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EVALUATION ADVISORY STUDY: RESERVE RECRUITING

August 2005

1258-139 (CRS)









SYNOPSIS

This report presents the results of a CRS study of Reserve recruiting. This Evaluation Advisory Study was undertaken pursuant to concern expressed by the Chief of the Land Staff that a seemingly bureaucratic process risked losing many potential Reserve recruit candidates. Note that this study does not have the rigour of a full evaluation, but is sufficient to make recommendations for consideration by senior leadership.

It was observed that many incremental changes have been made to the recruiting system, compressing timeframes while maintaining national standards and meeting national Reserve requirements. Through these initiatives, inefficiencies have been progressively reduced. The end result is a seven-week process for a "clean" file, a reduction from twelve weeks over the last four years. Additionally, based on a trial, this timeframe should be shortened by a further two weeks through tentative acceptance of individuals who have not yet cleared a final (i.e., Part 3) medical examination – thereby culminating in a five-week processing time for a clean file. The end result would be a processing time that compares favourably with our allies.

The study found that the existing recruiting system for Reservists has essentially been squeezed close to its limits, without compromising national standards. Substantial streamlining beyond that achieved to date will only come with fundamental changes (i.e., transformation) to the current system. Current recruiting levels can be maintained with marginal improvements through exploiting technology and by pursuing year-round recruiting. However, the risk is all too clear that significantly increased recruiting targets will stress and degrade the existing system. This has led the evaluation team to recommend a separate study to guide the definition of fundamental changes to/transformation of Reserve recruiting.

An existing obstacle to analysis and in-depth study is the lack of ongoing performance measurement of the system (i.e., recruiting and retention) – enhanced databases are required. Similarly, there would be benefit in further researching best practices within other defence forces and industry as well as analyzing attrition from the Reserve Force and from the recruiting process. Extended Recruiting timeframes are not the only reason that applicants may withdraw before successful recruitment is achieved. It is also recommended that a policy directive be issued to facilitate transfers between the Regular and Reserve Forces.

Management Action: The study recommendations are intended to build from those actions that can be completed in the relatively near term, to those more fundamental initiatives that should be addressed in the longer term. There is general acceptance, and certain action should be taken, respecting the need for improved information on the performance of the recruiting system, taking advantage of the trial on the timing of medical examinations, as well as the need to provide instruction to facilitate transfers between the Reserve and Regular Forces. It is posited that an electronic recruiting initiative will supplement existing information.

At this time, there has been little receptivity to conducting specific studies of Reserve attrition as well as a study to develop options to fundamentally re-conceptualize/transform the recruiting process. The Military Human Resource Group considers that much study, as well as ongoing awareness of best practices within other organizations, has already taken place. There may also be some reluctance to launch major change studies/initiatives in view of upcoming reporting by the Office of the Auditor General on a major audit of Recruiting and Retention for the Regular Force.

This CRS evaluation advisory study was undertaken to identify issues and offer recommendations for consideration. Accordingly, this report distinguishes the more focused recommendations from broader "suggestions" for improvement. Both are captured in matrix format.

Note: Subsequent to the completion of this Evaluation Advisory Study, and in conjunction with the larger CF Transformation activities currently underway, ADM(HR-Mil) has initiated a National Recruiting Campaign to meet surge recruiting requirements across the CF. The recommendations in this CRS Evaluation Advisory Study should be implemented in the context of the ADM(HR-Mil) Campaign in order that maximum benefit can be derived from the two efforts.

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RESULTS IN BRIEF

This report provides an independent assessment of the Reserve recruiting process. It was undertaken to respond to a continuing and long-term concern in the Reserve Community with what is perceived to be a risk-averse system, which results in the withdrawal or rejection of a large percentage of applicants. A key theme in the assessment is the need to find a balance between a timely recruitment process and rigorous application and maintenance of appropriate recruitment standards.

Since the year 2000, many improvements have been made to the recruitment process, while national standards have been maintained and Reserve Force recruitment targets continue to be met. As well, the time required for Reserve recruiting appears to compare favourably with that of allied militaries. Time for recruitment has been reduced recently from approximately twelve weeks to seven and each component in the process has been thoroughly analyzed for further reduction. Other changes, such as reducing attrition by installing a number of incentives for retention and creating a year-round intake of recruits, as opposed to an annual springtime enrolment, have had a positive effect on the overall timeliness of the recruitment process.

Most importantly, in June 2004, following an earlier discussion at the most senior levels, ADM(HR-Mil) directed that a year-long trial be undertaken to address the most contentious issue in the recruiting process, that of the Part 3 medical examination which is currently completed by the Recruit Medical Officer at Borden. This phase currently adds between two to four weeks to the process and is seen as providing little value added. The trial proposes a reasonable solution to the problem by speeding enrolment while not increasing risk and maintaining a common national standard. It proposes enrolment after Part 2 of the medical, which is done locally. Part 3 would be completed after the enrolment of the recruit. If significant medical problems were to be identified in Part 3, the recruit would be released. If the trial is successful, and the concept incorporated into the recruitment process, it will result in a recruiting process that could reduce the recruiting time to five weeks. As a minimum, the trial will provide quantitative data for discussion and allow for consideration of alternative approaches.

To address future needs of the CF, and to enable any further dramatic reductions to the recruit processing timeframes, will, in our view, require a reconceptualization of the entire process. This, in turn, will require a more complete database from which to make substantive judgements. Reserve components should begin the process of data collection on timeframes, attrition rates, and recruitment as soon as possible. The recommendations, "suggestions" and corresponding management action plans are presented in matrix format on the following page.

