RETURNED & SERVICES LEAGUE OF AUSTRALIA VICTORIAN BRANCH INC. ABN 73 941 765 364 REG NO A0028777L

ABIN 73 341 703 304 INEO NO A0020777

PATRON: HER MAJESTY THE QUEEN
STATE PRESIDENT: DR ROBERT WEBSTER OAM



The Returned & Services League of Australia (Victorian Branch) Inc Response to The Productivity Commission Draft Report – December 2018

The Victorian Branch of the RSL welcomes the opportunity to provide a response to the recommendations of the Productivity Commission Draft Report, and the Report's overall tone and intent. The following submission, by way of response indicates support or otherwise on each recommendation, and explanatory comment where appropriate has been provided. The Victorian Branch has consulted within our Sub-Branch Network and in particular taken into account the considered views of practitioners who as RSL Advocates, deal directly with our Veteran client base and their interface with the Department of Veteran Affairs and their perspective on the journey from Defence service to DVA engagement.

In preparing this submission and commenting on the Productivity Commission Draft Report recommendations, the Branch has applied the following broad principles:

- Firstly, that there should be no detriment to any existing group of veterans, or individual veterans now or in future affected by a recommendation.
- Secondly, we are likely to support recommendations that expedite or simplify the application/ decision chain for a veteran seeking Commonwealth Government support for a service-related issue.
- Thirdly, as the retention of a structurally separate Department of Veteran Affairs is important to
 the wellbeing and sense of worth of very many current veterans the Branch is not supportive of
 any recommendation that changes the Department's current status, or recommendations that
 transfer other current DVA functions such as major veteran commemorative occasions,
 educative material that supports this community recognition and understanding, and the
 current War Graves responsibility.

Notwithstanding the Branch support for the retention of a separate Department of Veteran Affairs, those recommendations that have as their purpose;

- (a) a more seamless transition from Defence service to "life after" Defence service,
- (b) to better inform the provision of support for Veterans,
- (c) to better integrate the continuation of policy from still serving to preparing for transition and then "stepping out",
- (d) the harmonisation of discharge procedures and transition treatment of individuals across the ADF, and
- (e) incentives or mechanisms designed to enable Defence to improve the health, wellbeing and rehabilitation outcomes of serving personnel and those transitioning

are broadly supported to the extent these are still practicable or adaptable to the status quo of a Department of Veteran Affairs that is still structurally separate, but certainly more closely integrated with Defence. Accordingly, the Branch also supports a portfolio of Minister for Veterans and Defence Personnel.

The Branch position in this regard also recognises that DVA's current Transformation Project is generating tangible and effective improvements in the Veteran experience of dealing with DVA and a more seamless transition journey, though more remains to be done.

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The Victorian Branch's view is that the DVA Transformation needs to be given the time to demonstrate outcomes against all the proposed milestones it has set itself and then be independently reviewed before any fundamental restructure such as that proposed is undertaken. Again, this does not preclude positive steps being taken now to better integrate DVA with Defence, and the Branch consequently supports several of the Productivity Commission recommendations that further this aim.

The Branch is pleased to see the Productivity Commission Draft Report acknowledge the unique nature of military service, with exposure to mortal danger and unlimited commitment as the norm in many circumstances when Government deploys military force/s.

Veteran representation at an appropriate level on the Productivity Commission team preparing this Report should have been considered, and this would have been particularly useful in the discussion and consideration around a workers compensation approach to levying a premium on Defence to incentivize the avoidance of unnecessary or avoidable injury or stress to serving personnel - an approach which must be carefully calibrated to take account of Defence's obligation to employ military force as and when the Commonwealth Government directs. Importantly, if supported by Government, any such premium extracted from Defence on an annual basis, to help support Veterans with service-related injuries, would arguably be more transparently accounted for, transferred and utilised for the intended purpose, if the Department of Veteran Affairs were to remain a discrete Commonwealth agency.

The Victorian Branch of the RSL is of course available to respond to any further communication from the Productivity Commission in relation to our commentary on the Draft Report.

Michael Annett Chief Executive Officer

DRAFT RECOMMENDATION 4.1 SUPPORTED

The overarching objective of the veteran support system should be to improve the wellbeing of veterans and their families (including by minimising the physical, psychological and social harm from service) taking a whole-of-life approach. This should be achieved by:

- preventing or minimising injury and illness
- restoring injured and ill veterans by providing timely and effective rehabilitation and health care so they can participate in work and life
- providing effective transition support as members leave the Australian Defence Force
- enabling opportunities for social integration
- providing adequate and appropriate compensation for veterans (or if the veteran dies, their family) for pain and suffering, and lost income from service-related injury and illness.

