

Chair, before I begin, I would like to take this opportunity to welcome the new Senators to the Committee. I am sure this committee will provide you with a more effective understanding of veterans issues.

I would also like to officially welcome Shane Carmody to the position of Chief Operating Officer within the Department. Mr Carmody had previously held the position of Deputy President of the Repatriation Commission, serving in this role with distinction and fundamental in improving the administration of DVA. In his new position, Mr Carmody will lead the reform agenda within DVA. I wish Mr Carmody all the best with his new role and am confident Mr Carmody is well placed to ensure DVA is client-focused, responsive and connected.

Additionally, Major General Mark Kelly AO DSC, Commissioner of the Repatriation Commission is in attendance today, as his role has been expanded to oversee the Veterans and Veterans Families Counselling Service. I wish the Major General all the best with the overseeing of VVCS, and this arrangement will continue to ensure the separation of VVCS to the rest of the Department.

## ***MENTAL HEALTH***

At Senate Budget Estimates on 3 June 2014, I updated this Committee on how tackling the mental health challenges facing veterans and their families is a critical pillar of the Government's plan for veterans' affairs.

The Government is determined not to repeat the mistakes made in the past. We have learnt a lot from the experience of Vietnam veterans, and there has also been considerable advances in the knowledge of mental health.

Because mental health is such a high priority, I want to continue addressing this major theme tonight – in particular how we are:

1. reaching out to veterans and their families on mental health;
2. reforming our business practices to promote access to quality mental health care; and
3. strategically positioning the future of veteran mental health.

## ***REACHING OUT TO CLIENTS ON MENTAL HEALTH***

DVA is a unique institution in Australia, not least because of the diversity of our clients.

Our priority in mental health is to ensure that we are well positioned to meet the mental health needs of both current and former service men and women, and their families.

The Department spent around \$179 million in 2012-13 on a comprehensive service system that stands ready to meet these mental health needs. The Government's funding for veteran mental health treatment is demand driven, and it is not capped.

This expenditure increased from the previous year's expenditure of about \$166 million.

Funding is available for online mental health information and support, GP services, psychologist and social work services, Veterans and Veterans Families Counselling Service (VVCS) services, specialist psychiatric services, pharmaceuticals, trauma recovery programs, and in-patient and out-patient hospital treatment for those who need it.

Another example of increased service delivery in mental health support to the veteran community is that in the 2013-14 financial year, VVCS delivered 89,513 counselling sessions to clients, compared to 73,063 counselling sessions in 2012-13.

The veteran client demographic is also changing and my Department needs to be responsive to change. We know that contemporary veterans stay in touch with their peers using a range of online technologies, and that they are less likely to join the traditional ex-service organisations immediately following their discharge.

This has required my Department to identify and adopt a **new approach to providing support and information** to the contemporary cohort of veterans.

This includes the use of social media channels such as Facebook and YouTube, as well as online and mobile applications.

Since I last spoke to this Committee, I have launched a new online and mobile version of the Veterans and Veterans Families Counselling Service website, as well as a VVCS Facebook page.

The VVCS Facebook page's reach into the veteran community is growing daily. I encourage you to share it with members of the community, so they know to connect to VVCS for support when they need it.

DVA has been using social media channels for a number of years now, we are in a good position to take stock of what we have been doing and assess where we can improve our presence on sites such as Facebook and Twitter.

Veteran suicide prevention is a top priority for the Government in our efforts to reach out to the community. Any suicide is tragic and the service and ex-service community is not immune.

As I stated to this Committee in June this year, allegations of a departmental cover up on rates of suicide are utterly false and quite frankly objectionable. My Department continues to work with other agencies to better understand the prevalence of suicide in the broader ex-service community.

My Department's focus is on developing and delivering programmes to help prevent suicide, build resilience and provide information on how and where to seek help for those at risk of suicide.

Through DVA's *Operation Life* initiative, online suicide awareness and prevention resources are available and face-to-face workshops are run through the VVCS across Australia.

Bereavement by suicide has a significant impact on the family members left behind. DVA's *Operation Life* online programme also provides information for people who have been affected by suicide.

I would encourage anyone concerned about their mental health or that of a family member to call the VVCS, on 1800 011046.

As well as reaching out to the community, we also need to make sure that services are available for when people need it. This is why the Government was pleased to support **three new initiatives, which started on 1 July 2014**, to strengthen access to mental health services for veterans and their families. We will achieve this through:

- greater access to the services of VVCS;
- a new post-discharge GP health assessment for former serving personnel; and

- greater access to arrangements where DVA pays for mental health treatment for eligible veterans whatever the cause of the mental health condition – the condition does not have to be related to service.