RECOMMENDATIONS, SUGGESTIONS & MANAGEMENT ACTION PLANS

Serial	CRS RECOMMENDATION	OPI	MANAGEMENT ACTION
1.	Information: Reserve databases be constructed and enhanced to reflect the information required for performance measurement of the recruiting process.	ADM(HR-Mil)	Military e-Recruit will be released in August 2005 to complement existing systems/information.
2.	Medical Exams: The proposed trial regarding enrolment before completing the Part 3 medical be completed and process be changed to reflect the results of the study.	ADM(HR-Mil)	Staffing action is ongoing. Intend to obtain ADM(HR-Mil) approval for Fall 2005 implementation.
3.	Component Transfers: A policy directive on the subject of Component Transfer be promulgated for a rapid, streamlined, transparent system which would delineate new parameters for its implementation.	ADM(HR-Mil)	A complete legal review is planned. Will obtain ADM(HR-Mil) approval for Component Transfer instruction implementation with effect Summer 2005.
Serial	ADDITIONAL ANALYSIS / STUDY SUGGESTED	OPI	MANAGEMENT ACTION
4.	Benchmarking: A comparative analysis of recruiting processes in the Defence Departments of other countries and as well as within selected Canadian industries be completed.	ADM(HR-Mil)	The OPI is satisfied that current informal benchmarking/sharing activities are sufficient.
5.	Attrition: A detailed study of reserve attrition, including follow-up interviews with withdrawn applicants, be conducted to assess the longer-term impact of recent measures that are expected to reduce the attrition rate.	ADM(HR-Mil)/ VCDS	This recommendation is not supported at this time. Some study work has already been performed in this area.
6.	Study: In order to meet future Reserve recruitment needs, a study be undertaken reconceptualizing the approach to recruiting, using up-to-date technology and reflecting future demand and supply of recruits.	ADM(HR-Mil)	The recommendation is not supported at this time. CRS Note: It is worthwhile noting with respect to Serials 4, 5 and 6 that the Office of the Auditor General is currently conducting an audit of Recruiting (Regular Force). At this stage, it may be appropriate to await the AG recommendations.

REVIEW APPROACH

INTRODUCTION

The issue of recruiting for the Primary Reserve has been the subject of considerable concern and study essentially since 1996 as several attempts have been made to address apparent deficiencies in the recruiting system. This particular review of the issue was requested by the Chief of the Land Staff (CLS) in response to:

- a. the need to make the process more cost-effective in order to implement the recent decision to increase the Army Reserve from 15,500 to 18,500 by 2006; and
- b. the continuing concern in the Reserve Community with the perceived unresponsiveness of the recruiting system and the subsequent delays in the process; which some have argued, results in the withdrawal or loss of many potential recruits.

This latter concern also applies to the issue of Component Transfer where delays with the process result in individuals abandoning the idea of transferring to another component of the Armed Forces.

REVIEW OBJECTIVE

The objective of this study is to provide an independent review and analysis of the process involved in recruiting for the Primary Reserve, with the aim of assessing the efficiency and cost-effectiveness of the current process, and where appropriate, proposing solutions or alternative courses of action.

In analyzing the Reserve recruitment process, the central issue relates to that of finding the proper balance between an efficient bureaucratic structure and the maintenance of appropriate standards.

SCOPE

This review will focus on the recruiting process related to the Primary Reserve, including all the component sections, – Air Force, Navy, Communications, etc., but with emphasis on the Army Reserve since its relative size, potential growth and long-term concern make the issues more salient. This study will address the issues related to the recruiting process, retention and component transfer.

METHODOLOGY

The methodology for this study involves a mixed methods approach of both quantitative data and qualitative assessment. Emphasis will be on the review of relevant documentation including previous studies, files and websites, and interviews with the key personnel involved, including round table discussions. Some benchmarking data will be developed from previous studies and through interviews.

BACKGROUND

As of July 2003, the Primary Reserve was comprised of just over 21,000 members, broken out in the following components:

Army	14,057
Navy	3,027
Air Force	2,232
Communications	1,499
Other	588
Total	<u>21,403</u> ¹

Note that the Army Reserves are to increase to 16,250 by 2004, and to 18,500 by 2006. Attrition rates of approximately 20 per cent over the last few years necessitate an annual recruiting intake in the order of 4000-5000. This attrition rate has recently declined, but the impact on recruitment will be balanced by an expected increase in the Army Reserve.

The recruiting process is often perceived by its Reserve clients as being risk-averse and replete with stumbling blocks, which result in the withdrawal or loss of approximately 30 per cent of the applicants, i.e., those who have submitted an application form. It is argued that some who withdraw from the recruitment process are high potential individuals who will not wait indefinitely for a decision on their fate. The end result is negative public relations for the Canadian Forces, especially among the recruiting clientele, with a subsequent reduction in the number and quality of applicants.

These assessments are made based on a considerable amount of anecdotal evidence, but there is very little hard data to support them, particularly aggregate national data. Data collection and analysis is complicated by classification problems, the compartmentalized nature of the Reserves, and the Reserve management and administrative structure.

¹ There has been some discussion on the actual numbers of Reservists. These numbers reflect data available from the pay system. While this may not be reflective of those actually on strength, these are the only data available that are applicable to all Reserve Units.



Currently, Reserve recruiting is a seven to fifty-two week process, depending upon the nature of the issues that arise, with 30 per cent completed within seven weeks. Although there are long-standing concerns over the process, Reserve-recruiting requirements are currently being met. The ratio of applicants to enrolees has remained steady over the years at 2 ½ to 1, which might suggest that duration of the process is not the determinant variable in an individual's decision to join the Reserves. Isolating the impact of the enrolment/recruiting process on recruiting efforts is inherently difficult because joining the Reserves is often a profound life decision dependant upon a large number of factors. Moreover, DND has not consistently tracked key information necessary to evaluate the impact of a particular variable on that decision. Nevertheless, this paper will examine the logic and utility of the current process, examine the proposals for change and where appropriate, suggest potential recommendations and alternative courses of action.

