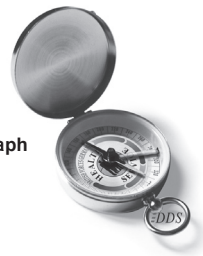


A guide to **entitlement** and how to get the best
from the **BFG Health Service**



BFG Health Service 2008



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INTRODUCTION

1. Welcome to Germany. Hopefully you will remain in good health during your stay. If, however, you do fall ill, you can be reassured that you will be provided with high quality Health Services.
2. This booklet sets out your entitlement to care in Germany and tells you how to make best use of the British Forces Germany Health Service (BFG HS) and Defence Dental Services Germany, DDS(G). It also explains which services are available at your Medical Centre. It also includes opening hours, Out Of Hours (OOH) service, the Telephone Advisory Service (TAS) and describes further what will happen if you are admitted to hospital.
3. BFG HS is provided for military personnel based in Germany, the civilian support, their dependants and other entitled personnel as determined from time to time by UKSC(G). Currently health care is provided through a partnership comprising SSAFA Forces Help (SSAFA FH) and Guy's & St Thomas' NHS Foundation Trust (GSTT).
4. Although health care is mostly free, there are rules about the services to which you are entitled. This is because:-
 - Some care has to be provided in the UK.
 - Some treatments that are available in Germany are not available from the NHS and thus not funded by BFG HS.
 - BFG HS is required to ensure that providers of approved and funded care to entitled personnel are deemed to be of an appropriate quality.
5. Some of you will not be employed by the MOD (or will not be a dependant of an MoD employee) and will have different entitlements negotiated by your employer with the MOD which gives you full, partial access or no access to the Health Service provided by BFG HS (See paragraph 18).
6. So, the first step is to understand precisely what you are entitled to, or what options are open to you, before you or a dependant family member become ill. Once you have read this guide, you should know what to expect, how to access the Health Service and be able to advise your relatives and friends of the services provided.

SIMILAR HEALTH SERVICE TO THE NHS

7. Whilst you are in BFG, you can expect to receive a standard of health care broadly similar to that of the NHS in the UK. Most, though not all, of this care is provided within Germany through the BFG HS. As in the NHS, there are various organisations responsible for different aspects of the service and, just like the NHS, we seek to make the care "seamless" so that you, the patient, should not be aware of the interfaces between the various components of the service.
8. If you are not well, the starting point is the Primary Medical Centre. Here a health professional will assess your condition and direct you either to a GP or to another professional working in primary or community care. If you need dental treatment or have a dental problem then you may be seen at a Defence Dental Centre (see page 25).
9. If you need hospital treatment, arrangements have been made to make sure you see a specialist quickly at the Designated German Provider hospital (known as a "DGP") in or near your Garrison. The DGPs are set up to care for BFG patients and will normally be able to provide you with the care you require. If your condition is very serious, and the treatment required is available in the UK, or where you may need long term care then you may be returned to the UK for treatment in the NHS.
10. Don't worry if you are admitted to a hospital other than a DGP (known as a 'non-DGP') following an accident or other medical emergency. As long as you, or a relative or friend, promptly reports your hospital stay to your Unit and your registered medical centre, the necessary medical treatment costs will be paid for by BFG HS, providing you meet the criteria for entitlement (see Para 17 and 18 below). If you require hospital care for longer than a few days, you may be transferred to your DGP hospital.
11. If you wish to have treatment carried out privately, for example, for cosmetic surgery, you should seek advice from your GP (or dentist, if appropriate) or the visiting Plastic Surgeon. Whilst BFG HS cannot endorse any particular private practitioner or service, your GP may be able to help you

locate providers for you to consult on a private basis. Also, discussing your treatment with your GP will mean that your medical record fully reflects all your clinical history. You must note however that BFG HS cannot subsequently pay for any private services you receive or be expected to fund any subsequent after-care resulting from your private treatment. Ideally, you should discuss these matters with your GP prior to embarking upon private treatment.



Mental Health

12. Mental health care is coordinated through your local Medical Centre. Those requiring more specialist mental health, or occupational mental health input, can be referred to one of our Departments of Community Mental Health (DCMH). Each DCMH takes a multidisciplinary approach with access to Military and Civilian Community Psychiatric Nurses, Occupational Therapists, Psychiatric Social Workers and Consultant Psychiatrists. In the future it is hoped that there will be better access to Psychology Services but for now assessments can be arranged in the UK.
13. BFG Mental Health Services (BFG MHS) aim to be as accessible and responsive as possible and as well as the routine services run an urgent out of hours service in each region (5pm to 11pm on weekdays, 9am to 5pm at weekends and on Public Holidays). This service is accessed through Medical Centres and access to 24 hour consultant community psychiatrist advice is available.
14. Those adults requiring psychiatric treatment in hospital will be admitted, when possible, to the Evangelisches Krankenhaus Bielefeld Haus IV, where there is a designated English speaking staffed eleven bedded ward with DCMH providing regular liaison and in-reach. Very rarely cases require evacuation to the UK.
15. Child and Adolescent Mental Health Services (CAMHS) are delivered by specialist CAMHS Nurses across the regions.
16. Whilst every effort is made to meet your needs there are times when certain specialist treatments are not available in BFG. You will be involved in any discussions regarding how and where best to access the appropriate care.

ENTITLEMENT

Why is Entitlement so important?

17. With a few limited exceptions, health care for most of the UK based population stationed or working for the military in Germany is free. This means it is paid for by some one else and not by you. However, some people working with BFG have only partial entitlement so it is important to understand the different entitlement categories so that you are not faced with unexpected medical bills after a stay in hospital.
18. Some individuals in BFG are entitled to all the care provided by the BFG HS, but others to only some or none at all. In addition, some civilians have the option of relying to a greater extent on the German Insurance System. Details of entitlement are given at Annex A and summarised in Table 1 over. You should identify as soon as possible what exactly you are entitled to receive so that you are not faced with difficult decisions if you become ill.

What to do if you receive a Medical Bill

19. If you receive a medical bill that you believe should be paid by BFG HS, it should be sent or handed in to the Medical Centre with which you are registered. You should include, as far as you are able, an explanation of why the bill has been received. It is important that you do this immediately and as a sensible precaution, take a photocopy for your own purposes. German organisations commence legal proceedings very quickly in the event of an unpaid bill and will add additional charges to cover any delays.
20. If you are uncertain whether or not a bill should be paid for by BFG HS, you can seek advice, during working hours from your Medical Centre or alternatively RO2 Clinical Administration on 02161 908 2234 or Wegberg Mil (67) 2234.

More Details

21. If there is anything you do not understand about entitlement, please ask at your local Medical Centre or contact RO2 Clinical Administration on 02161 9082234 or Wegberg (67) 2234.

Entitlement to Health Service in Germany

Category	GP and Primary Care	Dental Centre	Out Patient Services	Accident and Emergency	In Patient Services	Spectacles	Surgical Appliances	Free Use of Civil Medical & Dental Services
Serving Personnel	Via BFG HS	Via DDS(G)	Via BFG HS	Via BFG HS See para 92-98	Via BFG HS	Via BFG HS for Defence Spectacles only (see SI BA(G) 3303)	Via BFG HS	Within Regional area Via BFG HS Out of area but within Theatre - emergency only
Dependants of Serving Personnel	Via BFG HS	NHS Banding Applied	Via BFG HS	Via BFG HS	Via BFG HS	Equivalent to NHS Provision see SI BA(G) 3303	Via BFG HS Statutory Contributions	Within Regional area Via BFG HS Out of area but within Theatre - emergency only
UKBCs	Via BFG HS or E106	NHS Banding Applied	Via BFG HS	Via BFG HS or E106/EHIC	Via BFG HS or E106/EHIC	Equivalent to NHS Provision see SI BA(G) 3303	Via BFG HS Statutory Contributions	Within Regional area Via BFG HS Out of area but within Theatre - emergency only or via E106
Dependants of UKBCs	Via BFG HS or E106	NHS Banding Applied	Via BFG HS	Via BFG HS or E106/EHIC	Via BFG HS or E106	Equivalent to NHS Provision see SI BA(G) 3303	Via BFG HS Statutory Contributions	Within Regional area Via BFG HS Out of area but within Theatre - emergency only or via E106
NAAFI & SSVc	Via BFG HS or E106	NHS Banding Applied	Via BFG HS	Via E106 or EHIC	Via E106	Equivalent to NHS Provision see SI BA(G) 3303	Via E106	Via E106
NAAFI & SSVc Dependants	Via BFG HS	NHS Banding Applied	Via BFG HS	Via E106 or EHIC	Via E106	Equivalent to NHS Provision see SI BA(G) 3303	Via E106	Via E106
ARRC	Via BFG HS Full Cost	NHS Banding Applied	Via BFG HS Full Cost	Via BFG HS See para 92-98	Via BFG HS or Own insurance	N/A	Via BFG HS or Own insurance	Within Regional area Via BFG HS Out of area but within Theatre - emergency only or Via Own insurance
Contractors	Contractors who have been granted status under Article 71 or 73 of the Supplementary Agreement to the NATO SOFA and signed Agreements to use the BFG HS on pre-payment will be treated as an integral part of the civilian component of the British Forces Germany. Contractors in this category will receive appropriate medical support from the BFG HS in accordance with signed Agreements							
Close relatives of serving personnel/ UKBC/NAAFI/ SSVc/ARRC (in possession of Annex C or Annex D in SI BA(G) 3217)	Assessment/Triage/ treatment including Prescriptions from within medical centre resources Referral to outside Agency if cost of relatives at the cost of relatives	Emergency Treatment only -NHS Banding Applied	N/A	Use of EHIC or via BFG HS if Triage system utilised	Via EHIC or holiday insurance at German Provider	N/A	N/A	Holiday Insurance at German Provider
Visiting friends/ and relatives	Signposted to German Provider	N/A	N/A	EHIC or holiday insurance at German Provider	EHIC or holiday insurance at German Provider	N/A	N/A	Holiday Insurance at German Provider

USING THE SERVICES

When I am ill, What Do I Do? Where Do I Go?

