

# Application to register with a GP Practice for eligible visitors or persons taking up ordinary residence 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, those who apply to register with a GP Practice in Northern Ireland must complete this form and provide supporting documentation, so that your entitlement to access services can be assessed.

If you are considered eligible to register with a GP Practice you can access publicly funded health and social care services, which are mostly free. Please note that a visitor lawfully here and registered with a GP is not entitled to Social Care services free of charge.

## 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.

#### 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 1.13.

## \*Persons not required to complete this form

- Persons transferring from one Northern Ireland GP Practice to another Practice within Northern Ireland.
- Holders of an Infant Registration Form (HS123) issued by the Registrar of Births when a birth is registered.

#### **COMPLETING THIS FORM**

All patients must complete Section 1 and sign the declaration in Section 6.

If you are completing this form as being ordinarily resident please complete Sections 1, 3, 5 & 6.

If you are an eligible visitor in Northern Ireland please complete Sections 1, 2, 5 & 6.

If you are a Cross Border Worker\* please complete Sections 1, 4, 5 & 6.

The completed form should be presented to your chosen GP Practice along with the relevant supporting documentation, as required.

### \*Cross Border Workers

To qualify as a Cross Border Worker you must live in another EEA country and work in Northern Ireland, travelling home daily or on a regular basis.

# **Categories of Entitlement**

## **Ordinarily Resident in Northern Ireland:**

Persons coming to Northern Ireland to live are required to meet the 'Ordinarily Resident Test' in Northern Ireland, i.e. you must be lawfully residing in Northern Ireland and have an identifiable and settled purpose here.

To satisfy this test you must have indefinite leave to remain in the United Kingdom (UK), and provide proof of your settled purpose e.g. to work, and confirmation of your Northern Ireland address.

## **Eligible Visitor:**

An eligible visitor is a visitor to Northern Ireland who is lawfully present in Northern Ireland and satisfies a relevant exemption from charges such as students, workers and asylum seekers in accordance with the Health and Personal Social Services Provision of Health Services to Persons Not Ordinarily Resident Regulations (Northern Ireland) 2015, paragraphs **5 to 22**.

- **5.** Lawful Residence for 12 months:
- **6.** Presence for work, study or to settle;
- 7. EU Rights;
- 8. Reciprocal Agreements;
- **9.** Refugees, Asylum Seekers and children in care:
- **10.** Victims of Human Trafficking;
- **11.** Exceptional Humanitarian Reasons;
- 12. Diplomats;
- 13. NATO Forces:
- **14.** Long term Visits by UK Pensioners;

- **15.** War pensioners and armed forces compensation scheme payment recipients;
- **16.** HM UK Forces/ Crown Servants and others;
- 17. Former Residents working overseas;
- **18.** Missionaries for organisation established in UK;
- **19.** Prisoners and detainees;
- 20. Employees on UK Registered Ships;
- **21.** Treatment the need for which arose during a visit to Northern Ireland;
- **22.** Family members of visitors.

http://www.hscbusiness.hscni.net/services/1785.htm

# 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 and/or to:

- check the accuracy of the information provided;
- prevent or detect crime;
- protect public funds.

Details of our Fair Processing Notice can be found at:

http://www.hscbusiness.hscni.net/services/1770.htm or by contacting us using the details below.

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

Medical Registration
Business Services Organisation

Tel: 0300 555 0113

# Application to register with a GP Practice for eligible visitors or persons taking up ordinary residence in Northern Ireland.

Name and address of GP Practice you wish All applicants must complete Section 1 and to register with in Northern Ireland: provide Photographic ID. Name of GP Practice **SECTION 1 : Details of registering patient** Address 1.1 Title: Mrs Miss Ms Mr Other 1.2 Surname: Postcode 1.13 If you are registering children under 16 1.3 **Previous Surname:** years old residing with you in Northern Ireland, please give their details below. 1.4 Forename(s) (in full): Surname Forename 1.5 Date of Birth: Gender Female Male Date of Birth 1.6 Gender: Country of Birth Female Male Surname 1.7 **Country of Birth:** Forename Gender Male Female 1.8 Daytime phone number: Date of Birth The BSO may contact you regarding your Country of Birth application. Surname 1.9 **Current address in Northern Ireland:** Forename Gender Male Female Date of Birth Country of Birth Postcode Surname 1.10 If you have an address outside Northern Ireland, please provide details: Forename Gender Male Female Date of Birth Country of Birth Postcode 1.11 Health and Care Number, if known:

