



Department  
of Health &  
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To: Chairs of Health and Wellbeing Boards

Sent via email

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Dear Chairs,

**DATA AVAILABLE FOR SERVICE PLANNING FOR VETERANS AND  
THE DELIVERY OF THE ARMED FORCES COVENANT**

We are proud of the courage and dedication of our armed forces and for the vast majority their experience of serving is positive and their life chances are enhanced. The Armed Forces Covenant reminds us it is our duty to ensure they continue to receive the very best possible support and care as veterans. Carrying this out effectively requires a solid foundation of data to inform strategic policy direction and needs assessment at both national and local levels.

Following the introduction of the Armed Forces Covenant, there has been a real national commitment to helping the armed forces community across the public, charitable and private sectors. This was endorsed during the Ministerial Covenant and Veterans Board in April 2018, and it was agreed government will commit to a joint approach to improving the data that its departments hold on UK Armed Forces veterans, to ensure we can offer the services they deserve.

The first step of this was for the Ministry of Defence to publish the veteran data from the 2011 England and Wales Census at local authority and clinical commissioning group (CCG) levels for the working age UK Armed Forces veteran population. The data was published at the beginning of October 2018, in time for planning for 2019/20 and can be found on gov.uk, searching for: *Census 2011: Working age UK armed forces veterans residing in England and Wales: index.*

Joint Strategic Needs Assessments (JSNAs) are essential for evaluating the needs of the local population when planning and commissioning health, well-being and social care services. The inclusion of addressing the health and social care needs of veterans within JSNAs was a commitment made in the Armed Forces Covenant and Health and Social Care Act 2012, so we are keen to ensure this is carried out to its full effect.

The level of data currently used is not sufficient to fully inform decisions and the “*Call to Mind report: A UK Wide review: Common issues in meeting the mental and related health needs of veterans and their families*”, carried out by Forces in Mind Trust, found that there were significant gaps in the coverage of veterans’ health needs in JSNAs.

We do not believe this is an isolated issue. Problems around the identification of veterans and the armed forces community can further impact on the ability to provide the required health and social care. Our joint effort is required to improve this, which is why we are working with the Royal College of GPs (RCGP) to improve clinical awareness in primary care through the veteran friendly GP practice accreditation scheme, and in hospitals via NHS Improvement’s Veterans Covenant Hospital Alliance, to accredit ‘veteran aware’ hospitals. We have also improved GP registration forms to capture more information to make it easier to identify veterans, reservists and armed forces families, and launched a range of online training modules on armed forces health, which can be found on *e-learning for Healthcare*.

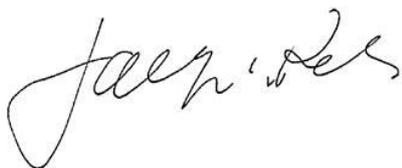
It is also important how the data is used. There is a diverse population spread of veterans, so an aggregated collection of data will not work as effectively as when broken down to address the local issues. A number of services provided to

veterans are tailored to address their specific needs, and we believe a tailored approach is the most suitable in many cases.

It seems appropriate that plans should be reviewed in response to this improved level of data from the Census. We are therefore asking that Health and Wellbeing Boards play their part by working with local government to use the available data to maximum effect, and that this is cascaded to the relevant bodies. We ask that there is a refreshment of joint strategic needs assessment criteria, reflecting the recently updated alcohol, drugs and tobacco Commissioning Support Pack, to include this additional data; all of which should contribute to ensuring there is no disadvantage to veterans.

We understand and support the importance of local decision making and so think it should be up to each Board how this is put into practice, however, do believe input from service charities and CCGs will be vital. Best practice and learning should be shared across a wide range of stakeholders and as illustrated by the *“Our Covenant, Our Community”*; a joint report between Forces in Mind Trusts and the Local Government Association.

We look forward to seeing how your plans will ensure that this improved dataset is incorporated into JSNAs ready for 2019/20.



**JACKIE DOYLE-PRICE**



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