

Shropshire Council
Legal and Democratic Services
Shirehall
Abbey Foregate
Shrewsbury
SY2 6ND

Date: 24 February 2021

**Committee:
Health and Wellbeing Board**

Date: Thursday, 4 March 2021
Time: 9.30 am
Venue: THIS IS A VIRTUAL MEETING - PLEASE USE THE LINK ON THE AGENDA TO LISTEN TO THE MEETING

Members of the public will be able to listen to this meeting by clicking on this link:

www.shropshire.gov.uk/HWBB4March2021

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You are requested to attend the above meeting.

The Agenda is attached

Claire Porter
Director of Legal and Democratic Services (Monitoring Officer)

Members of Health and Wellbeing Board

VOTING

Shropshire Council Members

Lee Chapman – PFH Organisational Transformation and Digital Infrastructure (Co-Chair)

Dean Carroll – PFH ASC, Housing & Climate Change

Ed Potter – PFH Children’s Services

Rachel Robinson - Director of Public Health

Andy Begley – Executive Director Adult Services, Public Health & Housing & Chief Executive

Karen Bradshaw - Director of Children’s Services

Shropshire CCG

Mr David Evans – Accountable Officer

Dr Julian Povey – Clinical Chair (Co-Chair)

Dr Julie Davies – Director of Performance & Delivery

Lynn Cawley – Shropshire Healthwatch
Jackie Jeffrey – VCSA

NON-VOTING (Co-opted)

Megan Nurse – Non-Executive Director Midlands Partnership NHS Foundation Trust

Louise Barnett, Chief Executive, Shrewsbury & Telford Hospital Trust

David Stout – CE, Shropshire Community Health Trust

Nicky Jacques – Chief Officer, Shropshire Partners in Care

Mark Brandreth – CEO

Sarah Bloomfield – Interim Director of Nursing/Deputy CEO,
Robert Jones & Agnes Hunt Orthopedic Hospital NHS Foundation Trust

Jill Robinson – Interim STP Programme Director

Laura Fisher – Housing Services Manager

Your Committee Officer is Michelle Dulson Committee Officer

Tel: 01743 257719 Email: michelle.dulson@shropshire.gov.uk

AGENDA

1 Apologies for Absence and Substitutions

2 Disclosable Pecuniary Interests

Members are reminded that they must not participate in the discussion or voting on any matter in which they have a Disclosable Pecuniary Interest and should leave the room prior to the commencement of the debate.

3 Minutes of the last meetings (Pages 1 - 10)

To confirm as a correct record the minutes of the meetings held on 12 November 2020 (attached) and 14 January 2021 (to follow).

Contact: Michelle Dulson Tel 01743 257719

4 Public Question Time

To receive any questions, statements or petitions from the public, notice of which has been given in accordance with Procedure Rule 14. The deadline for this meeting is 9.30am on Tuesday 4 March 2021.

5 System update

Regular update reports to the Health and Wellbeing Board are attached:

STP Update

Report to follow.

Contact: Nicky O'Connor, Shropshire STP

Better Care Fund

Report to follow.

Contact: Penny Bason, STP Programme Manager/ COVID Community Response Lead

Tanya Miles, Director of Adult Services, Housing & Public Health, Shropshire Council

6 Joint Strategic Needs Assessment

Report to follow.

Contact: Rachel Robinson, Director of Public Health, Shropshire Council

7 Armed Forces Legislation (Pages 11 - 240)

Report attached.

Contact: Sean McCarthy, Armed Forces Covenant Lead, Shropshire Council

8 Warm Homes

Report attached.

Contact: Simon Ross, MEA

9 Covid-19 update and Flu Immunisations update

A verbal update will be given.

Contact: Rachel Robinson, Director of Public Health, Shropshire Council

10 Chairman's Updates



Committee and Date

Health and Wellbeing Board

4 March 2020

MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 12 NOVEMBER 2020 9.30 AM - 12.00 PM

Responsible Officer: Michelle Dulson

Email: michelle.dulson@shropshire.gov.uk Tel: 01743 257719

Present

Councillor Lee Chapman (Co-Chair)	PFH Organisational Transformation and Digital Infrastructure
Councillor Dean Carroll	PFH for ASC and Public Health
Rachel Robinson	Director of Public Health
Karen Bradshaw	Director of Children's Services
Tanya Miles	Interim Director of Adult Services
David Evans	Accountable Officer Shropshire CCG
Dr Julian Povey	Clinical Chair, Shropshire CCG (Co-Chair)
Jackie Jeffrey	VCSA
Vanessa Barrett	Shropshire Healthwatch
David Stout	Interim CE, Shropshire Community Health Trust
Zafar Iqbal	Associate Medical Director Public Health, MPFT
Ros Preen	Shropshire Community Health Trust

Also in attendance:

Val Cross, Jill Robinson, Kate Garner, Patricia Blackstock, Penny Bason, Nicky Jacques, Berni Lee, Julia Baron.

92 Apologies for Absence and Substitutions

The following apologies were reported to the meeting by the Chair

Mark Brandreth, CEO, Robert Jones & Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

Stacey Keegan, Chief Nurse and Patient Safety Officer, Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

Louise Barnett, Chief Executive, Shrewsbury & Telford Hospital Trust

Megan Nurse, Midlands Partnership Foundation Trust

Laura Fisher, Service Manager – Housing and Occupational Therapy, Shropshire Council

Lynn Cawley, Chief Officer, Healthwatch Shropshire

Dr Julie Davies, Director of Performance and Delivery, Shropshire CCG

David Stout, CE, Shropshire Community Health Trust

Anne-Marie Speke, Healthy Child Programme Coordinator, Shropshire Council

The following substitutions were also notified:

Professor Zafar Iqbal – substitute for Megan Nurse, MPFT
Vanessa Barrett – substitute for Lynn Cawley, Shropshire Healthwatch
Ros Preen – substitute for David Stout, SCHAT

93 **Disclosable Pecuniary Interests**

Members were reminded that they must not participate in the discussion or voting on any matter in which they had a Disclosable Pecuniary Interest and should leave the room prior to the commencement of the debate.

In relation to the Better Care Fund, Jackie Jeffrey declared that she worked for a voluntary sector contractor.

As a GP, Dr Julian Povey declared an interest in relation to the Healthy Weight Strategy, Covid-19 Update and Flu Immunisation Update.

94 **Minutes of the last meeting**

RESOLVED

That the minutes of the meeting held on 17 September 2020 be approved as a correct record.

95 **Public Question Time**

No public questions had been received.

96 **System update**

STP Update

The report of the STP Finance Director, Shropshire, Telford & Wrekin CCG was received – copy attached to the signed Minutes. The Accountable Officer / Integrated Care System Lead Director introduced and amplified the report and gave a short presentation updating the Board in relation to the six areas of the System Transformation Plan – copy of slides attached to the signed Minutes.

The Accountable Officer / Integrated Care Team Lead Director explained that the long-term plan, which had been developed in 2019 and although not yet formally signed off, it set a timeline for STPs to move towards Integrated Care Systems (ICS) bringing together providers and commissioners. He expanded on the role of the ICS and confirmed that they were currently entering an assurance process and were on track to become an ICS in April 2021. He informed the Board that an ICS Shadow Board had been established and had been meeting for some time and that the role of ICS Lead Director had been combined with that of the Accountable Officer role.

The Accountable Officer / Integrated Care Team Lead Director reported that the System Improvement Plan had been submitted to NHS England and Improvement,

the first six months of which was very much aligned to the Winter Plan. He then touched briefly on the second wave of Covid-19 and confirmed that the Silver System Command structure remained in place at a structural level following the first wave. All partners were very mindful that it was a fast-changing environment. He went on to discuss roll out of the vaccine post-Christmas and explained the groups that would be prioritised to receive it.

Looking briefly at winter planning, the Accountable Officer / Integrated Care Team Lead Director explained that the primary aim this winter was, wherever possible, to keep patients away from A&E and to use other services to look after them locally or at home. Finally, the Accountable Officer / Integrated Care Team Lead Director discussed Transformation and Service delivery across the system along with the workforce plan.

RESOLVED: To note the STP update.

Healthy Lives Update

The Health and Wellbeing Officer introduced and amplified her report – copy attached to the signed Minutes – which provided the Board with updates for ‘Healthy Lives’, the Partnership Prevention Programme of the Health and Wellbeing Board.

The Health and Wellbeing Officer reported that Social Prescribing was progressing well albeit in a different way due to Covid-19, with an increasing number of young people being referred. She informed the Board that Shropshire Social Prescribing had received national recognition having been cited in the Kings Fund Charity evaluation report earlier in the year.

The Health and Wellbeing Officer went on to report that the second stage of the LGA/Health Foundation bid had been submitted, the outcome of which was awaited. The updated governance structure had been included within the report for information.

Finally, the Health and Wellbeing Officer reported that the Healthy Lives Steering Group would re-commence in the New Year.

RESOLVED: To note and support the ongoing work.

97 **Shropshire, Telford & Wrekin CCGs Winter Plan**

The report of the Director of Planning, Shropshire, Telford & Wrekin Clinical Commissioning Groups was received – copy attached to the signed Minutes – which updated the Board on the Shropshire, Telford & Wrekin CCGs winter planning arrangements. The Accountable Officer introduced and amplified the report.

He reported that there had been some unusual considerations this year, not least Covid-19. He informed the Board that the increased range of the Flu Vaccination programme this year had impacted upon supply so not everyone had received their flu jab. Part of the challenge around that went back to the logistics of delivering the Covid-19 vaccination as there had to be a gap between receiving the two.

The Accountable Officer explained that they had tried to ensure this year that the system was default??? rather than individual organisations. They wanted it to be about the reorganisation of system priorities, recognising the challenges that they were also trying to restore services at the same time, but, making sure that they still had pan-organisational governance but that supported solutions and enabled rapid decision making. They also wanted to ensure that staff were deployed appropriately to support priorities and that changes were being embraced as they went through this. They also wanted to ensure that they learnt from what hadn't worked particularly well in previous years.

The Accountable Officer informed the Board that initially organisations were asked to come forward with schemes and there were more than 30 put forward across the range of system partners, a lot of which were looking at admissions avoidance and/or discharge. They then went through a process of narrowing those down before they got to a place where they had a range of schemes that were going to be taken forward and those included things like expansion of the rapid response service, into the Shrewsbury area particularly, looking at how therapy services could be used in a different way at the front door, and NHS111 etc.

The Chairman of Healthwatch Shropshire informed the Board that they were starting to research a new hot topic and starting to learn about the experiences of hospital patients and care home residents in respect of the visiting arrangements that had been made for family and friends when visiting in person had been so restricted. They were hoping to capture a lot of good practice that could be introduced more widely and could feed in to the work of the New Ways of Working Group.

RESOLVED: To note and support the contents of the report.

98 **Adult Social Care Winter Plan**

The Committee received the report of the Interim Director of Adult Social Care and Housing – copy attached to the signed Minutes – which highlighted the way in which Adult Social Care would deliver the 2020/21 Adult Social Care Winter Plan.

A presentation was given – copy of slides attached to the signed Minutes - that covered the following areas:

- Winter Plan
- Overarching work within the health and care system
- Preventing and controlling the spread of infection in care settings
- Collaboration across health and care settings
- Supporting people who receive social care, the workforce and carers
- Supporting the system

The Interim Director of Adult Social Care and Housing explained that Shropshire Council's Winter Plan set out what would be done over the winter period to address the priorities set out in the Government's Adult Social Care Winter Plan and had been split into a number of different themes. The Service Manager for Short Term Support and the Service Manager for Community Partnerships and Day Opportunities took the Board through the detail underneath these themes. The

Interim Director of Adult Social Care and Housing concluded by stating that Shropshire was in a strong position this winter and she expressed her thanks to everyone for all of the work being done to support people in Shropshire.

The STP Programme Manager / Covid Community Response Lead informed the Board that one part of the Winter Plan, the wellbeing contract, had received a funding uplift and it was hoped that closer working in this area could possibly be undertaken with the primary care network and other partners going forward in order to make the best use of the service.

The Chief Officer, Shropshire Partners in Care welcomed the Council's support but expressed caution around capacity in the market and the financial challenges posed as many care homes had been hit by a fall in occupancy levels.

The Portfolio Holder for Adult Social Care thanked the whole Adult Social Care sector for all of the work being undertaken during the most challenging and difficult times ever known and he encouraged everyone to read the full report.

RESOLVED: To accept and endorse Shropshire Councils Adult Social Care Winter Plan.

99 **HWBB priorities: Healthy Weight Strategy**

The report of the Consultant in Public Health was received – copy attached to the signed Minutes – which updated Board Members on progress with development of Shropshire's Weight Management Strategy and sought the support of Board Members in progressing the plans. The Consultant in Public Health amplified her report and gave a presentation – copy of slides attached to the signed Minutes. The presentation covered the following areas:

- Context
- Excess Weight statistics
- Adult Obesity
- Inequality in Excess Weight
- Weight Management Strategy
- Engagement and Next Steps

The Consultant in Public Health reported that obesity was an extremely complex and growing problem and was a priority for both the STP and this Board. She took Members through the data for Shropshire and compared it to the national data for England and the West Midlands populations. She also looked at inequalities whereby those from more deprived backgrounds were more prone to obesity

The Consultant in Public Health explained that a Weight Management Strategy using a whole system approach to obesity was required and suggestions for how this might be achieved had been set out in the report.

Jackie Jeffrey, VCSA commented that food poverty was not just about healthy choice as an easy choice, it was about understanding nutrition and understanding how people on low incomes or in temporary housing cannot feed themselves healthily because they don't have the facilities. It also highlighted how council tax support also impacted on people's ability to eat healthily and afford nutritious food. She

stressed that it was a complex and nuanced situation and was important that any multi-agency working tied in with the work of the Social Task Force which she also sat on, because they were recommending the same things.

The Consultant in Public Health agreed and explained that from the outset of this work one of the first contacts she made was with Emily Fay from the Food Poverty Alliance and would be working hand in glove with her moving forward. The Chairman explained that he also chaired the Covid Social Task Force and could refer her through to it, if appropriate.

Zafar Iqbal, Associate Medical Director, MPFT informed the Board that his background was in Public Health so he was really pleased to see this paper and fully supported the prevention agenda and agreed that intervening early was the correct way to go. He explained that in relation to supporting adults, the numbers were so large in terms of number of adults who were obese that it would be virtually impossible to offer support to adults to lose weight sufficiently however, he felt that it was worth providing intensive support for those patients who were at very high risk, eg existing cardiovascular disease or diabetes etc, and the other group, who were generally missed out as being high risk, those people with mental illness, especially those with severe mental illness who had very poor life expectancy.

The Associate Medical Director, MPFT informed the Board that a review had recently been undertaken of the effectiveness of digital apps for improving healthy lifestyles, which had been found to be getting a lot better as time went by and which he felt might be worth looking at for the general population who were keen to lose weight.

RESOLVED:

- To endorse the approach to the review as described in the report;
- To support the 'next steps' as described in paragraph 3.9 of the report;
- To advise on approaches to adopt in ensuring the 'critical success' factors identified in paragraph 3.5 could best be achieved; and
- To note that amongst the wider risks and opportunities specified, there was a potential for delay in strategy development contingent on the COVID crisis.

100 Harnessing COVID-19 support across Shropshire

The report of the CEO, Shropshire Rural Communities Charity (RCC) was received – copy attached to the signed Minutes – which set out the responses received following a survey in July/August to capture the extent of the Covid-19 community activity and to understand the development needs of those groups going forward. The CEO amplified her report. She informed the Board that, based on their initial findings, Shropshire RCC had secured a small amount of lottery funding to provide extra support to those groups that required it until the end of March 2021.

She explained that although there had been a huge amount of generosity, it was imperative that the work generated be harnessed and consolidated to ensure it was not lost going forward and she drew attention to paragraph 2 of the report which set out four areas that would help ensure the continuation of those groups and which encompassed things like the need to develop organically rather than be directed by statutory bodies, being able to operate safely including mechanisms for undertaking

DBS checks and for handling people's money etc and the need for grant funding to assist with direct costs and to pay for ongoing adviser support. She also drew attention to 'volunteer fatigue'.

The Chairman thanked the CEO for her very interesting paper and commented on the importance of understanding not only the sustainability of those groups, but also any work which assisted supporting the resilience of the community and voluntary sector was really vital. He informed the Board that the Covid Social Task Force had set up a Task and Finish Group looking very specifically at the community and voluntary sector infrastructure and how partner organisations, including the council, could support and understand how best to build on and strengthen that infrastructure.

A brief discussion ensued in relation to some of the local work being undertaken along with the challenges being faced by these organisation that may prevent them from remaining sustainable.

RESOLVED: to note the contents of the report.

101 Covid-19 update and Flu Immunisations update

The report of the Director of Public Health was received – copy attached to the signed Minutes – which provided the Board with an update on Covid-19 and Flu immunisations including national targets, the communications campaign to raise awareness of eligibility and increase uptake, actions to reach eligible groups who may experience inequalities in getting a flu vaccination and progress with the flu vaccination programme.

The Director of Public Health updated the Board with the latest figures for Covid-19 from the previous week. She confirmed that the figures were updated daily and were likely to increase before the impact of the lockdown was seen and it would be several weeks before the rates of hospital admissions and deaths began to reduce. She explained that during the first wave the majority of cases in Shropshire were seen in hospital/care home settings and other workplace settings whereas the majority of the cases now were within households and the community and every ward in Shropshire in the last seven days have had cases in them.

The Director of Public Health explained that there was a lot of work being undertaken as we go towards winter and she drew attention to the availability and capacity of testing in the County and that combined with the roll out of the vaccine, the other thing that would help us move forward over the next few months were the contact tracing, and people complying with isolation and other guidelines, the so called 'swiss cheese' approach. She also highlighted the communications work being undertaken including the Step Up Shropshire campaign, the work of the Community Reassurance Teams and the Covid Hotline (03456 789028). There had also been a lot of promotion around supporting people's mental health especially as we go into winter particularly.

Turning to the flu vaccine, the Director of Public Health reported that this year they had a target to get 75% of those people in the eligible groups vaccinated and that compared to the same time in the previous year the figures had increased eg the

number of people in the over 65's group to have received a vaccine had increased from 51% to 64%.

The Portfolio Holder for Adult Social Care and Public Health paid tribute to the Director of Public Health and all of the public health teams and officers who had been seconded across from other departments and the people of partner agencies for everything they had been doing during the course of the pandemic which was nothing short of superb.

RESOLVED: To note the contents of the report and to promote the flu vaccination to eligible groups and staff with their service.

102 Chairman's Updates

The Chairman reported that he had received four items of correspondence – copies attached to the signed Minutes. Three from NHS England (Primary Care Support England) as follows:

A Letter/memo dated 5 October 2020 had been received stating that with effect from 28 September 2020 the pharmacy at Roushill, Shrewsbury, SY1 1PQ run by J K Lunt Limited had relocated to The Tannery, Barker Street, Shrewsbury, SY1 1QJ and was now operated by Lunts Healthcare Ltd. The pharmaceutical list for the area of Shropshire Health and Wellbeing Board would be amended with effect from that date.

Letters dated 3 November 2020 and 5 November 2020 had also been received in relation to a change of ownership application, and confirmation that with effect from 4 November 2020 the pharmacy at High Street, Highley, Shropshire, WV16 6LP would be operated by Giles Evans Ltd and the pharmaceutical list for the area of Shropshire Health and Wellbeing Board would be amended with effect from that date.

The fourth item of correspondence was from The Royal British Legion and was a Loneliness and Social Isolation in the Armed Forces Community briefing for local authorities. The Legion were calling on local authorities to recognise the specific hazards of loneliness and social isolation among the Armed Forces community by including consideration of this group in their Joint Strategic Needs Assessments (JSNA) and Joint Health and Wellbeing Strategies (JHWS).

The Chairman reported that the Council had an Award-winning Armed Forces Covenant and had a specific Officer lead in relation to the Armed Forces Covenant work and so had contacted the officer leads. The Chairman informed the Board that this work would tie into a piece of work that the Armed Forces Covenant Team were embarking on relating to some new legislation that will be coming forward in relation to duties to be imposed on a number of statutory organisation in respect of armed forces personnel and he would report back to the Board as work was put into place.

Finally, the Chairman reminded members about an email they had received from Val Cross, relating to a free Solihull Approach 'Understanding Trauma' online course. As Trauma and Adverse Childhood Experiences had been identified as a priority for the Board, he encouraged all members to do this course if they had not already done so.

The course was free to all professionals with a work-based postcode in Shropshire. Members were encouraged to share this information more widely with colleagues in their workplace/setting.

<TRAILER_SECTION>

Signed (Chairman)

Date:

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Shropshire Clinical Commissioning Group



Health and Wellbeing Board Meeting Date 4th March 2021

Item Title: Shropshire Armed Forces Covenant – Proposed Legislation and General Update

Responsible Officer

Email: Sean.mccarthy@shropshire.gov.uk Tel: 01743 255 933 Fax:

1. Summary

The key principle of the Armed Forces Covenant is to remove disadvantage to Armed Forces personnel, their families and veterans. Forces personnel are unique in that they have little or no choice over where they live and work, which affects where their families live and work and where, they eventually resettle once their time in HM Armed Forces is over. Disadvantage in access to health and social care services arises mainly from the impact of mobility and separation due to deployment, training and families who live apart.

MOD is the lead Department in central Government. As many of the levers for supporting the Armed Forces Community sit with other Government Departments, the Devolved Administrations and Local Authorities, MOD works closely with them and others in the public, charitable and private sectors to deliver the Covenant.

The Armed Forces Act 2006 sets out the requirement for the Secretary of State for Defence to lay a report before Parliament annually to cover the effects of membership, or former membership, of the Armed Forces on Service People in the fields of healthcare, education and housing. The Government has now committed to enshrining the Armed Forces Covenant further into legislation in the Queen's Speech during 2021. The new legislation will require all public authorities, when exercising its public functions relating to Education, Healthcare and Housing, to have due regard to:

- the unique obligations of, and sacrifices made by, the Armed Forces; and
- the principle that it is desirable to remove disadvantages arising from Service Personnel from membership, or former membership, of the Armed Forces. Service Personnel may include Serving personnel, Veterans and their families.
- the principle that special provision for Service People may be justified by the effect on such people of membership, or former membership, of the Armed Forces.

The proposed legislation had its first reading in parliament on the 26th January 2021 and the second reading on the 8th February 2020. No date has been set for the 3rd and final reading in the House of Commons. Once the Bill goes through the House of Lords, and consideration of amendments, it is hoped that it will gain Royal assent in the autumn/winter 2021.

2.0 Recommendations

2.1 The HWBB note and consider the impact of the proposed legislation.

2.2 The Armed Forces Covenant Lead will update the HWBB when further information about the legislation is released.

REPORT

1. Purpose of Report

The purpose of the report is to update the H&WB Board on the progress of the Armed Forces Covenant – proposed legislation and give an update on the Armed Forces Covenant in Shropshire.

2. Risk Assessment and Opportunities Appraisal

There is no risk implied within this report. The opportunity to create fairer policies and procedures to ensure the Armed Forces community is treated fairly adheres to the Equality Act 2010 in that it supports the Armed Forces community from discrimination given their time in service.

Positive equality impact across the protected characteristic groupings. With particular regard to social inclusion. The Council is seeking to ensure that the needs of Armed Forces personnel are accounted for within equality impact assessments across service areas.

All recommendations have been made in line with national best practice and guidance on the Armed Forces Covenant.

3. Financial Implications

There are no financial implications identified within this report. Officer time will be required to see through the recommendations.

4. Summary of Healthcare policy area:

- Currently, the key issues experienced by the Armed Forces Community include:
 - Access to existing healthcare services (e.g. waiting lists, renewed needs assessments) and lack of provision of services that are more relevant to this community (e.g. commissioning of mental health services).
 - Service quality, usually down to a lack of sufficient integration of existing services and healthcare staff training and awareness of service life.
- Key issues are around the commissioning of services and processes around accessing those services. The duty to be imposed generally on all NHS bodies responsible for commissioning and/or delivery of services.

Public Functions Subject to the Duty	Legislation applies to public functions exercised by the below bodies under the National Health Service Act 2006.
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Public Bodies Subject to the Duty	<p>Legislation applies to the public bodies below as defined by:</p> <ul style="list-style-type: none"> • NHS Act 2006. <p>Public bodies include:</p> <ul style="list-style-type: none"> • Local Authorities, when exercising functions under the NHS Act 2006; • NHS Commissioning Board; • Clinical Commissioning Groups (CCGs); • NHS Trusts and Foundation Trusts.
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5.1 Covenant Legislation

- The Covenant, in its current form, has been in operation for nearly ten years, and while good procedures and initiatives have been put in place by service providers, the Government is concerned that some members of the Armed Forces Community still face disadvantage when accessing public services. This is often caused by a lack of awareness of the Covenant and the unique nature of service in the Armed Forces.
- The Government therefore proposes to introduce legislation to increase awareness of – and, in turn, improve the delivery of – the Covenant in those key areas that are fundamental to a good life, while retaining the ability of local service providers to honour the Covenant in the best way to suit local needs.

5.2 Aims of the Proposed Legislation

- The aim of new legislation is to increase awareness among service deliverers and policy makers of the unique obligations and circumstances facing the Armed Forces Community, and to build understanding of how these can affect their requirements of, and ability to access, key public services.
- By embedding this understanding in public sector decision-making via a new statutory duty to have due regard to the Covenant, this legislation will help improve overall delivery of public services in relation to the Armed Forces Community.

5.3 How the Proposed Legislation will work

- The focus of the proposed legislation will be on local and regional service provision, covering those aspects of public housing, education and healthcare that are most likely to affect serving and former members of the Armed Forces and their families.
- Reflecting three of the areas covered by existing Armed Forces Covenant legislation, these three strands of policy also comprise the foundation of successful lives and are commonly raised areas for concern by members of the Armed Forces community.
- The new Duty will require those who are subject to it to consider the Armed Forces community when developing policy, procedures and making decisions in the specified policy areas, taking the three principles set out above into consideration.

- The proposals will also give the Secretary of State for Defence powers, with appropriate checks and balances, and following consultation with stakeholders, to amend the primary legislation in order to add other public bodies and other functions in different areas. Where the exercise of such powers will affect devolved areas, there will be a requirement on the Secretary of State to consult with the Ministers in the relevant devolved administration(s).

5.4 Who does the Legislation apply to

- The new Duty will apply to relevant public bodies exercising specified public functions in the education, healthcare and housing sectors.
- The private sector is not in scope. Where relevant functions have been contracted out to private companies, the public body responsible for managing the contract will be subject to the proposed legislation and will need to ensure that policies and processes of the contractor are compliant.
- The specified bodies must have due regard to the three principles set out above when exercising relevant functions that may affect the Armed Forces Community which includes serving personnel, veterans and their families.

5.5 How will the legislation enforced

- The overall aim of the proposed legislation, and accompanying statutory guidance, is to increase awareness among public authorities of the Armed Forces Covenant and the unique obligations and circumstances of the Armed Forces Community. In turn, it is expected that better awareness will lead to improved public-service delivery for members of the Armed Forces Community.
- While no new enforcement mechanism is planned, supporting information and advice aimed at the Armed Forces Community will publicise existing complaints procedures and, where relevant, the appropriate Ombudsman's office. Where any issue cannot be otherwise resolved, enforcement of compliance is by way of judicial review, in accordance with standard public law principles.
- Those public bodies in scope will be supported by statutory guidance published after discussion with Covenant partners across government, devolved administrations, the Armed Forces Community, and the Service charity and welfare sectors. The proposed legislation will also be supported by training tools, advice and wider guidance aimed at the public bodies in scope, to ensure that they have easy access to the information they require.

5.6 Due Regard Measures

- Under the new Duty, those public bodies in scope will be required to have 'due regard' to the three principles of the Armed Forces Covenant when formulating policy and taking decisions in specified areas.
- As with those existing duties, the Government will not be defining in legislation exactly how the requirement to have due regard can be met. But accompanying statutory guidance, which public bodies will be required to take into account, will provide advice and examples of best practice to indicate how bodies might comply with the duty.

UPDATE ON THE ARMED FORCES COVENANT IN SHROPSHIRE

6. Health Services in Shropshire

6.1 GP Friendly Accreditation

GP practices, who have a CGC 'Good' Rating, or higher, are eligible to apply for GP Friendly accreditation which consists of five elements, including:

- Asking patients, registering with the surgery, if they have ever served in the British Armed Forces and coding it on the GP computer system.
- Having a clinical lead on veterans in the surgery. This should be a registered health care professional, but could be a nurse or paramedic, not just a GP. This clinical lead is required to undertake dedicated training, attend training events (RCGP or other provider), stay up to date with the latest research and innovations and ensure that the practice is meeting the health commitments of the Armed Forces Covenant. They should also be available to provide advice to colleagues, as well as possibly seeing veterans themselves.

The following surgeries in Shropshire are signed up to the GP friendly accreditation scheme and work is ongoing to increase the number:

Shropshire CCG	The Caxton Surgery
Shropshire CCG	Pontesbury Medical Practice
Shropshire CCG	Westbury Medical Centre
Shropshire CCG	Much Wenlock and Cressage Medical Practice
Shropshire CCG	Drayton Medical Practice
Shropshire CCG	Belvidere Medical Practice
Shropshire CCG	South Hermitage Surgery
Shropshire CCG	Wem and Prees Medical Practice
Shropshire CCG	Knockin Medical Centre
Shropshire CCG	Marden Medical Practice
Shropshire CCG	Worthen Medical Practice

6.2 Veterans Aware

A group of 53 NHS providers have been accredited as exemplars of the best care for veterans, helping to drive improvements in NHS care for people who serve or have served in the UK Armed Forces and their families. Veteran Aware trusts are leading the way in improving veterans' care within the NHS, as part of the Veterans Covenant Healthcare Alliance (VCHA).

Robert Jones and Agnes Hunt Hospital NHS Foundation Trust and The Shrewsbury and Telford Hospital NHS Trust are both classed as Veterans Aware. We have been working with both Trusts to support them to deliver their Veterans Aware offer. Both Trusts support staff and people that come into the hospital who have a connection to the Armed Forces. The Trusts have a number of Veterans Champions who work to do the following:

- Provide leaflets and posters to veterans and their families explaining what to expect.
- Train relevant staff to be aware of veterans' needs and the commitments of the NHS under the Armed Forces Covenant.

- Inform staff if a veteran or their GP has told the hospital they have served in the Armed Forces.
- Ensure that members of the Armed Forces community do not face disadvantage compared to other citizens when accessing NHS services.
- Signpost to extra services that might be provided to the Armed Forces community by a charity or service organisation in the Trust and look into what services are available in their locality, which patients would benefit from being referred to.

Step Into Health is an initiative which seeks to connect employers in the NHS to people from the Armed Forces community. The programme is designed to support employers in recruiting from this community and to promote the NHS as an employer of choice. The Armed Forces community includes those at various stages of their career, veterans who may have served for any length of time and their spouses and dependants looking to establish themselves within the sector.

7. Shropshire, Telford and Wrekin Armed Forces Needs Assessment.

Both Shropshire Council and Telford & Wrekin Council have established Strategic AFC Partnership Boards which previously identified the requirement to undertake a Joint Armed Forces Needs Assessment, within their Action Plans, to fully understand the Armed Forces community across the County of Shropshire. The Assessment, undertaken in 2020, considered local implications of national research and evidence in relation to key Armed Forces Covenant commitments. The experience of our local Armed Forces community was also considered in relation to:

Health & Wellbeing, Education & Children's care, Housing, Employment & Training, The Criminal Justice Service and Transition & Specialist support.

The final Report (Appendix 3) identified a total of 30 key recommendations, across both Local Authorities, to further support our local Armed Forces community, which will be implemented through a Joint AFC Strengthening Local Delivery Working Group.

8. Service Charities

The Covenant currently works with the following service charities: Royal British Legion (RBL), Soldiers, Sailors, Airmen and Families Association (SSAFA), Blind Veterans UK, Help for Heroes, Combat Stress, walking with the Wounded, RAF Benevolent Fund, RAF Association, RAF Families Federation, Army Benevolent Fund and the Army Families Federation.

9. Covenant Strategic Group

Through Partnership Working with the above Service Charities, other Public Sector areas (e.g. the NHS, West Mercia Police etc.), local businesses and representatives of the Armed Forces, the Strategic Group provides strategic governance for local delivery of the Covenant. The Group also provides a forum for the sharing of best practice and for discussion around wider issues and challenges facing the Armed Forces e.g. the redevelopment of Copthorne Barracks, the relocation of 1 Royal Irish and support for Armed Forces Day.

Due to the success of the Strategic Group, and the numbers in attendance, we are currently restructuring the format and creating additional working groups e.g. a Joint AFC Strengthening Local Delivery Group that will see oversee the implementation of the recommendations in the recent Armed Forces Needs Assessment.

10. Covenant Operation Groups

The Covenant Operations group meets every month to discuss specific individuals who are in need of support. The meeting is attended by Service Charities, Shropshire Council Officers from various departments, Army and RAF welfare representatives and West Mercia Police. The purpose of these meetings is to discuss issues that current serving personnel and veterans may be experiencing. These issues may be homelessness, ill health, family separation, those at risk of offending, financial issues, legal etc. Each individual is signposted to a particular service charity or organisation that can support them with their problem.

11. Armed Forces Outreach Project

The Armed Forces Outreach is designed to provide help and support to all military personnel, veterans and their families. Working with the service charities and organisations the outreach project signposts and facilitates to ensure that current and former military personnel have access to the right support. We have also formed close links with a number of businesses, charities and organisations across Shropshire, many of whom have signed the Armed Forces Covenant to demonstrate their support.

12. Conclusions

Through the Armed Forces Covenant, there is a clear mandate with practical examples of how health organisations must ensure the Armed Forces community is not disadvantaged and treated fairly, given the uniqueness of life in the Armed Forces.

The delivery of the recommendations in the report should be done in full collaboration between the H&WB Board & the Armed Forces Partnership to ensure a clear line of communication back to service users and the Armed Forces community.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

https://services.parliament.uk/Bills/2019-21/armedforces.html

Cabinet Member (Portfolio Holder)
--

Cllr Lezley Picton

Local Member

n/a

Appendices

Armed Forces Covenant Report 2020 (Appendix 1)
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Joint Armed Forces Needs Assessment (Appendix 2)
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THE ARMED FORCES COVENANT ANNUAL REPORT 2020

THE ARMED FORCES COVENANT ANNUAL REPORT 2020

Presented to Parliament pursuant to section 2 of the Armed Forces Act 2011



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The Armed Forces Covenant

An Enduring Covenant between
The People of the United Kingdom
Her Majesty's Government

– and –

All those who serve or have served in the Armed Forces of the Crown
and their Families

The first duty of Government is the defence of the realm. Our Armed Forces fulfil that responsibility on behalf of the Government, sacrificing some civilian freedoms, facing danger and, sometimes, suffering serious injury or death as a result of their duty.

Families also play a vital role in supporting the operational effectiveness of our Armed Forces. In return, the whole nation has a moral obligation to the members of the Naval Service, the Army and the Royal Air Force, together with their families.

They deserve our respect and support, and fair treatment.

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 compared to other citizens in the provision of public and commercial services. Special consideration is appropriate in some cases, especially for those who have given most such as the injured and the bereaved.

This obligation involves the whole of society: it includes voluntary and charitable bodies, private organisations, and the actions of individuals in supporting the armed forces. Recognising those who have performed military duty unites the country and demonstrates the value of their contribution. This has no greater expression than in upholding this Covenant.



ARMED FORCES

COVENANT

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FOREWORD

by the Secretary of State for Defence and Chancellor of the Duchy of Lancaster

This year, our Armed Forces have stepped forward once again to support our nation through the COVID-19 pandemic, from constructing NHS Nightingale Hospitals to delivering testing across the UK. Our veterans were, and remain, at the heart of the voluntary effort in many communities. Partners at all levels of the public, private and charitable sectors, have continued to support those who serve or have served, and their families. As a result of this, the Armed Forces Covenant has never been more vital. We are therefore proud to lay this report before Parliament as a demonstration of that work.

Meeting our Covenant obligations means taking a holistic approach in supporting the Armed Forces community, at every stage of life. At home, the success of our Armed Forces would not be possible without the support of their families, and improved provision for them has been a priority for the Government in 2020 and beyond. In September, we launched the pilot for our new wrap-around childcare programme at RAF High Wycombe and RAF Halton. Families with children aged between 4 and 11 will be able to access funding for childcare before and after school, giving spouses and partners the choice to work more flexibly. More locations will follow, with the pilot to be extended in January 2021 to families of Service personnel assigned to Catterick and Plymouth. Understanding the diversity of Armed Forces families and their needs has been further recognised through the recommendations made by Andrew Selous MP in his Living in Our Shoes report. We will work closely with our partners across government and in other sectors to take forward his recommendations in our refreshed Armed Forces Families Strategy.

More broadly, in addition to the MOD investing £123 million in-year to Service Families Accommodation, the Government committed an extra £200 million to improve MOD accommodation. We have also extended the Forces Help to Buy scheme until December 2022, giving more Service personnel and their families the opportunity to buy a home of their own.

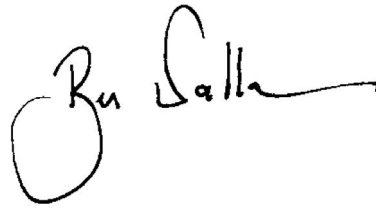
In the workplace, the support of businesses is crucial in ensuring that Reservists and Armed Forces families have the flexibility to work and serve. More employers than ever are committing to providing jobs for veterans and those leaving military careers, providing a solid foundation to civilian life. This has contributed to the total number signing the Armed Forces Covenant rising to over 5,800 at the end of September, while 127 organisations were awarded Gold under Defence's Employer Recognition Scheme.

Ensuring that serving personnel and veterans' healthcare needs are met remains crucial. In April we launched HeadFIT, an important tool to support mental fitness in the serving Armed Forces, and available to all. Meanwhile, the Defence Recovery Capability Review made 42 recommendations about future Recovery Pathways for wounded, injured and sick personnel. In addition, the number of GP practices accredited as Veteran Friendly has more than tripled to over 800.

The Office for Veterans Affairs, is driving forward the Strategy for our Veterans and ensuring that the UK takes the steps needed to become the best place in the world to be a veteran. From the Veterans' Railcard, to national insurance breaks, increased employment opportunities in the Civil Service to bespoke research to explore the impact of COVID-19 on the veterans community and the creation of the Veterans' Advisory Board, the Government is delivering for veterans and their families, ensuring that not only are they supported through the Covenant but going the extra mile to meet society's commitment to those who have served.

Next year will see the tenth anniversary of the creation of the Armed Forces Covenant, and the delivery of our Manifesto commitment to further incorporate the Covenant into law. This legislation will be a vital tool to help prevent disadvantage faced by the Armed Forces community due to the unique nature of their Service. We will continue to roll out wraparound childcare for Service families and we will develop the Life Skills package of training to further support personnel in their transition into civilian life. Service leavers and veterans will be supported into work by expanding the Guaranteed Interview Scheme for those eligible across the Civil Service and by launching a National Insurance Holiday Scheme so that many more veterans can offer their unique talents to employers. Veterans in England and Wales will also for the first time be able to record their service in the Census, with Scotland to follow in 2022, ensuring that data and evidence are at the heart of improved through-life support now and in future.

We would like to thank colleagues across Government, the Devolved Administrations, local authorities, and partners throughout the UK who continue to support the Armed Forces Covenant. It is a collaborative effort by the whole of UK society. This year has again demonstrated our Armed Forces and veteran community at their very best. In return, we have a duty to support them. We look forward to continuing to work together as we deliver on our duty.



The Rt Hon Ben Wallace MP
– Secretary of State for Defence



The Rt Hon Michael Gove MP
– Chancellor of the Duchy of Lancaster
and Minister for the Cabinet Office



Secretary of State for Defence during London Poppy Day 2019



Secretary of State for Defence meets Sikh veteran Darbara Singh Bhullar and his family at the National Memorial Arboretum during VJ Day 75 commemorations



EXECUTIVE SUMMARY

This is the ninth Armed Forces Covenant annual report since its introduction in the Armed Forces Act 2011. This report covers the period from 1 October 2019 to 30 September 2020. Where figures relate to a different time period, for example financial year, this is stated. Responding to feedback that previous reports were lengthy or unfocused, this year's report captures new activity or specific progress made against existing initiatives within the reporting period. The report includes activity by the UK Government for reserved issues and activity within the devolved spaces of Northern Ireland, Scotland and Wales. Annex A provides an update against commitments made in previous reports that remain open, and those from previous reports that have been delivered are not included. Annex B contains data from the Armed Forces Covenant metrics.

Since its inception, government at all levels has delivered many beneficial initiatives to embed the Armed Forces Covenant and to deliver tangible support to members of the Armed Forces community. To enable a more concise report, these ongoing activities are not reproduced here and can be found in previous annual reports.

The background context to this reporting period is significantly different to the eight previous ones, with the COVID-19 pandemic emerging halfway through. Many organisations specifically supported the Armed Forces community and, where that activity is connected to delivery of the Armed Forces Covenant, it is included. The contribution that the Armed Forces community made to the government's response to COVID-19 is only included where it is directly relevant.

Highlights of delivery within the reporting period

Armed Forces Covenant Fund Trust

The Trust ran a consultation to inform the future grant-making programmes and, as a result, programmes for the financial year 2020/21 will make small- and medium-sized grants to reduce isolation within Armed Forces communities and will give medium-sized projects support through mentor organisations to improve sustainability and improve collaboration.

Through the Removing Barriers to Family Life programme, £7.2 million was awarded to 60 projects across the UK that support Armed Forces families.

Through the Positive Pathways programme, in the financial year 2019/20, 114 projects were funded across the UK to support the mental health and wellbeing of veterans.

Through the Veterans' Community Centres Fund, 67 grants were made, totalling £2.85 million, for repairs, refurbishment and accessibility alterations.

The Veterans Should Not be Forgotten programme awarded £2 million to 119 projects to provide immediate support to veterans with reduced social contact during COVID-19.

In response to COVID-19, the COVID Impact programme was launched, totalling £6 million, to support Armed Forces charities and Community Interest Companies, with 102 being awarded funding.

Health and healthcare

HeadFIT was launched with a website that hosts a suite of video, audio and text-based tools to support mental fitness and promote the good management of mental health.

The Defence Recovery Capability Review concluded, making 42 recommendations about future Defence Recovery Pathways for wounded, injured and sick personnel.

The first Health Service Journal's Civilian and Military Health Partnership Award, celebrating excellence in healthcare and health improvement for the Armed Forces community, was bestowed to NHS Sunderland Clinical Commissioning Group.

The Department for Health and Social Care set up a UK-wide Service Families Working Group with representation from all nations, NHS England, NHS Improvement, Ministry of Defence (MOD) and the Families Federations to address long-term policy issues.

The number of GP practices accredited as 'veteran friendly' has more than tripled to over 800.

NHS England and NHS Improvement continued to deliver veteran-specific services during COVID-19 using digital means.

The Veterans Trauma Network Wales launched. The network is a collaboration of specialists in the Welsh tertiary centres, with relevant expertise, who are interested in veterans' care and can deal with problems related to a veteran's time in service.

Education

The Service Children's Progression Alliance led the UK-wide Year of the Service Child Voice project, investigating how to put Service children's voices at the heart of policy and practice development, which culminated with the release of the report 'Listening to learn: the voices of Service children'.¹

A Service Children's UK Partnership Task and Finish group was created by MOD, Supporting Service Children in Education Cymru, the Royal Caledonian Education Trust, Service Children in State Schools and Service Children's Progression Alliance, to identify and share good practice across the UK.

1 <https://www.scipalliance.org/research/listening-to-learn-the-voices-of-service-children>

The MOD changed the policy for tuition fee payments under the Armed Forces Bereavement Scholarship Scheme, so that students will now receive the same amount to study in England, Wales, Scotland and Northern Ireland.

The MOD's Directorate Children and Young People has worked closely with Department for Education and HM Revenue and Customs to ensure parents returning to England from Scotland, Wales, Northern Ireland and overseas can apply for a unique manual 30 hours childcare code before they arrive back in England.

The MOD extended the Education Support Fund to the 2020/21 financial year.

Supporting Service Children in Education Cymru launched a suite of new resources aimed at supporting schools, families and Service children to raise awareness and understanding of the experiences Service children face as a result of parental deployment.

Accommodation

In addition to MOD investing £123 million in-year to Service Families Accommodation, the government committed £200 million to improve MOD accommodation (£122 million for Service Family Accommodation and £78 million for Single Living Accommodation) to support the regeneration of the UK economy in the wake of the COVID-19 pandemic.

The MOD amended the accommodation policy to remove the requirement for Service personnel to have completed more than four years' service before being able to apply to cohabit in surplus Service Families Accommodation.

Future Accommodation Model pilots were launched at Aldershot Garrison and RAF Wittering.

The Forces Help to Buy scheme was extended until December 2022.

The Ministry for Housing, Communities and Local Government published new statutory guidance to improve access to social housing for members of the Armed Forces, veterans and their families.

The First Homes consultation response confirmed that the local connection restrictions for the First Homes scheme will be waived for members of the Armed Forces and veterans within five years of leaving service. This waiver will also be extended to bereaved spouses or civil partners of deceased members of the Armed Forces, if their deaths are wholly or partly caused by their service.

Inquests and judicial engagement

The Defence Inquests Unit has recorded 67 inquests having taken place in England, Wales and Northern Ireland.

The Presiding Coroner in Northern Ireland gave a statement that set out her plan to deal with the 43 listed inquests within a five-year period.

The MOD public consultation on proposed legal protections measures for Armed Forces personnel and veterans who served in operations outside the UK concluded. The responses to the consultation informed the development of the measures taken forward in the Overseas Operations (Service Personnel and Veterans) Bill, which was introduced in Parliament.

Family life

The MOD's Wraparound Childcare pilot programme began making payments to families at the first pilot sites, RAF High Wycombe and RAF Halton.

The Living in Our Shoes report was published, which is an independent review of the support provided to Service families commissioned by MOD and led by Andrew Selous MP.

Transition and Through-life support

The Defence Holistic Transition Policy, Joint Service Publication 100, to support Service leavers and their families to adjust to other aspects of the transition to civilian life, was published.

Alongside the Defence Holistic Transition Policy, the Defence Transition Services organisation was established to assist those facing the greatest challenges to making a successful transition on their discharge.

The Veterans Gateway app was launched, developed by Northumbria University's Northern Hub for Veterans and Military Families Research and the Armed Forces Covenant Fund Trust.

The MOD launched SERVE (Service for Experienced, Rejoiner and Volunteer Engagements), a new digital platform to advertise reserve, rejoiner and wider opportunities across the Armed Forces and easily enables veterans to stay connected with Defence.

Business and the community

The total number of Armed Forces Covenant signings rose to 5,802 by the end of September.

127 organisations were awarded Gold under the Employer Recognition Scheme from a wide range of sectors and included companies of all sizes from SMEs to FTSE100 as well as councils and NHS Trusts.

Armed Forces Covenant business and community networks enabled support of the Armed Forces community during the COVID-19 pandemic, including supporting employers of mobilised reservists, promoting services and disseminating information.

During Armed Forces week, the Department for Work and Pensions (DWP) National Employer and Partnership Team delivered a campaign across DWP to promote opportunities in the regular and reserve Armed Forces.

As part of the Veterans Scoping Exercise, the Welsh Government established a new employment action group to help improve employment support for the Armed Forces.

SUMMARY OF COMMITMENTS MADE IN THIS REPORT FOR DELIVERY BEYOND THE REPORTING PERIOD

Healthcare

In autumn 2020:

- NHS England will launch an engagement to further explore how best it can support the health and wellbeing needs of Armed Forces families, regardless of where they live in England
- the Veterans' Mental Health High Intensity Service will launch regional pathfinders to test the proposed service model
- the veterans' mental health accreditation pilot will start, involving 10 veterans' mental health teams from organisations across both the statutory and non-statutory (including charity) sectors

Education

In October 2020, the Service Children's Progression Alliance will launch the Thriving Lives Toolkit, a practical resource that helps schools improve the quality of their support for Service children.

By the end of 2020, the Service Children's UK Partnership Task and Finish Group will write a report signposting good practice across the UK and recommending potential collaboration projects in the future.

The Department for Education will respond to the consultation on proposed amendments to the Schools Admission Code, which included specific reference to Service children.

Family life

In October 2020, the MOD launched the pilot Partner Career Support programme.

In January 2021, the MOD's Wraparound Childcare pilot programme will launch further pilots for the Plymouth Naval area and Catterick Garrison in January 2021.

Transition and Through-life support

In autumn 2020, the Defence Holistic Transition Policy will be reviewed, one year after its introduction.

Business and the community

In autumn 2020, the Defence Employer Recognition Scheme will be reviewed to identify measures to support long-term sustainability and with implementation of agreed changes in time for the 2021 awards.



OBSERVATIONS

by external members of the Covenant Reference Group

Tri-families Federations formal observations

Introduction

The Families Federations recognise that this year has been truly unique and it should be acknowledged that the Armed Forces community has once again been called upon to provide support to the Nation. It is important that we also formally recognise and celebrate the contribution that our non-serving family members have made, as many of them have been at the forefront of the country's response to the COVID-19 pandemic, holding key worker roles within health, education, social care and the retail sector.

Healthcare

Understanding the health needs of Armed Forces families

The Families Federations have worked closely with the NHS over the last year to ensure that we collectively gain a greater understanding of the unique issues faced by Service families accessing NHS care. This includes working in partnership with the NHS England and NHS Improvement Armed Forces Families Engagement Programme and also commissioning Anglia Ruskin University to undertake research on the specific challenges of a mobile cohort. We hope both these projects will allow greater understanding of the challenges faced and allow user friendly operational recommendations for the NHS across the UK, Ministry of Defence (MOD) and other practitioners working with serving Armed Forces families, leading to improved outcomes.

Mental Health issues

Given the significant pressures faced by the Children and Young People's Mental Health Services (CYPMHS) and delays in receiving care, we remain concerned that Service children are still being disadvantaged due to a lack of awareness. The Families Federations initially worked with the MOD, Department for Education (DfE) and NHS England and NHS Improvement on the development of the Transforming Children and Young People's Mental Health initiative to promote the unique issues that Service children face and we note the update about this pilot scheme in the Covenant Commitments Table. We look forward to re-engaging with these agencies, and the new Mental Health Support Teams, to ensure that service providers have a better understanding of Service life and the impact that this can have upon the mental health of our children and young people.

Education

Schools Admission Code Consultation

Having raised our concerns about the allocation of school places for mobile Service children for several years, we were pleased to have an input in the latest Changes to the Schools Admission Code Consultation. The Families Federations are keen to see a positive outcome for our families, with a revised Code which allows the schools admission process to take their mobile status into account. Other changes such as the inclusion of clear timelines for the application process and the recognition of a unit or private address would help Service families too and ensure that there was more consistency across the country.

MOD Local Authority Partnerships (MODLAP)

We recognise that the focus for local authorities this year has been on the response to the ongoing pandemic but we would like to see further development over the next twelve months of the MODLAP consortium proposal to make Education, Health and Care Plans (EHCP) portable, which would remove some of the current barriers to education for children with SEND from mobile Service families.

Service Pupil Premium

The increase in the rate of Service Pupil Premium (SPP) is a positive step forward but we remain concerned that some schools may not always spend their SPP payments effectively. We would wish for greater accountability to show how this funding is supporting Service children and more information about the positive impact that this funding can have.

Funding for Further and Higher Education

We would welcome a review of the difficulties faced by non-serving partners and adult dependants relating to student finance accessibility when funds are required to move across the devolved administration borders. The current rules on finance mean that these family members must approach the area where the Service person lived at the time of enlisting. This does not work in all situations, due to issues such as the location of the training provider, and we would prefer a case by case approach.

Accommodation

Future Accommodation Model (FAM)

We look forward to the evidence from the three FAM pilots and hope that all elements of the scheme have been robustly tested to ensure that any future roll out of the programme is fit for purpose and that families views have been taken into account. We will continue to encourage the MOD to offer clear communications about FAM, ensuring that they accurately represent the realities of the programme.

Service Family Accommodation (SFA)

The announcement regarding the Government's additional £122 million investment in Service Family Accommodation, as part of the fiscal stimulus, was well received and we hope that this will address some of the longstanding concerns that families have had regarding the modernity and standard of their housing.