Your Medical Centre Opening Hours, Your Regional Medical Centre Opening Hours and Your Telephone Advice Service

22. If you think you are ill, you should contact your Medical Centre. Once you have done this you may have to inform your Unit or Line Manager at your place of work.
23. If you need urgent care advice and your local Medical Centre is closed, your Regional Medical Centre is open from 0800hrs until 2000hrs every day. After 2000hrs a telephone advice service is provided throughout the night. By day and night whether open or closed you can gain access to urgent advice from your Health Service by dialling your local Medical Centre number. However, if you believe your condition is serious or an emergency and you are unable to attend the Medical Centre during opening hours or access the Health Service for advice, you should go directly to the Accident and Emergency Department at your local hospital. You are advised to call for an ambulance by dialling 112. Emergency admission information is shown at paragraphs 92-98 of this booklet.



MEDICAL CENTRE LOCATION	OPENING HOURS	CONTACT NUMBERS
GÜTERSLOH REGION		
Gütersloh - Princess Royal Bks	0800-2000 Mon - Sun	Civ: 05241-842536
Bielefeld - Catterick Bks	0800-1700 Mon - Fri	Civ: 0521-92543131
Herford - Hammersmith Bks	0800-1700 Mon - Fri	Civ: 05221-9953240
OSNABRÜCK REGION		
Osnabrück - Imphal Barracks	0800-2000 Mon - Sun (until closure)	Civ: 0541-9602995
Münster - York Bks	0800-2000 Mon - Fri 0900-1200 Sat & Sun	Civ: 0251-9272362
Dülmen - Tower Bks (until move to Gutersloh Region late 2008)	0800-1600 Mon, Tue & Thu 0800-1200 Wed & Fri	Civ: 02594-9623333
BERGEN-HOHNE REGION		
Bergen-Hohne - Haig Bks	0800-2000 Mon - Sun	Civ: 05051-962218
Fallingbostel - Lumsden Bks	0800-2000 Mon, Tue & Thu 0800-1700 Wed & Fri 0900-1200 Sat & Sun	Civ: 05162-9712256
Celle - Trenchard Bks	0800-1600 Mon, Tue & Thu 0800-1200 Wed & Fri	Civ: 05141-9632320

Continued over

MEDICAL CENTRE LOCATION	OPENING HOURS	CONTACT NUMBERS
SENNELAGER REGION		
Sennelager MRS - Talbot Bks	0800-2000 Mon - Sun	Civ: 05254-9822414
Paderborn - Barker Bks	0800-1630 Mon - Fri	Civ: 05251-101256
Hameln - Gordon Bks	0800-1700 Mon - Fri	Civ: 05151-917428
Detmold - Hobart Bks	0800-1630 Mon - Fri	Civ: 05231-20324
RHINE REGION		
Rhine Support Unit - JHQ Rheindahlen	0800-2000 Mon - Sun	Civ: 02161-4722969
Elmpt-Javelin Bks	0800-1700 Mon - Fri	Civ: 02163-972600

In extreme circumstances when contact with your medical centre is problematic you should insert your Garrison prefix and dial 3333 for urgent medical advice.

Services in the Medical Centres

24. Your Medical Centre will provide you with similar services to those available in an NHS Health Centre or GP surgery. Each Medical Centre has experienced UK registered GPs who will examine patients and offer a diagnosis and treatment. The Medical Centres offer a wide range of services to meet the needs of the UK population in Germany. These are:

- Midwifery
- Health visiting
- Child health
- Physiotherapy
- Community eye care
- Community psychiatry
- Genito-urinary medicine
- Speech & Language Therapy
- Vaccination Service
- Pharmacy Services
- "Lifestyle screening" (For UKBCs - advice and checks on diet, smoking etc).

Please note however that not all services are available at all Centres.

25. You should, however, be aware that there are some services available in the UK, which are NOT provided in BFG such as District Nursing and some other specialist Community services. As a result, some conditions may require that families are posted back to the UK. This is however dependent on the support that an individual and/or their family will require and is reviewed on a case by case basis and in discussion with the patient and/or their family.



How Long Will I Have To Wait in the Medical Centre?

26. You will be seen immediately by a health professional if you attend the Medical Centre as an urgent case dependent on your presenting condition. When your appointment takes place will depend on your condition and how busy the Centre is. If it is decided that you need to see a GP urgently, this will be arranged. If your condition is less serious but you still need to see a GP by appointment it is unlikely you will have to wait longer than three working days.
27. Your Medical Centres offer a wide range of primary and community services. Below is a summary of the BFG HS Patient Charter waiting times for these services.

Maximum Waiting Times for Primary Care Services:

Speciality	Routine Appointment	Urgent Appointment
Access to GP Services for all entitled personnel during Medical Centre opening hours	Routine cases to be seen within 3 working days of requesting an appointment.	Urgent cases to be seen within 24 hours of request.
Midwifery Service	Initial appointment with midwife within 5 working days.	Urgent (face to face) appointment within 24 hours. Urgent (telephone) assessment within 4 hours.
Specialist Community Public Health Nursing Service	Antenatal and postnatal contact within 10 working days. New families contact within 20 working days.	
Community Paediatric Service	Contact within 5 days of receipt of written referral.	Referral to DGP from Medical Centre.
Community Mental Health Services (CMHS)	Routine referrals from a GP to the CMHS within 10 working days. Child and Adolescent Mental Health appointment within 10 working days following an appropriate referral.	Urgent referrals from a GP to the CMHS within 2 working days.
Speech and Language Therapy	Initial appointment within 8 weeks.	
Genito-Urinary Medicine Service	Routine appointment within 5 weeks. Colposcopy appointment within 25 working days of new referral.	Urgent appointment within 7 days.
Physiotherapy Service - GP Referrals	GP referrals – routine referrals to Primary Care Rehabilitation Facility (PCRF) to be seen within 5 working days. Routine referrals - to Regional Rehabilitation Unit (RRU) to be seen within 8 weeks.	Urgent referrals to be seen within 2 working days.
Physiotherapy Service - Self Referral	Self Referrals – routine referrals to PCRF to be seen within 5 working days.	Urgent referrals to be seen within 2 working days.

28. If you are given a GP appointment, the doctor will discuss your illness with you and if necessary, give you a prescription. Please remember that not all visits to the GP result in prescriptions being given to patients.
29. It is also important when booking an appointment to make it clear if you wish to discuss more than one problem or want to have more than one family member seen so that the appropriate period of time can be made available ie a double or triple appointment may be required. All patients should expect to be seen at, or soon after, their appointment time. If you bring up additional matters during your consultation, your doctor may ask you to make a new appointment.
30. Once you have been examined, your GP may refer you to another health professional in the Medical Centre, or to a specialist in a German hospital. If you need to see a specialist, the Medical Centre will, in most cases, book an out-patient appointment while you wait so that you know that the time is convenient for you to attend. Details of where the maximum waiting time is longer than this are set out below.

Maximum Waiting Times for Out Patient Services and Hospital Inpatient Care:

Speciality	From GP to Outpatient	From Outpatient to Inpatient
All, except those shown below:	4 weeks	6 weeks
Paediatric Surgery	12 weeks	12 weeks
Neurology/Neurosurgery	8 weeks	8 weeks
Rheumatology	8 weeks	8 weeks
Urology	8 weeks	8 weeks
ENT	4 weeks	8 weeks
Dermatology	4 weeks	8 weeks
Visiting Services by UK based consultants:		
Neurology	12 weeks	
Plastic Surgery	24 weeks	
Rheumatology & Rehabilitation	12 weeks	

The Out Patient Department

31. If you have to attend the Out Patient Department (sometimes referred to as Forward Outpatient Department – FOPD), staff at the Medical and/or Dental Centre will provide you the necessary travel directions to the hospital or speciality clinics held at other sites, the time and place of the appointment and the speciality you have to visit. Once you have arrived in the Outpatient Department or speciality site, you can expect to be seen at your given appointment time or to have to wait no longer than thirty minutes from your appointment time. If there is a delay, the DGP staff or clinic staff should explain why this has occurred. If you wait longer than 30 minutes and have had no explanation, you should seek one in case you are in the wrong place or for some reason the clinic staff are not aware that you are there.
32. Most German doctors speak some English so you will be able to understand what is said to you. To make sure there are no language problems, each DGP has Hospital Liaison Officers (HLOs) available to provide help with translation. The HLO service is described in more detail further on in this booklet. If you need help please ask the Clinic staff to contact an HLO.
33. Depending on which specialist you see, it is likely that you may have some medical tests to establish the cause of your illness. The results of the test may take some time and you may have to go back for another out-patient appointment to discuss the results with the specialist. You will be told this at the time.

