



## Waterfront Medical Centre

THE WATERFRONT MEDICAL CENTRE  
HEOL Y LLONGAU  
BARRY  
VALE OF GLAMORGAN  
CF63 4AR

TELEPHONE: 01446 734131  
FAX: 01446 724345

### PATIENT PROTOCOL TO JOIN OUR PRACTICE



As long as you are living within the practice boundaries (see map) you can register with the practice.

Completed packs need to be returned on a Thursday between 13:00- 16:00 hrs to be able to join the Practice. All patients will need their NHS number to register at this Practice

Any Patient (or representative over 18 years of age) wishing to register must provide the Practice with some form of identification i.e. birth certificate, passport, driving license or utility/household bill stating a Barry address.

**Prior to joining the Practice, please ensure you have at least 1 month supply of medication from your previous GP surgery.**

The Waterfront Medical Centre operates a 'book on the day' appointment system for GP appointments. Lines open at 8am Monday to Friday. You will be asked the nature of the problem to enable the team to book you in with the most suitable clinician – this can include a Doctor, an Advanced Nurse Practitioner, an Advanced Paramedic Practitioner, the Practice Pharmacist or another clinician where appropriate.

If you are suffering with an eye problem, you will be asked to contact an optician.

If you are suffering with a dental problem, you will be asked to contact a dentist.

If you are suffering with a common ailment, you will be asked to contact a local pharmacy.

Nurse appointments at the practice can be booked up to 2 weeks in advance for things like asthma/COPD reviews, diabetic reviews, cervical smears, blood pressure checks and depo injections.

Our Practice Pharmacist is booked in advance for Medication Reviews – please call to book an appointment as soon as possible after being notified you need a review as these can be 2-3 weeks in advance.

For minor injuries or if you need to visit the A&E department please call CAV 24/7 on 0300 1020247 before attending. If you require urgent medical attention outside of normal surgery hours (or on weekends/bank holidays) please call the Out of Hours service on 01446 729562 or NHS Direct on 111.

In a genuine emergency, you should call 999.

WEBSITE: [www.waterfrontmedicalcentre.co.uk](http://www.waterfrontmedicalcentre.co.uk)

FACEBOOK: [www.facebook.com/Waterfrontmc](http://www.facebook.com/Waterfrontmc)

TWITTER: @WaterfrontMedic



## **REPEAT PRESCRIPTION REQUESTS TAKE 72 HOURS TO PROCESS**

This does not include bank holidays or weekends. We do not take repeat prescription requests over the phone – all requests must be made online or via dropping your repeat prescription order form into the surgery. To order repeat prescriptions online please sign up to My Health Online (form attached) and download the MySurgery App which can be found in the App store or by scanning the QR code provided.

## **IMPORTANT INFORMATION RELATING TO BENZODIAZEPINE DRUGS**

We do not prescribe any medication in the ‘benzodiazepine family’. If you are presently taking medication such as Diazepam, Temazepam or any other form of benzodiazepine you will automatically be put on a reduction plan with a view of stopping the medication.

This forms part of the conditions to you being registered with the practice.

## **Acceptable Behaviour Contract**

By joining the practice, I am accepting and signing a written agreement between myself the patient and The Waterfront Medical Centre agreeing to follow in respect of future conduct:

1. I will not threaten or abuse staff at the Waterfront Medical Centre.
2. I will not threaten or abuse other patients.
3. I will not damage any property or write graffiti in and around The Waterfront Medical Centre.
4. I will not act in a manner that causes or is likely to cause harassment, alarm or distress to the doctors, surgery staff and other patients. This includes the use of profanities.

By breaching this contract, I can expect to be:

1. Removed from the doctors list and as a patient at the Waterfront Medical Centre
2. Reported to the police with a view to charges being brought against me.
3. Considered by the health body for listing under the ‘Violent Patients Regulations’ which could mean that I will be allocated to a surgery/alternative primary care scheme at which I will only be seen by a doctor when police are in attendance.

**I confirm that I have read the above Practice Protocol and understand the information presented. I confirm that I have read and understand the meaning of the Acceptable Behaviour Contract and understand the consequences of breaking the contract. A copy of this contract may be disclosed to other agencies for the purpose of assessment of risk to and protection of other persons.**

**SIGNATURE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**D.O.B:** \_\_\_\_\_ **DATE SIGNED:** \_\_\_\_\_

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