

CABINET ITEM COVERING SHEET PROFORMA

AGENDA ITEM

REPORT TO CABINET

6 SEPTEMBER 2012

**REPORT OF CORPORATE
MANAGEMENT TEAM**

CABINET DECISION

Leader of Council – Councillor Bob Cook

Adult Services and Health – Lead Cabinet Member – Councillor Jim Beall

Housing and Community Safety – Lead Cabinet Member – Councillor Steve Nelson

Regeneration and Transport – Lead Cabinet Member – Councillor Mike Smith

Access and Communities – Lead Cabinet Member – Councillor David Coleman

Update on progress against Stockton's Armed Forces Community Covenant (including actions from the Regional Scrutiny Review of the Health Needs of the Ex-Service Community)

1. Summary

The final report of the Regional Health Scrutiny Committee following its review of the health needs of ex-service personnel was considered by Cabinet in February 2011. The Joint Committee made a number of recommendations for consideration by the region's local authorities, regional NHS bodies and a number of other organisations. It was agreed to implement those actions applicable to Stockton Council, and monitor them on a six-monthly basis.

Many of these actions have subsequently been incorporated in Stockton's Armed Forces Community Covenant which was signed in March 2012. This progress reports therefore summarises progress against all related issues to provide a summary of the support given to the armed forces community by Stockton Council and partners.

2. Recommendations

It is recommended that:

1. Cabinet note the progress report and support ongoing work to implement the actions.

3. Reasons for the Recommendations/Decision(s)

The final report on the regional scrutiny review on the health needs of ex-service personnel was considered by Cabinet in February 2011. It was agreed to implement and monitor those actions applicable to Stockton Council. In March 2012 the Council signed up to a local Community Covenant and many of the scrutiny recommendations were incorporated into the Covenant.

4. Members' Interests

Members (including co-opted Members) should consider whether they have a personal interest in any item, as defined in **paragraphs 9 and 11** of the Council's code of conduct and, if so, declare the existence and nature of that interest in accordance with and/or taking account of **paragraphs 12 - 17** of the code.

Where a Member regards him/herself as having a personal interest, as described in **paragraph 16** of the code, in any business of the Council he/she must then, **in accordance with paragraph 18** of the code, consider whether that interest is one which a member of the public, with knowledge of the relevant facts, would reasonably regard as so significant that it is likely to prejudice the Member's judgement of the public interest and the business:-

- affects the members financial position or the financial position of a person or body described in **paragraph 17** of the code, or
- relates to the determining of any approval, consent, licence, permission or registration in relation to the member or any person or body described in **paragraph 17** of the code.

A Member with a personal interest, as described in **paragraph 18** of the code, may attend the meeting but must not take part in the consideration and voting upon the relevant item of business. However, a member with such an interest may make representations, answer questions or give evidence relating to that business before the business is considered or voted on, provided the public are also allowed to attend the meeting for the same purpose whether under a statutory right or otherwise (**paragraph 19** of the code)

Members may participate in any discussion and vote on a matter in which they have an interest, as described in **paragraph 18** of the code, where that interest relates to functions of the Council detailed in **paragraph 20** of the code.

Disclosable Pecuniary Interests

It is a criminal offence for a member to participate in any discussion or vote on a matter in which he/she has a disclosable pecuniary interest (and where an appropriate dispensation has not been granted) **paragraph 21** of the code.

Members are required to comply with any procedural rule adopted by the Council which requires a member to leave the meeting room whilst the meeting is discussing a matter in which that member has a disclosable pecuniary interest (**paragraph 22** of the code).

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CABINET DECISION

UPDATE ON PROGRESS AGAINST STOCKTON'S ARMED FORCES COMMUNITY COVENANT (INCLUDING ACTIONS FROM THE REGIONAL SCRUTINY REVIEW OF THE HEALTH NEEDS OF THE EX-SERVICE COMMUNITY)

SUMMARY

This report summarises progress so far on the implementation of Stockton's Armed Forces Community Covenant.

RECOMMENDATIONS

It is recommended that:

1. Cabinet note the progress report and support ongoing work to implement the actions.

DETAIL

1. In March 2012 Stockton Council and partners signed the Stockton Armed Forces Community Covenant. The Covenant is intended to encourage support for the Armed Forces working and residing in the Borough of Stockton-on-Tees, and to recognise and remember the sacrifices made by members of the community.
2. The Covenant commits the Council and Renaissance partners to:
 - support employees who volunteer for reserve duties;
 - ensure that the voice of serving and ex-service personnel is heard through the Council's engagement mechanisms;
 - report annually to Council on the impact of the Covenant;
 - identify key officer and Member champions, and implement the other recommendations of the Regional Scrutiny Review of the Health Needs of the Ex-Service Community.
3. The Armed Forces have in return committed to deliver annual updates to both Members and updates on operational experiences and policy changes, and to be involved in community activities and events.

