

Global Support Organisation Defence Primary Healthcare

Guide Healthcare **Central European Practice**



Welcome & Introduction

Welcome to the Central European Practice (CEP) patient information leaflet. As your Defence Primary Healthcare (DPHC) virtual practice whilst on assignment to Europe/ Türkiye we hope that you enjoy your time overseas. Whilst undoubtedly rewarding, we recognise that living overseas can also be challenging, particularly when living in small communities without access to the level of onsite UK military support that you might be used to when in the UK or even when living in large overseas Garrisons. Please rest assured that support does exist and is accessible, though it may be more limited and remote in nature and more reliant on contribution from host nation and/or local services than UK specific. This document is designed to assist you in developing a clear understanding of how to access healthcare whilst at post from a DPHC(O) perspective and is applicable to Service Personnel (SP), Civil Servants (CS) and eligible family members (EFM). The CEP supports all those on permanent assignment overseas within Europe/ Türkiye who are not based directly in a location which has its own DPHC Medical Centre.

Healthcare support across the Europe/ Türkiye diaspora is delivered by local and/or host nation providers. Provision of care locally will be benchmarked against UK/NHS expectations and standards. Where adequate, effective, safe and/or cost proportionate healthcare support cannot be accessed overseas, individuals will be advised to return to the UK on a temporary or permanent basis for specific or on-going treatment, investigations or procedures. In order to ensure success in your transition overseas and throughout your posting it is essential that all SP, CS and family members are aware of the healthcare offer in their location <u>prior</u> to moving overseas.

We hope you find this leaflet useful. Crucially, it should be read in conjunction with all the other Defence and location specific resources available to support your posting overseas. Additionally, CEP also has an induction video which you may find a more accessible means to develop your understanding of your healthcare overseas and the role that the practice plays in this – the link to the video can be found within this leaflet.

Should you have any questions about your healthcare during your posting please use the appropriate contact details available in this leaflet. If you are unsure of who to contact the CEP are always available to assist or provide signposting. Please don't hesitate to reach out if you need help and support. We do hope you enjoy your time overseas.

CEP Practice Team



Central European Practice – About Us

The CEP is a Registered UK General Practice. We are one of the Defence Primary Healthcare (Overseas) practices that fall under Defence Primary Healthcare (DPHC) and more widely the Defence Medical Services (DMS). Defence Medical Services is one of the branches within UKStratcom.

The CEP was established in 2016 as the Defence Primary Healthcare point of contact for those posted overseas in locations in Europe and Turkiye not served by a DPHC fixed base medical centre. CEP currently supports a population of around 2700 people who are spread across 32 countries in Europe and Turkiye and well over a hundred different locations. With only 9 core members of staff in the office (most of whom are based at SHAPE in Belgium) We are sure you will appreciate the scale of the task that we have, and we are always grateful to our patient population for their patience as we try to answer queries and support them as swiftly and efficiently as possible.

The CEP's role is to provide DPHC support to eligible patients and commands within our AOR. Unlike other DPHC Medical Centres we are a support service not a primary care deliverer – as care delivery is via local services and/or referral to UK specialist services. The Practice offers remote occupational health, administrative and at times clinical support to our patient population and their commands. As a UK General Practice once registered with us, we hold your UK primary healthcare record and will therefore receive reports and letters from other NHS and/or DMS specialist providers you may be seeking care from. Patients are strongly advised to obtain all healthcare records from host nation providers and send to the CEP for medical records management purposes. This will enable the CEP to maintain your healthcare history for future healthcare requirements and ultimately for transition back to the UK or elsewhere overseas at the end of your posting.

For service personnel, the CEP is the equivalent of your unit DPHC med centre in the UK – although of course as above we play a more oversight rather than direct care delivery role whilst your primary care delivery is through local and/or host nation services. Crucially, in line with Kings Regulations we are the POC for SP to inform their military medical point of contact of any new medical conditions and/or treatment that is needed and/or provided through non DMS services in their overseas location. If SP have any requirements for occupational health support such as grading reviews or medicals whilst overseas their first POC is CEP.

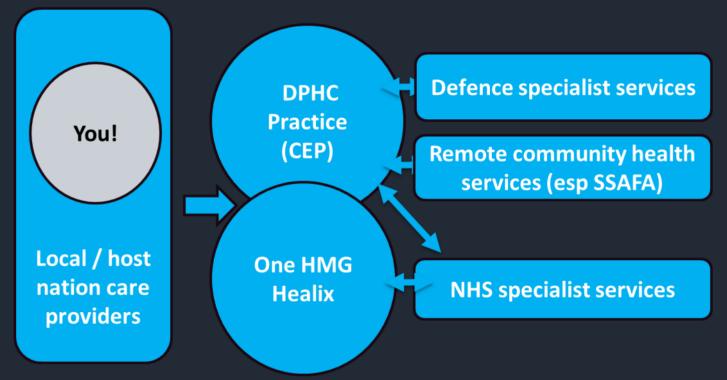
The CEP is the clinical contract lead for contracted healthcare partners such as One HMG Healix and SSAFA within our AOR. This means that we work in close partnership with One HMG Healix for clinical case management that they undertake on behalf of Defence – including providing Defence clinical oversight of decision making about care pathways. We are partnered with SSAFA for the delivery of a bespoke Health Visitor programme that supplements (and does not replace) equivalent services in location. Equally we provide access to a UK trained Midwife who provides remote oversight to supplement (again not replace) maternity care services in location.

Further detail on the role of CEP and the services we provide within your overall healthcare plan overseas are detailed in the remainder of this leaflet.



Overview of Healthcare Provision

Your healthcare during your time overseas will predominantly be delivered by host nation or local providers in your area of posting. However it is important to understand how certain UK services, including CEP, are positioned to provide support depending on your circumstances. The graphic below visually depicts this.



Local / host nation care providers – Local providers are your first POC for clinical care during your overseas posting. Depending on location and status this will be a GP or equivalent and will be either a military or civilian practice. When referrals for specialist care are advised by these clinicians following UK review these may also take place in location via local providers. Emergency care is also initially undertaken in via local providers – with repatriation to UK by UK services for follow on care when required.

One HMG Healix – For those requiring registration with One HMG Healix for their overseas posting (most but not all CEP patients – please check with your sending organisation / local command if unsure) One HMG Healix acts as the UK point of contact for authorization and payment for services obtained through local healthcare services, and referral to NHS services when required. Healix International are a medical management company and NOT an insurance company – they manage care pathways on behalf of Defence but ultimately all care costs are charged to Defence. They coordinate rather than deliver care and are accessible to registrants 24/7 through a helpline for queries.



DPHC Central European Practice (CEP) – CEP is your UK registered General Practice and Defence point of contact during your posting overseas. Whilst we do not deliver clinical care the Practice holds and updates UK primary healthcare records as we are informed of care – and transfers this information onto your UK military or civilian General Practice and the end of your time with us. The Practice undertakes Occupational Health reviews for all SP within our Practice, undertakes remote Force Health Preparation advice as required, and liaises with command and unit elements regarding Unit Health Committees and elements of medical risk management. CEP coordinates a remote Health Visiting and Midwifery programme bespoke to the Practice and is the clinical lead for Healix in the area of responsibility – partaking in discussions and decision making about care pathways and supportability in location.

