Access to Primary Care Services for Patients with “No Fixed Abode”:

March 2018

A follow-up of The Gatekeeper’s Report
Acknowledgements

Expert Citizens C.I.C. would like to thank the primary health care centres that took part and those who took time to respond, Healthwatch Stoke-on-Trent and VOICES. A special thanks to GP Students; Sara Day, Rachel Morris, Rebecca Charles, Luke Bradshaw, Kajetan Karlikowski.
Introduction

Expert Citizens are a Community Interest Company who work to make services an even better experience for those needing support in Stoke-on-Trent. We all have experience of multiple needs: homelessness, offending behaviours, addiction, mental ill-health and poverty. As ambassadors, we use our experience and insight to raise awareness of multiple needs and to reduce stigma and stereotyping.

Working alongside VOICES, Expert Citizens encourage local decision-makers to firstly listen and learn from lived experience. Expert Citizens have told their stories to a wider audience via BBC Radio 4, ITV, The Guardian and in the national and local press.

Over the past 18 Months, the Expert Citizens have been host to 2 rotations of 5, year 5 GP students from Keele University. The first rotation - August to December 2017, conducted research to gauge the reach of the GP cards produced as learning from the original report. These cards were distributed across the city for those who were finding it difficult to register with a GP. The cards state that the person wanting to register does not require identification or an address to register.

The second rotation, December 2017 to March 2018, reviewed findings from the first rotation and studied the Gatekeepers report (2016). Together with Expert Citizens, they agreed to duplicate the mystery shopping exercise. Using the same script as in Gatekeepers (2016) the student group evidenced their findings as a direct result in the following report.
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**Aims & Objectives**

This project aims to evaluate access to primary care services for patients with no fixed abode (NFA) and to establish if there has been any change in the willingness of primary care services to accept NFA patients compared to the Gatekeepers Report (2016).

**Our objectives were:**

1. To establish the number of primary care services that would accept NFA patients in Stoke-on-Trent.
2. To identify barriers to NFA patients registering with a primary care service.
3. To explore operating procedures for registering NFA patients at primary care services who accept NFA.

**Methodology**

This project was conducted in three stages. A “mystery shopper” exercise was conducted by the group; all 52 General Practices across Stoke-on-Trent were contacted via telephone using a script formulated from the Gatekeeper’s Report (2016). We recorded quantitative data regarding which practices registered patients with no fixed abode, and how many accepted patients with no identification (ID). We collected direct quotes from the telephone conversations, which provided qualitative data.

Following data collection, we contacted the primary care services who accepted NFA patients without ID. An email was sent asking if they could provide more information regarding their procedures for registering NFA patients, and the number of registered NFA patients at their practice. We also asked the practices to take part in a discussion about their procedures and any barriers they have faced. Once the data had been collected it was analysed using Microsoft Excel.
Results

The number of Primary Care Services that would accept NFA Patients

We gained contact with 45 general practices in Stoke-on-Trent. The reasons for the reduction in number compared to the original report included practices shutting down, telephone lines not working and practices merging together.

Out of 45 general practices, 40 (89%) of these were willing to accept patients with no fixed abode. However, when asked to qualify any restrictions regarding registration policies, the number of practices who were willing to register NFA patients without any restrictions dropped to 12 (27%) which is the same as in the Gatekeepers Report. The other 28 practices impose various restrictions which would potentially prevent NFA patients from registering.

Figure 1:
Willingness of Primary Care Services in Stoke-on-Trent to accept NFA patients.
The number of Primary Care Services that would accept NFA Patients

Forms of Identification

In order to register an NFA patient, 17 practices required identification. Non-photographic ID was accepted at 10 of these practices, and suggestions included a utility bill with address, benefits letter from the Department for Work & Pensions (DWP), or birth certificate. The remaining 7 practices required a form of photographic ID.

The requirement for an NFA patient to provide ID is a major barrier to accessing healthcare. Many NFA patients do not have ID, and do not have the financial means to buy one. Even providing a letter from the DWP will soon become impossible as the department has decided to stop issuing letters. For many NFA patients, a lack of ID will make it difficult to access any community healthcare. It seemed under-appreciated that NFA patients might not have ID.

Address/Care of Address

The requirement for patients to have an address was also identified as barrier to registering. The mystery shopper exercise revealed that practices had differing policies regarding this issue. We assessed the willingness of each practice regarding the use of their own address or whether they would accept VOICES as a care of address.

