# **Question 1**

**Outcome: All Program: All Topic: Capability Review** (FADT Hansard Proof 25 February 2015, p 109-110.)

### Senator GALLACHER asked:

**Ms Dotta:** Regarding the capability review, we have since tabled reports to the APSC on the actions that we have taken. There have been a range of actions against each of the findings. In particular, some of the earlier actions we have taken are to update our governance arrangements. That was one of the very early actions that we took. We have also updated our strategic plan, DVA towards 2020. We have undertaken some other reviews. I am able to provide more information as a question on notice.

**Senator GALLACHER:** Can you give us an example of what you did in governance? **Mr Lewis:** We have restructured our top-level governance structures across the whole department. It is not one committee. It is a suite of new committees, and a number of former committees have now been abolished. We have streamlined some arrangements. We have probably left more in the accountability of relevant line managers. We can provide a fair bit of detail about that if you want. **Senator GALLACHER**: If you have restructured your committee structure, perhaps just a table on that might be sufficient, a table of where bits lie. It is quite normal if you see a government structure of where things go to. What about your ICT?

## Answer

The Capability Review report of the Department of Veterans' Affairs (DVA) identified three key focus areas needing urgent attention:

- 1. operating structure, governance arrangements and information and communications technology;
- 2. approach to clients, culture and staffing; and
- 3. efforts to formulate effective strategy, establish priorities and use feedback.

An Action Plan was developed and agreed with the Australian Public Service Commissioner, which outlined the activities DVA would undertake to address focus areas identified in the report. Progress reports are provided to the Australian Public Service Commission (APSC) on a bi-annual basis.

Many of the reform programs currently being run across the Department address the focus areas, however key progress following the Report includes:

*Operating structure, governance arrangements and information and communications technology* 

- Governance arrangements have been reviewed and improvements made to committee structures and processes- see the revised governance structure enclosed.
- DVA revised the organisational structure to include a Chief Operating Officer, which will ensure the Department operates effectively and successfully implements its reform agenda.

• Progressive modernisation has been undertaken with DVA's information communication technology systems, to better support staff and clients.

# Approach to clients, culture and staffing

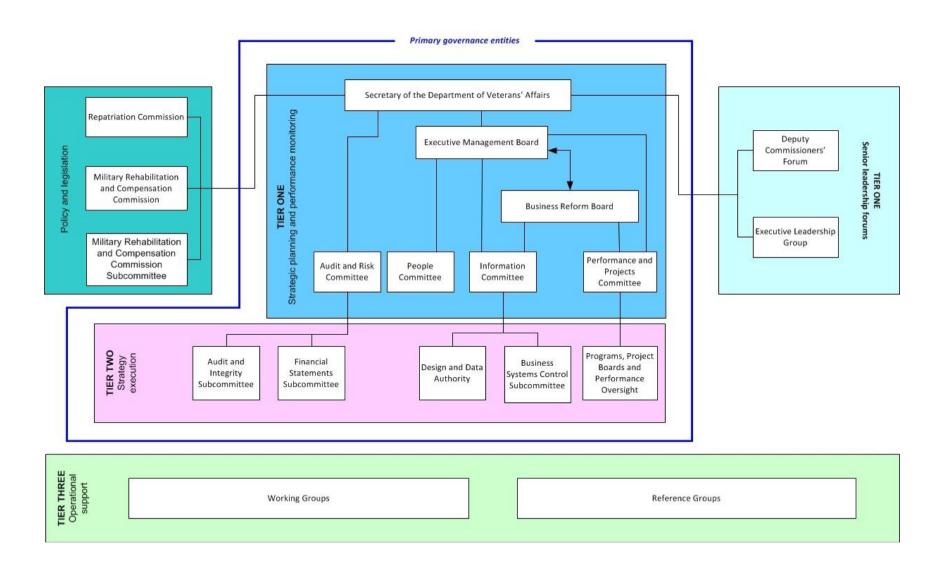
- DVA developed a new Rehabilitation and Compensation (R&C) Operating Model, which will be fully in place by mid 2015. The Model will introduce a better way of doing R&C business and will position DVA to improve service delivery and performance standards in the future.
- In 2014, DVA completed a Client Satisfaction Survey, and undertook targeted research with contemporary clients, with a view to examining potential for improvement in our service delivery arrangements. This information will be used to help shape and prioritise reform and business improvement efforts.
- Management teams in DVA gave renewed focus to staff performance agreements and the leadership development strategy, achieving a significant increase in participation by late 2014.

# Efforts to formulate effective strategy, establish priorities and use feedback

- DVA has released and implemented its strategic plan, *DVA Towards 2020*, which details how the Department will meet the challenges of a changing environment over the next few years. The plan addresses priority areas to ensure the Department is fully client-focused, responsive and connected.
- A dedicated business area has been established to focus on overall reform activities and ensure a strategic, well understood and coordinated approach to reform in DVA.
- The Department has made enhancements to its social media channels, re-focusing existing channels and initiating new channels for clients and other stakeholders.
- DVA completed a Client Satisfaction Survey in 2014 and will discuss the outcomes with Ex-Service Organisations, and make the outcomes publicly available.

#### **DVA's revised Governance Structure**

**DVA Departmental Governance Framework** 



# **Question 2**

**Outcome: All Program: All Topic: Capability Review** (FADT Hansard Proof 25 February 2015, p 109-110.)

### Senator GALLACHER asked:

**Senator GALLACHER**: So you are assuring me there is a system in place to address all the issues we have raised?

**Mr Lewis**: We are totally wedded to these changes. They are important to the department. It was a good review; I do not necessarily agree with every word used in the report, but it is their report. The recommendations for change across the department are very useful to the department, and the senior leadership group is very committed to driving the changes embedded in it. We would be very happy to give you regular updates.

**Senator GALLACHER**: Could you provide a snapshot of what you have just described? **Mr Lewis**: Certainly, Senator.

Senator GALLACHER: Thank you. That concludes that item.

#### Answer

See answer to Question on Notice 1.

# **Question 3**

**Outcome: 3 Program: 3.1 Topic: Vietnam Veterans' Education Centre** (FADT Hansard Proof 25 February 2015, p 111).

### Senator GALLACHER asked:

**Senator GALLACHER:** Are these bodies made up of volunteers or paid staff? I am talking about the Vietnam Veterans Education Centre Advisory Panel and the Medicines Advice and Therapeutic Education Services. Are they paid or are they volunteers?

**Ms Daniel:** The MATES committee operates under the contract we have with the University of South Australia to run that program. There is a mix of professionals and veterans' representatives on that committee. The education one belongs to a colleague. I would have to get that for you. We will do so during a break.

#### Answer

The Vietnam Veterans' Education Centre Advisory Panel is comprised of volunteers, supported by Department of Veterans' Affairs staff.

There are three committees under the Veterans' Medicines Advice and Therapeutic Education Services (Veterans' MATES) Program:

- Veterans' MATES Veterans Reference Group, comprising representatives from ex-service organisations and contractor representatives;
- Veterans' MATES Practitioner Reference Group, comprising health professionals and contractor representatives; and
- Veterans' MATES Writing Group, comprising health professionals and contractor representatives.

