

North Ayrshire Integration Joint Board 21 March 2019

Subject: VETERANS FIRST POINT SERVICE

Purpose: To provide North Ayrshire Integration Joint Board with information

about the Veterans First Point Ayrshire & Arran (V1P A&A) service, which has been delivering welfare and specialist mental health services to veterans and their family members since March

2017.

Recommendation:

It is recommended that the Integration Joint Board (IJB):

Acknowledges the very positive work of V1P A&A in operationalizing the Armed Forces Covenant (as referred to in paragraph 2.1.1 of this report) across North, East and South Ayrshire, ensuring better access to NHS services, including pathways for ensuring priority treatment for those veterans who should receive early treatment for health problems that have resulted from military service.

Acknowledges the steps that are being taken as outlined in paragraphs 3.4.1 - 3.4.3 of this report to determine the future model and financial framework for the service.

Notes the content of the Scottish Veterans Commissioner's report; Veterans' Health & Wellbeing (SVC Veterans' Health & Wellbeing).

Glossary of Terms	
V1P	Veterans First Point
NHS AA	NHS Ayrshire and Arran
HSCP	Health and Social Care Partnership

EXECUTIVE SUMMARY The purpose of this report is to provide Ayrshire & Arran Integration Joint Board with information about the Veterans First Point Ayrshire & Arran (V1P) service, which has been delivering welfare and specialist mental health services to veterans and their family members since March 2017.

1.2 **Key Messages**:

- The paper outlines existing veteran services within Ayrshire see 3.18.
 However, V1P A&A service acts as a single point of entry for veterans to access other services both in the third sector and statutory services.
 Veterans are able to access the one stop shop, where their needs are reviewed and the specific services required are identified and accessed with the support of the veteran peer support worker/ Clinical staff. This service-model is unique within Ayrshire.
- This service is successfully providing a service to a large proportion of clients who are male and come from SIMD 1 and SIMD 2 areas, factors which have historically been shown to have a negative impact on client engagement with services.
- Each Health and Social Care Partnership and Boards are expected to play a key role in delivering the commitments set out in the Community Covenant.
- Elected members are Armed Services and veterans Champions are be delivering on Government Commitment to Veterans through their support of this service.

2. BACKGROUND

2.1 Developing V1P Services in Scotland

- 2.1.1 The Armed Forces Covenant is about fair treatment and sets out the relationship between the nation, the government and the Armed Forces. It recognises that the whole nation has a moral obligation to members of the Armed Forces and their families and it establishes how they should expect to be treated. The Covenant's two principles are that:
 - the Armed Forces community should not be disadvantaged compared to other citizens in the provision of public and commercial services in the area where they live:
 - special consideration is appropriate in some cases, especially for those who have given most such as the injured and the bereaved.

All local authorities have pledged to uphold the Armed Forces Covenant.

- 2.1.2 The initial V1P Centre was set up in 2009 by NHS Lothian. The model aims to provide:
 - Information and Signposting
 - Understanding and Listening
 - Support and Social Networking
 - Health and Wellbeing including a comprehensive mental health service delivered by a multi –professional team on site.
- 2.1.3 Funding was secured from the Mental Health and Protection of Rights Division of the Scottish Government (£200,000) and NHS Lothian Strategic Programme Budget for Mental Health and Wellbeing (£60,000). The success of V1P Lothian was recognised by the UK Military and Civilian Health Partnership Awards as a double award winner in 2011 and single award winner in 2013. A strength and key component of the V1P model has been the employment of veterans as peer workers. V1P psychological therapists deliver a range of quality evidence based care, treatment and support to veterans and their families. This includes the delivery of evidence based therapies.

2.2 The UK Government Funding (LIBOR Fund)

2.2.1 Building on the success of V1P Lothian, a comprehensive proposal was submitted to the LIBOR fund in October 2012. The stated objective was to "work in partnership to deliver high quality evidence based care, treatment and support for veterans and their families across Scotland". The proposal set out how a hub and spoke model – supported by a small development team, would establish a further three centres in Tayside, Highland and Grampian. The proposal was successful and £2,560,586 was awarded to NHS Lothian to develop and deliver this model.

2.3 What has been achieved?

2.3.1 The V1P Scotland development surpassed the original intent to develop an additional three centres. Instead, due to the commitment to partnership working and relationship building, a total of eight centres were established (including V1P A&A) with the support of the V1P Scotland team (see Figure 1). Six of the eight centres were sustained beyond the initial LIBOR fund period (March 2017). Highland and Grampian services were disbanded in 2017 when 100% external funding was discontinued.