Out of the 40 practices who accepted NFA patients, 5 practices were happy to use VOICES as a care of address. Two of the practices expressed reluctance to use their own address but would accept VOICES as an alternative. 9% of practices stated they were happy to use their own address as a care of address.

It was identified that many practices would only accept an NFA patient if they were “residing” in the area, or if their care of address (VOICES included) was within their catchment area. Ten practices would not register clients who were not residing in the area. Despite explanations that anyone who is of no fixed abode cannot prove they are or are not “residing” within an area, these practices were unwilling to allow registration.
Care of Address

Figure 2:
Practice responses to care of address.

Lack of Knowledge of Front-of-House Staff

Five practices said they would not register NFA patients. Reasons cited included:

“we cannot register someone with no paperwork”, “we don’t take anyone until they prove who they are”, “cannot accept anyone without ID”, “cannot accept anyone outside of the catchment area” and “go to a practice that deals with NFA patients”. Interestingly, those who said no did not defer to the Practice Manager when giving this information. This highlights that the barriers faced by NFA patients may be unknown to Practice Management. Many of the practices that accepted NFA patients had to consult the Practice Manager for a definitive answer. This highlights a lack of knowledge of reception staff regarding procedures.

Stigma associated with NFA patients

Generally, practices did not identify NFA patients as being an issue themselves. In a meeting where personal experiences were shared; a practice had declined to accept a patient registration as they did not “want his sort in here”. In this case, they were referring to the stigma of drug and alcohol abuse despite this not being applicable to the patient in question. In contrast, other practices have said NFA patients were generally pleasant. One practice highlighted that no NFA patients had been removed from their list whilst they had previously removed patients with fixed addresses.
Exploring operating procedures at Primary Care Services who register NFA Patients

We then contacted the 12 practices that were willing to register NFA patients unconditionally by email. This was to establish the number of registered NFA patients at each practice, and to invite them to participate in an informal discussion of their operating procedures and barriers to registering NFA patients. We received three responses.

The number of NFA patients currently registered at the practices who responded varied from zero to three patients. This low number shows that the registration of an NFA patient is not a common scenario encountered by reception staff, particularly considering that these numbers are from practices who routinely accept NFA patients. It is likely that the front-of-house staff at the practices who are less flexible in registering NFA patients do not frequently encounter an NFA patient. This might account for the lack of knowledge of front-of-house staff.

Three practices provided further information. Belgrave Medical Centre gave permission for their meeting notes to be used in the project context. They did not express concern with registering NFA patients, however, they mentioned that there may be reluctance in other practices due to uncertainty and lack of awareness of guidelines. This practice did not have any trouble in finding appropriate guidance for registering NFA patients. Another practice, who wished to remain anonymous, provided us with an email they received following publication of the Gatekeepers Report. They stated that this was a reminder for their staff on the approach that they should be taking when registering an NFA patient. A third practice provided us with the guidelines they use that should be available to all practices from the Local Medical Committee and the Clinical Commissioning Group. They also expressed their concern that this was not followed by other surgeries.

It is clear that there is guidance available, however, practices seem unaware of its existence. This appears to be leading to restriction for NFA patients through no fault of their own.
**Recommendations**

We have identified recommendations which would improve access to primary care services for NFA patients.

An email could be sent to all primary care centres in Stoke-on-Trent detailing:

- Results of this project
- Existing guidance for registering NFA patients

Considering the lack of knowledge of front-of-house staff regarding policies for registering NFA patients, a training session provided by VOICES might raise awareness and understanding of the issues, and provide an opportunity for education, as well as providing a safe and non-judgemental environment in which any concerns or questions could be raised and addressed by the VOICES team.

**Evaluation**

The data collection for this report was performed in three stages. We used a number of different methods which provided a mixture of quantitative and qualitative data for analysis.

The script for the mystery shopper exercise has a clear structure which is easy to follow. It is the same as the one used in the Gatekeeper’s Report which made the data collection standardised and hence results comparable.

The sample size of 45 practices covers the majority of the total of 52 in Stoke-on-Trent and so is significant at a local level. However, on a national level, this sample size provides limited statistical power for making inferences about access to primary care for NFA patients in the 7,613 practices in England.

Despite this, it is worth noting that healthcare practice across all of the NHS services in England is standardised, and hence the poor access for NFA patients in Stoke-on-Trent might be echoed across the country. It would be worthwhile repeating this project on a larger scale which could reveal that this phenomenon is a nationwide problem, rather than just a local issue.