The members of these committees are not paid sitting fees, however their associated travel and accommodation costs are paid for.

### **Question 4**

**Outcome: 1 Program: 1.1, 1.2, 1.3 and 1.6 Topic: Indexation of pensions** (FADT Hansard Proof 25 February 2015, p 112)

#### Senator GALLACHER asked:

**Senator GALLACHER:** You do not have the disaggregation between veterans, war widows, orphans and the disabled?

Ms Foreman: I do not have that at hand.

Senator GALLACHER: The total number is 220,000 in 2017-18?

Ms Foreman: That is right.

**Senator GALLACHER:** Are you able to provide a breakdown of the different payments affected by this change with the number of people?

**Ms Foreman:** We can give you an estimate for 2017-18. I can tell you the payments that are affected and then we will take on notice the number of people who we estimate receive those payments. The payments that will be affected are the income support payments, such as: service pension; the disability pension, war widower pension; the military rehabilitation and compensation assistance, wholly dependent partner; and special rate disability pension.

Senator GALLACHER: That is five categories?

**Ms Foreman:** Yes. The income support payments cover a number of payments in that category. **Senator GALLACHER:** And you will, on notice, provide the detail for that? **Ms Foreman:** We will.

#### Answer

The following is an estimate of the various populations in 2017-2018.

Service pension	109,650
Income support supplement	47,050
Disability pension	86,800
War widow(er) pension	66,850

The total number of pensioners is estimated at 220,000. This is less than the total of the above as many pensioners receive more than one affected payment. All income support supplement recipients are also war widow(er) pensioners and around 50 per cent of disability pensioners also receive service pension.

There are approximately 100 recipients of the Wholly Dependent Partner Payment under the *Military Rehabilitation and Compensation Act 2004*.

## **Question 5**

**Outcome: 3 Program: 3.1 Topic: French Legion of Honour** (FADT Hansard Proof 25 February 2015, p 114).

### Senator SMITH asked:

**Senator SMITH:** Do we have any sense of the time that it takes for a veteran to notify the French embassy, a decision to be taken and then the award be given? I am familiar with the award ceremony that coincided with the Albany commemorative events at the end of October and early November, with the minister was present. Is there a sense of the time line that it takes for an application to be processed and for a recipient to be notified?

**Major Gen. Chalmers:** It is a French process. Clearly, because it is an award of such significance, it does take some time because of the level of authorisation is very high. The President of the French Republic, in the end, is the delegate, I think you would say. Having said that, the French are very keen to ensure that—they understand that the veterans they are honouring are, for the most part, in their 90s—time is of the essence. This is not an award that can be made posthumously. When a veteran is to be honoured, then they need to work through the process fairly quickly and do so.

**Senator SMITH:** That is a very important point, because the veterans are very aged now. Certainly, those that I have met—people like Doug Groome and Eddie Davis, for example—are well and truly into their 90s. They are very fit and spritely; I will add that. In correspondence that I have received from yourselves, dated 12 January, in response to a letter that I sent to the department identifying 12 to 16 veterans or their families that had made their presence known to me as a result of some media activity, a commitment was given to me that the department will notify each of the veterans or their family member who enquired about eligibility on behalf of a veteran. Was that undertaken?

Major Gen. Chalmers: I am not aware, so I will have to take that on notice for you.

## Answer

The Department of Veterans' Affairs contacted the 16 people from whom Senator Smith received enquiries about the Legion of Honour and provided them with information about eligibility and the nomination process as required by the French Embassy in Australia. The Department also contacted two others who had enquired directly to the Minister for Veterans' Affairs. Twelve were contacted by email and six by phone.

A number of those who were the subject of an enquiry had already submitted a nomination form for the Legion of Honour with the French Embassy.

### **Question 6**

**Outcome: 1 Program: 1.2, 1.3 and 1.6 Topic: Time Taken to Process** (FADT Hansard Proof 22 October 2014, p 115)

#### Senator FAWCETT asked:

**Ms Foreman:** As in the annual report that was released last October for the 2013-14 year, under the Veterans' Entitlements Act we have a target of 75 days for compensation processing, and I am pleased to say that we met that target of 75 days. Under the Military Rehabilitation and Compensation Act, our outcome was 144 days, which was an improvement of 11 days on the year before, but is still above the target of 120.

Senator FAWCETT: So that is clearly an average figure?

Ms Foreman: Yes, that is right.

**Senator FAWCETT:** In terms of your outliers, how quick are your quickest and how long are your most complicated?

**Ms Foreman:** I think I should take that on notice—to get the accurate answer to you—rather than attempt to answer tonight. There are two other targets that we have. In relation to the Safety, Rehabilitation and Compensation Act, the outcome last year was 160 days, with the target of 120. In our income support area, we have a target of 32 days and we were at 34 days, which was a seven-day reduction on the previous year. What I can say is that we are getting better, but we still have a way to go.

## Answer

In 2013-14, 15,959 compensation claims under the *Veterans' Entitlements Act 1986* (VEA) were finalised and the age breakdown is as follows: within 75 days: 62.3 per cent; 76 to 150 days: 21.3 per cent and over 150 days: 16.4 per cent.

In 2013-14, 6,290 liability claims under the *Military Rehabilitation and Compensation Act 2004* were finalised and the age breakdown is as follows: within 120 days: 48.9 per cent; 121 to 240 days: 32.7 per cent and over 240 days: 18.4 per cent.

In 2013-14, 3,450 liability claims under the *Safety, Rehabilitation and Compensation Act 1988* were finalised and the age breakdown is as follows: within 120 days: 41.1 per cent; 121 to 240 days: 39.7 per cent and over 240 days: 19.2 per cent.

In 2013-14, 10,179 new income support claims, under the VEA, were finalised and the age breakdown is as follows: within 32 days 51.9 per cent; 33 to 64 days 33.1 per cent and over 64 days 15 per cent.

## **Question 7**

**Outcome: All Program: All Topic: Veterans' Access Network KPIs** (FADT Hansard Proof 25 February 2015, p 120)

#### Senator GALLACHER asked:

**Senator GALLACHER:** I suppose if you are reviewing the efficacy of your service provision including internet and phone, is that ongoing review published anywhere? Do you have KPIs or service standards?

**Mr Carmody:** We have KPIs for telephone answering, for example—call waiting time and all those sorts of things. I would have to check: I am not sure how public they are, but they are certainly available.

Senator GALLACHER: Perhaps you could take that on notice.

#### Answer

There are a number of different call groups operating within the Department of Veterans' Affairs (DVA), responding to different client groups with varying levels of service.

The Veterans' Access Network (VAN) manages the call traffic generated on the DVA published contact numbers 133 254 and 1800 555 254. The VAN also responds to all emails sent to DVA's general enquiries email address, <u>GeneralEnquiries@dva.gov.au</u>. In 2014, the VAN received 630,500 phone calls which represent approximately 18 per cent of total calls to DVA. In excess of 20,000 emails to the general enquiries email address were also received.

The VAN has specific internal performance targets including speed of answer and abandoned call rates which are not promoted external to the Department.

