

# Independent Review of the Implementation of the Jesse Bird Joint Inquiry Recommendations

## Terms of Reference

### CONTEXT

Jesse Bird was a former member of the Australian Army who ended his life at age 32 on 27 June 2017. Jesse Bird had served in the Australian Army from 2007 to 2012, including a nine month deployment to Afghanistan. At the time of his death he was seeking financial support from the Department of Veterans' Affairs (DVA) for service-related medical conditions.

On 21 July 2017, DVA, the Department of Defence, and the Veterans and Veterans Families Counselling Service (VVCS) commenced a Joint Inquiry into the facts surrounding the management of Jesse Bird's case ('the Joint Inquiry'). The Joint Inquiry was requested by the Hon Dan Tehan MP, then Minister for Veterans' Affairs.

The Joint Inquiry made nineteen recommendations, with a focus on the improvement of services for veterans seeking compensation and support ([Attachment 1](#)).

On 24 October 2017, the Hon Dan Tehan MP tabled the recommendations in Parliament and advised that he had accepted all of them on behalf of government, with a commitment to independently review the implementation of the recommendations after 12 months.

### SCOPE

The scope of this Review is an independent assessment of the implementation of the nineteen recommendations made by the Joint Inquiry.

The recommendations are grouped into nine priority recommendations, seven recommendations for DVA to continue as part of its Veteran Centric Reform program, and three recommendations for consideration by Government. The recommendations cover a wide variety of areas including: policy and operational changes, staff training and education, IT and systems improvements, and communications.

The specific tasks of the Review are to:

1. ensure each of the recommendations has been, or is being, actioned in a timely manner;
2. ensure that the actions being undertaken for each recommendation are appropriate;
3. evaluate the progress of the implementation of the recommendations; and
4. prepare a report to Government on the findings of the Review.

### APPROACH

An independent expert reviewer will be appointed to conduct the Independent Review. The reviewer will be supported by relevant Defence and DVA officers, with all costs met by DVA.

### OUTCOME

The report of the Independent Review will be submitted to Government by January 2019.

## Attachment 1: Joint Inquiry into the facts surrounding the management of Jesse Bird's case – Recommendations

No.	Recommendation
<b>Priority Recommendations</b>	
1.	The Secretary to examine the areas of potential non-compliance with current legislation and policy to provide the Minister advice regarding any redress action/s.
2.	Provide delegates with a clear statement of the policy and processes when considering an interim payment of compensation for permanent impairment to ensure that interim compensation payments are being provided in all cases where appropriate.
3.	Put in place controls to ensure process of registration of claims is consistently followed when needs assessment is received and not delayed by other information that is not yet provided.
4.	Enhance reporting and risk factor escalation between VVCS and DVA through an offering to clients that includes an 'opt-out' model of information sharing, so that all support services are integrated for clients with diagnosed mental health issues.
5.	Put in place controls to ensure that complex case management is initiated for complex or high risk clients.
6.	Revise Service Level Agreement Key Performance Indicators for information sharing with partner agencies (such as Defence and the CSC), including timeframes for DVA to request information as soon as possible after claim registration and timeframes for partner agencies to respond.
7.	Review existing Service Coordination processes that provide coordinated, tailored and empathetic response to families, for relevancy in the case of the death of non-serving clients.
8.	Educate staff and monitor implementation of the inquiry recommendations above.
9.	Identify indicators for veterans at risk to develop best practice case management models.

<b>Recommendations for DVA to continue as part of Veteran Centric Reform program</b>	
<b>10.</b>	Continue to pilot an integrated and holistic case management approach, including a whole-of-person view, a holistic care model for veterans, and an increased focus on transition support and vocational assistance. Subject to the evaluation of this trial this will require further consideration by Government.
<b>11.</b>	Implement better systems and processes to identify and alert staff in order to support high risk and vulnerable veterans.
<b>12.</b>	Put in place wellness checks for uncontactable clients with mental health conditions and trigger additional support mechanisms for clients with mental health conditions who repeatedly submit incomplete documentation or exceed expected response timeframes.
<b>13.</b>	Implement action to ensure letters and emails are accurate, easy to understand and appropriate in tone.
<b>14.</b>	Implement action to ensure liability and compensation rejection or claim denial correspondence occurs only after a DVA staff member phones to discuss the outcome with a client.
<b>15.</b>	Expand scope of reviewed circumstances to include services sought through other Government agencies and community services.
<b>16.</b>	Introduce a case-response team with specified resources across public affairs, legal, strategic communications, executive and divisions to create a DVA response to emerging issues and messaging that is respectful and supportive in tone.
<b>Recommendations for consideration by Government</b>	
<b>17.</b>	The provision of more timely compensation payment by using a current assessment of the service-related level of permanent impairment, instead of delaying compensation payments until the service-related level of permanent impairment has stabilised.
<b>18.</b>	The provision of more timely incapacity compensation payments for those former members of the ADF incapacitated for service or work by mental health conditions, without the need for a determination that those mental health conditions are related to service.
<b>19.</b>	Funding for a trial of an independent legal advocacy service to assist veterans with claim preparation and lodgements to enable long-term improvement in the quality of claims and ensure that veterans receive their entitlements with minimum administrative burden.