The principles that should underpin a future system are:

- wellness focused (ability not disability)
- equity
- veteran centric (including recognising the unique needs of veterans resulting from military service)
- needs based
- evidence based
- administrative efficiency (easy to navigate and achieves timely and consistent assessments and decision making)
- financial sustainability and affordability.

The objectives and underlying principles of the veteran support system should be set out in the relevant legislation.

DRAFT RECOMMENDATION 4.1 Comment.

The RSL Victorian Branch makes the following comment/s:

An overarching objective of the veteran support system should be to improve the wellbeing of veterans and their families (including by minimising the physical, psychological and social harm from service) taking a whole-of-life approach is largely supported, however, the method of achieving this is a matter of some contestation

The major point is in the second dot point. The RSL Victorian Branch believes that veterans should be provided with best practice evidence-based rehabilitation to restore them back to full-time service.

This evidence should be available for perusal on the relevant Government website.

DRAFT RECOMMENDATION 5.1 SUPPORTED

Defence should investigate the feasibility and cost of augmenting the Sentinel database with information from the Defence eHealth System. In the longer term, when Defence commissions the next generation of the Defence eHealth System, it should include in the system requirements ways to facilitate the capture of work health and safety data.

The Departments of Defence and Veterans' Affairs should investigate the feasibility and cost of augmenting the Sentinel database with information from the Department of Veterans' Affairs' datasets, which would provide insights into the cost of particular injuries and illnesses.

DRAFT RECOMMENDATION 5.1 Comment.

The RSL Victorian Branch supports this recommendation.

Sentinel reporting must be mandatory for all ADF personnel. Augmenting or including Sentinel reports of injury or disease into member's ADF Health Records may be useful to the Department of Veterans'

Affairs (DVA) claims process, the information may be useful in identifying trauma or date of onset. Ideally, the DVA delegates should be able to access the Sentinel Records via a single point of contact.

DRAFT RECOMMENDATION 5.2 SUPPORTED

Defence should use the injury prevention programs being trialled at Lavarack and Holsworthy Barracks as pilots to test the merit of a new approach to injury prevention to apply across the Australian Defence Force (ADF).

Defence should adequately fund and support these programs and ensure that there is a comprehensive and robust cost-benefit assessment of their outcomes.

If the cost-benefit assessments are substantially positive, injury prevention programs based on the new approach should be rolled out across the ADF by Defence.

DRAFT RECOMMENDATION 5.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation (Note we need to investigate this more) noting that this is a key Defence outcome in terms of force preservation / capability.

DRAFT RECOMMENDATION 5.3. SUPPORTED

Beginning in 2019, the Australian Government should publish the full annual actuarial report that estimates notional workers' compensation premiums for Australian Defence Force members (currently produced by the Australian Government Actuary).

DRAFT RECOMMENDATION 5.3 Comment.

The RSL Victorian Branch makes the following comment/s:

Any implementation of Draft Recommendation 11.5 needs to draw on this data in a calibrated way as per our related commentary on 11.5.

DRAFT RECOMMENDATION 6.1 SUPPORTED

The Australian Defence Force Joint Health Command should report more extensively on outcomes from the Australian Defence Force Rehabilitation Program in its Annual Review publication.

DRAFT RECOMMENDATION 6.1 Comment.

The RSL Victorian Branch makes the following comment/s:

We support this recommendation, however, one of the barriers for male soldiers 18-24 is the stigma associated with undergoing rehabilitation. Education regarding the aim of rehabilitation needs to be addressed and repositioning of culture needs to be implemented.

DRAFT RECOMMENDATION 6.2 SUPPORTED

The Department of Veterans' Affairs should make greater use of the rehabilitation data that it collects and of its reporting and evaluation framework for rehabilitation services. It should:

- evaluate the efficacy of its rehabilitation and medical services in improving client outcomes
- compare its rehabilitation service outcomes with other workers' compensation schemes (adjusting for variables such as degree of impairment, age, gender and difference in time between point of injury and commencement of rehabilitation) and other international military schemes.

DRAFT RECOMMENDATION 6.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation.

DRAFT RECOMMENDATION 6.3 SUPPORTED

Defence and the Department of Veterans' Affairs need to engage more with rehabilitation providers, including requiring them to provide evidence-based approaches to rehabilitation, and to monitor and report on treatment costs and client outcomes.

Changes are also required to the arrangements for providing and coordinating rehabilitation immediately prior to, and immediately post, discharge from the Australian Defence Force (ADF). Rehabilitation services for transitioning personnel across this interval should be coordinated by Joint Transition Command (draft recommendation 7.1). Consideration should also be given to providing rehabilitation on a non-liability basis across the interval from ADF service to determination of claims post service

DRAFT RECOMMENDATION 6.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation.

