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Dear Michelle,

## Gypsy, Traveller and Roma access to health services

Thank you for raising the issues around the access of Gypsy, Traveller and Roma people to health services with me as a representative of Friends, Families and Travellers at the National Voices Roundtable on 5 March.

We have emphasised in the NHS Constitution the right of all people – including Gypsies, Travellers and Roma people – to have access to health services, free at the point of use, including registration at GP practices. We have challenged guidance that gives a contrary impression and reinforced this right to access health services with the first-ever health inequalities duties on access to health services as part of our wider effort to improve health and reduce health inequalities.

While no formal restrictions exist in respect of Gypsies, Travellers and Roma people registering with GPs, including those of no fixed abode, I recognise that registration is not always straightforward in practice. However, GP practices cannot refuse an application to join its list of NHS patients on the grounds of race, gender, social class, age, religion, sexual orientation, appearance, disability or medical condition under the terms of their contracts. They can only turn down an application if NHS England has agreed that they can close their list to new patients, or if they have other reasonable grounds.

There is no legal requirement to provide identification when registering with a GP. GP practices may have a practice policy to request identification but it must be

applied in a non-discriminatory way i.e. everyone wishing to register is asked the same questions. Inability by a patient to provide identification would not be considered reasonable grounds to refuse to register someone. If a patient does not have an address, a practice may accept gypsies and travellers onto its list of patients by using its own address as the address of the patient, or an address of a hostel where appropriate.

We set up the National Inclusion Health Board to help examine the obstacles and barriers faced by these vulnerable 'Inclusion Health' groups, including Gypsies, Travellers and Roma as well as homeless people, sex workers and vulnerable migrants. The work of the Board has highlighted challenges around the needs of these groups and provided practical guidance for tackling many of the common issues that face these groups. We commissioned the Royal College of General Practitioners (RCGP) to provide guidance to NHS commissioners and others in the NHS in the light of these new duties. The RCGP report *Improving access to health care for Gypsies and Travellers, homeless people and sex workers* emphasised that the poor health status of Gypsies, Travellers and Roma is aggravated by poor living and environmental factors, which makes a coordinated response across NHS and other services even more important.

Information sharing between different agencies is a key factor in improving access for Gypsies, Travellers and Roma, given their high mobility and complex needs. However, it needs to be based upon patient confidentiality when it comes to sharing information with other non-health organisations. This principle of confidentiality, backed by patient consent for the use of such information underpins our approach. We have established the Independent Information Governance Oversight Panel (IIGOP) under the chairmanship of Dame Fiona Caldicott to oversee the process and safeguard patient information. She has emphasised how people's trust may be damaged if information they have provided in confidence is improperly disclosed. The Information Governance Alliance has recently completed a public consultation on the need for strict rules around sharing such information while ensuring people in need receive the services to which they are entitled, and at all times guided by patient consent. It will be publishing its response to the consultation shortly.

I appreciate and value the work Friends, Families and Travellers has done to improve the position of Gypsies, Travellers and Roma people in relation to health services, including through flagging the needs of the communities and acting a champions on their behalf at local level.

JEREMY HUNT