



Welsh Affairs Committee

Oral evidence: The role of the Veterans' Commissioner in Wales, HC 1362

Wednesday 14 June 2023

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Members present: Stephen Crabb (Chair); Simon Baynes; Virginia Crosbie; Wayne David; Ruth Jones; Ben Lake and Mr Rob Roberts.

Questions 1 - 41

Witnesses

I: Graham Jones, CEO, Woody's Lodge; Barry John MBE, Founder, VC Gallery and Stephen Boswell, Regional Head of Wales, SSAFA.

II: Colonel James Phillips, Veterans' Commissioner for Wales.

Written evidence from witnesses:

[Woody's Lodge](#)



Examination of witnesses

Witnesses: Graham Jones, Barry John, and Stephen Boswell.

Q1 Chair: Good morning, and welcome to this session of the Welsh Affairs Committee. Today, we have a two-part panel where we are looking at the role of the Veterans' Commissioner in Wales and the work of supporting veterans in Wales. I am delighted that, for our first panel, we have in front of us Graham Jones, who is the chief executive of Woody's Lodge, a charity that supports veterans; we are joined also by Barry John MBE, the founder and director of the VC Gallery in Pembrokeshire; and we are joined by Stephen Boswell, who is the regional head for Wales of the charity SSAFA. Good morning and welcome to the Committee; we are really grateful to you for you giving us your time and expertise.

Can I ask you, in terms of introducing the discussion, to just briefly describe the main challenges you see for veterans living in Wales, and whether you feel that there is anything distinctive about the veterans' experience in Wales that you and your charities have identified and seek to address? Perhaps I can ask Mr John to go first.

Barry John: Thank you, Stephen. One of the main problems that we encounter through groundwork as a charity in the third sector is about housing for veterans, homeless veterans, and the armed forces community as a whole. There is a lot of traction there in regards to a service leaver or a veteran that could be sofa surfing and then trying to find allocated housing, because it is a very, very difficult market at the moment—probably throughout the country, but I know especially in my area of Pembrokeshire. 25% of my time and my staff's time is taken up by trying to secure tenancies, helping the tenancies stay stable, and obviously making sure that there is no risk of people being made homeless once they are in the tenancy.

Chair: Thank you very much. Mr Boswell, please.

Stephen Boswell: Thank you, Stephen. I would like to mirror what Barry is talking about. Our charity is in a blessed and privileged position where we are able to offer financial support to individuals or families, and that financial support comes quite quickly, and generally meets the requirements of that particular ask. The "however", and the bigger problem, is the underlying factors that brought that individual or that family to us in the first place. They tend to be quite complex; historically, it might have been brown and white goods for the house, where people were struggling with finances and we would replace things, and every now and again, we would get something a little more complex. It seems in the last five or six years, certainly, that has flipped on its head. The complex cases seem to be the norm, and those brown and white goods, or the case of dear Charles, who did two years' national service and his boiler has broken—those do not seem to be the people we are supporting these days, and the complex nature of those needs is very difficult.



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The financial support is almost like a sticking plaster; the complex nature or the chaotic lifestyle that family or that individual presents with is actually much harder to resolve, and then you are bringing in lots of agencies, including local authority agencies, and other third sector supported collaborations, and it is very difficult to deliver on.

Q2 Chair: You have touched on a really important point there, of course; veterans is a pretty broad descriptor, is it not? That will conjure up a different idea or image for different people. Is there a typical veteran in Wales at the moment? If I was to ask you to describe the typical veteran that you see, that you have to support through your charity, what would that person look like? Or is that so varied that—

Stephen Boswell: The term “veteran” is a separate subject again; we were talking earlier ourselves about whether people identify as veterans or not. If we were to generalise and say, “These are the people that we support in Wales, and these are what we would call veterans,” our younger generation of veterans tend to be a little bit more complex and have other associated needs that need supporting, to do with mental health, housing, drug, alcohol, crime, even. Our older generation of veterans tends to be more around household support, adaptations and medical support; care is probably a big one with our older generation. I am not sure there is a stereotypical veteran, but the support needs does tend to depend on the length of service and the age of the people who we are trying to help. Does that answer your question?

Chair: It does, yes, thank you. That is helpful. Graham Jones, would you concur with that?

Graham Jones: Yes, I certainly would concur. We have seen a lot more complex cases coming through from the veterans’ community. Not everyone leaves the armed forces with issues; in the first 10 to 15 years, they generally feel like they are getting on with things, but after that 10 to 15-year period, that is when things start to fall apart for them. That could be their mental health; it could be their finances, and going from one job to the other, which has a serious impact on their mental health. As Barry suggested, with the housing situation, we have to look at why they are homeless or sofa surfing, and invariably it is their mental health and their finances, and everything has broken down.

There is not just one cause; there could be a multitude of causes, and the fact that they do not see themselves as a veteran at that young age seems to be the barrier for them coming forward to get the help, so it is not until later on in life, when their lives have fallen apart and they are in crisis, that they realise they do need that help. Once we have that support bubble around them, it is easier for us to have that collaboration with all the other organisations, such as SSAFA and the VC Gallery, and even the statutory organisations. The best thing to do is to get them into that position where we can put the support bubble round them.

Q3 Chair: Maybe I have the wrong idea of this; I always thought that there



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was this regimental, almost family bond, and that they would stay in contact when a soldier leaves the regiment. Has that broken down or did it never really exist like that?

Graham Jones: No, I do not think it really did exist like that. I am the chairman for the Royal Marines Association in north Wales, and we do not generally have a younger element coming to us. With the Royal Navy and the Royal Marines now, they sign people up, who join into the associations at an early age, but it is up to them to engage when they leave. Certainly, it depends on the regiment as well; if you have somebody who worked in the REME—the Royal Electrical and Mechanical Engineers—they are a corps, so they get farmed out to different regiments; they do not have a central point, whereas if you have the Royal Welsh or the Welsh Guards, they are different because they are regiments in their own, so they are like a little family. It all depends where they served and who they served with.

Barry John: And on the nature of discharge as well; that will affect that legacy afterwards. As Graham said, the Welsh regiments are pretty good in regards to that family network of centralised offices and welfare support, via the British Legion, SSAFA, and the coalface of third sector charities such as Woody's Lodge and VC Gallery, and we connect with the regimental hubs, beyond the fence. Like you said, there is the nature of discharge as well; if it is an early service leaver who has gone through some trauma in service and then gets discharged under different terms, then sometimes they can be affected, and they are the ones who have the legacy.

Q4 **Chair:** Over the last 20 years, we have had a lot of men and women serving, obviously in Iraq and Afghanistan. Some of them would have done several tours of duty. If somebody has served on a tour of duty, is it a greater likelihood, in your experience, that they will present with some of the challenges that you have been talking about, Barry?

Barry John: I do not know the science, but they have been exposed to some very traumatic events. A lot of people from different recruiting pools and different areas have already come with some adverse childhood experiences before they have been recruited. Sometimes they are already traumatised before they get recruited and go into the military. They might be retraumatised via something that could be combat-orientated or social, and then they get discharged and they fall on bad times. Those are the ones that come with the major complexities that we all see, probably, within the third sector and the health sector.

Q5 **Wayne David:** Am I correct in saying that there is no comprehensive database on a regional or national level for ex-service people? They are basically discharged, and if they require support, to a large extent it is up to them or people close to them to make contact with you or other organisations.



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Barry John: Yes, I think you are right. When people are discharged from the armed forces across the tri-service, all the documentation and GDPR is held centrally in Glasgow, and it is usually about when they have to engage. If there is that connection to the regimental hubs, sometimes they can have that quick line in.

Q6 **Wayne David:** My point is that when discharge occurs, what might well happen, or what should happen, is that the forces identify individuals who might require support or assistance when they leave, but there is no attempt to get in touch with you.

Barry John: There is a robust system for discharge across the armed forces that legally has to be followed by the Navy, air force, Marines, and Army; there is a robust factor for discharge, and people are given a lot of information that has to be signed, legally. They are given a comprehensive discharge, no matter if they are early service leavers or have done 24 years. It is just a question of when they want to engage afterwards, as that is different.

Q7 **Wayne David:** It might help if there was more of a direct link between the armed forces and you, so that you could quickly identify people who might need assistance.

Graham Jones: Again, it all depends on which service they were in; the Royal Navy and the Royal Marines have their own transition officers now. If people leave on medical grounds, or have issues prior to leaving, they are linked in with that transition officer, who will link in with their local branch, so they do try and keep an eye on them in that way. I believe the Defence Transition Service are trying to strengthen their services; up to two years after a service leaver has left the forces, they will try to keep in touch with them and offer them the service as well. That needs to be strengthened and linked in with the third sector, because we are not made aware of people with any issues that are leaving the armed forces coming into the area unless it is through one of those services.

