

Application to register for Health and Social Care Services in Northern Ireland

Guidance Notes

WHY YOU NEED TO COMPLETE THIS FORM

Health and Social Care Services in Northern Ireland are not free to everyone. As they are primarily for the benefit of people who reside in Northern Ireland, you are required to complete this form and provide supporting documentation, so that your residence status can be assessed. If you are considered eligible to register with a GP practice you can access publicly funded healthcare which is mostly free.

PERSONS REQUIRED TO COMPLETE THIS FORM

This form must be completed by or on behalf of all persons (except those referred to below*) who wish to register with a GP practice on the basis of being 'ordinarily resident' or someone intending to stay in Northern Ireland for over 6 months

CHILDREN UNDER 16

This form may be used to register children under 16 residing with the applicant in Northern Ireland provided that the full names and dates of birth of the children are entered in Section 1 - 1.17

*Persons not required to complete this form

- Persons ordinarily resident in Northern Ireland who have misplaced their valid Northern Ireland
 Medical Card (use HS200 available from GP Practices)
- Persons who have come to Northern Ireland directly from residing in England, Scotland or Wales (use GB medical card or HS200 if medical card not available)
- Holders of an Infant Registration Form (HS123) issued by the Registrar of Births when a birth is registered.
- Holders of Form FP13 issued on discharge from the HM forces

COMPLETING THIS FORM

If you are completing this form as ordinarily resident or a long term visitor in Northern Ireland you should complete Sections 1, 2 and 4.

CROSS BORDER WORKERS

This form should be used by persons wishing to register as a Cross Border Worker (also called Frontier Worker). To qualify as a cross border worker you must live in another EEA country and work in Northern Ireland and travel home daily or on a regular basis. To registered as a cross border worker you must complete sections 1, 3 and 4.

The completed form should be presented to the GP practice chosen along with the relevant documentation.

Entitlement to register for Primary Care in Northern Ireland

Ordinarily Resident

The test of residence that Northern Ireland uses to determine entitlement to publically funded healthcare is known as "ordinarily resident". In order to be considered ordinarily resident in Northern Ireland, you must be lawfully residing here for a settled purpose.

Long Term Visitor

Visitors here (e.g. for more than 6 months) such as students, workers and asylum seekers

Claiming to be Ordinarily Resident or a Long Term Visitor

Return your completed form (Sections 1, 2 and 4) along with your supporting documents to the GP practice you have chosen. You must provide three items of supporting documentation (see page 7), one from list 1, one from list 2 and one from list 3.

<u>Nationals of EEA Member States</u> - EEA nationals are almost always here lawfully, however, in order to meet the requirements to register with a GP they must demonstrate their purpose for being in Northern Ireland.

<u>Nationals from non-EEA states</u> - Non-EEA nationals must provide documentation to show that they are lawfully in Northern Ireland and also demonstrate their purpose for being in Northern Ireland.

<u>Asylum Seekers</u> - If you are seeking asylum in the United Kingdom you must provide your Application Registration Card (ARC) to verify that you are lawfully in Northern Ireland along with relevant evidence you are living in Northern Ireland.

Please note students and their dependents will automatically be de-registered on the date the course ends, without notice being given to them.

How we use your information

The Business Services Organisation is a Data Controller under the Data Protection Act 1998. We hold information for the purposes specified in our notification to the Information Commissioner, including the assessment of patient charges. We may get information about you from others, or we may give information to them. If we do, it will only be as the law permits to:

- Check the accuracy of the information you have provided on your claim
- Prevent or detect crime
- Protect public funds

Further Information

If you require assistance or have any queries about this form please contact:

