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Global Support Organisation

Defence Primary Healthcare

# Guide Healthcare

## Defence Global Practice (DGP)

Healthcare support for personnel assigned to Europe and Türkiye



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# Welcome & Introduction

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Welcome to the Defence Global Practice (DGP) patient information leaflet for personnel posted to Europe and Türkiye . As your Defence Primary Healthcare (DPHC) virtual practice whilst on assignment, 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 DGP supports all those on permanent assignment overseas across the globe who are not based directly in a location which has its own fix based DPHC Medical Centre.

Healthcare support across the globe 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 prior 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. DPHC, through DGP, provides a remote support element to your medical plan, but this is just one small part of the entire medical provision plan which is put in place by your sending organisation and/or supporting unit overseas.

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 DGP 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.

DGP Practice Team



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# Defence Global Practice – About Us

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The DGP 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 DGP was established by DPHC as a point of contact for those posted overseas in locations across the globe that are not served by a DPHC fixed base medical centre. DGP currently supports a population of around 8000 people who are spread across the globe. With 16 core members of staff spread across 2 locations (DMS Whittington UK & SHAPE 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 DGP'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 can manage 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 DGP for medical records management purposes. This will enable the DGP 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 DGP 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 DGP.

The DGP 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.

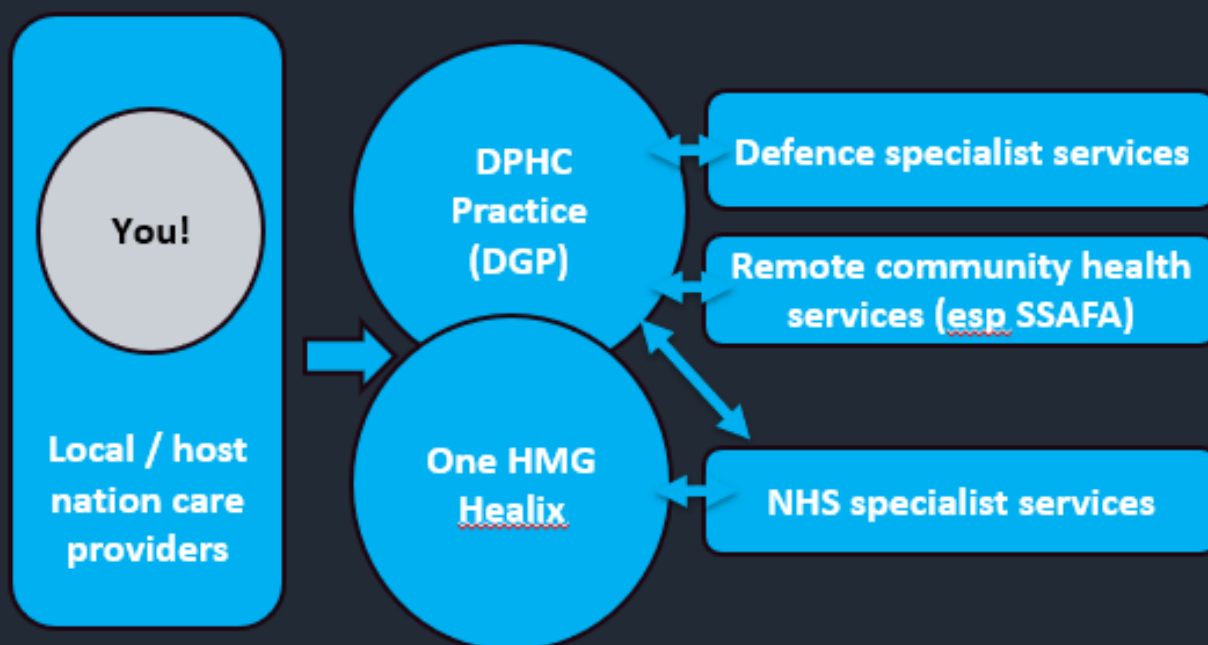
Further detail on the role of DGP and the services we provide within your overall healthcare plan overseas are detailed in the remainder of this leaflet.



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# Overview of Healthcare Provision

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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 DGP, are positioned to provide support depending on your circumstances. The graphic above assists to depict this as best possible.

**LOCAL AND HOST NATION PROVIDERS**— Local providers are your first POC for clinical care during your overseas posting. Depending on location and posting type 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 HEALTHLINE (HEALIX)** – For those requiring registration with One HMG Healix for their overseas posting (some but not all DGP 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. The associated DIN about Healix's contracted role can be found [here](#). This is held on Defence Intranet – EFM's who do not have access to Defence Intranet should ask their spouse, host unit or DGP for an offline copy.



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**DPHC Defence Global Practice (DGP)** – DGP is your UK registered General Practice and Defence point of contact during your posting overseas. Whilst we do not deliver clinical care the Practice manages your UK primary healthcare records as we are informed of care – and transfers this information onto your next UK military or civilian General Practice at the end of your time with us. The Practice undertakes Occupational Health reviews for all SP within our Practice, provides remote Force Health Preparation advice and signposting as required, and liaises with command and unit elements regarding Unit Health Committees and elements of medical risk management. DGP coordinates a remote Health Visiting and Midwifery programme bespoke to the Practice and is the clinical lead for One HMG 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 paediatric, 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 as much of this can be delivered remotely with infrequent trips back to the UK during your time overseas.

**SPECIALIST DEFENCE MEDICAL SERVICES** – As your DPHC Practice DGP 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 DGP 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 SUPPORT SERVICES** – DGP is currently able to provide remote community health support 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 Registrations

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**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 [Assessment of support needs for accompanied assignments overseas](#) 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.

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**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](mailto: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. SP should not post overseas with an audio dated more than 6 months previously.

**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 [DBSCivPers-ResourcingTeam1@mod.gov.uk](mailto:DBSCivPers-ResourcingTeam1@mod.gov.uk). DBS will then liaise with the relevant agencies such as GMSC to ensure pre-screening is undertaken.

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## ON COMPLETION OF SCREENING

Once MOD have completed pre-screening via GMSC and Families Section please ensure you contact DGP 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. If your healthcare support plan involves registering with Healix you may need to get this by another route. The One HMG Healix DIN will give you direction on who to contact for this- [2024DIN01-137-One HMG Overseas Commercial Healthcare Contract with Foreign, Commonwealth and Development Office.docx](#). In the meantime, please ensure you liaise with your current Medical Centre / NHS GP on other aspects of pre-arrival preparation which are covered in the following pages.