RECRUITMENT PROCESS

CURRENT RECRUITING SYSTEM

The process for Reserve recruiting is as follows:

- a. Employment applications are sent from the Reserve Units to the Canadian Forces Recruiting Centre (CFRC), or are completed and submitted directly to one of the 36 CFRCs, or are completed on line.
- b. Early in the process, personnel and employment reference checks are conducted, personnel data is validated and appropriate credit checks are completed.
- c. Applicants then complete the Canadian Forces Aptitude Test (CFAT) and a physical training test (PTT). Approximately 10 per cent fail the CFAT, and if so, must wait three months to reapply. The number of those failing the PT test has risen dramatically over the last few years. The CFRC in Toronto calculates that the first-time failure rate is over 40 per cent. Applicants may reapply after a one-month waiting period.
 - The standards for both these tests are set by DND. The aptitude test reflects a grade 10 capability, and is used for trade selection. The physical fitness standards are those that are developed for entry and annual testing in the Regular Forces except those for the Army, which are more demanding.
- d. Concurrently, in the application process, an Enhanced Reliability Check (ERC) is completed, using an RCMP database. This is normally completed in one week. However, there can be large time delays in completing this clearance if data are unavailable (records outside of Canada, for example) or if there are problems. If there is a criminal record or citizenship or credit issues, the applicant must resolve the issue before the application is processed. The standards in use are those in place in all other Federal Government Departments.
- e. Medical Testing determines if the applicant meets the minimum medical standard for the Canadian Forces. It is completed in three parts. Parts 1 and 2 are completed at the recruiting centre and are administered by a Canadian Forces Physician's Assistant. If there are anomalies such as a history of asthma, for example, applicants are required to submit a family doctor report. This requirement turns out to be the case for approximately 40 per cent of the applicants. This process can take weeks or months, depending upon the nature of the problem and family doctor availability and responsiveness. If a medical specialist is required, delay can take considerably longer.

Once Parts 1 and 2 of the medical are completed, the application is sent to Borden for medical review, i.e., Part 3. The same individual doctor reviews all files. This approach/policy is based on the assumption that a medical standard can be maintained only if one doctor who is familiar with DND's physical requirements sees all the files. The current turn-around time on Part 3 for a "clean file", i.e., no identified medical problems in Parts 1 and 2, is between eight and 20 days. This is considerably longer if problems exist. In the end, approximately 20 per cent of all applicants are judged medically unfit.

Among the identified delays in the recruiting system, the process and logic regarding the Part 3 medical has generated considerable criticism and discussion, and has been considered the most cost-effective to address.

f. When the files are returned from Borden to the local recruiting office, they are merit listed, and forwarded to the Reserve Unit, who contacts the applicant, sets up an enrolment date, and finally does the actual enrolment. This adds another 15 to 20 days to the process.

In this system, approximately 30 per cent are clean files. Delays and problems affect the remaining 70 per cent of applicants. The average time to process a clean file has decreased from 59 days to 35 days. "Clean" means that the individual passes the aptitude test on the first try, is assessed as suitable by a Military Career Counsellor following the first interview, is found medically fit on initial examination, has no criminal record or credit issues, can be granted enhanced reliability status on initial review and passes the PT test on the first attempt. In short, there are no issues that delay processing. There is only limited aggregate data on the time to address the concerns, issues and problems of the other 70 per cent, although CFRG statistics show that currently 87 per cent of new enrolees completed the process within 45 working days.

COMPONENT TRANSFER

Component Transfer is an integral part of the Reserve recruiting process. It accounts for approximately 20 per cent of the annual recruitment. This issue was identified in the interview process as a major source of concern. A preoccupation with process and time delays, appear to override the logic of the "Total Force" concept. The policy basis behind Component Transfer dates back as far as 1995, as follows:

"In the spirit of total force, active members of the Primary Reserves requesting transfer to the Regular Force will be given preference over civilians requesting enrolment, and, in the total force context, members of the Primary Reserves are already recruited and enrolled members of the Canadian Forces and, therefore, should not require further processing by the recruiting system. The aim of the new procedures is to permit a direct transfer for Primary Reserve members to Regular Force bypassing Canadian Forces Recruiting Centres (CFRC)."

² CANFORGEN 062/95, ADM(Per) 076/95, 261725ZOCT95, CF Component Transfer Procedures – Primary Reserve to Regular Force, 26 October 1995.



However, the very success of the program caused a number of changes to be made to make Component Transfer a recruiting event subject to all the process attached to the recruiting system as outlined below:

"The unanticipated and overwhelming volume of transfer requests have exceeded the capacity of DPCA to process them within acceptable time frames. It has also become apparent that the aims of the new component transfer procedures could be met more effectively and efficiently by the Canadian Forces Recruiting System."

There is consensus among senior management that a component transfer from the Regular Force to the Reserves or from the Reserves to the Regular Force should be as simple as a posting message. An adequate process has not yet been established to address the issues of component transfer consistent with a total force concept. A number of administrative issues and established performance measures related to time in rank, courses completed etc., have to be resolved before the "seamless web" of the total force concept can be put in place. Until these issues are resolved, Component Transfer will continue to be treated as a recruiting event rather than the administrative process that it should be.

As for regular recruits, information is required on education, qualifications, expertise, security clearance and medical category. There is a history of anecdotal evidence detailing problems that have arisen in supplying and transferring this information. For example: personnel files were on retirement, sent to the archives where they are virtually irretrievable; there was no way of assessing commonality of previous course qualifications, making rank determination difficult; security clearances have often lapsed or are not accepted as current; medical approval must be re-established; and in some cases, members are still asked to supply their high school marks. All of these data issues, which are all internal to DND, have made component transfer a longer-term process than it need be. Nevertheless, there are approximately 1000 component transfers per year.

In the future the component transfer process should become easier, as common databases and standardized courses, affecting an increasing percentage of the Forces take effect. This will make it easier to establish qualifications and rank, and to assess medical and security status. There are indications that the process is improving, for example, the issue of Verification of Former Service (VFS), an integral part of the component transfer process, took approximately four months in the year 2000. Three to four weeks is now the average turn around time for a VFS. What is needed is a new policy directive delineating the parameters of what is to be accepted and what is required in the component transfer process.

³ CANFORGEN 052/97 ADM(Per) 036/97, 161545Z May 1997, CF Component Transfer Revised Proceedings, 16 May 1997.