Veterans First Point Centres across Scotland

Veterans First Point Centres across Scotland

Sheland

Granças

Taysice

Fetti Valey

Vale

Figure 1:V1P Centres across Scotland

3. A BRIEF OVERVIEW OF V1P SCOTLAND CENTRES AND NETWORK

3.1 An Overview Of V1P Ayrshire & Arran

- 3.1.1 The remaining six V1P Centres reflect the local needs, priorities, service landscape and partnerships and are therefore quite different in their staff composition, premises and partnership arrangements. However, the three core principles of the V1P model are: Creditability, Accessibility and Coordination.
- 3.1.2 In 2009 the NHS in Scotland were issued with guidance (CEL 3 2009 UK VETERANS) which detailed the rights of veterans and their families to have priority treatment.

- 3.1.3 Extensive consultation with local stakeholders confirmed the need for the development of health services for veterans, and emphasised the importance of joint working and co-ordination with other services (statutory and voluntary). The Stakeholders supported a model combining integration into generic care for most Veterans and specialist intervention for those unable or unwilling to engage.
- 3.1.4 In 2017, under the corporate leadership of the NHS Ayrshire & Arran Head of Adult Mental Health Thelma Bowers, the V1P Ayrshire & Arran service was created. NHS Ayrshire & Arran entered into a Memorandum of Understanding (MoU) with V1P Scotland and the local veterans' charity Poppy Scotland.
- 3.1.5 It was agreed for the V1P Ayrshire & Arran Service to sit within the existing Psychological Therapies Service. It was thought that the advantages of being a Psychology led service would support assertive communication between V1P Ayrshire & Arran and other psychiatric and psychological therapy services and enhance access to a range of psychotherapies or other main stream NHS services. Being a Psychology led service also ensures the required Clinical Governance necessary to run a safe and effective service.

The team is comprised of:-

Clinical Service Lead (Band 8B) – 0.9 whole time equivalent (WTE) Psychological Therapist (Band 7) – 1.0 WTE Veteran Peer Support Workers (Band 3) – 1x1.0 WTE + 2x0.5WTE Service Administrator (Band 3) - 0.6 WTE.

- 3.1.6 The location of the service was carefully chosen and is in a shop front in the centre of Irvine, to attract footfall and facilitate accessibility.
- 3.1.7 The service acts as a single point of entry for veterans to access the 'one stop shop', where their needs are reviewed and the specific services required for each veteran are identified and accessed, with the support of the veteran peer support worker. This may include welfare, mental health, physical health or a combination of a range of needs.

Initial mental health assessments are the responsibility of the Psychological Therapist (who is a qualified Cognitive Behavioural Therapist). They are also able to devote time to the delivery of evidence based psychological treatment.

The clinical service lead is a HCPC Registered Psychologist and is also able to offer a small clinical service to those who present with complex mental health needs as well as offering leadership support to the team. (See Appendix 1 for the veteran pathway).

3.1.8 Historically within Ayrshire & Arran, veterans were able to access assessment, treatment and support for mental health issues from a range of services including general adult psychiatry, psychology and substance misuse services. Veterans also accessed inpatient treatment from *Combat Stress* - a nationally funded Veterans' charity. Welfare support was available from a range of resources such as SAFFA, Armed Services Advice Project (ASAP), Veterans UK and the local Veterans charity based in South Ayrshire – the Veterans First Point – South Ayrshire (not to be confused with V1P A&A and is now disbanded).

Existing Services currently available for Veterans within Ayrshire

Mainstream NHS services

Many of the veterans who have self referred to V1P have already had contact with mainstream NHS services in Ayrshire but have not engaged. This seems to be due to:

- Accessibility of mainstream services
- Stigma often associated with mainstream services (such as mental health services)
- Waiting times (despite prioritisation given to Veterans)
- Credibility of the service veterans being solely treated by civilians with no knowledge, understanding or experience of combat/military life.

Often, the reluctance of veterans to access mainstream services leads to conditions going untreated. This in turn, can cause issues to become more chronic in nature, meaning that even if a veteran does present to mainstream services, it is often when in crisis or only after the condition has become more chronic in nature, taking longer and being more expensive to treat.

Third Sector Organisations/Charities

There are several third sector veteran support organisations operating within Ayrshire. Such organisations offer a range of specialities from providing emergency funding support for veteran families to support for veterans to access/apply for welfare. However, such organisations cannot cater for physical or mental health needs of the veterans, nor do they have strong links with the current mainstream NHS services.