Chair: That is helpful. A couple of people want to jump in with supplementaries, then we will come to Simon Baynes. Rob first.

Q8 **Mr Roberts:** From SSAFA's point of view, is there anything you have thought of that might make it more of a proactive thing, more of a, "We are going to let people know what is here for them in advance"? If so, do you have the capacity to cope with that and to proactively get in touch with people?

Stephen Boswell: That is a great point, Rob. Coming back to Wayne's point, which links in with an answer to you, it should be noted that quite a large percentage of people do transition from the forces and go about their lives and are probably never heard of again; they just become civilians in their own communities and are associated with the military through their past. That is quite a large percentage of people. Whether we should be identifying at-risk personnel at source, so that we can transition out with them, is something that probably should be looked at.



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I do know that the Welsh Government and their armed forces expert group have various forums sitting underneath that, and transition is one of them; this has been mooted in the past. One of the initiatives falling out of that forum around transition is about a catalogue of services that might support outside of the transition process; for instance, there will be the support provided by the three organisations sat here. There will be elements of support: what we do, how we do it—"If you need support, come along to us." I apologise for generalising, but the difficulty there is, generally, when a serviceperson comes forward and asks for help, you are either looking at a tip of an iceberg, or actually they have just jumped off the cliff and they are shouting, "Can you help me please?" It does not tend to come at the right time, when you could actually put some form of support network and plan in place; it tends to be a crisis if they are going, "Oh, and by the way, I need some help."

I am not sure whether we have reached that point of profiling people—that might be a little bit risky—but it would be helpful if we could identify people at an earlier stage. The guys touched on it: when you discharge from the forces, how you leave actually determines your path in the initial stages. If you have served for a fair period of time, know you will have an armed forces pension, are leaving with a pat on the back, have that network of friends, know the regiment, and have been associated to the regiment, corps or service, you tend to have a network and a path laid ahead of you, and it was your choice; but if there was something going on in the forces, whether it was, "I just did seven back-to-back tours and I have had enough, thank you very much, and I am off" or medical circumstances, or even if you are asked to leave because of A, B or C, that does present a slightly different path. If we can maybe think about those kinds of people, potentially, that might be one of those things. In terms of capacity, I am sure that certainly the third sector organisations would bend and flex; that is what they do, and they would absorb whatever was needed.

Q9 Virginia Crosbie: What has come up quite a lot here is this whole network for support. I was on the excellent Armed Forces Parliamentary Scheme, and when going round to a lot of these RAF bases, a lot of the conversation was about recruitment. It came up frequently that recruits have a background of being in care and they just do not have that traditional family support; is that your experience, Graham?

Graham Jones: Yes. We have a number of veterans who have not necessarily been in care but had adverse childhood experiences, and that is the reason why they decided to join the armed forces. I came from a village just outside Wrexham, and at the time, Brymbo Steelworks had just closed down, so unemployment was quite a problem; people were living in rough areas, they were having adverse childhood experiences, so they decided to leave the area and join the armed forces because it was a really good career path for them. That was typical of our generation.



If you move forward to the end of their service in the armed forces, they have developed their own social network within the service; they have their own family, and when they leave, it is like leaving a closer family than they had before. They are the people who tend to come forward, and who are presenting with some issues that we cannot necessarily get some support for because of their childhood experience. There are no specific services other than the statutory and going on to the NHS waiting list. That is where we seem to have that big gap, so we need to look at that as well.

Q10 Simon Baynes: First, I have great admiration for the three of you for having conducted your career in the services and then devoted so much time to helping others afterwards; it is very admirable.

Secondly, I come from an Army family; both my father and my grandfather were professional soldiers, and my father was much involved with SSAFA in the north of Powys. That gave me an insight into how intractable some of the problems are; in a sense, that is a familiar picture to us as Members of Parliament. Stephen, you were making the point that people come in when things are very difficult things, and that is similar to the experience that we have in our casework.

The third point I wanted to make fits very neatly with what Graham was saying. Veterans are an important part of my community and constituency. You come from Brymbo, which is in my constituency of Clwyd South, and obviously next door in Wrexham. The Veterans' Commissioner said, "Wales is not a bad place to be a veteran." Would you agree with his evaluation, and how has Covid and the cost of living crisis affected veterans? That is the first part, and then a very simple second part is: how many veterans are there in Wales? Graham, maybe you could start off.

Graham Jones: Certainly. When I came into the sector, Steve and I were running joint projects—Steve was with Age Cymru, and myself with Woody's Lodge—and services for veterans, certainly in north Wales, were very disjointed at the time. We set up a forum to bring all the services together, to really talk about what we could offer the veteran, and to work together; that really has strengthened. I work right across Wales and, having taken over as CEO of Woody's Lodge, I see that the services there are working really well together.

What the Commissioner says about Wales being a good place to be a veteran is right, because we do work really well together and we can call on each other's service, so yes, certainly. Covid had a huge impact on not just the veterans, but the third sector as well, and clearly on funding, and it has certainly put paid to a lot of our sustainable projects that we had on the go to try to raise funds. That has been a big problem for the organisations, but a lot of the veterans were in isolation anyway. Being put into forced isolation because of Covid had other knock-on effects.



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Luckily, we were able to offer a service along with SSAFA, and Barry was doing the same; we offered online services or telephone services, and we were able to drop off food parcels, so they had the comfort of knowing that there was some support out there for them. We are seeing some veterans come forward now who are suffering as a result of the current financial crisis, and again, we have organisations like SSAFA that we can call on to try and help them with those issues.

We cannot really pinpoint a lot of the complex cases to Covid or to the financial crisis, but we are seeing a marked increase in complex cases. Two years ago we were seeing one or two complex cases coming in every now and again, whereas nearly all the cases that our support teams are now dealing with are quite complex, so it is having a strain, and I am sure if we looked into it we could say that Covid and the financial crisis have contributed to that.

What we have to look at is the way that mental health has deteriorated in veterans. If you look at the Falklands era, it was when people were in their 40s and 50s that their mental health problems started to present themselves. We are now looking at the Afghanistan era, because they are starting to present. It is getting a bit younger, but they are now coming forward so we cannot really say it is generally down to Covid or to the financial crisis; it could be the conflicts that they have been in—Iraq or Afghanistan.

Q11 Simon Baynes: Does anybody have a figure for the number of veterans in Wales?

Stephen Boswell: The number on the census was somewhere around 110,000, I believe, in Wales. What we need to consider is the eligibility of a veteran and what does that actually mean.

From my perspective, we might support the family and the family might consist of one up, one down, three left and right, and so on. That then multiplies that number considerably. Although we can find that number or thereabouts from the recent census, from a service perspective and an organisational perspective, that number is far bigger.

I wanted to pick up on a point that you asked Graham about: I would just like to share with you that I am one of a team with seven other ROSMs—Regional Operations Support Managers—who oversee areas around the world, so we oversee Scotland, Northern Ireland, and chunks of England. From my perspective, and from a SSAFA perspective, and from listening to my peer group talking about roles such as AFLOs—Armed Forces Liaison Officers—who link in with the local authority to the third sector, if I was a veteran, I would want to be a veteran in Wales and not necessarily in one of the other regions.

There are forums running in Wales that are not happening in the rest of the world; we have the armed forces charity forum, chaired by the Royal British Legion. Ant Metcalfe is a great guy who brings in third sector



organisations and local authority initiatives. It is a passage of information that allows us to communicate out; the collaboration is far greater. The Royal British Legion and SSAFA in England is like Manchester United and Manchester City; they play football, but they do not speak. It is really not that in Wales. It is a bit of a multidisciplinary kind of approach where we are not brilliant at everything—we are really not—but we try to bring the right people together. We are good at giving funding to people, but we do not give the peer support that, for instance, the VC Gallery might offer, and those mindful activities that assist people; we are not there to support people with forms and filling in forms that freak people out, but Graham's team is. If we work together, we can overcome all those things and that happens really well in Wales, I have to say, and it does not necessarily happen in England and the rest of the country.

Q12 **Simon Baynes:** Barry, would you like to add anything to that?

Barry John: The third sector is also really engaging with the local authority quite well. There are the GP clusters, and work on social prescribing. It is looking at all those meaningful preventative measures that we can bring to the armed forces community, so that in Wales, as the Commissioner has said, we are very dynamic in looking at our approach to overall wellbeing for the armed forces community.

