

Report to: East Sussex Health and Wellbeing Board

Date: 12 April 2016

By: Director of Sussex Collaborative, Lead Sussex Armed Forces Network

Title: East Sussex Armed Forces Community

Purpose: To aid the Board's understanding, identify gaps, provide assurance on progress to meet the needs of the armed forces community.

RECOMMENDATIONS: The Board is recommended to:

- 1) Note the progress made to date by Sussex Armed Forces Network and services and partners within Health and Social Care;
 - 2) Support and encourage the continuation of the work of the system working together to deliver the needs for this community;
 - 3) Note the work undertaken by the East Sussex Safer Communities Team to review data held on veterans and agree this is used, where possible, to implement these recommendations;
 - 4) Continue joint working across Sussex through the Sussex Armed Forces Network to provide leadership, champion the needs of this community and raise its profile; and
 - 5) To agree that consideration is given by all agencies, through the East Sussex Safer Communities partnership to improve data collection.
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1 Background

1.1 The East Sussex Community Covenant was signed by the East Sussex Strategic Partnership and Ministry of Defence (MoD) in May 2013. The East Sussex Strategic Partnership (ESSP) brings together different parts of the local community – there are 22 member organisations, representing public services, local businesses, community groups and voluntary sector organisations. The ESSP was set up in 2000 to help organisations work together in a co-ordinated way to plan local services, tackle the issues that matter to local people and improve quality of life in East Sussex. The ESSP works under the principles of the Armed Forces Community Covenant. However, unlike in other areas with armed forces barracks or training bases, there is not a separate Civilian Military Partnership Board (CMPB) for the county. The needs of cadets, reservists and veterans in the community for council services (at county and district / borough level) are considered through assessments and any issues arising specifically from a person's military status are picked up and considered and addressed through the assessment process. Further information about the work done under the Covenant is at para 2.7 below. In relation to improvements in health services provision to current or veteran armed forces personnel, the Sussex Armed Forces Network, which is administered and led by the NHS, working across East and West Sussex and Brighton & Hove. This is a report from that network.

1.2 There is an obligation to meet the requirements of the Armed Forces Covenant reinforced by the NHS Constitution, Social Care Acts and other national contracts for both social care and the NHS to look after this vulnerable community.

1.3 Identifying the needs for the Armed Forces Community has taken place using the Sussex-wide Need Assessment from 2012 and local data held by the network. East Sussex has not undertaken a more recent localised Joint Strategic Needs Assessment (JSNA) but a review capturing the information and intelligence held by the multiagency Safer East Sussex Team was

undertaken by Safer East Sussex Team. Further insights about the needs in East Sussex have been obtained via feedback from veterans, reservists, their families and from the wider armed forces community.

1.4 The aim is to enable the community as a whole to be better facilitated to provide excellent support to the Armed Forces Community across Sussex. Those who serve in the Armed Forces whether Regular or Reserve, those who have served in the past and their families, should face no disadvantage and receive the integrated care and support they require tailored to their particular needs in accordance with the Armed Forces Covenant.

1.5 The Sussex Armed Forces Network (SAFN) was established in 2011 by NHS Sussex. The SAFN is managed and supported by the 7 Clinical Commissioning Groups (CCGs) through the Sussex Strategic Clinical Commissioning Executive Committee. Unlike other County Councils there is no CMPB in East Sussex. Work is addressed within the current structures, so to date East Sussex County Council has not identified a need for a Civilian Military Partnership Board.

1.6 The Network works with CMPBs across Sussex where they have been established and ensure the different groups complement each other and are most efficient and effective in delivery to meet the needs of this community.

1.7 The Sussex Armed Forces Network has representation from Ministry of Defence (MoD); Armed Forces organisations, Armed Forces charities, NHS (physical and mental health); community and voluntary sector, local further education establishments and local authority representatives from Housing, HR and Adult Social Care, Criminal Justice System, and the Police.

1.8 Reports are regularly provided by these groups and there are work programmes with aims to deliver the needs identified by the JSNA.

1.9 The key areas of work being developed and delivered are:

- pathways which cross organisational boundaries and are built on networks and understanding of others to provide integrated care;
- awareness raising;
- training and education;
- data and infrastructures of support.

2 Supporting information

2.1 This briefing is presented to the Health and Wellbeing Board to aid understanding to meet the needs of the armed forces community and to agree the following recommendations:

- To note the progress made to date within the Sussex Armed Forces Network and services and partners within Health and Social Care.
- Provide leadership and support, improving the links across the system to deliver the needs for this community.
- To improve data collection which could be delivered through equality and diversity routes.