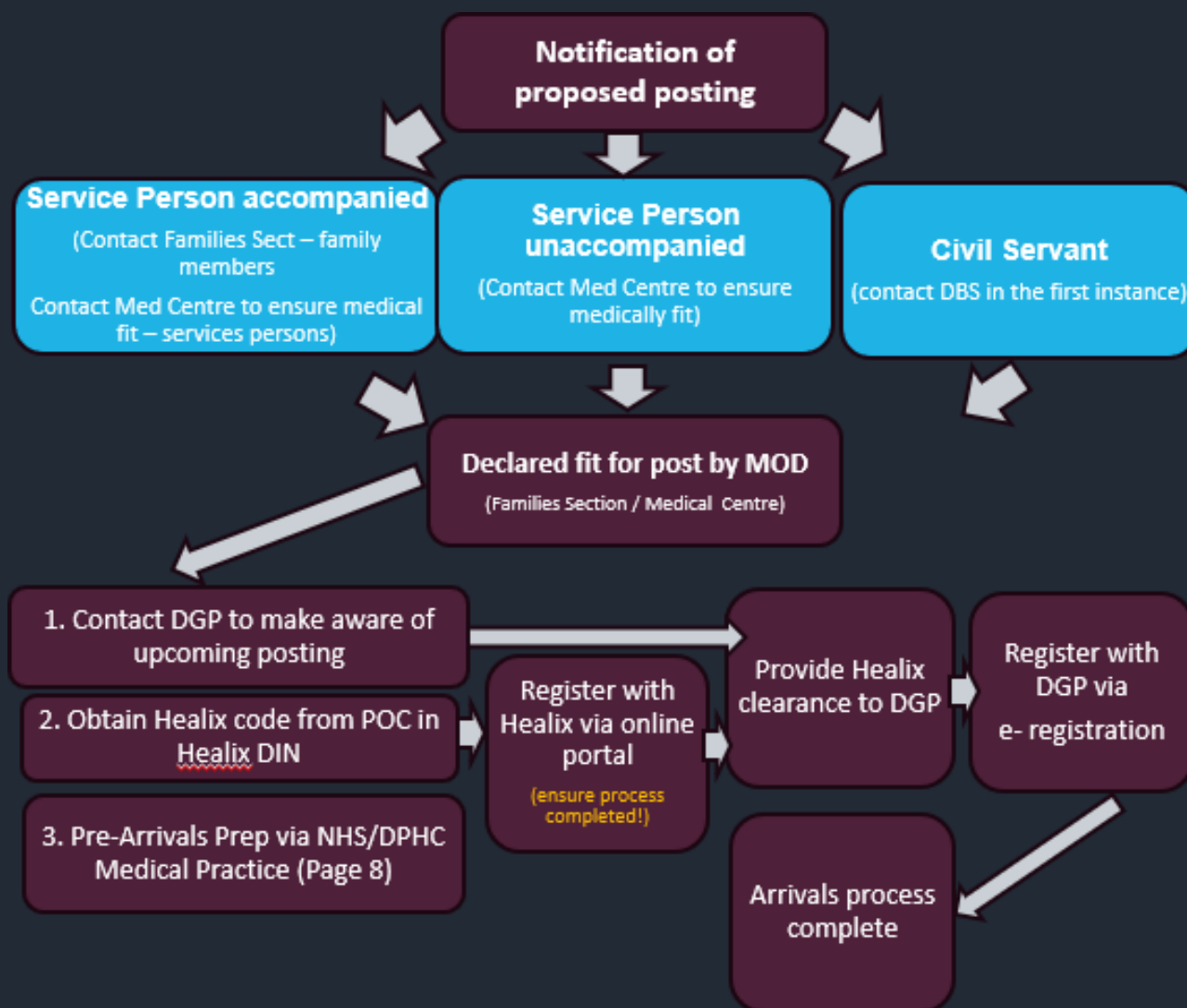


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The flow chart below aims to visual explain the pre-arrival process. It is essential that all aspects are completed.

**TOP TIP WHEN REGISTERING WITH HEALIX** - based on experience of many of our population. There are two stages to registering with One HMG Healix. The first is to create an account on their platform – all family members over 16 must create their own account. You can only create an account once you have contacted the relevant 'Gateway Lead' (for budget authorisation – see Healix DIN for POC.) Once you have created an account 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.

**REGISTERING WITH DGP.** When we are aware of your posting DGP will give you access to our current eRegistration form. In line with Chief of Defence Staff direction (Oct 24) all SP, CS and EFM's posted overseas must be registered with their allocated DPHC(O) Practice whilst overseas. Please be aware that registering with DGP 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 registrations there are a number of healthcare related checks and preparations SP, CS and EFM's are required to ensure they complete prior to arrival overseas:

### **ACTIONS FOR ALL (SP, CS AND EFM's):**

**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 - [NaTHNaC - Home \(travelhealthpro.org.uk\)](http://NaTHNaC - Home (travelhealthpro.org.uk)), though your location may have specific direction for those on MOD postings rather than travel. For EFM's 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 time of posting and where a specific MRA is required this is completed by your losing Med Centre in liaison with Single Service Career Management and Occupational Health.

**Hearing Conservation Programme (Audio)** - Ensure a recent audio has been conducted within 6 months of posting. Ensure time for repeat if required!

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



# What to check on arrival

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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).

**Healthcare access arrangements** – ie are there reciprocal care arrangements via public services, are you accessing private care, do you need a social security number to access services etc. This varies by location and nature of posting.

## DOUBLE CHECK YOU ARE:

**Registered with One HMG Healix** – If applicable. Healix should provide confirmation, if you have not received this, please call One HMG Healix.

