

East Riding Military Needs Assessment

Spring 2017



**Community
Covenant**



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SUMMARY

The council has a strong tradition of supporting the local military community and the signing of the Community Covenant in July 2012 allowed organisations, including the council to formally show their support.

The Community Covenant aims to ensure that the military community, including current and ex-service personnel and their families face no disadvantage when engaging in civilian life.

The East Riding does not, however, have a particularly large active military community, making it more difficult to evidence need for funding and provision of specific services. This is an issue for the East Riding Community Covenant.

A lack of reliable data, the transient nature of the military community, and the reluctance of many current and ex-military members to engage/be identified have all contributed to this lack of evidence of specific needs. Similarly, quantifying the number of ex-service personnel who live in the East Riding is very difficult.

In 2015 the national Covenant Fund, set up to support local Covenants, was re-launched with the government committing an annual amount of £10 million. In order to increase the likelihood of submitting a successful bid to this fund, specific needs in the local area must be evidenced. This needs assessment has been undertaken with the aim of contributing to this.

WHY THIS TOPIC WAS CHOSEN

Following the signing of the East Riding of Yorkshire Covenant (the Covenant), in 2012, an East Riding Community Covenant group was created with representatives from various local statutory organisations, voluntary groups and military charities. The group began to consider what, if any, particular issues the local military community were facing (that differed from that of the general population) and look to develop solutions. Key relationships were established, including with the local military base at the Defence School of Transport, Leconfield.

Following initial workshop activity, five thematic priority areas were agreed by the group, each with a corresponding sub group and action plan. The five themes were;

- Health
- Housing
- money matters and financial capability
- employment, training and adult education
- education and childcare.

Whilst good progress was made through this format, including two successful funding bids for play equipment in Leconfield, by the end of 2015 most of the groups had stopped meeting regularly. Therefore, in order to ensure progress continued to be made, it was agreed that a new approach was required and in December 2015 a multi-agency workshop was held to look at the options for future partnership working.

At that workshop, group members reflected on the progress made to date and participated in exercises designed to help shape the future of Covenant delivery in the East Riding.

As a result, priority actions have become more focused through a single action plan and delivery group, working across all five thematic areas, which were considered to still remain relevant. This group meets up quarterly to address any issues and report on the progress being made with the action plan.

One of the first actions the group wished to address was to gain a greater understanding of the armed forces community in the East Riding and any specific needs they may have. The group also wished to combine their individual data and intelligence into a single document. It was therefore agreed that a strategic needs assessment should be developed.

RESEARCH APPROACH AND LIMITATIONS

There have been three steps to the methodology of this needs assessment. The first was to undertake desktop research and identify and collate all the data available from Covenant partners. The second step was to conduct a survey, to gain a clearer idea of the needs of the local armed forces community. The final step was to conduct focus group activity with the members of the group. This was further supported by additional desk top research.

Unfortunately, the majority of the Covenant partners were unable to provide data, resulting in the needs assessment being based on regional and national data, which also has limitations.

There are several reasons for this, not least because not all veterans wish to be identified or engage with services.

Although there are very few comprehensive and reliable statistics on veterans in the UK, the Ministry of Defence (MOD) do carry out an annual survey. This survey will be used as a main point of reference along with the Forces in Mind Trust (FiMT) and Local Government Association (LGA) report 'Our Community Our Covenant' (2016).

When reviewing the various statistics and research findings, it has become clear that whilst some have corroborated each other, others have conflicted. This has been acknowledged where appropriate.

THE EAST RIDING GEOGRAPHY & DEMOGRAPHY

The East Riding is one of the largest local authority areas in the Country, covering over 930 square miles with a population of approximately 335,900 people. It comprises over 300 individual settlements, with the largest being Bridlington (35,000 people), Beverley (30,500), Goole (19,500), Driffield (13,000) and the Major Haltemprice Settlements to the west of Hull: Anlaby/Willerby/Kirk Ella (23,500); Cottingham (17,500) and Hessle (14,500). Additionally, around half of our population live in rural and sometimes isolated communities.

The East Riding has a very high proportion of people of pensionable age at 25%, compared to 20% in the Humber and 18% in England. This figure is projected to increase to 33% by 2039.

The largest socio-demographic segment in the East Riding is 'Wealthy Professionals', accounting for 15% of the population, followed by 'Social Housing Single Parents' (11%), 'Comfortable Rural Middle Aged' (10%) and 'Retired with Support Needs' (10%). This demonstrates the diversity of the area, where areas of affluence and deprivation can sit alongside one another.

