



Ministry
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Attendees of Lived Experience Event

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VETERANS LIVED EXPERIENCE EVENT – 21 SEP 22

1. Recognising the level of concern being raised over services provided by Veterans UK, we hosted a Veterans' Lived Experience event on 21 Sep 22. The aim of the day; to provide Veterans with the opportunity to voice their concerns, evidenced through their experiences, so that the staff of Veterans UK and policy owners in the Armed Forces People Support Team (AFPSp) could better understand the challenges and learn from the feedback of claimants. I recognise it was extremely difficult for those who have already suffered, to re-live their experiences but I am hugely grateful to the Veterans who took the time to engage and help us identify areas that need to be improved. In my view, it was also a critical first step in rebuilding trust and transparency.
2. On the day we were fortunate to be joined by the MOD COO and I know that you have subsequently discussed the day with her. However, I appreciate it is important for you to have visibility of the detailed issues to ensure appropriate holding to account. I have therefore enclosed a log of the points identified and the actions being taken and I would be grateful for your continued oversight as we drive this work forward.
3. In terms of what happens next, I have committed to a series of Lived Experience Events on a quarterly basis and am planning the next occasion for Jan/Feb 23 at the Royal Hospital Chelsea, where we will be looking to invite more Veterans to broaden our understanding of the lived experience.

C L HULL
Brigadier
Head
Veterans UK
DBS Armed Forces & Veterans Services Team
Enclosures:

1. Summary of Points from Lived Experience 21 Sep 22.

Ser	Points and Questions	What is Currently Happening	What Next
1.	Veterans ID Cards - Issue of veteran's verification	MOD and OVA are working at pace to deliver a digital process for veteran verification. By using the new Govt Single Sign On platform we will be able to verify individuals with a matching service record. This will allow either a physical ID card to be produced (if requested by the veteran) and online digital verification which can be used to confirm veteran status. The work is just finishing Alpha phase and producing a model to test for 'Beta' is underway. Given the number of services and benefits available to veterans the ability to confirm status is increasingly important and will allow Third Sector and other stakeholders to offer support to veterans much quicker.	MOD/OVA will progress the project through to Beta
2.	End-to-End Process and Case Studies - Can this be reviewed with potential for a Pilot exercise to look at the end-to-end journey for service leavers.	AFVS are currently working closely with DBS Continuous Improvement (CI) who are looking at both the claims and appeals processes. This is a large piece of work involving both War Pensions and Armed Forces Compensation Scheme processes to see how AFVS can look to simplify and improve things as part of the journey experience.	To approach Continuous Improvement with a view to expand ongoing commission work of the whole end to end process including the transition and pastoral elements. This would involve working with operational and support areas to help identify pain points within the journey.
3.	Welfare Support - 'Face to Face' social interaction between veterans to be recognised as a vital tool in recovery.	Face to face discussions do routinely take place between Veterans Welfare Service / IPC4V team members with veterans as required however we need to ensure AFVS have the right balance between on-line and face to face consultations post Covid.	Veterans Welfare Service will review resource, process and method of delivery for interactions
4.	Personal Recovery Units (PRUs) - Referral to Welfare at the appropriate point.	Those requiring ongoing support post transition should be referred to VWS/DTS via the DRTP 1 protocol listed in JSP 100 prior to discharge however the Defence Recovery Capability Review recognise that there is the potential for	DRCT Programme will continue work in this area. The Veterans Welfare Service (VWS) will review locations and Welfare Manager attendance at PRUs (clinics) to ensure all

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		disparity in approach between the Single Services and between the support provided by specialist Recovery Units and non-specialist units. The transition process is being looked at as part of the wider Defence Recovery Capability Transformation Programme which has recently begun and is looking to streamline the sS recovery pathways into one comprehensive system which should reduce any potential difference in experience depending on location and uniform etc. The aim is to provide consistent and comprehensive support across Defence, in order to ensure that the lived experience for our Wounded Injured and Sick (WIS) Service Personnel is as supportive as possible.	personnel are aware of Veterans Welfare and the services they offer so they can receive the right support.
5.	Individuals with Mental Health issues - Do our systems flag individuals with mental health issues? If not, why not and is there a process to follow when a veteran calls up?	Our systems hold details of all medical conditions claimed by individual members including mental health. Any individual who calls Veterans UK displaying signs of distress or anxiety will be referred to the Veterans Welfare Service (VWS). AFVS also have a dedicated Helpline team who are specially trained in dealing with vulnerable individuals including those with mental health issues. Veterans Welfare Service (VWS) will immediately contact the individual to assess they have the right support and escalate depending on the circumstances.	AFVS are reviewing training and also exploring what other measures we can put in place to support such as additional training for caseworkers. Mental health safeguarding level 2 to be checked for suitability.
6.	Claims Process - Length of time taken resulting in delays.	Ongoing commitment to improving processing times. Also work continues on driving down old case numbers. Notwithstanding this, our current 'On Hand' cases are at their lowest level since 2005 and the case age profile is also at its lowest for the same period. AFVS need to do more, and we will continue to work on reducing the length of time taken. As each case is different our caseworkers assess claims individually to decide what evidence is required. This feeds into the Continuous Improvement recommendations which are being implemented to help progress claims more efficiently.	Operations will continue to actively manage processing times. The Continuous Improvement work currently underway will help to drive efficiency

