Scottish Veterans Care Network Health and Wellbeing Facet Working Group Terms of Reference

Key Deliverables

The Deliverables support the following two high level objectives for the SCVN[1].

SVCN Objectives

A mapping of stakeholders/specialist veterans' health and care services available in Scotland. The focus of the mapping will initially be on mental health, in order to inform the Action Plan. This will include:

- purpose of each service provider/organisation and their current service delivery (considering appropriate standards/'kite marking' of organisations)
- geographical coverage
- client groups
- commissioning models and identification of the associated funding streams
- considering the needs of hard to reach groups, and
- consider what has changed in relation to service delivery and access to services in the context of the Covid-19 pandemic.

Veterans Mental Health Action Plan

- Based on the findings of the service mapping, as well as published data and intelligence, the Action Plan will make recommendations on the future delivery of mental health services for veterans in Scotland. It will take into account the longer term plans for services currently funded by the Scottish Government, such as Veterans First Point and Combat Stress.
- The Health and Wellbeing Facet Working Group of the Network will develop and take forward the recommendations arising from the Action Plan.
- Where appropriate, the Action Plan will also make recommendations for Scottish Government. This a deliverable from the Scottish Veterans Commissioner report (recommendation 5).

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[1] The full list is included in Appendix A:

Specific Facet Working Group objectives

Mapping of mental health services for veterans

Mental Health Action Plan

Service mapping
Evidence base
Data and intelligence
Recommendations for improved service delivery

Strategic Network Objectives
The Facet Working Group contributes to the delivery of the following Strategic Network Objectives[2].

Strategic Service Planning and Development
- Develop a 'Once for Scotland' approach to the planning, design and delivery of services, that are equitable, evidence based and aligned with current strategic local, regional and national Scottish Government, NHS and IJB policy, planning and service priorities. This includes support for major service change and SG national policy direction/change where required.
- Support services to ensure a person centred, holistic approach to care, recognising the whole care pathway.
- Develop clinically assured, evidence-based guidance to support the delivery of consistently high quality services.

Continuous Improvement
- Support the consistent delivery of the best care possible, through agreed and clearly defined clinical pathways, with appropriate quality assurance and improvement arrangements.
- Drive improvement in outcomes through the use of good data, and create an excellent environment across Scotland for openness, learning, teaching, research and development.

Role and Responsibility of Members
- Provide advice and guidance related to their professional area of expertise or specialism (clinical or otherwise) at meetings, and *ad hoc* as required through email, to assist the Network in achieving its remit and objectives.
- Ensure two-way communication with the professional group, geographical area, or organisation they are representing to ensure that they can represent relevant interests effectively.
- Communicate the work of the Facet Working Group with other members of their organisation / geographical region / the stakeholder group they represent.
- Engage with the work of the SVCN and respond to consultation exercises, surveys and audits.

[2] A Full list is included in Appendix B

- Maintain and support engagement with veterans. Embedding community engagement and person-centred and realistic medicine principles and values.
- Advise the Network Programme Team of any issues or agenda items and papers for meetings
- Note actions allocated to them and complete within the agreed timeframe.
- Attend meetings regularly and advise if they are unable to attend a meeting and where possible nominate an appropriate deputy.
- Maintain patient confidentiality, in line with NHS Scotland's Code of Practice on Protecting Patient Confidentiality
- Chairs of the Facet Working Groups will be members of the Core Steering Group.

Role of the Programme Team
- Meetings shall be scheduled well in advance. Meetings will be organised using virtual platforms where appropriate.
- Establish a robust programme management process for agenda setting, the development of meeting papers, following up actions and horizon scanning.
- Issue agenda and papers 5 working days in advance of the meeting. These will be in a format easy to read on a screen, to enable members to use digital papers.
- Circulate an action log and key decisions no later than 5 working days after the meeting.
- Invite other representatives to the meeting as required.

