Key Findings

In North Somerset there are many thousands of veterans, mostly older people, mostly with no distinctly military-service-related needs from public services.

Younger veterans probably numbering in the high hundreds, were not well-represented in this research but probably have distinct needs, some of which are explored here.

Service personnel and family members number in the hundreds and have distinct needs, mostly associated with a non-settled lifestyle.

A Community Covenant should, at a structural level, recognise these different groups and their needs.

The key issue for serving personnel and their families are registration/appointment issues relating especially to primary healthcare and school admissions.

Purely financial issues did not feature large, though this may reflect the relatively comfortable profile of most participants.

No simple, comprehensive solution was agreed-upon though some solutions were tentatively identified, including:

- Better records coverage and management
- Single liaison person for the local area, linking with the ex-services charities
- Education and information for serving personnel, their families, veterans, the public and public service providers.

There were also a handful of potential quick fix measures. These are detailed in Section 12. Briefly they are:

- Building on the Leisure Key Card
- Setting up an administrative postcode to enable e.g. school admissions to be processed before a house move is finalised
- Ensuring transparency to parents re the way the pupil premium is used
- Social support
- Better signposting of services to key groups
- Taking up some offers of help from ex-servicemen in design and implementation of the Community Covenant.
1. Introduction

In advance of drawing up the North Somerset Community Covenant (NSCC), North Somerset Council did some research in May 2012, among 'the target audience', to find out what should go into the NSCC.

The research took the form of a:
- survey of veterans and
- a focus group among veterans and
- a focus group among serving personnel or their family members.

The survey responses are presented here in Appendix A. The survey was used to identify the issues that could be usefully explored in more depth in the focus group discussions (FGDs) and taken into account when writing this report.
The FGDs have been part-transcribed and these are available on request. Verbatim quotes are used here with an attribution: Quotations from the veterans FGD attributed as ‘Vets Group’ and Service Personnel or their Families as ‘SPF Group’, with a number referring to which respondent made the remark.

More detail on the process of the research is provided in Appendix B. The main methodological issue is that almost all the veterans participating in the research were aged over 70. This may well be an accurate representation of the age profile of veterans in North Somerset. But there was very little representation from recently discharged and younger veterans; especially from those who are not settled, not in families, not economically comfortable, or otherwise vulnerable. The research suggested that this is a key group with high ‘needs’ from public services. However, they are by virtue of numbers and possibly lifestyle, ‘hard to reach’ people, beyond the scope of this project. Probably for this reason purely financial issues did not seem to be a major problem for participants.

2. Defining the scope of the NSCC

The aim of the research was to find out what local public services can most usefully do, within a tight budget position, to help key armed forces groups. There were few simple answers (though some are given in Section 12). The research did shed light on what the issues are, as defined by the key groups, which in turn points to ways forward.

2.1. Veterans and SPF are very different groups from one another.

Numerically: there are many thousands of veterans in NS, compared to probably fewer probably than 1,000 SPF.

Demographically: Most veterans are over 70 and retired. Most SFP are probably under 55, with many under 35, and they are mainly economically active1.

Lifestyle: Most veterans are settled. Most SFP have family members serving away from home, and many are subject to frequent area moves.

Identity and expectations: many veterans identify more as older people rather than ex-Forces. Many SFP identify mainly as forces (or at least not civilian).

These differences translate into different expectations from local public services. So a NSCC should, right from inception, recognise these groups differently. The differences are so major that text-tweaks alone are probably not enough: the NSCC should be structured to reflect this difference. For example Wiltshire has a veterans Charter and a separate Community Covenant.

Even if the groups did look similar in terms of needs (which they don’t), the numbers suggest that there is a logic to distinguishing between the two groups. Otherwise, for example, there is a risk that limited resources are not targeted at highest need.

The MoD identifies over ten separate groups included in the Armed Forces Covenant, along with a rough prioritisation of their needs. So, for the NSCC it may be useful to clarify which groups (and possibly prioritise) are covered by the NSCC. For example should it cover reservists (TA)? Their families? If so, should they be afforded the same ‘priority status of’ a wounded, recently discharged ex soldier?

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1 These are speculative, informal estimates based on discussions with local organisations and some service use and population figures.
3. Defining the problem

3.1. Veterans’ view of the problem

Most of the settled-and-elderly veteran-participants did not feel they faced any particular disadvantages due to their service.

“As a veteran I don’t feel disadvantaged.” (Vets Group, #9)

Almost all the veterans’ responses to the survey supported this view.

A small minority of veteran FGD participants additionally seemed unconvinced that service per se is a criterion for any special treatment.

“Should the military get any precedence over civilians?... It’s like someone who’s worked in an asbestos factory.”(Vets Group, #10)

However, all veterans in the FGD said that some people do have a problem getting public services provided in a suitable way, namely SPF and recently discharged, vulnerable veterans. This latter group was also discussed as high-need by some of the SPF participants.

When the veteran-participants did discuss veterans’ needs it was almost always in terms of other people’s needs (mainly younger, poorer veterans).

Additionally most veterans see a separate, cultural, problem in the lack of public recognition of the contribution of veterans.

3.1.1 Cause of the problem for veterans

The causes of the problems for recently discharged veterans, especially the less-settled, poorer and or more vulnerable ones were seen to come from:

a) the breakdown of more wraparound welfare care provided, in former times, by the MoD and society at large.

“What about the TA they go to Afghanistan. Gets back to Brize Norton, bye bye, left back in the community, no support.” (Vets Group, #8)

“The medical people at the time that were in Tidmouth [Military hospital] and these places were soldiers themselves, they understood the whole complex thing. Today if you go to a GP he probably just says ‘yeah, so what’?” (Vets Group, #10)

b) veterans’ needs can often go under the radar for local public services.

