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Chair

Mr. Neil Ellis

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• (0850)

[English]

The Chair (Mr. Neil Ellis (Bay of Quinte, Lib.)): Good morning, everybody. I'd like to call the meeting to order. We have quorum.

Pursuant to Standing Order 108(2) and the motion adopted on February 6, 2017, the committee resumes its comparative study of services to veterans in other jurisdictions.

This morning we have both ombudsmen here. We will start with Mr. Walbourne, the ombudsman of National Defence and Canadian Forces, and we have Robyn Hynes, director general, operations.

We'll turn the floor over to both of you. Thank you.

Mr. Gary Walbourne (Ombudsman, National Defence and Canadian Forces Ombudsman): Thank you, Mr. Chair, and good morning to all.

I appreciate the invitation to appear before you today to discuss issues surrounding transition from military to civilian life. I am joined by my director general of operations, Ms. Robyn Hynes.

It is my understanding that you are currently studying programing and best practices from like-minded countries around the world. I believe it is important to keep up with the latest trends and innovative practices from these countries in order to best inform what we do here at home.

An ombudsman really is no different. Our office is part of the International Conference of Ombuds Institutions for the Armed Forces and other like-minded institutions, whose aim is to establish best practices and lessons learned related to the mandate, powers, and functioning of these institutions. There is a lot to be learned from all participants, as there's a lot to be learned from the witnesses you have and will hear from over the course of your study. However, I also believe that there are made-in-Canada solutions to some of the issues facing current and former members of the Canadian Armed Forces, whether in uniform or transitioning to civilian life.

Since my appointment to the position in 2014, our office has published 11 evidence-based reports that are a direct result of systemic investigations that we have undertaken. I provided a comprehensive document to the Minister of National Defence in response to his call for submissions from across the country to inform the new defence policy, now known as "Strong, Secure, Engaged".

Progress on implementing the evidence-based recommendations contained in my report has been lacklustre. Our constituents are now publishing report cards on departmental progress on our website and through various social media channels, and we will continue to publish and update these report cards on a regular basis. As an office that is not entrenched in legislation, nor do I report to Parliament, I have few levers that I can pull in order to hold the department to account. Therefore, publishing departmental progress is extremely important as a measurement tool moving forward. I am pleased to say that some of my recommendations have been accepted and have appeared in the defence policy review.

Last year, I published a report recommending a new service delivery model for medically releasing Canadian Armed Forces members, in which I made three recommendations: first, that the CAF retain all ill and injured soldiers until all benefits and services from all sources are in place; second, to establish a type of concierge service to act as a single point of contact for transitioning members and their families; and finally, to develop a secure web portal, single point of entry, for all matters relating to the transition from the Canadian Armed Forces to civilian life.

I was pleased that the first chapter of "Strong, Secure, Engaged" was dedicated to the well-being of the Canadian Armed Forces members and their families. My recommendation to retain ill and injured members until all benefits and services are in place appears to have been accepted. However, my constituency and my office have yet to see a policy suite to support the departmental claims that holding the member is already being done across the country, and sadly, my office is still getting calls from members being released before these benefits and services are in place.

However, in a recent conversation with the chief of military personnel command, I have been advised this is currently being worked on, with an eye for completion by year's end. This is good news. I'm also pleased to report that a concierge-type service is being developed, and I anxiously await this end product.

Finally, in the interests of expediency, our office, working in conjunction with the Canadian Armed Forces, is building a benefits browser that will help Canadian Armed Forces members understand what benefits and services they could be eligible for through the transition process.

Ladies and gentlemen, the terms “closing the seam” and “seamless transition” are buzzwords that are not unique to this government. These terms have been used for decades. We have been trying to move the Canadian Armed Forces and Veterans Affairs Canada closer for years. However, I believe that the system that was built to support current and former members of the Canadian Armed Forces cannot be brought any closer together without taking a hard look in the mirror and asking why we do things the way we do. We have to get to the core issues. Hiring more people and opening more offices to do more of the same will not get current and former members any closer to that which they are entitled, which is a well-managed and timely transition process.

Based on the evidence it has, the Canadian Armed Forces decides whether a member can continue serving or should be released. It therefore raises the question, if the forces have enough evidence to end a member's career, why is that not sufficient to determine eligibility for benefits from Veterans Affairs Canada? Why there are two government entities that independently determine whether an illness or injury is attributable to military service still baffles me. The Canadian Armed Forces knows when, where, and how a member has become ill or injured. This is attribution to service.

On September 26, *The Globe and Mail* published my opinion editorial where I called for simple changes to the current system. In the op-ed, I reiterate the recommendation I made in the report published last year calling for a system in which the Canadian Armed Forces simply checks a box indicating that a member's illness or injury can reasonably be attributed to their service. Once this is done, Veterans Affairs should immediately accept that decision and determine what benefits and service the member is entitled to, not whether they are or aren't.

This simple change would cut wait times for benefits drastically. It would also provide clarity for releasing members of the Canadian Armed Forces and their families in a period of change and uncertainty.

I have not received a wholesome response to this member-centric recommendation, despite many attempts at explanations as to why neither department has the policy authority to implement such a recommendation. However, I believe that it comes down to leadership and the steadfast devotion to the status quo. Instead, the stream of interdepartmental working groups devoted to transition is forever growing. The bureaucracy is throwing darts at concentric circles instead of aiming for the bull's eye. All the while, more current and former members of the Canadian Armed Forces and their families are waiting. They are the greatest victims of bureaucracy.

Every time a new program or practice is put in place, the government must take into account how it may brush up against the existing system to avoid duplication or unnecessary red tape. For a recent and troubling example, look no further than the Veterans Hiring Act. The ability for Veterans Affairs Canada to meet their 16-week service standard for priority hiring sits at 26% in this fiscal year. It is my opinion that this is unacceptable, yet no one seems to be asking the tough question: why? More accountability needs to be demanded from senior leadership.

