

Version 2 – Published July 2021

This guide will be regularly updated. Please go to the 'Registrations' page of the PCSE website to ensure you are reading the most recent version of this guide:

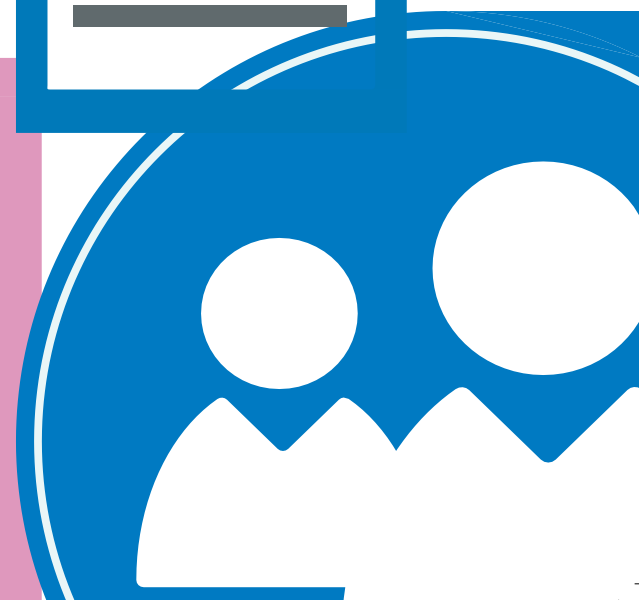
<https://pcse.england.nhs.uk/services/patient-registrations/support/>

NHS

England

Primary Care Support England

A Guide to Patient Registrations



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How is patient registration information updated?

When GP practices update patient registration information on clinical systems, PCSE uses that information to update National Health Application and Infrastructure Services – NHAIS – which is the system that sits behind Open Exeter.

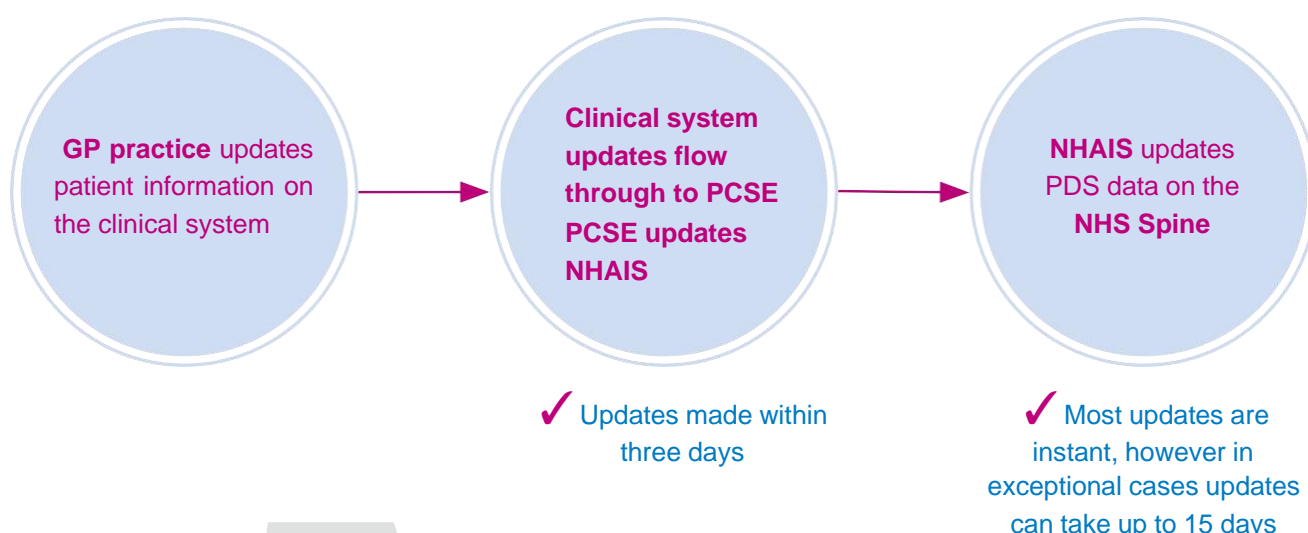
What is NHAIS?

