



Australian Government
Department of Veterans' Affairs

Senate Inquiry into Suicide by Veterans and Ex-service Personnel (2017) Recommendations
Progress of Implementation as at 31 January 2020

No	Recommendation	Actions in response to the recommendation
1	<p>The committee recommends, that in the context of recent Australian Institute of Health and Welfare findings concerning veterans at risk of suicide, the Australian Government:</p> <ul style="list-style-type: none">• develop and implement specific suicide prevention programs targeted at those veterans identified in at risk groups; and• expand the DVA Reconnects Project to proactively contact veterans in these identified in at risk groups.	<p>This recommendation is substantially complete.</p> <p><u>Suicide prevention programs</u></p> <p>Funding of \$9.8 million for two suicide prevention pilots was announced in the 2017-18 Budget.</p> <p>The Mental Health Clinical Management Pilot, known as the Veterans Suicide Prevention Pilot, is currently underway. This is a suicide prevention initiative to support vulnerable veterans discharging from hospital with complex mental and social health needs. <i>beyondblue</i> has been engaged as the service provider to deliver the Pilot. Service delivery commenced in July 2018 in metropolitan Brisbane across the private and public hospital sectors and the Pilot is due to be complete in June 2020. Phoenix Australia has been engaged to provide an independent evaluation of this Pilot.</p> <p>All veterans requiring mental health support, including those who are vulnerable or at-risk, can access Open Arms (formerly Veterans and Veterans Families Counselling Service), clinical support services, including the Community and Peer Program</p> <p>Community Engagement Teams have now been established in 13 Open Arms locations. Community and Peer Advisors (Peers) utilise their lived experience of ADF service, mental health challenges and recovery, to work with clinical staff, clients and external organisations.</p> <p>Peers work with fellow veterans and their families to promote recovery and hope, to destigmatise mental health issues, and to build help seeking behaviours for veterans and their families. The inaugural Community and Peer Program National Induction was held in Canberra on 25 – 29 November, 2019.</p> <p>The national rollout of the Community and Peer Program is currently underway, and will involve the employment and training of a total of 43 Community and Peer Advisors at 13 Open Arms locations by early 2020. Under Open Arms' refined Community Engagement Team model, each regional team will consist of a clinician, up to three veteran peers, and a dedicated family peer. All Community and Peer Advisors will</p>

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		<p>be utilised as professional Mental Health Peer Workers to augment regional clinical capability and promote recovery, hope, destigmatisation and help seeking behaviours, for veterans and their families.</p> <p>Five of the 43 Community and Peer Advisors will also be employed in Open Arms National Operations to assist the National Community and Peer Advisor and manage specific portfolio project areas requiring national coordination and oversight. This will include specific project work on veteran suicide prevention and postvention, enhanced collaboration with community suicide prevention organisations and networks, and the development and refinement of nationally coordinated support strategies to assist families of at risk veterans and those affected by the suicide of a veteran family member.</p> <p><u>Research</u></p> <p>DVA commissioned Phoenix Australia to conduct a Rapid Evidence Assessment (REA) in relation to suicide programs and interventions.</p> <p>This narrative review on suicide prevention mapped and described in general the types of suicide prevention strategies and/or interventions that can be employed. This included reference to a range of broad population level public health initiatives, through to targeted interventions for particular populations that are known to be at risk (for example, those who have made a suicide attempt).</p> <p>The REA was completed in April 2019.</p> <p><u>DVA Reconnects Project</u></p> <p>The DVA Reconnects Project was for two specific cohorts: veterans and serving members of Afghanistan, and veterans who had made submissions to this Senate Inquiry. Proactive telephone calls were made to ensure that the veterans concerned had access to their full entitlements.</p> <p>Since this project, there have been a number of developments which provide support for all veterans, not just a specific cohort. These include:</p> <ul style="list-style-type: none"> • The Open Arms Community Engagement Program providing peer support, discussed above; • Non-Liability Health Care (NLHC), discussed below; • Establishment of Veteran Support Officers to provide on-base support for serving and transitioning members; discussed at recommendation 5; • White Card on transition; discussed at recommendations 5 and 16; • The Veteran Payment; discussed at recommendation 14; and

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		<ul style="list-style-type: none"> The Client Support Framework providing case management to assist veterans with identified complexity and vulnerability factors to access their full entitlements, discussed at recommendation 15. <p><u>Broader mental health initiatives</u></p> <p>Non-Liability Health Care (NLHC) for all mental health conditions is available to current and former full time members of the Australian Defence Force, including reservists with continuous full-time service. The 2018-19 Budget provided funding for reservists with border protection service, disaster relief service or who have been involved in a serious training accident to also access NLHC for any mental health condition, from 1 July 2018.</p> <p>The Coordinated Veterans' Care (CVC) Mental Health Pilot will expand on the broader CVC program to test a new model of care for veterans with mild to moderate anxiety or depression. The Pilot uses a team-based model of care led by a general practitioner (GP) and supported by a practice nurse whilst the veteran accesses a six to eight week app-based intervention, to provide improved clinical management with planning and care coordination.</p> <p>The Pilot was trialled in multiple Primary Health Networks across Australia, with the trial period ceasing in December 2019. It is being independently evaluated by the University of South Australia.</p> <p>A model for identifying risk and vulnerability factors has been developed and continues to be refined. The model will be incorporated into a new risk assessment tool currently in development for use across the Client Coordination and Support Branch, and potentially across the Department, to assist in timeliness and consistency in assessing client risk, and to inform appropriate next steps for support. This will be implemented in late 2019.</p> <p>This model will also be built into DVA's new Case Management ICT system, to support holistic client management for clients and their families being managed within, or assessed for entry into, Triage and Connect and Coordinated Case Support programs.</p>
2	The committee recommends that the Australian Government commission an independent study into the mental health impacts of compensation claim assessment processes on veterans engaging with the Department of Veterans' Affairs and the Commonwealth Superannuation	<p>This recommendation has been completed.</p> <p>In May 2018 DVA commissioned Phoenix Australia to conduct a literature review and desktop study on a range of public and DVA material regarding the mental health impacts of compensation claims assessment processes on claimants and their families. This review provided an evidentiary base for the subsequent</p>