I was deeply troubled by recommendation 15 on page 63 of this committee's report published in December 2016, titled “Improving

Service Delivery to Canadian Veterans”. You call for changes to the service income security insurance plan, also known as SISIP. I caution this committee, and those considering fundamental changes to SISIP, that this is a program that works and works very well. Let me give you some examples.

With SISIP, each member is assigned a case manager and vocational rehabilitation counsellor who are accessible by phone, email, fax, or in person when geographically feasible, depending on how the member wants to communicate. This is not the case with all service providers. There are 91% of members who apply for this benefit prior to release, and 96% of those eligible members receive notice of their approval prior to release. Payment of the benefits are timely. Payment is made, 88% of the time, within five days of Manulife receiving all the information required to process a claim. The program works well for the members of the Canadian Armed Forces who pay into this insurance plan. Why make substantial changes?

In my line of business, one way to measure program success is by how few complaints you receive. When it comes to SISIP, we don't receive many engagements, and the majority are either for education or information on the program.

In order to best support all of our transitioning members, we must determine what the desired outcomes of our programs, benefits, and services are to be. If the goal is to have a happy, healthy, self-actualized, employed, and well-integrated former member in society, then we should build for that by removing already identified and studied impediments that a releasing member faces on his or her road to success. If machinery of government changes are needed to knock down those barriers, there is a mechanism for that. If legislation or regulatory changes are needed, there are also mechanisms for this.

Everything is within the realm of the possible, should the government choose to act on many of the recommendations that have been made. However, my fear is that those who have the loudest voice and believe change is impossible are being listened to at the end of the day.

Thank you, ladies and gentlemen. I stand by for your questions.

• (0855)

The Chair: Thank you.

Mr. McColeman, you're up.

Mr. Phil McColeman (Brantford—Brant, CPC): Thank you, Chair.

Thank you, Mr. Walbourne, for your testimony today and for being here.

I read your latest report, and when I look at the things you're saying, it makes me wonder what you would do if you had a clean slate, if none of these barriers existed.

In other words, you're a painter and you have a blank canvas. How would you establish a system that would work for the best possible delivery of benefits for our serving members in that transition time to Veterans Affairs? What would it be? What would it look like?

Mr. Gary Walbourne: It's a bittersweet thing, if I may say, because I do believe the mechanical pieces we require are in place in one form or another. I think the fundamental change that needs to happen first and foremost is that we must define what we want our programs of benefits and services to be. What ability we are trying to bring back to this transitioning member first needs to be determined.

I think the secondary issue that we're having is on who is responsible for what at any point in time. It's very convoluted now. I mean, there are various entities that can reach back to a member, so it's a little confusing on who's doing what. I believe there are programs that are running in duplication that could be sequenced. We could even see reductions in costs to the Government of Canada. There are many possibilities, but I think it's first and foremost, clear lines of responsibility and setting the program needs to our desired outcomes.

If we look at where the chief of defence staff is going, talking about the journey, he's talking about building some of these things. The JPSU needs to be the centre where these people are assigned, with a clear chain of command and one person responsible to decide when a member is being released and when Veterans Affairs Canada should be engaged.

The pieces are there; it's how we're exercising them, I think, is where we find the problem. Then we'll come up against some legislative...where there are certain authorities given to Veterans Affairs or not to the department, or they are given to the department. We need to decide who should have these responsibilities and who should be given this legislative right to implement these programs and services.

I think that the pieces we need are in place. It's a matter now of clearly defining what the programs are to be, who should be responsible, and giving that person the resources they need to do the job.

Mr. Phil McColeman: You look at the workings of government and how we've established these various bureaucracies to handle issues and the politics around that, and I know there has been blue sky thinking that at some point in time the best way to serve our current CAF members and veterans is to combine the two agencies together, Veterans Affairs with DND. What are your thoughts on that?

Mr. Gary Walbourne: I think it's fraught with possibility. Again, even if we decide to bring the two departments closer together to make one an agency or dependent on the other, I think it's irrelevant. It's still going to come down to who holds which responsibility and

who is actually implementing these programs and services. I don't see any harm in bringing them closer together.

I think if we could find a way that we could get beyond the information-sharing problem we continue to have.... We have to wait for files to be digitized and the authority given for the file to be transferred. Bringing the entities closer could start to eliminate some of these mechanical pieces that have been causing problems for years. We've talked about file transfer. It's been one of the agonizing, ongoing beefs we've had over the last 15 or 20 years.

There are synergies in bringing the two of them close together. My only caution would be that we don't throw out the baby with the bathwater. We want to make sure that at the end of the day, no matter what the entity looks like, there is one belly button to push and someone is responsible for what's going to happen to this transitioning member from the time we found out he or she was ill or injured until the time of release.

● (0900)

Mr. Phil McColeman: The veterans ombudsman, when we visited, showed me a chart that looked like a plate of spaghetti. I don't have a copy of it with me today, but you might have seen this chart.

Mr. Gary Walbourne: Yes, I know it well.

Mr. Phil McColeman: It's very illustrative of how complex the system is for the veteran to navigate. I appreciate everything you've said here today in terms of your thoughts going forward. I think in both cases of meeting with the veterans ombudsman and listening to you here today, there's a line you said. I underlined it here, and I'm not going to go back and try to figure out where it is. It says that the veteran bumps up against the bureaucracy, and the bureaucracy is the issue. Would you agree with that?

Mr. Gary Walbourne: Yes.

Mr. Phil McColeman: Further to that, then, there are the politics around trying to streamline an existing bureaucracy or trying to work within the context of saying that there's a better way. Grandma used to bake the cake this way in this pan, and it isn't the best way. There's a better way to do it. You learn from all of the obstacles and barriers that have been put in place.

How do you suggest, as a legislator, that we deal with that issue, that bureaucratic maze?

