

FRONT STREET SURGERY

14 Front Street, Acomb, York, YO24 3BZ

Website: www.frontstreetsurgery.nhs.uk Facebook: Front Street Surgery

New Patient Registration Form – Newborn Child

Please complete all pages in full using block capitals

1. Background Details

Baby's Details

NHS Number

First Name

Surname

Address

Gender

Date of Birth

Parent or Guardian Details (MUST be a registered patient at this practice and residing at the same address)

First Name

Relationship to child

Surname

Home Tel. No.

Address

Mobile Telephone*

Email*

Detail any other family members registered with us

* by providing a mobile number and/or email address, we assume your consent for contacting you by SMS and/or email

Other Details

Country of Birth

Ethnicity

- | | | | |
|--|--|--------------------------------------|----------------------------------|
| <input type="checkbox"/> White (UK) | <input type="checkbox"/> Black Caribbean | <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Arabic |
| <input type="checkbox"/> White (Irish) | <input type="checkbox"/> Black African | <input type="checkbox"/> Indian | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> White (Other) | <input type="checkbox"/> Black Other | <input type="checkbox"/> Pakistani | <input type="checkbox"/> Other |

Religion

- | | | | |
|--|-----------------------------------|--|--------------------------------------|
| <input type="checkbox"/> C of E | <input type="checkbox"/> Buddhist | <input type="checkbox"/> Sikh | <input type="checkbox"/> No religion |
| <input type="checkbox"/> Catholic | <input type="checkbox"/> Hindu | <input type="checkbox"/> Jewish | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Other Christian | <input type="checkbox"/> Muslim | <input type="checkbox"/> Jehovah's Witness | |

Armed Forces

- Family Member

Family History

Please record any significant family history of close relatives with medical problems and confirm which relative e.g. mother, father, brother, sister, grandparent

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Asthma..... | <input type="checkbox"/> Heart Disease..... | <input type="checkbox"/> Diabetes..... | <input type="checkbox"/> Depression..... |
| <input type="checkbox"/> COPD..... | <input type="checkbox"/> Stroke..... | <input type="checkbox"/> Kidney Disease..... | <input type="checkbox"/> Thyroid..... |
| <input type="checkbox"/> Epilepsy..... | <input type="checkbox"/> Blood Pressure..... | <input type="checkbox"/> Liver Disease..... | <input type="checkbox"/> Cancer..... |

Other:

Parent or Guardian Signature

Signature

I confirm that the information I have provided is true to the best of my knowledge

Name

Date

2. Prescriptions

Electronic Prescribing

Please name the Pharmacy you would like any prescriptions to be sent electronically to:

3. Sharing Your Health Record

Your Health Record

Sharing In

Do you consent to your GP Practice sharing your Child's health record with other organisations who care for them?

- Yes (recommended option)
 No

Sharing Out

Do you consent to your GP Practice viewing your Child's health record from other organisations that care for them?

- Yes (recommended option)
 No

Your Summary Care Record (SCR)

Do you consent to your child having an Enhanced Summary Care Record with Additional Information?

- Yes (recommended option)
 No

Parent or Guardian Signature

Signature

Name

Date

Sharing Your Health Record

What is your health record?

Your health record contains all the clinical information about the care you receive. When you need medical assistance it is essential that clinicians can securely access your health record. This allows them to have the necessary information about your medical background to help them identify the best way to help you. This information may include your medical history, medications and allergies.

Why is sharing important?

Health records about you can be held in various places, including your GP practice and any hospital where you have had treatment. Sharing your health record will ensure you receive the best possible care and treatment wherever you are and whenever you need it. Choosing not to share your health record could have an impact on the future care and treatment you receive. Below are some examples of how sharing your health record can benefit you:

- Sharing your contact details This will ensure you receive any medical appointments without delay
- Sharing your medical history This will ensure emergency services accurately assess you if needed
- Sharing your medication list This will ensure that you receive the most appropriate medication
- Sharing your allergies This will prevent you being given something to which you are allergic
- Sharing your test results This will prevent further unnecessary tests being required

Is my health record secure?

Yes. There are safeguards in place to make sure only organisations you have authorised to view your records can do so. You can also request information regarding who has accessed your information from both within and outside of your surgery.

Can I decide who I share my health record with?

Yes. You decide who has access to your health record. For your health record to be shared between organisations that provide care to you, your consent must be gained.

Can I change my mind?

Yes. You can change your mind at any time about sharing your health record, please just let us know.

Can someone else consent on my behalf?

If you do not have capacity to consent and have a Lasting Power of Attorney, they may consent on your behalf. If you do not have a Lasting Power of Attorney, then a decision in best interests can be made by those caring for you.

What about parental responsibility?

If you have parental responsibility and your child is not able to make an informed decision for themselves, then you can make a decision about information sharing on behalf of your child. If your child is competent then this must be their decision.

What is your Summary Care Record?

Your Summary Care Record contains basic information including your contact details, NHS number, medications and allergies. This can be viewed by GP practices, Hospitals and the Emergency Services. If you do not want a Summary Care Record, please ask your GP practice for the appropriate opt out form. With your consent, additional information can be added to create an Enhanced Summary Care Record. This could include your care plans which will help ensure that you receive the appropriate care in the future.

How is my personal information protected?

<Organisation Details> will always protect your personal information. For further information about this, please see our Privacy Notice on our website or please speak to a member of our team

For further information about your health records, please see: www.nhs.uk/NHSEngland/thenhs/records

For further information about how the NHS uses your data for research & planning and to opt-out, please see:

www.nhs.uk/your-nhs-data-matters