

# Personalised Care for the Armed Forces Community

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NHS England and NHS Improvement





## SW Personalised Care AfC Collaborative

- What is Personalised Care???
- Started in January 2020
- Brought together partners from across Health, Social Care and the VCSE
- Share good practice, collaborate, campaign for change
- Codesign and engagement
- Setting Priorities social prescribing
- Created a partnership with Durham Dales/Northumbria University and developed a joint proposal for moving the work forward

#### Where are we now?



2 year national demonstrator funded by the NHSE Armed Forces Health Team and the Armed Forces Covenant Fund Trust – 3 demonstrator areas (Cornwall, Dorset & Durham Dales) – demonstrator has 3 priorities

- Develop a training and education programme for ALL Social Prescribing Link Workers – Health Education England module and a Train the Trainer programme. Full time Education Coordinator in post
- 3 dedicated AFC Link Workers recruited
- Development of a bespoke AFC App for SPLW's
- Links to the RCGP accreditation scheme and increasing numbers of Veteran Friendly GP Practices

#### In addition to this

- Cornwall Council have funded a second AFC SPLW to ensure full coverage across the geographical county
- The South West Personalised Care Team have funded an additional 2 AFC SPLW's in Plymouth and Gloucestershire – giving 4 out of the 7 regional systems dedicated support
- Nearly 500 members of the AFC have received support from the AFC SPLW's since the projects initiation in Oct/Nov with some incredible outcomes – initial outcome data also gathered showing positive outcomes
- At least 27 additional RCGP Veteran Friendly accredited practices/PCN's
- ு | Ongoing conversations at a national level to ensure spread and scale



#### Why we need this? - Film

# <u>Personalised Care For Veterans - YouTube</u>

NHS England and NHS Improvement







'Danny' Daniell
Managing Director

## Social Prescribing The Armed Forces Community perspective



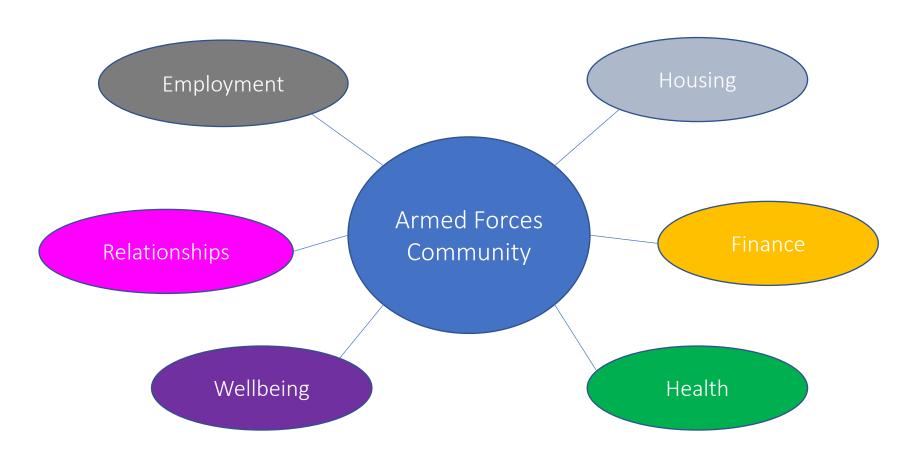
#### **Active Plus**

- Community Interest Company that was that was founded in 2011
- Provides wounded, injured, sick and retired military veterans the opportunity to "help themselves by helping others"
- Veterans utilise their skills and experiences to challenge, inspire and motivate vulnerable and potential vulnerable people in the community
- The veterans help people to unlock their potential and in doing so regain their own confidence, sense of purpose and self belief





### What are the challenges facing the Armed Forces Community





#### AFC SP - The need

Through experience, anecdotal evidence and a Cornwall led veterans Joint Strategic Needs Assessment it was found that the AFC:

- Often do not engage well with organisations that are not service/veteran specific
- Often do not access or engage with personnel who they feel do not understand what they have seen, done, and are currently going through
- Become frustrated by having to retell their story to multiple agencies, being passed from organisation to organisation, not being quite the 'right fit' for specific organisations

