Introduction

*It’s Your Practice: A patient guide to GP services* has been compiled by The Royal College of General Practitioners (RCGP). The RCGP is a membership body of family doctors committed to delivering excellence in general practice and patient care, in the UK and overseas.

*It’s Your Practice* has been produced as part of the RCGP’s aim to build stronger relationships between patients and their doctors and encourage the involvement and inclusion of patients in their own care.

The guide provides helpful information on all aspects of using GP services: from finding and choosing a practice and how to get the most out of a GP consultation to accessing health records and understanding patients’ rights and responsibilities. The differences in GP services across the four nations are highlighted too.

Contributions to *It’s Your Practice* have been received from a number of healthcare professionals, leading medical and health organisations and patient representatives. The RCGP would like to thank all those involved in helping to produce this guide. Our special thanks go to Antony Chuter, Chair of the RCGP Patient Partnership Group, the RCGP General Practice Foundation, The National Association of Patient Participation, and the patient groups of RCGP Wales, RCGP Northern Ireland and RCGP Scotland.

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Registered Charity Number: 223106
The role of a GP

A General Practitioner (GP) is your family doctor and is the main point of contact for general healthcare for NHS patients. All UK residents are entitled to the services of an NHS GP.

GPs are highly skilled doctors who support patients throughout their lives. They help you to manage your health and prevent illness and are trained in all aspects of general medicine. This includes child health, mental health, adult medicine, the diagnosis and management of acute medical and surgical problems and the management of long-term health conditions such as diabetes and asthma, ophthalmology (eyes), ENT (ear, nose and throat) and dermatology (skin). Many GPs develop ‘special’ interests in specific disease areas. Some also carry out practical procedures such as minor surgery.

GPs assess, diagnose, treat and manage illness. They carry out screening for some cancers and promote general health and wellbeing. GPs act as a patient’s advocate, supporting and representing a patient’s best interests to ensure they receive the best and most appropriate health and/or social care.

GPs also provide the link to further health services and work closely with other healthcare colleagues.
to help develop those services. They may arrange hospital admissions and referrals to specialists and they link with secondary and community services about your care, taking advice and sharing information where needed. They also collect and record important information from other healthcare professionals involved in your treatment.

GPs are also involved in the education and training of doctors, practice staff and other healthcare professionals. They generally operate their practices as small independent businesses, employ and manage staff and oversee budgets.

Some GPs are salaried in practices where their employers are other GPs. Some GPs work as locum doctors offering their time to several different practices. A few also work directly for the NHS, or for private providers, for example in some of the new walk-in centres. Some GPs own their practice premises. There is no difference in the skills or experience with these different arrangements as all have been specifically trained to work as GPs.
Some other key roles explained

A GP works with a team of health professionals and other staff at a GP practice. This can include practice nurses, nurse practitioners, practice managers, physician assistants, stop smoking advisers, receptionists and clerical staff. Pharmacists, occupational therapists, physiotherapists, midwives, district nurses, health visitors and other allied health professionals may be based in the same building as the GP practice although are generally employed by the NHS.

The range of staff and availability of services varies between practices and some of the roles are briefly explained below:

### Practice managers

The role and responsibilities of a practice manager are varied and are different from practice to practice. Generally, practice managers are involved in managing all of the business aspects of the practice such as making sure that the right systems are in place to provide a high quality of patient care, human resources, finance, patient safety, premises and equipment and information technology. They support GPs and other medical professionals with delivering patient services and also help to develop extended services to enhance patient care.

Practice managers also enable the promotion of good practice across the local health community and some work across a group of practices.

Often receptionists will refer to the practice manager or other senior administrative staff if they cannot help you with your enquiry or if you are upset about something and want to raise a concern. The practice manager is usually the first port of call for receiving written complaints.

### Practice nurses

Practice nurses are qualified and registered nurses. They can help with health issues such as family planning, healthy living advice, blood pressure checks and dressings. Practice nurses usually run clinics for long-term health conditions such as asthma or diabetes. Nurses can have additional skills and train as nurse practitioners. Some nurses can prescribe medication and are called nurse independent or supplementary practitioners. Other nurses may run minor ailment clinics and most practice nurses carry out cervical smears.
Healthcare assistants

Healthcare assistants support practice nurses with their daily work and carry out tasks such as phlebotomy (drawing blood), blood pressure measurement and new patient checks. They may act as a chaperone when a patient or doctor requests one.

Receptionists and administrative staff

Receptionists provide an important link for patients with the practice and are your initial contact point for general enquiries. They can provide basic information on services and results and direct you to the right person depending on your health issue or query. Receptionists make most of the patient appointments with the GPs and nurses. They also perform other important tasks such as issuing repeat prescriptions and dealing with prescription enquiries, dealing with financial claims, dealing with patient records and carrying out searches and practice audits.

Health visitors

A health visitor is a registered nurse who has received training particularly related to babies, children and pregnant women. Their role is to provide families with children under five years old with support and advice around the general aspects of mental, physical and social wellbeing.
Locum or sessional doctors
A locum or sessional doctor is a fully qualified GP who works at the practice on a temporary basis to cover the regular doctors when they are away from the practice, for example on holiday or on maternity leave.

GP Registrars
A GP Registrar or GP trainee is a qualified doctor who is training to become a GP through a period of working and training in a practice. They will usually have spent at least two years working in a hospital before you see them in a practice and are closely supervised by a senior GP or trainer.

A good practice has a professional and helpful team of GPs, practice staff and other healthcare workers.

GP services
The general medical services provided by GPs are defined under the General Medical Services Contract. These services are mainly split into three groups: essential, additional and enhanced which are briefly described below. You can also visit your GP practice simply for reassurance if you have particular worries or concerns.