34. If for some reason you are unable to keep an out-patient appointment, it is important to let BFG HS know. If you do not attend the appointment, BFG HS will not only have to pay the DGP for the wasted time, but also another patient who could have been seen more quickly will have to wait. So if you cannot attend the appointment please let your Medical Centre know. Please note that appointments cancelled at less than five working days notice still results in a charge to BFG HS and this has an adverse effect on other parts of the Health Service.



Date of Admission

35. If it is decided that you need to be admitted, you will be provided with a hospital information leaflet and the admission date organised at a time suitable to you. If you need the operation urgently, the hospital will arrange for you to be admitted quickly. If not, the longest you are likely to wait is 12 weeks.
36. It is unlikely that your operation will be cancelled but if this does occur, the hospital will make every effort to ensure that you are admitted within one month from the cancelled date.

Tertiary Care

37. The majority of referrals for outpatient and in-patient care will be treated in the DGPs. However, in a small number of cases, patients need particular treatment that can only be provided in specialist hospitals or Tertiary Centres. This is called Tertiary Care and covers, for example, the treatment of many cancers, heart surgery, neuro-surgery, specialised paediatric surgery and long term follow up after serious injuries.
38. The official position is that Tertiary Care is not provided in Germany and is instead provided in the UK and this has been the case since British Forces came to Germany. However BFG HS now makes arrangements for some Tertiary Care to be provided in Germany, particularly where there is little need for specialist community support or long-term follow up. Where a condition requires particularly complex treatment with either long term follow up, access to specialist counselling or other support services and/or community care not available within the BFG HS, then such treatment will necessarily have to be provided in the UK, notwithstanding that treatment began in Germany.
39. If you require Tertiary Care, this will either be arranged by your General Practitioner or Community physician (e.g. Community Paediatrician) or by BFG HS in Bielefeld. Such Tertiary Care is normally undertaken in UK centres of excellence and which may be located more conveniently to the patient's home. Often the decision on whether to treat a patient in the UK or Germany is not straightforward or it may be decided to start treatment in Germany and complete it in the UK. In such cases, the Medical Director Secondary Health Care is consulted. Account is taken of each patient and also consideration is given to the support that an individual and/or their family will require and the decision determined in discussion with the patient and/or their family. Occasionally, however, a rapid decision is required which may preclude detailed consultation.

The Care of Children in BFG

40. BFG HS is committed to providing the best possible health care to the children in BFG so a wide range of primary and specialist care is available in each of the Regions. In addition BFG HS has a statutory obligation to mirror the child protection procedures used in the UK as far as possible bearing in mind the use of German facilities to provide part of the health care services. These procedures oblige health care professionals to seek confirmation where there is any doubt about the nature or cause of an injury to a child. You should not therefore feel threatened if a health professional asks for a second opinion on an injury to your child.
41. If you feel that a child is exposed to abuse in any way, you should pass on your concerns to a responsible person, such as a health professional, Social Work Service, teacher, or a police officer. You can be assured that your concerns will be kept confidential.

GOING INTO HOSPITAL

German Hospitals

42. Having an operation or procedure can be stressful, no matter where you are. If you do have to go into hospital, bi-lingual HLOs are available to answer any questions you have and liaise with healthcare professionals on your behalf to assist you to understand the treatment. The DGPs have a lot of experience in treating UK patients and they, together with the HLO team, will endeavour to make your stay as comfortable as possible.
43. The contract for treatment of BFG entitled patients in DGPs is managed by a London NHS teaching hospital, Guys' & St Thomas' (GSTT), on behalf of BFG HS. GSTT works with the DGPs to ensure that the medical or clinical care you receive is comparable to that received in the NHS. At each DGP there is a Hospital Operations Manager and support team whose role it is to assist you to get the care you require.
44. To assist and monitor the quality of care UK patients receive, GSTT asks all British patients to fill in a questionnaire about their hospital stay so that any problems can be addressed. The results of these surveys consistently show that the vast majority of BFG HS patients are satisfied or very satisfied with the care they received in the DGPs.
45. When you come to hospital, please bring night clothes, towel and what ever toiletries you require etc. Do not bring valuables or important personal documents into the hospital as the DGP cannot accept responsibility for their loss.
46. For security reasons, military personnel and their dependants should never give details of their civilian address to any German hospital. The only address to be given is that of your unit, so please make sure you know your Unit's German address.

Using the Designated German Hospitals (The DGPs)

47. Ideally you should be able to use the German Hospital nearest to where you live. However, BFG HS have a legal duty to ensure that the hospitals routinely used for BFG patients meet appropriate minimum standards. In addition some British patients dislike the lack of privacy and certain other aspects of German hospitals. The contract with the DGPs addresses issues of clinical quality and cultural issues such as privacy. A balance has to be struck between providing a convenient hospital close by and the need to ensure these quality and cultural needs. Therefore regional hospitals have been selected to provide a service to BFG HS patients. Limiting the number enables BFG HS and GSTT to ensure an appropriate quality of service that also meets your cultural needs. Regrettably, for some this may mean travelling further than they would normally expect.

Getting to the Ward

48. Each DGP puts great effort into making sure that your stay in hospital is of a high standard. When you arrive at the reception, you will be directed to the Admissions Department and then afterwards to your ward. There are usually signs written in English to help you find where you need to go, and HLOs will be available during normal working hours and are on-call outside of these times. If you are in any doubt about what to do or where to go, please ask the reception staff to show you the way to the HLO office or to call a HLO.

The Ward

49. Once you get to the ward, you will notice an immediate difference to UK hospitals. Whereas most NHS wards are "open plan" and are made up of a number of eight bedded bays, in Germany it is normal for patients to be in separate rooms with two, three or four beds. The rooms are either for males or females and are not mixed. All the DGPs try to ensure that rooms are shared with other UK patients but this is not always possible. However, if you require more privacy, mobile curtains or screens are available on request.
50. German hospitals are designed to be places of quiet and rest as well as places for medical treatment. There are therefore some significant differences when compared with British hospitals. They do not have outpatient departments (other than for BFG patients) so they appear to be much less busy

than British hospitals. A more significant difference for you is in the role of the nurse in German hospitals. British patients expect to be regularly visited by their nurses. However, German patients expect to be left alone unless they require a nurse. So German nurses will visit your room less often than in the NHS as they expect to be called if required and each bed has a nurse call system. British patients are often reluctant to call a nurse even when it is clear that they should! German nurses expect to be called - if you need a nurse do not hesitate to use the nurse call system.



The Treatment

51. The treatment you receive in the German hospitals is according to German law and German clinical practice. In many cases, German clinicians use different treatment to UK clinicians. As medicine is increasingly international, this is very rare indeed. BFG HS also seeks to influence German clinicians when it is not possible for British General Practitioners to continue treatment started by the Germans. The most common example of this is medication as not all German drugs are available in the UK.
52. There are also differences in the informed consent procedures in Germany (although the UK is moving now towards the German approach). Much emphasis is placed in Germany on informed consent. This means that you should be informed about what operation needs to be carried out and what are its benefits and risks including any side effects you may experience. The doctor will give you a consent form, usually in the English language, which will help you fully understand what needs to be done and why. Once the doctor has explained these, you will be asked to sign a form saying that you have both understood and give your consent for the operation to take place. Do not hesitate to ask questions about your operation, if you are unclear about any aspect.
53. In Germany as well as in the NHS, everyone having an operation has to give the surgeon informed consent. The surgeon will not be able to operate if you do not sign the consent form. If you have any questions, the HLO can be present when the doctor brings the form for your signature. If you do not understand what you have been told, DO NOT SIGN THE CONSENT FORM.
54. German doctors can sometimes seem a little brusque, particularly when they translate their German into English literally. The German clinicians' approach may be considered to be more direct than their UK colleagues. They will make you aware of the options available at an early stage and you are encouraged to discuss these with your GP or another Primary Health Care professional (see paragraph 57 below).
55. Finally German patients are less inhibited than British ones and there is less emphasis on privacy or chaperoning. In our DGPs we seek to ensure that for British patients they adopt British practice and if, for example, you are not given a gown when you are asked to undress or a chaperone is not present when an intimate examination is planned, you have the right to insist on one.

