Top tips for GPs

- When a patient registers with your surgery, ask if they have served in the Armed Forces and if they have, Read code them as 'Military Veteran' on your computer system. There are also Read codes for 'Member of Military Family'.
- Consider whether a patient who attends with a health problem, especially mental health, might be a Veteran or family member and ask them if they have served in the Armed Forces or if they are the family member of a service person.
- There are sometimes additional or different referral pathways available which may be more suitable for Veterans' (for example bespoke NHS Veteran services or charitable services).
- When referring a Veteran to secondary care, ensure that this status is included in their referral letter, as they may be entitled to priority treatment if the problem is attributable to their time in uniform.

- Remember that families of
- Veterans can often suffer as well, so please ask what services they might need.
- Complete the free Health Education England CPD accredited e-learning package that looks at the similarities and differences between Armed Forces patients and their civilian counterparts. Please visit **www.e-lfh.org.uk**/ programmes/nhs-healthcarefor-the-armed-forces to access.
- Join your regional NHS Armed Forces network. To find out more, email england. armedforceshealth@nhs.net.
- Become an Armed Forces
- Veteran friendly accredited GP practice. To find out more, email ruth.bishop@rcgp.org.uk

Dedicated health services for the Armed Forces community

Veterans' Mental Health Transition, Intervention and Liaison Service (VMH TILS)

The VMH TILS is for Armed Forces personnel approaching discharge and Veterans. Available across England, the service seeks to provide increased access and treatment to appropriate and timely mental health services, from recognising the early signs of mental health problems and providing access to early interventions, to providing therapeutic treatment for complex mental health difficulties and psychological trauma. Patients are also provided with help, where appropriate, with employment, reduction in alcohol consumption, and housing and social support. Patients are able to self-refer or request referral via a health care professional or service charity. For more information visit www.england.nhs.uk/commissioning/ armed-forces/veterans-mental-health-services/.

Veterans' Trauma Network

The Veterans' Trauma Network provides specialist care to veterans with servicespecific trauma injuries. Located in ten major trauma centres across England, the network is linked with NHS Veterans' mental health services and a number of military charities to provide a complete package of care by top military and civilian trauma experts. Referrals to the network should be made via a GP to england.veteranstraumanetwork@nhs.net.

Hearing Loss and Tinnitus Services

If a patient has acquired hearing loss and / or tinnitus relating to their time in service, additional support can be funded through the Royal British Legion Veterans' Hearing Fund. To access the service, a patient can be referred to their local NHS audiology department or an application form can be downloaded via the Veterans' Medical Funds webpage at www.rbl.org.uk/vmf.

Mobility Equipment Support

The Royal British Legion has a Veterans' Mobility Fund, which provides specialist wheelchairs, orthotic equipment and other mobility related items for veterans who have a service related serious physical injury and whose needs cannot be met through statutory services. Eligibility for the fund requires the condition to be attributable to service and typically applicants will be in receipt of a War Pension or relevant award under the Armed Forces Compensation Scheme. To find out more, visit www.rbl.org.uk/vmf.

For further information on NHS Armed Forces health, please visit: www.nhs.uk/NHSEngland/militaryhealthcare or email england.armedforceshealth@nhs.net.





Royal College of General Practitioners





Armed Forces Veteran friendly accredited **GP** practice

NHS healthcare for the **Armed Forces community** in England

The NHS provides a range of healthcare services for the Armed Forces community, which includes serving personnel (Regulars and Reservists) and their families, as well as Veterans and their families.





Armed Forces Veteran friendly accredited **GP** practice

NHS England commissions community and secondary care for serving personnel and Armed Forces families registered with Ministry of Defence GP practices. It is also responsible for commissioning a defined range of bespoke services for Veterans who have suffered major injury, such as the loss of a limb and for those Veterans who have mental health problems.

Clinical commissioning groups are responsible for the commissioning of health services for Veterans, Reservists and service families registered with NHS GPs in their area. As part of this, it is helpful for GPs to understand and consider the health needs of Veterans and service families, as well as non-mobilised Reservists, in local commissioning plans.

The Armed Forces Covenant To support fair access to treatment, the Armed Forces Covenant sets out a number of health commitments for the Armed Forces community:

- The Armed Forces community should enjoy the same standard of, and access to healthcare as that received by any other UK citizen in the area they live.
- Family members should retain their place on any NHS waiting list, if moved around the UK due to the service person being posted.
- Veterans should receive priority treatment for a condition which relates to their service, subject to clinical need.
- Those injured in service should be cared for in a way which reflects the nation's moral obligation to them, by healthcare professionals who have an understanding of the Armed Forces *cultu*re.

To find out more, visit: www.armedforcescovenant.gov.uk.

Serving personnel

Due to the nature of their job, many service personnel are very fit and active and tend to be younger than the general population.

There is a detailed screening and assessment process prior to joining the military, which typically means that long-term illnesses found within civilian counterparts are less common. However, musculoskeletal problems (especially involving a patient's back, knees and lower limbs) are more common.

Reservists make up about a sixth of serving personnel at any one time and tend to be older than Regulars. They are primarily cared for by their registered civilian GP, but receive occupational health advice and care from military GPs when mobilised.

Military personnel may access NHS primary care when on leave (including out of hours services), however, in all cases (apart from Reservists) their normal GP remains their military GP.

Military personnel can only register with an NHS GP as a temporary resident – although special arrangements are possible for extended temporary registration. In both cases, the NHS GP should liaise with the patient's military doctor.

Service personnel are unable to selfcertify for their first seven days of illness and require a 'Fit Note' for every day they are unable to work.

Veterans

There are around 2.6 million Veterans in Great Britain of whom 52% are 75 years or older. A Veteran is someone who has served in the Armed Forces (Regular or Reservist) for at least one day.

In many cases, Veterans have similar levels of health to the general population, however, a minority have physical and mental health issues specific to their time in service.

to alcohol.

For further information on NHS Armed Forces health, please visit: www.nhs.uk/NHSEngland/militaryhealthcare or email england.armedforceshealth@nhs.net.

Whilst there has been an emphasis on Post Traumatic Stress Disorder (PTSD), the actual rates for Veterans are not high (around 6%), which is broadly equivalent to the incidence amongst civilians. More common issues include other mental health difficulties, such as anxiety, depression and problems related

There is growing evidence that a range of mental health conditions may appear (or patients may present) some years after Veterans have left the Armed Forces. These conditions may relate to their military experiences, transition out of service, or pre-service vulnerabilities.

Armed Forces families Service families often have additional pressures on family life and may be more vulnerable as a result. These pressures include:

- stress around deployment
- extended and repeated periods of separation from spouses and partners
- social isolation from family and friends
- additional and sudden caring responsibilities.

Service families tend to move every two years, however, should not be disadvantaged by losing their place on hospital waiting lists when this happens.