

Computer Number: _____

NEW PATIENT QUESTIONNAIRE

Welcome to the Crown Medical Centre. To help us provide you with the best possible service, we would be very grateful if you would take the time to answer the following questions. Thank you.

Surname:	Title: Mr/Mrs/Miss/Dr/Other
Forenames:	Previous Surname:
Date of Birth:	NHS Nmb:
Gender:	<input type="checkbox"/> Man <input type="checkbox"/> Woman <input type="checkbox"/> Under specialist gender identity clinic
Gender at birth:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address:	
Postcode:	Home Phone:
Email:	Mobile Phone:

Have you been registered here before? ☐ Yes ☐ No

NEXT OF KIN

Name:	Relationship:
Address (if different from above):	
Telephone Nmb:	

ARE YOU A CARER?

☐ Yes ☐ No If yes for whom? (e.g. husband/wife/child) _____

MARITAL STATUS

<input type="checkbox"/> Single	<input type="checkbox"/> Separated
<input type="checkbox"/> Married	<input type="checkbox"/> Divorced
<input type="checkbox"/> Living with partner	<input type="checkbox"/> Widowed

ETHNICITY DATA

White		Black		Asian		Mixed	
White British		Caribbean		Indian		White & Black Caribbean	
Whit Irish		African		Pakistani		White & Black African	
Other white		Other Black		Bangladeshi		White & Black Asian	
				Chinese		Any other mixed background	
				Other Asian			
Other (please specify):							
Please state your first language:							

Computer Number: _____

FAMILY HISTORY

Does anybody in your family have any of the following illnesses? (Please tick and say who)

Condition		Relative	Condition		Relative
High Blood Pressure			Diabetes		
Heart Attack			Asthma		
Angina			Glaucoma		
Stroke (CVA)			Epilepsy		
Cancer – Where?			High Cholesterol		

WOMEN ONLY

How many pregnancies have you had?			
How many children do you have?			
Date of birth(s) of children			
Date of last cervical smear?			
What contraceptive method do you use?			
<input type="checkbox"/> Pill	<input type="checkbox"/> Depo	<input type="checkbox"/> Coil	<input type="checkbox"/> Implant
Date of replacement (coil & implant only):			

MEDICAL HISTORY

Past Medical History:

Please state any on-going illnesses or disabilities or any significant past illnesses, operations or accident and the years they happened or started.

Current Medication:

Please list medications that you are taking at the present time and the dosage – Please attach a medication list or “right hand side” if you can.

Allergies:

Please state any allergies that you have and the date which they started.

LIFESTYLE INFORMATION

Weight: _____	Height: _____	BMI: _____
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Computer Number: _____

DO YOU EXERCISE AT ALL?

<input type="checkbox"/> Not at all	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Frequently	<input type="checkbox"/> A lot	<input type="checkbox"/> Not physically capable
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DO YOU SMOKE?

<input type="checkbox"/> Never	<input type="checkbox"/> Current smoker	<input type="checkbox"/> Ex-smoker	<input type="checkbox"/> Roll ups	<input type="checkbox"/> Pipe	<input type="checkbox"/> Cigars
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If yes, how many a day? _____

ALCOHOL AUDIT

	0	1	2	3	4
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
How many units of alcohol do you drink on a typical day when you are drinking?	1-2	3-4	5-6	7-8	10+
How often have you have 6 or more units if female or 8 or more units if male, on a single occasion this year	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
How often during the last year have you failed to do what was normally expected of you, because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
How often during the last year have you needed an alcoholic drink in the morning, to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
Have you or somebody been injured as a result of your drinking?	No		Yes but not in the last year		Yes – During the last year
Has a relative or friend, doctor or health worker been concerned about you're drinking or suggest that you cut down?	No		Yes but not in the last year		Yes – During the last year

Scoring:

0 – 7	Lower risk
8 – 15	Increasing risk
16 – 19	Higher risk
20+	Possible Dependence

TOTAL SCORE: _____

Computer Number: _____

VACCINATION HISTORY

Please give us the date of your last vaccinations:

Tetanus vaccination	
Polio vaccination	
Shingles vaccination	
Pneumococcal vaccination	

If you have a copy of your immunisations from your previous GP surgery, please attach them to this questionnaire.