NHS Specialist Services – Whilst you are not eligible whilst posted overseas to retain a UK NHS GP, all members of the military community posted overseas do retain eligibility to be referred to NHS specialist services as required. This is normally for medical and surgical consultant reviews, both adult and child, and for follow on care such as surgery where this is not able to be delivered in a clinically or economically appropriate manner in host nation. Equally, for those with long term conditions such as diabetes or arthritis for which an annual secondary care review is required, it is often appropriate for you to retain care under the NHS for this.

Specialist Defence Medical Services – As your DPHC Practice CEP has access to refer you as required to specialist Defence Medical Services departments that also serve the overseas populations. This includes the Overseas Mental Health Team who work remotely from the UK and for whom both SP and civilians are eligible – adult services only. For SP additionally CEP can refer to Defence Audiology Service, Regional Rehabilitation Units (normally Halton) and Single Service Occupational Health teams as required either for advice or for remote or face to face treatment to ensure UK and Defence assured care.

Remote Community Health Services – CEP is currently able to provide remote community health services in Health Visiting and Midwifery to all Practice registrants. These services are designed to supplement and not replace the clinical care you receive through local and host nation services – which remains primary. For Health Visiting this service is delivered via SSAFA and for Midwifery this is a freelance UK trained Midwife and Lactation Consultant. More detail on these programmes comes later in the leaflet.



Pre-Arrival Process – Clearances and ⓒ Back to Index Registrations

Please note a posting is not confirmed until all required MOD screening has been undertaken to confirm that MOD is able to meet the needs of you and your family in the proposed location. The MOD Policy document <u>Assessment of support needs for</u> <u>accompanied assignments overseas</u> must be followed for pre-arrival screening activities and it is the responsibility of all SP and CS being assigned overseas to ensure they are familiar with their responsibilities within.

ACCOMPANIED SERVICE PERSONNEL - For service persons aiming to go overseas accompanied by family members you should be directed to the UKStratcom Families Section who will then coordinate your families MOD screening via the Global Medical Screening Cell (GMSC). All family members must undergo screening, including those who will be in full time education (boarding school/University). For the latter please ensure you make this clear to the Families Section and GSMC. Screening is still important for those children who will be visiting post for SCVs as temporary urgent and emergent medical support may be required during these visits. Families Section can be contacted on UKSTRATCOM-DefSp-DSCOM-FamSec@mod.gov.uk.

ALL SERVICE PERSONNEL – Unaccompanied service persons do not need to contact the Families Section. All Service Persons, whether accompanied or unaccompanied should liaise with their current/ UK Medical Centre to ensure that they undertake Force Health Preparation as required. For all those graded with a grading less than MFD a Medial Risk Assessment must be undertaken in liaison with Career Manager and Job Specification. SP are also strongly encouraged to ensure that their JMES reviews, Audio and Routine Vaccinations are well in date at the time of arriving at post – these aspects are much better achieved whilst in the UK or whilst attached to a fixed base Medical Centre that on arrival at post.

CIVIL SERVANTS – The point of contact for all Civil Servants to initiate pre-arrival screening is Defence Business Services (DBS) who can be contacted on <u>DBSCivPers-ResourcingTeam1@mod.gov.uk</u>. DBS will then liaise with the relevant agencies such as GMSC to ensure pre-screening is undertaken.

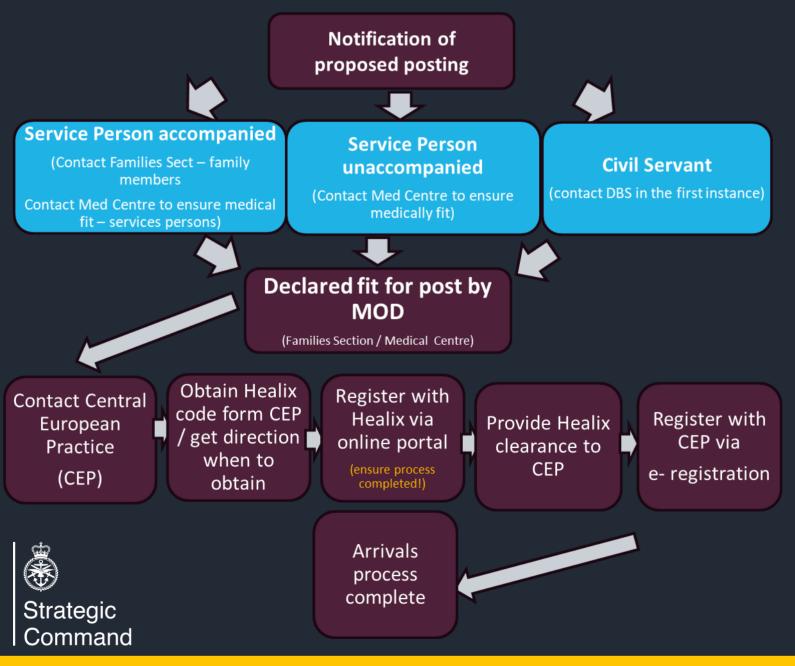
ON COMPLETION OF SCREENING

Once MOD have completed pre-screening via GMSC and Families Section please ensure you contact CEP via our Group Emailbox to let us know that you (and your family) have been declared fit to proceed to post so that we can guide you through the next stages of preparation such as registering with One HMG Healix if applicable and registering with CEP. Please ensure you continue to liaise with your current Medical Centre / NHS GP on other aspects of pre-arrival medical preparation.



Top tip when registering with Healix based on experience of many of our population. Please be aware that there are two stages to registering with One HMG Healix. The first is to create an account on their platform – one must be created for all family members over 16. Once completed you will receive an email with log in details to complete their registration screening forms. Please don't forget to complete this second step as you will not be registered with them if you do not complete the whole process.

The final stage is to register with CEP – your DPHC(O) virtual practice whilst you are overseas. When we are aware of your posting CEP will give you access to our current eRegistration form. In line with Chief of Defence Staff direction (Oct 24) all SP, CS and EFMs posted overseas must be registered with their allocated DPHC(O) Practice whilst overseas. Please be aware that registering with CEP will de-register you from your previous UK/Defence Practice in order that we can hold and maintain your UK primary healthcare records and support you fully as per our remit and your overseas medical plan.



