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30 January 2019

Australian Government Productivity Commission Via email

# RE: INPUT SUBMISSION A BETTER WAY TO SUPPORT VETERANS PRODUCTIVITY COMMISSION DRAFT REPORT

#### **Contents**

Background Military Service Response to Draft Report *A Better Way to Support Veterans* General concluding commentary

## **Background Military**

Per attached service history

## Response to Draft Report A Better Way to Support Veterans

Structure

Numerical responses are made against notations made from report.

- 1. Concur with findings cited regarding prevalence of mental health disorders for discharged members.<sup>1</sup>
- 2. It was unknown personally that invalidity pension provision is made through ADF Super.<sup>2</sup>
- 3. Dual SOP's for peacetime and operation with differing standards of proof are inequitable.<sup>3</sup> Physical and mental deterioration of service personnel can occur pre, during and post operational periods. Dual SOP's appear inequitable, parties should acknowledge environmental conditions (operational tempo, conditions and task requirements) may lead to harm. It may encourage a

<sup>1</sup> Box 2.11, DVA Mental Health Prevalence and Well being study. A Better Way to Support Veterans Productivity Commission Draft Report pg. 103.

<sup>&</sup>lt;sup>2</sup> Box 3.2, About the military superannuation schemes. A Better Way to Support Veterans Productivity Commission Draft Report pg. 122.

<sup>&</sup>lt;sup>3</sup> Bullet point one and two, A Better Way to Support Veterans Productivity Commission Draft Report pg. 126.

- crystallisation of conditions (claim) in more favourable standard of proof v. actual deterioration. It was unknown personally that dual SOP's exist.
- 4. Concur under reporting of incidents occur towards percentages cited.<sup>4</sup> Under reporting of incidents, lack of creation of AC563's was observed during service time. During my period of service we joked amongst ourselves about who has the thinnest medical file. These findings should not be found to be contentious and acknowledged as reality. In civilian setting I am an operational manager in the mining industry and we would operate to similar percentile underreporting.
- 5. Concur...with the Commission's view that a serious deficiency in DVA's rehabilitation program is its lack of focus on outcomes.<sup>5</sup> My circumstances evince no rehabilitation offered by Australian Army in service 2010 to 2018<sup>6</sup>, no rehabilitation outcomes to assess surgical outcomes between 2015 and 2018 (claims periods) by DVA. DVA outsource the 'doing' part of their service to contractors like Konekt. It appears the harder service provision like rehabilitation is outsourced by DVA to contractors. My circumstances in 2018 evince complete failure by DVA and contractor Konekt to manage rehabilitation plan.<sup>7</sup> I concur with Draft Recommendation 6.2.<sup>8</sup>
- 6. Improved commissioning of rehabilitation services may be through Defence and DVA taking ownership for what they have created. An alternate example is outsourcing of United Kingdom prisoner and parole care to private contractors. All metrics and the viability of private contractor companies are reflected poorly. When rehabilitation failure occurs (as in my case) by DVA and Konekt it is me who suffers harm and distrust in DVA and its staff. 10
- 7. This submission is made as a former Army Reserve member<sup>11</sup> subject to Notice of Separation November 2018. I'd argue that the Australian Army failed to manage my medical needs in service and rehabilitation<sup>12</sup>. I'd argue that I could still be providing effective service if treatment was provided.

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<sup>&</sup>lt;sup>4</sup> Underreporting of injury and illness in the Sentinel system. A Better Way to Support Veterans Productivity Commission Draft Report paragraph 1 pg. 193.

<sup>&</sup>lt;sup>5</sup> A Better Way to Support Veterans Productivity Commission Draft Report pg. 238.

<sup>&</sup>lt;sup>6</sup> *Discharge.pdf*. 11 December 2018.

<sup>&</sup>lt;sup>7</sup> *DVAAMG.pdf*. Ministerial Grievance. 17 December 2018.

<sup>&</sup>lt;sup>8</sup> Draft Recommendations 6.2. A Better Way to Support Veterans Productivity Commission Draft Report pg. 239

<sup>&</sup>lt;sup>9</sup> Cited frequently see generally *Private Eye Magazine UK*.

<sup>&</sup>lt;sup>10</sup> *DVAAMG.pdf*. Ministerial Grievance. 17 December 2018.

<sup>&</sup>lt;sup>11</sup> Information Request 7.3. A Better Way to Support Veterans Productivity Commission Draft Report pg. 305.

<sup>&</sup>lt;sup>12</sup> Discharge.pdf. 11 December 2018.

8. Concur with finding of *poor administration has undermined DVA's reputation*.<sup>13</sup> If I was to surmise this entire matter it is the expectation by DVA staff that you know. That you know the process, how it works and how to conduct yourself. They (DVA) stay silent at all times and never assist to educate you. The claims process indelibly harms me as an applicant<sup>14</sup>.

## Experience so Far

One doesn't know, calls to DVA are met with umbridge<sup>15</sup>, given claims papers one is unfamiliar with (applicability of legislation SCRA, MRCA), the paperwork is riddled with unnecessary duplication, tedium I'd argue to break the applicant at first instance.

# Reform underway with DVA<sup>16</sup>

It is reprehensible that standard form documents used by DVA (claims, travel expenses) are not cited with expiry or review dates as exists with companies in private sector or basic document control practices for efficacy.

Document control process should be subject to a representative Veterans signoff. The thousands of incidents and safe work practices I have been party to in review as Quarry Manager require Health and Safety Representative signoff alongside other parties. DVA should be required that standard forms reviewed by Veteran or Veteran Advocate for approval per proper document control practices.

