**![C:\Users\Julia Beasley\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\U78N903Q\stethoscope[1].jpg]()Goring & Woodcote Medical Practice**

**Patient Information & Sign Up Sheet**

**CHOICE OF GP PRACTICE**

**“Out of Area” Registration**

All GP Practices in England are free to register new patients who live outside their Practice boundary area. This means that you are able to join Practices in more convenient locations, such as a Practice near your work or closer to your child’s school. You may even re-join your existing Practice when you move home.

The Goring and Woodcote Medical Practice are now accepting “out of area” patient registrations. There are, however, some important things you need to know before choosing to register with a GP Practice away from your home address, for example:-

* These registration arrangements are voluntary for GP Practices. If we have no capacity at the time a patient approaches us about having “out of area” registration, or we felt it was not clinically appropriate or practical for you to be registered so far away from home, then we can still decline your registration. We would, however, explain our reasons to you.
* If you decide that you would like to register with the Goring & Woodcote Medical Practice as an “out of area” patient (this would mean you would be registered away from your home address), you would need to contact us (Goring Surgery 01491 872372 or Woodcote Surgery 01491 680686) or send us an email to **bobicb-ox.gwregistrations@nhs.net**
* Each request for an “out of area” registration is discussed by our Partners at their weekly meeting and a decision reached taking into account clinical factors. Once a discussion has taken place, we will let you know our decision.
* Because of the greater distance to your home, we will register you without the responsibility to provide you with a home visit when you are not well enough to come to the Practice yourself. When you register with a Practice away from home, without home visits and you become too ill to attend the Practice in person or we advise you that we are unable to assist you over the telephone, you would need to contact NHS 111 who would direct you to the right service for your current needs.
* You remain free to register with a Practice close to where you live, who would be responsible for providing home visits if needed.
* This move to out of area registration at the Practice may mean that you could change from a “dispensing patient” to a “non-dispensing” patient, for example, if your new home address is within a mile of your nearest Pharmacy, we will be unable to continue dispensing medication to you.
* You may, if your circumstances change, and it is no longer clinically appropriate or practical for you to be registered away from home, be asked to register with a Practice closer to your home, where your care may be better provided at that time. Patient safety with regard to medical care is always our key consideration.
* If you have a child age 5 years of age or under, we would ask you (and your children) register at a Medical Practice closer to your new home to ensure continuity of Health Visiting services (even if you are not currently using the Health Visiting Service). If you have no children and become pregnant, you should, by half way through your pregnancy, ensure that you are registered with a Medical Practice close to your home.
* You may also need to be registered with a Medical Practice close to your new home if you require some specialist services, eg mental health.

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**Patient Information**

**CHOICE OF GP PRACTICE**

**“Out of Area” Registration**

**Please sign the slip and return it to the Practice (address as below).**

**Name:** .......................................................................... (please print)

**Date of birth:** ..........................................................................

**New home address:** ..........................................................................

..........................................................................

**Contact number:** .......................................................................... (home)

 .......................................................................... (mobile)

**Non-dispensing patients only – please nominate a Pharmacy to receive your electronic**

**prescription:**

LLOYDS Goring              BOOTS Wallingford              ROWLANDS Cholsey

LLOYDS Benson           TESCO Didcot

Other (if other, please provide name & location inc postcode) ………………………………………………………….

I confirm that I have read the information sheet on “out of area” registrations and understand that as an “out of area” patient of the Goring & Woodcote Medical Practice I will not receive home visits. These would need to be provided via the NHS 111 service.

**Signed:** ..........................................................................

**Print Name:** ..........................................................................

**Date:** ..........................................................................

Please return this completed slip to the Goring & Woodcote Medical Practice, Red Cross Road, Goring on Thames, RG8 9HG (for Goring registrations) and to Woodcote Surgery, Wayside Green, Woodcote RG8 0QL (for Woodcote registrations). This information will be stored on your patient medical record. Thank you.

**Kamlesh Patel**

**Practice Manager**

*Telephone calls to and from the Practice are recorded for medico-legal, training and audit purposes.  Your data will be treated in the strictest confidence according to Practice and statutory regulations relating to information governance.*