Whilst the widening of the eligibility criteria for surplus SFA to include those serving personnel in long term relationships has also been well received, we urge the MOD to monitor the impact on those families in this situation who are assigned to areas where there is no surplus stock. We would also welcome a further review of the current policy to consider what evidence couples have to provide to demonstrate that they are in a recognised long term relationship, especially those who have not been able to share a home before or who do not have joint bank accounts.

Single Living Accommodation (SLA)

The additional £78 million investment in Single Living Accommodation will help to overcome many of the long term issues with this area of the Defence Estate. However, we would seek reassurances about how and when this upgrade to SLA will take place, especially as continuing issues with hot water and heating on some Units has caused additional upset during the current pandemic, with families concerned about the potential impact this could have on the health of their loved ones.

Separated and divorced spouses

We have spent many years urging the Government to include recently divorced or separated spouses/civil partners in the exemption from local connection when applying for social housing. We were therefore pleased to see the recommendations of the Ministry of Housing, Communities and Local Government (MHCLG) which encouraged local authorities to accept this exemption. We would, however, have greatly welcomed the inclusion of this in legislation to ensure consistent support for this often vulnerable cohort.

Following on from the publication of these recommendations, we were therefore very disappointed to see that the same exemption was not extended to the Government's flagship First Home scheme, which leaves this group less able to purchase a home, even though they are part of the Armed Forces community.

Family life

Selous report

The Selous Report 'Living in our Shoes' formally recognised many of the concerns that the Families Federations have highlighted over the last few years. We now look forward to working with the MOD to review fully the recommendations made in the Report and consider how these will inform the current refresh of the Families Strategy.

Childcare

The Wraparound Childcare pilot provides very positive support for Service families. In addition, we would like to see more flexibility for families to use the childcare vouchers to best suit their needs to support their employment, such as access to holiday cover. Finally, we would invite the MOD to consider the evidence from the Families Federations surveys on childcare to ensure the full spectrum of issues being experienced by families is considered.

Employment

The Families Federations employment platform, Forces Families Jobs, has gone from strength to strength in its first year; providing employment and training opportunities for our family members, with the support of the MOD.

Going forward, we would like to see more work being undertaken to remove other disadvantages faced by non-serving partners, such as when they are unable to return to work after maternity leave because their serving partner has been assigned to another area.

We are keen to ensure the successful outcome of the pilot of the Military Co-working Network in the knowledge that these hubs provide an important lifeline to working partners. Whilst there are many welcome sources of support for partners with employment, these multiple providers can prove complex for families to navigate. We would welcome further leadership and coordination from MOD and the Partner Employment Steering Group on this, ensuring that clear and accessible information on the provision on offer is shared with families.

Families Living Overseas

The ongoing pandemic has identified that more focused support is needed for those families assigned overseas. Families have reported that they already felt isolated due to a lack of welfare support, but this has been heightened even further by COVID-19 and the additional challenges of multiple chain of commands for families overseas. It is disappointing that this has not been referred to within this year's Report.

Through-life Support

Non-UK personnel

The Families Federations are deeply frustrated yet again with the minimal focus on the support provided to non-UK Service personnel and their families within this Report. The update lacks any real commitment to improve services for these families and there are no timelines for any work streams.

We have now been raising issues about non-UK personnel for nine years and are disappointed that many of the concerns that we have identified to the MOD still remain. We would therefore like the opportunity to attend future tri-Service Non-UK Working Group meetings, to ensure that the evidence we have from families can be utilised effectively to address these enduring issues. We would also welcome a greater understanding of who champions these issues within the MOD.

This is a key area of concern for our organisations and we will continue to raise these issues until they are formally acknowledged and fully reported on within the Covenant Annual Report.

Transition

A review of the JSP100 Defence Holistic Transition Policy to ensure that it also recognises the support required by families when their Service person transitions into civilian life, is most timely as we reach the first anniversary of its launch. As the Families Federation research highlighted in 2018, this is key to ensuring a successful transition for the Service person and we stand by to support the Working Group tasked to implement this policy as they take this work forward.

We also look forward to learning more about what impact the Defence Transition Service has provided to personnel and families.

Access to state benefits

We would have liked to have seen a focus on the provision of benefits advice for currently serving families as they face unique issues, especially those assigned overseas. We continue to deal with issues from these families, including a lack of awareness that families can still claim Universal Credit when overseas and difficulties changing to a BFPO address.

We have developed a good working relationship with the Department for Work and Pensions policy teams and would welcome an opportunity to replicate this with the respective Policy Leads within HMRC, to raise awareness of Service life and highlight the unintentional disadvantages that current policies may create for Armed Forces families.

Armed forces covenant legislation

We look forward to learning more about the Covenant in Legislation over the next twelve months, as we anticipate that this will have a great impact, both upon our Service families and those who will be charged with delivering the changes that are implemented.

Business and the community

The record number of Covenant signatories is to be commended and we appreciate the ongoing support of the Defence Relationship Management team with the development and promotion of the Forces Families Jobs portal. We would also like to record our support for the increasing number of Employee Recognition Scheme Award recipients, many of whom come from the public sector.

We were interested to learn of the Armed Forces Liaison Officer roles in Wales, which are now funded by the Welsh Government. These posts appear to be having a great impact in their local areas and we would like consideration to be given to whether this programme could be replicated in other areas of the UK, especially now that many of the Local Authority Covenant Officer posts, which had been funded by the Armed Forces Covenant Fund and are fixed term contracts, may soon be coming to an end.

Conclusion

The establishment of the Office for Veterans Affairs is welcomed and we recognise that this may be why much of the content for this year's Report has focused upon the developments within the veterans' space. However, given that the Selous 'Living in Our Shoes' report has now been published, which is a significant piece of work that is driving the review of the MOD Families Strategy, we anticipate seeing a focus on those outcomes for our serving families in the 2021 report.

Observations – Cobseo The Confederation of Service Charities

Introduction

The wider support to the Armed Forces Community, and the delivery of the Covenant more specifically, is a partnership between government and the Service Charity Sector. The complex interdependent mosaic is unique internationally; however, the informal structure renders support vulnerable. In last year's observations we highlighted the headwinds that were affecting the charitable contribution. These include: austerity, which has reduced governmental provision, whilst increasing the scale and complexity of beneficiary demand; the necessary increased cost of charitable governance, which draws funds from delivery; and the lower profile of the armed forces. These challenges have now been significantly compounded by the COVID-19 pandemic.

The Cobseo Observations on this year's report reflect the Confederation's views on the delivery of the Covenant over the last 12 months, but also look at the potential impact of COVID-19 in the longer term.

COVID-19

In order to fully understand the effects of COVID-19 on the sector, Cobseo conducted a survey of its members (sponsored by FiMT and conducted by Directory of Social Change) back in May. The results were significant: fundraising had reduced by up to 60%; 30% of respondents were likely to have exhausted their reserves within 12 months; 18% of charities predicted that they would have to close or merge within a year; and the majority of charities anticipated a reduction in the services that they provide. The capacity of the Sector really matters within the context of Covenant delivery because, as the author of the DSC 'Sector Insight' report published earlier this year observed in the media release at the time: 'The services that the Armed forces charities provide ... aren't an 'add-on' or 'nice to have' – they're central to the quality of life for millions of Serving and ex-Serving personnel and their families. If they disappeared overnight, the state would have to pick up a substantial portion of the financial burden – but the negative impact of the pandemic represents a real risk to these services in the near and medium term.'

Furthermore, the survey identified a widespread view that, as the lockdown restrictions eased, there would be a bow wave of demand. This increase in demand will probably coincide with the completion of governmental support, which has to be spent by the end of October. Additional evidence will be provided by a further survey of Cobseo members, which will report in early November. The DSC report also highlights the remarkable level of cooperation and collaboration that exists across the Service Charity Sector. This effort is being redoubled through a Sector Strategic Review, with the purpose of increasing efficiency, and getting every possible £ to the front line of delivery. In these unprecedented times, the Sector will do all that it can to help itself, but further governmental assistance may well be necessary to sustain the charitable contribution, which is critical to the delivery of the Covenant.

Cross Government Coordination. We welcome the creation of the Office for Veterans Affairs (OVA), and the focus that it has provided for the delivery of Covenant issues affecting the veteran community. Understandably, the capacity of the OVA has been limited as resources have been drawn away to deal with Brexit and COVID-19 priorities. Whilst the efforts of the skeleton staff have been laudable, we welcome the recent addition of personnel, and look forward to the positive impact, particularly in the further delivery of the Strategy for Our Veterans. We would also wish to see defined objectives and metrics to give substance to the Prime Minister's declared objective of 'making the UK the best country in the world to be a veteran'. In the interim, we welcome the specific and discrete steps taken this year, highlighted in the Annual Update included in this Report. It has been noticeable that some of the efforts of both the OVA, and the Covenant Team in the MOD, have disappeared without trace when raised further within the Cabinet Office. Specific examples are the efforts to re-energise the Ministerial Covenant and Veteran's Board (MCVB) and the Covenant Reference Group (CRG). These two committees are the principal means by which departments across government are held to account for the delivery of the Covenant. The CRG draws its authority from the MCVB, which has not met for two years and is not currently scheduled to. The CRG meets shortly for the first time in over 10 months.

A comparison between Cobseo's Observations on the 2020 Covenant Report and our comments on the 2019 report, suggests that little has changed. This lack of progress is, we believe, a direct consequence of the absence of a firm grip within central government.

Special Consideration

This year's Report continues to note that 'The Secretary of State for Defence and other Ministerial colleagues are considering how to take the issue of War Widows' Pension forward' – this, the sixth year in succession that the issue has not been resolved. We noted last year that the Defence Committee had urged immediate engagement with the Treasury to rectify what they described as 'a grotesque injustice' and, once again, we reiterate our previous calls for this to be addressed. Upholding the Covenant's pledge to provide special consideration for the bereaved is paramount, and waiting yet another year for this inequity to be resolved is unacceptable. The War Widows Association first estimated the number of War Widows/Widowers affected to be about 300. Six years on, the Association now estimates that figure to have reduced to under 200.

On a more positive note, generic support to the bereaved under the Covenant continues to improve, and we welcome the extension to include bereaved spouses, or civil partners of deceased members of the Armed Forces, if their deaths are wholly or partly caused by their service, in the waiver on local connection restrictions for the First Homes Scheme for members of the Armed Forces, and veterans within five years of leaving military service.

Perceptions

Lord Ashcroft's report in 2017, supported by YouGov surveys in late-2018, highlighted a public perception that veterans were damaged in body or mind by their service. Since then, the issue has been the subject of much discussion, at MCVB initially, and then at the CRG, but with little actual outcome. This ongoing negative perception of the effects of military service not only impacts the opportunities for veterans to build a successful and meaningful post-service life, particularly in respect of employment, but it can also undermine their willingness to seek support and assistance if they need it. We suggested last year that the Office for Veterans Affairs would be best placed

to lead a perceptions campaign. We recognise the resource constraints during the pandemic have constrained progress, but we would now request that this is given the significant priority it deserves. The commitment 'to make sure the United Kingdom is the best place to be a veteran anywhere in the world' only adds impetus to the pressing need to address this perception issue, as part of a wider campaign to demonstrate how and why this is the case.

Social Care

A significant proportion of veterans require access to social care, reflecting both the age profile of the veteran community, and the ongoing needs of younger working age veterans with service-related injuries and disabilities. We have previously highlighted longstanding problems with the varying availability and cost of good quality social care for veterans in their local area. With pressures on statutory funding becoming even more significant than in previous years, and the availability of high quality care for all veterans increasingly challenging, matters have only been exacerbated by the COVID-19 pandemic, which has also compounded social isolation and loneliness. The Report makes various references to rehabilitation and the DMRC, but then has nothing to say about veterans' need for ongoing social care support. The continuing omission of any reference in the Report to addressing the social care needs of veterans is significant, and needs to be addressed.

Non-UK

We continue to welcome the increased focus we reported last year from the MOD and others on the issues faced by non-UK nationals recruited into the three Services, and their families. We look forward to seeing further commitments to meet this cohort's needs incorporated into the Armed Forces Covenant commitment tracker. However, we note with concern the significant reduction in the level of commitment outlined in this year's annual report compared to the end of 2019 whilst progress in actually resolving many of the raft of concerns raised in recent years remains painfully slow. Little in real terms has changed for many non-UK Service personnel and their families on the ground who continue to face unique issues, pressures and barriers throughout their Service career and beyond, resulting in disadvantage in

comparison with those who serve alongside them. Moreover, the increased prominence and focus on visa fees in this year's Report, albeit without reference to our ongoing concerns over the impact of the minimum income threshold, is welcome but yet to produce any tangible relief for veterans and their families facing high fees on discharge. As a result the burden of this situation continues to fall onto service personnel, their families and the charitable sector, and needs to be resolved as a matter of urgency.

Key Issues by Report Headings

Section 1 – Governance

Covenant into Law. The Government's aim to consolidate the commitments set out in the Covenant is laudable; however, we are concerned that the proposed way forward, and unintended consequences, could combine to undermine their good intentions. In particular, Cobseo Members would want to ensure that the scope of the proposed legislation reflected the three principles at the heart of the Armed Forces Covenant and was sufficient to ensure that the many areas of potential disadvantage will be addressed. There is also a broader concern that if a legal standard is set that is below existing voluntary commitments, this could create the perception of a two-tier Covenant and, in practice, lead to services being reduced to what is mandated by law. A Joint MOD/Cobseo Working Group was established to address concerns, and will continue to be a means of tracking and influencing developments as the consultation process proceeds.

The Overseas Operations (Service Personnel and Veterans) Bill. We support the government's intent in bringing forward the Overseas Operations Bill. The hounding of honourable members of the Services by members of the legal profession in the aftermath of the Afghanistan and Iraq campaigns in particular, was a disgrace which must not be allowed to continue or be repeated. We note that there are reservations about the bill, including concerns that work to introduce the bill may lead to derogation from some of our obligations under the European Convention on Human Rights. There is also concern that the time limit of six years will differentiate between service personnel (and veterans) and civilians in their ability to sue the government. Such a differentiation could represent a disadvantage under the Covenant.

We recognise these legitimate reservations, and would urge the government to continue consultation to improve the Bill. However, the overriding imperative must be to ensure that Service personnel are protected from pernicious harassment in future. We also note that the government has committed to provide protection for veterans who served in Northern Ireland, and we look forward to seeing that legislation.

Section 2 – Delivery by the Covenant Fund Trust

Financial Support. The AFCT has administered the funds at its disposal, through a broad range of programmes, with skill and transparency; not least the Positive Pathways, and Removing Barriers to Family Life programmes. The Veterans Should Not be Forgotten Fund, and the COVID-19 Impact Fund were particularly timely, and were well received. However, the criteria for the latter two, which required grants to be expended by the end of October, constrained applicant organisations without any clear rationale. Whilst the funds released by the Chancellor specifically to the Service Charity Sector in response to COVID-19 (£6 million) were welcomed, they will not make a lasting impact on the Sector's ability to support beneficiaries and, by extension, the Covenant. The annual expenditure of the Service Charity Sector was reported by the DSC to be around £985 million in their Sector Insight Report, and we estimate the Sector's income to sustain that expenditure could be reduced by as much as 30% (£330 million) over the year from May 2020. We have highlighted elsewhere our view that further governmental support will be needed.

Governance of the AFCT. The work of the AFCT is complex and requires diligence and commitment from its small staff. It is, therefore, unhelpful that the status of the Trust, which has been the subject of discussion for more than 18 months, has yet to be resolved. The Cobseo view is that independence is essential to ensure that the decisions taken are, and are seen to be, evidenced based. We would strongly support the value-added by having serving military personnel and civil servants from all four home nations on the board alongside independent members. Any future chair should provide the same level of credibility and relevant expertise as the current one. In any event, a decision is needed as soon as possible to allow full focus on Covenant support.

Section 3 – Health and Healthcare

We recognise the huge challenges presented by the pandemic to the NHS and organisations charged with delivering statutory healthcare services to the Armed Forces Community, and we pay tribute to the immense efforts of all involved in supporting serving personnel, veterans, and their families. Significant challenges remain, and we know that some of the changes we propose in our comments that follow will inevitably be dependent upon NHS capacity to deliver as the pandemic continues to unfold.

Consistency of Provision. In the context of the equitable delivery of the Covenant across the UK, we believe further improvement in the awareness and understanding of care givers and GPs is needed to ensure a consistency of approach to all veterans. We welcome the renewed vigour with which the roll out of the Veterans Friendly GP Accreditation is being tackled post lockdown, but more ambitious targets will be needed in due course. We would also like to see metrics included in the annual report to: demonstrate a commitment to improving parity of veterans’ care across the UK; assist in bearing down on the ‘postcode lottery’ of healthcare provisions; and assist in holding providers to account.

Wounded Injured and Sick (WIS). The Armed Forces Covenant and NHS Constitution says veterans should (where clinically appropriate) be given priority access, but in practice this remains inconsistent, and there is a lack of clarity about the interpretation of the policy by government, clinicians, and the NHS. As a result, veterans continue to experience problems accessing surgery for complex injuries which they sustained whilst in service. In some cases this has led to significant delay in referral and treatment, with a consequent knock on in terms of patients’ mental health and pain medication. If, as the Report notes, the definition of ‘priority treatment’ is to remain unchanged, an awareness campaign is needed to increase understanding of the term amongst veterans and clinicians, in order to ensure that consistency of delivery can be achieved across the UK. In this regard, we support the intention for the working group on ‘priority treatment’ to continue its work and welcome the work of the Veterans Trauma Network, which has continued to provide an active service, and advice and guidance across England, and now Wales.

Quantifying its impact in due course in the Report would also be welcomed.

Section 7 – Families

We welcome the introduction of the UK-wide Service Families Working Group, with representation from all nations, NHS England, NHS Improvement, MOD and the Families Federations to address long term policy issues. We suggest that the families of veterans who have been medically discharged within the last 12 months are also represented to ensure the full picture of Service life is captured.

Veterans Mobility Fund and the Veterans Hearing Fund. The two funds, made possible by government grants, have made a significant impact to thousands of people’s lives over the past five years but all funding/grants will have been spent by the end of 2020. We would ask that consideration be given to the provision of further funding through the Veterans Medical Funds to ensure the targeted continuation of support in these key health areas.

Personalised Care for Veterans (incl. IPC4V). The launch of this initiative was warmly welcomed and Cobseo members remain engaged in supporting veterans to access personalised care packages where appropriate. However, we would welcome greater recognition of the life-changing support that this joint initiative brings, stressing the importance of veterans charities working with NHS services, the Defence Transition Services and the Veterans Welfare Service, both in terms of delivering support and in evaluating the effectiveness of the improvements made to the quality of life of those affected.

Prosthetics. Blesma is monitoring closely the impact of the pandemic on the ability of the NHS to deliver prosthetics services to veterans with attributable amputations. NHS Limb Centres are still in a period of significantly reduced service, providing emergency support to enable veterans to retain their mobility. The Service has had to redeploy staff to other areas and meet the requirements for increased IPC (Infection, Prevention and Control measures) and social distancing throughout the crisis. As government (and devolved administrations) work towards a gradual and safe return to normal working, Blesma anticipates a backlog of cases and a need to provide considerable additional support.

Mental Health. We welcome the introduction of the seven pilot schemes for the proposed High Intensity Service for those in the most acute need. However, given the complexity of need likely to present, and the short life span of the pilot schemes, care will need to be taken to understand the impact for veterans and their families in the development and subsequent rollout of the long term service that will emerge. Charities report a worsening impact on chronic patients as the challenges of COVID-19 unfolds, and this will have to be factored in to the service as it develops.

The Report also highlights other initiatives to improve support for veterans facing mental health challenges, but clear metrics and targets are needed to demonstrate outcomes. Better metrics will make it easier to see where possible gaps exist, too. On the basis of data in the Report, TILS and CTS waiting times to March 2020 remain well outside targets, with waiting times under the Complex Treatment Service worsening significantly, and the assurance of additional resources to redress this had yet to lead to demonstrable improvement. In light of this, we are also aware that some injured veterans are discharged from the Armed Forces before receiving a full assessment of their mental health needs, or a formal diagnosis. This needs to change and action will be needed to ensure personnel in need do come forward, and those, who do need veteran specific mental health support, will have sufficient opportunity to access it whilst still serving.

Suicide. We welcome the development of a range of suicide reduction communication material and the introduction of a range of regional pilots looking at (near) Real Time Suicide Surveillance of completed and attempted suicides. Taken together with the extension of the Kings College longitudinal veterans study, and its expansion to include updating on an ongoing basis to provide real-time monitoring of suicides, these initiatives represent some progress. However, we remain concerned that more could be done to improve data on veterans' suicide, including the capture of appropriate data by Coroners, to improve our understanding of 'at risk' groups and, from that, to provide further support through better targeted interventions

DMRC Stanford Hall. In 2019 we welcomed the news that there would be a scoping study to consider widening access to DMRC to those veterans with attributable injuries who meet the Complex Prosthetics Assessment Clinic (CPAC) referral procedure. Whilst appreciating that the pandemic has refocused priorities, we continue to urge a speedy resolution and the widening of access where appropriate to injured veterans with ongoing complex rehabilitation needs. This broadening of access could also impact the cohort of veterans with attributable amputations who currently get limited physiotherapy support post-surgery (for example where the veteran has had revision surgery on their residual limbs); and sessions are often limited in number, and rehabilitation delayed, with the consequent impact on their health and wellbeing. A holistic approach to rehabilitation, delivered at DMRC and locally within Limb Centres by Physiotherapists experienced in supporting amputees, would have real impact. We look forward to the outcome of the working group established to review options on the way forward.

Mesothelioma. A very recent study by the charity Mesothelioma UK (the Military Mesothelioma Experience Study - MiMES) into the impact of asbestos on the veteran community has highlighted the potential for veterans diagnosed with the disease to be disadvantaged financially in comparison with their civilian counterparts in respect of compensation. The study concludes *in te alia* that armed forces compensation payments are capped, and do not take into consideration age, estimated loss, and dependants, in contrast to civilian awards, which do. Furthermore, armed forces compensation cannot be claimed posthumously. We would ask that these disadvantages are reviewed and addressed as a priority.

Section 5 – Accommodation

No Homeless Veterans Campaign. The Report doesn't cover either the challenges faced by providers of supported housing, or the complex issues related to veteran rough sleeping. Whilst statistically the numbers of veterans rough sleeping are not disproportionate to the general population, the complexity of the underlying issues for veterans are worthy of highlighting and of addressing further.

Local Authority Disabled Facilities Grants.

Scope remains for the timeliness and provision of Local Authority Disabled Facilities Grants to be improved. At present, these grants can take years to be implemented, which of itself is too long, but for the elderly veteran population it can mean some of them don't live to see the implementation of the housing adaptations they require.

Section 6 – Inquests and Judicial Engagement

The War Pensions and Armed Forces

Compensation Chamber (WPAFCC). In last year's Observations we highlighted that the WPAFCC was consistently failing to meet its KPIs. Those that come before the Tribunals in all four Administrations are amongst the most vulnerable members of the AFC, and deserve a prompt and efficient service. After an improvement at the beginning of the year, the situation has regressed. The reasons are a combination of incomplete casework, a lack of support, and inadequate staff resource. Last year we used the words 'remedial action is being taken by the Administrations, Veterans UK and the Service Charity Sector'. A year on and the situation remains unacceptable, and we would urge further collective effort. For the last four years we have also urged action to deliver 'Direct Lodgement'. Those making appeals to the WPAFCC do so through the MOD, the respondent organisation. In all other areas (e.g. employment) the appeal is made directly to the Tribunal concerned. The absence of Direct Lodgement causes delay, and gives the impression that the WPAFCC is not independent. Scotland and Northern Ireland have successfully introduced Direct Lodgement, but another year has gone by without progress in England and Wales. We would strongly urge the government to give legislative priority to this issue.

Northern Ireland Legacy Inquests. The programme of 43 outstanding or adjourned inquests in Northern Ireland and the ongoing PCNI investigation into some 1,200 outstanding deaths considered attributable to the 'troubles', has led to a rapid increase in the number of simultaneous investigations being conducted; many involving veterans. We welcome the improving structures to support veterans, such as the introduction of Veterans Visiting Officers, as both the Army and DJEP get a better understanding of the coroner's requirements, and put in place further initiatives

to meet veterans' needs. However, we remain concerned that despite ongoing discussion, three specific issues have yet to be resolved satisfactorily: the provision of funding – met currently by regimental charities – to ensure additional veteran welfare and pastoral support generated by the increasing levels of activity is available, including the necessity to bridge the gap between statutory provision and immediate need for those with mental health challenges; data sharing constraints between agencies need to be further overcome to ensure the effectiveness of the new support systems are not unduly hampered; and further work is needed to develop a more coherent and effective communications plan to ensure the veteran community is fully aware of the support that is available, and of the role of Veterans UK as the government's lead agency.

Section 8 – Transition and Through-life Support

Holistic Transition. We welcome the publication of the 'Defence Holistic Transition Policy' (JSP100), but would highlight the lack of focus still given to the medical discharge process, and those leaving service as a result of injury or illness. There is no mention of the medical discharge process, despite there currently being significant gaps in support, and no solutions to the challenges wounded, injured and sick veterans face in dealing with the overly complex medical and financial processes.

Equality, Diversity and Inclusion. We welcome OVA and MOD commitment to engage with minority veterans' communities to address the issues they face. However, the Report is silent on equality, diversity and inclusion at a time when such issues are ever more in the public eye. In the 20th anniversary year of the lifting of the ban on the open service of LGBT+ personnel, the emergence of the new charity Fighting with Pride (FWP) has been warmly welcomed across the Service Charity Sector. Concurrently, the Black Lives Matter campaign has shone a new light on BAME issues, and Cobseo has this year, created a female veterans cluster group, which brings together a wide range of charities, academic staffs, and representation from the MOD and OVA to highlight issues that are specific to female veterans and to seek improvement on current levels of support to them, not least in respect of mental health; with financial support from NHS England to undertake a research scoping study, which is now underway.

It is a unique feature of the LGBT+ ‘ban’ that whole generations of the LGBT+ veteran community were affected by the hardships, isolation, and loneliness of secret lives, and the consequences that discovery brought. For many, the impact of dismissal or forced resignation endures. Cobseo and major charities, including SSAFA, are committed to supporting work to address the ongoing impact of historic wrongs on the health and wellbeing of veterans, whilst ensuring that diversity, equality and inclusion are explicitly supported, and that disadvantage, where it still exists, is addressed.

Support for Veterans in the Criminal Justice

System. We welcome the two innovative pilot programmes included in the Report: the HMPPS Initiative to create a Veterans Hub in Holme House Prison, and the NHS Regroup Programme, which provides a pathway supporting veterans through from Police Arrest through to Probation Supervision. Support is needed for veterans in the Criminal Justice System not least because veterans can be unwilling to disclose their service or to engage with civilian support, as they feel their life experience will not be understood. This places them at a disadvantage compared to civilians and can mean they effectively have no support. The support provided to veterans in the Criminal Justice System reduces re-offending and improves the lives of veterans’ family members and their communities. We look forward to the successful implementation and roll-out of these pilots.

Section 9 – Business and the Community

Engagement. The Strategy for our Veterans identified that the ‘effective delivery of services to Veterans require the public, private and charitable sectors to work together’. The establishment of the DRM/Cobseo Communications Hub, and its presence on the MOD website, has been a step towards improving the flow of information between charities, the business community, and government, but there is still significant work to be done to bridge the gap between charities and business, and ensure that the private sector understands the role of the Service Charity Sector. The development of the webpage is a positive move to host all related content in one place, but further promotion and external action is needed to be done to ensure that as many businesses as possible are aware of the positives of employing veterans.

Self-Employment. The Armed Forces Covenant Guidance Notes to Businesses was changed in 2017 to include guidelines on how businesses can support self-employment, or business ownership, by veterans, their spouses, or reservists. There is only one reference in the Report to either self-employment or business ownership, and no reference to what the Covenant signatories are doing against the guidelines to support this growing sector. Given the impact of the pandemic on employment, and with the likelihood that many more veterans will have to explore self-employment as a viable career option, this represents an oversight which needs to be addressed.

Conclusion

The period covered by this year’s Covenant Annual Report has been exceptional. Understandably, the priority of the pandemic has left limited capacity for other areas of government business and, as a consequence, many of our observations are carried over from the 2019 report. If we are to move forward in a meaningful way over the next twelve months, greater traction will be needed from all areas of government, and particularly from the Cabinet Office, through the MCVB and the CRG. The Service Charity Sector makes a significant contribution to the delivery of both the Covenant and the Strategy for our Veterans, but the scale of that contribution is under threat as a result of the pandemic. If the predicted reduction in charitable services comes to pass, our most vulnerable veterans will be significantly affected. To deliver the Covenant effectively, the government must either pick up the full requirement itself, or help the Service Charity Sector to sustain its current levels of provision.

Observations from The Royal British Legion

Introduction

The Royal British Legion welcomes this year's Covenant Annual Report and the updates it contains. We recognise that a significant part of the reporting period for this year was affected by the pressures of COVID-19 and the impact that this has had on plans to support the Armed Forces community. That being said, we are glad to be able to welcome significant progress in some key areas which the Legion has highlighted in previous annual reports and elsewhere.

First and foremost is the agreement by governments and Parliaments to the inclusion of a question in the next national census on veteran status. This will provide a dramatic improvement in the understanding of the veteran population and how best to assist it, and we are grateful for the support of all those who have made this milestone change happen. Our only disappointment was the decision against inclusion of such a question in Northern Ireland. We also note the concern raised by stakeholders in Scotland at the delay of the census there by a year.

Governance

We welcome the work of the Office for Veterans' Affairs in maintaining a spotlight on issues affecting the Armed Forces community and driving forward activity across government. We are disappointed that the Covenant Reference Group has only met twice since July 2019 and that it does not have an advance schedule of meetings, and that the meetings of the Ministerial Covenant and Veterans Board and the associated formal meetings between Ministers and charity partners have also been rare since 2018. Whilst COVID-19 has inevitably had some impact, we hope that the lack of formal opportunities for accountability and feedback are urgently addressed.

The government's commitment to further incorporate the Covenant into law is one that has the potential to result in significant changes to the Covenant's operation and effect. We await the proposals with interest and will be keen to ensure that the Covenant's achievements at all levels and in all policy areas are protected and expanded through the legislation.

Healthcare

During this year we have had the opportunity to participate in a working group with government and the NHS on priority treatment. We continue to have concerns about the lack of awareness and understanding, inconsistency of and inability to measure implementation, and a lack of clarity about the interpretation of the policy by government, clinicians, and the NHS. We welcome the continued commitment to monitor and improve upon this initiative, however we note that the Annex of the report concludes that this is a 'completed/terminated' topic - a status with which we disagree whilst uncertainty and variation in its application continues to exist. We also note with continuing concern the lack of delivery on the long-standing commitment on improving the transfer of medical records, a project which is now years behind its original schedule.

The 2018 Report had a commitment for the DHSC, Public Health England and NHS England to develop Covenant awareness in alcohol misuse services for veterans and feed into the government's Alcohol Strategy. We are concerned that there appear to be no significant mention at all of alcohol in this year's report and we would welcome an update and progress on this pledge.

As we noted in last year's report, a Quinquennial Review of the Armed Forces Compensation Scheme is now due. We look forward to confirmation that this will be under way as soon as possible and early engagement with it.

Education

We welcome the continued support provided to schools through the extension of the Education Support fund, and the Supporting Service Children Wales Fund. On the Service Pupil Premium (SPP) we would like to see consideration of extending its eligibility to early years and 16-18 year-olds, so that these crucial periods of education also benefit.

Accommodation

The challenges facing divorced and separated spouses and partners of Armed Forces personnel in accessing social housing is an issue we first raised in 2016 and so we were delighted to see this addressed in England this year through the new statutory guidance for local authorities. We would now urgently wish to see this change matched in the rest of the UK so as to ensure consistency for the Armed Forces community wherever they are, and that the disadvantage that was acknowledged by the need to introduce new guidance does not continue outside England.

Inquests and Judicial Engagement

In last year's Annual Report, we highlighted our concerns about the government's proposals for a new time limit on the ability of members of the Armed Forces community to bring civil claims against the MOD. Whilst welcoming the intent of the Overseas Operations (Service Personnel and Veterans) Bill, we reiterated these concerns about this specific aspect, and the need to avoid any breach of the Covenant, during its passage through Parliament.

Family Life

The report 'Living in Our Shoes' on the needs of Armed Forces families provided a comprehensive overview of many issues of concern to families, including a number of topics that have been raised by external partners in previous Annual Reports. We look forward to the government's response and a published plan and timetable for the implementation of its recommendations.

This year, loneliness and isolation have once more come to the fore because of COVID-19 restrictions. This topic previously featured in the Veterans' Strategy action plan; however, it does not feature in the update on progress on that strategy in the report and so we hope that it is given a high priority as the plan is taken forward. Similarly, following the welcome inclusion of questions on loneliness and isolation in the 2019 Service Families Continuous Attitudes Survey, we would still like to see comparable data captured through the other Continuous Attitudes Surveys.

Transition and Through-life Support

We welcomed the Defence Holistic Transition Policy and the steps that have been taken to improve the transition process.

We continue to maintain that military compensation for social care means tests should be disregarded in Northern Ireland, as is now the case in the rest of the UK where this disadvantage was addressed in 2017. We note that military compensation will be disregarded under Universal Credit (UC), but with full implementation of UC currently scheduled for 2024, we would in the interim like to see a full disregard for War Pensioners claiming Employment Support Allowance. We would also like to see all remaining compensation disregard discrepancies addressed, so as to ensure that those awards are never treated as normal income.

The Legion and others have continued to campaign for the removal of the visa fees for Indefinite Leave to Remain faced by non-UK personnel and their families who wish to stay in the country they have served, after leaving the Armed Forces. There has been widespread cross-party support for this proposal, and we welcome the explicit recognition of this disadvantage in the report, and the discussions that there have been with and inside government on this topic. However, this issue has been raised in Covenant Annual Reports consistently since 2016 and each year more of those who served our country are faced with exorbitant fees and risk getting into debt. The nature of the issue is now well known and widely accepted, and so we would like to see it now resolved without further delay.

We are concerned that yet again there is no update in the report on the outstanding recommendations of the Phillips Review on veterans and the criminal justice system.

Business and the Community

The uncertainty created by COVID-19 has affected all sectors of the UK economy, inevitably including veterans and their families. The Legion has seen an increase in those seeking urgent financial support. Measures to ensure that former members of the Armed Forces gain and retain employment are therefore more necessary than ever. We therefore welcome the increased support by organisations that have signed the Covenant described in the report.

However, employment assistance is only one aspect of the way that Covenant signatories can provide support to the Armed Forces community. We would welcome further expansion of the measurement of effectiveness to capture and encourage support of the Armed Forces community by organisations as service providers, as well as in their role as employers.

The Armed Forces community has been touched by COVID-19 in many different ways. On the one hand it has played a key role in the national effort, whether through deployment, welfare work or volunteering during the pandemic. On the other hand, the age profile of the community has placed it at considerable vulnerability to the disease, with an estimated 1 in 6 of those age over 70 having served in the Armed Forces. This year has seen considerable pressure on public services but also on the Armed Forces charity sector, and the present model of delivery for the Armed Forces community and on the promise of the Covenant may require examination in the coming years. The Royal British Legion stands ready to work with all partners to ensure those pledges can endure.



CHAPTER 1 – GOVERNANCE

Governance across the UK

The UK Government is taking a joined-up approach to meeting the needs of the whole Armed Forces community, with the MOD and Office for Veterans Affairs working closely with other government departments, the Devolved Administrations and the charitable sector. The Ministerial Covenant and Veterans Board (MVCVB) has been reconvened to provide delivery oversight of the Covenant and Veterans' agenda and will meet in the new year. The Covenant Reference Group remains the senior official-level meeting responsible for ensuring good governance of the Covenant and sits at the heart of government to facilitate, monitor and report on the work undertaken by Government to fulfil the obligations set out in the Armed Forces Covenant, in order to improve outcomes for members of the Armed Forces community. At the working level, there are a number of groups to ensure that those providing services to the Armed Forces community are represented within the governance of the Covenant.

Next year we will take the opportunity, in light of the establishment of the Office for Veterans Affairs, and the UK Government's commitment to further enshrine the Armed Forces Covenant into law, to review the governance of the Covenant to ensure its continuing effectiveness.

Governance in Scotland

The Scottish Government has a dedicated Veterans Minister who is accountable to the Scottish Parliament and has delivered an annual update to Parliament every year since 2017, following a recommendation made by the Scottish Veterans Commissioner. This is accompanied by a published report outlining the support given to Armed Forces and veterans communities across Scotland.

Scotland was the first part of the UK to appoint a Veterans Commissioner. The role of the independent, non-statutory Veterans Commissioner has now been firmly embedded and in June 2020 he published an at-a-glance assessment of progress made against each of the former commissioner's 63 recommendations. This will be followed by a further, more detailed progress report before the end of 2020.

The commissioner published a scene-setting paper on transition in November 2019 and intended to publish an employment, skills and learning paper in the spring of 2020. This will now be published in the autumn.

The Scottish Government is part of the cross-UK Veterans Strategy Co-ordination Group. This will enable the UK Government and devolved administrations to co-ordinate delivery of the Strategy for Our Veterans across the UK.

Governance in Wales

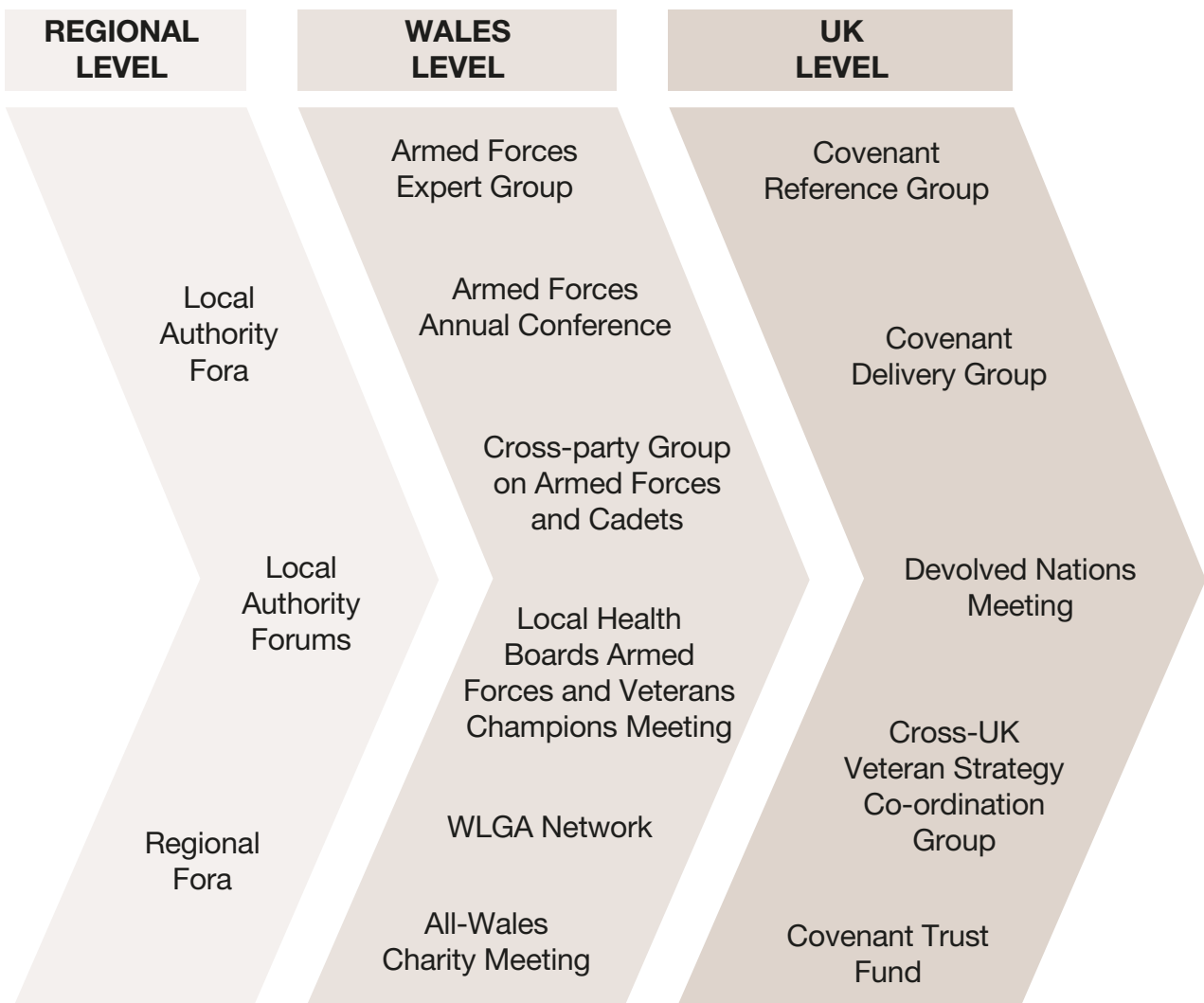
The Welsh Government has a framework in place to encourage collaboration, identify key issues and share best practice within Wales, ensuring close links with the UK Government and partners. In Wales, regional and local Armed Forces forums provide focus within communities for key agencies to deliver for their Armed Forces communities. These are closely supported by the Armed Forces Liaison officers and Armed Forces champions.

At an all-Wales level, the Armed Forces Expert Group, chaired by the Deputy Minister for Housing and Local Government, provides oversight and a strategic voice on behalf of the Armed Forces community. Membership includes 160th (Welsh) Brigade, the Families Federations, the Welsh Local Government Association (WLGA), charities and statutory agencies. The Welsh Government also

hosts an annual conference allowing providers to share best practice. Other important forums include the WLGA Armed Forces network, where local authority champions discuss key developments and issues that are shared with Welsh Government and key partners. The Local Health Board Champions meeting and the All-Wales Charities meeting, which provides a shared forum for the charitable sector to discuss operational and strategic priorities.

The Welsh Government supports UK development and delivery of the Covenant through attendance at the Covenant Reference Group, Covenant Delivery Group and Devolved Nations meeting. Engagement with the OVA on the Strategy for Our Veterans is maintained through regular meetings and collaboration. Welsh Government officials also support the Covenant Fund Trust process.

Welsh Government governance



Welsh Government is part of the Cross-UK Veterans Strategy Co-ordination Group, which enables the UK, Scottish and Welsh Governments to co-ordinate delivery of the Strategy for Our Veterans across the UK.

Context and governance in Northern Ireland

Northern Ireland continues to build on its successful arrangements to ensure the application of the Armed Forces Covenant. Headquarters 38 (Irish) Brigade oversee the needs of serving personnel and their families. RFCA Northern Ireland and the Veterans' Support Office (VSO) maintain oversight of the other dimensions of the Armed Forces community.

A Northern Ireland Veterans' Commissioner has now been appointed, fulfilling a UK Government commitment in the New Decade New Approach agreement. Extra UK Government funding has also secured an additional two posts for the VSO. The number of individual new cases dealt with by the VSO averages four to five cases per month and this year has included a complex legal case from within the Foreign and Commonwealth veteran community in Northern Ireland. The Commissioner and his secretariat are non-statutory while the VSO is a statutory body. However, the two will work in parallel, the first monitoring, championing and promoting veterans' interests while the latter continues to co-ordinate the delivery of support services.



CHAPTER 2 – ACTIVITY BY THE COVENANT FUND TRUST

The Armed Forces Covenant Fund Trust supports the Armed Forces Covenant by delivering funding programmes that create real change to Armed Forces communities across the UK. It looks after the £10 million per annum Covenant Fund and distributes additional funds from HM Treasury to support the Armed Forces community through the Veterans Mental Health and Wellbeing Fund, and the £3 million awarded by HM Treasury to support veterans community centres.

Covenant Fund

Funding from the Covenant Fund has been used to fund local projects that support Armed Forces Communities through the Armed Forces Covenant Local Grants programme. The programme has run since 2015, awarding a total of £11.6 million for local projects. To inform the future grant-making programme, the Trust ran an open consultation, publishing the results in May.² In total, 265 responses were received from individuals and organisations, most of which were contributed by individuals from the Armed Forces community or local organisations. Of those who took part, 91% agreed that social isolation was a key issue to focus on in future grant-making. Mental health, veterans being at higher risk of isolation, and support for Armed Forces families were the top three issues that emerged from the responses received, with support particularly needed for veterans of all ages and their carers, and Forces families including Service children.

In programmes for the 2020/21 financial year, the Covenant Fund will make small- and medium-sized grants to reduce isolation within Armed Forces communities and will give medium-sized projects support through mentor organisations to improve sustainability and improve collaboration. Covenant Fund programmes will also support Armed Forces communities that have faced challenges as a result of the COVID-19.

Significant grants for projects that support Armed Forces families were made through the Removing Barriers to Family Life programme. In February, £7.2 million was awarded to 60 projects across the UK that support Armed Forces families, including serving families, young people and veterans' families, including those with caring responsibilities. A range of projects were supported, from supporting spouse and partner employment and the development of the co-working hubs opening at or near various military bases, to supporting those families transitioning out of the Forces or becoming more dispersed with the advent of the Future Accommodation Model and the different challenges this may bring. Some projects will focus more on the families and carers of veterans, while others will support the children and young people in military families, addressing their sometimes unique needs and building family resilience. With the earlier grants made under the Families in Stress programme in 2017 and 2018, £11.8 million has been awarded to projects supporting Armed Forces Families through targeted strategic programmes. The Trust's funding for families through these two programmes is being evaluated by the Directory of Social Change and will be published in summer 2021.

² <https://covenantfund.org.uk/wp-content/uploads/2020/05/Local-Grants-consultation-report-FINAL-200520NS.pdf>

Veterans' Mental Health and Wellbeing Fund

In the 2018 Budget, the Chancellor of the Exchequer awarded £10 million to the Trust to support projects that will improve the mental health and wellbeing of veterans. In March 2020, a further £10 million was awarded to the Veterans' Mental Health and Wellbeing Fund.

Part of the HM Treasury-funded Veterans' Mental Health and Wellbeing Fund, the Positive Pathways programme was launched in 2019. More than £7.5 million has been awarded so far, all working to improve the mental health and wellbeing of veterans. In the financial year 2019/20, the programme funded 114 projects across the UK, with a mix of activities ranging from sailing to eco-therapy and conservation to sewing – many designed with veteran involvement at the planning and delivery stages. This programme will continue in the 2020/21 financial year. In conjunction with the financial support a grant award brings, all grant holders can receive further support and mentoring through the strategic partners. This is a group of experienced organisations awarded funding to specifically support this programme with their wealth of knowledge and experience of the sector.

The Trust measures the impact of the grants that it funds. A new online approach to measure grant impact by measuring improvements to veteran wellbeing has been used on the Positive Pathways programme. This approach is being rolled out across more programmes run by the Trust.

Veterans' Community Centres Fund

In the 2018 Budget, the Chancellor awarded £3 million to fund renovations and improvements to community spaces used by veterans through the Veterans' Community Centres programme. The programme was a specialist pot of funding for applicants from Armed Forces charities with an existing building that required refurbishment. Funding was available to make improvements to roofs, car parks, toilets, electrics, windows and energy efficiency improvements, all to ensure these valuable buildings remain fit for purpose and continue to offer a great hub for veterans to socialise, get involved in local activities and combat isolation or loneliness. Awards were offered in two bands – up to £30,000, and between £30,000 and £150,000. In total, 67 grants were made, totalling £2.85 million for repairs, refurbishment and accessibility alterations, the majority of which will be completed during 2020/21.

Veterans' Community Centres Fund in Dulwich, London

The Royal British Legion Dulwich Branch received £150,000 to provide a disability-friendly environment at their centre, allowing more people to be able to get involved with the group's activities. Paula Neale from the branch said:

"We're very excited and very much appreciate the opportunity to improve the facilities for the veterans that use our premises; a big thank you to the Armed Forces Covenant Fund Trust. We provide a friendly, welcoming community experience for the veterans and they have a feeling of belonging and can come to any of the members to ask for help without feeling bad for asking. The improvements are not just physical. Improved lighting will enable them to be more independent, the new flooring will allow them to feel safer to get up and have a dance without the fear of falling, a new kitchen means we can provide a hot meal, which could be the only hot meal they have. [Veterans] can eat and chat to each other, rather than eating alone [at home]. We have a D-Day veteran who is 95 years young and it is being able to come to our branch and club that keeps him young along with a little drop of the hard stuff! He gets to catch up with old comrades and meet our existing members and this increases his circle of friends. Thank you once again for awarding us the funding and providing us with this amazing opportunity to improve people's lives."

Responding to COVID-19

The Trust responded to the significant challenges arising from the COVID-19 by providing grant holders with more time to complete their projects or to help them to change their projects so they could be delivered in COVID-secure ways as appropriate.

In March, using funding from the Veterans' Mental Health and Wellbeing Fund, the Trust launched the Veterans Should Not be Forgotten programme to provide immediate support for vulnerable veterans with reduced social contact. The Trust worked closely with the Association of Drop-In Centres, Age UK and Cobseo to ensure those organisations working with the most vulnerable veterans had the opportunity to apply for up to £20,000 to offer much-needed support. In May, 119 projects were awarded a total of just over £2 million.

In May, using funding from Covenant Fund, Forces Communities Together was launched. This is for six-month projects that could take place during social restrictions and give support to those who cannot access services or have limited contact during this period of isolation. In August, grants were made to 100 organisations.

In May, the Trust launched the COVID Impact Programme, as part of the emergency support package overseen by the Department for Digital, Culture, Media and Sport (DCMS). This programme awarded £6 million in funding from the MOD, Office for Veterans' Affairs and HM Treasury to support Armed Forces charities and Community Interest Companies (CICs) who were delivering services to veterans, Armed Forces families and others from the Armed Forces community. In June, 102 charities and CICs were awarded funding.



CHAPTER 3 – HEALTH AND HEALTHCARE

Healthcare across the UK

HeadFIT

Following a partnership with the Royal Foundation, the MOD has co-developed **HeadFIT**, a website that hosts a suite of video, audio and text-based tools to support mental fitness and promote the good management of good mental health within the Armed Forces community. In response to the COVID-19 pandemic, and in recognition that it could affect the mental wellbeing of some individuals, HeadFIT's introduction was accelerated and the website was launched in May. Evaluation of the website and its use will be completed in late 2020, following which the MOD will review how best to develop HeadFIT in future.

Defence Recovery Capability Review

The Defence Recovery Capability Review was conducted between September 2019 and March 2020, with the aim of holistically understanding the Defence Recovery Pathways for wounded, injured and sick personnel, evaluating whether those pathways were still fit for purpose and making recommendations on the future of the capability. It made 42 recommendations, covering policy, delivery, coherence and future aims for the capability. These were endorsed in April by the Military People Leadership Team and work on how to deliver these through partnership with the third sector is now underway. The project is expected to be completed by the end of 2022.

Armed Forces Compensation Scheme

The Independent Medical Expert Group (an advisory non-departmental public body, sponsored by the MOD, that advises on medical and scientific aspects of the Armed Forces Compensation Scheme) agreed in February that it would carry out a further review on non-freezing cold injury (such as frostbite) to the one conducted in 2017. This will be published as part of the IMEG's sixth report. The group will also consider the new evidence available on pathogenesis, genetic risk factors, clinical management and approaches with the aim of revisiting descriptors and awards. The Independent Medical Expert Group forward work programme was agreed in February 2020 by Min(DPV). The forward work programme includes other topics including Mild Traumatic Brain Injury, Musculoskeletal Disorders and analysis of Mental Health awards under AFCS.

Suicide prevention

The Defence Suicide Prevention Review Implementation Board is implementing the majority of recommendations from the Defence-focused review on suicide prevention among Service personnel. Defence is now an active member of the National Suicide Prevention Alliance

Substantial progress has been made towards signposting families to support if they are bereaved by suicide and Defence Statistics continue to monitor suicide rates in Service personnel.

In late 2020, a new post was created in Defence to deliver the outstanding recommendation – the creation and implementation of the Defence Suicide Registry. This work aims to create a database of information that can be used to learn at depth the circumstances of a suicide event and to guide the development of a comprehensive Suicide Prevention Strategy.

