







1. Type of GP:

		Response Percent	Response Count
Principal		84.9%	62
Salaried		15.1%	11
Locum		0.0%	0
Other (please specify)			6
answered question			73
skipped question			6




2. Main area of work:

		Response Percent	Response Count
Newcastle		60.8%	48
North Tyneside		39.2%	31
answered question			79
skipped question			0



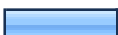
3. Are you aware of the problem with health tourism?

		Response Percent	Response Count
Yes		75.9%	60
No		24.1%	19
Comments:			12
answered question			79
skipped question			0



4. On registering new patients, does the practice ask for confirmation of identity?

		Response Percent	Response Count
Yes		81.0%	64
No		11.4%	9
Don't know		7.6%	6
Comments:			12
answered question			79
skipped question			0


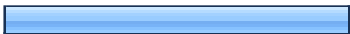
5. On registering new patients, does the practice ask for confirmation of residency?

		Response Percent	Response Count
Yes		64.1%	50
No		17.9%	14
Don't know		17.9%	14
Comments:			8
answered question			78
skipped question			1



6. Are you aware of who is eligible for NHS treatment in primary care?

		Response Percent	Response Count
Yes		68.8%	53
No		31.2%	24
Comments:			22
answered question			77
skipped question			2



7. Do you think it is your responsibility to determine who is eligible for NHS treatment in primary care?

		Response Percent	Response Count
Yes		44.7%	34
No		55.3%	42
Comments:			24
answered question			76
skipped question			3



8. Are you aware of who is eligible for NHS treatment in secondary care?

		Response Percent	Response Count
Yes		39.7%	31
No		60.3%	47
answered question			78
skipped question			1

9. Do you think it is your responsibility to determine who is eligible for NHS treatment in secondary care?

		Response Percent	Response Count
Yes		12.8%	10
No		87.2%	68
Comments:			13
answered question			78
skipped question			1

10. Would you be prepared to endorse your referral letters as potentially eligible or not for NHS treatment?

		Response Percent	Response Count
Yes		45.3%	34
No		54.7%	41
Comments:			17
answered question			75
skipped question			4

11. Any other comments?

	Response Count
	24
answered question	24
skipped question	55

Q1. Type of GP:

1	PM	Apr 12, 2013 3:56 AM
2	Practice Manager	Apr 8, 2013 2:02 AM
3	Practice Manager	Apr 5, 2013 1:59 AM
4	Practice Manager	Apr 5, 2013 1:56 AM
5	Practice Manager	Apr 5, 2013 1:55 AM
6	Practice Manager	Apr 5, 2013 12:45 AM

Q3. Are you aware of the problem with health tourism?

1	it takes up a lot of time - often because the agenda is hidden , there are no records, there is often need for translators , patients havent brought meds and do not divulge previous hx/inx/rx or worse still lie about it.	Apr 14, 2013 2:06 PM
2	1.pts from outside EU 2.pts from eastern europe migrating to access social services support etc	Apr 12, 2013 2:18 PM
3	very rarely seen examples of this	Apr 11, 2013 5:55 AM
4	the health tourists I see are almost exclusively legitimately in the country usually as 'students'. There is a clear conflict between the ambitions of academic institutions and ambitious politicians	Apr 11, 2013 2:16 AM
5	actually very small part of overall nhs budget	Apr 10, 2013 12:54 PM
6	I'm not sure it is a big issue in my practice though I did come across it once 8-10 years ago	Apr 10, 2013 11:34 AM
7	I see lots of patients from within and outside the EU who consult with longstanding medical conditions and immediately on entering the UK want specialist referrals, scans and consultant referrals.	Apr 8, 2013 2:25 AM
8	Not a big problem in our area	Apr 8, 2013 1:15 AM
9	Do not feel this is a significant problem in our area and feel it is a political issue rather than a real one	Apr 5, 2013 3:35 PM
10	Not a massive issue , but the odd patient that causes problems	Apr 5, 2013 5:44 AM
11	families bring their relatives for care for free	Apr 5, 2013 4:24 AM
12	sometimes its quite clear and open and we redirect to practices which see private patients - we have not got capacity . sometimes it is suspected but not clear	Apr 5, 2013 3:50 AM

Q4. On registering new patients, does the practice ask for confirmation of identity?