Essential services
All practices must provide essential services for people who have health conditions from which they are expected to recover, chronic disease management and general management of terminally ill patients. The core services provided include:

- GP consultations
- Asthma clinics
- Chronic obstructive airways disease clinics
- Coronary heart disease clinics
- Diabetes clinics

Additional services
Practices are expected to provide additional services but can choose not to. Additional services include:

- Cervical cytology screening
- Contraceptive services
- Child health surveillance
- Maternity services
- Certain minor surgery procedures
- Vaccinations and immunisations

Enhanced services
Enhanced services are essential or additional services that are delivered to a higher standard, or extra, more specialised services. Specialised services can cover health issues such as substance misuse, depression
or multiple sclerosis or particular groups such as the terminally ill, the homeless, immigrants, violent patients and those with learning disabilities. Enhanced services can include:

- Anticoagulant monitoring (medication to help with blood clotting)
- Childhood vaccinations and immunisations (provided to higher specified standard)
- Contraceptive coil fitting (IUD)
- Extended minor surgery
- Flu immunisation
- Immediate care/first response care
- Intra partum care (care to women in labour)
- Minor injury service (for example gluing or stitching wounds)
- Sexual health

Other services
Some practices can also offer other, complementary services. Whilst these services do vary between practices, they can include:

- Child health and development
- Counselling
- Dermatology
- Dietician support
- Dressing clinics
- Monitoring disease-modifying anti-rheumatic drugs
- Ear wax and syringing
- ECGs (electrical heart trace)
- End of life care
- Epilepsy
- Lung testing (spirometry)
- Medication review clinics (by pharmacists)
- Men’s health
- Mental health
- Pregnancy testing and contraceptive advice
- Ring pessary replacement
- Stop smoking support
- Travel advice
- Women’s health

A GP practice can also offer a number of non-NHS services which are generally paid for by the patient or their company. These services can include:

- Insurance claims forms
- Passport signing
- Prescription for taking medication abroad
- Private sick notes
- Sports, pre-employment and HGV medicals
- Vaccination certificates

A good practice provides access to a wide range of healthcare services to help address local health needs and inequalities.
The differences between countries

**England**
Primary care trusts (PCTs) are responsible for the planning and delivery of primary healthcare services in England. In July 2010 the Government announced plans to abolish PCTs over the next few years and pass their existing responsibilities to GPs.

**Scotland**
Local health services in Scotland are managed by 14 regional health boards. Details about the health boards and individual GP practices are available from NHS Scotland.

**Wales**
Primary care services in Wales are co-ordinated by seven health boards which provide information about local GP services.

**Northern Ireland**
In Northern Ireland, a single Health and Social Care Board is responsible for the overall management of local health services.
**Useful links**

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It’s your practice

Choosing the right practice for you

• Finding a practice
• Choosing a practice

Finding a practice
If you are moving to a new area or wish to change GP practices there are a number of ways of finding out about other GP practices in and around your area.

• Friends, family, colleagues or neighbours
• Your local NHS website:
  England www.nhs.uk
  Scotland www.nhs24.uk
  Wales www.nhsdirect.wales.nhs.uk
  Northern Ireland www.n.i.nhs.uk
• Telephone directories
• Your local Citizens Advice Bureau
• Public libraries

• Changing practices
• Home visits

It is your right to register with a practice of your choice providing that you live within the catchment area of the practice and that the practice has space for new patients.

Some patients may not have much choice regarding which practice to register with, for example those living in rural areas. In these instances it might be worth getting more involved with your practice to help enhance the services for all patients in the area, see Get involved with your GP practice (pages 43-45).
Choosing a practice
There are a number of aspects to consider when choosing a practice. Why not telephone the practice or visit it in person before you register to gain an initial impression?

Location
Is the practice conveniently located? Is it accessible by public transport or within walking distance?

Parking
Is it easy to park outside the practice? Are there spaces provided for disabled drivers and parent and baby parking?

Atmosphere
Is the atmosphere relaxed and organised?

Front desk staff
Does the reception team appear helpful and polite towards patients and carers?

Opening times
What are the opening hours of the practice? Do they offer appointments outside normal working hours?

Appointment systems
Does the practice offer a range of appointment times? Does the practice offer appointments on the day for urgent issues? How far in advance can you book an appointment with a doctor of your choice? Is there a choice of male and female doctors? Does the practice offer telephone consultations? Can you book appointments online?

Information
Is information about the practice easily available? What sort of leaflets are there in the waiting room? Does the practice have a website?

Reputation
What is the reputation of the practice? What do neighbours or colleagues know about the practice?

GPs
Are there GPs with special interests which are relevant to you? Does the practice have both male and female doctors?
Carers’ support
What does the practice do to support carers? Do they offer priority bookings or home visits? Is there a Young Carers’ group available?

Long-term conditions
If you or a member of your family has a long-term condition such as asthma, what support does the practice offer? Do any of the GPs working at the practice have a particular interest in that condition?

Patient involvement
Does the practice invite patients to get involved with the practice? Does it have a patient group of any kind?

Practice achievement results
The Royal College of General Practitioners operates two schemes for practices to demonstrate that they meet high standards of care. A practice that has achieved the ‘Quality Practice Award’ has demonstrated that they provide exceptional care.

A practice that has achieved ‘Practice Accreditation’ has demonstrated to independent experts that they have a wide range of systems to ensure they provide safe, high-quality and responsive care. This scheme is currently being rolled out nationally.

