POLICY FOR REMOVAL OF PATIENTS FROM PRACTICE LIST

**Introduction**

Removing patients from the Practice lists is an exceptional and rare event, which will be considered a final resort where the patient-practice relationship has broken down irretrievably.

In some circumstances it can be considered reasonable, or in the best interests of the patient, to remove patients from the list. The purpose of this policy, therefore, is to define the practice guidelines for removal of a patient from the practice list and to ensure that any concerns about removing patients from the list are dealt with fairly.

**SITUATIONS WHICH JUSTIFY REMOVAL**

**Violence or Unacceptable Behaviour**

If a patient has displayed any violent, abusive, or threatening behaviour towards the GP or any other member of Practice Staff that has required police intervention, that person can be removed without warning from the Practice patient list immediately.

When a patient: -

* Is physically violent or threatening towards a doctor, practice staff or other patients on the practice premises.
* Causes physical damage to practice premises or another patients’ property.
* Gives verbal abuse or makes threats towards the doctor, practice staff or other patients.
* Gives racist abuse, orally or physically.
* Sexual harassment of Practice staff or other patients.
* Stalking or inappropriate attachment to a GP or other member of staff.
* Is violent or uses or condones threatening behaviour to doctors (or some other members of the primary health care team) while visiting the patient’s home. Such behaviour may involve the patient, a relative, a household member, or pets (such as unchained dogs).
* In such cases that social media is used in appropriately with comments about the practice that are unsubstantiated,

\**Removal can extend to any family living at the same address as any future visits may expose practice staff to harm if visiting the home, or if the perpetrator attends the Practice with a family member.*

**Crime & Deception**

Where a patient: -

* Fraudulently obtains drugs for non-medical reasons.
* Deliberately lies to the doctor or other member of the primary health care team (e.g. by giving a false name or false medical history) in order to obtain a service or benefit by deception.
* Attempts to use the doctor to conceal or aid any criminal activity.
* Steals from practice premises.

If a patient fails to attend a pre booked appointment on more than one occasion in a week, a text message will be send to the patient for patients without a mobile number (Appendix 4 or Appendix 5 for patients without a mobile number) If the patient fails to attend more than 3 appointments within a 6 month period, an informal warning letter will be sent to the patient informing them should they miss more appointment they risk being removed from the practice list. If the patient fails to attend another appointment in the next 3 months since sending them a warning letter, the second warning letter will be sent to the patient. If the patient fails to attend another appointment after the second warning letter, this patient’s details will be brought to Practice Manager who will, with a consultation with a Senior Partner make a decision as to whether the patient is removed from the list.

**Embarkation**

* Where a patient has moved abroad for a period of 3 months or more.

**Other Reasons**

* Irretrievable breakdown of the Doctor/Nurse-Patient relationship.
* Where a patient’s behaviour falls outside of that which is normally considered reasonable and leads to an irretrievable breakdown of the doctor-patient relationship

**IF REMOVAL APPEARS NECESSARY (ISSUING A WARNING LETTER)**

In cases that do not involve violence or abuse, the decision to remove a patient should be taken after careful consideration. You may want to consider alternative solutions, such as transferring care to another GP. Patients who are abusing or misusing Practice services or staff should be given the opportunity to alter their behaviour if this is brought to their attention in the form of a warning letter. See **Appendix 1**.

A patient should have been issued a warning letter that they are at risk of removal (along with an explanation) within the last 12 months prior to removal. It is good practice to have warnings in writing as this allows the opportunity to present and consider the reasons to be given for possible removal.

A record of the warning (including date, time and reason) must be kept by the Practice as the Local Area Team or NHS England may request a copy, and copies should be retained by the Practice after the patient has left the Practice List.

**SITUATIONS THAT DO NOT JUSTIFY REMOVAL**

**Complaints**

A patient cannot be removed from a Practice list if they have made a complaint (formal or informal), nor for occasionally or persistently questioning clinical techniques, safety measures or other practice matters.

However, it may be agreed if the basis of the complaint results in the relationship between the GP and the patient breaking down and cannot be resolved (either because of complaints or legal action), that the patient may be advised to change their Practice.

**Patient Choice on Clinical Matters**

* Choosing a valid course of treatment that may be problematic for the practice (e.g. home treatment or confinement)
* Refusing to take part in local or national screening programmes (e.g. cervical screening)
* Refusing to take part (or allow dependants to take part) in local/national preventive medicine programmes (e.g. child immunisations)
* Does not comply with health advice given by GP.