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7.	Evidence Gathering - The onus being on the veteran to gather information (with a time limit) "If customer is expected to be on a timeline why isn't VUK?"	The majority of relevant evidence is gathered by Veterans UK and there will only be certain occasions where the individual themselves is approached for evidence and every case is different - however when we do need additional information, we need to establish an agreed methodology to agree a reasonable time for evidence to be submitted.					AFVS will work at communicating directly with veterans when this instance arises and discuss how the issue can be resolved		
The tables show the latest statistics for claims which show the improvement in case age and cases over 180 days over the last 12 months									
WPS Claims		Holdings	12mth RYTD ACT (days)	3-month intake	Monthly Average	Average Case Age (days)	Qty >180 days	Target Holdings	Target Average Clearance Time (ACT)
30-Sep-21		4926	169	2644	881	127	1254	5,500 claims	Less than 127 working days
30-Sep-22		5192	137	2873	957	106	730		
AFC Claims		Holdings	12mth RYTD ACT (days)	3-month intake	Monthly Average	Average Case Age (days)	Qty >180 days	Target Holdings	Target Average Clearance Time (ACT)
30-Sep-21		1965	105	1952	650	68	72	3,100 claims	Less than 90 working days
30-Sep-22		3090	94	2507	835	62	48		
8.	Missing Evidence - Difficulties gathering information which is missing or has been redacted.	Veterans UK gather the majority of evidence in order to be able to fully assess claims and want to give reassurance that all documentation is collated and held within the file and is not removed at any point. If an individual states information is missing, we will investigate and help try to locate this to assist individuals as part of the evidence gathering process when requesting service records and medical documents. Where evidence is lost or destroyed - Legislation does allow for Veterans UK to make assumptions in respect of ‘missing’ evidence. Under WPS Article 40/41 we apply ‘reasonable doubt and AFCS Article 60 states that where evidence is “missing” the presumption may turn in favour of the claimant.					AFVS will continue to assist where we can in these cases and look to review any training requirements.		

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9.	DWP Doctors - Being seen by a DWP doctor during the claims process.	The use of DWP Doctors is under review. During the pandemic we changed to asking GPs for assistance. Depending on treatment, this may already be supported by case notes from a treating clinician. A review is ongoing as to whether we need to revert to specific face to face consultations with independent Doctors or whether the GP trial is sufficient.	The review of the trial will continue. Although no specific timeline has been set AFVS aim to complete by early next year.
10.	Managing Expectations - By using better communication with an element of realism.	Along with the publication of Journey Maps on Gov.UK <u>Journey Maps</u> to help explain the process and timelines, correspondence is another area we can look to be more transparent in our communications. Following the success of the Correspondence Review the plan is to review the catalogue of letters across the Schemes.	Further correspondence to be reviewed in collaboration with a selection of veterans, third-party stakeholders, and ex-service organisations
11.	Employment of Military Staff within AFVS - In terms of decision makers who can empathise.	Our new Head of AF&V is military and there are also a number of ex-service members working within the operational teams. All recruitment includes a guaranteed interview for ex-service members who meet the criteria as part of a government initiative to encourage veterans into the Civil Service. We also work closely with all military staff in the Armed Forces element of the business. Both civilian and ex-military staff are recruited on their ability and skills to ensure we have the right people in place to best deliver our services. The values we share in DBS reflect those of the MOD and align to the UK Civil Service Core Values of 'Honesty, Integrity, Impartiality and Objectivity'. Both adhere to the same standards, values and culture embedded within AF&V.	AFVS will continue to see how we can encourage both military and non-military future employees to ensure we have the right balance of skills and expertise.
12.	Case Management - Review of how we manage cases and how it moves through the system. Is there a better way?	Case workers have their ownership of cases that they action. During staff absences these cases may be picked up by other individuals to prevent delays to customers. There are different caseworkers for reconsiderations and appeals. We believe the current system best supports the individual whilst ensuring we have the right expertise dealing with the case and speed of processing. However, given the concerns raised we will review	This will form part of the ongoing Continuous Improvement (CI) Review into the End-to-End Process

