

**Heathgate Medical Practice  
Policies and Protocols  
Military veterans' treatment priority  
(Adopted from Healthwatch Norfolk)**

**Background**

In 1997, the NHS published guidelines relating to the priority treatment of war pensioners. This was reviewed and updated in 2008 suggesting that all service veterans should receive priority access to NHS care for any condition which is likely to relate to their military service. This is though, subject to fair treatment for all other patients based on clinical need.

Many conditions do not become obvious until after a veteran has left military service and within the national guidance, clinicians are asked to be aware of the Government's desire to prioritise care and consider the military aspects of a condition when diagnosing and referring to secondary care.

Veterans are encouraged to identify themselves to their GP as a member of the Armed Forces Community.

**Most frequent conditions**

The national guidance refers to three main clinical areas associated with military veterans:

1. Audiology – noise induced hearing loss. It is possible that cases may present now which have been symptomatic for some time.
2. Orthopaedic – may arise sometime after discharge from service but relate to in-service activity.
3. Mental Health – may present some years after military discharge. PTSD is not the biggest issue (this is just 4%). It is usually common mental health problems and or alcohol misuse.

**Protocol**

Where a known veteran is referred for further care, we should check with the patient that they are willing for the referral to indicate they are a military veteran.

Where consent to share this information is given, the referral should give a clinical opinion as to whether the condition is likely to relate to a period of military service.

Secondary care clinicians are responsible for any prioritisation, taking into account the priorities of other patient groups, based on clinical need.

Our referral route (including E Referral) should only select the priority of the referral on clinical need or clinical guidelines. Subsequent re-prioritisation based on military service will be made by the secondary care provider.

## **Sample text to include within referrals**

'As this patient is a military veteran and their condition may be related to military service, this referral should be considered for prioritisation under the rules set out by the NHS England and Armed Forces Covenant associated with NHS care'.

## **Identifying ex-military personnel**

To aid with the identification of ex-military personnel, the Practice has a selection of national joint NHS and Armed Forces leaflets available in our waiting rooms, along with posters on the notice boards.

With patient consent, READ codes can be applied to the patient record to identify this.

The following READ code is applicable:

- Ua0T3 (SystemOne code)

The leaflets on display in the waiting room have a tear off slip requesting this code is added to their medical record.

## **Resources**

The NHS Choices website has a specific section on veteran's healthcare with links to the Armed Forces Covenant.

[www.nhs.uk/NHSEngland/Militaryhealthcare](http://www.nhs.uk/NHSEngland/Militaryhealthcare)