NHAIS is a NHS IT system that holds the National Patient Register. The data held on this system is currently used to calculate GP payments and to provide lists of patients to call/recall for a number of national screening programmes.

Therefore, it is important that GP clinical systems reflect the information on NHAIS. This will ensure practices are paid correctly and patients are included in relevant screening programmes.

When NHAIS is updated, changes are fed through and made to patient demographic data (PDS) on the NHS Spine.

Please note that NHAIS is different to GP clinical systems and PCSE cannot see the data on the systems that GPs operate.

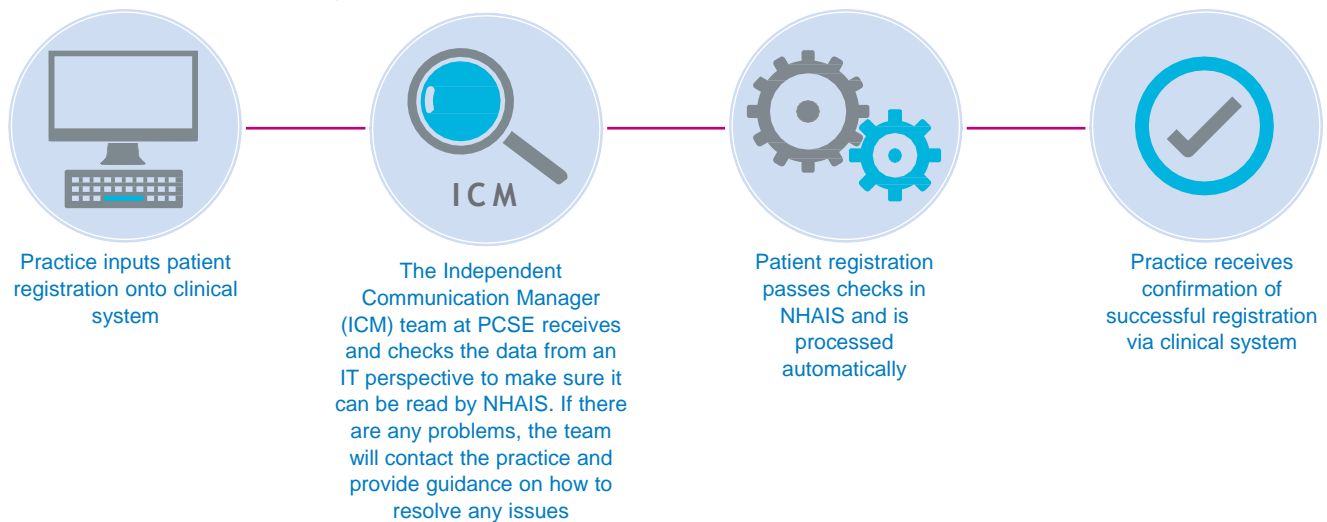


Overview of the Registrations process

Most registrations are processed automatically. Registration requests can fail automatic checks for a number reasons, for example:

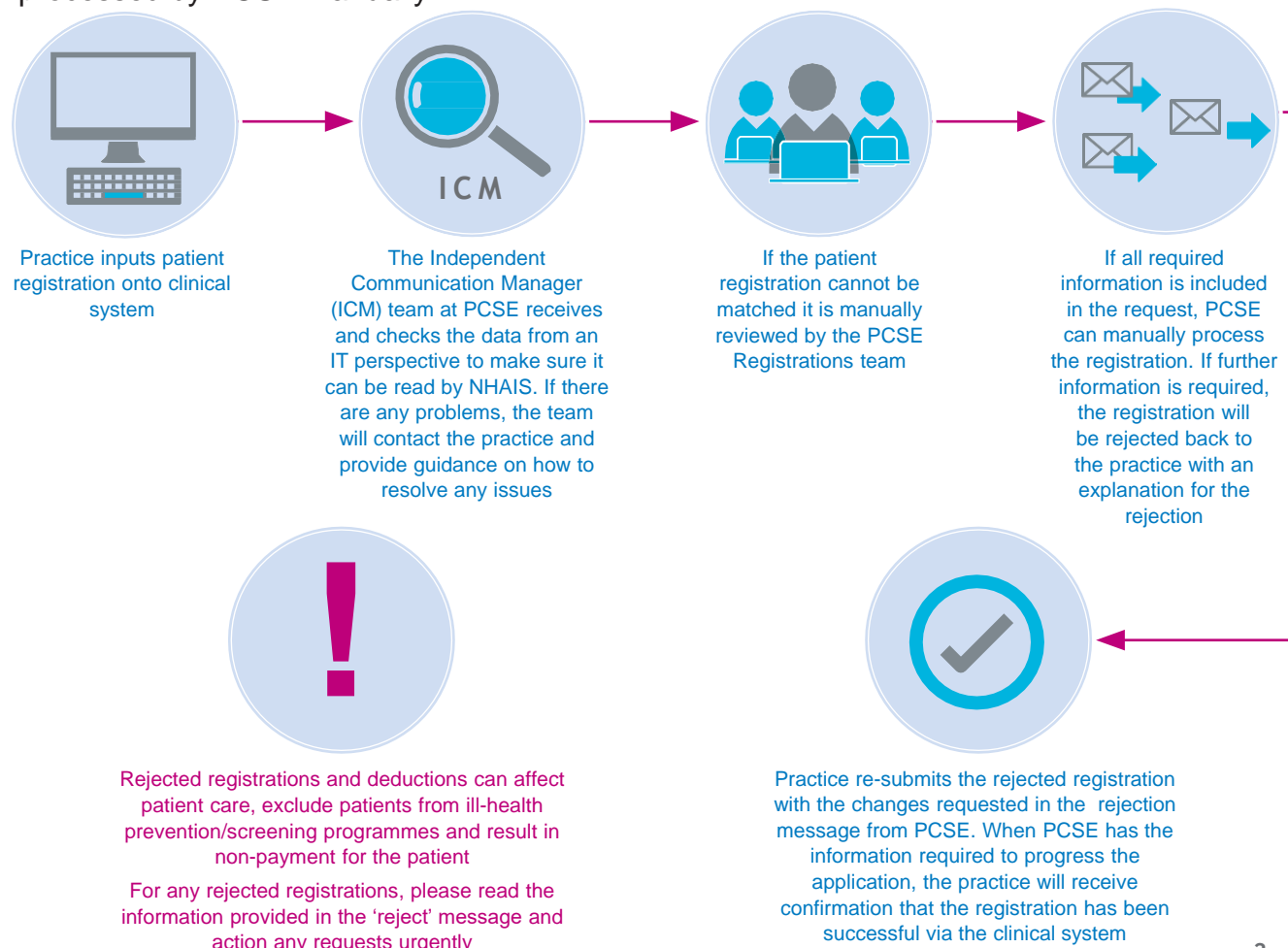
- the personal information provided doesn't match the information held on the NHS Spine, or
- free text notes have been included inappropriately.

Normal patient registration process



When a registration fails automatic checks

When the patient registration cannot be matched automatically, it will need to be processed by PCSE manually.



Mistakes to look out for and avoid

Ensure GP Links are turned on and use your NHS smartcard when registering patients and updating their details

Registrations, deductions and amendments to patient details made outside of NHAIS/Exeter and directly to PDS and/or under 'High Security' on practice clinical systems can leave patients excluded from screening programmes, may affect patient care and may result in non-payment for the patient.