Needs Assessment of the Armed Forces Community

2.2 A Joint Needs Assessment was undertaken in 2012 covering Sussex Armed Forces Community across Sussex. Though considerable work has occurred in Sussex the themes still remain with key areas to be addressed.

2.3 Where possible, East Sussex needs to implement recommendations from the Sussex 2012 needs assessment. This included the following recommendations:

- 1 Data Collection- Improve data Collection to aid establish of need in the community, referral and treatment in line with Covenant
- 2 Support for reservists – Local public sector organisation as employers should have policies should support reservist and post-mobilisation reactions in veterans

- 3 Physical Health – Consider prosthetics and rehabilitation services, alcohol consumption and access to IVF (This has progressed to MSK, loss of sight and Hearing Loss)
- 4 Mental Health – Meet specific needs such as alcohol misuse and PTSD and the needs of reservists. (This is now classed for all mental health disorders)
- 5 Support for ex-service personnel in prison – Better identification, extension of veterans in custody schemes, in-reach service and divert offenders schemes.
- 6 Department for Communities and Local Government Guidance – Housing to ensure guidance into allocation schemes and policies re in place and implemented.
- 7 At risk leavers are identified with appropriate signposting in place to specialist support
- 8 Confirmation that national guidance has been implemented.

2.4 A review was undertaken by ESCC in by the Safer East Sussex Team which provides a local profile for Sussex.

Armed Forces Community

2.5 Service in the Armed Forces is different from other occupations. Apart from the obvious uncertainties and dangers, Service people relinquish some of their own civil liberties and put themselves in harm's way to protect others.

2.6 The risk of death (occupational attributable mortality) for the Army overall is currently around 1 in 1000 per year, or about 150 times greater than for the general working population. Risk of serious injury (for example loss of limbs, eyes or other body parts) is substantially increased.

2.7 The East Sussex Community Covenant was signed by the East Sussex Strategic Partnership (ESSP) and MoD in May 2013 and since then work has focused on :

- publicising the Grant Fund <http://www.essp.org.uk/What-we-do/East-Sussex-Community-Covenant/community-covenant-grant-fund> (on the ESSP website, in Funding News and Health & Wellbeing News) and
- Supporting people with applications, such as the “Home Fires Newhaven and Seaford WW1 project (also known as Using arts and culture as a vehicle for raising awareness and improving community cohesion in Newhaven and Seaford.)

2.8 Veterans include anyone who has served for at least one day in the Armed Forces (Regular or Reserve), as well as Merchant Navy seafarers and fishermen who have served in a vessel that was operated to facilitate military operations by the Armed Forces.

2.9 The Sussex Military Veterans Needs Assessment was conducted in 2012. It noted that identifying the number of veterans, at national or local level, is difficult. Applying the national estimates suggests that there are around 46,555 military veterans within the county of East Sussex (not including Brighton & Hove). Of these veterans, the vast majority are men (estimated at 87%) and 66% are aged 65 years or over.

2.10 Discharge numbers from the MoD show there were 77 out of 272 veterans registered as resettling in East Sussex in 2010/11

2.11 As of March 2014 there were 1905 veterans in East Sussex receiving a pension under the Armed Forces Pension Scheme and 945 veterans receiving compensation for injuries sustained during service, but this doesn't include all disabled or injured veterans.

2.12 Of the SSAFA (Sussex branch) total workload of 490 cases in 2014, 326 (67%) came from East Sussex. This is an increase from 365 out of 595 (61%) for 2013.

2.13 In addition, in the last financial year the Royal British Legion in Sussex has also provided welfare support across a range of needs; however, the major areas of concern were mobility, housing and debt & bankruptcy. This is a trend that has continued into this financial year and continues to be the main focus of welfare support.

2.14 This does not take into account a veteran's family who are also covered by the covenant

2.15 There are Reservists within East Sussex and this is 4 Platoon, B Company, 3rd Battalion, The Prince of Wales's Royal Regiment which is based in Eastbourne.

2.16 Detailed information about the Armed Forces Community for Sussex and East Sussex can be found on the SAFN website in the community information document (**see appendix 1**).

