

Access to primary healthcare for migrant children, young people and families

Primary care is the local healthcare received from GPs, NHS-walk-in centres, dentists, pharmacists and optometrists: any service provided and managed by clinical commissioning groups (CCGs). This fact sheet looks at eligibility for free primary health care. For secondary healthcare (e.g. maternity services and most hospital treatment) please see our fact sheet on access to secondary healthcare, at www.coramchildrenslegalcentre.com/resources.

If you have any questions about access to healthcare relating to a refugee or migrant child, young person or family, you can call our Migrant Children's Project advice line on 0207 636 8505 or email mcp@coramclc.org.uk.

Eligibility for free primary health care

All children and families, whatever their immigration status, are able to access primary healthcare. [1] Primary health care includes:

- Access to a GP
- Dental treatment
- Eyesight tests
- Family planning services
- Prescriptions
- Some mental health services

Primary health care is not a 'public fund' for the purposes of the provisions relating to 'no recourse to public funds'. For more information on this, see CCLC's fact sheet at www.coramchildrenslegalcentre.com/resources.

General Practitioners (GPs)

Everyone can register with a local GP. The NHS has published guidance on GP registration and operating principles for primary care. [2] The guidance confirms that 'all asylum seekers and refugees, students, people on work visas and those who are homeless,

overseas visitors, whether lawfully in the UK or not, are eligible to register with a GP practice.'

Each GP practice has its own registration policy. In general, to register, you will need to provide your name and address, date of birth and NHS number (if you know it). Some GP surgeries will also ask to see proof of identity (such as a passport or driving licence) and proof of address, such as a bill. However, it is not necessary to have an NHS number before registering and there is no formal obligation to prove identity or immigration status to register with a practice. [3]

NHS guidance confirms that if a patient cannot produce any supporting documentation but state that they live in the practice area, the practice should accept their registration. The guidance recognises that some patients are legitimately unable to produce documentation for a variety of reasons, and reasonable exceptions must be considered and dealt with sensitively.

The guidance further confirms that those staying somewhere in the UK for more than 24 hours and less than three months should be offered to be registered with a GP on a temporary basis.

Individual GP practices can allow anyone to register with them, regardless of immigration status or length of residence in the UK. No registration application can be refused on the grounds of race, gender, class, age, religion, sexual orientation, appearance, diversity or medical condition. [4] However, some GPs may legitimately refuse to register someone if they live outside their catchment area or their list is full.

Also some people have difficulty registering with a GP and encounter misconceptions about their right to primary health care. If a GP practice or health centre will not register an individual, then that individual can go to another GP practice/health centre or contact NHS England: www.england.nhs.uk/contact-us. [5]

Some GPs require all new patients who register to have a health check, usually carried out by a nurse.

A GP will look after all of an individual's health needs and decide if they need to see another health professional, such as a hospital doctor or mental health practitioner. Being registered with a GP, or having an NHS number, does not give a person automatic entitlement to access all NHS treatment for free [6] but GPs should not be discouraged from referring their patients to other NHS services on the basis of their immigration status, as it is not the GP's responsibility to establish entitlement for free NHS hospital treatment. [7] See our fact sheet on secondary healthcare at www.coramchildrenslegalcentre.com/resources for further information.

Help with health costs such as prescription charges

Some people automatically qualify for help with health costs including:

- NHS prescriptions
- NHS dental treatment
- NHS-funded sight tests
- NHS wigs and fabric supports
- travel costs to and from hospital for NHS treatment
- vouchers towards the cost of glasses or contact lenses

This includes:

- Children under 16 (under 18 for dental charges)
- Young people under 19 who are in full-time education
- Women who are pregnant or have had a baby in the previous 12 months and have a valid maternity exemption certificate
- People in receipt of certain benefits such as income support (this may be relevant to

people with refugee status or another form of leave which entitles them to mainstream benefits)

- Asylum-seekers – the Home Office will send people seeking asylum who they support financially, including those on subsistence support only, an NHS charges certificate (HC2) for full help with health costs. Asylum seekers will get this with their first support payments; the certificate is valid for six months and covers all dependants. If an asylum seeker is not supported by the Home Office, they are still eligible to register with a GP and are entitled to access all NHS services. However, they will not be issued with an HC2 certificate by the Home Office and will need to apply for one independently using an HC1 form. [8]

People falling outside the above categories may be able to get assistance with health costs through the NHS Low Income Scheme. They will need to complete an HC1 form. HC1 forms can be obtained from hospitals, Job Centre Plus, GPs, dentists and opticians. If a child or young person is supported by a local authority, the local authority will need to provide a letter saying how much income the person receives. Depending on the level of income, they will be issued with either an HC2 or HC3 certificate. For more information, see NHS Leaflet 'HC11: Help with health costs' at [http://www.nhsbsa.nhs.uk/Documents/HealthCosts/HC11 April 2015.pdf](http://www.nhsbsa.nhs.uk/Documents/HealthCosts/HC11%20April%202015.pdf)

Further support to access primary healthcare

Children looked after by a local authority

If a separated child is supported by a local authority, the local authority should ensure that they are registered with a GP as soon as is practical. Their immigration status is not a barrier to them registering with a GP.

