

Citizen Participation and Public Petitions Committee
Wednesday 12 June 2024
11th Meeting, 2024 (Session 6)

PE2032: Improve the support available to injured soldiers and veterans in Scotland

Introduction

Petitioner James Brebner

Petition summary Calling on the Scottish Parliament to urge the Scottish Government to improve the support provided by public bodies to injured soldiers and veterans in Scotland by:

- ensuring there are clear patient pathways for their injuries to be treated by appropriate consultants;
- establishing a veterans trauma network, similar to that which operates in England and Wales;
- ensuring all correspondence, raising concerns or making complaints about their treatment, from veterans to the Scottish Government, is acknowledged and responded to; and
- reviewing and seeking to update the way in which the Scottish Public Services Ombudsman handles complaints from veterans about health service.

Webpage <https://petitions.parliament.scot/petitions/PE2032>

1. [The Committee last considered this petition at its meeting on 4 October 2023.](#) At that meeting, the Committee agreed to write to the Scottish Government, the Scottish Parliament Cross-Party Group on Armed Forces and Veterans Community, the Armed Forces Personnel and Veterans Joint Group, Veterans Scotland, the Armed Forces Charity SSAFA, and the Scottish Public Services Ombudsman.
2. The petition summary is included in **Annexe A** and the Official Report of the Committee's last consideration of this petition is at **Annexe B**.
3. The Committee has received new written submissions from the Cross-Party Group on Armed Forces and Veterans Community, the Armed Forces Personnel and Veterans Joint Group, the Scottish Public Services Ombudsman, and the Scottish Government, which are set out in **Annexe C**.
4. Members may wish to note that as Veterans Scotland provide secretariat support to the CPG on Armed Forces and Veterans Community they have not

provided a separate submission. The armed forces charity SSAFA declined to provide a formal response on this occasion.

5. [The Committee has received two written submissions prior to its last consideration of the petition.](#)
6. [Further background information about this petition can be found in the SPICe briefing](#) for this petition.
7. [The Scottish Government gave its initial position on this petition on 17 July 2023.](#)
8. Every petition collects signatures while it remains under consideration. At the time of writing, 70 signatures have been received on this petition.

Action

9. The Committee is invited to consider what action it wishes to take.

Clerks to the Committee
June 2024

Annexe A: Summary of petition

PE2032: Improve the support available to injured soldiers and veterans in Scotland

Petitioner

James Brebner

Date Lodged

20 June 2023

Petition summary

Calling on the Scottish Parliament to urge the Scottish Government to improve the support provided by public bodies to injured soldiers and veterans in Scotland by:

- ensuring there are clear patient pathways for their injuries to be treated by appropriate consultants;
- establishing a veterans trauma network, similar to that which operates in England and Wales;
- ensuring all correspondence, raising concerns or making complaints about their treatment, from veterans to the Scottish Government, is acknowledged and responded to; and
- reviewing and seeking to update the way in which the Scottish Public Services Ombudsman handles complaints from veterans about health service.

Previous action

I was advised by the UK Veterans Minister, Johnny Mercer MP, to get in touch with the Scottish Veterans Minister.

I have emailed and telephoned the Minister for Veterans, Graeme Dey MSP, but have yet to receive a full response.

Also written to the previous First Minister, who responded with a “thank you for your service”.

Background information

I was injured in the Falklands while serving with the Parachute Regiment. After returning to my trade, I started experiencing sharp pains in the injury to my lower leg. A neuroma was found and excised around June 1986, but months later I started experiencing pain in my lower leg travelling up to my thigh.

In 1992, the pain came back with a vengeance, and I experienced serious electric shocks from the ankle to below the knee. A scan showed I had a very minimum spondylolisthesis.

In 2019, I met with a private neuro-consultant and shared with him my research on a condition called saphenous neuritis, which he had not heard of. The consultant asked to keep my research papers which also contained photos of operations being carried out in America from early 1983, with the condition first described in the 1960s.