Q13 **Wayne David:** I think it was Barry and Stephen who mentioned local authorities. I think they are an important part of the picture; I wonder if each of you would like to say something briefly about how you liaise with local authorities.

Chair: You have pre-empted someone else's question there, Wayne.

Graham Jones: Yes, certainly. We have had some really good support from the local authorities, which has been brilliant. Each local authority has their own armed forces champion and we are invited to take part in their committee meetings quarterly. In those meetings, they can find out how the third sector is working within their authority, but they can also liaise with us closely to see what issues we are having—such as on housing—and they are very good. Again, with the armed forces liaison officers who set up these committee meetings, we have a really strong connection through to them.

Barry John: Working alongside the crisis team in mental health in my area is very pivotal to make sure that we are a speedy response for giving support to the armed forces community. That linkage, that communication, that open engagement between us as a charity and the medical side of crisis is very important.

Stephen Boswell: We are very engaged with the local authorities across the whole of Wales. If I could ask for one thing to be improved, I would ask for a little more consistency, because it does tend to be a little bit personality-led in certain areas. Without the AFLOs in certain areas, we



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would still be engaged with the local authority, but those connections would probably fall by the wayside.

Ruth Jones: Thank you, gentlemen, for your time this morning. It is great to see you in person, rather than on the screen; it is good to hear from you. We are talking to the Veterans' Commissioner on our second panel this morning, so I am just wondering how you are finding working with him since he has been in post, and how closely you work together. I am going to start with Graham because your organisation was really positive in welcoming the appointment; is it working well? Is there anything that could be done better?

Graham Jones: It is working very well. One good thing is that the Commissioner is making sure that all organisations are singing from the same hymn sheet. Only last week he identified another organisation that is looking to move into Wales, which is not a bad thing, but we have to make sure that services are not duplicated because they then get disjointed and veterans lose confidence in what is being provided, so it has been working really well that way. Fortunately, we have managed to recruit him for our bike ride next month; I do not know if he will be speaking to us after that, but we will see.

Ruth Jones: Well, I think that is very positive.

Graham Jones: It is.

Q14 **Ruth Jones:** Barry, have you recruited him for anything as well?

Barry John: No, just our breakfast clubs, Ruth, but the great thing is that the Commissioner has been engaging on the ground and speaking to real veterans and armed forces families, so you cannot get away from that face value; that is very, very important. Yes, policy is really important, we know, as is the bigger picture, but so is being able to gauge that momentum on the ground, and he has been very good at doing that.

We have been to see a 64-year-old veteran who has gone back to university and studied art; we supported him on his journey whilst he gained his degree, and there are really good examples of that. I feel that that combination of the armed forces liaison officer at the local authority level alongside all the forces charities in Wales, and having a Commissioner looking at standards and gelling the approach, is very important.

Q15 **Ruth Jones:** Thank you, that is really helpful. Stephen, do you have anything to add?

Stephen Boswell: Yes, it has been an incredible move and we have certainly welcomed it. If we go back a stage, we have the armed forces liaison officers—I think there are seven of them. They link us into the local authorities, but there are the health boards to consider as well, and they are linked into the services that are supporting the veterans'



community. If you think about north Wales and south Wales being a little bit of a divide, we have Powys and suchlike in the middle, so it does create a divide, and without that focal point and that one consistent approach, you could start spreading out the services and you might end up with hotspots of services, but with the Commissioner involved, it does tend to bring it all back to the centre.

As Barry and Graham have said, it is not about the services, the authorities, or the medical services; it is actually about the people we are trying to support. James certainly has that credibility with the people on the ground. He does understand what a veteran is, what an operational tour is, what that baggage brings, and what those experiences might create for that family or that individual. It has been a very successful appointment, and I am thrilled that it has been set up.

Ruth Jones: Thank you. That is really helpful.

Q16 **Virginia Crosbie:** We have talked quite a lot about communication with counsellors and various third sector organisations this morning. Is the challenge of communicating the support and the services to veterans made more complex by the different roles of the Welsh Government and the UK Government? We will start with Graham, thank you.

Graham Jones: It is not something that I have seen being a problem. The only problem that we have had in the third sector is, because of Wales being a devolved nation, sometimes we are left out of the loop. The Veterans' Gateway was a great idea when it first started, but then there was a slight glitch and I believe that they have improved that now. When service leavers are coming to the end of their term in the armed forces, they have a focal point now, so they can see where the services are that can support them, if they ever need them, when they move into a specific area. Certainly, the Welsh Government are always in communication with us, and with James Phillips now in post, we have that link through to the UK Government, so, no, I do not think there is a huge problem with communication.

Barry John: I think the appointment speaks for itself because if there is a slight confusion, James is already appointed in the mix to be able to diffuse it, or to analyse the changes between what has been brought out in Westminster and in the Welsh Government, and of course there are great conversations and great partnerships at Welsh Government with some appointed armed forces personnel.

Stephen Boswell: I think James's appointment links that operational end of the services through to the strategic development of the services. We are not really that involved with anything strategic that is coming out of Government; we tend to inform it, but we do not tend to start directing it. We inform it by informing the armed forces Welsh Government expert group; we bring real experiences, real problems, real concerns, real successes to that forum, which then informs Government as to what direction the strategic development should be.



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James is that link from our operational end into that strategic development, but the communication is very good because what tends to happen is I will get one document from Welsh Government, or indeed UK Government, seven times because the AFLOs will all send it, James might send it out, and then it is shared between groups. The actual communication is pretty good, and then it is discussed in the relevant forums, and James's position really enhances all that communication.

Q17 Virginia Crosbie: Thank you. We have spoken this morning about the challenges in accessing housing, and the challenges of mental health. In terms of the armed forces versus the wider population, do they have wider challenges, and, if so, could you list those? I am talking about things like access to hospital appointments and cost of living. I will start with Graham.

Graham Jones: I do not think their challenges are any different in respect to access to certain services, but what you have to look at is what a veteran really is—the way that our service men and women are trained; they are trained differently from general communities. If you look at normal human responses, fight or flight, that flight mode is taken out of the armed forces, so they are trained to actually fight against stressful situations. When they leave the armed forces, that flight mode is not put back in. If they are trying to access a service and they are on any waiting lists and then they get some resistance from a receptionist or anybody, they may present as slightly aggressive—they do not mean to be; it is just a natural fight mode that is put into them. Then they do not get anywhere, and this is where the system falls down. We need to look at an awareness of what a veteran is within statutory organisations, to make sure that if they go to the NHS, or they go for any financial assistance, people that are dealing with them are aware of what their response might be if they are faced with a stressful situation.

Barry John: That is why we need effective peer mentoring. With Graham's example of an armed forces person who might present as hyper-aggressive when trying to access mental health services or housing, if you have peer mentorship with them, and investment in the third sector to be able to support that, then you could make sure that journey leads to a healthy conclusion for housing or for entry into mental health services. There is a massive mental health crisis. We know that. I have sat in A&Es for over nine hours with a veteran in crisis. It is very situational and across the board.

Stephen Boswell: We also need to look at what service-attributable means as well. If you have service-attributable injuries, and they are recognised, you do get a slightly different medical support care plan when you leave. If you injure your knee in service, you get support for that as and when, but if you injure your other knee whilst painting the house or doing the gardening afterwards, well too bad, you are in the same list as everybody else. The mental health stuff is missed, because it is probably service-attributable in the sense that it is presenting as a problem for



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that person, but there is nothing physical or tangible that says this is service-attributable.

Housing is an issue across the whole of the country. If there were associated considerations because of that person's service, they should be applied. However, I think that is generally accepted. That understanding of all I have just said is quite difficult within the medical services, the NHS, the local authorities with housing, and indeed the veterans themselves. They sometimes think, "I have an injury, so I should have priority service." Well, actually you should not; you are the same as everybody else, because that injury is just an injury like everybody else's. The injury that you have because of your service is slightly different, and it should be dealt with slightly differently. That is the crux of it.

Virginia Crosbie: That is very helpful.

Q18 **Chair:** Thank you very much. We are going to have to increase the pace a little if we are to get through our material, but can I follow up on the role of the Veterans' Commissioner? It is really encouraging to hear you all being so positive about the appointment. Can I press a bit further on this and try to understand where the real value is being added? Is it in the Commissioner being able to provide a political voice at the heart of UK Government and to Welsh Government? Is it helping you, as different services and agencies, navigate the corridors of Government, be that in Cardiff or in London? Is it to be a figurehead for veterans, or for them to feel validated by having a commissioner acting on their behalf? Or is it co-ordinating the different agencies and providing some kind of overarching structure to help galvanise you? Help us understand where you feel the value is being added.

