

Defence Committee

Oral evidence: Work of the Office for Veterans' Affairs, HC 185

Wednesday 15 June 2022

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Members present: Mr Tobias Ellwood (Chair); Sarah Atherton; Richard Drax; Mr Kevan Jones; Mrs Emma Lewell-Buck; Gavin Robinson; Derek Twigg.

Questions 1 - 170

Witnesses

I: Leo Docherty MP, Minister for Defence People and Veterans; Jessie Owen, Director, Office for Veterans' Affairs.

Examination of witnesses

Witnesses: Leo Docherty MP and Jessie Owen.

Q1 Chair: Welcome to this Defence Committee hearing on Wednesday 15 June 2022. We are delighted to welcome the Minister, Leo Docherty, the Minister for Defence People and Veterans, and Jessie Owen, who is the director for veterans' affairs in the Cabinet Office. Thank you very much for your time this afternoon.

This is a one-off session, where we are going to focus on veterans' issues, but it is the first time that we are changing the system a little bit, having offered the veterans themselves the opportunity to present questions to be put to the Veterans Minister and indeed the Office for Veterans' Affairs. This brief reflects the priorities, concerns and questions that they have raised, which we will now put to you.

Before we do that though, before we get into the meat of what we are here for, there are some generic questions to do with the MoD, if I may, Minister, with your permission, pose these to you. The first is to do with the fleet solid support ships. The question is as to when the contracts are likely to be announced.

Leo Docherty: Thanks very much for having me. I am really delighted to be here. To go straight to the point, I am not sure that it would be useful for me to add to what the Defence Secretary said with regard to that on the Floor of the House on Monday. I know that officials will be watching this session, but I do not think that any comment from me would provide any utility or interest, if I could put it that way.

Q2 Chair: You can be bold and encourage this to move forward. The reason why we raise it is because this Committee has been asking for more detail on this for some time. You would be aware, as a Minister, that these contracts are outstanding. This is a requirement to support the Royal Navy that has been missing for some time. I would be very grateful if it is possible to get a date for that.

The other question to do with timetabling is to do with the Ajax as well. Do you have any idea as to when we are going to see the IOC and the FOC for Ajax?

Leo Docherty: Again, I do not think that it would be useful for me to add to what the Defence Secretary replied during Oral Questions on Monday. I know that the Minister for Defence Procurement, who is in the Falklands this week, is aware that you were due to raise this with me this afternoon and is keenly aware of your desire for a further update. I know that he will be taking that away.

Q3 Chair: I am grateful for that. The Committee has been keen to visit Hereford for some time and we are still seeking permission from the MoD for this to happen. Again, if you could take this away, we would be very grateful if you could facilitate that visit happening.



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Leo Docherty: I will certainly take that away.

Q4 **Chair:** We have also been after a nuclear briefing over at the MoD to bring us up to date. Is that something else that you could raise?

Leo Docherty: I am very happy to raise that with officials.

Q5 **Chair:** I think that some progress has been made on the final point. It came up in Defence Questions on Monday. It is to do with the LGBT review and medals. There is a case in Bournemouth that is a great illustration. The deputy mayor there had his medals taken away when he served because he was declared gay and therefore was dishonourably discharged and still has not had his medals back. That is just one of many cases. You are having to have a review about this and you have yet to appoint the leadership for this review.

Leo Docherty: We have announced a review and we have appointed the chair. The Prime Minister has invited a highly eminent public figure, who has accepted the role of chair. We look forward with expectation to this hopefully being announced next week, concurrent to Armed Forces week. I hope that the Committee will be pleased with the eminence and the credibility of the chair.

Q6 **Chair:** Many may wonder why you require a review to come to the conclusion of the obvious, but so be it. When will the review conclude?

Leo Docherty: It is really important that we have an independent review to help us understand the scale of the challenge. We have very poor data because, attendant to this historic injustice, a number were thrown out simply because of their sexuality, but some were discharged for reasons that were other, in the sense that they were accused of something else, other than their sexuality, as a subtext for their discharge.

Our understanding of the numbers involved is very patchy, so we need a much better granular understanding of that detail. We want someone who can consider the impact in the round. A lot of these people had very good careers cut short and faced significant adversity because of their discharge. We feel that we need to empower someone to, very properly and thoroughly, understand it and then make recommendations to the Government. Then we will consider those.

Chair: We will look forward to that conclusion and recommendations of the review in due course. Let us now turn to the substance of today's Committee hearing.

Q7 **Richard Drax:** Good afternoon to you both. The first question is based around the transition to civilian life. I have a number of quotes here from veterans. I have divided them into three areas and I would be grateful for three short answers within my slot. The first one is on leaving the Armed Forces. The three comments I have are that it takes three to six months to join HM forces, two days and you are out. The second point was no transition to civilian life at all. This veteran mentions that, on your first



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ship, you have a sea dad or sea mum who takes you under their wing and looks after you, and asks, "Wouldn't it be prudent there is the same transitioning from the military to Civvy Street, like some sort of case/liaison officer?" Finally under this first bracket, the question is whether there should be more safeguards put in place for those who fall through the cracks and for those not going through full resettlement, i.e. those who have not served long enough but are still in need, or those that have been medically discharged.

Leo Docherty: Those are all really good questions. I will talk to those and I might ask Jessie, OVA director, to pick up some of the themes. They are very good questions. With regard to taking a long time to join and then very quick to leave, what we want to get towards and what we have in place now is in fact a system whereby, in terms of your transition out, that can start two years before and follows you as you become a veteran for another two years. There is provision now for sustained support for those who are transitioning out from the military into civilian life.

We want to make sure that that is world class. We are, therefore, reletting the contract that provides that transition support. We currently have a very good system called the Career Transition Partnership. That does a lot of good work, particularly with regard to directing people to employment. As part of the relet, we regard that as an opportunity to ensure that sustained support into civilian life is at the core of that proposition. We want people to join well, serve well and leave well.

You mentioned civilian equivalence. Part of that is ensuring that, when you become a civilian, everything you have achieved in the military has a civilian equivalence, because that makes you more employable. We know that employers love veterans because of their ethos and the teamwork that is in their DNA. They are in high demand, but we must ensure that every qualification you gain in the military has an automatic, and by default, civilian equivalence.

These days, it is very hard to leave the military without having at the very least an apprenticeship. We are the largest employer of apprentices and provider of apprenticeships in the country. Now, with phase one, basic training, that is recognised at the start of your apprenticeship. We have to make sure that every military qualification has a civilian equivalent so that an employer understands that, if you have done Junior Brecon or some other course, you have fantastic leadership and organisational skills. We are doing some good work with regard to that.

In terms of your question about safeguarding, that is a very good one. Those most vulnerable are not the 22-year men who have had full, long careers. They are the men and women who might leave after a small number of years, maybe even during basic training, and they have left because of maybe some other issue they had, even prior to enlistment. Because of our duty of care, we have a duty of care to make sure that, when people are leaving, they are, for example, registered with a GP and



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that the question is asked, "Do you have a plan for where you are going to live?" It is that kind of thing. A lot of that is carried out by the chain of command. That is a duty of care that commanding officers would carry out.

That also links to the legislative work we have done with the statutory guidance. Through the Armed Forces Act, which you will all know about, we have put the Armed Forces covenant into statute, so that housing, healthcare and education are provided according to a blueprint at the local level. Safeguarding is a good point.

Q8 Mr Jones: I agree with you, Minister, in terms of the longer service, 22 years on, issue. They are never the problem. The real problem is the early service leavers, people who leave after quite a short period of time. You said it is the chain of command. That is very patchy, in terms of how it is done.

A particular vulnerable group are people who have left care to go into the Armed Forces. Those cases are small numbers. You cannot leave that to the chain of command. Some of those people are vulnerable. I hear what you say about the very limited legal cover of the covenant. Some of those individuals are very vulnerable and need clear pathways that are case managed out. It cannot be left to individual chain of command, surely.

Leo Docherty: I am not suggesting that it is entirely left to the chain of command. I was just referring to the chain of command's duty. This has got much better in the last few years. We will probably all remember from our own service, when people were set to leave, perhaps their unit lost interest in them. That is not acceptable. Nowadays, chain of command is much more forward in taking an interest as to people's future plans, but that is only a very small part of the answer. The local provision is a very significant part. There are the Army Welfare Service and others.

Jessie Owen: I was going to mention the Defence Transition Services. In 2019, MoD introduced a holistic transition policy, recognising that, although it had a very good career resettlement offer, resettlement is about more than just getting a job. There is all of the getting a GP, finding housing and so on. At the same time in 2019, it set up the Defence Transition Services, which was to support any service leaver who was particularly vulnerable and who might have additional needs, such as, for example, the care leaver cohort that you mentioned. People can be referred into that, depending on those individual needs.

There is also a Veterans Welfare Service that exists, which particularly supports people who have been medically discharged or had to leave because of disablement, bereavement and so on. That combination provides some of that more wraparound care for the most vulnerable.

The strategy action plan that we published in January sets out over 60 commitments that Government are going to deliver over the next two



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years. One of those is that the Ministry of Defence is looking at a new life skills package, to be able to offer that to all service leavers, so they are not just thinking, as we have mentioned, about their career but all the aspects of transition to civilian life. They are training them in advance, so it is not such a shock when they come to leave.

Leo Docherty: I endorse what Jessie said. The folks at the Defence Transition Services are absolute superstars. They are people who are entirely emotionally committed to supporting the most vulnerable ex-servicepeople, but they are part of the jigsaw puzzle. Also, there is the Veterans Welfare Service. Also, in terms of local authorities, there are Armed Forces champions.

Q9 **Mr Jones:** Who is actually case-managing those difficult cases?

Leo Docherty: That is Defence Transition Services.

Q10 **Mr Jones:** It is alright saying that it is all there, but someone needs to actually follow those people through, in terms of case-managing them to transition, particularly the care leavers. From experience, I know that some of them are very troubled individuals. Is someone following them through not just that bit but also what happens to them next?

Leo Docherty: Yes, that is the Defence Transition Services.

Q11 **Richard Drax:** Phase two, if you like, is learning credits. One veteran here says, "Why can't soldiers and officers aggregate their unused standard learning credits to support education in resettlement?", costing £175 a year. This veteran says that it would "enable service personnel the opportunity to gain meaningful qualifications and training they could use" in civilian life. The second point on this is whether we can rethink how funding for veterans' transition and learning credits are allocated and used. There are two questions there, or two points that are linked.