4. The final report of the Regional Health Scrutiny Committee following its review of the health needs of ex-service personnel was considered by Cabinet in February 2011. The review was an innovative and wide ranging piece of work covering physical, mental and socio-economic needs. The project received contributions from all 12 of the region's local authorities, the Ministry of Health, Department of Health, NHS bodies, and ex-service charities and personnel themselves, amongst others.
5. The review's 47 recommendations sought to ensure that ex-service personnel and their families are not disadvantaged due to their service in the Armed Forces.
6. Many of the recommendations were for external organisations (eg. NHS), or for local authorities but could be undertaken on a regional basis. For example, ANEC has agreed to take forward work in relation to improving the quality of the data flow between the armed forces and local authorities. In relation to the recommendations applicable to Stockton Council, in line with the Cabinet decision an action plan was agreed with officers and relevant Cabinet Members.
7. Overall the proposals sought to utilise existing generic support where possible, whilst recognising that through better identification of clients within services, existing services will be better able to meet their needs, and potentially refer clients to other services if appropriate. The Policy Officers' Group was tasked with co-ordinating the implementation of the local action plan. It was agreed to monitor this on a six-monthly basis.
8. The definition of someone who is ex-Service, or a veteran, is taken to mean those who have served in the UK Armed Forces, whether regular or reserve forces, at any time and irrespective of length of service, and also includes those who served in the Merchant Navy in support of legally defined military operations (MoD).
9. These actions were subsequently incorporated into Stockton's Community Covenant which recognises the contribution made by the Armed Forces as a whole. This report therefore provides an overview of all measures taken to date to support the armed forces community in Stockton-on-Tees. The annual report to Council on the impact of the Covenant is scheduled for March 2013, and this report will support that process.
10. A report summarising progress to date is attached at **Appendix 1**. This also highlights were actions originated from the regional review, as the Regional Health Scrutiny Committee continues to monitor them on a region-wide basis, and this report will form the basis of Stockton's submission to the next meeting which is due in September.
11. There has been progress on a number of issues, and to further embed good practice it has been agreed to hold a seminar style event in order to bring together relevant service areas and key stakeholders. One of the intended outcomes for this is a better awareness of the range of information that is being collected, and how this can be brought together to improve services.

FINANCIAL IMPLICATIONS

12. The actions are to be met through existing services and budgets. The preventative nature of the actions, greater awareness of dedicated charitable services, available to ex-service personnel and signposting to these, and more efficient referral processes, could lead to savings for local authorities and partner organisations.

LEGAL IMPLICATIONS

13. There are no legal implications at this stage.

RISK ASSESSMENT

13. This review of the health needs of the ex-service community is categorised as low to medium risk. Existing management systems and daily routine activities are sufficient to control and reduce risk. There may be a reputational risk should the Council fail to make progress on previously agreed recommendations.

SUSTAINABLE COMMUNITY STRATEGY IMPLICATIONS

14. This report has particular relevance to the following themes: Economic Regeneration and Transport (in relation to the employability of the ex-service community, and the ability of reservists to continue in mainstream employment), Healthier Communities and Adults (in relation to general health needs of the community), and Environment and Housing (in relation to the housing needs of the community).
15. The supporting themes of Stronger Communities (in relation to the involvement of voluntary and community groups in the provision of services for ex-service personnel, the aim of promoting equality of opportunity for all sections of society, community involvement events and recognition for the armed forces), and Older Adults (in relation to services for older ex-service personnel) are also relevant.
16. In relation to Community Safety, the full regional report recognised the ongoing efforts of the National Offender Management Service to better understand, and prevent, the presence of ex-service personnel in the criminal justice system.

EQUALITIES IMPACT ASSESSMENT

17. This report is a progress report on previously agreed recommendations and commitments and is therefore not subject to an Equality Impact Assessment.

CONSULTATION INCLUDING WARD/COUNCILLORS

18. This progress report has been co-ordinated by Policy Officers' Group, and will be reported to Cabinet, Adult Services and Health Select Committee, and Executive Scrutiny Committee, and submitted to the Regional Health Scrutiny Committee (in relation to relevant actions originating from the regional review).

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Education related? No

Background Papers

- Regional Health Scrutiny Committee Final Report, January 2011
- Cabinet Report – Regional Review of Health Needs of Ex-Service Personnel, February 2011

Ward(s) and Ward Councillors Not ward specific

Property No property implications