Stephen Boswell: You summarised it in your first three comments.

Q19 **Chair:** Which is the most important role?

Stephen Boswell: That figurehead of having a commissioner in Wales is incredibly strong. It presents as a voice, absolutely, and that is very important, but it also gives us that figurehead of a person who can come in on the ground, talk to the veterans, meet the 64-year-old gent, but also speak to MPs and people like you about things that are real on the ground. Both have very powerful outcomes. I am struggling to give you a direct answer on that one, if I am honest.

Q20 **Chair:** That is helpful, thank you. Mr Jones, is there anything that you would want to add, very quickly?

Graham Jones: It has strengthened veterans' confidence in the UK Government's commitment to the Armed Forces Covenant and to the armed forces community. When some veterans came to our service and heard that we were going to have a Veterans' Commissioner, it really did lift their hearts, because it seemed to them that the UK Government was listening to people in Wales. It was not just England. The only thing is—



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and I hope James is not going to have a go at me about this later—the Commissioner is limited by the hours that he puts in. He is contracted for fewer hours than he should be, and that limits him in his exposure to veterans on the ground. We could improve that.

Barry John: In the military, we have a term “top cover” that you need when you are out on operations. From a third sector perspective, having a commissioner involved gives you top cover.

Graham Jones: Yes, it does.

Chair: Thank you very much. Simon Baynes, please.

Q21 **Simon Baynes:** We want to move on to a new section on the charitable vision for veterans in Wales. These questions are going to be specific to each of you. This one is to Barry: your organisation uses arts projects as a means of improving the health, wellbeing and quality of life of veterans. Could you explain how this happens? Also, how do you go about identifying and engaging veterans that may benefit from the type of support that you provide?

Barry John: It looks like our charity is about art and cultural engagement, but it is actually about social engagement, giving the armed forces community an opportunity to be socially engaged, and giving armed forces veterans and their families an opportunity to integrate with the community, which is very important for them, if they are to move on after service.

To identify veterans, within our charity, we have a robust referral system from the third sector, statutory healthcare, and GP surgeries. We have external partners from probation to DWP and the health board. We have a lot of referrals every single day from lots of dynamic, different factors and different organisations, and other third sector charities, depending on who needs what and who wants to engage.

My charity tries to provide a range of opportunities, because one veteran or armed forces family might not want to engage in poetry, art or photography, but we might be doing something different like walking or talking, or doing gardening or horticulture, so we have a range of offers that is set for the needs on the ground.

Q22 **Wayne David:** First of all, I would like to say, Graham, Woody’s Lodge helped a constituent of mine a few years ago, and the assistance was invaluable as well, so thank you for that.

Graham Jones: That is good to hear.

Wayne David: Generally, why is there often such a problem with veterans claiming their benefit entitlements? I was stunned to read the other day that there are 16,000 unclaimed military pensions. Why is that? Why are you having to deal with those kinds of problems so often?



Graham Jones: First, about the pensions—we were talking about this earlier—when you leave the armed forces, unless you do your full 22 years or your full term, no one tells you that at the age of 60 you can claim your pension. It is not advertised. We have had people in their 70s who did not realise they could have claimed for their pension at the age of 60. Anybody who served after 1975 was entitled to an armed forces pension if they did three years or more in the armed forces. This is why we have a lot of unclaimed pensions. People are coming forward now, and that is one of the first questions our support team are asking, “Are you in receipt of your armed forces pension?” If not, then we go through the process with them.

With the benefit system, there is a lot of pride in the armed forces. Certainly, one thing that we were taught was to adapt and overcome. If you get yourself in crisis, you try to adapt and overcome, but without a support network around you, that is very hard to achieve. They do not realise that they are entitled to the benefits, so when they hear about organisations like Woody's Lodge or the VC Gallery, they come along for their first visit, and they sit and talk with likeminded people. That is when they realise that somebody else is getting something that they could benefit from.

This is where we step in and help them with their forms, but if you look at some of the benefits forms, they are a nightmare, especially the PIP assessment. It is a minefield. I have gone through it, and going past page one is quite difficult. If you compact that with mental health issues, it is a huge barrier.

As we said earlier, if anybody gets a brown envelope through the door, it is usually not good news, so generally they do not open it, or they do not really take notice of it. This is where our support teams come in. Up until April 2022—and this is where we have noticed an increase in our services—our support team carried out up to 9% of the work that Woody's Lodge completes. Now we are doing in excess of 50%, so in this financial year, that work has increased so much. In the last year, our support team drew down just short of £1 million from the benefits system. That is £1 million that people were not claiming, and there are going to be a lot more out there. How we get that message out to them, we do not know, apart from through engagement with third sector organisations like us.

Q23 **Ben Lake:** Thank you, gentlemen, for joining us this morning. You have been very kind and detailed in sharing the way in which all the charities collaborate quite well in Wales to get support and advice out to veterans. What are the main challenges that you are facing in getting the support out to veterans? Mr Boswell, you mentioned earlier that many of the difficulties and challenges that veterans are facing are sometimes shared with the general population, but in terms of actually getting support to veterans, as charities, what would you say are the main barriers that you are coming up against?



Stephen Boswell: As I said in the first couple of questions, the difficulty is with what has brought that person to our door asking for support. It is that element that we are struggling to overcome. We can support people financially; that is quite easy to do, and the money is there to support them. The problem we are having is that reoccurring theme of the underlying factors that have brought them to that point. It goes back to what the guys have described earlier around mental health, older people with care needs and care conditions, and housing issues; the service is just not available.

We can put money in for housing bonds. We can kit the flat out with white and brown goods. We can give them their first month's rent up front, and we can get all of the forms filled in to support them on the benefits side of things, but if that house is not available, or it is too expensive, because the costs do not meet the cost of the housing, then it falls to pieces anyway, and then that person comes back to us with something else and probably worse.

Barry John: I think that charities and the third sector bring so much value and reduce the cost in regards to preventative mental health and to the local authority. I do not think it is judged as well as it should be in regards to that preventative measure. We need a little more investment to make sure that effective peer mentoring and guidance reduce the costs and the impact to both the medical and the statutory sector. We need a little more investment to make sure we can effectively draw down the costs on preventative measures on both mental health and anything to do with crisis.

Graham Jones: I agree with what Barry said; the investment is key. We spend probably 95% of our time chasing money to try to keep our services going. We need to look at concentrating on the veterans rather than concentrating on that. One area that we look to improve—and the forces liaison officers are certainly working on this—is raising awareness of organisations, certainly with the police and the NHS. One of the first questions the police should be asking if somebody is brought into the custody suites is, "Have you served in the armed forces?" Then they can identify them as a veteran. It is a matter of identifying that veteran so that we know who is in need of help. We work closely with the criminal justice system to try to improve on that.

Q24 **Ben Lake:** You have talked about the liaison offices in various authorities, and it does make a lot of sense to the layman. Is there a similar system for some of the central Government Departments? If so, how is it working with the Department for Work and Pensions, for example? Do you have the same liaison point that you can contact, and is that working well?

Barry John: If you have a really productive charity that works with lots of people for the aims of your members, then you need to identify forces champions in different sectors, be it in the DWP, the police, or the commissioner. The Department for Work and Pensions have an appointed



liaison co-ordinator who we can go to at any given point. It is a lot quicker, and there are good comms and good working practice across the board.

Graham Jones: The armed forces champions in the DWP have been working really well since they were first brought in a couple years ago. We have some really good connections there. This could be improved on with the police, who could have a lot more engagement. I do a lot of work with HMP Berwyn and our team down in Cardiff and Parc Prison. We have a good link in through the criminal justice system in that way, but certainly we could do with strengthening that connection with the police.

Stephen Boswell: The forums that are happening across the country, such as the armed forces charity forum that happens every three months—and there is a great forum down your way, Barry, led by Ang Darlington—are invaluable, because you tend to get a little more localised in some respects. Down in Barry's neck of the woods in the south-west, if you have a question like, "Where do I go with this? Who is the champion?" chances are somebody in the forum will know, and there is a connection and a relationship already. Everyone is really generous. They give and give, and support, so can make those connections quite quickly if you do not know them or you are unaware.

From a national perspective, the RBL forum run by Ant tends to bring everything on a more national level, brings in those different departments and invites them in to speak about what services they can offer. Then you tend to follow up and go, "That one is not going to offer my services very much, so I am probably not going to build that relationship. However, I really need to get to know that person talking about housing." That tends to happen quite a lot.

Ben Lake: I am glad to hear that. Thank you, gentlemen.

