

# Tackling Serious Stress in Veterans, Carers and Families

## E-Bulletin

May 2020

### University of Chester

#### Update from Professor Alan Finnegan RN PhD FRCN FRSA CF FAAN

Welcome to the third E-Bulletin for the Armed Forces Covenant Fund Trust's (AFCFTs) Serious Stress programme. We have now progressed into the second year of the projects and it was a pleasure to have an opportunity to visit the grant holders in January 2020 and discuss the positive outcomes, developments and challenges. I thank everyone for being so welcoming and open. I was cursing my luck when flying to Belfast as my flight was cancelled and I wasn't rerouted for another 6 hours. In hindsight, it may have been a sign of the delays that have impacted on the projects by Covid-19, which has inevitably had a significant bearing on many communities based social interventions. In some instances, there was a clear necessity to postpone activities whilst others have changed their modus operandi and continued parts of their client delivery initiatives. The grant holders' updates provide a really good insight into how teams reacted. In these challenging times, it remains vital that the evaluation questionnaires are completed, as it will be impossible to define the positive outcomes of a project without the supporting data.



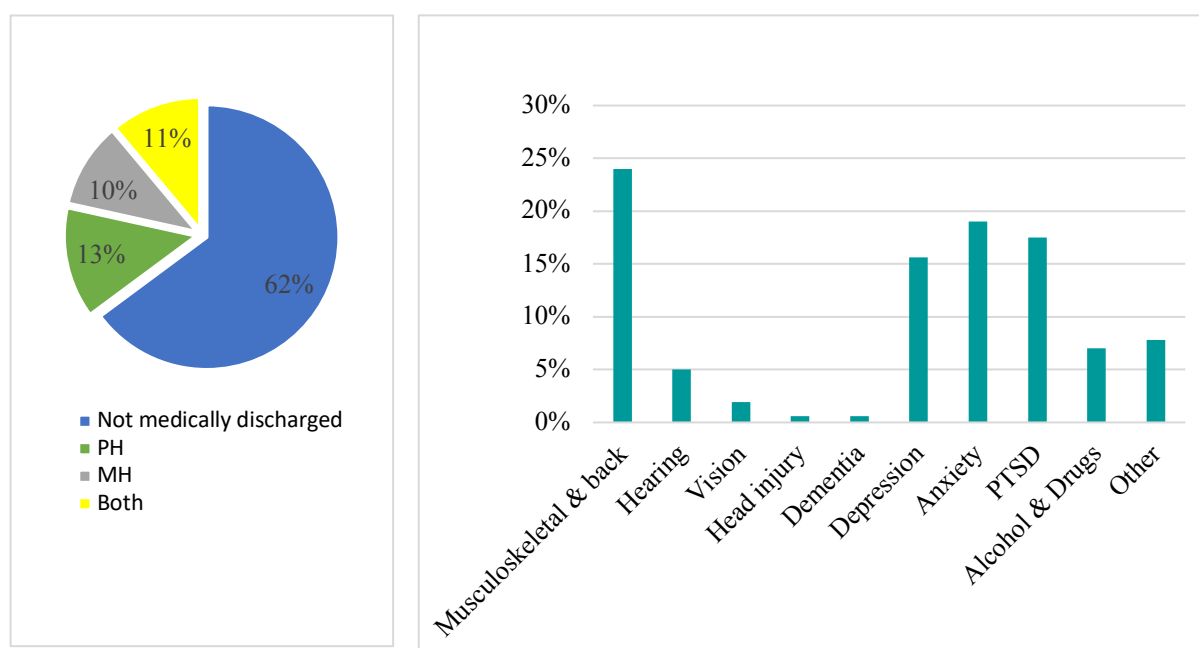
#### The Evaluation

Since mid-March 2020, the University of Chester has been closed and we have been unable to access completed participant questionnaires that were posted to the Centre. The figures below represent entry questionnaires received from 220 participants who entered the Serious Stress programmes by 6th May 2020. Of these, 180 were veterans and 40 were a family member/carers (See Table 1).

Grant holders	ENTRY Questionnaires	
	Veterans	Family or Carer
Veteran 1 <sup>st</sup> Point	0	1
Inspire	45	12
Ely Centre	25	6
CAIS	28	3
Wigan	62	8
WWTW	20	10
Solent NHS	/	/
TOTAL = 200	180	40

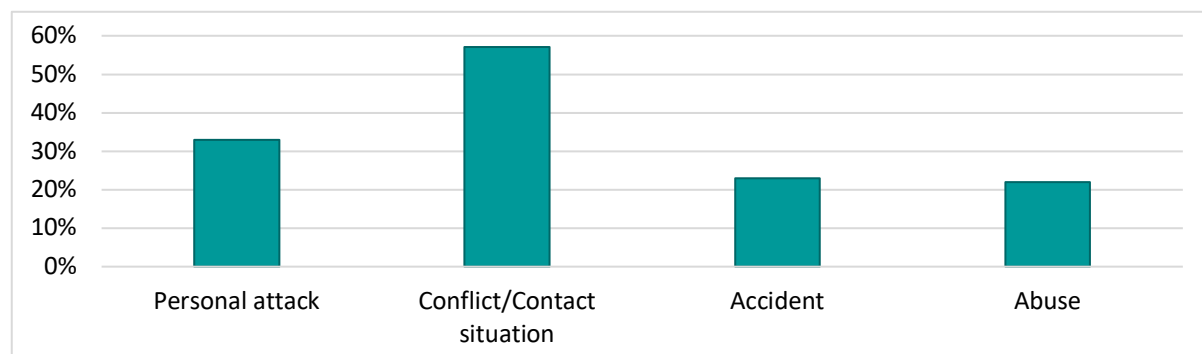
**Table 1.** Received questionnaires separated by organisations delivering the programmes.

