

**DEPARTMENT OF HEALTH, SOCIAL  
SERVICES AND PUBLIC SAFETY**

**Delivering Healthcare to the Armed Forces:**

**A Protocol for Ensuring Equitable Access to  
Health and Social Care Services**

**26<sup>th</sup> AUGUST 2009**

## Introduction

1. The Minister for Health, Michael McGimpsey MLA has agreed new arrangements for liaison between the Department of Health, Social Services and Public Safety, Health and Social Care bodies and the Ministry of Defence and Veterans' organisations in Northern Ireland with the aim of ensuring that the health service in Northern Ireland fulfils its statutory obligations in respect of health and social care services for members of the Armed Forces, their families and Veterans.
2. In March 2005, the four United Kingdom Health Departments entered into a Concordat with the Ministry of Defence, "*Delivering Our Armed Forces Healthcare Needs*" for the purpose of strengthening the important relationships between the health service and the Defence Medical Services. The Concordat was signed on behalf of the Department of Health, Social Services and Public Safety by then Minister for Health in Northern Ireland.
3. Paragraph 4.2 of the 2005 Concordat states that,  
  
*"This Concordat is an enabling document. It leaves detailed decisions about service delivery to be made locally by those who know and understand the delivery of local healthcare services, and those who understand the needs and best interests of the Armed Forces and their families."*
4. Building on the spirit of partnership envisaged in the Concordat, this document now provides for arrangements that will assist in maintaining effective co-operation and understanding between the Department of Health, Social Services and Public Safety, the Ministry of Defence and Veterans' organisations. It is envisaged this document will endure even in the event of the 2005 Concordat being refreshed.
5. Accordingly, this document is intended with respect to health and social care to support the overall aims set out in the Ministry of Defence publication "*The Nation's Commitment: Cross-Government Support to our Armed Forces, their Families and Veterans*<sup>1</sup>" and is designed to give practical effect to the principles contained within that publication. The health service in Northern Ireland must be responsive to the different needs of different populations including those serving in the Armed Forces, their families and Veterans. This document aims to establish a framework of assurance which will ensure that serving members of the Armed Forces, their families and Veterans suffer no disadvantage in accessing health and social care services and have equality of access to these services in common with everyone living in Northern Ireland.

<sup>1</sup>Cmnd Paper [7424] (17 July 2008)

## Scope

6. This document sets out measures to be put in place to help ensure the Department of Health, Social Services and Public Safety, the Health and Social Care Board, the Public Health Agency and Health and Social Care Trusts effectively meet their statutory obligations in relation to providing equality of access to health and social care services for Armed Forces personnel, their families and Veterans.
7. The document provides for the establishment of mechanisms that will help identify and address healthcare needs and access to services in a number of areas including:
  - a. Access to secondary care services for Armed Forces personnel
  - b. Access to health and social care services for Armed Forces families
  - c. Access to health and social care services for Veterans
8. Needs identified through these arrangements will be addressed within the overall policy framework applied by the Department of Health, Social Services and Public Safety and Health and Social Care bodies in Northern Ireland.

## Definitions

9. The Department of Health, Social Services and Public Safety is a department of the Northern Ireland Executive. The Department has a general statutory duty to promote in Northern Ireland an integrated system of health care designed to secure improvement in the physical and mental health of people in Northern Ireland, and in the prevention, diagnosis and treatment of illness; and social care designed to secure improvement in the social well-being of people in Northern Ireland. The Department shall hereafter in this document be referred to as DHSSPS.
10. Health and Social Care – For the purpose of this document, the terms Health and Social Care bodies and HSC shall mean those statutory organisations in Northern Ireland charged with the organisation and delivery of health and social care services and should be read to include the Public Health Agency where a relevant function of that agency is concerned. These bodies shall hereafter in this document be referred to as HSC.

11. The Ministry of Defence is the Department of State charged with the management and control of HM Forces and civilian personnel engaged in the defence of the United Kingdom and its citizens, property and interest at home and overseas.
12. Garrison Welfare – For the purpose of this document, the term Garrison Welfare shall mean Army Welfare Service personnel responsible for the provision of welfare services to Armed Forces personnel and their families including liaison with other agencies such as the health service in Northern Ireland.
13. Armed Forces personnel – For the purposes of this document, the term Armed Forces personnel shall mean currently serving members of the Royal Navy, the British Army, the Royal Air Force and their Reserves.
14. Armed Forces families – For the purpose of this document, the term Armed Forces families shall mean immediate family members of Armed Forces personnel.
15. Veterans – For the purposes of this document, the term Veterans shall mean former or retired members of the Royal Navy, the British Army and the Royal Air Force and their Reserves.