Delivery

Awareness Raising

2.17 The pathway project is now completed and the pathways information is available in hard copies and via the SAFN (partners have also distributed this to their networks including SERFCA, Dept of Work and Pensions, B&H and West Sussex council teams in Adult Social Care, Referral Teams and Access Point and to all staff via the council's Intranet) website. The Armed Forces Champions and Charities are using the pathways and sharing them within their organisations. The Brighton and Hove Carers Centre has produced a leaflet and has trained its staff, linking with other charities to train them in services/support available for carers across Sussex. The original project has been extended, with additional funding from SAFN, to design a carer awareness, families and young people training package. 13 eLearning modules are now complete and live via the SAFN website.

2.18 Care for the Carers in East Sussex has adopted and localised the leaflets and information. They are now part of the network and have trained champions.

2.19 The Carers Centre has advised that out of the adult carers supported in the period 14/15 for Brighton & Hove, the armed forces carers would be 5.6% of clients. East Sussex Care for the Carers has started to collect data.

2.20 The next step: To develop the young carers support, elearning modules and work with a national charity on family needs.

2.21 www.sussexarmedforcesnetwork.nhs.uk is being used by all sectors of the SAFN and CMPBs by providing a source of information, training and education, press releases, and sign posting. It is regularly being updated. Professionals, veterans and families have also started to use it as way to access the Network to get advice and support.

2.22 **Next Step: T**o continue to develop further elearning modules and update existing modules as further advances are made both locally and nationally.

2.23 The Department of Work & Pensions (DWP) (members of the some of the CMPB) are also leading on best practice by having information on their Intranet for colleagues to find out about volunteering as reservists and providing armed forces community factsheets for staff across all Job Centre sites.

Integrated Support and MDT Working

Armed Forces Champion Network

2.24 An integral part of the vision was to set up a network of champions who would not only be able to support and advise the armed forces community first hand but also work together to help individuals across boundaries. There are now over 140 champions in Sussex who come from a range of backgrounds. Although it originally started with mainly mental health organisations, membership is now much wider with attendance from County Councillors, the Probation Service, Police, Fire Service, MSK services, mental health, Substance Misuse, Charities and other statutory organisations. The network formed from these champions is helping to break down barriers and make vital connections throughout the community.

2.25 There are two Champion Coordinators, both of whom have experience in mental health. One is a veteran and a reservist himself, supporting the network to enable the initial two day training programme, the on-going learning, focused mental health events and other specific sector training that might be required. The experience, passion and knowledge they offer to the champions and the network is invaluable, helping to ensure the model in Sussex is sustainable and embedded for the future.

2.26 The team have also produced several products to aid local clinicians including Provider and GP fact sheets and a specific needs assessment.

2.27 This work has won national awards and is being used as a Best Practice Case Study in the National Annual Armed Forces Covenant Report 2015.

2.28 Louisa Havers, Head of Safer Communities, East Sussex County Council attended the Armed Forces Champion training on the 16th -17th March 2016.

2.29 **Next Step:** Interest is significantly increasing with providers with middle management levels taking an interest. The courses are now being run twice a year. Case Studies are being collated and started to be shared to learn lessons and share impact and value of the network. Links have been made to the NHS Employers and their Reservist Champions roles which were launched on 7th October 2015.

Housing/Homelessness.

2.30 Access to housing and vulnerability around homelessness are key issues faced by ex-service men and women. Migration to the south coast was popular with younger ex armed forces personnel. The Royal British Legion were seeing an increase in younger veterans in the Bexhill and Hastings areas and less in Brighton because of the costs of living.

2.31 The council's present allocations policy has specific mention that serving armed forces are exempt from the local connection criteria.

2.32 In other areas of Sussex Adult Social Care, First Base Homeless Day Centre, Rough Sleepers, Supported Accommodation and related services for single homeless people and Substance Misuse Services have been monitoring the armed forces community as vulnerable in the stats.

2.33 **Next Step:** Under statutory direction from central government, consideration should be given to serving personnel and ex personnel within the last five years to be given Band A priority for those that qualify, and this will be looked at formally in the council's review of the allocations policy, East Sussex needs to possibly consider this group as vulnerable and put in steps to ensure that they are supported.

Data Collection

2.34 It is essential that the identification of this community occurs to enable/take account of the cultural, additional and possible complex needs to be addressed to support the individual and/or family.

2.35 East Sussex County Council on their Equality Form does not currently ask the following question about Armed Forces Service. This could be a way of collecting and understanding the demand from this hard to reach community:

- Are you currently serving in the UK Armed Forces (this includes reservists or part-time service, e.g.: Territorial Army)?
- Have you ever served in the UK Armed Forces?
- Are you a member of a current or former serviceman or woman's immediate family/household?