Veteran participants were mostly male at 93% (N=167), of which 84% (N=152) had served as Regulars and 89% (N=161) were in the Army. The mean age for veterans was 48 years old and family members and carers was 44 years old. The majority of veteran participants had left the armed forces as Private soldiers (or equivalent) at 57% (N=103). The average length of service was 10 years (range 1 to 36) with 98% (N=176) serving for more than 1 year. Of these, 74% (N=133), had completed an operational tour; most commonly in Northern Ireland at 49% (N=89). The primary reason for leaving the armed forces was due to a medical discharge at 34% (N=59), and this was due to a combination of physical and / or mental health problems. Eighty-two percent (N=148) of veterans reported having long term physical or mental illness. The most common physical problems were due to musculoskeletal injury and MH issues were depression, anxiety and PTSD (See Figures 1 and 2).



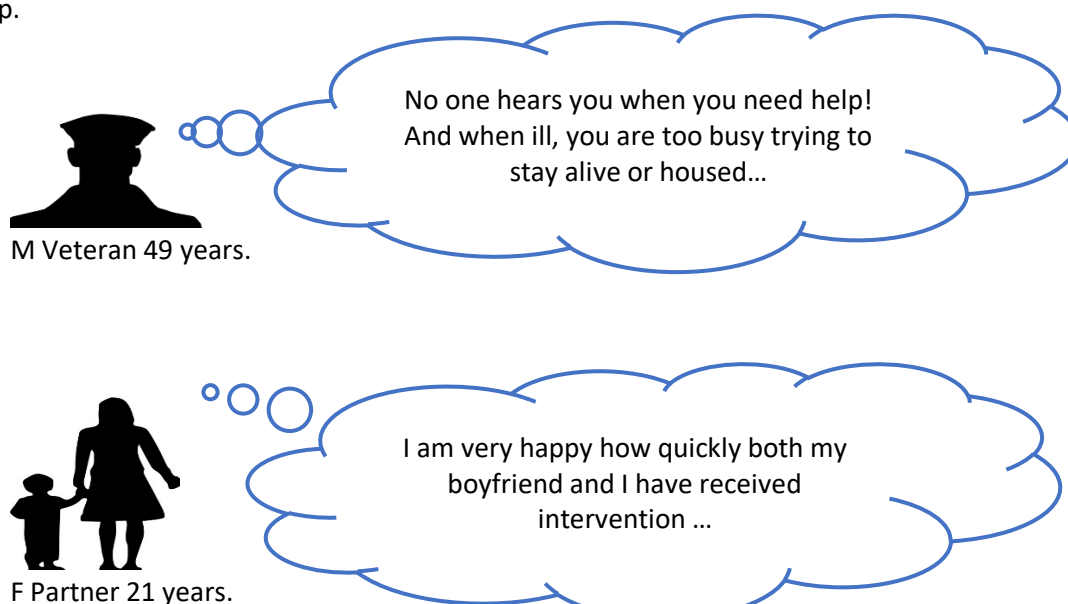
**Figures 1 and 2.**

These were associated with a wide range of common symptoms including low mood, sleep disturbance, anxiety and loss of confidence; symptoms that were also common with family and carers. Seventy eight percent (N=140) of participants had been exposed to a traumatic event during their service (See Figure 3 for details).



**Figure 3** Type of Traumatic Event Exposed to During Service

The majority of the veteran participants at 53% (N=96) reporting having few people to rely on, and 56% (N=101) felt 'much less' likely to engage in social activities compared to other people in their age group. Many veterans were unemployed 48% (N=87) and reported high levels of stress on entering the programme; with an average score of 8 (out of 10) for both veterans and family / carers. Participants are experiencing on average five significant life stressors, with the most common factors being previous traumatic exposure, unresolved trauma and family stressors. Participants are mainly entering the Serious Stress programmes via charities 45% (N=74) or self-referrals at 20% (N=35). Sixty-seven percent (N=121) had previously accessed support to help deal with stressful situations, although 62% (N=89) still reported that they felt it hard to ask help.



Psychometric scores confirm that the participants accessing the programmes are presenting with moderately severe depression and anxiety.

Psychometric questionnaire	Score range	Mean scores	
		VETERAN	FAMILY / CARER
<b>PHQ-9</b>	<u>Depression</u> : 1-4 Minimal; 5-9 Mild; 10-14 Moderate; 15-19 Moderately severe; 20-27 Severe.	17	15
<b>GAD-7</b>	<u>Anxiety</u> : 0-5 Mild; 6-10 Moderate; 11-15 Moderately severe; 15-21 Severe.	15	13

**Table 4.** Mean scores, across programmes, PHQ-9 & GAD-7.

### Exit Data

There have been 14 exit questionnaires from Wigan, CAIS and WWTW, of which 11 were from veterans and 3 were from a family and carer. Most (93%, N = 13) were planned exits. The majority of the questionnaires showed high user satisfaction rates.

Qualitative data indicated participant's satisfaction of the programmes, focusing on the help/support and services received.



M Veteran 58 years.

The best parts were: Regular contact with peer mentor and the measures that were provided. Transport to appointments. Support with activities and meeting other veterans. Talking through my journey and therapy access...



M Veteran 55 years.

I have found the programme very useful. The people are very understanding and kind. All will go out of their way to help everybody. I would recommend that this would be the first point of call for any ex-service personnel in need of advice.

### Ensuring Quality

Despite the significant changes in working patterns, it remains vital to obtain as many entry and exit questionnaires as possible. During the May 2020 grant holder meetings, it was clear that this is widely understood. Feedback received indicated that grant holders were proactively engaging with participants to get them to connect with the evaluation process. A key aspect in this strategy is to explain the relevance of the data to provide a base for future sustainability to defend the health and well-being of the Armed Forces Community requiring help in the future.



The need for accurate, authentic, and reliable data is emerging due to the diligence of the participants' contributions and their understanding of the rationale for the evaluation. To date, participants' willingness to partake is high, and to achieve higher numbers of returns, it will need the continued tenacity and drive of grant holders and delivery partners in championing the projects. Up until the Covid 19 lockdown, there were few problems with data collection and transmission which has been successfully completed. This was overwhelming via pen and paper questionnaires but has now moved towards online data collection. We have revisited the online platform (including issues such as consent) with some grant holders and are very willing to work with others as required.