THE CROWN MEDICAL CENTRE

Application for online access to my medical record

Surname	Forename
Date of birth	NHS Number
Address	
Email address	
Telephone number	

To obtain access to your appointments, prescriptions and immunisations via the NHS App, Patient Access or any of the NHS approved apps you must first sign up for Online Access. To do this you will need to complete this form and bring two forms of ID (1 photographic and 1 address proof) to reception, who will verify this and give you your unique pin (linkage key) along with instructions on how to set up your account.

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

1. Booking appointments	<input type="checkbox"/>
2. Requesting repeat prescriptions	<input type="checkbox"/>
3. Immunisations	<input type="checkbox"/>

I wish to access my records online and understand and agree with each of the statements below:

I will be responsible for the security of the information that I see or download	<input type="checkbox"/>
If I choose to share my information with anyone else, this is at my own risk	<input type="checkbox"/>
If I suspect that my account has been accessed by someone without my agreement I will contact the surgery as soon as possible	<input type="checkbox"/>
If I think that I may come under pressure to give access to someone else unwillingly, I will contact the surgery as soon as possible	<input type="checkbox"/>

Signed: _____

Date: _____

If you wish to access your medical record online including your coded medical problems and lab results please ask receptionist for the form to complete.

[For practice use only](#)

Patient NHS Number:	Patient Computer ID Number:
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YOUR NAME:

DATE OF BIRTH:

The Crown Medical Centre offers its patients the choice of having a Summary Care Record.

The new NHS Summary Care Record has been introduced to help deliver better and safer care and give you more choice about who you share your healthcare information with.

What is the NHS Summary Care Record?

The Summary Care Record contains basic information about:

- **any allergies you may have,**
- **unexpected reactions to medications**
- **and any prescriptions you have recently received.**

The intention is to help clinicians in Accident and Emergency Departments and 'Out of Hours' health services to give you safe, timely and effective treatment.

Clinicians will only be allowed to access your 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.

Children under the age of 16

Patients under 16 years will not receive this form, but will have a Summary Care Record created for them unless their GP surgery is advised otherwise. **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. Ask the surgery for additional forms if you want to opt them out.**

You do not have to have a Summary Care Record, although you are strongly recommended to consider this choice. If you are happy for a Summary Care Record to be set up for you then you need take no further action. If you want to opt-out now please tick the box below and return it to Reception within the next three days.

Please tick the box and sign below:

No I do not want a Summary Care Record ☐ **Yes** I want a Summary Care Record ☐

Signed _____

Date _____

HealthSpace information

In addition, patients over 16 can register on a secure website called HealthSpace for a 'Basic' account which gives you access to a Personal Health Organiser. Register at www.healthspace.nhs.uk to do this. If you go a stage further you can register for an 'Advanced' account which will entitle you to see a copy of your Summary Care Record once it has been created. Complete the Advanced Registration application and print off the form and contact your Patients' Advice and Liaison Service (PALS) office to find out where you should go to register for an Advanced HealthSpace Account. You can do this by emailing healthspace@somerset.nhs.uk or by telephoning the PALS on **0800 0851 067**. Advisers are available Monday to Friday from 9.00am to 5.00pm. When you register you must remember to bring along with you 3 items of identification, Passport and/or Driving Licence and 2 Utility Bills current within the last 3 months.

Register your Type 1 Opt-out preference

The data held in your GP medical records is shared with other healthcare professionals for the purposes of your individual care. It is also shared with other organisations to support health and care planning and research.

If you do not want your personally identifiable patient data to be shared outside of your GP practice for purposes except your own care, you can register an opt-out with your GP practice. This is known as a Type 1 Opt-out.

Type 1 Opt-outs may be discontinued in the future. If this happens then they may be turned into a National Data Opt-out. Your GP practice will tell you if this is going to happen and if you need to do anything. More information about the National Data Opt-out is here: <https://www.nhs.uk/your-nhs-data-matters/>

You can use this form to:

- register a Type 1 Opt-out, for yourself or for a dependent (if you are the parent or legal guardian of the patient) (to **Opt-out**)
- withdraw an existing Type 1 Opt-out, for yourself or a dependent (if you are the parent or legal guardian of the patient) if you have changed your preference (**Opt-in**)

This decision will not affect individual care and you can change your choice at any time, using this form. This form, once completed, should be sent to your GP practice by email or post.