#### **Question 8**

**Outcome: All Program: All Topic: On Base Advisory Service** (FADT Hansard Proof 25 February 2015, p 121).

#### Senator GALLACHER asked:

Senator GALLACHER: The on-base advisory service: is there a number of staff employed in that area?
Mr Carmody: I do not have the number in front of me.
Senator GALLACHER: Maybe I will put those on notice.
Mr Carmody: I think it is about 35, but I can confirm the number.
Mr Lewis: We have 38 bases.
Mr Gerrick: The Secretary is correct. It is around about 38 bases where we have representation.

#### Answer

There are 27 staff members employed to provide on base advisory service duties on a full time or part time basis.

### **Question 9**

**Outcome: 1 Program: 1.4 Topic: Homelessness** (FADT Hansard Proof 25 February 2015, p 122 .)

#### Senator GALLACHER asked:

**Senator GALLACHER:** I accept the difficulty you would find, but I suppose if someone turns up in Adelaide at a homeless shelter and indicates that they are former service personnel there is a mechanism to deal with that, isn't there?

**Mr Lewis:** There is. The ex-service organisations will often come to help. And remember, from what the minister just said, that if that is a younger vet, the chances are that only one in five of those will actually be clients of DVA. We will not even know about the other four in five, if they are younger vets, just because of the way in which transitioning members make choices about whether or not they want to access the services of DVA.

**Senator GALLACHER**: I think that to do justice to this we should put this on notice and get a considered response from the department.

**Ms Daniel:** I might just add very quickly—you talked about homeless organisations and identifying veterans—certainly I know from my conversations, for example with the RSL in Victoria, that they work very closely with the homeless organisations in Melbourne and actively encourage those organisations to encourage people who are homeless and who they become aware of to identify whether they are former serving members so that they can direct them towards the services that the ex-service community can offer and also make sure that their DVA entitlements are in order. That is the sort of thing that happens at the local level from our regional and state offices.

**Senator Ronaldson:** Senator, we are going to take this on notice, because it is a really, really important issue. As you appreciate, homelessness is dealt with under Commonwealth-state partnerships. But if DVA finds out that one of our clients is in this position, then we do move very quickly. We contact organisations that are providing immediate accommodation, crisis accommodation. We get in touch with Centrelink to make sure they are getting their benefits. So, I think to do justice to your question, which is a very good one, we will take it on notice and give you a detailed response.

Senator GALLACHER: Thank you.

## Answer

In the Federal Government, it is the Department of Social Services which has responsibility for policy and funding matters relating to housing and homelessness. While the Department of Veterans' Affairs (DVA) has no direct legislated role in the provision of housing and/or accommodation services, it does work closely with other government and non-government agencies in identifying and assisting members of the veteran community at risk of homelessness.

DVA receives a few reports each year, Australia-wide, about veterans who are homeless or at risk of homelessness. In this event, with the individual's permission, DVA staff can provide the following assistance:

- referral to local homelessness agencies to assist with an immediate accommodation solution;
- referral to the Veterans and Veterans Families Counselling Service, who can offer short-term accommodation, and/or to local ex-service organisations;
- referral to Centrelink for assessment of the potential for the individual to be provided with additional benefits or further support;
- investigation by a departmental staff member to ensure that the individual is receiving all benefits and entitlements from DVA that they are entitled to;
- referral to local Ex-service Organisations who may be able to support with accommodation options as well as general welfare support and advocacy services, and
- arranging for changes in DVA income support payments, from fortnightly to weekly, if this would assist the individual.

DVA works with all other sectors to ensure that veterans' issues are understood as part of the wider response to homelessness, and that homelessness service providers are aware of the support that DVA can offer.

#### **Question 10**

**Outcome: 2 Program: 2.5 Topic: Mental Health** (FADT Hansard Proof 25 February 2015, p123.)

#### Senator SINODINOS asked:

**Senator SINODINOS:** That is understandable. Just on mental health issues more generally, you are expanding what you do—is that right?—and trying to find new ways of dealing with these issues. There has been talk about the role of the internet and technology in delivering support and services and working more closely with the medical profession to improve primary mental health care. Is that right?

**Ms Daniel:** The department has a range of activities underway. In terms of the medial profession, we have developed a number of resources to increase mental health professionals' understanding of the military experience and their knowledge of best practice intervention. The minister launched in December a new online training program for GPs that we did in conjunction with ACPMH and the College of General Practitioners. We have also made available a veteran mental health consultation companion as a supplement to our veterans' mental health advice book. In terms of other activities, our At Ease website is a key initiative. The minister mentioned previously the phone apps that we produce—the PTSD app. So, there is a range of initiatives there. We are continuing to work in that space, looking at some resilience products and some suicide prevention tools.

**Senator Ronaldson:** We will give you a detailed response to this, because an enormous amount of work is being done. Thank you for your question, Senator. It is a really important one.

## Answer

#### Technology

For some years, the Department of Veterans' Affairs (DVA) has been working to engage our contemporary client base with new internet and online technology. These contemporary cohorts are less likely to join ex-service organisations and want a more streamlined and modern process. This is why DVA is placing a large emphasis on use of social media and online or mobile mechanisms as part of the delivery of mental health services. DVA's online portal for mental health and wellbeing information and support is the *At Ease* website www.at-ease.dva.gov.au Since the relaunch of *At Ease* in April 2013, the website has received over 200,000 individual visits. The *PTSD Coach Australia* app has been downloaded 12,800 times and the *On Track with The Right Mix* (alcohol management) app has been downloaded 7,300 times. The Veterans and Veterans Families Counselling Service (VVCS) has also launched a new website and a Facebook page. As at end of January 2015, the VVCS Facebook page had a community of 2,741 people and organisations and the posts shared by the tri-services have resulted in a reach of over 50,000 people.

#### Health Professionals

DVA is a national purchaser of health services across Australia in all states/territories and across private and public sectors. This means we need to work with tens of thousands of providers from care in community settings to intensive care in hospitals. Therefore, a major focus for DVA is ensuring that providers understand the needs of former military personnel and are skilled in providing care to this group. This is particularly important for mental health.

DVA has developed a number of resources to increase mental health professionals' understanding of the military experience and knowledge of best practice interventions. These resources are accessible from the *At Ease Professional* website, established in 2013 to support health providers to deliver quality health outcomes for veterans; see <u>www.at-ease.dva.gov.au/professionals/</u>

Recently-released resources for mental health service providers include the *Working with Veterans with Mental Health Problems* training programme for General Practitioners (GP). This is a unique online training program for GPs that provides an overview of the mental health issues faced by veterans and assists GPs to more effectively identify issues. It is hosted and supported for DVA by the Royal Australian College of General Practitioners.

DVA has also developed the *Veteran Mental Health Consultation Companion*, an electronic supplement to the popular *Veteran Mental Health Advice Book* for health professionals. This innovative app for tablet devices offers interactive assessment and treatment planning to assist mental health practitioners treating veterans and serving members.

# **Question 11**

**Outcome: 1 Program: 1.2 and 1.6 Topic: DLA Piper** (FADT Hansard Proof 25 February 2015, p 124)

### Senator XENOPHON asked:

**Senator XENOPHON:** Dr Gary Rumble led the DLA Piper review, which of course had a very key role in triggering the formation of DART and the Senate inquiries. What resources would you need, and are you considering analysing your own file information from claims indicating patterns of abuse over decades, such as common patterns of conduct, the types of assault, the locations and the like? That could be important in issues of the credibility of allegations and to get those clusters of claims.