In addition to relevant screenings, registration and risk assessments there are a number of healthcare related checks and preparations SP, CS and EFMs are required to ensure they complete prior to arrival overseas:

ALL:

- Location specific vaccinations Please ensure you enquire via your military or civilian Practice Nurse at your current GP what vaccinations you require for your location of posting. A useful source to access is NaTHNaC Travel Health Pro -<u>NaTHNaC - Home (travelhealthpro.org.uk)</u>. For EFMs requiring travel vaccinations not offered via the NHS please be aware of the DPHC Guidance Note 26/17 which allows you to either book into a DPHC Families Practice as a temporary patient to get these vaccinations completed or alternatively go to a civilian travel clinic and reclaim the costs of the required vaccinations via JPA.
- NHS screening programmes If you are within 3 months of being due any NHS screening appointments (Breast, Cervical, Bowel, Diabetic Eye, AAA, Age checks) at time of posting please ensure you get these completed if at all possible before posting.
- Long Term Conditions If you have any long-term conditions that require periodic review, please ensure this is completed and up to date before posting.
- Repeat Prescriptions Please ensure you bring AT LEAST 3 months of any routine or repeat prescriptions with you to post.
- **Primary Healthcare Summary Record (SCR)** request copy from UK GP / unit medical centre to bring to post to assist your local primary healthcare provider.
- Child development checks please ensure all relevant checks are up to date by your Health Visitor or School Nurse.

SERVICE PERSONS ONLY:

- JMES (Med Grading) Please ensure this is in date for at least 6 months at the time of posting and where a specific MRA is required this is completed by your losing Medical Centre in liaison with Single Service Career Management and Occupational Health as required.
- Hearing Conservation Programme (Audio) Ensure in date / undertake if due within 6 months. Ensure time for repeat if required!



Routine Vaccinations – Ensure in date in line with JSP 950.

Strategic Command

What to check on arrival

Immediately on arrival at post – via your local admin office and arrivals information, you are encouraged to ensure that you are aware of and have completed the following important elements to ensure you can access care efficiently when required:

Ensure you are aware of:

- Local emergency numbers This varies in location so please approach your Head of Location for further advice and guidance
- Local GP and Community Paediatrician (or equivalent).
- Local hospitals with emergency departments (adult and paediatric).

Double check you are:

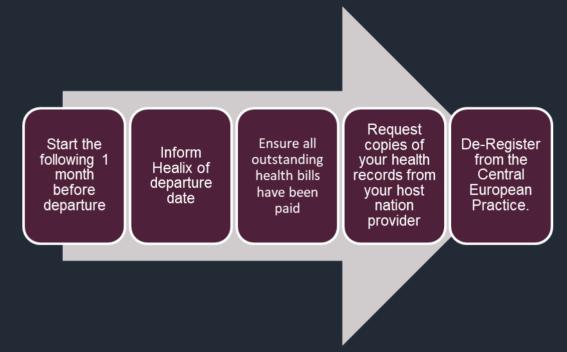
- **Registered with One HMG Healix** Healix should provide confirmation, if you have not received this, please call One HMG Healix.
- **Registered with the CEP** CEP should provide confirmation, if you have not received this, please contact the CEP.
- Have private travel health insurance and GHIC for your personal needs and out of area travel.



De-Registration and Change of Circumstances

De-registration

On completion of your posting, it is important that all SP and family members are deregistered from the CEP. Initiating the de-registration process will enable the CEP to administer your healthcare records and forward all relevant information to your next Primary healthcare provider. The following process must be followed to ensure the deregistration process is completed efficiently:



CHANGE IN CIRCUMSTANCES

Please ensure you inform the CEP if any of the following take place during your posting:

- EFM changes status to UK for education (boarding school, college or University).
- EFM wishes to leave post location to reside in the UK.
- EFM residing in the UK wishes to come to post full time.

Any queries on general overseas status and entitlement should be addressed to your local admin / J1 department in the first instance.

Please note

Any family members wishing to change their full-time residence from UK to Overseas are required to undertake full screening through the Families Section BEFORE moving overseas. It is a SP responsibility to ensure this is complete. Please contact Families Section if unclear and requiring guidance about screening requirements.



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Accessing Care – Emergency and Out of Hours

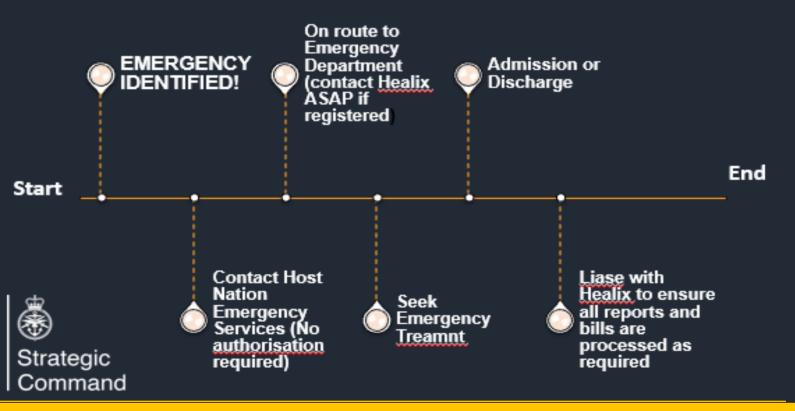
IMPORTANT

Emergency care is accessed through host nation / local services. Please ensure that you are aware of your national and/or local emergency phone numbers, facilities and processes on arrival at post. Do not wait until you have an emergency before finding these out!

In many countries in Europe and/or Turkiye Emergency Services are accessed by calling 112. However please be aware that there is some variation in both number and process for engaging emergency services depending on country and individual location. It is therefore extremely important that you enquire with your local command or admin unit when you arrive in country confirm relevant emergency numbers. Equally please be aware that access to emergency services can vary between locations – again please ensure you enquire with your local command or admin unit on arrival.

The following are some considerations:

- Do you know where both adult and paediatric emergency centres are?
- Do you know processes and locations for maternity emergencies if required?
- Are you aware of reciprocal and/or billing arrangements for your local facilities?
- Do you know the local thresholds for calling an ambulance versus attending the local emergency department?
- In your location are there different processes for emergencies and non-urgent out of hours medical care?



Accessing Care – Primary Healthcare

Primary Care is classified as:

- Routine Doctor visits (GP or Community Paediatrician or equivalent)
- Prescriptions & repeat prescriptions
- Basic blood or urine testing
- Plain diagnostic X-ray
- Ultrasound scan of abdomen/pelvis
- Resting Electrocardiograph (ECG) assessment
- Minor procedures such as suturing or suture removal
- Wound care
- Routine vaccinations and child development checks in line with host nation schedule and Defence schedule for SP. (see also child health and Occ Health sections)
- Routine audiograms for Defence Hearing Conservation policy (Service persons only). (See also Occ Health section)

Primary Care is delivered by the local healthcare providers in the country of your assignment. Primary care is access to first line medical professionals such as a Doctor that is deemed the equivalent of a "UK GP". There is no requirement to gain pre-financial approval for primary care attendances and SP & their family members may choose a primary care provider of their choice in their local area.

Please be aware – where you are referred to or plan to attend a specialist service for services that in the UK would normally be conducted through your GP/ Medical Centre(such as cervical smear or routine vaccinations) you are required to notify Healix to ensure that payment mechanisms, if required, can be put in place. Please never assume MOD will pick up billing responsibilities outside of your local GP / local community paediatrician – you are strongly recommended to check first.

Please be aware that the following are NOT classified as primary care:

- Physiotherapy approval required
- CT scans approval required
- MRIs approval required
- Routine optician appts approval required normally not covered under medical.