Chief Review Services

COMPARATIVE ANALYSIS

This study did not analyze raw data, with which to make some comparisons with other nation's Armed Forces recruiting processes, or those of other government agencies. This could be done as part of follow-on work. However a number of recent studies have done some comparative work. For example, a study done by Canadian Forces Recruiting Group (CFRG) for the Minister of National Defence in August 2003 when the Canadian recruiting process was assessed at seven weeks for a clean file, showed the time requirements for the recruiting processes for other country's Armed Forces as follows:

Severed under		4 weeks
Section 13(1)(a)	8 weeks
of the AIA		10 week
Information	• • • • • •	
obtained in		14 week
confidence		

Note that the system is completely contracted out, yet the time required is listed as twice that of Canada. Other studies showed that Canada also compared favourably with regard to processing costs. Recruiting costs per recruit are approximately \$4,000 for Canada⁴, which compare with the costs of \$16,000 (Both figures are in Canadian dollars). Advertising costs per recruit are \$160 in Canada, which compares with \$1,900 in the

Intuitively it may be expected that due to economies of scale, the cost per recruit would be lower than Canadian costs. Although one can't draw too heavily on the limited assessment above, it appears that from both a time and cost perspective, the Canadian process is within the range as compared to those of other nation's Armed Forces.

⁴ In our view, the Canadian Reserve recruiting costs are somewhat understated, as they do not include local costs.



PRINCIPAL OBSERVATIONS

RECRUITING DEVELOPMENTS

What data and information that do exist indicate progress towards an increasingly responsive recruiting system. It appears that concerns about the process are gradually being addressed, but within the context of maintaining the current national standards. For example, the average time to process a clean file has dropped from 59 days to 35 days. Within this context, time for a Part 3 medical, again on a clean file, has dropped from 20 days to eight days. This improvement to a more responsive process is due to a number of factors as follows:

- a. <u>Continuous Pressure</u>. Over the past few years, there has been constant pressure to reform and improve the efficiency of the system. There has been continuing attention and visibility on this issue throughout the Department over the last three or four years right up to and including the ministerial level. This pressure/visibility has led to the proposal of a number of alternative solutions to the current system, some accepted, some rejected. But it has created the consensus that the problems in the system needed to be addressed, and that the status quo was not acceptable.
- b. <u>Annual Recruitment</u>. Last year the Army Reserve changed its intake loading program from once a year in the spring, to three times a year, in effect, creating a continual flow of applications instead of a yearly springtime bottleneck. The bottleneck problem was compounded by the fact that at this time of the year the system is severely stressed with other high priority recruitment such as the annual Royal Military College intake. Year round recruitment and enrolment with a constant flow of applicants should continue to produce time savings in the system.
- c. <u>Reduced Attrition</u>. An increased emphasis on reducing attrition has also produced positive results. Obviously, a reduction in the rate of attrition will reduce the requirement for new recruits, which should in turn reduce the time required for the remaining individual enrolments. In this regard, a number of programs have recently been put in place or are about to be put into effect and are expected to reduce the attrition rate. These include dental coverage, Reserve pensions, Reserve retirement gratuity and education cost reimbursement. Better training, equipment and meaningful employment are all recognized as essential ingredients in reducing attrition.

A new awareness of the impact of attrition on recruitment, coupled with these incentives, has reduced attrition from the 30 per cent range to below 20 per cent. Note, not all Reserve components have the same attrition rate. The Air Force Reserve, which draws heavily on component transfer from the Regular Force for 70 per cent of its recruitment, has a markedly lower attrition rate than the Army Reserve and is currently at 14-16 per cent. Since the 20 per cent figure

includes transfers to the Regular Force, the actual attrition from the total force concept is approaching 15 per cent. Given the structural nature of the Reserves, in that it relies heavily on students who have a four-year horizon, attrition at 15 per cent is getting close to the bottom limit. Further dramatic reductions are unlikely unless one changes the recruiting base, from students looking for a summer job, to those seeking a part-time career. However, the reductions in attrition that have occurred should reduce the time required for those remaining in the recruitment process.

- d. <u>Information Technology</u>. Increased application of information technology (IT) from electronic application to the use of national databases for ERCs has had and will continue to have a positive effect on reducing the time required for the recruiting process. The Naval Reserve's experience with the creation of their own version of the Human Resources Management System, called TORIS, has allowed it to create a more time-sensitive personnel management system which tracks personnel and identifies recruiting requirements by MOC. The system has had an important impact on reducing the difficulty with regard to component transfers. This system as a management tool would be ideally transferable to some of the smaller components of the Primary Reserve. While there is an investment cost to be absorbed, increased use of IT will allow for better tracking and management of the process and provide data with which to assess proposed alternative courses of action.
- e. <u>Increased Personnel Resources</u>. In response to efforts to make the process more responsive, a greater number of military personnel and a broad range of additional resources have augmented the recruiting organization. It now includes 39 recruiting centres and over 1000 personnel, of whom 30 per cent are Reserve members. The number of people employed in the recruiting system has been increased by approximately 30 per cent over the last five years. In addition, most Reserve units have created "attractors" or facilitators who do local recruiting for their unit and who help applicants prepare the forms, collect their documentation and assist in application preparation. In spite of the augmentation to the Reserve recruitment strength, which has been a contributing factor to improved timeliness, it is still not known with certainty the number or reasons why as many as 30 per cent of applicants withdraw or do not continue with the recruitment process.
- f. Medical Screening. Over the past few years, the most contentious issue in the Reserve recruiting process has been that relating to the time and value added of the Part 3 medical. The rationale behind the requirement for a centralized and consistent standard ensured by having one doctor review all the medical files has been challenged from logical, time, and professional perspectives. How realistic is it to expect a single medical authority to scrutinize and make recommendations on 18,000 medical applications annually (both Regular and Reserve Forces) without seeing an individual? Numerous proposals/options to this approach have been suggested over the last few years. These include; dropping the Part 3, registering civilian doctors to conduct Reserve Forces medical recruit examination, having family doctors complete Part 3, having a doctor on staff at each Reserve unit, moving the medical officer to NDMC from Borden so that he/she could receive backup support when required, and finally, use a "conditional enrolment policy, i.e., applicants would be enrolled,

trained, and paid conditional upon passing the Part 3 medical. All of the above solutions have been rejected on practical, logical or legal grounds. In the interim, the pressure resulting from continuing concern and criticism of time delays and the value added related to Part 3 medical have driven down the time required considerably to approximately 20 days. Recent data collected by CFRC in Toronto shows that this time frame has dropped to eight days, determining whether that is a short-term anomaly or long-term trend will require additional data.

g. A New Approach. Concurrently, beginning June 2004, following an earlier discussion involving the most senior leadership, ADM(HR-Mil) directed that a year-long trial be undertaken on a new approach to the issue. The trial directive can be found at Annex A of this report. The aim of the trial is to establish the feasibility of enrolling applicants into the Primary Reserve with a Part 2 medical which would be conducted as it currently is at the local level, while waiting for the Part 3 medical approval, which would still be granted by the Recruit Medical Officer (RMO) at CFRG in Borden. If there were sufficiently significant medical issues, the enrolled individual would then be released. The trial would apply to "clean files" only. Currently, the Part 3 screens out 3 per cent of clean files.

