

AGENDA ITEM

REPORT TO EXECUTIVE SCRUTINY

27 MARCH 2012

REPORT OF CORPORATE MANAGEMENT TEAM

REGIONAL SCRUTINY REVIEW OF THE HEALTH NEEDS OF EX-SERVICE COMMUNITY - PROGRESS REPORT ON ACTIONS APPLICABLE TO STOCKTON COUNCIL

SUMMARY

This report summarises progress so far on the implementation of the actions applicable to Stockton Council following the regional review of the health needs of the ex-service community.

RECOMMENDATIONS

It is recommended that:

1. Executive Scrutiny Committee consider the progress report.

DETAIL

1. 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. The review's recommendations were consistent with national government policy, the NHS's Operating Framework, and the Government's Task Force on the Military Covenant (report published December 2010).
2. The Joint Committee made 47 recommendations for consideration by the region's local authorities, regional NHS bodies and a number of other organisations. The recommendations sought to ensure that ex-service personnel and their families are not disadvantaged due to their service in the Armed Forces. The report has been well received by the Armed Forces, and Department of Health, and specifically welcomed by both Paul Burstow, Minister for Care Services, and Simon Burns, Minister for Health.
3. Many of the recommendations were for external organisations (eg. NHS), or for local authorities but could be undertaken on a regional basis. Further work has taken place to determine at which level individual recommendations should be taken forward. 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.
4. 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. At the

time of the report the issues were considered to be relevant for the following Cabinet portfolios: Adult Services and Health, Regeneration and Transport, and Housing and Community Safety.

5. Overall the proposals seek 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 have been tasked with co-ordinating the implementation of the local action plan.
6. A progress report summarising progress to date is attached at **Appendix 1**. Progress has been made in relation to the JSNA, a number of service areas are improving their data collection, it has been agreed with Catalyst to use the Service Navigator to provide additional assistance to those who need extra help gaining support, and Member Champions have been appointed (now including the Cabinet Member for Access and Communities).
7. The Regional Health Scrutiny Committee has previously agreed to formally monitor progress against its recommendations on a six-monthly basis. It will next meet to do this on 16 April, and the information attached to this report will be used to inform the update that will be considered by the Regional Committee.
8. Subsequent to the completion of the regional review, the Government has promoted the Armed Forces Community Covenant scheme. Community Covenants aim to encourage targeted support for the local Service and veteran community at the same time as being a two way agreement with local Service personnel being encouraged to support the community.
9. At the meeting of 1 December, Council committed to adopting a Community Covenant with local partners and representatives of the Armed Forces, and this took place at the meeting of 7 March 2012. Many of the actions in the Covenant are based on the implementation of the actions emanating from the scrutiny review.

FINANCIAL IMPLICATIONS

10. The actions are to be met through existing services and budgets. The preventative nature of the recommendations, 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

11. There are no legal implications at this stage.

RISK ASSESSMENT

12. 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

13. This report has particular relevance to the following themes: Economic Regeneration and Transport (in relation to the employability of the ex-service community), 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).
14. 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, and the aim of promoting equality of opportunity for all sections of society), and Older Adults (in relation to services for older ex-service personnel) are also relevant.
15. 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

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

CONSULTATION INCLUDING WARD/COUNCILLORS

17. During the regional project and in preparation of the Regional Committee's final report consultation took place with a wide range of organisations. The subsequent local action plan was drawn up in consultation with relevant Cabinet Members, CMT, relevant service areas, and Catalyst.
18. This progress report has been co-ordinated by Policy Officers' Group, and has been reported to Cabinet, Adult Services and Health Select Committee, and Executive Scrutiny Committee, before being submitted to the Regional Health Scrutiny Committee.

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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