Mr. Gary Walbourne: First and foremost, we have to have a willingness on the ground to actually change the bureaucratic maze. I think from that it will roll, if you decide to design your programs, benefits, and services to meet your desired outcome. I'll leave the movement of legislation to this body and others, but it's a matter of designing what we want and then putting in support—the policies, regulations, and legislation—to get us there. There are going to have to be changes made, I think, if we want to make this as bureaucratically simple as possible. We're going to have to determine what we want to be at the end of the day before we decide on the changes we make as we move forward.

Mr. Phil McColeman: You used the word “lacklustre” in describing....

The Chair: Sorry, we've run out of time on that one.

Mr. Samson.

Mr. Darrell Samson (Sackville—Preston—Chezzetcook, Lib.): Thank you very much.

I appreciate your presentation, and I'm extremely ecstatic to meet with you. It's the first time I've met you. I'm Darrell Samson, and I'm the member of Parliament for Sackville—Preston—Chezzetcook in Nova Scotia. Nova Scotia represents the highest number of veterans and military in Canada per capita, and I believe my riding has the highest in Nova Scotia, with 23% either military or veterans. It's the former riding of Peter Stoffer, who did a very good job and continues to do a good job in this area.

I have to tell you that in the two years that I've been a member, I've tried to continue to learn and I'm learning every day in this area. I'm extremely ecstatic to be on this committee.

That being said, I agree with you in many ways, as most of us I'm sure do. The transition is something that I continuously ask myself about. We have to do better. I agree 100%. I don't understand, so I guess I'm learning.

In any profession with public servants—all of us around this table—it doesn't matter what area we work for in government, we can advise, let them know, three months before we leave our job, and guess what. Everything is in place when we leave. It's unacceptable, so I agree 100%. I thank you and your office for doing the work you do. It does enforce the very important discussion.

Now, there are 10,000 members who retire yearly, and 27% of them have issues in transition. I'd also like to note that 60% of them are non-medically released. It's not just a problem with one group. It's a problem right across the board. It's unacceptable in many ways.

I like your suggestion on the what, the who, and the how. I think that's the crucial part. You talked about a report card your office has. We, as government, need to create a report card. We're talking about it now, as far as how we can make it better. We need to be doing the same thing. I believe that our government, right now—and I'm not talking about politics; it's not about politics at all—needs to do this right, and we need it done quickly.

We said not long ago that no member would be released without all benefits in place. I think it's pretty straightforward. “No members will be released.” We should be ensuring that's what we do. It's going to take a little time, but we don't have much. I really believe that we need to work very hard on that piece.

I'd like to talk about a few quick questions, because I've already used up three-quarters of my time, of course. I have an issue with that.

On accessibility and awareness, how can we do better in those two areas that are a major part of the transition? Can you speak to that please?

• (0905)

Mr. Gary Walbourne: The two of them are distinct and separate, yet they work together in harmony at the end of the day.

I think raising the level of awareness of what's potentially available is a part for entities like myself. We have put a major emphasis on education and pushing forward over the last two years of my mandate. We're also building things like the benefits browser inside the Canadian Armed Forces, which will be a one-stop shop for folks to determine what's available for them.

I think that's an ongoing responsibility for everybody in the environment, not only the ombudsman's office. I know the chief of defence staff and CMP are doing a lot of work along these lines. That's the educational portion, and I think that's an evergreen piece that will have to continue to grow and change as the rules and regs around us do also.

As for accessibility, here we go. We're going to the core of the issue. Why is it so difficult to get into these programs? What is the reason for all the delay in the adjudication review processes? Why are we doing this twice? If we start to look at what we do and list out the steps and all the processes we've developed, I think we'll quickly find where the redundancies are.

We have to understand what we have done to accessibility. I'm not sure if I could answer the question if you asked me. What's the one problem with accessibility? We have to go back and look at all the pieces that have come to bear on that. They've all had an impact either positively or negatively, but we need to determine what that was.

Mr. Darrell Samson: Can you expand, if I have a few minutes, on the browser and the portal? If the military individuals are now involved directly in using it, would that not simplify the game at the end, and if so, how?

Mr. Gary Walbourne: Yes. It will simplify it. It's not live yet. We're still in the testing phase, making sure that everything is working. We've worked in conjunction with the Canadian Armed Forces on this, so they've done the review of the content to make sure we're accurate. We're looking to go live with it at the end of November. What this will be is a place...and it will be positioned so that family members can go and have a look at what's available. We're going to open it up on a large scale so that everyone can understand what is in the realm of the possible.

It will be a very simple explanation—go click what type of soldier you are, where you are, and what stage of your career—and it will come back and tell you what programs and benefits are available, much like the benefits browser that was built by the veterans ombudsman's office. When I worked there as the deputy ombudsman, they had already started building this internal model they were using for their own purposes, but I think Mr. Parent quickly saw the benefit behind that. Through his work, the department accepted that browser and it's something that's publicly available. I think they call it the “navigator” now. It's that type of work that I think we can do more of.

The Chair: Thank you.

Ms. Mathysen.

● (0910)

Ms. Irene Mathysen (London—Fanshawe, NDP): Thank you, Mr. Chair.

Thank you, Mr. Walbourne. I have to say that whenever you come here, you just energize this committee, because you truly have the interests of our CF personnel and veterans at heart. It's very clear, and it makes me feel that someday we will make the kind of progress we need to.

You talked about delays, and we've heard about that—things done twice. The whole issue of the service record not being accepted by Veterans Affairs is a key example, as you indicated. You must have a sense of where these redundancies are. Do you sense any appetite within DND or Veterans Affairs to truly address that?

Mr. Gary Walbourne: I can speak to the Department of National Defence's side. I think the next witnesses would be better prepared to speak to the other side.

I truly believe that the chain of command, the senior leadership inside the Department of National Defence and the Canadian Armed Forces, are seized with getting this right. I tip my hat to General Jon Vance when he talks about the journey and what they're going to do. It's a large-scope project he's talking about. I think the end date—2023 or 2025—is a little long. There are steps, redundancies in the system, that we could quickly identify and work on today.