2.36 Some services do their own analysis and use the information to improve their provision. The annual Adult Social Care survey that was undertaken in 2014/15 asked all 419 respondents to the survey if they have served in the armed forces.

2.37 The results below show that 68 (16%) had and that these individuals were largely aged 75+ with 57% falling in the higher age bracket of 85+.

Age	n	%
45-54	1	1%
55-64	5	7%
65-74	5	7%

75-84	18	26%
85+	39	57%

2.38 It is in the NHS Contract that this group is not disadvantaged and to enable this, providers have to ask the above questions. The Mental Health and IAPT services (approx. 600 cases have been treated in Sussex) are asking the question. Other organisations in Sussex have also been sent information about their responsibilities under the NHS Constitution and contracts and reminded to review access policies; this will be reviewed via the statutory performance meetings.

2.39 The availability of information and quality of data is increasing as services improve their submissions to the national dataset.

2.40 **Next Step:** To monitor all data that is available to enable an understanding of demand and where the community is being supported. As part of the GP training and Practice Awareness Programme the need to collect data is being raised. It is in the GP contracts and the READ codes are now available on all GP IT systems.

Focus for next 6 Months

2.41 **GPs**, Practice Managers and primary care raising awareness work has already started. This work needs to spread Sussex-wide. The information and support has been developed and the SAFN will be working with Communication Teams, Charities, and GPs to significantly raise the understanding within the primary care community of the needs, support available and what they should do for the armed forces community.

2.42 Currently, the Sussex Armed Forces Network is undertaking a research project which started in Brighton and Hove to find out about the **voluntary sectors** understanding of the Armed Forces Community and its needs. The information has been collated and written up into a report to enable an understanding of the level of awareness of the Armed Forces Community within the voluntary sector. This work is now being undertaken in East and West Sussex. The aim is to then target raising awareness and to improve the care for this community. The work is going through the Community and Voluntary Sector Forums.

2.43 Mapping of champions, services and integration with mental health is occurring in **Criminal Justice pathways**. Probation services and other services have been involved with the network. It was thought as a priority to take a stocktake particularly with recent changes in structure and providers.

3 Important considerations and implications

3.1 The Sussex Armed Forces Network has both statutory and community and voluntary sectors partners who disseminate information to their organisations.

3.2 There is currently a Voluntary Sector Survey taking place to understand what the current gaps are in the understanding of the armed forces community and what their needs are.

3.3 Legal - There are no legal implications arising from this report. The Civil Military Partnership Board would be an advisory body, reporting annually to Policy & Resources Committee and Full Council.

3.4 There are however requirements for Social and NHS Services to meet:

Statutory Requirements

- Armed Forces Act 2011: Annual duty to report to progress against the Military Covenant to Parliament including Health.
- Health & Social Care Bill 2011: Includes duty of the NHS Commissioning Board (now NHS England) to commission services on behalf of the Armed Forces.
- NHS Mental Health Strategy 2011 includes specific provision for veterans.
- NHS Operating Framework.

- Health and Social Care Act 2012.
- NHS Contracts to contain the principle of “no disadvantage”.
- NHS Constitution to include the “covenant”.

NHS responsibilities

3.5 The general principle set out by government is simply for ‘no disadvantage’ to veterans and their families due to their military service, compared with society generally.”

NHS England responsibilities:

- NHS England is responsible for ensuring that services are commissioned to support consistently high standards of quality across the country, promote the NHS Constitution, deliver the requirements of the Secretary of State’s Mandate with NHS England and are in line with the commitments made by the Government under the Armed Forces Covenant.
- Commissioning all secondary and community health services for members of the Armed Forces, mobilised Reservists and their families if registered with DMS Medical Centres in England (although community health services currently remain commissioned by CCGs on a risk share agreement);
- Some mental health services for veterans
- Specialised services, including specialist limb prosthesis and rehabilitation services for veterans
- IVF treatment for serving Armed Forces couples – even if only one of them is serving.

CCG Requirements

- Delivery of the Armed Forces Covenant
- Armed Forces dependents and veterans are the responsibility of the NHS in the same way as normal residents and their families (serving families not covered by Defence Medical Centres)
- Continuation of the principle of ‘no disadvantage’
- The continuation and development of the Armed Forces Networks
- Transfer of commissioning of ‘Mental Health for veterans’ into CCG leadership
- NHS Contracts now contain the principle of ‘no disadvantage’
- NHS Constitution has a new principle 4 which includes the covenant.

