

MEETING OF Y&H VAPC: 2 MAY 2012 - RECORD OF ACTIONS

<p>Attendees: Col (Retd) Tony Phillips MBE Maj (Retd) Duncan Bell Ms Alison Carter Dr David Jolliffe Mr Robert Mortimer Mr Peter Shields MBE QGM Mrs Helen Singleton Mr John Topping Mr Alexander Baxter Mr Tim Cole</p>	<p>Apologies: Mr John Anderson Mr Alex Bentley Mr Peter Heys</p> <p>Absent: NIL</p>
Item	Discussion
<p>Introduction and Administration</p>	<ul style="list-style-type: none"> • Achievements: Chair outlined 2nd year achievements and introduced Agenda, with the main aim of setting objectives for our 3rd year. • Membership: He outlined current Membership & recruitment (list of current and potential Members attached) and explained 2 x Memberships lapsed under Section 80/81 Members Notes i.e. they are no longer Members. • Minutes of Last Meeting: Following actions remained outstanding: <ul style="list-style-type: none"> ○ Data Collection - information regarding Veterans views with hard evidence required rather than anecdotal opinion. Action: All ○ Policy Issues - Still need to contribute more, requires evidence; a strategy for collection would be required. John Topping requested any feedback on the “5 Questions” Performa he had circulated to all but would also circulate it again. Action: Info Ops Lead ○ LA AFF - Members assigned and some established but letter to 15 (NE) Bde still required. In addition last Minutes were not correct as Alison was Rep for Selby and Rob for 2 others. Action: Chair • Claims: Expense claims still required Chairs signature, a constraint and Chair would revisit policy with SPVA, again. Action: Chair • Engagements: Chair requested Members e-mail, text or phone him with their engagements if not already listed so he could complete end of year report (EOYR) (current list attached). Action: All • Sub-Group Achievements: Chair asked Leads to provide summaries for the end of EOYR. Action: Sub-Group Leads • Website: Chair outlined unsatisfactory progress by SPVA Comms; he outlined case for Members notes; recommended simply declare experience/interests. • VAPC Support - Events: Discussed: AF Day Kirklees 30 Jun, NE Lincs 23/24 Jun (Alex Baxter, David Jolliffe), Wakefield 24 May (Rob Mortimer), JSNA 10 May (Alison Carter), Covenant Beverley 30 Jun (Tony Phillips). • VAPC Chairs Meeting: Chair outlined the main issues arising including: Statutory Instrument, Recruitment, SPVA Efficiency Measures/Future Contract and impact of staff levels/Help Line, VWS Monitoring, AFPS/WPS/AFCS, Service Medical Boards, JC+ and other “AF Champions” and ending with a review of the exchange of Best Practice across all 13 VAPCs. Consensus regarding the latter was that our strategic, framework based approach was sound for Y&H but some practice on veterans and policy could be adopted. • RBL Reorganisation: This was outlined. • Welfare Cases – There was discussion regarding 2 x Welfare Cases and concerns expressed about referral process/appropriateness of cases being referred to VAPC. Chair asked Sub-Group to provide evidence of latter in note form so he could take up with SPVA. Where this may involve Medical Boards a professional opinion would assist, and David Jolliffe agreed to assist on request. Action: Welfare Sub-Group