The audit mechanism to ensure that the Centre has received questionnaires from participants who have entered the programme, is to compare the number of questionnaires received with the number of consent forms that the grant holders have collected. This maintains the participant's anonymity. On the whole, differences between the number of participant's enrolled onto programmes and the number of questionnaires received are due to not having reached the point where the questionnaires have been given out. There may also be children enrolled onto programmes whose data is not being collected.

The first exit questionnaires are emerging and the timing for collecting this data requires similar flexibility, especially in instances of extended maintenance / safeguarding interventions that are provided after the Serious Stress programme to ensure on-going health and wellbeing. Therefore, the participant should complete the exit questionnaire on completion of the specific Serious Stress element. The AFCFT / Centre appreciate that they will continue to be supported, so the message is that the grant holders should not wait for participants to be heading out of the door to ask them to complete the exit questionnaire.

All grant holders have again reiterated the desire for a more structured qualitative element to the evaluation. There is rich case study evidence and personal attestations, and it is desirable to find a medium for independently displaying these narratives. I have forwarded this recommendation to the AFCFT and will update grant holders once a decision has been reached.

The Centre will continue to add emerging themes onto the Q&A section of the Centre website under the heading of "frequently asked questions": <https://www1.chester.ac.uk/westminster-centre-research-veterans/research/serious-stress-veterans-carers-and-their-families>. This section also contains hyperlinks to useful websites, and grant holders can add additional references to the Centre if required. In addition, please call upon our team if there are any staff who need training regarding the evaluation and online platforms.

### **Serious Stress Events & Networking**

Sadly, due to Covid-19, the AFCFT's intent to host a grant holder Serious Stress Symposium in March 2020 was postponed until September 2020. However, the September event has also been postponed with no future date yet to be identified. I know grant holders were very keen to contribute to the event which was originally timetabled for the mid-point of the evaluation. Therefore, the AFCFT have identified Thursday 11th June 2020 for a Webinar which will begin at 1000h and last for approximately 2 hours. The Centre team look forward to catching up then, and we wish you the very best of luck with your continuing endeavours.

We would encourage grant holders to share the E-Bulletins with delivery partners, participants and interested parties. We will continue to include portfolios of the Centre staff and hopefully this can reassure participants of the military background of Chester academic team.

## Armed Forces Covenant Fund Trust

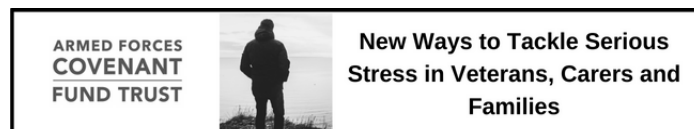
### Update from AFCFT

2020 has proven to be a busy year for the Armed Forces Covenant Fund Trust (the Trust) so far. While Covid-19 has affected so many areas of life and spelled huge changes for many in the sector, including the halting of some activities, the Trust has ploughed on, supporting our community in the best way we can.

March was due to see our Tackling Serious Stress grant holders come together for an exciting, inspiring and informative few days in Chester to explore the impact of this important fund and look to the future and next steps. Restrictions to movement sadly meant this event could not take place, but we are determined not to lose the opportunity to bring these groups together and we're currently planning a virtual get-together followed by something more tangible in the autumn.

In other areas, the Trust has been planning new funding programmes following our popular consultation to discover what the Armed Forces community feels about the importance of tackling social isolation - more on this to come in the next few weeks and months. More immediately, we have been supporting our current grant holders with easy access to grant variations and extensions, needed as a result of Covid-19. More about this can be found on our website [www.covenantfund.org.uk](http://www.covenantfund.org.uk)

Keep up to date with all the Trust's latest developments and news by signing up to our e-newsletter at the above address.



## Grant Holder Updates

### Solent NHS Trust



#### PositiveMinds

- Like many services, PositiveMinds has found itself looking at new ways of supporting veterans during Covid19. Since March, we have moved our service from a physical one to a remote one as we continue to offer the same care and support to our veteran community.
- We are also updating and moving our skill-based workshops to an online platform which can be access remotely both during lockdown and post-lockdown.
- We have been continuing to request veterans to complete questionnaires. We are currently reviewing our count on this and looking at online submission with the help of the research team. Alongside this, we have used this time to explore other means of supporting our veteran communities.

#### Quick Response Force

- We have a number of veterans who have expressed an interest in this role. Despite the delay in launching this project, we continue to develop our peer support system by collaborating with our fellow veteran partners and QRF volunteers. Our QRFs have been outstanding at providing valuable insight into the needs of veterans during vulnerable episodes which has been essential in shaping the service to be the most appropriate possible. In return we have created bespoke training courses for our QRFs to help them increase their knowledge and understanding of mental health and provide skills for them to use in future ventures.

#### Expanded Veteran Peer Support Projects

- PositiveMinds is primarily based on a social model of support for individuals, including veterans experiencing emotional and social difficulties which could lead to reduced quality of life, lower level mental health, and emotional distress. The aim of this new project is to deliver a bespoke experience where veterans can receive the benefits of peer support with fellow veterans, identifying goals and providing chat and call service.
- The focus of the offer is to deliver real time advice and support to each veteran visitor, ensuring they have an opportunity to receive peer support from fellow veterans. This ensures veterans will heard as they describe their difficulties circumstances to a staff member with both lived Military experience, and mental health experience. Veterans will have the additional benefit of being supported to formulate a tangible plan of next steps which could help them on their recovery journey.