DEFINITIONS

There are two main terms that require defining in this document; the first is the term ‘veterans’ and the second is the term ‘family members’. This document will use the definitions used in the Armed Forces Covenant.

Veteran – ‘someone who has served for at least a day in HM Armed Forces, whether as a Regular or a Reservist’.

Family members – ‘the spouses, civil partners, and children for whom they are responsible, but can, where appropriate extend to parents, unmarried partners and other family members’.

KEY THEMES

GENERAL

According to the MOD’s annual population survey, there are approximately 2.6 million UK Armed Forces veterans living in households across the United Kingdom. Of these, the majority were male and approximately half were aged 75 or older.

The survey also estimates the number of veterans living in the Yorkshire and Humber area at 256,000; approximately 6% of the population. This was the third largest figure nationally, after the South West and the South East of England.

This figure is not broken down into smaller geographies. Because the Yorkshire and Humber area is large and diverse, it is difficult to establish if the 6% figure is representative of the East Riding.

The Royal British Legion (RBL) Household Survey (2014) estimates that the Yorkshire and the Humber area has one of the largest proportions of adult veterans in the United Kingdom, supporting the results of the MOD’s Annual Population Survey. Again the information is only provided for the whole of Yorkshire and the Humber.

The Ministry of Defence produces bi-annual diversity statistics for serving personnel which show that 10% of serving military personnel are female and 7% are from black and minority ethnic origins.

HEALTH

General

There are many aspects to the theme of health, including general health and wellbeing, physical and emotional health. Some research has found that there are no notable differences between the long term health conditions of veterans and non-veterans (MOD Annual Population Survey 2015 and the Royal British Legion), whilst others, such as the Health Needs of the Ex-Service Community report (2015), indicated that working age veterans are more susceptible to certain illnesses and long term conditions, such as musculoskeletal disorders and injuries and hearing loss.

This survey estimated, however, that the percentage of retirement age veterans and non-veterans reporting at least one long term health condition was comparable across all regions, with no significant differences between them.

Mental Health

For the six months following discharge, service leavers are able to access the Defence Mental Health Service, after which they return to the care of the NHS. This transition is an important one, and one that allows the service leaver to gradually reintegrate back into civilian life.

The Defence Mental Health Service focusses on prevention and resilience as well as providing services directly to those who need it. Personnel receive training and briefings to increase their awareness of mental health issues and stress management. This

takes place throughout a career, but particularly prior to and after deployment on operations.

All Medical Officers, Combat Medical Assistants and Nurses are trained to recognise the signs of mental illness, and Officers, Junior and Senior Non-Commissioned Officers are routinely trained in methods of suicide prevention and stress management.

'Decompression' is provided as a scheduled period following a deployment on operations, in which personnel are given time to mentally and physically unwind, with time to talk to colleagues and superiors about their experiences.

Families of returning personnel are offered presentations and issued with leaflets to educate them about the possible after-effects of a deployment on operations. Welfare Officers, Padres and other associated organisations also provide information to families by email, through support groups, Regimental systems, etc.

Increasing use is now made of Trauma Risk Management (TRiM), a model of peer-group mentoring and support for use in the aftermath of traumatic events.

Post-Traumatic Stress Disorder (PTSD) is one of the mental illnesses most associated with military service, but there are a range of other more common mental illnesses which might affect Service and ex-Service personnel. These include depression, feelings of anxiety, panic attacks and substance misuse, most commonly alcohol misuse.

According to Combat Stress (the UK's leading Veterans' mental health charity), PTSD is a problem for a minority of Veterans. The charity believe that around 1 in 25 Veterans of the Iraq and

Afghanistan wars are likely to develop PTSD, similar to levels recorded in the general public.

However, while the rate of occurrence is similar, the complexity of the disorder tends to be much greater in Veterans. Furthermore, it often occurs alongside other medical problems such as pain, disability and substance misuse, particularly alcohol misuse. Combat Stress has experienced an increase in the number of referrals year on year, although recent studies suggest this is due to an increased awareness of the symptoms and where to seek help.

A report by Trajectory supports these findings, having found that levels of (PTSD) were fairly low among ex-service personnel, with levels similar to that suffered by the civilian population.

In 2015/16 the number of serving personnel assessed by the MoD as having a mental disorder was as low as 3.2%. Analysis of Armed Forces Compensation Scheme statistics by The Independent showed that the annual number of mental disorder pay-outs increased by 379 per cent, from 121 in 2009-2010 to 580 in 2015-16, the highest total in the 11 years of the scheme.