SECT	TON 2: Please complete this section if you are	2.7	Please state	country of residence:	
	a visitor to Northern Ireland				Go to 2.8
2.1	From which country have you travelled to Northern Ireland?	2.8		ide your Passport or EEA I details, as applicable:	
	Go to 2.2		Country or is	sue	
2.2	What date did you arrive in Northern Ireland?		Decement Nu	mbor/ID Cord Number	
	Go to 2.3		Passport Nu	mber/ ID Card Number	
2.3	What date do you intend to leave Northern Ireland?		Issue Date		
	Go to 2.4		Expiry Date		Go to 2.9
2.4	What is the purpose of your visit e.g. Holiday/ Visiting family/ Study/ Work etc.?	You r	•	ne <b>original</b> document to Pra	
	Go to 2.5	2.9	Do you hold Card (EHIC)	a European Health Insura ?	nce
2.5	Please provide details of any exemption you meet under the Provision of Health		Yes I	Please provide details:	
	Services to Persons Not Ordinarily		Country of Is	sue	
	Resident Regulations (Northern Ireland)				
	2015, if applicable.		EHIC No		
			Valid from		
			Valid to		
		You	must provide t	ne <b>original</b> document to Pra	octice staff.
				Got	Go to 2.10
	Please Note:		∐ No		G0 t0 2.10
	You must provide documentary proof of your claim for exemption as requested by Practice Staff.	2.10	Home Office	a Visa issued by the UK e? Please provide details:	
	Unless you are seeking asylum go to 2.6		_	lease provide details.	
	If seeking asylum you must provide your		Туре:		
	Application Registration Card (ARC) and		Visa No		
	IS.96 letter from the Home Office		Valid from:		
	confirming your address in Northern Ireland.		Valid to:		Go to 2.11
	Go to Section 5	You r	nust provide th	ne <b>original</b> document to Pra	ctice staff.
2.6	Do you normally reside in England, Scotland or Wales?		☐ No	Go to	Section 5
	Yes	2.11	-	a Biometric Residence Pe	ermit
				e UK Home Office? Please provide details:	
	You must provide proof of your residency in England, Scotland or Wales to the Practice.			•	
			Unique Num	ber:	
	GP Details in England, Scotland, Wales:				
	Details in England, cooliding, vvaics.		Issue Date		
			Expiry Date		
				Go t	o Section 5
		You	must provide t	he <b>original</b> document to Pra	
		. 00		_	
	Go to Section 5		No	Go t	o Section 5
	☐ No Go to 2.7				

SECTION 3: Please complete this section if you are taking up residency in Northern Ireland.		3.6	Are you a dependant of a person who is ordinarily resident in Northern Ireland?		
Nort imm Plea	can only register as ordinarily resident in hern Ireland if you are not subject to UK igration control.  se Note: You are required to provide at least		No Go to Section 5  Yes  The person I am dependent on is:		
one	document from each list on page 8.		Employed		
3.1	Where have you resided in the past 12		Self-employed		
0	months? If England, Scotland or Wales,		A pensioner		
	please provide full postal address.		Other Please provide details:		
			Please provide the name of this person:		
	Postcode Go to 3.2				
3.2	From which country have you travelled to		Please provide this person's Date of Birth:		
	Northern Ireland? Go to 3.3				
			Please state your relationship to this person:		
3.3	What was your most recent date of entry to Northern Ireland?		<u></u>		
	Go to 3.4		Please supply documentary proof of		
			relationship i.e. Marriage Certificate.		
3.4	What is your reason for being in Northern Ireland?		Please provide this person's Health and		
	Retirement Go to 3.5		Care Number (HCN) if they have one:		
	Join a family member Go to 3.5				
	Take up employment Go to 3.5		In addition to your own documents from		
	Seek employment Go to 3.5		list 1 and list 2 you must also provide one		
	Other Please provide details:		document from list 1, list 2 and list 3 on Page 8 in the above person's name.		
	Go to 3.5				
			Go to Section 5		
3.5	Are you in receipt of an EEA pension?				
	Yes Go to Section 5				
	Please Note: If you are in receipt of an EEA				
	pension from a country other than the UK or Rol				
	you are required to provide to the practice your S1 form, issued by your former country of				
	residence.				
	For patients from Rol you must provide a letter				
	from the Department of Social Protection (DSP)				
	confirming you have informed them that you are				
	residing in Northern Ireland.				
	No Go to 3.6				

