

Named GP:

New Patient Questionnaire

Please complete this confidential questionnaire so that we have accurate information relevant to your health care.

Please note that you will need to deliver this to the practice in person as we will need an accurate measurement of your Blood Pressure, Height and Weight. We have facilities to measure these in reception.

If you have any long term conditions such as Diabetes, Asthma, COPD or Kidney Disease or complex medical diagnoses, we will book you a New Patient Health Check appointment.

To be completed by practice staff ONLY

Proof of Address seen:
 Identification Seen:
 Date completed: Checked by:

BP, Height & Weight : Imms NHS HC HIV Test STI Test Patient Access

Surname:	Forenames:
Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>
Ms <input type="checkbox"/>	Miss <input type="checkbox"/>
Master <input type="checkbox"/>	Other <input type="checkbox"/>
Married <input type="checkbox"/>	Single <input type="checkbox"/>
Divorced <input type="checkbox"/>	Widowed <input type="checkbox"/>
With partner <input type="checkbox"/>	

‘Phone	Home:	Address:	
	Work:		
	Mobile:		
Date of birth:	Email:		
Are you happy for us to contact you by Email?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you happy for us to contact you by Letter?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you happy for us to contact you by Text message?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please see the attached information regarding communication with patients			
Would you like to sign up for Online Repeats & Appointments?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a nominated Pharmacy for Electronic Prescribing?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, which one?			

Occupation:
Live with:
Main language:

Next of kin:
Relationship:
Contact Number:

Country of origin:	Date arrived in UK:
Refugee: Yes <input type="checkbox"/> No <input type="checkbox"/>	Asylum Seeker: Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you require an interpreter when you see the doctor/nurse? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please state in which language:	

Do you have any disability, impairment or sensory loss? *Please tick any that apply*

Visual impairment Yes No Hearing impairment Yes No

Speech impairment Yes No Impaired mobility Yes No

Please add any relevant details here:

Do you have any special communication needs? Yes No

If yes: Sign Language Large Print Other

Are you a Carer? Yes No Do you have a Carer? Yes No

If either of the above are true, please state who / for whom:.....

PAST MEDICAL HISTORY with dates of onset (including any operations with dates and significant medical problems e.g. diabetes, asthma, back pain, prolonged illnesses)

Date of onset	Illness/operation

FAMILY HISTORY Do any of your close family (grandparents, parents, brothers, sisters) suffer from or have had any of the following; strokes, heart disease, high blood pressure, diabetes, asthma, thyroid disorders, epilepsy, mental illness, cancer. Age of onset if known

IMMUNISATION HISTORY

For all patients under the age of 18, please provide a copy of your child's red book detailing the immunisations given to date. You can either photocopy the relevant pages, or bring it with you when you come to register and we will copy it for you. If your child has been immunised outside the UK, please provide copies of any immunisation certificates you have so that these can be added to your child's record.

Have you ever had any of the following immunisations;

Influenza Yes No If yes, when

Pneumococcal Yes No If yes, when

Shingles Yes No If yes, when

Travel Vaccinations

Please list any travel vaccinations that you have had below along with the date given;

MEDICATION TAKEN (Please include prescribed and non-prescribed medication including over-the-counter drugs, alternative remedies and recreational substances, with doses and frequency. Please attach repeat order form if you have one).

Name of Medication	Dose	How often

PLEASE NOTE that for all new patients the doctors need to assess ALL previously prescribed medication before we can prescribe. Also, when consultants, both NHS and private, prescribe new or altered medication we may also need to review these.

We try to deliver the best possible service to all our patients by following local and national guidelines in order to provide the most evidence based care to all our patients. In some cases where previous prescriptions do not follow current guidelines these may need to be changed or stopped.

ALLERGIES (drugs and non-drugs)

No Yes Please state which drug + reaction to it

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SMOKING STATUS

- Never smoked Ex smoker
- Current smoker 0 - 9 cigarettes a day 10 – 19 cigarettes a day
- 20 – 39 cigarettes a day 40 + cigarettes a day
- Pipe smoker Cigar smoker
- e-Cigarette Smoker

*Should you wish to stop smoking please read and keep the tear off slip below **

LIFESTYLE

Diet: Healthy Mixed Junk Weight:

Exercise (what and how much) Height:

Inactive Gentle Moderate Vigorous

HIV & CHLAMYDIA TESTING

We offer confidential routine HIV testing for all patients aged 16 or over and routine Chlamydia screening for all patients aged 15 – 24. Is this something that you would like us to arrange for you?