I think two things could work in parallel. There is, to use a catchphrase, low-hanging fruit that we should get now, and then allow and support the bigger program that the chief of the defence staff is looking at rolling out. I think it may be the biggest part of the solution we want when we get there. There are things we're going to have to do prior to getting there. We cannot continue to see this type of performance on turnaround times and accessibility into these programs and services.

Ms. Irene Mathysen: Thank you.

I'm going to put you on the spot. You said, “I have few levers that I can pull in order to hold the department to account” because you don't report directly to Parliament. Would you like to have a situation where, clearly, you have those levers so that you are reporting to Parliament, and perhaps there could be some shakeup?

Mr. Gary Walbourne: This goes back to another report I published last year that was looking for a new governance model for this organization. As I said, there are very few levers we can pull.

Even with evidence-based information, we're not getting the traction that I think some of these reports warrant. We can suggest, recommend, and pressure as much as we can, but at the end of the day, the decisions will be made by the Minister of National Defence and the chief of defence staff.

I believe the issues we're talking about are of a national security concern. If we cannot continue to take care of our members and make sure that those who become ill or injured are taken care of, and put them in the right place. I've used this phrase before in front of this committee. It was George Washington who once said that the willingness of any young man—given the time and space he said it—to participate in a war, no matter how justified, will be dependent on how we treat our veterans.

I think these issues are of a national concern. I believe that this body, and others, have a right to have full detail of what's going on and to help anyone in this position to move those things forward.

Ms. Irene Mathysen: I empathize with your frustration, with report after report ending up on a shelf and not receiving the kind of attention and action it deserves. I've been around here for quite a while, and I've seen a lot of reports too.

I have so many questions, I really don't know where to start.

In terms of the universality of service issue—and you've touched on that—is there a disadvantage in retaining injured personnel in the military? We've heard from a number of witnesses that it would really help if people could be assigned different duties without having to be concerned about universality of service.

The flip side was on too many deployments. Because you have a limited number of personnel, those who are in acceptable physical condition are deployed too many times and are being used up. Is this something you've seen and considered?

Mr. Gary Walbourne: On the universality of service, General Vance has said they're going to start looking at ways to retain these soldiers who become ill or injured.

Is there an opportunity for these members who we've spent a lot of time, money, and effort training and developing to be contributing members of the Canadian Armed Forces but in a different role? I think the general is headed that way. I think this is absolutely revolutionary for where we are.

I do believe there is a saturation point. As time goes on, if I have 1,600 medically releasing members every year, there will come a point where an ability to hold will become a question. Again, the chief of defence staff has said they're going to look at the occupations and which ones may afford that opportunity to an ill or injured member.

This is absolutely wonderful news. I think this is the right way to go. I'll leave it to the chief of defence staff to determine what his levels are going to have to be, because he still needs to have a fighting force at the end of the day.

● (0915)

Ms. Irene Mathysen: I understand that balance.

I don't have any more time. Thank you so much.

The Chair: Mr. Fraser.

Mr. Colin Fraser (West Nova, Lib.): Thank you, Mr. Chair.

Thank you, Mr. Walbourne and Ms. Hynes for being here. We always appreciate having you before our committee.

Currently this committee is looking at a comparative study of services to veterans as it relates to other jurisdictions, comparing what we have and whether we can learn or take better practices from other jurisdictions and make recommendations to the government.

You talked about the term “reasonably” being used as far as attribution to service, and talked about the distinction between having two kinds of hoops to jump through. There are ailments or injury attributed to service by the Canadian Forces, and then there's jumping through the other hoop when you are dealing with Veterans Affairs.

I'm wondering if you're aware of how this is determined in any other jurisdiction, whether there are best practices that you're aware of in other jurisdictions and how we could possibly improve upon that in our situation.

Mr. Gary Walbourne: There are a lot of best practices around the world.

There are militaries in the world, the Dutch, Austrians, Australians, who have a duty to accommodate, so it's heading towards an easing of the universality of service. I think we're already headed there. When we look at Australian Defence, they have simplified their whole process by saying that all regular forces members—reserves, cadets, anyone inside of the Australian Defence Force—are considered as a member and covered under one insurance program.

It makes their processes very simplified. Instead of determining what type of soldier I am, A, B, or C, reg force, reserve force, or Canadian Ranger, it's one program that takes care of everybody. There's a good example of reducing complexity, reducing legislation.

How the Department of Defense in the United States transfers files from DOD over to the Veterans Affairs is much more simplified attribution of service.

There are many best practices. We usually look at the Five Eyes when we do a systemic review. We'll look at what type of program or practice they're using to see if there's any application or benefit to applying that to our systemic reviews. We'll sometimes base our recommendations on best practices that we've seen around the world.

Mr. Colin Fraser: Following up on that, can you point to anything in reports you have done recently that actually compares directly to other jurisdictions we can draw upon?

Mr. Gary Walbourne: This is where I'm going to get my director general of operations involved.

Mr. Colin Fraser: Okay. Sure.

Ms. Robyn Hynes (Director General, Operations, National Defence and Canadian Forces Ombudsman): As the ombudsman mentioned, we do look at other jurisdictions when we're doing our systemic reports. That being said, there are times when I think we really need a Canadian-made solution. Some things we take into account when we look at other like-minded countries is that the set-up of their system is a bit different. There are some countries, such as the U.S., that have a very different relationship between the defence department and their veterans department. They are much more closely linked in terms of the way they share information.

If you look at Ireland, for example, you see Ireland does service attribution because they have a type of duty to accommodate. If the illness or injury is a direct result of service, then they do what they can to accommodate the member. If it's not related to service, then they go into a different stream.

