

## Practice Prevention Programme

This form is to be used to submit monthly figures for prevention appointments for children in socially deprived areas with active disease.

Please use this form to submit:

- the total number of prevention appointments
- the number of appointments relating to patients gender
- the number of appointments relating to patients age

Please submit your monthly figures by 20th day of each month.

The figures you submit each month should relate to the previous month's appointment data i.e. data for September 2016 would be submitted by 20th October 2016.

## Practice Prevention Programme

Do you know your Contract Number?

Yes  No

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### Practice Prevention Programme

What was the total number of prevention appointments delivered?

Total Appointments



### Practice Prevention Programme

Please provide the age categories of the total number of patients

*If there are no responses for an age category please enter "0".*

Aged 3-6 years

Aged 6-16 years

Total responses  *Please note: This total must be equal to the total number of prevention appointments.*



## Practice Prevention Programme

Thank you for completing your practice prevention programme responses

**Please press 'Submit' to send us your figures**

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## Practice Prevention Programme

Please provide the gender for the total number of patients

*If there are no responses for a gender category please enter "0".*

Male

Female

Total responses  *Please note: This total must be equal to the total number of prevention appointments.*

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