Healthcare in England

The Health Service Journal's Civilian and Military Health Partnership Award

In November 2019, the first Health Service Journal's Civilian and Military Health Partnership Award was held. It provided a unique opportunity to recognise and celebrate excellence in healthcare and health improvement across the UK for the Armed Forces community. NHS Sunderland Clinical Commissioning Group won the award for reaching out to veterans and their families, reservists and adult volunteer cadets. The Veterans Covenant Healthcare Alliance was highly recommended. This year's awards are still taking place and, due to the COVID-19 pandemic, have been postponed to March 2021.

eRedbook for Service children

Service children's health records are not routinely transferred on overseas postings, potentially compromising the continuity of both these and the paper 'Redbook' on a child's development when families move to, from or within England. The NHS Long-Term Plan is working towards digital child health records for the whole population in England and SSAFA (the Armed Forces Charity) has continued to be funded by NHS England and NHS Improvement to deliver an electronic Redbook (eRedbook) as a pilot in Cyprus. This is now being supplemented by a new demonstrator site in North Yorkshire, where an eRedbook will be optimised for mobile service families to understand how to support them through this new technology.

Improving support to Armed Forces families

The NHS Long-Term Plan states that "We will expand our support for all veterans and their families as they transition out of the Armed Forces, regardless of when people left the services". It recognises that families of serving personnel and veterans can experience issues with health,

wellbeing and accessing the NHS that are due to the circumstances of military life. The DHSC has set up a UK-wide Service Families Working Group with representation from all nations, NHS England, NHS Improvement, MOD and the Families Federations to address long-term policy issues. This group will be important in supporting implementation of the MOD Families Strategy and response to the Living in Our Shoes report led by Andrew Selous MP.

Building on the feedback received from Armed Forces families, NHS England is launching an engagement to further explore how best it can support their health and wellbeing needs, regardless of where they live in England. Originally planned for May 2020 and delayed due to COVID-19, this will now launch in autumn 2020.

Veterans' Mental Health High Intensity Service

Over the last year, NHS England has progressed plans to launch a new service for veterans who are struggling with their mental health, are in a mental health crisis and need urgent and emergency care or treatment. This new Veterans' Mental Health High Intensity Service (HIS) will be in addition to the Veterans' Mental Health Transition, Intervention and Liaison Service (TILS) and the Veterans' Mental Health Complex Treatment Service (CTS).

The HIS is being rolled out across England as part of a phased approach. In autumn 2020, it will start with the launch of regional pathfinders to test the proposed service model that will provide crisis care and therapeutic inpatient support, help with co-ordinating care across organisations, and support and care for family members and carers where appropriate. The pathfinders will run until the end of March 2022, with learning and insight helping to inform the final service model that will be in place for April 2022.

Veterans Covenant Healthcare Alliance

The Veterans Covenant Healthcare Alliance is a group of NHS providers aiming to improve the care the Armed Forces community receive from the NHS. Veteran Aware hospitals showcase high-quality veterans' healthcare and demonstrate their commitment to the Armed Forces Covenant by meeting a set of standards. Across the UK, 54 providers have now met these standards and been accredited as Veteran Aware, including acute hospitals, mental health and community trusts.

The Veterans Covenant Healthcare Alliance has recently secured funding to appoint seven full-time regional leads, who will work with NHS teams, Defence Relationship Management, and service charities to implement the Veteran Aware standards across more health and care providers.

Veteran Aware standards have also been developed for the NHS national and regional teams, local health systems, as well as other settings including ambulance trusts and hospices. Several organisations of each type are already well on their way to becoming Veteran Aware accredited.

Veteran friendly GP accreditation

Over the last year, the number of GP practices accredited as veteran friendly has more than tripled to over 800. Accredited practices need to meet certain criteria, including appointing a clinical lead for veterans' issues within the practice, identifying and flagging veterans on their IT system, undertaking dedicated training on Armed Forces issues, increasing understanding of veterans' health needs among all practice staff and having a Care Quality Commission rating of 'good' or higher. NHS England and NHS Improvement and the Royal College of General Practitioners continue to progress the roll-out of this initiative, prioritising areas with high numbers of veterans and allowing interested practices to sign up ahead of planned implementation. It is anticipated that, by 2022, over 25% of practices in England will have signed up and every clinical commissioning group will have at least one accredited practice in their area.

Veterans mental health accreditation pilot

The Contact Group and the Royal College of Psychiatrists are working to establish an accreditation standard for veterans' mental health service providers, funded by NHS England and NHS Improvement for the first two years. Upon joining, service providers will:

- benefit from opportunities to improve service quality through self and peer review using a set of agreed, sector-specific quality standards
- work towards gaining accreditation including a recognisable quality mark that veterans and families will be advised to seek out

- learn about and share sector-specific best practice
- engage in sector-wide networking

Progress has included the establishment of an advisory group of expert clinicians from within the sector to advise on the content of the quality standards and their application. The first pilot set of standards are due to be agreed and finalised imminently. These will be tested by 10 veterans' mental health teams from organisations across both the statutory and non-statutory (including charity) sectors, prior to the full roll-out of the scheme. This pilot will start in autumn 2020 and, when complete, the standards will be reviewed, adjusted if necessary and finalised before the planned full roll-out in autumn 2021 when the scheme will be open to all veterans' mental health services.

Veterans Trauma Network

The Veterans Trauma Network (VTN) has continued to provide an active service and advice and guidance to patients (including to families), GPs and hospital-based specialists across England. Clinical sharing of experiences (including across the devolved administrations) has supported clinical learning, pathway development and practice. The service specialities have been available to the non-veteran community (e.g. supporting police officers injured in the line of duty and members of the public injured in terrorism atrocities). The VTN is trialling complex joint physical and mental health assessment sessions – noting the often complex relationships between mental health and trauma-based physical health.

Veterans Suicide Reduction programme

Suicide reduction programmes have been active in the NHS in England and within the MOD. These two programmes have also been co-ordinated and are working towards shared data and learning. The work with the University of Manchester continues and is jointly funded by MOD and NHS England and NHS Improvement. In the area of veterans there have been two significant developments:

- A range of suicide reduction communication material has been developed from a national template and been adapted with region-specific data to cover the whole of England.

- A range of regional pilots are looking at (near) real-time suicide surveillance of completed and attempted suicides. A number of these are now investigating the collection of data on prior military service (whether this is related to the event or not). This will further inform our understanding of these rare but tragic events and enable early lessons to be learned, bereavement support to be offered and potentially prevent ‘contagion’ within communities and families.
- Following continued Ministerial and media interest in suicides in both serving and veteran UK armed forces personnel, the MOD joined forces with NHS England and NHS Improvement to commission an update to research published in 2009 by Manchester University. With an additional 10 years of data it was felt that it would be an appropriate time to revisit those findings, especially now that combat operations in Iraq and Afghanistan have been over for a few years.

The new research will focus on establishing whether there have been changes in the population at risk for veterans and then using the confidential inquiry into suicides and coroner’s inquests, explore the antecedents of suicide. The results will help both MOD (for in-service deaths) and the OVA (for veterans) to focus on where interventions might make a difference by improving our understanding of the drivers for suicide.

Response to COVID-19

NHS England and NHS Improvement have worked tirelessly to ensure those who require NHS services have been able to access them as easily and safely as possible. This includes veteran-specific services, like the Veterans Trauma Network, TILS and CTS. Up until the COVID-19 lockdown, use of the TILS and CTS continued to grow and waiting times had started to reduce. During lockdown, some clients found the circumstances increased their health

condition, while others found it helped remove some of the stimuli that exacerbated their problems. Nearly all veteran mental health appointments moved to online or telephone consultations (which some clients preferred), while some individuals were kept on stabilisation activities pending the resumption of normal services. Providers are now looking at the future safe delivery of face-to-face appointments, while maintaining a video and digital offer.



Reservists from 3rd Battalion The Royal Anglian Regiment running a COVID-19 mobile testing unit

NHS England learning from Service families

From the outset of the COVID-19 pandemic, it was apparent that NHS staff across the country would have to adapt to new ways of working, including voluntarily separating themselves from their loved ones so they could continue to fulfil their duties and protect their families. This was a new experience for many staff and the NHS wanted to provide the best possible support.

Armed Forces personnel regularly live apart from family members, often for extended periods of time. They, and their families, have developed a variety of approaches to cope with this separation in potentially stressful circumstances. NHS England and NHS Improvement Armed Forces Team approached the Naval Families Federation to see what could be learned from these families' knowledge and experiences to support NHS staff. They worked together on a project to benefit both families NHS and Armed Forces members.

Bridget Nicholson, Director of Evidence and Strategy for the Naval Families Federation, created an online 'Working Away from Home' guide, based upon the experiences of Royal Navy and Royal Marines families. This provided information and tips about how to cope during difficult times, pulling together ideas and effective practice, and including instructions for practical activities such as creating a 'jar of joy' and a 'worry box'.

The guide, which is available on the Naval Families Federation website, was shared widely across the NHS. Bridget also joined one of the NHS People Webinars to talk about how families might navigate separations and the challenges they bring, and to provide reassurance and encouragement to parents and line managers.

The UK MOD-NHS Departments of Health Partnership Board has continued to meet at director and director general level. It has now created a UK-wide clinical forum to support on clinical issues and looked at COVID-19-related issues, it also has the potential to look at emerging topics such as pain management and traumatic brain injury.

Healthcare in Wales

Veterans NHS Wales

The Welsh Government has continued to provide approximately £700,000 annually to Veterans NHS Wales, enabling the service to deliver evidence-based treatment for Service-related mental health conditions. Responding to the demands on the service, Welsh Government has committed to providing an additional £85,000 from October 2020 to 31 March 2021 for the three therapy posts, previously funded by Help for Heroes. This will maintain capacity of the service to meet demand and deliver evidence-based treatment in local health board areas across Wales.

Prosthetics

The Welsh Government, via the NHS, supports veterans who have lost limbs during their service, to ensure they have the prosthetics they require to help them succeed in their future lives. From April 2019 to March 2020, the Welsh Health Specialised Service Committee agreed 12 requests for war veteran prosthetics at an estimated cost of £113,401. These provisions included replacement devices, upgrades and specialist blades.

Working with partners, Welsh Government has taken action to further support veterans requiring prosthetics. This year, it was identified that limb centre staff in Wales needed specialist prosthetic socket training as a result of the introduction of new sockets. To fund this training, £50,000 was provided, ensuring veterans within Wales continue to receive the ongoing support they require. This is also offering improvements for other core service users. The Welsh Government has also established a new forum with BLESMA (the Limbless Veterans) and the NHS to ensure any issues for amputee veterans are raised and discussed by the appropriate services.

Veterans Trauma Network

In October 2019, the Deputy Minister for Housing and Local Government launched the Veterans Trauma Network (VTN) Wales. VTN Wales is a collaboration of specialists in the Welsh tertiary centres with relevant expertise, who are interested in veterans' care and can deal with problems related to a veteran's time in service. A veteran is prioritised on a clinical basis only, just as any other NHS patient. This is in line with the NHS constitution and the Armed Forces Covenant, which sets out that veterans should face no disadvantage in accessing care and bespoke services for combat-related conditions. This is reiterated in our guidance 'Armed Forces Covenant – Healthcare Priority for Veterans'.³

Fast-track Referral Pathway

Providing secondary and specialist care, the Fast-track Referral Pathway prioritises access to treatments for Service personnel who are actively serving but are currently graded as 'medically not deployable'. From April 2019 to March 2020, the Welsh Health Specialised Services Committee agreed funding for 31 fast-track treatments at an estimated cost of £72,473.76.

Substance misuse support

'Working Together to Reduce Harm' is the Welsh Government's Substance Misuse Delivery Plan. In the delivery plan, area planning boards and Welsh Government have a commitment to work with Armed Forces Liaison officers and military charity organisations to ensure services are accessible to and meet the needs of veterans, including those with co-occurring conditions. Veterans continue to be supported through the services provided by area planning boards, with 329 veterans having received treatment and support during 2019/20. Of these, 323 were new referrals.

Healthcare in Scotland

Scottish Veterans Care Network

The Scottish Government has established the Scottish Veterans Care Network, which will help to support veterans with issues accessing care and health inequalities. The network will be formally launched in November 2020.

Engagement with a broad range of stakeholders has enabled the network to create a delivery strategy, setting out immediate priorities and a strategy for implementation of these. One of the immediate priorities of the Veterans Care Network will be the creation of a Veterans Mental Health Action Plan.

Identifying veterans

Since 2019, it has been a core part of the curriculum for new GPs to undertake training and demonstrate awareness of veterans and their specific issues. GPs should therefore be better prepared to initiate a conversation with patients on their Service career history and any resulting medical needs. In addition, the Scottish Government is working with NHS Scotland to ensure declared veteran status on a patient's medical record, so that this is immediately visible to the GP during each consultation.

Certificate of vision impairment

The Scottish Government worked with Scottish War Blinded to update the certificate of vision impairment form and related guidance for patients and Ophthalmologists. It now asks if the individual has ever served in the Armed Forces, so that practitioners can refer veterans to the free services and support offered by Scottish War Blinded. Updated forms and guidance were issued to clinics from November 2019.

Hearing aid replacements

In late August 2020, a letter was sent from the Scottish Government's National Clinical Director and Healthcare Science National Lead to all audiology departments across Scotland. This set out the expectation that veterans should receive like-for-like replacements of hearing aids. Hitherto, some personnel transitioning out of the Services had been given less effective hearing aids than those given during their service.

A veteran's son told Action on Hearing Loss that his father was "delighted with the quick service" and that things at home had improved so much and that "it is a great relief" for the family.

3 <https://gov.wales/sites/default/files/publications/2019-07/armed-forces-covenant-healthcare-priority-for-veterans.pdf>

Chronic pain management

The Pain Association Scotland (PAS) ran a very successful pilot from 2018 to 2019 on chronic pain self-management for 41 veterans. This was in the format of group meetings at Erskine House and through one-to-one sessions with 11 veterans. The pilot received excellent feedback from participants, with some describing the course as “informative, educational and interesting”, and commenting that the course has “taught me to accept, manage and deal with” pain. PAS has secured a further 18 months of funding as of March 2020, and will put the pilot findings before the National Advisory Committee for Chronic Pain with the aim of embedding the services provided.

Mental health first aid and befriending

In 2020/21, the Scottish Government provided £3,000 of funding to hold two one-day befriending training sessions for up to 25 individuals as well as four two-day mental health first aid training sessions per up to 12 individuals from the veterans community. It is anticipated that they will now take place in spring 2021 following postponement due to COVID-19.

Support during COVID-19

During the COVID-19 response, the Scottish Government worked closely with Veterans Scotland and its Health Pillar Group to ensure that up-to-date advice was shared quickly, that the Scottish Government understood what support was being provided by third sector organisations to veterans and to offer support.

NHS Inform has pages dedicated to veterans’ health and their rights and during the COVID-19 pandemic this information was maintained with advice so that the website remained the definitive information source for veterans’ healthcare.

Healthcare metrics

Cancer wait times in England

UK Armed Forces personnel requiring cancer treatment receive care through the NHS. The assessed wait times for cancer were similar or better for all four measures, illustrating no systematic disadvantage for UK Armed Forces personnel when compared to England (Annex B Table 4). However, for both England and the UK Armed Forces, two of the measures (wait time for all cancers and wait time for symptomatic breast patients) were below the target. Cancer wait times are a priority for the Department of Health and Social Care, NHS England and NHS Improvement with the NHS Long-Term Plan making commitments to reduce waiting times for the diagnostic element of the pathway.

England mental health

Improving Access to Psychological Therapies (IAPT) was the first national mental health dataset to contain an indicator for UK Armed Forces veterans and their families. For the past six years, UK Armed Forces veterans who were referred for psychological therapies in England were seen as quickly as the non-veteran population. For both six-week and 18-week pathways, waiting times were above the respective targets (6 weeks or less in 2019/20: veteran 89.1%; non-veteran 87.4% – see Annex B Table 5). Over the past six years, a higher proportion of UK Armed Forces veterans compared to non-veterans entered and completed treatment (referral completed treatment in 2019/20: veterans 42.4%; non-veterans 35% – see Annex B Table 6). The recovery rate for UK Armed Forces veterans was at least as good as that for non-veterans (referrals moved to recovery in 2019/20: veterans 47.6%; non-veterans 46.1% – see Annex B Table 7). However, recovery rates continued to be below the 50% government target. NHS England and NHS Improvement have instigated a number of initiatives to improve the recovery rates and have seen an increase since 2014/15 (referrals moved to recovery in 2014/15: veterans 41.5%; non-veterans 40.3% – see Annex B Table 7). Initiatives include supporting the lowest-performing clinical commissioning groups and offering workshops to share best practice to all commissioners and providers.

In April 2017, NHS England launched the Veterans' Mental Health Transition, Intervention and Liaison Services (TILS) as part of the NHS Five-Year Forward View. The service supports those approaching discharge and veterans by providing a range of treatment, ranging from early support to therapeutic treatments for complex mental health difficulties and psychological trauma. As at 31 March 2020, almost 11,500 veterans had been referred to this service, which offers a holistic care package that may include help with housing, employment, alcohol misuse and social support (Annex B Table 8). Those assessed may be referred to other NHS services, such as IAPT. In 2019/20, the wait times to be offered a face-to-face assessment (37 days) were outside the target of 14 days (Annex B Table 9). Additional resources have been approved, which will increase capacity and reduce wait times.

The NHS Veterans' Mental Health Complex Treatment Service provides intensive care and treatment for veterans whose military complex mental health problem hasn't improved with earlier care and treatment. As at 31 March 2020, over 1,300 veterans had been referred to this service. Of these, over 95% were accepted, which resulted in over 18,000 appointments being delivered. In 2019/20, the average wait times to be offered a face-to-face assessment increased to 33 days which was due to the number of referrals exceeding capacity in the first half of the year. Additional investment in staffing has increased capacity resulting in reduced wait times for the second half of the year (Annex B Table 11).



Royal Air Force personnel supporting Birmingham City Council in delivering and collecting COVID home testing kits in Selly Oak, Birmingham as part of a Military Aid to Civilian Authority (MACA) operation known as Op RESCRIPT



CHAPTER 4 – EDUCATION

Education across the UK

The Service Children’s Progression Alliance

The Service Children’s Progression Alliance (SCiP) has a vision of thriving lives for Service children. Working with the MOD, the University of Winchester leads and co-ordinates the alliance’s strategy while committed allies in universities, colleges, schools, local authorities, charities and agencies throughout the UK collaborate to ensure that research is translated into demonstrable improvements in Service children’s lives.

Throughout late 2019 and early 2020, the alliance led a UK-wide programme of investigation to enhance work putting Service children’s voices at the heart of policy and practice development. The Year of the Service Child Voice project, which culminated with the release of ‘Listening to learn: the voices of Service children’⁴ in May, identified four key principles for ensuring effective and impactful listening. The report has linked hundreds of professionals throughout the UK and abroad with examples of good practice, and work is under way to expand the database of case studies over the coming year.

In the first phase of a major multi-year programme, the alliance commissioned research into school practice and support needs, funded by six Uni Connect consortia representing 50 universities and colleges in England. The research, led by the International Centre for Guidance Studies at the University of Derby, consulted with Service children, headteachers, governors, teachers and support staff in diverse school settings and identified seven principles of effective support. Subsequent development work and a national pilot project

have translated the research into the Thriving Lives Toolkit, a practical resource that helps schools improve the quality of their support for Service children. The toolkit will launch in October 2020 followed by initial roll-out and further research to develop a toolkit relevant to the unique contexts of each of the four nations of the UK.

Service Children’s UK Partnership Task and Finish Group

A Service Children’s UK Partnership Task and Finish group has been established to identify and share good practice across the devolved administrations. The group was created by MOD, Supporting Service Children in Education Cymru, the Royal Caledonian Education Trust, Service Children in State Schools and SCiP. Meeting throughout the year, they have shared their own practice, looked for opportunities to limit duplication and reviewed other organisations’ output that supports teachers working with service children. The eventual goal of the group will be to write a report signposting good practice and recommending potential collaboration projects in the future. This is due to be complete by the end of 2020.

Armed Forces Bereavement Scholarship Scheme

The Armed Forces Bereavement Scholarship Scheme (AFBSS) was established in 2011. It gives the children of Service personnel whose death is attributable to Service since 1990 a scholarship to support their post-16 education. In the financial year 2019/20, the scheme paid for 86 students, at a total of £833,935.

4 <https://www.scipalliance.org/research/listening-to-learn-the-voices-of-service-children>

In February 2020, the MOD changed the policy for tuition fee payments under the AFBSS. Students will now receive the same amount to study in England, Wales, Scotland and Northern Ireland, where previously there were differences between the nations. This work was completed as a priority after the difference was identified, to make sure that the AFBSS was fair and reflected the change to the fees that had been made.

Education in England

Service Pupil Premium

State-funded schools in England continue to be allocated additional funding in the form of the Service Pupil Premium (SPP) to help them provide pastoral and, where appropriate, academic support for current and former Service children. Pupils aged 5-16 attract this funding to the schools they attend if they are currently recorded as Service children or have had this status at any point in the last six years, or if they are in receipt of a child-pension from the MOD. The SPP is now worth £310 per eligible pupil annually. In financial year 2020-21, more than £24.5 million will be paid to schools to benefit more than 79,000 pupils. The Department for Education and MOD continue to work together to identify and disseminate examples of good practice by schools in their use of the SPP.

30-hours childcare code

The MOD's Directorate Children and Young People (DCYP) has worked closely with the Department for Education and HM Revenue and Customs to ensure parents (Service and entitled MOD civilians) returning to England from Scotland, Wales, Northern Ireland and overseas can apply for a manual 30-hours childcare code before they arrive back in England. This will ensure that entitlements aren't missed, especially when parents move mid-term and would not be able to apply within termly deadlines set by Department for Education.

MOD Education Support Fund

In 2020, the MOD Education Support Fund (ESF) allocated £2 million to 87 applicants, in support of approximately 25,000 Service children. During COVID-19-related school closures and with remote learning in place, DCYP supported schools by extending project and funding deadlines, and by adapting the ESF application pack and guidance accordingly.

In March, with ongoing MOD rebasing activity resulting in further unit and personnel moves and associated disruption, the MOD committed to extending the ESF for the 2020/21 financial year.

School admissions to state-funded schools

The School Admissions Code sets out the requirements on admission authorities when allocating school places. For several years the Code has included provisions intended to benefit Service children, as well as a general requirement on admission authorities to ensure that arrangements in their area support the Government's commitment to removing disadvantage for Service children.

In June, the Department for Education launched a consultation on proposed amendments to the Code including changes designed to improve in-year admissions processes, which will benefit Service children as they are more likely to change schools outside the normal admissions round. The consultation also includes a proposal to amend the address requirements for service children when applying for a school place in-year, to better reflect the current living arrangements of these families. In addition, the DfE and MO are working on joint guidance for Service families, to make the process easier when they need to apply for school places due to a new posting.

The consultation closed in October and we will report on the Government's formal response in next year's Covenant Annual Report.



Minister for Defence People and Veterans talks to children at the Sandhurst Primary school in London to mark 100 days until VE Day 75 commemorations

Education in Wales

Supporting Service Children in Education Cymru programme

The Welsh Government continues to fund the Supporting Service Children in Education (SSCE) Cymru programme, whose mission is to provide the best possible educational support to Service children in Wales. In response to COVID-19, SSCE Cymru established a new web page to provide information, advice and signposting to organisations and resources relevant to supporting Service children during the pandemic.

In March, SSCE Cymru launched a suite of new resources aimed at supporting schools, families and Service children to raise awareness and understanding of the experiences Service children face as a result of parental deployment. SSCE Cymru ran a number of discussion groups in schools across Wales, to hear from Service children about their experiences of education in Wales. These findings fed into the SCiP Alliance Year of the Service Child Voice project report discussed earlier.

In collaboration with 160th (Welsh) Brigade, SSCE Cymru has secured funding from the Armed Forces Covenant Fund Trust for four Regional School Liaison Officers for a two-year project. Appointed in September, they will focus on supporting schools to understand the needs of Service children and embed activities to ensure sustainable support systems.

MODLAP Cymru

In collaboration, the MOD's DCYP and SSCE Cymru have set up a Welsh MODLAP (Ministry of Defence and local authority partnership), a partnership similar to that developed in England, which is described above. The group has started by looking at the needs of Service children within the Wales context and how their interests might be best served. The group has been successful in sharing excellent practice across local authorities and highlighting areas for development, such as tracking of pupils and additional learning needs (known as SEND in England).

Supporting Service Children Wales Fund

For the 2019/20 academic year, Welsh Government again provided funding to support the children of Armed Forces personnel in Wales. A total of 27 bids from individual schools, groups of schools and local authorities successfully secured full or partial funding totalling £249,946.63.

SCiP hub established in Wales

The SCiP Alliance Hub Cymru works collaboratively to support professionals to champion the progression of children and young people from Armed Forces families and ensure the best outcomes for Service children in Wales. Partners include the University of South Wales. Its network of regional hubs brings together partnerships that connect stakeholders so that they can enable new and better collaborations, facilitate communication, build capacity and capability and reach out to new stakeholders. The first meeting took place in November 2019 and brought together organisations to discuss research, policy and university engagement with Service children and the Armed Forces community in Wales.

Education in Scotland

Teaching

General Teaching Council for Scotland (GTCS) continues to develop their relationships with all three Services and carry on the successful work to overcome barriers experienced by spouses who qualified as teachers elsewhere in the UK, to allow them to teach in Scotland. In particular, GTCS are working closely with the Naval Families Federation on a joint publication detailing the requirements for teaching in Scotland specifically aimed at those from the Armed Forces community. The GTCS receives a number of enquiries from spouses of Service personnel and continue to identify routes to registration for them.

Mapping military qualifications

The Scottish Funding Council's 2020/21 funding for the Scottish Credit and Qualifications Framework Partnership includes support for continued and extended work on the mapping of military qualifications against those recognised by employers in Scotland. This work has so far published guides to Infantry, Royal Artillery, Royal Electrical and Mechanical Engineers, and Royal Logistic Corps qualifications. This will help employers and educational institutions understand the range of skills and expertise that those leaving the forces have to offer, and in addition support individuals to articulate their skills clearly in order to find employment or education. The Scottish Government has committed to fund this valuable work through to 2023.

HE:FE Armed Forces Champions Network

The Scottish Government is committed to ensuring all learners, including veterans and their families, have the same opportunities to access further and higher education and is working collaboratively with partners from the education sector and representatives from the Armed Forces to take forward work in this area.

The Armed Forces and Veterans Community Group (AFVCG) was established in 2017 and supports the work of the HE:FE Veterans Champions Network with Veterans Scotland. The AFVCG links with other key groups supporting the military and their families and over the next year will be exploring existing and potential research on children from military families as well as drawing on any data that may be available to provide additional support to this group.

The HE:FE Veterans and Armed Forces Champions Network was established in January 2019 by Glasgow Caledonian and Edinburgh Napier Universities, both MOD ERS Gold Award recipients. Since its creation, every university in Scotland and around 85% of further education colleges have joined the network. This is up from 70% and 60% respectively last year. The majority of members have now signed the Armed Forces Covenant and appointed Veterans and Armed Forces Champions. The network has established geographical hubs and produced a toolkit for use by the staff. It held a conference in February 2020 to review the way forward.

Skills Development Scotland

A96 pilot project

The Scottish Government has continued to support the pilot project, where, through partnership between Skills Development Scotland (SDS) and the Careers Transition Partnership, Service leavers in the A96 corridor will be offered careers guidance during their resettlement training. As of August 2020, 31 clients have accessed the Inverness and Elgin SDS centres and a further five spouses and partners have engaged with SDS services in the area. The Scottish Government will continue to work with SDS and the MOD to ensure that the service offer can be rolled out across Scotland and become business as usual.

Cyber skills pilot

Scottish veterans are being retrained via a pilot that tests a new approach to help address a significant skills gap in the nation's cyber security workforce following funding from the Scottish Government.

The new partnership project led by Skills Development Scotland, in partnership with SaluteMyJob and Abertay University, has been launched with the aim of filling a business-critical shortage facing employers across the country. The idea is to take those with military security training and experience and reskill them for roles such as security consultants, incident and security operations centre managers, as well as more specialist roles such as penetration testing. The pilot has been developed following research commissioned by SDS, looking into ways career changers and the unemployed could be reskilled for cyber security careers using alternative and flexible pathways.

27 ex-military participants are taking part in an eight-week programme to learn ethical hacking and penetration skills at Abertay, as well as through online study and work placements. The project's goal is to add technical cyber skills to the students' acquired military training and experience, to help fill some of the 13,000 digital job vacancies currently open in Scotland. The programme began in January 2020 and restarts again in September, having been interrupted due to COVID-19 restrictions.

Veterans Scotland, Skillzminer and the Scottish Business Resilience Centre are also supporting the project.

Cyber skills

Richard is a former Royal Marine who made a successful transition into the oil and gas industry, specialising in subsea control systems. Given the increasing use of automated control systems and the recent shrinkage of North Sea production, Richard decided to reskill himself and seek employment in the growing cyber security industry. As a former member of the Armed Forces, Richard was eligible for the Skills Development Scotland funded 'Cyber Skillsbuild' programme, delivered by SaluteMyJob in partnership with Abertay University, the Scottish Business Resilience Centre and Veterans' Scotland. He showed good aptitude for cyber jobs during the assessment phase of the programme, attended the three-day 'introduction to cyber' course held at Abertay University in February and engaged with the SDS North Veterans Champion. He is in the process of completing the eight-week 'penetration testing' course, which is currently interrupted due to COVID-19 restrictions, and will complete the training when it restarts in mid-September. Meanwhile, one of the Cyber Skillsbuild employer partners, Edinburgh based Quorum Cyber, who had met Richard through their interaction with the course, have offered him a role as a security consultant. He started work with them this month, to the delight of both Richard and Quorum Cyber.

Royal Caledonian Education Trust (RCET)

In March 2020, SDS advisors had been working closely with the RCET Education Manager to trial military children resource boxes. These boxes are intended to assist professionals supporting Armed Forces children. SDS is currently exploring the use of these resources as part of their engagement with children and support the development of its advisors.

In addition, RCET, in partnership with the University of Strathclyde, have commissioned a thorough literature review of research projects in Scotland which focus on any aspect of Armed Forces life. This will help identify gaps and how to address them.

Association of Directors of Education Scotland (ADES)

SDS has, from the 2020/21 school year, included in its School Partnership Agreement (SPA) documentation (the annual agreement between schools and SDS detailing agreed service delivery) a question about school and local authority Armed Forces champion contacts to raise the profile of military children.

SDS are working with ADES to deliver in September 2020 an event to raise awareness of military children. This event is designed to increase awareness of the SPA, explore areas where local authorities, ADES, SDS and schools can work together to increase awareness of Armed Forces children and promote organisational networking and collaboration.

The ADES National Transitions Officer has undertaken a pilot exercise to gather data on the number and distribution of Armed Forces children in Scotland, including children of veterans. This work will build on the research base in Scotland on Armed Forces children and families' school education experiences.

Future skills

SDS worked with Scottish Water and Poppyscotland to design, develop and deliver a digital skills online event. The event took place in September 2020 and included partners from the Highland Armed Forces Community Covenant group and the Covenant Employability sub-group.

The event had two parts – one for employers and one for Armed Forces personnel and veterans. The first session was aimed at businesses and promoted the Highlands as a great place to build and establish a digital future, considering the Armed Forces community within their workforce. The second session raised awareness of a digital future, future skills and the availability of further learning and support.

SDS has worked with 51 Brigade to deliver a number of future skills and personal resilience sessions to serving personnel. One face-to-face session took place in January 2020 with approximately 200 personnel from 3 SCOTS. Four virtual sessions were delivered in May and July 2020 with approximately 20 personnel at each. These focused on future and transferrable skills and developed around a personal resilience theme, focussing on skills both in and out of the military and key areas of transition.

Regular Forces Employment Association (RFEA)

In July 2020 SDS hosted an RFEA awareness session to introduce their Military Women programme, which supports female veterans to find employment. The session also included a general update and information session about RFEA service delivery and supported SDS' thinking within its Equalities Action Plan and gender theme.

Promoting Scotland's apprenticeships

Scotland's apprenticeship offerings continues to be promoted across the Armed Forces and veterans community via partner and champions networks. This includes raising awareness of www.apprenticeships.scot, which is SDS's 'go to' site on all matters relating to foundation, modern and graduate Apprenticeships. Additionally, foundation apprenticeships continue to be promoted and supported in schools.

MOD and Midlothian Council Partnership

The MOD and Midlothian Council formed a partnership during 2020 to deliver early learning and childcare for children of Service families and the wider community living in the Midlothian and neighbouring localities.

This partnership has been formed to provide early learning and childcare that meets the needs of military families, while assisting Midlothian Council to meet its statutory duties to secure the mandatory amount of early learning and childcare for each eligible young child. The early learning and childcare is delivered in a shared Armed Forces community facility on the Defence Estate at Scots Corner in Penicuik. It currently provides 1,140 hours of free childcare for three and four-year-old children and paid-for childcare for two-year-olds between 8am and 6pm, 50 weeks per year.

The facility also currently employs two spouses and partners of local serving personnel. As part of the agreement, Midlothian Council maintains additionality of two early learning places for the children of military families, to account for service personnel with families being posted into the area mid-term.

Education in Northern Ireland

Support for Children of Service Personnel Funding Factor

In Northern Ireland, primary and post-primary school pupils whose parent is a member of the Armed Forces may be eligible for the Support for Children of Service Personnel Funding Factor, which is part of the Department of Education's Common Funding Scheme. Current rates are £422.92 for primary school children and £434.44 for post-primary school children.

Children's Education Support Officer

Service families continue to be supported in all aspects of primary and secondary education by the Children's Education Support Officer, a bespoke MOD Civil Service post. This role encapsulates all aspects of children's education, including maintenance of the Northern Ireland Service Children's Education Forum. This forum includes representation from 38 Brigade, primary and post-primary schools, the Education Authority, Department of Education Northern Ireland, MOD's Directorate Children and Young People and Educational Psychology.

Although not all Service children secured places in first choice schools in the 19/20 academic year, all have secured places in a school within easy reach. Indeed, figures for first-choice success are higher than within the local NI population. All Service family school leavers last year chose university, higher education, apprenticeships or employment.

Education metrics

The education metrics cover both children from Service families' education and Service personnel training and education.

Children from Service families in England education metrics

The Department for Education (DfE) has provided updated statistics on how Service children and non-Service, non-free school meals (FSM) children in state schools in England perform across key progress and attainment measures, and how these pupils are distributed across schools according to Ofsted rating. DfE has also provided figures to show how, in 2018/19, Service children and non-Service, non-FSM children's attainment at the end of primary school and at age 16 varied according to the number of school moves they made during primary and secondary educational phases. In addition, updated statistics have been provided on the post-16 and post-18 education, employment and training destinations of young people who had Service child status at the end of secondary school.

The statistics for the academic year 2018/19 show that on average, the academic progress and attainment of Service children as a group remains largely on a par with that of non-Service, non-FSM children across the majority of measures. There is still a disparity in relation to the English Baccalaureate (EBacc) measure: as observed in 2016/17 and 2017/18, a smaller proportion of Service children than non-Service, non-FSM children were entered for the EBacc and a lower percentage achieved a grade 4 or higher in all pillars.

It remains the case that in both primary and secondary phases, Service children are more likely than non-Service, non-FSM pupils to have moved schools at least once. Analysis shows that levels of pupil mobility are still correlated with academic attainment: the proportion of pupils who achieve the expected standard at the end of Key Stage 2, and GCSE English and maths at grade 5 or above at the end of Key Stage 4, is lower among those who move schools more frequently (Annex B Tables 22 and 23).

As in 2019, Service children are less likely than non-Service, non-FSM children to attend schools in England rated by Ofsted as Outstanding – but a higher proportion attend schools rated as Good. Once again the data shows considerable variation across the country. For example, the proportion of Service children in the East Midlands who attend an Outstanding school (28%) is higher than that of non-Service, non-FSM children (17.5%) – with a smaller proportion attending schools rated as Requires Improvement or Inadequate (10.9% compared to 20.3%) (Annex B Table 24).

Statistics on the education, employment and training destinations of Service children were included for the first time in the 2019 Armed Forces Covenant annual report. The most recent destinations data shows that once again, Service children are as likely as non-Service, non-FSM children to stay in sustained education or employment after the end of both Key Stage 4 and Key Stage 5. However, as in previous years young people who had Service child status at the end of Key Stage 4 are less likely than non-Service, non-FSM children to go on to higher education after the end of Key Stage 5 (47% compared with 50%) and are more likely to be in sustained employment (26% compared with 23%) (Annex B Tables 25 and 26).

Children from Service families in Northern Ireland education metric

In 2018/19, the percentage of Service children in Northern Ireland who entered either higher or further education was the same as for non-Service children (75%) (Annex B Table 27), indicating there is no difference in the destination of Service and non-Service children after secondary level education. However, the low number of Service children (20) mean it is not possible to make a definitive conclusion.

In-Service training and education metrics

While UK Armed Forces veterans' employment levels are on a par with (or better than) national averages⁵, the percentage of UK regular Service personnel satisfied with the opportunities to gain civilian accreditation and opportunities for personal development has remained consistently low, with 48% satisfied with civilian accreditation opportunities and 58% satisfied with personnel development opportunities in 2020 (Annex B Table 28 and 29).

The MOD is focused on developing a culture of personal development in which personnel are continually encouraged to optimise their contribution to military capability and prepare them for later employment. It is intended that the Defence Learning and Management Capability will provide a Personal and Professional Development Plan capability as one of its services, with the capability initially piloted alongside the Army's programme to redesign career pathways (Project CASTLE). The capability is intended to be delivered in 2022/23, with the product being incorporated into policy and process to ensure it is used by Defence personnel. In addition, the MOD is one of the UK's largest providers of apprenticeships and invests significantly in schemes that support elective education, such as learning credits and various accreditation opportunities offered via the Defence Awarding Organisation ([link here](#)) and the single Services.

5 <https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/timeseries/lf24>

2019 Education Support Fund in Northern Ireland

ESF funding supports the alleviation of the potentially negative impact of mobility and deployment. Funding has assisted with the development of approaches to support pastoral systems to alleviate the increase in mental health concerns among children.

Nurture Room resources were carefully selected to enhance this supportive environment. The classroom assistant employed with the funding had a background in mental health nursing and, alongside other staff, was skilled at supporting children with particular vulnerabilities. Resilience and coping strategies were enhanced through the Ready for Anything programme which was delivered in small groups. The school invests heavily in diagnostic assessment tools, which help to track progress and support the mapping of appropriate interventions essential for pupils who have been impacted by interrupted schooling and varied approaches to curriculum. Time is taken to baseline pupil learning needs to identify any gaps and appropriate interventions are implemented as promptly as possible.

Through the ESF, the school has also been able to provide learning support teaching and purchase resources to increase Accelerated Reader materials to support confident, independent reading.



CHAPTER 5 – ACCOMMODATION

Accommodation across the UK

Raising standards in Service Families Accommodation

During 2019/20, the improvement and modernisation of Service Families Accommodation (SFA) continued. A total of £123 million was invested – a 6% increase from 2018/1019 – aimed at improving energy efficiency, reducing the carbon footprint, and providing more modern living space. The increased investment included receipts from the short-term letting of approximately 1,700 empty properties across the UK. In the current financial year, MOD has earmarked a further £123 million for investment in similar improvement and modernisation works. In addition, and to support the regeneration of the UK economy in the wake of the COVID-19 pandemic, the government has committed an additional £200 million fiscal stimulus funding to improve MOD accommodation (£122 million for Service Family Accommodation and £78 million for Single Living Accommodation). This funding will enable MOD to upgrade and refurbish an additional 3,500 homes for Armed Forces personnel and their families, as well as improving their lived environment and reducing our carbon footprint. Within that number, the new funding will allow the refurbishment of more than 800 long-term void properties in areas of high demand to allow their allocation.

As part of the Army Basing programme, all 917 new build properties on Salisbury Plain have now been handed over by the developer for allocation to Service families relocating from Germany. In addition, these properties assisted in meeting a short-term requirement to house around 130 Service families who were repatriated to alleviate COVID-19 pressures on other countries' health services.

This investment strategy of improving, modernising and purchasing SFA has enabled MOD to continue to meet its commitment to only allocate properties at Decent Homes Standard. Currently, 97% of Service families properties are at the Government's Decent Homes Standard, with 87% at Decent Homes+ (with enhanced thermal comfort). The fiscal stimulus funding will help to improve those numbers further.

Service delivery

The delivery improvements highlighted in last year's report have, for the most part, been maintained. Performance suffered around December and January in the South West owing to Amey Plc, deliverer of the National Housing Prime contract, making adjustments to its supply chain aimed at providing a more consistent service in the region. In addition, COVID-19 restrictions, especially on the supply of materials, affected performance in March and April. Notwithstanding, Amey's response maintenance service is now regularly meeting or exceeding the key performance indicator target. In addition, Amey continues to meet its performance targets for timely allocations and move-in preparations. This was especially apparent following the recommencement of non-essential moves following the temporary freezing of assignments due to COVID-19 where over 3,500 moves were delivered between mid-June and August 2020.

Customer satisfaction

The positive trend in increased customer satisfaction levels has continued. While satisfaction with the overall standard of Service Family Accommodation is unchanged since 2016, the Armed Forces Continuous Attitude Survey results reported increases in satisfaction with responses to, and quality of maintenance and repair since 2018 and 2017 respectively. However, these remain below satisfaction levels reports in 2015. In addition, the MOD's independent survey recorded a 3% increase in overall satisfaction (to 67%) during a 12-month rolling period to March. The MOD has set a target of 70% for the same 12-month rolling period to March 2021. While these results are welcome, it is hoped the impact of the financial stimulus on the pace of improvement and modernisation to SFA will be reflected in accelerated satisfaction levels.

Managing the SFA estate

Following Public Accounts Committee observations in June 2019 relating to the high number of empty properties, MOD has committed to reducing the number of empty properties to the required 10% management margin (approximately 5,000 properties) by autumn 2021. Through the Void Reduction Plan, MOD will continue to reduce the number of empty properties by handing back properties to Annington Homes⁶ (a minimum level of 500 per year for seven years has been agreed), demolishing no longer required properties, widening eligibility to cohabiting couples and Service leavers, and accelerating our sub-let programme. The MOD currently has approximately 3,000 temporary surplus properties identified for sub-letting to screened members of the public at prevailing market rent. Over 1,000 properties have been allocated to cohabitating Service families and 1,700 properties have been sub-let. This approach aims to maximise utilisation and derive revenue from rental receipts, while protecting the availability of homes for entitled Service families so they are not disadvantaged. With these measures in place, it is expected the number of empty properties will reduce from around 21% in April 2020 to around 12% by March 2021.

Cohabitation in surplus SFA

In 2019, MOD amended the longstanding accommodation policy, which did not permit cohabitation, to widen access to surplus SFA in the UK to Service personnel who can demonstrate they are in a long-term relationship. In February, the policy was further amended to remove the requirement for Service personnel to have completed more than 4 years' service before being able to apply to cohabit in surplus SFA, subject to availability. As of 1 October 2020, 1451 Service personnel in recognised long-term relationships have been housed in surplus SFA, and a further 163 are waiting to move in.

Single Living Accommodation

There has been a focus on SLA grading with the SLA Management Information System project. This aims to pull together condition-related datasets into one area to enable key users to access and assess collective data to make fully informed investment decisions and set a more targeted approach towards continued upgrades and modernisation of SLA. Phase 1, which commenced in April 2019, provided a full understanding of the SLA requirement and established a dataset baseline to build a more accurate picture of the SLA estate. The project has been funded for the financial year 2020/21 and has now entered Phase 2. This means that MOD should have a single source of accurate SLA data and a piloted SLA booking and allocation capability by the end of the financial year 2020/21, with a view to full implementation across MOD during the 2021/22 financial year.

Future Accommodation Model

The Future Accommodation Model will provide more choice to Service personnel regarding where, how and with whom they live, making use of the private rental sector and support to home ownership, alongside existing options of MOD accommodation. The Future Accommodation Model policy has been designed so that the cost to Service personnel to rent property will be broadly the same as the charges for the equivalent type of SFA. To modernise the offer, accommodation entitlement reflects the size of the family, rather than rank.

6 Annington Homes own the vast majority of SFA in England and Wales.



Junior Doctor Officer Cadet (OCdt) Rhiannon Austin from the Army Medical Services Support Unit, was the first to receive the keys for her new room in Burma House, a new annex at the Wavell Officers' and Warrant Officers' Mess in Wavell Barracks.

It now also acknowledges those Service personnel in established long-term relationships and, as a result, their entitlement to subsidised accommodation.

Following the Future Accommodation Model (FAM) pilot launch in September 2019 at Her Majesty's Naval Base Clyde, two further pilot sites were launched: Aldershot Garrison in January and RAF Wittering in June. The pilots will last approximately three years and evidence will be gathered to refine the final policy as the pilots develop. Following the pilots, a decision will be taken on whether to implement the Future Accommodation Model across the UK. Early indications and feedback suggest that widening eligibility to access MOD accommodation has been a positive and inclusive retention policy, with some service personnel reporting that this had been the deciding factor in them remaining in Service. Between September 2019 and September 2020, 1,110 Service personnel have

opted to live in accommodation under FAM, which equates to 35.36% of the FAM eligible population. A strategic review of the evidence collated to date is currently underway and a Service personnel satisfaction survey is planned for early next year.

Getting on the property ladder

Introduced in 2014, the Forces Help to Buy scheme continues to help Service personnel to get on or stay on the property ladder, by borrowing up to 50% of their annual salary (up to a maximum of £25,000) to purchase their first property. As at 30 September 2020, the scheme has collectively helped around 22,200 Service personnel at a total cost of around £336 million (an average of £15,100 per claim). In October 2019, the Secretary of State for Defence announced that the scheme would be extended until the end of December 2022.

Accommodation in England

Access to social housing

Delivering on the commitment made in the 2019 Armed Forces Covenant Annual Report, and following a public consultation, new statutory guidance⁷ to improve access to social housing for members of the Armed Forces, veterans and their families was published in June. This builds on existing guidance issued in 2012 and 2013. The new guidance sets out:

- how local authorities can ensure that members of the Armed Forces and veterans suffering from mental ill health are given appropriate priority for social housing
- that local authorities are expected to disapply any local connection requirements from divorced or separated spouses or civil partners of Service personnel who are required to move out of accommodation provided by the MOD;
- how local authorities can identify applications from members of the Armed Forces, veterans and their families, including through the provision of staff training, to ensure that they are considered appropriately

First Homes

First Homes is the government's new flagship home ownership scheme, designed to give local first-time buyers a discount of at least 30% on a new home. In February, a consultation on First Homes was published and, as part of this, proposed that members or recent veterans of the Armed Forces should not have to meet any local connection criteria that may be otherwise imposed. In August, the response to the consultation was published.⁸ There was strong support for the proposition above and it was confirmed that members of the Armed Forces or veterans within five years of leaving the Armed Forces will be taken to have met any local connection criteria applied by any local authority in England. This principle will also be extended to bereaved spouses or civil partners of deceased members of the Armed Forces, if their deaths are wholly or partly caused by their service.

The lettings restrictions for First Homes have been shaped to make allowances for members of the Armed Forces. When they are deployed away from home, members of the Armed Forces will be able to let out their First Home for as long as needed.

Homelessness

In 2018, the government implemented the Homelessness Reduction Act 2017, the most ambitious piece of legislative reform in this area in over a decade. As part of the Homelessness Reduction Act's duty to refer, which came into force in October 2018, the Secretary of State for Defence is required to refer members of the regular Armed Forces in England to a local housing authority within 56 days if they believe they may be homeless or threatened with homelessness (with the individual's consent). The duty to refer helps to ensure those faced with the threat of homelessness are identified earlier and given the necessary support needed to tackle and prevent homelessness.

The Ministry for Housing, Communities and Local Government has undertaken a review of the implementation of the Homelessness Reduction Act, including the duty to refer. The findings of the review show that the service has improved for those who would previously have had limited support and households are receiving help both earlier and for longer. As the Act is still new and bedding in, the review identified some challenges with administration, data collection and joint working. We will continue to support local authorities to implement the Act and overcome these challenges.

A person who is vulnerable as a result of having been a member of the regular Armed Forces (a veteran) has a priority need for accommodation from the local authority.

The latest homelessness statistics (from April to June 2020) show that in this period, of the 63,570 households owed a homelessness duty, 410 households had a support need as a result of serving in the Armed Forces.

7 <https://www.gov.uk/government/publications/improving-access-to-social-housing-for-members-of-the-armed-forces>

8 <https://www.gov.uk/government/consultations/first-homes>

Accommodation in Wales

Welsh Government has previously set out that it is undertaking a review of the code of guidance and updating it in liaison with a range of stakeholders. Within the code of guidance, the Welsh Government requires local authorities, when considering urgent housing need, to give reasonable preference to anyone who has a serious injury, medical condition or any impairment, which they, or a member of their household, have sustained as a result of service in the Armed Forces.

Welsh Government has also commissioned a review of priority need in relation to the whole population in Wales, including the Armed Forces community, in order to better understand the implications, both intended and unintended, of making any potential changes.

Both pieces of work have been delayed by COVID-19, as the immediate focus of the Homelessness Prevention Team has been ensuring people sleeping rough or those in inappropriate temporary accommodation are provided with emergency accommodation and support. In the next phase of their COVID-19 response, the Welsh Government is investing up to £50 million to both transform services and ensure that those in temporary accommodation can move on to long-term sustainable accommodation.

Charities and agencies in Wales continue to provide tailored support for the Ex-Service community in Wales. The Welsh Veterans Partnership and Homes for Veterans Cymru (Alabare Christian Care and Support) work together to help veterans into supported housing and address any ongoing support. The organisations work together to assess the needs of the veteran and family, and deliver a support plan enabling the veteran to successfully manage their home.

Accommodation in Scotland

More homes

Through its Affordable Housing Supply Programme, the Scottish Government continues to offer funding from the £1.3 million grant award to Veterans Housing Scotland to support it as it progresses proposals to deliver additional homes for physically and psychologically disabled ex-Service personnel. Potential development opportunities in Wishaw and Brought Ferry are currently being taken forward.

Homelessness pathway

The Scottish Government has asked the chair of the Veterans Scotland Housing Group to take forward the work to develop a veterans homelessness prevention pathway. The knowledge and expertise which will be used to develop this pathway will ensure the housing system in Scotland responds to the needs of veterans and prevents homelessness. This work is expected to start towards the end of 2020 and will be supported by the Scottish Government.

Open Market Shared Equity

The Open Market Shared Equity scheme continues to be available to veterans who have left the Armed Forces within the past two years so that they can buy a home that is for sale on the open market with assistance from the Scottish Government where they cannot afford the total cost. These households have priority access to the scheme, which means that they do not need to be first-time buyers to benefit from it.

Military Matters

The Scottish Government continues to support Housing Options Scotland to provide its Military Matters project. This service focuses on housing issues affecting people serving in the Armed Forces in Scotland. It's open to all UK Service personnel transitioning into civilian life in Scotland, and veterans, helping them to find the right home in the right place. Since it began in 2012, the project has helped over 700 people, with 117 new referrals in 2019/20.

Poppyscotland

The Scottish Government contributed to Poppyscotland and Veterans Scotland's Supporting the Armed Forces community with Housing in Scotland – A Best Practice Guide which was published in October 2019.

Service accommodation

Armed Forces personnel satisfaction with the standard of both Service Family Accommodation (SFA) and Single Living Accommodation (SLA) has remained consistent at around 50% since 2017 (Annex B Table 31). However, it is hoped those levels will increase in line with the continued investment in improving and modernising both sets of accommodation, particularly with new government fiscal stimulus funding. Following the increase in Service family satisfaction with the timeliness and quality of repair and maintenance of SFA in 2019, the satisfaction levels have stayed at the increased level in 2020 (Annex B Tables 32 and 33). This reflects the continued efforts of MOD and Amey Plc to maintain agreed service delivery standards despite the impact of COVID-19 on the supply chain.

Social and private renters in England

In 2017/18, almost three-quarters (76%) of Service personnel or veterans (in England) lived in owner-occupied households (owned outright or buying with a mortgage), which is higher than that seen in the general population (64%). There was no difference in the proportion of current Service personnel or veterans living in the social rented sector (13%) and the private rented sector (11%). This was different to the general population, where the size of the private rented sector was bigger than the social rented sector. Satisfaction with both the social and rented sector in terms of accommodation, tenure, area and, repairs and maintenance in 2018/19 was the same or higher for service population and families when compared to non-service population and families (Annex B Tables 37 and 38).