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		this process and see if there are other ways this could be improved.	
13.	Staff Training at Veterans UK - What training is provided in terms of Military Culture and Vulnerable People?	<p>Military culture training for lay and medical staff: Including learning about experiences of the veterans/bringing in veterans and charities to talk about the work they do etc. An ex-service team member has been asked to look at guidance for all staff re: transition from service to civilian life. Also, a BLESMA presentation is scheduled with Ops staff for awareness. We are also looking to set up similar sessions with service organisations to share experiences and improve understanding. Veterans Services Team members are undertaking a Military Human Course at York University which we want to look at and include as part of operational staff training. Welfare also undertake Mental Health First Aid (Military version) and Safeguarding at Levels 1&2 routinely. Medical Advisors (MA's) require a programme of CPD and learning bringing in military specialists to aid understanding where necessary.</p> <p>Quality monitoring (QM) process for MA's - More control over the types of cases that are selected for peer QM and transparency on the outcome of QM for the MAs involved.</p>	The training events detailed will be delivered/attended with a view to looking at programmes and wider learning with military specialists for Medical Advisors (MA's). This will include learning about experiences and bringing in veterans and charities such as BLESMA to talk about prostheses, etc. The Quality Monitoring (QM) process will be reviewed making sure this adequately feeds back to the Medical Advisors and drives tangible teaching/training.
14.	Statistics on Appeals and Judges Recommendations - Is this information available and what do we do with it?	<p>The annual published statistics for both Armed Forces Compensation Schemes (AFCS) and War Pension Schemes (WPS) are published on Gov.UK each year. We also keep our own data for appeals and outcomes. It allows us to track cases, to help us assign Departmental Representatives (DRs) to Courts, to record decisions and adjournments, to identify trends and to store the DR reports from the hearings.</p> <p>Link to gov.uk: War Pension Scheme Annual Statistics 2022 Link to gov.uk: Armed Forces Compensation Scheme Annual Statistics 2022</p>	Decisions in Tribunals will continue to be monitored and analysed

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15.	Medical and Tribunal Processes - Can this be reviewed and simplified to make this easier for veterans?	<p>At a very high-level, the claim and appeal process is very straightforward. They become more complex depending on the condition being claimed and the amount of evidence produced. The medical process cannot be simplified too greatly as there is a risk the evidential value would be diluted.</p> <p>Medical Processes - There is a distinct difference in the medical processes for each Scheme.</p> <p>War Pension Scheme (WPS) - All cases must be referred to the Veterans UK Medical Advisors (MA) for decisions under the Service Pensions Order (SPO) as decisions under the Service Pensions Order (SPO) are medically certified.</p> <p>Armed Forces Compensation Scheme (AFCS) - This is essentially a lay scheme with the majority of decisions made by Veterans UK caseworkers although MA advice can be sought if required. All complex cases including but not limited to serious multiple injuries, mental health and those attracting the higher tariff levels are referred to our MAs for advice.</p> <p>Tribunals Processes - There is a tremendous amount of work being undertaken regarding Continuous Improvement in the appeals space to streamline processes where possible. Tribunals are an independent process largely belonging to the Ministry of Justice. The planned introduction of Direct Lodgement of claims in England & Wales from 2023 will mean ownership of the appeals process sits with them (although Veterans UK will still have responsibility for producing a response to appeals).</p>	<p>Making the process more transparent - Comms on how the end-to-end process works, including the differences between AFCS and SPO as there is much more to be done in this space.</p> <p>Working groups with the Ministry of Justice (MoJ) will continue, as well as work with MoJ to introduce Direct Lodgement</p>
16.	Transparency of the Medical Advisor Process - How does it work and how are decisions reached?	To consider engagement events with veterans regarding the process, and further information and comms to be added to Gov.UK. (to incorporate medical and lay information). Comms to include how the end-to-end process works. We can also consider giving presentations to veterans' groups/charities on how the process works.	AFVS will look to see how we can create appropriate briefing material which can be shared easily and develop a Journey Map of the MA process for publication.