While we do look at it when we're looking at other reports, it really depends on the set-up of the system itself. When we did our report on cadets, for example, we did talk about Australia, as the ombudsman had mentioned, which has the same insurance plan regardless of what type of member you are. But we do always try to be cognizant of the differences between the countries as well in the way they are set up.

● (0920)

Mr. Colin Fraser: If I could follow up on Ms. Mathysen's point on the universality of service, from the U.S. witnesses we talked to, they had indicated there is more flexibility, obviously, than in our system, and I know we're moving in that direction, but in some cases they allow a limited duty status.

Are you familiar with the U.S. model of universality of service? Do you think this is something we should be moving towards, or are we moving towards it? What's your take on that?

Mr. Gary Walbourne: When the chief of defence staff says they're going to look, I think he's talking about it this way. I think they are going to look at best practices across the spectrum. I think the general said they have to get this right for Canada.

They will look across at all our allies for sure and other like-minded countries to see what the best practices are.

I don't know if we know what the end state looks like. I think we'll find there will be an evolution to this as we move forward. Once the careers have been determined and which ones could be an option, we'll start to look at how that is actually going to roll out, but I do believe we're headed that way in some shape or form.

Mr. Colin Fraser: Thank you.

Those are my questions.

The Chair: Mr. Eyolfson.

Mr. Doug Eyolfson (Charleswood—St. James—Assiniboia—Headingley, Lib.): Thank you, Mr. Chair.

It's always a pleasure to have you back. It's nice to see you again.

Earlier in your remarks you talked about how we're moving towards getting all the services in place, but you're still seeing veterans who have been released before the services.

What would you describe as the incidence of that? What proportion of veterans are coming forward having said they were released but the services weren't in place?

Mr. Gary Walbourne: The veterans' complaints, if they happen after the member has been released, usually all fall to my colleague Mr. Parent, who you will talk to in a few moments. I deal with the serving members, and the deal is that there will be no member released until all benefits and services are in place.

I have members who have received a release message, who are leaving in a couple of weeks, and have no notification on pension, no idea where their medical care is coming from. Let's open the kimono. The numbers have dropped off dramatically since the pensions have been transferred to PSPC. They have done a tremendous job in turning that around so that issue is coming off the table fairly quickly.

Again, we still have members who are releasing and are not sure where their next medical appointment is coming from, or what their compensation looks like, so those are still happening, at fewer numbers, but still happening.

Mr. Doug Eyolfson: Good. The last part of that was a perfect segue to my next question.

In regard to the health care, the general population has a universal single-payer system. The Canadian Armed Forces have their own medical system.

Can you think of any recommendations on how we can close that seam in particular? As you said, people in the general population will often have trouble finding a family doctor even in the large urban centres, let alone the rural centres. There are a lot of small towns where the one family doctor in town retires, and everyone's in that boat.

Can you come up with any recommendations? Is there a way to make sure the medical care is in place and they have things set up before they are released from the military medical care system?

Mr. Gary Walbourne: This is where one of the chafing points is going to present itself. We're going to retain these members. Have we thought through, after three years of this, when we have a couple

thousand members, who's going to supply the medical care for these?

We know right now that the latest numbers were 40 or 50 medical officers short inside the Canadian Armed Forces. Then we add the suicide prevention strategy that was announced. You talk about the number of health workers they're going to hire through that process.

I had the same question. Where are these people coming from? If a member is retiring to Gander, Newfoundland—there you go, I can use that one honestly—and can't find a family doctor, what happens? Is the medical officer still responsible for this member? These are going to be some chafing points. As you say, this is not restricted to the Canadian Armed Forces. This is a societal issue.

Mr. Doug Eyolfson: Absolutely. Thank you.

I know we've been doing this to death now. I'll be the third person to ask about this, but I'll ask a fairly specific question about it. We talked of course about universality of service. I appreciate your remarks about how we might reach saturation. We can't have too many members who are not able to be universally deployed, but in the service.

Is there an opportunity for a model of, say, a temporary modified duty? If someone is injured either with a mental illness or a physical injury, he or she is put into a job, works at that job, and would be trained in it, be proficient at it, still in the services, and then be released. Even if it's a military-associated job, say, in a base office, or something like that, so that they are well entrenched in that position and securely employed, and only then released as veterans, is that a possibility as a compromise between our current universality of service and completely getting rid of universality of service?

● (0925)

Mr. Gary Walbourne: I think it's a compromise. I just want to go back to one thing you said earlier. You said there were too many members left in the system. I think it's going to have to be looked at from two different perspectives. Not too many occupations can support, so which occupations can support? From that point in time we'll determine the number of members.

Yes, I believe it's a compromise. As I said, I don't believe anyone has the answer of where this is going at the end of the day. I'm extremely encouraged that we're having the conversation. It's not so very long ago, a couple or three years ago, if anyone had mentioned universality of service you would have been run out of town.

There's been a dynamic shift in what's happening. Yes, I think there are compromises, but what it's going to look like at the end of the day, I don't think any of us have a clear vision of that yet.

Mr. Doug Eyolfson: Okay.

Thank you very much.

The Chair: Thank you.

Thank you for giving me that minute back. We've just trimmed everybody by a minute here to get the next gentleman on board.

Ms. Wagantall.

Mrs. Cathay Wagantall (Yorkton—Melville, CPC): Thank you, Chair.

I really appreciate your being here this morning. I want to focus on the whole question of eligibility that you spoken about.

We have a quote from Bernard Butler, assistant deputy minister at Veterans Affairs. It says, “The financial, physical, and mental well-being of eligible veterans and their families is our goal and the strategic outcome to which many of the programs and services of Veterans Affairs Canada contribute.”

You talked today as well about determining eligibility, and simply checking a box should allow Veterans Affairs to immediately accept that decision. That really is the role of the Canadian Armed Forces as they're serving. This eligibility is a huge issue to so many. They fight so hard to be recognized as eligible. A lot of times it seems to be very subjective.