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	Corporation. The results of this research should be utilised to improve compensation claim processes.	<p><u><i>Independent study into the mental health impacts of compensation claim assessment processes.</i></u> DVA engaged leading academic, Professor Alex Collie of Monash University, to undertake the study.</p> <p>Professor Collie identified a number of possible improvements to mitigate the potential impact on mental health from assessment processes. These areas for action are broadly consistent with work already in progress under Veteran Centric Reform to improve how we support veterans and their families.</p>
3	The committee recommends that the Australian Government establish a National Veteran Suicide Register to be maintained by the Australian Institute of Health and Welfare (AIHW).	<p>This recommendation has been completed.</p> <p>National suicide monitoring of serving and ex-serving Australian Defence Force personnel is now annually updated by the Australian Institute of Health and Welfare (AIHW). Defence and DVA assist with the collection of data.</p> <p>The AIHW released the <u><i>2019 update</i></u> on 29 November 2019. The web report includes deaths from 1 January 2001 to 31 December 2017, and updates the total count of suicide deaths, the comparison rate to the Australian population and trend analysis for ex-serving men aged 18-29 years. For the first time, the report also provides data on suicide deaths of ex-serving women.</p>
4	<p>The committee recommends that the Australian Government review the enhancement of veteran-specific online training programs intended for mental health professionals. In particular:</p> <ul style="list-style-type: none"> • requirements for providers to undertake training; and • the introduction of incentives for undertaking online training and demonstrating outcomes in clinical practice. 	<p>This recommendation has been completed.</p> <p>An external consultancy was engaged to undertake the <u><i>Review of DVA Online Professional Development Requirements and Incentives</i></u>. This included a review of DVA's veteran-specific online provider training programs, in particular the requirements and incentives to undertake online training. The review was completed in December 2018.</p> <p>Staff working on the Coordinated Client Support and Triage and Connect programs have been provided with Trauma Informed Care training. This training builds staff skills to safely talk about trauma, introduces simple strategies staff can teach clients to help manage their distress, as well as how they can foster independence and recovery, and encourage connection with others.</p> <p>Further to this, the Client Coordination and Support Branch is coordinating a trial of the University of South Australia's Care – Collaborate – Connect <i>Psychological First Aid</i> training program to increase knowledge, skills and confidence of staff to identify, understand and assist veterans with coping problems; and enhance staff coping skills and coping self-efficacy. Approximately 300 Client Engagement and Support Services Division staff have been invited to participate in the program.</p>

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		<p>It was announced in the Budget 2019-20, as part of the Supporting Veterans measure, that an additional \$4 million across the next four years will be provided to Open Arms to partner with the RSL to deliver mental health training nationally.</p> <p>It is expected that up to 7,000 volunteers across Australia will have access to the mental health training to enhance their capability to recognise veterans 'at risk' and provide intervention and support.</p> <p>Open Arms will coordinate and conduct the program. It is proposed that RSL will promote the training plus identify and assist with the coordination of participants for the program.</p> <p>This is an important partnership, with the RSL being able to take the lead on promoting the training and identifying the members of the veteran community to be trained.</p>
5	<p>The committee recommends that the Department of Defence and the Department of Veterans' Affairs align arrangements for the provision of professional mental health care.</p>	<p>This recommendation is substantially complete.</p> <p>The Department implemented the White Card on Transition Project in mid-2018. This ensures that a DVA Health Card – Specific Conditions (White Card) is issued to all separating members with at least one day of continuous full time service, to enable them to more easily access treatment for any mental health condition. DVA is now aware of all service personnel enlisting, as well as those transitioning out of service, allowing for the issue of White Cards to all transitioning members.</p> <p>DVA was part of a Defence-led pilot trialling the Transition Health Assessment (THA) process, which commenced in October 2017. This pilot sought to streamline the health aspects of transition from service, and to provide Australian Defence Force (ADF) members with certainty about their entitlements. Evaluation of the pilot was completed in October 2018. Overall, the pilot was positively received and improved the processing of Commonwealth Superannuation Corporation (CSC) invalidity claims. However, opportunities for process improvements were identified. Based on the findings of the Single Medical Assessment Process pilot, Defence is developing a 'Health Aspects of Transition' policy. Defence is working closely with DVA and the CSC to ensure the policy achieves early acceptance of initial liability, and provides a streamlined approach and greater security for transitioning ADF members. This pilot tested collaboration between DVA, Defence and the CSC to ensure members including those suffering from mental health conditions have certainty in relation to the care that they will receive once they separate from the military. Additionally, this process ensures they are informed as to the benefits that they will receive after they have separated</p> <p>The Special Operations Forces Pilot was conducted at Holsworthy Barracks between January and July 2019 to support members through the transition process, noting the increased complexity of claims for this</p>

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		<p>veteran group. The Pilot tested a client-focused, tailored model that aimed to provide a seamless, end-to-end experience for ADF members and their families when they transitioned out of the ADF. Lessons from the pilot have been incorporated into a new support framework for ADF personnel that has resulted in DVA's on-base services transforming. Veteran Support Officers (VSO) have commenced engagement with ADF members to provide a nationally consistent service that aligns with Defence people needs. VSOs will be embedded within major Defence locations, and visit smaller ADF units on a routine basis to provide quality advice to ADF members to reflect DVA's shared duty of care. This service commenced on 1 July 2019 and is being progressively rolled out across ADF locations in collaboration with Defence. DVA will be encouraging ADF members to form a relationship with DVA from enlistment, and seeking to improve data sharing capabilities to enable proactive support throughout an ADF member's career.</p> <p>As part of the Government's focus on ensuring continuity of care from defence to civilian life, DVA and Defence have also better aligned health care purchasing models through implementing the Next Generation Health Service Project. This Project incorporates the procurement of the next ADF Health Services supply arrangements and the next Service Level Agreement between single-Services and Joint Health Command (JHC).</p> <p>DVA has introduced an Annual Veteran Health Check, available each year for 5 years after leaving the ADF, for all ex-serving ADF members who have completed at least one day full time service and transitioned from 1 July 2019. The aim is to encourage early intervention to promote better health outcomes for veterans during their transition to civilian life.</p> <p>ADF Members and their families are also eligible to access Open Arms through self-referral, or by referral by their treating Defence mental health practitioner. In addition, Defence has implemented procedures to improve handover to community General Practitioners (GPs), civilian mental health care providers and DVA rehabilitation providers (for those undergoing a formal rehabilitation program when leaving Defence). Members transitioning in the same location can continue to receive support through their existing external mental health providers post discharge. Members transitioning to different regions have care transferred to appropriate providers in their new location, through the handover process.</p> <p>To further facilitate this handover, JHC, in consultation with DVA, is developing an initiative titled 'GP Connect' through which Defence will support members to make a GP appointment to enable their continued health and wellbeing post transition. This referral will encourage the member and their GP to engage with DVA's Annual Veteran Health Check. Defence has initiated a process to target those members</p>