Deducting child patients under High Security will not remove them from immunisation programmes

If your practice is no longer providing the treatment for a child patient, please note that deducting children under High Security will not remove them from inclusion in your practice immunisation targets. This is because NHAIS (which updates immunisation target data) will not be updated.

Requesting the deduction as normal – through GP links - will update NHAIS and therefore ensure your immunisation targets are accurate.



Using the High Security setting on your practice clinical system

Practices should only use High Security when requested to do so by PCSE.

Any actions carried out under High Security only update the clinical system, and no information is sent to PCSE.

High Security should only be used as a corrective measure for failed GP link transactions when PCSE advise it is necessary.

Typical examples of when High Security should be used are as follows:

Patient is active on the clinical system but not registered with PCSE

The practice should manually deduct the patient under High Security using their security password, come out of High Security and then send a new registration through the GP links system as if they are registering the patient for the first time.

Patient has been deducted by PCSE but remains registered on the clinical system

The practice should manually deduct the patient under High Security.

Patient's registration is unacknowledged on the clinical system but is registered with PCSE

The practice should manually approve the registration under High Security. This will remove the patient from the 'unacknowledged list' on the practice clinical system.

If assistance is needed in manually deducting/approving registrations, please contact your clinical system supplier.

Please note:

- All deductions should be sent via the GP links system
- Patients should not be manually deducted from your clinical system unless requested by PCSE
- Manual deductions made under High Security will only remove the patient from your clinical system and will not remove them from the NHS Spine system or NHAIS records. All three systems should match for patient safety reasons
- In the event that a manual deduction is made under High Security, please inform PCSE via the online enquiries form at www.pcse.england.nhs.uk/contact-us. Please select 'Registrations' from the drop-down menu, and include the reason for the deduction and a forwarding address for the patient in the message.



GP Links and GP Codes

GP links work using two codes that are attached to Registering GP's on your clinical system. These two codes are:

- the local GP code and
- the GP's GMC number.

Please ensure that your GP codes are kept up to date on your clinical system.

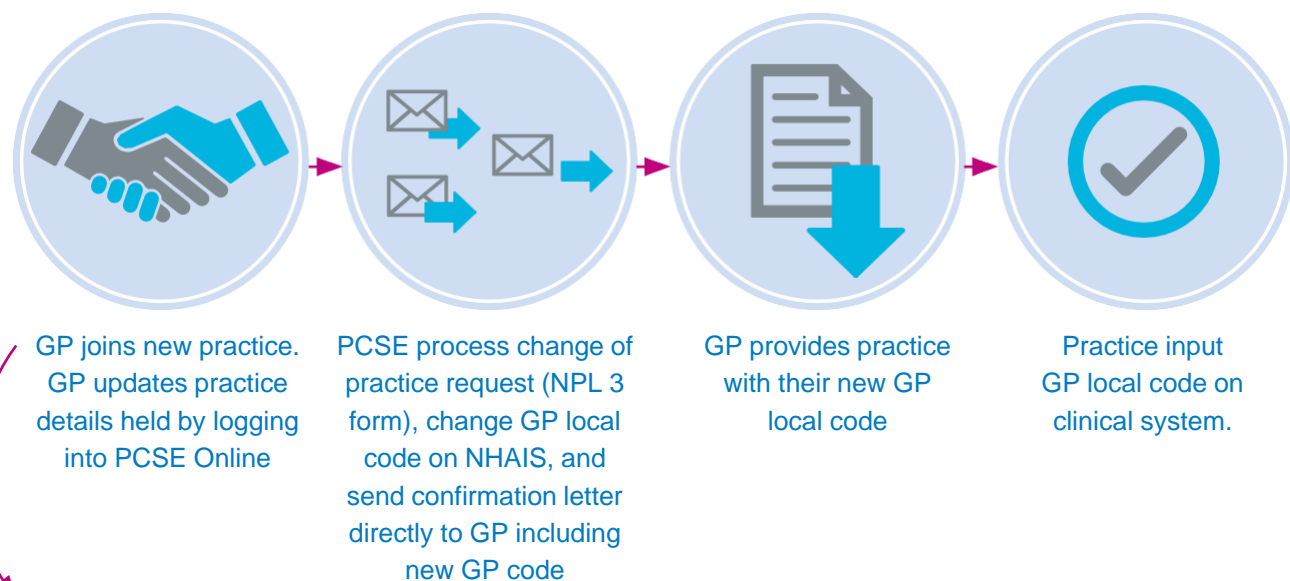
Both codes must match the data held on NHAIS in order for data sent by clinical systems to be accepted and updated on NHAIS.