These organisations are wholly dependent on charitable donations and have therefore no long term security. As charities, these organisations do not employ any healthcare professionals or indeed carry the same level of clinical governance and accountability as that within the NHS. For full list of third sector organisations see Appendix 2 attached.

Soldiers Off The Street

Soldiers off the Street are a veteran's charity who have recently opened 2 houses in Dundonald, North Ayrshire. They offer temporary accommodation to veterans who find themselves homeless for up to 12 weeks. Soldiers off the street work very closely with Veterans First Point and take their main referrals for V1P A&A.

SACRO

SACRO are another veteran's charity who are based in Glasgow, but who cover Ayrshire the area. They have support workers who offer general support to veterans within the criminal justice system. Again SACRO work in close partnership with V1P A&A. Referrals to V1P A&A are received from SACRO on behalf of their clients who require ongoing support, support for welfare issues or mental health assessment.

Combat Stress

This organisation currently offers intensive mental health treatment from professionally trained staff, on an inpatient basis. V1P A&A work in close partnership with Combat Stress and often work with veterans to prepare them for the inpatient programme and then provide follow up after they have undergone the 6 week programme. However, there are many veterans who are unable to commit to a 6 week stay due to work/family commitments and therefore require to be treated within V1P on an outpatient basis.

Poppy Scotland Welfare Centre – Kilmarnock

The Poppy Scotland Welfare centre opened in Kings street Kilmarnock last year. Poppy Scotland acts as a host to a variety of veteran charity organisations such as SSAFFA, VETS UK, ASAP.

This is an excellent provision for Veterans living within Ayrshire, although Poppy Scotland itself, does not provide veteran peer support, nor are they able to offer any clinical provision. Poppy Scotland have been very clear to state that their service has been developed to host and facilitate other Veteran services only. It is important to note that no other veteran organisation operating within Poppy Scotland welfare centre can offer the clinical expertise within the community along with the clinical governance which is offered from V1P as an NHS HSCP service. Due to this, V1P A&A receives regular referrals from Poppy Scotland on behalf of clients seeking mental health support.

<u>Defence Medical Welfare Service</u>

DMWS provide support for veterans across Ayrshire who are over the age of 65 and in hospital. Support workers within DMWS aim at providing practical support often required at point of discharge. Often this support can be welfare related such as helping with applications for practical aides. Again, referrals to V1P A&A are received from DMWS for clients seeking ongoing support, social opportunities with other veterans, welfare support or mental health support. For further information on DMWS, please see report submitted by DMWS.

3.2 V1P Ayrshire & Arran: Who Have We Supported So Far?

- 3.2.1 V1P Ayrshire & Arran became operational in March 2017. Since then we have supported over 480 veterans and their family members. 58%, the majority, have self-referred to V1P services. 70% of self-referring veterans are encouraged to do so by forces charities/regimental associations. 42% are aged 45 yrs to 59 yrs. 97% consider themselves White Scottish or White British. 90% are male and 91% have been in regular services. 80% were in the Army. 35% served for between six and 12 years, with 21% discharged on medical grounds. The most common deployments are Northern Ireland, Iraq and Afghanistan.
- 3.2.2 The social circumstances of veterans who access V1P Ayrshire & Arran indicate a large proportion live in areas which are defined as most deprived areas of multiple deprivation. Housing and homelessness is a significant issue with 41% having experienced homelessness and 27% considering their current living situation unstable.
- 3.2.3 In terms of relationships, 42% are married, in civil partnerships or co-habiting; the remaining 58% are single, divorced, separated or widowed. 79% have children. 44% live alone.
- 3.2.4 In terms of educational attainment and employability, 68% of veterans are educated to high school standard (10% did not complete school). Only 3% have attained degree level qualification (bachelor, masters or doctorate). 37% are in employment (full time and part time); while 34% are currently unemployed.
- 3.2.5 In terms of mental health and wellbeing, 91% of the veterans who access V1P Ayrshire & Arran report some degree of problem with anxiety or depression. 50% report severe or extreme problems, including those who report symptoms of post-traumatic stress disorder.