Given that there is currently an eight to 20 day turn around time for completion of the Part 3 medical, implementing this trial should reduce the number of days in the overall process to somewhere between 27-40 days. In essence, this trial will allow the applicant to be enrolled, paid and trained before receiving final medical approval. Terms of Reference for this trial are attached as Annex A.

Obviously, there will be some administrative, and potentially, some public relations costs associated with this trial, as a few individuals are enrolled and then subsequently and rather quickly released. The trial will also put additional pressure on the Physician Assistants who conduct Part 1 and Part 2, and this may result in the number of clean medical files being reduced from the current 40 per cent with a subsequent increase in the workload in Borden. However, the trial should provide the data to assess the plusses and negatives of this approach. It will run for a one-year period or 1000 clean files. The trial and the approval process inherent in implementing it are important major steps in addressing this long-time concern. Essentially, it is an innovative attempt to find a balance between the need for maintaining a medical standard, while reducing the time required for enrolment.

It should be pointed out that these recent improvements follow on a number of earlier incremental changes to the system in the 2000-2001 time frame. For example, a briefing note for the Minister of National Defence, dated May 2001, from the Chief of Land Staff stated: "The Minister should be aware that we have reconciled many of the Recruiting Process bottlenecks. The Recruiting processes were examined and significant improvements have been made to simplify the enrolment process." The briefing note highlights areas where improvements have been made, i.e., "The medical examination process has been streamlined and added resources were augmented to the recruiting services, making medical examinations more efficient, the aptitude tests have been adjusted with no effect on standards, and the interview has been streamlined for reservists, making it shorter."

As noted earlier, in spite of the significant improvements that have been made recently, it is still not known with certainty, the number or reasons why approximately 30 per cent of applicants withdraw from the process before recruitment is achieved. Routine follow-up interviews and feedback from withdrawn applicants would likely contribute significantly to gaining better insights into this phenomenon and potentially lead to action to diminish the problem.

ALTERNATE SOLUTIONS

A number of alternative solutions have been proposed with the objective of further shortening the process by changing or abandoning the current standards. For example:

- 1. <u>Conditional Enrolment</u>. This proposal would involve enrolling the individual conditionally, pending completion of the process. If there were irresolvable issues, the individual would not be formally enrolled. This option has, so far, been rejected, as it would require changes to the National Defence Act (a very lengthy process), and has been overtaken by the trial on enrolment after the Part 2 medical.
- 2. <u>Dropping the Interview from the Process</u>. It is argued that there is very little value added from this interview, yet scheduling often involves considerable delays. The proposal has been rejected on the grounds that the interview is necessary as a screening mechanism and as a career selector.
- 3. <u>Fitness Testing</u>. It has also been proposed that the fitness test should be dropped. This argument is based on the assumption that the applicant can become fit after enrolment, and secondly, that the current fitness standards reflect a common entrance standard for both Regular and Reserve Forces, and could be lowered for the Reserves. So far, the counter argument, that recruits must be in sufficient physical condition to complete basic training without serious health risk has been widely viewed as a credible response.
- 4. <u>Recruitment Personnel</u>. There have also been a number of proposals concerning the way we have employed our personnel to do recruiting. For example, at the present time, basically each Reserve Unit has its own personnel, tasked full time with attracting recruits and facilitating their way through the acquisition process. It has been argued that employing these individuals in the Recruiting Centre, (concentrating the mass to achieve economies of scale), would make the process more cost-effective and time responsive. Reserve Units, which fund their own recruitment facilitator, have shown little interest in this proposal.

5. Aptitude Test. There is also an argument to drop the aptitude test from the recruitment process. It is argued that since the test is based on a grade 10 standard, then why not merely accept a grade 10 achievement as sufficient confirmation of academic ability. The counter to this argument is that the aptitude test is important in determining career classification, i.e., Communications vs. Army, and trade selection, and is used in developing an initial merit listing.

From the above, it appears that there is little likelihood that there will be a withdrawal from a national standards approach. While there has been over time some pressure to adopt a decentralized approach to recruiting, where local Reserve Units would do their own testing, this has not been accepted. It appears that there is no consensus within the Department for any reduction in standards.

ANNEX A - DRAFT ADM(HR-MIL) AND A/CLS LETTER

Cos/A)m Hamil

5323-1 (COS ADM (HR-Mil))

May 2004

Distribution List

TRIAL DIRECTIVE
PRIMARY RESERVE ENROLMENT
PENDING PART 3 MEDICAL APPROVAL

References: A. Briefing to MND by PMO LFRR / ADM(HR-Mil), 10 Dec 03

- B. ADM HR-Mil direction to Comd CFRG, 19 Dec 03
- C. Surg Gen e-mail 20 Feb 04
- D. DGHS/Comd CFMG e-mail 25 Feb 04
- E. RHB 2003
- F. CFAO 49-10 (Terms of Service Officers Primary Reserve)
- G. CFAO 49-11 (Terms of Service Non-Commissioned Members Primary Reserve)
- H. CFAO 15-2 (Release Regular Force)
- I. QR&O Art 15-01 (Release of Officers and Non-Commissioned Members)

BACKGROUND

1. As a result of LFRR review of PRes HR policies and procedures, and recommendations from various Minister's advisory groups, in order to reduce attrition among recruits during the application process, a concept of expediting potential recruits was devised. Under this revised process recruits would be enrolled into the Primary Reserve after being deemed medically fit after Medical Part 2 while pending final Medical Part 3 approval. In order to validate this approach, a trial has been directed, involving the recruiting and medical aspects controlled by ADM(HR-Mil) and the Primary Reserve elements of CLS. The intent is to continue with current enrolment medical procedures and approvals, but increase the concurrent activity of enrolment of medically uncomplicated applicants.

