

WOODBIDGE HILL SURGERY

Removal of Patients Policy

Version	Edited by	Date issued	Next review date
1.0	Michelle Harcus	1/4/25	1/4/26
1.1	Kerry Barnes	24/4/26	24/4/28

1. Purpose

This policy outlines the circumstances in which patients may be removed from the practice list and the procedures that must be followed. The practice is committed to providing safe, effective, and equitable care while maintaining a respectful and safe environment for patients, staff, and visitors.

Patient removal will only be considered when all reasonable efforts to resolve issues have been exhausted, except where immediate removal is justified due to violence or serious threats.

2. Scope

This policy applies to all registered patients and all members of the practice team.

3. Principles

The practice will:

- Treat all patients fairly and without discrimination.
 - Follow NHS contractual requirements and relevant legislation.
 - Consider each case individually.
 - Document all decisions and actions.
 - Ensure patient safety remains paramount.
 - Avoid removing patients solely because they have made a complaint or raised concerns about their care.
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4. Reasons for Patient Removal

Removal from the practice list may be considered where there is a breakdown in the doctor-patient relationship that cannot be resolved.

Examples include:

4.1 Violent or Threatening Behaviour

This includes:

- Physical violence
- Threats of violence
- Aggressive intimidation
- Racist, sexist, discriminatory, or abusive behaviour
- Damage to practice property
- Harassment of staff or other patients

Such incidents may result in immediate removal from the practice list and notification to the appropriate NHS body.

4.2 Persistent Abusive or Unacceptable Behaviour

Examples include:

- Repeated verbal abuse
 - Harassment via telephone, email, or social media
 - Repeated unreasonable demands despite explanation
 - Persistent disruptive behaviour affecting patient care
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4.3 Breakdown of Trust

Where mutual trust has irretrievably broken down despite attempts at resolution.

Examples include:

- Persistent refusal to engage appropriately with treatment
 - Repeated unfounded allegations against staff
 - Behaviour preventing safe delivery of care
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4.4 Fraudulent or Criminal Activity

Including:

- Providing false information
 - Prescription fraud
 - Theft
 - Deliberate misuse of NHS services
 - Criminal acts within practice premises
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4.5 Repeated Non-Compliance Affecting Safe Care

Examples may include:

- Persistent failure to attend appointments despite reminders and discussion.
- Repeated refusal to comply with essential infection prevention or safety requirements.
- Behaviour that places staff or other patients at risk.

Non-attendance alone should not normally result in removal unless it forms part of a wider pattern that significantly affects safe and effective care.

5. Situations That Will Not Normally Result in Removal

Patients will not normally be removed because they:

- Make a complaint.
- Request a second opinion.
- Have complex health conditions.
- Require frequent appointments.
- Have disabilities.
- Have mental health conditions.
- Have communication difficulties.
- Have protected characteristics under equality legislation.

Reasonable adjustments will always be considered.

6. Procedure

Unless immediate removal is justified:

Step 1 – Identification

The concern will be reviewed by the Practice Manager and/or GP Partner.

Step 2 – Investigation

Relevant evidence will be gathered, including:

- Incident reports
- Clinical records
- Statements from staff
- Correspondence

Step 3 – Resolution

Where appropriate, attempts will be made to resolve concerns through:

- Discussion with the patient
- Written communication
- Behaviour agreement
- Mediation where appropriate

Step 4 – Warning

Where appropriate, a written warning will explain:

- The behaviour causing concern.
 - The expected standards of behaviour.
 - Possible consequences if concerns continue.
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7. Immediate Removal

Immediate removal may be appropriate where:

- There has been actual violence.
- There are credible threats of violence.
- Staff or patient safety is at risk.
- Police involvement has occurred.

The practice will follow NHS reporting requirements.

8. Decision to Remove

The decision should be made by the GP Partners following review of all available information.

The decision will be documented with reasons recorded in the patient's record.

9. Notification

The patient will receive written notification explaining:

- The decision.
- The reason for removal (where appropriate).
- The date removal becomes effective.
- Information regarding registration with another GP practice.
- Any relevant NHS contact information.

The appropriate NHS body will also be notified in accordance with contractual requirements, who will communicate with the patient to provide the above information.

10. Safeguarding

Removal decisions involving:

- Children
- Adults at risk
- Patients receiving palliative care
- Patients with severe mental illness

must include consideration of safeguarding responsibilities and continuity of care.

11. Equality and Diversity

The practice will ensure removal decisions comply with the Equality Act 2010.

No patient will be removed because of:

- Age
- Disability
- Gender reassignment
- Marriage or civil partnership
- Pregnancy or maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

Reasonable adjustments will be considered before removal.

12. Documentation

The following will be retained:

- Incident reports
- Warning letters
- Correspondence
- Meeting notes
- Decision records
- Notification letters

Documentation will be stored securely in accordance with UK GDPR and NHS records management requirements.

13. Responsibilities

Practice Partners

- Approve removal decisions.
- Ensure compliance with NHS regulations.

Practice Manager

- Coordinate investigations.
- Maintain documentation.
- Notify relevant organisations.

Practice Staff

- Report incidents promptly.
 - Maintain professional conduct.
 - Record factual information.
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14. Related Policies

- Zero Tolerance Policy
 - Complaints Policy
 - Safeguarding Policy
 - Equality and Diversity Policy
 - Information Governance Policy
 - Confidentiality Policy
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15. Policy Review

This policy will be reviewed every two years or sooner if there are changes in legislation, NHS contractual requirements, or best practice guidance.