Annexe B: Extract from Official Report of last consideration of PE2032 on 4 October 2023

The Convener: PE2032 seeks to improve the support that is available to injured soldiers and veterans in Scotland and was lodged by James Brebner. It calls on the Scottish Parliament to urge the Scottish Government to improve the support that is provided by public bodies to injured soldiers and veterans in Scotland by ensuring that there are clear pathways for their injuries to be treated by appropriate consultants; establishing a veterans trauma network, similar to that which operates in England and Wales; ensuring all correspondence raising concerns or making complaints about their treatment from veterans to the Scottish Government is acknowledged and responded to; and reviewing and seeking to update the way in which the Scottish Public Services Ombudsman handles complaints from veterans about the health service.

Mr Brebner tells us that he was injured in the Falklands while serving with the Parachute Regiment, which has left him with severe leg pain.

In responding to the petition, the Scottish Government states that it is working with colleagues across the NHS and the veterans community to develop a Scottish veterans treatment pathway and that it has also been working with the Veterans Trauma Network in England to understand how a similar service might be applied in Scotland. The response also notes that all correspondence that is received by the Scottish Government is logged centrally, with the aim of providing a reply within 20 days of receipt, as well as highlighting the point that it would be a matter for the Scottish Public Services Ombudsman to comment on its own process and any potential review of how it handles complaints from veterans about the health service.

We have also received a submission from the petitioner commenting on the Scottish Government's response, highlighting his continued concerns about the delay in establishing a trauma network and sharing his experience of trying to navigate the processes.

We have a very interesting petition before us. Do members have any comments or suggestions for action?

Maurice Golden: We should write to Veterans Scotland, the Soldiers, Sailors, Airmen and Families Association—SSAFA, the armed forces charity—and the Scottish Public Services Ombudsman to seek their views on the action that is called for in the petition. It might be useful—I am relaxed about the point at which this should happen—to write to the convener of the cross-party group on the armed forces and veterans community to seek its network's views on support for injured soldiers and veterans in Scotland.

The Convener: Yes. I am happy to write to the cross-party group. We might also write to the armed forces personnel and veterans health joint group, which is a separate body, seeking similar information.

Maurice Golden: I should mention that I am the convener of the cross-party group on the armed forces and veterans community.

The Convener: Are you? You can write to yourself on that basis and save the clerks the trouble. [*Laughter.*] Nonetheless, we will probably put down something more formal by way of communication. The Government has set an ambition of 20 days for the time that it takes to reply to letters. To borrow Mr Neil's expression, there must be a metric that we can call on to see whether that is happening. We might ask the Scottish Government whether it is able to confirm the percentage of letters that were replied to within 20 days. Are we agreed on that basket of actions?

Members *indicated agreement.*

The Convener: I say thank you very much to Mr Brebner. We will take forward the objectives of the petition and, I hope, consider it again in early course when we have responses from those to whom we are writing.

Annexe C: Written submissions

Cross party Group on the Armed Forces and Veterans Community submission of 16 October 2023

PE2032/C: Improve the support available to injured soldiers and veterans in Scotland

It is vital that members of the armed forces and veterans are able to receive the support they are entitled to when dealing with service-related injuries. Where it is demonstrated that they are experiencing adverse treatment in either regard, we would support action to improve that position.

The first proposal in the petition calls for “ensuring there are clear patient pathways for their injuries to be treated by appropriate consultants”. We believe this is already being addressed by the Veterans Welfare Service (VWS) and the Defence Transition Service who have a responsibility to ensure individuals receive support when leaving the armed forces.

As such, we contacted the VWS to enquire about support for those leaving the services who have been identified as vulnerable. In response, the VWS affirmed that: ‘The Veterans Welfare Service, and Defence Transition Services, seek to ensure that those identified as vulnerable, including those pending medical discharge, are provided with support during and after the discharge process. This includes being connected with appropriate NHS Services for health conditions experienced during Service.’

Similarly, we note the second proposal to establish “a veterans trauma network, similar to that which operates in England and Wales” is also being addressed with the creation of a Scottish Veterans Treatment Pathway. It has been confirmed to us that “The Scottish Veterans Treatment Pathway (SVTP) will replicate closely the NHS England Veterans Trauma Network (now Op Restore) but within the different structure of NHS Scotland.” Included in the new Scottish system will be a Veteran In-Service Injury Review (VISIR) to assess the need for specialised clinical routes.

