

Removing patients from your list of registered patients

Healthwatch Lincolnshire has received a number of complaints from patients about being removed from GP practice lists. Healthwatch Lincolnshire has done some research and has found that some of the removals were done for inappropriate reasons, and that some practices have removed more patients than would generally be expected.

Healthwatch has asked the LMC to remind practices of the circumstances where patients can be removed from lists, and the proper process for doing this.

When can a patient be removed from a practice list?

The circumstances when a patient can be removed from a practice list are-

1. at the request of the patient
2. at the request of the contractor (practice) due to a breakdown in practice-patient relationship
3. at the request of the contractor (practice) due to patient violence
4. at the request of the contractor (practice) due the patient being registered elsewhere
5. at the request of the contractor (practice) due to the patient being resident outside the practice area
6. at the request of the contractor (practice) due to the patient being absent from the United Kingdom

1. Deducting patients at their request

Patients who request removal from a practice list, or who have died, should be deducted in the normal way by completing the deduction process on the electronic medical record system.

2. Deducting patients due to breakdown in the practice-patient relationship

It is important for patient care for there to be a good clinician-patient relationship. If this breaks down, practices are able to request that the patient be deducted from the practice list and be allocated to another practices list.

Before a patient can be removed due to an irrevocable breakdown in the relationship, the practice should attempt to rebuild the relationship; ideally this should be done by face to face discussion with them about the reasons that the relationship is being strained. If the patient is receiving input from adult social care, or from secondary care mental health services, they are able to access advocacy from Total Voice Lincolnshire (tvf@voiceability.org).

If the relationship remains strained the practice should issue a written warning to the patient that they are at risk of being removed.

If, within twelve months of the written warning, and with ongoing negotiation, the relationship does not mend, the practice can request that the patient be removed from the practice list. This request is made to PCSE and the CCG, and the patient should be informed in writing that this has occurred. The letter should inform the patient the reason for removal, and that the deduction will take place

eight days after the removal request has been made. During this eight day period it is still the practice's responsibility to deal with the patient's medical and medication needs.

PCSE should be informed using the Patient Removal form which can be found at <https://pcse.england.nhs.uk/media/1361/patient-removal-request-form-new2.doc>

Circumstances which do not constitute a breakdown in clinician-patient relationship are patient complaint, and repeated "Did Not Attend" (DNA).

If a patient complains about a clinician or practice it is expected that the practice will work with the patient to identify how to rebuild the trust and relationship. Patients and practices can access support with a complaint by contacting POHWER advocacy service (pohwer@pohwer.net). If however the trust and relationship is irrevocably damaged this should be agreed with the patient, and thus the patient can be deducted at their own request.

Practices should not have a blanket policy to remove patients who DNA, as each case needs to be assessed on its merits. If however a patient does repeatedly DNA the practice should attempt to discuss this with the patient and come to an arrangement which suits both the practice and the patient. If an agreement cannot be reached this could be determined to be a breakdown in the practice-patient relationship.

3. Deducting patients due to patient violence

It is unacceptable that a patient uses threatening or violent behaviour or language to any member of the practice team. If this occurs the practice is able to request that the patient be removed from the practice list.

To remove a patient due to violent or threatening behaviour the practice must

- report the violent or threatening behaviour to the police
- and inform the CCG in writing of the request to remove the patient from the practice list.

The practice can inform the CCG by any means, but this must then be followed up by formal notification in writing. The CCG will confirm receipt of this request in writing, and also confirm removal with immediate effect.

The patient should also be informed of the removal in writing by the CCG. The CCG will inform the patient of the other providers in the locality with whom the patient can register, or whether the patient has been placed under the Special Allocation Scheme for violent patients. If the patient is placed on the Special Allocation Scheme this will be with immediate effect, and thus the practice does not have responsibility for the patient's medical or medication needs.

PCSE also need to be informed using the Patient Removal form <https://pcse.england.nhs.uk/media/1361/patient-removal-request-form-new2.doc> .

4. Deducting patients due the patient being registered elsewhere

When patients register elsewhere, practices should receive notification of this from the PCSE, and deduct the patient accordingly.

5. Deducting patients due to the patient being resident outside the practice area

When a patient moves outside a practice area and does not register with another provider, the CCG should be informed. The CCG will then write to the patient informing them that they are no longer eligible to receive treatment from the practice, and that the patient can either; request from the practice to remain registered, or to register with another provider where they now live.

If the patient requests to remain with the practice, the practice can provide services to this patient through the "Out of Area" scheme. In these circumstances the practice will need to send a removal request for the patient through the GP Link as a deduction with 'OOA REG' in the 'GP Message' field. When this is received, the patient will be removed immediately and the practice must then accept the deduction notification received. Once this has been done, the practice should then send a new registration request down the GP Links system, again with 'OOA Reg' in the GP message field.

If the original practice does not agree to continue providing services, or the patient does not request this, the surgery should also inform PCSE via the GP Link and the patient will be removed automatically after 30 days irrespective of whether or not the patient has registered elsewhere.

6. Deducting patients due to the patient being absent from the United Kingdom

Patients who are absent from the United Kingdom for more than three months are not eligible for NHS services until they return to the UK. If patients are going to be absent for more than three months practices should inform the CCG and PCSE via GP Link so that they can be deducted from the practice list until their return.

After the removal

Once a patient has been deducted from a practice list, the practice responsibility for the patient ends. However, this can leave patients in a difficult situation where they do not have access to medical input or medications until they find another surgery or are allocated one. It would be advisable therefore, that the practice removing the patient, makes reasonable effort to ensure that the patient has adequate medications to last until the patient is able to register with another provider.

PCSE usually direct patients to find an alternative provider by directing patients to the NHS Choices website. If the patient has difficulty finding an alternative provider, it is the responsibility of the commissioner to support the patient to do this.