Leo Docherty: These are used very successfully. The question about aggregating them is interesting. There is a timeframe. I am happy to commit to taking away the notion that they should aggregate them. I will commit to looking at that. We are keen to ensure that the registered providers are the most up to date that they can be. For example, for things like telecoms engineering, for which there is a huge demand, we need to make sure that those training providers partnered with the MoD transition services, the Career Transition Partnership, are up to date. I am happy to take away the question about aggregating the credits. I am happy to look at that.

Q12 **Richard Drax:** My third part is about structured education, training and so forth when people leave the Armed Forces. This veteran was suggesting that we need a better structured education and training plan for everyone. On the back of that, this is a point I entirely have seen, certainly in my own constituency and from those veterans I have spoken to. There are lots of organisations that are all doing great work for veterans, but there seems to be no central control. There is nowhere



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where a veteran can go and say, "How do I find out about housing, employment opportunities?" Has any thought been given to trying to have what he or she says here, a national set-piece or playbook to help cement best practices?

Leo Docherty: I agree. That exists and it is called the Veterans' Gateway. It is the one-stop shop. If they google that, everything that that they might need and all signposting they could possibly want will be there. I encourage them to look it up.

Jessie Owen: That was set up under the Chair's—

Leo Docherty: We do not want to embarrass the Chair.

Jessie Owen: It was set up as a single point of contact, so it is both a website and a contact centre.

Q13 **Richard Drax:** Is it working well, in your view?

Jessie Owen: Yes. Three million people have accessed the website since it was launched. Last month alone I think that 2,000 people called its contact centre. It is a signposting service, so it helps refer people to the right bit of the statutory or charity sector to find them the help they need, whether that is on housing or employment and so on.

On employment, there is the Forces Employment Charity that has now formed from the merger of RFEA and the Officers' Association. It is a key partner in the career transition resettlement partnership. It does a lot of bringing together all the different providers and linking up charity and a lot of the private sector providers that offer targeted training and education for veterans. The veteran gateway is a success.

Q14 **Richard Drax:** Let us hope that the veteran who wrote this is watching and listening.

Leo Docherty: Yes, they should just go to www.veteransgateway.org.uk. In April—can you believe it?—it was contacted 45,000 times. We provided a joint grant of £500,000. It is being enhanced with some of the Afghanistan Veterans' Fund funding by the Royal British Legion as well. It is very popular, but it is a signposting mechanism.

Q15 **Sarah Atherton:** Richard did not know about the Veterans' Gateway and I only found out about it not so long ago. I actually went on it last night and it is a pretty good website, so thumbs up to that, but people out there do not know about it. What plans do you have? I know you are saying that there are 45,000 hits or whatever, but I have talked to veterans in my patch and they do not know about it. What plans do you have to let every veteran who leaves the service know about it and remind them?

Leo Docherty: A lot of it is working with the Royal British Legion and others to promote and make public the availability, basically.



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Jessie Owen: There is part of the grant that the Minister mentioned, so £380,000 to the Royal British Legion. It is a partnership delivered by the Royal British Legion, part-funded by Government but also part-funded by it and a charity consortium. Part of that grant is to refresh the website, get some more user feedback, improve the search functionality, make it a little bit more modern and user-friendly so it continues to meet their needs.

Part of that grant is also then to do more on the publicity side, so do the refresh and then give it a real big publicity push. You are right: it is a really great service and not enough veterans yet know about it. We also do a lot to promote it from the OVA as well and point people towards it as a single place that they can go to find out where to turn to.

Leo Docherty: Maybe we could get a briefing to the Committee by the team at Veterans' Gateway to promote it. How about that?

Sarah Atherton: I know about it now, Minister.

Q16 **Chair:** On the Veterans' Gateway, one of my proudest moments was launching this. Mark Lancaster did a lot of the groundwork, to be very clear, not me. I came in after him, but he did a superb job. It has a call centre. I have seen it. It is a fantastic effort. The Royal British Legion, Help for Heroes and Combat Stress still have their own call centres too. You touched on the importance of having one place to go to when you need help. When you need help, you do not want to be turning around to different numbers. You want that clarity as to where help can be found.

I suppose the next advance of the Veterans' Gateway is to get the big service-facing charities all to then share the same portal, if you like, to make that happen. At the moment, we know that that is quite a long way off. The Royal British Legion runs its very separate operation, even though it helps fund the Veterans' Gateway itself.

Leo Docherty: That is a really good question. It looks at one of the central questions of the relationship between Government, the state, the charitable sector and veterans. The central question is whether there should be a diversity and variety of provision, or whether there should be more consolidation and therefore less choice.

I am very robust about seeing the diverse landscape of charitable provision, which is largely organic. It has come about through organic civic action, since the First World War and the foundation of the Legion through to the last 20 years. The fact that we have lots of charities, doing slightly different things in slightly different areas, is not a bad thing. It is not a bad thing. From the Government's side, as you know, we collaborate with them. We are not casting aside our own responsibilities to veterans, as the state wanting to support someone who has made huge sacrifices.

Chair: I think that we are both agreeing. I am conscious of time. Cobseo is the organisation that brings the key charities together. You are right.



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There are 400 service-facing charities. About 15 of them are very large indeed. There are a number of smaller ones and then a myriad of very small charities, all well intentioned, absolutely. You touched on the difficulties of co-ordinating all that together. Perhaps that single number that we are trying to promote needs to go on the veterans ID card, for example, so people are aware, so that, when they do need help, they know where to go. That is the simple message. We are opening up another debate, which I am happy to do, because it is important.

- Q17 **Mrs Lewell-Buck:** Good afternoon, Minister. Good afternoon, Jessie. This is just a really quick question from me in relation to the charities. I think that there are about 1,800 different charities operating in this area. Some people come to rely on them, need them and then they fold because they do not have the right funds or cannot manage any more. Sometimes—I know this is very rare—the charities have acted inappropriately. What is the Office for Veterans' Affairs doing to monitor these charities to make sure that they are doing right by the veterans and are sustainable?

Leo Docherty: That is a function of the metrics that we use and the assurance that we provide through the Armed Forces Covenant Fund Trust. I was with them this morning and there is a very rigorous process that they go through to demonstrate their credibility. Getting that balance is very difficult, because we want to collectively foster the energy and civic activity of people seeking to help. As you say, we want to avoid counterproductive activities. That assurance and that process is rigorous and has the oversight of officials and Ministers. Clearly, we need to have a constant vigilance to ensure that—

- Q18 **Mrs Lewell-Buck:** What is the monitoring process?

Leo Docherty: It is the process attendant to the Armed Forces Covenant Fund Trust. You do not get money unless you are a proper organisation.

Jessie Owen: Cobseo also has a really key role to play here. As mentioned, it is the umbrella organisation. It has done a lot of work in sharing best practice and improving governance. It is doing some work at the moment that we are plugged into on safeguarding. It is working to raise the capability in the charity sector. OVA and MoD both contribute towards a grant towards the running of Cobseo, because we see that as a key vehicle for us, to make sure that the quality of the charity sector is raised.

- Q19 **Mr Jones:** I do not disagree with you, Minister. There is a variety and people do different things. My first speech to Cobseo, when I was a Minister, was, "There are too many of you". There are still too many of them.

Leo Docherty: I said the same thing.

- Q20 **Mr Jones:** I accept what you are saying about well-intentioned individuals. I know that the Navy, when I was a Minister, started a



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process of reducing the number of charities that it had, because some were doing the same thing. I know that it is a difficult task from you as a Minister to do it, but it needs to happen, from what the Chair is saying. I still see duplication. You also see a confused picture of where people go to.

Merger or consolidation around certain themes would be a way forward. I know that Cobseo has tried this in the past. Unless you do that and get the clarity, you are going to have a confused pathway for veterans. Actually, money is being wasted, and duplicated in some cases. Unfortunately, as Emma said, we have also had instances where some of them, frankly, have been fraudulent. It is terrible when that happens, because many of the people set them up with the right intentions and, unfortunately, some unscrupulous people get involved with them. It has to happen in this country.

Leo Docherty: I am not saying that it will not. I think that it will. Just as the way that they have come about has been organic, the rationalisation will be an inevitable organic process, as we move further away from the kinetic phase of our involvement in Iraq and Afghanistan.

Q21 **Mr Jones:** The Navy did do it, actually, in terms of a process of reducing down charities, especially ones that were coming to the end. I think the Wrens charity was one.

Leo Docherty: Yes.

Chair: With sensitivity, we are asking you to summon your Dr Beeching inside you. That is what we want you to do.

Q22 **Sarah Atherton:** To go back to that subject, Cobseo cluster has been given £710,000 to look at making service charities sustainable and collaborative across the sector. That is in the Armed Forces covenant and veterans annual report. That could answer some of the queries that Kevan has just highlighted, so what are they doing with that money?

Jessie Owen: Like I mentioned, Cobseo is doing a lot to raise capability across the charity sector, so helping particularly some of the smaller charities with the governance, making sure they meet the requirements of the Charity Commission and have the right sorts of processes in place. It is also doing a lot through the cluster system to enable collaboration.

That gets a little bit to the point being made around reduction in the number of charities. As long as the charities are working incredibly closely together, sharing information, coming up with combined pathways, having the right ways to refer people across the different parts of the charity sector, that, in a way, makes it much better for the individual veteran and removes some of the confusion. The cluster system works to help bring those charities together on different thematic.

Sarah Atherton: I am going to push on now with the covenant and



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Veterans UK. It is an initiative that is well embedded in society and doing some great work. It has been going for about a decade, perhaps a bit longer. You cannot identify who are veterans, because of the challenge of the data collection. I understand that. What are you going to do with the census data when you get it and how far are you digitalising proof of service?

Q23 Chair: Sorry, can I check on that? I thought that the national survey included a new tick in a box.

Leo Docherty: Yes, for the first time. You are right, Sarah. It is remarkable that, when you come into the Ministry of Defence as a new Minister and say, "How many veterans do we have? Where are they?" we basically do not know. We estimate about 2.5 million. We are doing a huge amount from the OVA about better recording of where people are and their needs.

The veterans marker on the census was a big breakthrough. Jessie can talk in a minute about what was done with that data. You are absolutely right. Getting a much better, granular picture and tracking people, especially as they leave into their civilian life, in terms of what needs they might have is really important. The veteran marker, for example for someone going through the NHS, is really important. We are making progress on that and that is now a thing in the NHS, alongside GPs being accredited and with the bespoke pathway of Op Courage.

Knowing where people are, how many there are and their needs is a massive data challenge. We are putting a lot of energy and money into that, but there is quite a big hill to climb.

Q24 Sarah Atherton: Are you digitalising that process?

Leo Docherty: Yes.

Jessie Owen: We have not yet had the data from the census. We expect to get the early cut of the demographic data later this year, so basic numbers, location.

Q25 Chair: You are still waiting for the 2020 data.