I'm just wondering how you see this issue. It is so important to our armed service members as they're transitioning to be able to be trusted, first of all, and second, to have that information available the way it should be available to them.

Mr. Gary Walbourne: I think you're getting very close to the core of some of the issues we have when we talk about eligibility: who's in and who's out of the club. Look, this country handles billions and billions of dollars from the taxpayer every year on trust. You file your income tax. We send you a refund cheque or you send us a cheque, and there may be an audit at some point in time.

What if we took the same type of philosophy and applied it veterans? You're in. You got ill or injured? You're in, but remember the government holds the right to audit. I think we could do away with the noise on the front. I'm sure there are malingerers in every system and every part of society. There will be those who'll try to work the system, but by building a system to catch those, we're locking out all the people who legitimately deserve access to these benefits and services.

For the soldiers who we trust the most, why couldn't we have a CRA program? You file your application. You get your benefits and services. The government holds the right to audit at any point in time. There is trust.

Mrs. Cathay Wagantall: Thank you very much.

You also mentioned that in relation to the Veterans Hiring Act, there's a 16-week standard and we're only at a 26% response rate. You say that more accountability needs to be demanded from senior leadership. I would like you to expand on that a bit.

Mr. Gary Walbourne: I've spent many years in the private sector also. I knew what my deliverables were, and if they weren't delivered, I knew my paycheques were going to be numbered in the future. If I have a public service standard that I've committed to meeting, and I'm consistently not doing it, there should be some questions. Why aren't we meeting this goal? Is this goal important? Is this the one we should be chasing? These questions, I think, are part of day-to-day business. They should be continuously answered, not addressed at a committee or in a report. These are things that everyone should be addressing every day.

If I'm not meeting 80% and I'm at 26%, what's the problem and what do I need to do to get there? No one is asking that question. I haven't seen any push or agitation in the system at all about the 26%. It seems to have flown under the radar.

● (0930)

Mrs. Cathay Wagantall: Also, in the business world you communicate a great deal with your customers to find out if they're happy or not. Do we do that to the extent that we should with our armed forces and our veterans?

Mr. Gary Walbourne: I believe there are certain cases that demand more engagement than others. Finding the right balance of how many times I should reach out to an individual, again, is something that is a developed and learned skill as we go through. Do we do it enough in all cases? No. Do we do it sufficiently in some cases? Yes.

Mrs. Cathay Wagantall: What about the browser that you're setting up and all of the work that you've gone through to get the information you need to know that you're doing it right? Has there been a lot of communication with service members to see if it's going to serve the purposes that you're hoping it will, or is that going to come after the fact as you release it and they try it out?

Mr. Gary Walbourne: I have two points to that. What we've done is we've run pilot programs with various sections. We used the MFRCs, which are a great conduit to our getting to the members. We've allowed them to go practise and play with it. We've given it to some of the IPSCs across the country. They've played with it. We've done some piloting.

The program, once it's up and running, is for the members. It's for them to determine and tell us what else they'd like to see in there or how they'd like to see it presented. We're going to give them a platform, but our office is totally open to taking any constructive feedback or doing any improvements to the system. It will be an evergreen piece of the kit.

Mrs. Cathay Wagantall: I have one more quick question. You also mentioned that if machinery of government changes are needed to knock down those barriers, there is a mechanism for that, and if legislative or regulatory changes are needed, there are mechanisms for that also. Would you like to describe to me what those mechanisms are?

Mr. Gary Walbourne: For example, if we need to introduce a new piece of legislation, we know what that mechanism is. There are certain steps. The bill gets introduced and so on and so forth. If we need to change the regulatory regime, there's a body responsible for that. All the mechanisms I talk about are common, everyday mechanisms that we have: how we introduce legislation into this country, how we change regulations, how we create policy.

Mrs. Cathay Wagantall: Sure, but then—

The Chair: I'm sorry. We're out of time.

We have Mr. Bratina for five minutes.

Mr. Bob Bratina (Hamilton East—Stoney Creek, Lib.): Thanks. I may share my time with Ms. Romanado.

Thanks again for joining us.

I have a simple question. What's the contract for new recruits to the Canadian military? Does the answer to some of these problems lie within the agreement coming in? We're worried about the coming out and the transition. What rights do the current recruits have in terms of the contract they make with the Canadian military?

Mr. Gary Walbourne: All recruits to the Canadian military sign on the bottom line also—unlimited liability. They enter into the same program that has been established for a while for all Canadian Armed Forces members.

There's a massive amount of training, time, and effort that goes into a recruit. I believe we're starting to look at that recruitment phase now and what other things need to be introduced at that point in time to ensure that these recruits understand what the programs are and what you do if there is an accident, illness, or injury. I think we need to get to a point in the recruitment phase where we tell people they need to self-advocate sometimes: make sure you're keeping track of your own records, make sure you're doing your own file maintenance, ensure you do the follow-ups.

I believe there is a level of effort currently going on around recruitment and how they're going to do it. We know there's a push on for recruitment. I think the issues inside and around the department are well known, so I think people are coming in with their eyes a little more open, and I think the Canadian Armed Forces is doing a better job of expanding on that once they arrive.

Where will it go in recruiting? Will there be further testing? Will there be psychological testing and all those things? Those things will be figured out by what the Canadian Armed Forces require, but I believe there is opportunity at the recruitment phase to make sure that these people are better prepared moving forward.

Mr. Bob Bratina: Ms. Romanado, would you like to take a question?

Mrs. Sherry Romanado (Longueuil—Charles-LeMoynes, Lib.): Certainly.

It's a pleasure to see you again, Mr. Walbourne.

You mentioned the benefits browser as a one-stop shop for serving members. I just want to check. Is that, in fact, for currently serving Canadian Armed Forces members? Those are benefits and services available to them through Canadian Armed Forces, DND. Is that correct?

Mr. Gary Walbourne: That's correct.