- They do not fit any traditionally high needs profile.
  “No-one’s gonna put a single young male in a council house when a family’s waiting. It’d be a difficult step that. You’d never expect that.” (SPF Group, #1)

- They may be unaware of how public services work
  “It’s good when you’re in camp, don’t get me wrong, with people looking after you [...] All of a sudden you get thrown into the big wide world and you have to worry about council tax, gas bill, electricity, water rates. It’s gonna be a shock to a lot of people. Especially cos the typical soldier in my company will be from a broken home, poor education , lucky to have GCSEs.” (SPF Group, #1)
• They may not want to identify with veterans (and veterans’ support services).
   “Think of it yourself when you left the forces. Was the first thing you wanted to do join RAFA or something like that? You just wanted to get out of it.” (SPF Group, #10)

c) the majority perception that the forces charities are not as active as they need to be to serve recent veterans.
   “The ex service charities are the country’s best-kept secret, unfortunately. That’s our problem. We’ve gotta get out there more.” (Vets Group, #5)
   “RAFA, the Legion, it’s the same people belong to all these groups” (Vets Group, #10)

4. The problem for serving personnel and families (SPF)
SPF participants in the focus groups and survey nearly all reported a clear level of need for more suitably-delivered services for themselves. They experienced disadvantage as a result of their service in the forces.

And they, like the veterans, also shared the feeling of just not being recognised by society.

“We’re talking about the administrative complexities but I think the basic principle of all this is to actually recognise the debt of gratitude we owe to the armed forces.” (SPF Group, #4)

5. Causes of the problem for serving personnel (and families)
It’s important to understand the causes of the problem, as they see it, in order to tailor the solution and communications appropriately.

5.1. Mobile lifestyle
By far the biggest issue is the disruption caused by moving around from one area of the country to another, sometimes every couple of years, with little notice or say in the matter.

Another aspect of this is trying to maintain a family life while the serving spouse is away on base Monday to Fridays, or on tour or other duties.

To a large extent the issues are more to do with mobility and deployment than with military status per se.

“It’s reconciling the transient nature of the job with something that moves relatively slowly.” (SPF Group, #4)

The main problem is that access to so many key public services are organised on a subscription or registration principle. Often, on the assumption that the application for services are from a settled community. And thus, that the widest or easiest choice is for those who register first or have a local connection already. This was particularly raised with reference to healthcare and school admissions.

“One of the guys that works with me had an issue where he went to local NHS….and just as he was getting to the cusp of getting issued the specific equipment he needed…diabetes monitoring gear, he moved so he got posted and went back to his new NHS authority, if that’s the right word and they said ‘yeah you’re on the waiting list’. He seemed to be perpetually on a waiting list, and that was for four years” (SPF Group, #6)
“Things like, if you’ve got a sibling at school...you’ve got a better chance of getting your subsequent sibling in.” (SPF Group, #7)

There is felt to be little understanding of the difficulty this causes. Especially compounded by the

a) limited choice in where people are posted/based.
“But you are being forced to live in camp so why should you be paying [council tax in two
places]... I didn’t choose to live in [base area], someone’s told me to live there.” (SPF Group,
#1)

b) way that changes all come at once (adjusting to new town, new home, new school,
new job, no husband around).
“The heartache, the stress of appeal, particularly for those guys who move to a place, and
invariably the reason they’re moving is cos they’re moving their job when they deploy, and
there’s only one person fighting that appeal.” (SPF Group, #6)

c) having to fight to get the provisions that are in place for the military implemented
“It’s probably cos the school didn’t recognise the system. It wasn’t so much a threat as ‘we’ll
send a solicitor, [who] will explain what we’re entitled to’. Because it’s not common
knowledge.” (SPF Group, #1)

“Again it’s a wonderful flow of information we’re talking about here. And at the top level that’s
probably the case. But if you’ve got a head teacher that’s exercising his right to run his school
as he sees fit, you’ll have to go a long way to prove or disprove that he’s following the code.”
(SPFGroup, #6)

5.2. MoD scaling back
Like the veterans, the problem, especially re healthcare, was defined partly as an inevitable
result of the scaling back of the more wraparound welfare approach the MoD used to provide.

“The woeful closure of military hospitals over the years. Back in the 70s and 80s we had
Gosport, [lists closed hospitals]. That I presume necessitates people having to go in the NHS
system. So you don’t have that cross pollination, that exchange of information. I can’t see how
it works anyway.” (SPF Group, #4)

Given this situation, the participants found it difficult to describe a healthcare system which
would allow them the flexibility of access, continuity of care, and at the same time guarantee the
military the security it needs to avoid personnel playing the system.

“The problem I see, being a Sergeant Major is you’re gonna have someone who doesn’t want to
come to work and he can use that as a get out clause unless there’s proper liaison with our
medical officers...I could pull a fast one and get a week off. I’ve often had a case where I’ve had
a soldier sit at home and he’s been made to sit at home by a civilian doctor. I don’t doubt his
qualifications but we can’t track our individuals purely using civilian.” (SPF Group, #1).

Some of the mobility issues are around moving house every two years. Others are more
complex, relating to healthcare during small periods of leave or short-term postings, including
possibly abroad. It’s hard to see how any medical system, even a ‘wraparound MoD’ system
could cater for all the complexities of deployment.

“It’d be worthwhile for the NHS to know when somebody is serving ...when you’re on leave and
you’ve only got 2 or 3 weeks at home and you ring up to make an appointment and they’ve only
got one next week, well you’re running out of time, coz you’re off again. So you need an immediate appointment. for whatever reason while you’re on leave.” (SPF Group, #6)

The SPF saw the ex-services charities as being mainly of and for older people.