**Registered with the DGP** – DGP should provide confirmation, if you have not received this, please contact the DGP.

**Have private travel health insurance and GHIC** in accordance with your personal needs and out of area travel.



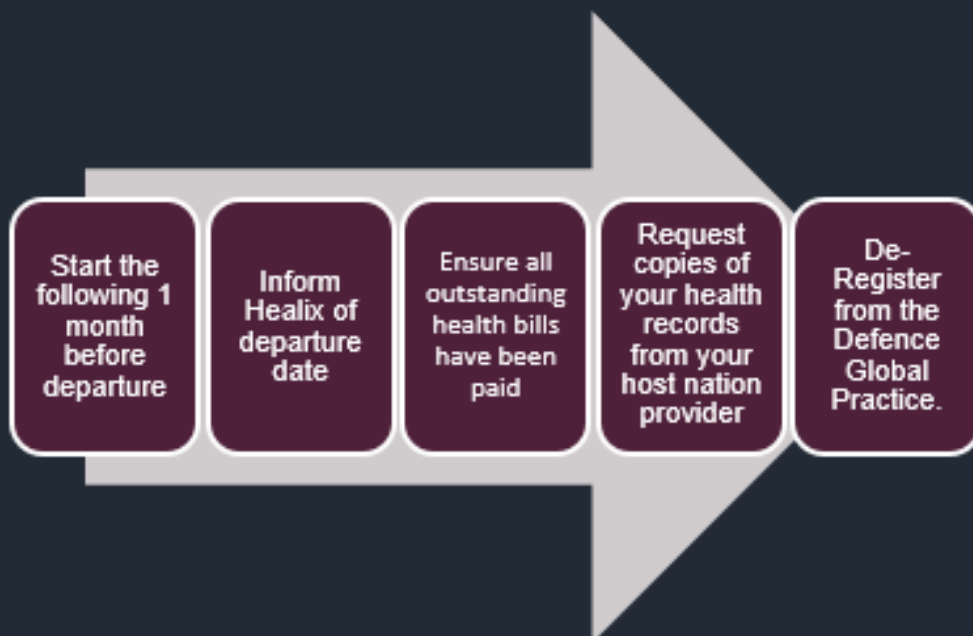
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# De-Registration and Change of Circumstances

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## DE-REGISTRATION

On completion of your posting, it is important that all SP and family members are de-registered from the DGP. Initiating the de-registration process will enable the DGP 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 de-registration process is completed efficiently:



## CHANGE IN CIRCUMSTANCES

Please ensure you inform the DGP if any of the following take place during your posting and ensure the following MOD policy is followed where required IN ADVANCE of the change -

### [Assessment of support needs for accompanied assignments overseas](#)

- 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.

Once the change in circumstances has been agreed by MOD you MUST inform Healix – with the appropriate evidence from MOD.

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



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# Accessing Care – Emergency and Out of Hours

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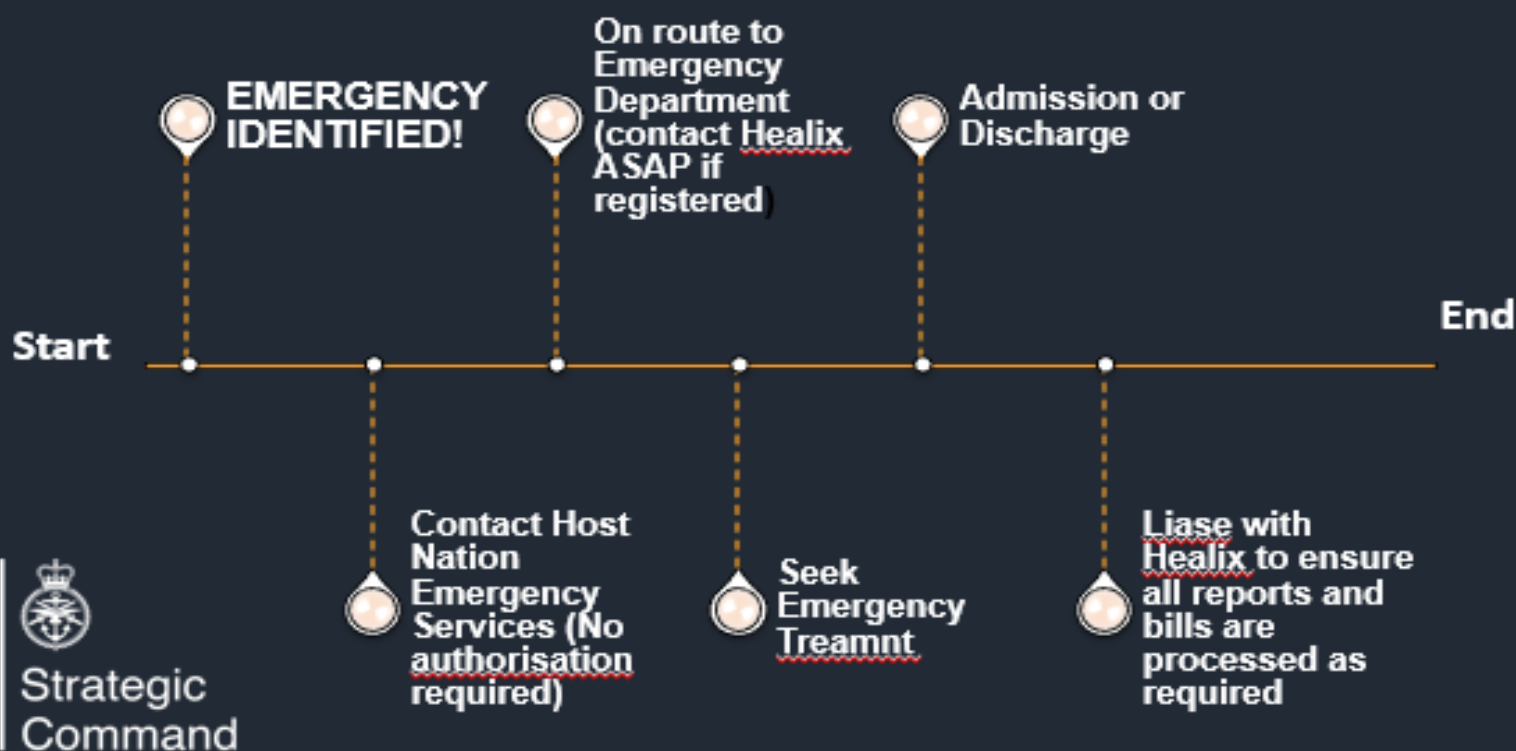
## Please Note:

**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 to confirm relevant emergency numbers. Equally please be aware that access to emergency services can vary between locations (for example military or civilian services, reciprocal care arrangements, and local host nation protocols) – again please ensure you enquire with your local command or admin unit on arrival to ensure you are fully aware **BEFORE** you need to access emergency services.

## 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 person?
- In your location are there different processes for emergencies and non-urgent out of hours medical care?



# Accessing Care – Primary Healthcare

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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.

## **The following are generally classified as Primary Care:**

- Routine Doctor visits (GP or Community Paediatrician or equivalent)
- Prescriptions (with the exception of weight management injections)
- 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 child vaccinations and child development checks in line with host nation schedule. (see also child health and Occ Health sections)
- Routine Defence service vaccinations in accordance with JSP 950 for service persons – evidence of vaccination must be provided to DGP.
- Routine audiograms for Defence Hearing Conservation policy for service persons – evidence of result must be provided to DGP.
- Eye test and Eyewear provision ONLY in accordance with [NHS eligibility](#)

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 strongly recommended to discuss with Healix first to check if authorisation is required and whether any billing arrangements are 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 and MRI scans – approval required
- Audiograms for CS or EFMs – approval required, only for clinical purposes.
- Weight management Injections (eg Ozempic) - approval required.
- Minor surgery such as lesion removal – approval required.
- Any optician/ophthalmologist attendance outside of [NHS eligibility](#).