The percentage of recent Service leavers in England allocated social housing despite not having lived in the local authority for five years has been higher than that seen for non-veterans over the past three years (Annex B Table 35). In addition, the percentage of recent Service leavers⁹ in England who have been allocated a social housing letting within six months of entering the waiting list has been the same or higher than that for non-veterans (Annex B Table 36). This data enables the Ministry of Housing, Communities and Local Government to monitor the package of measures introduced in 2012 to ensure that members of the Armed Forces community have the same access to social housing and are not disadvantaged by the requirement for mobility while in Service. The package includes ensuring that veterans with urgent housing needs and Service personnel with serious illnesses or disabilities are always given high priority for social housing, and that councils do not apply a local connection test to disqualify Service personnel and those who have recently left the Service.

Statutory homelessness in Scotland

During 2019/20 in Scotland, 801 households assessed as homeless had a member who was previously in the Armed Forces (3% of all households assessed as homeless, Annex B Table 39). The Scottish Government is committed to preventing homelessness for veterans with initiatives including:

- improved guidance to ensure local housing strategies and social housing allocations fully consider the specific requirements of service leavers and veterans
- engaging with relevant third sector, public sector and government departments in the development of strategies such as the pathways to prevent homelessness and the plans for homes in 2040

9 [Footnote 24: Left service in the past five years]



The provision of good quality living accommodation for service personnel and their families remains an important priority for the Ministry of Defence (MOD).



CHAPTER 6 – INQUESTS AND JUDICIAL ENGAGEMENT

Inquests: The Defence Inquests Unit

The Defence Inquests Unit is the MOD's single point of contact for coroners in England, Wales and Northern Ireland, and the Scottish Fatalities Investigation Unit, when investigating the causes of the death of Service personnel, veterans and MOD civilians. The Unit is responsible for ensuring that material relevant to the investigation has been provided to coroners or the Scottish Fatalities Investigation Unit. The Defence Inquests Unit provides support and witness consultations to veterans, current Service personnel and MOD civilians who are called to appear as witnesses at inquests. The Unit also offers briefings to Next of Kin to help them understand the Inquest process.

The Unit has recorded 76 inquests/concluded investigations (see below) having taken place between 01 October 2019 and 30 September 2020.

During this reporting period, the Scottish Fatalities Investigation Unit confirmed to the Defence Inquests Unit that they had finished investigating 3 Service personnel deaths (full-time, reservist personnel and veterans). The Procurator Fiscals' determined that their investigations into these cases were sufficient to understand the causes of death, ruling out a need to take them forward to a Fatal Accident Inquiry (the Scottish equivalent of an Inquest).

During this reporting period, the Coroners' Service of Northern Ireland confirmed to the Defence Inquests Unit that investigations into 2 Service personnel deaths (full-time, reservist personnel and veterans) had been concluded and their investigations were sufficient to understand the causes of death so these cases would not be taken forward to an Inquest.

The Defence Inquests Unit is integral to ensuring that the MOD meets its obligations to support coroners, Scottish Fatalities Investigation Unit, bereaved families, and MOD service and civilian personnel involved in investigations into the deaths of Service personnel, veterans and MOD civil servants. Each case is reviewed by the Unit to ensure the MOD provides the level and type of support tailored to needs of the case. The members of the Unit provide practical guidance and advice, alongside access to an established support network of experts who deliver legal and pastoral support. This includes lawyers from the Government Legal Department, medical and mental health experts and access to welfare support provided through individual Chains of Command or organisations such as the Service Association network and Service charities.

Northern Ireland legacy Inquests

The Northern Ireland Legacy Inquest team was set up last year to deal with the extensive Northern Ireland Legacy Inquest programme. In October 2019, the Presiding Coroner in Northern Ireland gave a statement that set out her plan to deal with the 43 listed inquests within a five-year period, starting in April 2020. The start date was subsequently delayed by the COVID-19 pandemic however it is currently understood that these will recommence in the autumn.

Protections legislation

The responses to the 2019 public consultation on proposed legal protections measures for Armed Forces personnel and veterans who served in operations outside the UK informed the development of the measures taken forward in the Overseas Operations (Service Personnel and Veterans) Bill. The Bill was introduced in Parliament on 18 March. The introduction of the Bill delivers on the Conservative manifesto and election commitments to 'introduce new legislation to tackle the vexatious claims that undermine our Armed Forces' within the first 100 days of the new government. The MOD's Analysis and Response to the public consultation was published on 17 September 2020.

The government will introduce legislation to address the legacy of the past in Northern Ireland in a way that focuses on reconciliation, delivers for victims, and ends the cycle of reinvestigations into the Troubles in Northern Ireland that has failed victims and veterans alike – delivering on our commitments to Northern Ireland veterans. The MOD continues to work with the Northern Ireland Office on these important issues.



CHAPTER 7 – FAMILY LIFE

Families Strategy 2018-2020 Action Plan

The current UK Armed Forces Families Strategy, published in 2016, is a five-year strategy. The focus this year has therefore been in assessing progress since 2016. The 110 recommendations within the independent review of the support provided to Service families provide a baseline for this work. Good progress will be acknowledged alongside areas where support needs to be strengthened. The refreshed strategy and action will provide a new set of principles and priorities against which we can continue to improve outcomes for modern, diverse, Service families, to ensure they receive the support and acknowledgment they deserve.

Alongside this review, good progress has been made this year in delivering against the commitments in the 2018-2020 Action Plan, as described in the following sections.

Wraparound Childcare

In September, the Wraparound Childcare pilot programme began making payments to families at the first pilot sites, RAF High Wycombe and RAF Halton, with further pilots being launched for the Plymouth Naval area and Catterick Garrison in January 2021. Eligible families, with children aged between four and 11, are able to access funding for before and after school childcare, which potentially allows spouses or partners to take advantage of different working practices including extending their working day. The progress of the trials will be reported on in next year's Covenant annual report and a decision is likely to be taken in 2021 to determine the scale, speed and structure of any further roll-out.

The pilot programme is being delivered by the MOD's new dedicated Childcare Support Team, created to help Service families understand what is already available and to help to remove disadvantage that Service families can sometimes face when moving within the UK. The team is working with local authorities and military establishments to ensure that where there are high concentrations of Service families that the local provision is adequate to meet the requirement.

Support to spousal employment

The Royal Air Forces Association and the RAF Families Federation sponsored a successful bid to the Armed Forces Covenant Fund Trust in 2019 to launch a pilot programme to further develop the Military Co-working network across the Defence Estate after it was successfully launched by a team of military partners. The MOD is part of the Steering Group with the three Family Federations for the tri-Service pilot programme and is currently working to update estate policy to provide flexibility for local establishments to make use of such facilities if the demand is there.

The Forces Families jobs platform, a joint initiative of the three Families Federations and supported by MOD's Defence Relationship Management team, goes from strength to strength, with over 2,000 registered users, and 2,192 jobs with 623 employers listed as of September 2020. In early 2020, the platform was linked directly to Civil Service Jobs. In addition, the criteria for the Employer Recognition Scheme Gold Awards 2020 states that all nominees must be publishing jobs on the Families Forces Jobs portal.

Looking ahead, the MOD has committed to launching the Partner Career Support programme which is a pilot programme for 750 participants. Drawing on the lessons of the 2016 spousal employment trial, this programme offers accessible online support for partners and spouses of Service personnel through an online platform, delivered by the Career Transition Partnership. Applications can be made from 1 Oct 2020, with the programme officially launching in November and it will be six months in duration. Support will include:

- bespoke career coaching delivered by the Career Transition Partnership's career consultants – helping spouses and partners identify the right level of employment
- support from a spouse or partner's own personal career consultant – helping to develop a personal career plan
- access to self-assessments, enabling spouses and partners to identify their strengths and areas of development
- expert guidance on how to build a powerful and impactful CV, ensuring spouses and partners make an impression on employers
- signposting of employment support and training opportunities provided by trusted organisations
- access to single Service welfare services, to guarantee that any and all welfare related queries are answered in good time by experts
- Department for Work and Pensions resources supporting job-seeking behaviours
- signposting to other relevant service providers in the sector wherever applicable

Living in Our Shoes report

Living in Our Shoes¹⁰ was an independent review, commissioned by MOD and led by Andrew Selous MP, of the support provided to Service families. In conducting the review, Andrew Selous MP and his lead researcher, Professor Jan Walker, spoke extensively with Service families about their experience of military life. Their report was published on 30th June with 110 specific recommendations calling for greater emphasis for families under the Armed Forces Covenant

and to make recognition of their experiences a national priority. The government will respond by the end of 2020.

Families Strategy refresh

Alongside the comprehensive Living in Our Shoes review, the MOD, government and charitable sector partners will consider:

- the Forces with Additional Needs' Families Fighting On review
- relevant recommendations within the Mark Francois Stick or Twist report
- reports by the three Families Federations considering the challenges facing dispersed families and dual serving couples
- wider academia on a range of issues

These will all inform the refresh of the Families Strategy. Following publication of the refreshed strategy, the MOD will hold a series of consultations on the key issues and the outcome of these consultations will inform a fully resourced and prioritised action plan.

To build on the momentum of this work, MOD has created a new, biannual Service Families Steering Group, with representation from across government, the devolved administrations, the Families Federations and the charitable sector. The group's primary role will be to track progress with the Families Strategy and action plan, receiving six-monthly updates against the Families Strategy Workstreams:

- communication and the Covenant
- health and wellbeing
- children
- family life
- family home
- support to partners
- support to non-UK Service personnel and their families

The progress report will be published in summer 2021 with a winter update in the 2021 Armed Forces Covenant Annual Report.

10 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/895237/Living_in_our_shoes__Summary__1__embargoed_30_June.pdf

Removing Barriers to Family Life programme

The Removing Barriers to Family Life programme from the Armed Force Covenant Fund Trust made 60 awards totalling just over £7 million in March 2020 to support Armed Forces families across the UK. A range of projects were supported to benefit families, some focusing more on the families and carers of veterans, while others will support the children and young people in military families.

Royal British Legion Industries (RBLI) were awarded £91,072 in Scotland to provide spouses and partners with meaningful paid work experiences that are designed to reduce isolation, engage participation and increase skills, which will contribute to positive mental and physical health. Michelle Ferguson, Director at Scotland's Bravest Manufacturing Company, a division of RBLI, said: "We are absolutely delighted to be funded by the Armed Forces Covenant Fund Trust. This particular project offers spouses and veterans' partners the opportunity to benefit from a dedicated project aimed at reducing isolation and creating greater community cohesion. Case studies we have collected over the past year demonstrate just how vital this work is, we already work with a number of veterans' family members and we know that this project will help to tackle loneliness by giving them the tools and support to establish strong support networks."

Reading Force received £90,000 to support Service children during significant life events including deployment, illness or injury of a parent, moving home and school, parental divorce or separation, and distance from extended family. Their Keeping Families Connected project will help tackle the stress and separation anxiety some feel, by supporting good communication and family bonding through sharing books, chatting about them and scrapbooking.

Professor Alison Baverstock, Founder and Director of Reading Force (and Army mum and wife for 25 years) said: *"When Forces families are separated, through deployment or training, or just under pressure, it can be hard to talk about what's going on. Communication through shared reading can keep everyone in touch – thinking about how someone else will respond to the book you are both reading lasts much longer than a text message, email or phone call. We are so grateful for this generous support of our work, as much for the confidence shown in us as the money, which enables us to continue our important work within the military community."*

Thank you for our books. We absolutely love all of the stories. All forces families should join in with this . [@ReadingForce](#)



MOD Domestic Abuse Strategy

As part of the Domestic Abuse Strategy, 'No Defence for Abuse 2018-2023', the MOD launched an awareness campaign in November 2019.

This involved:

- participating in the 15 Days of Action against gender-based violence
- improving MOD DefNet publications on domestic abuse
- including improved signposting for victims to support
- updating GOV.UK with MOD's policies

MOD appointed a Senior Domestic Abuse Awareness Champion, Director Civilian HR Siobhan Sheridan.

Domestic abuse awareness has also been added to outcomes of the 2019 report into inappropriate behaviours by Wigston and will be included in Joint Service Publication 763, The MOD Bullying and Harassment Complaint Procedures. An insert to JSP763 on Domestic Abuse has been drafted and is currently being signed off by the Domestic Abuse Working Group.

MOD is refreshing the Tri-Service Policy on Domestic Abuse and Sexual Violence, Joint Service Publication 913, with the help of the national domestic abuse charity Hestia. This will, for the first time, be a whole-force policy, covering both military and civil servants within Defence. MOD is also in the process of adding a 'safe space online' button to its DefNet and Defence Connect pages, which will signpost those being impacted by domestic abuse to national and local support. This initiative has the expert backing of various domestic abuse charities and the University of Bristol.

Support to Armed Forces families during COVID-19

In recognition of the support families offer to Service personnel, particularly to those who were delivering the government's COVID-19 response, Chief of Defence People wrote an open letter to families in March. The letter acknowledged the challenges they faced, provided guidance on how to deal with any financial hardship, raised

potential impact to allowances and signposted to organisations that could provide support. While not all families will have been supporting a key worker, it was felt that it was vital that the MOD show support to Service families during this crisis for their invaluable support to Service personnel. In support of this letter, the Director for Armed Forces People also took part in interviews and panel discussions with the British Forces Broadcasting Service aimed at conveying MOD's support of Service families during the pandemic.

The unique circumstances of the COVID-19 pandemic, home schooling pressures and financial concerns put strain on some relationships. While most families were able to cope, the National Domestic Abuse helpline saw a 25% rise nationally in enquiries during lockdown. Through the mechanism of its Domestic Abuse Strategy discussed above, the MOD responded quickly to this situation by building on the awareness campaign launched in November 2019. Working in partnership with NHS England and the Home Office, MOD promoted information and guidance through its intranet, single Service welfare teams, HiVES and the Families Federations, promoting the Home Office and Hestia #YouAreNotAlone and safe spaces campaigns.

Families in Wales

Tackling loneliness and social isolation

In February, Welsh Government launched 'Connected communities: a strategy for tackling loneliness and social isolation and building stronger connections'.¹¹ In that strategy, the potential challenges faced by some members of the Armed Forces community were recognised, drawing on research from organisations such as the Royal British Legion. Using the feedback from the Veterans Scoping Exercise, the Welsh Government established a new grant to directly target loneliness and social isolation among the Armed Forces community in Wales. Working with key partners in the sector, 12 individual grants were awarded in spring 2020 to meet those objectives, worth a total of £120,000. These projects commenced before COVID-19, with many of the grant recipients adapting their project digitally where appropriate during lockdown until the completion of funding.

11 <https://gov.wales/sites/default/files/publications/2020-02/connected-communities-strategy-document.pdf>

Army Families Federation: Loneliness and isolation in the Armed Forces community in Wales

This project comprised a programme of face-to-face events across Army locations in Wales including Brecon, St Athan, Chepstow and Haverfordwest. These were tailored to meet the specific needs of families in these locations and delivered in a variety of formats such as coffee and chat, bingo, connect and chat, virtual groups and dispersed family connect.

Just under 300 individual families were reached through these events, with many families attending more than one. There was a consistently positive result in alleviating feelings of loneliness and isolation. A four-week survey of Army families in Wales and their views on social isolation and loneliness while part of the military in Wales was also undertaken. This showed that the most significant contributors to social isolation were the absence of the serving partner due to Service requirements and the lack of access to local support services. The least significant contributors were lack of Welsh language skills and lack of housing choice. A programme of additional needs groups was set up in three locations and these are now self-sustaining. Online groups were arranged when the COVID-19 lockdown occurred, to ensure families retained contact from the project.

Families in Scotland

Capitalising on military talent

In 2020, the Scottish and Welsh Governments jointly funded Business in the Community (BITC) to refresh the Capitalising on Military Talent toolkit to include information for employers on the benefits of employing military spouses and partners and how to do so. The outcomes of this would be: adding to the business case for employing military partners, increasing the knowledge of employers on how to do this successfully, and enabling more military partners to secure good-quality employment and continue to participate and progress in the workforce. This will encourage businesses to offer sustainable and good quality employment to veterans and their family members, particularly spouses and partners.

This addendum to the toolkit is due to launch in autumn 2020.

Skills Development Scotland – partners and spouses awareness sessions

SDS delivered a bespoke information session to partner and spouses of 3 SCOTS in October 2019. The session focused on support and services available from SDS and included one-to-one time after the session. Twenty partners and spouses attended the session and six individuals sought further discussions after the event. Engagement with partners and spouses will continue and be adapted to suit circumstances and guidance. The sessions will be a blend of online and face-to-face as appropriate and within government guidelines.

Forces Families Jobs

Forces Families Jobs is an employment and training platform for Service spouses, partners and family members, offering employers free access to an untapped pool of talented employees. The Scottish Government has worked with Forces Families Jobs to share adverts for vacancies in the Scottish Government through their website. The adverts link to Work for Scotland and enable Service family members to easily view employment opportunities in the Scottish Government.

Families in Northern Ireland

The Families Employment Support Officer (FESO), a bespoke MOD provision in Northern Ireland, continues to provide support to the non-serving personnel. This service covers all aspects of employment, including identification of appropriate posts, CV writing and interview techniques. Education, training and volunteering opportunities can also be identified, with many training courses available at no cost. In the last 12 months, FESO has had 90 clients. Of these, 36 have secured employment, eight have left due to posting and three have disengaged due to personal circumstances, with a further 12 ceasing to engage without reason. Of the remaining 31 active clients, 22 are already in employment, but seeking new better or new opportunities, leaving nine spouses actively seeking employment.



Families greeting loved ones from HMS Queen Elizabeth, which returned to Plymouth after a successful deployment in the United States.



CHAPTER 8 – TRANSITION AND THROUGH-LIFE SUPPORT

Defence Holistic Transition Policy

In October 2019, MOD introduced a new Defence Holistic Transition Policy, Joint Service Publication 100, to support Service leavers and their families to adjust to other aspects of the transition to civilian life. This complements the existing resettlement policy and the Career Transition Partnership to ensure that they consider all aspects of civilian life that may differ from military provision, and includes housing, health matters, budgeting and life skills. This delivers one of the MOD's commitments to the Strategy for Our Veterans and contributes towards the MOD Armed Forces Families Strategy. At its heart, the 'life skills' training package will be delivered to Service personnel and their families throughout their Service career to allow individuals to make appropriate plans, preparation and informed decisions about their future. Using monitoring and assessment tools, personnel and their families will be able to keep track of their progress and work with their chain of command to establish whether further interventions are required. The new standardised policy will now ensure that every Service leaver can benefit from this holistic approach, while still giving individual units and commanders the flexibility to tailor their approach.

The Defence Holistic Transition Policy is in the process of being reviewed and will continue to be developed using an iterative approach to ensure it meets the changing needs of our Service leavers. MOD will continue to work with other government departments, local authorities, devolved administrations, the Families Federations, and the private and charity sectors to provide joined-up, consistent and seamless transition and resettlement processes for Service leavers and their families.

Defence Transition Services

Alongside the Defence Holistic Transition Policy, a new organisation called Defence Transition Services (DTS) was established within MOD's Veterans UK organisation to assist those facing the greatest challenges to making a successful transition on their discharge. DTS provides information and ongoing support for those Service leavers and their families as they leave the Armed Forces and adjust to civilian life. Supporting clients who choose to settle in the UK and the Republic of Ireland once they or their family member leave the military, the service facilitates access to the support Service leavers and families need, whether from other government departments, local authorities, the NHS or trusted charities. In its first year, it has engaged with nearly 300 public service, local government and third sector stakeholders.

The service is organised on a regional model, divided into Scotland and Northern Ireland, north England and north Wales, the Midlands and south Wales, and south England. Each region has a dedicated manager, case worker and assistant, allowing a better understanding of provision in that area to enable the best solutions for clients.

Since 1 November 2019, DTS has supported over 200 Service leavers who have either been identified by their chain of command as needing extra support or have self-referred to the service looking for guidance as they transition from Service life to civilian life. Most of those were leaving the military after just a few years' service or were leaving unexpectedly with limited notice of their discharge date. The majority who used the service were from the Army, reflecting that 62% of those leaving the Armed Forces in 2019/20 were from the Army.

“Working for DTS for the last 12 months I have had so many wonderful opportunities to help shape and develop a service for our military communities that will be a vital role in ensuring a safe and less daunting transition from military to civilian life. Having worked in many different roles within Veterans UK for many years, it has been so refreshing to work with a team who are dedicated to establishing a meaningful and effective resource for our Service leavers. I am proud to work for such a lively and empowering team who support each other as well as the military they serve, as if they were members of their own families.”

Case Worker, DTS

Figure 1 – Breakdown of referrals by Service

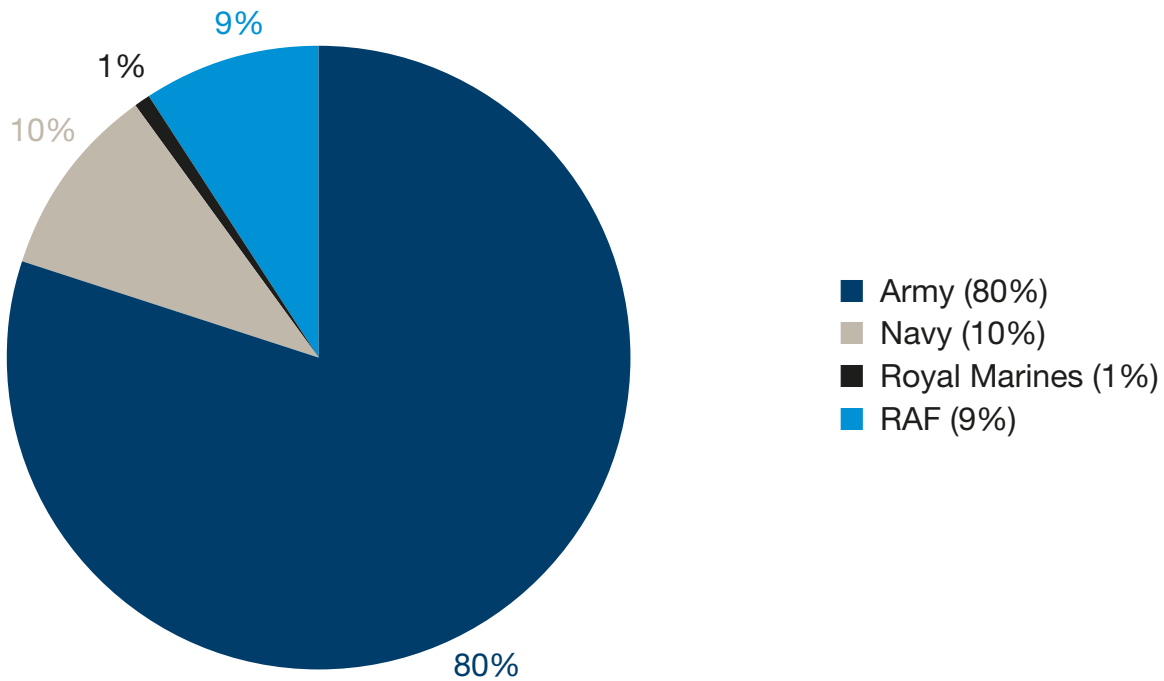
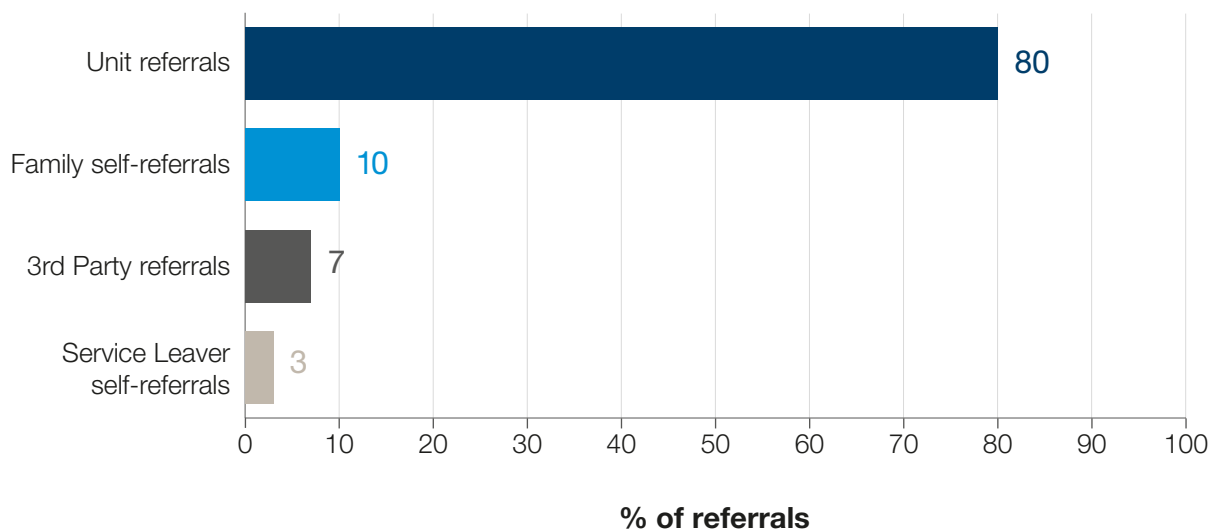


Figure 2 – Breakdown of referrals by source



Defence Transition Services in Wales

Welsh Government has worked in partnership with DTS colleagues covering Wales to support the roll-out of the service. In October 2019, DTS presented to sector representatives at the 2019 Wales Armed Forces Conference, and DTS colleagues have developed links with Welsh Government-funded Armed Forces Liaison Officers and regional Armed Forces forums. They have also run information sessions for partners in Wales jointly facilitated with the Welsh Government. DTS is a key partner involved in delivering the actions from the Veterans Scoping Exercise. The Officer in Charge chairs the transition action group, providing a key link between provision in Wales and MOD partners.

Defence Transition Services in Scotland

DTS colleagues in Scotland works in partnership with the Scottish Government as well as local authorities and currently on a number of key stakeholder groups, including Scotland's Cross-Party Group on the Armed Forces and Veterans Community.

Defence Transition Services in Northern Ireland

DTS works closely and collaboratively with the Ulster Defence Regiment and Royal Irish (Home Service) Aftercare Service to support veterans of the Ulster Defence Regiment and Royal Irish Regiment and their dependants. A review into the Northern Ireland Aftercare Service will consider whether the remit of the ACS should be widened to cover all HM Forces veterans living in Northern Ireland with service-related injuries and conditions.

The Veterans' Support Office continues to link veterans in Northern Ireland with the required transition services, via an experienced delivery network.

Defence Transition Services – supporting Kirsten

On leaving the military on a short notice medical discharge after 11 years, Kirsten (not her real name) faced a number of challenges, including relationship breakdown, homelessness and financial difficulties. She had dependent children, no savings and no clear direction for a future employment path.

With Kirsten's permission, a DTS caseworker convened a meeting with her and a small number of potential support providers for an open and honest conversation about her circumstances and the possible route map to a successful transition. DTS secured suitable accommodation for Kirsten and a place on an employability support programme. DTS worked with its sister organisation within Veterans UK, the Veterans Welfare Service, to help the client make a claim under the Armed Forces Compensation Scheme.

With continued support from DTS, she has now moved into private rental accommodation near to a new job, which afforded her the security of a decent salary. The move was facilitated by DTS helping her to successfully apply for funds to pay the first month's rent and secure financial assistance to furnish the property from two third sector partner organisations. DTS remain in contact with Kirsten to provide any further support or guidance.

Support to those transitioning out of the Armed Forces during COVID-19

Some COVID-19 measures put in place by the government potentially affected those with imminent discharge dates and those in their resettlement and transition phase, such as the need to self-isolate. To support these individuals and their families, the MOD and the single Services amended relevant policies to provide stability and relief.

The Defence Infrastructure Organisation made changes allowing those leaving Service Family Accommodation who may be unable to make accommodation arrangements due to lockdown to extend their tenancies or providing housing solutions at more affordable rates.

When COVID-19 government guidance restricted large gatherings, the Career Transition Partnership (CTP) were forced to cancel employment fairs. CTP sourced alternative methods in which to broker one-to-one engagement between the Service leavers and employers. With more prevalent use of video conferencing, the virtual employment events were developed. The first small-scale pilot was run in May with 11 employers and 136 Service leavers. Each gave a short presentation to in the lobby area, before breaking out into their own video chat room. Six further events have been held and in total the seven events were attended by 110 exhibitors and 797 Service leavers. The feedback from both users and employers has been positive. CTP resumed face-to-face training from 1st July, adhering to government guidelines. To acknowledge the impact that reduced CTP services may have had on Service leavers, they were granted an extra three months access to CTP services, taking their post-discharge entitlement to 27 months.

Veterans Gateway

In May, the Veterans Gateway app was launched, providing a 24-hour service for veterans' support. It was developed by Northumbria University's Northern Hub for Veterans and Military Families Research and funded by the Ministry of Defence and the Armed Forces Covenant Fund Trust.

This new app builds on the success of the Veterans' Gateway online directory and phone service which provides a go-to service for veterans, and has been downloaded by over 6,500 users. It provides a comprehensive interactive digital directory of all services available for almost three million veterans across the country, by location, including substance abuse clinics and details of how to access education, financial assistance, employment support, housing and shelters. The app has been designed to draw anonymised geolocation data on what users are searching for, providing an important to help us identify gaps in provision.

Service for Experienced, Rejoiner and Volunteer Engagements

On Reserves Day in June, the MOD launched SERVE (Service for Experienced, Rejoiner and Volunteer Engagements), a new digital platform that advertises reserve, rejoiner and wider opportunities across the Armed Forces and easily enables veterans to stay connected with Defence.

Non-UK nationals

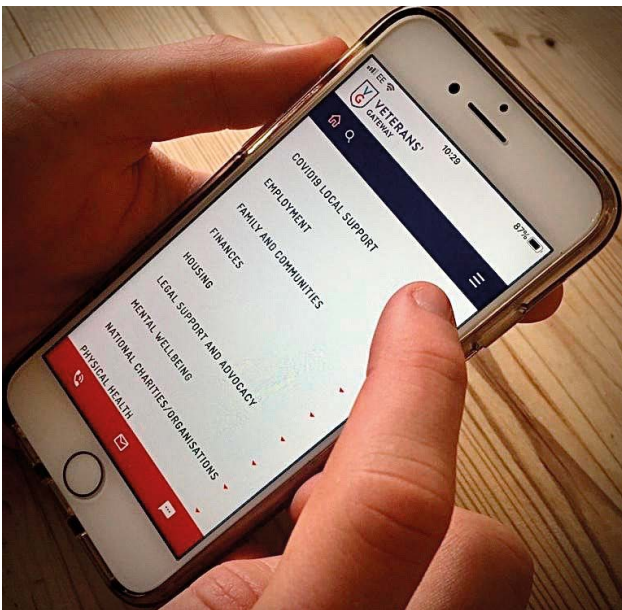
The MOD and Home Office are continuing to discuss the issues faced by non-UK Service personnel and their families as a result of their UK immigration status and the immigration policies that apply to them. One of the main areas of work has been the cost of visas to settle permanently in the UK, which can represent a significant financial burden especially for the more junior ranks. For example, it costs £9,556 for a family of four to settle (financial year 2020/21). Work is ongoing to consider options to address this.

Immigration policy issues that are raised via the tri-Service Non-UK Working Group and other forums are addressed with the Home Office. The work to improve the data capture and sharing between the MOD and Service Charities will assist with this and the MOD is also looking at options to be able to capture more data about the numbers and nationality of Service families to further understand how many are affected by particular elements of the immigration rules.

Veterans in the criminal justice system

Her Majesty's Prison and Probation Service (HMPPS) provides support to veterans in custody through Veterans in Custody Support Officers (ViCSOs). ViCSOs provide training, information sharing, focus groups, online news boards and specific communications to support this cohort. Recently, this has included national communications to request senior points of contact in the event of ViCSOs being utilised for staff shortages, which received an extremely positive response. A brochure has also been sent to all contacts across the custodial estate with information regarding the HMPPS Co-Financing Organisation (CFO3) and how to make contact when CFO3 case managers are not able to access potential participants.

ViCSOs are also in regular contact with external organisations, and provide up-to-date information for training where face-to-face options are not available. In addition, earlier this year HMPPS secured funding from the European Social Fund to deliver a project to promote and target offenders, with a specific veterans' hub located at HMP/YOI Holme House. The hub will provide support to the veteran cohort who will be able to voluntarily relocate to the hub or access its services. They will turn use their skills to mentor other vulnerable cohorts who will voluntarily co-locate alongside the veterans in the hub, such as self-isolators, young offenders and those at increased risk of self-harm. The contracts will commence in February 2021 and will run until August 2023.



The Veterans Gateway app, launched in May, provides a 24-hour service for veterans' support.



CHAPTER 9 – BUSINESS AND THE COMMUNITY

Covenant in business and the community across the UK

Armed Forces Covenant Signings

March saw the 5,000th signing of the Armed Forces Covenant. Despite COVID-19, organisations have continued to sign, bringing the total to 5,769 by the end of September. Organisations come from all regions of the UK and from different sectors as well as in a variety of sizes, with micro and small companies in particular. Key signings this year included Skanska, 3M and Highways England, while every university from across the East Midlands came together to sign the Covenant. It is predicted that by the end of 2020 the total will surpass 6,000.

Figure 3 – Total number of Armed Forces Covenant signings

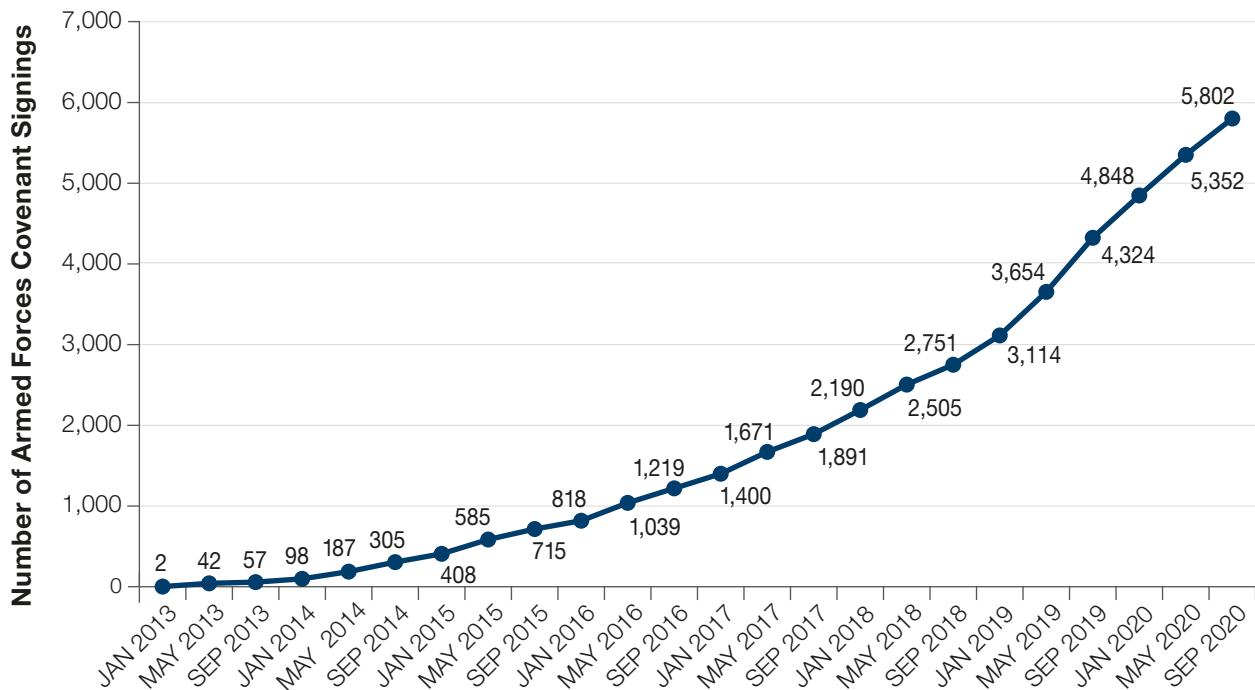


Figure 4 – Armed Forces Covenant signings by company ownership, numbers from 1 October 2019 to 30 September 2020

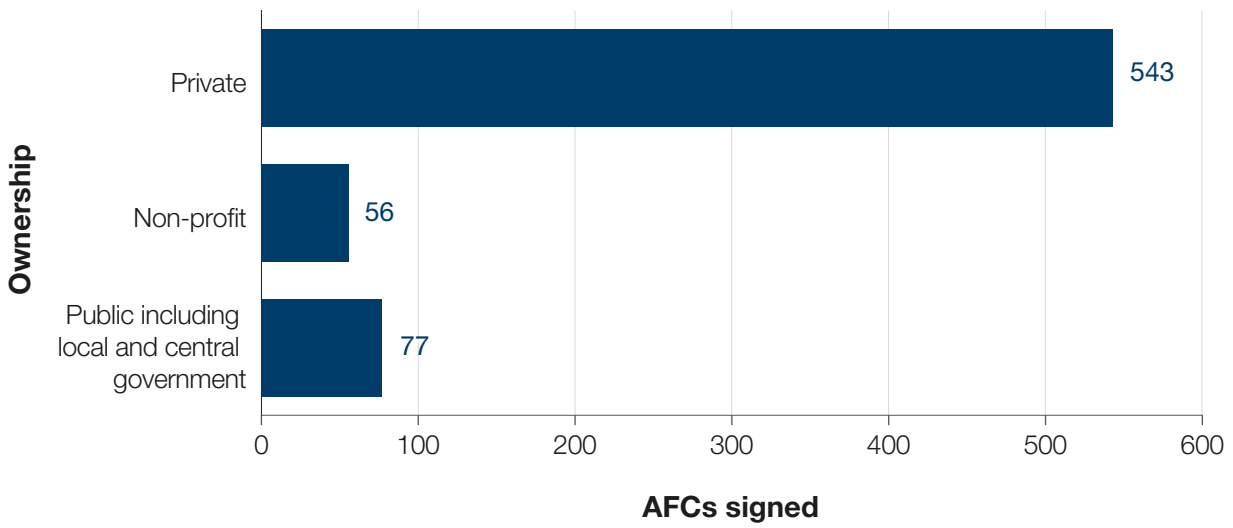
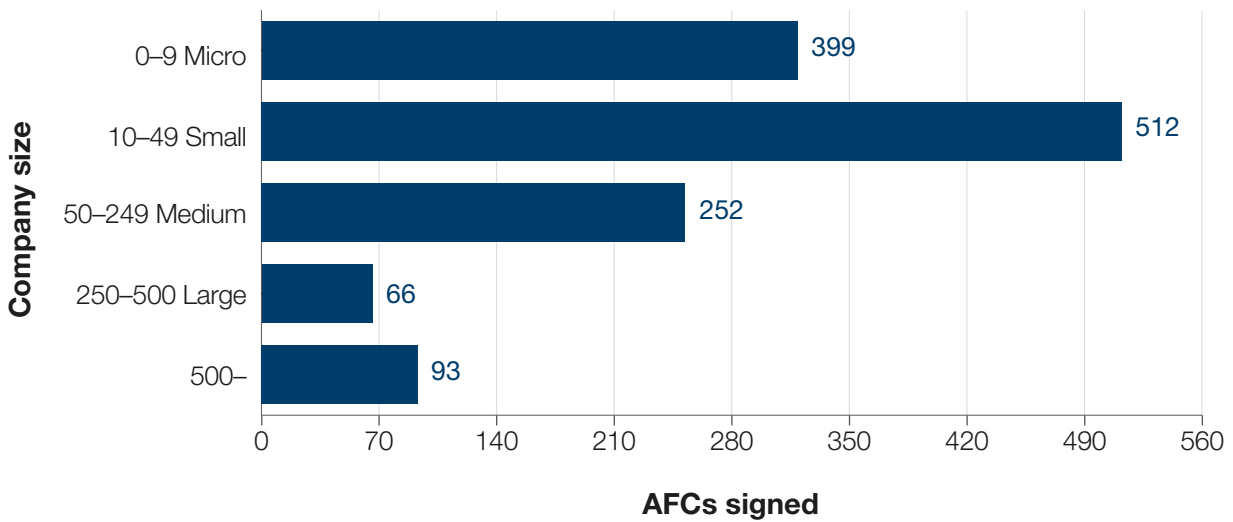


Figure 5 – Armed Forces Covenant signings by company size, numbers from 1 October 2019 to 30 September 2020



Armed Forces Covenant Signing

On Reserves Day (24th June), Nae Limits, an outdoor adventure experience company based in Highland Perthshire, signed the Armed Forces Covenant via Zoom, proving that signings could continue despite COVID-19. The signing was edited into a video that promoted the signing and explained the purpose of the Covenant. This was shared across all the regional social media platforms, reaching in excess of 4,000 people.



Measurement of effectiveness

Efforts to deliver the Armed Forces Covenant in business are delivering against their objectives. Defence Relationship Management has put empirical measurements in place to establish an evidence-based approach to engagement with employers, and commissioned an independent

Employer Attitude Research report, which was delivered in August 2020. Both approaches revealed a consistent improvement in Armed Forces Covenant output and employer approval ratings in relation to their desire to contribute to the operational effectiveness of our Armed Forces.

The internal measurement of effectiveness model allows Defence Relationship Management's account managers to record activities by organisations and employers that benefit or remove disadvantage for the Armed Forces community. These activities include employers providing focused organisational HR policies, communications campaigns, advocacy and internal military networks. The number and quality of recorded activities in the last year are very positive and highlight which types of employer engagement activity employers respond to, enabling Defence Relationship Management to reinforce success, as well as to understand and develop weaker areas.

The most successful activities recorded this year are bespoke HR policies, to provide additional paid leave for reservists to conduct their annual training, and to ensure positive recruitment procedures for Service leavers. For Service leavers, guaranteed interview schemes are especially valuable. There has also been a significant number of communication campaigns recorded which include employers supporting Reserves Day, Armed Forces Day, the Armed Forces Covenant and the Defence Employer Recognition Scheme. However, fewer organisations have engaged in Defence discussion forums, commercial fairness awareness and workplace employer engagement sessions, all of which are areas for focus through the remainder of 2020 and 2021.

In addition to recording positive activity, the measurement of effectiveness model also records the organisation's sector and size (by number of employees). This year has seen a significant uplift support for the Armed Forces community from employers in the public sector, the defence industry, construction, finance and transport. Employers within the energy, utilities and the arts, however, continue to show slower growth. The measurement of effectiveness data now enables Defence Relationship Management to focus on targeted campaigns over the coming year.

Employer Awareness and Attitudes Monitor 2020

The Employer Awareness and Attitudes Monitor is an independent research series which has been conducted annually since 2014. The monitor, which is commissioned by Defence Relationship Management on behalf of MOD, is conducted by a private research company. It is based on interviews with 1,000 employers, split evenly between employers of reservists and non-reservist employers. Participants were selected to ensure an effective spread across industry sectors and sizes of organisations (from SMEs to large internationals). The objectives of the survey were to:

- support the evaluation of Defence's Employer Engagement activities by providing robust data on employer attitudes to reserves and some wider Defence People issues
- enable continuous improvement of employer engagement by informing policy and shaping activities
- build on the historic dataset, showing how employer attitudes are changing over time

The field work for this survey was conducted in February and March, prior to COVID-19. Overall, the results demonstrate positive consolidation with generally high levels of awareness being maintained and employer attitudes remaining consistently positive. The following points are highlighted:

- 52% of employers are aware of the Armed Forces Covenant (52% in 2019). This rises to 68% among the employers of reservists.
- Lack of knowledge continues to be the key barrier to employers signing the Armed Forces Covenant.
- Employer attitudes to reserves are consistent with very high levels of support:
 - 93% of employers believe reserves are a necessary element of the UK's Armed Forces (93% in 2019)
 - 91% of employers believe reservists are an asset to the UK's workforce (91% in 2019)

- 91% of employers believe reserves should be supported by their employers as a matter of principle (91% in 2019)
- 91% believe employers can benefit from the skills and experience that reservists bring to the organisation (92% in 2019)
- Awareness of employers' rights and financial assistance related to mobilisation of reservists remains relatively low (51% and 52% respectively).
- 65% of employers are satisfied with their relationship with Defence (65% in 2019) and among the employers of reservists, satisfaction is 69% (71% in 2019).
- 83% of employers agree that veterans are an asset to the workforce and 90% believe they can benefit from the skills and experience that veterans bring to their organisation.¹²

On the whole, these results remain very positive, and demonstrate continuing forward momentum in terms of employer engagement. However, it is also clear that more effort is needed to improve awareness of the Armed Forces Covenant, and the financial assistance package for mobilisation.

Reserve Forces and Cadets Branch is working with Defence Relationship Management and other teams within Defence People to identify, prioritise and take forward improvement action in these areas.

Defence Employer Recognition Scheme

The Defence Employer Recognition Scheme, launched in 2014, encourages employers to support Defence and inspire others to do the same. The scheme encompasses Bronze, Silver and Gold awards for employer organisations that pledge, demonstrate or advocate support to Defence and the Armed Forces community, and align their values with the Armed Forces Covenant. To obtain a Gold Award, organisations must be an exemplar within their market sector, advocating support to Defence People issues to partner organisations, suppliers and customers with tangible positive results.

¹² New data this year. No comparison data available.

In July, it was announced that a further 127 organisations were awarded Gold from a wide range of sectors and included companies of all sizes from SMEs to FTSE100 as well as councils and NHS Trusts. This brings the total number of Gold Award holders to 367. The rise in the number of Gold awards reflects employers' enthusiasm to demonstrate practical delivery of their Covenant pledges. This growth has created its own challenges, including an increasing administrative burden on Defence and Defence Relationship Management, which requires active management in order to ensure it remains sustainable going forward. A review of the Defence Employer Recognition Scheme will take place through the autumn of 2020 to identify measures to support long-term sustainability, with implementation of agreed changes in time for the 2021 awards.

Employer Recognition Scheme Gold Awards

Salesforce provides a continued commitment to support the Armed Forces community, whether through the provision of career transition assistance, by raising funds for military charities or championing the military community to the organisation. At Salesforce, equality is a core tenet of how they run their business. With this ethos they run VetForce, an employee resource group that promotes forces-friendly culture across the company. The UK network has over 200 active members. In conjunction with this they run Trailhead Military, a unique training and recruitment programme for veterans, service leavers and military spouses.

90% of the Delivery Team at Engage Technical Solutions is made up of Service leavers from the Army, Navy and the RAF. A small- and medium-sized enterprise based in Wiltshire, they operate a referral scheme, so that employed Veterans are able to refer ex-serving colleagues and encourage them to join the company. They have made some incredible headway with Service spouses, enabling a number who have been posted overseas to keep their jobs by assisting them to work remotely.

Business support to Armed Forces community during COVID-19

As part of the government's response to COVID-19, reservists were mobilised, in an already challenging environment for employers. Employer support was sustained through the relationships built up via the Armed Forces Covenant in business. The Assistant Chief of Defence Staff (Reserves and Cadets) wrote to employers with the Defence Relationship Management team reinforcing messages and responding to employers' information requirements. The Armed Forces Covenant-based business network, including the Defence Employer Recognition Scheme Gold Award Alumni group, proved highly effective in terms of enabling communication between Defence and employers. This played a significant part in enabling fast, efficient force generation and sustainment of the reserve component of the force.

The West Midlands region was very quick to move onto digital platforms to maintain effective engagement with employers, and these have been used to deliver a variety of engagement activities. This resulted in maintaining a good level of engagement activity leading to a steady growth in new Armed Forces Covenant signings, and organisations expressing a wish to progress through the Employer Recognition Scheme.

Business support during COVID-19

Vistry Group, created on the 3rd January 2020 with the merger of Bovis Homes and Galliford Try Partnerships, are a FTSE 250 listed housebuilding company based in Kent. Vistry Group have consistently worked closely with the DRM National Accounts team signing the AFC in 2016 and being awarded ERS Gold Award in 2019.

Roger Morton, Group Performance Director, Vistry Group, talking about Colour Sergeant in 4th Battalion The Mercian Regiment, Lee Gregory: *"His full-time employment is as a buyer at Vistry Partnerships, part of the Vistry Group (which also includes Bovis Homes and Linden Homes). We (Vistry Group) managed to have him ready for mobilisation within five days of the request and were very happy to break the normal lead time for mobilisation. We very much saw this as meeting our commitment to the Armed Forces Covenant at a time of national crisis."*

Department for Work and Pensions (DWP) Armed Forces Champions

During 2020/21, the DWP Armed Forces champions (AFCs) have continued to play a pivotal role by working closely with Jobcentre Plus Work Coaches and other staff to raise awareness of how DWP can support veterans, serving members and their families. The AFCs have continued to develop strong partnerships, both nationally and in their local communities, with Armed Forces charities and support organisations. They have also delivered bespoke activities to meet the particular needs of their customers from the Armed Forces community.

Examples include:

- working with the Career Transition Partnership and MOD's Veterans UK organisation to improve Service leavers' access to information on claiming benefits
- running peer support groups that aim to engage veterans in a way suited to them, which were introduced following customer feedback that veterans feel most comfortable with their peers
- extending the delivery of workshops, started in 2019/20, to veteran-supporting organisations on specific DWP benefits, such as Personal Independence Payments – an event this year in Salisbury was well attended by representatives from the MOD, local authorities, and the NHS

DWP Armed Forces Champion in North Wales

At the start of COVID-19 lockdown, the DWP Champion in Llandudno became aware of a veteran who had left the military due to an injury and was now sleeping rough behind a local shopping centre. Working with local partners, they helped organise accommodation the following day in a local veterans' home. A local homeless charity, Hope Restored, ensured he had food and drink. He was later provided with his own temporary unit complete with bed, toilet, shower and TV and has since been housed in his own flat. The DWP Champion, again working with local partners, helped address other issues and barriers faced by the veteran and within four weeks he moved from rough sleeping and lack of money to engagement with several support agencies, receipt of benefit, his own flat and a positive desire to move forward. DWP is a member of the Armed Forces Expert Group and the Veterans Scoping Exercise Action Group in Wales.

DWP National Employer and Partnership Team

Within this reporting period, in support and promotion of the Armed Forces Covenant the National Employer and Partnership Team (NEPT):

- began more intense and targeted work with selected employers on their portfolios, including Lodge Services and Screwfix, to discuss and promote the Covenant
- began work with existing signatories of the Covenant, such as CAPITA, British Security Industry Association and National Access and Scaffolding confederation, to encourage and support them to deliver their commitment
- continued to work with X-Forces Enterprise (XFE) to promote self-employment as an option to members of the Armed Forces community who use DWP services, as well as working together on the development and delivery of a virtual Business Life Skills course for members of the RAF Air Cadets
- strengthened its relationship with Royal British Legion Industries to promote their Lifeworks employment course to veterans and Service spouses

During Armed Forces week 2020, NEPT delivered a campaign across DWP, which included:

- leading DWP's commitment to the Government's Reserves Challenge by supporting cross-government plans and delivering bespoke departmental activity to encourage civil servants to consider serving as members of the Army, Maritime and RAF reserves
- through Jobcentre Plus Districts, promoting career opportunities in the regular Army, Navy, Marines and RAF, part-time service in the reserves, support available to veterans and the benefits of volunteering with the cadet forces
- Skype sessions for employer and partnership staff and Jobcentre Work Coaches, who heard from Walking with the Wounded, a DWP reservist who was involved in supporting the NHS England response to COVID-19 and colleagues who support young people through voluntary service as Cadet Force Instructors

Department for Work and Pensions Work Coaches

DWP's Work Coaches provide tailored and personalised support to members of the Armed Forces community, working in partnership with their district Armed Forces champion where necessary. They provide assistance to veterans and their families. Using their specialist knowledge of local employers and organisations, they deliver a variety of support depending on the particular needs of each customer. The two case studies below illustrate some activity during 2020/21:

Northumberland, Tyne and Wear District

Dan (not his real name) was in the Armed Forces in Afghanistan. He left the Armed Forces in his late 20s and suffered from PTSD. He lived with his grandmother who kept him on track. When his grandmother died, Dan struggled to get to the Jobcentre. His Work Coach encouraged and supported him to attend his appointments. This meant he still got his benefits and kept his house. His Work Coach also referred him to different veterans' groups for extra support. The Work Coach then persuaded Dan to apply for a security officer job at a local store – she told him he had nothing to lose going for the interview. The Work Coach was shopping in the store when a hand came down on her shoulder. It was Dan with the biggest smile on his face. He had got the job. Dan's Work Coach said, "He looks a different man, happier, and has a purpose in life".