5323-1 (CEM SMA(RH-Mil))

Le 15 mai 2004

Liste de distribution

DIRECTIVES SUR L'ENRÔLEMENT CONDITIONNEL - ENRÔLEMENT DANS LA P RÉS EN ATTENDANT L'APPROBATION AUX TERMES DE LA 3° PARTIE DE L'ÉVALUATION MÉDICALE

Références : A. Rencontre d'info au MDN par l'ODP RRFT / SMA (RH-Mil), 10 déc 03

- B. Directives du SMA(RH-Mil) au cmdt du GRFC, 19 décembre 2003
- C. Courriel du Chef-SS, 20 février 2004
- D. Courriel du DGS San/cmdt du GMFC, 25 février 2004
- E. GR 2003
- F. OAFC 49-10 (Conditions de service Officiers de la Première réserve)
- G. OAFC 49-11 (Conditions de service Nonofficiers - Première réserve)
- H. OAFC 15-2 (Libération Force régulière)
- I. Article 15-01 des ORFC (Libération des officiers et militaires du rang)

HISTORIQUE

Après l'examen, fait dans le cadre de la RRFT, des politiques et procédures en matière de RH de la Première réserve (P rés), et des recommandations de divers groupes consultatifs du Ministre, et de façon à réduire le niveau d'attrition parmi les nouvelles recrues lors du processus d'application, un concept pour accélérer l'enrôlement a été développé. Sous ce concept révisé, les candidats jugés aptes aux termes de la 2^e partie de l'évaluation médicale, mais sous réserve d'approbation aux termes de la 3^e partie, permettrait d'augmenter le nombre des recrues dans la P rés. Dans le but de valider cette approche, le processus de recrutement sera évalué sous deux volets : le SMA (RH-Mil), étudiera l'enrôlement et l'évaluation médicale tandis que le CEMAT évaluera les éléments de la P rés. L'idée consiste à maintenir les procédures médicales et les approbations actuelles liées à l'enrôlement, tout en augmentant l'enrôlement de candidats en bonne santé.



Chief Review Services

AIM

2. The aim of this trial is to establish the feasibility of enrolling applicants into the Primary Reserve with a Part 2 medical (conducted at the local level), while waiting for the Part 3 medical approval which is granted by the Recruit Medical Officer (RMO) at CFRG HQ.

TRIAL DETAILS

- 3. <u>Scope</u>. This trial will apply only to Army Reserve applicants that have not initiated medical screening before the trial start date.
- 4. <u>Duration</u>. This trial will start on 1 June 04 and continue for one year until 31 May 05. The trial may be ceased when sufficient data has been collected. It is estimated that this could be once Army Reserve enrolments reach 1000. The trial may be ceased at any time with the mutual agreement of ADM(HR-Mil) and CLS.
- 5. Enrolment Medical Standards. There is no change from existing enrolment medical standards as currently provided in medical instructions and the Recruiter's Handbook. Applicants enrolled under this trial must meet the Common Enrolment Medical Standards (CEMS) (V4 CV3 H2 G2 O2 A5), and if their selected Occupation medical standard is higher, meet that standard. For example, the Infantryman Occupation requires V3. For an applicant to be enrolled into the Reserve Infantryman Occupation requires that they meet both the CEMS and the Infantryman V3 medical standard.
- 6. <u>Pre-enrolment Medical Examination</u>. The current previsions and details of the enrolment medical as detailed in medical instructions remain in force.
- 7. Enrolment of Applicants Pending Medical
 Part 3 Approval. The following procedures
 will be used during this trial, and may be
 modified during the trial as a result of lessons

OBJECTIF

2. L'objectif de l'essai est d'établir la possibilité d'enrôler des candidats dans la P rés après l'exécution de la 2^e partie de l'évaluation médicale (effectuée sur les lieux), en attendant l'approbation du médecin militaire du GRFC aux termes de la 3^e partie (au OG GRFC).

DÉTAILS DE L'ESSAI

- 3. <u>Portée</u>. Seuls les candidats à la Réserve de l'Armée de terre (RAT) n'ayant pas entamé le dépistage médical avant le début de l'essai peuvent participer au processus d'enrôlement conditionnel.
- 4. <u>Durée</u>. L'essai débute le 1^{er} juin 2004 et prendra normalement fin le 31 mai 2005, mais pourrait se terminer plus tôt selon que la quantité de données sera suffisante. Il est prévu d'y mettre fin lorsque la RAT se sera dotée de 1 000 recrues, mais on pourra y mettre fin en tout temps avec l'accord mutuel du SMA(RH-Mil) et du CEMAT.
- 5. Normes médicales pour l'enrôlement. Les normes médicales imposées aux candidats à l'enrôlement conditionnel restent inchangées et telles qu'elles sont décrites dans les instructions médicales et le Guide du recruteur. Dans le cadre de l'essai, les candidats doivent respecter les normes médicales communes à l'enrôlement (NMCE) (V4 CV3 H2 G2 O2 A5), à moins que leur norme médicale de groupe professionnel exige une norme plus élevée, qu'ils devront respecter. Le métier de fantassin, par exemple, requiert la cote V3 en acuité visuelle, et les membres de ce groupe doivent respecter à la fois les NMCE et la norme V3.
- 6. Examen médical précédant l'enrôlement. Les conditions et les détails actuels de l'examen médical précédant l'enrôlement, tels que les décrivent les instructions médicales, demeurent en vigueur.
- 7. Enrôlement en attendant l'approbation aux termes de la 3^e partie de l'évaluation médicale. Les directives sur les procédures utilisées pendant l'essai sont décrites ci-dessous. Selon les leçons apprises, elles

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directive will be issued as an addendum.