- It is recognised that some veterans and their families make the transition to civilian life with difficulty, many struggle due to an impact on mental and physical wellbeing. Sigma and a reluctance to seek help further exacerbate this problem. A dedicated veteran's telephone helpline and virtual chat room will help with the initial engagement to encourage those in difficulty to talk about their wellbeing concerns and taking the first step.
- The support line will have two functions. The first will be that when a veteran calls the veteran line, they will be answered by a veteran. This initial contact will mean that veterans will be able to use their own language without fear of not being understood, and they can call in the knowledge that they will be spoken to with similar lived experience. The second function will be that if a veteran requires a person to speak to on a non-clinical peer support basis (chat and call), this service will fulfil that need as well as being able to offer more long-term support if required.
- We recognised that some veterans may experience distress when using the telephone, therefore we are developing an online chat system that can help us support veterans from the comfort of their home, or on a mobile device on the way to work. A veteran can register and speak to Veteran Wellbeing Advisor via a messaging system, to reduce the pressure on an already pressured mind. Veteran will also be able to follow the page and access a whole host of useful resources.
- Our aim is for QRFs to become a fundamental part of this project once launched and will aid in maintaining a chat and call support outside of PositiveMinds opening hours.

## Walking with the Wounded

### WWTW Northern Care Coordination Project



#### General Update

- The NCCP project has gone extremely well for us here at Walking With The Wounded (WWTW). With all our key milestones being met and growing the partnership working across both regions we are operating in. As we are supporting quite complex veterans and their families, at times, it has taken slightly longer than we initially thought it would, to stabilise some of our beneficiaries. That said, some of our veterans have been in and out of mental health support for some time and some suffer with dual diagnoses.
- The programme has also been very well received by our referral partners, especially the NHS Transition, Intervention and Liaison Service (TILS) and Military Veterans Service (MVS), as we have been able to react quickly to support some of their hardest to engage clients. Due to the good name of the programme, WWTW have not had to advertise the support we offer within this programme. In fact, the referral partners have been kept quite small as it became clear very quickly, we may not be able to manage the caseloads due to the high demand for the service.
- The NCCP has now signed up 14 partners offering a very inclusive holistic service as well as some low-level therapy support:

<b>Calvert Trust</b>	Individual and Family Adventure Breaks
<b>Warrior Programme</b>	Resilience Training
<b>Click Therapies</b>	Online Alcohol Coaching/Support
<b>Ripple Pond</b>	Family Member Peer to Peer Support
<b>Gateshead Carers</b>	Carers Support
<b>Go Gateshead</b>	Leisure Activities
<b>Veterans In Communities</b>	Veterans Specific Support
<b>Gaddum Centre</b>	Individual and Family Counselling
<b>North East Counselling Service</b>	Individual and Family Counselling
<b>Angling Trust</b>	Fishing Trips
<b>Recycle Y Bike</b>	Mentor and Coach Based Volunteering
<b>Moving Forces</b>	Leisure Activities
<b>Tom Harrison House</b>	Veteran Addiction Support
<b>Blue Line Taxis</b>	Transport

- Not all the partnerships have been used at this point, we are finding that due to the large geographical area we are covering and, by adhering to the individual's needs, using partnerships can be quite restrictive. The biggest successes within the collaboration so far has been, Calvert Trust, Angling Trust, North East Counselling service, Click Therapies and Recycle Y Bike. This does not devalue the other services, they are all extremely valuable and deliver amazing services, we haven't had the beneficiaries in the right area, with the need to use some of the services or, the beneficiaries, just have not been ready to access those services at this time. Just prior to the Coronavirus outbreak, the NCCP team highlighted around 6 beneficiaries ready to attend the Warrior Programme, this has been put on hold for now for obvious reasons. Due to the virus, only 4 of the 13 partners are able to continue to support at this time, and even these have had to adopt slightly different working practices.

#### Statistics at the Latest Full Quarter

Beneficiaries directly supported by the collaboration	141
New direct beneficiaries supported	30
Indirect beneficiaries supported	55

- During their support, each beneficiary is given a development plan. To help us gauge where the support is required WWTW use the Outcome Star Online tool which allows the Support Care Coordinator and the beneficiary to discuss 10 support needs areas ranging from Accommodation through Mental Health and wellbeing to Managing Strong feeling and Addiction. The beneficiaries are asked to go through the star at initial assessment, the 1 month point and then every 3 months until they are discharged from the support. Below are a few of the statistics for the whole of the service:

% of beneficiaries making an improvement in at least 1 support area	100%
% of beneficiaries making an improvement in at least 3 support areas	72%
% of beneficiaries making an improvement with managing their strong feelings	89%
% of beneficiaries making an improvement with their mental health and wellbeing	83%
% of beneficiaries making an improvement with their addiction	61%

- It is worth highlighting here that not every beneficiary will require to improve across all 10 support areas so very rarely will you see a 100% improvement in the individual areas across the whole service.

### Staff Changes

- Unfortunately, our North East Support Care Coordinator had to leave us to care full time for her mother who rapidly declined with her health. Julie did an amazing job and will be missed by both the clients she worked with and the agencies she struck up relationship with, to support our beneficiaries. We thank Julie for everything she did, her dedication and hard work and wish her and her family all the very best for the future. Mark Thirlwell has now be recruited, with over 7 years of experience supporting veterans, we very much look forward to hearing his good news stories over the coming months.
- The Coronavirus outbreak has caused the team to look at how they can continue to support our beneficiaries through this unprecedented time. WWTW are very much, still operating a full team from their homes and I must say, the beneficiaries have taken to the Coronavirus issue extremely well so far. Staff have adapted and now use platforms such as Zoom, Skype and WhatsApp to meet with clients and referral partners, to share information and even to set down challenges between the groups. For those who do not have or are not great with IT, we stay connected with regular phone calls.