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		<p>medically separating with a paid GP appointment within 28 days of their separation. These arrangements will be formally rolled into the planning and implementation of the GP Connect initiative.</p> <p>JHC has an increased focus on Family Sensitive Practice to assist in supporting better engagement of families in the treatment and recovery of serving members, and greater awareness of the impact on families. Open Arms and Defence Community Organisation are engaged with Garrison Health Services as possible referral points to offer family support and counselling when required. This training has commenced for JHC health care providers.</p>
6	<p>The committee recommends that the Australian Government make a reference to the Productivity Commission to simplify the legislative framework of compensation and rehabilitation for service members and veterans. In particular, this review should examine the utilisation of Statements of Principle in the determination of compensation claims. The report of this systemic review should be completed within 18 months and tabled in the Parliament.</p>	<p>This recommendation has been completed.</p> <p>The Productivity Commission's (PC's) final report of its inquiry into compensation and rehabilitation for veterans, <i>A Better Way to Support Veterans</i>, was submitted to Government on 27 June 2019. The report was tabled in Parliament on 4 July 2019. The report proposed fundamental reforms across structures, governance, legislation, policy, and service delivery. The PC proposed that the legislative framework be simplified with implementation of a 'two scheme' approach by 2025 (Recommendation 19.1). The PC examined utilisation of Statements of Principles and recommended harmonisation of the initial liability process across the three veteran support Acts and applying Statements of Principles to all claims (Recommendation 8.1), and moving to one standard of proof under the <i>Military Rehabilitation and Compensation Act 2004</i> (MRCA) (Recommendation 8.4).</p> <p>The Government is considering its response to the PC final report.</p>
7	<p>The committee recommends that the Australian Government continue to support the 'Veteran Centric Reform' program within the Department of Veterans' Affairs.</p>	<p>This recommendation is in progress.</p> <p>The VCR Program is changing the way DVA delivers services and support to veterans and their families. Combined DVA and Department of Human Services funding of \$166.6 million was provided in the 2017-2018 Budget to support commencement of the Veteran Centric Reform (VCR) Program for four years (Year One to Year Four). The Government committed a further \$111.9 million in the 2018-19 Budget over four years (Year Two to Year Five). The 2019-20 Federal Budget provided an additional investment of approximately \$222.8m over four years to continue the VCR Transformation Program (Year Three to Year Six).</p>
8	<p>The committee recommends that, while the Veteran Centric Reform program is being</p>	<p>This recommendation is in progress.</p> <p>The Department's web application MyService supports clients' ability to lodge a number of their claims online. MyService is now open to all current and former members of the Australian Defence Force,</p>

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	<p>implemented, the Australian Government continue to fund measures to:</p> <ul style="list-style-type: none"> • alleviate pressure on claims processing staff and to reduce the backlog of claims; and • increase case coordination staff to assist clients with complex needs 	<p>irrespective of when and where they served. As at the beginning of December 2019, there were more than 123,000 registered users on MyService and more than 76,000 claims had been submitted online through MyService.</p> <p>The Department has streamlined claims processing for 40 medical conditions, which now have a reduced or removed investigation process. Under these Decision Ready arrangements, some claims are being determined immediately on submission. By 19 September 2019, over 2,200 claims had been approved this way. Further research is being analysed to expand the coverage for conditions that can be streamlined or have an immediate decision made. Furthermore, in January 2019 MyService was expanded to allow incapacity payment claims to be lodged online. In May 2019, Veteran Recognition Package claims were added along with payment information, and Automatic and Manual Qualifying Service claims.</p> <p>The 2017-18 Budget provided funding of almost \$13.5 million to assist with claims processing and reducing the backlog. However, the promotion and streamlining of claiming processes has resulted in a significant increase in the number of compensation claims received in 2018-19 and in some instances this has led to an increase in the time taken to process.</p> <p>The timeliness targets for some compensation claims were met in 2018-19 including liability claims under the <i>Military Rehabilitation and Compensation Act 2004</i> (MRCA) and claims for permanent impairment and incapacity payments under the MRCA and the <i>Safety, Rehabilitation and Compensation (Defence-related Claims) Act 1988</i> (DRCA).</p> <p>Further to this a two-year, \$4 million case management pilot called the Wellbeing and Support Program has commenced to provide support to veterans with complex needs transitioning from the Australian Defence Force, and to former members who are experiencing crisis.</p> <p>This program involves a broader and more holistic support service, through the provision of a dedicated health professional to act as a single point-of-contact for coordinating the veteran's clinical care, and helping to facilitate access to DVA support services via a Coordinated Client Support (CCS) contact officer. Case managers are external to DVA and have specialised experience in supporting clients with complex needs.</p> <p>The pilot goal is to achieve greater coordination of veterans' treatment and supports, greater communication between treating practitioners, earlier identification and intervention of support needs, enhanced oversight of veteran's wellbeing, increased understanding of DVA claiming processes, and smoother access to eligible DVA and community support services.</p>