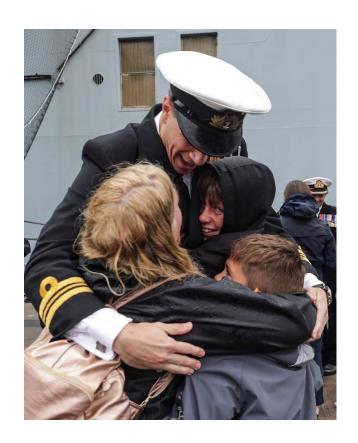


VETERANS INSPIRING PEOPLE

#### AFC SP - The need

It has also been identified that there is:

- A lack of knowledge within the veteran, service and wider community of the plethora of support available and a reluctance to engage
- Are many organisations providing similar support, but the needed support is quite often to niche groups
- A lack of knowledge of the available specialist support available to the AFC within the more general support agencies





#### **AFC Social Prescribing**

Identified nationally as one of the key support offers, the understanding and support being provided through Social Prescribing continues to grow

Patient focused, It is helping people to find solutions and support in the community, based on what matters to them, giving them far greater choice and control

To be fully effective SPLWs need to be able to understand their patients needs and backgrounds, and the specialist support available

By providing training, a single point of contact and a greater understanding of the AFC community challenges we will be able to:

- Increase the number of patients identifying as being part of the AFC
- Ensure that support provided is personalised and specific to the AFC needs
- Increase the collaboration between the support organisations
- Address the AFC related challenges in an understanding way, but allow patients to remain connected with their community



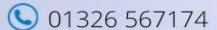


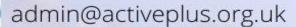


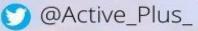
## **ACTIVE PLUS**

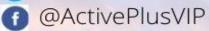
VETERANS INSPIRING PEOPLE





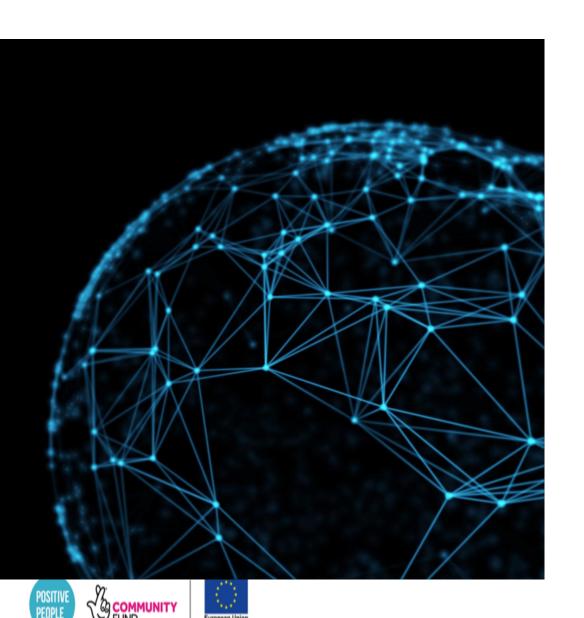












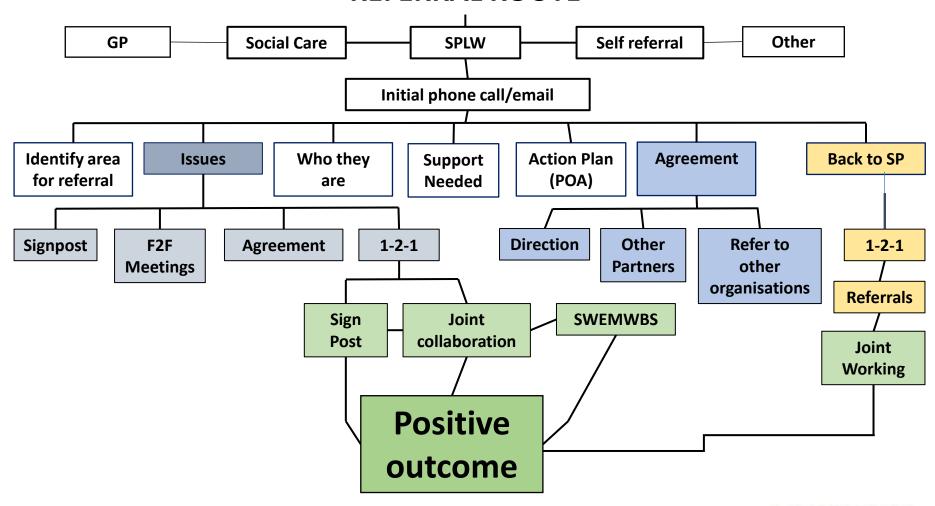
# Armed Forces Community Social prescribing link Workers