**Other Reasons**

* Patient has highly dependent condition or disability.
* Treatment is considered to be too expensive.
* If patient has high degree of concern or anxiety about their condition.
* Discrimination of any nature against the patient and/or their relatives.

**PROCEDURE FOR REMOVAL**

**Violence / Crime and Deception**

Any incident involving violence, crime or deception will be immediately reported to *[Insert nominated person*], who will complete an incident report and bring it to the attention of the practice partners. Staff involved should also make a written statement at the time as further evidence. It may be so serious that the police may need to be contacted.

If the Police are contacted, the patient can be removed immediately by contacting the Commissioning Group / Registration Department/PCSE, advising them of the incident and giving them a log number that the police have given.

**For Less Serious Matters**

Each case will be discussed with all involved in the surgery and a partner. A majority agreement will be reached. If it is to remove the patient it can be done under the 8-day rule. The Commissioning Group and Registration Department/PCSE will need to be contacted and a brief outline given.

Following that agreement, the [*Insert nominated person*] will write to the patient and explain the reasons for removal. See **Appendix 2** for sample text. The Registration Department should then deduct the patient in the normal way. The patient is entitled to the continuation of care during those 8 days

**Distance**

On notification that the patient is no longer living within the practice boundary you will have to be removed, and if it is impractical for the patient to remain registered at the surgery, a letter will be sent to the patient advising of the need to re-register within 28 days elsewhere at a practice nearer to where they live or work.

If a patient that has moved out of the boundary area and would still like to remain as a patient but we always do recommend that they are better off to register near to home as If they get unwell they can, this will be discussed with the gp partners and if they are happy to keep patient on the list. The rules are the following:

* Cannot request for Home visit
* Emergency treatment will have attend the surgery.

Notification will be sent to the Registration Department/PCSE after 28 days if the patient has not been deducted by the Registration Department as they have not registered elsewhere.

**Embarkation**

On notification that the patient has moved abroad the patient will be removed from the Practice list within 3 months of that notification.

**Failure to attend pre-booked appointments**

If a patient fails to attend a pre-booked appointment on more than (*INSERT NUMBER*) occasion in the last year, a first warning letter will be sent to the patient, advising them that a further occurrence they will be sent second warning letter and could risk removal from the practice.

Warning letters are valid for a period of 12 months. Removal based on warnings greater than 12-months-old will be invalid – in this case a further formal warning and period of grace will be required.

If the patient fails to attend another appointment, the matter will be discussed at a practice meeting and a majority agreement will be reached as to whether the patient will be removed from the practice list. Following agreement, Practice manager will write to the patient and explain the reasons for removal.

Two warning letters will be issued before being removed from the practice list, they will have 8 days to receive treatment from the surgery after the 7th day they will be removed

**Guidance on removing patients due to irretrievable breakdown of the doctor - patient relationship.**

Occasionally patients persistently act inconsiderately, and their behaviour falls outside that which is normally considered to be reasonable. In such circumstances there may be a complete breakdown in the doctor-patient relationship.

**Steps to be taken within the Practice**

* Inform all appropriate members of the practice about the problem.
* Possible reasons for the patient’s behaviour (e.g. disagreeableness, cultural differences, mental illness, and personality disorder) will be discussed at a practice meeting.

**Steps to be taken with the Patient**

* Inform the patient, either personally or in writing, that there is a problem.
* Explain the nature of the problem to the patient.
* Obtain the patient’s perspective and interpretation of the situation.
* Obtain advice of a Medical Defence Organisation.

**Steps to be taken if discussion fails to resolve the problem**

* Suggest that another GP within the practice might better fit with the patient’s needs and expectations. (THIS MAY NOT BE POSSIBLE IN SMALL PRACTICES)
* Steps to be taken in actually removing the patient.
* Inform the appropriate Registration Department/PCSE in writing of your decision.
* Inform the patient in writing of the decision and the reason for removal from the list.
* Explain to the patient that he or she will not be left without a GP.
* Give the patient information on how to begin the process of registering with another GP.

**Steps to take if agreement is reached not to remove.**

* In some cases the removal may be queried by the patient or family. It is good practice to facilitate a meeting to look at if differences can be worked through.
* If agreement can be reached not to remove a patient after discussions, then it should be documented in writing to the patient the agreement and what is expected from both sides.