- a. Recruiting staff will ensure that the Army Reserve applicants are made known to examining medical staff.
- b. At the end of the Medical Part 2, the examining medical staff will inform the recruiting staff of the results. This will be done by completing the medical panel of the CF Recruitment Information Management System (CFRIMS), of the applicant's medical category, and indicate if the applicant is deemed "Fit" in the PA Med Status, "Unfit", or is on "Hold", either to obtain further medical information, or to have the file reviewed by the Recruiting Medical Officer (RMO) as the medical file is deemed to be complicated. See Annex C for examples.
- c. If the file is deemed fit under the PA Med Status and the applicant appears to meet the CEMS, COs and Det Comds are authorized by Comd CFRG to forward the files of Army Reserve applicants for enrolment prior to completion and consideration of the Part 3 medical results.
- d. In those cases where the medical examination leads the Med Tech/PA to decide that the applicant does not meet CEMS the category "Unfit" will be indicated in the CFRIMS medical panel.
- e. In all cases where a Med Tech/PA is unclear about the fitness status, they will make every effort to discuss this question with RMO staff to assist in determining whether they will designate the applicant as "Fit", "Unfit", or "Hold". In the spirit of supporting the trial, every effort will be

learned. If modified, an amendment to this trial pourraient être modifiées, après quoi une modification serait publiée à titre d'addenda.

- a. Les recruteurs veillent à ce que le personnel médical chargé des examens soit informé des candidats à l'enrôlement dans la RAT.
- b. À la fin de la 2^e partie de l'évaluation médicale, le personnel médical ayant examiné le candidat renseignera les recruteurs sur les résultats de l'examen en remplissant le tableau de santé du Système de gestion de l'information sur les ressources des Forces canadiennes (SGIRFC) indiquant la catégorie médicale du candidat en cochant « Apte » (Fit) ou « Inapte » (Unfit) sous « PA Med Status » (état de santé établi par l'adjoint au médecin), ou « Différer » (Hold), pour attendre d'autres renseignements ou, en raison de la complexité du dossier médical, pour demander au médecin militaire du GRFC d'examiner le dossier. Voir les exemples à l'annexe C.
- c. Si le candidat est jugé apte et qu'il respecte les NMCE, le cmdt du GRFC autorise le cmdt d'unité et le cmdt de détachement à répondre favorablement à la demande d'enrôlement du candidat dans la RAT. avant l'achèvement et la considération des résultats de la 3e partie de l'évaluation médicale.
- d. Lorsque l'examen médical porte le Tech méd/l'Adj au méd à conclure que le candidat ne respecte pas les NMCE, il coche la catégorie « Inapte » au tableau de santé du SGIRFC.
- e. Là où le Tech méd/l'Adj au méd hésite au sujet de l'état de santé du candidat, il prend toutes les mesures pour discuter du cas avec l'état-major du médecin militaire du GRFC avant de choisir la catégorie « Apte », « Inapte » ou « Différer ». Dans un esprit d'appui à l'essai, il faut faire son possible pour obtenir les directives du

made to receive guidance from the RMO on unclear cases. Med Techs/PAs will continue to use their best judgement in the Part II Medical review. It is not expected that Med Techs/PAs will automatically indicate "Hold" for files where the only problem is a "Yes" answer to a question on the CF 2027. As an example, an applicant who answers "Yes" to medication, and the PA determines the matter to be routine (such as the use of an Oral Contraceptive Pill), the applicant will normally be assessed as "Fit". When an applicant answers "Yes" to operations, and the history shows tonsils removed as a child, this applicant also will normally be assessed at CFRC as "Fit". If however, the applicant indicates "Yes" to the use of Thyroid replacement medication and "Yes" to operations indicating knee surgery 9 months ago, this case should be discussed with the RMO, and in most cases assessed as "Hold" until further information from civilian physicians is available.

- 8. Statement of Understanding. As part of the enrolment package for applicants being enrolled with a Part 2 Medical pending Part 3 approval, the Statement of Understanding at Annex B will be included. This will be completed and signed by the recruit and the enrolment unit. One copy will be placed on the recruit's personnel file, one copy made available to the recruit, and another copy returned to the recruiting office for inclusion in the recruiting file.
- 9. Notification of Part 3 Medical Findings. If 9. the Part 3 Medical review concurs with the Part 2 Medical findings, the current notification de system remains in place. If the Part 3 Medical review finds that there are concerns not found during the Part 2 Medical, the RMO staff will 3°

- médecin militaire dans les cas ambigus. Les Tech méd/l'Adj au méd continueront de faire preuve de discernement en remplissant la 2^e partie de l'évaluation. Ainsi, on ne s'attend pas à ce que le Tech méd/Adj au méd coche automatiquement « Différer » si le seul problème est que le candidat réponde affirmativement à une question du CF 2027. Si, par exemple, une candidate répond affirmativement à la question sur les médicaments, et que l'Adj au méd conclut qu'il s'agit d'un médicament ordinaire (p. ex., un contraceptif oral), il accordera à la candidate la cote « Apte ». De même, si un candidat répond affirmativement à la question sur les interventions chirurgicales et que l'historique précise qu'il s'agit d'une amygdalectomie d'enfance, le CRFC lui accordera normalement la cote « Apte ». Cependant, si le candidat doit prendre un médicament contre l'insuffisance thyroïdienne ou s'il a subi une chirurgie au genou il y a neuf mois, ce cas devrait être discuté avec le médecin militaire, et la cote « Différer » serait généralement accordée jusqu'à la réception d'autres renseignements de la part de médecins civils.
- 8. <u>Déclaration officielle.</u> Une déclaration officielle (annexe B), remplie et signée par l'unité d'enrôlement et par la recrue enrôlée aux termes de la 2^e partie de l'évaluation médicale mais sous réserve d'approbation aux termes de la 3^e partie, est versée au dossier de la recrue. Cette déclaration sera complétée et signée par la recrue et l'unité d'enrôlement. Une copie sera placée au dossier personnel de la recrue, une autre copie sera remise à la recrue et une autre sera retournée au dossier du bureau de recrutement.
- 9. <u>Communication des résultats de la 3^e partie de l'évaluation médicale</u>. Si les résultats de la 3^e partie de l'évaluation médicale correspondent aux résultats de la 2^e partie, le système actuel de communication des résultats est adéquat. Cependant, lorsque la 3^e partie de l'évaluation permet de dépister un

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inform the Trial Manager at CFRG HQ of the concern, who will forward that concern expeditiously to the recruit's chain of command. This is shown at Annex D. The recruit's chain of command will ensure that the information and actions required are quickly passed to the location the recruit is undergoing training, and is actioned. Actions to be taken will depend on the limitations identified by the RMO.