Andy Craze Marc Walsh

- NHS/Cornwall Council
- Active Plus



#### REFERRAL ROUTE



#### Veteran accredited GP Practices

- Pentorr Health Centre
- The Atlantic Medical Group/Alverton Practice
- The Falmouth Health Centre Practice
- St Agnes Surgery
- St Austell Health centre
- The Roseland Surgeries
- Trescobeas surgery
- Stratton Medical Centre
- Carn To Coast Health Centres
- The Penryn Surgery
- Perranporth Surgery
- Port view surgery
- Old Bridge surgery
- Lostwithiel Medical Practice

- Morrab Practice
- Quay Lane Surgery
- Probus Surgery
- The Clays Practice
- Carnon Downs Surgery
- Newquay Health Centre
- Meneage Street Surgery
- Saltash Health Centre
- Brannel Surgery
- Chacewater & Devoran Surgeries
- Oak Tree Surgery Liskeard and Pensilva
- Rosedean House Surgery
- Rosmellyn Surgery



#### 1<sup>St</sup> Multi CPN within Cornwall VFA **Veteran-friendly health care**



From left, social prescriber Marc Walsh, Danielle Kirby and Sarah Hearl of the Clays Practice, MP Steve Double and social prescriber Andy Craze

PICTURE: PAUL WILLIAMS

MP Steve Double joined social prescribers Marc Walsh and Andy Craze from Active Plus at the Clays Practice in Roche last week as it, alongside its partners at Brannel, Roseland and Probus became the first multi primary care network in Cornwall to gain full forces accreditation.

The Royal College of General Practitioners (RCGP) is working with NHS England to accredit GP practices as "veteran friendly".

Nearly 1,000 GP practices in England, including many in Cornwall, are already accredited.

Marc explained "There are many dedicated NHS services for military veterans such as the Veterans' Mental Health Transition, Intervention and Liaison service (TILS), the Veterans' Mental Health Complex Treatment Service (CTS) and the Veterans' Trauma Network.

"Additionally, Cornwall now has two social prescribers who are solely tasked with supporting veterans. They are military veterans themselves and are happy to be contacted by any practice with a veteran who may need support."

The RCGP has produced a podcast featuring clinical champion Dr Robin Simpson and accredited GP Dr Matthew Boulter from Penzance. They discuss the health care challenges faced by the veteran population in England and the positive impact of the accreditation scheme.

The RCGP also has a veterans' health care toolkit to provide guidance for GPs on how to deal with the needs of veterans who may have been affected by their careers.

Mr Double said: "With the growing awareness of the particular help and support our armed forces veterans need I was delighted to to support Marc Walsh and Andy Craze from Active Plus as the Clays Practice received its accreditation.

"With the other surgeries in the primary care network at St Stephen, Probus and Roseland they have been recognised for the work they do for our armed forces community.

"Social prescribing plays an important part in providing this support and I am delighted Cornwall is, once again, leading the way in this field."



#### **AFC Training**

#### **F2F** and Online

- Unit 1: Identifying Members of the Armed Forces Community
- Unit 2: Military Culture Competence
- Unit 3: Difficult Transitions
- Unit 4: AFC Challenges
- Unit 5: Engaging with AFC Clients
- Unit 6: Support for AFC Clients

Delivered by AFC SPLW to SP initially and then all other organisations working /supporting the AFC.



#### Feedback

The AFCSPLW has been a great support to our existing Social Prescribing team. Marc has been quick to respond to referrals and really proactive in supporting veteran patients and their family members. The AFC SP service within Active Plus has provided a specialised SP provision for veteran's and their families. They have a vast knowledge of provisions and support available for the AFC. It has been a pleasure to work with them.

