

Dear Colleague



27 February 2015

PRIVATE AND CONFIDENTIAL

Unit 3
Alpha Court
Monks Cross
York
YO32 9WN

Email address – julie.warren3@nhs.net
Office contact – 0113 824 8006

The Armed Forces Covenant and what it means for Primary Care

As background, the Armed Forces Covenant is regarded as the ‘contract’ between the population of the UK, the Government and all those who serve or have served in the UK armed forces and their families. The Covenant notes that the armed forces fulfil a responsibility on behalf of the population and the Government, sacrificing some civilian freedoms, facing danger and, sometimes, suffering serious injury or death as a result of their duty. Families also play a vital role in supporting the operational effectiveness of the armed forces. In return, the Covenant states that the whole nation has a moral obligation to the members of the armed forces together with their families.

Those who serve in the armed forces, whether regular or reserve, those who have served in the past, and their families, should face no disadvantage compared to other citizens in the provision of public and commercial services. Special consideration is appropriate in some cases, especially for those who have given most such as the injured and the bereaved.

Veterans should receive priority treatment where it relates to a condition which results from their service in the armed forces, subject to clinical need.

Those injured in service, whether physically or mentally, should be cared for in a way which reflects the nation’s moral obligation to them whilst respecting the individual’s wishes. For those with concerns about their mental health, where symptoms may not present for some time after leaving service, the ambition is that they should be able to access services with health professionals who have an understanding of armed forces culture.

For GPs, asking, READ coding and recording if patients have served in the armed forces, or are part of the wider armed forces community (family, reservist, etc.) will help their patients get better access to the full breadth of NHS services; including some that are specifically focussed on this cohort (e.g. the Reserves Medical Assessment Programme). It may give access to specific veteran-focused funding (e.g. prosthetics or mental health) and further charitable services (e.g. mental health).

This knowledge will also enable GPs to access their prior medical records; a précis of which should be provided by the new veteran on leaving their respective service and registering with an NHS GP. The registration and recording helps the referral process, as well as the commissioning and planning of appropriate services.

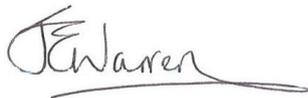
To assist GPs, I am delighted that the RCGP have already produced and made available a free e-learning training pack. This is currently being reviewed and updated and will imminently be re-released. Further information is also available via NHS Choices.

Some additional issues for you to consider?

- Do you know how many veterans you have in your practice population and your responsibility to them and their families under the Armed Forces Covenant?
- Is your practice using the veteran and reservist code on your GP system?
- Are you taking advantage of:
 - The e-learning package for GPs
<http://elearning.rcgp.org.uk/course/info.php?id=87>
 - The Veterans Mental Health App? [Apple store for veterans app](#)
[Android:store for veterans app:](#)

I trust the above information will be of use to you and your practice team. If you require any further information regarding health care and the Armed Forces Community, please contact Jim Khambatta, Armed Forces Commissioning Manager, NHS England (Yorkshire and The Humber) – j.khambatta@nhs.net.

Yours faithfully



Julie Warren
Locality Director
(North Yorkshire and the Humber)