When the data does not match, PCSE is unable to process new registrations or amendments or accept deduction requests.

Although these codes are not visible at the point of registering a new patient they must be correctly input when a GP is added to your clinical system.

When a new GP joins your practice, the PCSE Performers List team will confirm the GP's new local GP code in writing, directly to the GP. This code must be added to your clinical system.

Unless your practice has a pooled list, the process is as follows:



Please see <https://pcse.england.nhs.uk/services/performers-lists/gp-performers-list-for-england/> for Performers List processes.

If your practice has a pooled list, you will have one generic code that covers all GPs in the practice and this code does not change.

24 hour retirement

If a GP takes 24 hour retirement, their local GP code will be changed on NHAIS and will also need to be changed on the clinical system. Notification of the GP's new local GP code will be sent directly to the GP once the PCSE Performers List team have processed the 24 hour retirement.

The old local GP code must not be used for new registrations. The Performers List team will contact the practice to discuss the transfer of patients which must also be reflected on the practice clinical system. The transfer of the patients on the clinical system must take place on the same day as the transfer of the patients on NHAIS.

If the practice has a pooled list, the code will not need to be changed.

Setting up a pooled list

If your practice would like to set up a pooled list, please contact the Performers List team.

Go to www.pcse.england.nhs.uk/contact-us and select 'Performers Lists' from the drop down menu. In the message box please state your practice would like to set up a pooled list and ensure the following information is included in the submission:

- Practice code
- Practice name
- Pooled list name (usually this is the practice name) and start date.

The Performers List team will then contact the practice to discuss next steps in enabling the pooled list to be set up on their clinical systems.

Confusions and duplicates

Confusions

This is where two patients have the same NHS number, and often occurs when a patient registers with a practice, and the incorrect patient details are selected from PDS on the NHS Spine, confusing the two patients' details.

This can cause medical records to be combined for the two patients and can often result in the patient/s being registered between practices. Confusions carry a clinical risk, as they can result in a patient missing screening programmes and incorrect medical care being provided.

Confusions can be avoided by following the 'tips for smooth patient registrations' provided on the following page.

Duplicates









This is where you find one patient has two NHS numbers. This will usually happen when a patient registers twice with the NHS using slightly different registration details, which leads them to be issued with a second NHS number. Cases like this often lead to the medical records being mixed between two medical record envelopes, which could lead to the full patient history not being fully reviewed by practitioners.

Please notify PCSE of any confusions or duplicate cases. To do this, please go to www.pcse.england.nhs.uk/contact-us and select the dedicated Confusions and Duplicates online form.

Once notified, PCSE will investigate the case and update NHAIS. PCSE will then log a request with the National Back Office to update the data held on the NHS Spine. The National Back Office can take between 4 – 6 weeks to return to PCSE. We will then complete and close the case within five working days.

Tips for smooth patient registrations

Whilst all clinical systems are slightly different, we have pulled together some hints and tips to help ensure patients are registered at practices as smoothly as possible.