HIV: Yes No Chlamydia: Yes No

INSURANCE Do you have private medical insurance? Yes No

ALCOHOL HISTORY

1 pint of beer/lager/cider	Alcopop	175ml glass of wine	Single measure of spirits	Bottle of Wine
2 units	1 ½ units	2 units	1 unit	9 units

Please complete the Alcohol Questionnaire below;

Questions	Scoring system					Your score
	0	1	2	3	4	
How often do you have a drink containing alcohol?	Never	Monthly or less	2 – 4 times per month	2 – 3 times per week	4+ times per 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 had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

Questions	Scoring system					Your score
	0	1	2	3	4	
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 from 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 else 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 other health worker been concerned about your drinking or suggested 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



SOCIAL ISSUES e.g. homeless, asylum seeker, benefit status & exemptions etc.

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SUMMARY CARE RECORD

Are you happy to have basic details from your medical record uploaded onto the National NHS database so that NHS healthcare professionals in other parts of the country can access them should the need arise?

(Please see back sheet for further info) Yes No * if no please complete an opt out form

Have you been registered or seen a doctor or nurse at this surgery previously? Yes No

Do you have a preference for a particular doctor?..... Male Female

Females only

- DATE of last cervical smear test: Result: Normal Abnormal
- Where last smear done? Previous GP Clinic Abroad
- Contraception used:
- DATE of last Breast Screening: Result:
- Pregnancies: dates, type of delivery and child gender:
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ETHNICITY

In order to help provide the best possible care for patients with specific needs, our local Primary Care Trust has asked us to obtain details of your ethnicity. This information is entirely confidential. If you would prefer not to give it, please indicate below.

British White	
Irish White	
Other White	
Mixed Race: White & Black Caribbean	
White & Black African	
White & Asian	
Other Mixed Race	
Indian	
Pakistani	
Bangladeshi	

Other Asian	
Sri Lankan	
Korean	
Black Caribbean	
Black African	
Other Black	
Chinese	
Other Ethnic Category	
I would prefer not to state my ethnicity	

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*** Stop Smoking help**

Our medical and nursing team strongly advise that patients do not smoke. If you would like help in giving up please ask at Reception for information. Alternatively some of the local pharmacists are qualified advisors.

For local information on stopping smoking call the Kick It helpline on 020 3434 2500 or email s.smoking@nhs.net Support materials can be found <https://www.kick-it.org.uk/>

The NHS smoking helpline can be contacted on 0300 123 1044

THE GROVES MEDICAL GROUP

The Groves Medical Centre, New Malden
The Vineyard Surgery, Richmond
The Lantern Surgery, Hinchley Wood
Vineyard Hill Road Surgery, Wimbledon

Your Information

We maintain records about your health and any treatment or care you have received either with us or other healthcare providers. These records help to provide you with the best possible health care. For information regarding the records we maintain and share with other healthcare providers please see our Privacy Notices available on our website or a hard copy from Reception.

We must adhere to the General Data Protection Regulations that came into effect on 25th May 2018. This means that all information we process and share is done so in a safe and confidential manner; ensuring that your data and information is secure at all times.

Communication with patients

*We only contact patients via letter, text message and email using *3rd party providers for the purposes of:*

- *Appointment reminders and cancellations*
- *Information and reminders specifically relating to your health e.g. health reviews, vaccinations*
- *Requests for information pertaining to your health e.g. smoking status*
- *Surveys and other Public Health initiatives e.g. friends and family test*

*Our 3rd party providers are:

Docmail – a service that securely prints and mails our letters
Iplato or Mjog – NHS approved provider for text messages
An email service is provided securely through our Website

Important Information about your Health Records – please read

The NHS is developing a new way of storing information called the **Summary Care Record (SCR)**.