DRAFT RECOMMENDATION 7.1 SUPPORTED

The Australian Government should recognise that Defence has primary responsibility for the wellbeing of discharging Australian Defence Force members, and this responsibility may extend beyond the date of discharge. It should formalise this recognition by creating a 'Joint Transition Command' within Defence.

Joint Transition Command would consolidate existing transition services in one body, with responsibility for preparing members for, and assisting them with, their transition to civilian life. Functions of Joint Transition Command should include:

- preparing serving members and their families for the transition from military to civilian life
- providing individual support and advice to veterans as they approach transition
- ensuring that transitioning veterans receive holistic services that meet their individual needs, including information about, and access to, Department of Veterans' Affairs' processes and services, and maintaining continuity of rehabilitation supports
- remaining an accessible source of support for a defined period after discharge
- reporting on transition outcomes to drive further improvement.

DRAFT RECOMMENDATION 7.1 Comment.

The RSL Victorian Branch makes the following comment/s:

We support the overall concept. Transition should start before separation, during separation and for a determinable period after separation. Transition varies in its effectiveness between Navy, Army and Air Force. The formation of a Joint Transition Command would better coordinate transition across all three services.

DRAFT RECOMMENDATION 7.2 SUPPORTED

Defence, through Joint Transition Command (draft recommendation 7.1), should:

- require Australian Defence Force members to prepare a career plan that covers both their service and post service career, and to update that plan at least every two years
- prepare members for other aspects of civilian life, including the social and psychological aspects of transition
- reach out to families, so that they can engage more actively in the process of transition.

DRAFT RECOMMENDATION 7.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 7.3 SUPPORTED

The Department of Veterans' Affairs should support veterans to participate in education and vocational training once they leave the Australian Defence Force. It should trial a veteran education allowance for veterans undertaking full time education or training.

DRAFT RECOMMENDATION 7.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 8.1 PARTIALLY SUPPORTED

The Australian Government should harmonise the initial liability process across the three veteran support Acts. The amendments should include:

- making the heads of liability and the broader liability provisions identical under the Veterans'
 Entitlements Act 1986 (VEA), the Safety, Rehabilitation and Compensation (Defence-related
 Claims) Act 1988 (DRCA) and the Military Rehabilitation and Compensation Act 2004 (MRCA).
- applying the Statements of Principles to all DRCA claims and making them binding, as under the MRCA and VEA.
- adopting a single standard of proof for determining causality between a veteran's condition and their service under the VEA, DRCA and MRCA.

DRAFT RECOMMENDATION 8.1 Comment.

The RSL Victorian Branch makes the following comment/s:

Point 1 - supported - balance of probability

Point 2 – supported

Point 3 – Not supported - No disadvantage test (reasonable hypothesis). If a single standard of proof is required for determining causality between a veterans' condition and their service under the VEA, DRCA, or MRCA, that means adopting a single set of Statements of Principles (SOP).

DRAFT RECOMMENDATION 8.2 SUPPORTED

The Australian Government should amend the Veterans' Entitlements Act 1986 (VEA) to allow the Repatriation Medical Authority (RMA) the legal and financial capacity to fund and guide medical and epidemiological research into unique veteran health issues, such as through a research trust fund.

Following any investigation, the RMA should be required to publish the list of peer reviewed literature or other sound medical scientific evidence used, as well as outline how different pieces of evidence were assessed and weighed against each other. This may require legislative amendments to the VEA. Additional resources should also be given to the RMA, so that the time taken to conduct reviews and investigations can be reduced to around six months.

DRAFT RECOMMENDATION 8.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We would support this recommendation

DRAFT RECOMMENDATION 9.1 SUPPORTED

The Department of Veterans' Affairs should report publicly on its progress in implementing recommendations from recent reviews (including the 2018 reports by the Australian National Audit Office and the Commonwealth Ombudsman) by December 2019.

DRAFT RECOMMENDATION 9.1 Comment.

The RSL Victorian Branch believes such an assessment should be undertaken by an independent Commonwealth agency or external consultant.

DRAFT RECOMMENDATION 9.2 SUPPORTED

The Department of Veterans' Affairs should ensure that staff, who are required to interact with veterans and their families, undertake specific training to deal with vulnerable people and in particular those experiencing the impacts of trauma.

DRAFT RECOMMENDATION 9.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We strongly support this recommendation.