**Family Members**

When a decision is made to remove a patient from the practice list, the removal may well be extended to other members of the family or household. Careful thought must be given to this as it is not always necessary to remove family members.

**Removing other members of the household**

If the behavior of one member of a household or family has led to their removal, this does not mean that the removal of other family members should automatically follow. An explicit discussion, whilst protecting the confidentially of the removed patient, with other family members about the problem and the doctor's concerns will often obviate the need for any further action.   
  
In rare cases however, because of the possible need to visit patients at home, it may be necessary to terminate responsibility for other members of the family or the entire household. The prospect of visiting patients where a relative who is no longer a patient of the practice by virtue of their unacceptable behavior resides, or being regularly confronted by the removed patient, may make it too difficult for the practice to continue to look after the whole family.

This is particularly likely where the patient has been removed because of violence or threatening behavior and keeping the other family members could put doctors or their staff at risk.   
  
The practice should always consider how it would look to outside observers if a family were to be summarily removed from the list, in haste, without explanation, for a single misdemeanor or disagreement with one family member.

[*Insert nominated person*] will write to the family / household, explaining the removal. They will be allowed four weeks to re-register elsewhere rather than being removed from the practice list immediately.

**Responsibility**

Responsibility for implementing and monitoring the policy rests with the Practice Partners / Practice Manager.

The practice re-affirms its commitment to do everything possible to protect staff, patients and visitors from unacceptable behaviour and their zero-tolerance approach to any incident that causes hurt, alarm damage or distress.

**Steps to be taken to remove the Patient**

* Inform your NHS Local Area Team/PCSE in writing of the decision to remove the patient, including the reasons and circumstances that have led to this decision.
* Write to the patient informing them of the decision to remove the patient and the reason for doing so (you may want to get the advice of your Medical Defence Organisation before writing to the patient). Usually the timescales given can start from seven days.
* Provide information for the patient to register with another practice.
* If it is believed that the letter will result in a violent response from the patient towards the Practice, then the patient can be told by the most senior member of staff present at the time of the incident that they must not return to the practice. Information about finding a new GP can be found by the patient by contacting the Primary Care Organisation (usually the Local Area Team).

All requests for the Practice to remove a patient from the Practice List must be made in writing to your NHS England Local Area Team/PCSE (a list of LATs is available [here](http://www.nhs.uk/servicedirectories/Pages/AreaTeamListing.aspx)).

Two warning letters will be issued before being removed from the practice list.

Removal is expected to take effect Eight days following the LAT’s receipt of this request. If a patient’s treatment is to be administered at intervals of seven days or less, then the Practice must continue to deliver this care until their condition improves (unless the patient is registered with another practice before this time).

The Local Area Team must notify both the Practice and the excluded patient that the required paperwork has been completed and confirm that the patient is no longer registered at the Practice or on the Practice List.

**ZERO TOLERANCE PRACTICE POLICY**

**INTRODUCTION**

The Practice takes it very seriously if a member of staff is treated in an abusive or violent way.

The Practice supports the government's 'Zero Tolerance' campaign for Health Service Staff. This states that GPs and their staff have a right to care for others without fear of being attacked or abused. To successfully provide these services a mutual respect between all the staff and patients has to be in place.

Our Practice staff aim to be polite, helpful, and sensitive to all patients’ individual needs and circumstances. They would respectfully remind patients that very often staff could be confronted with a multitude of varying and sometimes difficult tasks and situations, all at the same time. The staff understand that ill patients do not always act in a reasonable manner and will take this into consideration when trying to deal with a misunderstanding or complaint.

However, aggressive behaviour, be it violent or abusive, will not be tolerated and may result in you being removed from the Practice list and, in extreme cases, the Police being contacted.

In order for the practice to maintain good relations with their patients the practice would like to ask all its patients to read and take note of the occasional types of behaviour that would be found unacceptable:

* Using bad language or swearing at practice staff
* Any physical violence towards any member of the Primary Health Care Team or other patients, such as pushing or shoving
* Verbal abuse towards the staff in any form including verbally insulting the staff
* Racial abuse and sexual harassment will not be tolerated within this practice
* Persistent or unrealistic demands that cause stress to staff will not be accepted. Requests will be met wherever possible and explanations given when they cannot
* Causing damage/stealing from the Practice's premises, staff or patients
* Obtaining drugs and/or medical services fraudulently
* We ask you to treat your GPs and their staff courteously at all times.