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		<p>The Program is anticipated to include up to 200 veterans. A dedicated case manager with a team of medical professionals support the veteran and their family for up to 24 months. As of November 2019, 130 veterans have been engaged in the pilot.</p> <p>Government has funded 10 additional Case Coordinators in the CCS program, who will be a combination of trained health clinicians and claims experts, to assist veterans through the claims process and facilitate access to the services they need.</p>
9	<p>The committee recommends that the Department of Veterans' Affairs conduct a review of its training program to ensure relevant staff:</p> <ul style="list-style-type: none"> • have an understanding of the realities of military service; • have an understanding of health issues of veterans; • have appropriate communication skills to engage with clients with mental health conditions; and • have sufficient training to interpret medical assessment and reports. 	<p>This recommendation is substantially complete.</p> <p><u>Staff training</u></p> <p>DVA has a strong focus on educating staff about Australian Defence Force service. DVA learning programs that focus on the realities of military service, the health issues of veterans and communication skills include:</p> <ul style="list-style-type: none"> • It's Why We're Here: the one and a half day national client service training program covers building client-focused relationships and improving communication and cooperation across DVA. Contemporary veterans or former serving members form a panel and speak to participants to help build understanding of the implications of military service for people's lives. • Serve – Client Service Induction: for all new starters to learn about the evolution of the DVA portfolio, the different client cohorts, the changed attitudes to, and increasing importance of, mental health, the variety of services and products available to clients and also to practice some client service skills. • Managing Challenging Behaviours: an eight module e-learning course on the effects of military training and service on veterans' physical and mental health. • Managing Sensitive Conversations: a one day workshop that assists staff to effectively manage sensitive conversations, assessments and other communications with clients reporting allegations of sexual abuse; and to self-support and provide emotional support to others. • Better understanding the implications of physical and sexual abuse in the military: a one day workshop on understanding sexual and physical abuse (including the impact of burnout and vicarious trauma), and what is known about the cycle of abuse.

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		<p><u>Independent review</u></p> <p>An external consultant has conducted a review into DVA's client service training programs in order to improve the quality of its client services. The review found that core DVA client service programs are of a high quality but DVA could consider adopting a more programmed approach and better linkages to related processes such as mentoring, coaching and performance management.</p> <p>The recommendations were clustered into four themes:</p> <ul style="list-style-type: none"> • Recommendation 1: Align DVA Learning & Development programs with the DVA career lifecycle • Recommendation 2: Develop a robust induction program for 'Service Delivery' staff • Recommendation 3: Foster learning transfer and behaviour change • Recommendation 4: Use a data informed approach <p>A number of recommendations have already been implemented. In March 2019, additional sessions of <i>Serve – Client Service Induction</i> were delivered and learning objectives were included in all training material and promotion. In June 2019 a Service Delivery Capability Framework was approved and included in the Workforce Strategy, and clearer links were made to other existing information relating to client service. In August 2019, six client scenarios were created for use in training.</p> <p>In May 2019, the Client Services Staff & Delegate Support Steering Committee agreed to the establishment of an Executive Level 1 position to implement the longer term recommendations. These recommendations relate to the development of a Learning and Development infrastructure for all client service roles.</p>
10	<p>The committee recommends that the Department of Veterans' Affairs review its use of medico-legal firms in relation to the assessment of the conditions of veterans. In particular, this review should confirm:</p> <ul style="list-style-type: none"> • assessments undertaken are appropriate to the conditions considered; • that the medical professionals used have undertaken training on treating veterans and can demonstrate their 	<p>This recommendation has been completed.</p> <p>As part of the DVA Transformation Program, an internal review of the issues associated with the collection of medical evidence was undertaken and completed in November 2018.</p> <p>DVA implemented a number of initiatives responding to the review recommendations including:</p> <ul style="list-style-type: none"> • Combined Benefits Processing of Initial Liability and Permanent Impairment claims under the <i>Military Rehabilitation and Compensation Act 2004</i>. This consolidates the use of available medical evidence. • The procurement of medico-legal reports through an approach to market. New arrangements expected to be implemented in 2020 will require providers to undertake training related to treating veterans.

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	<p>expertise working amongst this client group; and</p> <ul style="list-style-type: none"> the need for independent medical assessments where information is already available from the veteran's own doctor or treating specialist. 	<ul style="list-style-type: none"> Strengthening the existing process for gathering medical evidence by introducing a senior officer approval prior to the engagement of a medico-legal provider. The process is to ascertain first if the medical evidence on file, in the veteran's service medical records or submitted with the claim form is sufficient to determine the claim. If not, medical evidence is sought from Defence, the veteran, the veterans' treating GP or specialist. In some circumstances, DVA may need to approach a medico-legal provider for a report. For example: <ul style="list-style-type: none"> The veteran does not have a treating doctor or where there is insufficient or conflicting information; The treating doctor cannot provide the required evidence or cannot provide it in a timely manner. <p>DVA will always attempt to obtain evidence from a veteran's treating doctor in the first instance.</p>
11	<p>The committee recommends the Department of Veterans' Affairs expand its online engagement with younger veterans through social media to raise awareness regarding available support services.</p>	<p>This recommendation is substantially complete.</p> <p>DVA engages with the serving and ex-service community via Facebook regularly, on a broad range of issues. DVA's social media presence enables the sharing of information with the wider veteran community, and the opportunity to respond to questions and comments raised by individuals.</p> <p>Key actions and activities undertaken by DVA and other agencies include:</p> <ul style="list-style-type: none"> increased online engagement through social media to connect with younger veterans and promote available services to them. The numbers of Facebook followers in the past months has increased more than 8 per cent. established a Twitter feed for the Repatriation Commissioner in August 2019. The Repatriation Commissioner has many current and contemporary connections with younger veterans. established two ongoing series to raise awareness on DVA's support services. #VeteranFact has reached more than 120,000 people and #TipThursday has reached more than 40,000 people. in 2020 DVA will introduce podcasts to further raise awareness of support services and to promote a mixture of departmental news and the veteran community engagement work of DVA, Secretary, and Commissioner.
12	<p>The committee recommends that the reference to the Productivity Commission should also</p>	<p>This recommendation has been completed.</p>