DRAFT RECOMMENDATION 9.3 NOT SUPPORTED

If the Department of Veterans' Affairs' quality assurance process identifies excessive error rates (for example, greater than the Department's internal targets), all claims in the batch from which the sample was obtained should be recalled for reassessment.

DRAFT RECOMMENDATION 9.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We partially support the recommendation with the caveat that those claims with the excessive error batch that were successful **NOT** be reassessed

DRAFT RECOMMENDATION 10.1 SUPPORTED

The Department of Veterans' Affairs (DVA) should ensure that successful reviews of veteran support decisions are brought to the attention of senior management for compensation and rehabilitation claims assessors, and that accuracy of decision making is a focus for senior management in reviewing the performance of staff.

Part 1 – fully supported

Where the Veterans' Review Board (VRB) identifies an error in the original decision of DVA, it should clearly state that error in its reasons for varying or setting aside the decision on review.

Part 2 – fully supported

The Australian Government should amend the Veterans' Entitlements Act 1986 to require the VRB to report aggregated statistical and thematic information on claims where DVA's decisions are varied through hearings or alternative dispute resolution processes. This reporting should cover decisions of the Board, as well as variations made with the consent of the parties through an alternative dispute resolution process. This should be collected and provided to DVA on a quarterly basis and published in the VRB's annual report.

Part 3 – supported

DVA should consider this reporting and respond by making appropriate changes to its decision-making processes.

Part 4 - supported

DRAFT RECOMMENDATION 10.1 Comment.

See Above comments

DRAFT RECOMMENDATION 10.2 SUPPORTED

The Australian Government should introduce a single review pathway for all veteran's compensation and rehabilitation decisions. The pathway should include:

- internal reconsideration by the Department of Veterans' Affairs. In this process, a different and more senior officer would clarify the reasons why a claim was not accepted (partially or fully); request any further information the applicant could provide to fix deficiencies in the claim, then make a new decision with all of the available information
- review and resolution by the Veterans' Review Board, in a modified role providing alternative dispute resolution services only (draft recommendation 10.3) **NOT SUPPORTED**
- merits review by the Administrative Appeals Tribunal
- judicial review in the Federal Court of Australia and High Court of Australia.

DRAFT RECOMMENDATION 10.2 Comment.

The RSL Victorian Branch makes the following comment/s:

Point 1 – Fully support

Point 2 - Not supported

Point 3 – Fully supported

Point 4 – Fully supported

DRAFT RECOMMENDATION 10.3 NOT SUPPORTED

The Australian Government should amend the role and procedures of the Veterans' Review Board (VRB).

Rather than making decisions under the legislation, it would serve as a review and resolution body to resolve claims for veterans. All current VRB alternative dispute resolution processes would be available (including party conferencing, case appraisal, neutral evaluation and information-gathering processes) together with other mediation and conciliation processes. A single board member could recommend the correct and preferable decision to be made under the legislation, and the Department of Veterans' Affairs and the claimant could consent to that decision being applied in law.

Cases that would require a full board hearing under the current process, or where parties fail to agree on an appropriate alternative dispute resolution process or its outcomes, could be referred to the Administrative Appeals Tribunal.

Parties to the VRB resolution processes should be required to act in good faith.

DRAFT RECOMMENDATION 10.3 Comment:

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation. The Veterans Review Board operates well as an independent review of Departmental decisions. The Veterans Review Board is a lay person's tribunal. It does not have strict adherence to the rules of evidence.

However, in recent years the Veterans Review Board has been strangled by budgetary constraints and the alternative dispute resolution functions process is costly.

The Veterans' Review Board needs to be funded to do its job appropriately.

DRAFT RECOMMENDATION 10.4. NOT SUPPORTED

The Australian Government should conduct a further review in 2025 on the value of the continuing role of the Veterans' Review Board, once significant reforms to the initial claim process for veterans are established. In particular, the review should consider whether reforms have reduced the rate at which initial decisions in the veteran support system are varied on review. If the review finds that the Board is no longer playing a substantial role in the claims process, the Australian Government should bring the alternative dispute resolution functions of the Board into the Department of Veterans' Affairs or its successor agency.

DRAFT RECOMMENDATION 10.4, Comment. The current review process within DVA such as Section 31 of the VEA does not produce the results the Veterans Review Board do.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation

DRAFT RECOMMENDATION 11.1 PARTIAL SUPPORT

A new 'Veteran Policy Group', headed by a Deputy Secretary, should be created in Defence with responsibility for veteran support policies and strategic planning.

Ministerial responsibility for Veterans' Affairs should be vested in a single Minister for Defence Personnel and Veterans within the Defence portfolio.