The claims are not broken down by type of mental disorder or whether a claimant saw combat, but mental health professionals suggest the timing of the increase mirrors the expected time lag before Afghanistan and Iraq veterans started to experience symptoms and seek help.

According to the NHS Five Year Forward View for Mental Health Plan, only half of veterans who experience mental health problems seek help from the NHS, and those that do may not receive the right specialist care.

The Health Needs of the Ex-Service Community report (2015) suggests that veterans in the Yorkshire and Humber area are more

likely to report coming from challenging family backgrounds and are more likely to report a higher instance of mental illness.

Unfortunately it has not been possible to obtain specific local data regarding mental health needs of East Riding veterans.

Substance Misuse

Researchers from Northumbria University, commissioned by the Royal British Legion have examined the reasons why veterans are reluctant to seek/do not receive adequate support for alcohol misuse. Their findings warned of a potential 'ticking time bomb' that will see veterans from recent conflicts (i.e Afghanistan and Iraq) hit 'crisis point' in the coming years as a result of alcohol misuse.

The study is very limited however, as it covered interviews with 31 British veterans, including 20 who had alcohol issues, and six senior health and social care commissioners based in the North East.

The study recommended that health providers, including Clinical Commissioning Groups, NHS England and local authorities should work more collaboratively alongside the Ministry of Defence to understand and meet the unique needs of former British military personnel when it comes to alcohol dependency and misuse and to provide a more holistic support service. It found:

- 15/20 veterans failed to get support for at least 17 years
- The longest wait after service for help was 30 years
- 4/20 received help up to 10 years after leaving service
- 1/20 received help between 10-17 years after leaving service
- The mean time for getting help was 18 years
- 15/20 hit crisis point for homelessness
- 3/20 hit crisis point going through the criminal justice system.

The health needs of the ex-Service community survey 2015 found that there was a slightly higher number of veterans in the Yorkshire and Humber area with alcohol misuse at 10% compared to the national average of 9%. Other research, such as the work by Iversen et al (2007) and the King's Centre for Military Health Research corroborates this figure.

The MOD Annual Population Survey (2015) looked at the smoking patterns of veterans, and found that those aged between 16-34 and 50-64 were more likely to have smoked. In addition, veterans who had smoked were significantly more likely to report suffering from respiratory problems and mental health conditions, compared to non-smoking veterans. Veterans who had smoked were also more likely to report that their general health was 'bad' and that their health concerns limited their day to day activities.

Research carried out by Swansea University suggested that during the transition period, veterans may be vulnerable to high risk-behaviours such as alcohol and substance misuse and excessive gambling. However, other organisations, such as the Centre for Social Justice and Gamble Aware, have advised that more research needs to be carried out to allow for a better understanding of some veterans needs and issues.

Disability

The Ministry of Defence does not measure disability of its serving forces, but does record figures for medical discharges. For the period 2003-14, a total of 16,330 medical discharges were recorded. The MOD recognises that due to time lags between symptoms and formal diagnosis, for example, it is not always possible to record the reason for discharge, although the vast

majority were. Of the 16,330 discharges, a high proportion (9,810) were due to musculo-skeletal disorders and injuries. The next highest recorded category was mental and behavioural disorders at 1,966.

Research has suggested that a tenth of veterans living in England felt that they were struggling to cope living independently (Health needs of the ex-Service community 2015). The Yorkshire and the Humber area was found to have one of the highest rates. However, as health generally tends to deteriorate with age, the age profile of veterans is likely to match this.

Currently (June 2017), a total of 73 people hold a blue badge and receive a war pensioner's mobility supplement in the East Riding. This is a small figure considering in 2015 there were approximately 82,596 people of pensionable age in the East Riding.

HOUSING

The provision of good quality living accommodation for service personnel and their families is an important priority for the Ministry of Defence, and is often cited as one of the attractions of joining up. The MOD's Defence Infrastructure Organisation (DIO) manages around 50,000 properties in the UK.

Subsidised accommodation is provided for regular personnel, their spouses and dependent children. According to the Government's new-employment-model, whilst civilians commit approximately 30-40% of their pay on rent, service personnel pay significantly less at approximately 10%.

The accommodation is usually close to, or within 10 miles of, their duty station. When personnel are assigned to a new posting, the DIO will manage the process, including identifying new accommodation, which will be ready to move into. The DIO meet the costs of moving personal possessions, within certain limits.