The Hospital Liaison Service

56. If your admission to hospital is planned, the HLO may contact you before arrival - to ensure that you have the necessary information and provide the opportunity for you to ask questions regarding your admission. Once you have arrived in the DGP you will be visited by a Hospital Liaison Officer (HLO) normally on the day you arrive. If you are admitted outside working hours then you will be visited within twenty-four hours. You are advised to request the ward staff to contact them direct if you experience any difficulties during your stay in hospital.
57. Although most German doctors and many German nurses speak some English, the HLOs speak fluent English and German and are there to assist with communication problems you may have. HLOs are there to make sure that you understand the care you are receiving, and may be available to accompany you, should you so wish, when you are being examined by the doctor. You are advised to ask for the support of the HLO team if there are issues for which you need further clarification or understanding. Do not be afraid to ask for clarification as it is quite normal for some patients not to understand and absorb everything they are told the first time around.
58. The HLO will visit you daily during normal working hours. They also have an on-call service for evenings and weekends. Details of the HLO and the Defence Medical Welfare Service (DMWS) will be in the Information Folder given to you when you arrive.

59. The HLO Staff have no medical qualifications, but are there to provide support where there may be communication difficulties from either side. They remain an integral part of the system to ensure that the standard of service is maintained. They are also an important part of investigating any patient complaints and concerns that you or your GP or other member of the PCC team may have.

The Facilities

60. Facilities available to you will include some or all of the following:
- Patients will normally be nursed in rooms with 2, 3 or 4 beds with, where available, en-suite shower and toilet;
 - Each bed or room has a telephone facility. It is important to remember that patients are responsible for the costs of their telephone calls. The use and cost of the telephone will be explained to you on your arrival. Public telephones are also available in the hospital;
 - Mobile telephones are prohibited inside some but not all hospitals because their radio waves interfere with clinical equipment;
 - Most rooms have television sets and in the majority of DGPs it is possible to receive the English language British Forces Broadcasting Services (BFBS). This is under review due to the switch off of analogue signals in BFG;
 - Each DGP has a shop where you will be able to buy the usual range of goods available in hospital shops (many also sell UK newspapers);
 - Hospitals also have cafés if your friends and relatives need refreshments.

Smoking

61. Smoking is not allowed in hospital except in designated areas. If you wish to smoke, please check with the nurse or the HLO where this is permitted. Legislation, which is due to be introduced in July 2008, may preclude smoking anywhere on hospital premises.

Visiting Times

62. German hospitals are flexible about patients receiving visitors. Your friends and relatives can usually visit you as often and as long as you like, as long as they do not interfere with your clinical care or that of other patients. However, access times may differ in certain specialist hospital units. Visitors are also expected to conduct themselves in the spirit of quietness and tranquillity expected in a German hospital. Where possible visitors should not arrive before 1000 hrs and patients normally rest following lunch. In the evening visitors should leave before 2100 hrs. If there is any doubt please confirm with the HLOs.

Hospital Food

63. It is important to remember that no one wants to be in hospital and whether you are in the UK or in Germany, it is likely that being ill will affect your appetite. Although this is true, the DGP does its best to provide food that you will enjoy at this stressful time. The DGPs seek to provide British style or International style food and a choice of menu.
64. But please remember that when you are in a different country, there are bound to be differences. For example, Germans tend to have their main meal in the middle of the day rather than in the evening.

Defence Medical Welfare Service (DMWS)

65. The DMWS play a vital, non-medical, patient welfare and support role. The DMWS Welfare Officers provide the service on a 24 hour basis in both DGPs and non-DGPs. They will also support your relatives during your illness and when you are in hospital. Although the DMWS provides particular support for very seriously ill patients, it will also address any welfare concerns you may raise.



66. DMWS work very closely with the HLO service and they meet regularly to discuss patient requirements. DMWS will identify these welfare needs through a variety of means including:
- Regular ward rounds
 - Referral by Units
 - Referral by HLOs
 - Others/self

Recovering in Hospital

67. Both the Hospital Liaison Service and the DMWS are there to support you during your stay in hospital. The folder provided on the ward or by the HLO will give you the necessary contact telephone numbers for you to access either or both of these services. You may also be visited during your stay by church representatives or members of voluntary organisations.
68. Experience has shown that patients are expected to stay in German hospitals longer than they might in the UK. If your stay in hospital is prolonged, the HLOs can provide books for you to borrow (and DVDs/videos in some DGPs).

Children in Hospital

69. Each DGP has excellent services for children. If your child needs to go into hospital you will be given information by the referring PHC centre in English and told what s/he needs for their stay. Like you, they will need night clothes, a dressing gown, slippers, a towel and personal toiletries. Although the hospital provides toys, it is a good idea to bring a favourite teddy/toy.
70. If your child is having an operation, you will have to sign an informed consent form on their behalf.
71. Parents are encouraged to stay with children under 9yrs of age when they are admitted to hospital. There is limited en-suite accommodation available within some of the hospitals, or alternatively the parent may stay by the bed overnight where circumstances permit. Commanding Officers may authorise up to fourteen days in a local hotel if hospital or Service accommodation is not available.
72. Visiting hours for children are normally up to 19.00hrs, though children are encouraged to rest between 12.00 – 14.00hrs. Brothers and sisters may be allowed to visit at other times, but please check with the nurse.
73. If children are admitted to a DGP hospital for long term or ongoing treatment, SCE will endeavour to provide appropriate educational support where this is practicable, and on the advice of the relevant health professionals and the agreement of the parents. It is the parents' duty to inform the SCE school which their child is attending of any such long term or ongoing treatment in hospital, and the school will in turn inform HQ SCE, so that possible educational arrangements can be pursued. Under arrangements made in an agreed protocol between SCE and DMWS, DMWS Staff can assist parents in this matter during such times, which may be stressful, by informing the relevant HQ responsible officer, if parents wish to choose this option.

Having a Baby in Germany

74. Pregnancy tests are available at the Medical Centre. When a test is confirmed positive, you are advised to make an appointment to see the Community Midwife via the Medical Centre reception. The Community Midwife will be your Named Midwife and act as your main point of contact throughout your maternity care. Your Community Midwife will provide you and your partner with information on:
- Maintaining a healthy lifestyle;
 - Appointments, tests, services;
 - Shared care and monitoring you and your baby;
 - Preparation for Birth and Parenting classes;
 - Baby care and feeding;
 - Post natal care.

75. The Community Midwives will supply pregnant women and their partners with all the information they need to access all the support that is available to them both in the hospital and in the community.
76. Ante-natal care will be shared between the Community Midwife, GP and an Obstetrician from the DGP. During the antenatal period, parents-to-be will be enabled to prepare a Birth Plan which will set out the mother's wishes for birth position, pain relief and other matters. Sometimes in the light of clinical circumstances at the time of birth, it may not always be possible to meet the mother's wishes but in this event this would be discussed with you, wherever possible.
77. It is BFG HS policy for births to take place in a DGP assisted by a German Obstetrician and/or German midwife. Women and their partners will be given an opportunity to visit the hospital before the birth and will have the full support of the Community Midwifery team following discharge from hospital.
78. During the birth, with the exception of DGP Hannover, gas and air pain relief is not available; however a wide range of other kinds of pain relief will be available.
79. As far as possible, partners or another support person of your choice will be able to attend the delivery.
80. Homebirths and Birthing Units. Due to legal and contractual complexities, it is regretted that Homebirths and birth in a German Midwife-led Birthing Unit are not available via the BFG HS, and BFG HS Community Midwives, who work in Germany, cannot deliver babies in the German Hospitals. In the event you wish to pursue the option of a homebirth or birth in a Midwife-led Birthing Unit, your current options include a supported return to UK, or procurement at your cost in Germany or, in some instances, non-military families may be able to obtain these latter two options via AOK insurance.
81. Returning to the UK. All mothers retain the right to return to the UK for the birth of their baby in the NHS. If this is your choice, please discuss it with your Community Midwife so that you can be advised when you need to return to the UK (there are limitations on flying in late pregnancy) and so that preparations to transfer your care to UK health care providers can be made in support of your choice.

Leaving Hospital

82. The doctor will let you know the date of your discharge. Patients should not discharge themselves from hospital against medical advice. If you do this, and then you do not recover properly, the doctors may attribute this to your early self-discharge. Experience also shows that some patients who self discharge are subsequently readmitted as emergencies and if this happens you may be liable for the costs of any re-admission shown to be caused by your earlier self discharge. If you are anxious to leave before your due discharge date, please speak to the HLO.
83. You should also be aware that discharging a child against medical advice may lead to the initiation of child protection procedures. If medical staff are concerned that early discharge may lead to the child experiencing suffering or harm they are required to take action. If you feel that you wish to discharge your child against medical advice, speak to the HLO and explain why you want to do so. It may, on occasion, be possible to organise earlier discharge but your GP or Health Visitor may need to be involved.
84. As soon as your discharge time is known, entitled patients should telephone their Unit or GTO who will arrange transport back to your accommodation. Contact numbers are available in room folders or ask the HLO for transport details.
85. Before you leave you need to ensure that you have a discharge note to take back to your Medical Centre (The HLO will tell you where from). If this is not available at the time of your discharge, the HLO and/or GSTT Admin staff will provide a copy to your Medical Centre immediately it becomes available from the clinician. This contains important clinical information about your treatment which your GP needs to know.
86. If the doctor wants to see you in FOPD after your discharge, details of your follow up appointment will be noted on the Discharge Summary.
87. If your treatment has involved the use of drugs and the doctor wants you to continue taking them after you have been discharged, the DGP will give you either 5 days supply or sufficient to complete a



course of antibiotics. If you have to continue your drug regime beyond this point, your Medical Centre will supply them. Some drugs prescribed by German doctors are not readily available in the UK and, in a small number of cases, may not be licensed for use in the UK. It is therefore critical that you ensure that you have a 5 day supply of drugs and that you report to your Medical/Dental Centre within 24 hours with your Discharge Note so that a follow-on supply can be arranged. Do not wait until you run out as it can take up to 3 days for the issue of certain drugs. You should note that your GP will at times may have to change you to a different medication from that advised by the hospital staff, this is because they can only prescribe UK licensed preparations. This will be done where possible following liaison with your hospital doctor. You may know that German providers use homeopathic medications more frequently than we are used to in the UK, regrettably these are not provided freely by the BFG HS.