### Good news Stories

- The NCCP has recorded some great good news stories ranging from a beneficiary in the Greater Manchester area who, at the launch of our new volunteering programme (Op Re Gen), one of the NCCP beneficiaries stood up in front of almost 100 people to talk about how Volunteering had helped him. To say it boosted his confidence was an understatement and many people shook his hand afterwards to say well done, he was buzzing as he left! He was contacted later that day to say how proud we were. His reply read, "I am so relieved and happy I did it. I Went to bed when I got in but could not sleep, the adrenaline was still there. Thank you for helping me today, it really helped."
- Another beneficiary family, have now started to support their nieces who are NHS workers and have contracted Coronavirus. After taking advantage of 3 of the NCCP partnerships, the family now feel strong enough to support others. Since the family's involvement with WWTW, Billy is now alcohol and drug free.
- He continues to take his medication regularly and attends his appointments with the mental health team. Billy sees his future with more optimism and in turn, through the support he has received, has grown in confidence and is looking forward to donating time to North East charity, 'Recyke Y Bike', something that he would have ever considered doing last year.
- The family received regular visits from the Support Care Coordinator, who offered them continued support and guidance.
- Ali (Billy's wife) said, "Without whom we may not have moved forward as strongly as we have as a family unit. After the help of WWTW and the NCCP programme, my immediate family are in so much more of a better place now and we feel strong enough to be able to support others that we care so much about.'

### CAIS



- CAIS have received 304 referrals to date, 64 people have completed support, 64 are currently on the programme
- 45 University of Chester entry questionnaires have been completed. 4 exit questionnaires.
- Delivery of support and referrals is currently remote, phone, email, text based.
- Four virtual drop ins have been conducted and well received; more will be added.
- 82 Phone surveys conducted for feedback on how service users are experiencing remote service delivery.
- Peer mentors have delivered vital prescriptions after pharmacy's failed to deliver.
- 5 successful applications have received funding from the innovation fund.
- 1 new staff member has been recruited and 1 position was in the recruitment process now delayed by COVID-19.
- Weekly Team meetings held virtually.
- Conference event scheduled for Q4 to share learning and further develop delivery – delayed due to COVID 19.
- We continue to refine our data collection and recording.
- Recently received service user feedback below.



### Service user A

*When I was first referred to Change Step by Veterans NHS Wales, I was broken, scared and I'd already tried to take my own life. When Dai and Neil came to my house for the first time I want their help to be able to function again get my confidence back, I wasn't able to keep eye contact, I was fidgety and scared to leave the house. Both were very understanding and set out a clear plan for me to follow with Dai's help. Dai was confident I'd be me again or at least a bright new version.*

### Service user B

*Dai was a guide through my journey, he made suggestions and pushed me to do things but if at any point it was stressing me out we stopped. Once I was ready, he introduced me to Natalie from the Poppy Factory they both worked with me to build my confidence in getting a job and meeting new people.*

*Veterans NHS Wales help me cope with my PTSD and put my mind back together, Dai helped and is still helping with my confidence and introducing me to a world I didn't know was there, like the veterans coffee morning, veterans Bikers, days out, weekends, discounts.*

*Without Change Step I would be OK but nowhere near who I am now, I'm going in directions I never thought I'd go which is amazing. I have recommended them to every Veteran I know and will continue to do so.*

## Wigan Council

- Our Unite Inspire Achieve Programme has now seen over 100 beneficiaries access the programme with a 70% of beneficiaries falling into our complex pathways and 30% into our targeted offer. Our intervention menu based on six core themes continues to expand and address the multiple and complex needs that our beneficiaries face.



## Intervention Menu



Physical Health & Well-Being	Emotional Health (Feeling)	Personal Growth (Being)
<ul style="list-style-type: none"> <li>• Fitness &amp; Nutrition (walking, climbing, swimming ETC)</li> <li>• Fishing</li> <li>• Mindfulness</li> <li>• Outdoor Education/Nature</li> <li>• Challenges</li> </ul>	<ul style="list-style-type: none"> <li>• Stress Management</li> <li>• Anger Management</li> <li>• Grief</li> <li>• Domestic Violence</li> <li>• Parenting</li> <li>• Confidence Building</li> <li>• Brief Interventions (PHO)</li> </ul>	<ul style="list-style-type: none"> <li>• Careers Advice &amp; Guidance</li> <li>• Peer Mentoring</li> <li>• Education, Training &amp; Employment</li> <li>• Volunteering</li> <li>• Hobbies/Spiritual Growth</li> <li>• Clubs &amp; Groups</li> </ul>
Mental Health (Thinking)	Social Health (Relating)	Welfare
<ul style="list-style-type: none"> <li>• Advanced Meditation</li> <li>• CBT/NLP/Mapping</li> <li>• Personal Safety</li> <li>• Mutual Aid</li> <li>• Risk Management</li> <li>• Online Support/self help</li> <li>• Health Advocacy</li> </ul>	<ul style="list-style-type: none"> <li>• Days Out</li> <li>• Respite</li> <li>• Café</li> <li>• Social Events</li> <li>• Open Days</li> <li>• Team Building</li> <li>• Retreats</li> </ul>	<ul style="list-style-type: none"> <li>• Housing</li> <li>• Welfare &amp; Benefits</li> <li>• Social Care</li> <li>• Offending</li> <li>• Complex Dependency</li> <li>• Legal/Financial Support</li> <li>• Bespoke Interventions (Rehab etc)</li> </ul>



- We have recently set up a partnership with Apple Cast North West who offer indoor and outdoor angling sessions and horticulture. The centre was based around using angling as a tool to develop respect and self-esteem and break down barriers to starting conversations around mental health and well-being. Our beneficiaries have formulated their own members group who pay for sessions in volunteering days gifted to the facility. This has proven extremely popular and provides an opportunity for family-based activity.



- We're working with an organisation named Intuitive Thinking who deliver recovery-based training from those who have lived experience. Hidden Domestic Abuse/Violence has been present within the complexities of many of our cases. We are now working on a healthy relationships project with campaign material for our beneficiaries to understand early warning signs, what constitutes domestic abuse as well as referrals for victim and perpetrator courses delivered at the HQ.

### High Profile Visits



- We had a visit from the Mayor of Greater Manchester on 26<sup>th</sup> Feb Mr. Burnham said: *"The Services offered from the HQ are fantastic and it is good to hear about the outreach offer in Leigh and other parts of the borough to ensure as many veterans and their family members can engage as possible"*.