Jessie Owen: We are still waiting for the 2021 data, yes. None of the census data has yet been released, including the veteran data. We will get the first cut of the basic demographics later this year, so how many there are and I think then an age and gender breakdown. We will be able to answer that question of exactly how many veterans there are.

Q26 Mr Jones: You will not.

Jessie Owen: Or we will not.

Chair: Can you expand on why you say "You will not"?

Q27 Mr Jones: You will not. I am bemused by what you are saying about data, because it is all there. If somebody ticks a box on a census form,



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you are then going to have to check it. Speak to any prison governor, for example. They will tell you that their prison is full of veterans. When you check it and find out how many there are, it is less than 3%. How are you going to check that somebody has ticked on a box that they are a veteran when they actually are not?

Jessie Owen: The census data will not be cross-referenced to check that people are not fraudulently claiming. You are right, but it will give us a sense of the overall picture.

Q28 **Mr Jones:** It is useless then.

Jessie Owen: Our assumption is that most people fill the census in accurately.

Mr Jones: They do not. I am sorry; that is absolutely useless. If you are relying on census data, for people just to tick that they are a veteran, that is absolutely useless. You will have people—we have all met them in our constituencies—who claim to be members of the Armed Forces when they are not.

Q29 **Chair:** How do you confirm that, or can you confirm?

Leo Docherty: It is indicative. That is what we are saying.

Jessie Owen: Yes, it will give us a macro sense. There may be some, but we will be looking at big handfuls, how many there are, where they are, the overall age and demographic profile.

Q30 **Mr Jones:** It will not. I am bemused by this, and I will tell you why. You are paying people pensions, war pensions, existing pensions, so you know where those people are, in terms of the system. When we did the veterans evidence for people in prison when I was a Minister, we went back through RAF records to 1968, so we have visibility of those, so you know that. I would be interested to know what you say on veterans tracking.

Leo Docherty: Not everyone gets a pension.

Q31 **Mr Jones:** No, they do not, but you can go on the Army records. We actually took the records.

Leo Docherty: Where are they?

Mr Jones: You have them.

Leo Docherty: They are paper. This is the problem. This is why we are doing a huge amount of digitisation.

Q32 **Mr Jones:** I am sorry; it is not. I asked a question when I was a Minister. There was the issue where people were saying 25% of veterans were in prison. I got the Office for National Statistics to look and number-crunch all the information. I think the furthest we went back was 1968 for the RAF. It did not pick up some people. I accept that, but you got a very good picture, and that was all done in 2008.



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Leo Docherty: You can very clearly work out who has been in the military and who has left, but that is different. That is different from knowing where they are, if they are still alive.

Q33 **Mr Jones:** No, but it gives you a number. The other point is, in 2009, I agreed an initiative, which I do not think that you have followed through on, with the Department of Health about flagging up everyone who leaves the Armed Forces. On their medical records, there will be a flag. I was told at the time that it was too difficult to do. Mike O'Brien and I came up with a system that was working. Then the election came in. Are we still not flagging up veterans on medical records?

Leo Docherty: We are seeking to do that.

Q34 **Mr Jones:** That was possible, because I did the system, in 2009. Why it has not been done by now is just bizarre. I know why, because there are certain people in the MoD and NHS who were against it. Mike O'Brien and I came up with a system. We had an agreed system. We announced it. I think that it was in 2009 and it has still not been done.

That instantly does two things. First, it flags up those individuals in terms of medical records in terms of individuals who access the NHS. It also gives you very good visibility. I accept, Minister, that you will have been told, like I was, that it is too difficult. If you push back, you will find it is not too difficult.

Leo Docherty: That is a perfectly good point. I want to get us to a position whereby people are registered with their GP before they step off.

Mr Jones: That is not that.

Leo Docherty: Their medical records are shared with that GP, prior to their departure.

Q35 **Mr Jones:** That was all in place—there was a policy paper—in 2009.

Leo Docherty: Institutionally, that is the intent. That is my direction.

Chair: You get the message from the Committee.

Leo Docherty: We are working on it.

Q36 **Chair:** There is data out there. I was given my first Army number in 1987 and that should be in your system somewhere.

Leo Docherty: It is, but knowing how many people leave and how many have served—we have some 15,000 leaving every year—is not a method or a basis on which to track them.

Chair: No, but it is accurate.

Leo Docherty: We know how many people there are, but that is different from knowing where veterans are.

Q37 **Chair:** No, but it is accurate that you can tie it to a name, which I think is



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Kevan's point. In that way, you can actually confirm an individual.

Leo Docherty: You could come up with a list of people who have been in the military, sure.

Chair: The point has been made. More work needs to be done.

Q38 **Mr Jones:** I am sorry; you are wrong, Minister. If you had followed through on that piece of work, which was actually that, when you left the military—I got the arguments saying, “You have to insist”—all that people had to do was tick a box to say that they wanted to do it.

Leo Docherty: It should be an opt-out, not an opt-in.

Q39 **Mr Jones:** Exactly, yes. On the QOF system, the GP records, one, it said that they had been a veteran. Secondly, it passed their records over. That was the proposal. When you say, “Where are these people?” if that system had been implemented in the last 10 years, you could have found out exactly where the veterans for the last 10 years are, because you would have it on the NHS—

Leo Docherty: I want to get that point.

Mr Jones: It is there.

Leo Docherty: We are on the same hymn sheet. I am going to give you the credit.

Mr Jones: If you want access to my policy, I am quite happy to sign it off.

Chair: Let us draw this to a conclusion. There are two points here. One is that there is retrospective data that you need to look at. Then there is getting a system in that every leaver now has their data slid across to make sure that it is then recognised that they are a veteran for GPs, which is where they want to know. People are often hesitant to say, “I served whenever”. For the doctor, it is useful to know that, to say, “Okay, I can look out for other things necessarily”. We are yet to start the second question and we have done 40 minutes.

Q40 **Sarah Atherton:** Do you want to say anything about the digitalisation proof of service?

Jessie Owen: Yes. This year, we ran a digital discovery project. We worked really closely with the GDS, the Government Digital Service, and colleagues in MoD to look at the feasibility of exactly that and, in particular, how that might link in with broader Government projects around single sign-on and identity verification.

We have worked out that, basically, the data is in MoD. It is in lots of different pockets. Some of it is in paper records. A lot of it has been indexed. There are multiple different databases over different periods of time. We think that it should be technically feasible to use the Government's single sign-on to check that Jessie Owen is who she says



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she is and then ask MoD, "Is Jessie Owen a veteran? Did she ever serve?" and get a clear answer.

There is a lot of work that is going to need to happen beneath the hood between me saying that and that being a technical reality. We are in the process at the moment of exploring how and over what period we can do that work. There are dependencies on broader digitisation work that Veterans UK is undertaking to move all of its paper-based processes on to a digital system. There are also dependencies on other work that Government are doing around digital identities. That is very much our aiming point, so that people will be able to get online, quick and easy verification of their veteran status.

- Q41 **Sarah Atherton:** We received a lot of communications from veterans unhappy with the Veterans UK process, the time it is taking, the gruelling nature of the assessment and conflicts of interest. Do you want to comment about Veterans UK? Ultimately, should it be an independent body? That is what somebody has asked.

Leo Docherty: I totally acknowledge that there has been a great deal of customer dissatisfaction, if I can put it like that. Part of the problem has been the antiquated system that it is using, quite literally paper records, which I have seen for myself up in Norcross, but also maybe some of the interactions with claimants.

That is now changing. We have given them a very clear direction. I am pleased to confirm that there is now a very significant digitalisation contract that is underway. That will be north of £40 million to make that process much slicker and faster. I am also pleased that it has really leant into the approach of getting frank feedback from claimants and improving its customer service. There is a huge amount of work to do, but we are in a good place.

- Q42 **Sarah Atherton:** There is a conflict of interest. Veterans UK appoints medical advisers, who undertake a medical assessment and then hand it to the person who has paid them to judge whether someone is eligible for a benefit, for example Armed Forces independence payments. There is a conflict of interest there.

Leo Docherty: No, I do not recognise that. I do not agree.

Jessie Owen: There will be a quinquennial review of the Armed Forces compensation scheme, starting this year, which will look at the overall scheme, how it works and where there can be further improvements and changes made. We are hopeful that many of the concerns raised by the veteran community can be funnelled into that review. That is a good opportunity to look at how the system is working and where it can be further optimised.

- Q43 **Sarah Atherton:** There are Armed Forces charity leads and Armed Forces champions in jobcentres. They are doing a good job. We have a great one in Wrexham. She is brilliant. There are over 700 jobcentres and



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65 Armed Forces champions. Is there any scope to roll that out?

Leo Docherty: We committed to 50 in the veterans strategy earlier this year. Like you, I have met them first-hand. I met a brilliant one in Cardiff. We must not fall into the trap of thinking that the solution to a problem is simply to have more people. We want the best expertise available, rather than simply lots of people. The direction of travel is very good and DWP has done a fantastic job at seizing this opportunity. Having met them and seen the really bespoke provision that they provide in jobcentres, I have been hugely impressed.

Q44 **Mr Jones:** That was an initiative that you reinvented.

Leo Docherty: It was a Labour Party policy.

Q45 **Mr Jones:** It was. I introduced it and then you cancelled it when you came into power in 2012.

Leo Docherty: We have improved it. I am willing to give you the credit, Kevan.

Mr Jones: You might have improved it, but the point is that, in terms of veteran specialisation, that was very much welcomed by the veterans community. It is a bit like the digitalisation of the records at Blackpool. I think you will find that cuts from 2010 onwards meant that that was not done, even though it was on plan to be done.

Q46 **Sarah Atherton:** I will give you both credit; you are doing good jobs. Support in Northern Ireland is scant. It certainly was when I went on the gateway yesterday and we know it is. What plans do you have for Northern Ireland?

Leo Docherty: That is a really great question. The bottom line is that, given the political reality of a situation in which only half of local authorities have even signed it in Northern Ireland, it is an extremely complex and challenging political environment.

In terms of our institutional response, we are looking at enhancing what is currently called the aftercare service, which is the provision for UDR and home service veterans, which is excellent, by the way; we have some fantastic people involved. We want to expand that, so that the very significant number of Northern Irish veterans of more recent times can benefit from that support. We are looking at that and that is work underway.

It is a case also of relying on the incredible ingenuity and agility of the Armed Forces champions in the local authorities and working together with the independent veterans commissioner and all parts of a very complex jigsaw puzzle. The thing we are most urgently focused on is the expansion of what is currently called the aftercare service to include more recent veterans.