1	passport/visa /last address etc	Apr 14, 2013 2:06 PM
2	We ask patients for confirmation of their address as well as confirmation of their ID.	Apr 13, 2013 3:11 PM
3	All pts who register must supply proff of ID	Apr 12, 2013 2:18 PM
4	we ask all patients for photo I.D and proof of address(within our catchment area)	Apr 11, 2013 2:16 AM
5	difficult to ask for information which is not discriminatory against different people	Apr 10, 2013 12:07 PM
6	Usually including photo ID - except for elderly people who do not have passport or driving license	Apr 8, 2013 3:14 PM
7	utility bill with address and their name on it-sort of thing	Apr 5, 2013 4:29 AM
8	identification and address of all patients	Apr 5, 2013 4:24 AM
9	All new patients are asked for this, no discrimination. Over 70% of our patients are from abroad.	Apr 5, 2013 3:48 AM
10	but we are not being very strict as it can be difficult for vulnerable pateints such as victims of dv and the homeless	Apr 5, 2013 3:42 AM
11	We ask this of everyone	Apr 5, 2013 1:59 AM
12	A large proportion of our patients are foreign. We do ask for ID for all patients but if someone isn't able to provide it we register them anyway because the guidance says we aren't allowed to refuse. On occasion when we have suspected a passport is false we have reported it to counter fraud and have been told to register the patient anyway and make a note that we had suspicions. If we stop checking altogether we fear being different from other local practices who do check.	Apr 5, 2013 1:56 AM

Q5. On registering new patients, does the practice ask for confirmation of residency?

1	we ask for proof of address/bills	Apr 15, 2013 6:53 AM
2	visa if available, last address	Apr 14, 2013 2:06 PM
3	We ask for proof of address within our catchment area. If they are unable to provide that(utility bill etc) we will then ask for proof of entitlement/residency	Apr 11, 2013 2:16 AM
4	But we do not refuse to register people who can't provide it	Apr 5, 2013 3:35 PM
5	but dont insist	Apr 5, 2013 3:50 AM
6	All new patients are asked for this, no discrimination.	Apr 5, 2013 3:48 AM
7	We ask this for everyone	Apr 5, 2013 1:59 AM
8	As aboe it the patient can not provide we follow the national guidelines and register the patient anyway.	Apr 5, 2013 1:56 AM

Q6. Are you aware of who is eligible for NHS treatment in primary care?

1	Not entirely clear. We so rarely encounter this as an issue that we just treat everyone.	Apr 15, 2013 9:53 AM
2	Probably shared learning need for most PHCT's	Apr 15, 2013 6:53 AM
3	think so	Apr 15, 2013 5:28 AM
4	but the guidance is still vague -	Apr 14, 2013 2:06 PM
5	majoratively but occasioanlly I get confused!	Apr 14, 2013 5:31 AM
6	but not sure teams and admin in particular, are aware of who is eligible	Apr 11, 2013 5:55 AM
7	I think so	Apr 10, 2013 11:34 AM
8	I have a vague idea but I've never really looked into it properly.	Apr 9, 2013 1:32 PM
9	But there are some places I am not certain about	Apr 9, 2013 9:22 AM
10	Mainly but some grey areas?	Apr 9, 2013 4:25 AM
11	I am aware to a degree but I am also aware that recipricol agreements are in place between countries but do not find it easy to find up-to-date information on this	Apr 8, 2013 3:14 PM
12	we have a flow chart	Apr 8, 2013 9:37 AM
13	I am aware of the confusion on thos issues, and conflicting advice from the BMA, GPC and hospital trusts.	Apr 8, 2013 2:25 AM
14	Endorsing passports at point of entry re access to NHS services would clarify this.	Apr 8, 2013 12:08 AM
15	vague rules though	Apr 5, 2013 8:23 AM
16	we keep looking at the rules and they are incredibly complex and vague.	Apr 5, 2013 6:06 AM
17	think so	Apr 5, 2013 4:29 AM
18	can refer to guidelines	Apr 5, 2013 4:06 AM
19	I think they have to be resident 6 months , however I am confused re people who have moved abroad and seem to come back from america or canada for treatment . also I am concerned re public health issues HIV TB if I do not see people as well as the humanity of denying care	Apr 5, 2013 3:50 AM
20	have information on intranet	Apr 5, 2013 3:42 AM
21	We have the guidance but it is so vague. Also, demands on reception staff time are so high that we can not ask them to police the system.	Apr 5, 2013 1:56 AM
22	I am aware of some.	Apr 5, 2013 1:55 AM