Details of the patient

Title										
Forename(s)										
Surname										
Address										
Phone number										
Date of birth										
NHS Number (if known)										

Details of parent or legal guardian

If you are filling in this form on behalf of a dependent e.g. a child, the GP practice will first check that you have the authority to do so. Please complete the details below:

Name										
Address										
Relationship to patient										

Register your Type 1 Opt-out preference

Your decision

☐

Opt-out

I do not allow my identifiable patient data to be shared outside of the GP practice for purposes except my own care.

OR

I do not allow the patient above's identifiable patient data to be shared outside of the GP practice for purposes except their own care.

☐

Withdraw Opt-out (Opt-in)

I do allow my identifiable patient data to be shared outside of the GP practice for purposes beyond my own care.

OR

I do allow the patient above's identifiable patient data to be shared outside of the GP practice for purposes beyond their own care.

Your declaration

I confirm that:

- the information I have given in this form is correct
- I am the parent or legal guardian of the dependent person I am making a choice for set out above (if applicable)

Signature

Date signed

When complete, please post or send by email to your GP practice

For GP Practice Use Only

Date received		
Date applied		
Tick to select the codes applied	Opt – Out - Dissent code: 9Nu0 (827241000000103 Dissent from secondary use of general practitioner patient identifiable data (finding))	
	Opt – In - Dissent withdrawal code: 9Nu1 (827261000000102 Dissent withdrawn for secondary use of general practitioner patient identifiable data (finding))]	

Welcome to The Crown Medical Centre

The aim of this sheet is to provide you with all the useful information you will need, including information about the doctors, nurses, and services that we offer.

Opening hours

Our doors and telephone lines are open, Monday – Friday 08.30 – 18.30. We offer extended hours telephone appointments which are done in the evening; please let reception know if you require one of these. If you require medical advice or treatment after our opening hours, please contact NHS 111 for further advice and in a medical emergency, please dial 999.

Telephone appointments

The GPs offer telephone consultations, which are bookable in advance. Reception will ask you for a reason for the call so they can give the doctor some information, they will also confirm your best contact number. This will be booked in as an appointment. If your problem requires a more urgent telephone consultation with a GP, we do have a duty GP available Monday to Friday for urgent help. If the GP feels you require a face-to-face appointment, they will arrange this.

Online Consultations

There's now no need to wait on the phone to speak to us, just submit your query to us online and we will get back to you with the advice you need. Reception are encouraged by the doctors to ask patients to complete these with as much information as possible for the doctors to triage. The doctors aim to respond to these within 2 working days.

Doctor's working days

Doctor	Monday		Tuesday		Wednesday		Thursday		Friday	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Dr Lucy Pendered	√				√	√	√			
Dr Anna Lambert	√		√	√			√	√		
Dr Thomas Langston	√	√	√	√					√	√
Dr Kate Foot	√		√	√					√	√
Dr Rebecca Moss	√				√	√	√			
Dr Hannah Jenkins	√	√	√	√			√	√		
Dr Alison Foster	√		√		√	√			√	√
Dr Christian Jennings		√					√	√	√	√

Nurse appointments

We have a very experienced and friendly team of practice nurses, with certain specialities including diabetes, asthma, COPD, anti-coagulation. Our nurses provide a wide range of services including blood tests, dressings, ear syringing, cervical smears, ECGs, blood pressure monitoring, pill checks, diabetic reviews, travel advice and flu vaccines.

Our practice nurses are:

- Mrs Nicky Goddard – Lead Nurse
- Miss Elizabeth Towler
- Mrs Keeley Angrave
- Ms Sophie Illingworth
- Mrs Belinda Hutchinson
- Mrs Maria Oliver

The Management Team:

Our practice manager is Mrs Claire Gregory, who has responsibility for the management of the practice. If you would like to discuss any queries, problems or grievances or wish to make a constructive suggestion as to how we could improve our services, please either ask to speak to her or write. Claire is supported by a team of experienced managers and staff each with their own role who will be more than happy to help you as well.

Receptionists and their role:

The reception staff play a key role in ensuring you receive the best service from the Crown Medical Centre. They are here to help you to arrange appointments, deal with all your requests and arrange telephone consultations or home visits as necessary.