Senator Ronaldson: Senator, the secretary touched on this before.

Senator XENOPHON: Yes. I am elaborating on that, Minister.

**Mr Lewis:** It may be better for us to respond on notice to some of this, Senator. Just to give you a sense, we process 50,000 claims a year. Some of the cases we are talking about obviously go back four decades or more, and we are talking about paper records which probably would be archived in some places distant from the department and not easy to return to the department. I am guessing that in many cases there is an absence of the key records we would need in order to substantiate a case. That is why we are trying to work out other ways to get some evidence that might help with some of these cases.

**Senator XENOPHON:** If you could take that on notice, especially in the context of that evidence and the recommendations by the DLA Piper review and Dr Rumble and his evidence before two inquiries. Thank you very much.

#### Answer

The Department of Veterans' Affairs is not considering reviewing its file holdings to ascertain patterns of alleged abuse over the preceding decades. To do so would require analysis of up to an estimated 300,000 files, containing claims information under any of the three primary compensation Acts administered by the Department. Should an individual wish to retest their eligibility following the work of the DART and Senate Inquiries, they should contact DVA about their appeal rights or submit a new claim to DVA and provide any new supporting evidence for consideration.

## **Question 12**

**Outcome: 1 Program: 1.4 Topic: Homelessness** (Written Question on Notice)

#### Senator GALLACHER asked:

- 1. Can the Department provide figures in relation to:
- a. The number of homeless veterans,
- b. The number of homeless veterans with dependants,
- c. The number of homeless veterans under 30,
- d. The number of veterans at risk of homelessness,
- e. The number of veterans under 30 at risk of homelessness

#### Answer

1 a to e. The Department of Veterans' Affairs (DVA) does not currently have reliable data about the extent of homelessness among veterans. While it is difficult to establish an exact figure for veteran homelessness, it is likely to be a very low proportion of DVA's clients. See the answer to Question 9 for information about actions taken by DVA in the event that a client presents who is homeless, or at risk of homelessness.

DVA is exploring ways to develop a more accurate estimate of homelessness in our client population.

# **Question 13**

Outcome: 1 Program: 1.4 Topic: Homelessness (Written Question on Notice)

#### Senator GALLACHER asked:

1. Has there been an increase or decrease in the number of homeless veterans over the last 2/5/10 years?

## Answer

1. See the answer to Question 12.

#### **Question 14**

**Outcome: 1 Program: 1.4 Topic: Homelessness** (Written Question on Notice)

#### Senator GALLACHER asked:

1. Can the Department provide details of the key causes of homelessness amongst veterans?

#### Answer

1. While the Department of Veterans' Affairs (DVA) does not have specific data on the extent of homelessness among veterans, we do know from broader studies of homelessness, including international and Australian studies in relation to veterans, what some of the risk factors for homelessness are.

Short term homelessness tends to be associated with housing crisis or family breakdown. Risks of long term homelessness are associated with substance use disorders, mental health and youth to adult homelessness.

### **Question 15**

**Outcome: 1 Program: 1.4 Topic: Homelessness** (Written Question on Notice)

#### Senator GALLACHER asked:

1. Are the causes of homelessness amongst young veterans different from the causes of homelessness amongst older veterans?

# Answer

1. The Department of Veterans' Affairs does not currently have any specific data on the differences in causes of homelessness between younger and older veterans.

See also the answer to Question 14.

# **Question 16**

Outcome: 1 Program: 1.4 Topic: Homelessness (Written Question on Notice)

#### Senator GALLACHER asked:

1. What factors contribute to putting veterans at risk of homelessness?

### Answer

1. See the answer to Question 14.

## **Question 17**

**Outcome: 1 Program: 1.4 Topic: Homelessness** (Written Question on Notice)

## Senator GALLACHER asked:

1. Can the Department provide details of all programs/services aimed at reducing the risk of homelessness and providing services to homeless veterans? Including details relating to:

- a. The group the program/service is aimed at,
- b. The cost of the program/service,
- c. Whether the program/service is run in cooperation/in consultation with ex-service organisation,
- d. How many veterans have utilised these programs/service,
- e. Ant details relating to program/service outcomes.

## Answer

1 a to e. See the answer to Question 9 for information about the actions taken by Department of Veterans' Affairs (DVA) in the event that a client who is homeless, or at risk of homelessness, presents.

Mental health and drug and alcohol issues are identified as key risk factors for homelessness. The mental health needs of veterans are a priority for Federal Government. A wide range of strategies have been implemented and resources committed to improve access to mental health services and support for veterans, including:

- In 2012-13, DVA spent almost \$179 million on supporting the mental health needs of its clients.
- This includes funding for online mental health information and support, General Practitioner services, psychologist and social work services, specialist psychiatric services, pharmaceuticals, trauma recovery programmes, in-patient and out-patient hospital treatment and services through the Veterans and Veterans Families Counselling Service.
- Funding for mental health treatment is demand driven, and is not capped.
- DVA can pay for treatment for diagnosed PTSD, anxiety disorder, depressive disorder, alcohol use disorder or substance use disorder whatever the cause. The condition does not have to be related to service. This is available to anyone who has deployed on operations overseas, and many who have more than three years peacetime service. These arrangements are known as non-liability health care.

## **Question 18**

Outcome: 1 Program: 1.2 and 1.3 Topic: Writeway Research Service Pty Ltd (Written Question on Notice)

#### Senator GALLACHER asked:

1. What was the exact date when the Department transferred responsibility to undertake research and compile reports from the Army History Unit to Write Way?

a. Under what circumstances would Write Way be asked to compile a report?

b. What percentage of cases required the production of a report by Write Way?

c. How were these reports used?

#### Answer

1. The Department of Veterans' Affairs (DVA) ceased receiving military researchers reports from the Department of Defence and commenced receiving them from contracted researchers, including Writeway, in the late 1990s. Ascertaining the exact date on which this occurred would require a significant diversion of resources.

a. DVA seeks military research reports from contracted researchers when there is insufficient evidence for a decision to be made, and further evidence is not readily available from the Department of Defence or contained in previous research reports. In addition, the Veterans' Review Board (VRB) and the Administrative Appeals Tribunal (AAT) may request a military research report to clarify evidence that is already before them.

b. In 2013-14, there were approximately 59,000 compensation related decisions covering DVA primary determination, internal reviews and VRB and AAT decisions. In the same period, military research reports were prepared by Writeway Research Service Pty Ltd for 35 cases, which equates to 0.06 per cent of the decisions.

c. The reports are requested when there is insufficient evidence for a decision to be made for cases being considered by DVA and for matters before the VRB and AAT. The reports relate to:

- i. establishing whether or not events occurred and the extent of the individual's involvement;
- ii. clarifying service eligibility or conditions of employment; and
- iii. accessing historical information.