	<p>Ensure details are input correctly onto the clinical system</p> <p>Ensure that all details provided on the GMS1 form are input accurately onto your clinical system.</p>		<p>In particular check the following fields have been entered correctly:</p> <ul style="list-style-type: none"> ■ Birthplace ■ Current home address and postcode ■ Previous home address and postcode ■ Previous GP
	<p>When searching for a patient, make sure your smartcard is inserted and double check you have selected the correct patient</p> <p>When searching for a new patient using your clinical system it is important to use the exact details provided by the patient, as there may be two or more patients with very similar details.</p>		<p>Please be careful to select the right patient from the NHS Spine, as this will help prevent NHS numbers and / or records being duplicated or merged.</p>
	<p>Do you need to use free text/ additional notes?</p> <p>To ensure registrations are processed efficiently, we recommend that the free text / additional notes field isn't always used. It is not mandatory, and text entered in this field can stop registrations going through efficiently.</p>		<p>When free text isn't needed:</p> <ul style="list-style-type: none"> ■ Identification seen (unless in relation to a change to a patient's date of birth) ■ New registrations ■ New birth/baby ■ GMS1 signed ■ Passport/marriage certificate/ID seen <p>When free text should be added: If you have any information that would support and assist in tracing a patient, or if you are re- registering a patient under Choice of GP - where your practice agree to maintain the patient on your list but are not providing home visits.</p>
	<p>Treat patients transferring from other parts of the UK as a normal transfer in</p>		<p>The registration type selected on the clinical system for these types of patients should be the same as if the patient was moving from a practice in England.</p>

Common reasons for rejection of patient registrations

Here are a few of the most common reasons for a registration request being rejected:

- **Birthplace has not been provided**
On a first registration or registration for an immigrant
- **No trace of address**
i.e. the address provided by the practice does not exist on Royal Mail post code finder, Google or on NHAIS (this is often due to spelling errors)
- **The patient's previous address was Scottish or Northern Irish**
If this is the case, please supply address and postcode in the 'previous address' field. You also need to send the registration request as a 'previously registered with NHS' type. This should enable the registration to be processed more efficiently
- **Where PCSE cannot trace the NHS number for the patient**
This can be helped by including all the information provided on the GMS1 form including previous names and addresses. If it is the patient's first registration in England or Wales having arrived from abroad, please ensure the correct 'registration type' is selected and the date of entry to the UK is supplied.



What is a rejection?

A rejection happens when a patient registration is sent from the practice

clinical system to PCSE, and the Registrations Team do not have the correct information needed to process it. In this case, the team will send it back to the practice clinical system as a rejection, **along with the additional information required to successfully process the registration.**

Guidance on Residential Institute (RI) Codes

Adding a Residential Institute Code to a patient record is the responsibility of the GP practice.

There are currently a number of different processes used in different areas to link patients to residential institutes. To make things simpler to follow, two new RI codes have been created that can be used nationally.

V0 – is to be used for patients who reside in a care residential home

Y0 – is to be used for students who are attending a school or university

- Please note that the 0 in the code is a zero
- You will need to set both codes up on your clinical system in order to add them to patient records. Practices are not required to recode all previous RI codes. If you don't know how to set the code up in your clinical system, please contact your system supplier
- Please ensure you use the correct code for the type of patient

Please inform us if a new care home opens in your practice area.

- PCSE maintains lists of care/residential homes. In order for the V0 RI code to be added to a patient's record on NHAIS/Exeter, the care home must be listed on the NHAIS/Exeter patient registration system

If a new care home opens in your area, please email pcse.registrations-preston@nhs.net to let us know, and include the following information:

- The name of new care home
 - The full postal address of the new care home
-
- Please ensure that the home is listed with the Care Quality Commission (CQC) before requesting it is added to the list of homes. Only CQC registered care homes will qualify for the additional global sum weighting and the V0 code
 - This should not stop you from registering patients immediately as the RI code can be added to the record once PCSE has confirmed the home has been added. You will need to register the patient as usual, then once PCSE has confirmed the care home has been added, add the code to the patient record and send to PCSE as an amendment via GP links.