The SVTP has been in development for 18 months and has involved close cooperation with Op Restore Staff. Once ministerial approval is granted the service should be introduced in 2024.

Regarding the final two proposals, we would always encourage public bodies and officials to respond to correspondence in a timely manner and seek to fully resolve enquiries and complaints. We do not have sufficient data to assess whether armed forces personnel and veterans are specifically experiencing undue problems in this regard. However, where there are problems in response times of complaint handling for the public as a whole it seems reasonable to assume that includes armed forces personnel and veterans.

As such, we are not convinced armed forces personnel and veterans need to be treated as a specialised grouping for the purposes of either response times or complaint resolution. Rather, it might be more useful for public bodies to review their

response times and procedures to identify where general improvements can be made to benefit everyone, including armed forces personnel and veterans.

One potential exception where it might be useful to specifically group armed forces personnel and veterans might be regarding cases involving treatment of a service-related condition. Even so there is an expectation that the Veterans Welfare Service and the Defence Transition would provide support in such cases.

Armed Forces Personnel and Veterans Joint Group submission of 30 October 2023

PE2032/D: Improve the support available to injured soldiers and veterans in Scotland

I refer you to your email of 6 October asking for the views of the Armed Forces Personnel and Veterans Joint Group on the actions called for in Petition 2032. I am writing in my capacity as secretariat of the Armed Forces Personnel and Veterans Joint Group (known as 'the Joint Group') and I have addressed the request to provide information on the work being carried out to develop a Scottish Veterans Treatment pathway.

The priorities set by the Joint Group in May 2021 included, as is mentioned in the above petition, exploring setting up a Scottish Veterans Trauma Network.

A Working Group, bringing together representatives from Op Restore, NHS Armed Forces Champions and Veterans Charities has been established and is helping develop and drive this work forward. The Scottish Veterans Treatment Pathway (SVTP) is still in development. We anticipate that it will be delivered in 2024.

To meet the needs of veterans, an holistic approach to support is required and the Scottish Government are working with colleagues across the NHS and the veteran's community to help design and develop the SVTP.

Officials have engaged extensively with colleagues in NHS England to understand the principles of, and the approach taken by, Op Restore (previously named Veterans Trauma Network) and how this might be applied in Scotland.

The intention of the SVTP is to support any veteran presenting with a service-related physical injury, which remains a cause for concern despite treatment, either previous or current. The proposed pathway aims to supplement and support existing service provision, and provide a dedicated pathway to explore treatment options and enhanced co-ordination of care where required.

The proposed pathway will bring together a multi-disciplinary team (MDT) who understand the military context of such an injury, and will review the case and consider what might be required to support the veteran to live well.

The review will not guarantee further clinical treatment however, it may make a recommendation for such, as is the case with Op Restore. The review may also signpost the veteran to other sources of assistance such as appropriate Third Sector

organisations or mental health services to help them live well as a result of their injury.

An update on this priority, and the other work of the Joint Group has been included in the annual update to Parliament and to the Scottish Veterans Commissioner for her latest progress report. [SVC publishes annual progress report | News | Scottish Veterans Commissioner](#)

I hope this response is helpful both to the Committee and to the petitioner.

Scottish Public Services Ombudsman submission of 3 November 2023

PE2032/E: Improve the support available to injured soldiers and veterans in Scotland

About SPSO

1. The Scottish Public Services Ombudsman has a wide remit, covering a variety of functions and services. The Ombudsman's powers and duties come (predominantly) from the Scottish Public Services Ombudsman Act 2002, which gives her four distinct statutory functions:
 - 1.1. the final stage for complaints about most devolved public services in Scotland including councils, the health service, prisons, water and sewerage providers, Scottish Government, universities and colleges
 - 1.2. specific powers and responsibilities to publish complaints handling procedures, and monitor and support best practice in complaints handling
 - 1.3. independent review service for the Scottish Welfare Fund (SWF) with the power to overturn and substitute decisions made by councils on Community Care and Crisis Grant applications.
 - 1.4. Independent National Whistleblowing Officer for the NHS in Scotland (INWO) – from 1 April 2021 – final stage for complaints about how the NHS considers whistleblowing disclosures and the treatment of individuals concerned.