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17.	Parity between both Schemes - War Pension Scheme (WPS) to Armed Forces Compensation Scheme (AFCS). Why did that change?	The War Pension Scheme (WPS) and AFCS are intentionally different schemes. AFCS was introduced following a government commitment to review compensation arrangements as they were considered to be outdated and complex. The new scheme was designed to better reflect modern medical understanding and the current practice and thinking on disability, as well as to offer consistent outcomes.	No further action at this point
18.	Safeguarding Policy - Veterans UK does not appear to have a fundamental safeguarding policy.	Veterans UK utilise MOD Safeguarding policy. Staff in Veterans Services have a distinct Safeguarding framework and undertake training at Levels 1 & 2 routinely. We also need to look at higher level training of lay staff on safeguarding and welfare of veterans/serving personnel.	Safeguarding training will be reviewed.
19.	Legal Process - The need to be clearer about which things are and are not a legal process.	The process of making a claim under the Schemes only becomes part of a legal process when an individual requests an appeal. For transparency this could be included in the appeals notes for guidance.	AFVS will look to include in our Scheme information products. including future versions of the policy statement.
20.	Decision Making - Could policy include direction that says if in doubt advocate on behalf of the veteran?	Ensuring staff are appropriately empathetic and understanding is key and links back to the need to better ensure they have an understanding of what it is to be in the military and the challenges around transition to becoming a Veteran, particularly in the instance of a medical discharge.	No further action at this point
21.	Mental versus Physical Health in Compensation - Differential treatment of these conditions particularly under the Armed Forces Compensation Scheme (AFCS)	This is already under consideration as part of the Quinquennial Review (QQR)	The Quinquennial Review (QQR) will review this point
22.	Policy changes as a result of Tribunal decisions - Where Tribunal judgements have highlighted policy areas that they believe need changing, and how this is followed up.	<i>First Tier Tribunal</i> (who hear appeals against WPS and AFCS decisions) only affect the individual case under appeal rather than lead to a rule change. Rule changes to each scheme are considered annually. Through this work we build a body of evidence about how robust our decisions are, and in turn, legislation that supports those decisions.	This work will continue as part of the Continuous Improvement review looking at how judgements impact policy.

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		<p>Through our regular meetings with strategic policy colleagues, we discuss whether certain aspects of the policy or legislation require amendment in order to reflect policy intent or retain justification.</p> <p><i>Upper Tier Tribunal</i> (where an error in law is highlighted in a First-Tier decision). This may result in decisions that impact more than the case under appeal. In these circumstances, there would be discussions to consider the scope of judgement and what, if any, policy, or legislative changes are required as a result.</p>	
23.	Transition Policy - Can this be reviewed?	Holistic Transition is maturing, and a common (tri-Service) approach has been agreed that: encourages much earlier preparation for leaving, embeds personal responsibility and improves alignment with resettlement policies. Next steps are to provide accessible information, advice, and guidance on key life skills for all Service Personnel and their families and a means to self-assess readiness to transition to civilian life.	Holistic Transition is on track to reach full operating capability during 2023 and builds upon the key principles of access for all serving personnel and their families, irrespective of where they serve or are based.
24.	Tribunal Services - Transparency on whether the panel are paid by the Government or independent?	The panel including the judge can be both, independent and work for the Government. For transparency about tribunals, we can look to reference this in the appeals notes for guidance. Our Policy area can look to feed this back to the Ministry of Justice (MoJ/HMCTS), who own the independent Tribunal.	AFVS will discuss with the Ministry of Justice (MoJ) and also make changes to the appeals notes for guidance.
25.	Legal representatives - Taking advantage of individuals.	We are aware of the situation and our view remains that although individuals are entitled to representation, they should not need legal assistance to support a successful claim or feel it is necessary. We do however realise that some of the challenges with the current system means some will find this necessary, but our goal is to actively try to create a simple and easy to use process that supports the claimant.	AFVS will look to continue to improve the process along with supporting documentation/comms to highlight where support is available in the completion of claims. This includes VWS to help and approaching DMRCs (clinics) working together to help resolve

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26.	Our Communication - Using corporate speak including the term "customer" for veterans. Veterans see themselves as veterans or service users and not as customers.	The Armed Forces & Veterans business area acknowledges not all service personnel and veterans want to be referred to as "customers". We currently use the term customer however it was suggested at the event that preference would be to use other terminology such as veterans or service users.	AFVS will look at this as part of a wider review to survey/poll preferred terminology.
27.	Veterans App - Is there an App?	There is a start point at DBS UK Armed Forces & Veterans Portal which provides information on MOD support services. The intention is to develop this further as part of Transformation to enable more self-serve options. There are two parts to the portal, the second part being Member Self-Serve (MSS).	Further development on the App is ongoing as part of our wider digital transformation work. The final delivery of the portal will be the Member Self-Serve (MSS) stage expected in 2024.
28.	Advocate for Veterans - Currently there is no one advocating on behalf of veterans.	This has been recognised and is being discussed with wider MOD to highlight the need for and importance of a veteran's advocate.	AFVS/MOD are looking into this and seeking someone within government who can champion the veteran's agenda.
29.	Working Groups - Can we look to arrange with smaller working groups in the future to take this forward	Quarterly Lived Experience Events planned for veterans, we can look to set up smaller groups similar to the Correspondence Review to feedback on proposed any changes and to be part of any pilot initiatives. For future Lived events we will also ensure we have the right level of representation of veterans, serving personnel, bereaved families, and professional bodies.	This will be taken forward by the AFVS Engagement Team using action points as a record to inform and update.
Last Serial			