Q47 **Gavin Robinson:** You are relatively new to this role. The tired and old



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trope that it is all very difficult in Northern Ireland is something that we should be moving away from. You have mentioned Armed Forces champions within local authorities, but I hope you recognise that our local authorities have no role in the provision of housing, education or health. Ordinarily, those three areas that we think of in terms of Government have nothing to do with local authorities whatsoever.

In New Decade, New Approach, your Government committed to introducing a statutory duty on the Armed Forces covenant that should apply to the Government Departments that operate those areas and realms where the covenant would be most appropriate. We should be long past the time that Government are saying, "It is all quite difficult", and the UDR aftercare service is the vehicle or the mechanism for delivery. It should not be. We now have a statutory duty and Departments in Northern Ireland should be adhering to the covenant, because it has been passed. There was a commitment given on the restoration of devolution in 2020 and something has passed this House.

Leo Docherty: I do not disagree entirely, but saying that the aftercare service should be expanded and made better to include more recent veterans is not a cop-out. That is a no-brainer. It is a very good service. The people involved are first class and are entirely attuned. The NI vet service is also fantastic. It is just about empowering them to do more, basically.

Q48 **Gavin Robinson:** They are doing a great job and expansion of it is superb. A good friend of mine is heavily involved with the UDR aftercare service and, as it has evolved, has been with that process. That is not the point. It is the points that we have raised in this Committee over my six years of membership, where the Health Minister in 2016 said that the Armed Forces covenant does not apply here. She was wrong, but we needed a statutory duty to make sure that people could not take sectarian decisions like that. We now have that statutory duty. I would like to see MoD and the veterans' service spend more time with Government Departments, not behind the scenes and behind a whisper here and a whisper there, but honourably and positively engaging with veterans to say, "We have a commitment in this country and it applies right across the board".

Leo Docherty: I totally agree with that. I have visited Northern Ireland three times in the last year. Maybe he and I could visit. I am happy to champion this in his own constituency. I am very enthusiastic about opportunities to be very public and forward-leaning about the statutory and national duty that we have to our veterans. That applies to Northern Ireland just as it does everywhere else in the UK.

Jessie Owen: There will be new statutory guidance about the covenant duty coming out later this year, as the duty comes into force. That will be a good opportunity for us to promote that to those organisations that are responsible in Northern Ireland.



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Gavin Robinson: That would be useful. I am happy to take you up on that, Minister. Thank you.

Q49 **Chair:** Let us move on to health. We are going to divide this up into general physical health and mental health. That would make sense. You leave the Armed Forces. You move to a new area. You then want to sign up to your GP, but your GP says that the list is full. That is something that a number of veterans have experienced. It suggests that the Armed Forces covenant is not being honoured. What would your response to that be?

Leo Docherty: The statutory duty is a work in progress. I am not aware of people who cannot sign up to their GP practice. I have never heard of veterans unable to register with a GP.

Q50 **Chair:** They are not accepting new patients. They are unable to take any new patients on because they are unable to provide the service. This happens quite a lot. You move to a new area, so there is an anticipation that the Armed Forces covenant will be somehow honoured. They will get the attention they need.

There are a number of ways that perhaps this could be resolved. A lot of work is now done through Zoom and so forth, so there could be ways to mitigate and deal with perhaps the low-lying fruit of general medical support. As I say, this has come from a number of veterans. I actually saw it when I did visits myself to veterans breakfast clubs. When they retired and moved to new areas, they were behind a very long queue.

Leo Docherty: Those who have some sort of injury attributable to service will be afforded care as a priority. That is a different thing.

Chair: That is not what I am saying.

Leo Docherty: No, I am just saying. The point about where your question is heading is that, if it is not a case of a specific injury, perhaps there are cases whereby, because of there being a long queue, you cannot jump the queue. The fact that the covenant exists will not necessarily allow you to jump to the front of the queue. That is what I would say in response to that.

Q51 **Chair:** They just want to be able to see a local GP in their new area, where they have not had a relationship with the community before.

Leo Docherty: I have never heard any factual reportage of veterans not being able—

Q52 **Chair:** Is it possible for you to take this up with your public health ministerial counterpart?

Leo Docherty: There is the case that you are talking about. We all deal with casework as MPs. I would like to know about that specific case. If there is a case of a veteran who has not been able to register with a GP, let me know about that case.



Q53 Chair: The series of questions that come in this area are all to do with the absence of Armed Forces covenant being acknowledged or appreciated by GPs themselves. There is not a recognition that there is a duty of care to honour the covenant that they have signed and the NHS has committed to.

I suppose that my question is more general then. What information is given through the NHS chain of command, if you like, to say that this is what they have signed up to. This is why they should look out for and support those who are leaving the Armed Forces.

Leo Docherty: An increasing number are veteran accredited. We are now at over 1,000 GP surgeries that are veteran accredited, so that is good work in progress.

Q54 Chair: What does “veteran accredited” mean?

Leo Docherty: It means aware of the specific needs of veterans.

Q55 Chair: It is 1,000 surgeries up and down the country.

Leo Docherty: Yes.

Q56 Chair: That is early. I assume you have a lot more to go.

Leo Docherty: Yes, a great deal more.¹ I am saying that there is an appetite out there from GPs to be veteran-aware. That is a good thing.

Q57 Chair: It is 1,000. How many GP surgeries are there in the UK?

Leo Docherty: It is early days.

Q58 Chair: Another question that came through is why veterans who left the service before 2005 cannot get help with hearing loss. Is there a reason why 2005 came up as a date as a line in the sand?

Leo Docherty: I do not know. I am happy to take that away as a specific query.

Jessie Owen: There should not be any barriers on any veteran getting help for hearing loss through the NHS.

Leo Docherty: It might be to do with the LIBOR funding that was granted for a specific number of sets, but I would have to check. I am happy to take that away.

Q59 Chair: There are also questions to do with severe physical injury. When you are in the Armed Forces, you get very good treatment and support. Once you depart the Armed Forces, you cannot continue going back to the very same places you are treated in from the civilian component, which is not to the same standard. They are pointing to the fact that you have support mechanisms inside the MoD that are not utilised to their full capability.

¹ There are 6552 GP practices across England.



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Jessie Owen: Like what?

Q60 **Chair:** Stanford Hall, for example, I think was named as one of them. I visited it and it was largely empty. It was built to deal with a mass evacuation, huge numbers of injuries, battle injuries, probably connected with Afghanistan, with many corridors absolutely empty. I queried why you could not have veterans who also need continued rehabilitation using those same facilities.

Leo Docherty: It is busier than it looks. I was there last week. Not all of those patients using it are inpatients of course, so they come and go. There is a steady trickle going through. That may change when the national component comes on stream.

Q61 **Chair:** Could you explain that?

Leo Docherty: That is when the civilian component of that same site comes on stream, which is a work in progress.

Q62 **Chair:** They were just talking about that when I visited myself as Minister. They pointed to a field and said, "This is where a civvy operation will start".

Leo Docherty: It is still a work in progress. Clearly, it is all relatively new. It has only been running for two years, but the national component will be a very significant operation. That will gain direct benefit from the military centre of expertise. We must be cautious about diagnosing an underutilisation. The fact that it has spare capacity is a good thing. It is like a military insurance policy that has capacity to expand, should we need it to.

Q63 **Chair:** It is, but, in fairness, we have now retreated from Afghanistan. We do not have green troops on the ground in Ukraine; therefore there is capacity there. You can understand the veterans' concerns. They are seeing a very capable, state of the art operation, which could be better utilised by those who have served their country.

Leo Docherty: It is well utilised. The numbers dealt with by Defence Medical Services, which run Stanford Hall, are in the thousands throughout the year, so they are very busy.

Q64 **Chair:** The final question is who is auditing or monitoring the performance of Veterans UK and the medical advisers that it appoints.

Leo Docherty: I have ministerial oversight, so I am responsible for the assurance of that organisation.

Q65 **Mr Jones:** I want to talk about mental health, but it actually picks up on the physical health. It is about the pathways for veterans. Can I touch on those veterans from Afghanistan and others? In 2010, you had the Army recovery capability, which was about trying to attract people through into the NHS long-term care. What happened to that?

Leo Docherty: I do not know what happened to that.



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Q66 **Mr Jones:** It would be interesting to know, because that set up clear pathways for those severely injured for lifelong care, which was a partnership between the NHS, MoD and service charities, which was an obvious pathway for making sure that those people did not fall through the cracks long term.

Leo Docherty: We have a pathway, which we now call Op Courage, which is a very good and clear bespoke pathway throughout the NHS for those needing treatment for mental health. That is going very well. Part of its success is because it involves veterans themselves as peer support workers. I am confident that we are in a good place with regard to that bespoke pathway.

Q67 **Mr Jones:** The real problem with all this is that you actually do not know where the veterans are, do you? There is the issue on mental health. We have some things here. What action is the Minister is going to take to ensure that those leaving are able to register, in terms of GPs, which has just been raised? Also, in terms of mental health assessments, the fact of the matter is that, once people have left, even if they are leaving in terms of mental health problems, they do not receive ongoing care in terms of consultant psychiatrists and psychotherapists, for example. What is the pathway?

Leo Docherty: If they need it, they will. For those who have not experienced any ill health prior to departure, if they are a veteran, the gateway will be their GP, who can then refer them to Op Courage.

Q68 **Mr Jones:** That comes back to my problem. You do not know where they are in the system. That is the reason why veterans tracking and veteran flagging in the health service was the reason to know where they are.

Leo Docherty: We are in agreement that we would all like there to be a system whereby veterans have their medical records put into the civilian system on departure. We are in agreement on that.

Q69 **Mr Jones:** This was in 2009. I cannot understand why—

Leo Docherty: They need a Government Minister who is going to deliver it. I have been in post a year and we will get after it.

Q70 **Mr Jones:** I do not know what the problems are with it. The problem with all this, both physical and mental health, especially on mental health, is that some of those issues will not come out until later, when people have left. A lot of those people present to GPs. You cannot rely on the individual raising the fact that they have been in the military. The reason I came up with that policy in 2009, with Mike O'Brien, was the fact that that would at least put a flag on their records for GPs and others to be able to do it.

Unless you actually have this type of tracking system, for both physical and mental health, you can have all the great initiatives about GP surgeries being veterans-aware, et cetera, but, unless you actually flag those individuals through the system, you are never going to get some



people. Especially on the mental health side, some people will not admit it. Likewise, you get the other side of people who turn up to mental health services, and in prison particularly, who claim to have been in the military and have been nowhere near.

Leo Docherty: You are not wrong. As you have mentioned, a lot of these problems or issues will not become apparent until years after service often. An important component is ensuring that, institutionally—we are in a much better place now with regard to this—people are made aware of the necessity of looking after their mental health. We reduce the stigma around asking for help. We make sure people know it is the strong and soldier-like thing to do to ask for help. Now, when you go through phase one training or any kind of leadership training as part of military education, support for and encouragement of good mental health is becoming institutionally embedded. We are in a much better place.