- After hearing about the fantastic work in Wigan Borough supporting the Armed Forces Community, Lord Lieutenant, Sir Warren Smith spent the day at the facility hearing all about the Unite Inspire Achieve Programme, talking to staff, volunteers and beneficiaries about the HQ offer and partnerships. Sir Warren highly commended our work and invited us to apply for a series of additional local grants.



- We were really pleased to have had a very busy two day visit to London late January to participate in the Veterans Work Debate at Deloitte and then have the pleasure of seeing some familiar faces at the Armed Forces Covenant Fund Trust Breakfast Briefing to meet Steven and Alan for a very informative morning.

### Peer Mentoring Programme

- Our peer mentoring/befriending programme has now been developed with our partners We are with you as part of their Right Turn Programme The Peer Mentoring Project will encompass befrienders/ buddies and peer mentor volunteers from either We Are With You or Healthier Heroes CIC
- We've broken the caseload and skill requirements for befrienders/buddies and mentors as follows:
  - ✓ befrienders/buddies: hold a 'targeted' caseload and provide a moderate level of support
  - ✓ mentors: hold a 'complex' caseload and provide a higher intensity level of support
- This distinction between befrienders/buddies and mentors provides a clear framework for allocation, supervision and training needs. It also creates development opportunities for those involved in this project.

**we are  
withyou  
at Right Turn**

### COVID 19 Emergency Logistics Support

- We continue to operate our programme on a remote and virtual basis offering welfare checks, remote counselling and emergency interventions for Veterans in crisis working closely with WWL Hospital Trust and Adult Social Care.
- As an and emergency response to the COVID 19 pandemic The HQ has been operating a 7-day service since week commencing the 23<sup>rd</sup> March, providing weekend and bank holiday cover for emergency food parcels for Vulnerable and Shielded residents working closely with the Helpline Contact Centre.
- On behalf of the Local Authority we have delivered; 387 emergency foods and essentials, parcels and medication collections supporting 481 Adults and 235 Children of the boroughs most vulnerable residents. In addition to our day job, the HQ have delivered over 400 emergency food parcels to vulnerable and shielded residents in addition to:
  - 130 deliveries to SDFS and Food Banks of bought and donated produce
  - Taken delivery of 73 supply chain and donated food/essentials items
  - 49 drivers on call with 2,800 hours of HQ volunteer time over 4 weeks

**BUT WE STILL FIND TIME TO DO THE YMCA!!!!!!**



## V1P

### Live Life

- Service update - we are continuing to maintain regular contact with partner agencies and, where possible, partners have adapted their service delivery to take account of the current situation.
- Depending on how long the lockdown continues this is highly likely to have an impact on numbers and outcomes. For example, some partners (i.e. Horseback UK and Stand Easy are currently unable to deliver their planned respite activities). Fares4Free continue to carry out essential journeys such as prescription pickups, essential appointments, etc. whilst maintaining social distancing in their vehicles.
- Where possible, other partners (i.e. Cyrenians, Rock to Recovery, Lothians Veterans Centre, Coming Home Centre, Veterans First Point) are continuing to offer remote phone/video support to veterans and their families but can no longer offer drop in or face to face services.
- A number of partners are also offering additional 'emergency services' such as deliveries of essential food parcels, homemade meals, and so on. Whilst Live Life partners continue to offer some services and much-needed remote support for veterans and their families, unfortunately the Partnership is unable to take any new referrals for the time being.



## Inspire

- Inspire's Recovery Together Programme has continued with its service delivery phase, successfully establishing safe referral pathways through local statutory and third sector organisations. Given the context of Veteran life in Northern Ireland, with the ongoing concern for personal safety and the lack of trust in many services, we view the awareness raising component of the service, and establishing trusted relationships from a variety of sources, as being the key to success in the delivery of this programme.
- Service activity to date has been as follows:
  - 162 entrants to service to date
  - Programs delivered include horticultural therapy and equine-based support
  - Educational programmes on Living with PTSD, and Mental Health Advocacy completed
  - Trauma Sensitive Mindfulness groups delivered
  - 107 engaged in psychological services and addiction support
- The impact of the ongoing pandemic has been significant though. We have rapidly moved to reshape our service delivery model, transitioning our mode of delivery to an online based service. Whilst this is not do-able for all support services within the programme, we have implemented a range of services such as online assessment, treatment, support groups, mindfulness and advocacy. Further to this we are rolling out an online support hub for our Veteran community including online, psychoeducation, training and bibliotherapy. In this way, we feel we can best support the needs of the veteran community and their families in these uncertain times, whilst ensuring the safety of everyone providing and using the services available.
- However, in light of the fact that the online model is not feasible for all of our delivery partners, and that a cohort of our clients are unwilling or unable to engage in online/telephone based support, we are seeking both a change in delivery modality and an extension to the grant, to ensure that we fulfil





the potential within the Recovery Together programme, supporting as many Veterans as we can reach and keep the needs of the community at the forefront of our actions at this time.