Audiograms for CS or EFMs – approval required, only for clinical purposes.

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Accessing Care – Specialist/Secondary Healthcare

As with Primary Care, Secondary or Specialist Healthcare Care (SHC) is delivered by the local healthcare hospital settings in the country of your assignment. Secondary or Specialist Care is healthcare following a referral from your primary care clinician (GP, Community Paediatrician or equivalent). A referral is thus required from the Doctor, that refers you away from their care, and onto a specialist in a specific field of expertise, most likely within in a hospital setting. Please be aware that in many European Healthcare systems specialist care can be delivered in the same building as the primary Doctor – where a polyclinic system is being operated.

It is extremely important for all CEP registrants to understand that specialist care undertaken overseas must be approved IN ADVANCE. Any specialist care undertaken without prior approval by Healix will be required to be self-funded – retrospective approval is only given in exceptional circumstances.

If you are referred for specialist care please contact One HMG Healx without delay to discuss the referral, gain authorization to proceed or discuss alternative courses of action (such as referral to UK) and to discuss any billing needs as required. It is strongly encouraged that you approach Healix for authority for specialist services with a report from your primary care clinician detailing their findings and the reason for the referral – this will avoid delay in the authorization process.

Please note that specialist care and interventions are benchmarked against NHS eligibility and guidelines. MOD will only fund care in line with NHS eligibility and guidelines. Complementary therapies are unlikely to be funded. Physiotherapy is considered a specialist service and will only be authorized in line with NHS standards. Where proposed treatment pathways are not in line with NHS pathways and/or are unable to be accessed in a safe, effective and cost effective manner, referral to the NHS for access to NHS care may be required.

In accordance with JSP 661 the MOD is unable to assure Assisted Contraception Services clinics overseas and therefore will not commission ACS overseas. Interested parties seeking options for ACS whilst posted overseas should consult JSP 661 and contact CEP with any further queries.

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Child Health

The following is an outline of things to consider at various points of your posting relating to child health:

Before posting	On arrival
 Ensure Child vaccinations up to date Ensure child development checks up to date Sign up for <u>eRedbook</u> and complete questionnaire 	 Find local GP/community paediatrician. Ensure awareness of local emergency services locations and processes. Register with Central European Practice Receive invitation for transfer in contact with SSAFA Health Visitor for 0-5s (once registered with CEP)
During posting	Access to specialist services
•Vaccination and child development check	*Complex cases – referral to NHS paediatician
schedule of host nation via local GP /	for assessment may be required.
 paediatrician. Your SSAFA Health Visitor is available for remote advice should you have any child 	 Speech and Language Therapy – over 3.5 years discuss with <u>Defence</u> Children Services. Under 3.5 years, discuss with SSAFA Health
development concerns.	Visitor.
 Keep records of all local healthcare input – send to CEP for inclusion in UK primary 	 Child and Adolescent Mental Health – very limited provision. Discuss with CEP / SSAFA

Some tips and considerations relating to child health:

- In some countries children are not seen by a GP but by community paediatricians instead. Please make yourself aware on arrival at post of the situation in your location.
- Whilst overseas you should follow the schedule for child development checks and routine vaccinations of your host nation NOT the UK. Schedules can normally be easily found online and you should engage earlier with your local GP or Paediatrician to ensure that they are aware of your child and can advise on any catch ups so that your child is up to date for the local schedule.
- For any specialist referrals your paediatrician may advise (eg speech and language, audiology, mental health) please be advised that these required prior authorisation before proceeding. Please contact Healix in the first instance.
- For Speech and Lanague Therapy for child of nursery / school age please be aware that this is currently managed by Defence Children Services rather than heathcare so DCS should be contacted in the first instance.



Strategic Command

Health Visiting

SSAFA Health Visitor (Specialist Community Public Health Nurse)

CEP is very fortunate to have access to a SSAFA Health Visitor who will make contact with each 0-5 year old at least once during posting and who is available for child development queries to the 6-19 population on a case by case basis. The Health Visitor provides bespoke elements of the UK Healthy Child Programe on a remote basis and is an invaluable resource for CEP and our patients to ensure that the public health elements of child and parental health are addressed whilst overseas. This includes issues relating to feeding, sleeping, attachment and bonding, speech and language, emotional and behavioural health, and safeguarding. The health visitor also delivers the CONI programme and on occasion remote Solihull parenting courses.

The CEP Health Visitor programme contains the following planned and additional remote appointment with the Health Visitor:

- Antenatal appt (approx 32 weeks gestation)
- New Birth Visit (approx 10-14 days postpartum)
- Healthy family remote visit (approx 4-6 weeks post partum)
- Transfer in contact (those registering with CEP aged 0-5 years)
- Universal Plus contacts (when required in response to need)

Upon registration with CEP our Health Visitor will be notified if you are pregnant or have children in the 0-5 age bracket so that she can arrange a remote appt with you, normally within 1 month of registration.

For those without children aged 0-5 the Health Visitor can be contact on an ad hoc basis if you feel you would like to discuss something with her.

To contact the Health Visitor please ask CEP or email the Health Visitor group email at <u>UKStratcom-DMS-DPHC-HV-EurGrp@mod.gov.uk</u>

For all those with children overseas you are encouraged to download and use the eRedbook. This can be done via the following process:

- 1. Download app via apple/Google Play
- 2. Sign up using local British Forces (BF) postcode (or BF99 1AA if unsure)
- 3. Ensure SSAFA arrivals questionnaire completed add the attribute "#SSAFA Move to CEP"





e**redbook**

Maternity Care

If you find out you are pregnant whilst you are overseas, first of all, congratulations! The first step is to see your local host nation provider to understand how maternity care is delivered in your location and seek any required referrals, for example to Midwifes or Obs and Gynae specialists. Please then inform both CEP and One HMG Healix who will play a part in your support during your ante and postnatal periods.

Unless risk assessed as requiring UK maternity / birth care (in which case discussions will be undertaken about when/how you should return to the UK) primary care for maternity services lies with host nation and local providers. In addition to this CEP runs a bespoke programme of Health Visitor and Midwife remote support to ensure cultural and linguistic overlay to your maternity care.

Care provision, and in particular scans and appointment eligibility is aligned with NHS expectations, though on a case by case basis there is some allowance for flexibility for coordination of care and patient safety. This is easier to apply where patients are under host nation public healthcare services rather than in a private healthcare system. For more detail on NHS standards of pregnancy care please access the NHS site - https://www.nhs.uk/pregnancy/your-pregnancy-care/. Please note that Antenatal courses (eg NCT) will not be funded by MOD. Equivalent course content is covered remotely by our Health Visitor and Midwife on a 1:1 basis.

