

Guidance for the referral of Armed Forces Veterans



Introduction

In June 1997, the NHS Executive issued guidelines around the Priority Treatment of War Pensioners. [HSG\(97\)31](#).

In December 2007, this guidance was updated in a gateway letter ([Gateway reference number: 9222](#)) and further updated in February 2010 ([Gateway reference number:13406](#)) to all Primary Care Trusts, Acute and Mental Health Trusts and Foundation Trusts, which contains the following guidance:

"From 1 January 2008, all veterans should receive priority access to NHS secondary care for any conditions which are likely to be related to their service, subject to the clinical needs of all patients."

The current NHS Operating Framework states *"The existing arrangements for giving priority access to veterans for service-related conditions, subject to clinical need, is an issue that all PCTs and providers should now be delivering for all referrals."*

Choose and Book

Choose and Book is designed to find appropriate services and enable appointments for all patients, based on their condition and degree of medical urgency.

The regulations regarding veterans indicate they should be given priority over patients with similar medical problems - **not** that they should be seen in preference to other patients whose medical condition is more urgent (i.e. where it states "subject to the clinical needs of all patients"). This therefore requires an assessment of the clinical needs of other patients who are already in the system before greater prioritisation of an individual veteran's appointment can be made.

The referring clinician is not able to prioritise in this way as they do not know the details of other patients waiting to be seen by a provider. Their duty is therefore to select the correct priority for the appointment request, based on the patient's medical condition (routine/urgent or 2 week wait), and to ensure that the referral letter contains a clear indication that the patient is a war veteran. This is the same requirement that is placed on referrers who send a paper referral.

The responsibility then rests with the provider clinician reading the referral information to take into account the patient's status as a war veteran and to bring forward the appointment, if appropriate. This process takes into account the status and condition of other patients waiting to be seen.