Q71 **Mr Jones:** I accept all that. It has moved on, not just in the Armed Forces but also in general society. People talk about mental health, which is good. The key problem you have is, unless you actually know where veterans are in the system, you are never going to be able to bend the system. I know that some people look at the American system. The American system is completely different to ours.

The one thing that I think Derek actually started when he was Veterans Minister was the cross-departmental command paper, in terms of making sure that veterans were taken into consideration in the formation of policy. We used to have a meeting of leads in each Department. Unless you actually know where the veterans are, what the numbers are, with some mechanism for flagging them up, frankly, you can have all the awareness-raising and initiatives like Veteran Aware and charities doing the various bits and pieces, but people are going to fall through the cracks. Certainly for the severely wounded, the Army recovery capability was that pathway that linked in not just to the NHS but to local authorities, housing and everything else

Leo Docherty: I do not disagree. That is what we do have. Knowing where people are is one thing, but it is no good knowing where people are unless they actually ask for help. The whole point of Op Courage and the involvement with veterans in the provision of the care, coupled with GPs that are referring their patients, is that it is entirely bespoke and fast and there is, therefore, a good take-up.

Q72 **Mr Jones:** That is not the experience of veterans.

Leo Docherty: Really? That is a very broad statement. Can you justify that?

Q73 **Mr Jones:** I will. You have this complex landscape that Sarah referred to in terms of where you get help in the system. There are some people who will not raise the issue around service in terms of talking about their mental health, but the system, i.e. the NHS, needs a mechanism to be able to identify people and ask those questions that you are talking



about. I would just like to know, in terms of those severely wounded, what that pathway still is and also about the monitoring, because part of that Army recovery capability was actually not just to make sure they interacted with all the services and got the services they required. MoD was looking after these people long term, so they ensured that if they did come into logjams with the system, things got sorted out.

Leo Docherty: That is the veterans trauma network, which is the bespoke clinician-led pathway for the physical side of traumatic, and Op Courage is the mental side.

Q74 **Mr Jones:** It was not just medical. It was also making sure you had, for example, housing needs and social services needs for some of these civilian individuals. The MoD's responsibility was to track these individuals through their entire life. You are not talking about vast numbers of individuals. I presume that has just gone by the wayside.

Jessie Owen: We should come back to you with the detail.

Leo Docherty: That is covered off by the Defence Transition Services.

Q75 **Mr Jones:** No, it is not. That is something different. We had that as well. We gave a commitment. Derek did, as I did, and Bob Ainsworth did at the time. We gave a commitment that those people who were severely injured in Afghanistan and Iraq were going to be looked after for life and that meant visibility of those individuals, but also making sure the system worked for them. You are telling me that they are not tracking those individuals still.

Leo Docherty: That is the defence recovery capability. It is called something slightly different.²

Q76 **Mr Jones:** I am interested to know whether those individuals are still being tracked, because my aim was to ensure they were tracked for life. We have one particular question about mental care. Why are MEG scans not available to veterans to help with diagnosis of traumatic brain injuries from blasts they have endured? This would make a real difference, according to the person who sent this post in, to those suffering from traumatic brain injury.

Leo Docherty: I do not even know what a MEG scan is. What is it?

Mr Jones: It is a brain scan, basically.

Leo Docherty: What is it in detail?

Mr Jones: The point is that we have had it raised on this Committee that there are quite a few individuals who are suffering from injuries to the

² Integrated Personal Commissioning for Veterans (IPC4V) launched March 2019 to care for Service Leavers with complex & enduring health conditions resulting from injury while in Service. More information on IPC4V can be found in [JSP100 \(3.8\)](#).



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brain that are coming out later on because of exposure to blasts, whether it be themselves or actually being on the receiving end. I accept it is a controversial area because there is some new research into this. The Americans have done a lot of research in terms of this area and it is just wondering where it is in terms of looking at these individuals.

Chair: It is to distinguish between traumatic brain injury and PTSD and it is important to make the distinction.

Mr Jones: He did write to us on 26 May, apparently.

Chair: The difference is that by doing the scan itself, you can actually confirm the condition of the brain, which would then give you an indication as to the support that is then needed to do with traumatic brain injury. If you start treating them from PTSD, it would be the wrong type of treatment.

Derek Twigg: It is much more in depth.

Chair: Can you perhaps take that away?

Leo Docherty: I will take that away.

Q77 **Chair:** You said until they come forward, you do not know whether they need help or not. If I could just politely push back on that, the cases that I dealt with in the Army were actually where—

Leo Docherty: I did not say that.

Chair: Forgive me if that is what I interpreted; I am pleased that you have then corrected that.

Leo Docherty: Let us put the record straight.

Q78 **Chair:** I am more than glad to do so. It often is the friend, the relative or somebody else who then says to an individual, "You need help". It is not the individual themselves who then puts their hand up to say, "I actually require help". The Army way is you just want to plod on and you do not want to be a problem to anybody. With that in mind, what I tried to set up as a Minister was to reach out after somebody had left and come back from Afghanistan or Iraq. Two years later we would give them a cold call and say, "How are you doing?", and speak to the wife, the partner or whatever and ask, "How is he or she doing?" Is that programme in place at all? Is that working?

Leo Docherty: We have had some good work on that approach, which I would call collective care. It is the kind of thing that is hard to institutionalise and is often most effectively done by, as you say, the people's friends or their direct service contemporaries.

I have been really hugely impressed by the way that a lot of mental health best practice has been taken up at sub-unit level. I was in a rifles battalion earlier this year and speaking to the sergeant major about any



mental health problems they might have or their approach. He took me to see the resilience committee, which was the rifleman's way of talking about these sorts of issues and framing it very firmly in the context that being a good soldier requires you to have good mental health and it is not weak to ask for help. That is the lesson that we need to indoctrinate in all of our people, so that when they leave they have that approach.

There was a very good example from your old regiment of basically a Charlie Charlie 1 call for everyone to get in touch with everyone else. A lot of the best work is done at sub-unit and regimental level, institutionalising it as an approach that follows people out of their service. Reinforcing that is our institutional support or the third-sector organisations.

Jessie may want to talk about what followed our withdrawal from Afghanistan last summer. Clearly, that was a very traumatic event for a lot of people, bringing up a lot of very traumatic memories. Clearly, a lot of the support was going to have to be provided by their own regimental peers, but the Government have a role because we can empower the third sector to reach out to people.

The single services themselves had a very important role, because it was our duty to make the point to people that in this case their involvement in Afghanistan was the right thing to have done. We did a lot of reassurance work in that space in terms of the moral injuries. Government can get out the communications. It is the role of the third sector to reach out to people, but a lot of the best and critical work is done by the peer group of the veterans themselves. I do not know if you want to mention anything about the specific Afghan fund.

Jessie Owen: With the £5 million Afghan fund the PM announced in September, we provided £1.2 million of that to service associations to do exactly as you describe in terms of that supportive comradeship. That went to the Navy and RAF Benevolent Funds and a range of different regimental associations within the Army, particularly to reach out to younger veterans, who might not be so well plugged in to their service association. A number of the regimental associations are looking at digital outreach mechanisms, using that funding to plug that.

We also provided about £700,000 of grants to smaller local wellbeing and resilience outreach initiatives, again to provide that helping hand. It is not from the Afghan fund, but as part of the veterans mental health and wellbeing funding provided by the Treasury, which was £30 million over the last three years. The Armed Forces Covenant Fund Trust has a programme called the VPPP—Veterans' Places, Pathways and People—programme, which is all about joining up the statutory and charity provision from different regions. It is all about the regions that map to the Op Courage regions in the NHS, joining up NHS and charity provision, so that no matter at what entry point the veteran identifies that they



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need help or comes in contact, they can get the best of the charity sector, the NHS and the local authorities.

Leo Docherty: It is a very good thing. It is the non-clinical support to veterans who may have had mental or physical trauma. It is non-physical and non-clinical. It is an entirely good thing and it is empowering third-sector providers to help look after people. It is an entirely good thing.

Jessie Owen: It is enabling that collaboration.

Q79 **Mr Jones:** Can I ask a question in terms of these pots of money? My impression is you just throw money out there. What valuation is done on the effectiveness?

Leo Docherty: It is very rigorous and it is through the Armed Forces Covenant Fund Trust. I had a presentation from them this morning.

Q80 **Mr Jones:** If I am applying, for example, for Heritage Lottery or Lottery funding as an organisation—

Leo Docherty: That is the Lottery, is it not? That is not the Armed Forces Covenant Fund Trust.

Q81 **Mr Jones:** Just listen me out. You are getting very irritated. I do not know why. It is perhaps because you are a bit out of your depth on some of these issues.

Leo Docherty: I am very calm.

Q82 **Mr Jones:** The point is this. If I apply for Lottery funding, for example, for any organisation, I usually have to give a good valuation afterwards in detail about how it has actually been spent. Is it the same with this money? LIBOR was the biggest example of money being thrown at some organisations that should never have got it. What evaluation is there and how joined up is it in the overall strategy? You can throw money out and make announcements, but what is always key is to ensure that that money is well spent. I accept sometimes you might spend money to test things that do not work. I am quite relaxed about that. If you test something and it does not work, at least you have learned something. That is how it works. How is it done with this?

Leo Docherty: The Armed Forces Covenant Fund Trust has a rigorous evaluation process. I was learning about it this morning. They receive bids, evaluate them and track the output.

Q83 **Mr Jones:** Are they published?

Leo Docherty: Yes, indeed, annually. There will always be a great range of different provision and some may last longer than others, but, by and large, there is some fantastic work being done.

Jessie Owen: They have a knowledge hub on their website.

Leo Docherty: Look it up on the website, yes.



Q84 Sarah Atherton: How does the OVA assess unmet need? How do you assess unmet need of veterans? We have an example here talking about devolved Administrations and healthcare. He has PTSD. He is in Llanelli in south Wales. He has to travel to Shropshire to receive therapy. That fell apart. I am assuming he is not so vulnerable, because he probably would disengage if he had to travel from south Wales to Shropshire. This guy has fallen through the net. How do you make sure that there are not more guys like this falling through the net?

Leo Docherty: Through our liaison with the NHS. The question is whether there is a regional disparity or a national disparity within the NHS. That is a very good question. I have been reassured that there is not with regard to NHS Wales. I am entirely confident that the provision, from what I have seen first-hand in Op Courage in England, is excellent.

Q85 Sarah Atherton: Minister, I have to stop you there. NHS Wales is on its knees.