- 10. Release. Members that are enrolled under the provision of this trial and who are subsequently determined to be below CEMS during the Medical Part 3 due to a member's non-disclosure of a pre-existing medical condition at the time of enrolment may be considered in accordance with regulations for release under Release Item 5(e) Irregular Enrolment. Members who otherwise fail to meet the CEMS upon review of Medical Part 3 may be considered for medical release in accordance with existing medical and administrative procedures.
- 11. <u>Risk Assessment</u>. As directed by the MND and the CDS at Reference A, this trial has been initiated after the various risks and benefits have been considered. The undersigned are aware of legal risks associated with this trial.
- 12. <u>Tracking/Data Collection</u>. The attached spread sheet (Annex A) is to be completed and forwarded to the CFRG Trial Manager monthly. Most of the fields detailed are taken from the CFRIMS Component/Sub Component Report, which can be extracted to EXCEL. DHRIM will develop CFRIMS report/query that provides this information, in a manner that can be extracted and analysed by CFRC, Det and CFRG HQ staff under existing role-level security. CFRG HQ is authorized to hire a data analyst for 16 months, to collect data and provide periodic reports, on at least a quarterly basis, and a final report within 3 months of the end of the trial.

problème que la 2^e partie n'a pas permis de relever, l'état-major du médecin militaire du GRFC en fera part à l'administrateur de l'essai, au QG GRFC. L'administrateur en informera la chaîne de commandement de la recrue dans les meilleurs délais. (Voir l'annexe D.) Pour sa part, la chaîne de commandement veillera à ce que l'information et les mesures à prendre soient rapidement transmises à l'endroit où la recrue fait son entraînement, et à ce que ces mesures soient mises à exécution, en fonction des restrictions définies par le médecin militaire.

- 10. <u>Libération</u>. Les militaires enrôlés en vertu de l'enrôlement conditionnel et qui, en raison de l'existence insoupçonnable ou de la non-divulgation d'un problème de santé au moment de l'enrôlement, ne respectent pas les NMCE selon la 3^e partie de l'évaluation médicale peuvent être assujettis au motif 5e (Enrôlement irrégulier) de l'article 15-01 des ORFC. Les militaires enrôlés autrement, qui ne respectent pas les NMCE à la suite de l'exécution de la 3^e partie, peuvent être libérés pour motif médical selon les procédures médicales et administratives en vigueur.
- 11. Évaluation des risques. Conformément aux directives du MDN et du CEMD à la référence A, nous avons considéré les risques et les avantages liés à l'enrôlement conditionnel avant la mise en œuvre de l'essai. Nous, soussignés, sommes conscients des risques juridiques.
- Suivi/collecte des données. Le tableau joint (annexe A) doit être rempli et envoyé à l'administrateur de l'essai, au GRFC, tous les mois. La plupart des champs proviennent du Rapport sur les composantes/sous-composantes du SGIRFC, formatables en EXCEL. Le DIRHG élaborera les interrogations et le rapport relativement au SGIRFC, à l'origine des renseignements, de façon à ce que ces derniers puissent être extraits et analysés par les étatsmajors des CRFC, du détachement et du QG GRFC selon l'état actuel de la sécurité de rôle/de niveau. Le OG GRFC est autorisé à embaucher un(e) analyste de données dans un poste d'une durée de 16 mois afin de recueillir des données et de rédiger des rapports d'étape, au moins trimestriels, et un rapport final dans les trois mois suivant la fin de l'essai.

RESPONSIBILITIES

13. Trial sponsors are ADM(HR-Mil) (VAdm Jarvis) and A/CLS, (MGen Caron). Comd CFRG is appointed Trial Director, and CFRG HQ SO Res is appointed Trial Manager. Comd CFMG and Surg Gen are OCIs. DHRIM is tasked to support this trial by developing appropriate database queries and reports.

TRIAL REPORT

14. A quarterly analysis will be provided within 30 days of the end of the quarter, and a final report will be provided within 90 days of the end of the trial. There is to be an interim report prepared for consideration by end Mar 05 to determine the future of this initiative and to explore expansion of this trial or implementation to include applicability to other enrolment standards.

Le Sous-ministre adjoint, Ressources humaines - militaires

Le Vice-amiral

G.E. Jarvis Vice-Admiral

Assistant Deputy Minister (Human Resources -

Military)

Distribution list /liste de distribution (page 7)

Attachments

Annex A - Tracking Form

Annex B - Statement of Understanding Form

Annex C - CFRIMS Medical Panel

Annex D - Notification of Issues Diagram

RESPONSABILITÉS

13. Les bureaux responsables de l'essai de l'enrôlement conditionnel sont le SMA(RH-Mil) (Vam Jarvis) et le CEMAT p.i. (Mgén Caron). Le cmdt du GRFC est nommé directeur et l'OEM Rés QG GRFC est nommé administrateur. Le cmdt du GMFC et le Chef-SS sont les bureaux consultatifs. Le DIRHG a le mandat d'appuyer l'essai en élaborant les interrogations à la base de données et les rapports nécessaires.

RAPPORT SUR L'ESSAI

14. Une analyse trimestrielle sera fournie dans les 30 jours suivant la fin du trimestre visé et un rapport final sera fourni dans les 90 jours suivant la fin de l'essai. Un rapport intérimaire doit être préparé, en mars 2005, pour déterminer le futur de cette initiative et pour explorer l'étendue possible de cet essai ou encore, pour déterminer son application à d'autres normes d'enrôlement.

Le Chef d'État de l'Armée de terre par intérim Le Major-général

J.H.P.M. Caron Major-général

Acting Chief of the Land Staff

Pièces jointes

Annexe A - Formule de suivi

Annexe B - Déclaration officielle

Annexe C - Tableau de santé du SGIRFC

Annexe D - Schéma pour la communication des

résultats

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