88. Please make sure you return the Patient Satisfaction questionnaire to the HLO or Administration Office. Patients are the only people who can tell us if the service provided is as good as we want it to be.
89. Some patients requiring specialist physiotherapy may receive this from the DGP or by a local German provider. Alternatively, military patients may be referred by their GP to their Regional Rehabilitation Centres at either Gutersloh or Hohne for inpatient rehabilitation. Courses vary from 4 to 17 days dependent on the patient's condition and need, to prepare for their return to full military duties.
90. Because military personnel can be moved at any time, you may find your regiment has been moved back to the UK before you have attended your follow-up appointment. If this occurs your Medical or Dental Centre should arrange a follow up in the UK. To ensure this happens make sure that you notify your GP of any impending move if you are receiving ongoing hospital care.
91. Within 10 working days after discharge, the hospital will supply your GP with a detailed summary of your treatment. This will be translated into English (either by the hospital or by a specialist contract service with which BFG HS has a contract specifically for this purpose). The Discharge Summary will form part of your medical record (NHS or Military as appropriate).

URGENT OR EMERGENCY CARE

Urgent or Emergency admission to Hospital

92. Apart from the FOPD, the only other route into hospital is to be seen as an emergency. If you go to your Medical Centre your GP may consider your condition to be serious enough for you to go directly to the Accident and Emergency Department (A&E).
93. If you are entitled to hospital care by the BFG HS, the GP will give you a Referral Form (known as a HAF2). When you arrive at A&E, this form will identify you as an entitled person and you will be given the treatment you need. Non-entitled personnel will normally be signposted to local providers.
94. During the evening when medical centres are closed you may receive advice from your Telephone Advice Service to go straight to your local A&E Department. If you have a dental problem and the Medical Centre is closed the Telephone Advice Service will provide you with a telephone point of contact for the Duty Dentist in your area. However, if you believe your condition is serious or an emergency and unable to attend a Medical or Dental Centre during opening hours or access to the Telephone Advice Service, you should go directly to the Accident & Emergency Department at your local hospital. Normally, before you have had your treatment, entitled patients will be asked to fill out a HAF2A which will provide the necessary details for the DGP to record the care they provide. You should show your ID card or medical entitlement card to the hospital's admission office as proof of your entitlement. Non entitled patients should produce their EHIC, E106/AOK card or holiday insurance documents to the German provider.
95. If you need to call an ambulance the number is 112. Most military exchanges are now programmed to accept 112 for emergency connection to the civilian ambulance service. It is important to remember that ambulances will take you to the nearest hospital for care (this is part of German law). Depending on where you are and when you need emergency care, you could end up in a hospital that is not a

DGP. However, non DGPs close to British Bases are getting more used to dealing with BFG patients and may ask you to fill out the appropriate paperwork.

96. If this happens, it is important to inform your Unit (if military), Line Manager (if civilian) and Medical Centre as soon as possible so that BFG HS can assume responsibility for the cost of your care. Once the GSTT team are informed that you are a patient in a non-DGP hospital, a HLO will contact you either in person or by telephone by the next normal working day. If you do not inform your unit or BFG HS you may find yourself liable for some or all of the costs of your care and may prevent proper discharge planning arrangements to be put in place.
97. There are far too many hospitals in Germany for BFG HS to provide the same level of support as in the DGPs, so these hospitals will not have access to UK media and British style food. However, BFG HS provide a Patient Support Service for UK patients who have been admitted to non-DGPs. To make sure you get the support you need make sure you contact your Unit and Medical Centre as soon as possible. Where the non-DGP is close to the DGP, the HLOs, during normal working hours, will visit UK personnel who have been admitted every other day and telephone on non-visit days. Over the weekend welfare support may be available through the DMWS.
98. Many emergency admissions to non-DGPs have a very short length of stay (e.g. patients who are kept in overnight for observation). So if you are admitted on a Friday night and discharged the next day, it is important to let your Unit or Medical Centre know because you may be liable for the cost of this treatment unless it is authorised.

MILITARY FITNESS

99. BFG HS is committed to providing a vaccination and immunisation service which maintains a high level of protection of serving personnel. The performance of both of these services is reported to the chain of command.
100. BFG HS reviews the cases of all serving personnel who are downgraded on a regular basis to determine what further action can be taken to return them to a normal category and combat readiness.

RETURN OF PATIENTS TO THE UK FOR ROUTINE MEDICAL TREATMENT AT OUTPATIENT DEPTS OR ADMISSION TO HOSPITAL

101. If you receive an appointment slip to attend a UK hospital, you should report to your Medical Centre as early as possible so that transport and other arrangements can begin early. This process is the first step required of both service and civilian patients. Full details are contained in SI BA(G) 3303 or the current Civil Secretariat Personnel Management Notice entitled Medical and Dental Care in European Economic Area Countries.

MAKING THE SERVICE BETTER - COMPLAINTS ABOUT THE SERVICE

102. Everyone involved in delivering health care across Germany wants to provide as good a standard of care to the BFG population as that enjoyed by the German population. Although we work hard to offer high standards of service and care, things can sometimes go wrong. Should this happen, we will do all we can to put things right for you and to make sure that the same thing does not happen again.
103. The services provided are of a high quality and the vast majority of patients are satisfied or very satisfied, however, there will always be occasions when problems arise. So if you have a complaint about Primary Medical Care, please let your Medical Centre know. If you are still in hospital please contact the HLO who will try to deal with the problem immediately. You can also contact the Hospital Operations Manager (HOM) responsible for the DGP in your area. The HLO will provide contact details.
104. Help is available in putting your complaint together. Please ask for the 'How to Complain' leaflet available from your hospital or ask to speak to the Complaints Co-ordinator at your Medical centre. If you decide to write a letter of complaint about:
 - **Primary care**, please send it to the Medical Centre.
 - **Hospital care**, please address it to the Hospital Operations Manager (HOM) at the DGP.



105. You will receive an acknowledgement in two working days of receipt and normally a full response in twenty eight days, or be advised of any delay whilst the matter is under investigation.
106. You may feel that your complaint is so serious that you wish to take legal advice about it. You should contact either a solicitor or Legal Aid in these circumstances. The law regarding the delivery and practice of medical care is complex so you are advised to consult a solicitor with experience in medico-legal practice. You should direct your legal advisor to write to RO2 Clinical Administrator HQ BFG HS Wegberg, BFPO 40 enclosing your signed Consent for release of your medical documents. Notification of the instigation of legal proceedings in respect of any complaint will however suspend the internal complaints procedure, as the BFG HS cannot override the legal process.

YOUR RESPONSIBILITIES

107. As you can see from above, BFG HS has put a lot of effort and resource into making sure that your health needs will be met by a service that is comparable to the NHS. But you have a part to play as well so;
- On arrival in Germany, make sure you register with your Medical Centre and confirm your entitlement;
 - If you are not entitled and you register with a German provider, ensure your Medical Centre/hospital are aware in advance so that the cost of your care can be paid for through the EHIC, E128 or E106 systems, or your employer instead of by you;
 - Keep your medical and hospital appointments so that time and space is not wasted;
 - Rearrange or cancel your appointment at least five working days before, if you are unable to attend. Even if you cannot give five day's notice, you should still cancel or rearrange an appointment as soon as you know that you cannot attend;
 - Pick up the discharge note when you leave hospital, and take it to your Medical Centre as early as possible. Remember it may take up to 3 days to obtain some medication from your Medical Centre. Some equipment can take up to 56 days to procure;
 - Complete and return the patient satisfaction questionnaire;
 - Follow the instructions of those providing care. Anyone who self discharges does so entirely at their own risk and may become liable for all costs if a further subsequent readmission becomes necessary. Soldiers are not allowed to self-discharge without the permission of their Commanding Officer;
 - Inform your Unit and Medical Centre if you are admitted to a hospital as an emergency;
 - Respect the efforts of those providing your care. If something occurs which you think needs changing, let the HLO, HOM or the Medical Centre know;
 - Pay for any extra services (e.g. private patient telephone calls etc);
 - Treat us with the same courtesy and respect that you expect to receive from us. Any abuse, whether physical or verbal, against any member of Staff will not be tolerated.
108. Please remember that you are an ambassador of your Regiment and Country, and this should be reflected in your language and behaviour at all times. Whilst in hospital you are still under the jurisdiction of the Military and any breakdown in behaviour may result in the Military Police and/or your Unit being summoned.
109. All the health professionals and support staff working in the Medical Centres and German Hospitals want to make sure that high quality health services continue to be delivered here. Please make sure you play your part.