### ***REFORMING BUSINESS PRACTICES***

There is a comprehensive service system that stands ready to meet the mental health needs of the veteran and ex-service community. The Government spends almost \$179 million a year on meeting these mental health needs.

Whilst funding for mental health treatment is demand driven and not capped, it is critical that the community receives value for money.

My Department has taken a **new approach to how it is purchasing mental health hospital services** – especially outpatient programmes.

We want to purchase services that are accessible, evidence-based and will deliver the best prospect for helping clients improve and sustain their mental health.

As part of a recent tender process, my Department, assisted by experts, carefully reviewed all proposals for mental health day programmes at hospitals to ensure they are based upon the best possible evidence. We used the advice of experts – the Australian Centre for Posttraumatic Mental Health – to assist us in doing so.

This means there is a range of high quality hospital services available across Australia to our clients when it is needed.

I spoke before of the arrangements whereby DVA will pay for eligible veterans' treatment for certain diagnosed mental health conditions without the need to establish that this condition is related to service.

The Repatriation Commission has recently agreed to allow **diagnosis by GPs and clinical psychologists** in addition to psychiatrists, for the purposes of these arrangements.

GPs and clinical psychologists are qualified to diagnose mental health conditions, and do so routinely for members of the broader community.

These changes will mean easier access to early treatment for our veterans.

### ***FUTURE OF VETERAN MENTAL HEALTH***

As I noted in my statement to this Committee in June this year, the Government has established a new **Prime Ministerial Advisory Council** on Veterans' Mental Health in order to provide advice to Government on high level strategic and complex matters on the mental health of veterans and their families.

The Council comprises of the Chair, Vice Admiral Russ Crane (Ret'd), Deputy Chair, Corporal Ben Roberts-Smith, and nine other members who are respected industry leaders, experts on mental health matters, representatives from the Australian Defence Force and advocates from the veteran community.

At the Council's first meeting on 24-25 July 2014, it identified the following three areas as priorities for future work:

- *A national communication strategy* to promote a positive view of service and its contribution; and to increase awareness of the available mental health services and the benefits of early intervention.
- *Peer support*, which allows individuals to be suitably matched with peers to receive practical support in managing their mental health and wellbeing, leading to improved quality of life.
- Finally, *vocational rehabilitation and transition management*. The Council will look at ways in which industry can be engaged to provide greater employment opportunities for former members undertaking vocational rehabilitation.

The Council will meet again on 25 November 2014.

Research is also a priority for the Government in setting future policy directions, based upon high quality evidence. To this end, on 11 June 2014 I launched **the Transition and Wellbeing Research Programme**.

As the largest and most comprehensive study of its type undertaken in Australia, it examines the impact of military service on the mental, physical and social health of serving and ex-serving personnel and their families.

For the first time, it includes a picture of mental disorders in the initial years after transition from full time service. It also investigates how individuals previously diagnosed with a mental health condition access care, how mental health issues change over time, the mental health status of reservists, as well as examining the experiences and needs of families of serving and ex-serving personnel.

The Programme brings together national experts in the field of veteran mental health is a significant investment of \$5 million over three years. It consists of three study components.

The *Mental Health and Wellbeing Transition Study*, will target both serving and ex-serving personnel to determine their mental, physical and social health status.

The *Impact of Combat Study*, will comprehensively follow-up the mental, physical and neuro-cognitive health of personnel who deployed to the Middle East Area of Operations between 2010 and 2012.

The *Family and Wellbeing Study* being conducted by the Australian Institute of Family Studies, will investigate the impact of military service on the health and wellbeing of the families of serving and ex-serving personnel.

## ***EMPLOYMENT***

I recently launched a pilot Veterans' Employment Assistance Initiative.

We know that the transition from military to civilian life can be a confronting and often challenging time, especially for ADF members who have suffered physical or psychological injuries from their service.

Meaningful and sustainable employment is a central element to the rehabilitation and recovery of wounded, injured and ill former ADF members.

For too long this has been a missing link in our overall approach to compensating and rehabilitating former ADF members. It is something the US and UK do much better than we do.

The initiative broadens the assistance and support for former members and employers currently provided under DVA's rehabilitation programmes.

The initiative is underway in south-east Queensland and will involve around 50 volunteer participants.