3.2.6 Physical health issues are also significant. Chronic pain is a reported difficulty for 44% of veterans accessing V1P Avrshire & Arran. 79% report pain interfered with carrying out daily activities to some degree, with 33% of reporting pain extremely interfered with daily routines. 3.3 How Do We Know We Are Making A Difference? - V1P Scotland Evaluation 3.3.1 Queen Margaret University were commissioned to conduct the evaluation of Veterans First Point Scotland. The V1P Centres began accepting referrals at different times and all have contributed to the evaluation. In reviewing activity to date, each Centre is building up substantial numbers of veterans who they are activity working with and the number of veteran contacts is steadily increasing as the Centres become established. The total number within the data set is N=692. 3.3.2 Three clinical measures used in the evaluation have all demonstrated improvements In relation to depression, distress and functional impairment improvements are clinically significant and reliable. The V1P Scotland service is therefore a credible provider of psychological therapies to veterans. While these improvements are clear, it should be noted that Veterans presentations are complex. Initial assessment scores often meet the severe criteria for clinical assessments at engagement with services. However, the improvements veterans experience, while significant and reliable, continue to meet the criteria for moderate distress or depression. Veterans are therefore likely to need ongoing support and monitoring. Additionally, it is important to acknowledge that greater improvements are seen over time, increasing with duration of engagement with therapy. Mainstream services, in order to meet pressure of demand, often prescribe a time limited period of psychotherapy. Veterans seem to be one population group who appear to benefit from intervention of a longer duration. 3.4 **Next Steps** 3.4.1 Since V1P Ayrshire & Arran was developed in 2017, it has demonstrated the North Ayrshire IJB's commitment to the Armed Forces Covenant, ensuring that veterans and particularly those with the most enduring health and welfare difficulties are able to access priority care and treatment from mainstream and specialist services. Although a small service, V1P Ayrshire & Arran has delivered care and treatment to 3.4.2 over 480 veterans and their family members living across Ayrshire and is the busiest of all the V1P centres across Scotland. The service has been independently evaluated and demonstrates clinically significant outcomes. The credibility. accessibility and coordination of care has resulted in high levels of service user satisfaction through a cost effective service structure. 3.4.3 Following the recent independent evaluation by Queen Margaret University, the V1P network of Centres are now focussed on a range of initiatives over the next 12 months to ensure V1P services are accessible across all tiers of service delivery, while maintaining a focus on those affected by the most severe, enduring and life changing difficulties. We aim to undertake Ayrshire wide service development in partnership with stakeholders across health, social care and third sector stakeholders.

4.	ADDRESSING INEQUALITIES		
4.1	VIP Ayrshire & Arran is reaching those it needs to, demonstrated by high self-referral rates and the demographics of those using the service in the short time it has been open. This service is successfully providing a service to a large proportion of clients who are male and come from SIMD 1 and SIMD 2 areas, factors which have historically been shown to have a negative impact on client engagement with services.		
4.2	There are increasing numbers of younger veterans who have completed two tours are coming forward. Armed Service changes will see an influx of new veterans to Scotland. (current number of Veterans living in Ayrshire make up 10% of the general population)		
5.	Measuring Impact		
	This is an internal paper and does not require to be impact assessed.		
6.	IMPLICATIONS		
	Policy Implications		
6.1	The Scottish Government restated their commitment to recognising and valuing the Armed Forces community as a true asset and in 2016 renewed their commitments to support them and pledge to make Scotland the most attractive destination for the Armed Forces, Service leavers and their families.		
6.2	This report highlights that Scotland has demonstrated great strengths in mental and physical healthcare provision, and states that this will continue to be a fundamental priority to support particularly in terms of improving awareness of long-term clinical needs and transfer of data.		
6.3	The published Force in Mind report - <u>Call to Mind: Scotland / Findings from the review of veterans' and their families' mental and related health needs in Scotland.</u> (2016) states that Scotland has one of the most robust mental health and related health provision for veterans in the UK, with a thriving specialist statutory and voluntary sector that has been supported and resourced by the Scottish Government.		
6.4	Scotland's Veterans Commissioner recently published report— <u>Veterans' Health and Wellbeing: A Distinctive Scottish Approach, (April 2018)</u> set out his ambition for veteran services in Scotland – "To see mainstream and specialist provision for veterans protected and enhanced, especially for those with the most severe and life-changing conditions; and to ensure veterans' healthcare is a properly planned and embedded feature of the new health and social care landscape in Scotland" (page 4).		
6.5	In relation to V1P services, he added - "Veterans in Scotland have been able to access a number of key specialist services including Veterans First Point teams. I have seen for myself during visits to these establishments, and heard first-hand just how vital and valued they are" (page 13). In terms of sustainability he suggests - "The recent experience of sustaining V1P has demonstrated that funding from time-limited, non-core sources can lead to uncertainty and insecurity, which will undoubtedly worry those who rely on such support" (page 15).		

