflet. You will need photo ID with you to complete the process.

Over 16yrs only.

Accessible Information Standard

The accessible information standard tell organisation how they should ensure that disabled patients / service users and, where appropriate, carers and parents, receive information in formats that they can understand, and that they receive appropriate support to help them communicate. Please complete the section below to help us identify any specific communication needs you may have.

Do you need information communicated to you in a specific format?

Yes No If yes, give details of the format that you need:

.....

Do you need support when attending the surgery? Yes No

If yes, please give details of the support you need?

.....

www.englands.nhs.uk/accessibleinfo

Summary Care Record (SCR)

Is a summary of a patient's sensitivities/allergies/current medication, which is uploaded to the national Spine? It can be accessed by any legitimate Clinician and is beneficial when a patient is seen at a hospital /Out of Hours/temporary resident at a GP practice. It is advisable to stay registered for this service.

Do you consent to sharing you summary care record? Yes No

This must be indicated for your children also, if applicable.

Signature:

Date:

For more information about the practice and to see our practice leaflet, visit our website: www.rmgmc.co.uk

For office use only:

New Patient Questionnaire complete

Enter code: 9187.

Staff Initials.....

Date.....

Document to be scanned to patient medical record.

SHARING.YOUR NHS PATIENT DATA

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, and 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 three different elements of “sharing NHS patient information”

We ask you please to read the information on this document carefully and complete the relevant fields on this form and return it to your GP surgery.

SCR = NHS Summary Care Record

The NHS Summary Care Record was introduced many years ago to help deliver better and safer healthcare. 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 then please either make this information available to them or decide and act on their behalf.

EDSM = Enhanced Data Sharing Model "SYSTEMONE"

The database and software used to store your GP health record is called "SystemOne" it is a very secure national system used by over 2000 GP practices and 4800 NHS organisations including GP Out Of Hours services, children's services, community services and some hospitals. All the GP practices in our local area use this same confidential clinical computer system.

The system gives your GP the facility to share your record with other NHS health providers that use the same clinical computer system and are involved in your care. For example, the local Community Nurses who may look after you when you leave hospital, Community Physiotherapy and Community Diabetes Service.

Allowing your GP to share your record in the "SystemOne" 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 "SystemOne" 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 NHS healthcare providers.

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