East Anglia District

Wayne, a veteran who served in the RAF for 37 years and left in 2017, was helped by his own Work Coach to secure a job as a Jobcentre Plus Work Coach. Since leaving the RAF, he had a couple of jobs, but never settled and wanted a job with more structure. When the DWP vacancies were advertised, Wayne's Work Coach helped and supported him through the application process. He was successful and started work in January 2020.

DWP and Armed Forces Week 2020

For Armed Forces Week 2020, many DWP initiatives took place across the country. One example was that the Dorset, Wiltshire, Hampshire and the Isle of Wight (DWHI) Jobcentre Plus District delivered a variety of innovative virtual celebrations. This included an interactive live Skype session with a former UK Special Forces soldier who discussed the experiences and challenges he faced when leaving the military and transitioning into civilian life. The DWP employer and partnership manager also

recorded an interview for the British Forces Broadcasting Services about a 'Twitter Hour' across DWHI in support of the Armed Forces. Tweets were posted by DWP Armed Forces single point of contacts internally, and partners, providers and employers externally.

Covenant in business and the community across Wales

Employment action group

As part of the Veterans Scoping Exercise, the Welsh Government established a new employment action group to help improve employment support for the Armed Forces. The group is comprised of charities, statutory agencies and the MOD and is focusing on supporting individuals and employers. The group is exploring the potential for additional employer engagement events in Wales and providing additional promotion of the Forces Families jobs website to employers in Wales. Wales-specific support information and documents have been circulated to colleagues across MOD, CTP, Veterans UK to improve access for Service leavers heading to Wales to support information about what is on offer in Wales.

Investment in Armed Forces Liaison Officers

The Welsh Government began funding a network of Armed Forces Liaison Officers (AFLOs) in Wales for 2019/21 at a cost of £250,000 per annum, following initial funding from the Armed Forces Covenant Fund Trust.

The AFLOs work to ensure the principles of the Armed Forces Covenant are delivered in their respective regions. Their work involves engagement, increasing awareness and liaison with key partners and stakeholders to embed the Covenant locally. The roles provide a key link between the public, private and third sector organisations to deliver national priorities at local and regional levels. The value of the AFLOs was cited in the Wales Veterans Scoping Exercise and by the all Wales Armed Forces charities group. Investment in the posts is seen by the Welsh Government as a key intervention to maintain the positive work taking place in Wales to support delivery of the Armed Forces Covenant.

Working with the AFLOs and Welsh Local Government Association, the Welsh Government has developed new key performance indicators that each AFLO is expected to deliver. These include increasing local awareness of the Covenant and the Armed Forces community, delivering the 'Our Community, Our Covenant' guidelines via local partners and working to improve data locally on the Armed Forces community.

Examples of key outcomes:

- training of frontline staff – in one region, the ALFO trained over 1,500 frontline staff across local government and third sector to increase awareness of the Armed Forces community, with awareness of the Covenant increasing from 9% pre-training to 91% post-training
- supporting and promoting the Defence Employer Recognition Scheme
- establishing new veteran support hubs for providers to engage with the ex-Service community
- working with local units to deliver parades, such as the St David's Day parade, to help ensure the Armed Forces are in the public eye
- working to amend local policies to eliminate disadvantage for the Armed Forces community
- facilitating engagement events alongside Welsh Government to collect views on the Wales Veterans Scoping exercise and UK Strategy for Our Veterans

AFLO support to Armed Forces community during COVID-19

Like many organisations and professionals, during COVID-19 the AFLOs adapted to ensure key support was delivered to the Armed Forces community. AFLOs have supported local authority and charity partners to promote services available to members of the Armed Forces community and disseminated relevant help through their own networks and via support groups and hubs that have moved towards virtual engagement. This has included promoting Welsh Government or UK Government funding support for charities or support schemes for vulnerable households.

AFLOs have worked with their local authority partners to ensure that the needs of the Armed Forces community are considered when reinstating or establishing new services as the pandemic develops. They have been active locally in promoting key messages around relevant help available such as mental health support, combating domestic abuse, and employment support for those affected by job loss during the pandemic.

Improving local information for the Armed Forces community

Feedback from veterans and families via the Wales Veterans Scoping Exercise reported difficulties finding clear, relevant information on support available. Working with the University of Northumbria and the Veterans' Gateway, the Welsh Government has been updating local information for Wales on the Directory of Services available via the Veterans' Gateway website. This has been achieved through support from the AFLOs, the Welsh Government Armed Forces Expert Group and local Armed Forces forum members.

During COVID-19, this work was extended, and Welsh Government officials are now directly uploading information to the directory and ensuring it is relevant and up-to-date for the Armed Forces in Wales. On the new COVID-19 tab there is a host of information about local support from Armed Forces charities and community groups in Wales.

Welcome to Wales guide

To capture additional initiatives and support, the Welsh Government has updated the 'Welcome to Wales'¹³ guidance for serving personnel and families. The guide contains information on a range of issues of interest to families being located in Wales, such as education, childcare and health and wellbeing.

Business and the community in Scotland

Scottish Veterans Fund

The Scottish Government continues to invest in the Scottish Veterans Fund and in 2020/21 funded 15 projects totalling £166,127, in partnership with Standard Life Aberdeen. Since 2008, more than 170 projects have received more than £1.6 million from the fund.

As of 2020/21, the Scottish Veterans Fund includes a requirement for organisations bidding into the fund to demonstrate their commitment to Fair Work Framework criteria. The criteria for bids into the fund have been extended this year to include projects which address the impact of the COVID-19 pandemic on the Veterans Community within Scotland.

Scottish Government will be providing additional support to potential applicants this year by staging two events offering support and guidance on applying for funding, with a particular focus on enabling smaller bidders to fully articulate the aims and desired outcomes of their projects.

Veterans Employability Strategic Group

The Veterans Employability Strategic Group, formed in response to recommendations from the Scottish Veterans Commissioner's Employability, Skills and Learning, has been refreshed in 2020 with two new co-chairs – a private sector director and a senior civil servant. The group is considering a new and ambitious purpose and a clear focus. It will continue to build on and strengthen its partnership approach to employability and skills, working in collaboration to identify and strengthen pathways into employment for our Service leavers and veterans and identify ways to promote the value, skills and attributes veterans bring.

Training for frontline service providers

During 2020 the Scottish Government, in partnership with local authorities, MOD and veterans' organisations, promoted and distributed Armed Forces and veteran awareness training to all local authorities in Scotland via the network of Armed Forces Champions. The e-learning is a simple, user-friendly resource which aims to raise awareness and understanding of the Armed Forces Covenant, how it is implemented in the community and how the principles should be applied at a local level. The training package also provides sources of further information and support for the Armed Forces and veterans community. Consideration is being given to expanding this across other frontline service providers including the NHS.

13 <https://gov.wales/sites/default/files/publications/2020-06/welcome-to-wales.pdf>

Unforgotten Forces Consortium

The Unforgotten Forces Consortium is a partnership of 16 civilian and ex-service charitable organisations with the purpose of delivering a wide array of services to veterans in Scotland aged 65 and over. It delivered almost 8,608 episodes of support for older veterans across Scotland during its first two years. The consortium was funded by a £4 million grant of LIBOR money from the MOD's Aged Veteran's Fund which ended in June 2020. From 2020/21, the Scottish Government will contribute £750,000 to the consortium over three years until 2022/23 to improve the health, wellbeing and quality of life for older veterans in Scotland.

Money Advice Trust

The Scottish Government funded the publication of the Money Advice Trust's guide 'How to Deal with Debt' which is due for launch in late 2020 following postponement due to COVID-19. The Money Advice Trust worked with the Armed Services Advice Project, part of Citizens Advice Scotland, to ensure that the specific needs of the veteran community were addressed in the guide.

Scottish Veterans Commissioner

The Scottish Government welcomed the Commissioner's at-a-glance progress report at the end of June 2020 which included a RAG (red, amber, green) assessment and single sentence of narrative against each recommendation. He will publish a more detailed progress report before the end of 2020 which will be developed with input from Scottish Government policy officials.

Support during COVID-19

In the build-up to the remembrance period in November, the Scottish Government have issued guidance to all local authorities and key third sector stakeholders to support the delivery of safe remembrance and ceremonial events during the current COVID-19 pandemic.

Scottish Government employment

During July 2020, the Scottish Government participated in an online session for the Officers Association Scotland. This session highlighted the opportunities that existed, predominantly within health and social care roles, but also in the wider Scottish Government. More than 50 individuals signed up for the event which was recorded for those unable to attend. The genesis of this session followed the successful deployment of a military planning team to the Scottish Government to support the health response to COVID-19.

As of 17 September 2020, 17 expressions of interest for fixed-term appointments have been received. Thus far, one has started in the Outbreak Management Directorate with a further three individuals given a start date of late September. Six other offers have been made, with three now going through pre-employment checks. The remaining seven are having their CVs reviewed by leaders in critical areas across health and social care directorates with firm offers of appointments expected to be made imminently.

Though the specific nature of these appointments will not permit conversion to permanent employment, this is another positive step in providing employment opportunities for veterans.

Additionally, the Scottish Government is offering, initially, two work placements to veterans through the Going Forward into Employment scheme. The initiative provides the opportunity to take on veterans through short placements during their resettlement process, after which government departments have the option to offer fixed-term appointments which could subsequently be converted to permanent ones. The initiative is sponsored by the Chief Executive of the Civil Service Commission and veterans are one of a number of categories of people covered by the scheme, which is intended to help them overcome potential barriers in securing employment. The Scottish Government is working with the CTP to identify suitable candidates and will expand this programme to offer more veterans work placements and possible permanent employment through this route.

The Scottish Government Armed Forces and Veterans Staff Network continues to develop and this year provided advice and support directly to veterans including mentoring, CV-writing, interview preparation and skills translation. Some of the mentored individuals were successfully offered fixed-term appointments in the Scottish Government and at least one secured a job in the third sector.

The Scottish Government has provided links to adverts for vacancies in the Scottish Government through Armed Forces and veterans stakeholders including Forces Families Jobs, CTP, Poppyscotland, Veterans Scotland, 51 Brigade, SaluteMyJob, Officers Association Scotland, Regular Forces Recruitment Agency and British Forces Resettlement Services.

The Scottish Government's People Directorate and NHS Scotland will be represented virtually at the CTP annual employment fair in September 2020 to promote job opportunities in the Scottish Government and NHS and to engage with Service leavers.

Scottish Veterans Commissioner

The Scottish Government welcomed the commissioner's scene-setting paper on transition published in November 2019 and will continue to work with the commissioner to support his work and deliver his recommendations.

Business and the community in Northern Ireland

Support during COVID-19

The response to COVID-19 across communities in Northern Ireland has been very effective and Veterans' Champions have been an excellent direct point of contact at council level. Additional support from 38X was pledged at the start of lockdown, but to date this has not been needed. The Team Rubicon LO also made contact with an offer of support. There has been regular contact and direct passage of information between the Northern Ireland Veterans' Support Office and members of the Northern Ireland Veterans' Support Committee. In common with the rest of the UK, welfare delivery models have changed to remote working. Members' technology is being fully utilised to ensure support is available, and web-chats, virtual classrooms and webinars are all being

used inventively. Collaborative effort has been key. One positive outcome has been that increased and regular contact by phone or Skype with veterans and families who might normally be reluctant to attend group events, is serving to build trust and confidence within this group.

There were seven applications in total from Northern Ireland to the Veterans Should Not be Forgotten programme, all of which were successful. This £118,076 of funding ensured that veterans and their families were not forgotten during the COVID-19 lockdown period and received direct support.

Northern Ireland Veterans Commissioner

I am deeply honoured to have been appointed the first Veterans Commissioner for Northern Ireland. As a former Army Officer in the Blues and Royals I am committed to addressing the challenges that individuals and their families face after military service.

It is my top priority to make myself accessible to veterans, to listen to their needs and ensure that they are appropriately cared for and given the best opportunities to positively contribute to, and benefit, the society they are part of. It is therefore critical that the Armed Forces Covenant is firmly established in Northern Ireland.

Military service embeds in its personnel a sense of duty, selflessness, discipline and hard work, attributes that can be employed in all walks of life.

I look forward to the next three years and will do everything I can to be a strong advocate for veterans and their families living in Northern Ireland.



Danny Kinahan



STRATEGY FOR OUR VETERANS ANNUAL UPDATE

(by the Office for Veterans Affairs)

Strategy for our Veterans UK Government Action Plan update

In 2018, the UK, Scottish and Welsh Governments published the first UK-wide Strategy for our Veterans, which set-out a number of outcomes to be achieved by 2028. To supplement this, each nation consulted on how this Strategy should be implemented.

Across the 10 year timescale, the Strategy addresses the immediate needs of older Veterans as well as setting the right conditions for society to empower and support the newer generation. Initiatives will focus on delivering against the Government's ambitious vision, to make the UK the best country in the world to be a veteran, and will be guided by three key principles:

- Veterans are first and foremost civilians and continue to be of benefit to wider society
- Veterans are encouraged and enabled to maximise their potential as civilians
- Veterans are able to access support that meets their needs when necessary, through public and voluntary sectors

These Principles are consistent with, and underpinned by, the Armed Forces Covenant.

In the last 12 months the Office for Veterans Affairs has driven the Government's veterans' agenda. This is principally through its oversight of the delivery of the 2018 Strategy for our Veterans and its associated Action Plan which was published in January 2020, three months after the OVA was created. The action plan sets out steps to achieve the Government's vision.

To drive the delivery of the Strategy for Our Veterans' and the vision of making the UK the best place in the world to be a Veteran, the OVA intends to publish an updated strategy action plan every two years; the next in 2022. This will allow the OVA to report separately on the delivery of the Strategy for Our Veterans' and include delivery and performance measurements to track progress.

Details of current progress towards the 2020 action plan are below:

Establishment of the Office for Veterans' Affairs – completed in October 2019. The OVA was established in October 2019 to ensure the whole of government pulls together to deliver life-long support to our veterans. It is based in the Cabinet Office, champions veterans at the heart of Government and works with other Government departments, Devolved Governments, the private and charity sectors to coordinate and drive policy on veterans' affairs. It is committed to delivering the best outcomes for veterans throughout the UK and to making the UK the best country in the world to be a veteran.

A governance system has been established. At its pinnacle, responsibility for the delivery of the Strategy for our Veterans Action Plan is vested in the Cabinet Office (through the Office for Veterans' Affairs) and recorded in its Single Departmental Plan. Below this the OVA has established a Strategy Delivery Group, chaired by its Director, to oversee progress and delivery of existing Strategy commitments and provide leadership on veterans matters within HMG. This is complemented by regular engagement between officials from both the UK and Devolved Governments working on veterans matters.

Establishment of charity-facing posts within the MOD – completed in December 2019. The MOD now has a specific charity facing role within the Armed Forces Covenant Team and Defence Relationship Management.

Publication of Veterans Factsheet – completed in February 2020. The OVA published an updated Veterans Fact sheet, offering key facts and data about veterans in the UK. It focuses on veterans' employment, health, housing, and the justice system, and provides some sources of further information.

Guidance for local authorities on allocating Social housing to Armed Forces community – completed in June 2020. The Ministry for Housing, Communities and Local Government published new statutory guidance for local authorities to further improve access to social housing for members of the Armed Forces, veterans and their families. Further details are included in the Accommodation chapter of this report.

Appoint a Northern Ireland Veterans' Commissioner – completed in August 2020. Danny Kinahan has been appointed as Northern Ireland's first Veterans' Commissioner, to act as an independent point of contact to support and enhance outcomes for veterans in Northern Ireland.

Provide funding for the Northern Ireland Veterans' Support Office and Northern Ireland Veterans' Commissioner – completed. Northern Ireland Veterans' Commissioner has been appointed and the Veterans' Support Office has been granted funding.

Increase the number of Jobcentre Plus Armed Forces Champions – ongoing. DWP received additional funds for 2020/21 to bolster the role of the champions. Deployment and recruitment into these roles had to be delayed due to COVID-19.

Pilot and commission an improved range of the Veterans' Mental Health Service (including a High Impact Service (HIS)) – ongoing. The forthcoming Veterans' Mental Health High Intensity Service (HIS) will see even more investment in veterans' mental health. Further details about the pilot of HIS are included in the Healthcare chapter of this report.

Veterans railcard – ongoing. In line with the Government's manifesto commitment, veterans will get discounted train travel from 5th November 2020 with the launch of the Veterans' Railcard. This programme is being led by the Department for Transport with OVA support. The railcard, which went on sale on 14th October 2020 will extend discounted train travel to the more than 830,000 Veterans not covered by existing discounts, providing a further boost to their job prospects and bringing them closer to family and friends. This railcard will also allow their family to travel with them, potentially saving veterans' families hundreds of pounds a year.

Guaranteed Interview Scheme – ongoing. In February, the Government announced that it will be offering an interview to any veteran applying for a Civil Service job, as long as they meet the minimum criteria for the role. All final appointments to the Civil Service will be made on merit. The initiative is being led by the OVA and Civil Service HR/Civil Service Employee Policy. An initial pilot phase was launched in October 2020 to allow user testing to be conducted and ensure that the experience for veterans is a positive one. This pilot has been rolled out in four early adopter departments (Cabinet Office, Ministry of Defence, Ministry of Justice and Home Office, including Border Force).

National Insurance Holiday – ongoing. As announced in the budget and following through on a manifesto commitment, employers will pay no National Insurance contributions on the salary of any veteran they take on during their first year of civilian employment. The OVA and HMRC launched a consultation on the scheme, which is being led by HM Treasury, in July 2020. The consultation closed in October 2020. Employers currently pay Employers' National Insurance contributions of 13.8% of the employee's salary. Under this measure, they will be able to save this cost on an employee's salary up to the Upper Earnings Limit (£50,000). An employer taking on a veteran earning £25,000 will save around £2,000 in NICs. A full digital service will be available to employers from April 2022; however, transitional arrangements will be in place in the 2021-2022 tax year that will effectively enable employers of veterans to claim this holiday from April 2021.

Publish guidance to enable standardisation of how to ask about previous Armed Forces service – ongoing. MOD are leading on publication of technical guidance on how the questions should be asked to enable veterans to declare their previous Service, based on that produced by the Office of National Statistics for the 2021 Census.

Exploit Loneliness Strategy initiatives – ongoing. Work is continuing with officials in DCMS to explore how veterans could benefit from initiatives developed through the cross-government Tackling Loneliness agenda.

Review of definition of ‘priority treatment’ within healthcare – ongoing. A UK wide working group was established and, after meeting several times during the reporting period, concluded that the definition should remain unchanged at this time. The group will continue to meet to monitor perception of priority treatment, track priority services as they develop and share best practice.

Address perceptions of veterans – ongoing. The OVA is co-ordinating with Government and charity partners to maximise positive messaging around the contribution of veterans, as well as working to increase and update existing insight on public perceptions of veterans. From this, the OVA will develop and deliver a targeted communications campaign in 2020/21.

Creation of a veterans portal on GOV.UK – ongoing. Collating content from across multiple government websites into one easily navigable location. Delivery on this has been delayed due to COVID-19.

Develop and publish a veterans digital and data strategy – ongoing. The OVA have agreed with other government departments to the creation of a cross-government data working group, with each department agreeing to put forward a data champion. The OVA have also agreed cross-government collaboration to scope an annual veterans survey.

Delivery of Programme CORTISONE – ongoing. The future MOD Medical Information Systems capability will support seamless connectivity to the NHS and ease the transfer of a Service Leaver’s medical records to their new GP practice. This is on track to being delivered in Autumn 2021.

Continue roll-out of the veteran-friendly GP practice accreditation scheme across England – ongoing. The veteran-friendly GP practice accreditation is being rolled out across England over the next three years to help ensure practices are equipped to best care for veterans and their families as part of the commitments of the NHS Long Term Plan. Over the last year, the number of GP practices accredited as Veteran Friendly has more than tripled to over 800.

Initiate a review of the Aftercare Service in Northern Ireland – ongoing. A review into the NI Aftercare Service will consider whether the remit of the ACS should be widened to cover all HM Forces veterans living in Northern Ireland with service-related injuries and conditions. The Veterans’ Support Office continues to link veterans in NI with the required transition services, via an experienced delivery network.

Research

The OVA is funding the next stage of a longitudinal study, led by Kings Centre for Military Health Research, into nearly 30,000 veterans deployed to Iraq and Afghanistan since 2003.

In June, the OVA announced that they are funding a new study being led by KCL, looking at whether COVID-19 has had any specific impact on the veteran community in the UK. This in turn will allow policy makers in government to understand potential issues affecting veterans and respond accordingly based on expert advice and evidence.

Veterans’ Advisory Board

In the summer of 2020 the OVA began the process of curating a Veterans’ Advisory Board. The aim of the board is to bring insight, advice and challenge to our work from a mixture of those from the veteran and civilian communities. The first Board meeting will take place in November 2020 and will be chaired by the Chancellor of the Duchy of Lancaster.

The Veterans’ Advisory Board will provide independent insight and expert advice to Ministers about the future needs and expectations of veterans and advice on the delivery, impact, effectiveness, sustainability and inclusiveness of current and future support services and policies.

The Board will act as a critical friend to UK Government on issues that affect veterans, and the context in which they receive support and are received and supported in society. It will play an important role in supporting work to achieve the Government's vision, to make the UK the best country in the role to be a veteran.

Looking ahead

The UK Government has outlined an ambitious work plan in the 2020 Strategy Action Plan. Details of the future work plan are below:

- Championing the use of digital technology to improve access to support for veterans and make it easier to verify that someone is a veteran.
- Improving the use of data to understand veterans' needs and improve policies and services.
- Improve access to mental health services and build on the new High Intensity Service for those with the most severe mental health challenges.
- Reviewing veterans' services to establish a baseline to provide a meaningful international comparison.
- Collaborating with the charity sector on making the UK the best place to be a veteran and improving the coordination and integration of support for veterans.

Welsh Government Veterans Scoping Exercise

The Welsh Government undertook a Veterans Scoping Exercise between October 2018 and February 2019, to identify key gaps in current service provision for veterans and families. This work supported the Welsh Government's contribution to the Strategy for our Veterans. In January 2020, the findings from this exercise and the resulting key headline actions were published in the document 'Taking forward the findings of the Veterans Scoping Exercise in Wales and the Strategy for our Veterans'. The Welsh Government has taken forward these via the new governance arrangements and working groups outlined on page 98 (Chapter 1 – Governance).

Key outcomes to date have included:

- £120,000 of grants for organisations in Wales to tackle loneliness and social isolation amongst the Armed Forces community;
- Working with Northumbria University and the Veterans' Gateway to increase the information relating to support available in Wales for the Armed Forces community;
- Reviewing existing health guidance around priority treatment with updates planned next year;
- Increasing funding for veterans' mental health services;
- Promoting Forces Families Jobs website in Wales.

Scottish Government Strategy for our Veterans

The Strategy for Our Veterans launched in November 2018 has raised the profile of veterans' issues and provided an opportunity for the Scottish Government to highlight the priority it places on promoting veterans as assets to our society and to providing effective support to those veterans who need it. To supplement the UK public consultation, in 2019 the Scottish Government completed an extensive round of face-to-face engagements with stakeholders throughout Scotland, engaging with more than 60 organisations across the public, private and third sectors, including groups of veterans themselves.

Following a request from the UK Government, the Scottish Government delayed publishing its response 'The Strategy for Our Veterans: Taking the Strategy Forward in Scotland' from December 2019 until January 2020 to align the timing with the UK and Welsh Governments.

The Scottish Government's response highlights the work that it is taking forward for veterans and the Armed Forces community including to deliver against the recommendations in the Scottish Veterans Commissioner's reports.

This year, some of the key outcomes against the Scottish Government's strategy commitments have included:

- continuing to invest in the Scottish Veterans Fund and in 2020/21 funded 15 projects totalling £166,127
- providing £750,00 of funding over the next three years to 2022/23 for the Unforgotten Forces Consortium to improve the health, wellbeing and quality of life for older veterans in Scotland
- promoting and distributing Armed Forces and veterans awareness training to local authorities across Scotland
- working with the Officers Association to provide fixed-term appointments within the Scottish Government to veterans
- adopting the Going Forward into Employment scheme for veterans, working with CTP to generate a regular flow of military talent into the organisation on fixed-term appointments with the option to make these permanent
- supporting and delivering a series of virtual commemoration events to recognise the 75th anniversaries of VE and VJ Day and the 80th anniversary of St Valery-en-Caux

- providing guidance to local authorities and key stakeholders on delivering safe Remembrance and commemorative events during COVID-19 restrictions
- a refresh of the Veterans Employability Strategic Group with new co-chairs – a private sector director and senior civil servant – and a refreshed purpose, focus and vision

Project Re-group


The NHS England and NHS Improvement pathfinder (Project Re-Group), in collaboration with a number of charities, has been active in both practice and contemporaneous evaluation of the pathways that can support veterans in the criminal justice system. The work supports veterans both in and out of prison settings, working with professionals (clinical and justice-related) and associated charities to support the physical and mental health of veterans and provide guidance, peer support and after-release mentoring. With additional input from individuals who have been through the system, this work and the evaluation will inform a planned potential expansion of the programme in future.





ANNEX A – TABLE SETTING OUT PROGRESS AGAINST EXISTING COMMITMENTS



This table shows progress against all commitments made for the first time in the Armed Forces Covenant Annual Report 2019 and against those recorded in Annex A of that report as ‘to be completed’. Actions listed as completed in earlier annual reports are not included.

KEY TO RED/AMBER/GREEN STATUS	
Completed/Terminated	
On target for delivery	
More work needed to achieve target	
At risk of not being delivered	

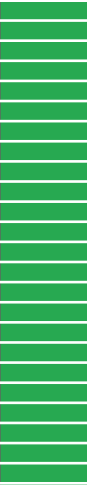

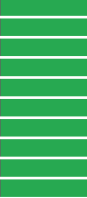
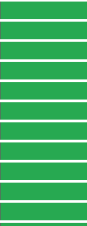
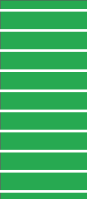
GOVERNANCE

Commitment	Applies to	Progress	RAG
The government will implement the new cross-government communications strategy in order to increase awareness and understanding of the Covenant.	UK	The commitment is on target.	

HEALTHCARE

Commitment	Applies to	Progress	RAG
The Welsh Government will implement a national action plan across Wales, aimed at expanding the provision of psychological therapies.	Wales	This commitment is complete.	
Department of Health and Social Care (DHSC) is working across UK, with the NHS and Service charities, to redefine what ‘priority treatment’ means, to make it more meaningful and future proof for veterans and clinicians.	England	A UK-wide working group was established and, after meeting several times during the reporting period, concluded that the definition should remain unchanged at this time. The group will continue to meet to monitor perception of priority treatment, track priority services as they develop and share best practice.	























HEALTHCARE

Commitment	Applies to	Progress	RAG
DHSC and the Department for Education have identified a number of trailblazer sites to test out proposals from the green paper on the mental health of children and young people. The trailblazers will go operational by the end of 2019.	England	Government are trialling three key proposals of the green paper in trailblazer areas. The first 25 areas, delivering 59 mental health support teams, were announced in December 2018. The first teams have completed their training and are now becoming fully operational. Twelve of these sites are also piloting a four-week waiting time. A further 57 sites, delivering 123 mental health support teams, were confirmed in July 2019. They will start to operate towards the end of 2020 (or in early 2021), once training is complete. In May, a further 58 areas were confirmed, where 104 new teams will be developed during 2020/21.	
Defence statistics will publish the first report for all causes of death (2001-2018) in spring 2020 as part of a large surveillance study, the Veterans Cohort Study into causes of death for UK Service personnel.	UK	Defence statistics are continuing to work with colleagues in NHS Digital, the Health Research Authority and National Records Scotland and are hopeful that the initial report will be published later this year.	
NHS England and NHS Improvement are working with the Defence Medical Services on a scoping exercise to determine how many veterans might benefit from the services at Defence Medical Rehabilitation Centre (DMRC).	England	The first working group to look at the rehabilitation care pathway for veterans and how this can best be delivered was held in September.	
The government has committed funding to the development of an NHS England-led National Rehabilitation Centre to be co-located with the DMRC at Stanford Hall site, to provide cutting-edge rehabilitation services to the public in England. The facility is scheduled to be operational in 2022.	England	Development of the facility is ongoing, with mandatory public consultation on the proposals open between July and September. The facility is now scheduled to be in operation in 2023.	
The veteran-friendly GP practice accreditation is being rolled out across England over the next three years to help ensure practices are equipped to best care for veterans and their families as part of the commitments of the NHS Long-Term Plan.	England	NHS England and NHS Improvement and the Royal College of General Practitioners continue to progress the roll-out of this initiative, prioritising locations with high numbers of veterans.	
NHS England and NHS Improvement are progressing arrangements to commission a High Intensity Mental Health Service for veterans who are in a mental health crisis and need urgent and emergency care and treatment. This will commence with pathfinder services launching in April 2020.	England	The Veterans' Mental Health High Intensity Service is being rolled out across England as part of a phased approach, commencing with the launch of regional pathfinders in autumn 2020 that were delayed due to COVID-19. The pathfinders will run until the end of March 2022.	

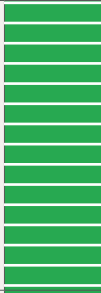
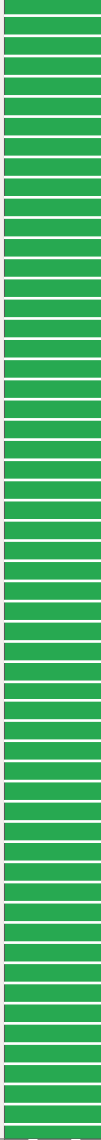

HEALTHCARE

Commitment	Applies to	Progress	RAG
<p>NHS England and NHS Improvement will launch an engagement in early 2020 to better understand and explore the health needs of Armed Forces families with findings helping to inform the commissioning of a support service for this patient group.</p>	<p>England</p>	<p>Originally planned for May, this has been delayed until autumn 2020 due to COVID-19.</p>	
<p>The regional Veterans ReGroup programme will be delivered for a period of 18 months, with key insight and outcomes informing future commissioning arrangements for an England-wide service.</p>	<p>England</p>	<p>Project ReGroup is ongoing – it has been active in both practice and contemporaneous evaluation of the pathways that can support veterans (and families) across and through the criminal justice system. Following a review report and with key additional input from individuals who have been through the system, this collaborative work (including partners from the Armed Forces charitable sector) and the evaluation will inform a planned phased expansion of the programme in future years. This includes links to other key services such as veterans' mental health and family support programmes, as well as programmes within the England national health and justice work programmes.</p>	
<p>DHSC, NHS England and NHS Improvement have committed to introducing a 28-day standard cancer wait time by 2020 and committed an additional £300 million on diagnostics.</p>	<p>England</p>	<p>The 28-day faster diagnosis standard is underpinned by a radical overhaul of the way diagnostic services are delivered for patients with suspected cancer. Rapid Diagnostic Centres will bring together diagnostic equipment and expertise to streamline diagnostic services for cancer across all pathways, benefitting all patients receiving a cancer referral. This new standard is currently being piloted in 11 NHS Trusts. COVID-19 has affected the timetable of the Clinical Review of Standards and a formal recommendation for change to the existing cancer standard is yet to be made.</p>	
<p>The Welsh Government has committed to fund free swimming for serving personnel and veterans until 2021.</p>	<p>Wales</p>	<p>The Welsh Government has continued to support free swimming for Service personnel at local authority swimming pools across Wales. A total of 8,319 free swims were recorded during 2019/20.</p>	

EDUCATION

Commitment	Applies to	Progress	RAG
The Department for Education will produce guidelines for schools on the use of Service Pupil Premium funding.	England	The Department for Education and MOD are working in partnership to identify and disseminate examples of the Service Pupil Premium being used in effective ways by schools, in a range of circumstances. Case studies of good practice will be published in 2021 (precise date TBC)	           
The MOD will consider options for providing increased notice to Service families to allow more time for the school admissions process.	UK	This commitment is on target.	          
The MOD will continue to strengthen its partnerships with education departments, local authorities of main Armed Forces areas, professional bodies and networks to promote the needs of children from Service families.	UK	Working with the MOD Local Authority Partnership (MODLAP), the MOD's Directorate Children and Young People developed a set of principles for the transition of Service children with SEND in England. This set of principles have been presented and endorsed by the 15 LAs in MODLAP. An equivalent MODLAP in Wales has also been developed.	
The Scottish Government's funded early learning and childcare (ELC) hours that all three and four-year-olds, and some two-year-olds, in Scotland are entitled to is set to almost double from 600 to 1,140 hours from August 2020.	Scotland	The impacts of coronavirus necessitated a delay to the full roll-out of the duty to provide 1140 hours of Funded Early Learning and Childcare (ELC), which was set out in a joint communique from COSLA and the Minister for Children and Young People to local authorities in July 2020. We remain absolutely committed to delivering the expansion, and the return to 1140 as soon as it is reasonable to do so. Where local authorities are already delivering expanded entitlements, we have made clear that it is critical that this is protected and maintained. Full funding for 2020-21 to support the expansion has been - and will remain - in place for local authorities and flexibility has been given to enable a focused approach to address the needs of children and parents, in recognition of the differing challenges faced locally. We continue to work with Local Government and the childcare sector to discuss and agree a realistic timetable for full rollout of 1140 hours entitlement. This will allow us to bring legislation back to the Scottish Parliament to secure 1140 hours entitlement for all children and most importantly to make expanded ELC a reality for families.	
The MOD will complete an additional 50,000 apprenticeships by 2020.	UK	This commitment is complete.	





EDUCATION

Commitment	Applies to	Progress	RAG
<p>The MOD will continue to work with colleagues in the Department for Education to seek to resolve the issue of transfer of information for children from Service families, particularly those with Special Educational Needs and Disabilities; and modify and promote the Pupil Information Profile for overseas and devolved administrations schools.</p>	<p>UK</p>	<p>MOD continue to work with the Department for Education as the School Admissions Code and the SEND Code of Practice are reviewed. Consultation around proposed changes to the School Admissions Code is due to close in October 2020.</p>	
<p>The Scottish Government and Scottish Funding Council are continuing to engage with stakeholders to explore the barriers to further and higher education which may exist for children of Service families.</p>	<p>Scotland</p>	<p>A Service Children’s Progression Alliance Scottish Hub, led by the Royal Caledonian Education Trust (RCET) and hosted by Heriot-Watt University, has been established. The Hub champions the progression of children and young people from military families into further and higher education.</p> <p>It is working on a range of digital resources to raise awareness of Armed Forces issues aimed at teaching and support staff. The six learning steps will be: The Covenant; Armed Forces family life; The Emotional Cycles of Separation and Loss; Transitions; The Views of Children and Young People; and Research.</p> <p>Additionally, in partnership with the University of Strathclyde RCET has commissioned a thorough Literature Review of research projects in Scotland which focus on any aspect of AF life. This will help them identify the gaps and what needs to be done to fill them.</p> <p>The Armed Forces and Veterans Community Group (AFVCG), led by the Scottish Funding Council, supports the work of the HE:FE Veterans Champions Network with Veterans Scotland. The Group includes members from Veterans Scotland, Scottish Government, colleges, universities, SWAP, SAAS, Royal Caledonian Education Trust (RCET). The AFVCG links with other key groups supporting the military and their families and over the next year will be exploring existing and potential research on children from military families as well as drawing on any data that may be available to provide additional support to this group.</p>	
<p>The MOD will work with devolved administrations and local authorities to ease the transition for Service personnel returning to the UK from Germany.</p>	<p>UK</p>	<p>The transition of Service children into UK education has concluded.</p>	




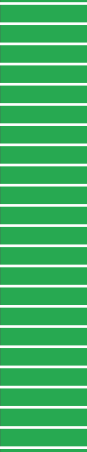
EDUCATION

Commitment	Applies to	Progress	RAG
The Service Children Progression Alliance will launch an interactive online mapping and targeting tool in January 2020. The alliance is also developing a Service children's support framework for schools, and a suite of evidence-based resources for practitioners.	UK	The launch has been delayed until late 2020.	
By June 2020, the MOD policy for the Professional and Personal Development Plan as part of the Through Life Development Policy will be incorporated as guidance in JSP 822 in support of building a culture of personal development.	UK	Since this commitment was made in the 2019 Covenant Annual Report, it is now the intention that the Defence Learning and Management Capability will provide a Professional and Personal Development Plan capability as one of its services; the Army's requirement under Project CASTLE will probably be a test bed for this. Timeframe for delivery will likely be end of 2022 or beginning of 2023. While this is a delay to the original schedule, the end product will be incorporated into policy and process and therefore used by Defence personnel.	



ACCOMMODATION

Commitment	Applies to	Progress	RAG
By 2019 the MOD will establish a Single Living Accommodation Management System to provide critical information on the condition of the estate and inform key investment decisions.	UK	Complete	
Develop an alternative approach to the provision of accommodation for Service personnel and their families.	UK	FAM being piloted at three UK sites until 2022 will gather evidence on the viability of providing a wider choice of subsidised accommodation options to personnel by expanding choice to the private rental sector and supporting personnel into home ownership.	
The Ministry for Housing, Communities and Local Government intends to go out to consultation on new statutory guidance for local authorities which will remove the local connection requirement for divorced and separated spouses and civil partners of Service personnel.	England	The new statutory guidance published in June 2020.	
The MOD will issue a new Service Families Accommodation Customer Charter, with increased focus on responsibilities and outcomes, in December 2019.	UK	The Service Family Accommodation Customer Service Charter was issued widely in December 2019.	





ACCOMMODATION

Commitment	Applies to	Progress	RAG
The programme to deliver 917 modern new-build SFA at Salisbury Plain as part of the Army Basing programme will be completed in July 2020.	UK	All new-build SFA at Salisbury Plain have been handed over by the developer to MOD.	
In financial year 2019/20, £123 million will be invested to further improve and modernise SFA, including receipts from over 1,400 sub-let properties.	UK	MOD did invest £123 million in improving and modernising SFA in financial year 2019/20.	
In early 2020, the Scottish Government will work with the MOD, local authorities and the third sector to develop and implement a pathway to prevent homelessness for people who have served in the Armed Forces.	Scotland	The Scottish Government has asked the chair of the Veterans Scotland Housing Group to take forward the work to develop a veterans homelessness prevention pathway. The knowledge and expertise which will be used to develop this pathway will ensure the housing system in Scotland responds to the needs of veterans and prevents homelessness. This work is expected to start towards the end of 2020 and will be supported by the Scottish Government.	
In April 2020, the independent evaluation report commissioned by the Welsh Government to determine if amendment is required in the assessment of priority need in Wales to ensure that veterans are able to access support and services will report its findings.	Wales	Welsh Government has previously set out that it is undertaking a review of the Wales housing code of guidance and updating it in liaison with a range of stakeholders. Welsh Government has also commissioned a review of priority need. Both of these pieces of work have been delayed by the current pandemic, as the focus of all of the Homelessness Prevention Team work is necessarily on responding to COVID-19. The Veterans Scoping Exercise included recommendations to ensure the Armed Forces community is included in that work and the new governance structure in Wales will be monitoring delivery.	

BUSINESS AND THE COMMUNITY

Commitment	Applies to	Progress	RAG
The MOD will work with the financial services sector to address any potential disadvantages associated with Service overseas.	UK	Work is ongoing.	
During 2018, credit reference agencies and lenders are aiming to complete system changes to improve the recognition and transfer of individuals' credit history while they are based at British Forces Post Office addresses, building on recent improvements in this area.	UK	Ongoing work engaging with the Families Federations as issues arise.	

BUSINESS AND THE COMMUNITY

Commitment	Applies to	Progress	RAG
The government will continue to drive delivery of the recommendations of the 'Our Community Our Covenant' report via the newly formed action group.	UK	Action group work is ongoing.	
MOD will, in consultation with business, introduce key performance indicators for the Covenant in Business.	UK	The recommended actions from Defence Relationship Management's previously reported measurement of effect work are now fully embedded in the MOD's operational delivery of Employer Engagement as endorsed in the Service Level Agreement between the MOD and Defence Relationship Management.	
The MOD will look to produce new tools and guidance, will arrange a National Covenant in the Community conference, and will attend many local events arranged by Covenant partners.	UK	The National Covenant in the Community Conference scheduled for April 2020 was postponed due to COVID-19. It will be rearranged when government guidelines allow.	
The MOD will seek to improve the business section of the Covenant website to appeal to businesses and organisations who have signed or who want to support the Covenant continue to be developed.	UK	Work is ongoing.	
The MOD will seek to address the key findings of the Forces in Mind Trust review of the Covenant in Business report throughout 2020.	UK	RF&C and Defence Relationship Management are fully engaged with the FiMT Employment Working Group.	
The MOD's Defence Relationship Management team intends to utilise the measurement of effectiveness records to further develop regional performance measures and targets.	UK	This is now implemented. The Defence Relationship Management measurement of effectiveness records are now fully incorporated into the Service Level Agreement, which directs the key performance indicator for them to deliver against as the MOD's selected agent for employer engagement activity.	




FAMILY LIFE

Commitment	Applies to	Progress	RAG
Following thorough consultation in 2017, MOD will formally consider options for strengthening the childcare support offer for the families of Service personnel early in 2018.	England	The MOD's Wraparound Childcare pilot programme began making payments to families at the first pilot sites, RAF High Wycombe and RAF Halton.	
The Home Office will work to resolve issues experienced by non-UK families applying for visas and passports.	UK	Work is ongoing.	

FAMILY LIFE

Commitment	Applies to	Progress	RAG
The MOD will continue working with the Families Federations to gather further evidence on the inclusion of divorced spouses in the categories of the Armed Forces community and report on the subject in this year's report.	UK		
The Welsh Government to introduce an enhanced flexible childcare offer for working parents of three and four-year-olds by 2020.	Wales	This commitment has been completed.	
The findings of the review and recommendations on how to improve the coherence of current MOD policies and those of other government departments to ensure they reflect the needs of families with additional needs will be reported at the 2020 Forces Additional Needs and Disability Forum Conference.	UK		

TRANSITION AND THROUGH-LIFE SUPPORT

Commitment	Applies to	Progress	RAG
The government will publish a consultation response for the Strategy for Our Veterans shortly.		Work is ongoing.	
The Secretary of State for Defence and other ministerial colleagues are considering how to take the issue of war widows pension forward.		Work is ongoing.	
The MOD is working to improve its understanding of non-UK nationals and the implications that cultural differences have for the type of support MOD should offer. The MOD and Home Office continue to discuss the challenges faced by the non-UK community on the wider issue of immigration policy.			
Business in the Community Cymru and the RBL Veteran-Friendly Employers Group will be organising its own networking and workshop sessions for employers and veteran jobseekers in autumn 2019.		During Remembrance Week in November 2019, the Business in the Community Veterans Employment Leadership Team ran an event to bring together businesses, third sector organisations and veterans, in partnership with Cardiff Council and the Royal British Legion. The event was designed to both support employers to capitalise on military talent, and also to enhance the employability skills of veterans and provide direct access to local employers.	



ANNEX B – ARMED FORCES COVENANT METRICS

Health metrics: Service-provided medical treatment and families access to the NHS

Table 1: UK regular Armed Forces Personnel satisfied with Service-provided medical treatment received over the past two years, estimated percentage 2011 – 2020

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Medical treatment	..	..	..	..	77	76	76	76	80	80
Dental treatment	87	86	85	86	87	86	86	87	89	89

Source: Armed Forces Continuous Attitude Survey 2020

(<https://www.gov.uk/government/collections/armed-forces-continuous-attitude-survey-index>)

1. Minor wording and format change in 2015.
2. Excludes n/a responses.
- .. Represents data unavailable.

Table 2: UK Armed Forces families able to access medical care in the past 12 months, estimated percentage 2012 – 2020

	2012	2013	2014	2015	2016	2017	2018	2019	2020
GP (including nurse/midwife)	97	96	96	98	98	98	98	98	97
Dentist	88	89	90	91	90	90	90	89	87
Hospital or specialist services	..	..	..	98	96	97	97	96	95

Source: Tri-Service Families Continuous Attitude Survey 2014 and 2020

(<https://www.gov.uk/government/collections/tri-service-families-continuous-attitude-survey-index>)

1. 2012-2014 – excludes N/A.
 2. 2015-2019 – Includes 'Yes, without difficulties' and 'Yes, but with some difficulties'; Excludes missing and 'No, I did not need to' responses.
 3. Responses are filtered for those who required access to respective medical care [GP: 93%, Dentist: 87% and Hospital: 61% for 2020].
- Break in time series due to change in response options and population reported on.
- .. Represents data unavailable.

Table 3: UK Armed Forces families able to continue medical treatment¹ following a move² in the past 12 months, estimated percentage 2012 – 2020

	2012	2013	2014	2015	2016	2017	2018	2019	2020
GP (including nurse/midwife)	93	90	92	96	95	93	95	92	91
Dentist	79	70	74	75	82	81	82	78	77
Hospital or specialist services	..	..	..	91	90	85	84	83	80

Source: Tri-Service Families Continuous Attitude Survey 2014 and 2020

(<https://www.gov.uk/government/collections/tri-service-families-continuous-attitude-survey-index>)

1. Refers to whether spouses/dependants were able to continue treatment in new location if moved.
 2. Includes: if moved for own reasons and; if due to Service.
 3. 2012-2014 – excludes N/A.
 4. 2015-2019 – Includes 'Yes, without difficulties' and 'Yes, but with some difficulties'; excludes missing and 'No, I did not need to' responses.
 5. Respondents are filtered for those who moved in the last 12 months whilst undergoing treatment [GP: 13% Dental: 8% Hospital: 10% for 2019].
 6. Numbers based on a small subset: people who have moved and needed to continue treatment.
- Break in time series due to change in population reported on.
 .. Represents data unavailable.

Health metrics: Cancer wait times

Table 4: UK Armed Forces personnel¹, wait times for cancer treatment in England, numbers and percentages 2017/18 – 2019/20

		2017/18		2018/19		2019/20	
		number	%	number	%	number	%
Two week wait for all cancers ²	Service personnel	1,729	93.4	1,886	91.7	2,192	91.6
	England	1,833,138	94.1	2,066,264	92.0	2,386,815	90.8
	Target ⁵		93		93		93
Two week wait for symptomatic breast patients (where cancer was not initially suspected) ²	Service personnel	264	87.4	230	85.8	217	81.6
	England	179,996	92.8	164,485	85.8	176,807	83.9
	Target ⁵		93		93		93
One Month (31-day) diagnosis to first treatment wait for all cancers ³	Service personnel	82	96.5	123	97.6	111	97.3
	England	287,270	97.5	303,569	96.8	316,588	96.0
	Target ⁵		96		96		96
62-day wait for first treatment following an urgent GP referral for all cancers ⁴	Service personnel	26	83.9	57	87.7	47	87.2
	England	122,631	82.3	129,724	79.1	167,101	77.2
	Target ⁵		85		85		85

Source: Cancer Waiting Times Database (CWT-Db), NHS England

1. All Defence Medical Services registered patients; will include Service families who are DMS registered.
2. Patients seen within 14 days of referral.
3. Patients treated within 31 days of the decision to treat date.
4. Patients received a first definitive anti-cancer treatment within 62 days of the urgent referral date.
5. Operational Standard: expected level of performance based on case mix, clinical requirements, potential numbers

of patients unfit for treatment or electing to delay treatment (patient choice).

Table 5: UK Armed Forces Veterans, IAPT¹ waiting times for referrals entering treatment¹, England, numbers and percentages² 2014/15 – 2019/20

Waiting times	2014/15		2015/16		2016/17		2017/18		2018/19		2019/20		
	number	%	number	%	number	%	number	%	number	%	number	%	
6 weeks or less	Veteran	5,990	81.1	7,335	84.5	8,565	88.3	8,610	89.5	8,900	89.5	8,765	89.1
	Non-veteran	356,050	77.1	430,560	82.0	482,355	87.3	480,810	89.0	505,285 ^r	89.3	515,770	87.4
	Target		75		75		75		75		75		75
18 weeks or less	Veteran	7,105	96.2	8,415	96.9	9,525	98.1	9,475	98.5	9,820 ^r	98.7	9,710	98.7
	Non-veteran	438,255	94.9	505,400	96.2	541,615	98.0	533,830	98.8	559,640 ^r	99	580,385	98.3
	Target		95		95		95		95		95		95

Source: The data analysed was sourced from the National Commissioning Data Repository (NCDR). The NCDR is hosted by Arden & Gem CSU, operated by NHS England and NHS Improvement and the data is owned by NHS Digital.

1. IAPT – Improving access to psychological therapies, NHS England & NHS Improvement.
 2. For new referrals that completed a course of treatment in the year, the wait between referral received date and the first therapeutic assessment.
 3. Please note that the information presented contains compressed figures (rounded to the nearest five) in line with NHS Digital reporting.
- p The data provided by NHS England & NHS Improvement is provisional and may be subject to change when the final report is published in February.
r The data has not yet been reconciled back to the main IAPT data and so there may be small differences caused by definitions used in the data presented.
r numbers revised since the Armed Forces Covenant Report 2019.

Table 6: UK Armed Forces Veterans, IAPT¹ referrals entering treatment and completing treatment², England, numbers and percentages³ 2014/15 – 2019/20

	2014/15		2015/16		2016/17		2017/18		2018/19		2019/20		
	number	%	number	%	number	%	number	%	number	%	number	%	
Referrals entered treatment	Veteran	12,310	79.4	15,265	80.2	15,770	78.8	16,690	79.7	17,420r	76.4r	17,790	76.8
	Non-veteran	803,185	63.6	938,175	67.1	948,270	68.7	990,505	70.9	1,071,615r	67.6r	1,145,095	68.0
Referrals completed treatment	Veteran	7,380	47.6	8,680	45.6	9,695	48.4	9,615	45.9	9,940r	43.6r	9,835	42.4
	Non-veteran	461,460	36.5	524,935	37.5	552,110	40.0	539,920	38.7	565,240r	35.6r	590,020	35.0

Source: The data analysed was sourced from the National Commissioning Data Repository (NCDR). The NCDR is hosted by Arden & Gem CSU, operated by NHS England and NHS Improvement and the data is owned by NHS Digital.

1. IAPT – Improving access to psychological therapies, NHS England & NHS Improvement.
 2. Please note that the information presented contains compressed figures (rounded to the nearest five) in line with NHS Digital reporting.
 3. A referral has entered treatment if the patient attends one or more appointments. The majority of referrals end with the patient completing a course of treatment, however, some patients decline treatment, are only treated once, are seen but not treated, or are discharged.
- p The data provided by NHS England & NHS Improvement is provisional and may be subject to change when the final report is published in February.
r The data has not yet been reconciled back to the main IAPT data and so there may be small differences caused by definitions used in the data presented.
r numbers revised since the Armed Forces Covenant Report 2019.

**Table 7: UK Armed Forces Veterans, IAPT1 referrals showing reliable improvement², recovery³, and reliable recovery⁴, England, numbers and percentages⁵
2014/15 – 2019/20**

	2014/15		2015/16		2016/17		2017/18		2018/19		2019/20		
	number	%	number	%	number	%	number	%	number	%	number	%	
Reliable improvement	Veteran	4,600	62.3	5,535	63.7	6,495	66.5	6,495	67.5	6,770	68.1	6,710	68.2
	Non-veteran	280,445	60.7	325,845	62	359,775	65.1	359,500	66.5	382,135r	67.6	397,465	67.3
Referrals moved to recovery	Veteran	3,070	41.5	3,820	44.0	4,325	44.6	4,525	47.0	4,785	48.1	4,690	47.6
	Non-veteran	186,065	40.3	221,015	42.1	247,625	44.8	250,120	46.3	267,725r	47.3	272,460	46.1
Referrals showing reliable recovery	Veteran		50		50		50		50		50		50
	Non-veteran	2,945	39.9	3,660	42.1	4,140	42.7	4,325	44.9	4,565	45.9	4,450	45.2
		177,340	38.4	210,345	40.0	235,750	42.6	237,855	44.0	254,465r	45.0	258,360	43.7

Source: The data analysed was sourced from the National Commissioning Data Repository (NCDR). The NCDR is hosted by Arden & Gem CSU, operated by NHS England and NHS Improvement and the data is owned by NHS Digital.