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	<p>include examination of the following areas in the Veterans' Affairs portfolio:</p> <ul style="list-style-type: none"> • governance arrangements; • administrative processes; and • service delivery. 	<p>The Productivity Commission's (PC's) final report of its inquiry into compensation and rehabilitation for veterans, <i>A Better Way to Support Veterans</i>, was submitted to Government on 27 June 2019. The report was tabled in Parliament on 4 July 2019. The report proposed fundamental reforms across structures, governance, legislation, policy, and service delivery.</p> <p>The Government is considering its response to the PC report.</p>
13	<p>The committee recommends that the Australian National Audit Office (ANAO) commence the proposed performance audit of the 'Efficiency of veterans' service delivery by the Department of Veterans' Affairs' as soon as possible.</p>	<p>This recommendation has been completed.</p> <p>The ANAO performance audit's final report <i>The efficiency of veterans' service delivery by the Department of Veterans' Affairs</i> was tabled in Parliament on 27 June 2018. The report made six recommendations relating to the management, quality and timeliness of veterans' rehabilitation and compensation claims processes, all of which were accepted by the Government.</p> <p>At the end of October 2019, four recommendations have been closed, while work is continuing on the remaining two recommendations.</p>
14	<p>The committee recommends that the Transition Taskforce examine and address:</p> <ul style="list-style-type: none"> • any gaps in medical services or income support for veterans in transition or immediately following transition; • barriers to employment for veterans who are transitioning such as workers' insurance issues and civilian recognition of qualifications, skills and training; and • disincentives for veterans to undertake work or study resulting from the legislative or policy frameworks of the Department of Veterans' Affairs. 	<p>This recommendation has been completed.</p> <p><u>Transition Taskforce</u></p> <p>The Transition Taskforce identified a range of barriers to successful transition, including a member's level of control over the decision to leave military service, their awareness of, and access to, transition information and services, and unpreparedness to manage the differences between the military environment and civilian life, including loss of identity. Many of the issues the Taskforce examined were also identified as part of this Inquiry, including service gaps and difficulties in finding employment or undertaking study.</p> <p>The work of the Taskforce is complete and its report, <i>Improving the Transition Experience</i>, made number of recommendations. The Taskforce recommendations have informed transition improvements to transitioning Australian Defence Force (ADF) members and their families.</p> <p><u>Other Reports</u></p> <p>The Joint Standing Committee on Foreign Affairs, Defence and Trade (JSCFADT) undertook an inquiry into <i>Transition From the Australian Defence Force</i> from 30 May 2018 to December 2018. The JSCFADT Transition Inquiry report made 11 recommendations and 32 sub-recommendations to further improve support for veterans transitioning from the military to civilian life, along with their families. Further to this,</p>

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		<p>there are concurrent reports which also relate to transition from the ADF, namely the Productivity Commission's (PC's) Inquiry Report, A Better Way to Support Veterans, and the Veterans' Advocacy and Support Services Scoping Study (VASSS).</p> <p>The PC's final report of its inquiry into compensation and rehabilitation for veterans, A Better Way to Support Veterans, was submitted to Government on 27 June 2019. The report was tabled in Parliament on 4 July 2019. The report proposed fundamental reform to the veteran support system, including changes in the support arrangements for transition to civilian life after military service (Recommendations 7.1 to 7.3 inclusive). The PC report also recommended legislative changes to reduce disincentives to wellness for future veterans (for example Recommendation 14.7).</p> <p>In response to this Inquiry, Mr Robert Cornall AO was commissioned to undertake the VASSS Study, which was delivered to Government in late 2018. The Study was publicly released on 13 March 2019.</p> <p>The Government response to the JSCFADT Inquiry Report into <i>Transition from the Australian Defence Force</i> will be considered alongside responses to the VASSS Study and the PC report.</p> <p><u>Income support</u></p> <p>The Veteran Payment commenced from 1 May 2018. The Veteran Payment is available to eligible veterans during the process of making claims related to mental health conditions. This means-tested payment provides an income to veterans and their partners to alleviate financial pressure whilst awaiting claims outcomes. It is available to eligible veterans and dependants with entitlement under the <i>Military Rehabilitation and Compensation Act 2004</i> (MRCA), and will continue up to six weeks after a decision is made in relation to a liability claim.</p> <p><u>Further supporting veterans in their transition</u></p> <p>The 2018-19 Budget included measures to:</p> <ul style="list-style-type: none"> • extend Non-Liability Health Care (NLHC) for all mental health conditions to reservists who have provided disaster relief service, border protection service or who have been involved in a serious training accident, which commenced on 1 July 2018; • exempt veterans who are in full time study as part of their rehabilitation plan from the stepdown that occurs to incapacity payments after 45 weeks. The measure ensures that veterans are supported for the duration of their full time study program that is part of their rehabilitation plan and commenced on 1 November 2018;

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		<ul style="list-style-type: none"> enhance the Prime Minister's Veterans Employment Program, which aims to increase employment opportunities for veterans by raising awareness of the unique skills and experience that veterans can bring to the civilian workplace. This included an investment of \$8.3 million over four years from 2018-19 to further develop, implement and promote the Program, and \$4.3 million to fund additional services such as skills translation and CV writing from 1 July 2020 through the <i>Support for Employment Program</i>. <p>The 2019-20 Budget also included a measure to further enhance the Prime Minister's Veterans' Employment Program. The Government committed \$16.2 million to the Enhanced Employment Support for Veterans – Grants Program, which will provide funding to assist not-for-profit organisations, including Soldier On, Team Rubicon and the RSL to deliver innovative veteran employment programs.</p>
15	<p>The committee recommends that the Department of Veterans' Affairs develop a two-track transition program for serving members leaving the ADF. Those identified as being in 'at risk' groups or requiring additional assistance due to their circumstances should be able to access intensive transition services. These intensive transition services should include additional support for:</p> <ul style="list-style-type: none"> claims case management; healthcare, mental health and wellbeing support; employment assistance programs; social connectedness programs; and health and wellbeing programs. 	<p>This recommendation is substantially complete.</p> <p>See responses to:</p> <ul style="list-style-type: none"> Recommendation 5, regarding the Special Operations Forces Pilot and the Annual Veteran Health Check; Recommendation 8, regarding the Wellbeing and Support Program; Recommendation 14, regarding the Veteran Payment and other 2018-19 Budget measures to assist transitioning Australian Defence Force (ADF) members. <p>DVA staff attend every Defence transition seminar nationwide and provide formal briefing, as well as one on one advice. ADF members are able to arrange follow-up interviews with staff to ensure all potential entitlements have been considered in their transition plan. Where necessary, DVA staff will liaise with other ADF representatives to resolve any issues prior to transition.</p> <p>The Productivity Commission's (PC's) final report of its inquiry into compensation and rehabilitation for veterans, <i>A Better Way to Support Veterans</i>, was submitted to Government on 27 June 2019. The report was tabled in Parliament on 4 July 2019. The report proposed fundamental reforms of the veteran support system, across structures, governance, legislation, policy, and service delivery.</p> <p>The Government is considering its response to the PC final report.</p> <p>The Client Support Framework, including the Triage and Connect function, has been implemented. This provides a single front door for all staff to escalate complex and high risk clients for assessment and tailored response to their needs.</p>