However, not all service men and women live in such accommodation. Existing householders may decide to continue living in their own home, and some choose to move into private accommodation (rented or owner occupied) during their career.

For many, leaving the Forces not only means having to find a new home, but also managing expectation and the process (be it rental or purchase), for the first time. Due to the subsidies outlined above and the commitment to good quality housing, expectations can be high when compared to the realities of civilian housing.

Forces Help To Buy Scheme

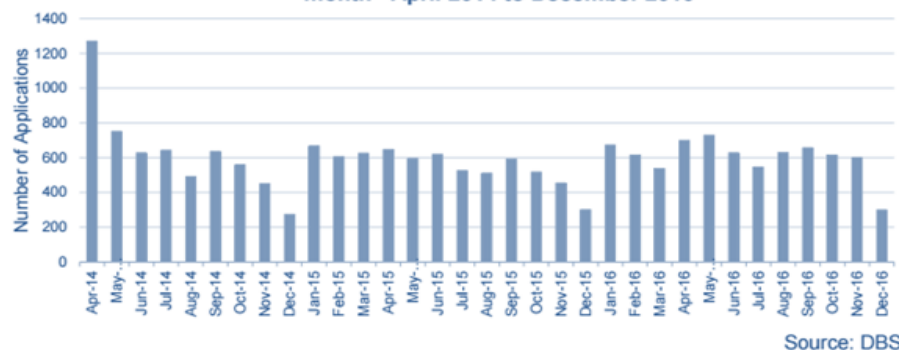
As part of a wider government initiative to increase home ownership amongst the general population, the need to increase home ownership amongst members of the armed forces was identified. This led to the creation of the Forces Help to Buy Scheme, launched in April 2014. The scheme was initially intended to run for three years, but has been extended for a further year through to 2018.

Nationally, data is available for the schemes three key outcomes; the number of first stage applications (initial eligibility checks), the number of second stage applications (detailed checks), and the number of payments made under the scheme to Service personnel.

Following an initial spike when the scheme launched, numbers of applications have remained reasonably consistent. For example, in October 2016, 614 first stage applications had been received, 318 second stage applications, and 310 payments made to Service personnel. December of each year shows a significant reduction in the numbers of initial applications, with higher numbers in the summer months. This tends to follow general patterns of house purchasing in the wider population.

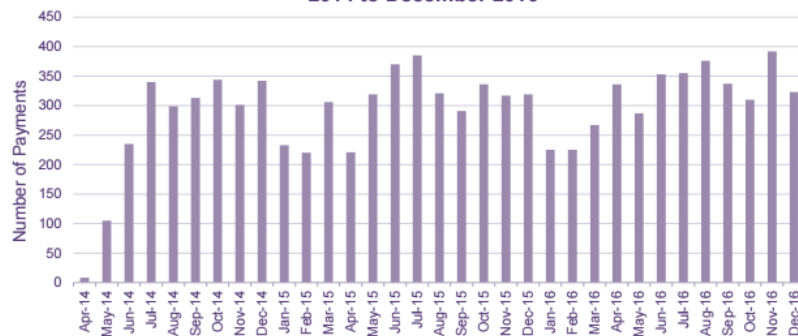
Since the scheme began, there have been 19,585 first stage applications, of which 11,687 have proceeded to the second stage. Of this, approximately 9,700 applicants have received payments,

Figure 1: Number of FHTB First Stage Applications received per month - April 2014 to December 2016



totalling £147 million, which provides an average of approximately £15,100 per claim.

Figure 3: Number of FHTB Payments made per month - April 2014 to December 2016



Council Housing Policy

The Council Housing Allocations Policy was amended in 2012 (to coincide with the signing of the Covenant), to ensure that members of the armed forces and the reserve forces are appropriately

prioritised when applying for council housing. Since this time a representative from the housing department within the council has attended the delivery group meetings. This allows the Covenant members to ensure that the commitments made under the Covenant are upheld and, it also allows the group to deal with housing issues as and when they are raised.

Homelessness

The Department for Communities and Local Government (DCLG) estimate that in the months July to September 2016, local authorities accepted 14,930 households as being statutorily homeless. This figure is down 1% on the previous quarter and up 2% on the same quarter of the previous year. Of the 29,400 housing assistance applications received, 51% were found to be 'owed a main homelessness duty'. However, there are no figures for how many of the people 'owed a duty' were owed such because they had served in the Armed Forces.