Governance and Escalation
Each Facet Working Group will report to the Network Core Steering Group on progress, including any identified risks and issues, at each meeting. The governance structure is set out below.
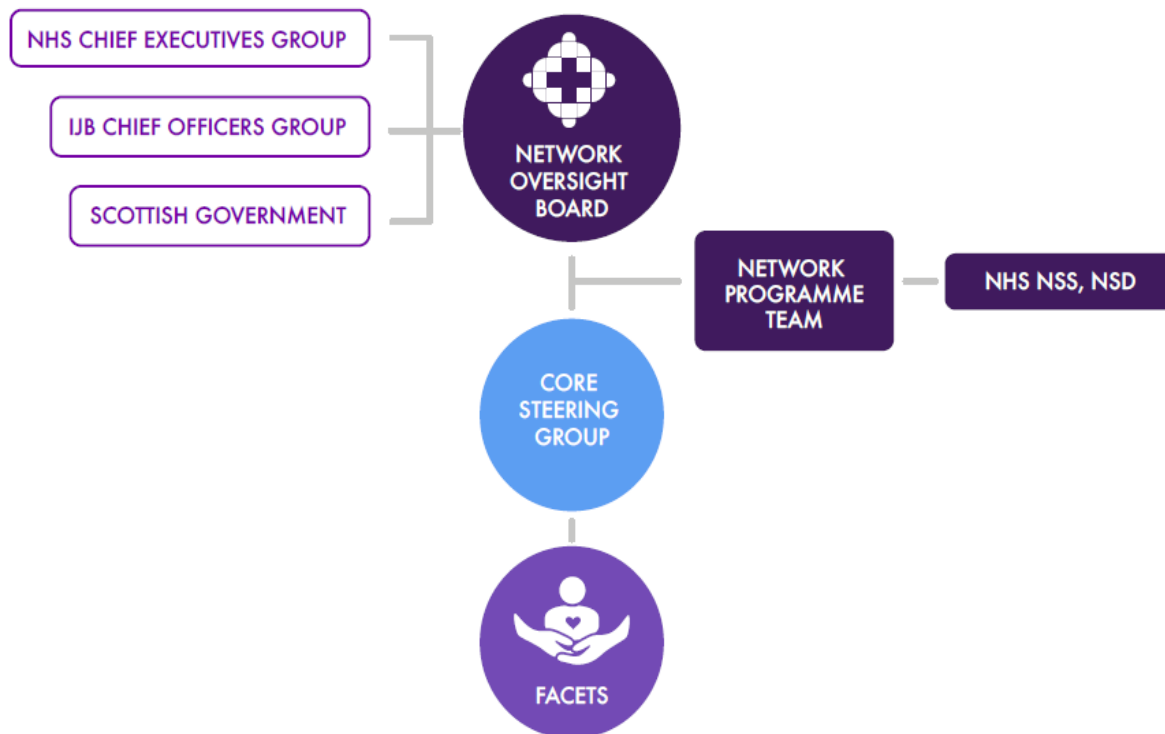
Frequency of Meetings

The frequency of meetings will be determined by the Chair and the Group in order to ensure the group delivers in the required timescale as agreed by the Group and approved by the Oversight Board.

Declaration of Interest

Any personal interest which may impinge or might reasonably be deemed by others to impinge on a member's impartiality in any matter relevant to their duties must be declared.

Membership

The Chair of the working group will be Dr Linda Irvine Fitzpatrick.

Representing		Member	Role
Chair		Dr Linda Irvine Fitzpatrick	Strategic Programme Manager, Thrive Edinburgh
Scottish Veterans Care Network - Clinical Lead		Dr Lucy Abraham	Network Clinical Lead
Health and Social Care Partnerships		Gillian Lindsay	Health Improvement Lead South Lanarkshire HSCP
Third Sector	Combat Stress	Jane Menzies	Head of Operations: Scotland
	Veterans Scotland	Steve Burton	Blesma Support Officer
	Samaritans	Rachel Cackett	Executive Director, Scotland
Mental Health Services	Psychology Services		
	Psychiatry Services	Professor John Crichton	Chair, The Royal College of Psychiatrists in Scotland
AHP Directors Group for Scotland			
Veterans First Point		Dr Jennifer Ring	Counselling Psychologist, Lanarkshire
Scottish Government - Mental Health Policy		Maura Lynch	Senior Policy Manager, Survivor Support Team
GP		Dr Sandy Cavaghan	GP, NHS Lothian
MoD	Department of Community Mental Health	Surgeon Commander James Harrison	Consultant Psychiatrist / Clinical Lead Scotland
	Transitions		
NHS 24		Arlene Campbell (interim cover)	Head of Stakeholder Engagement and Insights
Trauma informed Network			
Mental Health Crisis Team			
SVCN Forum Representative			
SVCN Programme Team		Hannah Cornish	Senior Programme Manager
		Andrew Clark	Programme Manager
		Kirstin Davidson	Programme Support Officer

Appendix A – Scottish Veterans Care Network – Objectives

The Network has 6 key objectives:

A mapping of stakeholders/specialist veteran's health and care services available in Scotland. The focus of the mapping will initially be on mental health, in order to inform the Action Plan. This will include:
- purpose of each service provider/organisation their current service delivery (considering appropriate standards/'kite marking' of organisations)
- geographical coverage
- client groups
- commissioning models and identification of the associated funding streams
- considering the needs of hard to reach groups.
- consider what has changed in relation to service delivery and access to services in the context of the Covid-19 pandemic.

