THE FAMILY PRACTICE



REGISTRATION QUESTIONNAIRE

Welcome to The Family Practice at Western College. Please help us to understand your health needs and to improve our service by completing this questionnaire as fully as possible.

Name	Date
Previous	Date of Birth
Surnames	
Address	Telephone No.
	Mobile No.
	Occupation
Postcode	Language
E-mail address	Ethnicity (see back sheet)
Disability	Religion

I agree to have a "Summary care record" (Information of medications you take and any allergies you have put on a central data base which can be accessed only by healthcare staff with your consent in the event of an emergency or out of hours care)	Yes / No (We advise you to say "yes". If you say "no", you will be asked to fill out an "opt out form")

Consent to use text messages	Yes / No
I agree to receive text and voicemail messages to my mobile number in connection with any	
aspect of my health care (appointments, health campaigns, test results, medication issues	
etc.). I am over 18. I will update you of any changes to my mobile number.	
I agree to be contacted by email about any aspects of my health care (Appointments, health	Yes / No
campaigns, medication etc). I will update you with any changes of e-mail address	

Why did you choose The Family Practice? (Select all that apply)

Close to home	Website	
Close to work	Local listing	
Personal recommendation	Yellow pages	
Passing by	Advertisement	
Other (please specify)		

Medical Questionnaire

Current medical problems				
		ical problems		
(Please list any se	erious illnesses, opera	ations and hospital admi	ssions with dates)	
	Pending hosp	ital appointments		
		• •		
/pu		at and I am a LOD Day		
(Ple	ase advise the nospital th	at you have changed GP Prac	ctice)	
	Femal	e Patients		
Date of last Smear		Date of last		
		mammogram		
Result		Result		
	Current medicin	es and their dosage		
I would like to pick my	prescriptions up	The Surgery / a pharma	cv/ sent electronically to	
from?	processip works up	the pharmacy.(Delete acc		
Please confirm which	pharmacy you intend			
to use.				
(Please allow 48 hours for prescriptions to be processed)				
processed)				
Allergies				
_				

Immunisations

Date

Please provide a list to our reception team

Tetanus

Polio

Family history of serious illnesses (eg Heart Attack, Diabetes, Stroke, Glaucoma, High Blood Pressure) in your immediate family (i.e. Father/Mother/Brother/Sister)

Relation	1		Disea	se		Age at Onset
My next Name:	of kin is?		Addre	ess		Telephone number
		ny advanced d lesuscitate"	care pla	ans,	Yes / No	
			Lifes	style Qı	uestionnair	e
		(Scales, hei			ood Pressure ood pressure mad	hine available)
Weight		Height		Blood P	ressure	
	kg		cm			(e.g 150/90)
						```
				Smokin	g status	
Pleas	e tick rele	evant box			ick	Code
I hav	/e <b>never</b> :	smoked				1371
	a <mark>current</mark>					137R
		moke per day				Insert number
	n an Ex s					137S
		oker how many did you Insert number moke per day?				Insert number
Diet and Exercise						
How wou	ıld you de	escribe your e	ating h	abits?		
Vegetarian/       Very Diet       A Bit Diet       Not Diet         Vegan       Conscious       Conscious						
How would you describe your exercise level?						
Very Act	Very Active Moderately Active Lightly Active Inactive					

#### Sexual Health

If you are between the ages of 15 and 24 and have been sexually active in the past, we would like to offer you a test for Chlamydia. For women this is a self-taken swab and for men this is a urine test. If you are interested in having this test, please collect a kit from the patients toilets.

#### **Alcohol Consumption**

Please estimate your weekly alcohol consumption .......Units
(1 Unit = ½ Pint of Beer, or 1 Glass of Wine, or 1 Measure of Spirits)

Questions		Scoring system					
		1	2	3	4	score	
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		
On those days when you drink alcohol, how many standard alcoholic drinks do you have?	1 -2	3 - 4	5 - 6	7 - 8	10+		
How often do you have 6 or more standard alcoholic drinks on a single occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily		

Total score: (38D4)

Please turn over page and fill in further questionnaire if your score is 5 or above

#### **Alcohol consumption (cont)**

Please complete this questionnaire relating to your alcohol intake only if you scored 5 or above on the previous page.