DRAFT RECOMMENDATION 11.1 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support the creation of a veteran policy group

We support the intent of the proposal to better align policies that affect serving transitioning and exserving personnel and the proposed dual role minister would facilitate that.

As we support the retention of a separate Department of Veteran Affairs this in effect could be achieved through the creation of an interdepartmental working group co-chaired by appropriate Dep Secs from Defence and DVA reporting to the Minister.

DRAFT RECOMMENDATION 11.2 NOT SUPPORTED

The Australian Government should establish a new independent Commonwealth Statutory Authority, the Veteran Services Commission (VSC), to administer the veteran support system. It should report to the Minister for Defence Personnel and Veterans and sit within the Defence portfolio (but not within the Department of Defence).

An independent board should oversee the VSC. The board should be made up of part time Commissioners appointed by the Minister who have a mixture of skills in relevant civilian fields, such as insurance, civilian workers' compensation and project management, as well as some with an understanding of military life and veteran issues. The board should have the power to appoint the Chief Executive Officer (responsible for the day to-day administration).

The functions of the VSC should be to:

- achieve the objectives of the veteran support system (draft recommendation 4.1) through the efficient and effective administration of all aspects of that system
- manage, advise and report on outcomes and the financial sustainability of the system, in particular, the compensation and rehabilitation schemes
- make claims determinations under all veteran support legislation
- enable opportunities for social integration
- fund, commission or provide services to veterans and their families.

The Australian Government should amend the Veterans' Entitlements Act 1986 and the Military Rehabilitation and Compensation Act 2004 to abolish the Repatriation Commission and Military Rehabilitation and Compensation Commission upon the commencement of the VSC.

DRAFT RECOMMENDATION 11.2 Comment

We do not support this recommendation in its current form but as a forward-looking reform, believe that with adaptation the VSC could be configured / nested to functionally deliver the stated objectives within the existing Departmental structure, under the supervision of the Repatriation Commissioners.

What is needed is to ensure that the Repatriation Commissioners get onboard and support the "Veteran Centric Reform" DVA process and not spend large amounts of tax-payer monies funding court cases.

DRAFT RECOMMENDATION 11.3 SUPPORTED

The Australian Government should establish a Veterans' Advisory Council to advise the Minister for Defence Personnel and Veterans on veteran issues, including the veteran support system.

The Council should consist of part-time members from a diverse range of experiences, including civilians and veterans with experience in insurance, workers' compensation, public policy and legal fields.

DRAFT RECOMMENDATION 11.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We support this recommendation and believe it would enhance the current DVA Transformation project, especially the Veteran Centric objectives.

DRAFT RECOMMENDATION 11.4 NOT SUPPORTED

The Australian War Memorial (AWM) already plays a significant and successful role in commemoration activities. As a consequence of the proposed governance and administrative reforms, the Australian Government should transfer primary responsibility for all commemoration functions to the AWM, including responsibility for the Office of Australian War Graves.

DRAFT RECOMMENDATION 11.4 Comment This would require a massive restructure of the AWM management and facilities.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation. This significant change would not necessarily deliver better commemorative outcomes in places other than at the AWM, and on the cusp of a very significant AWM

extension project, could disrupt the singular focus on world leading displays and exhibits that the AWM currently delivers.

The War Graves responsibility is currently well managed and resourced within DVA.

DRAFT RECOMMENDATION 11.5 NOT SUPPORTED

Once the new governance arrangements in draft recommendations 11.1 and 11.2 have commenced, the Australian Government should make the veteran support system a fully funded compensation system going forward. This would involve levying an annual premium on Defence to enable the Veteran Services Commission to fund the expected future costs of the veteran support system due to service-related injuries and illnesses incurred during the year.

DRAFT RECOMMENDATION 11.5 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation without significant further analysis and consideration as to the clear distinction between service related injuries / illness connected to combat operations and all other Defence activity, for which a "premium" might be considered a positive incentive for Defence planners, commanders and managers. We do not agree that any such premium should be relied upon to <u>fully fund</u> the compensation system going forward, and this should not be considered the core purpose of any such premium.

DRAFT RECOMMENDATION 12.1 PARTIAL SUPPORT

The Australian Government should harmonise the compensation available through the Safety, Rehabilitation and Compensation (Defence-related Claims) Act 1988 (DRCA) with that available through the Military Rehabilitation and Compensation Act 2004. This would include harmonising the processes for assessing permanent impairment, incapacity and dependant benefits, as well as the range of allowances and supplements.

Existing recipients of DRCA permanent impairment compensation and dependant benefits should not have their permanent impairment entitlements recalculated.

Access to the Gold Card should not be extended to those eligible for benefits under the DRCA.