The Legal Position

As a responsible employer, the Practice has a duty as a provider of NHS healthcare to protect the health, safety and welfare of staff under the Health & Safety at Work Act. This includes a risk assessment of violence towards staff and taking steps to mitigate this under the Management of Health and Safety at Work Regulations 1999.

Staff members who are victims of violent conduct or assault have the right to sue their employers for compensation if the risk of violence could have been reduced or removed completely, but the employers did not act upon this information.

Examples of security issues:

* Security of grounds and car parking
* Security of premises – incl. storage, “out of hours”
* CCTV
* Cash and staff - storing, handling and transferring
* Security Systems
* Security of equipment – medical devices, computers
* Communication of national security alerts
* Information records
* Contingency planning.
* Security of employees
* Staff working on their own
* (Staff can be lone workers when making domiciliary visits or within a hospital department e.g. out of hours)

This list is not exhaustive.

For example a lone working risk assessment must provide the lone worker full knowledge of the hazards and risks to which he or she is being exposed and what they must need to do will something go wrong. Other responsible persons must know the whereabouts of lone workers and what they are doing;

Violence at Work

The practice acknowledges that there may be instances where violence and / or aggression forms part of a patient’s illness. In these circumstances, the issue will be discussed with the patient and form part of their care planning.

This information will be recorded in the patient’s medical record and flagged to ensure that members of staff are aware. In addition, where deemed necessary, appropriate support will be put in place, e.g. staff members do not see the patient alone.

## Definition of Physical and Verbal Abuse and Violence:

### Physical and verbal abuse includes:

* Unreasonable and / or offensive remarks or behaviour / rude gestures / innuendoes
* Sexual and racial harassment
* Threatening behaviour (with or without a weapon)
* Actual physical assault (whether or not it results in actual injury) includes being pushed or shoved as well as being hit, punched or attacked with a weapon, or being intentionally struck with bodily fluids or excrement.
* Attacks on partners, members of staff or the public
* Discrimination of any kind
* Damage to an employee's or employer's property

### The Practice supports the Zero Tolerance stance adopted by the NHS.

### The HSE (Health and Safety Executive) defines work-related violence as:

*"Any incident, in which a person is abused, threatened or assaulted in circumstances relating to their work".*

### Violence and aggression towards a person may also be defined as:

*"A physical contact with another person which may or may not result in pain or injury. The contact is uninvited and is an attempt to cause harm, injury or to intimidate. Non-physical aggression includes the use of language which causes offence or threatens the safety of a member of staff".*

### Under the Health and Safety at Work Act 1974, the practice will also undertake the following measures to ensure a safe work environment:

* Carry our risk assessments to assess and review the duties of employees, identifying any "at risk" situations and taking appropriate steps to reduce or remove the risk to employees, particularly if they are working alone.
* Assess and review the layout of the premises to reduce the risk to employees where physically possible.
* Assess and review the provision of personal safety equipment, such as alarms.
* Develop surgery policies, procedures and guidelines for dealing with physical and verbal abuse.
* Provide support and counselling for victims, or refer to suitably qualified health professionals.
* Make employees aware of risks and ensure employee involvement in suitable training courses.
* Record any incidents on a Significant Event form and take any remedial action to ensure similar incidents are prevented in future.

REMOVAL FROM THE PRACTICE LIST

The removal of patients from our list is an exceptional and rare event and is a last resort in an impaired patient-practice relationship. We value and respect good patient-doctor relationships based on mutual respect and trust. When trust has irretrievably broken down, the practice will consider all factors before removing a patient from their list, and communicate to them that it is in the patient’s best interest that they should find a new practice. An exception to this is in the case of immediate removal on the grounds of violence e.g. when the Police are involved.

Removing other members of the household

Because of the possible need to visit patients at home, it may be necessary to terminate responsibility for other members of the family or the entire household to ensure the safety of practice staff.

The prospect of visiting patients that is the residence of a relative who is no longer a patient of the practice, or the risk of being regularly confronted by the removed patient, may make it difficult for the practice to continue to look after the whole family. This is more likely where the removed patient has been violent or displayed threatening behaviour, and keeping the other family members could put doctors or their staff at risk.

Zero Tolerance Poster

Zero Tolerance Posters have been made available from ICB for use in practices and NHS healthcare providers premises.