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		<p>Implementation of the Framework has been communicated to staff nationally by way of face-to-face training. This training has provided staff with an understanding of the expanded client risk indicators and how to identify these to prompt escalation of clients to Triage and Connect.</p> <p>Recruitment of additional staff with clinical qualifications in mental health and related conditions is ongoing. The employment of clinical support case managers across the Client Support Framework is assisting with the assessment and provision of support to veterans and families who are identified as complex or high risk. Introducing this capability into our existing Coordinated Client Support (CCS) teams augments the existing case coordination skills within these programs. Staff in these programs are located in most service delivery sites and provide an accessible point of referral and support for client escalations being managed by all client facing staff, regardless of their business function.</p> <p>Government has funded 10 additional Case Coordinators in the CCS program, who will be a combination of trained health clinicians and claims experts, to assist veterans through the claims process and facilitate access to the services they need.</p>
16	The committee recommends the Australian Government issue all ADF members transitioning into civilian life with a DVA White Card.	<p>This recommendation has been completed.</p> <p>As per the response to Recommendation 5, the Department issues a White Card to all separating members with at least one day of continuous full time service.</p> <p>In addition, the Australian Defence Veterans' Covenant is being implemented to make it easier to recognise and respect the contributions of all veterans. Legislation enabling the Covenant passed Parliament on 22 October 2019. The Covenant is supported by the Veterans' Recognition Program, which includes a redesign of existing DVA health cards, separate veteran and reservist lapel pins, and an oath to provide an additional commitment of respect to Australia's veterans.</p>
17	The committee recommends that the Career Transition Assistance Scheme include an option for veterans to undertake a period of work experience with an outside employer.	<p>This recommendation has been completed.</p> <p>Defence has a comprehensive employment package for permanent ADF members consisting of housing, medical, remuneration (including superannuation), and professional development opportunities that assist with our people providing military service, often in dangerous circumstances, for Australia. The employment package also supports families who are an important factor in enabling our members to undertake their unique roles.</p> <p>When ADF members transition from undertaking permanent military service to civilian life, this can be a significant life changing event and period of uncertainty for a member and their family. Defence recognises</p>

No	Recommendation	Actions in response to the recommendation
		<p>this and has a comprehensive program to support this period of transition. Transition services are offered to those members who have more than one day of permanent military service.</p> <p>Defence is committed to ensuring members have access to the right support, at the right time, especially those who are vulnerable or at risk. Members have access to primary and specialist mental health care, inpatient care (where required), and occupational rehabilitation. Members are assessed individually for their treatment needs.</p> <p>Transitioning Australian Defence Force (ADF) members can access up to 23 days of Approved Absence under the Defence Force Transition programs (formerly known as the Career Transition Assistance Scheme), dependent upon individual circumstances.</p>
18	<p>The committee recommends that the Australian Public Service Commission (APSC) conduct a review into mechanisms to further support veteran employment in the Australian Public Service and the public sector.</p>	<p>This recommendation has been completed.</p> <p>The Australian Public Service Commission is supporting veteran employment in the Australian Public Service (APS) with a toolkit for ADF Veterans. This toolkit includes:</p> <ul style="list-style-type: none"> • information for veterans seeking employment in the APS • a table that aligns ADF rank to the APS classification structure; and • a practical guide for veterans applying for jobs in the APS.
19	<p>The committee recommends that the Department of Veterans' Affairs review the support for partners of veterans to identify further avenues for assistance. This review should include services such as information and advice, counselling, peer support and options for family respite care to support partners of veterans.</p> <p>(Continued...)</p>	<p>This recommendation has been completed.</p> <p>The Productivity Commission's (PC's) final report of its inquiry into compensation and rehabilitation for veterans, A Better Way to Support Veterans, was submitted to Government on 27 June 2019. The report was tabled in Parliament on 4 July 2019. The report proposed fundamental reforms of the veteran support system, including an expanded family support package (Recommendation 19.2).</p> <p>The Government is considering its response to the PC final report.</p> <p>A literature review of support to families was also completed in 2017 and DVA has undertaken a stocktake of services available to veterans' families to inform ongoing development of family support measures.</p> <p>The Family Support Package, providing \$7.1 million over four years, was implemented on 1 May 2018. The measure provides additional support for veterans eligible under the <i>Military Rehabilitation and Compensation Act 2004</i> (MRCA) who have rendered warlike service and for the partners of MRCA veterans with warlike service who may have died while rendering such service, or whose death was a death by suicide and is related to their service.</p>