## **Question 19**

**Outcome: 1 Program: 1.2, 1.3 Topic: Writeway Research Service Pty Ltd** (Written Question on Notice)

## Senator GALLACHER asked:

1. Can the Department confirm that they have stopped using Write Way?

a. What was the exact date when the Department stopped using Write Way to undertake research and compile reports?

b. What was the reason Department stopped using Write Way?

c. Was the decision to stop using Write Way a result of allegations that they relied on a forged document to compile a report?

d. Were there any other incidents or reasons that influenced the decision to stop using Write Way? e. How long after the Department became aware of the allegation that Write Way relied on a forged document did the Department stop using Write Way?

## Answer

1. The Department of Veterans' Affairs has a panel arrangement for the provision of military research reports. Writeway Research Service Pty Ltd, along with two other companies, is a member of that panel.

a and b. Writeway Research Service Pty Ltd has not been commissioned to provide reports since April 2014 when an independent investigation into allegations against the company was initiated.

c to e. The Department is unable to provide further comment whilst the investigation is being conducted.

### **Question 20**

Outcome: 1 Program: 1.2 and 1.3 Topic: Writeway Research Service Pty Ltd (Written Question on Notice)

#### Senator GALLACHER asked:

1. Did a system of procedures or oversight exist to ensure Write Way complied with all Department regulations and completed work to the highest standard?

#### Answer

1. Military research reports form only part of the evidence used in consideration of a claim. The Department of Veterans' Affairs has controls in place to ensure that military research reports received are of a high standard. These controls include the requesting officer examining the detail of the report to ensure the report addresses the issues the researcher was asked to investigate.

Further, in August 2014, the Department strengthened the controls by implementing a process whereby the companies providing a military research report must declare the following:

- compliance with all procedures in requesting Defence information;
- that there is no conflict of interest in relation to the report; and
- that the person that is the subject of the report is not known to the researcher.

# **Question 21**

Outcome: 1 Program: 1.2 and 1.3 Topic: Writeway Research Service Pty Ltd (Written Question on Notice)

### Senator GALLACHER asked:

1. Can the Department confirm that they have commenced an investigation into Write Way?

#### Answer

1. Yes, an independent investigation is currently being undertaken.

## **Question 22**

**Outcome: 1 Program: 1.2, 1.3 Topic: Writeway Research Service Pty Ltd** (Written Question on Notice)

#### Senator GALLACHER asked:

- 1. Can the Department provide details of the investigation into Write Way in relation to:
- a. The date when the investigation was initiated,
- b. The reason the investigation was initiated,
- c. The scope of the investigation, and
- d. Who is undertaking the investigation?

#### Answer

1 a to d. The Department of Veterans' Affairs commissioned law firm Clayton Utz to examine a series of concerns about independent research reviews. This process began in April 2014 and will conclude shortly.

# **Question 23**

**Outcome: 1 Program: 1.2, 1.3 Topic: Writeway Research Service Pty Ltd** (Written Question on Notice)

#### Senator GALLACHER asked:

- 1. Can the Department confirm whether the investigation is still ongoing?
- a. Can the Department provide an update on the progress on the investigation?
- b. When does the Department expect to conclude the investigation?
- c. Will any findings of the investigation be made public?

#### Answer

1. Yes.

a. and b. The investigation will be completed shortly.

c. The public release of the report will be subject to privacy considerations.

# **Question 24**

**Outcome: 1 Program: 1.2, 1.3 Topic: Writeway Research Service Pty Ltd** (Written Question on Notice)

## Senator XENAPHON asked:

1. Have there been any legal challenges/appeals to the AAT of Departmental decisions, in relation to veteran's entitlements, involving the Department's use of a Write Way reports?

- a. How many?
- b. How many have been decided?

c. How many cases resulted in overturning a Departmental decision?

d. In cases where the decision was overturned, what part did the Write Way report play in that decision?

e. How much have these legal challenges/appeals cost the Department?

#### Answer

1 a to e. The Department of Veterans' Affairs (DVA) does not capture this level of detail in relation to Administrative Appeals Tribunal (AAT) decisions. To obtain this information would require the examination of individual AAT decisions. As previously advised, reports prepared by Writeway Research Service Pty Ltd have been used since 1998 and preparation of a response to this question would involve an unreasonable diversion of departmental resources.

DVA notes, however, that when a military research report is used either as part of the Commission's decision making processes or in review by the Veterans' Review Board or the AAT, a copy of the report is made available to the claimant and/or their representative and they have the opportunity to comment at the hearing. The claimant can also respond to a research report by providing other evidence or providing a witness to the events described.

# **Question 25**

**Outcome: 1 Program: 1.2, 1.3 Topic: Writeway Research Service Pty Ltd** (Written Question on Notice)

## Senator GALLACHER asked:

1. Can the Department provide details regarding who is currently responsible for the tasks previously undertaken by Write Way?

- a. How they were chosen? Open tender?
- b. Their qualifications?
- c. Professional standards they must comply with?

# Answer

1. The Department of Veterans' Affairs has a panel arrangement for the provision of military research reports with the following companies:

- Writeway Research Service Pty Ltd;
- GH Solutions Pty Ltd; and
- Providence Consulting Pty Ltd.

a. The panel was established as a result of an open tender process conducted in 2012.

b. There is no professional qualification and no professional association through which accreditation or registration can occur.

c. The following is the criteria against which tenders for the provision of military research services were assessed and must comply:

- Experience and capacity to provide research and report writing services;
- Managerial and financial capacity to provide the service;
- Knowledge of the policies, procedures and records of the Australian Defence Force;
- Knowledge of the *Privacy Act 1988*, *Freedom of Information Act 1982* and *Archives Act 1983* provisions and the DVA Service Charter;
- Security clearance at Negative Vet Level 1 (or ability to obtain one); and
- Compliance with the agreement.

## **Question 26**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

### Senator GALLACHER asked:

1. Can the Department explain the fundamental differences between the way veteran's hearing aid devices for SRCA accepted conditions were funded before and after 10 December 2013?

a. What was the purpose of making this change?

b. What are the benefits of this change?

c. Does the Department expect any savings as a result of this change in arrangements? Have any savings been projected? How much?

#### Answer

1. Prior to 10 December 2013, treatment for SRCA accepted conditions was funded under Subsection 16(1) of the SRCA, "being treatment that it was reasonable for the employee to obtain in the circumstances". Hearing aids were funded at the market retail price, which was determined by the retailer with no regulation by the Department of Veterans' Affairs (DVA) or other bodies. These hearing aids were funded by DVA.

On 10 December 2013, legislation came into effect that moved treatment for SRCA accepted conditions to DVA health care arrangements that are in place for clients under the *Veterans' Entitlements Act 1986* (VEA) and *Military Rehabilitation and Compensation Act 2004* (MRCA) clients. These arrangements utilise the VEA or MRCA Treatment Principles, where services provided are in accordance with set fees and schedules. In relation to hearing, the Australian Government Hearing Services Program (AGHSP) is used to provide hearing aids. The AGHSP is funded and administered by the Department of Health through the Office of Hearing Services (OHS).

a. The change was a result of a recommendation arising from the *Review of Military Compensation Arrangements* finalised in 2011 that DVA health card arrangements should be extended to SRCA clients. The Review put forward a large number of recommendations, which arose from extensive consultation with the veteran and ex-service communities, including open forums conducted between September 2009 and April 2010. The Review's Steering Committee also received more than 50 submissions from the veteran and ex-service communities, including the Returned and Services League National Headquarters. A number of those submissions supported and encouraged the transition to DVA health card arrangements for all entitled persons.