Regulation 7 of the Care Planning, Placement and Case Review (England) Regulations, 2010 requires that the local authority responsible for a looked after child should arrange for an initial assessment of their physical and mental health and provide a written

report of the assessment within 20 working days from when the child started to be looked after. [9]

Asylum seeking families - initial accommodation

When an asylum seeker (and their dependants) is receiving asylum support and accommodation, they will be accommodated in 'initial accommodation'. While in initial accommodation, they are entitled to receive a health assessment by an independent health care team. The initial accommodation provider should inform them about this when they arrive. The health care team should make appropriate health care referrals and help people to make appointments to see a GP.

Young people and families receiving asylum support - section 4 or section 95 dispersal accommodation

When an individual (and their dependants) arrives at dispersal accommodation, the accommodation provider is required to ensure that they are provided, in a language they understand, with instructions about how to register with a local GP and a dentist.

Accommodation providers are contractually obliged to take someone receiving asylum support to a GP within five working days if the person has a pre-existing condition or is in need of an urgent GP review. [10] This includes all children under nine months old and pregnant women. If the person is also in urgent need of a new supply of prescribed medication, the accommodation provider must take them to a GP within one working day of arrival at the dispersal address. [11]

Interpreters

Using interpreters in healthcare for children and families with little or no spoken English is crucial to ensure they can access services and receive an appropriate standard of care. Clinical commissioning groups should facilitate free interpreting services for NHS patients whether they be in a hospital, GP practice, community clinic, or dental surgery.

Options for those struggling to access primary health care

If you're not happy with an NHS service, you can **make a complaint**. Complaints should be made to the

person or organisation providing the service first, such as the GP, dentist, hospital or pharmacist. Alternatively, it is possible to complain to the commissioner of that service – either NHS England (www.england.nhs.uk) or the area clinical commissioning group (CCG).

In general, NHS England commissions most primary care services, such as GP and dental services. CCGs oversee the commissioning of secondary care, such as hospital care and some community services.

The **Patient Advice and Liaison Service (PALS)** offers confidential advice, support and information on health-related matters. It can help resolve concerns or problems with using the NHS. The nearest PALS office can be found on the NHS Choices website: www.nhs.uk.

Doctors of the World runs a clinic and advocacy programme in east London that provides medical care, information and practical support to vulnerable people, helping them access the healthcare they need. They offer free and confidential support whatever the individual's status or location. See <http://doctorsoftheworld.org.uk/pages/london-clinic> for more information.

NOTES

[1] While the Department of Health originally published details of charging for primary health care in its Migrant NHS Cost Recovery Plan 2014 – 2016 it has been reported that charging will not be extended to primary healthcare until further consultation has been undertaken in Autumn 2015 – see

<http://www.migrantsrights.org.uk/news/2015/dept-health-charging-primary-care-de-prioritised-and-postponed> and <http://www.migrantsrights.org.uk/blog/2015/02/migrant-primary-care-charge-proposals-shelved-now>

[2] NHS England 'Patient Registration Standard Operating Principles for Primary Medical Care (General Practice)' at

<https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2015/11/pat-reg-sop-pmc-gp.pdf>

[3] NHS Choices, How do I register with a GP?, at <http://www.nhs.uk/chq/Pages/1095.aspx?CategoryId=68&SubCategoryId=158>

[4] British Medical Association, 'Overseas visitors and primary care' at <http://bma.org.uk/practical-support-at-work/gp-practices/service-provision/overseas-visitors-and-primary-care>

[5] *ibid*

[6] Department of Health, Guidance on implementing the overseas visitor hospital charging regulations 2015, para 11.45

[7] Department of Health, Guidance on implementing the overseas visitor hospital charging regulations 2015, para 11.47

[8] London.gov.uk, 'Access to primary health care' at <http://www.london.gov.uk/priorities/health/publications/access-to-primary-health-care>

[9] Promoting the health and well-being of looked-after children: Statutory guidance for local authorities, clinical commissioning groups and NHS England, March 2015, at http://www.rcpch.ac.uk/system/files/protected/page/DH_Promoting_the_health_and_well-being_of_looked-after_children.pdf

[10] NHS certificate HC11, 'Help with health costs Applies from 1 April 2015' at <http://www.nhs.uk/NHSEngland/Healthcosts/Documents/2015/HC11-march-2015.pdf>

[11] Home Office, Healthcare needs and pregnancy dispersal guidance, updated December 2013, p. 26

This fact sheet should not be used to give legal advice and is for information and guidance only. For advice on individual cases, assistance should be sought from an independent regulated legal adviser.

For further assistance contact our advice line. Call 0207 636 8505 or email mcp@coramclc.org.uk.