Veterans Mental Health Action Plan
- Based on the findings of the service mapping, as well as published data and intelligence, the Action Plan will make recommendations on the future delivery of mental health services for veterans in Scotland. It will take into account the longer term plans for services currently funded by the Scottish Government, such as Veterans First Point and Combat Stress.
- The Health and Wellbeing facet working group of the Network will develop and take forward and the recommendations arising from the Action Plan.
- Where appropriate, the Action Plan will also make recommendations for Scottish Government. This a deliverable from the Scottish Veterans Commissioner report (recommendation 5).

Stigma
- The Network will work with partners to reduce barriers to veterans accessing mental health services, including measures to address issues of stigma, seeking help, and improving awareness and understanding of all health professionals on the needs of veterans (this links to objective 2).

Education (delivered in partnership with the objective 3)
- Improve awareness, knowledge and understanding of veterans' needs and characteristics through the development of educational tools, ensuring that those that already exist provide relevant information for Veterans in Scotland, and support/identify partners, eg NES, in developing new tools where necessary.
- Increase the awareness and understanding among veterans of local services available, noting the evidence that veterans not accessing required services is often due to their own inability to identify that they need treatment.

Data and Information
- Collate existing data and intelligence on veterans in Scotland to complement the Service Mapping exercise.
- This will support a longer term objective to better understand the needs of the veteran's population including its size and characteristics.
- This will be taken forward in partnership with Public Health Scotland and the Ministry of Defence.

Engagement
- Increase engagement with veterans, third sector organisations and all interested stakeholders from a statutory service perspective to consider how best to address the needs of veterans.
- This engagement should also consider engaging/seeking representation from, hard to reach groups.

Appendix B - Strategic Network Objectives

NSNs will deliver added value to their stakeholders across five broad objectives[i], as set out below. This Terms of Reference has been developed to support the objectives in bold in particular.

The Network Governance and Structure

- Co-produce in partnership with people with lived experience, Scottish Government, NHS Boards, IJBs, and wider stakeholders, a Network strategy which sets out: the rationale; scope of the Network illustrated through a facet diagram; its key objectives and priorities; and a structured work plan. In certain instances, the majority of the strategy and the Network mandate will be set out in Scottish Government policy.
- Design and ongoing development of an effective Network structure that is organised, resourced and governed to deliver its agreed objectives, as agreed with Scottish Government, NHS Boards, IJBs and others as required.
- Establish robust governance arrangements, led by a neutral chair, agreed by the NHS Chief Executives Group.
- Create a unique identity/platform on which to build the Network.

Communicating and Engaging with stakeholders / Leadership and partnership working

- Provide national strategic leadership and advice to NHS Boards, IJBs and other partners in relation to the delivery of health and social care services for veterans.
- Provide a strategic overview of the current landscape and horizon scan, thus ensuring the Network engages with the appropriate stakeholders to define and provide the vision and leadership for the Network. This will include the development and implementation of a Communications and Engagement Strategy.
- Engage with organisations to advocate for service users and their families, and services and influence policy and strategy.
- Provide a forum for partnership working and resolving issues requiring national agreement between partners through consensual collaboration.

Strategic Service Planning and Development

- Develop a 'Once for Scotland' approach to the planning, design and delivery of services, that are equitable, evidence based and aligned with current strategic local, regional and national Scottish Government, NHS and IJB policy, planning and service priorities. This includes support for major service change and SG national policy direction/change where required.
- Support services to ensure a person centred, holistic approach to care, recognising the whole care pathway.
- Develop clinically assured, evidence based guidance to support the delivery of consistently high quality services.

Continuous Improvement

- Support the consistent delivery of the best care possible, through agreed and clearly defined clinical pathways, with appropriate quality assurance and improvement arrangements.
- Drive improvement in outcomes through the use of good data and create an excellent environment across Scotland for openness, learning, teaching, research and development.
- Work with all relevant partners to ensure information and intelligence can be used to inform Network activities and demonstrate the Network's value in delivering best practice, improving standards of care and ultimately health and wellbeing outcomes for service users.
- Collaborate with relevant scrutiny bodies to inform the development of clinical and service standards where appropriate.
- Provide a forum for peer support of services against nationally agreed guidance and standards where available. This does not include performance management or inspection.

Education, training and development

- Work with relevant organisations to improve capability and capacity in care through the delivery of an Education Strategy that reflects and meets stakeholder needs and takes cognisance of the broader strategic education context and other bodies such as NHS Education for Scotland.
- Provide a forum for peer support for healthcare professionals to support continuous professional development.
- Work with appropriate partners to support the development of training courses or resources where training needs are identified.

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[i] The five objectives were adapted from the core principles for managed clinical networks set out by Scottish Government in CEL (2012) 29: https://www.sehd.scot.nhs.uk/mels/CEL2012_29.pdf