12th September 2011

Dear Mr Jenner,

Inquiry into support for armed forces veterans in Wales – Memorandum of evidence from the British Medical Association

Please find enclosed a response from the British Medical Association to the above inquiry. If required, we would be pleased to further expand on the issues raised in the submission.

For any further queries regarding this submission, please do not hesitate to contact Amber Cobb (email: acobb@bma.org.uk or tel: 0207 383 6520).

Yours sincerely,

Sheridan Hammond
Head of Career Doctors and Independent Medical Services Division
British Medical Association
About the BMA

1. The British Medical Association (BMA) is a voluntary professional association and an independent trade union which represents doctors from all branches of medicine all over the UK. It has a total membership of over 140,000, including 7,000 in Wales.

2. The BMA welcomes the opportunity to inform the Welsh Affairs Committee inquiry into support for armed forces veterans in Wales.

The provision of medical and mental health services for veterans in Wales, including cross-border implications

3. The healthcare needs of veterans can be very complex. Some problems, such as hearing loss and Post-Traumatic Stress disorder, only become apparent many years after leaving the armed forces. Service related injuries and health needs can present in many different forms which clinicians have to identify and manage appropriately. The tendency for co-morbidity is a complicating factor as accurate diagnosis and holistic treatment can often prove challenging.

4. It is important that NHS GPs and civilian medical staff are trained to understand the experiences of armed forces veterans. BMA members serving in the armed forces have reported that their own military experience proved helpful when treating veterans. However, there are not enough former-military medical personnel to cover the health needs of the veteran population. We would therefore welcome increased investment in education and training around veterans issues for all healthcare professionals.

5. Furthermore, there is very little provision or support for awareness-raising or sign-posting of the services available to veterans. For example, many practitioners are still unaware of veterans’ eligibility for NHS priority treatment for service related injuries. In order to access priority treatment, GPs must make it clear at the time of referral that the patient is eligible for priority treatment. Secondary care clinicians (i.e. clinicians working in hospitals) must then prioritise that patient above other patients with the same level of clinical need. In 2010, the BMA wrote to all Local Medical Committees in Wales to remind clinicians of these arrangements and to raise awareness of this policy.

6. Improving awareness of the services available to veterans ensures parity in both quality and access to these services. We feel that, at a national level, the NHS in Wales could do more to facilitate this. The development of an online learning tool / resource centre aimed solely at healthcare professionals may be one way of improving signposting and raising awareness among the medical profession and other health care professions. There is also a role for the new Health Boards Veterans and Armed Forces Champions to ensure that information about local services is disseminated to relevant healthcare staff. The BMA would welcome a meeting with NHS Wales and the Veterans and Armed Forces Champions to discuss how this might be achieved.

Mental Health services

7. Mental health services for veterans across Wales are at best patchy and significant variations exist. Cardiff and the Vale is the only Health Board to have a dedicated traumatic stress service – although the All-Wales Veterans’ Health and Wellbeing Service should go some way to address this discrepancy by providing access to dedicated assessment services.

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1 Local Government Information Unit, Honouring the Armed Service Community: https://member.lgiu.org.uk/whatwedo/Publications/Documents/Honouring%20the%20armed%20service%20community.pdf
8. It has been recognised for some time that, across Wales, the availability of services for the treatment of mental health conditions such as Post-Traumatic Stress Disorder is limited, and that access to those which do exist can be extremely difficult. The demand for mental health support by veterans has risen, with the charity Combat Stress reporting that since 2005 the number of ex-Service men and women seeking their help has increased by 72%. With British involvement in recent and ongoing conflicts such as Iraq and Afghanistan, it is inevitable that the demand for specialist services – including identifying, assessing, treating and supporting veterans who present with psychological symptoms – will grow.

9. This situation applies across the UK, although efforts have been made to improve the situation, including the establishment of a number of Community Veterans’ Mental Health Service Pilot Projects. One of the two-year pilots was undertaken in the Cardiff and Cwm Taf Health Board areas, and was co-funded by the Welsh Government and the Ministry of Defence. It received approximately 200 veterans referrals during that time.