Our reception staff are:

Mrs Sharon Grinter (Reception supervisor)	Miss Charlotte Barham (Executive Assistant)
Mrs Vivienne Postma (Operations Assistant)	Mrs Jane Bennie (Contract Administrator)
Mrs Melanie Bromiley (Prescriptions lead)	Mrs Louise Cable
Mr Michael Brimacombe	Mrs Gabrielle Armstrong
Miss Maddison Bryant	Miss Laura Rossiter
Miss Sarah Lindsay	Miss Leah Piper
Our medical secretaries are:	
Mrs Louise Gorringe	Miss Keira Bird
Miss Chloe Mayhew	

Prescription service:

Our Prescription Service is run by a dedicated team of Prescription clerks who are here to help you. They deal with the day to day running of the prescription service, including issuing medications, updating patients' records, reminding patients of review dates and dealing with all enquiries regarding medication.

Ordering and collecting medication:

You can order a repeat prescription by using one of the following methods:

- Patient Access/NHS App (You will need to speak to reception to sign up to online services)
- Email
- Telephone – 01823 250150 (The phone line is open Monday 10.00 – 13.00 and 14.00 – 16.00, Tuesday to Friday 10.00 – 12.30)

Do not leave ordering your repeat medications until you have run out. Please order it well before you are due to run out as it will take at least 72 hours to process your request.

If you have signed up for prescriptions to be sent to a pharmacy of your choice, you must allow 3 working days before it can be collected from the pharmacy. Many chemists operate a prescription collection service whereby you can then collect your medication straight from the pharmacy. For housebound patients, they can offer a home delivery service.

Primary Care Practitioner:

We also have Mark Hayden working with us. Mark was previously a paramedic, and can deal with all minor ailments. Mark also does many of our home visits.

District Nursing Team:

The District Nurses work closely with the surgery and provide nursing care to patients in their own home. They provide support for families and carers, pre and post-operative care, incontinence help, leg ulcer assessment and advice. Patients may be referred to the service via the GP's, hospital or other appropriate agencies.

Midwife Appointments:

Our surgery midwife is Hazel Hewitt. Hazel is available for antenatal care and early postnatal care and provides advice on all aspect of maternity care. If you know or think you are pregnant, you do not need to make an appointment with a GP unless you are concerned about your pregnancy.

THE CROWN MEDICAL CENTRE: PATIENT DATA – USE, SHARING AND DISCLOSURE OF PATIENT INFORMATION

A GUIDE FOR PATIENTS

1. Introduction

This protocol exists to provide information and guidance to patients about the use, sharing and disclosure of confidential patient information.

2. What are we trying to achieve?

- Ensure that patients are aware of the regulatory requirements relating to patient data and how we as a practice need to adhere to these
- Inform patients of the regulatory requirements affecting their personal records and provide information about the options for patient 'preferences'

3. A quick overview

This information leaflet is quite long. The box below provides a high level summary of the main points

Patient information

When you visit the surgery as a patient we want you to feel able to discuss anything with your doctor that might relate to your health. This may include your relationships, drugs, drinking, your mental health, your job etc. You would like to reassure you that anything you tell us will remain absolutely confidential.

We take great care to ensure that no information that patients offer is passed on either inadvertently or through the deception of others. This includes other family members (unless we have their written consent).

Releasing information without patient agreement

There are a few situations when a patient's doctor is allowed to release information without their consent. These situations are very rare and are clearly defined by law.

Reports for other people

Sometimes we may need a report prepared by a patient's GP for someone else who is not involved in their care. This may be the patient's employer, an insurance company or solicitor. We will never release any information to any other party without a patient's written consent. We use a specific consent form designed by Somerset Local Medical Committee (LMC) and this is used in every case. Patients have the right to see these reports before they are sent off.

Access to medical records

Patients have the right to see their own medical record, both hand-written and electronic.

GDPR

Under the new Data Protection Act 2018 it has become even more important that as a practice we ensure we do not release data without being able to justify the reason for this and being confident that the receiving organisation has safeguards in place to protect the data we release.

Practice staff

Practice staff e.g. Nurses, Medical Secretaries and Receptionists support the Doctors in providing patient care. Staff are only allowed to access a patient record if required to directly perform their duties. Staff should never access a patient record unless access is required for them to carry out their duties. Accessing records outside this remit would be deemed a serious breach of confidentiality and information governance and may lead to disciplinary action. All staff are bound by a confidentiality agreement.