Leo Docherty: I am talking about England.

Mr Jones: Courage does not go to Wales.

Leo Docherty: Yes, I am talking about England. The question is whether there is any national disparity with the NHS in Wales. That is something we are looking at. I am pleased that we now have an independent veterans commissioner. Colonel James Phillips will be an ally in terms of us understanding any capability gaps, but the unmet need question is a very good one.

Jessie Owen: Clearly, we have talked about the census data. That will give us an idea of where veterans are and things like the health status. Also, the OVA will be doing a veterans survey kicking off this year, so veterans will be able to tell us if they think they have issues. That will give us a sense of some of the challenges.

Also, this year we have £5 million of spending on a health innovation fund. This was announced by the Chancellor last year. That is to look at innovative new healthcare treatments across mental and physical health needs. One of the things that we want to do with that funding, which we are still working out exactly how to spend at the moment, is to do some proper assessment, working in partnership with NHS colleagues, exactly about veterans' health needs, because we are aware that we do not have that deep an understanding about the range of different veterans' health needs. That should give us a really good baseline upon which we can then base further policy interventions, funding or treatment pathways.

Q86 Derek Twigg: Just coming back to the Veterans' Places, Pathways and People, what happens? Are you confident that those who have the most complex mental health needs, who, for instance, Combat Stress cannot handle and deal with, are receiving the best possible mental health care? I assume that is going to be from the NHS.



Leo Docherty: That is Op Courage.

Q87 **Derek Twigg:** How would you know that and how do you measure that?

Leo Docherty: I am confident they are because that is the feedback we get.

Q88 **Derek Twigg:** That is not the question I am asking.

Leo Docherty: In answer to your question, my measure for understanding that is the feedback I get from the people running the NHS and Op Courage.

Q89 **Derek Twigg:** The feedback is that every single complex case—

Leo Docherty: The feedback is clearly there is high demand and they are within their targets for the waiting times. If your question is whether the people who desperately need help receive it, the answer is yes. We are in a good place. I would like waiting times to be reduced even further, despite the fact that they are within targets. There will always be future need, which we cannot predict, but the feedback I get from the people running Op Courage is that—

Q90 **Derek Twigg:** Just to help me understand, how does the screening process work, where you get an individual who has very complex needs? They are not, for instance, sent to Combat Stress or another organisation, but actually are dealt with within the NHS, which has the expertise and resources to deal with the most complex cases. How does that screening process actually happen on the ground? Say former soldier A turns up with massive complex needs. Who does that screening?

Leo Docherty: The complex treatment service.

Q91 **Derek Twigg:** He or she sees the GP first.

Leo Docherty: The GP will refer them.

Q92 **Derek Twigg:** How do you know they are getting referred to the correct point in a health service or the charity sector?

Leo Docherty: It is hard to know about people who have not been referred, but the wait time is five days for those who are referred.

Q93 **Derek Twigg:** Do we know how many seriously complex cases are referred to the NHS from veterans?

Jessie Owen: I do not have the exact figure. Op Courage is made up of three different services, so TILS, CTS and high intensity.

Derek Twigg: Maybe you could let us have it.

Jessie Owen: We can. There have been 19,000 referrals overall.

Leo Docherty: I will write to the Committee with all of the recent figures in all three lines of operation within Op Courage. I am very happy to do that.



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Jessie Owen: Op Courage works in partnership between the NHS and the charity sector, so no matter where an individual comes in, they should be able to cross-refer if they have a need that can only be met by the NHS high intensity service.

Q94 **Mrs Lewell-Buck:** There is a Falklands War hero in the news today whose state pension has been frozen at £106 a week because he settled on the island after the war and because it is an area not covered by the upratings. He is losing now nearly £2,000 a year. The International Consortium of British Pensioners estimates this impacts around 60,000 military veterans around the world and they are saying that they feel abandoned by the very country that they served. Are there any plans to change this?

Leo Docherty: I am very happy to take that case away and look at it as representative of that number. Let me look at that individual case. Thank you.

Q95 **Mrs Lewell-Buck:** I was wanting you to look at all of them, not just one person.

Leo Docherty: That may or may not be a helpful factor.

Q96 **Mrs Lewell-Buck:** He is not the only person living on the Falklands who served there who is a UK citizen. There are a lot.

Leo Docherty: Who does the 60,000 refer to?

Q97 **Mrs Lewell-Buck:** It is around the world, so veterans who have served the UK.

Leo Docherty: In receipt of a war pension who have settled overseas.

Q98 **Mrs Lewell-Buck:** They are not allowed to be uprated because there are only certain countries that the UK Government allow.

Leo Docherty: I am very happy to take that away.

Mrs Lewell-Buck: For the 60,000.

Leo Docherty: Yes, of course.

Q99 **Mrs Lewell-Buck:** Also, in the middle of a cost of living crisis, across the board people are struggling. Has there been any thought given to extending the right to a preserved pension to those who left service before April 1975?

Leo Docherty: It is inconceivable, frankly, that we would revise pension provision. That is the blunt answer.

Q100 **Mrs Lewell-Buck:** Why is that?

Leo Docherty: As a Government, we would not expect to revise or revisit a pension provision, basically.

Q101 **Mrs Lewell-Buck:** Why?



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Leo Docherty: It would set a very difficult precedent for everyone else who wants their own pensions amended and it would undermine the bedrock of sustainable pension provision for the millions who receive the pension.

Q102 **Mrs Lewell-Buck:** Do you know how many people this would actually apply to?

Leo Docherty: Are you going to tell me?

Mrs Lewell-Buck: No, I do not know. That is why I am asking.

Leo Docherty: I am happy to look at it. Out of curiosity, I would like to know the answer, but being frank, it is not our policy to revise pensions. We can be creative and try to look at ex gratia payments to some groups of people in some specific circumstances, but I would not be able to be specific about revising wholesale a pension provision, to be frank.

Q103 **Gavin Robinson:** Minister, I was keen to establish how far you have got on with war widows' pensions and reinstating those.

Leo Docherty: That is a good question and it is attendant to that kind of specific case that we are seeking to find a creative solution. We are not revisiting the pension provision, but looking at providing some sort of other financial measure to acknowledge the gap that was left because of the peculiar set of circumstances. That is a live work in progress. I have met the right honourable gentleman, who we all know, from the New Forest and I have met with the War Widows' Association numerous times. We are heading in the right direction. We are putting some good creative thinking on it, and I am hoping we will have a good outcome soon.

Q104 **Gavin Robinson:** That is the same response we will have had for the last three years.

Leo Docherty: I know that.

Q105 **Gavin Robinson:** Are you indicating that it is progressing?

Leo Docherty: It has progressed, yes.

Q106 **Gavin Robinson:** The Government recognise that having stripped the war widows' pension off war widows simply because they remarried—

Leo Docherty: We acknowledge that. We are getting to a good place and we look forward to updating you in due course.

Chair: This is a crazy policy. If a war widow remarried, divorced and then remarried, they would get a bigger compensation than if they just wait for you now. It needs to be—

Gavin Robinson: The same person.

Chair: Actually, they do not have to marry the same person.

Gavin Robinson: They could.



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Leo Docherty: Mr Chair, you will remember it from your time in my role.

Chair: I do.

Leo Docherty: We are further down the path now.

Chair: I just thought it was bad policy that you could divorce your new husband and then remarry, and then you would get more money rather than the current system. That just did not make sense.

Q107 **Gavin Robinson:** What is the timescale?

Leo Docherty: It does not make sense, but I am trying to fix it.

Q108 **Gavin Robinson:** What is the timescale?

Leo Docherty: As soon as possible.

Q109 **Gavin Robinson:** What does that mean?

Leo Docherty: It means as soon as possible.

Q110 **Gavin Robinson:** Is it this financial year?

Leo Docherty: It means as soon as possible.

Chair: Minister, with respect, this is a serious matter.

Leo Docherty: I know it is a serious matter. I am saying it is as soon as possible.

Q111 **Gavin Robinson:** Within this financial year. Do you believe that come the next financial year—

Leo Docherty: I hope that it is as soon as possible.

Gavin Robinson: That is nine months.

Leo Docherty: I hope that we will resolve it as soon as possible.

Q112 **Chair:** This is turning into “Yes Minister”. Perhaps you could take this away and write to us, please, with whether it is months or years in which we are going to resolve it.

Leo Docherty: I am not going to put any timeline on it. With respect, I have been very frank that we are working extremely hard and we will resolve it as soon as possible.

Gavin Robinson: Minister, I am pleased to hear that you have at least been meeting on this issue and that you are engaged in this issue, but, as I say, I have been on this Committee for six years and it has been a perennial issue over those six years. We have heard lots of honeyed words, but we have not seen action.

Chair: The point has been made.

Q113 **Mrs Lewell-Buck:** How much is left unclaimed in the Armed Forces



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pension pot?

Leo Docherty: I do not know. I am not sure there is even a figure for that.

Q114 **Mrs Lewell-Buck:** Someone has written in to the Committee to say there is about £300 million sitting there and that is because it is not accurate for veterans on what pensions or what benefits are available for them.

Leo Docherty: That is not a figure I recognise. In my understanding that is not how it works. I am happy to double-check, but I think that is inaccurate. I am happy to check.

Q115 **Mrs Lewell-Buck:** Why is junior service not included in pensions?

Leo Docherty: How would you define junior service?

Mrs Lewell-Buck: It is one of the questions that we got sent in to us.

Leo Docherty: There is not really enough detail for me to go on. Do you mean time in training?

Mrs Lewell-Buck: I imagine it will be age-related, will it not?

Leo Docherty: Prior to 18.

Chair: Maybe you can come back on that.

Leo Docherty: I am happy to get the technical answer on junior service.

Q116 **Chair:** People are employed by the British Army or Armed Forces. You are an employer as such and, therefore, that is when a pension scheme should kick in.

Leo Docherty: I am happy to look at that. It probably also relates to record of service from your last day in training. I am happy to write to the Committee.

Q117 **Richard Drax:** Again, I have four quick questions on this little area. The first four points I have just lobbed under one, because it is all about the tribunals, the considerable distress that they cause and the length of time they take. One veteran here has waited five years and they are still not sorted out. Someone else is saying, "It is convoluted and almost impossible to make a claim". Another here says that he feels the whole thing is a bit like dealing with an insurance company, which looks for every possible reason why they should not pay out, and he believes that this is the "absolute antithesis" of the Armed Forces Covenant. Perhaps just comment on the tribunal system.