Requesting the removal of patients from your practice list

Historically, there have been local variations in the immediate removals process. NHS England directed that from 5 February 2018, all immediate removals will be processed by PCSE within 24 hours of receipt of notification from the GP practice. This can either be by phone or by email. The incident must have been reported to the Police for the immediate removal to be processed. Secondary or local commissioner approval will not be necessary.

The updated policy includes a provision for the Special Allocation Scheme (SAS) provider to determine whether the removal request is appropriate.

To request removal of a patient from your practice list (either immediate or within eight days), please use the dedicated Patient Removal Form, accessed via the [Contact Us](#) page on the PCSE website.

Deducting patients

If you are deducting a patient for any of the following reasons:

- They have moved outside of the practice area and you do not wish to treat the patient under the Out of Area Scheme
- Mail has been returned as 'undelivered', or
- Whereabouts are unknown

Please note that PCSE will place the patient on a pending 30 day removal and reject the deduction request. Your practice will receive a notification of this rejection via the clinical system along with a rejection message confirming that the patient will be automatically deducted within 30 days.

A deduction request will then be sent on the 31st day or upon PCSE receiving a registration from another practice.

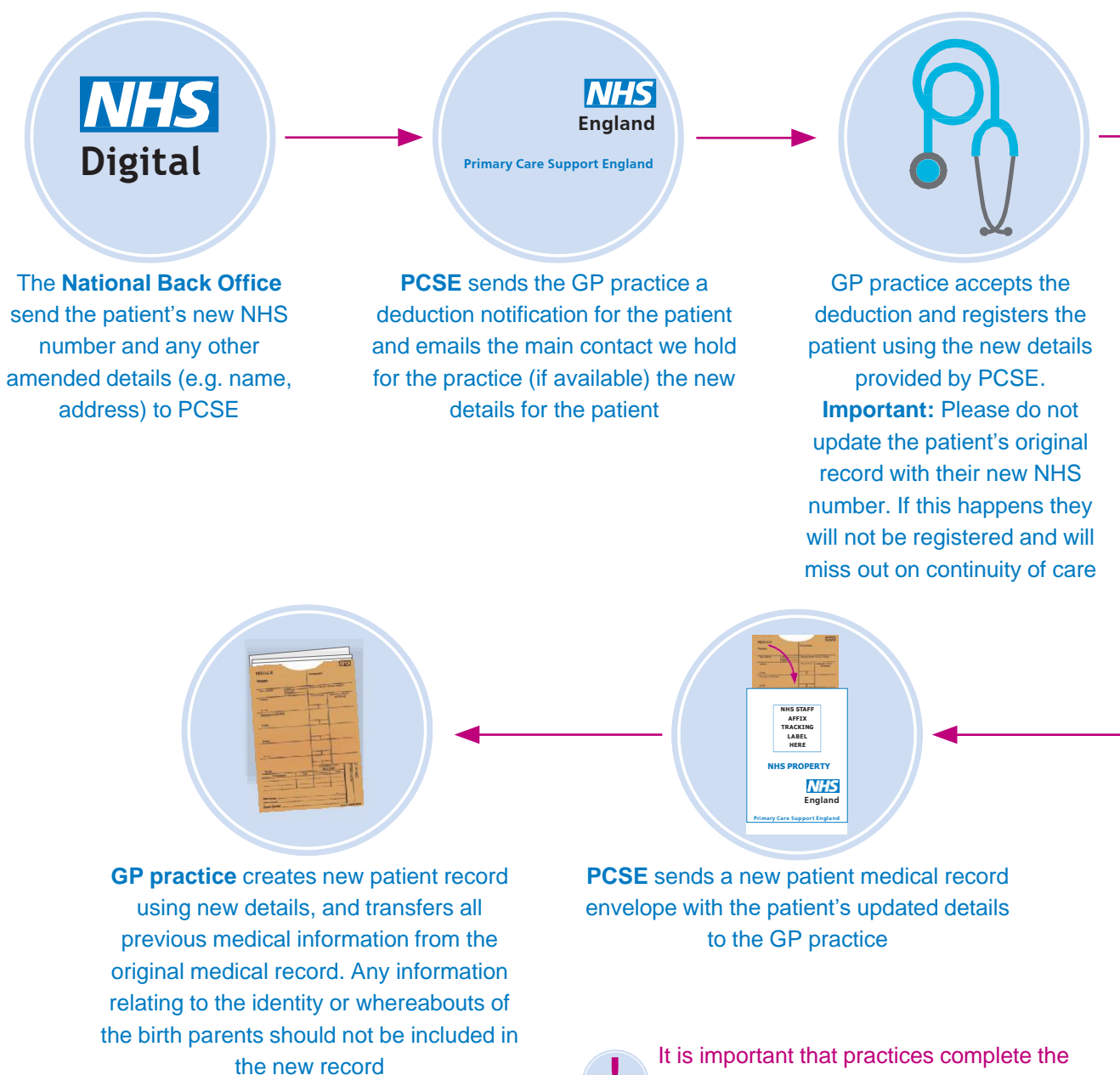
Please do not send repeat deduction requests for these types of patients.