Mrs. Sherry Romanado: That is not talking about veterans' benefits vis-à-vis My VAC.

• (0935)

Mr. Gary Walbourne: No, absolutely not.

Mrs. Sherry Romanado: In terms of reducing redundancy, you mentioned that our ombudsman for Veterans Affairs, to whom we'll have the great pleasure of speaking in a few moments, also has a benefits browser, so I'm just curious if it would be beneficial to have all of these entities working together to have that one-stop shop so that when a serving member...

I've gone across Canada this year. I've visited 12 bases since March, talking to family members, talking to military, and talking to veterans. One frustrating thing, as you said, is that there are parts

everywhere rather than that one-stop shop. Would there be a possibility of creating *un guichet unique*, as you refer to it, for serving members or family members, wherever they are in their career in the military? Whether you're a new recruit, transitioning out, or already have successfully transitioned out, or you're having difficulty transitioning, you have that one-stop shop, whether it be My VAC or another.

What is your suggestion vis-à-vis that?

Mr. Gary Walbourne: That's exactly the mindset we took when we went into this. I believe the transitioning members need to know what programs, benefits, and services are provided by the Canadian Armed Forces, so I want to make that a one-stop shop for the families and the members.

We've intentionally ensured that we've built it on the same platform as the benefits navigator at VAC so that if and when we get to the point where there should be a closer relationship.... I've asked that they make sure the IT contractor keeps that as a plug-in module so that someone could plug in and say, "Okay, who am I at this stage of the game, and how do I unfold?" That would be the ultimate end goal, to get those two systems so there could actually be one that takes you from while still serving, to well after.

Mrs. Sherry Romanado: You talked a bit about working in lockstep. I was participating in the announcement for the joint suicide prevention strategy, and something we don't see often is having two ministers from two different portfolios working together on a common cause. We're delighted that this is in fact happening now.

With respect to your counterpart, how often do you meet with Monsieur Parent? Is it something you do on a monthly basis so that the two teams are working together to make sure that whatever issues you're seeing from your members, who will eventually become Monsieur Parent's members...? Are you meeting often in terms of sharing those best practices and issues that are coming along?

Mr. Gary Walbourne: Guy and I do not meet that regularly. Guy is running a shop. I'm running a shop. We both have issues we're trying to conquer.

The work that Mr. Parent and his group is doing is moving the Veterans Affairs issues forward. I think my job is to make sure those Canadian Armed Forces members who transition are best prepared to arrive in that world.

I think the desire and intent of both offices is exactly the same: let's make the system better.

Mrs. Sherry Romanado: Thank you.

The Chair: Thank you.

Mr. Calkins, you have four minutes.

Mr. Blaine Calkins (Red Deer—Lacombe, CPC): Thank you very much, Mr. Walbourne.

My line of questioning is going to be a little different. In my years of experience as a member of Parliament, I don't think it really matters what government agency or government department you're dealing with. There seems to be a cultural issue within some of those departments. I'm not saying this in a negative context. It's just the reality. I think that might be some of the issues we have here.

Prior to being on this committee I was the chair of the ethics committee, and of course, we oversaw privacy and access to information legislation. I'm very surprised to find out, through your testimony today, that there is a difficulty in Veterans Affairs receiving information from the Department of National Defence, or there is an issue with the Department of National Defence sending information to Veterans Affairs.

Is this an issue of pulling information by veterans from National Defence, or is this an issue of not wanting to push the information from National Defence to the Veterans Affairs department? Why would there be any barriers between those departments? Is there a legislative issue I'm not aware of?

Mr. Gary Walbourne: The legislative issue, as I understand it, is that the information, once collected, must be used for the intent for which it was collected. If collected by the Canadian Armed Forces, it has a certain restriction to it for Veterans Affairs Canada.

When we talk about file transfer and the delay, a lot of the issue was about digitization, and I think we're still talking about that.

I believe the ability to easily transfer files is impeded by some of the rules and regulations that are in place.

Mr. Blaine Calkins: Would you say those rules and regulations that are in place are to do with the privacy legislation or access to information legislation?

Mr. Gary Walbourne: There are a couple of issues. There is some chafe against the privacy legislation, and then there's also the compatibility of the systems and how they work transferring the information. I think there is also a compatibility issue.

Mr. Blaine Calkins: Are you aware of any cases of individual members as they're transitioning, filing access to information requests, being stonewalled with access to information requests, or any of these types of examples where we could streamline the system to make it more efficient? The information actually belongs to the individual, not to the government per se. At least, that should be the culture within the department. How many cases are we talking about?

• (0940)

Mr. Gary Walbourne: We've had a few cases where the member has had to go through access to information and privacy to get access to information they felt was being held and not released. Very rarely do we have a problem with the Canadian Armed Forces releasing information to the forces' member. It rarely happens.

Occasionally, we will get files where the member has been waiting for his file to be sent over to Veterans Affairs Canada. There can be a multitude of reasons for that: someone forgot, couldn't send it, or couldn't find it. It's not that great. However, there is still a compatibility issue and there are still some chafe points that I think we could eliminate if we had a close look at exactly how we do that.

Mr. Blaine Calkins: Okay.

My last question is going to seem a bit obtuse, but I'll see if I can make my point. As a person who was a former employee of the Province of Alberta and the Government of Canada, I've seen firsthand some of the issues. I'll call it "career management", and how an individual can best progress through the system and get promoted and so on. I'm not specifically sure how it works in the Canadian Armed Forces, but suffice it to say in the experiences I've had, sometimes the less I do and the less trouble I cause for myself as an employee, and the less I get done, the better chance I have of being promoted because I'm not taking any risks and not making any decisions that might cause consternation for my career advancement.

Are there any blockages within the Department of National Defence, any issues in that regard, where work is not being done as efficiently, rapidly, and in the best interest of the veteran as possible as they transition because people are actually too scared to make a decision within the agency for fear of reprisal, a promotion, or something of that nature? Is that a cultural issue in the Department of National Defence?