Leo Docherty: I acknowledge that there have been problems with this. I have had very frank discussions with Veterans UK. I met them up in Norcross and I am pleased with the assurances they have been giving me about their willingness to have very frank discussions and customer feedback. They have improved their processes. It is a work in progress,



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but significant improvements have been made. I have given very clear direction to the Veterans UK team that it is not about a culture of disputation and litigation. We are there to try to help people and the service has already improved, but we are going to, as part of the digitisation process, demand sustained improvement.

Q118 Richard Drax: I am going to bring my fourth point forward now, because it fits in quite nicely. I am going to read it. I do not know if it is accurate, but this is what this person says. "Why, between 6 April 2005 and 31 March 2021, according to the MoD's AFCS statistics, out of 7,650 injury appeals, have there been 880 new outcomes, where the claim was previously rejected but was awarded on appeal, 1,295 awards increased, where the tariff level previously reached is made higher on appeal, and 1,760 favourable reconsiderations, where a claimant has initiated an appeal before reconsideration has taken place and the reconsideration increased the award?" That is quite a large number of appeals that have been won. Do those figures ring bells with you? It does seem quite large.

Leo Docherty: I am very happy to present those to Veterans UK and ask for an explanation.

Richard Drax: It does seem a large number.

Leo Docherty: I do not recognise it, but I am happy to follow that up.

Q119 Richard Drax: My next point is the loss of earnings this veteran asks for. "Why does the Armed Forces compensation scheme not include loss of earnings, please?", he or she says. This person served in Afghanistan, suffered both a physical and mental breakdown and has been through hell and beyond. The sound of helicopters now causes PTSD. He or she ends by saying, "However, I also feel aggrieved due to not receiving any loss of income compensation. This applies to everyone who was medically discharged and is unfair".

Leo Docherty: My understanding is that is taken into account in terms of the level of provision, but I am happy to get the technical metrics that they use for that. My understanding is the award is made in relation to the extent to which they are incapacitated, which will take account of loss of earnings.

Q120 Richard Drax: It does. Can you come back to us on that?

Leo Docherty: I am happy to give you a technical description of the basis on which they make these awards. I am very happy to do that.

Q121 Richard Drax: That is kind. I am going to read the final one, so I do not make a mistake here. "Why is it acceptable for Veterans UK medical advisers to contradict and overrule the opinions of the diagnosing consultant clinical psychologist or psychiatrist when the MAs are not even psychiatrists or psychologists, let alone consultant grade in these specialities?"



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Leo Docherty: Having met the medical team in Veterans UK, we have absolute confidence in them. I am happy to come back to you on all three points with an updated description as to why the relative professional qualifications with regard to those MAs in Veterans UK are ones we should have confidence in. I am happy to describe that to you. I am happy to reply.

Q122 **Richard Drax:** It just seems that those who are diagnosing our veterans and saying, "You have an issue", are then being countered by those who do not have the same qualifications. Actually, this happens quite a lot in people claiming benefits too. This is quite a common thing. Does this ring a bell? Have you heard this complaint come to your attention?

Leo Docherty: It has. That is why I have met the clinicians in Veterans UK. We can have a discussion about the relative professional qualifications of various sets of medical experts, but I am entirely confident that the people in Veterans UK are professionally competent. Clearly, there is a lot of work to do with expectation handling, customer service and speed of process. There is significant work and some improvement needs to be had there, but when it comes to the professional qualifications of those involved in it, we are confident.

Q123 **Richard Drax:** If this is true and those who are qualified to say something are being overruled by those who do not have those qualifications, I would have thought that is quite concerning, is it not?

Leo Docherty: It would be if we were not confident in the medical ability of those in Veterans UK. We are confident. We have good people there.

Q124 **Richard Drax:** You are happy with the situation.

Leo Docherty: In terms of the professional standard of officials and clinicians within Veterans UK, yes, I am happy.

Q125 **Mr Jones:** We will look at the stats, but on those Richard has just read out, 51% on appeal were actually successful, which is a high number. Has there been an attitude change in terms of trying to reduce the number of claims and ensure that people do not have to appeal? We will look at the stats. The stats should speak for themselves. Is there a Government policy to try to drive down the number of claims that are successful?

Leo Docherty: No, certainly not.

Q126 **Mr Jones:** You cannot be happy that 51% of people are getting successful appeals. That shows a big proportion of whatever assessment is being done is either wrong or there is a counterculture of trying to just make sure we keep the conversation level as low as possible, does it not?

Leo Docherty: I am not saying I am happy with that, but I am happy to ask for specific justification.

Q127 **Mr Jones:** We will dig the figures out over the last 10-odd years. It



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would be interesting to see what the thing is, but for most veterans, going to one of those appeals is a pretty traumatic experience and they have to get professional help in doing the appeals. 51% of those cases are clearly people who were entitled to the compensation. I accept in terms of the mental health one, because, again, Lord Boyce did the review of the 2005 Act in about 2008, and I accept the metrics at the beginning were not possibly spot on. They have been changed over a period of time, because it was a policy that was needed in terms of bringing into line compensation for mental health as opposed to those with physical ailments. 51% is high.

Leo Docherty: I wonder if there is some other explanation.

Q128 **Chair:** Could you look into that?

Leo Docherty: Let me get a granular explanation from Veterans UK about that 51%. There may be non-clinical factors involved. I am happy to look into that.

Q129 **Mr Jones:** The headline is, "We are trying to help veterans and trying to make sure they get the compensation they deserve". Having a success rate on appeal of 51% is not good, is it? It does not say what it does on the tin, does it?

Leo Docherty: I am happy to look into that.

Q130 **Mrs Lewell-Buck:** Last year it was estimated that between 100 and 400 veterans sleep rough every single year and a further 4,000 face homelessness. In many local areas food banks have been set up just for veterans. This is a really shameful situation. Can you outline for us what you are doing about this, Minister?

Leo Docherty: First, we need to be very careful about the figures. It is often overreported. It is often misreported.

Q131 **Chair:** You dispute these numbers.

Leo Docherty: Yes, I do.

Q132 **Derek Twigg:** What is your number then?

Leo Docherty: In our understanding, it is probably no more than 0.6%.

Q133 **Mrs Lewell-Buck:** How many is that?

Jessie Owen: In 2020-21 there were 1,730 veterans who were owed a homelessness duty.

Leo Docherty: Is that actually homeless or at risk of homelessness?

Jessie Owen: That is homeless or at risk of homelessness.

Q134 **Derek Twigg:** How many do you understand are on the streets then?

Leo Docherty: That would equate to no more than 1,700.



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Jessie Owen: No more than homeless.

Q135 **Derek Twigg:** Sorry to interrupt. There is at risk—

Leo Docherty: I do not know what the at risk and actually homeless is. That is either one or t'other.

Q136 **Mrs Lewell-Buck:** Sorry; I am losing track here. How many do you claim are sleeping rough and how many do you claim are homeless or facing homelessness?

Leo Docherty: There could be no more than 1,700.

Jessie Owen: That is the homelessness duty. The number sleeping rough could be lower than that.

Leo Docherty: The worst-case scenario is clearly very difficult to measure and there are no more than, in our understanding, 1,700 in both categories.

Q137 **Mrs Lewell-Buck:** Let us say we are disputing the figures. I am still not clear how many you are claiming are sleeping rough. Regardless, even if it is 1,700, that is still not something to be proud of, is it?

Leo Docherty: I am not proud of it.

Q138 **Mrs Lewell-Buck:** Back to my original question, what are you doing about it?

Leo Docherty: We have removed the local qualification requirement for provision of housing at the local level. That is an important step forward. We have also done some additional work on substance and alcohol misuse. Jessie may want to talk to that.

Jessie Owen: The Government have a much larger programme to tackle rough sleeping and have committed to £2 billion to help tackle rough sleeping in the round. Veterans are clearly a sub-component of that, albeit an incredibly small sub-component. For example, for the figures in London, they estimate maybe 2% of those who are rough sleeping served in the Armed Forces, so it is a relatively small percent and that has been stable. I do not have the absolute numbers for you, but we can find those.

Leo Docherty: Just to give you context in terms of households at risk of homelessness or actually homeless, in 2019-20 there were 1,920 and in 2020-21 there were 1,730, so that has gone down.

Q139 **Mrs Lewell-Buck:** Where do you get your figures from, Minister?

Jessie Owen: Those are DLUHC's figures.

Leo Docherty: These are the national figures.

Jessie Owen: They are the homelessness case level information collection figures.



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Q140 **Chair:** You are also confirming that 2% of rough sleepers in London are—

Jessie Owen: When surveys have been done in London, they found 2% claimed to have served in the Armed Forces.

Leo Docherty: Some of those are foreign nationals as well, so it is quite fluid.

Q141 **Mr Jones:** Can I come back on to that? They claim to be members of the Armed Forces. Do you do any checks to see whether those figures are people who were members of the Armed Forces?

Jessie Owen: I do not believe so.

Leo Docherty: Those are the local government figures in London.

Q142 **Mr Jones:** The reason why I asked the question is, if you speak to Hugh Milroy, who runs Veterans Aid in London, for example, he will tell you that he gets quite a lot of people presenting as veterans who are not.

Leo Docherty: I do not disagree with that at all.

Q143 **Mr Jones:** If you are using that figure as your benchmark, first, it could be lower than that or, likewise, it could be higher than that. It comes back to the veterans tracking situation, does it not? It is a pretty useless figure, is it not?

Jessie Owen: It is the best quality data that we have at the moment and it is comparable methodology to how Government look at all of their homelessness data.

Q144 **Mr Jones:** It comes back to the main point throughout all this evidence hearing. You have not got an idea of where the veterans are and where people are claiming they are veterans when they are not. The veterans commissioner in the Cabinet Office has been in post how long now?

Jessie Owen: Since the end of 2019, so two and a half years.

Q145 **Mr Jones:** You seem to be involved in a lot of things, but one thing you are not doing is actually trying to quantify and identify where veterans are, which is—

Leo Docherty: That is unfair.

Jessie Owen: We are doing the opposite of that.

Leo Docherty: We are doing the opposite. We are doing a huge amount of work to track and recall. Do you want to say anything more?

Chair: I am just conscious of the time. We have three more subjects to get on to, and this is Emma's piece. Kevan's point has been made a number of times. We are going to have to probe into that further.

Q146 **Mrs Lewell-Buck:** Just to return to the question that I asked, regardless of the stats and figures, you said, Minister, that you have removed the



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local requirement. What else is being done? Moving away from the stats and figures, what is actually being done to solve this?

Jessie Owen: The covenant coming into force imposed a duty of due regard for local authorities with housing. As the Minister has said, we have removed the local requirement for social housing. Service leavers get priority for social housing on leaving the service if they need that. The Homelessness Reduction Act has a duty to refer. The Secretary of State for Defence can refer people to public authorities if they think that they might be vulnerable and in need of housing. We are having conversations with the Department for Levelling Up, Housing and Communities at the moment as part of their broader rough sleeping reduction strategy, about how we can optimise some of their programmes, such as the affordable homes programme, to best serve the veteran community.