You can also research the level of overall achievement for a practice within the Quality and Outcomes Framework (QOF). The QOF is a voluntary annual reward and incentive programme for all GP surgeries in England. It rewards good practice in four key areas: clinical care, organisation, patient experience and additional services. Details for a practice are available on the NHS Information Centre’s website (www.qof.ic.nhs.uk) by simply typing in the practice name or address.

GP practices are also now required by law to register with the Care Quality Commission (CQC) by April 2012. To register and remain registered each practice will have to show that it is continually meeting essential standards of quality and care. The CQC will keep an up-to-date record of registered providers and publish the results of their inspections.

A good practice provides the assurance of systems to monitor and improve the safety and quality of care.
Changing practices
There may be many reasons why you choose to change practices and you are entitled to do so. You do not have to tell your existing practice of your intention to change although it may help to speed up the process of transferring your medical records if you do.

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Completing a registration form
To register at a GP practice you must complete a registration form known as a GMS1. It is a straightforward and standard form which will ask for the following details:

- Name and address
- Date of birth
- NHS number if you know it (it doesn’t matter if you don’t)
- The name and address of your previous GP
- Ethnicity (you do not have to state this if you do not want to)
- Your views on organ donation

Deregistration
Some GP practices will also ask to see proof of your identity, for example photo identity such as your passport or driving licence and proof of your address such as a recent gas bill or council tax bill.

If the practice thinks you may not be entitled to full NHS treatment, for example if you are a visitor from abroad, they may ask to see your passport and visa.

When you register with a new GP practice, you will usually be invited to have a health check within six months. Health checks are typically done by the practice nurse or healthcare assistant who will ask you about your personal and family medical history.
They will also ensure that any tests or checks you need are up to date such as measuring your blood pressure or arranging cervical screening. If you are on regular medication, most practices will ask you to see a GP before making any further medication available.

Generally patients are registered with the practice rather than with a specific doctor. Some practices encourage you to choose a specific doctor within the practice; others offer a completely open appointment policy. If you have a chronic disease or significant medical problem most practices will encourage you to form a relationship with one doctor.

**Registering on behalf of someone**

You can register on behalf of a child under 16 years if you have parental responsibility for that child. You can also register someone else if they lack the capacity to do so themselves and if they have granted you lasting power of attorney. Other competent adults aged over 16 years have to sign their own registration form.

**Temporary registration**

If you are ill while away from home or if you are not registered with a doctor but need to see one you can receive emergency treatment from the local GP practice for 14 days. After 14 days you will need to register as a temporary or permanent patient.

You can be registered as a temporary patient for up to three months. This will allow you to be on the local practice and still remain a patient of your permanent GP. After three months you will have to re-register as a temporary patient or permanently register with that practice.

To register as a temporary patient simply contact the local practice you wish to use. Practices do not have to accept you as a temporary patient although they do.
have an obligation to offer emergency treatment. You cannot register as a temporary patient at a practice in the town or area where you are already registered.

If you have a nomadic lifestyle and you are going to be in the area for less than three months then you can be accepted for temporary treatment at a surgery of your choice. If you plan to stay in the area for longer than three months you should register with a local surgery on a permanent basis. Your NHS number will help with tracing your medical records as you move around.

**Deregistration**

A practice can choose to remove you from their patient list themselves. The reasons for this could include if you have moved out of the practice’s catchment area, if your relationship with the practice has broken down or if your behaviour towards their staff or other patients is considered unacceptable. Unacceptable behaviour could include sexual and racial harassment, physical or verbal abuse, physical violence or crime and deception.

In most cases, the GP must give you a warning and provide you with the reasons for your removal from their register. The GP will inform their primary care trust or health board who then notifies you.

You are entitled to emergency treatment, or the continuation of treatment which is occurring more than once a week, until you are accepted by another GP. However, if you have been violent, or have threatened to be violent towards your GP or practice staff, and the police have been informed, you can
be removed immediately from the GP’s list. You will only be accepted for emergency treatment by the GP who has removed you if the GP is satisfied that it is clinically necessary.

If you have been removed from a GP’s list and you feel you have been treated unfairly you may wish to complain, for example, if you feel discrimination was involved. Information on this procedure is available from your primary care trust or health board or the Citizens Advice Bureau via their website or local office.

Useful links

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**Booking an appointment**

The way GP appointments are made can vary significantly between GP practices.

There is no minimum time set within which you should see your GP. If your problem is urgent your GP should see you as soon as possible. There may be a longer wait for popular doctors or for appointment slots outside normal working hours. How quickly a practice can offer an appointment is something that may influence your decision when choosing a practice so it is worth asking this before you register as a patient. See *Choosing the right practice for you* (pages 12-15).

Some practices try to ensure a continuity of care, in other words, that you generally see the same doctor, particularly when dealing with a long-term health condition. If you wish to see the same doctor it is a good idea to find out which days the doctor works and what clinics they run. This will help inform you when making appointments.

If you feel your problem is urgent ensure the receptionist understands this when you are booking an appointment.
Some of the different approaches to booking an appointment are:

**Urgent appointments**
Some practices offer a significant number of slots for patients who need to be seen urgently. Generally though there is less choice of the actual doctor at the time of the appointment.

**Arrive and wait**
This approach guarantees that you will be seen on the day you want to be seen but the waiting time can be long depending on the number of patients at that time. Monday mornings and Friday afternoons are generally the busiest times for practices.

**Same day booking**
There are recognised difficulties with this system which involves patients calling the practice at set times when appointments are ‘released’. It can help to know which days your GP works, to keep calling and/or to visit the practice in person to get your appointment.

**Advance appointments**
Most practices will allow you to book your appointment from a few days to several weeks in advance. Sometimes only a few appointments will be available this way to ensure that there are available appointment slots for those who need to see a doctor urgently.