Chair: Thank you for giving us your time this morning. We could have probably spent another hour or more talking about these issues. It has been really insightful and useful for us. Can I reiterate my thanks to you all for the work that you and your organisations do? Barry, I am particularly familiar with the work you do in west Wales; it has been a tremendous joy to see that grow and flourish in the way it has. We are going to move seamlessly over now to the Commissioner. Thank you, gentlemen. I invite the Commissioner to take his seat.

Examination of witness

Witness: Colonel James Phillips.

Q25 **Chair:** Welcome to retired Colonel James Phillips, who is the Veterans' Commissioner for Wales. Thank for giving us your time this morning. We are going to spend the next hour asking you about your role and your work in Wales. Perhaps I could kick off this part of the discussion by asking you to briefly summarise the mission that you have been given.



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Who gave you that mission? What do you feel that your early wins have been?

Colonel Phillips: I was given the mission three Secretaries of State for Wales ago. Simon Hart appointed me. I have met all the Secretaries of State for Wales since. The role was part of the manifesto pledge and the Veterans Action Plan to provide commissioners for each of the devolved nations. Wales was the last one to be filled. Each works on a different model. Scotland is on their second physical Commissioner, but that has been going for about six or seven years, and that is a fully funded Scottish Government position, with a staff and an office that looks after veteran affairs.

Q26 **Chair:** Is that a full-time role in Scotland?

Colonel Phillips: No, it is not quite full-time, but it has more hours than mine. The Northern Ireland Commissioner is again a different model, and there is a slightly more nuanced role, in terms of legacy, for the Commissioner there, so his position is NIO-funded but also Home Office funded because of that legacy piece. He is in a similar position of 100 days a year, but I think he does a lot more. The Welsh Commissioner post had not been filled as there was some resistance from Welsh Government; I think they felt that they had their armed forces liaison officers and they did not need a commissioner imposed on them. You will understand the dynamics between Cardiff and London; there was perhaps a "not invented here"-type syndrome. Part of my role initially was dealing with that.

The appointment came around. We covered what the role is; you summarised succinctly, Chair, which bit adds most value: I am a figurehead. I do provide the overwatch. I link in with the OVA and the veterans Minister. I link closely into Welsh Government. I link with local government and the champions, and the third sector provision and statutory bodies that provide services.

I also speak for, engage with and inform veterans. It is a two-way process of communication. There is a management of expectations in the veterans community. The covenant has been in existence for 10 years from last year, and there is a huge cohort of veterans who left before the covenant even came into place. They hear of the covenant and they hear of prioritisation, particularly in the health field, and they do not necessarily understand what that means. We talked a little about that in the earlier session. There is a communication piece between veterans and Government, and that job of advocacy, championing, engagement and co-ordination is a two-way process.

The third sector is independent. Each charity has its own roles, its own geographical footprint and what it wants to achieve, and that can be quite competitive, especially in a climate where funding for those initiatives is limited or constrained because of the economic times that we are in. We are trying to balance that and to improve the output and delivery, reduce



competition, and improve co-operation and collaboration. If I add any value, at its best it is in ensuring that the outcomes for the veterans are provided as best they can be through the gamut of services, whether those be statutory or not.

Chair: That is great, very helpful; thank you very much. Ruth Jones, please.

Q27 **Ruth Jones:** Thank you, Colonel, for your time this morning. As I said to the previous panel, it is great to see you face to face.

Colonel Phillips: Without a screen.

Ruth Jones: The previous panel were very complimentary. It was not because you were sitting behind them; they were very complimentary anyway about the work you have been doing. You have to work with a wide range of organisations: local authority champions, charities, health organisations, regiments—all these sorts of things. What has been your experience of navigating this landscape? You are higher up the chain than vets on the ground; could it be simplified for the vets to access the services they need?

Colonel Phillips: Theoretically, yes, it could. In practice, it is complicated. You heard people talk about the Veterans' Gateway, which is hosted in Wales. The call centre and the online presence is based there, and it is supposed to be a one-stop shop where veterans can go online, find out what local services there are, and therefore find out what the help is. It is a partnership organisation, which is part-funded by RBL, part-funded by the UK Government. It is under-resourced and a little clunky. There are aspirations to make it better. I think that will be the solution if we can improve that to a degree.

Digitisation of ID cards for veterans is coming in, so anyone who left from December 2018 onwards has a little pink veteran's ID card. The cohort before that does not. How does the ID card help in this regard? When people apply for it, they will enter their details, and records will be digitised, so you will know where those veterans are. Understanding the veterans' footprint is a huge problem. We know there are roughly 115,000 signed up as being veterans on the census. We subsequently had a veterans survey, which is not yet published, but should provide greater granularity.

Understanding where the veterans are and understanding the needs of veterans—which are as complex as those in wider society—and getting all that information on to one collective dataset, which can then be interpreted by all those organisations you talk about, is problematic. The corollary of that is, of course, all those different organisations have their own datasets and their own systems for holding that data. You in this room will understand the complexities of sharing data.



Veterans can be an awkward bunch sometimes. They can be suspicious of authority and sometimes suspicious of the machine of Government. Handing over that information and allowing it to be spread quite widely can be something that not just veterans but a lot of people are very suspicious of. We are on a cusp now with AI and digitisation in a way which could exponentially change the way we deliver services and hold that data, but legislation has to come into place to ensure that this is done safely. At the moment, there are lots of stovepipes, and it is difficult.

One of the real problems with veterans is telling their story. If you have had a complex, traumatic incident, and you go to your first port of call for help, you have to tell that story, and then you are handed off to another agency, where they do not have that story—it has not been transferred—so you have to tell that story again. There is a fatigue with veterans in terms of going through that process and continually telling their story. One of the biggest things I hear from them is, “We want to tell it once. We want to get it on a record,” and that digital record can then be transferred across.

It sounds very simple. You asked the question about pensions. Everyone has a National Insurance number; why should someone approaching the age of 60 have to remember that 20 or 30 years ago they did three years’ service, and therefore they might be entitled to a pension? It is bizarre. That should kick in automatically. With your induction process into the Army, you are told on day five that this is your pension scheme or whatever, and you might be told on your way out, but then you might have two or three careers before you reach a point where you are at pension. Suddenly you are supposed to remember that you may be entitled, but there are various different schemes and various terms of service that are excluded. If you ask the question at Vets UK, they will check for you and they will tell you whether you are entitled or not, but it is remembering that and understanding it.

Pensions are complicated, and quite understandably, a lot of people stick their head in the sand about complex financial arrangements, and therefore, they go without. There are millions and millions of pounds of unclaimed pensions out there. We are going to see something similar when the McCloud judgment comes in. There is going to be £19 billion of debt to the Treasury in terms of that. It is a complicated area.

Q28 Ruth Jones: You have articulated very clearly the issues facing the veterans; how have you found accessing all the various organisations across Wales?

Colonel Phillips: It has been easier than I thought. I thought it would be hugely frustrating and difficult. The armed forces liaison officers have made that easy. I have immediately come into a framework where suddenly there are seven individuals who know their region. Those regions are mapped effectively to the health boards. The armed forces liaison officers sit on the covenant boards for those health boards. There



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is, as we have heard, a comprehensive network of armed forces champions. The local government association armed forces champions come together, and I have been invited to attend that group.

I have been very graciously welcomed. I thought there would be resistance and barriers but there has not. I have found from Welsh Government downwards that I have been welcomed and people have facilitated my entry into the role. The third sector, again, has been extremely welcoming.

However, it is complicated. An area the size of Wales has seven health boards. That in itself is quite remarkable. Each of those health boards manage how they deliver Veterans NHS Wales, which is the mental health pathway. Some of those do it in different ways. We have heard about peer mentoring: a couple of those health boards embed peer mentoring into that process, so they are funded through the health board, but others do not, and so that peer mentoring piece comes from the third sector. Part of my job is trying to spread best practice and saying, "They do it over here, and it works really well. Why can we not embed some peer mentors into this health board?"

There are various accreditation schemes for health boards such as Veterans Covenant Healthcare Alliance, which started in England but is now spreading across to Wales. Four of the health boards out of seven are now accredited as veteran-friendly, and that is something else. I was with Hywel Dda Health Board; they did not think they needed it. I had a meeting with a senior manager and said, "You are doing it already. Actually, it is not difficult. If what you are telling me is true, just send it off," and they have done that, and now they are accredited. They were doing it, but they had not jumped through the hoops to get that accreditation piece.