**REMINDER – If you are in any doubt about if your planned medical attendance is primary care, contact Healix IN ADVANCE. Retrospective authorisation for medical costs and claims identified to Healix AFTER the fact may not be reimbursed.**



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# Accessing Care – Specialist/Secondary Healthcare

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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.

**IMPORTANT: It must be understood that there are no MOD contracted and assured healthcare providers in DGP locations. As such, whilst MOD will make efforts to support specialist healthcare at post where it is deemed clinically, occupationally and financially appropriate, in many cases it may be necessary to refer to NHS services for assessment and treatment rather than undertake this in host nation. Healix will discuss options, depending on your individual circumstances, with you when you request for authorisation for attendance at specialist services. MOD makes no guarantee of support for specialist care to take place at post – cases will be assessed on an individual basis. This is the case also when an initial assessment or care pathway is supported at post. Continued support will be assessed throughout the duration of the care pathway and at any point it may be necessary to refer to the NHS for assessment or onwards management.**

**REMINDER – It is extremely important for all DGP Registrants to understand that specialist care undertaken overseas MUST be approved in advance. Any specialist care undertaken without prior approval by Healix will normally be required to be self-funded – retrospective authorisation is only given in exceptional circumstances. If in doubt contact Healix in advance of your planned medical attendance.**

If you are referred for specialist care please contact One HMG Healix 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/or cost effective manner, referral to the NHS for access to NHS care may be required.

## ASSISTED CONTRACEPTION SERVICES

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 DGP with any further queries. Fertility testing in line with NHS diagnosis pathways will be supported but prior approval is required.

## WEIGHT MANAGEMENT INJECTIONS

There has been a recent increase in attention on weight management injections. In many locations, particularly where care is being accessed on a private basis, weight management injections may be available through primary care providers. Please be aware that MOD funding and support for weight management injections will ONLY be provided where this is in line with NHS eligibility for weight management injections normally through referral to a specialist weight management service either in the NHS or overseas as appropriate. Patients are advised to consider use of these medications carefully as there are some safety concerns with their usage. DGP can provide Defence guidance on request.



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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.
- **ROUTINE CHILD VACCINATIONS** - Whilst overseas you should follow the schedule for child development checks and routine vaccinations of your host nation NOT the UK (in accordance with JSP 950). Schedules can normally be easily found online (ECDC is good) and you should engage early 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. When you return to the UK there is a national protocol your Practice Nurse/Immunisations team will use to assess which vaccines your child needs to become realigned with the UK schedule - Vaccination of individuals with uncertain or incomplete immunisation status. If you wish to keep up with the UK schedule as well as your host nation (where there are differences) whilst you are overseas you may contact DGP to assist with booking your child into a DPHC Families Practice when you are back in the UK on other business (travel at public expense is not recommended by DPHC for this purpose. Please contact your SSAFA Health Visitor or DGP if you have any queries on this.
- **SPECIALIST REFERRALS** - For any specialist referrals your paediatrician may advise (eg speech and language, audiology, mental health) please be advised that these required prior authorisation from MOD/Healix before proceeding.
- **SPEECH AND LANGUAGE AND EDUCATIONAL PSYCHOLOGY** - For Speech and Language Therapy for child of nursery / school age please be aware that this is currently managed by Defence Children Services rather than healthcare so DCS should be contacted in the first instance. Additionally for Educational Psychology services this falls within the remit of DCS NOT health. You may wish to consult JSP 342: Education of Service Children Overseas for more details on policy and processes.

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

**Before posting**

- Ensure Child vaccinations up to date
- Ensure child development checks up to date
- Sign up for eRedbook and complete questionnaire

**On arrival**

- Find local GP/community paediatrician
- Ensure awareness of local emergency services locations and processes.
- Register with DGP
- Receive invitation for transfer in contact with SSAFA Health Visitor for 0-5s (once registered with DGP)

**During posting**

- Vaccination and child development check schedule of host nation via local GP / paediatrician.
- Your SSAFA Health Visitor is available for remote advice should you have any child development concerns.
- Keep records of all local healthcare input – send to DGP for inclusion in UK primary healthcare records / upload to eRedbook.

**Access to specialist services**

- Complex cases – referral to NHS paediatrician for assessment may be required.
- Speech and Language Therapy – over 3.5 years discuss with Defence Children Services. Under 3.5 years, discuss with SSAFA Health Visitor.
- Child and Adolescent Mental Health – very limited provision. Discuss with DGP / SSAFA Health Visitor in the first instance.



# Health Visiting

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## SSAFA HEALTH VISITING (Specialist Community Public Health Nursing)

DGP 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 Programme on a remote basis and is an invaluable resource for DGP and our patients to ensure that the public health elements of child and parental health are addressed as best possible 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 DGP Health Visitor programme contains the following planned and additional remote appointment with one of the Health Visiting team:

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

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

For those without children aged 0-5 the Health Visiting team can be contacted on an ad hoc basis if you feel you would like to discuss something with them. This is particularly in the case of those with children in the 6-19 age bracket.

To contact the Health Visiting team please ask DGP or email the Health Visitor group email at [UKStratcom-DMS-DPHC-HV-EurGrp@mod.gov.uk](mailto:UKStratcom-DMS-DPHC-HV-EurGrp@mod.gov.uk)

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 DGP”

Please note the eRedbook gives details of UK child vaccination schedules which may be useful for you to compare to your host nation schedule. But please remember that Defence policy in JSP 950 is for you to routinely follow the host nation child vaccination schedule whilst overseas NOT the UK one.

If you would like to learn more about the SSAFA Health Visiting team's work within DGP areas, please view their website [SSAFA CEP GSO | SSAFA](#).



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# Maternity Care

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If you find out you are pregnant whilst you are overseas, first of all, congratulations!

## ACTIONS ON FINDING OUT YOU ARE PREGNANT

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 Midwives or Obs and Gynae specialists. Please then inform both DGP and One HMG Healix who will play a part in your support during your ante and postnatal periods.

## CARE PATHWAYS AND AUTHORISATION

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) primacy of care for maternity services lies with host nation and local providers. In addition to this DGP 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. Before you attend any maternity appointments or scans please ensure you have liaised with Healix to ensure authorisation if required is in place.