“Not everyone wants to approach them, especially the younger generation. Bit of stigma attached to it, maybe.” (SPF Group, #1)

6. The solutions

6.1. USA as a model

What would a solution look like? Both FGDs spontaneously raised the idea that it would be more like the situation for SPF and veterans in the USA or Australia.

“My experience in New York was in the transport department and you show your ID card and they give you bus tickets, train tickets. Unfortunately that’s fiscal and this is support type thing so let’s take it one step at a time. But they get treated so differently. You can be treated better in America as a British serviceman [than in the UK]…” (SPF Group, #6, #4)

“You should see how they treat their veterans in Australia, it’s amazing…they get discount cards...help them buy a house.” (Vets Group, #5)

These may be unattainable by any local action but it is important to note, at least for communications, that for the people concerned, the ideal looks like this.

6.2. More responsive public services

The most commonly agreed-upon solution was simply the obvious: a change in the way public services are provided, to make them more responsive to military lifestyles and needs. This was mainly discussed with reference to healthcare and school admissions.

“People in forces…should be given a priority [medical] appointment no matter what they’re in for. Cos they’re in the forces. There should be some perks for being in the forces. Yes somebody else will get pushed further down the queue.” (SPF Group, #5)

7. Implementation issues

There was a lot of discussion about how the solution could be achieved. There was little consensus beyond a) more and better education and information b) more research.

While both are obviously vital, their popularity usually foreshadows lack of consensus on other technical solutions.

7.1. Central v local government

There was real ambivalence whether this needs to be solved by central government or by local public services.

For some participants/ for various public services, it is clearly seen as a national issue requiring national solutions.
“I don’t think it’s something North Somerset on its own can do, cos it’s the whole school admission thing nationally. So it’d have to be a major government thing to make it better.” (SPF Group, #5)

“I think there should be a central registry accessible by the NHS. The message has to come down from the top of the NHS, to say, if you’re presented with someone in the forces, you have to give them priority.” (SPF Group, #1, #5)

“The Families Federation have investigated this sort of thing nationwide and overseas and fed into the highest levels of government might be worth investigating through them, what have they done already, because we might be wasting our time here.” (SPF Group, #3)

For others (and indeed, sometimes for the same participants), local government can play a key role in the solution. The role is described in more detail in Sections 8 to 12 below.

Local implementation was seen by some as the best route.

“It’s a country wide issue and I like your issue that, from a small seed everything will grow and if we mange to get it right and have one local health authority gloating to its neighbour that it’s able to do this for the forces, you know the next door health authority would do it and it would permeate through the country that way. It’s probably the only way that it would happen.” (SPF Group, #6)

7.2. Role of charities
Participants did not see the ex-service charities as the answer.

More, they did not see the charitable sector in general as the solution either because the problem is morally a government responsibility…

“And there’s this reliance on charity, which is fantastic, but I believe it’s the responsibility of government to continue caring for these people. And there’s a lot of cases where that doesn’t happen. And that’s what led us to [?] If that’s what happens at local level, it’d be awesome. But, the initiative has to come from government. It’s their responsibility. They sent these guys into action - it’s their responsibility, no-one else, not charities.” (SPF Group, #4)

…or because charities were seen as lacking the clout to provide a robust and sustainable solution.

“Don’t you find, as I did that a lot of the people that can help you are volunteers….you get a lot of rhetoric but at the point of help you find nothing happens.” (Vets Group, #3)

8. Better-integrated records
For many, the solution to some of the problem, especially re healthcare, is in more universal personal health records which follow the person around, including between the civilian and military sectors.

“I’m surprised that a civilian GP wouldn’t automatically send the notes on to wherever he’s serving because, surely, it’s in the benefit of the health of that soldier to have the records being shared.” (SPF Group, #5)
When the details of this idea were discussed, it became hard for participants to say exactly how it would work, in a way which would cater for the variety of deployment possibilities.

[daughter was in the army but not on a base – ski training, then back in the UK on short-term leave] “we need to get her in. If she’d been an emergency in Germany, fine. She did get an appointment but the follow up was 2 weeks later. it just needs a tag on her NHS records to say she’s only here for two weeks. So that everybody’s aware that this isn’t a case where she can come back in 2 weeks." (SPF Group, #5)

And in a way which would offer the MoD the reassurance it needs.

“If I’m seeing a CPN [Community Psychiatric Nurse], quite a lot of our guys are traumatised, they won’t necessarily have these files on the system to suggest why this person is going sick, the full details, so they might make a decision based on what they see in front of them but it’s not always. Some people know how to play the system, let’s put it like that.” (SPF Group, #1)

One suggestion to improve the usefulness of records, especially medical, was to include a ‘military status’ tick-box option on registration forms.

“There seems to be no space on the form, cos everywhere you go there’s a form, you’re admitted to hospital, there’s a form. But nobody asks, ‘are you a veteran’ (Vets, #9)”

Ambivalence about better records being the solution was summed up by one veteran.

“Even if you put ‘veteran’ on everybody’s medical notes and you walked in with depression or something, I don’t reckon 75% of GPs would connect the 2 things. (Vets Group, #2)"

9. Signposting by a single point of contact

The most popular solution, among both veterans and SPF was to have a single person for SPF or veterans to go to in the local area. That person would then advise on the best way to get the services, their rights and even lobby for that person with service providers.

“You just want a desk, a phone number, that when you move to an area, that any serviceman can... They’re almost a font of all knowledge, the person that knows everything about that town, know all the facilities available to you in that town….They could run through everything from all the sad stuff to the really mundane stuff like where do I get a wheelie bin.” (SPF Group, #6)

“Anybody who’s priority for medical treatment, beyond a doctor’s appointment. Whether the council’s got somebody to flag up, somebody from within their area, to make sure that they are actually accessing that help. And again, the refund - they may not want any support or they may well want support.. It’s just somebody to make sure they know where to go.” (SPF Group, #5)

Interestingly, almost all those in favour of this solution saw it as:

a) an individual person (rather than a policy or system).

