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Healthwatch Telford and Wrekin often hear experiences from Veterans which indicate some Veterans can find it hard to access the services they need.

Initial feedback suggests that veterans are not always asked about their service history when registering with a GP or attending hospital appointments.









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Shaun Davies MP, Telford constituency, and his team also are also aware of challenges Veterans face in getting access to services at the right place, at the right time.

Healthwatch Telford and Wrekin and Shaun Davies MP are working together to explore the issue and seek peoples' experiences, their truths, of accessing NHS health services and social care services.





Some headline takeaways form the data so far which illustrates the importance of this project:

- Only 13% have been asked if they were a veteran by GPs,
   20% told GP themselves and 64% haven't been asked.
- Of those that said they were asked or 'told them' no one noticed anything different from their GPs on the whole and no one indicates it was subsequently mentioned again.







• 90% have used hospital services. Of those 84% say they have not been asked if they were a veteran, 8% were asked and 6% 'told them'.

 86% say when they left the armed forces they were not provided with information on how to navigate health and social care services.







 55% say they have suffered health issues as a result of their service and shared issue:

- 14 with PTSD / MH issues
- 15 hearing losses of varying degrees
- 14 with musculoskeletal issues.







When asked 'What has been your biggest challenge around your health and well being'

- Several mention 'adapting to civilian life'
- Many mention getting NHS to understand the impacts of armed forces service
- "Actually getting the NHS to understand that I am a veteran and appreciate what veterans may have experienced"





"GP has been a complete culture shock. I rarely have the phone answered at 0830 to book routine appointments, majority of the time i am cut off and have to restart the next day. I was diagnosed with Fibromyalgia in service and upon exit i was transferred to the NHS for continued care, I saw a consultant at shrewsbury who wouldn't listen, got info incorrect, I was talked down to constantly and despite my request was prescribed a repeat prescription and discharged from that initial appt. I left the hospital in a state of horror and disbelief that this is how people are treated and my treatment. I wish had made a complaint, but I was conscious that the NHS needs all the staff they can get without drama"





"Getting a doctors appointment at my local surgery. I had to wait 9 months to get an appointment for a rash on my left cheek at the time. I was seen by a doctor at a different surgery a few miles away from my usual surgery and was informed that I had skin cancer. I was referred to the hospital in Shrewsbury who did a surgery for it which was successful."

"When I was waiting to get my surgery on my knee and tibia. I received very little if no communication about what was happening and my mental health suffered also as it affected me being able to do my normal civvy street job."



When asked 'How could support be provided that made you feel comfortable accessing it?':

- A local web site with all the details needed for accessing services
- A place to go as a group. Meet other veterans
- Veteran advocates embedded in the health care system
- Being able to talk to a NHS veteran liaison person, to discuss my problems.





"I do not need constant or frequent support. However, if there was a dedicated contact portal to deal with service-related medical issues, I believe that would be of value. Knowing it would be service specific, perhaps even run by ex service people would be confidence inspiring. It is difficult for civilians to understand the mindset of ex-military members, apart from their families. No matter when you meet someone who is ex-military there is an instant bond. Meeting an old comrade, even after decades, always falls into a comfortable event as we share things times and events that civilians only ever read about."





"I am unsure but knowing I am not alone. I feel when people think of veterans, they are old. I am not, I also didn't get PTSD but it feels like (and rightfully so that it is in the foreground for support) if you haven't got it, we don't need to be concerned for you. I still gave my country, my time, my best years and left with a life-changing chronic illness that hasn't been taken seriously upon my exit. Physiotherapy over TEAMS is ridiculous. Being treated like I am just after drugs - because I was posted across the UK and changed med centres at every posting does not mean I am trying to play the system - I had no choice in my moves it is military life for most. Being unable to get a GP appt and the phone just being cut off on every attempt to call and taking weeks to get an answer is diabolical. It is also a disgrace that you are rushed to A&E for an illness, be prescribed medication, be told that you will be monitored, to receive a letter 3 months later that you are discharged, nothing further to be done. There's a lot that needs to change for me to be comfortable accessing support beyond my own support network." healthwatch



When asked 'What would you change to improve support for veterans?':

- Not to be forgotten. We don't want to be treated better than anybody else, but we have served - this means our life has not been normal and certain things we do need to be treated different
- Nobody ever asks if you're a veteran or not
- Better sign posted and knowing it was a safe place with likeminded people providing support. Maybe having support hubs imbedded with in army reserve centres.

Telford and Wrekin



- I recently waited a long time for a knee replacement, I
  discovered later I could have attended the Veterans service
  at Oswestry and had my operation much quicker.
- Have a veterans liason at GP locations or groups that can give advice.
- Apply the Armed Forces Covenant in all health care situations
  - I've never been asked if I served. Priority housing for homeless veterans.
- Being recognised and not made to feel like we are invisible.





- "Veterans and their families; these have been dependants for entire careers and subject to the same upheaval (moving regularly) and lack of continuity and should be treated with similar access guarantees as the veteran themselves. A veterans line into the combined trust might be a helpful action, if the hospitals understood and knew how to deal with veterans and what they are and are not entitled to."
- "Priority care beyond PTSD and deployment injury support. Veterans in all aspects, not just the NHS, are left to find things for themselves, whilst the service pats themselves on the back and say they did a good job helping us to exit. I felt more appreciated for my service upon a visit to the USA than I ever have in the UK."
- Have a veterans NHS portal where we can see what help and assistance is available. Also to feel valued as a veteran.





Headline demographics 39% are 50-64 yrs 39% are 65-79 yrs

18% are 25-49 yrs

89% male 10% female



75% consider they have a long term condition 53% don't consider they have a disability



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# **Next steps:**

Project running to end of October

Starting Focus Group work - We have one after HOSC

What can Clirs do to help?:

- Promote the project in your Wards and networks of contacts
- Share the survey link
  - https://online1.snapsurveys.com/Telford\_VETERANS\_Health\_Survey
- Share details of groups or places where Veterans meet
- Encourage Veterans to speak up!



Thank you for listening

Questions, comments, observations

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