1. IAPT – Improving access to psychological therapies, NHS England & NHS Improvement.
 2. Reliable improvement = if when discharged the patient's ADSM score has decreased by 4 or more, or their PHQ-9 score has decreased by 6 or more, and both have not deteriorated by the same number.
 3. Recovery = if the patient were at caseness on their first appointment and upon discharge have scored less than the threshold scores for ADSM and PHQ-9.
 4. Reliable recovery = a combination of the above, where a referral has both shown reliable improvement in ADSM and PHQ-9 assessment scores, and changed from caseness to not caseness between the first and last appointments.
 5. Please note that the information presented contains compressed figures (rounded to the nearest five) in line with NHS Digital reporting.
- p The data provided by NHS England & NHS Improvement is provisional and may be subject to change when the final report is published in February.
r The data has not yet been reconciled back to the main IAPT data and so there may be small differences caused by definitions used in the data presented.
r numbers revised since the Armed Forces Covenant Report 2019.

Table 8: UK Armed Forces Veterans, TILS¹ referrals receiving assessment, treatment and discharging, England, numbers and percentages² 2017/18 – 2019/20

	2017/18		2018/19		2019/20	
	number	%	number	%	number	%
Number of referrals	2,879		3,913		4,660	
Appropriate for assessment	2,414	83.9	2,684	69	3,496	75
Assessment attended ³	1,649	68.3	2,120	79	2,569	73
Of assessed, received treatment in TILS ^{4, 5}	581	35.2	613	29	585	23

Source: NHS England and NHS Improvement

1. Transition, Intervention and Liaison Services
2. 'Appropriate for assessment' data not available for all regions prior to Sept-17; figures are estimated for this time period
3. Face-to-face assessment
4. Seen in TILS service/clinical appointment
5. Note: Assessment may result in appropriate referrals to other external Mental Health services such as Improving Access to Psychological Therapies (IAPT), Complex Treatment Service (CTS) or Community Mental Health Trust (CMHT)

Table 9: UK Armed Forces Veterans, TILS¹ waiting times² for assessment and treatment³, England, days 2018/19 – 2019/20

	2018/19		2019/20	
	Average wait (days)		Average wait (days)	
Face-to-face appointment	Offered ⁴	39		37
	Attended	47		39
Treatment	Offered	55		68
	Attended	57		70

Source: NHS England and NHS Improvement

1. Transition, Intervention and Liaison Services.
2. Wait time from referral to assessment and from referral to treatment.
3. Seen in TILS service / clinical appointment.
4. Target: 14 days.

Table 10: UK Armed Forces Veterans, CTS¹ referrals accepted and appointments delivered, England, numbers and percentage 2018/19 – 2019/20

	2018/19		2019/20	
	number	%	number	%
Number of referrals	648		714	
Referrals accepted	617	95.2	691	96.7
Appointment delivered in pathway ²	11,224 ^r		7,546	

1. Complex Treatment Services.
2. Appointments delivered for referrals received in that financial year.
- r 2018/19 appointments delivered has been updated to include appointments for referrals in 2018/19 which occurred during 2019/20.

Table 11: UK Armed Forces Veterans, CTS¹ waiting times² for assessment and treatment³, England, days 2018/19 – 2019/20

	2018/19		2019/20	
	Average wait (days)		Average wait (days)	
Face-to-face appointment	Offered ⁴	18		33
	Attended	24		36
Treatment	Offered	N/A		N/A
	Attended	N/A		N/A

Source: NHS England and NHS Improvement

1. Complex Treatment Services.
2. Wait time from referral to assessment and from referral to treatment.
3. Seen in clinical appointment.
4. Target: 10 days from referral from TILS.

Table 12: UK Armed Forces Veterans, VNHSW¹ referrals receiving an assessment and treatment, Wales, numbers and percentages 2010/11 – 2019/20

	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Number of referrals ^{2,3}	191	205	329	390	542	607	633	614	808	795
% referrals receive assessment ^{4,5}					60-70	73	57	67	66	..
% referrals receive treatment ^{6,7}					30-50	58	39	..	37	..

Source: The data analysed was sourced from the National Commissioning Data Repository (NCDR). The NCDR is hosted by Arden & Gem CSU, operated by NHS England and NHS Improvement and the data is owned by NHS Digital.

1. IAPT – Improving access to psychological therapies, NHS England and NHS Improvement.
 2. Please note that the information presented contains compressed figures (rounded to the nearest five) in line with NHS Digital reporting.
 3. A referral has entered treatment if the patient attends one or more appointments. The majority of referrals end with the patient completing a course of treatment, however, some patients decline treatment, are only treated once, are seen but not treated, or are discharged.
- p The data provided by NHS England and NHS Improvement is provisional and may be subject to change when the final report is published in February.
- r The data has not yet been reconciled back to the main IAPT data and so there may be small differences caused by definitions used in the data presented.
- r Numbers revised since the Armed Forces Covenant Report 2019.

Table 13: UK Armed Forces Veterans, VNHSW¹ waiting times for assessment and treatment, Wales, percentages 2015/16 – 2018/19

	2015/16 %	2016/17 %	2017/18 %	2018/19 %
Referral to assessment ²		30	74	77
	4 weeks or less	29	30	74
Assessment to treatment ³	10 weeks or less	80	80	..
	4 weeks or less	28	19	..
	24 weeks or less	80	..	90
		80	..	95

Source: Veteran NHS Wales

1. Veteran NHS Wales
 2. Welsh Government target for assessment is 4 weeks. Clock starts at opt-in and not referral. Therefore the measurement here is opt-in to assessment.
 3. Welsh Government target for treatment is 26 weeks.
- .. Represents data unavailable.

Table 14: UK Armed Forces Veterans, VNHSW¹ reliable improvement^{2,3}, Wales, percentages 2015/16 – 2018/19

	2015/16 %	2016/17 %	2017/18 %	2018/19 %
Reliable improvement	88	74	94	89

Source: Veteran NHS Wales

1. Veteran NHS Wales.
2. Demonstrated reliable improvement on at least one of the three core measures for Post Traumatic Stress Disorder, depression and anxiety.
3. Pre and post therapy measure available for: 48 veterans in 2015/16, 31 veterans in 2016/17, 34 veterans in 2017/18 and 126 veterans in 2018/19.

Table 15: UK Armed Forces Veterans in Wales, receiving treatment for substance misuse¹, numbers 2014/15 – 2019/20

	2014/15	2015/16	2016/17	2017/18	2018/19 ²	2019/20
Number receiving or have received treatment	306r	345	295r	292r	355r	329

Source: NHS Wales Informatics Service's Information Services Division (ISD) www.wales.nhs.uk/informatics23

1. Alcohol or drug misuse.

r Numbers adjusted for data reconciliation.

Table 16: Service children¹ and non-Service children^{1,2} meeting the expected standard in phonic decoding at the end of year 1, England, numbers and percentages 2015 – 2019

	Number of eligible pupils	Percentage of year 1 pupils meeting the expected standard of phonic decoding ³	% of year 1 pupils not meeting the expected standard of phonic decoding	% absent	% disappplied	Number of eligible pupils	Percentage of year 1 pupils meeting the expected standard of phonic decoding ³	% of year 1 pupils meeting the expected standard of phonic decoding	% absent	% disappplied
2015	5,444	80	19	0	1	521,841	80	19	0	1
2016	5,900	83	16	0	1	549,157	83	16	0	1
2017	6,078	84	15	0	1	562,470	84	15	0	1
2018	6,208	84	15	0	1	566,895	84	14	0	1
2019	5,997	84	15	0	1	537,948	84	14	0	1

Source: National Pupil Database, phonics results data

<https://www.gov.uk/government/statistics/phonics-screening-check-and-key-stage-1-assessments-england-2019>

1. Includes pupils at state-funded schools in England with a valid phonics record in the phonics screening check. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort.
3. The mark for the phonics screening check can be between 0 and 40. If a pupil's mark is at or above the threshold mark of 32, they are considered to have met the expected standard.

Table 17a: Service children¹ and non-Service children^{1,2} reaching the expected standard³ at the end of Key Stage 1, England, percentages 2015 – 2019

	Service children									Non-Service and non-FSM children										
	Percentage achieving level 2 or above			Percentage reaching the expected standard ³			Percentage achieving level 2 or above			Percentage reaching the expected standard ³			Percentage achieving level 2 or above			Percentage reaching the expected standard ³				
	Reading	Writing	Maths	Science	Reading	Writing	Maths	Science	Reading	Writing	Maths	Science	Reading	Writing	Maths	Science	Reading	Writing	Maths	Science
2015	94	91	96	95	-	-	-	-	92	90	94	93	-	-	-	-	-	-	-	-
2016	-	-	-	-	78	69	75	86	-	-	-	-	-	-	-	-	77	68	76	84
2017	-	-	-	-	80	72	78	87	-	-	-	-	-	-	-	-	78	71	78	85
2018	-	-	-	-	80	73	79	87	-	-	-	-	-	-	-	-	78	73	78	85
2019	-	-	-	-	79	72	78	86	-	-	-	-	-	-	-	-	78	72	78	85

Source: National Pupil Database, KS1 results data

<https://www.gov.uk/government/statistics/phonics-screening-check-and-key-stage-1-assessments-england-2019>

1. Includes pupils at state-funded schools in England with a valid school census record and eligible pupils at the end of KS2. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort.
3. Includes pupils working at the expected standard and pupils working at greater depth within the expected standard.
4. Due to changes in national curriculum assessments, the expected and higher standards from 2016 onwards are not comparable with previous years.

Table 17b: Service children¹ and non-Service children^{1,2} working at greater depth at the end of Key Stage 1, percentages 2015 – 2019

	Service children						Non-Service and non-FSM children							
	Percentage achieving level 3 or above			Percentage working at greater depth within the expected standard			Percentage achieving level 3 or above			Percentage working at greater depth within the expected standard				
	Reading	Writing	Maths	Science	Reading	Writing	Maths	Reading	Writing	Maths	Science	Reading	Writing	Maths
2015	37	19	28	27	-	-	-	35	20	29	26	-	-	-
2016	-	-	-	-	27	14	18	-	-	-	-	26	15	19
2017	-	-	-	-	29	17	22	-	-	-	-	27	17	22
2018	-	-	-	-	30	18	23	-	-	-	-	28	17	24
2019	-	-	-	-	29	17	23	-	-	-	-	27	16	24

Source: National Pupil Database, KS1 results data

<https://www.gov.uk/government/statistics/phonics-screening-check-and-key-stage-1-assessments-england-2019>

1. Includes pupils at state-funded schools in England with a valid school census record and eligible pupils at the end of KS2. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort.
3. Due to changes in national curriculum assessments, the expected and higher standards from 2016 onwards are not comparable with previous years.

Table 18a: Service children¹ and non-Service children^{1,2} reaching the expected standard³ at the end of Key Stage 2, England, percentages 2015 – 2019

	2018/19	2019/20
2015	Service children	82.3
	Non-FSM, non-Service children	82.7
2016	Service children	56.7
	Non-FSM, non-Service children	56.7
2017	Service children	63.9
	Non-FSM, non-Service children	64.4
2018	Service children	68.3
	Non-FSM, non-Service children	67.5
2019	Service children	69
	Non-FSM, non-Service children	68

Source: National Pupil Database, KS2 results data

<https://www.gov.uk/government/statistics/national-curriculum-assessments-key-stage-2-2019-revised>

1. Includes pupils at state-funded schools in England with a valid school census record and eligible pupils at the end of KS2. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort
3. Includes those pupils who reached the expected standard in all of reading, writing and mathematics. The expected standard in reading and mathematics is a scaled score of 100 or above, and pupils assessed as working at greater depth within the expected standard (GDS) in writing.
4. Due to changes in national curriculum assessments, the expected and higher standards from 2016 onwards are not comparable with previous years.

Table 18b: Service children¹ and non-Service children^{1,2} working at greater depth³ at the end of Key Stage 2, England, percentages 2015 – 2019

		Percentage achieving level 5 or above in reading, writing and maths	Percentage achieving level 5 or above in reading, writing and maths ³
2015	Service children	24.5	–
	Non-FSM, non-Service children	26.7	–
2016	Service children	–	6
	Non-FSM, non-Service children	–	6.1
2017	Service children	–	8.5
	Non-FSM, non-Service children	–	9.7
2018	Service children	–	10.6
	Non-FSM, non-Service children	–	11
2019	Service children	–	10
	Non-FSM, non-Service children	–	12

Source: National Pupil Database, KS2 results data

<https://www.gov.uk/government/statistics/national-curriculum-assessments-key-stage-2-2019-revised>

1. Includes pupils at state-funded schools in England with a valid school census record and eligible pupils at the end of KS2. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort.
3. Includes those pupils who reached a higher standard in all of reading, writing and mathematics. A higher standard is a scaled score of 110 or more in reading and mathematics and pupils assessed as working at greater depth within the expected standard (GDS) in writing.
4. Due to changes in national curriculum assessments, the expected and higher standards from 2016 onwards are not comparable with previous years.

Table 18c: Service children¹ and non-Service children^{1,2} Progress Score at the end of Key Stage 2, England, average score 2016 – 2019

	Service children						Non-Service and non-FSM children					
	Reading		Writing		Maths		Reading		Writing		Maths	
	Progress score	Confidence interval	Progress score	Confidence interval	Progress score	Confidence interval	Progress score	Confidence interval	Progress score	Confidence interval	Progress score	Confidence interval
2016	0.3	(0.1 – 0.5)	0	(-0.2 – 0.2)	-0.4	(-0.5 – 0.2)	0.1	(0.1 – 0.1)	0	(0 – 0)	0.1	(0 – 0.1)
2017	0.3	(0.1 – 0.5)	0	(-0.2 – 0.2)	-0.5	(-0.6 – 0.3)	0.2	(0.1 – 0.2)	0.1	(0.1 – 0.1)	0.2	(0.1 – 0.2)
2018	0.2	(0.0 – 0.3)	-0.1	(-0.2 – 0.1)	-0.3	(-0.4 – 0.1)	0.2	(0.1 – 0.2)	0.1	(0.1 – 0.2)	0.2	(0.2 – 0.2)
2019	0.1	(-0.1 – 0.2)	-0.1	(-0.2 – 0.1)	-0.3	(-0.4 – 0.1)	0.2	(0.2 – 0.2)	0.2	(0.0 – 0.2)	0.2	(0.2 – 0.3)

Source: National Pupil Database

<https://www.gov.uk/government/statistics/national-curriculum-assessments-key-stage-2-2019-revised>

1. Includes pupils at state-funded schools in England with a valid school census record and eligible pupils at the end of KS2. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort.

Table 19: Service children¹ and non-Service children^{1,2} achieving key grades in GCSE English and Mathematics, England, percentage 2015 – 2019

		% of pupils achieving A*-C in both English and Mathematics GCSEs	% of pupils achieving grades 9-4 in English and Mathematics ³	% of pupils achieving grades 9-5 in English and Mathematics ⁴
2015	Service children	65.0	-	-
	Non-FSM, non-Service children	63.0	-	-
2016	Service children	69.6	-	-
	Non-FSM, non-Service children	66.7	-	-
2017	Service children	-	68.7	45.0
	Non-FSM, non-Service children	-	67.5	45.9
2018	Service children	-	68.7	45.3
	Non-FSM, non-Service children	-	67.7	46.4
2019	Service children	-	69.2	44.3
	Non-FSM, non-Service children	-	68.4	46.7

Source: National Pupil Database, KS4 results data

1. Includes pupils at state-funded schools in England with a valid school census record and eligible pupils at the end of KS4. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort
3. The 9-4 pass shows pupils who achieved a grade 4 or above in English and mathematics, and is provided alongside the headline measure for transparency and comparability to the old measure.
4. From 2017, headline threshold attainment measures use grade 5 for reformed English and Mathematics.

Table 20: Service children¹ and non-Service children^{1,2} entering the English Baccalaureate and achieving key grades, England, 2015 – 2019

	Service children				Non-Service and non-FSM children			
	Number of pupils at the end of key stage 4	Percentage of pupils entered for all Ebacc components	Percentage of pupils who achieved Ebacc for all components (grades A*-C/9-4 pass) ³	Number of pupils at the end of key stage 4	Number of pupils entered for all Ebacc components	Percentage of pupils who achieved Ebacc for all components (grades A*-C/9-4 pass) ³	Percentage of pupils who achieved all Ebacc components (grades 9-5 pass in English and Maths) ⁴	
2015	3,486	42.5	24.9	–	473,312	41.5	26.6	–
2016	3,662	42.2	25.7	–	463,801	42.3	27	–
2017	3,773	38	22.4	20	453,777	40.6	25.9	23.3
2018	3,805	36.6	23.3	15.6	453,559	40.6	26.1	18.3
2019	4,136	38.1	24.5	15.9	462,292	42.5	27.2	18.9

Source: National Pupil Database, KS4 results data

1. Includes pupils at the end of key stage 4 in state-funded schools in England and excluding pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort.
3. The 9-4 pass shows pupils who achieved a grade 4 or above in English and mathematics, and is provided alongside the headline measure for transparency and comparability to the old measure.
4. From 2017, headline threshold attainment measures use grade 5 for reformed English and Mathematics.

Table 21: Service children¹ and non-Service children^{1,2} Attainment 8 and Progress 8 at end of Key Stage 4, England, average score 2016 – 2019

	Average Attainment 8 score per pupil	Average Progress 8 score	Lower confidence interval for Progress 8	Upper confidence interval for Progress 8	
2016	Service children	52.4	0.11	0.08	0.14
	Non-FSM, non-Service children	51.6	0.04	0.03	0.04
2017	Service children	47.8	0.03	0.00	0.07
	Non-FSM, non-Service children	48.0	0.04	0.03	0.04
2018	Service children	48.0	0.00	-0.03	0.04
	Non-FSM, non-Service children	48.3	0.05	0.05	0.06
2019	Service children	48.0	0.00	-0.04	0.04
	Non-FSM, non-Service children	48.6	0.05	0.05	0.06

Source: National Pupil Database, KS4 results data

1. Includes pupils at state-funded schools in England with a valid school census record and eligible pupils at the end of KS4. Excludes pupils in alternative provision, pupil referral units and international schools.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the Service child cohort.
3. Figures have been revised to include confidence intervals for Progress 8 scores.

Table 22: Pupils achieving the expected standard, by number of school moves¹ from years 1 to 6 for Service children and non-FSM, non-Service children², England, percentage 2016/17 – 2018/19

		Number of moves from year 1 – year 6							
		Pupils reported in Spring census				% of pupils achieving the expected standard			
		0	1	2	3+	0	1	2	3+
2016/17	Service children	29.7	42.1	19.1	9.1	69.3	64.9	59.7	54.0
	Non-FSM, non-Service children	62.6	30.5	5.5	1.4	67.9	63.7	55.9	49.5
2017/18 (revised) ³	Service children	29.0	43.1	19.1	8.8	71.4	66.5	61.2	54.6
	Non-FSM, non-Service children	63.2	30.1	5.3	1.3	70.9	66.6	59.4	53.3
2018/19	Service children	34.1	40.7	16.8	8.4	72.0	68.9	64.5	64.0
	Non-FSM, non-Service children	64.2	29.5	5.2	1.2	71.7	67.8	62.0	53.7

Source: National Pupil Database, KS2 results data

1. Number of school moves between years 1 and 6 for pupils finishing year 6 in the academic year stated.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the Service child cohort.
3. Based on revised figures in the National Pupil Database, which may differ slightly from finalised published figures.
4. Percentages for moves of 3+ are volatile, based on very small numbers of pupils and conclusions should be treated with caution.

Table 23: Pupils with English and Maths grades 5-9, by number of school moves¹ from years 7 to 11 for Service children and non-FSM, non-Service children², England, percentage 2016/17 – 2018/19

	Number of moves from year 7 – year 11									
	Pupils reported in Spring census					% of pupils achieving English and Maths grades 9-5				
	0	1	2	3+	0	1	2	3+		
2016/17	Service children	71.0	23.7	4.3	1.0	49.8	36.8	27.2	12.5	
	Non-FSM, non-Service children	82.6	14.6	2.2	0.6	48.2	36.3	22.7	15.4	
2017/18 (revised) ³	Service children	71.2	22.5	5.2	1.1	49.0	35.3	25.7	16.7	
	Non-FSM, non-Service children	82.5	14.6	2.4	0.6	48.9	36.3	23.2	14.0	
2018/19	Service children	69.5	24.9	4.3	1.3	47.0	37.8	30.5	13.9	
	Non-FSM, non-Service children	82.4	14.7	2.3	0.6	49.3	36.1	23.9	13.8	

Source: National Pupil Database, KS4 results data

1. Number of school moves between years 7 and 11 for pupils finishing year 11 in the academic year stated.
2. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the Service child cohort.
3. Based on revised figures in the National Pupil Database, which may differ slightly from finalised published figures.
4. Percentages for moves of 3+ are volatile, based on very small numbers of pupils and conclusions should be treated with caution.

Table 24: Ofsted rating¹ of schools in England attended by Service children and non-Service children, by region, percentage June 2020

		Ofsted rating ¹			
		1 (Outstanding)	2 (Good)	3 (Requires Improvement)	4 (Inadequate)
England	Service children	24.5			–
	Non-FSM, non-Service children	26.7			–
East Midlands	Service children	–			6
	Non-FSM, non-Service children	–			6.1
East of England	Service children	–			8.5
	Non-FSM, non-Service children	–			9.7
London	Service children	–			10.6
	Non-FSM, non-Service children	–			11
North East	Service children	–			10
	Non-FSM, non-Service children	–			12
North West	Service children				
	Non-FSM, non-Service children				
South East	Service children				
	Non-FSM, non-Service children				
South West	Service children				
	Non-FSM, non-Service children				
West Midlands	Service children				
	Non-FSM, non-Service children				
Yorkshire and The Humber	Service children				
	Non-FSM, non-Service children				

Source: National Pupil Database, Ofsted June 2020

1 School attended as recorded in Spring Census 2019/20, Ofsted rating as of 31 March 2019 reported in Get Information About Schools.

2 Includes pupils at schools that are new and have not been inspected. Does not include pupils at MOD overseas schools, which are not subject to Ofsted inspection.

Table 25: Pupil destinations of Service children and non-FSM, non-Service children¹ after completing KS4, state-funded schools in England², percentage 2013/14 – 2017/18

Destination year ²	Pupil type	Number of eligible pupils	Percentage of eligible pupils					
			Any sustained education or employment	Any sustained education destination	Sustained apprenticeships	Sustained employment destination	Destination not sustained	Activity not captured in the data
2013/14	Service children	3,090	92	87	4	1	5	3
	Non-FSM, non-Service children	483,477	93	88	4	1	5	1
2014/15 ³	Service children	3,307	94	88	4	3	4	2
	Non-FSM, non-Service children	474,905	95	88	5	2	4	1
2015/16 ⁴	Service children	3,482	95	89	4	3	3	1
	Non-FSM, non-Service children	473,879	95	88	5	3	4	1
2016/17	Service children	3,662	96	88	5	3	3	1
	Non-FSM, non-Service children	464,827	95	87	5	3	4	1
2017/18	Service children	3,761	95	88	4	3	3	1
	Non-FSM, non-Service children	455,022	95	88	5	3	4	1

Source: Longitudinal Education Outcomes dataset

<https://www.gov.uk/government/statistics/destinations-of-ks4-and-16-to-18-ks5-students-2018>

1. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort. Service child status in year 11.
2. State-funded schools include local authority maintained schools, academies, free schools, city technology colleges, further education colleges with provision for 14- to 16-year-olds, state-funded special schools and non-maintained special schools.
3. Employment and benefits data from Her Majesty's Revenue and Customs (HMRC) and Department for Work and Pensions (DWP) from the LEO dataset was included for the first time in 2014-15 and accounted for a 1 percentage point increase in employment destinations. Direct comparison with previous years' employment estimates should be treated with caution. Education destinations are not affected.
4. Self-employment information from HMRC has been included in 2015-16. It accounted for an increase of less than 0.5 percentage point nationally.

Table 26: Student destinations of Service children and non-FSM, non-Service children¹ after 16 to 18 study², percentage 2013/14 – 2017/18

Destination year ²	Pupil type	Percentage of eligible pupils									
		Number of eligible pupils	Any sustained education or employment	Any sustained education destination	Further education (level 3 and below)	Higher education (level 4 and above)	Other education destinations	Sustained apprenticeships	Sustained employment destination	Destination not sustained	Activity not captured in the data
2013/14 ³	Service children	1,764	90	56	9	44	3	8	26	8	2
	Non-FSM, non-Service children	321,832	90	61	10	48	3	6	23	8	2
2014/15 ⁴	Service children	2,000	90	59	9	48	2	6	25	7	3
	Non-FSM, non-Service children	323,773	89	61	10	49	3	6	22	8	3
2015/16 ⁵	Service children	1,988	91	58	9	47	2	7	27	7	2
	Non-FSM, non-Service children	325,386	90	62	8	51	2	6	22	7	3
2016/17 ⁶	Service children	2,211	90	57	7	47	3	7	26	8	2
	Non-FSM, non-Service children	337,111	89	61	7	51	3	7	22	7	4
2017/18 ⁷	Service children	2,442	90	55	7	47	2	8	26	7	3
	Non-FSM, non-Service children	338,979	88	58	6	50	2	7	23	8	4

Source: Longitudinal Education Outcomes dataset

<https://www.gov.uk/government/statistics/destinations-of-ks4-and-16-to-18-ks5-students-2018>

1. Service child status was determined by looking across three academic year cohorts before students reached the end of 16 to 18 study. The majority of them would have been at the end of key stage 4 study two years prior. Excludes pupils who are eligible for free school meals (FSM). This comparison was chosen to be similar to the service child cohort.
2. A level or other level 3 qualifications.
3. Employment and benefits data from Her Majesty's Revenue and Customs (HMRC) and Department for Work and Pensions (DWP) from the LEO dataset have increased coverage and estimates of employment substantially from 2014/15. This time series for the years 2010/11 to 2013/14 has been updated to include LEO data. These revised statistics were first published in the statistical working paper on improvements to destination measures in August 2016.
4. From 2014/15, data on employment, training and NEET from the NCCIS dataset is not included, as local authorities are no longer required to collect for young people aged 18 or over. Removal of NCCIS data means there is a small break in the time series and comparison with previous years should be treated with caution. However, the impact is small as almost all employment destinations are available in LEO data.

Continued overleaf

5. From 2015/16, self-employment information from HMRC has been included. At the national level, the inclusion of this data will not impact on the employment destinations. Among colleges, there will be an expected increase of around 1 percentage point in overall employment destinations compared to the national average. HE alternative provider data has also been included. This data is collected on UK domiciled students attending non-mainstream (independent) HE institutions in England that provide designated undergraduate courses funded by the Student Loan Company (SLC). This data was collected by HESA for the first time in 2014/15.
6. In 2016/17 the KS5 cohort has changed. From 2015/16, only students who entered approved level 3 qualifications (designated as academic, applied general or tech level) are included and there are some changes to how students and qualifications are counted. Altogether around 6000 more students are included than last year, an increase of 1.7%. The impact is expected to be small but the exclusion of some students entering unapproved vocational qualifications and the inclusion of some students entering qualifications worth only one AS level in size at level 3 may have affected the change in destinations seen between years. There may also be very small changes to HE destinations due to a different algorithm used in the matching of the 2016/17 which resulted in lower match rates for young people treated as overseas or Scottish domiciled.
7. In 2017/18 there were further changes to the 16 to 18 cohort of approved level 3 students. From this year, the cohort includes students who left their institutions up to two years before being deemed to have reached the end of 16 to 18 study. Development analysis has shown that this group of students is much less likely to continue in education than those who stayed in education up to the end of 16 to 18 study. Partially as a result of these changes, the overall rate of progression to education for the level 3 approved group has decreased by three percentage points to 58% in the latest data. The percentage progressing to higher education has remained unchanged at 50%.

Table 27: Pupil destinations of Service children and non-Service children after completing secondary level education, percentage 2018/19

Year	Pupil type	Number of eligible pupils	Percentage of eligible pupils		
			Higher or Further education	Other ¹	Other ¹
2018/19	Service children	20	75	25	25
	Non-FSM, non-service children	21,601	75	25	25

Coverage: Northern Ireland

1. Includes those who went into employment, unemployed, or failed to disclose their future destination. Categories have been combined to reduce the risk of disclosure.

Table 28: UK Armed Forces personnel satisfied with opportunities to gain civilian accreditation¹, estimated percentage 2011 – 2020

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Satisfied	51	46	43	42	47	48	46	47	48	48

Source: Armed Forces Continuous Attitude Survey 2020

<https://www.gov.uk/government/collections/armed-forces-continuous-attitude-survey-index>

1. Relates only to Service training courses and not training received prior to leaving the Services (Resettlement training).
2. Minor wording change in 2011.

Table 29: UK Armed Forces personnel satisfied with opportunities for personal development, estimated percentage 2011 – 2020

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Satisfied	57	54	52	52	57	57	54	55	57	58

Source: Armed Forces Continuous Attitude Survey 2020

<https://www.gov.uk/government/collections/armed-forces-continuous-attitude-survey-index>

1. Minor wording change in 2011.

Table 30: UK Armed Forces personnel who used Career Transition Partnership and were employed within 6 months of leaving the Armed Forces, estimated percentage 2010/11 – 2018/19

	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19
Employment rate	57	54	52	52	57	57	54	55	57

Source: ADAPT (Career Transition Partnership ex-Service personnel employment outcomes)

<https://www.gov.uk/government/collections/career-transition-partnership-ex-service-personnel-employment-outcomes-statistics-index>

1. 2010/11 -2014/15: Estimated from a 20% sample of those who used billable Career Transition Partnership services

----- Break in time series. Service leavers prior to 1 October 2015 who used the CTP Future Horizons programme were excluded from analysis. Since 1 October 2015 all Service leavers who have used a billable CTP service have been included.

----- Break in time series. The 2016/17 FY is the first year in which all Service leavers who used a billable CTP service have been followed up. This coupled with methodology changes has resulted in comparisons with previous years invalid.

Table 31: UK Armed Forces personnel and families satisfied with the standard of Service accommodation, estimated percentage 2011 – 2020

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
UK Armed Forces personnel										
Service Family Accommodation	..	56	57	60	57	50	46	51	51	51
Single Living Accommodation	..	55	56	56	58	55	50	49	52	49
Service families										
Service Family Accommodation	63	53	57	57	57	56

Source: Armed Forces Continuous Attitude Survey (AFCAS) 2020 and Tri-Service Families Continuous Attitude Survey (FAMCAS) 2020
<https://www.gov.uk/government/collections/armed-forces-continuous-attitude-survey-index>
<https://www.gov.uk/government/collections/tri-service-families-continuous-attitude-survey-index>

1. AFCAS: Service Family Accommodation: minor wording change 2013 and 2015.
2. AFCAS: Single Living Accommodation: minor wording change 2012, 2013 and 2015; comparative analysis has indicated that a change to the wording of the response options in 2011 has resulted in some respondents ticking 'SFA – inside the base/camp' when they should have ticked 'SLA of any type'. Therefore, no reliable figures can be given for 2011.
3. AFCAS: Excludes n/a and 'don't know'.
4. AFCAS: Relates to those living in Service Family Accommodation and Single Living Accommodation; excludes those living in Substitute Service Family Accommodation and Substitute Single Living Accommodation.
5. FAMCAS: Responses are filtered for those respondents who live in Service Family Accommodation or Substitute Service Family Accommodation, and answered the questions, and did not answer 'Don't know'. [58% in 2020].
6. FAMCAS: Comparisons with years prior to 2015 are not possible. This question was introduced in 2015 to bring it in line with AFCAS.
7. FAMCAS: Only relates to those living in Service Family Accommodation and Substitute Service Family Accommodation.

.. Represents data unavailable.

Table 32: UK Armed Forces personnel and families satisfied with response to maintenance request (Service accommodation), estimated percentage 2011 – 2020

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
UK Armed Forces personnel										
Service Family Accommodation	..	46	46	46	42	32	28	29	33	37
Single Living Accommodation	..	39	35	36	38	33	28	26	30	30
Service families										
Service Family Accommodation	45	32	34	35	41	37

Source: Armed Forces Continuous Attitude Survey (AFCAS) 2020 and Tri-Service Families Continuous Attitude Survey (FAMCAS) 2020
<https://www.gov.uk/government/collections/armed-forces-continuous-attitude-survey-index>
<https://www.gov.uk/government/collections/tri-service-families-continuous-attitude-survey-index>

1. AFCAS: New questions in 2011.
2. AFCAS: Minor wording change in 2012, 2013 and 2015.
3. AFCAS: Excludes n/a and 'don't know'.
4. AFCAS: Relates to those living in Service Family Accommodation and Single Living Accommodation; excludes those living in Substitute Service Family Accommodation and Substitute Single Living Accommodation.
5. FAMCAS: Responses are filtered for those respondents who live in Service family accommodation or Substitute service family accommodation, and answered the questions, and did not answer 'Don't know'. [58% in 2020].
6. FAMCAS: Comparisons with years prior to 2015 are not possible. This question was introduced in 2015 to bring it in line with AFCAS.
7. FAMCAS: Only relates to those living in Service Family Accommodation and Substitute Service Family Accommodation.
- .. Represents data unavailable.

Table 33: UK Armed Forces personnel and families satisfied with response to maintenance request (Service accommodation), estimated percentage 2011 – 2020

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
UK Armed Forces personnel										
Service Family Accommodation	..	38	39	40	37	29	26	27	30	31
Single Living Accommodation	..	39	38	38	41	35	30	28	33	30
Service families										
Service Family Accommodation	42	29	29	30	36	33

Source: Armed Forces Continuous Attitude Survey (AFCAS) 2020 and Tri-Service Families Continuous Attitude Survey (FAMCAS) 2020
<https://www.gov.uk/government/collections/armed-forces-continuous-attitude-survey-index>
<https://www.gov.uk/government/collections/tri-service-families-continuous-attitude-survey-index>

1. AFCAS: New questions in 2011.
2. AFCAS: Minor wording change in 2012, 2013 and 2015.
3. AFCAS: Excludes n/a and 'don't know'.
4. AFCAS: Relates to those living in Service Family Accommodation and Single Living Accommodation; excludes those living in Substitute Service Family Accommodation and Substitute Single Living Accommodation.
5. FAMCAS: Responses are filtered for those respondents who live in Service Family Accommodation or Substitute Service Family Accommodation and answered the questions, and did not answer 'don't know'. [58% in 2020].
6. FAMCAS: Comparisons with years prior to 2015 are not possible. This questions was introduced in 2015 to bring it in line with AFCAS.
7. FAMCAS: Only relates to those living in Service Family Accommodation and Substitute Service Family Accommodation.
- .. Represents data unavailable.

Table 34: UK Armed Forces personnel and families satisfied with value for money of Service accommodation, estimated percentage 2011 – 2020

	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
UK Armed Forces personnel										
Service Family Accommodation	..	72	71	74	71	63	63	60	60	60
Single Living Accommodation	..	64	66	63	64	59	57	56	58	56
Service families										
Service Family Accommodation	75	64	70	68	67	68

Source: Armed Forces Continuous Attitude Survey (AFCAS) 2020 and Tri-Service Families Continuous Attitude Survey (FAMCAS) 2020
<https://www.gov.uk/government/collections/armed-forces-continuous-attitude-survey-index>
<https://www.gov.uk/government/collections/tri-service-families-continuous-attitude-survey-index>

1. AFCAS: Minor wording change in 2011, 2012, 2013 and 2015.
2. AFCAS: Excludes n/a and 'don't know'.
3. AFCAS: Relates to those living in Service Family Accommodation and Single Living Accommodation; excludes those living in Substitute Service Family Accommodation and Substitute Single Living Accommodation.
4. FAMCAS: Responses are filtered for those respondents who live in Service family accommodation or Substitute service family accommodation, and answered the questions, and did not answer 'don't know'. [58% in 2020].
5. FAMCAS: Comparisons with years prior to 2015 are not possible. This questions was introduced in 2015 to bring it in line with AFCAS.
6. FAMCAS: Only relates to those living in Service Family Accommodation and Substitute Service Family Accommodation.
- .. Represents data unavailable.

Table 35: New social housing lettings to UK Armed Forces veterans¹ and non-veterans in England, length of time in local authority prior to new social housing letting, number and estimated percentage 2016/17 – 2018/19

Length of time in Local Authority prior to allocation	2016/17				2017/18				2018/19			
	UK Armed Forces veteran population		Non-veteran population		UK Armed Forces veteran population		Non-veteran population		UK Armed Forces veteran population		Non-veteran population	
	Left within the past five years	Left more than five years ago ³	%	%	Left within the past five years	Left more than five years ago ³	%	%	Left within the past five years	Left more than five years ago ³	%	%
New to Local Authority	17.3	13.4	9.7	9.7	21.2	14.9	11.1	11.1	20.3	13.8	9.8	9.8
Less than 1 year	6.9	4.5	5.4	5.4	9.6	4.5	4.9	4.9	9.1	4.9	5.7	5.7
1-2 years	7.2	4.3	5.0	5.0	6.9	3.0	4.1	4.1	8.0	6.2	7.6	7.6
2-3 years					5.1	2.1	3.2	3.2	5.2	2.4	3.5	3.5
3-4 years	13.7	9.0	10.1	10.1	4.4	2.8	3.3	3.3	3.6	2.5	2.8	2.8
4-5 years					2.6	3.2	3.3	3.3	5.2	3.9	4.8	4.8
More than 5 years	55.0	68.8	69.9	69.9	50.2	69.6	70.1	70.1	48.5	66.3	65.8	65.8
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number	760	4,230	173,710	173,710	550	2,480	147,840	147,840	820	3,490	221,040	221,040

Source: CORE Social Housing Lettings 2016/17, 2017/18 and 2018/19, MHCLG

1. Has previously served in the UK Armed Forces.
2. Sample is presented at household level.
3. Includes still serving personnel.
4. Any discrepancies in totals are due to rounding.

Table 36: UK Service population¹ and non-Service population in England, length of time on waiting list for current social housing/accommodation, estimated percentage 2015/16 – 2018/19

Length of time on waiting list prior to allocation	2015/16		2016/17		2017/18		2018/19	
	Service population and families	Non-Service population and families	Service population and families	Non-Service population and families	Service population and families	Non-Service population and families	Service population and families	Non-Service population and families
Less than 6 months	57.9	56.3	67.8	52.9	69.1	57.2	54.6	59.8
6 months – 1 year	14.6	13.3	15.2	16.6	8.5	15.2	17.4	12.5
1-2 years	8.1	10.3	6.5	10.1	6.1	9.5	7.7	9.6
2-3 years	6.6	5.9	2.1	7.3	3.2	5.4	4.7	5.4
3-5 years	3.7	6.2	3.4	5.2	4.3	6.2	5.0	6.1
More than 5 years	9.1	8.0	5.0	7.9	8.7	6.5	10.7	6.6
Total	100	100	100.0	100.0	100	100	100	100
Sample size²	303	4,653	259	4,140	271	4,485	289	4,288

Source: English Housing Survey 2015-16, 2016-17, 2017-18 and 2018-19, full household sample

1. Has served or were currently serving in the Armed Forces.
2. Sample is presented at individual rather than household level.
3. Excludes those at address for 10 years or more.
4. u indicates sample size too small for reliable estimate.

Table 37: UK Service population¹ and non-Service population in England, satisfaction with social rented sector², estimated percentage 2017/18 – 2018/19

		2017/18		2018/19	
		Service population and families	Non-Service population and families	Service population and families	Non-Service population and families
Satisfaction with accommodation	Satisfied	80.1	76.6	81.2	78.8
	Sample size ³	466	5,953	457	5,808
Satisfaction with tenure	Satisfied	76.5	80.3	83.0	80.9
	Sample size ³	453	6,311	482	5,983
Satisfaction with area	Satisfied	85.4	79.3	83.2	80.3
	Sample size ³	467	6,148	470	5,919
Satisfaction with repairs/maintenance	Satisfied	62.0	62.0	70.9	63.8
	Sample size ³	381	4,938	399	4,706

Source: English Housing Survey 2017-18 and 2018-19, full household sample

1. Has served or were currently serving in the Armed Forces.
2. All social renters.
3. Sample is presented at individual rather than household level.

Table 38: UK Service population¹ and non-Service population in England, satisfaction with private rented sector, estimated percentage 2017/18 – 2018/19

	2017/18		2018/19	
	Service population and families	Non-Service population and families	Service population and families	Non-Service population and families
Satisfaction with accommodation	Satisfied	81.5	81.4	78.0
	Sample size ³	268	4,498	299
Satisfaction with tenure	Satisfied	69.1	67.4	61.6
	Sample size ³	222	4,498	228
Satisfaction with area	Satisfied	88.1	85.6	90.8
	Sample size ³	272	4,657	322
Satisfaction with repairs/maintenance	Satisfied	58.7	72.8	73.8
	Sample size ³	324	3,903	273

Source: English Housing Survey 2017/18 and 2018/19, full household sample

1. Has served or were currently serving in the Armed Forces.
2. Sample is presented at individual rather than household level.

Table 39: Former armed forces status for households assessed as homeless or threatened with homelessness, number and percentage 2010/11 – 2019/20

	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Number	1,310	1,006	894	795	772	741	690	742	828	801
Percentage	3.1	2.8	2.8	2.7	2.6	2.6	2.4	2.5	2.7	2.6

Source: Scottish Government
<https://www.gov.scot/publications/homelessness-scotland-2019-2020>
 Coverage: Scotland



A JOINT ARMED FORCES NEEDS ASSESSMENT
BY
SHROPSHIRE COUNCIL AND TELFORD WREKIN COUNCIL
OCTOBER 2020



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Date: October 2020

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EXECUTIVE SUMMARY

The Armed Forces Covenant (AFC) was introduced in 2011. It is a “promise by the nation ensuring that those who serve or have served in the Armed Forces, and their families, are treated fairly”. The Covenant focusses on helping members of the Armed Forces Community to have the same access to government and commercial services and products as any other citizens. All **407** local authorities in mainland Great Britain and **4** Northern Ireland councils have pledged to uphold the Armed Forces Covenant. To date, **5,774** organisations – including 91 across the County of Shropshire – have also signed the Covenant.

Both Shropshire Council and Telford & Wrekin Council have established Strategic AFC Partnership Boards (SAFCPB) which provide strategic governance, and direction, on the Covenant within their respective areas. These Boards have identified the requirement to undertake a Joint Armed Forces Needs Assessment (JAFNA), within their Action Plans, to fully understand the Armed Forces community across the County of Shropshire. The scope of this Report considers this community in relation to Health & Wellbeing, Education and Children’s Care, Housing, Employment, the Criminal Justice System and Transition and Specialist Support.

There is no recorded definitive data for the size of the Armed Forces community across the County of Shropshire or nationally. This Report, therefore, uses a collection of data sources to estimate that there are approximately, **2,850** Regular Serving personnel, **380** Reservists & Cadet Force Adult Volunteers and **24,000** veterans living within the County of Shropshire. It was not feasible, for this Assessment to estimate the size of the whole Armed Forces community, including family members, across the County of the Shropshire.

It is noted that on the 23rd June 2020, legislation was finalised by the UK Government and Parliament to amend the Census in England and Wales, so that, for the first time, it will provide information on whether someone has served in HM Armed Forces. This means that from 2023 onwards, it will be significantly easier to accurately quantify the local Armed Forces community which will facilitate research to understand their local needs.

The health of the Armed Forces community is similar to the general population. Furthermore, the health of the military population is good compared with the general public, due to the expected physical fitness levels required to join the Armed Forces, social support networks available and access to health care and employment. Local work to consider the health of veterans registered with General Practices has highlighted the need to ask patients if they have a military connection to ensure that they are able to access the dedicated services and initiatives, that are in place, to support the Armed Forces community.

The Local Government Association (LGA) estimates that around 8% of children aged 0-15 years are part of Armed Forces’ families (current or ex-Serving). These children tend to be more mobile than the general population and have to deal with some unique challenges associated with military life. Across the County of Shropshire, there are a total **1,488** children aged 4-16 years registered for Service Pupil Premium (SPP). However, the recent Armed Forces Community Survey (across the County of Shropshire) identified a reluctance amongst some parents to register for

SPP. The educational achievement of the children of Armed Forces' families appears to be in line with that of their peers, however, more work is needed to understand Service children and their needs, particularly, those aged under 4 and over 16 years.

There is a perception that veterans have a disadvantage particularly in relation to housing. Although, the majority of veterans own their own home, or have the means to rent privately, there is a minority of veterans who struggle to find appropriate and affordable accommodation post Service. Both Shropshire Council and Telford & Wrekin Council have processes in place for identifying members of the Armed community with the application process and both Councils work alongside organisations within the housing sector to help alleviate homelessness. Specifically, both SAFCPBs have representatives from local homelessness charities which means that help, for our Armed Forces community, can be obtained as and when required. Support is also available 24/7 via the Veterans Gateway to enable veterans to search for veteran-specific accommodation, however, further work is required to encourage local housing providers to register.

The majority of Service leavers find work quickly, however, a small but significant number struggle to find employment that appropriately matches their skills. Levels of spousal employment has increased in recent years however, spouses and civil partners remain under represented in the workplace. Shropshire Council and Telford & Wrekin Council should consider being more proactive in advertising the range of local employment support, and opportunities available, to members of the Armed Forces community.

The MOD is currently gathering the feedback and input of local authorities as it prepares to introduce legislation to further strengthen the statutory basis of the AFC. While the policy detail is still being worked on and the scope of the legislation may yet change, the current proposal is for the legislation to place a statutory duty on public service providers to take Due Regard of the Armed Forces community when writing policy and decisions made in implementing that policy in specific aspects of Healthcare, Education and Housing. The current timeline is to have the new legislation ready by the end of the 2020 with implementation planned for late 2021/early 2022.

In conclusion, both Shropshire Council and Telford & Wrekin Council are extremely pro-active in implementing the Armed Forces Covenant and both Councils have dedicated staff, in place, to support our local Armed Forces communities. The recommendations, in this Report, have been made to further strengthen the delivery of the Covenant across the County of Shropshire. At the heart of these recommendations is a need to ask if people accessing services have a military connection and to think what this may mean in terms of service delivery.

RECOMMENDATIONS

This Assessment has arrived at the following recommendations which focus on providing direction to Shropshire Council and Telford & Wrekin Council. They are also applicable to all agencies signed up to the Armed Forces Covenant and/or who provide support to the Armed Forces community across Shropshire.

1. Further research is required to estimate the size of the local Armed Forces community.
2. Shropshire Council and Telford & Wrekin Council should be proactive in the use of existing systems to understand the size of the local Armed Forces community starting with 'Asking the Question'.
3. Further research should be conducted to identify foreign and commonwealth veterans across the County of Shropshire including a focus on the needs of the communities.
4. Shropshire Council and Telford & Wrekin Council should further work with GP Practices, and the CCG's, to encourage them to sign up to the Veterans' Friendly Accreditation Scheme and the Armed Forces Covenant.
5. Further work is required to encourage GP Practices and members of the Armed Forces community to record military connections.
6. An ongoing campaign is required to raise awareness amongst veterans of the healthcare services that are available within the NHS.
7. Shropshire Council and Telford & Wrekin Council should consider conducting qualitative research with family members, within the Armed Forces community, through focus groups or other methods to complement any existing quantitative data.
8. A proactive approach is required to ensure Reservists understand the need to register their military Service with their GP.
9. Healthcare professionals need to be aware that Reservists have equivalent status to Veterans in regard to the Covenant in accessing services.
10. Shropshire Council and Telford & Wrekin Council should explore opportunities to continue to strengthen partnership working with local providers of mental health services.
11. Shropshire Council and Telford & Wrekin Council should explore opportunities with the Royal British Legion to offer a formal peer support group within Shropshire.

12. Shropshire Council and Telford & Wrekin Council should explore opportunities to influence social prescribing connector schemes with the aim of ensuring that they include the most appropriate activities and groups for our local Armed Forces communities.
13. Further analysis should be conducted locally to ascertain the attainment of Service pupils across the County.
14. Shropshire Council and Telford & Wrekin Council should regularly promote Service Pupil Premium and issue best practice guidance to assist our schools to identify the most effective use of the Premium.
15. Localised information about schools, including availability, numbers of other Service children in attendance and what the school does to support Service children should be made available for Service families moving into the area.
16. A review should be undertaken to ascertain the requirement for further Children & Young Persons Boards across Shropshire.
17. Current staff training, for housing staff, should be reviewed to ensure that it is being effectively applied in relation to our Armed Forces community.
18. Further work is required with local housing providers to identify Veteran specific housing and to encourage current housing providers to sign up to the Covenant.
19. Veteran specific housing providers should be encouraged to sign up to the Veterans Gateway.
20. Shropshire Council and Telford & Wrekin Council should consider forming a platform, at both local authorities, to allow spouses and civil partners of Serving personnel and Veterans to share their experiences and to highlight additional areas where the Councils could improve their offer to this community.
21. Shropshire Council and Telford & Wrekin Council should consider signing up to the Forces Families Jobs Website.
22. Shropshire Council and Telford & Wrekin Council should develop an employment strategy that enables Reservists to be seen as a business asset.
23. Shropshire Council and Telford & Wrekin Council should be proactive in advertising the range of local employment support and opportunities available to members of the Armed Forces community.
24. Shropshire Council and Telford & Wrekin Council should consider how they encourage veteran owned businesses, within their supply chain, as part of their wider work to promote diversity within the procurement process.

25. Figures, relating to out of work benefits, should be regularly reviewed to address any issues that are unique to our local Armed Forces community.
26. Shropshire Council and Telford & Wrekin Council should continue to work with the West Midlands Reserve Forces & Cadet Association to promote the Defence Employer Recognition Scheme and to support local businesses and organisations who are eligible to join.
27. The Strategic AFC Partnership Boards should ensure that the local employment offer reflects the needs of the local Armed Forces community.
28. Up-to-date and relevant local service information, for the Armed Forces community, should be provided to local custody staff (including Liaison & Diversion staff).
29. Shropshire Council and Telford & Wrekin Council should provide specific information for Serving personnel, and their families, in resettlement, about local post-service that is available.
30. The JAFNA Task & Finish Group should monitor the implementation of the recommendations in this Report and the current AFC Action Plans.

INTRODUCTION

1.1 The Armed Forces Covenant

The Armed Forces Covenant (AFC) was introduced in 2011. It is a promise from the nation that those who serve or have served in the Armed Forces and their families will not be disadvantaged by their Service and they will be treated fairly. The Covenant is a “pledge that together we acknowledge and understand that those who serve or have served in the Armed Forces, and their families, should be treated with fairness and respect in the communities, economy and society that they serve with their lives”¹. It focuses on helping members of the Armed Forces community to have the same access to government and commercial services and products as any other citizen.

1.2 Background

Shropshire Council and Telford & Wrekin Council are both signatories to the AFC and both local authorities have established Strategic AFC Partnership Boards which provide strategic governance, and direction, on the Covenant within their respective areas. Details of membership of the Boards are at Annex A. These Boards have identified the requirement to undertake a Joint Armed Forces Needs Assessment (JAFNA), within their Action Plans, to fully understand the Armed Forces community across the County of Shropshire.

A Task & Finish Group was established to undertake the JAFNA - the first such assessment within the County and which builds on the partnership working that is currently undertaken with the private sector, third sector including Armed Forces charities, Other Government Departments (OGD's) and our local Armed Forces communities etc. The Terms of Reference for the Assessment are at Annex B.

This JAFNA will consider local areas of need identified within the Armed Forces Community. In doing so, this will define a new baseline of County wide understanding, establish the value of thematic reviews and identify how ongoing assessment can be sustainably incorporated into business as usual across the two local authorities.

1.3 Definitions

The Armed Forces are defined as Royal Navy, Royal Marines, Royal Air Forces and Regular Army and associated Reservists:² The Armed Forces community is defined as: anyone who is serving or has served for at least one day in the Armed Forces (Regular or Reserve including National Service) as well as the Merchant Navy Seafarers and fishermen who have served in a vessel that was operated to facilitate military operations by the Armed Forces. The Armed Forces community includes spouses, civil partners and dependent children of those who currently are serving/or have

¹ www.armedforcescovenant.gov.uk

² FiMT (2016) Our Community, Our Covenant Report – Improving the Delivery of Local Covenant Pledges

served for at least one day, even if the Serving person is now deceased whether that death is connected to their Service or not.