**Telephone consultations**
Telephone consultations can be a quicker and easier alternative providing the GP would not need to examine you. It can be particularly helpful if you are unable to get to the practice easily.

**Book online**
Some practices allow non-urgent appointments to be booked online so it is worth asking the
practice receptionists if the practice has a website that offers this facility. When booking appointments online, the doctor's name will be shown with each time slot.

See a practice nurse
Sometimes it may be more appropriate to have an appointment with a practice nurse. Some nurse practitioners will be able to prescribe medication. You can discuss your medical query with the nurse and they will be able to decide if they can treat you or if you should make an appointment with a GP.

A good practice has a flexible and efficient appointment booking system.

Cancelling and missing appointments
It is your responsibility as a patient to cancel any appointment you have made in reasonable time so that another patient can benefit from the appointment slot. Even if you are unable to avoid cancelling at short notice, often the reception will know of another patient who can use the appointment.

Please always try to let the GP practice know when you are unable to attend an appointment.

In the consultation room
The appointment time given for a GP consultation is usually 8-10 minutes, although it can be longer for more complicated reviews and procedures.

If you have a significant problem and think you will need more time with your GP you can ask for a double appointment when you book. As well as giving your GP more time to work through your health issue this will also help your fellow patients by making sure the GP doesn’t run late for their appointments. However double appointment slots are unlikely to be available on busy days or as urgent appointments.

Be prepared to help you get the most out of your consultation:

- Write down the key questions you wish to ask before you visit the practice.
- If you are already receiving medication write down the medicines and pills or take them with you.
- Make a note of when you started to feel unwell, your symptoms and any other contributing factors such as a recent holiday or injury.
- Ask a friend or family member to come with you if it would help you.
- Make sure you share all information with your GP. Sometimes it is the small details that help inform the doctor about your possible condition.
- Be as open and honest as you can and don’t be embarrassed. GPs are trained to deal with the intimate and uncomfortable and will understand your embarrassment so should support you.
During the consultation, do not be afraid to ask the GP to repeat what she or he has told you and repeat back your understanding of what has been said to avoid any misunderstandings.

Ask your GP to write down anything you don’t understand and make a note of the consultation after the appointment.

Make sure you fully understand what the next steps are before you leave the room.

You can have a chaperone for any consultation, examination or procedure if you would like one. A chaperone can be a friend, family member or a trained healthcare professional such as a practice nurse. You do not have to accept a particular person who is offered to you as a chaperone. If you have asked for a chaperone but there is no-one immediately available you can reschedule your appointment.

Under the Data Protection Act 1998 and the Human Rights Act 1998, all of the information given in your GP consultation is held in confidence. There are a few exceptions to this, such as if you give your GP information that reveals you are a danger to others.

A good practice has a private consultation room that provides reassurance and builds a patient’s confidence and trust

Sometimes there can be other people who sit in on your consultation such as medical students, nursing students and doctors training to be GPs. You will always be asked whether or not you are happy for other people to be present before being seen by the doctor and you can always decline.

Going back to your GP

If you feel unhappy with the medication or treatment your GP has recommended, or if your condition has not improved, do not be afraid to book another appointment. Your GP is there to help you with your concerns.

Seeking a second opinion

If you feel dissatisfied or are still worried following your consultation with your GP you can seek a second opinion either from a specialist or another GP. You do not have a statutory right to do this but you do have the right to see a GP who is competent to deal with your case.

Your GP can arrange for you to have a second opinion but is not obliged to do so if they do not think it is necessary. You cannot insist on seeing a particular practitioner; however you should not be referred to someone you do not wish to see.

If the GP refuses to arrange a second opinion, you may wish to change your GP, see Choosing the right practice for you (pages 12-15). If you have not been referred for a second opinion and have suffered as a consequence, you may wish to complain, see After your GP consultation (pages 31-35).
Home visits

If you are housebound or are too ill to visit the GP practice you can request a home visit. Some practices also offer home visits for carers which can help to overcome problems such as booking respite.

You cannot insist that your GP visits you at home. Your GP will only visit you at home if they think that your medical condition requires it and will also decide how urgently a visit is needed.

You can 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.

Out of hours

All GP practices are linked to an out-of-hours service. The details for this will be available on their answer phone if you call the practice outside normal working hours, typically between 6.30pm and 8am although this can vary. Alternatively you can call the NHS Direct service applicable to your country. These services are available 24 hours a day, seven days a week.

England NHS Direct 0845 4647
Scotland NHS24 0845 24224
Wales NHS Direct Wales 0845 4647

In Northern Ireland there are five out-of-hours centres, each covering different areas:

- Belfast Health and Social Care Trust
  028 9074 4447 / 028 9079 6220
- South Eastern Health and Social Care Trust
  028 9182 2344 / 028 9260 2204
- Dalriada Urgent Care
  028 2566 3500
- Southern Health and Social Care Trust
  028 3839 9201
- Western Urgent Care
  028 7186 5195

To find out which centre covers your area visit www.gpoutofhours.hscni.net. Alternatively you can call your normal GP surgery who should include the relevant out-of-hours telephone number on their answer machine.

It is the responsibility of the health boards and primary care trusts to ensure a safe, quality out-of-hours service is provided. Some out-of-hours services are provided by the private sector, for example in Wales. Please note that if your condition is potentially life threatening you should call the emergency services on 999.

Walk-in centres (WiC)

Across England there are a number of walk-in centres for minor illnesses and injuries. These include infection and rashes, cuts, bruises and fractures, emergency contraception and advice and stomach upsets. The centres are open between 8am and 8pm, 365 days a year, including Christmas Day and you do not need to be registered with the practice to attend one.
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The next steps
If, as a result of your consultation, your GP recommends medication or further tests make sure you know what the next steps are and who will contact you.