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		<p>In recognition of the critical support a family can provide, and the challenging family circumstances that may impact on a veteran's rehabilitation, veterans, and their nominated family members may access:</p> <ul style="list-style-type: none"> targeted childcare support, when needed to reduce barriers to participation in rehabilitation (capped limit each financial year); and practical life skills counselling for nominated family members. <p>In addition to this support, widowed partners may also access home help support, to assist with the functioning and maintenance of their primary residence. The PC report recommended an expansion to the measure with a view to access being based on need, rather than type of service a veteran had provided. DVA consulted participants of the DVA Female Veterans' and Veterans' Families Policy Forum in August 2019 on how support for families under this package may be maximised. DVA will use information from the PC report, the DVA Female Veterans' and Veterans' Families Policy Forum consultation, existing stakeholder feedback and an internal review of the first year of implementation of the Family Support Package to inform any future proposals of how to better support families.</p> <p>The 2019-20 Budget provided funding of \$6.2 million, to allow all recipients of the Partner Service Pension to maintain access for at least twelve months after separating from their veteran partner, regardless of their marital status. Where the veteran has a mental health condition recognised by DVA and there was an unsafe or abusive domestic environment to the partner or their family prior to separation, former partners will remain eligible to receive the Partner Service Pension until they enter a new relationship.</p> <p>The national rollout of the Open Arms Community and Peer Program includes a dedicated Family Community and Peer Advisor role. This Family Peer will utilise their lived experience to support families through challenges they may face during the transition process, especially those related to mental health issues. The Family Peers will also support widows, widowers and other family members of deceased veterans. Additionally, the Family Peers will provide assistance and support for the partners of current serving Australian Defence Force (ADF) members in concert with the Defence Community Organisation and other Defence family support organisations. A Family Liaison Officer position is being trialled in one location in order to provide a continuity of care to veterans and their families after leaving military service.</p> <p>Open Arms remains committed to consultation with key stakeholders, through forums such as the Veterans' Families Forum at the Invictus Games in 2018, and the annual DVA Female Veterans and Veterans' Families Policy Forum. Ongoing consultation to identify service gaps and how services may be further tailored to better support families of current serving and ex-serving ADF members is occurring and informing service delivery.</p>

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		<p>The <u>DVA Female Veterans and Veterans' Families Policy Forum</u> leverages the lived experiences of female veterans and veterans' families to inform future policy and service delivery options.</p> <p>The 2019 Forum was held in Canberra in August 2019, and was attended by 83 participants from the female veterans and veterans families' communities, almost double the number of attendees at the 2018 Forum. These women represented various different cohorts, including (but not limited to): current and former serving female veterans; mothers; partners; siblings; war widows; extended families; Aboriginal and Torres Strait Islander people; LGBTIQ+; and culturally and linguistically diverse people. Work is underway to progress the implementation of a number of ideas generated at the Forum.</p> <p>On 31 July 2019, the Minister for Veterans and Defence Personnel, the Hon Darren Chester MP, announced the membership of the Council for Women and Families United by Defence Service (the Council). The role of the Council is to provide informed advice directly to Government, drive coherent policy outcomes and advocate on behalf of women and families united by defence service. The Council is built on the foundations of contemporary lived experience, inclusivity, collaboration, compassion and respect. Members of the Council represent the broad cross-section of the veteran community and include partners, parents, widows, current and ex-serving members, reservists and chaplaincy. These members all bring an interest and passion for supporting veterans and their families.</p> <p>The Council held its inaugural meeting in August 2019 and agreed to focus on three key issues: family support, ADF spouse/partner employment, and female veterans. The Council will meet three times per year.</p> <p>The Minister's independent National Advisory Committee (NAC) on Open Arms met in June 2019. The two-day meeting was dedicated to Open Arms' future family focus, with discussions on individual experiences as a family member, the Open Arms Community and Peer Program, the current supports available and shaping future supports for families. The Committee's discussion focused on how to position family members and deserving recipients of support, not only as a carer of a veteran, but also as an individual.</p> <p>In July 2019, the Minister for Veterans and Defence Personnel endorsed amended Terms of Reference (ToR) for the Open Arms Regional Advisory Forums (formerly Regional Consultative Forums) as proposed by the NAC. The new ToR were developed to enhance the advice being provided to the Minister through the NAC, by engaging in productive local consultation that will include a focus on family issues. The ToR have been implemented and RAF meetings held nationally in October and November 2019 with discussion focusing on future family focus and wellbeing.</p>

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20	<p>The committee recommends:</p> <ul style="list-style-type: none"> the Australian Government expand the Veterans and Community Grants program to support the provision of alternative therapies to veterans with mental health conditions; and the Department of Veterans' Affairs consult with ex-service organisations and the veteran community regarding avenues to reform the Veterans and Community Grants program to support the provision of alternative therapies to veterans. 	<p>In the Australian Government response to the Committee's report, the Government <i>agreed in principle</i> to this recommendation:</p> <p><i>The Government agrees to examine funding options for the ex-service community to support alternative therapies and wellbeing activities through a strategic review of the Department of Veterans' Affairs grants programs. As part of this review, the Department of Veterans' Affairs will consult the ex-service community with expertise in this area and health professionals regarding avenues to support alternative therapies for veterans.</i></p> <p>This recommendation is substantially complete.</p> <p>In February 2019, DVA engaged an external consultant, Geoff Leeper Yarrabee Consulting, to provide an independent perspective on DVA's current grants operating model, and advise on possible enhancements to improve both the efficiency and effectiveness of the Department's grants programs. The review examined the extent to which DVA's grant guidelines support the provision of alternative therapies for veterans with mental health conditions.</p> <p>The Department has started implementing the report's early recommendations, including: moving some grant assessment processes back in-house, simplifying grant application forms and working on decreasing the number of grant funding rounds per year. The Department is currently considering the final report of the review.</p>
21	<p>The committee recommends the Australian Government fund a trial program that would provide assistance animals for veterans with Post Traumatic Stress Disorder (PTSD) stemming from their military service in order to gather research to support the eventual funding of animals for veterans with PTSD and/or other mental health conditions through the Department of Veterans' Affairs.</p>	<p>This recommendation has been completed.</p> <p>DVA is funding a \$1.9 million, four year Assistance Dog Research Trial being conducted by La Trobe University in partnership with the Centre for Service and Therapy Dogs Australia (CSTDA). The Trial began in mid-2018 and is expected to conclude in 2022. The trial aims to determine the effectiveness of psychiatric assistance dogs for veterans with posttraumatic stress disorder (PTSD). Evolution Research is undertaking an independent evaluation of the trial.</p> <p>Up to 20 veterans will take part in the Research Trial, with approximately 18 months for training and bonding before the dog is placed with a veteran on a permanent basis. DVA funding support covers all required resources, including the purchase, training, and ongoing maintenance costs for the dog as well as the data collection and evaluation. The trial has been limited to the geographical regions of Melbourne, Geelong and Bundoora.</p>