4. Registration under the Data Protection Act 1998

The practice maintains an ongoing registration with the Information Commissioner's Office. This can be viewed at www.ico.gov.uk

5. Patient information and confidentiality

Patients have a right to keep their personal health information confidential between themselves and their health care professionals (doctors, nurse etc.) and to know who has access to their records. This applies to everyone, although the law does impose a few exceptions to the rule. Very sensitive, personal information is strictly controlled by the law and anyone who receives information about a patient is under a legal duty to keep it confidential.

Some information held about patients may be shared with other people responsible for their health care, e.g. doctors, nurses, therapists and technicians involved in the treatment or investigation of your medical problems.

The duty of confidentiality owed to a person under the age of 16 is the same as that owed to any other person. However, young people under 16 may not be competent to consent to treatment and it may therefore be necessary to involve their parent or carer in the consenting process.

Providing patient consent has been given, disclosure is justified as long as it will not compromise the confidentiality of another person without that individual's consent. Disclosure to the patient may be withheld if it is thought that it may cause serious harm to the mental or physical health of the person.

There is a requirement to maintain patient confidentiality for deceased people.

Patients' personal health information will be shared with the health care team and can be disclosed to other organisations providing health or social care as part of the management and treatment of medical conditions.

Information will only be disclosed if there is a genuine need. Wherever possible, data is anonymised by the removal of personal details to keep disclosure to a minimum.

Medical information about a patient will not be disclosed over the phone (including test results) unless we are absolutely sure that we are talking to the patient or if we have prior consent to do so.

If as a patient, you feel that it is appropriate/useful for your partner/spouse/relative to be able to share your medical information at all times, we require this to be put in writing.

All staff have a duty to ensure that unintentional improper disclosure of confidential patient information does not occur and this is a contractual requirement for them.

6. Patient access to medical records

Under the Data Protection Act 2018 patients are entitled to access their medical records.

Applications can be made through a subject access request (SAR). It is best practice for the request to be made in writing but this is not mandatory. There is no fee payable. The Practice is obliged to comply with a request for access subject to certain exceptions, within one month of receiving the request. The Practice also has a duty to maintain the confidentiality of patient information and to satisfy itself that the applicant is entitled to have access before releasing information.

For deceased persons, applications are made under sections of the Access to Health Records Act 1990 (these sections were not replaced by the Data Protection Act 1998). The right of access to the health records of deceased individuals is for their personal representative and others having a claim under the estate of the deceased.

The Medical Reports Act 1988 covers the rights of individuals to access medical reports prepared about them for employment or insurance purposes.

The secretarial team deals with all SAR and medical report requests following a strict protocol.

7. Sharing information with patients

As a patient, you have a right to information about your health care, which should be presented in a way that is easy to follow and understand. You have the right to full information about any condition or disease from which you are suffering, including

any proposed treatments or onward referrals, in order to allow you to make proper and informed choices about your care. However, we must respect the wishes of any patient who asks us not to give them detailed information.

Patients can be offered an appointment with their GP to discuss their records in order that they can seek explanation of any questions that they may have.

8. Copying letters to patients

Patients have the right to receive copies of letters written about them by our clinicians to another health or social care professional. Patients will not automatically be sent copies of letters, but will be made aware of their right.

Patients may elect to share information with carers, or in the instance of children, their parents. Parents do not have the automatic right to make requests on behalf of their children, (national guidelines apply for confidentiality and consent for young people)

There are some circumstances where it may be impractical, unlawful or undesirable to copy letters, including:

- where the patient does not want a copy
- where the letter contains information about a third party
- where the clinician feels that there is the potential harm to the patient
- where the letter contains abnormal results or significant information that has not been discussed with the patient, in which case alternative arrangements should be made to discuss its contents with the patient
- 'Raw' data such as single test results should not normally be sent directly to the patient, some other means of communicating the results to patients will be necessary.

As a general rule the content of copied letters should reflect the discussion that took place during the patient's consultation with the health professional, there should be no new information in the letter which might surprise or upset the patient.

This procedure only covers letters written by the practice team. Where patients wish to receive copies of letters received by our clinicians from external professionals, the request should be made directly to that professional.

9. Disclosure of children's records

Parents do not have an automatic right of access to their children's medical records. It cannot be presumed that children under the age of 16 lack the capacity to make decisions about their own health. An individual child may demonstrate a level of understanding at a younger age, sufficient in law to be able to make their own decisions.