The national Rough Sleeping figures for Autumn 2016 estimated that 4,134 people were counted as sleeping rough. This figure is up 16% from the same count taken in autumn 2015, which suggests an increase in homelessness; however, there is no way of knowing how this increase will have affected the military community. Furthermore, a report by Trajectory suggests that there is no clear evidence that serving in the Armed Forces increases or decreases a person's chance of becoming homeless when leaving the services.

Homelessness in the East Riding

In 2015-16, 258 households were classed as homeless and in priority need in the East Riding. This is compared to 57,750 homeless households across England. Again it is not known if any of the households identified within the East Riding had a military connection.

FINANCIAL CAPABILITY

Over recent years, a significant amount of work has been carried out within the military to try and encourage members of the armed forces and service leavers to learn more about financial responsibility. The military now hold financial briefings for serving military members to attend throughout their career. These are designed to encourage serving members to take responsibility for their own financial security whilst in service and not wait until they have left/are planning to leave the military.

Advice Services

The MOD and the Royal British Legion have created an online advice service called 'Money Force', offering support to serving personnel and their families. The military are beginning to take a more preventative approach in terms of financial management, but further research would be needed to ascertain whether service personnel are more likely to experience money issues than non-service personnel.

A key element of preventative work is making sure that veterans apply for all the benefits they are eligible for. Ensuring this happens can be difficult; some people may feel as though they don't want to

claim benefits, some might feel as though they shouldn't have to, and others may not be aware of what they are entitled to. Claiming benefits may stop veterans from falling into debt, as well as allowing them access to the support and advice the different benefit departments can offer.

Hull and East Riding Debt Advice

Local Citizen's Advice services currently employ part time Armed Forces Money Advice caseworkers. These caseworkers deal specifically with the armed forces community, be it service personnel, veterans, service leavers or their family members. Since January 2014, CAB have dealt with 428 cases where the client has notified them of a military connection. However, it is not compulsory for clients to tell CAB that they have a military connection.

Figure 2j. Receipt of benefits, pensions or tax credits

		Adult ex-Service community									
	ENG- LAND	NE	NW	YH	EM	WM	EE	LN	SE	SW	
Unweighted base:	1746	114	219	217	166	208	202	81	260	279	
Weighted base:	1595	106	197	207	155	184	199	68	241	237	
	%	%	%	%	%	%	%	%	%	%	
ANY	59	70	55	69	60	56	53	36	58	66	
Any means tested benefits	17	26	13	17	23	21	10	8	11	23	
Any disability related benefits	12	17	15	10	16	13	6	5	8	13	
Any retirement pension*	45	52	38	52	48	39	39	24	48	54	
Any military compensation payments	3	2	5	2	2	3	6	4	3	2	

Base: Adult ex-Service community *State pension, private pension or from your (or spouse's) former employer²

Health Needs of the Ex-Service Community Report
(2015)

As illustrated by the table, 69% of the armed forces community in Yorkshire and the Humber are in receipt of benefits, pensions or tax credits. This figure is higher than the average for England which is 59%. Approximately 17% of veterans in Yorkshire and the Humber claim means tested benefits, which is the same as the average for England. In Yorkshire and the Humber approximately 10% claim disability related benefits, with the average for England being 12%. In addition, approximately 52% claim a type of retirement pension (state pension, private pension or from their own (or their spouse's) former employer), which is higher than the average for England (45%). Approximately 2% of veterans in Yorkshire and the Humber receive military compensation payments, which is slightly lower than the average for England.

Overall, when these figures are compared to the average for England and the averages for each region, it would suggest that the Yorkshire and Humber area has a higher than average benefit take up for the veteran community.

CHILDREN'S SERVICES

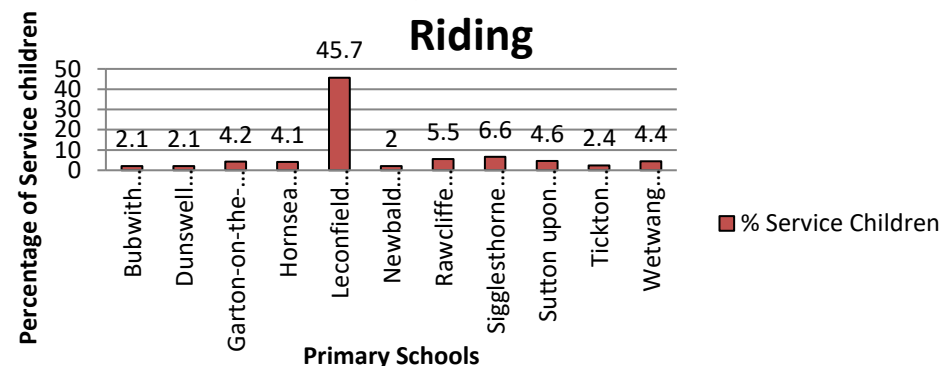
The East Riding is home to the Defence School of Transport (DST), located in Leconfield. Although there is a barracks situated at this site, the majority of service personnel are young, single and temporary, staying briefly to undertake training before returning their permanent stations. There are not, therefore, high numbers of families on the base compared to other forces barracks elsewhere in the country.