“[NHS mental health] If you haven’t got the right person to support you and back you, people don’t listen…. cos half the time, it goes over your head. If you’re a young serviceman and you go to your local GP you’ll find that half the time he hasn’t got a clue what you’re talking about.” (Vets Group, #5)
“Unfortunately there a lot of people, particularly people who are bereaved or whatever, who find it difficult to ask. And finding that sort of sensitive in their local area would be quite difficult. If they’re in a camp, you’ve got a huge structure there and there is a sensitive ear for them. But when the bereaved wife or husband moves from that camp to a place like this, just finding someone you can find who will give you the signpost to all those places, ‘that person will do that for you, that person will do that for you’. …you’d like someone to have a bit of empathy. You could have someone in the council that builds up a wonderful chain of different people that you could speak to. The teashop on the corner of so and so, they really good for servicemen and there’s two serviceman I know who go there…People don’t go to the normal places like the legion. Cos a lot of people withdraw from…” (SPF Group, #6).

“Requirement to be aware that most serving members may only have Saturday or Sunday off to be able to sort out any issues, therefore a single point of contact who could authorise things to be done without attending in person.” (SPF survey response)

Having a single person in place was seen as essential in enabling liaison with the relevant military welfare officers and the MoD.

“The people who know most are the MoD. They have the record of who is injured all of that should be filtered through to the council.” (Vets Group, #10).

b) based in the council. This is partly in response to the fact that the SPF issue is largely around moving to a new area.

“You get all of that stuff from the council so if you’re coming to the town hall for your school admissions stuff, for your wheelie bin and there’s a big sign as you come into the town hall to say if you’re forces or whatever, this is the contact for you. I think that’s a brilliant idea.” (SPF Group, #5, #6)

Although much of the discussion was about primary healthcare, the council was seen as then natural focal point as it has a profile and connects many local services.

“If you’re a single bloke or lady leaving the service, it must be quite difficult getting a foot on that council house roster…you should expect something rather than a cardboard box and a sleeping bag. Again, the council, North Somerset Council can absolutely do something about that.” (SPF Group, #6)

c) needing to work with (but not be part of) the ex-service charities.

“It just needs some sort of focal point through the local authority, where people could come, or one of your officers could say this person has a problem with housing or whatever, is there anybody I could speak to…somebody who’s up to date with Legion welfare officers.” (SPF Group, #1)

10. Education and information-provision

Almost all participants said that a vital part of any solution is education and information. Three audiences were spontaneously discussed by both veterans and SPF:

- Service providers
- Potential service users
- The public
10.1. Service providers

An essential part of any NSCC was felt to be educating, informing and awareness-raising among service providers, both front-line and management.

This includes

a) making sure they know their existing obligations (mainly related to NHS), including any flowing from the CC.

“Every GP has been issued by the NHS that any veteran … is entitled to priority treatment, as long as that treatment relates to his war service injury or mental health or whatever. But you’ll find a lot of GPs haven’t even read it.” (Vets Group, #5)

“On a local basis you can stop them straight away, just get the managers in, from each health centre and say this is what we want you to do; ‘if someone rings up and you’re aware they’re in the forces, they’ve said they’re in the forces, you get priority treatment straight away. It’s up to them [managers] to filter it down to the receptionists.” (SPF Group, #5)

b) ‘equalities-style’ awareness raising to convey the types of issues facing his group of service users.

“Last time I registered with a different GP and showed him my card… that says this man is a war pensioner and he said ‘what war were you in then?’ That’s the attitude… it’s people in authority, the police, the council, GPs that have to sit, listen and learn from those who have gone through the system who say no it doesn’t work that way, this is the way it works.” (Vets group, #5)

10.2. Potential service users

However good the service-provision, there was agreement that the beneficiaries (high-needs veterans, SPF) need to be better informed about what is available.

“There are systems in place for lots of things: education, healthcare and so forth… there’s not much that’s going to have to be done in terms of building infrastructure and stuff like that. Cos the stuffs already there it’s just not everybody knows about it.” (SPF Group, #1)

“We’ve got armed forces day coming up so you could always take a page in the local paper coming up to that and say North Somerset wants to be supportive of forces. Actually put it in print what you want to do for forces, what you’d like to see done. Have people got any ideas and ask them to email it in. Cos there’ll be lots of other forces people that we don’t know or we don’t know of who live in North Somerset.” (SPF Group, #5)

Participants in the SPF group were asked, whether, in the situations they had described, they had mentioned their service-status. All said no and when asked why:

“Don’t know
Don’t know
Maybe we should have said that. It’d be worth trying.”(#6, #2)#4)

So there was some backing for the idea that potential service users need to be more assertive in stating their service status and/or circumstances in order to claim priority.

“You hit the nail on the head though. There is a requirement on us to ask, every bit as much as there is on the government to give.” (SPF Group, #6)
This ‘claim-your-rights’ message could form part of any information-provision. It was recognised that the high-needs veterans (e.g. younger, recently left the military, vulnerable) are precisely those people a) not represented in this research and b) hard-to-reach by traditional media.

“A lot of soldiers are totally unaware this stuff is there for them. You can ram this stuff down their throats, give them all the leaflets but you can’t make them read it. It’s education. Everyone needs to know it’s in place.” (SPF Group, #1)

“A lot of the younger ones, when they come out of the forces, don’t want to know, don’t want to ask for help.
That’s true, that’s why they are so inward.
I’m a soldier or an airman, therefore I’m self-sufficient. My brother was in the RAF for 26 years and when he came out he didn’t want anything to do with the forces.” (Vets Group, #9 and #5).