After a hiatus with Covid, the Welsh Government is now rolling out GP-friendly training for GP surgeries, which sounds brilliant, but of course, each GP surgery is a standalone business. NHS Wales cannot direct them to do anything, and there is no funding behind this. Part of my role, and that of the armed forces liaison officers, is to explain to GP practices, or groups of GPs and clusters, "There is no financial incentive for you to do this, but the evidence suggests that it not only works better for veterans, but means that the whole way you run your practice is better." Also, if you do identify veterans, we can get them to veteran-specific pathways, which means there is more capacity for non-veterans in some of the more established and routine pathways. There are benefits, but there is not the same financial incentive as a GP would get for perhaps putting someone on an anti-smoking package or something like that. There are some great initiatives, but we sometimes should resource those initiatives a little better. That is not necessarily just Welsh Government; that comes down from UK Government, NHS funding and health provision.



We live in challenging times in terms of health. The issue is managing veterans' expectations in terms of prioritisation, but also educating clinicians and gatekeepers, particularly. Doctors can be quite sympathetic, but when a new veteran turns up at a practice, if the receptionist does not ask the question, "Have you served?" they probably will not volunteer it, and so there is a veteran who is unidentified in the system. If they ask the question, which the training package gets them to do, they can then code this as a veteran. Then it goes into the NHS Wales system that this person is a veteran, which might mean that, for certain specific problems, they could have an improved pathway.

Ruth Jones: Thank you; that makes sense. I will hand you back to the Chair now.

Q29 **Chair:** Do veterans in Wales find it as difficult to get GP and dentist appointments as the rest of the population? It is a serious question; does being a veteran give them any prioritisation in the system?

Colonel Phillips: It would only give them prioritisation if it was for an issue that was specific to their service. If you are limbless, there are specific pathways that give you prosthetic surgeries, clinics and treatment. There is something called the Veterans Trauma Network, which manages particularly difficult complex cases; it came out of Afghanistan, effectively for people with multiple amputations and complexities. A severe chronic pain clinic and pathway is also available. Then you have Veterans NHS Wales, which is the Op COURAGE equivalent, which is the mental health specific pathway. That is unique. A veteran can be referred by a family member directly into the pathway, online or by telephone call within their health board, and that provides them with an initial referral and then veteran-specific management of their health problem. Again, it has to be service-specific.

We touched on this in the first panel: particularly in the Army, we recruit from a very diverse pool of talent. Some recruits come from very difficult backgrounds. It is a traditional route to escape a very harsh home life: run away to, or join, the Army, get trained and get incredible skills. But then, when you come back, if you do not have somewhere to go, you could very easily fall back into that same community. If you have been kicked out of the Army for drugs, or some misbehaviour or crime, then you are potentially going back into a community that is not conducive to success.

The problem on the health side is that in a lot of the mental health cases Veterans NHS Wales are dealing with, there may well be some post-traumatic stress disorder, but when they start delving, they actually find that it goes back to childhood trauma. The patient is only eligible for the PTSD part of the treatment, but they need a holistic wraparound service. NHS Wales is not funded to provide that. Very few people's mental health problems are that simple—are caused by just one incident—and often they do not bubble up until later, so this is an issue as well.



It is easy to take a veteran who has PTSD in service and manage them out of service and know what their problems are, but for a lot of these veterans, particularly in Wales—for instance, Falkland veterans and Welsh Guards—these problems do not present until later in life, 15 or 20 years down the track, and then they are in trauma. They do not necessarily know that it is service-related. It is very complicated.

Q30 Simon Baynes: Thank you very much Commissioner, for coming to see us today.

I want to focus on engagement. You have discussed your engagement with stakeholders, Governments, and so on. I want to really focus on how you engage with veterans other than through third parties.

In particular, I have noticed that you do not have a website. I looked at your Facebook page and by liking it, I have increased your likes by over 10%; you only have eight. I am puzzled by that, because, as we know from our job as MPs, communicating with people on the ground is really important. You can interface through all sorts of governmental structural ways, but if you do not actually communicate with the people you are trying to help directly, you are missing a major form of engagement.

Colonel Phillips: I quite agree. It is down to horsepower. I was supposed to have support staff when I was commissioned into the role. That support staff only turned up on 1 January, and it is half a support staff. I do not have any comms staff or anyone to do that, so it is down to me. I have issues with my email address, which has @cabinetoffice.gov on it: for an independent commissioner, that does not seem very independent when someone is emailing me.

The Facebook page has only just been commissioned and started by my assistant. I do have a presence on Twitter, which can be double-edged. I was engaging with some veterans just then and of course they are not necessarily just Welsh veterans. So, I am conscious of that area of weakness.

As part of the new money that was pledged to the OVA, we were asked if we had any ideas on how it should be spent. I said that I would like to have a better online and digital presence. My only caution is that if you look at the demographics of the veterans' community in Wales, over 50% are older than 65 and over 20% are older than 85. I am not saying there are not silver surfers out there, and I am not saying that a lot of older veterans are not online, but one of the discussions I had with Johnny Mercer yesterday was that for a lot of the initiatives that are ongoing at the moment, such as Op FORTITUDE, ending homelessness, unclaimed pensions—another area that is being looked at—plus female veteran strategies, all these sort of things, communication could be done better by the OVA and Government. We should be seeing newspaper adverts, and things on traditional media as well—TV or whatever—because over 50% of the population probably still use television and print media as



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their major form of communication. I agree with you completely, and I will use your question as ammunition to improve on our digital footprint.

My first six months in the job—and 100 days a year is my remit, so effectively, that is only around three months of full-time work—has been understanding Wales and getting out there to meet veterans and engage with them before sticking my neck out there digitally to try and deal with all the problems.

The other issue is that I am not a case worker, although I end up dealing with some of the more complex cases. I have had Members of Parliament—no one in this room, I do not think—and Members of the Senedd refer specific cases to me. Unfortunately, they tend to be the ones where there has been less traction elsewhere, but you will understand yourselves the double-edged nature of putting yourself out there in the digital world. I do think it needs to be better and to improve. I have it done by an AO whose job is really to run my diary, not to run my media presence. So yes, we will look to improve.

Simon Baynes: I would suggest that you would be better off focusing your efforts on Facebook than Twitter; 20% of people look at Twitter but well over 50% of people look at Facebook. From my experience, there are a very significant number of silver surfers, people like me, and all I would say is that I would focus on Facebook, not Twitter. All you will do on Twitter is engage in a row, probably, and very few people are looking at it. If you put those energies into Facebook and you link into community Facebook groups, you will really increase your presence, and it is free. It does not take up a great deal of time.

Colonel Phillips: That is good advice; I will take that on board.

Simon Baynes: That would be my sincere advice to you because I have certainly found that if you engage—in my case, in a non-party political way—with community Facebook pages, you can put a message across in a sensible way. It really gets traction and brings other people to the fore. That is what I see you as being part of.

Colonel Phillips: You are quite right. I was very strong on Facebook 10 years ago, and it is only as I have come back, post service really, that I have realised that Facebook has changed into more, as you said, community postings and things like that, and it is useful in that way. You are right. Facebook does seem to be a way that the veteran community, the hubs, and the organisations are able to engage with a wider population. We will take that on board. If you had looked a few months ago, there would not even have been a Facebook page.

Simon Baynes: I do not want to sound churlish.

Colonel Phillips: No, you are quite right. It is a journey, and we are getting there, and as you say, Facebook is free.

Simon Baynes: Let me finish by saying, it is wonderful what you are



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doing, and you had a very big vote of confidence from our first panel.

Colonel Phillips: I did. I bought them all a beer before we came here.

Simon Baynes: All of whom looked like fairly judgmental characters, so thank you very much.

Colonel Phillips: They are a very tough bunch.

Q31 **Chair:** I am going to bring in Wayne in a moment. On this point about online presence and online engagement, I have looked at Minister Johnny Mercer's Twitter feed—he is very active—and seen some of the comments from people who identify as veterans. We have no way of knowing whether they are genuine veterans or not.

Colonel Phillips: That is true, yes.

Chair: However, there is a veteran's voice there, and he has a big following amongst veterans on social media. Quite a lot of it, as is often the case on Twitter, is very angry, and reading through those comments, you get a sense of abandonment.

You made the point earlier about lack of trust in Government. We have not mentioned Northern Ireland and the legacy issues that some veterans have been caught up in. Some of it seems almost, if I could use the word, radicalised. Is that a phenomenon that you have come across?

Colonel Phillips: Not on the ground, particularly. If you see my priorities, I have the performance of Veterans UK at the top because it is critical to the delivery of money to veterans to live on, but also it is not just a Welsh issue. I put it at the top because it is an issue on which I have to cross-cut with my other commissioners; with David Richmond, who is the Independent Veterans' Advisor to the UK Government; with the OVA; and with the Minister of State for Veterans' Affairs in terms of improving its delivery.