The following displays stakeholder input and responsibilities during your pregnancy and postpartum periods:

Host nation / Local Care

- Face to Face appointments
- Primacy of care giving
- Maternity vaccinations
- Newborn screening

One HMG Healix

- Overarching pregnancy monitoring Authorisation of
- local appointments
- Coordination of payments
- NHS Referral if required

Central European Practice

- Referral to remote Midwifery support
- MOD liaison for UK / host nation birth planning
- Mat B1 if required
 NHS and PHC
 Registration for
- newborn (if applicable)

Remote UK Midwife (Fiona)

- Remote support to overlay not replace host nation care
- 2 antenatal remote contacts
- 1-2 postpartum remote contacts
- UK specialist advice throughout pregnancy

SSAFA Health Visitor

- Antenatal remote Health Visitor contact approx 32 weeks (preparing for parenthood)
- New born remote visit approx 10-14 days
- Healthy family remote visit approx 4-6 weeks



Mental Health

"Taking care of your mental health is just as important as taking care of your physical health" #worldmentalhealthday

There are many options for support for your mental health during your overseas posting and this support can be individualized for each person.

Firstly, you may wish to consider some of the online and self-help resources found in the Health Promotion and Education section of this leaflet. These include Mind, Together All and Alcohol Change UK. Many have helplines and online forums should you wish to chat and find support for your needs.

Secondly the single services all have counselling services accessible by self-referral to both serving persons and EFMs. This includes the Army Welfare Service, RAF Benevolent Fund and Royal Navy and Marines Charity. Additionally for Civil Servants counselling can be accessed through the Employee Assistance Programme. All of these options are professional counselling but sit outside of MOD medical services.

If your mental health needs related to maternity and parental mental health our Midwife and Health Visitor are trained in this specialist area and are a great point of contact in the first instance.

Further to the above, you may wish or need to contact CEP for access to specialist mental health services and you are very welcome to do so – please do not delay if you are in need. CEP is able, when required, to make referrals to the DPHC Overseas Mental Health team who have access to psychiatrist, psychologists and community psychiatric Nurses all of whom undertake remote assessments and therapy from the UK. Following assessment with the OHMT if you prefer face to face therapy in location rather than remote therapy this may be able to be arranged if a suitable provider in location can be identified. This will be discussed at your assessment with the OMHT. Please note mental health services are considered a specialist services and you must seek prior authorization before accessing them at post if you are looking for MOD to finance these services. In this case it is not required to go through Healix – you may contact CEP directly.

In all CEP areas there is very limited access to child mental health support. Due to linguistic and cultural challenges access to child and adolescent mental health services will often require a multi-agency assessment to determine if these are suitable. More recently however CEP does have limited access to some remote Child and Adolescent Mental Health assessment and therapy services and these will often be used as first line to establish need and assess risk. Please contact CEP for more information if you require.

Please note: If you feel that you or someone else's life is at imminent risk due to severity of mental health need you should call an ambulance or attend an emergency department without delay.

Clinical Screening Programmes

Standards of screening programmes across Europe and Turkiye will generally be good however there will be variances in recall timelines and clinical care pathways compared to the UK. Where possible Defence offers overseas patients the option of undertaking screening either in their location of posting or in the UK. Core eligibility for MOD facilitation of screening is in line with NHS criteria. Details of screening programmes run by the NHS can be found here – <u>https://www.nhs.uk/conditions/nhs-screening</u>. Host nation programmes should be in line with national screening programmes rather than variances offered by private providers in location or supplements offered above the national screening programme on a private basis.

Cervical Screening

CEP currently operates a cervical screening recall service from the NHS England database CSMS. All eligible patients registered with CEP will be informed of their eligibility via email when the arise on CSMS as being due. The CEP has an information letter which explains options of having screening in UK or host nation. If you wish for a copy of this information ahead of being recalled please contact CEP directly. If you think you are due or overdue cervical screening please contact your local healthcare provider and/or CEP.

Breast Screening

In late 2024 CEP started to receive breast screening recall letters from NHS England following a project run in partnership with Defence Public Health. Currently NHS England sends eligible CEP patients a letter of invitation to attend breast screening in London. The invitation is for a particular date however is amendable to suit the individuals schedule. Alternatively screening is able to be sought in host nation and on provision of both report and images second reported by Centre of Defence Radiology. The recall programme is taking a while to filter through the population – in the meantime if you believe you are due breast screening please contact CEP.

Bowel Screening

Currently options for bowel screening are to have in host nation or, when on routine travel to the UK be facilitated to undertake a FIT test via a UK DPHC Practice. CEP is currently unable to run a bowel screening recall service. For further advice about options for bowel screening please discuss with your local host nation provider or contact CEP.

Diabetic Eye and AAA screening

If you believe you are eligible for these screenings please contact you local provider or CEP for advice.



CEP - Occupational Health Management

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PLEASE NOTE

Service Person Occupational Health and Force Health Protection is undertaken in accordance with JSP 950 and Single Service Policy. CEP is the POC for this.

SP have a responsibility to comply with Service Medical Instructions (Kings Regulations) to inform their DPHC Medical Practice (CEP) of any changes to their health status and/or any interventions undertaken outside of DMS services.

Please note One HMG Healix does NOT have an occupational health remit for MOD and all Occupational Health for Civil Servants is accessed through Line Management.

Sickness Absence	Medicals	Specialist Occupational Health input:	Force Health Protection
 Self-certification in line with 2021DIN01-043. Shorter periods (generally under 2 weeks) - host nation authorised, notification to CEP. Longer periods (generally over 2 weeks) - host nation led but CEP MUST be notified. Service Person responsibility to ensure CoC aware and JPA updated. 	 Routine medicals (undertaken remotely by CEP): Injury / condition / maternity based JMES reviews Age Related PMEs (RAF) MRAs for Duty Travel when required. Specialist Medicals (undertaken by CEP or referred to alternative services) Aircrew Medicals Diving Medicals Extension of Service medicals Transfer to foreign military medicals Release medicals 	 Referral through CEP: Single Service Occupational Health teams Institute of Naval Medicine (Hearing related input) Regional Rehabilitation Unit (RRU) Halton – Musculoskeletal and Podiaty Input 	 HCP (Audios) - Options for host nation, SHAPE or UK referral. Contact CEP for advice. Routine Vaccinations – Options for host nation, SHAPE or UK referral. Contact CEP for advice. Duty Travel requirements – CEP is NOT responsible for med plans for duty travel but can advise on suggests vaccination and other FHP requirements. Please provide JIs / FHPI if avalable.
rategic			

Global Support Organisation

EN10

Command

Travel – Personal, Duty and Medical Travel

It is very important that you understand eligibility and responsibilities related to travel away from your location of posting – whether for duty, personal or medical reasons. The following gives an oversight but there may be variances in process depending on unit and command. Please ensure you engage with your Line Manager and/or local admin unit to ensure you are familiar with the processes for your individual circumstances.

Personal Travel

Your healthcare arrangements for your location of posting, through CEP and One HMG Healix, is planned and available for personal reasons for your country of posting only. If you are planning high risk or remote activities, you are strongly encouraged to have suitable personal arrangements for healthcare cover for these circumstances. If you are travelling outside of your country of posting, which we expect most people will at one time or another during your posting, your full healthcare arrangements are a personal responsibility.