DRAFT RECOMMENDATION 12.1 Comment.

The RSL Victorian Branch makes the following comment/s:

Part 1 – Fully support provided there is no disadvantage

Part 2 – This commentary required further clarification n the context of this "recalculation"

Part 3- We do not support this recommendation

DRAFT RECOMMENDATION 12.2 SUPPORTED

The Department of Veterans' Affairs (DVA) and the Commonwealth Superannuation Corporation (CSC) should work together to streamline the administration of superannuation invalidity pensions and veteran compensation, including by:

- moving to a single 'front door' for invalidity pensions and veteran compensation
- moving to a single medical assessment process for invalidity pensions and veteran compensation
- developing information technology systems to facilitate more automatic sharing of information between DVA and CSC.

With the establishment of the proposed Veteran Services Commission (draft recommendation 11.2), consideration should be given to whether it should administer the CSC invalidity pensions.

DRAFT RECOMMENDATION 12.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 13.1 PARTIAL SUPPORT

The Australian Government should amend the Military Rehabilitation and Compensation Act 2004 to remove the requirement that veterans with impairments relating to warlike and non-warlike service receive different rates of permanent impairment compensation from those with peacetime service.

The Department of Veterans' Affairs should amend tables 23.1 and 23.2 of the Guide to Determining Impairment and Compensation to specify one rate of compensation to apply to veterans with warlike, non-warlike and peacetime service.

DRAFT RECOMMENDATION 13.1 Comment.

The RSL Victorian Branch makes the following comment/s:

This recommendation is supported but the "no detriment" test should apply.

DRAFT RECOMMENDATION 13.2 NOT SUPPORTED

The Australian Government should amend the Military Rehabilitation and Compensation Act 2004 to remove the option of taking interim permanent impairment compensation as a lump-sum payment. The Act should be amended to allow interim compensation to be adjusted if the impairment stabilises at a lower or higher level of impairment than what is expected within the determination period.

DRAFT RECOMMENDATION 13.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation

DRAFT RECOMMENDATION 13.3 SUPPORTED

The Australian Government should amend the Military Rehabilitation and Compensation Act 2004 to allow the Department of Veterans' Affairs the discretion to offer veterans final permanent impairment compensation if two years have passed since the date of the permanent impairment claim, but the impairment is expected to lead to a permanent effect, even if the impairment is considered unstable at that time. This should be subject to the veteran undertaking all reasonable rehabilitation and treatment for the impairment.

DRAFT RECOMMENDATION 13.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 13.4 NOT SUPPORTED

The Australian Government should amend the Military Rehabilitation and Compensation Act 2004 to remove the permanent impairment lump sum payments to the veteran for dependent children and other eligible young persons.

DRAFT RECOMMENDATION 13.4 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation.

DRAFT RECOMMENDATION 13.5 SUPPORTED

The Department of Veterans' Affairs should review its administration of lifestyle ratings in the Military Rehabilitation and Compensation Act 2004 (MRCA), to assess whether the use of lifestyle ratings could be improved.

If the use of lifestyle ratings cannot be improved, the Australian Government should amend the MRCA and the Guide to Determining Impairment and Compensation to remove the use of lifestyle ratings and provide veterans permanent impairment compensation consistent with the lifestyle ratings that are currently usually assigned for a given level of impairment. Existing recipients of permanent impairment compensation should not have their compensation reassessed.

DRAFT RECOMMENDATION 13.5 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 13.6 NOT SUPPORTED

The Australian Government should amend the Military Rehabilitation and Compensation Act 2004 to remove the option of taking the Special Rate Disability Pension. Veterans that have already elected to receive the Special Rate Disability Pension should continue to receive the payment.

DRAFT RECOMMENDATIONS 13.6 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation

DRAFT RECOMMENDATION 13.7 NOT SUPPORTED

The Australian Government should amend the Military Rehabilitation and Compensation Act 2004 (MRCA) to remove automatic eligibility for benefits for those dependants whose partner died while they had permanent impairments of more than 80 points or who were eligible for the MRCA Special Rate Disability Pension.

DRAFT RECOMMENDATION 13.7 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation

DRAFT RECOMMENDATION 13.8 CLARIFICATION REQUIRED

The Australian Government should amend the Military Rehabilitation and Compensation Act 2004 to remove the additional lump sum payable to wholly dependent partners of veterans who died as a result of their service. The Australian Government should increase the wholly dependent partner compensation by the equivalent value of the lump sum payment (currently about \$115 per week) for partners of veterans where the Department of Veterans' Affairs has accepted liability for the veteran's death.

DRAFT RECOMMENDATION 13.8 Comment.