## REFERRAL TO REMOTE MIDWIFERY AND HEALTH VISITING SERVICES

Once DGP have been informed of your pregnancy we will make a referral to our remote midwife who will contact you within a few weeks for a remote appointment, and we will also notify our Health Visiting team. At this point we will also provide you with various MOD and Practice maternity resources, though you are able to request these from the Practice at any time should you wish.

The below graphic displays stakeholder input and responsibilities during your pregnancy and postpartum periods. If you have any questions about maternity care in your location please don't hesitate to contact DGP for further advice.

Host nation / Local Care	One HMG Healix	Defence Global Practice	Remote UK Midwife (Fiona)	SSAFA Health Visitor
<ul style="list-style-type: none"><li>• Face to Face appointments</li><li>• Primacy of care giving</li><li>• Maternity vaccinations</li><li>• Newborn screening</li></ul>	<ul style="list-style-type: none"><li>• Overarching pregnancy monitoring</li><li>• Authorisation of local appointments</li><li>• Coordination of payments</li><li>• NHS Referral if required</li></ul>	<ul style="list-style-type: none"><li>• Referral to remote Midwifery support</li><li>• MOD liaison for UK / host nation birth planning</li><li>• Mat B1 if required</li><li>• NHS number and PHC record</li><li>• Registration for newborn (if applicable)</li></ul>	<ul style="list-style-type: none"><li>• Remote support to overlay not replace host nation care</li><li>• 2 antenatal remote contacts</li><li>• 1-2 postpartum remote contacts</li><li>• UK specialist advice throughout pregnancy</li></ul>	<ul style="list-style-type: none"><li>• Antenatal remote Health Visitor contact approx 32 weeks (preparing for parenthood)</li><li>• New born remote visit approx 10-14 days</li><li>• Healthy family remote visit approx 4-8 weeks</li></ul>



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# Mental Health

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

## Online and Self-help resources

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.

## Unit Welfare and Pastoral teams

Your unit welfare and pastoral teams are a great resource for supporting you with milder mental health concerns that do not require medical support. They may be able to provide support themselves or signpost you onwards as appropriate. Contact your local admin unit if you do not know who your local welfare team is or contact DGP for advice.

## Single service counselling organisations

The single services all have counselling services accessible by self-referral to both serving persons and EFMs. Access can be by self-referral and these services sit outside the medical and command chains.

Army Welfare Service - [Army Welfare Service | The British Army](#)

RAF Benevolent Fund - [Emotional Wellbeing Support | RAF Benevolent Fund](#)

Royal Navy and Royal Marines Charity - [The Royal Navy and Royal Marines Charity | Relate](#)

Civil Service Employee Assistance Programme - [Discover My Benefits - Civilian](#)

## Remote Midwife and Health Visitor support

If your mental health needs related to maternity and parental mental health our Midwife and Health Visitor are trained in this area and are a great point of contact in the first instance. If you are not already in contact with them please ask DGP for details.

## DGP and the DPHC Overseas Mental Health Team

You may wish or need to contact DGP for access to specialist mental health services. DGP 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 DGP directly.

## Child Mental Health Services

In all DGP areas there is 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. For lower-level mental health requirements, and depending on need, online services such as, Kooth, Child Bereavement UK and single service counselling services (as above) may meet the need. Additionally, our Health Visiting team are a great resource for advice and guidance regarding child mental health issues. Where more specialist assistance is required on a case by case basis DGP may be able to provide access to remote assessment and/or therapy services though these are not always available and are normally used to assess risk and need only. Please contact DGP 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 challenges you should call the local emergency services or attend an emergency department without delay.**

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# Clinical Screening Programmes

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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 and funding of screening is in line with NHS criteria. Details of screening programmes run by the NHS can be found here – <https://www.nhs.uk/conditions/nhs-screening>. Host nation programmes should be in line with national screening programmes rather than variances offered by private or other nation (such as US) providers in location or supplements offered above the national screening programme on a private basis.

As screening is a routine service travel at public expense to the UK is not normally recommended by DPHC. It is expected that where UK options are taken up this is fitted around other duty or personal travel to the UK.

## CERVICAL SCREENING

DGP currently operates a cervical screening recall service from the NHS England database (CSMS). All eligible patients registered with DGP will be informed of their eligibility via email when they arise on CSMS notifications as being due. The DGP 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 DGP directly. If you think you are due or overdue cervical screening please contact your local healthcare provider and/or DGP for advice.

## BREAST SCREENING

In late 2024 DGP 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 DGP patients a letter of invitation to attend breast screening in London. The invitation is generated with a date however this is not a fixed date and can be ammended – the invitation can be taken up at any point in the next 3 years (the screening 'window'). Alternatively screening is able to be sought in host nation and on provision of both report and images it can be 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 DGP for advice.

## 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. DGP 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 DGP.

## DIABETIC AND AAA SCREENING

If you believe you are eligible for these screenings please contact your local provider or DGP for advice. Screening at post will require Healix authorisation. NHS referrals may be more appropriate.



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# DGP - Occupational Health Management

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

SP have a responsibility to comply with Service Medical Instructions (Kings Regulations) to inform their DPHC Medical Practice (DGP) 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- for referral to Optima Health.

DGP conducts recalls for Occupational Health and Force Health Protection in partnership with SP and CoC, in accordance with capacity, and in line with DPHC priorities. If you think you are due some input and have not been contacted, please reach out to DGP for advice.

Sickness Absence / Light Duties	Medicals	Specialist Occupational Health input:	Force Health Protection
<ul style="list-style-type: none"><li>• <b>Self-certification</b> in line with 2021DIN01-043.</li><li>• <b>Shorter periods</b> (generally under 2 weeks) - host nation authorised, notification to DGP and Line Management.</li><li>• <b>Longer periods</b> (generally over 2 weeks) - host nation led but DGP MUST be notified and may give MOD input. Ensure Line Management is notified.</li><li>• <b>Service Person responsibility</b> to ensure CoC aware and JPA updated.</li></ul>	<ul style="list-style-type: none"><li>• <b>Routine medicals (undertaken remotely by DGP):</b><ul style="list-style-type: none"><li>• Injury / condition / maternity based JMES reviews</li><li>• Age Related PME's (RAF)</li><li>• MRAs for Duty Travel when required.</li></ul></li><li>• <b>Specialist Medicals</b> (undertaken by DGP or referred to alternative services)<ul style="list-style-type: none"><li>• Aircrew Medicals</li><li>• Diving Medicals</li><li>• Extension of Service medicals</li><li>• Transfer to foreign military medicals</li><li>• Release medicals</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Referral through DGP:<ul style="list-style-type: none"><li>• <b>Single Service Occupational Health teams</b></li><li>• <b>Institute of Naval Medicine</b> (Hearing related input)</li><li>• <b>Regional Rehabilitation Unit (RRU) Halton</b> – Musculoskeletal and Podiatry Input</li><li>• <b>Overseas Mental Health Team</b> – Mental health input</li></ul></li></ul>	<ul style="list-style-type: none"><li>• <b>HCP (Audios)</b> - Options for host nation, or fixed based DPHC Medical Centre. Contact DGP for advice.</li><li>• <b>Routine Vaccinations</b> – Options for host nation or fixed base DPHC Medical Centre/ Contact DGP for advice.</li><li>• <b>Duty Travel requirements</b> – DGP is NOT responsible for med plans for duty travel but can advise on suggests vaccination and other FHP requirements. Please provide JIs / FHPI if <u>available</u>.</li></ul>