Duty Travel

Duty travel for those employed by Defence. If you are travelling inside of your country of posting and undertaking normal daily activities your normal healthcare arrangements through CEP and Healix apply, though you do need to ensure that you are aware of local healthcare facilities in your location of travel and that you have a suitable medical plan in place – this includes for school trips. For duty travel outside of your country of posting it is a personal responsibility to ensure you have discussed with your line manager or chain of command what your medical plan and arrangements are for your duty travel.

Medical Travel

For some, it may be decided, either during your pre-posting screening or indeed whilst overseas, that you will travel back to the UK for an appointment or two. In this case, when you are aware of this need, please contact CEP and we will provide the relevant documentation to support your application for public funded travel.



Eye and Dental Care - Signposting

Opticians and Eye Care

Defence Employed Personnel (Uniformed, Civil Service, LEC) Entitlements and processes in accordance with <u>JSP375_Vol1_Chap12.pdf</u> (sharepoint.com)

Civilian Personnel

Entitlement jaw the NHS eligibility and <u>NHS Voucher Scheme</u>: Children under 16, or up to the age of 19 if in FTE, are entitled to free eye tests & a contribution towards the lenses. This will be reimbursed under unit UIN jaw NHS voucher scheme if required.

Adults will only receive re-imbursement from the MOD if the eye-test and/or spectacles is in support of a clinical condition or clinical screening programme, such as annual diabetic screening. Requests for this should be notified to One HMG Healix for authorisation of appts / funding

Dental Care

Please note – CEP does not have a dental remit and is unable to answer dental queries.

Ensure you and your family are registered with One HMG Healix for dental as well as medical.

Dental queries should be directed to One HMG Healix in the first instance. For service persons occupational dental support and advice can be sought through the DPHC Overseas Dental Team. Local units can provide access to dental policy / resources



Interpretation Services

Whilst many healthcare providers speak some English there is significant variances across locations and countries. In the first instance you may wish to identify a local provider who speaks English if you are not familiar with the language spoken in your location. Further to this you may wish to ask your local provider if they have interpretation services free of charge for their patients. In some countries this may be case either as a policy for the individual provider or because this is required by national law.

If there is no interpretation service offered by your local provider DPHC offers access to telephone interpretation service by The Big Word in line with NHS standards. In order to use this service please follow the following steps:

- 1. Call The Big Word Interpretation Line on 0044(0) 113 212 4115
- 2. Enter the access code 7745 51265# (Please note ONLY patients of CEP are eligible to use this code)
- 3. Enter the language code (see below)
- 4. Once connected to an interpreter ensure that you make a note of their 'Interpreter ID number'
- 5. Following the call inform CEP by email that you have used the service, including the Interpreter ID number

Language Codes

Bosnian – 17	German – 4
Bulgarian – 707	Greek – 993
Czech – 710	Italian – 995
Danish – 711	Latvian – 773
Dutch – 713	Lithuanian – 735
Estonian – 783	Norweigan – 742
Finnish 716	Polish - 5
French – 95	Portuguese - 996

Romanian - 750 Slovak - 755 Slovene - 756 Spanish - 1 Swedish - 761 Turkish 764

Should you have any difficulties whilst trying to access an interpreter via Big Word please call Big Word Customer services on 0044(0) 800 757 3025.

Healthcare Finances

During your posting you will undoubtedly have financial charges for aspects of healthcare. Financing of healthcare overseas is in line with NHS eligibility and guidelines, healthcare outside of these criteria will not be financed by MOD though you may wish to self-fund according to preference (MOD policies apply).

Please note – where reciprocal care agreements exist and are accessible these should be used in the first instance in line with your agreed medical plan.

Before attending a provider of any kind you are encouraged to check with your local admin office and/or CEP and Healix whether there are any billing arrangement for that provider. For certain primary healthcare providers, in particular in locations with a resident GSO NSE office – CEP maintains cashless billing agreements with a limited number of primary care providers in order that patients can access primary care without any change to themselves.

If a primary care cashless billing agreement is not in place with your primary care provider you will likely be required to pay and claim for these services. This will be done by JPA or MyHR and different processes apply depending on your TLB and Budget Holder. It is important tha you liaise with your local admin office to understand the processes for your particular circumstances. This may involve getting a Notification of Authority from Healix and/or contacting CEP for approval and allocation of claim code.

For specialist care you should discuss billing options with Healix at the point of approval for appointment and/or treatment. Healix may be able to pay the provider direcrly by something called a Guarantee of Payment (GOP) or by electronic credit card. Alternatively they may request assistance from your budget holder or admin office to make the payment or they may ask you to pay and claim via JPA or MyHR. Where possible Defence aims to put in place mechanisms to minimise the amount that patients need to pay upfront themselves for healthcare, though in an overseas environment you will likely find times where you are required to pay upfront for services and reclaim via MOD later.

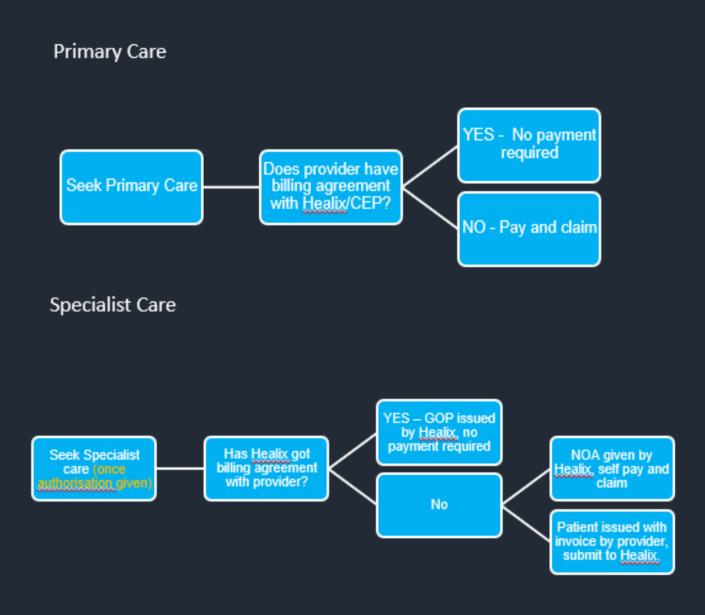
If at any point you have any queries about healthcare finances please contact your local admin unit in the first instance.



Healthcare Finance

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The following flow charts will hopefully assist you to understand relevant processes for healthcare finances at post:



Please note – any discussions regarding payment for specialist / secondary care MUST be directed to Healix. CEP is not the point of contact for any discussions about payment mechanisms for secondary care services.



CEP – Governance and Record Keeping

Medical Records

The CEP holds the responsibility to manage and maintain CEP registered personnel's NHS and Defence healthcare records. Individual healthcare records are an essential part of health and future care. To help ensure your health records are managed consistently we recommend patients request their host nation care providers share your medical information with the CEP. In most instances this will require the individual patient to send reports from consultation, investigations, scans etc from host nation to CEP directly, though in some larger areas there may be arrangements with local providers to from them, with appropriate consent, to send reports directly to CEP for inclusion in your UK healthcare record. All patients are encouraged to ensure when they leave post they have a copy of all their medical records from host nation – either from having provided to CEP during assignment or from requesting at the end of posting and taking back to the UK themselves. If at any point you require information or reports from your UK healthcare record during your posting please contact the CEP who will be able to assist in accordance with our Subject Access Request policy.