The RSL Victorian Branch makes the following comment/s:

Even after reading the accompanying notes we need further clarification on the intent.

DRAFT RECOMMENDATION 14.1 SUPPORTED

The Australian Government should amend the Social Security Act 1991 and relevant arrangements to exempt Department of Veterans' Affairs adjusted disability pensions from income tests for income support payments that are currently covered by the Defence Force Income Support Allowance (DFISA), DFISA Bonus and DFISA like payments. The Australian Government should remove the DFISA, DFISA Bonus and DFISA like payments from the Veterans' Entitlements Act 1986.

DRAFT RECOMMENDATION 14.1 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 14.2 REQUIRES FURTHER CONSIDERATION

To align education payments across the veteran support system, the Australian Government should amend the Veterans' Entitlements Act 1986 and the Military Rehabilitation and Compensation Act 2004 to remove education payments for those older than 16 years of age. Those who pass a means test will still be eligible for the same payment rates under the Youth Allowance.

To extend education payments for those under 16 years of age, the Australian Government should amend the Safety, Rehabilitation and Compensation (Defence related Claims) Act 1988 to adopt the Military Rehabilitation and Compensation Act Education and Training Scheme.

DRAFT RECOMMENDATION 14.2 Comment.

This could impact adversely on some dependants of Veterans both under and over the 16 years of age threshold and needs further analysis.

DRAFT RECOMMENDATION 14.3 NOT SUPPORTED

To help simplify the system, smaller payments should be consolidated where possible or removed where there is no clear rationale.

The Australian Government should remove the DRCA Supplement, MRCA Supplement and Veteran Supplement, and increase clients' payments by the equivalent amount of the supplement.

The Australian Government should remove the Energy Supplement attached to Department of Veterans' Affairs' impairment compensation, but other payments should remain consistent with broader Energy Supplement eligibility.

DRAFT RECOMMENDATION 14.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support this recommendation

DRAFT RECOMMENDATION 14.4 SUPPORTED

To streamline and simplify outdated payments made to only a few clients, they should be paid out and removed. The Australian Government should amend the Veterans' Entitlements Act 1986 to remove the recreation transport allowance, the clothing allowance and the decoration allowance and pay out those currently on the allowances with an age adjusted lump sum.

DRAFT RECOMMENDATION 14.4 Comment.

The RSL Victorian Branch makes the following comment/s

We support this recommendation

DRAFT RECOMMENDATION 14.5 SUPPORTED

The Australian Government should amend the Veterans' Entitlements Act 1986 (VEA) to remove the attendant allowance and provide the same household and attendant services that are available under the Military Rehabilitation and Compensation Act 2004 (MRCA).

Current recipients of the VEA allowance should be automatically put on the same rate under the new attendant services program. Any further changes or claims would follow the same needs-based assessment and review as under the MRCA.

DRAFT RECOMMENDATION 14.5 Comment.

The RSL Victorian Branch makes the following comment/s:

We support this recommendation

DRAFT RECOMMENDATION 14.6 SUPPORTED

The Australian Government should amend the Veterans' Entitlements Act 1986 Vehicle Assistance Scheme and section 39(1)(d) (the relevant vehicle modification section) in the Safety, Rehabilitation and Compensation (Defence related Claims) Act 1988 so that they reflect the Military Rehabilitation and Compensation Act 2004 Motor Vehicle Compensation Scheme.

DRAFT RECOMMENDATION 14.6 Comment.

The RSL Victorian Branch makes the following comment/s:

We support this recommendation

DRAFT RECOMMENDATION 15.1 NOT SUPPORTED

Eligibility for the Gold Card should not be extended to any new categories of veterans or dependants that are not currently eligible for such a card. No current Gold Card holder or person who is entitled to a Gold Card under current legislation would be affected.

DRAFT RECOMMENDATION 15.1 Comment.

The RSL Victorian Branch makes the following comment/s:

We do not support this full recommendation as there are still new eligibility categories that should be considered.

Introduction of a card that falls between the White and Gold Card arrangements is an option the Victorian Branch believes merits consideration.

A possible aid in the reduction of whole of life costs to the Commonwealth whilst simultaneously increasing the wellness of Veterans should be the aim of a such an initiative.

The current provisions and eligibility to a Gold Card should be retained to target the service-related health needs of the most vulnerable, injured and unwell Veterans.

Veterans who have qualifying service or Veterans with a service-related injury or illness that has been approved and accepted by the Commonwealth could be provided with an intermediate level Silver

Card. In effect, a mid-tier health care card could be facilitated through a taxpayer funded 'private' health insurer to deliver to Veterans the means to encourage a lifetime of wellness.