A quinquennial review of the Armed Forces Covenant compensation scheme has just been completed, and there is a review of Veterans UK welfare. There are problems with the Armed Forces compensation scheme appeals and tribunal process, which seems opaque, adversarial, and designed to frustrate to a level where people give up with the process. I do not think it is designed to be that way; it is just the way it has emerged, and it is the way that it is applied. That is being looked at and reviewed. However, it does mean that you get people with very complex cases who get very angry and frustrated. We see some in Wales, and I have dealt with a couple of cases there that Woody's in particular have supported. You are talking about people who are very damaged and are very frustrated and angry with a system that is not very transparent to them; it is adversarial, as I said, it is very official, and they do not have much support. It is supposed to be a system for which you do not need any legal support, but if you go to the tribunal, funnily enough, Veterans UK or the Government will have a lawyer there, but you, the



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veteran, are supposed to be able to represent yourself. So, the tribunal and appeals process does, I think, need a radical overhaul.

There is also an issue with the medical experts provided on those panels. Firstly, who those medical experts are is not very transparent. Secondly, if you dig beneath the surface and can find out the names of medical experts, then often, because they are a panel that is formed to review a number of cases in a session, they are not experts in the areas on which these veterans are appealing. Then the veterans say, "Well, how can a gynaecologist", or a GP or whatever, "make a judgment on my case when I have been backed by the very best brain neurosurgeon who says I have a problem?".

There are optics which are not good around the system as well; those people who are stuck in that system get very frustrated and very angry, and they are the ones who are mainly pitching at Johnny Mercer, the OVA and the system.

As I said, there are two reviews ongoing and hopefully they will solve the problem. We will see. This is a problem for Johnny in his role; the MoD owns Veterans UK and all the compensation process, yet Johnny has "veterans" in his title and is supposed to look after the veterans, but he has no leverage over what goes on in Andrew Murrison's Department and the area that delivers that. Of course, for Andrew Murrison, his primary role is probably supporting the serving population and the people power of the armed forces. For too long, Veterans UK has been under-resourced and has been the last line of the MoD funding chain.

Then there is the digitisation of records. If you go to Veterans UK, they are dealing with paper records; they have massive piles of paper they are shifting around. Claimants will say, "I put in this evidence, and they lost it," or "They did not provide it, and they did it on purpose." They probably did not do it on purpose; it probably was in that pile and was moved to another. It is just bureaucratic incompetence, but it frustrates them as well.

Q32 **Wayne David:** Colonel, I have a couple of questions about your report, but before we go on to that, I was surprised to hear that, given your importance and the vital job you do, you are not full time.

Colonel Phillips: No.

Q33 **Wayne David:** How many hours a week do you work?

Colonel Phillips: One hundred days a year, but I have lobbied to get that increased to 150. If I take leave and holiday, it ends up being about three to three and a half days a week that I am paid for. I would not necessarily say that it fills my time.

Wayne David: It is just a comment, really, but I am quite surprised to hear that, because I would have thought you would be working full time and certainly more than three and a half days.



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Colonel Phillips: The Wales Office does not have any money; they have to go to the Cabinet Office to find funding for the position and, I think, it was a matter of money.

Q34 **Wayne David:** That leads me on to the second question: in your report you say that you report to the Secretary of State for Wales, Johnny Mercer and the Cabinet Office. Who is your boss? If you have an issue, if something has to be decided, who do you go to?

Colonel Phillips: That is a good question. In fact, it has not ever been officially stated that Johnny Mercer was in that chain; it just seems logical that he should be jointly reported to, and he has taken on that role.

David Davies is the Secretary of State, and that is my line of appointment. My appointment comes from the Wales Office, and it is by agreement with them that I jointly report to Johnny Mercer as well, but I have taken that bipartisan role because it would make no sense not to report to Johnny Mercer. The OVA in the Cabinet Office provide my assistant and IT and pay me, and so, Jessie Owen, who is the Director of the OVA, is the official that I go to if I need more IT, or I need a budget to do social media or something like that.

There is no power that comes with the role of commissioner. It is purely the title of the office and the engagement that the individual puts into the role. That in itself is double-edged. It can be useful. I try to stress the independence of the role, because otherwise veterans would look at the Cabinet Office address on the email and question my independence.

I am put in place by Westminster and the UK Government to check that the Welsh Government deliver on the covenant, but I have just as strong a role to feed back to the UK Government.

Q35 **Wayne David:** In other words, then, you are independent. You report to people, and you liaise with the Welsh Government as an individual; you are independent.

Colonel Phillips: Yes. It is a report on what I see on the ground; it is not a report where I am given lines of inquiry to follow.

Q36 **Wayne David:** You say in your report that Wales is a pretty good place for veterans.

Colonel Phillips: Yes.

Wayne David: But in the same report you also point to many of the difficulties, some of which we touched on, and difficulty with regard to the health service in Wales. How would you substantiate your statement?

Colonel Phillips: I look at England; I look at Scotland; I look at Northern Ireland. That is my job—to level up the provision for veterans, and I think that of all the home nations, Wales does it best. There are various reasons for that, and I covered those in the report. One is geography. The scale means that it is easier to cover geographically; it is



a little bit smaller. There are cultural reasons, too. There are still very strong community values in Wales, which are less strong in other parts of England. The armed forces are still held in high regard. There is a lot of pride in the Welsh regiments; there is pride in having RAF Valley, HMS Severn and HMS Cardiff, and having them visit ports in Wales. There is still an ethos of service in Wales that has been dissipated in other areas, just because they are geographically bigger and perhaps the populations are more diverse. That is not necessarily so, but there is something in the make-up of Wales that means there is still a value attached to their armed forces, which permeates into the delivery of services. However, health is broken for veterans, as it is broken for everyone else. That would be my view.

Q37 Simon Baynes: This is an issue that we have discussed quite a lot this morning, so I would quite understand if you wanted to give a fairly concise answer. It is really just looking at the transition for veterans from Army life to civilian life.

Colonel Phillips: Or air force life, or naval life.

Simon Baynes: Indeed. I need to rephrase that; you are quite right.

Colonel Phillips: You come from an Army background.

Simon Baynes: Veterans from military to civilian life; quite right, Commissioner. What are the challenges that they face? You have just been touching on the mental health angle and the degree to which different demographic backgrounds inform that. These are themes that you have already touched on, and your colleagues as well, so I am not expecting you to give a massively long answer, but just to focus in on that.

Colonel Phillips: Transition has been identified through various studies as being critical. If you transition well, then a lot of the issues that we have discussed today will probably never occur. We have to understand that 90% of veterans do transition very effectively and then are employers and employees; they work for local government, the UK Government or the Welsh Government, and contribute to their society. That is another part of my job: to educate that not all veterans are sad, bad, or damaged. Most of us are functioning very well.

I think everyone here is a veteran, and that is the other thing: veterans like to give back to their community. But the transition piece specifically is different depending on your step off from the military. If you leave very young, prematurely in terms of a career, for whatever reason—whether that be medical, or by your own volition—the support that you will get is not as comprehensive, partly because you have not invested and paid into the system, so you do not get quite so much out.

Also, at that point, when people are young, they tend not to look to what their pension is going to be, or what is going to happen to them in later



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life. They feel invincible; they are going out into the world to do something else. Transition for those people can be more difficult.

We have three cohorts of veterans that I identify as in crisis or in need. There are those that transition traumatically or early, and they tend to be very difficult. They tend to be the bulk of those that we might see as homeless or in crisis, because they have come from a difficult background. They have been propped up socially, culturally, mentally, in a family that has given them structure, and then they have left that family and effectively gone back into chaos, and they end up in crisis.

You then get midlife crisis—veterans who have had a full career, or a fairly long career, who have gone into a second career, and then something else has happened: a marital breakdown, ill health—something like that. There is a midlife stage—midlife crisis is a trite term but let us call it that—that is an issue when you reach 50 or 60 years of age. Finally, you have geriatric veterans, who have very similar problems and needs to the rest of the older community: care, ill health, and that dynamic.

Those are the three cohorts where transition, or the change into civilian life, is more problematic. It comes at different stages. There are significant improvements in that transition training and process within the armed forces. I know the Army best; their system is more formalised. They have life skills staff officers in their regional headquarters—there is one in Brecon in Wales—and his job is to assure the system, or assure his commander, that in each of the units, the transition training is in place. Each commanding officer is supposed to have a life skills directive and each year, from the youngest soldier through to the commanding officer, everyone is supposed to have lessons in finance, lessons in housing, lessons in how the NHS works and things like that.