- 9. Concur with findings of *incentive for Defence to shift cost of long term injuries* and illness to DVA.<sup>17</sup> My circumstances evince this cross shift.<sup>18</sup> I have seen this as a serving Medical Assistant in operational and peacetime settings.<sup>19</sup> In early 1999 an Army Medical doctor instructed me, "....photocopy and give to this member his medical records.....they will be likely have bits missing, go missing or be destroyed by the time they get to Canberra."<sup>20</sup> This circumstance was of mentally (mefloquine prescribed) and physically broken young Army servicemen on early return from war like service in East Timor.
- 10. Concur that premium should be used annually by Defence in a Future Fund<sup>21</sup> like manner. This suggestion by Productivity Commission is logical and has foresight to cover present and future costs. Defence should self insure its service employees, we can do it in alternate high risk working environment in mining industry by large mining houses.

<sup>19</sup> Actual and observational experience 1995 to 2009 as cited service history.

<sup>&</sup>lt;sup>13</sup> A Better Way to Support Veterans Productivity Commission Draft Report pg. 351-353

<sup>&</sup>lt;sup>14</sup> *Discharge.pdf.* 11 December 2018 conclusion last paragraph.

<sup>&</sup>lt;sup>15</sup> Ad hoc telephone calls post active service East Timor 2000 – 2018.

<sup>&</sup>lt;sup>16</sup> See generally ICT, Veteran Centric reforms as cited within, A Better Way to Support Veterans Productivity Commission Draft Report.

<sup>&</sup>lt;sup>17</sup> A Better Way to Support Veterans Productivity Commission Draft Report pg. 443.

<sup>&</sup>lt;sup>18</sup> *Discharge.pdf.* 11 December 2018.

<sup>&</sup>lt;sup>20</sup> Record of conversation Aaron Gray Medical Assistant 11/28 RWAR and Army Medical Officer 1999 in confidence.

<sup>&</sup>lt;sup>21</sup> Future Fund created by then Treasurer Peter Costello to cover Commonwealth Superannuation liabilities.

- 11. It was unknown personally to date that interim impairment compensation may be available to me having read this in Report. 22 Per underlined section of submission Point 8 this new knowledge creates stressor of now having to investigate and make claim.
- 12. Dual Superannuation invalidity pensions versus tri Act invalidity pension<sup>23</sup> is complicated, inequitable and requires reform.
- 13. Under DVA I have been admitted to hospital twice 2015 and late 2018 and have never been provided a Veteran Liaison Officer<sup>24</sup> as required. The failure of proper discharge planning by DVA and Konekt<sup>25</sup> caused anguish that I wish I never had surgery in late 2018.
- 14. Concur ...eligibility criteria are a blunt instrument where an ideal system be needs based.<sup>26</sup> I cite my present grievance on need for temporary transport concession being wholly ignored by State Minister<sup>27</sup>.
- 15. In my submission at Point 8 I cite adverse effect poorly drafted documents cause applicants. I note Medical Practitioners administering service are also adversely affected by DVA paperwork<sup>28</sup>.

<sup>&</sup>lt;sup>22</sup> A Better Way to Support Veterans Productivity Commission Draft Report pg. 477.

Box 12.3. Superannuation invalidity pensions. A Better Way to Support Veterans Productivity Commission
Draft Report pg. 484.
Private hospitals. A Better Way to Support Veterans Productivity Commission Draft Report paragraph two,

<sup>&</sup>lt;sup>24</sup> Private hospitals. A Better Way to Support Veterans Productivity Commission Draft Report paragraph two, page 564.

<sup>&</sup>lt;sup>25</sup> Discharge.pdf. 11 December 2018.

<sup>&</sup>lt;sup>26</sup> A Better Way to Support Veterans Productivity Commission Draft Report. pg. 573.

<sup>27</sup> MG.ndf

<sup>&</sup>lt;sup>28</sup> Paragraph 4-6 A Better Way to Support Veterans Productivity Commission Draft Report. pg. 598.

### **General concluding commentary**

I concur wholly with Productivity Commissions' strident and adverse findings against Defence and DVA.<sup>29</sup> I would never have enlisted in Australian Army and served had I known what was before me.

Unable to find within the report address / change of inherent culture required through re induction and retraining of existing staff in Defence and DVA. Having been a leader in culture change of large operational mine sites unless subjective culture changes of employees high level leadership change is symbolic only.

The structural failings within Defence and DVA<sup>30</sup> should be flagged as a high risk organisation within government. High risk flagging against operational mine sites occurs in mining industry. When a site is identified as high risk tight operational oversight occurs from operational perspective and can lead to permanent shutdown.<sup>31</sup> I would question whether it Defence is a fit and proper employer of new enlistees under present circumstances.

Yours sincerely,

AARON MALCOLM GRAY LL.B. CPQM.

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<sup>&</sup>lt;sup>29</sup> Summing Up. A Better Way to Support Veterans Productivity Commission Draft Report. Paragraph two page. 598

<sup>&</sup>lt;sup>30</sup> Summing Up. A Better Way to Support Veterans Productivity Commission Draft Report. Paragraph two page. 598.

<sup>&</sup>lt;sup>31</sup> Permanent shutdown BHPBilliton (BHPB WAIO) Yarrie Iron Ore mines 2013, identified with fatal risk profile unacceptable to BHPB WAIO. Conversation with Corporate leader BHPB (internal in confidence) 2013.