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# Travel – Personal, Duty and Medical Travel

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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 overview 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 DGP 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 DGP 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 DGP and we will provide the relevant documentation to support your application for public funded travel. In order to provide this recommendation please ensure you provide us (if we are not already aware/involved) with appropriate evidence of the required or proposed travel, such as an NHS or DMS appointment letter or report. Whilst DGP will make clinical recommendations to the command about the requirement to travel at public expense for medical purposes please be aware that all associated costs (transport, accommodation, and daily subsistence) are borne by the unit and there you must make sure you have budget holder approval if relevant – the DGP recommendation is to assist with this.



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# Eye and Dental Care - Signposting

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## EYE CARE

### Defence Employed Personnel (Uniformed, Civil Service, LEC)

Access to eye tests and eye wear for DSE purposes in line with [JSP 375](#) is NOT a medical process and DGP and Healix should not be contacted for this purpose. Your local admin unit will be able to advise you of local processes. No eye related expenditure for DSE purposes will be funded by DPHC.

For those with specialist occupation related eye test requirements please contact DGP in the first instance (there is policy pending with Defence Safety) and we will advise and signpost as required.

### NHS eligibility for eye test provision and eyewear contribution

Those, whether adult or child, who meet the [NHS criteria and eligibility](#) for free eye test and eyewear provision contributions are able to access this [within NHS criteria](#) and claim for this as primary care. Please note no vouchers are available overseas but the equivalent contribution can be refunded – please see [NHS voucher values for glasses and lenses - NHS](#) and contact Healix if you are unsure. Please note as in the UK costs may exceed contribution, it is your responsibility to ensure you correctly calculate how much you are able to claim.

### Clinical eye care requirements

If your local GP proposes a referral for eye testing for a clinical purpose please remember that you need to contact Healix for authority in advance. Please note that many private providers may propose referrals outside of NHS criteria – each request will be assessed for clinical need before authorisation.

## DENTAL

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

If required, please ensure your family are registered with One HMG Healix for dental as well as medical purposes. Dental registration can be undertaken only once medical registration is complete.

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.



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# Interpretation and Translation Services

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## INTERPRETATION

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 free of charge 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# (ONLY patients of DGP are eligible)
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 DGP by email that you have used the service, including the Interpreter ID number

### Language Codes

Bosnian – 17	German – 4	Romanian - 750
Bulgarian – 707	Greek – 993	Slovak - 755
Czech – 710	Italian – 995	Slovene - 756
Danish – 711	Latvian – 773	Spanish - 1
Dutch – 713	Lithuanian – 735	Swedish - 761
Estonian – 783	Norweigan – 742	Turkish 764
Finnish 716	Polish - 5	
French – 95	Portuguese - 996	

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.

## TRANSLATION

Please note that where appropriate any non-english language written reports from host nation providers that are submitted to DGP are sent for professional translation so that an english language version can also be added to your UK record. If in addition you have legitimate need for a medical report to be professionally translated for you, please contact DGP who may be able to assist.



In many cases free appts such as DeepL or Google translate may be sufficient for your personal interpretation and translation need.

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# Healthcare Finances

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## PRINCIPLES OF HEALTHCARE FINANCING OVERSEAS

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). Where approved healthcare provision is available free of charge in host nation via public health services, military medical services, or civilian international reciprocal healthcare agreements it will be expected that these are used at first line in accordance with the healthcare plan for your location of posting. There is no overarching entitlement for private healthcare overseas – this is accessed and authorised only when approved as part of the healthcare plan in location.

## METHODS OF PAYMENT WHEN REQUIRED

Where a charge is due or likely for healthcare services you are planning to access or have already accessed (in line with authorisation processes explained earlier in this leaflet and via associated resources) payment may take one of the following routes:

### Direct billing to Healix – via direct billing agreements or guarantee of payment.

Ideally where a payment is required for healthcare services this will be managed by Healix on your behalf with no cost to yourself (authorisation requirements where applicable should be adhered to). For some primary care services in certain locations (please ask Healix for confirmation of which) you can access services and MOD will be billed directly via Healix. For specialist services Healix may issue what is called a Guarantee of Payment (GOP) to the provider so that they will be billed for the services rather than yourself.

### Invoicing

If the provider you visit is not able to liaise directly with Healix, but does not require you to pay upfront yourself you may be issued with an invoice for services received. In this instance, please provide this invoice to Healix to request payment. This is irrespective of type of care – DGP no longer deals with invoices directly from patients or providers – all invoices must be sent to Healix.

### Pay and Claim – JPA or Civil Service equivalents

Where possible Defence aims to minimise the amount of healthcare that those overseas need to pay for upfront themselves. Therefore, please ensure before you do so that you have discussed other options with Healix and/or your local admin unit or DGP before you pay for any healthcare yourself. However, there will almost certainly be instances during your time overseas in which you may need to pay upfront for services and claim the costs back through JPA or civil service equivalents. It is essential that where required you have the necessary authority to make this claim in line with local command procedures which stem from JSP 752. Please contact your local admin unit for details of how to pay and claim in your area – including which UIN you need to make the claim to. DGP no longer need to be contacted prior to making a claim on JPA.

### Direct billing with pharmacies

In a few locations DGP holds an agreement with a local pharmacy which charges costs directly to DGP for payment – therefore no cost is charged to the patient directly. Your local admin unit will be able to let you know if there is a pharmacy in your location with such an agreement. Please note these agreements are currently under review by DPHC.