SPSO complaints

2. In 2022—23 the SPSO
 - received 3,527 complaints in total
 - of these 1,193 were about the NHS
 - of those that we investigated we upheld 63%
3. When we are considering health complaints, we can consider clinical judgement as well as any process and procedures followed and it is an area where, as a result, we can have significant impact.

4. While we monitor compliance with NHS Model Complaints Procedures (NHS MCHP), unlike other areas, the SPSO does not have primary authority for setting these. This is a function of the Scottish Government (SG) under the Patients Rights Act 2011. In 2016—17, we worked with SG to produce the first NHS MCHP; this brought the NHS procedure into line with other sectors and was intended to support integration and person-centred complaints handling.
5. Since then, the models which are fully within SPSO control have been updated to include a greater focus on accessibility, resolution and those experiencing vulnerability. While we recognise that the NHS MCHP is very much in need of updating, SG has been unable to commit resources to this work. Within the powers we have, SPSO recently issued guidance to help support NHS staff to make improvements as an interim measure. We also continue to share good practice, either through stakeholder engagement or through recommendations and feedback.
6. The petition asks for a review of the way SPSO responds to complaints from veterans about health services, but there is little detail, and we would welcome comments from the petitioner about any specific issues. SPSO do not require complainants to disclose their veteran status, and this means we would not be aware that a complaint came from a veteran, unless they had chosen to disclose this to us.
7. A search on our system indicates that we have had some complaints where it was disclosed that they were being made from or on behalf of veterans, but these were low in number. The complaints relate to different areas including health, housing or local authority services. However, the numbers are too low from which to draw conclusions or themes in any sector. We have also had some references to veteran status in applications for crisis and community care grants, but again, low numbers.
8. We note the views of the Scottish parliamentary cross-party group that there is unlikely to be a need for veteran-specific procedures and that the focus should be on general improvements. We support that approach as people-centred, rights-based approaches to complaints handling should be sufficiently adaptable to meet individual needs. This approach to keeping the procedure simple does not prevent us from taking into account in individual cases, specific and relevant material, such as the Armed Forces Covenant when assessing whether public bodies have appropriately responded to complaints or are providing services that take into account all their obligations.
9. The SPSO's guidance on vulnerability is one example of an area where we have been actively seeking to improve our service, and it has been updated recently and includes reference to leaving the armed forces as an example of individuals who may be experiencing vulnerability. We continue to work on our approach in this area, passing on what we learn through guidance. As a matter of course, we triage new complaints and will prioritise those where we recognise there is ongoing health treatment needs, a significant public interest or someone is experiencing vulnerability. This means that whether or not we know someone is a veteran, if the circumstances warranted it, we would allocate it to a complaints reviewer as a matter of priority.

10. We note that there is reference in the responses to the petition of the creation of specific pathways for veteran treatment and other improvements. GPs play a critical role in ensuring individuals access the right treatment for them, and in accessing secondary care (such as orthopaedic or mental health services). We would suggest that any improvements to that patient journey include guidance and support for GPs from NHS Boards, e.g., guidance, toolkits or awareness-raising.

Scottish Government submission of 28 February 2024

PE2032/F: Improve the support available to injured soldiers and veterans in Scotland

Thank you for your request dated 6 October 2023, in relation to correspondence replied to by Scottish Government Ministers and Cabinet Secretaries. Firstly, on behalf of the Scottish Government I would like to offer my sincere apologies for the delay in responding to this question. The request was misplaced due to administrative error. A new internal mailbox monitoring procedure for the relevant team has now been introduced, and I am confident this will prevent any similar error from happening again.

You asked:

“What proportion of correspondence sent to Cabinet Secretaries and Ministers is replied to within the 20-day target.”

Between January 1, 2023, and December 31, 2023, the Scottish Government responded to 30,355 items classified as Ministerial Correspondence. Of these responses, 22,877 (75.3%) were responded to within the 20 working days.

The Scottish Government is working to increase the proportion of correspondence we respond to within 20 working days. We have recently launched an end-to-end review of correspondence processes to support work to improve our response within deadline rate for Ministerial correspondence.

Improving Public Engagement Division