Financial :	The financial implications are outlined in the paper.		
Human Resources :	Currently there is 1 members of the V1P team that is seconded from another service. (0.6 WTE Administrator)		
	The other members of the V1P team (0.9 Clinical Lead, 1.0 Psychological Therapist, 1.0 Peer Support Worker and 2x 0.5 Peer Support Workers) are all on fixed term contracts until 31st of March 2020.		
Legal :	No Legal issues		
Equality:	This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues		
Environmental &	N/A		
Sustainability:			
Key Priorities :	V1P is set out as a key item within the Local Delivery plan.		
Risk Implications :	An assessment has not been undertaken at this stage as there are no imminent risks to the delivery of the service		
Community Benefits :	N/A		

Direction Required to	Direction to :-	
Council, Health Board or 1. No Direction Required		Х
Both	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

7.	CONSULTATION
7.1	Paper was prepared in consultation with Head of Adult Mental Health, Thelma Bowers.

For more information please contact Lindsay Kirkwood, Clinical Lead V1P on 01294 310 400 or Lindsay.kirkwood2@aapct.scot.nhs.uk

Appendix 1



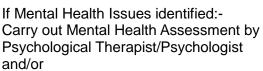
Veteran presents to service Referrals accepted from any agency including self referrals via drop in, email, telephone or written



Seen by Peer Support Worker (PSW) for Registration Assessed for

- Housing
- Debt
- Social isolation
- Mental health
- Physical Health
- Addictions
- Offending
- Any other issues





Refer to Main stream CMHT or PCMHT/Provide Inhouse Psychological Therapy



If other issues identified:PSW will support Veteran to access
partner agencies including North South
and East Ayrshire council, SSAFA, NHS
Addictions services, SACRO, VETS UK,
Veteran residences, Poppy Scotland, GP
services, Soldiers off the Street.
May also see PSW for ongoing general
Peer Support if required.
Invited to attend weekly drop in to
socialise with other veterans.

Appendix 2

Below is a list of veteran organisations within the West of Scotland. It is of note that there are only 7 organisations with offices within Ayrshire (highlighted in grey below)

Organisation	Type of Support	Mental Health Support	Nearest Offices
Houses for heroes	Housing	X	Glasgow
Scottish veterans	Housing	X	Glasgow
residences			
Haig housing trust	Housing	X	Surrey
Royal Air Force	Housing	X	Edinburgh
Association			
Housing Options Scotland	Housing	X	Edinburgh
Military Matters			
Blind Veterans Uk	Welfare, Funding	X	London
Thistle Foundation	Support	X	Renfrew
Scottish War Blinded	Welfare, Funding	X	Livingston
Defence Medical Welfare	Support over 65	X	Ayrshire
Services			
Veterans Scotland	Funding	X	Edinburgh
Blesma	Prosthetics	X	Essex
Canine Partners	Assistance dogs	X	Stirling
SAMH	General support for	✓	South Ayrshire &
	Mental health		Irvine (V1P)
Combat Stress	Inpatient Mental	✓	Hollybush &
	Health		Kilmarnock
Erskine	Medical care	✓	Erskine
Lady Haig's Poppy	employment	X	Edinburgh
Factory			
Poppy Scotland	SignPosting	X	Kilmarnock
Remploy	Employment	X	Glasgow
ASAP	Welfare	X	Kilmarnovck &
			Irvine (V1P)
SSAFA	Funding	X	Kilmarnock &
			Irvine (V1P)
Civvy Street	Employment	X	Online
Royal Naval Benevolent	Funding	X	Portsmouth
Trust			
Sea Farers	Funding	X	Linlithgow
ABF – The Soldiers	Funding	X	Edinburgh
charity			
RAF Benevolent Fund	Funding	X	London
Royal Air Force	Funding & support	X	Edinburgh
Association			
Officers Association	Funding &	X	London
	Employment		
National War Pensions	Pensions	X	England

Regular Forces	Employment	X	Kilmarnock &
Employment Association			Irvine (V1P)
Skillforce	Employment	X	England
Royal Caledonian	Veterans Child	X	London
Education Trust	Support		
Royal Navy & Royal	Welfare, Funding	X	England
Marines Charity			
Royal Naval Association	Welfare, Funding	X	England
Glasgow's Helping Heroes	welfare	X	Glasgow
Royal British Legion	Funding general	X	Irvine
	support		
Veterans UK	Military & War	X	Glasgow
	Pensions		