DATA PROTECTION

110. The Data Protection Act 1998 requires that data held and used by organisations complies with the eight principles set out in Schedule 1 of the Act: it incorporates the concepts of "obtaining", "holding"

and “disclosing” of personal data. The data must be: accurate; relevant and not excessive; fairly and lawfully processed for limited purposes; kept secure and not kept longer than necessary. German health care providers, including the DGPs are bound to adhere to the German Data Protection laws, which have similar provisions as they are derived from the same European Directive.

111. There is a requirement to compile notes on a patient at the time of consultation with medical and other clinical staff to record treatment. These notes are included in the patient health records, which assist in the future health care of the individual. Consequently, BFG HS, their partners and other health care providers will hold patient notes and health records of all patients to allow the highest quality of treatment. This data will also be used, in accordance with the terms of the Data Protection Act for administrative and audit purposes. For example, where BFG HS wishes to investigate the outcome of a particular type of operation in a particular DGP, they may compare the outcome of that treatment with the other DGPs. In order to do this a health professional may need to collect information from the notes of those patients who have had the operation concerned.
112. The data may also be used for research purposes but only for research approved by a formal Research Ethics Committee. All data used for research will be anonymised unless explicit consent is obtained from a patient before the data is used.
113. Appropriate information will also be shared with other people and organisations involved in your care and welfare. In particular, information will be shared with the following groups.
 - **Hospital Liaison Officers (HLOs)**
They are an integral element of the care provided to BFG patients and will inevitably have access to some of your clinical details. HLOs are bound by a Code of Conduct that stresses the need to keep all information relating to patients confidential. They are also required to check with you at least on a daily basis that you are content, and if you so request will limit their involvement to this. Other than the daily visit the only other exception is if a German clinician requires their attendance at a consultation to ensure that the doctor’s legal obligation to explain a procedure has been properly discharged (i.e. the German doctor is convinced that you fully understand what she/he has said).
 - **Defence Medical Welfare Service (DMWS) Welfare Officers**
They are part of the extended care team. They will normally be told who is in hospital but nothing else and you can specifically ask for them not to be informed or for them not to visit you. Bear in mind, however, they may well see you during their rounds even if they have not been informed of your presence. DMWS staff will not be given any clinical details. DMWS Staff are also bound by a Code of Conduct which encompasses the need for strict rules about confidentiality.
 - **Chaplains**
They are treated in the same way as DMWS except for Unit Chaplains in respect of uniformed personnel. Where a chaplain is acting on behalf of his Commanding Officer, he will be given details of Unit personnel (name and location) in hospital, but he will not be given any clinical details.
 - **Visiting Officers**
Commanding Officers are required by Queen’s Regulations to ensure that their personnel are visited by an Officer. Visiting Officers will be given the names and location of soldiers of his unit in hospital but no clinical details.
114. Patients have a right to request that this information is NOT shared with any of the above, other than health care providers. Such requests should be in writing and can be made prior to, or during their admission. The sooner the request is made, then the sooner it can be put into effect.
115. This will not affect your rights, but will mean that those charged with providing welfare support to you will not be aware of your stay in hospital and this may adversely affect your care.
116. Please note that all complaints are copied to RO2 Clinical Admin of the HQ BFG HS and seen by the Director of the BFG HS and, as relevant, by the Medical Directors of Primary Health Care, Secondary Care and Director Operations and Clinical Services. Where appropriate, the Headquarters may require specific investigations and if patients are not satisfied with a response to a complaint they can appeal to the Director of the BFG HS. You should be aware that a complaint may require access to your notes in order to investigate it properly. If such access is required by anyone other than the BFG HS

Complaints Manager (RO2 Clinical Administrator), your GP, or your hospital doctor, the specific authority of the patient will be required. It is emphasised that in almost all circumstances (except in the case of a minor), any investigation involving clinical issues needs the specific consent of the patient. The consent of a Next of Kin is, for legal reasons, insufficient other than in the case of a minor.



117. For further advice you can contact the Practice Administrator in the case of Medical Centre care or the Hospital Liaison Officer for hospital care.

REFERENCES

118. For further information regarding your entitlement, rights and responsibilities when using the BFG HS, please refer to the following sources:
- SI BA(G) – Vol III Chapter 3 Standing Instruction 3303 - Regulations for Medical and Dental Treatment and Admission to Hospital;
 - Patient Care Standards Leaflet, published April 2008 by BFG HS;
 - BFG HS Complaints Procedure. (Annex A Patient Information Leaflet);
 - BFG HS Medical Centre Complaints Procedure (HS/PCC/54 Med dated Sep 03 - to be reviewed in late 2008, held by your Practice Administrator).

ANNEX A

THE ENTITLEMENT CATEGORIES

1. There are a number of entitlement categories, which are summarised below. Further detail is contained in Standing Instruction for the British Army in Germany (SI BA(G) 3303).

Personnel intending to remain in Germany

2. As described, certain treatments require a return to the UK. If you are a civilian and wish to remain in Germany, it is recommended that you consider making your own private arrangements for medical care (i.e. contribute to a Sickness Insurance Scheme which is mandatory in Germany) in the event that you would otherwise have to return to UK.

Fully Entitled Personnel

3. If you are within one of the following groups, all you have to do to use the health services in Germany is to attend (or inform) your Medical Centre.

Serving Personnel either stationed or visiting Germany on duty

The only charges you are likely to pay are:

- Extra services to those available under BFG HS (e.g. telephone charges whilst in hospital);
- For particular types of inpatient treatment which are not usually paid for by the NHS in the UK such as “cosmetic” surgery and treatment for IVF (more details for what is approved and not approved is set out in Appendix A).

Please note that Territorial Army personnel are not entitled to free health care whilst in transit to and from their German base.

All dependants of Serving Personnel living in Germany

You are entitled to the same facilities as serving personnel except for a liability to pay statutory charges for ophthalmic care (i.e. similar to NHS charges). No charge is currently made for prescription medication received from the BFG HS Medical Centres.

All UK based civilians (UKBCs) and their dependants

You have the same level of entitlement as dependants of serving personnel.

However, as a UKBC (or dependant of a UKBC) you have a choice. You can use the BFG HS provided service or you can also use any German medical and dental services by using an E106 or AOK card (see below). If UKBCs use the E106 or AOK card, the MOD does not pay for care. Also the clinician/hospital may not recognise the HLO role and you may not experience the same access from this team.

All UKBCs are encouraged (voluntary) to obtain an E106/AOK card on arrival in BFG. If you are referred by the BFG HS using your E106 costs are recoverable by you. However, if not referred by the BFG HS there are costs involved if you choose to utilise German care under this scheme, as follows:

Primary Care. A small charge is made for attendance with a German GP to a maximum of €10.00 in a three monthly period.

Hospital Care. If you are referred to a German hospital by a German doctor, you are required to pay €10.00 per day (for a maximum of 28 days). If, however, you choose to be treated as a private patient you will have to pay for all care and services used.

Contractors. Contractors who have been granted status under Article 71 or 73 of the Supplementary Agreement to the NATO SOFA and signed Agreements to use the BFG HS on pre-payment will be treated as an integral part of the civilian component of the British Forces Germany. Contractors in this category will receive appropriate medical support from the BFG HS in accordance with signed Agreements.

ISOLATED DETACHMENTS (ISOSETS)

Serving personnel and their families in ISOSETS where there is no Service medical facility available may use the facilities of BFG HS. However because of the distances involved they will normally use local civilian facilities for routine medical care. However, where provided Servicemen are to use local German Service medical facilities.

ISOSET personnel with a known medical condition, which requires other than routine treatment, must advise their Service Posting Authority and in Theatre Headquarters (RO2 Clinical Admin HQ BFG HS, Wegberg BFPO 40, Telephone: 02161 908 2234) as soon as possible, ideally before commencing language training. As a general rule ISOSET personnel can use a local specialist and the bills will be managed by RO2 Clin Admin HQ BFG HS Wegberg.