The recommendation was accepted by the then Government, which allowed all former members of the defence forces who have an ongoing need for DVA funded treatment to access the DVA health card system. This approach is consistent with arrangements which are in place for more than 220,000 DVA health cardholders.

b. The introduction of a treatment card for SRCA clients reduced the administrative burden, complexity and delays in payment that clients and providers experienced under the reimbursement pathway. The change also brought greater consistency and clinical efficacy in the provision of care for clients across all three Acts and ensured all DVA clients can access the same health care arrangements, irrespective of when and where they served.

c. The projected savings for hearing devices have not been costed separately. The move to the health card arrangements was estimated to save \$22 million over four years from 2012-13 to 2015-16. These savings, along with a further \$17 million, were put back into the military compensation system as part of the package of changes introduced following the *Review of Military Compensation Arrangements*. Full financial details of the changes are contained in the 2012-13 Budget Measure - Review of Military Compensation Arrangement Response.

# **Question 27**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

## Senator GALLACHER asked:

1. Are 'free to client' hearing devices sufficient to meet the clinical needs of all levels of hearing loss?

a. Does the consideration of 'clinical need' take into consideration how the hearing device will operate in situations like in the car, in restaurants or on the phone?

b. When assessing the clinical need of a veteran, is that veterans lifestyle taken into account i.e. will they need to hear in a noisy environment, do they use the phone a lot?

c. Who makes the decision whether or not a particular hearing device will be included in the 'free to client' list of hearing devices?

d. What criteria do they use to make that decision?

## Answer

1. The Office of Hearing Services (OHS) has advised that free-to-client hearing aids possess fully digital technology and can be programmed to the prescriptive requirements for all degrees of hearing loss. Hearing loss, unlike many other conditions, can only be assisted, not cured or corrected. For example, glasses can restore vision to its previous function in a way hearing aids never can.

a. A client's individual requirements, including different sound environments, are taken into consideration when they identify a set of realistic listening goals with their hearing services practitioner.

b. A client's lifestyle is taken into account when a provider assesses their hearing goals. However, listening well in more challenging environments can be an ambitious goal for any hearing aid user particularly noting that full restoration of hearing is not possible. The OHS indicate the 'free-to-client' range of devices possesses a variety of features which should assist users in more challenging environments. In addition, they provide free hearing rehabilitation. Department of Veterans' Affairs (DVA) Card holders can also obtain assistive listening devices (ALDs) through the DVA Rehabilitation Aids and Appliances Program. The ALDs assist with hearing in particular situations including over distance and while watching television.

c. The OHS makes this decision. Hearing aid manufacturers make submissions for their devices to be included on the OHS schedules. OHS will then have the submissions reviewed by an Audiologist to ensure they meet the minimum standards for listing. The final decision is made by the Branch Head of OHS.

d. The OHS has a Deed of Standing Offer that lists the criteria to be met. The Deed of Standing Offer can be located on the OHS website www.**hearingservices**.gov.au.

# **Question 28**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

#### Senator GALLACHER asked:

1. Has the new arrangement resulted in any disparity between the quality of devices available to veterans and devices available to other people covered by the SRCA?

#### Answer

1. The Department of Veterans' Affairs is unable to comment on devices available to other people covered by the SRCA, as these services are administered by Comcare.

## **Question 29**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

#### Senator GALLACHER asked:

1. Prior to the change in funding arrangements:

a. What was the most the most expensive hearing device available to veterans with SRCA accepted conditions?

b. What was the least expensive hearing device available to veterans with SRCA accepted conditions?

c. What was the average cost of providing hearing device to veterans with SRCA accepted conditions?

## Answer

1 a to c. Information on the cost of each individual hearing device is not able to be determined from Department of Veterans' Affairs (DVA) systems.

From 2001, the estimated average cost to DVA for hearing related services for the *Safety*, *Rehabilitation and Compensation Act 1988* (SRCA) clients was \$6,152.63, with the average rising from \$3,811.67 in the 2001-02 financial year to \$7,126.86 in 2012-13. The estimate excludes small invoices that are unlikely to include hearing aids but are related to other hearing services.

## **Question 30**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

### Senator GALLACHER asked:

1. After the change in funding arrangements:

a. What is the most expensive 'free to client' hearing device available to veterans with SRCA accepted conditions??

b. What is the least expensive free to client' hearing device available to veterans with SRCA accepted conditions?

c. What has been the average cost to the Department for hearing devices provided to veterans with SRCA accepted conditions?

#### Answer

1 a. Under the free-to-client range, the most expensive hearing aid available is Category 1 hearing aids (high power behind the ear hearing aids) at a cost of \$449.15. However, when other costs including a second aid, are included, the price could increase to a figure closer to \$2,000.

b. Under the free-to-client range, the least expensive hearing aid available is Category 3 hearing aids (in the ear and in the canal hearing aids) at a cost of \$390.25. However, when other costs including a second aid are included, the price could increase to a figure closer to \$2,000.

c. Under the current arrangements, the Department of Veterans' Affairs (DVA) does not pay for hearing devices. That is the responsibility of the Office of Hearing Services in the Department of Health. DVA is only responsible for paying for batteries and maintenance of hearing devices for DVA clients and assistive listening devices, which DVA clients can get through the DVA Rehabilitation Aids and Appliance program at no cost.

## **Question 31**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

### Senator GALLACHER asked:

1. If there is a significant difference between the most expensive device and under the previous and current arrangements -

a. Does the difference in cost of the higher range devices under the two arrangements signify a difference in quality/functions of the devices available?

## Answer

1 a. The difference in cost in an unregulated market does not directly correlate to a difference in quality. All aids are of a similar high quality. However, different aids have different functions depending on the hearing requirements of the client and this can be reflected in the cost.

Department of Veterans' Affairs (DVA) clients can be provided with assistive listening devices at no cost to them, through the DVA Rehabilitation Aids and Appliances Program, to help with listening in specific environments such as over distance and TVs. These devices mirror some of the features not available on a free-to-client aid.

# **Question 32**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

### Senator GALLACHER asked:

- 1. Has the Department received any complaints about the adequacy of 'free to client' devices?
- a. What sorts of reasons were given by veterans for these complaints?
- b. How were those complaints addressed?
- c. How many of those complaints resulted in the funding of a 'top up device'?

# Answer

1. Yes.

a. Some examples of the reasons for complaints include:

- A belief that the free-to-client aids were basic and would not help in anything other than a conversation at home.
- The client could not hear in specific environments as well with their new aids.
- The SRCA client felt that they had lost an entitlement following the transition to Department of Veterans' Affairs (DVA) health card arrangements.

b. and c. In response to complaints received, clients were advised:

- to consult with their hearing services provider regarding the features available on free-to-client aids to assist with their hearing;
- to make another appointment with their hearing service provider to look at further adjustments to their aids, ask then about the benefit of an assistive listening device and to provide further education and rehabilitation in relation to using aids; and
- about the benefits of transition to DVA cards, including access to additional services, the SRCA supplement and entitlement for spouses to free-to-client hearing aids.