Confidentiality

Maintaining medical confidentiality is one of the guiding principles in the provision of a quality healthcare service. The Officer Commanding is the Caldicott Guardian for the Practice and the Practice Manager the Caldicott Manager. To provide information to clinicians to make sure the care provided to you is safe and effective DPHC keeps records about your health and any communications you have with DPHC. The DPHC privacy notice can be found here - 20180719-DPHC Patient_Privacy_Notice_v1.0_1_pdf

Chaperones

The CEP is committed to providing a safe and comfortable environment where patients and staff can be confident that best practice is always being followed. If you would like to request a chaperone for a CEP appointment, please inform the CEP before your appointment. The CEP is unable to influence chaperone policies of host nation providers however we encourage you to discuss with your local provider if you feel you wish for a chaperone at any appointment with them.

Safeguarding

The Safeguarding Lead for the Practice is the Officer Commanding. All Practice Staff are trained in Safeguarding and the Practice participates in a number of multi-agency forums to ensure good safeguarding practice. British Forces Social Work Service are the Defence point of contact for Social Service Referrals and they can be contacted 24/7 on 0044(0)808168 3111. The first point of contact for emergency safeguarding queries where you believe a child or adult is at risk of immediate harm should be your local police emergency number – normally 112 in Europe but in some locations this may vary.



Health Promotion and Education

There are many online and remote resources that you might find useful for your and your families health and well-being whilst overseas. If you have any quirties on a particular topic please do not hesitate to contact CEP for advice and signposting. However in the meantime we hope the following are useful:

GENERAL INFORMATION

NHS Conditions A-Z - <u>https://www.nhs.uk/conditions/</u> Patient Info - <u>https://patient.info/</u> NHS Live Well - <u>https://www.nhs.uk/live-well/</u> The UK Sepsis Trust - <u>https://sepsistrust.org/</u> The Stroke Association - <u>https://www.stroke.org.uk/</u> The British Heart Foundation - <u>https://www.bhf.org.uk/</u>

TRAVEL HEALTH, VACCINATIONS AND INFECTIOUS DISEASES

Nathnac Travel Health Pro - <u>https://travelhealthpro.org.uk/</u> European Centre for Disease Prevention and Control (ECDC) https://www.ecdc.europa.eu/en

CANCER AND GENDER RELATED HEALTH

Breast Cancer UK - <u>https://www.breastcanceruk.org.uk/</u> Cancer Research UK - <u>https://www.cancerresearchuk.org/about-cancer/breast-cancer</u> Prostate Cancer UK - <u>https://prostatecanceruk.org/</u> UK Cervical Cancer UK - <u>https://ukcervicalcancer.org.uk/</u> Bowel Cancer UK - <u>https://www.bowelcanceruk.org.uk/</u> Menopause Matters - <u>https://www.menopausematters.co.uk/</u> Balance Menopause - <u>https://www.balance-menopause.com/balance-app/</u>

CHILD HEALTH

Happy Maps (Youth Mental Health) – <u>www.hapymaps.co.uk</u> The Little Orange Book – <u>www.nenc-</u> healthiertogether.nhs.uk/application/files/7217/2545/5402/LOB_Booklet_24_v1.5.pdf Healthier Together - <u>https://www.what0-18.nhs.uk/</u> CONI - <u>https://www.lullabytrust.org.uk/bereavement-support/how-we-can-support-</u> you/our-care-of-next-infant-scheme/ eRedbook - <u>https://www.eredbook.org.uk/</u>



Health Promotion and Education 2

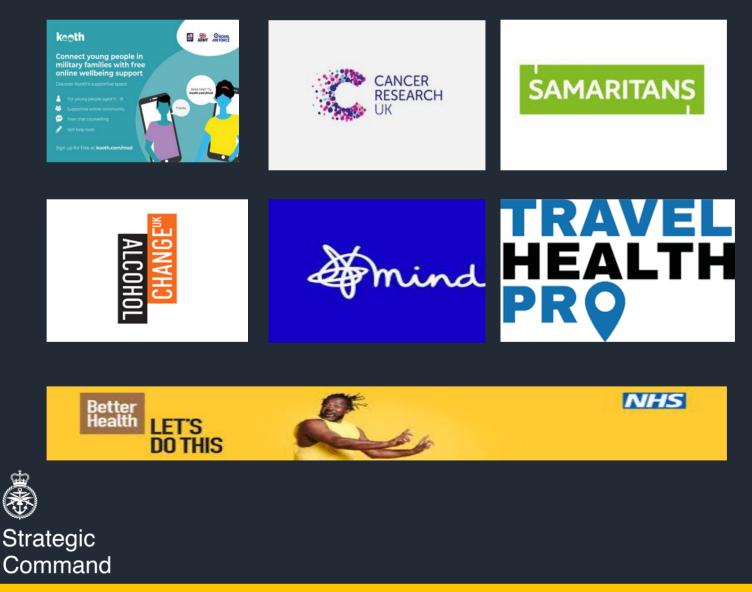
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MATERNITY HEALTH

NHS Pregnancy - <u>https://www.nhs.uk/pregnancy/</u> Tommy's org - <u>https://www.tommys.org/pregnancy-information/health-professionals/free-pregnancy-resources</u> National Childbirth Trust - <u>https://www.nct.org.uk/information/pregnancy</u> Miscarriage Association - <u>https://www.miscarriageassociation.org.uk/</u> OUH Maternity Resources – <u>https://www.ouh.nhs.uk/maternity/resources/</u>

MENTAL HEALTH

Samaritans - <u>https://www.samaritans.org/how-we-can-help/military/</u> Kooth - <u>https://www.kooth.com/mod</u> Togetherall - <u>https://togetherall.com/en-gb/mental-health-support-for-all-uk-armed-forces-veterans/</u> Mind - <u>https://www.mind.org.uk/</u> Beat – Eating Disorders - <u>https://www.beateatingdisorders.org.uk/</u> Alcohol Change UK - <u>https://alcoholchange.org.uk/</u>



Resources and Signposting

OPEN ACCESS RESOURCES

Global Support Organisation - GOV.UK Website – Central European Practice Patient Information Leaflet and GSO Location Leaflets. <u>Global Support Organisation - GOV.UK</u> Gov.uk (FCDO) – List of English speaking medical facilities and practitioners worldwide. <u>Doctors and medical facilities: worldwide list - GOV.UK</u>

SSAFA Website (SSAFA Europe GSO CEP)– Information about SSAFA community health programme for the CEP population. <u>SSAFA CEP GSO | SSAFA</u>

DEFENCE INTRANET RESOURCES

JSP 950 Medical Policy inc Leaflet 10-1-1

2020DIN01-137 Health service support to GSO post (Eur and Turkiye) *Under review* 2024DIN01-137 One HMG Healthline contractual support <u>2024DIN01-137-One HMG</u> <u>Overseas Commercial Healthcare Contract with Foreign, Commonwealth and</u> <u>Development Office.docx</u>

MOD Policy Assessment of Support Needs for Accompanied Assignments Overseas.