Another limitation is the poor response rate (3 out of 12) we received from the identified practices that register NFA patients. As we made contact via email, it is possible that a proportion never received or read this email due to being accidentally omitted or redirected to a SPAM folder. Had we used other methods of communication, such as telephone or visits to each practice, we might have been able to achieve a better response rate, and hence a better insight overall.
Handover & Future Developments

This project has the potential to be developed and expanded by further groups, including VOICES and Expert Citizens in the following ways:

- Make contact with practices who do not register NFA patients to educate and explore their difficulties
- Analyse relationship between social deprivation and acceptance of NFA patients
- Devise a flow-chart or hint sheet for practices to use when registering NFA patients
- Plan and run a training session for Practice Managers on the registration of NFA patients

References

Available from: www.expertcitizens.org.uk/info/

Service Coordination - Voices of Stoke [Internet]. Voices of Stoke. 2018 [cited 15 March 2018].
Available from: www.voicesofstoke.org.uk/service/

BMA - Patient registration [Internet]. Bma.org.uk. 2018 [cited 15 March 2018].

Expert Citizens, VOICES and Healthwatch Stoke-on-Trent. Gatekeepers: Access to Primary Care for those with Multiple Needs [Internet]. Stoke-on-Trent; 2018.

[Internet]. Bma.org.uk. 2018 [cited 20 March 2018].
Summary

Expert Citizens C.I.C. hope to share learning from both reports through awareness sessions and learning opportunities, relating to the registration of patients with no fixed abode. This will include learning from the NHS England Guidelines.

We would also like to enhance awareness of the GP cards by making these more widely available and equipping frontline staff, including reception staff, with the knowledge and confidence to successfully register all patients of no fixed abode.

I do not need a fixed address
I do not need identification
My immigration status does not matter
If I have any issues registering or accessing a GP practice my local Healthwatch can direct me to advice

I have a right to register & receive treatment from a GP practice

My NHS Number (if known)

See the Patient Registration Standard Operating Principles for Primary Care
Appendix 1: Mystery Shopping Exercise Script

“Hi, my name is ___________, I work at VOICES. I am just ringing to see if it would be possible to register someone I am supporting who is homeless”

“Yes, but he will need ID”

“I am sorry, he does not have any ID. Can you recommend what I should do?”

Answers Log Advice

“Thank you. Goodbye”

“No, we will not accept”

“Can you recommend anywhere?”

Answers Log Advice

Declines

“Thank you, I will see if my customer wants to register here. If he does, I will be in touch”

Offers Surgery Address

“I am sorry, he does not have one”

“I am sorry, he does not have any ID. Can you recommend what I should do?”

Answers Log Advice

“I am sorry, he does not have any ID. Can you recommend anywhere?”

Answers Log Advice

Declines

“Thank you, I will see if my customer wants to register here. If he does, I will be in touch”

Offers Surgery Address

“I am sorry, he does not have one”

“I am sorry, he does not have any ID. Can you recommend what I should do?”

Answers Log Advice

“I am sorry, he does not have any ID. Can you recommend anywhere?”

Answers Log Advice

Declines

“Thank you, I will see if my customer wants to register here. If he does, I will be in touch”