Every ISOSET should hold information on local doctors and hospitals. On being posted to an ISOSET, you should:

- Register with the BFG HS Medical Centre (see para 23 for locations) closest to your location so that your medical records can be called forward since it is not possible for NHS and Service documents to be held by a German Doctor out with the Service Medical Centres. RAF servicemen are advised to contact UKSU Ramstein and/or SDL(O) Innsworth to arrange transfer of Service medical documents to their nearest Service Medical Centres;
- Obtain advice from RO2 Clinical Administration about your entitlement to services. A copy of the relevant extract of SI BA(G) 3303 can be made available at this time if required. RAF Aircrew are advised to contact SDL(O) or UKSU to arrange arrival aircrew medicals. Problems have arisen in the past when individuals have obtained German civilian treatment which is extensive in nature or in excess of the NHS standards or which could have been provided in Designated German Provider Hospitals, or Service Medical Centres. Treatment which is not available in the NHS but is available privately in UK will not be funded;
- Become familiar with BFG Standing Orders 3303 (SI BA(G) 3303);



- Be aware that prescriptions should be paid for in cash and the receipted prescription retained. When a number of receipts have been collected, send the receipts under a short covering letter to HQ BFG HS RO2 Clin Admin for reimbursement. Please ensure that you provide your bank details on your initial claim only;
- Please be aware that medical bills incurred by your family can be invoiced directly from your German hospital to the address shown in SI BA(G) 3303 Annex B;
- Be aware that BFG HS will fund eye testing. Spectacles for children up to 16 years of age are part funded (NHS voucher scheme) up to a fee of between £60.00 to £70.00. Certain categories (adults) who would receive free spectacles freely from the NHS will also be funded by BFG HS;
- Be aware that spectacles required for work related computer use remains a Health and Safety responsibility. Seek the help of your H&S representative or details may be obtained from RO2 Clin Admin for reimbursement of up to £60.00.
- During working hours telephone advice is available from your nearest Service Medical Centre or Regional Centre. See paragraph 23 for detailed information.

E 106 and EHIC

4. Members of HM Forces and their dependants cannot use an E106 (see below) to gain access to German health care facilities because they receive their health care through BFG HS. However, they should obtain an EHIC Form if they intend to travel elsewhere in the European Union on private journeys. Application forms for EHIC are available in the Department of Health booklet "Health Advice for Travellers" which is available from post offices, GP surgeries in the UK, or by requesting one direct from 0800 555 777 (in the UK) or on line www.ehic.org.uk. Forms E106/EHIC cannot be presented at military Medical/Dental Centres or outpatient departments.

Partially or Not Entitled

5. If you fall within the partly entitled (e.g. NAAFI employees) or not entitled (e.g. NAAFI Support Services (NSS)) categories (para 13), and subject to the agreement that your employer will have made with the MOD you will not have to pay for hospital based services or German GP services as long as you have a Form E106, (AOK Card) which covers the health needs of UK citizens who reside in the European Union.
6. NSS personnel (and other similarly non-entitled groups) are not entitled to be treated at a Service Medical or Dental Centre. These categories should dial 112 for emergency treatment or be signposted to local providers.
7. If you are coming to work in Germany, you should first obtain an EHIC Form. This form gives UK citizens access to urgent treatment in the European Union.
8. If you are not entitled to have your health care paid for by BFG HS, you should change your EHIC to an E106 once you start living in Germany. When you arrive from the UK, ask your employer about the arrangements to get your EHIC changed to an E106. This can be done by sending application forms to the NHS at Newcastle in the UK and normally takes about one month. The address is:

Contributions Agency
International Services
Department of Social security
Longbenton
Newcastle upon Tyne
NE98 1YX

Telephone 00 44 191 225 4811

9. Once you have the E106, you must take it to the local German insurance organisation (e.g. AOK) who will then issue you with a card for you to use to access the German health system. It normally takes between seven to fourteen days before the card is available. It is important to remember that all

members of the family need their own individual card to get free health care. Your employer will give you directions to the nearest AOK office or information can be given by the RO2 Clinical Administration at HQ BFG HS.

NAAFI or SSVK Employees.

10. As a NAAFI (not NSS) or SSVK employee, you are only entitled to primary medical care from the Medical Centre and in addition BFG HS funds your Out Patient appointments.
11. Note that if you work for NAAFI or SSVK as a dependant of a serving member of the Armed Forces or a MOD UKBC serving in Germany, you are entitled to the same care as described in the relevant section above.
12. However, if you need Accident or Emergency care or in-patient treatment, your care will be paid for by the UK Government under the E106 system. If you present your E106/AOK card to the hospital, you should not receive bills for treatment.

NAAFI Support Services (NSS) employees or employees of other Contractors

13. As an employee of NAAFI Support Services or another similar contractor, your care (and that of your dependants) will be paid for by the UK Government through the E106 system and not by the BFG HS.
14. There is a small contribution for hospital care (currently 10 Euro per day for up to 28 days). Please also note that E106/AOK card is not accepted at the Medical/Dental Centre.
15. Some personnel (e.g. medical locums) will arrive with an E128, which is issued to those working temporarily in another EU country for an UK employer. These personnel should take the E128 to the AOK office in the same way as those with an E106.

Relatives and Friends

16. Close relatives of Serving Personnel, UKBCs and authorised civilians who come to visit you in Germany and are in possession of Annex C or Annex D to SI BA(G) 3217 issued by G1 Comp or Garrison Staff (signed Authority for Visit of a Close Relative) are entitled to be seen at BFG HS Medical Centres. Visitors will be assessed, triaged and treated by a GP to include a prescription if necessary. Medical Centre staffs can call an ambulance and have you transferred to a German facility, however, any cost for the ambulance and for subsequent treatment will fall to you.
17. If friends come to visit you in Germany, they are not entitled to health care from the BFG HS and should carry an EHC and take out holiday insurance as if they were travelling anywhere outside the UK. These categories will be signposted to local German providers unless urgent treatment is indicated at the Medical Centre. If urgent treatment is indicated an ambulance may be called. Ambulance costs and any costs for services not provided at the medical centre will fall to the patient.
18. Relatives and Friends should come with all the routine medication required for their visit. The medical centre hold only a limited list of the medications that are available in the UK. If the medical centre do not hold the particular medication relatives and friends require they may be directed to a local German doctor to obtain the medication at their own cost.

ANNEX B

Non Approved Clinical Referrals



Not every medical and surgical procedure is available under the NHS because some are regarded as non essential. Similarly BFG HS has a list of procedures/conditions, based on NHS standards, which are not funded by UKSC(G). These procedures are set out below. The left hand column indicates the procedure, whilst the right hand column indicates the conditions under which exceptions at BFG HS expense will be considered.

Procedure/Condition	Exceptions
Sterilisation reversal	None
Gender re-assignment	Severe psychological distress
In-vitro fertilisation (IVF) and gamete intra-fallopian transfer	None - Note: A charitable organisation will provide up to 3 cycles of IVF or ICSI to couples based in BFG if they meet certain criteria. This is provided through the Hammersmith Hospital in London. Your GP has further information.
Reversal of vasectomy	None
Tattoo removal	Consultant discretion
Circumcision on religious grounds	None
Liposuction/lipectomy	Lipodystrophies and gynaecomastia
Dermabrasion/laser resurfacing	Disfiguring acne – consultant discretion
Skin lesions	If malignancy is suspected
Electrolysis of facial hair	Normally no exceptions
Laser treatment for skin blemishes	Psychological distress
Gastroplasty	None
Abdominoplasty	None
Buttock and thigh surgery	Normally no exceptions
Breast augmentation	Major congenital breast asymmetry
Breast reduction	As above
Nipple surgery (Corrective)	Permanently inverted nipples
Aesthetic facial surgery	Post trauma, congenital abnormality
Correction of Prominent Ears	Only in those children under 16 years who are concerned
Varicose veins injection, sclerotherapy or surgery	Only if complications present
Eyelid surgery	Visual impairment

Procedure/Condition	Exceptions
Photo-refractive keratectomy (PRK)	Unless for service reasons via DCA ophthalmology
Rhinoplasty	Significant or post trauma deformity
Metallic intraspinal implants (for pain control)	None
Osteopathy	None
Chiropractic	None
Acupuncture	Unless as part of inpatient or outpatient care specified by a DGP
Homeopathy	None

NOTES

1. Although certain procedures/conditions are shown as not being provided at all, individuals can apply to the Director BFG HS for an exception to be made. The Director BFG HS would take specialist clinical advice as well as considering the implications of making an exception before agreeing to a procedure normally excluded.
2. Some of the procedures/conditions not provided by BFG HS are provided by some, but not all, NHS Authorities. Depending on the individual's place of residence in the UK, it may be possible to be referred to the UK for an excepted condition.
3. Some drug treatments and some other treatments provided by the German Health Service are not available to the NHS in England and are not normally provided by BFG HS.
4. These exceptions are kept under review and BFG HS in general follows those recommendations of the UK's National Institute of Clinical Excellence (NICE) which are accepted by the UK Government.

USEFUL INFORMATION

Emergency Services

- German Civil emergency Services:-

POLICE	110
FIRE/RESCUE/AMBULANCE	112
DIRECTORY ENQUIRIES/OPERATOR ASSISTANCE	11834



EDDS
Defence Dental Services

**ENTITLEMENT TO DENTAL TREATMENT
AND PATIENT CHARGES**

Dental Charges

1. MOD Dental Charges were introduced on 01 Jun 96 for dental treatment provided by the MOD for entitled civilians and dependants in overseas locations. The charges are based on those raised in the General Dental Service of the NHS.