Service Pupil Premium

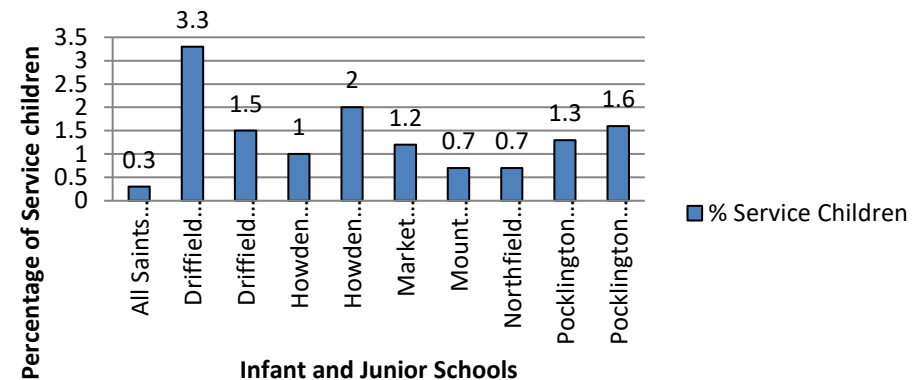
In total, currently there are 45,922 children who attend primary and secondary schools in the East Riding, of which 415 are service children, (which equates to less than 1%).

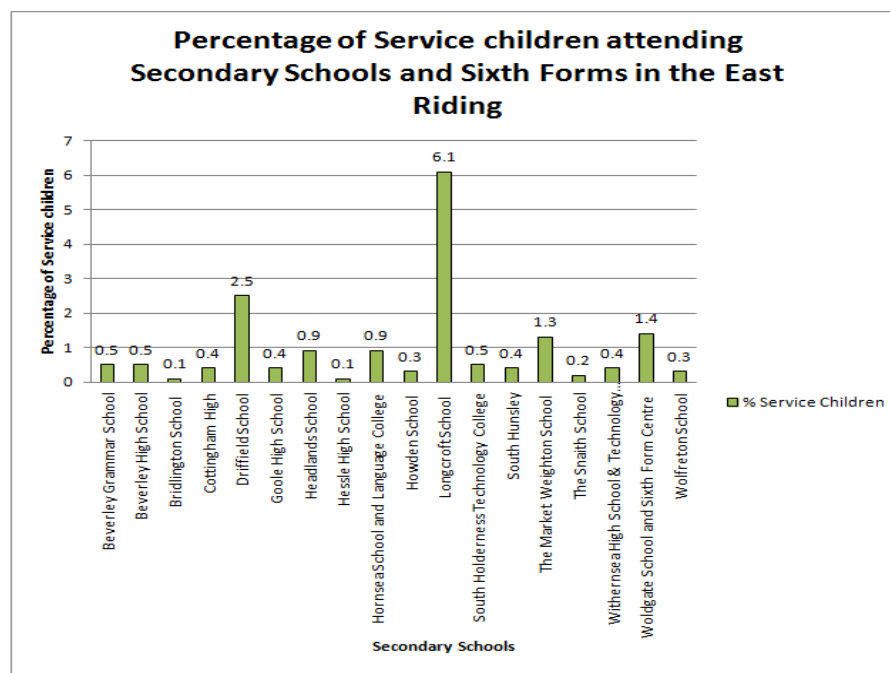
Unsurprisingly, given the location of DST Leconfield, the highest number of service children are located at Leconfield Primary School, with a total of 74 pupils and at Longcroft School, where 73 service children attend. These are the local catchment area schools for the base and the majority of other schools have either no service children in attendance, or under five service children each. The data available showed that no nursery school, special school or pupil referral unit in the East Riding receives the Service Pupil Premium.