Although children under the age of 16 have the same rights to confidentiality as any other patient, they may not be competent to give consent to treatment. If a child lacks the capacity to make their own decisions, the doctor or other health team member must provide treatment in the child's best interests, which is usually in agreement with parental wishes.

If the doctor finds himself in conflict with the child's parents then legal advice will be sought.

For requests for access to a child's records, the doctor will assess whether the child is sufficiently mature to understand the implications of allowing or refusing disclosure. If the child is considered competent and mature, disclosure will only be allowed with that child's consent.

10. Patients lacking competence to give consent

Problems occur when it is considered that patients are incapable of giving consent to treatment or disclosure because of immaturity, illness or mental incapacity. In such instances relevant information in their medical interest may be passed on to the appropriate person or authority. Where possible the patient should be informed of any disclosure prior to the information being disclosed.

It should be noted in the patient's records what steps were taken to obtain consent and the reasons for deciding to disclose information.

If patients cannot give or withhold consent when it is believed that they are a victim of neglect or physical, sexual or emotional abuse, it is important that the appropriate person or statutory agency is informed. As long as it is considered to be in the best interests of a child, the person with parental responsibility should be informed.

11. Disclosure after a patient's death

Our obligation to maintain professional confidence extends beyond a patient's death. Information can only be made available in certain circumstances. Where possible information should be anonymised and disclosure should not cause distress to the deceased's partner or family.

Disclosure may be made in order to help determine payment under a life insurance policy; to assist the coroner, or other official in connection with an inquest or fatal accident inquiry; work to help clinical audit, education or research; information included on death certificates and data relating to public health surveillance.

12. Sharing information with the health care team

Medical care is not restricted to the consulting room or given in isolation. Both those who give clinical care and those who provide administrative support have access to personal health information. All those who come into contact with this information must adhere to their duty of confidentiality.

Our doctors, practice nurses, community nurses, midwives and health visitors all have access to the medical records of their patients in order to fulfill their clinical care responsibilities.

Other practice staffs have limited access to a patient's medical records in order to allow them to perform basic administrative duties such as filing and computer updating. By asking for certain information, a patient is giving permission for a member of staff to look in their records for specific clinical data.

13. External agencies

The practice sometimes has / may have inspections carried out by other NHS organisations such as the Clinical Commissioning Group (CCG) or agencies such as the Care Quality Commission (CQC). During these visits it may be necessary to verify certain health related information to check the quality of patient care at the practice and also the quality of our record keeping. On such occasions we will ensure that confidentiality forms are signed by the representative from the organisation and anonymise records that need to be accessed if we do not have patient consent.

14. Summary Care Record (SCR)

The SCR is individual to each patient and contains basic information about allergies, adverse reactions and prescriptions you have recently received.

SCR is a national system and patients are automatically included (beyond the control of the Practice) UNLESS they 'opt out' (please see separate leaflet on this).

The intention is to help the clinicians in A&E and Out of Hours (OOH) to give patients safe, timely and effective treatment. Clinicians will only be allowed to access a patient record if they are authorised to do so and even then only if you give your express permission. Patients will be asked if healthcare staff can look at their SCR every time they need to unless it is an emergency, for instance if the patient is unconscious.

15. Care Data

A separate leaflet is available for Care Data.

Confidential information from patient medical records can be used by the NHS to improve the services offered so we can provide the best possible care for everyone. This information along with details such as postcode and NHS number but **not** name, are sent to a secure system where it can be linked with other health information. This allows those planning NHS services or carrying out medical research to use information from different parts of the NHS in a way that does not identify the patient as an individual.

Patients have a choice. Patients are automatically '**opted in**' but if they are not happy for their information to be used in this way they can elect to '**opt out**'. If a patient has any concerns or wishes to prevent this from happening, please speak to the Contracts Administrator (Jane Bennie) and ask for more information. Alternatively more information can be found at www.nhs.uk/caredata.

16. Referrals to other professionals

When a patient consents to proposed treatment it is considered that they have given consent to the disclosure of personal health information in connection with the safe delivery of this treatment.

In instances of medical emergencies, it may be necessary to disclose relevant information about a patient to ensure they receive appropriate care without first discussing this with the patient.