Process for registering an adopted patient

When a patient is adopted, they are given a new NHS number and must be registered as a new patient at your practice. All previous medical information relating to the patient needs to be transferred into a newly created medical record.

The process is as follows:



Process for registering a patient gender re-assignment

Patients may request to change gender on their patient record at any time and do not need to have undergone any form of gender reassignment treatment in order to do so.

When a patient changes gender, the current process on NHS systems requires that they are given a new NHS number and must be registered as a new patient at your practice. All previous medical information relating to the patient needs to be transferred into a newly created medical record. When the patient informs the practice that they wish to register their new gender on the clinical system, the practice must inform the patient that this will involve a new NHS number being issued for them. Subsequent changes to gender would involve a new NHS number. Please confirm this has been discussed with the patient when notifying PCSE.

The process is as follows:



GP practice notifies PCSE that a patient wishes to change gender via our dedicated online form [here](#). The practice should include the patient's name and NHS number in the notification to PCSE, plus confirmation that they have discussed with the patient that this will involve the creation of a new NHS number

PCSE sends the GP practice a deduction notification for the patient and emails the main contact we hold for the practice (if available) the new details for the patient

GP practice accepts the deduction and registers the patient using the new details provided by PCSE. **Important:** Please do not update the patient's original record with their new NHS number. If this happens they will not be registered and will miss out on continuity of care



GP practice creates new patient record using new details, and transfers all previous medical information from the original medical record. Any information relating to the patient's previous identity should not be included in the new record

- The patient's previous name and any gender specific terms should be removed as should previous NHS number
- A black marker can be used to redact the record
- Electronic notes should be printed, redacted and re-scanned onto the new patient record.



PCSE sends a new patient medical record envelope with the patient's updated details to the GP practice

! It is important that practices complete the new registration for the patient within five working days to ensure no interruption to patient care

Gender assigned from male to female:

Following the change of gender the individual will be recorded as female on the GP clinical system and on all linked NHS national systems including cervical screening. The woman will receive automatic invitations from the call and recall system until the absence of cervix is formally notified to the cervical screening team using the no cervix ceasing request form.

Gender assigned from female to male:

Inviting your patient for cervical screening and the communication of results becomes the responsibility of the practice. The patient database can not automatically call or issue results to a person whose gender is noted as male.

Further information

We have lots of information and frequently asked questions for Registration queries on the PCSE website. Simply go to www.pcse.england.nhs.uk/services/patient-registrations or the Help section.

You can also send us enquiries via our enquiry form. Go to www.pcse.england.nhs.uk/contact-us and select the appropriate form for your enquiry from the drop-down menu.