This issue of getting information to hard-to-reach groups is a familiar one, best summed up by redefining them as ‘expensive-to-reach’.

10.3. The public
This was less often emphasised but the need for broad public information was mainly seen as a way to get the message out indirectly to those in need of help.

“As a council you can use your press. You’ve got your... magazine [North Somerset Life?]... But you’ve got a weekly paper [The Mercury] – you can get an article in there. This is what we can do, do you know anybody... we can put you in touch with these people and somebody might read that. Cos everybody’s heard of Help for Heroes and the British Legion but you know they might not then think that relates to that person there. But when you see it in the paper saying put this person in contact with, it could be a personal story or...you could put something in there once a month saying do you know of anybody or have you been affected by this”. (SPF Group, #5)

There was also a lower-priority feeling that informing the public can help improve the image of the military among the public.

11. Successes to build on
Some existing practices were highlighted as helpful.

The SPF participants in the survey and the FGDs nearly all spontaneously said how good the Leisure Key Card is (giving free access to sports centres for SPF).

“This is the most valued item that I have been given by any council in any area that I have resided so far.” (SPF survey response)

“The facilities are fantastic. Swimming, gym itself, saunas. Can’t knock it its fantastic
It’s everything you expect if you were living on a base. And more cos you get the family in too and they feel part of the community they’re living in.
…I’ve never known anywhere else.
Obviously we have people from around the country nobody’s heard of it elsewhere, cos I always try and promote it. Cos If I’m here on leave I don’t want to cross the Bristol bridge [to base]
every time I want to go the gym. I can just toddle down the road and take my kids for a swim.” (SPF Group, #1, #3, #7)

“The council’s Leisure card is fantastic. I just got back from Afghanistan and my wife and kids were able to use it while I was away. That’s a great help and gives them the same kind of benefits as if we were living on a base.” (SPF survey response).

Praise for this discount scheme was probably the single thing in this research attracting most agreement and strength of feeling. It’s value was not only financial but also as a token of recognition and as a way of feeling part of a new community.

Apart from the pass there were a couple of instances mentioned where front-line staff had modelled the right approach.

“I was arrested once, coz I had combat stress [mentioned guns in the pub]... I was jumped on by a couple of policemen, taken in the back of a van to the cells coz somebody thought I was a terrorist... Custody sergeant said to me ‘are you a veteran’ and I said yes. He said right...and within an hour ....they’d called a mental health unit and they sent me down one of these mental health nurses who deals with veterans and I was out of there within an hour. The system does exist in places and it can work.” (Vets Group, #5).

“When we moved here we had to go to [school admissions] appeal and it was very much, the council were on my side. It was probably the longest 2 hours of my life, in the appeal, but there’s a framework where they are there to support.” (SPF Group, #3)

“I find the services provided by North Somerset far superior to what was on offer at our old address.” (SPF survey response).

“We have energetic young children, but we do our bit to support the local community here, and feel that the hospitality is reciprocated, both by the council, their staff, and the local community.” (SPF survey response).

12. Quick fixes
This section highlights a few initiatives which could potentially be more easily incorporated by local public service agencies.

12.1. Building on the Leisure Key Card
An obvious step would be to make sure all eligible SPF who want it, get the Pass. Clearly this would have significant financial implications which would need to be explored.

There was some discussion about whether the scheme could be extended to new services, though no actionable ideas came out of this research:

“...if it’s a council-run museum then it’d seem logical that that membership could be extended to free museum entry and anything else the council controls and charges for.” (SPF Group, #5)

12. 2 Administrative postcode
This idea came from a survey respondent.

“Schooling is the big one. The cycles of our posting don’t fit with the cycle of school allocations. So I might hear in June that I need to move in August. But in June the school places are closed. And I don’t even have an address to apply from in June anyway. So I wondered if something could be set up like we use for buying books on Amazon. I’m based in Germany and if I use my
BFPO postcode on Amazon, they won’t recognize it. So the army has set up a dummy postcode which is recognized by internet sellers and allows us to buy things online. I wondered if North Somerset could do something similar at Long Ashton - basically a forces postcode to apply for school places as soon as we know that’s where we are moving to. Some places like Emersons Green have much more military housing so it could easily work there. Not sure how it would work at somewhere small like Long Ashton but worth thinking about.” (SPF survey response).

12.3. Pupil premium transparency

One FGD respondent made a suggestion which was well received by the group.

“In terms of the military covenant, there was this bit which meant that a child in the school was getting given extra money for school activity. And I would like the schools to be more transparent on that. If as a result of that school having a forces child, the school are getting an extra X amount of cash, now that X amount of cash should be absolutely for that child, not for the school. You’ve got all those things like school trips, to make their integration into the school a lot better, that a private soldier might not be able to afford, a school trip, if school still do that. That money is only for that child. A friend of mine based in Cornwall, in a main operating base type location asked the school, you’re getting that money cos my daughter, show me how that’s benefitting her. And the head teacher couldn’t….For the school year. So even if your kid wants to play sport, which is great to get them in, and you have to go and buy sports kit, that money should be absolutely for that child…Particularly for a corporal and lower, earning £10,000, that’s six thousand less than the national average. And that’s got to be a positive integration move for a kid…” (SPF Group, #6)

12.4 Social support

One survey respondent said that, as a parent of a soldier posted in Afghanistan, she felt isolated when she moved to North Somerset. She wanted to meet parents in the same position as they would understand her situation. She wondered if the council could: “set up local support group for when our loved ones are in any conflict zone, ie Afghanistan.” (Survey response, SPF)

Social isolation of family members was a minor theme at various points in the research. However the reaction to the idea in the focus groups was mixed:

“That’s what I moved [off base] to get away from [laughter] That’s what some people are like, like my wife. But the trouble is cos you haven’t got to supervise something like that I don’t know where the nearest base is, Taunton? Family Welfare officers down there will have the wives coffee mornings and stuff like that. We have none of that….There’s just nothing you can tap into.” (SPF Group, #1, #7)

A similar point was made by a veteran:

“Perhaps a group where service leavers can meet up & discuss the problems they are having settling back into civilian life. I would have liked to have met up with people in a similar situation to me, as I felt very lonely when I left the Army.” (Vets survey response).