Percentage of Service children who attend Primary Schools in the East Riding



Percentage of Service children attending Infant and Junior Schools in the East Riding





The Service Pupil Premium is available for all state schools, academies and free schools in England, and is worth £300 per annum per service child who meets the eligibility criteria. This is available for any child in Reception through to Year 11 and is designed to help the school provide additional support for those who need it.

Due to the high number of primary schools in the East Riding, the graph for primary schools only includes those where the number of service children in attendance reached 2% and over.

ADULT EDUCATION, EMPLOYMENT AND TRAINING

Unemployment across the East Riding is low, with approximately 1.5% of the residents claiming unemployment benefit (January 2017). Anecdotally, there are only a small number of known veterans who attend local Jobcentre Plus offices. However, jobseekers do not have to identify themselves as veterans so this will always affect the accuracy of any figure provided.

Availability of information with regard to the employment needs of the veteran community is quite sparse. However, a report by Trajectory suggests that early service leavers can struggle to find employment after leaving the military, reporting that only 52% were in education, training or employment six months after leaving the military. This may be linked to the fact that early service leavers are not entitled to as much resettlement support as those with a longer service record.

The report compares working age veterans in employment to the general UK population who are of working age. It suggests that male working age veterans are less likely to be in work than males in the general population. In addition, the spouses of veterans, who are mostly female, are also less likely to be in work than women in the general population. The report suggests that one reason for this may be the public's misconception about the ex-forces community.

SURVEY RESULTS

As part of the methodology for this needs assessment, a survey was placed online on partner websites, along with some suggested text. The survey was open from 21 July to 14 October 2016 and in total 9 responses were received, which is acknowledged as being very low (despite action taken by partners to publicise it and encourage completion).

Survey Analysis

The majority of respondents, 7, had lived in the East Riding for six years or longer. Out of the 9 respondents, 8 had served in the Forces, and one had a member of their family who was either currently serving in the forces, or had previously served in the forces. Of the nine, 5 had served in the Army, 3 in the Royal Navy and one in the Royal Marines.

When asked if they felt they received the support they needed, the responses were largely positive, but 3 felt that they needed support, but didn't receive it. The majority of people who did receive support, received it from the Armed Forces, the council and/or from armed forces charities.

This response seems to confirm what has been reported locally and anecdotally, namely that not all service leavers will necessarily need extra support. Caution nevertheless needs to be taken as the level of responses to this survey were very low and cannot therefore be seen as representative of the local armed forces community.

When asked how people prefer to receive help, the top three methods were, face to face, via the web or the internet or, via support groups.

The final question was concerned with whether employers were supportive of the respondent taking time off to fulfil their reservist commitments. The response to this question was that 5 felt that their employers were supportive, and 4 felt that they were not. Again, due to small numbers, this cannot be relied upon, but does point to an area where more research could be beneficial.

THE ERCC DELIVERY GROUP:

Our Community: Our Covenant Report, Self-Assessment Toolkit

The Forces in Mind Trust and the Local Government Association commissioned Shared Intelligence to carry out research into ways of improving the local delivery of the Armed Forces Covenant. The research, which was supported by the Ministry of Defence, was commissioned in the context of concerns nationally that implementation of the Covenant locally was inconsistent.

As part of this work, they developed a tool kit, which they envisaged councils and partners could use this as a way to test their implementation of the Armed Forces Covenant.

The toolkit looked at core infrastructure and four key areas, each with their own criteria based on best practice;

1. Individuals
2. Collaboration
3. Communication
4. Commitment

A desk top self-assessment against the toolkit has been undertaken. A summary of the key points against each key area of the toolkit is set out below.

1. Individuals

As the council hosts the ERCC delivery group meetings, the Corporate Strategy and Intelligence Team, Resource Strategy act as the key point of contact for Covenant related enquiries. Any raised issues are dealt with swiftly, either through the delivery group members, the relevant officer within the council or other partner

organisation. More strategic/ongoing issues are raised at the delivery group meetings.

Following the restructure of the Covenant group in December 2015, a new Armed Forces Champion, Councillor David Elvidge, was appointed.

2. Collaboration

The ERCC delivery group includes representatives from several different military organisations, charities, council departments and partner organisations, both public and private sector. The group work from one all-encompassing action plan, which is updated throughout the year. The action plan lists all the objectives for the group as a whole, and covers all the Covenant areas. All the actions within the plan are assigned to the relevant members from the group, and updates are sought from group members throughout the year. This allows for the group to be responsive to changes, and to take account of feedback. In addition, the members within the group work regionally so are able to share best practice from across the region.