Defnet Health and Wellbeing Portal –

https://modgovuk.sharepoint.com/sites/IntranetHeadOffice/SiePages/Health-And/-Wellbeing.aspx

SOCIAL MEDIA

"Central European Practice" (Facebook and Instagram) "SSAFA Health Visiting – Mainland Europe and Turkiye" (Facebook)

JCCC (Joint Casualty and Compassionate Cell) – Management of British Armed Forces Casualties and Compassionate cases 24 hours a day, 7 days a week, 365 days a year Telephone 00441452519951

European Duty Field Officer (GSO Supported personnel and family members only) Telephone 0032479911075

British Forces Social Work Service British Forces Social Work Service Overseas Telephone 24/7 – 0044(0)808 168 3111



Strategic Command

Contacting your Practice

CENTRAL EUROPEAN PRACTICE OPENING HOURS

Monday to Friday 0830-1230 and 1330-1700 Central European Time

Please be aware that the following times the Practice is closed for staff training and meetings Monday 1130-1200 and Tuesday 1100-1200 CET

The Practice will be on limited staffing during UK and Belgian Public Holidays

One HMG Healix				
Email address	Healthline@healix.com			
Telephone	0044(0)208 481 7800			
Central European Practice				
General / clinical enquiries	UKStratcom-DMS-DPHC-EJSU-CEPGrp@mod.gov.uk			
Billing enquiries	UKStratcom-DMS-DPHC-EJSU-Fin@mod.gov.uk			
Telephone	0032 6544 2280			
eConsult	Google 'eConsult' and select Central European Practice			

Please remember that your host nation primary care and/or emergency care provider is your first point of contact for clinical queries. Please do not delay access to emergency care by waiting until you have contacted CEP and/or Healix.

Please remember in the case of emergency One HMG Healix operates a 24/7 Nurse led helpline so you should always have access to a UK clinical point of contact for advice if you require – whilst you are at post.



Patient Feedback

COMPLIMENTS AND COMPLAINTS

The Central European Practice welcomes feedback on the service we provide.

If you have a compliment about the <u>service</u> you have received from <u>CEP</u> please address it to the person concerned or to the Practice Manager.

If you have a complaint about any <u>aspet</u> of CEP's <u>service</u> please let us know as soon as possible so that we have the opportunity to address your concerns and review any processes as required. Complaints to the Practice are managed in line with JSP 950 and the Practice Manager is the Complaints Manager for the Practice. We always try to resolve any concerns as quickly and informally as possible.

If you have a compliment or complaint about a host nation provider or one of our contracted partners (such as One HMG Healix or SSAFA) please ensure you direct your feedback to the party concerned directly. <u>However</u> CEP values being aware of such feedback so that we can assist in continuous improvement of your overall healthcare provision overseas so please do keep us up to date with feedback to other parties. <u>In</u> order to improve our knowledge and database of local and host nation providers we have developed a specific feedback form for this purpose which you may like to complete from time to time during your posting overseas:

CEP Host nation / Local Provider Feedback Form

DPHC PATIENT EXPERIENCE SURVEY

If you have had contact with CEP or used our <u>services</u> we would welcome your feedback on your experience via the DPHC Patient Experience Survey. It is anonymous, takes only a few minutes to complete, and is used only to improve our services. DPHC Patient Experience Survey



Frequently Asked Questions (FAQs)

1. I am a service person who will require occupational health reviews whilst overseas due to medical conditions or trade requirements (eg Air Crew). How do I access these whilst overseas?

CEP is responsible (in conjunction with the service person and their chain of command) for undertaking occupational health reviews for service personnel where required. You are strongly recommended to be aware of timelines and requirements for your individual circumstances in line with single service policy. If you believe you are due a review whilst overseas, or are unsure, please contact CEP and we will advise and book you in to one of our occupational medicine clinics as appropriate. Most reviews can be completed remotely once any relevant investigations have been sought in host nation – individual requirements will be directed by CEP.

2. Who are One HMG Healix and what is their relationship with Central European Practice?

One HMG Healix is a medical management company that supports UK government departments, including MOD, to coordinate care for personnel and families working and living overseas. On behalf of CEP One HMG Healix will assess, authorise and arrangement payment for specialist care undertaken in host nation, or refer back to the NHS this is a more appropriate option for care delivery. One HMG Healix do not have access to Defence or NHS primary care records and therefore undertake their own screening process to ensure sufficient background information on your medical needs is captured prior to posting. The clinical teams of Healix and CEP work very closely to ensure that where possible care pathways are aligned to NHS and NICE standards.

3. Do I need to de-register from my UK GP when I move overseas?

It is a national requirement for UK GPs to de-register patients who move overseas for more than three months. Additionally since Oct 24 Chief of Defence staff has also mandated that all SP, CS and their EFMs overseas must be registered with their allocated DPHC(O) Practice – including virtual practices. As such personnel and families are requested to register with CEP upon arrival and for the duration of their assignment to ensure that they remain registered with a UK registered medical centre and that their UK primary healthcare record can be kept up to date. Equally, registration with CEP is essential to access some of the administrative services that we can provide such as Health Visitor and Midwifery Services, access to previous primary medical records, and certain medicals. Upon registration with CEP you will be de-registered with your previous UK GP.





4. I am due to travel to other countries for work during my posting. What are the medical cover arrangements for this travel?

CEP is not responsible for medical arrangement for duty travel outside of your country of assignment, our remit is your medical care for routine activities whilst you are at the location of your assignment. If you are aware that you will be travelling for work activities during your assignment your Line Manager is your point of contact to gain further details on medical plans and preparations for such travel as directed by your individual chain of command. You are strongly encouraged to ensure that you are aware of your duty travel medical plan BEFORE you depart on your travel. CEP can assist with Force Health Preparation for duty travel such as vaccination advice and individual risk assessments.

5. My children will be due some of their childhood vaccinations whilst we are overseas. How will I access these and should I follow the UK or host nation schedule?

Form a public health perspective, and in line with JSP 950, children in CEP areas should follow the childhood vaccination schedule of their host nation as advised and administered by their local host nation healthcare provider. In most cases vaccination schedules across Europe and Turkey are very similar and all are WHO approved. A national protocol is in place in the UK to ensure those children returning from overseas are caught up with the UK schedule if required on their return to the UK. Vaccinations outside the host nation schedule but within the UK schedule will only be funded by MOD at post in exceptional circumstances where there is clinical need – please contact CEP if you wish to discuss individual circumstances.

6. I am under the care of NHS secondary care services for monitoring of a long term condition. Should I discharge myself from this care when I move overseas?

All service personnel and families remain eligible for (most) NHS specialist care throughout their posting and in many instances it is recommended to maintain your NHS consultant led care throughout your overseas posting. This will be discussed with GMSC during your MOD supportability screening and CEP can be contacted for further discussion as required. Where care is appropriately maintained in the UK unit funding will be recommended to cover expenses to return to the UK for medical appointments for both service personnel and family members.