In addition to addressing the specific complaints, DVA has undertaken an education campaign for the veteran population including articles in the departmental magazine - *VetAffairs*, attendance at hearing forums and working with providers and the Office of Hearing Services about veteran specific entitlements and issues.

## **Question 33**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

#### Senator GALLACHER asked:

1. What benefit is provided by 'top up' hearing aid devices?

2. In what way do they differ from the 'free to client' hearing devices?

#### Answer

1. Top-up hearing aids have additional features to the free-to-client range but in essence provide little additional benefit with the exception of more automation. Different manufacturers have made various claims about the benefits of certain features but there are no independent studies that support these claims.

2. Free-to-client aids have the following features:

- Feedback cancellation;
- Adaptive Noise Reduction;
- Transient Noise Reduction;
- Wireless connectivity;
- Automatic or adaptive directional microphone;
- Automatic Multi Memory;
- Telecoil (also called a T-switch); and
- Autophone.

Top-up hearing aids have the following additional features:

- Automatic environmental adaptation;
- Super directional microphone;
- Frequency transposition/compression;
- Trainability/environmental learning; and
- Bilateral processing/synchronisation.

These lists are not definitive and do change regularly. For example, some free-to-client aids are now appearing with bilateral processing. Not all features listed above are found in all aids. Topup aids are likely to have more individual features than a free-to-client aid. Additionally, assistive listening devices provided to DVA clients at no cost can mirror or improve on some of the features in the top-up aids.

# **Question 34**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for Safety, Rehabilitation and Compensation Act 1988 (SRCA) accepted conditions (Written Question on Notice)

### Senator GALLACHER asked:

1. Under what circumstances would the Department consider funding 'top up' hearing devices?

- a. How does the Department define 'exceptional circumstance?
- b. How would a veteran demonstrate 'exceptional circumstances'?
- c. Would it require a letter from a specialist audiologist?

d. Would the cost of having a document prepared by a specialist audiologist in support of their application for funding of a top up device be covered by the Department?

#### Answer

1 a to d. Under the current arrangements, hearing aids for all eligible Australians, including veterans, are funded through the Office of Hearing Services (OHS) in the Department of Health which does not define 'exceptional circumstances'.

OHS provides hearing aids outside the free-to-client range for clients who are assessed as complex. The definition of a complex client is defined in the *Declared Hearing Services Determination 1997*, as an eligible person who has:

• profound hearing loss; or

(a hearing loss where the average hearing threshold level for 0.5, 1 and 2 kilohertz (kHz) in the person's better ear is greater than, or equal to, 80 decibels.)

• hearing loss and severe communication impairment.

(Severe communication impairment means communication difficulty that prevents the person from communicating effectively in his or her daily environment, or is caused or aggravated by significant physical, intellectual, mental, emotional or social disability.)

Hearing service providers contact the OHS to ascertain if a client is eligible to be classified as a complex client, based upon the above criteria. A referral from a specialist audiologist is not required.

## **Question 35**

Outcome: 2 Program: 2.1 Topic: Veterans' hearing aid entitlements for *Safety, Rehabilitation and Compensation Act* 1988 (SRCA) accepted conditions (Written Question on Notice)

## Senator GALLACHER asked:

1. Approximately how many veterans have requested the funding of 'top up' devices?

#### Answer

1. This information is not known.

#### **Question 36**

**Outcome: 2 Program: 2 Topic: Veteran Suicides** (Written Question on Notice)

#### Senator XENOPHON asked:

In response to questions on notice from Supplementary Estimates 2014 in relation to the suicide rate amongst veterans, DVA advised it had "commissioned the Australian Institute of Health and Welfare to carry out a data matching exercise between deceased ADF personnel (specifically those who served from 1972 and who died on or after 1 January 1990) and the National Death Index and the States' Coroners' databases to establish both the number of suicides and the prevalence of suicide in the veteran population".

- 1. In relation to this data matching exercise can you please advise:
- a. How many deaths have been examined to date?
- b. How many deaths have been determined as suicide?
- c. What has been done with the information that has been gathered so far by DVA?

#### Answer

1 a to c – In order to determine the number of suicides, DVA has commissioned the Australian Institute of Health and Welfare (AIHW) to data match service personnel who have had continuous fulltime service since October 1972 and have died since 1 January 1990 (based on ComSuper *Defence Force Retirement and Death Benefits Scheme* and *Military Superannuation and Benefits Scheme* data) with the National Death Index and State coroner's databases.

All information and data for this exercise is currently held by AIHW. DVA has been notified that 97% of the deaths have been matched to the National Death Index and the small number of unmatched records are currently being reviewed. Once the data match component of the project has been completed, analysis by AIHW of the deaths will commence. At this stage there is no preliminary information available.

# **Question 37**

**Outcome: 2 Program: 2 Topic: Veteran Suicides** (Written Question on Notice)

# Senator XENOPHON asked:

2. I understand DVA offers online suicide awareness training through its Operation Life initiative.

a. How long has this training been made available by DVA?

b. Who is able to access this training? Defence personnel and civilian personnel?

c. How many people have participated in this online training to date?

d. How does DVA assess the effectiveness of this online training?

e. How many face-to-face workshops have been conducted nationally under this initiative and how many people have participated in them?

f. What has been the feedback from participants in relation to this the online training and face-to-face workshops?

# Answer

2. The Operation *Life* website does not offer online training. The Operation *Life* Online website offers self-help information and is designed to raise awareness of the warning signs of suicide and provide information and resources to help those at risk of suicide and those worried about someone at risk of suicide.

a. Since August 2013.

b. Access to the Operation *Life* Online website is unrestricted. Information on the website is available to serving and ex-serving Australian Defence Force personnel and the general public.

c. Since the launch of the website in August 2013, approximately 3,734 users have visited the site.

d. As this is not an online course, this question is not applicable. However users can fill out a short survey, available on the site, concerning their experience using the website.

e. Under the banner of Operation *Life*, the Veterans and Veterans Families Counselling Service (VVCS) provides face-to-face Applied Suicide Intervention Skills Training workshops. From 2008-2014, 145 workshops have been held nationally with a total of 1,434 attendees.

f. The Operation *Life* Online website does not offer online training. Participants of the face-to-face workshops are invited to provide feedback, but little feedback has been received to date.

# **Question 38**

**Outcome: 1 Program: 1.2, and 1.6 Topic: Compensation / DART** (Written Question on Notice)

# Senator XENOPHON asked:

I refer to responses provided by DVA to questions on notice from Supplementary Budget Estimates 2014-15 (Q 172). In response to one question, DVA advised that claimants who have received a reparation payment from DART "may not disclose the outcome of their DART reparation claim".

1. Can you please advise how many DVA claimants have disclosed they have been through the DART process?

2. How many DVA claimants have disclosed the outcome of their DART reparation claim?

3. In response to question 1(b) DVA stated the following were reasons as to why claims relating wholly or partly to sexual or physical abuse may have been unsuccessful:

a. No diagnosed medical condition;

b. Claimant's circumstances may not have met the relevant Statement of Principles for the diagnosed condition;

c. Insufficient medical or other documentary evidence to support the claim;

d. Inconsistent evidence resulting in the connection between the claimed events and the condition not meeting the relevant standard of proof; and

e. Claimant not 'on duty' at the time of the alleged assault.