12.5. Better signposting of existing services

There are some easy-to-do possibilities for example:

- “Put posters up in every doctor’s surgery.” (Vets Group, #5)
- Text on the council materials at key points to highlight how to do things e.g. in school admissions booklet,
16. Mobilising the offers of help

Various focus group participants offered to help in the development or implementation of the North Somerset Community Covenant, in both practical and organisational ways. This included offers from current and ex-serviceman and from some representatives of ex-service charities. Details have been passed on.

Appendix A. Survey responses

To supplement the group discussions we ran a mini-survey on the theme of how local public services could help Forces personnel, their families and veterans. The following section presents the main results of the survey; two free text questions, each with a text limit of 200 words. They are presented here verbatim except tidying up any obvious spelling mistakes. Results are sorted into category of respondent. One response was received by phone and transcribed here.

Q2 What problems do you have getting what you need, locally, because of your involvement in the armed forces?

Serving personnel (regular forces) – 7 responses

No real problems.

Have had difficulty accessing good, local nursery care for my child. We arrived in the area when my son was already 14 months old and we found that the local nursery’s waiting list was approximately 18 months so there was no way that I would ever be able to access it. Given the frequency with which I move, this effectively denies me access to local, good nursery care whereas residents will know that they need to immediately register their children at birth.

1. Requirement to be aware that most serving members may only have Saturday or Sunday off to be able to sort out any issues, therefore a single point of contact who could authorise things to be done without attending in person.

Nothing I can think of. The leisure key is outstanding and provides a massive benefit for my children. It was a shame the Campus activities were taken off the leisure key but I understand why.

I am away a lot and having moved recently from Mid Devon, I find the services provided by North Somerset far superior to what was on offer at our old address.

[This response received by phone] Three issues:

1. The council’s Leisure card is fantastic. I just got back from Afghanistan and my wife and kids were able to use it while I was away. That’s a great help and gives them the same kind of benefits as if we were living on a base.
2. If I was in service-provided accommodation the MoD would automatically calculate my rebates for time served abroad. I’m not so had to contact the council. It was a bit of a paper chase, involving 3 emails but I got what I needed, which was an email saying that the council can’t calculate this rebate, which I then took to the MoD people and that worked fine. Just need awareness among the council tax people about this system.

3. Schooling is the big one. The cycles of our posting don’t fit with the cycle of school allocations. So I might hear in June that I need to move in August. But in June the school places are closed. And I don’t even have an address to apply from in June anyway. So I wondered if something could be set up like we use for buying books on Amazon. I’m based in Germany and if I use my BFPO postcode on Amazon, they won’t recognize it. So the army has set up a dummy postcode which is recognized by internet sellers and allows us to buy things online. I wondered if North Somerset could do something similar at Long Ashton - basically a forces postcode to apply for school places as soon as we know that’s where we are moving to. Some places like Emersons Green have much more military housing so it could easily work there. Not sure how it would work at somewhere small like Long Ashton but worth thinking about.

Members of the family of serving personnel (regular forces) – 5 responses

- We have had no problems due to our involvement in the armed forces
- No issues for me personally, as parent of serving royal marine
- No
- Isolation - we face some particular problems as mums with a son in conflict (worry etc). I managed to connect with other parents in similar situation which was very comforting/supportive.

Veterans (regular forces) – 35 responses

- I had a lot of difficulty getting registered with a GP. I was rejected by several local practices, saying they were full. I eventually managed to register at the same one I was with as a child, as my parents were still registered there.
- None at all. I lived in this area for many years as a member of the Royal Navy (left last year) and found no problems arising from that.
- Only lived here 24 months and so far no problems.
- None
- None to date
- No local veterans or legion facilities
- None
- Not applicable
- I am not aware of any specific problems related to my past service in the Armed forces.
- None
- Prioritise some school places in the most over-subscribed (popular) schools for the children of Service families. Not strictly a council problem but getting a dentist for my family was tough moving every few years.
- Nothing. I've never experienced an issue in this regard.
- No real problems at the moment
- None so far
I suffer with combat related PTSD, and bouts of severe depression. I personally require nothing more than an understanding of PTSD and the affliction of Invisible Wounds, by the local authority.

Volunteered for fire fighting/RNLI/other gov services all rejected because of age 55!, say unlikely to be fit!! Very short term thinking for fit ex service personnel. looking at some of the present personnel i think i could still give good service at 70.

None
None

None self sufficient/ bit peeved I have to wait till im 61 and 3 months to get Bus pass
None at all

Problems are few and far between, and I do not have any of these just because I am a Forces Veteran. I have to say that it would be a pleasant occurrence if all Veterans could receive a reduced parking permit yearly, in recognition of our Service.

Not aware of any problems.
None

None

No problems

Q3. Is there anything you think local North Somerset public services could do better to help you as a [as appropriate: serving member of the Forces/ family member of a serving member/veteran]?

Serving personnel (regular forces)

Very appreciative of The Leisure Pass for me and my family members.

In short, I don't know, as my children are young, but our eldest has managed to get our 2nd choice primary school. If I had older children, I might have been concerned about school admissions outside of term times, as we often don't move in line with term dates, or educational differences if moving from Scotland etc. Generally, there has been some discomfort at the lack of local primary school places in the immediate local area of Long Ashton, which makes life really difficult when both parents are working North of Bristol - but that is not specifically a service only issue.