Prescriptions
If you are prescribed medication, take the time to fully understand how and when to take it and ask about side-effects. Your pharmacist can help clarify this further.

Your GP will only prescribe drugs they feel are needed to help you with your health issue and cannot just prescribe drugs which you personally feel are needed. At times, the GP may decide that your condition may improve without the use of drugs, for example change of diet or bed rest.

All drugs that are paid for by the NHS are listed under The Drug Tariff. Some exceptions are made depending on the individual’s circumstances and a doctor can write you a private prescription if they feel it is appropriate. A doctor will sign your prescription and that doctor will carry the legal responsibility for it.
If you wish to understand more about the medicines you are being prescribed there are a number of people you can talk to as well as your GP:

- The pharmacist
- Medicines and Healthcare products Regulatory Agency (MHRA)
- Medicine manufacturer (medical information department)
- Health charities
- Patient organisations
- [www.askyourpharmacist.co.uk](http://www.askyourpharmacist.co.uk)

By law all medicines should come with a leaflet which details how the medicine will help with your condition, any side-effects and things to look out for. The information may change as new things are learnt so you should read it each time you receive your medicine.

The leaflets do list almost all of the side effects ever experienced by any patients whilst taking the drug. If you are concerned about the things that you read speak to your GP, as it may be that the risks in the leaflet do not apply to you.

### Paying for prescriptions

In England prescriptions are charged by the item. In Northern Ireland and Scotland all prescriptions are free with prescription charges removed in Scotland in April 2011. You are entitled to free prescriptions in Wales if you are:

- a patient registered with a Welsh GP, who gets your prescription from a Welsh pharmacy
- a Welsh patient who has an English GP and an entitlement card, and you get your prescriptions from a Welsh pharmacy

If you are likely to pay for four or more prescriptions in three months or 15 or more items within 12 months then you could save money by purchasing a Pre-Payment Certificate (PPC). A PPC, which is available to NHS patients in England, covers all of your own NHS prescriptions no matter how many items you need. A PPC may be purchased online at: [www.nhsbsa.nhs.uk/1127.aspx](http://www.nhsbsa.nhs.uk/1127.aspx)

### A quick guide to prescription exemptions in England

NHS prescriptions in England are normally charged at a specific fee for each item. However, many people are exempt from paying these prescription charges. If, at the time you have your prescription dispensed you fall into one of the groups below, then you should be exempt from any charges:

- You are under 16 years of age
- You are aged 16 to 18 years and in full-time education
- You are aged over 19 years and in full time education on a low income (a reimbursement can be sought by completing an application form)
- You are aged 60 years or over
- You are pregnant or have had a baby in the previous 12 months and have a valid exemption certificate
- You have a specified medical condition and have a valid exemption certificate
- You have a continuing physical disability which means you cannot go out without help from another person and have a valid exemption certificate
- You are receiving treatment for cancer
- You are getting or your partner gets:
  - Income support
  - Income-based Jobseeker’s Allowance
  - Pension Credit Guarantee Credit
• You are entitled to, or named on, a valid NHS tax credit exemption certificate
• You are named on a valid HC2 certificate
• You are a war pensioner, the prescription is for your accepted disablement and you have a valid war pension exemption certificate

There are also some additional situations in which medicines are supplied free of charge:
• Prescribed contraceptives
• Medication administered at a hospital or an NHS walk-in centre
• Medication personally administered by a GP
• Medication supplied at a hospital or clinic for the treatment of a sexually transmissible infection

Repeat prescriptions
You are entitled to a repeat prescription if your GP regards it as clinically appropriate. This is particularly relevant to those with long-term conditions. Each repeatable prescription will detail how many times the medication can be prescribed on that particular prescription. From time to time you may be asked to visit the practice for a prescription review prior to them issuing further repeat prescriptions.

The repeat dispensing scheme, or batch prescriptions, is another way of getting your medicines without having to ask your GP for a prescription each time. You are given a signed prescription with ‘RA’ on it with a set of batch prescriptions marked ‘RD’ that are unsigned. You take all of the prescriptions to your usual pharmacy. The pharmacist will keep all of the prescriptions and give you your medication on a regular basis as agreed by the GP for up to 12 months. This dispensing scheme is only suitable for patients with stable medical conditions.
GP referrals
If you need to use the accident and emergency services or sexual health clinics you do not need a GP referral. Some services such as substance misuse or some alcohol services also run drop-in appointments where a GP referral is not needed. In England there are NHS walk-in centres for minor illnesses and injuries.

More specialist treatment is usually by a GP referral if your doctor feels it is appropriate. If you would like to be referred to a private specialist you should inform your GP who will make the appointment on your behalf. Your GP cannot insist that you see a particular consultant or doctor but may recommend a particular consultant who she or he believes is best suited to deal with your issue.

In England, you will soon have a right to choose your preferred consultant - see Choose and Book below.

Your GP will write a referral letter to the specialist with an overview of your condition. You can ask to see a copy of this letter. When seeing a specialist you should take a similar approach as you would with a GP consultation - be prepared with questions and take notes.

After the consultation the specialist will write to your GP with their medical opinion of your health issue. It is likely they will have already addressed this with you face-to-face in the consultation. If tests have been organised the specialist will probably wait for the results before writing to your GP. You may be copied in to the letter the specialist writes, and if you disagree with the letter or spot an error you should contact the specialist’s secretary. It can take several weeks for the letter to arrive with your GP.