This would reduce the burden on the Commonwealth later in life - when an eligible Veteran receives a Gold Card – through the reduction in severity of chronic health conditions when it is most cost effective to treat them (early, quickly and simply).

DRAFT RECOMMENDATION 15.2 SUPPORTED

The Department of Veterans' Affairs should amend the payments for the Coordinated Veterans' Care Program so that they reflect the risk rating of the patient that they are paid for — higher payments for higher risk patients and lower payments for lower risk patients. Doctors should be able to request a review of a patient's risk rating, based on clinical evidence.

DRAFT RECOMMENDATION 15.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 15.3 SUPPORTED

The current (2013–2023) Veteran Mental Health Strategy has not been very effective and should be updated in light of recent policy changes (such as non-liability access) and research findings on emerging needs.

The Department of Veterans' Affairs (DVA) (in consultation with the Departments of Health and Defence) should urgently update the Veteran Mental Health Strategy, so that it guides policy development and implementation over the medium term. It should:

- be evidence based, including outcomes from policy trials and other research on veterans' mental health needs
- set out clear priorities, actions and ways to measure progress
- commit DVA to publicly report on its progress.

The Strategy should include ways to promote access to high quality mental health care, and to facilitate coordinated care for veterans with complex needs. It should also have suicide prevention as a focus area and explicitly take into account the mental health impacts of military life on veterans' families.

DRAFT RECOMMENDATION 15.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation.

This non-liability access should be for all who have served regardless of the nature/classification of their ADF service.

DRAFT RECOMMENDATION 15.4 SUPPORTED

The Department of Veterans' Affairs (DVA) should monitor and routinely report on Open Arms' outcomes and develop outcome measures that can be compared with other mental health services. Once outcome measures are established, DVA should review Open Arms' performance, including whether it is providing adequate, accessible and high-quality services to families of veterans.

DRAFT RECOMMENDATION 15.4 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 16.1 SUPPORTED

The Department of Veterans' Affairs should develop outcomes and performance frameworks that provide robust measures of the effectiveness of services. This should include:

- identifying data needs and gaps
- setting up processes to collect data where not already in place (while also seeking to minimise the costs of data collection)
- using data dictionaries to improve the consistency and reliability of data
- analysing the data and using this analysis to improve service performance.

DRAFT RECOMMENDATION 16.1 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 16.2 SUPPORTED

The Department of Veterans' Affairs should conduct more high-quality trials and reviews of its services and policies for veterans and their families by:

- evaluating services and programs (in ways that are commensurate with their size and complexity)
- publishing reviews, evaluations and policy trials, or lessons learned
- incorporating findings into future service design and delivery.

DRAFT RECOMMENDATION 16.2 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 16.3 SUPPORTED

The Department of Veterans' Affairs should set research priorities, publish the priorities in a research plan and update the research plan annually.

DRAFT RECOMMENDATION 16.3 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation

DRAFT RECOMMENDATION 17.1 SUPPORT

By 2025, the Australian Government should create two schemes for veteran support — the current Veterans' Entitlements Act 1986 (VEA) with some modifications ('scheme 1') and a modified Military Rehabilitation and Compensation Act 2004 (MRCA) that incorporates the Safety, Rehabilitation and Compensation (Defence-related Claims) Act 1988 (DRCA) ('scheme 2').

Eligibility for the schemes should be modified so that:

- veterans who only have a current or accepted VEA claim for liability at the implementation date will have all their future claims processed under scheme 1. Veterans on the VEA Special Rate of Disability Pension would also have their future claims covered by scheme 1. Veterans under 55 years of age as at the implementation date should be given the option to switch their current benefits and future claims to scheme 2
- veterans who only have a current or accepted MRCA and/or DRCA claim, (or who do not have a current or accepted liability claim under VEA) as at the implementation date will have their future claims covered under scheme 2. Other veterans on MRCA or DRCA incapacity payments would have their future claims covered by scheme 2

• remaining veterans with benefits under the VEA and one (or two) of the other Acts would have their coverage determined by the scheme which is the predominant source of their current benefits, or their age, at the implementation date.

Dependants of deceased veterans would receive benefits under the scheme in which the relevant veteran was covered by. If the veteran did not have an existing or successful claim under VEA as at the implementation date, the dependants would be covered by scheme 2.

Veterans who would currently have their claims covered by the pre-1988 Commonwealth workers' compensation schemes should remain covered by those arrangements through the modified MRCA legislation.

DRAFT RECOMMENDATION 17.1 Comment.

The RSL Victorian Branch makes the following comment/s:

We fully support this recommendation