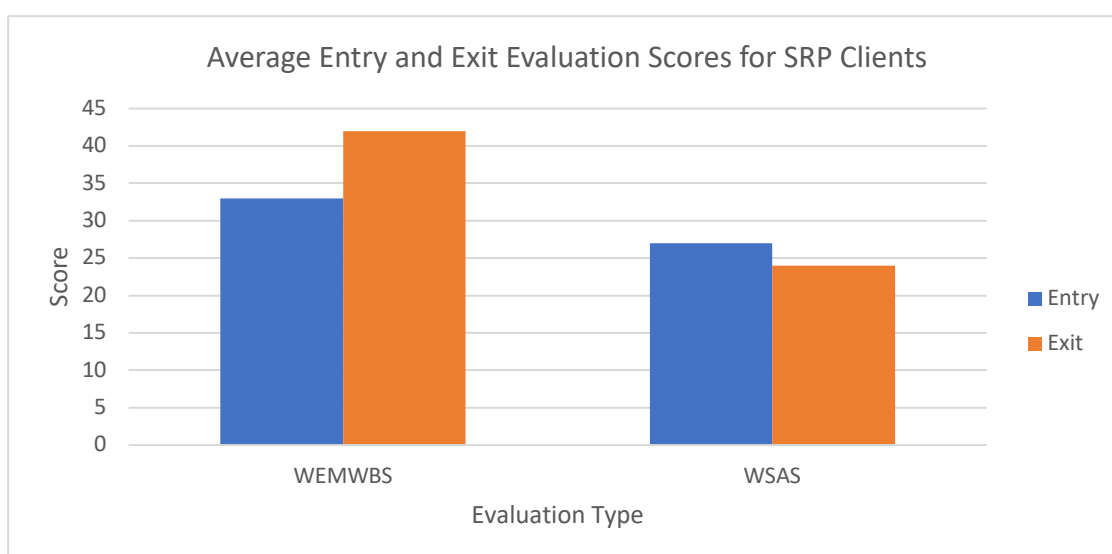
## Brooke House

- Brooke House is a project within the overall governance of The Ely Board. It is located in the private and peaceful, rural setting of Colebrooke Park in County Fermanagh; the seat of The Viscount and Viscountess Brookeborough.



### Project Development

- At the beginning of the project Brooke House had office accommodation and the use of the walled garden to deliver services. In September of last year Brooke House secured additional premises which had been a private Spa on the estate. This has enhanced our total programme enabling us to deliver the following services on our own site:
  - Talking Therapies
  - Complementary Therapies
  - Physiotherapy
  - Acupuncture
- We also have use of Cottages on the estate where we offer a weeklong, structured, residential programme for the entire family which is set up following an in-depth assessment carried out by the Health and Well Being Manager and team.
- In the past quarter we have had one family (two clients) who had a bespoke tailored programme under the Tackling Serious Stress funding strand of funding. Each family member had individual support as well as family support.
- Average evaluation scores: Entry vs Exit



*NB. WEMWBS the higher the score the better, WSAS the lower the score the better.*

## Staff Team

- Brooke House has now successfully recruited the Tackling Serious Stress team and the Director is delighted to welcome Amanda Armstrong, Health and Well Being Coordinator and Alison Graham, Administrator as the Tackling Serious Team within Brooke House.

## Service Activity

- Brooke House is now a Health and Well Being Centre with total emphasis on client Health and Well Being and appropriate interventions based on individual client need. The service activity in Tackling Serious Stress is as follows:

- 97 have entered
- 80 are currently active
- 8 are on hold
- 5 are ineligible
- 4 have been closed as active clients

Of these:

- 17 clients have talking therapy support
- 12 clients have physiotherapy support
- 10 clients have Complimentary therapies



- Brooke House ran the first Defence Gardens Scheme (DGS) 10-week course where veterans took part in Nature Based Therapy (NBT) interventions in 2019. This programme is delivered within the walled garden and is run by an accredited psychotherapist/horticulturist and the head gardener from the estate. Six clients from the Tackling Serious Stress funding have taken part. The evaluation using NHS scales (GAD 7 and PHQ 9) indicates a statistically significant reduction in anxiety and depression for the majority of participants. In addition to the reductions of symptoms DGS participants have been supported in to moving onto a range of volunteering, retraining and in one case employment opportunities.

- The recent award of a two-year Positive Pathways grant to Brooke House will build on DGS practice to date and enable the programme to be delivered three times each year over the next 2 years, supporting 48 transitioning service personnel and veterans over 6 programmes. DGS is capturing the experience and best practice, by being developed into a practitioner manual. This will enable this Nature Based Therapy intervention to be delivered more widely across the UK in due course. The aim is to publish this manual in June 2020 and will be useful guide for any group wanting to run Nature Based Therapy.



- We are now living through extraordinary times with no opportunities for meeting with others. Brooke House closed its doors to clients on 18<sup>th</sup> March and the staff team are all working from home until further notice.
- Brooke House sent an immediate update out to clients on 18<sup>th</sup> March advising that the following services would no longer be delivered until it is advised as safe to do so:
  - Complementary therapies (Acupuncture, Massage, Reflexology, Aromatherapy)
  - Physiotherapy
  - Groups (Horticultural Therapy, which was ongoing, Fishing 4-week course which was due to start in April 2020, Nutrition course)
  - Structured Residential Programme
- However, we have remained busy seeking new ways to engage with our clients and these are developing week by week.
- An initial telephone assessment of need was carried out with all 340 Brooke House clients in order to fully understand the current circumstances faced by different people and to guide us on how we might be able to offer alternative support.
- Since March we have been investigating the facilities for delivering the following remotely, and since the beginning of April have offered the following services either by telephone or online:
  - Screening appointments following referral
  - Review appointments on completion of services
  - Psychological assessment appointments
  - Talking therapies interventions (Counselling, Clinical Psychology)
- Weekly telephone calls are made to those who requested as part of the assessment and Brooke House sends a weekly update to all clients, providers and friends providing information, helpful hints and positive messages.
- In mid-April we developed an online blog which will focus on sharing what is happening in the Walled Garden and wider Brooke House happenings. It will include an interactive space for clients and provide gardening tips from the Colebrooke Head Gardener. The first edition has been published on 24<sup>th</sup> April and can be viewed on the Brooke House web site.
- In conclusion, Brooke House were delighted to host Professor Finnegan on 20<sup>th</sup> January 2020. We did a presentation of the work in Brooke House and showed him around the facilities sharing with him the services we offer and hearing from him firsthand advice which we are grateful for.





## University Staff Project Team

### Staff Members



**Dr Alan Finnegan**  
Professor of Nursing and  
Military Mental Health,  
and Director of the  
Westminster Centre for  
Research

Colonel (Ret'd) Alan Finnegan's military career included appointments as Commanding Officer at the Royal Centre for Defence Medicine, MOD Nurse Consultant Advisor in Military Mental Health and Defence Professor of Nursing. His overseas deployments include Iraq, the Balkans, Afghanistan, Africa and four years in Northern Ireland where he was OIC of the Stress and Trauma Clinic within HQNI. On retirement from the Army, he joined the University in 2016.