Q7. Do you think it is your responsibility to determine who is eligible for NHS treatment in primary care?

1	I dont's see who else can do this	Apr 18, 2013 8:12 AM
2	Not unreasonable that we do this but we would not aim to do identity checks on someone	Apr 15, 2013 9:53 AM
3	to some extent but when someone is sitting in my room I will see them anyway- challenging them can create a barrier to effective consultation	Apr 15, 2013 5:28 AM
4	it would be much easier if immigration/visa dept etc dictated this for each individual - it can be very difficult assessing who is a true dependent of someone entitled to nhs care and thus entitled themselves and who is not	Apr 14, 2013 2:06 PM
5	I think we all have a role to play and that it should not just be the domain of secondary care	Apr 14, 2013 5:31 AM
6	DOH should provide guidance for gp's to follow	Apr 14, 2013 3:22 AM
7	if not practice then whose?	Apr 12, 2013 2:18 PM
8	We do not feel it should be our responsibility to police the system. If people have been allowed to enter thecountry then we will follow the steps 4 and 5 above	Apr 11, 2013 2:16 AM
9	practice responsibility, I don't think that this should happen face to face in surgery, should be done beforre it gets that far	Apr 10, 2013 11:34 AM
10	But I would think we should always be open to seeing patients on an urgent basis.	Apr 9, 2013 1:32 PM
11	However, it would be helpful to have a 'help desk' that can respond reasonably quickly when there is uncertainty. I usually delegate this to admin staff as I simply do not have the time to do this.	Apr 8, 2013 3:14 PM
12	but our practice manager has been told that we have to check the above documents	Apr 8, 2013 9:37 AM
13	there is no legal definition	Apr 8, 2013 6:05 AM
14	This often gets left to the "girl on reception" - I don't feel it should be her responsibility and feel there should be some other mechanism prior to patients reaching general practice as to whether they are eligible or not	Apr 8, 2013 2:02 AM
15	not contractually.	Apr 8, 2013 1:50 AM
16	But not to ration it - eg as it is within our discretion to continue to treat refused asylum seekers I am very happy to continue to do so and do not ask	Apr 5, 2013 3:35 PM
17	No because primary care really has no system for private services so we tend to give most patients the same care even if not strictly eligible...it is such a tiny problem for us that it would take a lot of effort to set charges etc for no real gain	Apr 5, 2013 5:44 AM
18	i cant check if they are fraudulent-have enough to do in 10min consults. I try my best	Apr 5, 2013 4:29 AM
19	yes but hard to police	Apr 5, 2013 4:24 AM
20	in conjunction with admin staff	Apr 5, 2013 4:06 AM

Q7. Do you think it is your responsibility to determine who is eligible for NHS treatment in primary care?

21	i have too much other things to do that effect pateint care.	Apr 5, 2013 3:42 AM
22	It is our tax payer's money. If we go on holiday we have to have our own insurance cover.	Apr 5, 2013 1:59 AM
23	If we do need to check we should be told exactly what.	Apr 5, 2013 1:56 AM
24	Partley	Apr 5, 2013 1:55 AM

Q9. Do you think it is your responsibility to determine who is eligible for NHS treatment in secondary care?