Your Summary Care Record is an electronic record about your health. At first it will contain information about the medicines you take regularly, any allergies you have, and any problems you have had with medicines. This information will be uploaded from your medical records held at this surgery and held on a national NHS database, sometimes known as the 'spine'. It will be available for healthcare professionals to access, usually with your permission, unless you are too ill to give it. Only those directly involved in your care will be permitted to access your record, and the Government says that strict security measures will be in place at all times to prevent unauthorised access.

This Fact Sheet is not about the advantages and disadvantages of the Summary Care Record, although it tells you where you can obtain more information about this. This Fact Sheet is about how your decision whether or not to have a Summary Care Record is being made.

If you do not take any action, you **will** have a Summary Care Record. This is because the Government Agency responsible for the Summary Care Record, called Connecting for Health, is assuming that everyone wants a Summary Care Record unless they opt out.

This Practice believes that, as a patient, you should have the right to actively choose what should happen to your medical records and whether we should transfer information in these records to other organisations.

We are actively publicising details of the Summary Care Record to remind you that unless you send the Practice an opt-out form (available at reception) we will automatically create a Summary Care Record for you and this will automatically be uploaded onto the NHS national database.



If you don't opt out from the Summary Care Record now but change your mind at a later date, and decide that you want to opt out, it is important to be aware that if your SCR has ever been viewed by a medical professional, then whilst you can stop any further information from being added to it, you will not be able to have the previous data deleted. It can however be 'hidden' so that healthcare staff can't see it and can only gain access to it by submitting a request in writing.

Whilst at the current time Summary Care Records are not being created for any patients under the age of 16, this may happen in the future. If you are a parent or guardian and you do not want your child or children's records uploaded, you will need to tell the practice this by completing an opt out form - one opt out form will not suffice for a whole family; if you think your child or children are old enough to understand what is being proposed, you should talk it through with them.

You can obtain further information about the Summary Care Record by:

- Ringing the NHS Care Records Service Info Line on 0845 603 8510
- Logging on to www.nhscarerecords.nhs.uk

Please read the information below and make your selection by ticking the box or boxes next to the statement(s) which best applies to you. Then sign and date the form and return it to reception with your New Patient Questionnaire. Thank you

Recording Consent of Patients for Data Sharing Initiatives in Kingston		
<p>Kingston Care Passport</p> <p>Local Initiative for patient care.</p>	<p>All Kingston patients are part of the Kingston Care Passport (KCP). It enables your local hospital, A&E and Kingston care providers, to view the relevant information in your GP medical record, when they are treating you, and so give you the best possible care.</p>	<p>NB: My records are included in KCP unless I want to:</p> <p>Opt out of KCP (93C1) <input type="checkbox"/></p> <p>Opt back in to KCP (93C0) <input type="checkbox"/></p>
<p>Summary Care Record</p> <p>National Initiative for patient care.</p> 	<p>If you have a Summary Care Record your health care providers can view your</p> <ul style="list-style-type: none"> • medication (last 12m) • bad reactions to medicines • allergies <p>when you're admitted to hospital, when treating you in an emergency, or when your practice is closed.</p>	<p>I do not want to have a Summary Care Record. (9Ndo) <input type="checkbox"/></p> <p>I want to have a Summary Care Record. (9Ndm) <input type="checkbox"/></p>
<p>Care.data</p> <p>National Initiative for research, not direct patient care.</p> 	<p>Care.Data is an NHS England initiative to take data from the GP records to put into a central database. It aims to make use of the information from medical records to improve healthcare via research. Information from your Care.data record will be made available to organisations within the NHS (such as commissioning bodies) but also outside of the NHS, potentially (subject to approval) to pharmaceutical companies, health charities, universities, hospital trusts, think-tanks and other private companies.</p>	<p>I do not want my personal confidential data to leave the GP Practice (9Nu0) <input type="checkbox"/></p>

Name:

Date of Birth:

Signature:

Date:

Office Use: the KCP opt-out can only be added by select 'Sharing' from the menu bar anywhere in the care record of a patient. There you will find 'EMIS sharing consent' which is for opting out of KCP and 'SCR Consent' for entering opt-in and opt-outs. Care.data read codes have to be added manually.