Q147 **Mrs Lewell-Buck:** Someone wrote in and suggested to us about using some of the unoccupied married quarters in the defence estate. Is that something you would look at?

Leo Docherty: No, we would not, because they are for serving families.

Mrs Lewell-Buck: They said unoccupied.

Leo Docherty: There is a fluid market of service families who need those quarters. We need to have quite a lot of flexibility in the system and we have to retain those for those serving and not veterans. That would compromise the really important provision that service family accommodation is.

Jessie Owen: We already allow service families to stay in that accommodation for a year after their service has finished to enable them to make a transition.

Q148 **Mrs Lewell-Buck:** Just finally, somebody wrote to us who lives in a facility supporting veterans in Wiltshire, and they said the Prime Minister has visited but there has been zero interest from every single Veterans Minister and there has been no positive engagement with the Office for Veterans' Affairs. They suggest that perhaps money should be put into frontline delivery instead of into the OVA, which they claim is not delivering.

Leo Docherty: What kind of organisation is that?

Mrs Lewell-Buck: They live in a facility in Wiltshire, which is helping veterans properly transition into civilian life.

Leo Docherty: We seek to support, if they are from a charity. I am not quite sure what organisation they represent, but for that sort of organisation, the Armed Forces Covenant Fund Trust is the source of funding and opportunity for them. No one should claim that the OVA is not a good thing that is doing great work for veterans.



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Jessie Owen: I have personally engaged with multiple homelessness charities. I have been to visit facilities run by Alabaré and Riverside. I have spoken to Hugh Milroy about the work he does in London. We work extensively with the Cobseo housing cluster, which brings together housing charities to understand what their needs are and what their policy interests are. I have been talking to them about their No Homeless Veterans campaign to raise awareness among local authorities to ask the question. The charity sector says one of the most key things that can be done is for people to find out whether you are a veteran if you have homelessness or housing needs, because then they can refer them into that wider ecosystem of support that exists with the Armed Forces community.

Q149 **Chair:** I am conscious of time. Moving on to veterans' ID cards, Minister, I just wondered if you could say how the rollout of the veterans' ID is going.

Leo Docherty: The verification process, to give you the short answer, was very problematic. You will remember that from your time in my place.

Q150 **Chair:** We solved it in my time, so that is why I am curious as to how it was going on.

Leo Docherty: It was not solved and we are solving it. A huge amount of digital work is now being done to get a robust system that is fit for purpose. It is costing us a lot of money and we are going to get after it.

Q151 **Chair:** I am going to ask that question again. When do you think we will see this come to fruition?

Leo Docherty: Jessie will talk you through the details. We have initiated the start of this. It is a huge piece of work. Give us some of the milestones, Jessie.

Jessie Owen: At the moment people who have left service since 2019 do get a veterans' ID card or a veterans' recognition card. All service leavers currently get them. The difficulty is the backlog—anybody who has ever served. That is why we are doing the work that I talked about earlier in terms of the digital verification. At the moment it is a manual process to check multiple databases in MoD to check whether somebody has served, dating back decades.

We are starting the discovery work to understand how we can build a system that will do that digitally and automatically, so that it can be a matter of a few clicks to log in to a portal and then we will get the result back. I cannot put a timescale on that yet because we are just in the early phases of working out what would be required. That will then unlock the ability to deliver phase 2 of the physical ID card rollout. The ambition is to be able to have digital and physical, but we will be able to come back to you with timescales once we have done a bit more work on the programme for that.



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Q152 **Chair:** If you are leaving after 2019, you do get a veterans' ID card.

Leo Docherty: Yes. There are 15,000 leavers every year. They get a card.

Q153 **Chair:** My request for that was that the Veterans' Gateway telephone number would be put on the reverse of that. Is that the case?

Jessie Owen: I do not know. I can find out.

Chair: That would be a helpful move, please.

Q154 **Mr Jones:** There was an easy way to do it in 2010 when we were going to give everybody a national ID card, which was actually going to be linked with a special badge on the front of it. It would have been a simple way and then when the coalition scrapped the national ID cards that went up. I am just interested in these cards you are producing. What is actually on them in terms of verification? What is to stop somebody acting fraudulently? Is there some biometric strip on it? What is it?

Leo Docherty: There will have to be some unique digital characterisation, will there not?

Jessie Owen: I will need to go back and consult on that. Sadly, I am not a veteran. I do not have one, so I am not sure.

Q155 **Mr Jones:** I will tell you the reason why. When I looked at it, one of the key things was to ensure that when you gave somebody an ID card, one, it was robust digitally in terms of somebody could not just run them off on a machine to claim they are a veteran when they are not. That was simple, actually, with the national ID card rollout and that was done. What is to stop me getting one of these cards you are handing out then, copying it and saying I am a veteran?

Jessie Owen: It is an MoD contract. I would have to go and find out the detail.

Q156 **Mr Jones:** Unless it has some magnetic strip with unique things, it is useless, is it not, because it is going to be very copyable?

Jessie Owen: I would have to find out what the security standards are that have been built into that card.

Q157 **Mr Jones:** The other thing is, let us be honest, most places are now going away from ID cards, are they not, to electronic wallets in terms of phones?

Jessie Owen: That is why we are looking at the online ID. You can apply online, but also get some form of digital identification.

Q158 **Chair:** That is an important point. Is there an online digital version of the ID card being pursued?

Leo Docherty: Yes.



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Q159 **Chair:** When might that be rolled out?

Jessie Owen: I cannot put a timescale on it yet. We are in very early stages of working out how we would deliver that.

Chair: As soon as possible.

Leo Docherty: As soon as possible.

Q160 **Chair:** If I am a kebab shop owner or a pizza outlet and I wanted to attract veterans, but I need some form of verification, is there a symbol that you are promoting to show that veterans are welcome? There was a discussion as to how the ID card would actually be used, in fact, as part of the Armed Forces Covenant to say thank you, with society being able to say, "You are welcome here". Is any of that being considered or in operation?

Leo Docherty: The retail offer linked to that is definitely under consideration.

Jessie Owen: Yes, that is part of the work we are doing. It is not just whether we can build it and technically deliver it, but also how we can encourage and incentivise the use of it, like you say, across the private sector.

Q161 **Chair:** My final point on this is I also had discussions with Heathrow Airport about having a veterans' lounge. This is something very familiar in the United States. If you go into any major airport, there will be a veterans' lounge, so that the country is saying thank you for their service. Are we any closer to getting something established at Heathrow or Gatwick?

Leo Docherty: It is not something I am looking at. I am open to the notion, but, personally, I have always found the notion of the American system of veterans boarding first a little bit awkward, frankly. Maybe we will look at the lounge. Maybe the lounge is a good idea. I am happy to look at it.

Q162 **Chair:** Veterans boarding first is also a good way.

Leo Docherty: Personally, I think it is a little bit awkward.

Q163 **Chair:** It would be a good way for us to say thank you to the veterans. On the national defence medal, Commonwealth countries award a national defence medal and it is actually approved by Her Majesty The Queen, yet British veterans do not get this medal. What would be your response to that?

Leo Docherty: What is your proposition?

Q164 **Chair:** It is not my proposition. All these questions you have heard today are from veterans themselves.

Leo Docherty: I get that. Your proposition is that we should have a defence medal for those who have served—



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Chair: No, it is not my proposition. You are putting words in my mouth. I will make it very clear. These are veterans who have put together thoughts. We are simply posing them to you.

Leo Docherty: I get that. What is the proposition? There should be a defence medal for those who have served, basically.

Q165 **Chair:** For those who have served the British Army in this country, just as if you are a member of the Commonwealth, you would get a medal approved by the Queen.

Leo Docherty: I am open to that. Clearly, we have quite a high bar for the award of operational service medals, with quite stringent requirements in terms of risk and rigour. We have those because we want to maintain the deep meaning of operational service medals. We are guided in these matters by the independent honours and decorations committee. They may want to look at this. It is right that honours and decorations are independent from Ministers.

Chair: This is the only vehicle by which any veteran is going to be able to present this idea to the establishment, so that is why it is being presented to you. If you could then take it away, then that would be very helpful indeed.

Q166 **Mrs Lewell-Buck:** Minister, you will be aware of what the Prime Minister said in relation to the nuclear veterans in regard to the new information that has come to light. He has said that he has alerted Ministers to explore how their dedication can be marked. Are you that Minister?

Leo Docherty: Yes, indeed, and I was privileged to be at the meeting on Wednesday last week with the Prime Minister, two of our parliamentary colleagues and the group of visitors from the nuclear test veterans group. At that meeting I committed to ask MoD officials to look again at the possibility of an award of a medal to recognise this issue. Again, clearly, it will be a matter for the honours and decorations committee, but we will relook at this issue. I committed to that in the meeting.

Q167 **Mrs Lewell-Buck:** Do you believe that they deserve compensation and apology? That is the main thing they want, not just a medal.

Leo Docherty: I get that. Having listened to the testimony in the meeting, we were left in no doubt of the significance of the issues. I gave a commitment during that meeting that we would look again and consider all options attendant to recognising the depth of the impact, basically.

Q168 **Mrs Lewell-Buck:** You know what I am trying to tease out. Do you think they deserve compensation and an apology or not?

Leo Docherty: We committed to look at all of those issues and we are doing just that.

Q169 **Mrs Lewell-Buck:** You are not going to say whether you think they should or not.



Leo Docherty: Not at this stage, no.

Q170 **Chair:** We have received a number of questions from veterans, as we have been sharing with you. Some of them have been quite personal and dealing with very delicate information. We have not managed to ask you all the questions that we had and in relation to those delicate questions, if we may—

Leo Docherty: We can take those away and answer those specifically case by case. I am very happy to do that.

Chair: That would be very helpful indeed, and also these other questions that we were not able to get through today in the timeframe.

Leo Docherty: I am very happy to do that.

Chair: Thank you, Minister and Jessie Owen, for your time this afternoon. We are about to embark on Armed Forces week, and I hope we can all join in saying thank you to our Armed Forces veterans. We owe them a huge debt of gratitude. How we treat our veterans is a reflection of society. It is also an indicator to the new recruits as to the world that they are going to step into and how they may be looked after, so it is important that we get this right. We ask them to do something quite exceptional and different, perhaps, than in other forms of our life. For that reason, we can all agree to say thank you very much indeed for the veterans and for their service. We look forward to an exceptional Armed Forces week next week. Minister and Ms Owen, thank you very much indeed for your time this afternoon.