17. Use of information for education, research, audit & monitoring purposes

We also use patient information we hold to help us protect the health of the public generally; to assist with the planning of NHS services to ensure that they run efficiently and meet patient needs in the future; to prepare statistics on NHS performance and activity; to educate medical staff and to carry out health research for the benefit of everyone. We also use the information to review the care that we provide to make sure that it is of the highest standard and to investigate complaints or legal claims.

We may use patient records for education purposes. Information used should be anonymised to protect patient identity. If it is not possible to anonymise information, then the patient's consent to use identifiable data should be sought before any disclosure is made.

We are involved in research at the practice and this is included in our data Protection registration. If we do not have patient consent to release information then we will only use anonymised data. If you are participating in a research study we will go through the consent process with you.

18. Disclosing information to Health Authorities

We have to inform Health Authorities of patient registration changes, additions (including births) and deletions. We may share limited information with them in order to help organise national health programmes (such as childhood immunisations, cervical smears and breast screening) and to report on certain procedures undertaken for which we are paid to perform.

19. Statutory or judicial disclosure

We are required by law to pass on certain information about patients including the notification of food poisoning, infectious diseases, notification of drug addicts, notifications of births and deaths.

Law Courts can insist that GPs disclose medical records to them. A judge or presiding officer of a court may order the disclosure of information. Doctors may object to the disclosure if the request appears to relate to irrelevant matters.

Solicitors often ask for medical records but such requests must be accompanied by the patient's signed consent for us to disclose information.

Doctors may disclose information in response to an official request from a statutory regulatory body for any of the health care professionals, where that body determines that it is necessary in the interests of justice and for the safety of other patients. Wherever possible, this should first be discussed with the patient.

20. Disclosures in the public interest

In cases where patients withhold consent, personal information may be disclosed in the public interest where the benefits to an individual or to society of the disclosure outweigh the public and the patient's interest in keeping the information confidential.

DVLA

If a patient is known to have continued to drive against medical advice or when unfit to do so, then the doctor should contact the appropriate medical advisor at the DVLA with any relevant medical information. The patient should be informed of the disclosure and the reason for it.

Prevention of Crime

Disclosure may also be appropriate if it will prevent or detect a serious crime that may put someone at risk of death or harm. The patient again should be informed.

21. Disclosure to third parties

Police

Without the patient's consent the police have no automatic access to personal health information unless it is felt that the crime under investigation is serious enough to warrant disclosure. However, under the Road Traffic Act 1988 a doctor may be obliged to provide information in response to enquiries by police which may lead to the identification of the driver involved.

Social Services & Benefit Agencies

Social Services & the Benefits Agency may, with the patient's consent, require medical reports from time to time to ensure the continuation of benefit payments or other support.

Medical Reports

With a patient's consent, life insurance companies, medico-legal solicitors, Benefits Agency, potential employers or CICA (Criminal Inquiries Compensation Authority) often ask for medical records from prospective clients / employees. We will disclose all relevant medical conditions, unless the patient asks us not to. In such instances we will advise the insurance company that we have been instructed not to make a full disclosure.

In all cases we will check whether or not the patient wishes to see the report before it is sent off.

22. GDPR/DPA 2018

The Data Protection Act (DPA) 2018 makes our data protection laws fit for the digital age when an ever increasing amount of data is being processed. It empowers people to take control of their data.

Under the DPA the practice is classed as the data controller. Organisations requesting patient data are defined as the data processor. As the data controller we need to ensure that we are very clear that any release of information can be justified, even if it is anonymised data. There is a separate policy on this.

Privacy notice

A copy of the practice privacy notice is available on the practice website or NHS choices website.

ORGAN DONATION

Our Local health authority no longer accepts the paper patient register form (GMS1) as all the information transfers electronically; therefore any information added about organ donation will not be used. If you would like more information on being a donor please read the information below.

How to donate

The NHS Organ Donor Register is a confidential national database that holds the details of around 21 million people who want to donate their organs when they die.

Adding your name to the register and telling your family and friends that you want to be a donor will make it easier for them to agree to donation in the event of your death.

You can join the register in a number of ways. For example, you can:

- Complete an online form at <https://www.organdonation.nhs.uk>
- Call the free NHS Donor line on 03001232323 – lines are open 24 hours a day, 365 days a year.
- Text SAVE to 62323