Under the initiative, veterans with an identified goal of returning to work will undergo early assessment of their vocational rehabilitation needs. This will include aligning the skills they have developed in the ADF to potential civilian employment opportunities as well as the opportunity to undertake employment focused training if required.

It is about what a veteran can do, when they want to do and how DVA can help them achieve their goals.

The aim is to identify ways to improve employment rates for wounded, injured and ill former ADF members. This will include identifying the support required by employers to assist them in their employment of a veteran who may have physical or psychological injury.

The pilot will be evaluated in the first half of 2015 and the results will assist with informing improvements to vocational rehabilitation nationally.

## ***REHAB AND SUPPORT***

It is also essential that veterans receive access to their entitlements in a timely manner, this is why I have been, and will continue to be, a strong advocate for reducing processing times for compensation claims.

DVA is currently undertaking a Time Taken To Process (TTTP) improvement project.

The project is made up of four key strategies based on reducing work on hand, improving client communication and engagement, improving case management practices and reviewing and improving business processes.

In February 2014 and again in June 2014 we were able to report on some small but significant progress.

Today, I am pleased to report that further progress has been made and that the foundation has been laid for continued improvement in 2014-15.

As of 30 June 2014, TTTP for liability claims had improved on the 2012-13 results under all three Acts:

- Claims under the VEA (target: 75 days) were at 75 days, an improvement of 4 days on the previous financial year;
- Claims under the MRCA (target: 120 days) were at 144 days, an improvement of 11 days on the previous financial year; and
- Claims under the SRCA (target: 120 days) were at 160 days, an improvement of 11 days on the previous financial year.

I believe that my strong interest in the claims processing challenge is widely known in the veteran community. I want to assure them that these small but important improvements are the start of the process not the end of it.

## ***ANZAC CENTENARY***

I now turn to official commemorations for the Anzac Centenary.

As you all would be aware, official commemorations for the Anzac Centenary commenced on 4 August 2014, marking the centenary of the declaration of the First World War. The Anzac Centenary Programme 2014–2018 formally began with a small commemorative service held at the Australian War Memorial in Canberra, attended by the Prime Minister, the Hon. Tony Abbott, and myself.

Following the commemoration of the start of the First World War, a number of important dates have also been marked. These include the commemoration of the firing of the First Shot in the British Empire from Fort Nepean, Port Phillip Bay, Victoria; a service at the Bitu Paka War Cemetery in Rabaul to acknowledge the landing of the Australian Naval and Military Expeditionary Force (ANMEF) at Bitu Paka to capture the German radio station on 11 September; and the loss of the *AE1* on 14 September.

As the Government's lead agency for the Anzac Centenary, the Department of Veterans' Affairs has moved from the planning to the



implementation and delivery phase of the Government's Anzac Centenary Programme. The curtain raiser to the Anzac Centenary period will be held in Albany, Western Australia in the coming days.

The Albany Convoy Commemorative Event (ACCE) will recognise the first convoy carrying the Australian Imperial Force and New Zealand Expeditionary Force, which left Albany, Western Australia, on 1 November 1914. This Event will occur in Albany over the weekend of 31 October–2 November 2014 as part of the Anzac Centenary Program 2014-18.

The ACCE is being organised by my Department in partnership with the Australian Defence Force, the Western Australian Government, the New Zealand Government and Defence Force, the City of Albany and the Returned and Service League of Australia. The ABC will broadcast the troop march and the commemorative service.

All levels of government are working collaboratively on a range of overlapping activities and plans in support of these official activities.

The National Anzac Centre will be a physical and virtual interpretive centre, telling stories of Australian and New Zealand troops which left from Albany, Western Australia, and their journey to and during the First World War, and will be officially opened on 1 November 2014 as part of the ACCE.

Throughout the remainder of the Anzac Centenary period, a comprehensive programme of activities will be carried out at the local, state and commonwealth level to commemorate significant dates and events relating to both the Anzac Centenary and the Century of Service.

The Government has invested \$11.5 million in the commemorations at Albany, including more than \$1.5 million since the last election to address shortfalls inherited from the former government.

## ***CLOSING STATEMENT***

In closing, I would like to reiterate this Government's resolve to not repeat the mistakes of the past.

This Government is committed to improving how we reach out to and care for this country's newest generation of veterans, and their families.

By responding to the changing needs of the veteran community, continuing to strengthen access to quality mental health care, and planning for the future of veteran mental health this Government is delivering on its commitment to tackle the mental health challenges facing veterans and their families.