Questions		Scoring system					
		1	2	3	4	score	
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?			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		

#### Total for both alcohol sections:

(38D3)

#### If your total alcohol score is 8 or above, please answer the following questions:

Over the last 2 weeks, how often have you been bothered by the following problems?		Scoring system				Your
		1	2	3		score
Little interest or pleasure in doing things	Not at all	Several days	More than half the days	Nearly every day		
Feeling down, depressed or hopeless	Not at all	Several days	More than half the days	Nearly every day		
Feeling nervous, anxious, or on edge	Not at all	Several days	More than half the days	Nearly every day		
Not being able to stop or control worrying	Not at all	Several days	More than half the days	Nearly every day		

(6896 and 38QN)

Do you care for somebody? Yes/ No	
(a carer is somebody who, unpaid, provides he your help)	elp and support to someone who could not manage without
If yes, please provide the details on the persor	you care for
Please see the Carer information table in re information.	ception to register as a carer and see signposting
Our Carer's champion is Sue Sopel if you h	ave any queries.
Please Note – we asj that you bring photo l	D and proof of address with your form so we can scan

ID can be a driver's licence, passport or a similar photo ID

them as part of the registration.

**Proof of Address** can be a tenancy agreement, water/gas/electricity bill, council letter of any other official document with an up to date address (this must be separate from your photo ID; even if the address on the ID is correct)

Online Access. If you would like online access to book appointments and request	repeat
prescriptions please tick here	

Please complete the attached form and return to reception so you can have online access to your medical records.

#### **Patient Agreement Form**

#### Confidentially

The practice has a strict policy regarding confidentially and data protection. We will release test results to the person to whom they relate unless that person has given prior permission for the release of their data or they are not capable of understanding the results.

#### Contacting you routinely or in emergencies

The surgery uses SMS messages and occasionally emails for surgery and hospital appointment reminders, immunisation reminders, health promotion, surgery feedback, changes to clinics etc. Please provide a mobile number and secure email address for the practice to contact you regarding the above. It is the patient's responsibility to keep this information up to date with the practice. If you wish to opt out of SMS or possible email communications please inform the Practice Manager in writing with your name, email and phone number.

#### Investigations

Whilst the practice will endeavour to contact patients for any significantly abnormal investigations, the practice reminds patients it is their responsibility to contact the surgery regarding them. The practice recommends patients to contact the surgery within the below recommended intervals: Average waiting times after having the investigation are: X-rays 7 days, blood tests 7 days, smear 4 weeks, MRI scans 7 days.

#### **DNA** policy

Patients are advised if they wish to cancel their appointment to do so 24 hours prior so someone else can be seen. This is so that your appointment can be offered to other patients who may be otherwise unwell and require treatment. If you failed to contact the surgery within 24 hours to cancel or miss your appointment this is considered to be a missed appointment (DNA). Being up to 10 minutes late for your appointment is also considered a DNA. If you failed to attend 3 or more appointments you can be removed from the list. DNAing a same day or urgent appointment is taken seriously and would be breaching our DNA policy (risk immediate removal).

#### Abusive/aggressive/violent/intimidating behaviour

The practice has a duty to care for the health and safety of its staff. The practice also has a legal responsibility to provide a safe and secure working environment for our staff members. All patients are expected to behave in an acceptable manner and violent or abusive behaviour towards staff, in line with NHS guidance concerning zero tolerance, may result in patients being immediately removed.

If you have any concerns regarding this agreement, please kindly speak to a member of staff. We appreciate your help and co-operation regarding your treatment.

Patient's name (print)	
Signed by parent if for a mine	or <14 years
Date	

# <u>The Family Practice – Patient Information Leaflet. Please take home and keep in a safe place for future reference.</u>

<u>How to use the surgery appropriately.</u> On many occasions you do not need to call the surgery. Helpful information can be found on the practice website <a href="www.FPWC.nhs.uk">www.FPWC.nhs.uk</a> or <a href="www.nhs.uk">www.nhs.uk</a>. Alternatively contact your local pharmacist who may be able to offer advice or prescribe medication. For chronic disease management please contact the nursing team for an appointment or telephone advice.

If your condition is urgent and you need to be seen today please ask for an **emergency appointment**. The receptionist will ask the nature of the condition to enable that you are seen by the most appropriate clinician. You will be seen by a Nurse Practitioner or GP for a short appointment to assess one condition only.

**Routine appointments** can be booked with a named GP up to three weeks ahead. This can be done online or over the phone.

**Telephone appointments** can be arranged when the condition does not require a physical examination.

#### **Opening times**

Monday 08.15 – 18.30 Tuesday 08.15 – 18.30

Wednesday 08.15 - 12.00 * closed for staff training 12.00 - 14.00

Thursday 08.15 - 18.30Friday 08.15 - 18.30

Weekend - see extended hours below

#### **Extended Opening Hours**

We are open one evening fortnightly (18.30 to 20.00) for routine GP and nurse appointments and alternative Saturday mornings (08.30 to 11.45) for GP appointments and Treatment Room appointments.

#### What to do when the surgery is closed

When the surgery is closed, medical care is arranged by NHS Bristol using the NHS 111 service.