Finance

3.6 Sussex through the Brighton & Hove Armed Forces Community Covenant have successfully bid for funding which has supported the carers programme, pathway work and some of champions training. See progress Update from the Civil Partnership Board to the Leaders Group of Brighton and Hove.

3.7 The resources to support the Covenant and associated activities to date have been met from within current budgets. Additional activities will be funded as planned through 2015/16 budgets and external funding through the grant scheme.

3.8 The 7 CCGs provide the leadership for the Sussex Armed Forces Network through the Director of the Sussex Collaborative. There is additional funding currently available from NHS England for Sussex (£50k for 2015/16 and a further £25k for 2016/17) which is used by the Sussex Armed Forces Network to pay for mental health clinical leadership and governance, administration, training, awareness raising and champion co-ordinators.

3.9 A Veterans Mental Health Stakeholder Engagement exercise is being undertaken by NHS England in January 2016 to aid the decision on the future service models for veterans’ mental health services.

Equalities

Risk	Description	Action to avoid or mitigate risk
There is a risk that the Armed Forces Community does not receive the understanding and care they deserve.	Veterans, reservists and families could enter the health and social services a number of ways, the services are not all skilled to treat the actual needs of the individuals.	Raising awareness, commissioning services and providing the skills would enable this group to be cared for.

3.10 ESCC Equality of Opportunity and Diversity Policy Statement sets out the County Council's commitment to equality of opportunity and diversity, as well as explaining the key principals, drivers and duties that inform this responsibility. Impact Assessments are completed as part of any new, or review of, a Council strategy, policy or service

3.11 The Armed Forces Community are a hidden group within the community. The culture is that they do not usually seek help or raise the fact that they have served and many do not see themselves as a veteran and/or a carer.

Sustainability

3.12 'The Environment Strategy for East Sussex' has an associated equality impact assessment to ensure the measures set out in the Strategy are assessed in terms of equalities, in order to promote equality and ensure that the Strategy does not discriminate against any group.

3.13 The models and work being undertaken in Sussex Armed Forces Network is sustainable and reinforces the system working as an integrated care model linking with social care public health, health, voluntary sector, MOD and other services together.

3.14 There is a vision that resources are saved by utilising and integrating services to achieve better outcomes for the individuals. This results in the Armed Forces Community and services having every opportunity to contribute to healthy lives, communities and environments using limited resources and by using current services rather than investing in additional services which may not be sustainable.

Health, social care, children's services and public health

3.15 Actions to address issues will continue to be considered as work progresses. Key areas have been prioritised and this includes homelessness, social, carers, mental and physical health and family needs.

- All services need to ask the question of clients or patients,
- All services/organisation should have a champion,
- All services need to address the needs of this community.

3.16 Assessments for Adult Social Care and Housing Services are personalised, so any issues regarding needs arising specifically from a person's veteran or current military status would be picked up and appropriately considered and addressed, in line with the Armed Forces Covenant.

Crime & Disorder Implications:

3.17 Actions to address crime and disorder issues will be considered as the East Sussex Armed Forces Covenant is developed.

Risk and Opportunity Management Implications:

3.18 There is a risk that East Sussex County council does not prioritise the needs of this community and therefore they will not meet the vision and criteria for the East Sussex Armed Forces Covenant.

3.19 With minimal increased leadership the needs of the community could be better understood and improved significantly through early identification and integrated coordinated care.

Corporate / Citywide Implications:

3.20 The Armed Forces Covenant supports a number of council priorities within the Corporate Plan 2015-19 including Increasing Equality, Health and Wellbeing and Citizen Focused and therefore could make a positive impact.

4 Conclusion and reasons for recommendations

4.1 Needs have been identified for the armed forces community and significant work is occurring through the Network supported by the CCGs and the local providers resulting in improved care for the individuals.

4.2 In East Sussex there is work occurring to support this hard to reach group who often require individualised integrated complex care to meet their needs. When this community does need help the requirements are often multifaceted and need to occur at the same time to break the cycles.

4.3 The needs for this group can be illustrated through the work being undertaken and data provided by the military charities and the mental health services. There are significant numbers for East Sussex seeking help from Armed Forces Charities particularly for social/financial reasons where the Hasting armed forces community particularly has a high demand for support.

4.4 There is further work which needs to occur to develop further the integration of this community and then the sharing of learning from this multidisciplinary way of working across other communities.

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BACKGROUND DOCUMENTS

None