A good practice has a referral or ongoing treatment process that is clear and well managed.

Choose and Book in England
Choose and Book is an NHS system which allows patients in England to choose which hospital or clinic they would like to visit for their first outpatient appointment. Once you have chosen your preferred location you can make the appointment electronically.

Once you and your GP have agreed the need for a specialist you can visit the Choose and Book website to see which hospitals and clinics are available for your treatment. You can discuss your options with your GP and you may be able to book the appointment during your consultation. Alternatively you can book the appointment directly by telephone or via the website at www.chooseandbook.nhs.uk, using the details provided in your Appointments Request letter which your GP will give you.
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It's your practice  Seeing your GP - the next steps page 30
Giving your practice feedback, good and bad

GP practices are like any other organisation - they welcome all feedback, both positive and negative, and really do want to work through any problems you are experiencing.

You may wish to give feedback about the care you receive. Positive comments can reassure the GPs and practice staff they are doing a good job. Feedback about your experiences can also help the practice change or enhance its systems and services to benefit all of its patients. Negative feedback can be used constructively by the practice, particularly if you provide suggestions on how to improve or avoid similar situations in the future. If problems arise you should find that the practice will wish to resolve the problem with you as a priority.

National feedback

The National Patient Survey Programme in England is co-ordinated by the Care Quality Commission and gathers feedback from patients on different aspects of their experience of care they have received, including GP services. There are also some great patient feedback websites available including www.iwantgreatcare.org, www.patientopinion.org.uk as well as feedback on www.nhs.uk.
Making a complaint
It is your right to complain about GP services if you feel the care you have been given is of poor quality. In the first instance you could find that talking to your GP or practice manager about your complaint on an informal basis will see the matter resolved quickly and easily and prove less stressful for everyone involved.

If you don’t feel comfortable making a complaint directly to your practice or you need advice on how to make a complaint you can contact your local primary care trust or health board.

If you choose to make a formal complaint you should first check your practice website or their reception team as each GP practice will have its own complaints procedure and guidelines.

Generally you can make a complaint either by speaking to a member of staff at your GP practice or by putting it in writing by letter or email. If you make a verbal complaint it should be recorded by a member of staff and a written copy given to you.

Key information to include in your complaint is:
• Who or what are you complaining about.
• When and where the incident occurred.
• What, if anything, you have already done since the issue arose.
• What you would like to happen as a result of your complaint. This could be an apology, an explanation, a solution or a change to services.

Your practice should let you know they have received your complaint within three working days, although this time may vary depending on the GP practice policy. A fuller response should be given by your practice within six months, although again this may vary depending on their policy.

Complaining on behalf of someone
If you wish to make a complaint on behalf of someone you should contact the GP or practice manager. Information will be needed from the patient directly unless the patient is a child or not able to fully represent themselves. To make a complaint on behalf of another adult who has capacity to act for themselves you need their written permission.

Other organisations which can help with your complaint
If you would rather not deal with the practice directly there are other organisations you can contact.

England
• Your local primary care trust (PCT)
  PCTs are currently responsible for the level of service you receive from GPs and other primary care providers such as dentists, opticians and pharmacists. There are around 150 PCTs across England.

• Patient Advisory and Liaison Service (PALS)
  PALS helps patients, carers, their relatives and friends with any questions or issues they may
have with the care and service they are receiving by an NHS organisation. Each primary care trust should have a PALS officer and should be able to provide you with the contact details.

• Independent Complaints Advocacy Service (ICAS)
ICAS is a free and independent organisation which offers confidential advice and support if you have a concern about your local GP practice. They will help to explore the options available to you and support you with registering your complaint.

Wales
• Community Health Councils (CHCs)
CHCs are statutory and independent organisations which work to enhance and improve the health service in Wales. There are eight CHCs in Wales and they are overseen by the Board of Community Health Councils.

Scotland
• Local NHS Board
There are 14 regional NHS Boards in Scotland. Each Board is responsible for the delivery and management of healthcare services in their region.

Northern Ireland
• Health and Social Care Board (HSCB)
The HSCB is responsible for the quality delivery of health and social care services in Northern Ireland. It focuses on commissioning, staffing and performance management and improvement.

Ombudsmen
If you are unhappy with the response you have received from your practice you can refer to the relevant Ombudsman. Ombudsmen are free of charge and independent organisations which investigate complaints about Government departments on behalf of the public.

England  Parliamentary and Health Service Ombudsman
Wales  Public Services Ombudsman for Wales
Scotland  Scottish Public Services Ombudsman
Northern Ireland  Northern Ireland Commissioner for Complaints

Care Quality Commission (CQC)
The CQC is the independent regulator for health and social care services in England. Whilst it cannot investigate individual complaints it does encourage people to share their experiences with them so they can use the information to help improve healthcare services for everyone.

General Medical Council
You can also refer your complaint to the General Medical Council which is another independent organisation. The GMC is responsible for doctors’ licences to practise and looks into issues of misconduct and poor performance.

Nursing and Midwifery Council
If your complaint directly concerns a nurse or midwife you can contact the Nursing and Midwifery Council. The Council is the nursing and midwifery regulator for England, Scotland, Wales and Northern Ireland.
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What is a health record?
A health record is created and held by a health professional, normally your GP, and contains important information about your physical or mental welfare. Under the Data Protection Act 1998 and the Human Rights Act 1998, all information received about you is held in confidence, including after your death. Only NHS healthcare staff involved in supporting or providing your care can access your record.

As well as providing a record of clinical information your health record may also be used to evaluate the performance of a GP practice or hospital, to support clinical research or to track the spread of particular diseases or health risks. In these instances your personal details remain confidential and only limited clinical information is shared.