Family Practitioner Services Business Services Organisation

Tel: 0300 555 0113

SUPPORTING DOCUMENTATION

You are required to provide supporting documentation along with your completed application form. Please provide one item from list 1, one item from list 2 and one item from list 3 and indicate with a tick (\checkmark) the items you are sending to confirm your identity and status in Northern Ireland.					
. ,		Lawfully in the North			
EEA Nationals			✓	Asylum Seekers	
alid Passport Valid Passport and valid Visa			Application Registration Card (ARC)		
EEA National Identity Card	EA National Identity Card Biometric residence permit valid in UK				
Birth and Marriage or Civil Partnership Certificate and proof of EEA status UK Certificate of Naturalisation					
	LIST	2: Residing in North	ern Ire	and	
EEA and No	on EEA	Nationals	✓	Asylum Seekers	✓
Current UK Driving Licence (photo card and counterpart)				Letter from the Home Office	
Current Northern Ireland Rates Bill					
Current Northern Ireland Voters Card					
Current Home or Vehicle Insurance policy valid for Northern Ireland					
Signed, current Tenancy agreement (not handwritten) or mortgage statement for a property in Northern Ireland					
Current bank statements for active account which show Northern Ireland Address					
Recently paid utility bill (gas, electricity or telephone - <u>not</u> a mobile phone)					
Recent payslip from current employer showing employees address					
P45 or P60 for the last tax year showing employees address					
Evidence of receipt of Housing Benefit in Northern Ireland					
Letter issued by Department of Work and Pensions or Social Security Agency showing address					
LIS	T 3 : F	Reason for being in No	ortherr	Ireland	
EEA and Non EEA Nationals			TICK	Asylum Seekers	TICK

LIST 3: Reason for being in Northern Ireland				
EEA and Non EEA Nationals	TICK ✓	Asylum Seekers	TICK ✓	
A letter from Department of Work and Pensions or Social Security Agency confirming receipt of a UK State pension or Benefit		Valid HC2 certificate		
Recent payslip from current employer (showing employer's address and employee's NINO)				
P45 or P60 for the last tax year				
Letter from Northern Ireland University (stamped and signed by institution)				
Letter from HMRC, Department of Work and Pensions or Social Security Agency with your national insurance number				
Letter from HMRC with your Unique Tax Reference				

SECTION 5: To be completed by doctor willing to accept the person for inclusion on the GP practice list
I accept this person to be registered (and any children under 16 named in Section 1) for inclusion in my practice if entitled to receive General Medical Services.
Doctor's Signature: Doctor's code no:
Date
SECTION 6: Voluntary Consent or Organ Donation (optional)
I want to register my details on the NHS Organ Donor Register as someone whose organs/tissue may be used for transplantation after my death. Please tick the boxes that apply.
All of my organs and tissue
By joining the register you are giving your agreement for your organs and tissue to be used for transplantation to save or enhance the lives of others after your death. For more information, please ask at reception for an information leaflet or visit www.uktransplant.org.uk, or ca 08456060400
Patient's signature: Date:
NOTES
Please enter any additional relevant information in the box below.
CHECKLIST
Have you answered all questions as directed in the form?
Have you signed and dated the relevant declaration?
Have you enclosed all relevant supporting documentation?
WHAT YOU MUST NOW DO
Return the completed form along with relevant supporting documentation to the GP Practice at which you wish to register.
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If you require this document in a minority language (to meet the needs of those not fluent
in English) please contact the BSO Family Practitioner Service on 0300 555 0113

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Please be aware you are required to provide additional documentation to support the information you provide on this form. If you are claiming to be ordinarily resident or a long term visitor in Northern Ireland you must complete Sections 1,2 and 4. Cross Border workers must

complete sections 1,3 and 4 **SECTION 1 : Details of registering patient(s)** 1.1 Title Mr Mrs Miss Ms Other 1.2 Surname 1.3 Previous Surname 1.4 Forename(s) (in full) 1.5 Date of Birth 1.6 Gender Male Female 1.7 Country of Birth 1.8 Daytime phone number 1.9 Do you give the BSO permission to contact you by telephone? Yes No 1.10 Current address Postcode 1.11 Previous address in Northern Ireland Postcode 1.12 Name and address of previous doctor in Northern Ireland Name of Doctor Address Postcode Date from

Date to

.13	Previous add	dress in United Kingdom
	Postcode	
.14	Name and ad	dress of previous doctor in
	the UK Name of Do	nctor
	Address	70001
	Postcode	
	Date from	
	Date to	
.15	Previous He	alth and Care Number, if
	applicable	
	ШШ	
.16		ddress of doctor you wish to not not not not not not not not not
	Name of Do	
	Address	0.001
	Postcode	
.17	If you are re	gistering children under 16
,	•	siding with you in Northern
	Ireland, plea	se give their details below
1	Surname	
	Forename	
	Gender	Male Female
	Date of Birt	
	Country of E	3irth
2	Surname	
	Forename	
	Gender	Male Female
	Date of Birt	h
	Country of E	Birth
2	Surnama T	
3	Surname	
	Forename Gender	Male Travel
		Male Female
	Date of Birth Country of B	
	Country of D	nuij