10. The BMA welcomes the subsequent commitment made by the Welsh Government to roll out a dedicated All-Wales Veterans’ Service based on the success of this pilot. The new service will provide veterans and their carers:

- experiencing mental health and well-being difficulties with a comprehensive assessment to assess their psychological and social needs;
- with the opportunity to be involved in the development of a management plan to meet their health and care needs, and;
- with information on the service and support that they are entitled to in an effort to improve their health and quality of life.

11. We are supportive of the Welsh Government’s development of the Service Specification for Mental Health and Wellbeing Services for Veterans in Wales. It is positive that it has wide applicability through eligibility for any veteran living in Wales who has at least one day’s service. We further welcome the Health Minister’s instruction for the new Health Boards in Wales to appoint a designated Veterans’ and Armed Forces Champion to drive forward improvements.

12. Current services for veterans under the NHS vary across Wales, yet we hope to see substantial improvement with the implementation of the All-Wales Veterans Health and Wellbeing Service. However, with so many demands on NHS Wales at present – including the requirement to take cost cutting and efficiency measures – we are concerned that local facilities may not be able to offer the level of appropriate specialist treatment that veterans require.

13. There should be no barrier for professionals in diagnosing veterans, or any individual, with service-related disorders. Identifying veterans who present with a service-related disorder/s is therefore important in order to gain an accurate understanding of how best to meet their needs and is essential in making evidence-based decisions. The BMA is concerned that, despite assurances from the Ministry of Defence (MoD) that work is underway to improve medical record-sharing, there is still no electronic system in place to identify veterans within the NHS. Currently, identification is dependent on ex-personnel volunteering information. Everyone leaving the armed forces undergoes a final medical examination. The Defence Medical Services (DMS) doctor completes a FMED-133 form for the discharged veteran to give to their civilian GP when they register. In practice, the civilian GP rarely receives this information. The form itself is rudimentary and whilst the civilian GP may write to the armed forces if specific information is required, this also rarely happens. The BMA believes that care for this group would be improved by an electronic system, which would facilitate NHS access to DMS medical records, and vice-versa, subject to patient consent being sought and the necessary patient confidentiality requirements being fulfilled.

14. The significant lack of data held by governments on the number of veterans in Wales, and on those accessing veterans’ services indicates that coordination, planning, monitoring and provision of veterans’ services is being left to the third sector and to local arrangements. We understand that under the new arrangements for an All-Wales Veterans’ Health and Wellbeing Service, Cardiff and the Vale mental
health service will act as a data hub for the whole of Wales. If a robust data collection mechanism is
established, and the results utilised effectively, this is a very welcome development.

15. More generally, we believe that it is important for funding allocations to be coordinated so as to
ensure parity and joined up services across Wales. All relevant organisations and bodies should be
involved in planning and designing responsive and effective services locally to avoid unnecessary
duplications and to be responsive to local needs and demographics. The introduction of Veterans’ and
Armed Forces Champions will go some way to ensuring that the needs of veterans are represented in
local planning; however, closer liaison between the Welsh Government, the MoD and the NHS in Wales is
still required if services are to work to the benefit of service personnel once they are discharged.

Armed Forces, their Families and Veterans’, highlighted the need to improve information on ‘how
veterans’ health needs differ from those of the population generally’. That paper was endorsed by the
previous Welsh Assembly Government. It is clear, especially in terms of data collection, that all four UK
health departments would benefit from greater cooperation with the MoD.

The impact on Welsh veterans of any legally-enshrined military covenant and obligations as it
relates to veterans

17. The BMA welcomes the codification of the commitment to produce an armed forces covenant report
considering the effects of membership, or former membership of the armed forces on service personnel
in the fields of healthcare, education and housing, as proposed in the Armed Forces Bill, which is
currently being scrutinised by the House of Lords. Professor Hew Strachan’s independent report of the
Task Force on the Military Covenant makes a number of recommendations which the BMA supports,
such as greater integration of DMS and NHS services and increasing support for Reservists following
deployment.