Armed Forces Leisure Key has been invaluable to me in settling my family in the area. Given the frequency of moving (approximately every 2-years) settling into a new area can be incredibly hard and stressful. The leisure key has allowed my wife in particular access to services that we simply would not have been able to without it and helped set us rapidly in the area. This is the most valued item that I have been given by any council in any area that I have resided so far. Overall, I think that the council is very supportive and I very much appreciate that. However, I need to be clear that I am yet to test the education provision and the utility of the pupil premium (my son is simply too young). If the experience were similar to the nursery provision, this would make me very nervous especially given that I would normally move in the August, having found out in approximately Jun – well after the allocation of schools places – which leaves me in a very difficult position. It is these issues that pushes armed forces personnel into difficult decisions very routinely, such as weekend commuting. The impact of our service on our families is probably the greatest worry that we have, yet it is the one over which we (certainly the RAF personnel) have the least control. However, I very much appreciate everything that the council has done for me thus far.
1. The swimming pool access and gymnasium is of great benefit but regular inspections of franchised pools would ensure that hygiene and maintenance standards are kept at an acceptable level. Access across leisure facilities to be coordinated and not just for the area that I live in, for example I live in Nailsea and the closest large fun pool is Cardiff or Swindon, Portishead pool is usually full to capacity at the weekend when I can take my family.

A council tax discount when on operational duty as I cannot use the services i pay for.

**Members of the family of serving personnel (regular forces)**

Nothing else, but we love the Leisure Key card.

Making civilians more aware of what we go through, especially when my husband is away for up to 6 months at a time, friends and people I speak to don't seem to realize that we are very much on our own and that armed forces children miss out on a lot more than is ever realized. Recently I spoke to a mum saying that I'd been to Puxton Park and got 50% discount for my two children and myself. The mum in question couldn't understand why I should get such discount!! Even after explaining, it still was not unacceptable to her!

Set up local support group for when our loved ones are in any conflict zone, ie Afghanistan.

No

Organise some sort of way of parents of soldiers getting in touch with each other for meeting up, emotional support etc

**Veterans (regular forces)**

Perhaps a group where service leavers can meet up & discuss the problems they are having settling back into civilian life. I would have liked to have met up with people in a similar situation to me, as I felt very lonely when I left the Army.

Not really. I am still fit and able and consider myself a 'normal' member of the community. I greatly appreciate the provision of the Leisure Pass and make regular use of it. Thank you.

I can't think of anything currently, I do believe in standing up for yourself.

Maybe advertise help available to ex-forces personnel

 Unsure now

Offer discounts on transport and other concessions

Discount on certain travel

No

It would be good it to know of local armed forces organisations that I would join

Understanding. I wanted to get on with my new life but found that I was lacking in "street" knowledge which made progress slow. A beginners or "dummies" guide to looking after yourself for the first time would have been very useful.

No. You should endeavour to make use of veterans to assist in the provision of services as volunteers.

No thank you, unless you're going to offer discounts at local amenities lol

Can't think of anything at the moment

I can't think of anything at the moment

There should be a voluntary Forum within the Authority, comprised of wounded veterans, physical and mental, who can raise issues ie, social housing, mental Health care, in the local area.
First in the queue for medical services
Shame that the British legion Club has been allowed to be closed
No
Not me I’m sorted but younger H.M.Forces give priority to for social housing
Monitor the health of veterans so that you are already on top of things when their health fails.
Health seems to be the main problem with all the veterans that I keep in touch with
See previous comment
Not at the moment.
Better signposting for those in need of assistance by Council Agencies and NHS to Ex Service organisations local or national
Maybe
Help with downsizing from a three bed property down to g/floor flat /bungalow
From a personal view - better 'legal advice practical approach'. Far better financial help for senior citizens at health centres. More help for parents - especially single - with their single, when on holidays. I.e. boot camp sort of. And 'urgent repair’ of inner road services.
In the past we have had vandals get into our gardens via the wall in the neighbour’s garden, then over the wire fence of mine, plough through my garden and out over the fence into Selworthy rd. This happened a lot in the past. the police did try but no luck so my shed was robbed of my clippi tools . it has been quiet, now it has started again and nothing will be done to sop them. Why?
I can't see they can do much to help us. They’re doing what they can, with all the money problems. I appreciate that you recognise us
I realise that it is difficult to control but it would avoid possible accidents from Cyclists who persist in tearing along footpaths and particularly the high street. endangering elderly, handicapped persons and very small children
Ask the bin and bag collectors to PLACE bins and bags back, not throw them.
Nothing that I can think of. I'm a member of RAFA at the present moment so have a reasonable grasp of what's happening.
Appendix B. The research

1. Overall aim
To find out what local public services and other organisations can most usefully do, within limits of the tight budget position, to help key armed forces groups. This information will then be used to help design the North Somerset Community Covenant.

2. Scope
The research aimed to find out from participants:
1) What would benefit them in terms of
   • joining-up the services offered by local public services and other organisations
   • improving participants’ access to these services.

It did this mainly by asking what problems participants face accessing these services. The focus was on services provided by local public services and other organisations, and not, for example, services provided by:
   • large private companies (High Street banks etc)
   • the armed forces
   • central government departments.

Some public services, especially perhaps in health, are provided both centrally and locally. So, while the participants may be interested in discussing centrally-provided (e.g. specialist) health services, this research aimed to focus mainly on what can be improved locally.

Also, in order to provide practical results, the research asked participants to not focus on issues needing major expenditure.