4. Can you please advise how many times each of the above reasons has been used to refuse a DVA claim made in relation to conditions resulting from sexual and/or physical assault?

## Answer

1. Since the Department of Veterans' Affairs commenced manually recording abuse cases in late 2012, 113 clients have disclosed that they have a Defence Abuse Response Taskforce claim.

2. The Department does not hold any data on this matter.

3. and 4. The Department is unable to provide the requested information because, while the reason for the decision is provided in the letter to the claimant explaining the reasons for the decision in each individual case, our ICT systems do not collect this level of detail.

## **Question 39**

**Outcome: 1 Program: 1.2 and 1.6 Topic: Abuse** (Written Question on Notice)

## Senator XENOPHON asked:

DVA advises (Q 172 2014-15 Supplementary Estimates) that 259 claims submitted to DVA between 1 January 2011 and 31 July 2014 related wholly or partly to sexual or physical abuse. These claims involved 522 separate conditions.

 Is DVA analysing these claims (and ones made prior to 1 January 2011) to determine whether any patterns of abusive conduct has been reported to DVA over the years? If not, why not?
 What resources would DVA require in order to conduct a review of its own case files to analyse claims made relating to sexual and physical abuse with a view to determining whether patterns of abuse exist?

3. How many claims relating to sexual or physical abuse have been submitted to DVA since 31 July 2014 to date?

# Answer

1. The Department of Veterans' Affairs (DVA) is investigating whether information available from DVA claims made after 1 January 2011 would provide data in regard to patterns of abusive conduct. Due to limitations in the way that DVA has recorded claims information in its systems prior to 2011, it is not possible to identify the causes of conditions claimed prior to 2011.

2. The Department is not considering reviewing its file holdings prior to 2011 to ascertain patterns of alleged abuse over the preceding decades. To do so would require detailed analysis of up to an estimated 300,000 files containing claims information under any of the three primary compensation Acts administered by the Department.

3. Between 1 August 2014 and 28 February 2015, DVA received 102 claims related wholly or partly to sexual or physical abuse.

## **Question 40**

Outcome: 1 Program: 1.2 and 1.6 Topic: Abuse/DART (Written Question on Notice)

#### Senator XENOPHON asked:

In response to questions put on notice during the FADT committee's inquiry into the Defence Abuse Response Taskforce DVA advised:

The Chair of the Military Rehabilitation and Compensation Commission has formally requested information from the Chair of the DART regarding ADF bases and locations where clusters of abuse are known to have occurred (including timeframes and types of abuse), with a view to possibly using this information as part of the DVA claims assessment process to support abuse claims. The first tranche of the information has been received and is being analysed.

1. Can you please provide an update as to the status of the analysis of this first tranche of information?

2. Have any preliminary findings been made as to the possibility of 'clusters of abuse'?

3. How many tranches of information are anticipated to be received?

#### Answer

1. The Department of Veterans' Affairs has received four location profiles from the Defence Abuse Response Taskforce (DART). Location profiles provide aggregated, de-identified data about 'clusters' of abuse reported to the DART involving particular military establishments.

2. Refer to the answer provided above.

3. DVA has requested the DART provide a total of 14 location profiles.

# **Question 41**

Outcome: 1 Program: 1.2 and 1.6 Topic: Abuse/DART (Written Question on Notice)

# Senator XENOPHON asked:

Recommendation 6 in the FADT committee's report on the Government's response to the Defence Abuse Response Taskforce stated:

The committee recommends that the Minister for Veterans' Affairs direct the Department of Veterans' Affairs (DVA) to commence consultation with veterans' representative organisations and to report back on:

• the legal and practical barriers there are to victims of abuse in the ADF succeeding in establishing the facts necessary to access entitlements to DVA benefits;

• what Defence and DVA could do and what resources they will require to gather and share information which could assist such individuals to establish those facts to the satisfaction of DVA and tribunal decision- makers;

• what can be done in liaison with veterans' groups, other Australian Government agencies and community groups, and what resources will be required to reach out to individuals affected by abuse who may be eligible for DVA benefits – including individuals who have previously applied and been rejected.

1. Can DVA provide an update as to the status of the consultation process recommended by the FADT committee in recommendation 6? How many veterans groups have been consulted with to date?

2. What legal and practical barriers have been identified to date to victims of abuse in the ADF succeeding in establishing the facts necessary to access entitlement to DVA benefits?

3. Has DVA identified what resources would be required in order to gather and share information which could assist abuse victims to establish the facts of their case to the satisfaction of DVA? If not why not?

4. Has DVA identified what resources will be required to reach out to individuals affected by abuse who may be eligible for DVA benefits? If not why not?

5. Has DVA reached out to any individuals affected by abuse since the committee handed down its report in October 2014? If not why not?

# Answer

1. to 5. The report of the Foreign Affairs, Defence and Trade References Committee is currently being considered by the Government.

### **Question 42**

**Outcome: 1 Program: 1.8 Topic: Use of Anzac Hall as a functions venue for defence company** (FADT Hansard Proof 25 February 2015, p 130)

#### Senator WHISH-WILSON asked:

**Dr Nelson:** Anzac Hall, where the Lancaster, the miniature submarine, the First World War aircraft and the Sydney-Emden displays are, is the area that we use for events. It could be the glass manufacturers association's annual Christmas dinner, it could be the Northrop Grumman launch of its increased presence in Australia, it could be the Bomber Command annual dinner—it could be a whole range of things. That is the area that we use for these sorts of events. Going back to Senator Gallacher's questions about funding for things like travelling exhibitions, the revenue that we are able to derive from our commercial activities, which include allowing Anzac Hall to be used for these sorts of events, enables us to provide the kinds of offerings which mean so much to our Australian visitors and to our international visitors. It is a very important thing. For a number of those events that are held in Anzac Hall, we considerably discount the fees that we charge where it is a veterans' group. We will have a dinner there later this year for the families of the fallen from Afghanistan. Of course there will be no charge to them whatsoever. But when we have corporations come in, whether they are in defence or any other part of the corporate sector, it is not only an appropriate use for that area of the memorial but it is also an

important part of our revenue raising.

**Senator WHISH-WILSON:** Could I ask about how many other defence companies have used that particular area for functions?

**Dr Nelson:** I would have to take that on notice. I have been at the memorial for two years and two months, and I certainly know that Lockheed Martin, Boeing and Northrop Grumman, as you quite rightly point out, have had functions there—

#### Answer

Since July 2013, over 214 private functions and events were held on site at the Australian War Memorial (AWM). Of these, five defence companies held private functions and events at AWM venues. These include Northrop Grumman, Thales, BAE Systems Australia, Lockheed Martin and Xtek Limited.

The AWM is a highly sought after functions venue. Functions are only held in the museum space and never in the Commemorative area. Functions have been held at the AWM by private companies, non-profit groups, charities, government departments, veterans' groups and other interest groups. The majority of functions are held in ANZAC Hall, which at the time of construction, was designed as both a gallery and function space.

The AWM receives approximately \$200,000 in revenue from venue hire and commissions from catering functions. This money goes directly back to the AWM, including funding the collection and maintenance of the site.