Offers Surgery Address

“I am sorry, he does not have one”
## Appendix 2: Raw Data Set

<table>
<thead>
<tr>
<th>#</th>
<th>Contact Made</th>
<th>NFA Accepted</th>
<th>ID Accepted</th>
<th>Additional Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>Receptionist Unsure</td>
<td>Not needed</td>
<td>To speak to the practice manager as there is no ID. “we do take homeless pts”. I asked if we could use VOICES as NFA she was unsure and will call back (will follow up)</td>
</tr>
<tr>
<td>2</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Go to a practice that deals with NFA --&gt; Dr ready at Shelton?</td>
</tr>
<tr>
<td>3</td>
<td>Yes</td>
<td>Yes - Voices</td>
<td>Not needed</td>
<td>If he's used NHS before or registered with another GP he can sign up, can have someone who works for VOICES to vouch for him</td>
</tr>
<tr>
<td>4</td>
<td>Yes</td>
<td>Yes</td>
<td>Not needed</td>
<td>Surgery address used</td>
</tr>
<tr>
<td>5</td>
<td>Yes</td>
<td>Yes</td>
<td>Not needed</td>
<td>GP/VOICES as address</td>
</tr>
<tr>
<td>6</td>
<td>Yes</td>
<td>Yes</td>
<td>Unsure</td>
<td>“Can't refuse to see anybody, if urgent go to walk in.” To ring back Tuesday</td>
</tr>
<tr>
<td>7</td>
<td>Yes</td>
<td>Yes - Only in area</td>
<td>Not needed</td>
<td>“Need to be registered closer to VOICES address” was asked where he slept last night. suggested health and well being clinic in Hanley walk in. Said ring back too to see what the practice manager says</td>
</tr>
<tr>
<td>8</td>
<td>Yes</td>
<td>No</td>
<td>Needed</td>
<td>“we don't take anyone until they prove who they are”...“can't register with no address”... “ring back after wednesday”</td>
</tr>
<tr>
<td>9</td>
<td>Yes</td>
<td>Yes</td>
<td>Not needed</td>
<td>Yes just speak to the manager</td>
</tr>
<tr>
<td>10</td>
<td>Yes</td>
<td>No</td>
<td>Needed</td>
<td>“Can't register someone with no paperwork” “can never say we will take you on, to any patient” go to walk in centre. Told to ring back to speak to the practice manager</td>
</tr>
<tr>
<td>11</td>
<td>No</td>
<td>-</td>
<td>-</td>
<td>Couldn't get through will try again</td>
</tr>
<tr>
<td>12</td>
<td>SHUT DOWN</td>
<td>N/A</td>
<td>N/A</td>
<td>Unsure if no ID or care of address - recommended coming into surgery and discussing Dr preferences</td>
</tr>
<tr>
<td>13</td>
<td>Yes</td>
<td>Yes</td>
<td>Ideally Passport</td>
<td>Will accept Post Office card if claiming benefits. Had to ask manager, care of address they are unsure about and will sort when client comes in to the practice</td>
</tr>
<tr>
<td>14</td>
<td>Yes - Reluctant</td>
<td>Yes</td>
<td>Needs some</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Yes</td>
<td>Yes, only as temporary</td>
<td>No</td>
<td>Will have to re-register as a temporary patient each time they need to be seen</td>
</tr>
<tr>
<td>16</td>
<td>Yes</td>
<td>Yes</td>
<td>Not needed</td>
<td>Offers practice as c/o address</td>
</tr>
<tr>
<td>17</td>
<td>Yes</td>
<td>Yes</td>
<td>No, but need NI number</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Yes</td>
<td>Yes - See Practice Manager</td>
<td>Not needed but ideally bring something with date of birth</td>
<td>Need to use VOICES as care of address - fine that it is out of area</td>
</tr>
<tr>
<td>19</td>
<td>Joined with Dr Shah</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Yes</td>
<td>Yes</td>
<td>Not needed</td>
<td>Had to ask, asked to come in and discuss address problem but will register</td>
</tr>
<tr>
<td>21</td>
<td>No</td>
<td>-</td>
<td>-</td>
<td>Goes through to Adderley Green/Dr B Patel</td>
</tr>
<tr>
<td>22</td>
<td>Yes</td>
<td>Yes</td>
<td>Not needed</td>
<td>Offers practice as c/o address but wants to register with Dr Kulkarni in same health centre as his list is smaller</td>
</tr>
<tr>
<td>23</td>
<td>Yes</td>
<td>Yes - come to surgery to fill in forms with ID/letter with name on eg. benefits letter</td>
<td>Surgery volunteer as c/o address with mobile number for a friend so that can be contacted by surgery.</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Yes</td>
<td>YES- come to surgery to fill in forms asked if prev. GP in uk- so long as can give nhs number no other documents required</td>
<td>No c/o address required</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>No</td>
<td>To ring back</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Yes</td>
<td>NO- if ID cannot accept- may accept with birth certificate but still not certain.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14
<table>
<thead>
<tr>
<th></th>
<th>Contact Made</th>
<th>NFA Accepted</th>
<th>ID Accepted</th>
<th>Additional Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Yes</td>
<td>Yes but only as last resort due to catchment- ID and c/o address not an issue in such a case.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>No</td>
<td>DOES NOT CONNECT</td>
<td>WILL RETRY</td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>No</td>