**Dr Lisa Di Lemma**  
Senior Researcher –  
Veterans Projects

Lisa is a psychologist and her research interests focus on health and cognitive processes, behaviour change and cost-effective interventions. Currently, she is a post-doctoral researcher at the University, and the Tackling Serious Stress in Veterans, Carers and Families project is one of her main focuses.



**Lottie Ainsworth-Moore**  
Project Administrator –  
Veterans Projects

Lottie has a strong background in working with serving personnel, their families and veterans in previous employment with military charities and volunteer work. She is also an Army wife of 10 years.



**Lauren West**  
Administrative Assistant &  
PA to Dr Alan Finnegan

Lauren studied at the University of Chester before gaining employment at the Westminster Centre for Research. She has good links to the military community and assists a number of military forums including being Secretary for the Cheshire Armed Forces Covenant Partnership Committee.

## Meet some of our External Committee Members

(a full list is at: <https://www1.chester.ac.uk/westminster-centre-research-veterans/who-we-are>)



**Professor Stephen McGhee**  
FAAN

Lieutenant Colonel (Ret'd) Stephen McGhee is the Assistant Dean and College of Nursing Director of Global Affairs at the University of Miami, USA. Stephen is an experienced academic and researcher who served in the British Army Reserves for 21 years. For his outstanding contributions to nursing, Stephen was appointed as a Fellow of the American Academy of Nursing in 2019.



**Professor Hilary Meredith**

Hilary is Chair of Hilary Meredith Solicitors Ltd., and having launched her own firm in 2003 her company is now a market leader in the field of personal injury and Public Affairs. Dealing with high profile cases with particular interest in claims on behalf of the UK armed services worldwide, Hilary has developed a reputation in Public Affairs and lobbying for the rights of the armed services personnel. In 2017, Hilary was awarded with the Freedom of the City of London.



**Lieutenant Colonel Debra Ritsperis**

Lieutenant Colonel Debra Ritsperis is a Nursing Officer in the Queen Alexandra's Royal Army Nursing Corps. Debra is currently employed in Army Nurse Education, Research and clinical Development Assurance, with 34 years' experience including 10 years General Nursing, 10 years Mental Health Nursing, 10 years Nurse Educator/Practice Development and 2 years as a Nurse Manager and Clinical Assurance Officer.



**Professor Robin Simpson QHS**

Until earlier this year, Brigadier (Ret'd) Robin Simpson QHS was Dean for the Defence Medical Services. He joined the Army in 1984, developed considerable experience of military General Practice having served all over the world including tours in Iraq and Afghanistan. He became a GP Trainer in 1990 and has been teaching GPS ever since. He is an MRCGP Examiner (since 1995) and is presently responsible for the training of all MRCGP Examiners. He is the Honorary Secretary for Midlands Faculty RCGP. Robin is particularly interested in making GPs more aware of veteran's health issues and co-authored the RCGP document entitled "Meeting the Healthcare Needs of Veterans". In February 2014 he successfully pushed RCGP council to support a motion calling "for more in support of military veterans in this 100th anniversary year of the Great War". Robin is now the RCGP Veterans Champion.



## Events, News & Information

### North West Coast Research and Innovation Awards 2020

The Westminster Centre for Research in Veterans were proud to attend the North West Coast Research and Innovation Awards ceremony on 28<sup>th</sup> February 2020 at the Park Royal Hotel in Warrington. We were nominated for the *The Ruth Young Award for Implementation*, for our project: *Finding the Forgotten: Motivating Military Veterans to Register with a Primary Healthcare Practice*. Unfortunately, we did not win on this occasion, but it was a pleasure to be there. There's always next year!



### Current Grants

#### Evaluation of the NHS Veterans High Intensity Service

AWAITING ANNOUNCEMENT

#### Armed Forces Covenant Fund Trust. Veteran Educational Sessions

The Armed Forces Covenant Fund Trust have awarded a grant to develop our armed forces community educational sessions for undergraduate nurses. We're looking forward to developing our new E Learning project, incorporating new video and emerging technologies. Read the background information to this project here:

<https://www.sciencedirect.com/science/article/pii/S1471595319305785>

**ARMED FORCES  
COVENANT  
FUND TRUST**

#### Educating nurses to deliver optimum care to military veterans and their families

Forces in Mind Trust has awarded us with a grant to conduct research to examine how an advertising campaign can motivate ex-Service personnel to register with Primary practices. Read more here: <https://www1.chester.ac.uk/news/forces-mind-trust-awards-grant-university-chester-help-motivate?list=8442>

**FiMT**  
forces in mind trust

Health Care

 **COMMUNITY  
FUND**

## Useful links

<https://www1.chester.ac.uk/westminster-centre-research-and-innovation-veterans-wellbeing>

<https://www.covenantfund.org.uk/>

## Publications (2020)

**McGhee, S., Finnegan, AP,** Angus, J, Lewis-Pierre, L. & Ortega, J, (2020). Cutaneous Leishmaniasis. A Guide for Emergency Department Nurses. *Emergency Nurse*. Mar 10;28(2):23-29. doi: 10.7748/en.2020.e1993. Epub 2020 Feb 4.

**Finnegan, AP., Di Lemma, L., Moorhouse, I.,** Lambe, R., Soutter, EM., Templeman, J., Ridgway, V., Hynes, C., **Simpson, R., & McGhee, S.** (2020). Educating Nurses to Deliver Optimum Care to Military Veterans and their Families. *Nurse Education in Practice*. <https://doi.org/10.1016/j.nepr.2019.102654>

**Finnegan, AP & Aitkenhead, S** (2020). A Research Portfolio: Transformational change by nursing, midwifery and care staff across health and care. *Journal of Advanced Nursing*. 76, 7,8 doi: 10.1111/jan.14228.

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