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# Healthcare Finance

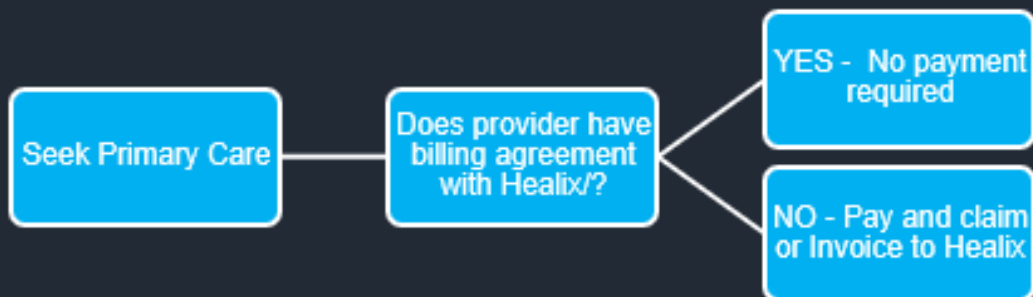
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## TWO IMPORTANT REMINDERS RELATED TO HEALTHCARE FINANCE:

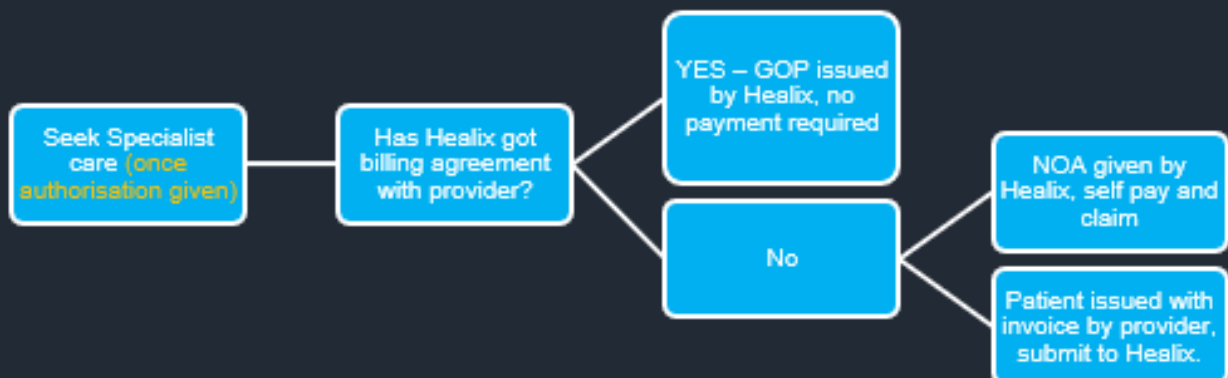
1. Retrospective authorisations for healthcare are not routinely given – it is a personal responsibility to ensure you are eligible for and where applicable have authorisation to access healthcare services at post. If in doubt, contact Healix IN ADVANCE.
2. When accessing healthcare please ensure you liaise with Healix where required to ensure you are aware of how payment for services will be managed. Where possible MOD aims to minimise upfront costs to patients. Please be aware however that in some locations/with some providers this is not possible and payment upfront may be required.

The following flow charts will hopefully assist you to understand relevant processes for healthcare finances at post. If you have any further queries regarding payment for healthcare services please direct these to Healix or your local admin unit as required. DGP may support these departments with queries related to healthcare payments but are not the point of contact for initial queries from patients.

### Primary Care



### Specialist Care



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# DGP – Governance and Record Keeping

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## MEDICAL RECORDS

The DGP holds the responsibility to manage and maintain DGP 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 DGP. In most instances this will require the individual patient to send reports from consultation, investigations, scans etc from host nation to DGP directly, though in some larger areas there may be arrangements with local providers to from them, with appropriate consent, to send reports directly to DGP 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 DGP 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 DGP 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 DGP 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 DGP appointment, please inform the DGP before your appointment. The DGP 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 Senior Medical Officer (SMO). 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.

## CARERS

If you identify as a carer please ensure you let DGP know on registration with the Practice. Information on who is a carer can be found here - [About Us - Caring as an Unpaid Carer | Carers Trust](#). Please be aware of the recently launched [Armed Forces Carers Passport - 2024DIN01-126](#) which facilitates discussions between a Service Person with caring responsibilities and their manager.



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# Health Promotion and Education

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

## GENERAL INFORMATION

**NHS Conditions A-Z** - <https://www.nhs.uk/conditions/>

**Patient Info** - <https://patient.info/>

**NHS Live Well** - <https://www.nhs.uk/live-well/>

**The UK Sepsis Trust** - <https://sepsistrust.org/>

**The Stroke Association** - <https://www.stroke.org.uk/>

**The British Heart Foundation** - <https://www.bhf.org.uk/>

## TRAVEL HEALTH AND VACCINATIONS

**Nathnac Travel Health Pro** - <https://travelhealthpro.org.uk/>

**European Centre for Disease Prevention and Control (ECDC)** - <https://www.ecdc.europa.eu/en>

**The Oxford Vaccine Knowledge Group** - <https://vaccineknowledge.ox.ac.uk/home>

**NHS Vaccinations** - <https://www.nhs.uk/vaccinations/nhs-vaccinations-and-when-to-have-them/>

## CANCER AND GENDER RELATED HEALTH

**Breast Cancer UK** - <https://www.breastcanceruk.org.uk/>

**Cancer Research UK** - <https://www.cancerresearchuk.org/about-cancer/breast-cancer>

**Prostate Cancer UK** - <https://prostatecanceruk.org/>

**UK Cervical Cancer UK** - <https://ukcervicalcancer.org.uk/>

**Bowel Cancer UK** - <https://www.bowelcanceruk.org.uk/>

**Menopause Matters** - <https://www.menopausematters.co.uk/>

**Balance Menopause** - <https://www.balance-menopause.com/balance-app/>

## CHILD HEALTH

**Happy Maps (Youth Mental Health)** – [www.hapymaps.co.uk](http://www.hapymaps.co.uk)

**The Little Orange Book** – [www.nenc-healthiertogether.nhs.uk/application/files/7217/2545/5402/LOB\\_Booklet\\_24\\_v1.5.pdf](http://www.nenc-healthiertogether.nhs.uk/application/files/7217/2545/5402/LOB_Booklet_24_v1.5.pdf)