SECT	ION 2 :	2.8 Are you registered with a Social Security
2.1	Have you resided continually in the UK	Office in Northern Ireland and in receipt of a state benefit or entitlement?
	since birth? Go to Section 4	Yes
	Yes Go to Section 4 No Go to question 2.2	Name of benefit or entitlement
2.2	From which country have you travelled to the United Kingdom?	Date of commencement
	Go to question 2.3	Co to Soction 4
	Go to question 2.3	No Go to Section 4 Go to question 2.9
2.3	What was your most recent date of entry to Northern Ireland?	Go to question 2.9
	Go to question 2.4	2.9 Are you in receipt of an EEA pension?
o 4		_ ` ` ` `
2.4	What is your reason for being in Northern Ireland?	Yes Go to Section 4
	To join a family member	Please note, if you are in receipt of an EEA pension from a country other than the UK and
	☐ To work	Ireland you are required to provide your S1 form
	Other	to the Department of Work and Pensions.
	Go to question 2.5	No Go to question 2.10
	To study Go to question 2.12 To seek asylum	2.10 Are you a student or a dependant of a
	Please provide your ARC number	person undertaking a course of study in
	Go to Section 4	Northern Ireland?
2.5	Do you intend to remain permanently in	Yes Please provide details.
	Northern Ireland?	Name of college/university
	Yes Go to question 2.6	
	NO Please state the date you intend to leave	Date course started
		Date course ends
	Please note your registration will be cancelled on this	Please note your registration will be cancelled on
	date Go to Section 4	the date the course ends
2.6	Do you have a National Insurance number	Students from an EEA country other than the UK
	issued in the United Kingdom?	and Ireland must provide their valid European
	Yes Please state your National Insurance no	Health Insurance Card (EHIC) each time they
		present at a GP practice or hospital for treatment.
	No Go to question 2.7	If you are a dependent places provide details
2 7	·	If you are a dependant please provide details of the student
2.7	Are you employed or self-employed?	Name
	Yes	Address
	Please provide details of your employer/ business	Address
	Name	Postcode
	Address	
		Please provide <u>the students</u> Date of Birth.
		Please provide <u>the students</u> Health and
	Postcode	Care Number (HCN)
	Date employment/ self-employment	
	commenced Co. to Co. tics 4	Go to Section 4
	Go to Section 4	No Go to question 2.11
	No Go to question 2.8	

2.11 Are you a dependant of a person who is	SECTION 3: Cross Border Workers Only				
ordinarily resident in Northern Ireland? Yes	3.1 Do you have a National Insurance number issued in the United Kingdom?				
Please state your relationship to this person	Yes Please state your National Insurance no				
	Tes Trease state your realisment mountainer in				
Please provide the details of this person Name	No Go to question 3.2				
Please provide this person's Date of Birth	3.2 Please provide details of your employment/				
	self employment				
Please provide this person's Health and	Name				
Care Number (HCN)	Address				
Go to Section 4	Postcode				
No Go to question 2.12	Date employment commenced				
2.12 Have you been discharged from HM forces?					
Yes Please provide details	3.3 How often do you travel to Northern Ireland				
Unit from which you were discharged	undertake your employment/self employmen				
	daily				
Service No.	weekly				
Discharge date	monthly				
Go to Section 4					
SECTION 4:					
	orthern Ireland as ordinarily resident or a long term visitor you mu				
	nd, on the basis that I am ordinarily resident or a long term visitor non this form is correct and complete. I understand that if it is not				
appropriate action may be taken against me, including cancelli	ng my registration and the recovery of charges.				
	HSC organisations, Fraud Prevention Agencies and Government				
	nue and Customs and the Home Office, for the following purposes				
The management of health care services					
To verify my entitlement to access Health and Social Cal The appropriate and detection and investigation of found	re Services in Northern Ireland				
The prevention, detection and investigation of fraud. Lunderstand that by not providing consent for the sharing of many consents for the sharing of many consen	ny information, this may affect my ability to access Health and Soci				
Care Services in Northern Ireland, including registration with a					
Signature:					
Print Name:					
Date:					
am signing this application on behalf of the person named in se	ection 1.				
ignature:					
rint Name:					
elationship to person:					
Pate:					