<td>DOES NOT CONNECT</td>
<td>WILL RETRY</td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Yes</td>
<td>Yes- Form needed to be completed plus birth certificate/letter with name on</td>
<td>Not essential but any additional info welcome</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Yes</td>
<td>Yes but only as last resort due to catchment- ID and c/o address not an issue in such a case.</td>
<td>Need to come into practice, complete forms and provide a letter of recommendation from VOICES with serviceusers name. Process takes 48 hours.</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Yes</td>
<td>Forms in practice c/o surgery accepted</td>
<td>Need to provide a contact number of patient or friend/relative/mentor</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Yes</td>
<td>Yes</td>
<td>Not Needed</td>
<td>Needs to come to the surgery to register</td>
</tr>
<tr>
<td>34</td>
<td>Yes</td>
<td>Yes</td>
<td>Not Needed</td>
<td>Only if within their area (Stoke isn’t), to register would need to come to the surgery to give them their details. Recommended 2 surgeries (Foden street and Stoke Health)</td>
</tr>
<tr>
<td>35</td>
<td>Yes</td>
<td>Yes</td>
<td>Photo ID (any) Plus utility bill required as a minimum.</td>
<td>Recommended trying Haymarket Health Centre</td>
</tr>
<tr>
<td>36</td>
<td>Yes</td>
<td>Not taking any new patients</td>
<td>N/A</td>
<td>Was told some of their GPs have left and so not at capacity at the moment and won’t be taking any new patients on for a while (recommended Belgrave Medical Centre)</td>
</tr>
<tr>
<td>37</td>
<td>Yes</td>
<td>-</td>
<td>-</td>
<td>Their policy is such that to register, would need to get a doctor’s appointment but they’re fully booked for the coming weeks. Receptionist wasn’t familiar with their surgery’s policy on registering homeless and the practice manager wasn’t available to advise. Recommended to try Willowbank Surgery.</td>
</tr>
<tr>
<td>38</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td>Must have a proof of adress that’s in their catchment area (recommended trying Hanley walk in centre)</td>
</tr>
<tr>
<td>39</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes (Photo ID)</td>
<td>Would need to come in to practice to fill in a registration form and book a Nurse appointment for a health check.</td>
</tr>
<tr>
<td>40</td>
<td>Yes</td>
<td>Yes</td>
<td>Not Needed</td>
<td>Only if residing within area; would need to come to the surgery to fill in a registration form and book a Nurse appointment for a health check.</td>
</tr>
<tr>
<td>41</td>
<td>Yes</td>
<td>Yes</td>
<td>Not Needed</td>
<td>c/o address required, but could use that of VOICES (but not their), would need to come to the surgery with a letter from VOICES confirming they’re happy to act as his c/o and he’d need to fill in a registration form whilst there.</td>
</tr>
<tr>
<td>42</td>
<td>Yes</td>
<td>Yes</td>
<td>Not Needed</td>
<td>c/o address required, advised for him to come to the practice to go through the registration forms and to see if they can work something out wrt his c/o; didn’t give a straight answer if could use their or VOICE’s address as c/o</td>
</tr>
<tr>
<td>43</td>
<td>Yes</td>
<td>Yes</td>
<td>Not Needed</td>
<td>would need to use VOICES as c/o address and would only accept if VOICES address was in area</td>
</tr>
<tr>
<td>44</td>
<td>Yes</td>
<td>Yes - Disclaimer</td>
<td>Not Needed</td>
<td>would only accept if this practice was the practice they were registered at before they became homeless, otherwise wouldn’t accept</td>
</tr>
<tr>
<td>45</td>
<td>-</td>
<td>Yes</td>
<td>Yes - Photo ID</td>
<td>Only if residing within area</td>
</tr>
<tr>
<td>46</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Only if residing within area</td>
</tr>
<tr>
<td>47</td>
<td>Yes</td>
<td>Yes (Goes through practice)</td>
<td>Yes Photo ID</td>
<td>Can register without photoID at PMs discretion – would need a face to face visit to register and takes 2-3days</td>
</tr>
<tr>
<td>48</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Need some form of proof eg benefits letter, PM would need to see face to face</td>
</tr>
<tr>
<td>49</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Was happy to register them over the phone - will see all homeless patients without ID or a c/o address - but the more info the better</td>
</tr>
<tr>
<td>50</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes Photo ID</td>
<td>Only if residing within area</td>
</tr>
<tr>
<td>51</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes Photo ID</td>
<td>Only if residing within area</td>
</tr>
<tr>
<td>52</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Would need some proof that they are who they say they are, eg benefits letter etc - would not accept letter from voices and pt would also need to attend to fill in forms</td>
</tr>
</tbody>
</table>
Appendix 3: Email sent to Practices who register NFA Patients unconditionally