Within this Assessment, the term ‘veteran’ will be applied to all former Regular and Reservist Armed Forces personnel, as set out by the Ministry of Defence (MOD). The term ‘Service leaver’ is used for someone who is in transition from, or has ceased to be a member of HM Armed Forces.³ The term ‘Shropshire’ refers to the County of Shropshire which includes the Borough of Telford & Wrekin.

1.4 Scope

The scope of the JAFNA will cover the Armed Forces community across Shropshire and Telford & Wrekin. The Assessment will consider local implications of national research and evidence in relation to key Covenant commitments and areas of need identified. The experience of the Armed Forces community will be considered in relation:

- Education and Children’s Care; Health & Wellbeing; Housing; Employment; the Criminal Justice System and Transition & Specialist Support.

These are areas prioritised within the UK Armed Forces Families Strategy 2016-20⁴ as necessary for ensuring the Armed Forces community have everything they need to thrive within society.

1.5 Methodology

This Assessment was undertaken during the Covid-19 Lockdown which limited, to a certain degree, the range of stakeholder engagement. However, the overall methodology included collection, collation and analysis of:

- National and local data, where this was available from the Office of National Statistics (ONS), the MOD and OGDs.
- National and local research such as the Royal British Legion (RBL) UK Household Survey (2014).
- Reviews on behalf of the Government and other national studies including Forces in Mind Trust (FiMT) Understanding Service Leavers 50+: Their Challenges & Experiences in the Civilian Jobs Market (2020).
- Armed Forces Community Survey⁵. A summary of the findings of the Survey are at Annex C.

³ MOD (2017) Veterans Key Facts <https://www.armedforcescovenant.gov.uk/wpcontent/uploads/2016/02/Veterans-Key-Facts.pdf>

⁴ UK Armed Forces Families Strategy 2016-20 <https://www.gov.uk/government/publications/uk-armed-forces-families-strategy>

⁵ Armed Forces Community Survey undertaken by Shropshire Council and Telford & Wrekin Council dated July 2020.

THE ARMED FORCES COMMUNITY IN SHROPSHIRE

2.1 Military Locations and Personnel in Shropshire and Telford & Wrekin

Military locations, across the County of Shropshire, are as follows:

- Royal Air Force (RAF) Shawbury.
- RAF Cosford.
- HQ 11 Signal & West Midlands Brigade.
- First Battalion the Royal Irish Regiment.
- 8 Rifles (The Rifles' Reserve Infantry Battalion).
- Army Medical Services (AMS) 202 (Midlands) Field Hospital.
- 159 Regiment Royal Logistics Corps.
- Shropshire D Squadron, The Royal Yeomanry.
- Armed Forces Career Office – Shrewsbury.
- Army Cadet Force (ACF) – 22 detachments: Bishops Castle, Bridgnorth, Broseley, Church Stretton, Copthorne, County HQ (Copthorne), Dawley Bank, Donnington, Ellesmere, Harlescott, Ludlow, Madeley (TF7 5EG), Madeley (TF7 5HX), Market Drayton, Newport, Oswestry, Pontesbury, Shifnal, Shrewsbury, Shrewsbury Platoon, Wellington, Wem and Whitchurch.
- Air Training Corps (ATC) – eleven Units: Bridgnorth, Cosford, Dawley, Ludlow, Market Drayton, Oswestry, Shawbury, Shrewsbury, St. Georges, Whitchurch and Wrekin (Wellington).
- Sea Cadets – one Unit: Donnington.

As at 1st April 2020, there were approximately **2,850 regular Serving personnel** based within the County of Shropshire (a 6.34% increase from April 2015) – of which 220 were in the Telford & Wrekin Borough.⁶

⁶ MOD (2020) Location of UK Regular and Civilian Personnel Quarterly Statistics, retrieved from: <https://www.gov.uk/government/statistics/location-of-uk-regular-service-and-civilian-personnel-annual-statistics-2020>

Table 1: UK Regular Service Personnel by Local Authority as at 1st April 2020.

		Shropshire	Telford & Wrekin
Royal Navy/Royal Marines	TOTAL	120	-
	Officers	80	-
	Other Ranks	40	-
ARMY	TOTAL	640	220
	Officers	110	40
	Other Ranks	530	170
RAF	TOTAL	1,870	~
	Officers	290	~
	Other Ranks	1,580	~

1. When rounding to the nearest 10, numbers ending in 5 have been rounded to the nearest multiple of 20 to prevent systematic bias.

2. ~ 5 or fewer.

2.2 Service Leavers

In 2018/19, **15,122** left the Armed Forces nationally⁷. A Business as Usual Request, to the MOD, identified that **590** trained and untrained personnel⁸ left the Royal Navy, Royal Marines, Royal Airforce and the Army between the 1st September 2014 and 1st September 2019 with a SY or TF permanent home address at the point of exit. This is an average of **118** persons per year.

2.3 The Number of Ex-Service Personnel in The County of Shropshire

The MOD does not maintain personal address information once individuals have left the Armed Forces which makes it extremely difficult to know how many veterans, and their family members, live within our County. This challenge is not unique to the Shropshire area. In 2016, together with PoppyScotland, the RBL launched a Count Them In campaign which called on the UK Government to include a question on the Armed Forces community in the 2021 Census. On the 23rd June 2020, legislation was finalised by the UK Government and Parliament to amend the Census in England and Wales, so that, for the first time, it will provide information on whether someone has served in HM Armed Forces. This means that from 2023 onwards, it will be significantly easier to accurately quantify the local Armed Forces community which will facilitate research to understand their local needs.

In the 2021 Census, all respondents aged 16 years and over will be asked the following question⁹:

Have you previously served in the UK Armed Forces (current Serving members should only tick 'No')?

⁷ MOD Annual Service Personnel Statistics <https://www.gov.uk/government/statistics/quarterly-service-personnel-statistics-2019>

⁸ Untrained personnel are those who have not completed their basic military for a range of reasons including choosing to leave, being medically discharged or deemed unsuitable.

⁹ <https://www.ons.gov.uk/census/censustransformationprogramme/questiondevelopment/armedforcescommunityvetransquestiondevelopmentforcensus2021>

Yes, previously served in Regular Armed Forces.

Yes, previously served in Reserve Armed Forces.

Or No.

The Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain, 2017 was published on the 31st January 2019¹⁰. The Survey provided estimates on the size and socio-demographic characteristics of the UK Armed Forces veteran population residing in Great Britain using responses provided in the 2017 Annual Population Survey (APS) administered by the ONS. Main topics, in the APS, include: people characteristics, regional location, health including smoking status, employment status, education and accommodation (housing). It should be noted that the APS was only asked of those residing in households and therefore, excluded individuals who were homeless or were living in communal establishments such as care homes or prisons.

In 2017, the APS stated that there were an estimated **2.4 million** UK Armed Forces veterans in Great Britain, making up an estimated **5%** of household residents aged 16 and over. This was a 99,000 reduction from the previous year mainly due to reduction of people in the older age groups of 65-74 and 75+. Within the County of Shropshire, the APS estimated a total of **24,000** veterans (equating to **6%** of the County's population) with a 1.6% margin of error. The 6% equates to the estimated 6-8% figure of veterans residing in the West Midlands. The APS based these figures on a population of 394,000 within the County of Shropshire. It should be noted that all figures used within the APS are rounded to the nearest '000.

2.4 Estimating the Size of our Armed Forces Community

There is no single data source for estimating the size of the Armed Forces community locally or nationally. It would not be worthwhile, for the purpose of this Assessment to crudely estimate the size of the community.

RECOMMENDATION 1

FURTHER RESEARCH IS REQUIRED TO ESTIMATE THE SIZE OF THE LOCAL ARMED FORCES COMMUNITY

2.5 Pension and Compensation Payments

At at 31st March 2020, **5,371** individuals within the County of Shropshire were in receipt of an Armed Forces pension and/or compensation payments. The limitations of this information make it unhelpful for understanding the veteran population size within the County. However, it could be useful when considering the needs of our local Armed Forces community.

Table 2 shows that **1,929** payments are coded as War Pension Scheme (WPS) and/or Armed Forces Compensation Scheme (AFCS) payments. Being in receipt of one or both does not necessarily

¹⁰ <https://www.gov.uk/government/statistics/annual-population-survey-uk-armed-forces-veterans-residing-in-great-britain-2017>

mean that an individual requires on-going support, care or assistances but it may indicate a group of individuals more likely to require additional medical care and carer support as they age.

Table 2: MOD Compensation and Other Payments As at 31st March 2020¹¹

Local Authority	All ¹	Of Which Veterans ¹	AFPS Recipients ²	WPS Recipients			AFCS Recipients		
				Veterans (Disablement Pensions)	War Widow(er)s	Other War Pensions ³	Serving Personnel ⁴	Veterans ^{4,5}	GIPS in payment ⁶
Shropshire	3,594	3,310	2,819	628	90	~	192	274	31
Telford & Wrekin	2,194	2,071	1,756	401	42		80	184	17

1. Subtotals can not be summed as an individual may be in receipt under more than one scheme.
2. All veterans in their pension under AFPS 75 and AFPS 05. Excludes pensioners in receipt of their pension under AFPS 15.
3. Includes War Orphans, War Parents, Adult Dependants and recipients of a Child Allowance under the WPS.
4. Figures do not match other published AFCS statistics on lump sum recipients as this bulletin excludes those who have a date of death recorded on the CAPS.
5. Includes individuals awarded compensation under the AFCS after leaving Service, and in-Service recipients of compensation who had later left Service as at 31st March 2020.
6. Guaranteed Income Payment.

It is widely acknowledged that a high proportion of veterans are not in receipt of a pension:

- Not all deferred pensions have been claimed.
- Veterans who completed National Service only receive a pension if they had been injured during their Service and the injury was attributable to that Service.
- Veterans who served less than 12 years prior to 2012, do not qualify for a military pension.
- Veterans who served more than 12 years, but less than the standard qualification, and are aged under 55 years, will not be in receipt of a pension.

The Armed Forces Pension Schemes are designed to reflect the unique nature of Service life, to provide a retirement income for Serving personnel and their dependants and to incentivise retention in Service as a key part of the overall remuneration package¹².

2.6 Veteran Estimates by Population Characteristics

The APS 2017 presented a summary of the overall estimated numbers of the UK Armed Forces veterans residing across Great Britain in 2017, by key characteristics, with comparisons to the non-veteran population:

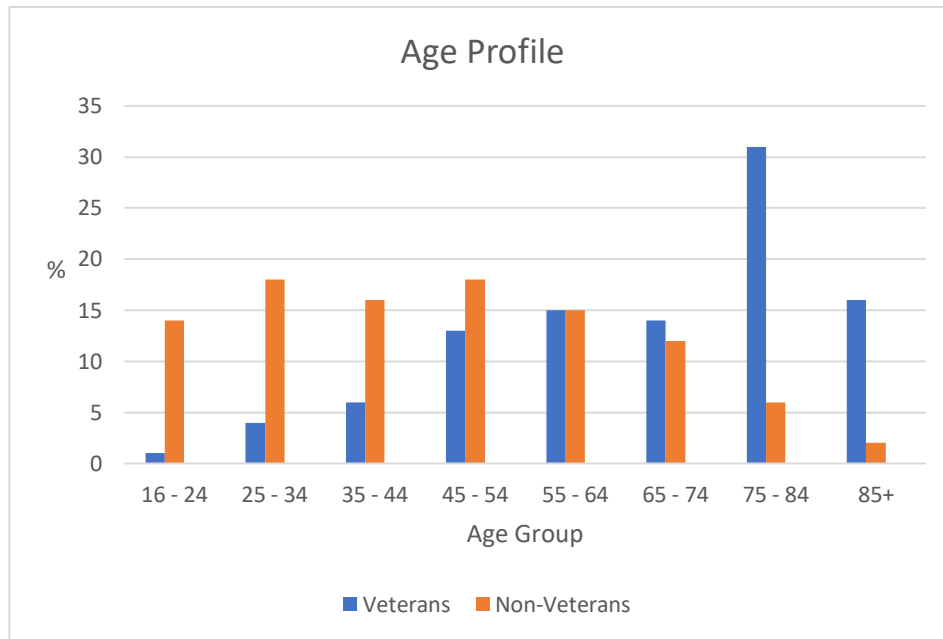
- Veterans were significantly more likely to be male (89%) than non-veterans (47%).
- Veterans were less likely to be single (11%) or married/in a civil partnership (62%) but more likely to be widowed (16%) than non-veterans (14%, 66% and 9% respectively).
- Veterans were significantly more likely to be white than non-veterans (99% compared to 92%).

¹¹ <https://www.gov.uk/government/statistics/location-of-armed-forces-pension-and-compensation-recipients-2020>

¹² Armed Forces Pension Scheme 1975 – Your Pension Scheme Explained
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/911030/FINAL_DRAFT - AFPS 75 Your Scheme Explained.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/911030/FINAL_DRAFT_-_AFPS_75_Your_Scheme_Explained.pdf)

- Veterans were older, with a significantly higher percentage aged 75 and over (47%) than non-veterans (8%). Almost two-thirds of veterans were estimated to be aged 65 and over (60%) compared to non-veterans (20%).

Figure 1: Age Profile of Veterans v Non-Veterans



RECOMMENDATION 2

SHROPSHIRE COUNCIL AND Telford & Wrekin Council should be proactive about in the use of existing systems to understand the size of the local armed forces community starting with 'asking the question'

2.7 Reservists

A FOI request¹³, to the MOD, identified the following number of Reservists and Cadet Force Adult Volunteers who have a permanent home address and/or a residence at work address within the County of Shropshire.

¹³ Author: DBS KI MICOE Analyst Mil 3a, DBS CIO Knowledge & Information, MOD dated 15th September 2020

Table 3: Number of Reservists & Cadet Force Adult Volunteers with a Permanent Home Address in The County of Shropshire as At Sep 2020

Assignment Type	Distinct Number of Employee Records		Grand Total
	Shropshire	Telford and Wrekin	
Cadet Force Adult Volunteers	80	40	110
Called Out Reservist	10	10	10
FTRS	20	20	40
Sponsored Reserve	~	~	~
Volunteer Reserve	130	90	220
Grand Total	240	150	380

Table 4: Number of Reservists & Cadet Force Adult Volunteers with a Residence at Work Address in The County of Shropshire as at 2020

Assignment Type	Distinct Number of Employee Records		Grand Total
	Shropshire	Telford and Wrekin	
Cadet Force Adult Volunteers	~	10	10
Called Out Reservist	10	10	20
FTRS	30	50	70
Sponsored Reserve	~	~	~
Volunteer Reserve	120	90	210
Grand Total	160	160	320

Notes for Tables 3 and 4

All figures are rounded to the nearest 10, numbers ending in 5 have been rounded to the nearest multiple of 20 to avoid systematic bias. Figures below 5 denoted by ~, zero denoted by -. Totals & sub-totals have been rounded separately and may not equal the sum or the rounded parts.

As at September 2020, there were a total of **1** Reservist employed at Shropshire Council and **3** Reservists employed at Telford & Wrekin Council¹⁴.

2.8 Foreign and Commonwealth

There is a lack of information pertaining to the numbers of Foreign and Commonwealth veterans within the County of Shropshire although, Shropshire Council continue to liaise with a Fijian veteran community within the area. Although, the needs of these communities may be similar to those of the wider veteran community, it is acknowledged that different ethnic groups, and their families, can experience specific issues that need to be considered:

¹⁴ Data supplied by WM-EEAO at WM RFCA dated 22nd September 2020.

- Higher rates of some diseases and medical conditions.
- Health issues relating to living in houses of multiple occupancy.
- Specific issues around accessing healthcare and other services due to language barriers.

RECOMMENDATION 3

FURTHER RESEARCH SHOULD BE CONDUCTED TO IDENTIFY FOREIGN AND COMMONWEALTH VETERANS ACROSS THE COUNTY OF SHROPSHIRE INCLUDING A FOCUS ON THE NEEDS OF THE COMMUNITIES

2.9 Stop the Service Charge Campaign

Currently when Commonwealth personnel leave the UK Armed Forces and wish to apply to continue to live in the UK, they face thousands of pounds of fees to do so. A Service leaver with a partner and two children will be presented with a bill of almost £10,000 to stay in the country, despite their years of sacrifice and service on behalf of our nation. The RBL is currently running a Stop the Service Charge campaign to lobby the Government to end this significant financial cost.¹⁵

¹⁵ Further information can be obtained from publicaffairs@britishlegion.org.uk

HEALTH & WELLBEING

3.1 Context

Research by the Liverpool Public Health Observatory in 2013¹⁶ highlighted that, generally, the health of the military population is good compared with the general public, due to the expected physical fitness required to join the Armed Forces, social support networks available and access to health care and employment. The Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain, 2017⁸ identified that overall, there were ‘no differences’ between veterans and non-veterans self-reported general health and whether any health problems suffered were expected to last more than twelve months.

3.2 The Role of the NHS & NHS Services for Members of the Armed Forces Community

From 1st April 2013, NHS England took up its full duties to ensure that the NHS delivers better outcomes for patients within its available resources and upholds, and promotes, the NHS Constitution. As a single national organisation, NHS England is responsible for ensuring that services are commissioned in ways that support consistency not centralization whilst ensuring high standards of quality across the country. NHS England works through its national, regional and area teams to discharge these responsibilities.

Section 15 of the Health and Social Care Act 2012, gives the Secretary of State the power to require NHS England to commission certain services instead of clinical commissioning groups (CCGs). These include services or facilities for members of the Armed Forces or their families. These Regulations define the scope of responsibility as being for any Serving member of the Armed Forces stationed in England and any family dependents who are registered with a Ministry of Defence, Defence Medical Services (DMS) Medical Centre. In addition, Reservists who require NHS health services while mobilised will be the commissioning responsibility of NHS England. Those stationed overseas who return to England to receive health services are the responsibility of the NHS in England and will depend on what service is needed and where.

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 AFC.

NHS England’s responsibilities are to commission directly:

- 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.
- Specialised services, including specialist limb prosthesis and rehabilitation services for veterans.

The responsibilities of the Clinical Commissioning Groups are to commission:

¹⁶ Liverpool Public Health Observatory (2013) Health Needs Assessment for Ex-Armed Forces Personnel aged under 65, and their Families <https://livrepository.liverpool.ac.uk/2015382/1/93,Health,needs,assessment,for,ex-Armed,Forces,personnel.pdf>

- All secondary and community services required by Armed Forces' families where registered with NHS GP Practices, and services for veterans and Reservists when not mobilised. The bespoke services for veterans, such as veterans' mental health services, will be commissioned by CCGs either individually or collectively.
- Emergency care services on a geographical basis which can be accessed by anyone present in their defined geographical boundary e.g. accident and emergency services, emergency ambulance services and other emergency health services. Serving members of the Armed Forces and their families (where registered with DMS Medical Centres) will have full access to these services.
- Health services for these groups stationed overseas who return to England to receive NHS care.

NHS care for the Armed Forces community¹⁷ includes the following dedicated services and initiatives to support the Armed Forces community:

- **The Veterans' Mental Health Transition, Intervention and Liaison Service (TILS)** is for Serving personnel approaching discharge from the military, Reservists (active and non-active) and veterans with mental health difficulties. The service provides a range of treatment, from recognising the early signs of mental health problems and providing access to early support, to therapeutic treatment for complex mental difficulties and psychological trauma. Help may also be provided with housing, employment, alcohol misuse and social support. TILS can be contacted by calling 0300 323 0137 or by email mevs.mhm@nhs.net.
- **The Veterans' Mental Health Complex Treatment Service (CTS)** is for veterans and Reservists (active and non-active) who have military related complex mental health difficulties that have not improved with previous treatment. The service provides intensive care and treatment that may include (but is not limited to) drug and alcohol misuse, physical health, employment, housing, relationships and finances, as well as occupational and trauma focused therapies.

Both of the above services are available across England and individuals can self-refer or ask a GP or Armed Forces charity to refer them.

- **Veterans Trauma Network (VTN)** The VTN provides care and treatment to those with a Service-attributable physical health condition. Located in ten major trauma centers across England (Plymouth, Oxford, London – three centres, Birmingham, Nottingham, Liverpool, Leeds and Middlesbrough), with links to five specialist NHS trusts, the Network works closely with DMS, national centres of clinical expertise, the TILS and CTS, as well as military charities to provide a complete package of care. It is run largely by healthcare professionals who are either veterans or Serving personnel. GPs can email England.veteranstraumanetwork@nhs.net to refer veterans to the service.

¹⁷ NHS Care for the Armed Forces Community, February 2020, version 10

- **Veterans Prosthetics Panel (VPP)** provides funding on a named veteran basis to NHS Disablement Service Centres (DSC) to ensure that veterans who have Service related limb loss can access high quality prosthetics regardless of which DSC they attend.
- **Armed Forces Personnel in Transition: Integrated Personal Commissioning for Veterans Framework (IPC4V)** is a personalised care approach for Serving personnel who have complex and enduring physical, neurological and mental health conditions that are attributable to injury whilst in Service. It provides a framework for effectively planning and delivering personalised care in line with the AFC. Central to this is an improved discharge planning process, starting approximately nine months before individuals leave the military. This means that the MOD, health and social care, Armed Forces charities and other organisations involved in the care of these individuals are brought together at an earlier point in the care pathway, ensuring care and support arrangements are in place as they transition to civilian life and beyond.
- **Personalised Care for Veterans with a Long Term Physical, Mental or Neurological Health Condition or Disability** Veterans with a complex and life-long health condition may be eligible for the Veterans Personalised Care Programme. Eligible individuals will have a single personalised care plan for all their health and wellbeing needs that is developed with them and a range of organisations, including health and social care and Armed Forces charities. NHS England and NHS Improvement, together with the MOD, have published a guide for CCGs and Local Authorities which sets out the new personalised care approach for veterans¹⁸.

To apply, or for further information, individuals should contact their local CCG e.g. NHS Shropshire CCG on 01743 277500 or email ShropshireCCG@nhs.net or Telford & Wrekin CCG on 01952 580300.

- **Veteran Friendly GP Practice Accreditation** Over the next five years, NHS England and NHS Improvement, together with the Royal College of General Practitioners, are rolling out a Veteran Friendly GP Practice Accreditation Scheme across England. This Scheme is intended to help ensure Practices are equipped to best care for veterans and their families and, as at September 2020, 807 surgeries had received accreditation. Disappointingly, only eleven practices have signed up to the Scheme within Shropshire.

¹⁸ <https://www.england.nhs.uk/personalisedcare/upc/ipc-for-veterans/personalised-care-for-veterans/>

Table 5: Veteran Friendly Accredited Practices Within Shropshire as at 15th April 2020¹⁹

Shropshire CCG	Knockin Medical Centre	SY10 8HL
Shropshire CCG	The Caxton Surgery	SY11 1RD
Shropshire CCG	Belvidere Medical Practice	SY2 5LS
Shropshire CCG	Marden Medical Practice	SY2 6DL
Shropshire CCG	South Hermitage Surgery	SY3 7JS
Shropshire CCG	Wem and Prees Medical Practice (Wem Surgery and Prees Surgery)	SY4 5AF
Shropshire CCG	Pontesbury Medical Practice	SY5 0RF
Shropshire CCG	Westbury Medical Centre	SY5 9QX
Shropshire CCG	Much Wenlock and Cressage Medical Practice	TF13 6BL
Telford and Wrekin CCG	Donnington Medical Practice	TF2 8EA
Shropshire CCG	Drayton Medical Practice	TF9 3AL

RECOMMENDATION 4

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD FURTHER WORK WITH GP PRACTICES, AND THE CCG'S, TO ENCOURAGE THEM TO SIGN UP TO THE VETERANS FRIENDLY ACCREDITATION SCHEME AND THE ARMED FORCES COVENANT

- **The Veterans Covenant Healthcare Alliance (VCHA)** aims to improve NHS care for the Armed Forces community by supporting Trusts, Health Boards and other providers to identify, develop and showcase the best standards of care. To date, a group of fifty-three NHS providers have been accredited as exemplars of the best care for veterans, helping to drive improvements in NHS care for people who serve, or have served, in the UK Armed Forces and their families. Veterans Aware Trusts are leading the way in improving veteran's care within the NHS, as part of the VCHA. These Trusts have promised to:
 - Provide leaflets and posters to veterans and their families explaining what to expect.
 - Train relevant staff to be aware of veterans' needs and the commitments of the NHS under the AFC.
 - Inform staff if a veteran or their GP has told the hospital they have served in the Armed Forces.
 - Ensure that members of the Armed Forces community do not face disadvantage compared to other citizens when accessing NHS services.
 - Signpost to extra services that might be provided to the Armed Forces community by a charity or Service organisation in the Trust.
 - Look into what services are available in their locality, which patients would benefit from being referred to.

¹⁹ <https://www.rcgp.org.uk/clinical-and-research/resources/a-to-z-clinical-resources/veteran-friendly-gp-practices.aspx>

Both NHS Trusts in Shropshire – Robert Jones and Agnes Hunt Hospital (RJAH) NHS Foundation Trust and The Shrewsbury and Telford Hospitals NHS Trust - have been accredited as Veterans Aware and both continue to work closely with Shropshire Council and Telford & Wrekin Council and are represented on their Strategic AFC Partnership Boards. Additionally, The RJAH collaborates with Shropshire Council to provide Armed Forces Outreach Support for the Armed Forces community on a weekly basis.

The RJAH also provide a **Veterans Orthopaedic Service** which is open to those who have served with the UK military, including National Service, and treats arthritic lower limb problems especially those requiring hip and knee replacements.

3.3 Serving Personnel

According to NHS England, Armed Forces personnel are typically younger and fitter than the general population. There is a low prevalence of long-term conditions which is unsurprising given that enlistment precludes a number of conditions including cardiovascular disease, rheumatoid arthritis, kidney disease, asthma symptoms or treatment in the last year²⁰. There is however, a higher incidence of musculoskeletal injury in this group.

In 2019, the three largest causes of death among the UK Regular Armed Forces were²¹:

- Cancers 32% (number = 21).
- Other Accidents – 23% (number =15)*.
- Land Transport Accidents – 20% (number = 13).

*Of which 8 were awaiting verdicts and may be recategorized a following coroner's report.

Overall, in 2019, the UK Armed Forces were at a statistically significant lower risk of dying compared to the UK general population. Specifically, the UK Regular Armed Forces were at a:

- 70% significantly decreased risk of dying as a result of a disease related condition and a
- 44% significantly decreased risk of dying as a result of external causes of injury and poisoning (accidental, violent or suicide) compared to the UK general population.

Within Shropshire as at October 2019²², **2,700** Armed Forces personnel were registered with the DMS. The majority of these (**1,810**) were RAF which is to be expected.

²⁰ British Army How to Join – Which Medical Conditions Will Stop Me Joining? Retrieved September 2020
<https://apply.army.mod.uk/how-to-join/can-i-join/medical#which-medical-conditions-will-stop-me-joining?>

²¹ Deaths in the UK Regular Armed Forces: Annual Summary and Trends Over Time 1st January 2012 to 31st December 2019 <https://www.gov.uk/government/statistics/uk-armed-forces-deaths-in-service-2019>

²² <https://www.gov.uk/government/statistics/defence-personnel-nhs-commissioning-bi-annual-statistics-financial-year-201920>

Table 6: UK Armed Forces Personnel & Entitled Civilian Personnel DMS Registrations to Shropshire and Telford & Wrekin Sustainability Transition Partnership (STP)

	All Persons	All UK Armed Forces	Navy	Army	RAF	Civilian
Shropshire and Telford & Wrekin STP	3,710	2,700	90	800	1,810	1,000

1. Due to rounding, please note that totals may not equal the sum of their parts.

3.4 Transition Into Local NHS Services

At the end of Service, it is the responsibility of individual personnel, and their families, to register with a civilian GP and dentist and to inform them of their previous Service, enabling a marker known as a REED code to be assigned to their patient record. This prompts the request for DMS to transfer previous medical records from the Armed Forces. By sharing this information, veterans with Service related injuries and health conditions can be referred to a range of dedicated services provided by specialist military and civilian providers.

There are circumstances where a medical handover will take place (often when the person is being medically discharged) between the MOD and the NHS as part of the resettlement process. As part of the JAFNA Survey⁵, of the 165 respondents to the question “If you left the Armed Forces with an ongoing mental or physical health condition, do you feel your NHS GP was given all of the correct information?”, just **31%** answered ‘yes’.

In 2016, Portsmouth CCG as part of a Veterans Healthcare Survey²³ highlighted a number of areas where personal transition between DMS and local Healthcare services could be improved:

- Supporting GPs, and other healthcare staff to understand military culture, in particular, the ‘Fighting Fit’²⁴ approach to military health care, compared to the NHS approach of visiting the GP when you are unwell.
- Raising awareness amongst veterans of the healthcare available in the local NHS to help manage expectations.
- Encouraging Service leavers to register with a GP straight after discharge and for new Service leavers, veterans, Reservists and Service families to highlight their Armed Forces status.

NHS England advises GP Practices that patients, from the Armed Forces community should be coded as follows:

²³ Portsmouth CCG (2016) Veterans Healthcare Survey Summary

²⁴ Policy Paper ‘Fighting Fit: A Mental Health Plan for Servicemen and Veterans’ retrieved from:

<https://www.gov.uk/government/publications/fighting-fit-a-mental-health-plan-for-servicemen-and-veterans--2>

Table 7: Coding of Armed Forces Status at GP Practices Dependent on System In Use²⁵

	EMIS and InPS Vision: Version 2	TPP System One: Clinical Terms Version 3 (CTV3)
Veteran	13ji Military veteran	XaX3N Military veteran
	13jy History relating to military Service	Xa8Da History relating to military Service
Reservist	OZ7 Reservist	Xabnw Reservist
Armed Forces Family	13WY Member of military family	-
	13WW Dependent of current Serving member of British Armed Forces	XaZY5 Dependent of current Serving member of British Armed Forces

Several Business as Usual and FOI Requests to the NHS and the Shropshire and Telford & Wrekin CCGs have been unsuccessful in identifying the number of patients, registered across the County, with an Armed Forces connection. Ongoing work with veterans demonstrates that there is a lack of awareness of the need to highlight this connection and also within GP Practices as to the importance of recording this information.

RECOMMENDATION 5

FURTHER WORK IS REQUIRED TO ENCOURAGE GP PRACTICES AND MEMBERS OF THE ARMED FORCES COMMUNITY TO RECORD MILITARY CONNECTIONS

RECOMMENDATION 6

AN ONGOING CAMPAIGN IS REQUIRED TO RAISE AWARENESS AMONGST VETERANS OF THE HEALTHCARE SERVICES THAT ARE AVAILABLE WITHIN THE NHS

3.5 Spouses, Civil Partners and Dependents

There is limited research about the impact of Service life on spouses, civil partners and dependents' health and well-being. Research available concludes these individuals are subject to unique challenges and higher levels of stress.²⁶ Specifically, the Research found that longer deployments may result in a perceived negative impact on military children.

The Veterans & Families Research Hub (VFR Hub) was initiated by the Forces in Mind Trust (FiMT), Lord Ashcroft and Anglia Ruskin University with the aim of²⁷:

²⁵ Guidance for Practices on Registering and Coding Patients from the Armed Forces Community PDF dated June 2016.

²⁶ Rowe et al (2014) Perceptions of the impact of a military career has on children, Health Service and Population Research, King's College London

²⁷ Veterans and Families Research Hub <https://www.vfrhub.com/>

“providing an accessible, contemporary and authoritative repository of UK and international research-related resources and literature on military veterans and their families, including transitions to civilian lives, that informs and stimulates research, policy development, improved service delivery and journalistic enquiry”.

The VFR Hub supports statutory and charity organisations to create better targeted and more efficient policies and services and assists in developing a better understanding of veterans’ matters across communities.

RECOMMENDATION 7

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD CONSIDER CONDUCTING QUALITATIVE RESEARCH WITH FAMILY MEMBERS, WITHIN THE ARMED FORCES COMMUNITY, THROUGH FOCUS GROUPS OR OTHER METHODS TO COMPLEMENT ANY EXISTING QUANTITATIVE DATA

3.6 Reservists

Research suggests that individuals signing up for the Reserves are more likely to be thrill seekers, and more impulsive than the general population, giving them a propensity for risk taking behaviours²⁸. Higher rates of risk-taking behaviour such as smoking, risky driving and violence have also been seen in Reservists that have been deployed. These have the potential to impact on physical health both immediately and in later life.

The MOD provides enhanced mental health services for Reservists in the same way that they do for Regular personnel. This relies on GP’s knowing that the patient is a Reservist, the patient identifying Service related issues to their GP and timely passing of notes to MOD health services.

RECOMMENDATION 8

A PROACTIVE APPROACH IS REQUIRED TO ENSURE RESERVISTS UNDERSTAND THE NEED TO REGISTER THEIR MILITARY CONNECTION WITH THEIR GP

RECOMMENDATION 9

HEALTHCARE PROFESSIONALS NEED TO BE AWARE THAT RESERVISTS HAVE EQUIVALENT STATUS TO VETERANS IN REGARD TO THE COVENANT IN ACCESSING SERVICES

²⁸ Thandi G et al (2015) Risk-Taking Behaviours Among UK Military Reservists, Occupational Medicine, Volume 65, Issue 5 dated July 2015.

3.7 Mental Health

Positive mental health and wellbeing leads to a more flourishing and fulfilling life at home, work and the communities in which we live. It is central to individual and community resilience, the ability to function well, be productive, be healthy and able to cope with adversity and change. The UK Household Survey²⁹, conducted by the RBL, indicated that the prevalence of mental illness is increasing among the ex-Service community, doubling from 3% in 2005 to 6% in 2014. The analysis further indicated that as the prevalence is greatest among those aged 35-64, this rise is not age-related.

The Survey found that the prevalence of mental health disorders among younger veterans (aged 16-44 years) was three times higher than that of the UK population of the same age. Ex-Service personnel may be at an increased risk of self-harm and young male veterans, particularly those with shorter lengths of Service, are at an increased risk of suicide.

There has been much publication and research focussed on post-traumatic stress disorder (PTSD) resulting from experiences of active Service. Only a small number of veterans have been found to have PTSD with other types of mental illness being more common. While the numbers of veterans affected with PTSD are thought to be only slightly higher than in the general population, the severity, in some cases, have found to be much more profound.

In the recent Armed Forces Community Survey⁵, **20%** of respondents stated that they believed that they had mental health issues related to their Service and **10%** stated that they had accessed local mental health services within the previous 12 months. Both Shropshire Council and Telford & Wrekin Council work closely with providers of mental health services, including Service charities locally, and these organisations are encouraged to sign up to the AFC and are represented on the Strategic AFC Partnership Boards.

RECOMMENDATION 10

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD EXPLORE OPPORTUNITIES TO CONTINUE TO STRENGTHEN PARTNERSHIP WORKING WITH LOCAL PROVIDERS OF MENTAL HEALTH SERVICES

3.8 Peer Support and Social Prescribing

Peer support³⁰ in health and care encompasses a range of approaches through which people with similar characteristics (such as long term conditions or health experiences), give or gain support from each other to achieve a range of health and wellbeing outcomes. In mental health, outcomes such empowerment, recovery and hopefulness were improved significantly. In

²⁹ Royal British Legion (2014) A UK Household Survey of the Ex-Service Community www.britishlegion.org.uk/media/4093841/2014householdsurveyreport.pdf

³⁰ NHS England (2017), Community capacity and Peer Support <https://www.england.nhs.uk/wp-content/uploads/2017/06/516Community-capacity-and-peer-supportS7.pdf>

diabetes, peer support led to significant improvements in depression, knowledge of the disease and biomedical outcomes.

There are a range of national and local peer networks including a number of Service specific charities, which offer peer support and mentoring, such as the RBL, Blesma (member to member mentoring) and Combat Stress. Locally, across Shropshire, there are active Veterans Breakfast Clubs and Armed Forces Community Outreach Hubs run by both Councils (and funded by the AFC Trust Fund).

RECOMMENDATION 11

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD EXPLORE OPPORTUNITIES WITH THE ROYAL BRITISH LEGION TO OFFER A FORMAL PEER SUPPORT GROUP WITHIN SHROPSHIRE

In the Long Term Plan, NHS England are fully committed to building the infrastructure for social prescribing in primary care, including:

- One thousand new social prescribing link workers in place by 2020/21, with significantly more after that.
- At least 900,000 people to be referred to social prescribing by 2023/24.

Social prescribing³¹ enables professionals to refer people to a link worker to connect them into community support, based on 'what matters to the person', as identified through shared decision making or personalised care and support³². Link workers develop a shared plan with people and introduce them to community groups and services. This could include groups focused on specific activity, such as walking or singing or in the case of veterans, they may help make links with local veterans' groups. Evidence suggests that group activities can contribute to wellbeing, feelings of social inclusion and that healthy activities can influence changes in behavior to benefit individual health. According to NHS England mapping (June 2018), over 60% of CCGs are investing in local social prescribing connector schemes.

RECOMMENDATION 12

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD EXPLORE OPPORTUNITIES TO INFLUENCE SOCIAL PRESCRIBING CONNECTOR SCHEMES WITH THE AIM OF ENSURING THAT THEY INCLUDE THE MOST APPROPRIATE ACTIVITIES AND GROUPS FOR OUR LOCAL ARMED FORCES COMMUNITIES.

³¹ A review of the evidence assessing impact of social prescribing on healthcare demand and cost implications – Polley M., Bertotti

³² Personalised Care for Veterans in England: A Guide for Clinical Commissioning Groups and Local Authorities

3.9 Battle Back Centre³³

The Battle Back Centre, in Lilleshall, Telford, was established by the RBL in 2011 and is part of the MoD's Defence Recovery Capability programme. Attendance for a one-week residential course is a mandatory requirement of wounded, injured and sick personnel as part of their individual recovery programmes. In collaboration with Leeds Beckett University and Carnegie Great Outdoors Centre, Battle Back provides specialist coaching for multi-activity residential programmes giving participants opportunities to take part in challenging activities including climbing, water sports, caving, wheelchair basketball and archery. As well as continuing to support wounded, injured and sick Service personnel, more recently, the service has been expanded with the introduction of wellbeing courses for veterans.

3.10 Health & Wellbeing - Conclusions

Available research and information indicates that the majority of those within the Armed Forces community have needs in line with the general population. There are some preventable health issues such as diabetes, alcoholism, mental health and suicide associated with this community which local health services need to work together to address.

There is a small number of individuals who experience a range of complex issues which can often escalate, to the point of crisis, quite quickly. These people require practitioners to have the skills and understanding to some of the unique factors that members of the Armed Forces experience and to support these people to overcome the challenges they are experiencing. Moving forward, there is a pressing need to learn from good practice whilst addressing the gaps in our knowledge.

³³ <https://www.britishlegion.org.uk/get-support/physical-and-mental-wellbeing/recovery-centres/the-battle-back-centre>

CHILDREN AND YOUNG PEOPLE

4.1 Context

In 2017, the Local Government Association (LGA)³⁴ estimated that there were approximately, 150,000 Serving personnel living in England and that across the UK, there were 101,393 dependent adults and 57,590 dependent children³⁵, with around 8% of children aged 0-15 being from current and ex-Serving Armed Forces families. The ONS Mid-Year Estimates for the Population of England, Scotland & Northern Ireland dated 2019³⁶ estimated a total of **53,038** young people aged 0-15 in Shropshire and a total of **37,059** in Telford & Wrekin. Applying the methodology of the previously mentioned 8%, this equates to an approximate total of **7,207** children (Shropshire – 4,243 and Telford & Wrekin 2,964).

Service families often face additional pressures on family life resulting from separation from loved ones due to deployment on exercises and operations. Service families also tend to be more mobile with moves sometimes unplanned and at short notice. In 2019, 28% of Service families had at least one child change schools, for Service reasons, in the previous 12 months³⁷. This can lead to disrupted continuity of education for children. The Tri-Service Continuous Attitude Survey reported that families who changed schools for Service reasons were more likely to experience difficulties with their children's' education (44%) than those who changed schools for other reasons (24%).

4.2 Attainment

In 2016, the MOD issued an Ad Hoc Statistical Bulletin³⁸ which provided information on educational statistics for England specifically on UK Armed Forces Personnel's children (Service children), in 2014/15. In the Bulletin, Service children were compared to non-Service children who were not eligible for free school meals (FSM). The Bulletin was developed in support of the quantitative evidence on education which is one of the four areas which the MOD is obliged to report on, in the Annual Armed Forces Covenant Report to Parliament on: Health, Housing, Education and Inquests.

The Key Points from the Bulletin were:

- In each year between 2012/13 and 2014/15, there was little difference between the attainment of Service children and non-Service children at Key Stage 2 and Key Stage 4.
- In 2014/15, Service children were more likely to attend more than one school, compared to non-Service children, at both primary and secondary levels.
- For Service children attending one school, the attainment at Key Stage 2 and 4 was the same or higher than for non-Service children.

³⁴ LGA (2017) Meeting the Public Health Needs of the Armed Forces Community: A Resource

³⁵ RBL (2014) Household Survey 2014

³⁶

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesandnorthernireland>

³⁷ MOD (2019) Tri-Service Continuous Attitude Survey

³⁸ MOD – Ad Hoc Statistical Bulletin Children of UK Armed Forces Personnel: Education Statistics for England, 2014/15

- For Service children who attended more than one school, at both primary and secondary (Key Stage 2 and 4), the percentage achieving the acceptable level fell however, they performed better than non-Service children who attended more than one school.
- The same percentage of Service children and non-Service children attended Outstanding and Good OFSTED rated schools in 2014/15. However, fewer Service children attended Outstanding schools.

Attainment:

- In 2014/15, 82.3% of Service children achieved level 4 or above in reading, maths and writing at Key Stage 2, compared to 82.9% of non-Service children. Achieving level 4 or above in these subjects was the expected standard for KS2 pupils in 2014/15.
- At Key Stage 4, 64.9% of Service children achieved five or more A*-C (or equivalent), including English and Maths, GCSEs in 2014/15 compared to 63% of non-Service children.

The Bulletin also noted that the attainment of Service children and non-Service decreased as the number of schools attended increased at both Key Stage 2 and 4. However, the attainment of Service children decreased less than the attainment of non-Service children as the number of schools increased.

RECOMMENDATION 13

**FURTHER ANALYSIS SHOULD BE CONDUCTED LOCALLY TO ASCERTAIN THE
ATTAINMENT OF SERVICE PUPILS ACROSS OUR COUNTY**

4.3 Service Pupil Premium (SPP)

The Department for Education introduced the Service pupil premium (SPP) in April 2011 in recognition of the specific challenges children from Service families face and as part of the commitment to delivering the AFC. State schools, academies and free schools in England, which have children of Service families in school years Reception to Year 11, can receive the SPP funding. It is designed to assist the school in providing the additional support that these children may need and is currently worth £310 per service child who meets the eligibility criteria. Eligible schools receive the SPP so that they can offer mainly pastoral support during challenging times and to help mitigate the negative impact on Service children of family mobility or parental deployment

Pupils attract SPP if they meet one of the following criteria:

- One of their parents is serving in the Regular Armed Forces (including pupils with a parent who is on full commitment as part of the full time Reserve Service).
- They have been registered as a 'Service child' on the January school census at any point since 2016.
- One of their parents died whilst serving in the Armed Forces and the pupil receives a pension under the Armed Forces Compensation Scheme or the War Pensions Scheme.

- One of their parents have previously left the Armed Forces, including through injury, for up to a maximum of six years.³⁹

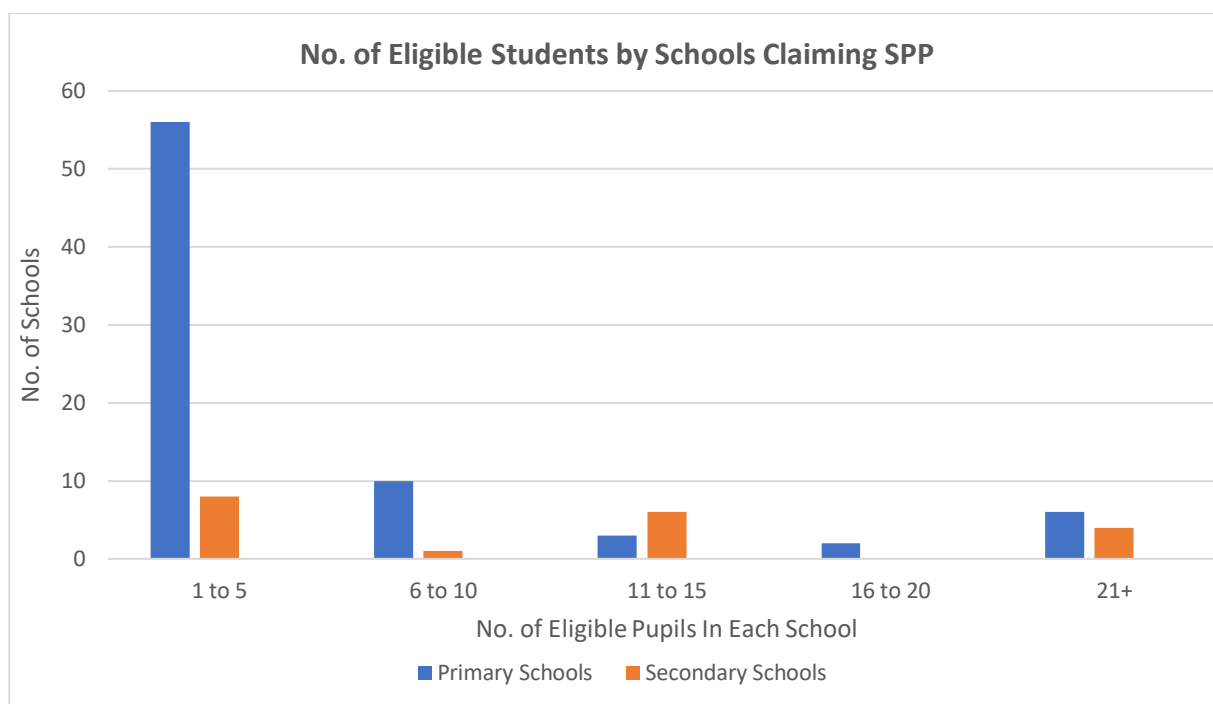
Children must be flagged as Service children ahead of the January school census deadline. Service parents need to make the school aware of their status by talking to the head teacher or school admin staff.

Table 8: Service Pupil Premium by Local Authority as At March 2020⁴⁰

	Total No. of Children	No. of Children registered for SPP	SPP as % of Total Cohort	Total Amount (£)
Shropshire	36,338	931	2.56	279,300
Telford & Wrekin	27,261	557	2.04	166,975

SPP figures could not be broken down for Telford & Wrekin schools however, analysis of schools belonging to the Shropshire Local Authority revealed:

Figure 2: No. of Eligible Students Within Schools Claiming SPP



As part of a recent Armed Forces Community Survey, within Shropshire, just 57% of respondents with dependent children, of school age, responded that they had notified the school of their

³⁹ <https://aff.org.uk/advice/education-childcare/service-pupil-premium/>

⁴⁰ <https://www.gov.uk/government/publications/pupil-premium-allocations-and-conditions-of-grant-2019-to-2020>

Armed Forces status. This non-notification may be for various reasons including lack of knowledge about SPP or not wishing to be identified as having an Armed Forces connection etc. There are also several occasions when parents express concern to the LA's Armed Forces Covenant Teams about how the SPP is being spent within schools. It is recognised that it is difficult for schools with small numbers of pupils receiving SPP to demonstrate effective utilisation of the funds – as shown at Table 2, the majority of Primary Schools have five or less pupils.

RECOMMENDATION 14

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD REGULARLY PROMOTE SPP AND ISSUE BEST PRACTICE GUIDANCE TO ASSIST OUR SCHOOLS TO IDENTIFY THE MOST EFFECTIVE USE OF THE PREMIUM

RECOMMENDATION 15

LOCALISED INFORMATION ABOUT SCHOOLS, INCLUDING AVAILABILITY, NUMBERS OF OTHER SERVICE CHILDREN IN ATTENDANCE AND WHAT THE SCHOOL DOES TO SUPPORT SERVICE CHILDREN SHOULD BE MADE AVAILABLE FOR SERVICE FAMILIES MOVING INTO THE AREA

4.4 Free School Meals

Free School Meals (FSMs) are offered to children of families who are in receipt of:

- Income Support.
- Income-based Jobseeker's Allowance.
- Income-related Employment and Support Allowance.
- Support under Part VI of the Immigration and Asylum Act 1999.
- The guaranteed element of Pension Credit.
- Child Tax Credit (provided families are not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190).
- Working Tax Credit run-on - paid for 4 weeks after families stop qualifying for Working Tax Credit.
- Universal Credit - if families apply on or after 1 April 2018 the household income must be less than £7,400 a year (after tax and not including any benefits).

Children from Service families are less likely to be eligible for FSM, which is to be expected since Service children have at least one working parent. However, Table 4 (below) shows that 10.4% and 14.9% (Shropshire and Telford & Wrekin Council respectively) of pupils in receipt of SPP, across the County, also receive FSMs. Given that parents, in the Armed Forces, are unlikely to work part-time or be in a low paid job, these results may appear unexpected.

Although, the school census is taken for all pupils on role on census day and should reflect circumstances on that day, it is possible that a pupil is still being defined as a Service child even if the parent has exited the Forces – SPP can be claimed for up to 6 years. Alternatively, there may

be situations of family breakdown, where the couple have separated, and household income is low for the parent who does not serve in the Armed Forces.

Table 9: Service Children in Receipt of Free School Meals Across the County of Shropshire As at January 2020

Year	Shropshire Council			Telford & Wrekin Council		
	Total No. of Children in Receipt of SPP	No. of Those Children Having FSM	% ¹	Total No. of Children in Receipt of SPP	No. of Children Having FMS	% ¹
2019/20	934	97	10.4	565	84	14.9
2018/19	905	91	10.1	534	73	13.7
2017/18	920	75	8.2	507	62	12.2

Based on the PPG data on the School Spring Censuses

1. Rounded to 1 decimal place.

4.5 The Service Children’s Progression Alliance

The Service Children’s Progression (SCiP) Alliance is a partnership of organisations focused on improving outcomes for children from military families. It is hosted by the University of Winchester and supported by the MOD. The SCiP Alliance has established a UK-wide network including six research-practice Hubs launched in 2019. The West Midlands Hub was launched in November 2019 and both local authorities were in attendance.

The SCiP Alliance is working to

- Establish and sustain an alliance of stakeholder organisations across the UK to support the progression of Service children into thriving adult lives and careers;
- Develop an effective research and practice hub network that enables the continuous improvement of practitioners’ work with and for Service children’s education and progression in local contexts; and
- Lead a research and knowledge exchange unit to drive improvements in understanding, evidence and impact focused on Service children’s outcomes.

4.6 Children and Young People Conclusions

The needs of Service children and young people are similar to the needs of those in the rest of the general population. However, Service life does present some unique and additional challenges in relation to social integration, support and consistency of educational provision which can impact on emotional wellbeing and educational attainment. Children of veterans and those of Serving personnel aged under 4 and over 16 years are an invisible cohort and further research is required to understand their needs. This research should include establishing greater understanding of the impact on the children of veterans following transition and post resettlement. More needs to be done to ensure that Service children’s Special Educational Needs (SEN) are fully recognised and receive a consistent package of support from the educational system.

Service children need professionals who understand the challenges they face and can offer the correct support to manage their experiences and to build the necessary resistance and confidence. One example of where this works particularly well is the Children & Young Persons Board chaired by the Community Development Officer at RAF Shawbury. The Board meets regularly and is attended by headteachers of local schools, local childcare providers, representatives from Shropshire Council and senior members of the Armed Forces at the RAF Base. The Board is able to share good practice and ensure that early years and primary and secondary school providers are able to ensure consistency of support throughout the children's education within Shropshire.

RECOMMENDATION 16

A REVIEW SHOULD BE UNDERTAKEN TO ASCERTAIN THE REQUIREMENT FOR FURTHER CHILDREN AND YOUNG PERSONS BOARDS ACROSS THE COUNTY OF SHROPSHIRE

HOUSING

5.1 Context

Subsidised accommodation is considered a key part of the 'offer' given to Regular Service personnel. This is because of the requirement for personnel to be mobile, lack of choice over location and the remote nature of many of the bases in which they serve. There are two main types of Service provided accommodation:

- Service Family Accommodation (SFA).
- Single Living Accommodation (SLA).