Telephone calls to the practice are diverted or you may contact them direct on 111

Following initial telephone triage you may be given advice on the telephone. Depending upon the nature of the illness a GP may visit or you will be asked to attend one of the Out of Hours Centres around the city.

Please do not attend Accident and Emergency for non-urgent matters.

#### Other Sources of Help

NHS Walk-In Centre. The nearest NHS Walk-In Centre is Boots, 59 Broadmead, Bristol BS1 3EA 0117 954 9828

Out of Hours services are generally busy so please think carefully before asking to see a doctor and only do so if you genuinely cannot wait until the surgery re-opens.

In a genuine emergency you should call 999. Chest pains and/or shortness of breath constitute an emergency.

#### **Repeat Prescriptions**

You can order a repeat prescription in the follow ways:

- On line www.fpwc.nhs.uk
- By delivering the prescription slip to reception or the post box in the main hallway
- Via your local pharmacist using the electronic prescription service

Please allow sufficient time to enable your request to be processed. For clinical safety reasons all prescriptions need to be checked by a GP.

Your prescription will be ready for collection after 16.00 two working days following receipt of the request.

#### **Medication Reviews**

Patients on repeat medication will be asked to see a doctor, nurse practitioner or practice nurse at least once a year to review these regular medications and notification should appear on your repeat slip.

Please ensure that you book an appropriate appointment to avoid unnecessary delays to further prescriptions.

#### **Test results**

If you are over 18 you can now receive your test results via SMS text message to your mobile phone. We will ask you if you consent to this at the time of blood taking. You will not always receive texts for all tests taken. If you do not hear about a result after 10 days, please ring reception.

- We will not communicate intimate investigation results (smears and sexually transmitted screening). Smear results will be directly communicated to you by the laboratory.
- You may get separate tests each time a result arrives at the practice and is looked at by a doctor. We will
  try to bundle these together to limit multiple tests. Some test results arrive from the laboratory quicker than
  others so there may be gaps between results.
- Some results will be normal and will not require any action. Others may not be normal and you may be asked to contact the surgery to discuss the results with a member of our team.

If you have not consented to receiving your results by text please ring the surgery between 10.00 am - 4.00 pm to receive your results. (Excluding Wednesday when we are closed for staff training between 12.00 pm to 2.00 pm). You will also be able to view your results online after they have been checked by a GP.

#### Time frame for results:

- Most blood results are available within 1 week. Some specific tests get sent to specialist centres by the lab
  which might take considerably longer.
- Urine culture reports take 4-5 working days.
- Fungal tests microscopy results are usually available in 7 working days but culture results can take 4 weeks.
- Biopsy and histology reports from minor surgery generally take 3 weeks.
- X-ray, ultrasound and other scan results are usually available in 2 weeks' time.
- Some urgent tests are returned to the surgery by telephone/fax by the lab so we might contact you based on the report.

We would encourage you to ring and check for results if you have not heard within these time frames and you do not have a follow up appointment to discuss the results with your doctor/nurse. Alternatively, you can ring for your test results between 10.00 am and 4.00 pm when the telephones are less busy. Results can only be given to the person who has had the test unless written consent has been given for someone else to obtain the results on their behalf. Please ensure that any specimens you leave at the practice are correctly labelled with your name and date of birth. Failure to do so may mean that the test will need to be repeated.

#### **Home Visits**

As a general rule, we would prefer to see patients in the surgery, where more comprehensive examinations can be undertaken. Short journeys are not usually harmful in cases of fever or acute illness. However, if you are housebound and need medical attention, home visits are available. Please ring **before 11.00** to book a home visit. It is possible that the GP will contact you by phone initially to discuss the problem. Routine visits are made between 13.00 and 15.30 daily. You can also be visited at home by a community nurse if you are referred by your GP. You should also be visited at home by a health visitor if you have recently had a baby or if you are newly registered with a GP and have a child under five years.

#### Sick notes

You do not require a doctor's sickness certificate for any illness lasting seven days or less. Your employer may however require you to complete a self-certification form (SC2) which is available from your employer or on the HMRC website.

**Evidence that you are sick** – If you are sick for more than seven days, your employer can ask you to give them some form of medical evidence to support payment of SSP (Statutory Sick Pay). It is up to your employer to decide whether you are incapable of work. A medical certificate, now called a "Statement of Fitness for Work" (see below) from your doctor is strong evidence that you are sick and would normally be accepted, unless there is evidence to prove otherwise. You could also provide evidence from someone who is not a medical practitioner, e.g. a dentist. Your employer will decide whether or not this evidence is acceptable. If your employer has any doubts, they may still ask for a medical certificate from your GP.

#### Statement for Fitness for Work - "Fit Note"

The "fit note" was introduced on 6 April 2010. With your employer's support, the note will help you return to work sooner by providing more information about the effects of your illness or injury. For more information see the DirectGov website.