Dear Sir/Madam,

I am writing to you on behalf of VOICES of Stoke, a charity organisation that supports citizens of Stoke-on-Trent with multiple needs. We have recently conducted some market research regarding access to primary care services for patients with no fixed abode (NFA).

We were delighted to find that your practice responded very positively to our market research and were happy to register patients with no fixed abode. This positively reflects the work we have been doing to improve access to primary care services for these patients. We would like to thank you for your ongoing flexibility in registering NFA patients.

Following on from our market research, we are making contact with the practices that responding positively in the hope of gaining insight into your protocols for NFA patients, and why you as a practice are confident in registering these patients. We will use this information to educate other practices in the area, in order to hopefully improve access to primary care services for NFA patients. We hope that they will be able to follow on from your good example and implement similar protocols.

Would you be happy to provide us with the number of patients with no fixed abode that you currently have registered at your practice? We would not need any identifiable information, just the total number of NFA patients.

Following on from this, we would love to organise a short meeting with your Practice Manager/GP Partner to discuss your protocols for registering NFA patients. Your contribution, with your permission, will form part of the project report and ongoing strategies to improve access to primary care services.

If you would be happy to be involved, please contact us via this email and we can take things forward.

Hoping to hear from you soon,

Best wishes
Appendix 4: Transcript of Meeting with Belgrave Medical Practice

Attendance: Rachel Morris, Kajetan Karlikowski, Practice Manager and Assistant Practice Manager of Belgrave Medical Practice.
Permission obtained to use quotes with names.

Q: How are patients with NFA registered in the practice?
A: We ask all patients to fill in the standard registration form with two forms of ID. Patients with NFA therefore have difficulties with this, so we ask for as much information as possible. Examples of this can be previous home address, previous GP, a phone number so they can be contacted and if the patient has a preferred address they would like the GP to be contacted on. If they have no address we can use, we use the practice address.

Q: What training/information have you received regarding patients with NFA?
A: Reception staff are trained in registering new patients of all backgrounds during their 4-week induction period. We receive guidance from the CCG and local medical committee.

Q: Are there any barriers associated with patients who have NFA?
A: It has never been an issue. We have never removed a patient from the practice list whereas we have done with patients with a fixed abode. With all patients, there are three warnings issued for patients who do not attend appointments, after this they are removed from the list.

All patients have one warning for unpleasant behaviour, then are removed if this reoccurs.

Location is not a problem - we understand patients may not necessarily be in the catchment area all the time, we still treat them. Some of our patients are “sofa surfers”.

Q: Are patients with NFA treated any differently?
A: If anything, we are more lenient as they are more vulnerable. We sometimes give them a cup of tea and some biscuits, so we know they have had at least something to eat. We offer health reviews too.
Q: How many patients with NFA are registered?
A: 3 plus (one recently deceased).

Q: Do you offer any other services?
A: we don’t have an enhanced service for drug misusers. They are usually under the drug and alcohol team in willow banks - Longton.

Q: What patients can you refuse from your practice?
A: If they are out of area (with exception NFA)
  • If they try to re-register after being removed from the practice list.

Q: Why aren’t all GP’s allowing patients with NFA to register?
A: perhaps lack of awareness and guidelines,
  • Reluctance
  • Uncertainty of what it involves.

Cannot recall getting an email about Gatekeepers.
Dear Colleague

Following the publication of the report: Gatekeepers; Access to Primary Care for those with Multiple Needs (Healthwatch Stoke on Trent and VOICES, 2016), we have been working with various organizations around the difficulties homeless individuals face in accessing primary care services.

Although there is a lot of excellent support for this group taking place in primary care, there is anecdotal evidence that individuals are being denied access on the basis of having no home address, and on occasions are being signposted to the other services many miles away that would involve transport costs that they may not be able to meet, or more concerning, have involved the patient walking many miles. I am sure you would agree that this is not in the interests of this cohort of vulnerable patients, although there is an appreciation of the difficulties practices face in dealing with requests for review at short notice without access to the relevant medical records.

I would like to remind practices that it is possible to register patients without a formal address and not having an address is not a reason to refuse registration of a patient. Of course, we can also see patients under the “emergency treatment necessary” initiative as a one off.

I have suggested to the homelessness project that we strive to make individuals aware of their NHS number to make ad hoc medical interventions clinically safe for all concerned but 100% penetration of this idea will not be achieved. I would welcome any new suggestions on how we can meet the needs of this group of patients and want to thank everyone in anticipation of their continuing efforts in meeting their health needs.

If you have any doubts about registering patients please refer to the document Patient Registration Standard Operating Principles for Primary Medical Care (General Practice) (NHSE, 2015) which will provide you with the guidance you need (attached for information).

Warm Regards