## SECTION 4: Please complete this section if you are a Cross Border Worker 4.1 Please state your National Insurance No: 4.3 How often do you travel to Northern Ireland to undertake your employment or Go to 4.2 self employment? 4.2 Please provide details of your employer or business: Weekly Monthly Daily Name of employer/business Go to 4.4 Are you registered with a GP in the 4.4 Address Republic of Ireland? Yes Go to Section 5 Name of Doctor Postcode Address Date employment/self employment commenced Go to 4.3 Postcode Please Note: To register as a Cross Border Worker you are required to supply your most recent payslip showing your Go to Section 5 No employers or business name and address as stated above. **SECTION 5 : Additional Information** Do you have any additional information you wish to add to your application: Yes Please provide details below (before going to Section 6): No Go to Section 6 SECTION 6: To be completed by all applicants - Please note: continued on next page

In order to apply to access Health and Social Care Services in Northern Ireland you must read and sign the declaration on page 7.

I wish to apply for Health Service registration in Northern Ireland, on the basis that I am ordinarily resident or an eligible visitor in Northern Ireland and I declare that the information I have given on this form is correct and complete. I understand that if it is not, appropriate action may be taken against me, including cancelling my registration and the recovery of charges.

I understand that by applying to register with a GP Practice in Northern Ireland, I am consenting to the sharing of my information to and by the Business Services Organisation, with other bodies including HSC organisations, Fraud Prevention Agencies and Government Bodies such as the Department for Communities, Department of Work and Pensions, Her Majesty's Revenue and Customs, the Home Office, the Health Service Executive and the Department of Social Protection, for the following purposes:

- to check the accuracy of the information provided;
- prevent or detect crime;
- protect public funds.

SECTION 6 Continued:						
I understand that by not providing consent for the sharing of my information, relating to my entitlement, this may affect my ability to access Health and Social Care Services in Northern Ireland, including registration with a GP Practice.						
Signature:  Print Name:  Date:						
As the person named in Section 1 lacks capacity I am signing this application on their behalf.						
Signature:						
Print Name:						
Relationship to person:						
Date:						
SECTION 7 : 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 list if entitled to receive General Medical Services.						
Doctor's signature:						
Doctor's cypher:						
Date:						
SECTION 8 : 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 Kidneys Heart Liver Corneas Lungs Pancreas  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 call 08456060400.  Patient's signature:  Date:						
WHAT YOU MUST NOW DO						
Return the completed form along with relevant supporting documentation to the GP Practice at which you wish to register.						
This document is available on the BSO website in minority languages to assist applicants where English is not their first language.						

### SUPPORTING DOCUMENTATION FOR THOSE TAKING UP RESIDENCE IN NORTHERN IRELAND ONLY

You are required to provide supporting documentation along with your completed application form. Please supply one item from each list below. If you are having difficulty providing any of the items listed, please speak to Medical Registrations BSO 0300 555 113, who will discuss what alternative documents would be acceptable.

Please indicate with a tick  $(\checkmark)$  the items you are sending to confirm your identity and status in Northern Ireland.

LIST 1 : Lawfully in Northern Ireland	TICK
Valid Passport	<b>√</b>
Valid Visa issued by the UK Home Office (if applicable)	
Birth Certificate, and where applicable, Marriage or Civil Partnership Certificate	
Certificate of Naturalisation or proof of EEA status	
Other valid Photographic ID	
LIST 2: Residing in Northern Ireland	TICK ✓
Current NI Driving Licence (photo card and counterpart) with Northern Ireland address	
Current Northern Ireland Rates Bill	
Current Northern Ireland Electoral Identity Card	
Current Home Insurance policy valid for Northern Ireland	
Signed, current Tenancy agreement (not handwritten) or mortgage statement for property of residency 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) for property of residency in Northern Ireland	
Housing Benefit award letter for a property in Northern Ireland	
LIST 3: Reason for being in Northern Ireland	TICK ✓
A letter or document from Department of Communities confirming receipt of a UK State pension or Benefit	
A letter or document from Department of Communities confirming receipt of Social Security Benefit	
Recent payslip from current employer (showing employer's address and employee's National Insurance Number)	
Letter from HMRC with your Unique Tax Reference / Self Assessment Return showing NI Address	
S1 Form (not issued in UK) or letter from DSP confirming receipt of State Pension (ROI only)	
HMRC Tax Credit Award	