## **Healthcare Duties and Responsibilities of the Department of Health, Social Services and Public Safety for Northern Ireland and Ministry of Defence**

16. DHSSPS has a statutory responsibility to improve the health and social well-being of the people of Northern Ireland. It endeavours to do so by ensuring the provision of appropriate health and social care services, both in clinical settings such as hospitals and General Practitioners' surgeries, and in the community through nursing, social work and other professional services. It also leads a major programme of cross-government action to improve the health and well-being of the population and reduce health inequalities. This includes interventions involving health promotion and education to encourage people to adopt activities, behaviours and attitudes which lead to better health and well-being. The aim is a population which is much more engaged in ensuring its own health and well-being.

17. DHSSPS has three main business responsibilities:
  - a. Health and Social Care, which includes policy and legislation for hospitals, family practitioner services and community health and personal social services;
  - b. Public Health, which covers policy, legislation and administrative action to promote and protect the health and well-being of the population; and
  - c. Public Safety, which covers policy and legislation for fire and rescue services.

## Relationship to Healthcare Policies in Northern Ireland

18. This document is not intended to replace or compromise existing or future health and social care policies or operational arrangements.
19. Armed Forces personnel, their family members and Veterans living in Northern Ireland have the same rights to treatment within the Health and Social Care system as any other member of the Northern Ireland population. It is recognised however that the Ministry of Defence may make separate provision for access to primary care services and some other specific care services for Armed Forces personnel.
20. It is recognised that Armed Forces mobility can result in the loss of a place on health service waiting lists. When patients move to Northern Ireland, their previous waiting time will be taken into account with the expectation that their treatment will be delivered within HSC waiting time standards. As with any person moving between hospitals within the UK, Armed Forces personnel and their family members will be treated as quickly as possible in order of clinical priority. The current waiting times for treatment in Northern Ireland are a maximum of 9 weeks for an outpatient appointment, 9 weeks for a diagnostic test and 13 weeks for day-case or inpatient treatment.
21. Armed Forces mobility may make access to dentistry difficult for Armed Forces families. DHSSPS will ensure that Armed Forces families living in Northern Ireland have access to health service dentistry in the same way as other members of the population and that they will face no disadvantage due to their mobility.
22. Armed Forces mobility may also impact on couples pursuing IVF treatment. DHSSPS recognises however that the Ministry of Defence will ensure that wherever possible those undergoing a course of IVF treatment will not be moved before it is completed.

23. DHSSPS undertakes to ensure that the standard of prosthetic limb provision to injured Armed Forces personnel by the Defence Medical Services will as a minimum be matched by the HSC system.
24. It is recognised that Armed Forces personnel with mental health problems will have access to out-patient, day-case and inpatient treatment as necessary from the Defence Medical Services occupational psychiatric service. Armed Forces families and Veterans will have access to mental health services within the Health and Social Care system on a similar basis as other members of the Northern Ireland population.

### **Liaison arrangements and mechanisms for identification and resolution of Health and Social Care issues of concern**

25. DHSSPS undertakes to convene a forum consisting of stakeholders who shall be representative of each of the groups affected by these arrangements. HSC bodies will be represented within the forum. The forum shall meet regularly to assess the effectiveness of arrangements for identifying and meeting the health and social care needs of Armed Forces personnel, their families and Veterans.

### **Access to Secondary Care services for Services Personnel**

26. Under the direction of DHSSPS, each HSC Trust will establish a mechanism for liaison meetings with local Garrison Welfare personnel so that issues of concern with respect to secondary care services for Armed Forces personnel may be appropriately addressed. Any issue which cannot be resolved locally may be referred to a designated senior official within DHSSPS for review and determination in consultation with key stakeholders.

### **Access to Primary, Community and Secondary Care services for Armed Services families**

27. Under the direction of DHSSPS, each HSC Trust will establish a mechanism for liaison meetings with local Garrison Welfare personnel so that issues of concern with respect to health and social care services for Armed Forces families may be appropriately addressed. Any issue which cannot be resolved locally may be referred to a designated senior official within DHSSPS for review and determination in consultation with key stakeholders.

## Access to Community and Secondary Care services for Veterans

28. DHSSPS undertakes to establish a mechanism for liaison with representatives of Veterans' organisations in order to address issues of concern with respect to access to health and social care services.
29. The DHSSPS representative will be a designated senior official. DHSSPS will invite the Chair of the Northern Ireland War Pensions Committee to represent the interests of Veterans in Northern Ireland. DHSSPS shall, where appropriate, refer individual concerns to the relevant HSC Trust for assistance in the particular circumstances of the case.

## Implementation

30. DHSSPS will agree with each of the key stakeholders the detailed arrangements through which the undertakings given in this document will be fulfilled. These arrangements will be operable with effect from 1 September 2009.

## Review of these Arrangements

31. At appropriate intervals, the Department of Health, Social Services and Public Safety will review the effectiveness and appropriateness of the liaison arrangements operating in Northern Ireland in conjunction with all the relevant stakeholders.

**Michael McGimpsey MLA**

Minister for Health, Social Services and  
Public Safety