Your health record, which is held on paper or on computer, covers information such as:

- Notes made during a consultation
- Prescribed drugs and treatment
- Test results
- Correspondence between health professionals such as referral letters (you also have a right to
request these at the time of referral)
• Medical data such as X-ray films, photographs, video and audiotapes
• Hospital admission and discharge information
• Patients’ views about disclosure of their records to other people
• Reports written for third party companies, for example insurance companies.
• Third party information, such as when someone is worried about you and they contact your GP

The way a health professional regards you personally should not be included unless this information is relevant in some way to your treatment.

**Accessing your health record**

Under the Data Protection Act 1998 you have the right to request access to your medical files. Children and young people may also request access to their health records, as can their parents. Access to health records may also be given to those acting on behalf of a patient if they have been nominated by the patient. This can be relevant for those patients with learning difficulties or who lack the mental capacity to care adequately for themselves. A next of kin has no automatic right to access your medical records.

If your health is likely to deteriorate in the foreseeable future it might be helpful to nominate someone you trust to share your health records with and to make decisions about your healthcare on your behalf. You could discuss this with your GP.

You can also grant someone the legal right to do this via a health and welfare Lasting Power of Attorney (LPA). There is a cost involved with arranging an LPA and the Office of the Public Guardian can help you further. There is a separate Office of the Public Guardian for Scotland.

In the majority of situations, third parties such as the police, insurance companies or solicitors cannot be given access to your health records unless you give written consent to do so or it is required by law and directed by a judge or magistrate. However, situations can arise where information may be disclosed to the police without patient consent. This may be when police are investigating or prosecuting a serious crime or where the disclosure of this information could prevent serious injury to the patient or others.

The Medical Reports Act 1988 also gives you the right to see any medical reports written about you for employment and insurance purposes.

If you would like access to your health record you need to request this by writing to the person who holds your records, which is typically your GP. This request can be submitted on a form, by letter or by email. Fees can be charged by the practice for sharing the records and the British Medical Association recommends these fees range from £10 for electronic information to £50 for manual copies.

The practice is obliged to go through your record first to remove any reference to other parties which might breach their confidentiality and also take out any information which might be harmful to you.

Your record should be made available to you within 40 days of your application. You can request changes to be made to your health record if you think the details held are not right. To do this you should contact your GP or governing body such as
a local health board or primary care trust. The GP is not obliged to change the record if they believe it to be correct although they should be prepared to enter a note stating that you disagree with an entry.

After a patient’s death the health records are held by the local primary care trust or health board. Sharing your health record to surviving family or friends is not automatically allowed. However guidance for GPs suggests that records and details are usually provided to your next of kin if the request is appropriate and the information is not believed to be harmful. Should you wish to make a specific request, you should seek advice from your GP.

A good practice ensures appropriate, respectful and legal management of patient information.

Summary Care Records (England only)
A new way of sharing your health records with other healthcare professionals is currently being introduced across England. This new initiative, known as Summary Care Records, aims to ensure all of the key clinical information about you is held electronically in a safe and secure way. Enabling healthcare staff to have quicker and more efficient access to your health records should help to improve the healthcare service you receive. It will also make it easier for you to view your health record as well. It is, however, as yet unclear who will be able to add information to the records, and some people are uneasy about the implications of this. You will retain a right to opt out of sharing your summary care record now or in the future.

If you decide to have a Summary Care Record it will contain important information about any medicines you are taking, allergies you suffer from and any bad reactions to medicines that you have had.

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The NHS Constitution

The NHS Constitution is designed to protect the NHS in England and to help ensure that it will always be there for you when you need it. It sets out the rights and responsibilities for UK residents (or from EU countries and foreign visitors) and rules what you can expect from the NHS and what the NHS expects in return. Whilst it is not a legally binding document, it cannot be changed without the full involvement of patients, staff and general public.

The Citizens Advice Bureau public information website, www.adviceguide.org.uk, also sets out patients’ rights for each of the four countries.

Some of your rights and responsibilities as a patient

As a patient your rights and expectations as described in the NHS Constitution include:

- Convenient and easy access to health services free of charge and within maximum waiting times
- A good quality of care and environment based on best practice
- Not to be discriminated against on the grounds of gender, race, religion and belief, sexual orientation, disability or age.
- To receive drugs and treatment as recommended
by the National Institute for Health and Clinical Excellence (NICE) for use in the NHS if your doctor feels it is clinically appropriate for you
• Decisions made in a clear and transparent way so you can understand how services are planned and delivered
• To be treated with dignity and respect in accordance with your human rights
• The right to privacy and confidentiality

In return, as an NHS patient, you have the responsibility to:
• Recognise that you can make a significant contribution to your own and your family’s good health and wellbeing and take some personal responsibility for it
• Register with a GP practice as the main point of access to NHS care
• Treat NHS staff and other patients with respect
• Provide accurate information about your health, condition and status
• Keep appointments or cancel in reasonable time so that other patients can benefit from the appointment slot
• Follow the course of treatment which you have agreed with your GP and talk to your doctor if this is difficult
• Give feedback, both positive and negative, about the care you have received.

Practice responsibilities
Every GP practice has a responsibility to ensure that everyone who needs to use their services can do so.

If you have particular difficulties that affect your access to your GP you should raise these with your practice so they can work with you to resolve them.
A good practice provides access to a wide range of healthcare services to help address local health needs and inequalities.