That is a relatively new system, and it is filtering through, but of course these units are busy, and they are going on operations, so when something has to give in a training programme, we have to get the unit together collectively to do a housing health study, they may tend to do it in one day and do all of it, but of course, you never have a whole unit together. You have one that is in Kenya, you have one that is in the Falklands, you have one that is doing public duties or something like that, so then they have to do it four times, and suddenly you have to find four study days, and you just do not have the scope in the training programme when you are trying to train to go off on operations, so it is the bit that tends to get left.

Then also, if you are say, a young lance corporal, who is looking to get promoted to corporal, and someone says, "We are going to a housing brief," you are not focusing on that. You do not want to hear about your pension or housing or whatever, you would say, "I am not interested in that, I want to learn about the next stage of my career progression." Everyone says you should move transition and training and education to



the left, but you do not have a very receptive audience for transition education to the left. People do not face that big step in transition until it is bearing down on them and then, again, the pressure of the programme, the heated nature of the programme, sometimes means that you cannot devote the time you would like to transition because by the time people are getting to that stage in the process, they have done 22 years, they are probably in middle management, they have busy roles, they are a sergeant major with troops that they have to look after, and of course, their military training means that they look after those people first. The very last person they look after is themselves, and then suddenly they fall out of the family and that structure is gone.

It is very complex, and the services are looking at how they do it, but at the end of the day, it is about the individual person and how they are going to manage their own resettlement because it falls down to the individual, and that can cause problems. The processes and the education, the packages are there, but not everyone will take advantage of them, sometimes until it is too late.

Q38 Ben Lake: Thank you Commissioner, for joining us this morning.

You mentioned earlier that you are only remunerated for 100 days, and also pointed to some of the difficulties that the lack of support staff is causing for you. I think I may know the answer to this, but I need to ask the question regardless. Do you feel that this is hindering your ability to fulfil the mission?

Colonel Phillips: Yes. I could do seven days a week; I could certainly do five. I do not think there is a day when I am not looking at my emails or doing something to do with the job. The support staff function is shared: I have a civil servant who is based in Newport working remotely from home for me, but she also works for David Richmond, who is the Independent Veterans Advisor to the UK Government, so we get half each, and that is pretty much it. Do I need a lot more? A better social media presence and some ability to do that would be good. I now have 100 days. I have not been paid for any of it, but I have been promised by Johnny and by Jessie Owen, the Director, that they have approved 150 days, so I have been doing that on good faith; I am just waiting for the payment to arrive. That has improved, and actually having support staff to run the diary does mean that I am not spending a day a week trying to sort out appointments and rearrange appointments when we cannot deconflict the diaries, and on expenses and things like that, so it does mean that I am freer to range wide and deliver. That has helped.

I would not personally want it to be a full-time role. I enjoy the fact that it is not quite full-time, and the other commissioners do as well. For my own personal circumstances, I would caution against it being made a full-time role; 150 days was what I thought was about right. Three to four days a week on the job seems to be about the right balance. I think we are there, pretty much.



Q39 **Ben Lake:** What about support staff?

Colonel Phillips: I do not need more support staff; what I need is better communication from the OVA in terms of when policy announcements are made. That is common to the commissioners; I was discussing the same issue with David Richmond, but then, I guess in the OVA's eyes, we are independent, so why do they have to feed us the information?

However, the OVA was very understaffed, and the reason why I did not have support staff was because there was a recruiting ban on civil servants at the time I was appointed. They were very poorly manned as a Department. They are now much better manned, so their delivery and ability to outreach and engage and communicate is better as well. The balance is right for a resource with quite a cheap delivery. I do not need all sorts of whistles and flutes and offices.

I am not sure anyone has mentioned the Veterans Advisory and Pension Committees. I presume people are familiar with the VAPCs, but they were set up regionally in the 1920s to deliver appeals and adjudication on war pensions. They have existed ever since as public bodies of voluntary officials. There is a Bill on VAPC reform going through the Lords, which came through the Commons, and there is a review that has just gone as well. In Wales, there is one VAPC. There is one in Scotland and one in Northern Ireland; England has about six or seven, I think, and those were already out there when the Veterans' Commissioners were parachuted on top, and because they lost their way in terms of what they are doing, it has now been harnessed a little better. That is something I was wondering about. Do you make the commissioners in the devolved nations the permanent chairs of the VAPCs, and then they have the VAPCs working under them? That is complex, because VAPCs are part of MoD Vets UK effectively, and there is the independence of the commissioners. We are finding our way with the commissioners; it is still relatively new. We probably have the balance about right at the moment. Sorry, that is a long-winded answer to a simple question.

Q40 **Ben Lake:** It is a very full and frank answer; thank you, Commissioner. Finally from me, I am interested in what your experiences have been working with both the UK and Welsh Government. Something you did not remark upon in the report was the political turbulence—

Colonel Phillips: Certainly here, this end.

Ben Lake: In that regard, has that had an impact on some of your work?

Colonel Phillips: It has to a certain extent. We went through horrendous turbulence. It was not necessarily the Secretary of State for Wales, but it was who led the responsibility for veterans. If you thought it was bad that I was reporting to two Ministers, at one point I was reporting to three, because I was reporting to the Minister for Defence, People and Veterans as well, very briefly, until Johnny Mercer was in position. That



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Minister of Veterans' Affairs piece was turbulent for a while. That did not help.

The Welsh Government has been a little more stable. I engage primarily with Hannah Blythyn who has the Social Partnership portfolio, which has the armed forces community within it. Obviously, defence is not devolved, but they take the armed forces community as a whole, from cadet forces through to veterans. The armed forces themselves see that wrap as a community now. They have an armed forces branch with three or four officials in it. I engage with them, and that tends to be my entry in, although I do engage obviously with health and various other departments. It is bizarre that housing sits under climate change in the Welsh Government.

There are some Ministers and Departments I do engage with, and it is actually quite easy to get access to Welsh Government Ministers. It is much easier than it would be here, although Johnny Mercer is quite easy to get in touch with, but the distance is less and so that is quite good.

I was worried that there would be resistance to the Commission not having been invented in Wales and being imposed, so my main effort initially was to prevent that from setting any roots and try and build a strong relationship, particularly with Ministers in the Welsh Government, but also their staff. We managed to do that, and we work pretty well together now. The turbulence was at this end.

Q41 **Ben Lake:** I have one last question. I appreciate it is still a relatively new post but, from your experiences thus far, do you feel as though the Ministers and the various Government officials take on board some of the recommendations?

Colonel Phillips: The Welsh Government, or—

Ben Lake: Both, actually.

Colonel Phillips: Yes. The OVA and Johnny Mercer, the Minister of State for Veterans' Affairs, they get it and understand it. The problem lies on the MoD side, where they have some significant other areas of focus at the moment, and quite rightly so. The Secretary of State's focus is not necessarily on veterans at the moment; there is Ukraine and bigger issues. Defence is always under scrutiny for its equipment programmes, so you have that running and bubbling, and veterans come at the end of the queue of priorities. In a Department which is resource challenged, there are fixed costs; pensions are a hugely fixed cost, but it is a fixed cost which you could see as belonging to veterans, so the ability to provide other funding into veterans' areas is limited.

A lot of money has gone into the digitisation of Veterans UK. That programme is ongoing; it is well over a year late in terms of its delivery, but there has been some investment in that area. In the reviews that have been ongoing, there have been promising noises in terms of taking



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those recommendations on board, and I know that we just had the Etherton review completed, not yet published, and there is a pledge that the Etherton recommendations will be accepted and be delivered.

It comes down to money at the end of the day. You can make all the recommendations in the world, but if they are resource intensive and expensive to implement, then it might be difficult.

I talked briefly about McCloud; that is going to be a huge Bill that is going to be coming in. The Etherton review may well have some financial compensation for the costs that are involved in it. There are a lot of areas where money is required.

Ben Lake: Thank you very much, Commissioner.

Chair: Thank you very much. We are just running up to the beginning of Prime Minister's Question Time, so my colleagues are going to have to rush off, but you have been incredibly generous with your time this morning. We thank you, Commissioner, for being with us and answering our questions so frankly and openly, and we are really grateful to the team of veteran charity representatives who were here earlier.

Colonel Phillips: Thank you for inviting me, and I look forward to perhaps seeing some of you in your constituencies. It is challenging for all of us, I know, in terms of diaries and ability, and you have wider cohorts to deal with than just your veteran community but thank you for what you do for them.

Chair: Thank you very much.