1	I would see this as a hospital responsibility	Apr 15, 2013 9:53 AM
2	whilst i feel it important that GPs do indicate to hospitals when they feel the patient is not eligible , I am aware that it will become increasingly a difficult & litigious arena - as many traditional UK citizens are now living abroad for more than 3 months & technically could fall foul ..	Apr 14, 2013 2:06 PM
3	as above-i think we all have a role to paly	Apr 14, 2013 5:31 AM
4	as above	Apr 14, 2013 3:22 AM
5	clearly GPC guidelines are unclear Duty of practice is to inform hospitals of status ie elligable/migrant/emergency	Apr 12, 2013 2:18 PM
6	if they are eligible fior primary care, then surely they are eligible for secondary care, if i'm wrong you can change my answer to question 8,	Apr 10, 2013 11:34 AM
7	Not ultimately - although I think I have a responsibility to discuss with patients where I am not certain or do not belive they are eligibe. Again advice from a help desk would be very helpful here.	Apr 8, 2013 3:14 PM
8	there is no legal definition	Apr 8, 2013 6:05 AM
9	It feels as though the Trust wishes to pass the buck once more. They would prefer the responsibility lies with the referrer however it is their service and they need to take responsibility for ensuring only patients eligible receive treatment.	Apr 8, 2013 1:50 AM
10	not responsibility but as a GP I would endeavour to clarify what the position is. Clear rules re this would help, should passports be endorsed on entry as to whether access to health care is NHS or private.	Apr 8, 2013 12:08 AM
11	Feel this should be sorted in primary care.	Apr 5, 2013 3:48 AM
12	But not solely responsible. Hospitals also have a responsibility	Apr 5, 2013 2:01 AM
13	It is us tax payers paying for this, when some people in this country have to wait or are denied treatment.	Apr 5, 2013 1:59 AM

Q10. Would you be prepared to endorse your referral letters as potentially eligible or not for NHS treatment?

1	It is not a big issue for us and I am not keen to get into having to do this for everyone	Apr 15, 2013 9:53 AM
2	Not yet as would need to know the criteria !	Apr 15, 2013 6:53 AM
3	I would request a simple, one sided A4 update to be disseminated to practices outlining the rules-for easy display and reference by Staff	Apr 14, 2013 5:31 AM
4	clinical vs corporate governance (i have personal family experience of issues as well as being one of those dreaded eastern europeans!!	Apr 12, 2013 2:18 PM
5	seems sledge hammer to crack nut?	Apr 11, 2013 5:55 AM
6	I assume that my patients registered with the practice are eligible for treatment	Apr 10, 2013 11:34 AM
7	I don't think it would be possible to make a firm comment but I would be happy to alert secondary care physicians if I thought there was a possibility of a patient NOT being eligible.	Apr 9, 2013 1:32 PM
8	Yes	Apr 8, 2013 5:41 AM
9	Would prefer not to.	Apr 8, 2013 2:21 AM
10	Again this large organisation wishing to use smaller GP resources. They should check themselves as it is their service that is so costly.	Apr 8, 2013 1:50 AM
11	Provided we have the means to make this assessment	Apr 5, 2013 9:13 AM
12	because by indorsing them we are already being discriminatory.	Apr 5, 2013 6:06 AM
13	would they like the gps to clean the hospital for free for them as well as every thing else	Apr 5, 2013 4:29 AM
14	This would need state back up adn consistency	Apr 5, 2013 4:24 AM
15	If someone is clearly here as a visitor and is registered privately I would state however we do not see these people	Apr 5, 2013 3:50 AM
16	If we were wrong we potentially lay ourselves open for complaints or action.	Apr 5, 2013 2:01 AM
17	Not without doh guidance to do so.	Apr 5, 2013 1:55 AM

Q11. Any other comments?

