## FHFT & BSPS: GP & GP Locum Change of Details Notification Form

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| **Please** **state if this is a** **change to an existing GP or GP Locum’s details, or details for a new starter or leaver?** |  |
| **Full name of GP / GP Locum:** |  |
| **GMC number / Professional body code:** |  |
| **Practice name:**  |  |
| **Practice address:** |  |
| **Practice Code:** |  |
| **Does the clinician need a drop down on ICE (i.e., requesting in their own name):** |  |
| **Start Date of Change:** |  |
| **End Date of Change (if applicable):** |  |
| **\*\*IMPORTANT \*\* Where applicable, please ensure PCSE (Primary Care Support England)** **have been updated of the change. This ensures the national ODS reports are updated (which in turn update the FHFT systems).** |
| **PLEASE RETURN TO:** fhft.iceepicsupport@nhs.net and cc: frimleyicb.primarycarecontracts@nhs.net***Please add in the subject line of the e-mail, if the request is for a New Starter, Leaver or for ICE Access*** |