Fee Scales

2. The DDS patient charge bands are based on those used by the NHS. The MOD Dental Charges Guide which defines the current banding system employed to allocate charges for dental treatment is at Annex A. Current Banding System costs will be displayed in all Dental Centres throughout Germany.

Entitlement to Dental Treatment:

3. A matrix outlining entitlement to dental treatment is at Annex B. It is the individual patient's responsibility to prove entitlement to dental treatment. **No proof of entitlement, no treatment.**

Exemption from Dental Charges:

4. A matrix outlining those patients who are exempt from dental charges is at Annex C. The documentation required to prove exemption status is detailed in column 4 of Annex C.
5. Further information regarding exemption can be found in the NHS Website (<http://www.nhsdirect.nhs.uk/>).

Raising Dental Charges:

6. Charges will be raised for all items of dental treatment provided for non-exempt patients using the Banded Charges System.
7. Orthodontic Treatment. The majority of patients undergoing orthodontic treatment in DDS clinics are exempt from charges and orthodontic procedures are not included in the MOD Dental Fees Guide. When patients under the age of 18 are required to pay full costs for dental treatment, orthodontists will establish an appropriate fee using the current statement of dental remuneration. If orthodontic treatment is proposed for adult patients over the age of 18 a Band 3 charge will be levied.
8. Sports Mouthguards. Are available as an item of treatment in DDS dental centres and free for those personnel normally exempt from Dental Charges.
9. Did Not Attend (DNA) and Short Notice Cancellation (SNC). Whilst there are no standard NHS Fees raised against patients who DNA or SNC dental appointments, civilian dental practitioners providing treatment under NHS regulations are free to levy a charge to compensate for lost clinical time. The MOD therefore also reserves the right to raise charges against entitled civilians and dependants who persistently DNA or SNC, as defined in DDS policy.
10. Any patient who DNAs or SNC (or a combination of both) 3 appointments over the course of a single treatment plan, without extenuating circumstances acceptable to the Senior Dental Officer, will have that treatment plan closed.

Incomplete Treatment:

11. When treatment cannot be completed because of a patient's unexpected posting or changing circumstances, the Dental Officer will declare the case closed and raise the appropriate paperwork for recovery of dental charges for treatment completed to date.

Payment of Charges:

12. On completion of treatment the Dental Centre will raise and issue you with a bill, a second copy will be forwarded to the pay office which is where you will be required to pay for your treatment.

Annex A

MOD DENTAL CHARGES GUIDE



Band 1 Charges – Diagnosis, treatment planning and maintenance

1.	Clinical Examination and Report, advice diagnosis and treatment planning
2.	Radiographic Examination
3.	Scaling and Polishing
4.	Preventative advice including Oral Hygiene Instruction and Dietary Advice
5.	Fissure Sealant and Topical Fluoride Application
6.	Treatment of Sensitive Cementum
7.	Orthodontic Case Study
8.	Study Casts including Occlusal Analysis
9.	Taking material for Pathological Examination
10.	Adjustment to and easing Dentures and Orthodontic Appliances
11.	Clinical Photographs

Band 2 Charges – Treatment

12.	Permanent Restorations (Amalgam, Composite Resin, Glass Ionomer, Synthetic Resin) including sealant restorations
13.	Non-Surgical Periodontal Treatment
14.	Surgical Periodontal Treatment
15.	Mouthguards
16.	Pulpotomy
17.	Endodontic Treatment of Permanent or Retained Deciduous Teeth
18.	Extraction of Teeth
19.	Minor Oral Surgery and Surgical Extractions
20.	Denture Relines
21.	Denture Additions

22.	Splinting of periodontally compromised or traumatized teeth
23.	Bite Raising Appliances (Excluding Laboratory Fabricated Appliances)
24.	Transplantation of Teeth

Band 3 Charges – Provision of Appliances

25.	Veneers and Inlays
26.	Crowns including any Pin or Post Aid Retention
27.	Bridges including any Pin or Post Aid Retention
28.	Provision of Dentures (Acrylic or Cobalt Chrome)
29.	Vital Bleaching
30.	Orthodontic Treatment

EMERGENCY TREATMENT

Urgent Treatment under Band 1 Charge

1. Em	Temporary Dressing
2. Em	Pulpectomy, vital pulpotomy or gaining access to a non-vital root canal system to control acute symptoms
3. Em	Incising an Abscess
4. Em	Treatment for Acute Conditions of the Gingivae including Pericoronitis, Oral Ulceration and Herpetic Lesions
5. Em	Repairing and/or re-cementing Crowns, Bridges or Inlays
6. Em	Providing a temporary Crown or Bridge
7. Em	Extraction of not more than 2 teeth
8. Em	Provision of Post-Operative Care including Treatment of Infected Sockets
9. Em	Adjustment of Dentures
10. Em	Re-implantation of a Luxated or Subluxated Tooth following Trauma
11. Em	Other treatment immediately necessary as a result of Trauma
12. Em	Not more than 1 Permanent Filling

Annex B

ENTITLEMENT FOR DENTAL TREATMENT



Serial	Category of Patient	Dental Treatment	Dentures, Bridges etc	Emergency Service
(a)	(b)	(c)	(d)	(e)
1	Serving personnel of RN, Army and RAF who are stationed on duty outside United Kingdom	Free	Free	Free
2	UK Based Civilian (UKBC) MOD Employees, Retired Officers, BFLO(G), BSSO, SCE, SSAFA FH, WRVS, BRC/DMWS/OSJ/OSA, CVWW: YWCA, Catholic Women's League, Forces Help Society, Lord Robert's Workshops, SASRA.	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
3	Families of serials 1 & 2 with dependant status or temporary dependant status	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
4	UK domiciled relatives of serials 1 & 2 who are not officially authorised to visit.	Not Entitled	Not Entitled	Entitled NHS Banding Applied
5	Sponsored Organisations: UK Based NAAFI, SSVc	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
6	Families of serial 5 (less NAAFI Support Staff (NSS) and Families)	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
7	US Service Personnel who are assigned to British Military Service Units for duty or training. Service personnel of the FRG Armed Forces	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
8	Commonwealth Allied and Foreign personnel on MOD official attachment to British Forces.	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
9	Allied personnel with the HQ ARRC.	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
10	Consulate Staff. (unless MOD UKBC or UK Service personnel)	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied
11	Entitled Contractor's representatives and their families specifically authorised by Civil Secretariat.	NHS Banding Applied	NHS Banding Applied	NHS Banding Applied

Annex C

EXEMPTION FROM DENTAL CHARGES

Serial	The following individuals are exempt from paying MOD dental charges:	The proof you need to have:	Where and how to get proof:
(a)	(b)	(c)	(d)
1	Patients who are under 18 at the start of treatment.	Any official document showing your name and date of birth, such as a birth certificate or passport.	
2	Patients who are under 19 and in full time education at the start of treatment.	Any official document showing your name and date of birth, such as a birth certificate or passport, and proof that you are a full-time student.	Your school, college, university or local education authority can give you proof that you are in qualifying full-time education.
3	Women who are expecting a baby and were pregnant at the start of treatment or women who have had a baby within 12 months prior to the start of treatment.	MatB1 certificate or NHS prescription maternity exemption certificate or card (Matex) or notification of birth form, birth certificate or stillbirth certificate.	MatB1 certificates are issued by your Medical Centre, GP or registered midwife. You can use your prescription maternity exemption certificate or card (Matex) as proof. To get one ask your GP, midwife or health visitor for an FW8 application form. The form tells you what to do. The midwife who delivers your baby will give you a notification of birth form. Birth certificates and stillbirth certificates are issued by your local registrar of births, marriages and deaths.
4	Patients receiving (or patients who are the partner of someone receiving) Income Support, Income-based Jobseeker's Allowance or Pension Credit Guarantee Credit at the start of treatment or when the charge is made. (Incapacity Benefit or Disability Living Allowance do not count as they are not income-related.).	Your Income Support order book, or an entitlement letter from your Jobcentre Plus office. Your award notice from the Pension Centre.	You have to claim the benefit at your Jobcentre Plus office. (Incapacity Benefit or Disability Living Allowance do not count as they are not income-related.) If payments are made into your bank or building society, you can obtain proof in the form of an entitlement letter from your Jobcentre Plus office. If you have lost or mislaid your Pension Centre award notice, contact the Pension Centre phone line.



Serial	The following individuals are exempt from paying MOD dental charges:	The proof you need to have:	Where and how to get proof:
(a)	(b)	(c)	(d)
5	Those entitled to or named on a valid NHS tax credit exemption certificate at the start of treatment or when the charge is made.	A valid NHS tax credit exemption certificate, or you can use your tax credit award notice.	If you are eligible for free treatment, your exemption certificate will be sent to you. If you haven't yet received your certificate, use your award notice.
6	Those named on a valid HC2 certificate at the start of treatment or when the charge is made.	An NHS certificate HC2 for full help with health costs.	Make a claim using form HC1, obtainable from your Jobcentre Plus office.

If you have any comments about this Booklet please direct them to:
RO2 Clinical Administrator
HQ BFG Health Service Wegberg
BFPO 40
Telephone: 02161 908 2234 (or Wegberg Mil Ext 2234)