1	i do not believe that this is a massive problem as the trust makes out - may be in london but not here in the north east - far better to get on and treat who ever walks through the door than try and recover costs that amount to less than what it will cost for burocracy that runs such systems - as usual the hospital trusts want gp's to spend time and energy so they can save money - i say no.	Apr 19, 2013 9:48 AM
2	I think proof of identity before registration at a GP surgery should be mandatory, but has to be backed up by CCG / LMC	Apr 18, 2013 8:12 AM
3	There sre no clear guidelines on who is eligible, and if we are to police it, we need some drawn up. Any reception desk checks must include all patients, and should be clear, and easy for my staff to follow.	Apr 18, 2013 3:51 AM
4	This is an increasingly worrying problem- fuelled by our lack of knowledge about who is and who is not entitled to NHS care,	Apr 15, 2013 6:53 AM
5	Have had difficulty with patients trying to register in past and no clear cut guidance from PCT received and lot of ambiguity noted.	Apr 14, 2013 3:22 AM
6	I think that patient should only be given NHS numbers if they are eligible for NHS care. I would like to suggest that the number they are given reflects the level of care they re also entitled to receive	Apr 13, 2013 3:11 PM
7	OBVIOUSLY emergency/necessary care should be free however rigorous gpc/bma/ccg guidance essential	Apr 12, 2013 2:18 PM
8	concern it may make us less likely to concentrate on the individual and their health needs, but lead to targeting and discrimination	Apr 10, 2013 12:54 PM
9	Eligibility should take place at registration with GP	Apr 10, 2013 11:34 AM
10	I believe what a patient tells me-therefore if they are really a "health tourist" i assume they will lie about their eligibility	Apr 9, 2013 4:25 AM
11	we need clear and workable policies that do not put our front line staff in conflict with patients at " point of access"	Apr 8, 2013 9:37 AM
12	I have tried hard in the past to identify if somebody is eligible and it is impossible. After a long time on the phone being passed around I was told ' if the patient hasnt got an NHS number just tell me the address and I will send one out to them' and this was without checking anything about eligibility. I think it is a much wider system problem where nobody knows who is eligible for what	Apr 8, 2013 8:34 AM
13	no	Apr 8, 2013 6:05 AM
14	I think we need to liase with border agency as recently had patient who was blatantly a health tourist (she admitted to me) who had a 2 yr work visa. She was wheelchair bound and totally dependant!	Apr 8, 2013 5:41 AM
15	I think secondary care providers have been given more info and guidance from doh than primary care regarding treatment of overseas patients. As a practice we try to ensure that we only register those who are eligible for NHS services but this is very difficult as the rules for different countries reciprocal agreements etc are difficult for a receptionist to deal with.	Apr 8, 2013 4:06 AM
16	I do think this should be properly addressed and a system put oin place that	Apr 8, 2013 12:08 AM

Q11. Any other comments?

is clear and robust. Good samaritan care will always be available but clarity would help us all/

17 I do not think we in primary care can decline to be involved in this These so called Health Tourists are parasites Apr 5, 2013 9:13 AM

18 If not eligible I would normally inform the patient that I thought this was the case and add that to my referral letter...but certainly could endorse the letters with a yes no which would highlight it to the receiving trust Apr 5, 2013 5:44 AM

19 could become a racist issue if we are not careful Apr 5, 2013 4:59 AM

20 This argument has caused chaos for many years In the past we tried to follow advise then got castigated for limiting registration . As it feels ethically incorrect unless the guidance is very clear and a public health and emergency service is set up for people not eligible we are not prepared to be put in the situation of denying care Apr 5, 2013 3:50 AM

21 it needs to be clear when we can treat patients. i do not feel morally i can turn away anybody who is unwell and requires treatment - eg babies and children Apr 5, 2013 3:42 AM

22 We make sure that anyone who needs to pay does so. We treat all patients to our surgery in the same way with the same questions. Apr 5, 2013 1:59 AM

23 Very Very difficult to police. Front line reception staff are given instructions on how to register a patient and are all aware of immediate necessary treatment, however some cases are very complicated and take a lot of investigation to sort, and even then we sometimes get it wrong. A central point of contact for all patients without a British Passport to fax applications to would be very useful, we could then safely treat immediate necessary patients at point of contact and wait for guidance on future care/treatment. for patients who are not eligible can there not be an agreed point of care (similar to VPS?). Apr 5, 2013 1:55 AM

24 need for explicit guidance from centre it is unacceptable that health tourists should have unrestricted access to free NHS services at expense of tax paying citizens Apr 5, 2013 1:17 AM