**The poster on the following page can be used and resized in another template or a blank page and displayed in reception where patients can see it.**

****

Recipient’s Name

Address Line 1

Address Line 2

Town

Postcode

Dear [Mr/Mrs/Ms XXX]

**Re: XXXX**

I am writing to you about an alleged event / incident on **\*\*\*INSERT DATE HERE\*\*\*** at **\*\*\*INSERT ADDRESS HERE\*\*\*** where the following occurred;

**\*\*\*INSERT DESCRIPTION OF INCIDENT HERE\*\*\***

The practice views this behaviour as unacceptable because **\*\*\*INSERT HERE\*\*\***.

If you disagree with this description of what occurred, or there are circumstances that we are unaware of, which you believe would help explain what happened then please let us know (preferably in writing) as soon as possible.

If you would like to discuss this matter, please contact us to arrange a meeting at a time that is mutually convenient to discuss these concerns.

As a provider of NHS primary care services to the community, \*\*\*INSERT PRACTICE NAME HERE\*\*\* have a Zero Tolerance Policy for dealing with situations where our staff or services are abused.

Our policy is available to read on our website **\*\*\*INSERT WEBLINK HERE\*\*\***.

Such cases will be reported to the practice manager and discussed with a senior GP at the earliest opportunity to decide on the appropriate actions, which include;

* Sending of warning letter
* Removal from the practice list
* Reporting to police

Where there is serious or persistent misbehaviour it can result in the patient being removed from our practice list. Before taking any such action we would like to hear from you to understand why the above incident has occurred.

Please remember that we, as healthcare providers, are here to help you and other patients get the services they require. All we ask is that our patients act in a reasonable manner and considerate of the demands they make of us.

A copy of this letter will be kept on file. Please find enclosed a copy of our complaints leaflet for your information.

Yours sincerely

**Name(s)**

**Title**

**APPENDIX 2 : TEMPLATE LETTER TO PATIENT – REPEATED BEHAVIOUR**

Recipient’s Name

Address Line 1

Address Line 2

Town

Postcode

Dear [Mr/Mrs/Ms XXX]

**Re: XXXX**

I am writing to you about an alleged event / incident on **\*\*\*INSERT DATE HERE\*\*\*** at **\*\*\*INSERT ADDRESS HERE\*\*\*** where the following occurred;

**\*\*\*INSERT DESCRIPTION OF INCIDENT HERE\*\*\***

The practice views this behaviour as unacceptable because **\*\*\*INSERT HERE\*\*\***.

We have written to you previously on **\*\*\*INSERT DATE HERE\*\*\*** and warned on that occasion of our Zero Tolerance Policy on serious or persistent misbehaviour, which can result in patients being removed from our practice list. Before taking any such action we would like to hear from you to understand why the above incident has occurred.

If we do not receive a response from you by **\*\*\*INSERT DATE HERE\*\*\*** we may decide to notify the NHS England to have you removed from our list.

Please remember that we are here to help you. All we ask is that our patients act reasonably and are considerate in the demands they make of us.

Yours sincerely

**Name(s)**

**Title**

**APPENDIX 3: TEMPLATE LETTER TO PATIENT – REMOVED FROM PRACTICE LIST**

Recipient’s Name

Address Line 1

Address Line 2

TOWN

Postcode

Dear [Mr/Mrs/Ms XXXXX]

Re: XXXXXX

Further to my letter of **\*\*\*INSERT DATE HERE\*\*\***, copy enclosed for information, I am writing to you about the incident/situation\* on (date) at (time) and (place) when …....... (describe)….... occurred.

We have investigated this incident and after due consideration, we have taken the decision to ask the NHS England to have you removed from our patient list. This is because we feel that

\*\*\*INSERT AS APPROPRIATE\*\*\*

Situations that justify removal from our patient list;

* Violent/aggressive behaviour
* Criminal acts/deception
* Distance/outside designated practice area
* Failure to attend appointments
* Breakdown of Doctor/Patient relationship

NHS England will be in touch with you in due course about finding another practice with which you can register.

**\*\*\*ATTACH PRACTICE COMPLAINTS LEAFLET OR WEBLINK IF THIS IS ON PRACTICE WEBSITE\*\*\***

Yours sincerely

Informal letter to patients who miss an appointment

Dear

According to our records you had an appointment booked with (clinicians name) on (insert date/ Time) but did not attend for the appointment. If this is incorrect can you please notify the practice.

As I am sure you can appreciate, there is a large demand on appointments at the practice and this appointment could have been used by another patient if you had informed the practice that you no longer required to be seen.

The practice has a policy on patients not attending appointments which in extreme cases can result in the patient being removed from our practice list.