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		<p>Recruitment has been completed for cohort 1, in which six veterans joined the Trial. They are currently all progressing through their therapy dog training program with CSTDA. Cohort 2 recruitment closed on 25 September 2019 with six additional veterans in this cohort. The remaining eight places will form cohort 3. Thus far, seven veterans have been accepted into cohort 3 based on the CSTDA assessment and once their on-boarding process is completed, will begin the therapy dog training program.</p> <p>DVA recognises the emerging evidence supporting the use of assistance dogs as an adjunct to treatment and management of PTSD; for example, the outcome of the trial conducted by Veterans Affairs Canada announced in October 2018. In addition to the trial, DVA has engaged a panel of assistance dog providers to provide psychiatric assistance dogs to eligible veterans with PTSD. Providing assistance dogs will allow the Department to support those veterans in need while continuing the current research and evaluation with La Trobe University, which aims to develop evidence and understanding of the opportunity that assistance dogs can provide in supporting the treatment of PTSD for veterans. A limited tender was undertaken to gain access to assistance dogs for veterans in need as early as possible, and an open tender was released on 19 November 2019 to expand the panel of providers.</p>
22	<p>The committee recommends that the Australian Government provide funding to support the Veterans and Veterans Families Counselling Service:</p> <ul style="list-style-type: none"> • create and maintain a public database of services available to veterans; and • provide an information service to assist veterans and families connect and access appropriate services provided by ex-service organisations and others. 	<p>This recommendation has been completed.</p> <p>A 'Need Help Now' button appears on the right hand side of the home page of the DVA website. After clicking on the button, the user is taken to a Need help now? page with links to DVA general enquiries, Counselling services (24 hour assistance), Other DVA and Open Arms contact information and External Supports for at risk clients. The External Supports for At Risk Clients page provides various phone contacts and online links to services and supports, for veterans and families, such as counselling services, emergency and crisis support contacts and health support. This resource is also available internally, for use by DVA staff in referring vulnerable clients.</p> <p>The Open Arms Community Engagement Teams work with local communities to assist veterans and their families to access a range of services and supports, including DVA's web based information resources, and services provided by ex-service organisations and other community organisations. Through targeted engagement of key organisations, Open Arms is establishing strong links within the community to reduce barriers and ensure streamlined access to holistic care for veterans and their families. These teams will also assist rural and remote veterans to access appropriate mental health and community services in their local areas.</p> <p>Open Arms recently expanded the support to veterans and their families with the integration of the successful AT-Ease initiative. AT-Ease products include five websites, four mobile apps (The Right Mix, Op</p>

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		<p>Life, High Res and PTSD Coach), a suite of booklets, brochures and other resources that can support veterans and their families to live well. Veterans and their family members can now access health and wellbeing resources unique to the military experience in one location.</p> <p>The Open Arms website provides a link to the Defence Engage portal, a further resource which current, transitioning and former ADF members and veterans; their families, and those involved in their support, can use to locate support services. Engage simplifies the process of accessing support by providing information on not-for-profit services available from a range of service providers.</p>
23	<p>The committee recommends that the Australian Government establish a Bureau of Veterans' Advocates to represent veterans, commission legal representation where required, train advocates for veterans and be responsible for advocate insurance issues.</p>	<p>In the Australian Government response to the Committee's report, the Government <i>agreed in principle</i> to this recommendation:</p> <p><i>The Government supports veteran advocacy and agrees with the Committee that the current advocacy system needs further review. The Government will provide \$1.7 million over two years to undertake a scoping study on the possible operational models for professionalising veterans' advocacy services. The Government agrees to consider the Committee's recommendation for a Bureau of Veterans' Advocates alongside other advocacy models, including those put forward by ex-service organisations through this scoping study, and will consult the veteran community about future directions in veteran advocacy.</i></p> <p>This recommendation has been completed.</p> <p>In response to this Inquiry, \$1.7 million was committed to undertake a scoping study on veterans' advocacy and support services. Mr Robert Cornall AO was commissioned to undertake the study, and delivered his report to Government in late 2018. It was publically released on 13 March 2019.</p> <p>The Veterans' Advocacy and Support Services Scoping (VASSS) Study found that the current model with its reliance on volunteers is unsustainable and made 12 recommendations, including the establishment of two independent bodies, the first to manage training of advocates and the second to deliver advocacy services. Some of the Study's recommendations were subsequently considered by the Productivity Commission (PC) in its report A Better Way to Support Veterans.</p> <p>The PC submitted its report to Government on 27 June 2019. The report was tabled in Parliament on 4 July 2019. The report proposed fundamental reforms of the veteran support system, including proposals for changes in advocacy and wellbeing supports (Recommendations 12.1 to 12.7 inclusive). The Government is considering its response to the PC final report.</p>

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		Recommendations of the VASSS Study will be considered by the Government alongside those of the PC report and the related Joint Senate Committee on Foreign Affairs, Defence and Trade's Inquiry Report into <i>Transition from the Australian Defence Force</i> .
24	The committee recommends that the Australian Government establish an independent review of the representation of veterans before the Veterans' Review Board (VRB). This review should assess whether the rights of vulnerable veterans are being adequately protected and whether further support mechanisms for veterans appearing before the Veterans' Review Board are required.	<p>This recommendation has been completed.</p> <p>The <i>Veterans' Advocacy and Support Services Scoping</i> (VASSS) Study report was publicly released on 13 March 2019. The VASSS Study considered the representation of veterans before the Veterans' Review Board (VRB) and recommended that the prohibition of lawyers be maintained. This recommendation was supported in principle by the Productivity Commission in its report <i>A Better Way to Support Veterans</i>, which also made other recommendations on the role and operation of the VRB (Chapter 12 of the report).</p> <p>Recommendations of the VASSS Study will be considered by the Government alongside those of the PC report and the related Joint Senate Committee on Foreign Affairs, Defence and Trade's Inquiry Report into <i>Transition from the Australian Defence Force</i>.</p>