**Healthier Together** - <https://www.what0-18.nhs.uk/>

**CONI** - <https://www.lullabytrust.org.uk/bereavement-support/how-we-can-support-you/our-care-of-next-infant-scheme/>

**eRedbook** - <https://www.eredbook.org.uk/>

**Winstons Wish** - <https://shop.winstonswish.org>

**Child Bereavement UK** - <https://www.childbereavementuk.org/contact-us>

## MATERNITY HEALTH

**NHS Pregnancy** - <https://www.nhs.uk/pregnancy/>

**Tommy's org** - <https://www.tommys.org/pregnancy-information/health-professionals/free-pregnancy-resources>

**National Childbirth Trust** - <https://www.nct.org.uk/information/pregnancy>

**Miscarriage Association** - <https://www.miscarriageassociation.org.uk/>

**OUH Maternity Resources** – <https://www.ouh.nhs.uk/maternity/resources/>



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## MENTAL AND EMOTIONAL WELLBEING

**Samaritans** - <https://www.samaritans.org/how-we-can-help/military/>

**Kooth** - <https://www.kooth.com/mod>

**Togetherall** - <https://togetherall.com/en-gb/mental-health-support-for-all-uk-armed-forces-veterans/>

**Mind** - <https://www.mind.org.uk/>

**Beat – Eating Disorders** - <https://www.beateatingdisorders.org.uk/>

**Alcohol Change UK** - <https://alcoholchange.org.uk/>

**Army Welfare Service** - [Army Welfare Service | The British Army](#)

**RAF Benevolent Fund** - [Emotional Wellbeing Support | RAF Benevolent Fund](#)

**Royal Navy and Royal Marines Charity** - [The Royal Navy and Royal Marines Charity | Relate](#)

**Civil Service Employee Assistance Programme** - [Discover My Benefits - Civilian](#)

**Winstons Wish** - <https://shop.winstonswish.org>

**Child Bereavement UK** - <https://www.childbereavementuk.org./contact-us>



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# Resources and Signposting

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## OPEN ACCESS RESOURCES

**Global Support Organisation - GOV.UK Website** – Defence Global Practice Patient Information Leaflet and GSO Location Leaflets. [Global Support Organisation - GOV.UK](#)  
**Gov.uk (FCDO)** – List of English speaking medical facilities and practitioners worldwide. [Doctors and medical facilities: worldwide list - GOV.UK](#)  
**SSAFA Website (SSAFA Europe GSO CEP)**– Information about SSAFA community health programme for the DGP population. [SSAFA CEP GSO](#) | [SSAFA](#)

## DEFENCE INTRANET RESOURCES

**JSP 950 Medical Policy** inc Leaflet 10-1-1  
**2020DIN01-137** Health service support to GSO posts (Eur and Turkiye) *Under review*  
**2024DIN01-137** One HMG Healthline contractual support [2024DIN01-137-One HMG Overseas Commercial Healthcare Contract with Foreign, Commonwealth and Development Office.docx](#)  
[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

“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



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# Contacting your Practice

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## Defence Global Practice

Monday to Friday 0830-1230 and 1330-1700

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 European Public Holidays

One HMG <u>Healix</u>	
Email address	Healthline@healix.com
Telephone	0044(0)208 481 7800
Central European Practice	
General / clinical	<u>UKStratCom-DMS-DPHC-DGP-Enquiry@mod.gov.uk</u>
Billing enquiries	<u>UKStratcom-DMS-DPHC-EJSU-Fin@mod.gov.uk</u>
Health Visiting	<u>UKStratcom-DMS-DPHC-HV-EurGrp@mod.gov.uk</u>
eConsult	Google 'eConsult' and select Defence Global 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 DGP 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.



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# Patient Feedback

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## COMPLIMENTS AND COMPLAINTS

The Defence Global Practice welcomes feedback on the service we provide.

If you have a compliment about the service you have received from DGP please address it to the person concerned or to the Practice Manager via our Group email.

If you have a complaint about any aspect of DGP's service please let us know as soon as possible so that we can 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 in the first instance. However DGP values being aware of such feedback so that we can assist in continuous improvement of your overall healthcare provision overseas. Therefore please do keep us up to date with feedback to other parties. In 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 - [DGP Host Nation / Local Provider Feedback Form](#)

## DPHC PATIENT EXPERIENCE SURVEY

If you have had contact with DGP or used our services 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](#).



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# Frequently Asked Questions (FAQs)

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**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?** DGP is responsible (in conjunction with the service person and their chain of command) for undertaking occupational health reviews for service personnel where required. This includes release medicals. 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 DGP and we will advise and book you into 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 DGP. Where a face to face element is required DGP will discuss options with you.

**2. Who are Healix and what is their relationship with Defence Global Practice?** One HMG Healix (Healix) is a medical management company that is contracted by UK government departments, including MOD, to coordinate care for personnel and families working and living overseas. On behalf of DGP 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 DGP work very closely to ensure that where possible, within limitations of overseas healthcare availability 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 EFM's overseas must be registered with their allocated DPHC(O) Practice – including virtual practices. As such personnel and families are requested to register with DGP 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 DGP is essential to access some of the services that we can provide such as Health Visitor and Midwifery Services, access to previous primary medical records, and certain medicals. Upon registration with DGP you will be de-registered from your UK General Practice. For service persons DGP is their DPHC Practice whilst overseas.

**4. My healthcare provider overseas doesn't speak English – how can I communicate with them?** Please see the section on interpretation and translation in this leaflet for options in this instance. Please ask your local provider in the first instance whether they have any services free of charge. If not you may choose to access free apps that you have access to, or access telephone interpretation services with The Big Word provided by DPHC. Please note DPHC will not fund private interpretation costs at post.



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**5. I am due to travel to other countries for work during my posting. What are the medical cover arrangements for this travel?** DGP 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. DGP can assist with Force Health Preparation for duty travel such as vaccination advice and individual risk assessments.

**6. 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?**

From a public health perspective, and in line with JSP 950, children in DGP 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 DGP if you wish to discuss individual circumstances.

**7. 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 DGP 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.

**8. The medication I am normally on is not available in my country of posting. What should I do?** MOD and Healix screening assesses whether the medications you are on at time of screening, or equivalents, are available in your location of posting. This is because the principle of healthcare overseas with MOD is that you are able to access all the medications you require at your location of posting. MOD does not currently have processes to supply medications overseas to DGP areas. You may discuss your requirements with Healix to see if they are able to assist – they may be able to provide medications to a small number of locations or may be able to prescribe medications for you to collect when you are next in the UK. Please note with the latter situation associated costs must be borne by the patient – DPHC will not recommend travel at public expense related to medication collection from the UK. If you are unable to access your required medications at post, or arrange an alternative approach with Healix it may be necessary to discuss ongoing supportability at post with your supporting command.