If you wish to cancel the appointment you can do so by Calling the reception on 01922 624605.

Please help us to utilize our appointments as best as possible by cancelling any future appointments that you do not need.

Many thanks for your co-operation

Yours sincerely,

**Appendix D: Removal of a patient from the list due to repeated DNAs**

Dear ,

According to our records you had an appointment booked with (clinicians name) on (insert date/time) but did not attend for the appointment. If this is incorrect could you please notify the practice.

We previously wrote to you on (date) and (date) as you had missed appointments on (date/time) and (date/time).

This is now another occasion since sending you a letter about this and you have not attended an appointment on (date/time) and have not cancelled this appointment.

I have reviewed your clinical records and see no reason why you should not have been able to cancel these appointments. In accordance with our practice policy and NHS General Medical Service Regulations 2015 the practice will be removing you from our patient list. The practice has notified NHS England of this on (date). You will be removed from our practice list on the eighth day following this notification to NHS England. We would recommend that as a priority you register with another local practice who will be able to help you with your health needs. A list of local practices can be found at www.nhs.uk, there is a search facility available on the home page of this site that by entering your post code you will be able to find a list of local practices.

I would like to take this opportunity to say that as a practice we do not take the decision to remove a patient from our list lightly but need to ensure that we are able to provide for all of our registered patient population to the best of our ability and that this is made more difficult if a patient repeatedly misses appointment without cancellation. I wish you the best for the future.

Yours sincerely,

**APPENDIX 1 – WARNING LETTER**

Dear [*Insert Name*],

I am [*insert name*], the [*insert title*] for [*insert practice name*]. As part of this role, I am responsible for protecting staff at the practice from [*abusive / violent / unacceptable*] behaviour.

I am writing to discuss the report/s I received about [*the event / behaviour / incident*], which took place on [*insert date*]. As you are already aware [*insert details of actions already taken*]. A repeat of such behaviour in the future will not be tolerated by the practice.

I wish to warn you that should there be a recurrence of this behaviour, action [*may/will*] be taken to remove you from the patient list and you will be required to register elsewhere.

If you wish to discuss this further please contact {insert Name} and position to discuss further.

Yours sincerely,

The Partners

**APPENDIX 2 - PRACTICE-INITIATED**

**(NON-URGENT) REMOVAL**

Dear [*Insert Name*],

You will recall I wrote to you on [*Insert date of initial warning letter*] warning you that the practice would remove you from the patient list should there be a recurrence of [*the event / behaviour / incident*].

I regret to note that this previous warning does not appear to have resolved this issue and as a result I must advise you that you have been removed from the practice list. The principle reason (s) is:

[*Insert a brief and concise statement of the reason for removal. e.g. “Repeated failure to attend pre-booked appointments”*]

This removal takes immediate effect / is effective [*Edit as appropriate*] from [*Insert date*].

You are advised to register elsewhere for medical services, and for your information, the address (es) of other practices within the area are:

[*Insert the names and addresses of other local practices*]

Or in the event of any difficulty you may contact the [*Insert Name*] GP Registration Department:

[*Insert address*]

Yours sincerely

The Partners

**APPENDIX 3**

**REMOVAL OF PATIENTS WHO HAVE RELOCATED**

**OUT OF AREA**

I note that you have registered a change of home address which is outside the practice’s designated area. As the practice is unable to continue to provide you with medical services, it will be necessary for you to register elsewhere within the next 28 days.

For your information, practices local to your new location are:

[*Insert name and address of local practices*] (Where known)

In the event of difficulty in obtaining a new practice you may contact

[*Insert the name and address of the local GP Registration Department*]

Please arrange to register elsewhere. Your new surgery will arrange for the transfer of your medical records. The GP Registration Department have been asked to remove you from our list of patients, and this will normally take effect after 30 days. It will no longer be possible to provide medical advice.

Thank you for attending the practice and hope that you are successful in finding a new GP.

Yours sincerely

[*Usual doctor*]

***GENERAL INFORMATION (NOT TO BE INCLUDED IN PATIENT CORRESPONDENCE)***

**The practice should have robust plans in place to ensure that patient notes are returned to the Health Authority on request and in line with the system in place with each individual Health Authority which is normally on a weekly pick up**

**Remember when returning notes to include all sets of notes. Some practices store overflows in another area so they should also be attached. It is also necessary to print of a FULL medical note’s summary with all attachments and place together.**

**The computer system and medical record will need to be updated.**