Application Form for Online Access - Over 16's

Surname	Date of birth
First name	
Address	
Postcode	
Email address	
Telephone number	Mobile number

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

Booking appointments	<input type="checkbox"/>
Requesting repeat prescriptions	<input type="checkbox"/>
Accessing my medical record including test results	<input type="checkbox"/>

I wish to 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	<input type="checkbox"/>
2. I will be responsible for the security of the information that I see or download	<input type="checkbox"/>
3. If I choose to share my information with anyone else, this is at my own risk	<input type="checkbox"/>
4. I will contact the practice as soon as possible if I suspect that my account has been accessed by someone without my agreement	<input type="checkbox"/>
5. If I see information in my record that is not about me or is inaccurate, I will contact the practice as soon as possible	<input type="checkbox"/>
6. I understand that my medical record is designed to be used by clinical professionals to ensure that I receive the best possible care. Some of the information within my medical record may be highly technical, written by specialists and not easily understood. I may also see something that I find upsetting and this may occur before I have spoken to my doctor, or while the surgery is closed and I cannot contact them.	<input type="checkbox"/>

Signature	Date
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For practice use only

Identity verified and password created by	Date	Photo ID and proof of residence <input type="checkbox"/> Vouching <input type="checkbox"/>
Level of Access Enabled (tick)		
Medication and Allergies	<input type="checkbox"/>	Appointment Booking <input type="checkbox"/>
Immunisations	<input type="checkbox"/>	Prescription ordering <input type="checkbox"/>
Results	<input type="checkbox"/>	Access authorised by
Problems	<input type="checkbox"/>	
All Coded Record	<input type="checkbox"/>	

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

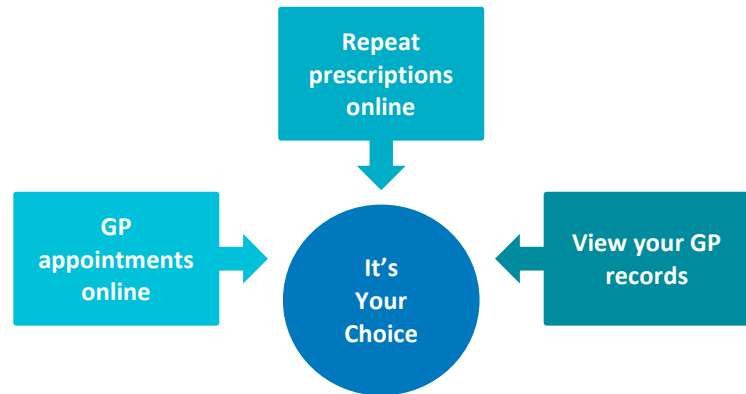
If you wish to, you can now use the internet to book appointments with one of our GPs, request repeat prescriptions for any medications you take regularly and look at your medical record online. You can also still use the telephone or call in to the surgery for any of these services - It's your **choice**.

Being able to see aspects of your record online might help you to manage your medical conditions. It also means that you can access the information 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.

Online access to your medical record was first launched at the end of March 2015, you are only able to see certain aspects of your record. Initially this will mean that you can see any allergies or adverse reactions in your medical record along with your Prescription History. Over time you will be able to see other things like test results; immunisations and details of your consultations.

If you decide to register for access to Online Services (VOS) you will be given login details, so you will need to think of a password which is unique to you. This will ensure that only you are able to access your record – unless you choose to share your details with a family member or carer.



It will be your responsibility to keep your login details and password safe and secure. If you know or suspect that your record has been accessed by someone that you have not agreed should see it, then you should change your password immediately.

If you can't do this for some reason, we recommend that you contact the practice so that they can remove online access until you are able to reset your password.

If you print out any information from your record, it is also your responsibility to keep this secure. If you are at all worried about keeping printed copies safe, we recommend that you do not make copies at all.

The practice has the right to remove online access to services for anyone that doesn't use them responsibly.

To register for Online Access, please complete the Registration Form which is available at reception or on our website. For Access to your Medical Record we will require two forms of photographic proof of your identification.

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 to you. This may occur before you have spoken to your doctor or while the surgery is closed and you cannot contact them.

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.

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.

More information

For more information about keeping your healthcare records safe and secure, you will find a helpful leaflet produced by the NHS in conjunction with the British Computer Society:

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