Entitlement is dependent on individual circumstances and is largely dependent on rank; marital/civil partner status and number of children. To be entitled to SFA, Service personnel must be aged 18 and over; be married or in a civil partnership or have permanent custody of children with at least 6 months to serve. SLA is most often provided at the Service personnel's duty station while SFA may be located within a certain radius of a base. Substitute accommodation may also be provided where appropriate.

The Annual Population Survey: UK Armed Forces Veterans Residing in Great Britain 2017 reported that there was no difference between the percentage of veterans and non-veterans who have brought their own home and the percentages who rent, even when comparisons were made by age and region. The majority of veterans, residing in Great Britain, were estimated to either have owned their own property or had a mortgage (76%). This was consistent with the non-veteran population (78%).

5.2 Service Accommodation

The UK Armed Forces Continuous Attitudes Survey 2019 (AFCAS19)⁴¹ provides the following information about Armed Forces accommodation:

- 78% of regular Service personnel live in Service accommodation during the week. The figure varies between the Services with the highest proportion in the Army.
- 39% live in SLA. Again, there is considerable difference between the Services. 56% of those in the Royal Marines live in SLA compared to 35% in the RAF and 45% in the Army. Other ranks are more likely than Officers to live in SLA.
- 32% live in SFA with the highest proportions being in the Army (41%) and RAF (33%).
- The most common reason why personnel do not own their own home continues to be that they cannot afford to buy a suitable home at the moment, at 64%.
- The most common reason why personnel purchased their own home continues to be the stability for themselves and their family, at 75%.

41

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/811689/Armed Forces Continuous Attitude Survey 2019 Main Report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/811689/Armed_Forces_Continuous_Attitude_Survey_2019_Main_Report.pdf)

A FOI Request to the MOD, dated June 2020,⁴² identified that there is a total of **161** SFA units in the SY postcode area and a total **374** in the TF area. These figures are broken down as follows:

Table 10: Number of Service Family Accommodation Units Within the County of Shropshire

	SY Postcode	TF Postcode
Type 1 (251 m ²)	1	0
Type 2 (210 m ²)	3	4
Type 3 (155.5 m ²)	17	11
Type 4 (137 m ²)	14	30
Type 5 (137 m ²)	22	19
Type 5S	20	0
Type C (94 m ²)	58	238
Type D (119.5 m ²)	26	34
Type DS	0	2
Type B (85.5 m ²)	0	36
TOTAL	161	374

Further information relating to each Type including entitlement by Rank etc. can be found in JSP 464 Tri-Service Accommodation Regulations Volume 1: Service Family Accommodation (SFA) and Substitute Service Family Accommodation – UK and Overseas Part 2 Guidance⁴³.

Substitute Service Family Accommodation (SSFA): Where SFA is not available, privately rented accommodation (known as Substitute SSFA) is provided, allocated and managed by the MOD Accommodation Agency contractor. The standard of SSFA accommodation remains the same as those to which Service personnel are currently entitled within the regulations. A FOI²⁰ identified that there is no SSFA within the County.

The MOD is currently piloting a new way of providing living accommodation to eligible Service personnel, entitled the **Future Accommodation Model (FAM)**⁴⁴ with the aim of improving the accommodation offer to make it fairer and more flexible whilst keeping it affordable for the MOD. The current accommodation system was developed many years and the following needs to change have been identified:

- The current accommodation model does not support how some personnel want to live, meaning that some have no choice but to opt out of subsidised accommodation.
- The current system is based in part on Rank, rather than need e.g. the size of a Service person’s family.

⁴² FOI 2020/06124 dated 22nd June 2020.

⁴³

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877031/20200401 - JSP 464 Volume 1 Part 2 - Version 12 1 .pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877031/20200401_-_JSP_464_Volume_1_Part_2_-_Version_12_1_.pdf)

⁴⁴ <https://www.gov.uk/government/publications/future-accommodation-model-what-you-need-to-know/what-you-need-to-know-about-fam>

- The current accommodation system has large overheads and is in increasing need for repairs. It is also inefficient, as large numbers of houses are kept empty to allow personnel to move around.

The FAM pilot, currently being run at HMNB Clyde, Aldershot Garrison and RAF Wittering, will:

- Provide more choice to more personnel over where, how, and with whom they live.
- Provide Armed Forces personnel with an accommodation subsidy based on need, rather than rank or relationship status.
- Enable Armed Forces personnel to remain mobile, while also providing support and greater stability.

A decision will be taken in 2022 on whether to extend FAM across the rest of the UK.

5.3 Social Housing

The Housing Act 1996 (Additional Preference for Armed Forces) (England) Regulations 2012 requires that Councils:

- Must give additional preference to certain members of the Armed Forces community who come within the reasonable preference category, and who have urgent housing needs.
- Must disregard the local connection rule when considering applications from Serving members, or veterans who have been out of the Armed Forces for 5 years or less, bereaved spouses and existing or former Reservists suffering from injury, illness or disability attributable to their Service.

It should be noted that these requirements do not cover divorced or separated Armed Forces spouses.

On the 27th June 2020, the UK Government announced new measures to ensure access to social housing was improved for members of the Armed Forces, veterans and families. The Government set out how councils should ensure members of the Armed Forces and veterans who need support with their mental health, because of conditions such as Post Traumatic Stress Disorder (PTSD), are given priority. The new measures also mean that former spouses or civil partners of Serving personnel will be given extra support when apply for social housing. They will be exempt from rules requiring them to be a local resident before being given social housing in the area to ensure that they are not disadvantaged when applying. Guidance was also issued to councils to encourage staff-training so that they understood the circumstances of the Armed Forces community and consider their housing needs appropriately.

RECOMMENDATION 17

CURRENT STAFF TRAINING, FOR HOUSING STAFF, SHOULD BE REVIEWED TO ENSURE THAT IT IS BEING EFFECTIVELY APPLIED IN RELATION TO OUR ARMED FORCES COMMUNITY

Both Shropshire Council and Telford & Wrekin Council have processes in place for identifying members of the Armed Forces community within the application process. At Shropshire Council, up to 5% of social housing properties are targeted towards the Armed Forces community subject to meeting the following criteria:

- Members of the Armed Forces who are within five years of discharge.
- Members of the Armed Forces community who have a local connection to Shropshire.
- Veterans who have served a minimum of four years with the British Armed Forces.
- Those who are going to be discharged within six months or have already been discharged.

If applicants meet the criteria shown above, they are awarded a ‘gold band’ indicating a higher level of housing need. This ensures that current Serving and ex-Serving members of the Armed Forces are supported in applying for a house. Table 6 shows annual registrations of applicants who meet the criteria above which is set out in Section 2.10 of Shropshire’s Allocation Policy. Table 7 shows the trend in members of the Armed Forces registering for access to social housing.

Table 11: Annual Snapshot of All Registrations⁴⁵

	1st April 2015	1st April 2016	1st April 2017	1st April 2018	1st April 2019
Applicants meet the criteria set out in Section 2.10	14	3	0	1	1

Table 12: Housing Waiting List Registrations – Members of the Armed Forces Community

	Currently living in MOD Accommodation	Current member of the Armed Forces	Applicant is a partner of member of the Armed Forces	Applicant previously served in the Armed Forces in the last 5 years	Discharged from the Armed Forces
01/04/2015	26	26	11	14	27
01/04/2016	16	12	3	10	2
01/04/2017	18	12	10	10	13
01/04/2018	15	9	3	12	11
01/04/2019	13	15	10	14	1
Average	18	15	7	12	11

Currently, the Telford & Wrekin Council Housing Allocation Scheme – which is under review – allocates all applicants who are leaving the Armed Forces to Band A. Band A is the highest band and is for Emergency and High Priority cases.

⁴⁵ HomePoint Housing Registrations Data, Shropshire Council

5.4 Home Ownership

The Forces Help to Buy Scheme, which launched in April 2014, helps Service personnel to get on or stay on the property ladder by borrowing up to 50% of their annual salary (up to a maximum of £25,000) to purchase their first property. As of the 30th September 2019, the Scheme had helped around 19,400 Service personnel at a total cost of £293 million (an average of £15,000)⁴⁶. In October 2019, the Secretary of State for Defence announced that the Scheme would be extended until the end of December 2022.

5.5 Homelessness

The Homelessness Reduction Act 2017 placed new duties on local housing authorities to take reasonable steps to try to prevent and relieve a person's homelessness. Local authorities must now work with applicants to develop personalised housing plans, the aim of which is to try to ensure that the applicant has somewhere suitable to live for at least the next six months. This considers their background including Service in the Armed Forces and any support needs that may have arisen from this. In 2018/19, 1,780²³ households, within the UK, were assessed as having support needs resulting from having served in the Armed Forces.

Both Shropshire Council and Telford & Wrekin Council work alongside organisations who work in the housing sector to help alleviate homelessness. Specifically, both Strategic AFC Boards have representatives from local homelessness charities which means that help, for our Armed Forces community can be obtained as and when required. Within Shropshire Council, the AFC Operations Group assists individuals from the Armed Forces community, who are in crisis including housing matters.

5.6 Housing – Conclusions

Although, the majority of veterans own their own home, or have the means to rent privately, there is a small but significant minority of veterans who struggle to find appropriate and affordable accommodation post Service. More work needs to be done to understand veterans housing demand and homelessness across the County.

Moving forward, the FAM will provide a wider range of housing opportunities for Service personnel and their families and encourage a shift to be more in line with the general population in terms of finding housing. However, it is not possible at this time to predict the impact on housing demand in Shropshire.

⁴⁶ Armed Forces Covenant Annual Report 2019

RECOMMENDATION 18

**FURTHER WORK IS REQUIRED WITH LOCAL HOUSING PROVIDERS TO IDENTIFY
VETERAN SPECIFIC HOUSING AND TO ENCOURAGE CURRENT HOUSING PROVIDERS
TO SIGN UP TO THE COVENANT**

RECOMMENDATION 19

**VETERAN SPECIFIC HOUSING PROVIDERS SHOULD BE ENCOURAGED TO SIGN UP TO
THE VETERANS GATEWAY**

EMPLOYMENT

6.1 Context

In 2017, the APS¹⁰ reported that working age veterans were as likely to be employed as non-veterans (78% and 79% respectively). According to the APS, just 4% of working age veterans were unemployed and seeking work, whilst 19% were inactive by choice; academic study, travel and/or retirement cited as the most common reasons. However, it is imperative to look beyond the figures and to examine whether or not, the employment is meaningful and in 2014, research undertaken by St George's House in partnership with the FiMT concluded that more work was needed to support employers to see the benefits of employing veterans⁴⁷.

Following on from this, further research was funded by FiMT which highlighted civilian perceptions of ex-Service personnel and their experiences of entering the civilian job market. According to a 2019 survey, while 71% of surveyed UK organisations are likely to consider hiring ex-Service personnel, 18% said they were unlikely. This is linked to employers' views that ex-Service personnel do not have the relevant skills or experience (44%), that they may not fit the culture of the workplace (19%), that their skills from active duty may not translate into a business environment (18%) or that they may have different levels of education to those expected of civilian workers (11%).

While the UK public have a broadly positive view of both ex-Service personnel and the Armed Forces, there remains a perception among 64% of the public that ex-Service personnel suffer more from mental, physical or emotional issues than the average person⁴⁸.

6.2 Spousal and Civil Partner Employment

In 2019, 50% of respondents to the UK Regular Armed Forces Continuous Attitude Survey⁴⁹ stated that their spouse's career was an influential factor when considering their intention to stay or leave the Armed Forces. As an aside, 49% of respondents stated that their spouse/partner was in full-time employment compared to 45% in the previous year.

Despite their significance, spouses and civil partners remain under represented in the workplace with employment rates, in 2018, mirroring those of spouses in the general population in the 1970's⁵⁰ Key barriers to employment include:

- Caring responsibilities.
- Frequent moves.

⁴⁷ FiMT (2014) Back to Civvy Street: How can we better support individuals to lead successful civilian lives after a career in the UK Armed Forces Report.

⁴⁸ Based on a survey commissioned by FiMT and undertaken by YouGov in 2018 with 2,849 interviews collected from the UK public using a self-complete, online methodology.

⁴⁹

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/811689/Armed_Forces_Continuous_Attitude_Survey_2019_Main_Report.pdf

⁵⁰ Employers Network for equality and inclusion (2018) Employing Military Spouses: A Guide for Employers.

- Employer bias – the reluctance of organisations to hire spouses because of their limited period of time in the community.

Both Shropshire Council and Telford & Wrekin Councils have adopted flexible working policies and are supportive of requests that relate directly to the deployment of a spouse or civil partner serving in either the Regular or Reserve Forces. To date, neither Council have identified the numbers of these spouses or civil partners although, two years ago, Telford & Wrekin Council did form a working party of members of the Armed Forces community, within their workforce, to assist in delivery of the activities around Armed Forces Day.

RECOMMENDATION 20

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD CONSIDER FORMING A PLATFORM, AT BOTH LOCAL AUTHORITIES, TO ALLOW SPOUSES AND CIVIL PARTNERS OF SERVING PERSONNEL AND VETERANS TO SHARE THEIR EXPERIENCES AND TO HIGHLIGHT ADDITIONAL AREAS WHERE THE COUNCILS COULD IMPROVE THEIR OFFER TO THIS COMMUNITY

Recent Tri-Service research conducted by Warwick Institute for Employment Research resulted in a key recommendation: the need to create a central portal for employment and training opportunities for military spouses and family members. This resulted in the Forces Families Jobs⁵¹ website being set up. The website showcases a range of training and career development opportunities and all employers who advertise on the site must sign up to the AFC and explain their individual commitment to being Forces family friendly.

Eligibility to use the website extends to:

- Spouses and partners of currently Serving and Reserve personnel and adult children aged 18-25.
- Spouses and partners of Service personnel who have left the Armed Forces within the last twelve months and adult children aged 18-25.
- Bereaved spouses and partners for up to years post Service and adult children aged 18-25.

RECOMMENDATION 21

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD CONSIDER SIGNING UP TO THE FORCES FAMILIES JOB WEBSITE.

⁵¹ <https://www.forcesfamiliesjobs.co.uk/>

6.3 Reservists

The Reserve Forces undergo rigorous training which develops key skills including teamwork, leadership and organisation. The MOD estimates that it would cost a civilian employer approx. £8,000 per staff member to undertake this additional training⁵². Being a member of the Reserve Forces also incurs additional benefits for the individual including a small financial reward, called an annual bounty, claimed upon completion of an average twenty-eight days Service.

Reservists complete their Service in their own time during evenings, weekends and by undertaking an annual camp. In recent years, the Government has sought to ensure that Reservists have employment rights which support them to manage the responsibilities of their civilian employment alongside their Reservist commitments. This includes ensuring that Reservists cannot be made redundant during their mobilisation and by offering the following to employers:

- Defence-funded employer contributions to an organisation's pension scheme, if withdrawn by the employer and the Reservist chooses to remain within this scheme.
- Additional salary costs for a temporary replacement or overtime costs if they exceed the Reservist's salary up to a maximum of £110 per day (£40K per year).
- Agency fees and non-recurring advertising costs incurred in replacing the Reservist.
- Up to £2,000 of costs of training the person who fills in for the Reservist during mobilisation.
- Seventy-five per cent or up to £300 of specialist clothing costs for a person replacing a deployed Reservist.
- Essential retraining costs for the Reservist returning to work following mobilisation.
- Also, small and medium-sized companies (and equivalent sized charities and partnerships) can claim up to £500 per month for each mobilised Reservist.

Within Shropshire, both Local Authorities have enhanced special leave policies to support Reservists in their commitment.

RECOMMENDATION 22

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD DEVELOP AN EMPLOYMENT STRATEGY THAT ENABLES RESERVISTS TO BE SEEN AS A BUSINESS ASSET

⁵² MOD (2017) Your Guide to Employing Reservists Booklet retrieved 15th September 2020 from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/574135/Guide_to_Employing_Reservists_20161130.pdf

6.4 Moving into Civilian Employment

The majority of Service leavers will spend more time in civilian employment than their military career and gaining employment has been described as one of the three pillars of successful transition between Service and civilian life⁵³.

The MOD has adopted a proactive approach to supporting employees moving into employment at the end of their Service. Since 1998, the MOD has commissioned Career Transition Partnership (CTP) services from Right Management. The CTP exists to provide employment resettlement services to those leaving the Royal Navy, Army, Royal Air Force and Marines regardless of the time served. The CTP service can be accessed two years before leaving the Armed Forces and for up to two years afterwards.

To date, CTP have assisted over 235,000 Service leavers to market themselves confidently and to get the most out of life outside the Armed Forces. CTP outcomes are published annually by the ONS. Of the Service personnel who left the UK Armed Forces in 2018/19 and used a billable CTP service, 86% were employed, 6% were unemployed and 8% were economically inactive (e.g. training, retirement etc), up to six months after leaving Service⁵⁴. The employment rate of 86% and the unemployment of 6% among 2018/19 Service leavers were higher than the UK population during the same period (76.3% and 4% respectively).

However, caution must be taken when making comparisons. The employment status of Service leavers was recorded six months after they left Service whilst the UK population includes those that sought employment for longer than six months. In addition, there were demographic differences between the 2018/19 Service leavers and the UK population, for example, 91% of Service leavers were male, compared with 49% of the UK population. Males are more likely to be employed than females and therefore, this disparity in gender may be driving the employment rate of Service leavers to be higher than that of the UK population.

There are numerous Charities, across the UK, who assist veterans in finding employment and the following are just a few (further information can be found from the Shropshire Council Armed Forces Employment support website page⁵⁵):

- The Poppy Factory is an employment Charity for veterans from all Services with health conditions or impairments. They use an evidence based model to improve outcomes and build successful, long-lasting relationships between disabled veterans and their employers.
- Royal British Legion Industries Lifeworks is a 4-5 day course tailored specifically towards helping ex-forces personnel to secure employment. It is open to anyone who has served

⁵³ FiMT (2014) Back to Civvy Street: How can we better support individuals to lead successful civilian lives after a career in the UK Armed Forces

⁵⁴

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/868768/20200226 - Statistical Bulletin v3 - O.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/868768/20200226_-_Statistical_Bulletin_v3_-_O.pdf)

⁵⁵ <https://shropshire.gov.uk/armed-forces-support/education-training-and-employment-advice/>

in the Armed Forces and is particularly aimed at those experiencing long term unemployment.

- Ex-Forces Net provides through-life support to those looking for advice about careers, housing, education, location and emigration, irrespective of how long they served or their date of discharge from the Armed Forces. In addition to the direct support offered to individuals, Ex-Forces Net have also launched the Forces4Change (F4C) Charter aimed at Small to Medium Enterprises and Public Sector organisations who recognise the value of employing ex-Service personnel.
- REFA the Employment Charity provides vocational advice and information about job opportunities to all veterans irrespective of when they left the Armed Forces and any barriers to employment they face including disability, health issues or long-term unemployment.

Job Box is a Telford & Wrekin Council initiative which supports residents who are seeking employment including advice on updating CV's and preparing for interviews. This initiative is not specifically aimed at veterans, and their families, but is open to all residents.

RECOMMENDATION 23

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD BE PROACTIVE IN ADVERTISING THE RANGE OF LOCAL EMPLOYMENT SUPPORT AND OPPORTUNITIES AVAILABLE TO MEMBERS OF THE ARMED FORCES COMMUNITY

RECOMMENDATION 24

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD CONSIDER HOW THEY ENCOURAGE VETERAN OWNED BUSINESSES, WITHIN THEIR SUPPLY CHAIN, AS PART OF THEIR WIDER WORK TO PROMOTE DIVERSITY WITHIN THE PROCUREMENT PROCESS

6.5 Supporting Transition to Civilian Life Through Employment

The UK Government is currently consulting on a policy objective to reduce the cost of employing veterans from April 2021 with a 12-month National Insurance Contributions (NICs) relief. This will provide an added incentive for employers to hire more veterans and to benefit from the exceptional, and often unique, experiences and skills that a veteran can bring to the workforce. The consultation document⁵⁶ states that the Government intends to make this relief available to as many veterans as possible and is therefore considering the definition set out in the AFC. The

⁵⁶

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/902293/Supporting_veterans_transition_to_civilian_life_through_employment.pdf

Covenant defines a veteran as ‘anyone who has served at least one day in Her Majesty’s Armed Forces’.

The closing date for comments on the consultation is the 5th October 2020.

6.6 Out of Work Benefits

The benefits system, overseen by the Department of Work and Pensions (DWP), is in place to help those who would otherwise struggle financially. Locally, the Armed Forces Covenant Teams, at both Councils, have an excellent working relationship with the DWP and the Partnership Manager (Shropshire), DWP, who provides regular updates and was a member of the JAFNA Task & Finish Group. Each local DWP centre also has an Armed Forces Champion who can support coaches working with members of the Armed Forces community.

It has proved difficult (despite Business as Usual Requests) to obtain unemployment/benefits data relating to actual numbers of veterans, spouses and Reservists across the County of Shropshire. Moving forward, it is imperative that these figures are obtained and regularly analysed to identify and address local issues that are unique to this community.

RECOMMENDATION 25

FIGURES, RELATING TO OUT OF WORK BENEFITS, SHOULD BE REGULARLY ANALYSED TO ADDRESS ANY ISSUES THAT ARE UNIQUE TO OUR LOCAL ARMED FORCES COMMUNITY

6.7 Defence Employer Recognition Scheme

The Defence Employer Recognition Scheme (DERS) encourages employers to support Defence and inspire others to do the same. The Scheme includes Bronze, Silver and Gold Awards for employer organisations that pledge, demonstrate or advocate support to the MOD and the Armed Forces community, and align their values with the AFC.

Bronze Award. Employers must pledge to support the Armed Forces and have signed the AFC. The employer must be open to employing members of the Armed Forces community.

Silver Award. Employers must proactively demonstrate a positive approach to employing members of the Armed Forces community: including having in place supportive policies towards Reservists regarding mobilisation and offering additional paid leave (minimum of 5 days) to support them to undertake annual training camps.

Gold Award. Employers must be an exemplar within their market sector, advocating support to Defence People issues to partner organisations, suppliers and customers with tangible positive results.

Both Shropshire Council and Telford & Wrekin Council are fully engaged in the DERS and achieved the Gold Award in 2017 and 2020 respectively. They work in partnership with the West Midlands

Reserve Forces & Cadets Association (WMRFCA) to promote the Scheme and to engage with employers to develop their involvement with the Covenant and the DERS. As at September 2020, a total of **91** businesses and organisations (etc.) within Shropshire had signed the Covenant. However, as of the same date, just **34** businesses and organisations had achieved the Bronze, Silver and Gold Award (24, 7 and 3 respectively). Although, not all Covenant signatories are eligible for the DERS Scheme (i.e. they are not employers), more work is required to encourage them to support Defence in this way.

RECOMMENDATION 26

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD CONTINUE TO WORK WITH THE WMRFCA TO PROMOTE THE DEFENCE EMPLOYER RECOGNITION SCHEME AND TO SUPPORT LOCAL BUSINESSES AND ORGANISATIONS WHO ARE ELIGIBLE TO JOIN

6.8 Employment – Conclusion

Ex-Service personnel have a range of skills and expertise that they can bring to the civilian workplace. The majority find alternative and meaningful employment upon leaving the Forces, however, a small number struggle to find work that appropriately matches their skills and attributes. There are specific groups which struggle more than others in terms of employment and it may be useful for both Strategic AFC Partnership Boards to ensure that the local employment offer reflects the enhanced need of these individuals and their families.

RECOMMENDATION 27

THE STRATEGIC AFC PARTNERSHIP BOARDS SHOULD ENSURE THAT THE LOCAL EMPLOYMENT OFFER REFLECTS THE NEEDS OF THE LOCAL ARMED FORCES COMMUNITY

CRIMINAL JUSTICE SYSTEM

7.1 Context

A large scale study, published in the Lancet in March 2013⁵⁷, looked at almost 14,000 Serving and ex-Service UK Armed Forces personnel, most of whom had been deployed to Iraq and Afghanistan. They found that younger members of the Armed Forces, returning from duty, were more likely to commit violent offences than the rest of the population: **20%** of younger males (under 30 years) compared with **6.7%** of civilians. The rate of offending overall amongst Armed Forces personnel was lower than in the population as a whole, but more of the offences were violent offences. The study found that Service in the Armed Forces was not associated with an increased risk of committing violent offences once potential confounders (e.g. age, education and pre-Service violent offending) were taken into account, but serving in combat was.

Men who had been exposed to more traumatic events during deployment or misused alcohol after deployment were at an increased risk, as were men with aggressive behaviour and those with posttraumatic stress disorder. Offences were most common in the post-deployment period (12.2%), than in the pre-deployment Service period (8.6%) and the pre-Service period (5.4%). The most common types of offences were violent offences - 64% of the offenders had committed a violent offence. Serving in a combat role was associated with an increased risk of offending (6.3%) compared to being deployed in a non-combat role (2.4%), even after taking into account the confounding factors of education, age, etc.

7.2 Veterans in the Criminal Justice System

In 2014, HM Inspectorate of Prisons identified that ex-Service personnel are more likely to be in prison for the first time, for more serious offences; the average veteran sentence being four years longer compared with the general prison population⁵⁸. Identified features of veterans in the criminal justice system included:

- Difficulty in mentally and emotionally adjusting into civilian life and coping with social isolation after Service.
- Substance misuse.
- Mental Health issues including PTSD.
- Alcohol abuse associated with aggressive behaviour among combat veterans.
- Lack of employment opportunities.
- High rates of homelessness.
- Family breakdown.

The Leaving Forces Life Report⁵⁹ concluded that many veterans who are involved with the criminal justice system are drawn from a demographic that is similar to the mainstream offender population, particularly from the poorest communities in the country, where educational

⁵⁷ [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(13\)60354-2/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)60354-2/abstract)

⁵⁸ People in Prison: Ex-Service Personnel (2014) – A Findings Paper by HM Inspectorate of Prisons

⁵⁹ Leaving Forces Life: The Issue of Transition (2011).

standards are low. It is worth noting that the proportion of veterans who offend is very small when compared to the number discharged from the Forces and that there appears to be a significant time lag in most cases between discharge and offence resulting in imprisonment⁶⁰.

7.3 Local Arrest Data

Data provided by YSS Remember Veterans Project, based on data provided by West Mercia Police indicated that between May 2019 and April 2020 (a twelve month period), there had been **285** arrests in which veterans had been identified within the County of Shropshire – of which **153** were in Telford.

RECOMMENDATION 28

UP-TO-DATE AND RELEVANT LOCAL SERVICE INFORMATION, FOR THE ARMED FORCES COMMUNITY, SHOULD BE PROVIDED TO CUSTODY STAFF (INCLUDING LIAISON & DIVERSION STAFF)

⁶⁰ Howard League (2011) Report of the Inquiry into Former Armed Service Personnel in Prison <https://howardleague.org/publications/leaving-forces-life/#:~:text=The%20briefing%20paper%20of%20the%20Howard%20League%E2%80%99s%20Inquiry,and%20a%20small%20proportion%20will%20find%20transition%20problematic.>

Table 13: Analysis of Veteran Arrest Data August 2019 – April 2020 By Offence Category

Shropshire and Telford Joint Armed Forces Needs Assessment.	
Information summary provided by YSS Remember Veterans project based on data provided by West Mercia Police.	
Shropshire and Telford Summary of Police arrests Aug 19 to April 20	
Types of offending	
Offences against the person and Police Act offences: includes Common Assault, ABH, GBH, Assault police, Obstruct police, Impersonate police, Assault emergency worker	113
Driving: includes Driving with excess alcohol or drugs, Failing to provide a specimen, Disqualified driving, Dangerous driving	78
Public Order Offences and Protection from Harassment: includes Drunk and Disorderly conduct, Breach of the Peace, Causing fear or distress, Harassment, Affray, Threats to Kill, Witness intimidation	56
Sexual Offending: includes Possess indecent images of child, Sexual assault, Indecent exposure, Rape of child, Rape of an adult, Breach of sexual Offences Prevention Order	26
Criminal Damage: includes Criminal damage, Arson	26
Bail Act Offences/Recall to Prison: includes Warrant for fail to appear, Breach of Bail, Revocation of licence, Breach of Civil Order	26
Theft Act Offences: includes Theft, Burglary, Robbery, Theft from shops, Theft motor vehicle, Going equipped	25
Drugs offences: includes Possess Class A, Possess Class B, Importation, Possess with intent to supply	13
Serious Crime Act / Prevention of Crime/Firearms offences: includes Coercive and Controlling Behaviour, Possession bladed article, Possessing offensive weapon, Possessing firearms	12
Domestic Violence and Victims Act: includes Breach of non-molestation order or Restraining order	9
Anti Social Behaviour: Anti Social behaviour, includes breach of Anti-Social Behaviour Order, Breach of Criminal Behaviour order	8
Children and Young persons: includes Child neglect, child cruelty	5
Fraud Act: includes Fraud, money laundering	4

Analysis of the arrest data highlights that violence against the person is by the far the highest re-occurring offence. This is mirrored in other counties with the key presenting issues being alcohol problems, other mental health issues and domestic abuse⁶¹

7.4 Criminal Justice System – Conclusion

The driving forces for crime among ex-Service personnel are similar to those of the general population, such as low educational attainment, economic disadvantage, substance misuse and homelessness. Such factors tend to be concentrated in more deprived communities across the UK

⁶¹ The Armed Forces Community Within The Solent – A Needs Assessment dated 2016.

and are as likely to be found among ex-Service personnel in custody as they among the civilian population in custody. These factors rather than military service are more likely to be the driving factor behind criminal activity. However, it should be noted that anecdotal evidence suggests that situations may escalate quicker (to the point of crisis) with some veterans due to a reluctance to ask for help at an earlier stage.

TRANSITION

8.1 Context

The Transition Mapping Study (TMS)⁶² was one of the first major reviews to identify five major reoccurring themes during the resettlement process from the Armed Forces to civilian life:

- The resettlement experience is highly varied.
- The differences between military and civilian life are underestimated.
- Families are important to good resettlement and should be better supported.
- Financial awareness and competence are important to a good resettlement.
- The provision of support is improving but in a somewhat piecemeal fashion.

In 2017, FiMT revisited this Study and noted that whilst there had been some improvements to provision, more work was needed to address family breakdown, mental health, alcohol misuse and unemployment. The FiMT projected the cost of poor transition to civilian life as £105m in 2017 rising to £110m in 2020.⁶³

8.2 Strategy for Our Veterans

In November 2018, the Strategy for our Veterans was jointly published by the UK, Scottish and Welsh Governments. The Strategy set out an enduring vision and principles for support to veterans across the UK with outcomes being set for 2028 for five cross-cutting factors and six key themes that give tangible aspirations against which success can be measured.

8.3 Defence Transition Services

The Defence Transition Services (DTS) was formed in 2020 with the purpose of providing information and support for those Service leavers, and their families, who are most likely to face challenges as they leave the Armed Forces and adjust to civilian life. DTS is a one-to-one service, providing tailored information and guidance and facilitating access to support services, including from OGDs, local authorities, the NHS or trusted charities. Their services can be accessed for up to two years following departure from the Armed Forces.

DTS can help with issues and provide support and guidance on various aspects affected by leaving Service life, including health, accommodation, finance and debt, children, family and relationships and employment. They can be accessed via self-referral or through an external organisation, such as a charity or the Career Transition Partnership. Service leavers can also access DTS via their unit. A family member of a Service leaver may access DTS in their own right via self-referral.

⁶² FiMT (2013) Transition Mapping Study.

⁶³ FiMT (2017) Continue to Work. The Transition Mapping Study.

RECOMMENDATION 29

SHROPSHIRE COUNCIL AND TELFORD & WREKIN COUNCIL SHOULD PROVIDE SPECIFIC INFORMATION FOR SERVING PERSONNEL, AND THEIR FAMILIES, IN RESETTLEMENT, ABOUT LOCAL POST-SERVICE SUPPORT THAT IS AVAILABLE

NEXT STEPS

9.1 Steps to Further Strengthen the Statutory Basis of the Covenant

At present, the MOD is gathering the feedback and input of local authorities as it prepares to introduce legislation to further strengthen the statutory basis of the AFC. While the policy detail is still being worked on and the scope of the legislation may yet change, the current proposal is for the legislation to place a statutory duty on public service providers to take Due Regard of the Armed Forces community when writing policy and decisions made in implementing that policy in specific aspects of Healthcare, Education and Housing. The full policy proposal, which provides more details, is attached at Annex D.

The current timeline is to have the legislation ready by the end of the 2020 with implementation planned for late 2021/early 2022.

9.2 Monitoring and Implementation of Recommendations

This Report has identified a number of key recommendations to support our local Armed Forces community and to ensure that they have everything that they need to thrive in society. It is essential that these recommendations are prioritised and that the necessary actions are put in place to ensure effective implementation. It is therefore recommended that, moving forward, the JAFNA Task & Finish Group (including further ad-hoc expertise) takes on this task and also, the implementation of the current AFC Action Plans. The Task & Finish Group should report directly to the Strategic AFC Partnership Boards and consideration should be given to joint working across the two Councils wherever possible.

RECOMMENDATION 30

THE JAFNA TASK & FINISH GROUP SHOULD MONITOR THE IMPLEMENTATION OF THE RECOMMENDATIONS IN THIS REPORT AND THE CURRENT AFC ACTION PLANS

9.3 Contacts and Further Research

For further research or to make contact with organisations referred to in this Report, please Annex E for contact information. This list is not exhaustive and further details can be found through the Armed Forces Covenant Pages at Shropshire Council and Telford & Wrekin Council:

- <https://www.shropshire.gov.uk/armed-forces-support/armed-forces-covenant/>
- <https://www.telford.gov.uk/info/20653/support-for-armed-forces-veterans-and-their-families>

ACKNOWLEDGEMENTS

This Assessment would not have been possible without the support of a great number of organisations and individuals. The SAFCPBs, at Shropshire Council and Telford & Wrekin Council would like to thank the following individuals and the pivotal roles they played in supporting us to understand our Armed Forces communities across the County of Shropshire.

TASK & FINISH GROUP

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David Fairclough, Team Leader – West Midlands, The Royal British Legion.
Caro Hart, Chief Executive Officer, Citizens Advice Telford & Wrekin.
Michele Hatfield, YSS Associate, Remember Veterans Project, YSS.
Helen Harvey, Demography Population Specialist, Shropshire Council.
Annabel Ingram, Regional Manager Scotland, Wales & Northern Ireland, Army Families Federation.
Hannah Jones, SO3 Engagement, HQ 11 Signal & West Midlands, Ministry of Defence.
Sarah Kerr, Armed Forces Outreach Support Co-ordinator, Shropshire Council.
Lucy Simpson, Welfare Reform & Support and Face to Face Manager, Shropshire Council.
Carol Sneddon, Admissions & Place Planning Manager, Shropshire Council.
Cllr Chris Turley, Chair of T&WC Strategic AFC Partnership Board, Telford & Wrekin Council.
Nick Woolley, Partnership Manager (Shropshire), Department of Work & Pensions.

Contributors

Fran Beighton, Project Officer, Housing Options, Shropshire Council.
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Toni Guest, Housing Service Delivery Manager, Telford & Wrekin Council.
Mark Jones, Digital Content & Client Relations Officer, ICT Services, Shropshire Council.
Cllr Kelly Middleton, Telford & Wrekin Council.
Sam Morley, Communications Officer, Telford & Wrekin Council.
Adam Spreckley, Senior Communications Officer, Shropshire Council.
Mark Trenfield, Public Health Intelligence Analyst, Shropshire Council.
Rachel Walklet, Head of Strategic & Commercial Development, Midlands Partnership NHS Foundation Trust.

Particular thanks are also given to:

Fiona Botterill, Partnership Manager, Telford & Wrekin Council.
Sean McCarthy, Armed Forces Covenant Lead, Shropshire Council.

GLOSSARY

ACF	Army Cadet Force
AFC	Armed Forces Covenant
AFCAS	Armed Forces Continuous Attitude Survey
AFCS	Armed Forces Compensation Scheme
AMS	Army Medical Services
CCG	Clinical Commissioning Group
CTP	Career Transition Partnership
CTS	Complex Treatment Service
DCS	NHS Disablement Service Centres
DERS	Defence Employer Recognition Scheme
DMS	Defence Medical Services
DTS	Defence Transition Services
DWP	Department for Work and Pensions
FAM	Future Accommodation Model
FiMT	Forces in Mind Trust
FSM	Free School Meals
IPC4V	Integrated Personal Commissioning for Veterans
JAFNA	Joint Armed Forces Needs Assessment
LGA	Local Government Association
MOD	Ministry of Defence
NICs	National Insurance Contributions
OGD	Other Government Department
ONS	Office for National Statistics
PTSD	Post-Traumatic Stress Disorder
RBL	Royal British Legion
SAFCPB	Strategic Armed Forces Covenant Partnership Boards
SCiP Alliance	Service Children's Progression Alliance
SFA	Service Family Accommodation
SLA	Single Living Accommodation
SPP	Service Pupil Premium
SSFA	Substitute Service Family Accommodation
TILS	NHS Veterans' Mental Health Transition, Intervention and Liaison Service
TMS	Transition Mapping Study
VCHA	Veterans Covenant Healthcare Alliance
VFR Hub	Veterans & Families Research Hub
VPP	Veterans' Prosthetic Panel
VTN	Veterans' Trauma Network
WMRFCA	West Midlands Reserve Forces & Cadet Association

Membership of The Strategic AFC Partnership Boards

Shropshire Council

Representatives from:

Shropshire Council
HQ 11Signal & West Midlands Brigade
YSS
Combat Stress
Community Catalysts
Healthwatch Shropshire
RAF Association
Royal Navy Association
RAF Shawbury
Shropshire Armed Forces Veterans Breakfast Clubs
The Royal British Legion
Help for Heroes
Walking With The Wounded
Adcote School
Robert Jones & Agnes Hunt NHS Foundation Trust
Lanyon & Bowdler Solicitors
SSAFA
8 Rifles (The Rifles' Reserve Infantry Battalion
Army Medical Services (AMS) 202 (Midlands) Field Hospital
Samaritans
British Red Cross
SaTH
Age UK Shropshire, Telford & Wrekin

Regional Employer & Engagement Director, West Midlands RFCA
Blind Veterans

Telford & Wrekin Council

Representatives from:

Telford & Wrekin Council
Wrekin Housing Trust
NHS
Midlands Partnership Foundation Trust - NHS
Citizens Advice Telford & Wrekin
Lanyon & Bowdler Solicitors
Walking With The Wounded
CCG - NHS
Ministry of Defence
Pertemps
Help for Heroes
YSS Remember Veterans Project
The Royal British Legion
The British Red Cross
Shropshire and Telford Health Trust
Telford Mind
Age UK Shropshire, Telford & Wrekin
Telford Carers
Energize Shropshire, Telford & Wrekin
Ball Sports Coaching
Landau
Samaritans
Church of the Latter Day Saints
Pete White Consulting
Smallwoods Association
Shropshire & Telford Armed Forces Veterans Breakfast Clubs
Regional Employer & Engagement Director, WM RFCA
SSAFA
Combat Stress

Shropshire Chamber of Commerce

Blind Veterans

Joint Armed Forces Needs Assessment Task & Finish Group

Terms of Reference

Shropshire Council and Telford & Wrekin

1. Purpose

The Armed Forces Covenant (AFC) is a promise from the nation that those who serve or have served in the Armed Forces and their families will not be disadvantaged by their service and that they will be treated fairly. Shropshire Council and Telford & Wrekin Council (T&WC) are signatories to the Covenant and both local authorities (LA's) have established Strategic AFC Partnership Boards (SAFCPBs). These Boards provide strategic governance for local delivery of the Covenant within the respective areas.

The SAFCPBs have identified the requirement to undertake a Joint Armed Forces Needs Assessment (JAFNA), within their Action Plans, to fully understand the Armed Forces community across the Shropshire/Telford & Wrekin area. This Task & Finish Group has been established to undertake the JAFNA which will be the first such assessment within the County. In doing so, the JAFNA will define a new baseline of County wide understanding, establish the value of further thematic reviews and identify how ongoing assessment of the Armed Forces community can be sustainably incorporated into business as usual across the two Local Authorities.

2. Scope

The scope of the JAFNA will cover the Armed Forces community across Shropshire and Telford & Wrekin. The Assessment will consider local implications of national research and evidence in relation to key Covenant commitments and areas of need identified. The experience of the Armed Forces community will be considered in relation:

- Health & Wellbeing; Education and Children's care; Housing; Employment and Training; Community; the Criminal Justice System and Transition & Specialist Support.

These are areas prioritised within the UK Armed Forces Families Strategy 2016-20 as necessary for ensuring the Armed Forces Community have everything they need to thrive within society.

3. Methodology

The methodology for the JAFNA will include the collection, collation and analyses of:

- National and local data, where available, from the ONS, MOD, DWP and other sources.
- National and local research, where available, from the Royal British Legion and other Armed Forces Charities, Local Authorities and other sources.
- Stakeholder workshops and interviews.
- Discussions with members of the Armed Forces Community.
- Case studies.

4. Membership

The Task & Finish Group will be Chaired by Mr Keith Steele – Offender Management Co-ordinator, West Mercia Police (if available) – and secretariat support will be provided by the AFC Project Support Officer for Shropshire Council and T&WC. The Group will consist of members of the SAFCPBs and additional members may be co-opted for certain topics, if required. A membership list will be maintained by the AFC Project Support Officer and published online.

5. Meetings.

The Task & Finish Group will meet as required for the duration of the JAFNA. The meeting will only be quorate if there is an attendance of five, or more, of the membership and must include representation from both LA's. Action notes will be taken to progress the work of the Group and will be distributed within 15 working days and submitted for approval to the next meeting.

6. Reporting Timeframe

The first draft of the AFNA Report to be completed by the end of July 2020 and the final version by end August 2020.

Joint Armed Forces Needs Assessment Survey Summary Results 2020



- Survey designed to inform a needs assessment to support the partnership work taking place across Shropshire, Telford & Wrekin under the local Armed Forces Covenant.
- Survey work carried out between 22 June and 5 August 2020.
- **429** survey responses.



- 65% of the survey respondents are currently in the armed forces or have previous armed forces experience. 30% of responses were from people connected to the armed forces through their relationships or relatives.
- Of those with direct armed forces experience, 49% of the survey respondents are veterans, and 14% are currently serving.
- The results show that locally, most people have connections to the army or RAF. 51% of survey respondents links are to the British Army, 33% to the Royal Air Force and 10% to the Royal Navy.
- The average length of service within the armed forces for local people is 17 years.
- A closer look at family connection to the armed forces highlighted that 49% of the survey respondents had a connection to the armed forces through a parent/parents and 49% did not (2% did not provide a response).



- 57% of the survey respondents were men and 41% female. Survey responses were submitted by people of all ages.
- 20% of the survey respondents have any long-standing illness or disability that limits their daily activity.
- 10% of the survey respondents are carers and care for an adult or child with a long-term illness or disability.
- 49% of the survey respondents had a connection to the armed forces through a parent/parents.
- Of the 429 survey respondents 36% (155) have dependent children (up to 18 years old).
- 63% of survey respondents are employed full-time or part time as civilians and 15% are employed within the armed forces. 2% are unemployed.
- 43 of the 429 survey respondents had housing concerns. 70% own their own homes, 11% live in MOD property, 8% are private renters, 5% live in social housing/council housing and 3% live with family.



- 48% of survey respondents had informed their GP of their connection to the armed forces.
- Few reported use of services in the local area. Mental health services are the main type of service accessed (43 of the survey respondents have used mental health services). Only very small numbers use other types of service provision (13 for housing, 10 for job centre support and 10 for social care (children).
- Views are very mixed concerning how easy local services are to access.
- There are perhaps more concerns around access to housing and mental health services than there are for any other type of service (but with small numbers accessing services the results are inconclusive and further research may be needed).
- There is a strong preference within the survey sample for accessing information and support using online communication. 81% highlighted a preference for online communication. 7% prefer face to face communication.



- For the questions 'Overall, how satisfied are you with your life nowadays?', 'Overall, to what extent do you feel that the things you do in your life are worthwhile?' and 'Overall, how happy did you feel yesterday?' approximately 80 of the 429 survey respondents scored 0 or 1 (where 0 was 'not at all'). An average of 90 people scored all three questions at 2 or below.
- Feelings of anxiousness are also a concern for a proportion of people. 11 people feel completely anxious. 46 people scored their level of anxiousness at 8 or above (where 10 was completely anxious).
- 16% of people responding to the survey feel always or often lonely or isolated. 23% sometimes feel lonely or isolated.
- There are some support needs highlighted through the survey. 89 people have experienced an impact on mental health (mental health is highlighted as a strong theme), 45 believe there has been an impact on job opportunities, 44 have experienced debt, 43 have experienced an impact on housing, 40 have experienced some form of physical disability and 33 have experienced relationship breakdown. An estimated 9% of the survey sample experience other support needs (excluding mental health which is a greater concern).
- Overall the survey results highlight a lack of clarity concerning where support services. Those who have sought help have done so from a wide range of different services, with most relying on friends and family when feeling at the point of crisis.



- The results show that 86 people have mental health needs directly relating to their services within the armed forces. This forms 20% of the total number of survey respondents.
 - 35% of the survey sample have experienced being at the point of crisis.
 - The comments provided within the survey highlight some very common themes. Within mental health PTSD and anxiety are strong themes.
- Example comments**
- *Depressed and anxious constantly waiting for the next thing to go wrong.*
 - *Still have flashbacks/dreams of incidents whilst serving.*
 - *Diagnosed with severe combat PTSD.*
 - *Suffer from anxiety which has been linked to being on operations.*
 - *Panic attacks. Anxiety, low self-esteem. Due to traffic accident, poor man management/bullying and other reasons.*
 - *I don't suffer with mental health now as I have left the Military, but whilst I was in my mental health deteriorated because I was treated poorly, not supported or listened too and I had to fight to leave early. As soon as I left my life has become a lot better!*



- 22% of survey respondents have physical health needs as a result of their armed forces service (96 people).
 - Physical health concerns comments highlight some common problems including hearing loss/hearing concerns, knee and back problems.
 - The results suggest there may be some challenges with armed forces sharing information with GPs. 114 of the survey respondents had concerns that not all relevant information had been passed on to their GP.
- Example comments**
- *Two replacement knee joints. Peripheral neuropathy, back and spine pain.*
 - *I have a hearing loss from my time in the RAF.*
 - *Deafness. Worn out lower limb joints*
 - *Damaged back, loss of hearing.*



- Just under half of the survey respondents feel they have skills that are not being used effectively.
- 30% of survey respondents currently volunteer, 36% have previously volunteered and 23% have never volunteered.
- The responses suggest there may be opportunities to look more closely at how the incredible skills of Shropshire's armed forces community could be used in a way that may generate mutual gain for individuals and the communities they live in.

Enshrining the Armed Forces Covenant in Law: What Does This Look Like?

Background

- The Armed Forces Covenant (AFC) is a voluntary obligation involving the whole society in support of the armed forces.
- The AF Covenant is already referenced in legislation, as an amendment in 2011 to the Armed Forces Act 2006 which requires the Secretary of State for Defence (SSD) to prepare an annual AFC Report and lay this before Parliament
- The Report must cover the effects of membership, or former membership, of the AF on Service People (SP), or descriptions of such people in the fields of
 - healthcare;
 - education;
 - housing
 - operation of inquests;
 - such other fields as SSD may determine.
- In preparing the Report, SSD must have regard to three factors:
 - the unique obligations of, and sacrifices made by, the armed forces;
 - the principle that it is desirable to remove disadvantages arising for SP from membership, or former membership, of the AF; and
 - the principle that special provisions for SP may be justified by the effect on such people of membership, or former membership, of the armed forces.
- The Duty to prepare a Report will remain a legal obligation.
- HMG has committed to enshrining the AFC further in legislation in the Queen’s Speech, as well as in the 2019 Conservative party manifesto.


















In addition to above the proposal is that:


















1. A public authority must, when exercising its public functions, have due regard to:
 - a) the unique obligations of, and sacrifices made by, the armed forces; and
 - b) the principle that it is desirable to remove disadvantages arising for SP from membership, or former membership, of the AF.
2. Due regard means that in making decisions and in day to day activities a body subject to the duty must consciously consider the obligations and principle set out in a) and b) above.
3. Disadvantage is defined in terms of the access of the Armed Forces community to public services in comparison with persons in the local, civilian population.
4. The duty will apply to local and regional public bodies and those working at a national level - such as NHS England – which have policy and delivery responsibilities at the local and regional level.



5. The duty will apply to private sector bodies, when they are exercising relevant public functions.
6. “A public authority” refers to those organisations (public and private sector) which exercise relevant public functions in the AFC fields (at 7a-c below).
7. The duty to have due regard only applies to the exercise of certain functions in the following fields:
 - a. healthcare;
 - b. education (compulsory education); and
 - c. housing (Allocation of Social Housing and Homelessness);
8. SSD may issue guidance about the exercise of the duty, and where this is done that guidance must be taken into account by the public authority.
9. “Service People” may include active Serving personnel, veterans, and their families. Definitions of service personnel, family members and veterans may need to be flexible across the different areas of delivery.
10. The duty could be enforced through a number of mechanisms. In all cases, we would expect that the existing complaints process for the relevant public body should be exhausted initially. Thereafter, in cases where the complaint falls within the jurisdiction of the relevant Ombudsman, referral to that mechanism may be appropriate (e.g. the public body has failed to follow its own procedure). Where the complaint is that the public body has acted unlawfully, by failing to comply with the duty, either in the formulation of policy or delivery of a service, judicial review is likely to be the appropriate enforcement mechanism, where the issue is not resolved through the internal complaints process.

Contact Details for Service Charities & Relevant Organisations

TITLE	CONTACT DETAILS
ABF The Soldiers' Charity	 0207 901 8900  supporter@soldierscharity.org
Armed Forces & Veterans Breakfast Clubs	 07867 301603 To find a local Breakfast Club: https://afvbc.com/armed forces veterans breakfast clubs directory
Army Families Federation	 01264 382324  us@aff.org.uk
Age UK Shropshire, Telford & Wrekin	 01952 201803 or 01743 233123  enquiries@ageukstw.org.uk
Blesma	 0208 590 1124  info@blesma.org
Blind Veterans	 0207 7232051 or 0300 111 2233  support.services@blindveterans.org.uk
British Red Cross	 0344 871 1111  contactus@redcross.org.uk
Children's Education Advisory Service	 01980 618244  DCYP-CEAS-Enquiries@mod.gov.uk
Citizens Advice Shropshire	 Adviceline Shropshire 03444 99 11 00

Citizens Advice Telford & Wrekin	 0300 330 1165  case@telfordcab.co.uk
Combat Stress	 03444 991100
Community Catalysts	 info@communitycatalysts.co.uk
Defence Medical Welfare Services	 01264 774000  info@dmws.org.uk
Defence Transition Services	 DBSVets-DTS-Central@mod.gov.uk
Help for Heroes	 01980 844388  getsupport@helpforheroes.org.uk
Minds at War	 0800 0209 716
Navy Families Federation	 02392 654374  contactus@nff.org.uk
RAF Families Federation	 01780 781650
RAF Association	 0800 018 2361 (Wrekin & Wellington RAFA 07886 785522) (Shrewsbury http://www.rafshrewsbury.org.uk)  privacy@rafa.org.uk
Royal Marines Association	 0800 468 1664  shropshirerma@gmail.com

Royal Navy Association	 023 9272 3747 (Newport 01952 416832) (Shrewsbury 07985 486078) (Market Drayton 01630 655313) (Oswestry 07913 867510)  admin@royalnavalassoc.com
Samaritans	 116 123  jo@samaritans.org
Shropshire Council – Armed Forces Covenant Team	 01743 255933  SAFCC@shropshire.gov.uk
Shropshire Mind	 01743 368647  manager.shropshiremind@gmail.com
SSAFA	 0207 463 9200 or 0800 731 4880 (Shropshire Branch 01743 344220)
Telford Mind	 07434 869248  talk2@telford-mind.co.uk
Telford & Wrekin Council – Armed Forces Covenant	 01952 382186  armedforcescovenant@telford.gov.uk
The Royal British Legion	 0808 802 8080 To find a local branch near you: https://www.britishlegion.org.uk/get-support/local-community-connections/the-legion-near-you
Veterans Gateway	 0808 802 1212 Text: 81212
Veterans UK	 0808 1914 218  veterans-uk@mod.gov.uk

Walking With The Wounded	 01263 863900
YSS	 01905 730780