Useful links

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Website address/telephone</th>
<th>Information available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Citizens Advice Bureau</td>
<td><a href="http://www.adviceguide.org.uk">www.adviceguide.org.uk</a></td>
<td>Understanding your patient rights</td>
</tr>
<tr>
<td>Department of Health</td>
<td><a href="http://www.dh.gov.uk">www.dh.gov.uk</a></td>
<td>The NHS Constitution</td>
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<tr>
<td>NHS Choices</td>
<td><a href="http://www.nhs.uk">www.nhs.uk</a></td>
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</tr>
<tr>
<td>The Princess Royal Trust for Carers</td>
<td><a href="http://www.carers.org">www.carers.org</a></td>
<td>Information for carers</td>
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<td></td>
<td>020 7210 4850</td>
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<td></td>
<td>0844 800 4361</td>
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It’s your practice
Get involved with your GP practice

• Patient involvement groups
• Communications from your practice

**Patient involvement groups**
Some GP practices have patient involvement groups. These groups are made up of individual patients who take an active interest in patient healthcare and are sometimes known as Patient Participation or Partnership Groups (PPGs).

The involvement groups can have many functions and each group and practice sets its own terms of reference. Groups can represent patients through collecting patient feedback, sharing best practice by working with other similar groups and working with the practices to improve patient services. They also help to run courses within the practice, volunteer support services and awareness events and provide newsletters and information directories. To find out about your local patient involvement group or to get one started you should ask at the reception desk of your practice. For details on PPGs you should contact the National Association for Patient Participation (NAPP), the umbrella organisation for PPGs in England, Scotland, Northern Ireland and Wales.
Patient Advisory and Liaison Service (PALS) - England only
PALS helps patients, carers, their relatives and friends with any questions or issues they may have with the care and service they are receiving by an NHS organisation in England including GP practices and hospitals. Each primary care trust (PCT) has a PALS officer and your local PCT can provide you with the contact details of your local PALS representative. Alternatively you can visit the PALS website at www.pals.nhs.uk.

Communications from your practice
Practice leaflets
Practice leaflets are a key source of information about your practice, the services you can access and the support and healthcare available more widely. Most leaflets are available in and around the waiting room but do ask at reception if you would like particular information about a specific topic. Whilst you should expect not to be sold or marketed products in your practice many do allow organisations such as local pharmacies, taxi firms, support groups and weight loss and fitness groups to place leaflets in the waiting room.

Practice websites
Most GP practices have their own website. The websites can be a useful source of information for finding out about opening hours, the services provided, the staff within the practice, relevant forms or online services such as booking an appointment. In addition, most practices in England have a profile page on www.nhs.uk where you can also find some of this information.

Patient letters
You, or where appropriate, a legal guardian or parent, may choose to be copied in to letters written from one health professional to another about you, for example a GP to a hospital doctor.
The person who writes the letter should confirm with you if you would like to receive a copy of the letter and how you would like to receive it, for example by post. You may choose not to be copied into these letters if, for example, you have problems with privacy at home.

Letters can also be sent to a patient’s carer if written permission has been given to do so. This may be particularly important when the letter refers to changes in medication. It is important that the contents of the letter come as no surprise to you and that you have been given the opportunity to discuss the information with a healthcare professional prior to the letter being received.

**Patient research**

Some practices engage in medical research. In these instances, and where relevant to you, you will be consulted before any research is conducted. If the practice wishes to share your medical records, they will ask your permission to do so. If you are interested in participating in medical research you should ask your practice for more details.

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**A good practice** provides opportunities for patients to get involved and have their say.

**Useful links**

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<td><a href="http://www.napp.org.uk">www.napp.org.uk</a></td>
<td>Patient participation groups</td>
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<tr>
<td></td>
<td>01932 242350</td>
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<tr>
<td>Patient Advisory and Liaison Service</td>
<td><a href="http://www.pals.nhs.uk">www.pals.nhs.uk</a></td>
<td>Find your local PALS office in England</td>
</tr>
</tbody>
</table>
A good GP practice should provide the following to all patients:

- A professional and helpful team of GPs, practice staff and other healthcare professionals.
- A private consultation room that provides reassurance and builds a patient’s confidence and trust.
- A practice that is accessible to everyone and provides a comfortable and organised environment.
- A referral or ongoing treatment process that is clear and well managed.
- A flexible and efficient appointment booking system.
- Access to a wide range of healthcare services to help address local health needs and inequalities.
- Assurance of systems to monitor and improve the safety and quality of care.
- An open and welcoming patient feedback policy with services continually improved or enhanced as a result of the feedback given.
- Appropriate, respectful and legal management of patient information.
- Opportunities for patients to get involved and have their say.
Some of the information used in this booklet has been sourced from the following organisations:

- BBC Health
- British Medical Association
- Citizens Advice Bureau
- Department of Health
- General Medical Council
- Independent Complaints Advocacy Service
- National Association for Patient Participation
- NHS Choices
- NHS Northern Ireland
- NHS Scotland
- NHS Wales
- Patient Association
- Princess Royal Trust for Carers
- RCGP Wales

It's Your Practice: A patient guide to GP services has been compiled by The Royal College of General Practitioners (RCGP).

It has been produced as part of the RCGP’s aim to build stronger relationships between patients and their doctors and encourage the involvement and inclusion of patients in their own care.

The guide provides helpful information on all aspects of using GP services: from finding and choosing a practice and how to get the most out of a GP consultation to accessing health records and understanding patients’ rights and responsibilities. The differences in GP services across the four nations are highlighted too. The guide is available as a whole and in individual chapters from the RCGP website at www.rcgp.org.uk.

The Royal College of General Practitioners
is a network of over 42,000 family doctors working to improve care for patients. We work to encourage and maintain the highest standards of general medical practice and act as the voice of GPs on education, training, research and clinical standards.

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