3. Communication

The representatives at the delivery group meetings acts as the key point of contact for Covenant enquiries for their respective areas of expertise. This works well as issues can be dealt with as and when they are raised.

Front line staff have been briefed on the Covenant, although this level of awareness needs to be maintained. There is a web page dedicated to the Covenant on the council website which contains a

range information and links to other sites containing further information and advice.

4. Commitment

One area that has always been a concern for the Covenant group has been the sharing of data. The issue is not so much data capturing, as it is clear that Covenant members do collect data (albeit sometimes limited in detail), but the ability to share that data within a wider network has been problematic. This is addressed within the action plan, and work is underway to progress this issue through formal data sharing agreements.

The restructure of the Covenant group in December 2015 provided an opportunity to clarify what the Covenant was able to offer and, to ensure that there was appropriate membership from the relevant organisations and council departments.

The delivery group has proved to be an effective method in terms of supporting Covenant delivery. In addition to this, the relevant council policies have been updated, where appropriate, to afford the correct amount of priority to/recognise the needs of members of the armed forces community.

CONCLUSION

Overall, the needs assessment suggests that there is some good quality local support available for veterans, including the financial support available for current service personnel, veterans and their family members and local schools provision.

However, one of the main areas of need highlighted by this assessment has been that local data and intelligence is limited in its availability and not always robust in nature. Whilst this position is however, not uncommon and one nationally recognised, the delivery group have identified some opportunities to improve this. When specifically considering health related data, for example, further work would need to be carried out to ensure that all medical professionals are using consistent coding.

This needs assessment has helped to dispel some myths around mental health and homelessness that often surround the military community and has shown that considerable effective support is already available. This is an important conclusion as it helps demonstrate that many service leavers successfully transition/adapt and enjoy a good quality of civilian life.

Whilst not all service leavers will need extra support, it is important that support is there for those who do need it.

Although this needs assessment has highlighted areas of success and areas of concern, it has also highlighted areas that need to be researched further. For example, we still do not know some basic information, such as how many veterans reside in the area, a figure which, it is acknowledged, will prove very difficult to ascertain.

This must of course be balanced against respecting individual and family wishes to remain anonymous, and not be compelled into revealing information about their military background or connection.

In terms of ensuring that current service personnel and veterans and their families receive a consistent level of support across the East Riding and the wider Humber sub region, the successful bid (April 2017) for funding from the National Covenant Fund, will undoubtedly help achieve this.

This project, which involves Hull City Council (lead partner), East Riding of Yorkshire Council, North Lincolnshire Council and North east Lincolnshire Council and Doncaster MBC, has secured £480,000 over two years to develop a sub-regional structure whereby those seeking support and assistance will, in effect, be able to access a common 'front door' across the area covered.

FUTURE ACTIONS/PROPOSED NEXT STEPS

Taking account of what the needs assessment has shown and those steps that the delivery group will need to take to support the delivery of the outcomes set out in the sub regional project, it is recognised that the following actions will need to be taken:

- Examine what, if any, further practical action can be taken to ascertain the numbers of veterans living and working in the East Riding and determine any additional needs they may have.
- Ensure that all relevant information and support available to serving personnel, veterans and their families is appropriately

publicised, easily accessible and consistently available across the Humber sub region.

- Frontline staff are fully briefed on the support available to serving personnel, veterans and their families and how to deliver/sign post to this, with refresher training available as appropriate.
- All partners continue to record and share, as far as possible, information about those they provide services to.
- Create a single point of contact within the East Riding for Community Covenant related work.

Our Community: Our Covenant Report, Self-Assessment Toolkit

Core infrastructure to deliver the Armed Forces Covenant	
Individuals	Collaboration
<ul style="list-style-type: none"> • An elected member Champion • An officer point of contact within the council 	<ul style="list-style-type: none"> • An outward-facing forum which meets regularly and includes the following: military representatives; military charities; public sector representatives; effective council members (senior elected members on cabinet); and the officer champion. • A mechanism for collaboration with partners
Communication	Vision and commitment
<ul style="list-style-type: none"> • A web page or platform with key information and links for members of the Armed Forces Community • A clear public statement of what members of the Armed Forces Community can expect from the council • A route through which concerns can be raised • Training of frontline staff • The production of an annual report highlighting the key actions taken that year 	<ul style="list-style-type: none"> • An action plan which leads to action and is monitored and reviewed • Policy reviews • Enthusiasm and commitment