#### **Fiona Hunt**

Social Prescribing Link Worker – The Clays Practice

Being able to involve an AFC SP, has made such a difference to my patients health and wellbeing. I know not everything can be quantified , but the MYCAW outcome measures done with him show a huge improvement, you'd only have to speak with him for a moment to see the transformation in his mood.

AW spoke very movingly yesterday about the sailing trip you arranged for him with charity Turn To Starboard- he found the whole experience very challenging physically, but incredibly supportive and a foundation for a much more positive future. This has provided him with what he identified as the most helpful thing about this Social Prescribing intervention- "Knowing I have someone to talk to when feeling down", the workers and peers of Turn To Starboard. He looks forward to continuing his involvement with them.

Sylvia Penhaligon Social Prescribing Link Worker-St Clare Medical Centre



#### **Referrals One year point**

**500** – Demonstrator whole

291 - Cornwall

#### **East**

120

Predominant referral route – Social Prescribers – Other (e.g. voluntary sector) Predominant age range overall, 26 – 70, with most falling in the 41-55 bracket

23% - Female

<mark>11% -</mark> Partners

6% - Children

44% - Army

Reasons for referral: Social isolation, mental heath and finances

#### West

<mark>171</mark>

Predominant referral route – SP –VCSE Predominant age range, overall 26 -70, with most falling in the 56 – 70 bracket

2.5% - Female

1% Partners

2% Children

53% - Army

Reasons for referral: social isolation, mental health and physical health (e.g. drug and alcohol)



#### Conclusions to date

#### **Employment**

• When it comes to employment the results showed that only 30% received beneficial support before leaving. This could relate to the 11% that struggled to find work within 6 months and that nearly half of those surveyed did not feel confident of sustaining employment.

#### Homelessness

• Veterans were at a much higher risk of being homeless at some point after leaving the forces. Further research is needed in this area as to why this happens. We can see from the results that the number leaving with debt is much higher than the national average, which can be a factor of becoming homeless.

#### **Medical support**

• The most concerning result of the survey is that medical care does not continue for veterans once leaving service. This is also apparent in supporting Veterans daily, were veterans report that their medical documents do not get passed onto their civilian GP (this was also exacerbated during Covid).



#### Recommendations to date

#### **Employment**

• A recommendation would be that veterans receive ongoing career support after leaving the forces. Not just from Job Centre Plus but an organisation that knows how to convert military skills to civilian ones and give the veteran confidence to compete in the civilian job market.

#### Housing

- Future research into understanding why Veterans become homeless.
- Financial guidance during initial and resettlement.

#### **Medical Support**

This should be a simple procedure and a recommendation should be that veterans do not leave
the forces till adequate healthcare is put in place. A GP must be found for the veteran near the
relocation area and a personal handover made by someone who is able to pass on all the
relevant information regarding the veteran.



## Recommendations for veterans entitlement and support

#### Where does this report need to go to?

- PLUSS
- Local MPs
- James Heappey MP Minister of State for Veterans' Affairs
- Northern Hub for veteran research
- NHS veteran links ie. Lisa Jarvis (Medical documents need to be passed on).
- Veteran specific mental health (Waiting times are an issue)
- VOWS face 2 face volunteers supporting confidence and motivation courses







#### Questions following the presentation

- Who would be best to contact within surgeries to get them signed up to Veteran friendly GPs?
  - Clinical directors/Practice Managers are a good start or just ask receptionists they tend to be a font of all knowledge and will know the best people to speak to. You could also go in via the actual SPLW's as every PCN should have at least 1
  - Also important to be consistent and clear when approaching a practice manager.
  - Try to meet them face to face
- Is there much interest from NHSE/NHSEI in rolling social prescribing out nationally? Including guidance and encouragement to those delivering the support.
  - There is a large appetite for this, particularly the model in Cornwall.
  - There does need to be conversations between key (national) organisations around social prescribing, as it does impact an individuals holistic healthcare
  - Also needs to look at where funding can come from