Objectives for 3rd Year

- **Structure:** Structure and stakeholders map reviewed, strategic/framework approach was sound. Discussed operating space with LA, NHS, other agencies, social enterprises increasing profile and some competing quite aggressively to duplicate some of our functions. Risks of diluting approach, sidelining, being perceived interfering/duplicating and not supporting worthy enterprise were discussed - opportunities were identified.
- **Objectives:**
 - **Review:** Committee reviewed 1st year Objectives (Management Plan Feb 11) as amended Sep 11, 2nd year Objectives (Meeting Minutes 18 Jan 12) and tested them against results of LA JSNAs Workshops.
 - **SMART Objectives:** Concept was discussed; agreed we should:
 - Develop overarching Mission and Vision.
 - Identify what veterans *actually* want done, rather than what we think they want done/ought to be done.
 - Define *important* issues where we could make a difference.
 - Develop Position Statements for @ issue (in due course).
 - Collect robust, evidence based data on @ issue.
 - Make policy recommendations for @ issue.
 - Set realistic targets within a 12-24 month timeframe.
- **New Direction:** Meeting split into groups to discuss new direction in depth; may be rephrased slightly but main framework agreed as:
 - **Mission:** Identify critical issues to supporting veterans within Y&H lacking impetus and implement necessary action to secure they are dynamically and vigorously promoted.
 - **Vision:** To have established a strategic partnership in Y&H with a united view on key areas requiring collaborative action to improve support for veterans and agreed actions to do so.
 - **Governance, Engagement and Information Operations:**
 - Encourage exchange of Best Practice within partnership.
 - Identify threats, to reduce, and opportunities to build upon.
 - Identify information gaps and actively seek hard objective evidence to prove it.
 - Having done so, identify the appropriate agencies for necessary action and promote solutions.
 - Promote achievements so veterans/others appreciate progress and know how they can contribute.
 - Actively signpost and promote positive aspects so those in need can navigate more easily to support.
 - Establish strategic partnership (LAs, NHS - Y&H AFN, 15 Bde, RBL, COBSEO, BLESMA, CS, RFCA and Regt Associations) and *actively* support only others endorsed by them. The business community were identified as a gap.
 - **Actions/Objectives:**
 - Strategic Partnership to be formally established.
 - Develop KPIs and ID necessary evidence required.
 - Develop better links with veterans, through trusted and relevant partners; identify those partners.
 - Develop information/promotional relationship & tools to support all objectives (Flyers, Web, Media, Events Calendar, Members VAPC Briefing Pack).
 - Promote a coherent approach and tackle duplication.
 - Promote/support multi-agency approach/open days.
 - Populate AFF/AFB operating mechanism with influential representation.
 - Ensure VAPC is recognised and utilised to inform JSNA process and influence development of emerging structures.
 - Develop links to regional business forums; investigate ways they could support the VAPC agenda.

	<ul style="list-style-type: none"> ○ Health, Wellbeing and Welfare: <ul style="list-style-type: none"> ▪ Emphasis/promote credentials as Advocates/Ombudsman. ▪ Acknowledged Y&H AFN as strategic partners with which to work; their works stream priorities clearly aligned to our own. ▪ It was felt progress had already been made by the DofH & AFN in “GP power” but would require further work. ▪ Group felt onus for collection of information on veteran identification should not be left entirely with GP/NHS systems, but that a clear responsibility lay with service leavers or veterans to ensure detail registered. ▪ Health and Wellbeing forums are statutory requirements for Local Authorities, normally driven by formal committee and would be a particularly good forum to communicate message of VAPCs and promote Veterans & families interests. ▪ SPVA VWS monitoring - it was felt VAPC could contribute much more to supporting veterans by interpreting mandate as widely as possible within bounds. This sensitive issue would be progressed in consultation with SPVA but could include organisational frailty and contractual performance criteria. ▪ Actions/Objectives: <ul style="list-style-type: none"> • Develop objective monitoring of SPVA performance; which extends VWS monitoring mandate. • Access Customer service and satisfaction surveys. • Ascertain where duplication exists and work to eradicate it. • Closely follow developments in GP Commissioning Groups (CGs) & AFN reorg, particularly relationships. • Ensure VAPC secures best influence position within emerging GP CG and AFN structures. • Investigate feasibility of regional notice to individuals clarifying how important registration is in respect of priority treatment/understanding of veterans needs. • Secure influence or a position on LA Health & Wellbeing Boards. • Identify the priority issues of major concern in the health, wellbeing and welfare area. • Gain access to LA/NHS media to deliver important information and highlight needs. <ul style="list-style-type: none"> • All items above to be reflected in updated Management Plan. Action: Chair • Sub-Group Leads - take items forward forthwith. Action: Sub-Group Leads
DONM	Date of Next Meeting – Wed 5 September 2012 , 11:00 - 15:30hrs at RFCA, York and <u>subsequent one TBN.</u>

Original Signed

AW PHILLIPS
Chair

20 Jun 12