3. Method
As the research was:
   • exploratory (we have no fixed agenda for the outcome), and
   • requires participants to work within the complex parameters and context outlined in section 2 (above)
…the research was qualitative (not generating numbers). Instead it aimed to gather good ideas. In order to be able to test and develop any such ideas, a group discussion will be most effective.

In addition, preceding the groups, we ran a short online survey to:
   • gather some information those who can’t make the group discussions,
   • gather information which can be used as raw material for the discussion groups.

The survey ran from 7 to 25 May. The survey was publicised to serving personnel (regular forces) and their family members by writing to all homes of service personnel known-to-the council through its administration of council services, with a link to the online survey. This was 221 addresses, which could house perhaps 400 eligible respondents. The survey was also publicised via facebook and twitter.

The survey was publicised to veterans by writing to all 210 active members of the Royal Air Force Association, Weston-super-Mare with a link to the online survey and a paper copy of the questionnaire.

There was additional ‘pass on’ publicity by veterans organizations suggesting that the survey was probably publicized to around 300 veterans.

Some 800 members of the North Somerset Citizens’ panel were told about the survey though it is not known how many of them had military links and so were eligible to respond.
In total there were 47 responses to the survey, 42 online and 5 by pen and paper or by phone. From an estimated reach of around 700 eligible respondents, this is disappointing, representing a response rate of lower than 10%.

Of the 47 respondents:

- 7 were serving personnel (regular forces)
- 5 were members of the family of serving personnel (regular forces)
- 35 were veterans (regular forces)

All but one of the serving personnel were under 40.

Family member’s age ranged widely. Most veterans were over 60, with only one being under 40.

4. Whose views?

Given the timeframe for this research (6 weeks) and, especially the finances (under £500, 25 or so staff-hours) we had to limit the scope. To this end we focussed the research only among North Somerset residents in three groups:

- Serving personnel (regular forces)
- Their families
- Veterans (regular forces)

Given the likely differences in lifestage and what they need from public services (partly due to age profiles), the research was structured to address two of these groups separately. So there was one group discussion among:

- serving personnel (regular forces) and their families, and another among
- veterans (regular forces).

See below for discussion of which parts of the Armed Forces Community are not covered by this research.

5. Sampling

**Serving personnel (regular forces) and their families**

The council has access to

- a list of addresses of serving personnel (addresses registered for Leisure Key Card Scheme (allows free access to North Somerset leisure centres). This amounts to 152 addresses, housing a few hundred people eligible for this research.
- 69 addresses which receive the MoD pupil premium (for children of serving regular forces).

These lists are though to comprise nearly all the addresses of serving personnel who live in North Somerset. We wrote to all 221 of the above addresses:

- inviting them to come to a group discussion,
- inviting them to take part in the survey.

**Veterans**

The Royal Air Force Association (Weston-super-Mare) gave permission to write to all of their 210 active members. In addition the Banwell branch of the Royal British Legion canvassed their members (numbers unknown). The letters invited them to:

- come to a group discussion (evening of 28 May 2012)
- to take part in the online survey.
In addition, given the age profile of the RAFA membership we included a paper copy of the survey in with the 210 RAFA letters.

6. Logistics
Groups were arranged for the convenience of participants:

- on weekday evenings in a convenient location. For cost reasons they will be in council premises if practical.
- in Weston-super-Mare. Most service personnel addresses are in Weston-super-Mare, minimising travel times for participants and cutting down on potential no-shows.

Each group was between 6 and 9 participants. Each group ran for a minimum of 1.5 hours, and were audio taped. No cash incentive was provided for participants.

While some respondent-information was required, in order to set up the groups, this was deleted after the groups had taken place, except by explicit permission from those participants who wanted to stay in touch, keeping the analysis and reporting anonymous and outside of the scope of the Data Protection Act, thus simplifying the process and allowing us to offer a guarantee of anonymity to respondents.

7. Scope of the sample
The sample definition in this project excludes or does not include some groups who are included or prioritised in the Armed Forces Covenant (AFC)\(^2\). The AFC covers the ‘Armed Forces Community’ (AFC). The covenant defines this group as “all those towards whom the nation has a moral obligation due to Service in HM Armed Forces”.

The AFC includes (but is not necessarily limited to):

1. Regular personnel
2. Families of regular personnel
3. Reservists
4. Families of reservists
5. Veterans
6. Families of veterans
7. Bereaved (the immediate family of service personnel or veterans who have died, whether or not that death has any connection with Service)

This is a large group comprising, by MoD estimates, some 10 million people, or about one in every six UK residents and possibly a higher proportion of North Somerset residents. As well as the seven groups above, the AFC discusses a hierarchy of support with “with members of certain groups receiving more levels of support than others” and, as a rough guide, suggesting the following hierarchy with those higher up the list deserving more support and therefore presumably a more central place in the Community Covenant.

1. injured personnel
2. injured veterans
3. bereaved due to service
4. serving personnel
5. veterans and families (pensions)
6. families
7. reservists

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Combining the two lists gives us a list of groups whose views we may, in an ideal world, need to take into account in our Community Covenant. The list below is not an MoD list but a composite based on MoD sources (the AFC), attempting to reflect the AFC statement that “the level of support made available… will take into account the need for assistance, and may also reflect what an individual has contributed through Service”.

1. Injured personnel
2. Injured veterans
3. Bereaved due to service
4. Non-injured regular personnel
5. Families of regular personnel (other than those bereaved-due-to-service
6. Reservists
7. Families of reservists
8. Veterans
9. Bereaved families of veterans)
10. Families of veterans
11. Bereaved (the immediate family of service personnel or veterans who have died, but not died in service)

For more information about this research, contact:

Dave Ostry
Research and Information Officer
North Somerset Council
dave.ostry@n-somerset.gov.uk
Tel: 01275 888 762.

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