Mr. Gary Walbourne: I'd like to say a flat-out no. I believe we're getting to "no". I believe we evolve as we grow. There's a different approach on the ground in the Canadian Armed Forces, and I've seen it in my short time as ombudsman—three and a half years. I listen to the chief of the defence staff and the open conversations from the minister, and I think there's an actual cultural shift happening.

If that type of behaviour went on in the past, and I'm sure it goes on in every environment, I don't think that to be the case today. I don't have any evidence that supports that type of behaviour.

Mr. Blaine Calkins: Thank you.

The Chair: Ms. Mathysen, you have two minutes.

Ms. Irene Mathysen: Thank you very much, Mr. Chair.

I have spoken to you, Ombudsman, about military sexual trauma, and I want to raise it here. I understand that General Vance has put in place some processes that hopefully will address it, and I'm very grateful for that. However, I'm still concerned about the resistance or the fears of young men or women in regard to reporting sexual trauma. For example, they may be depressed, suffer from PTSD, but the cause of that is not necessarily in the medical records. If it is, it becomes a matter of privacy and, therefore, it's not necessarily tracked by the military.

There's the problem with tracking and then there's the problem, as I mentioned, of fear. It's a fear that if they go through the court martial process they will be exposed and their career limited, or a fear that there won't be any justice for them, because when they go through the court martial process only about a half of those perpetrators are convicted, or at least that's the information I have.

In terms of your experience, are you hearing from young men and women in regard to military sexual trauma? If not, what can we do to make them feel safer in regard to reporting it?

Mr. Gary Walbourne: I don't want to go back in history, but this office was set up coming out of Somalia in 1998, because of the sexual assault allegations and so on that happened around that point in time. The chief of defence staff has introduced the sexual trauma team. I think they are starting to really get their feet under them. We still deal with sexual harassment and sexual assault cases, people who feel more confidence in our shop than others, and we offer it as a service. We do try as much as possible to refer them to the sexual trauma team if they so desire. We always go to the victim's wants and desires. That's where we head.

As for the conversation around feeling secure and safe coming forward, I think we can look not very far around us today in the world and see that this is evolving and changing. I think the stance that the chief of defence staff has taken is an admirable one. He has stuck to his guns. He called it an "operation", and he's made it that. I think we're started on an evolution of working our way out of this. It's going to take some time. When I had to deal with these cases at a higher level, I saw nothing but acceptance from the chain of command, the ability of the senior bureaucrats to move quickly to fix and solve these issues for the individual. It's not my job to solicit complaints, but we do—

• (0945)

The Chair: You have to wrap it up in about 20 seconds, please.

Mr. Gary Walbourne: We don't solicit complaints, but for anyone who comes to us with this type of complaint, we'll take it forward for them and we can offer certain levels of protection.

Ms. Irene Mathysen: Thank you.

The Chair: Thank you. This ends our time for you today. I would like to thank both of you, on behalf of the committee, for all you have done and continue to do for our men and women who serve.

We'll recess for a couple of minutes and come back with Mr. Parent, the veterans ombudsman.

• (0945)

(Pause)

• (0945)

The Chair: I'll call the meeting back to order, please

We are tight for time so we're going to have to keep moving here. In front of us we have Mr. Parent, veterans ombudsman, and Ms. Squire, deputy veterans ombudsman and executive director.

We will turn the floor over to you, Mr. Parent, and you have 10 minutes. Thank you.

• (0950)

Mr. Guy Parent (Veterans Ombudsman, Office of the Veterans Ombudsman): Thank you, Mr. Chair. Good morning.

Good morning, committee members as well. Thank you for inviting me to appear before you again as you come towards the end of your comparative study of services to veterans in other jurisdictions.

As I said, on May 1, as you began your hearings, I think it is important to look at what other countries are doing to support their veterans in order for Canada to keep up with best practices.

At that time, I put forward also that it is imperative to develop Canadian solutions to address Canadian problems. I left you with three elements to consider as you weigh your evidence going forward. Those elements were context, complex design, and outcomes.

[Translation]

I gave you a few examples of the difficulty making direct comparisons with other countries, since each country designs and administers their programs differently to meet their own national needs, imperatives and economic realities.

I also showed you diagrams that illustrate the complexity of Canada's veteran support system so as to remind you that any changes in design must serve to simplify the system and not make it more complex.

[English]

Finally, I spoke to the necessity of having clearly defined outcomes that define the end state we are trying to achieve. Without a clear understanding of what outcome for veterans is expected, we have no benchmark to measure whether we have achieved success or not.

You have now heard from five countries and they have provided you with a good overview of their efforts to support their veterans. I commend you for the quality of questions asked and for making it possible for this information to be collated in your future report.

For my office, this body of evidence provides us with useful information to better discern how to improve the support to our own veterans. As you have seen, the scale of effort the United States requires to support its veterans is huge due to the size of the United States Armed Forces and its very significant differences in national social programs from the Canadian context.

The fact that the United Kingdom does not have a department of veterans affairs creates a very unlike dynamic to the Canadian experience of providing services for veterans.

[Translation]

France's colonial past and New Zealand's small size create a different perspective on the services offered to veterans.

[English]

Australia is perhaps the country with the closest comparator to a Canadian context, with its similarly sized armed forces, national social programs, and geographic challenges. However, there are still significant divergences that require us to consider the context.

One of the problems with looking at how other nations support veterans is how to replicate a good idea in our already complex system. Over the last few years, Canada has layered numerous benefits to address gaps without considering this as an opportunity to consolidate and simplify benefits. Even though these new benefits have made a positive difference for some veterans, it has also made it even more complex and difficult for our veterans to navigate the system. It is for this reason that I have repeatedly recommended that a personal navigator would be a valuable addition in terms of helping veterans who need it most.

Although looking at what other nations do is useful, my office still struggles with the fact that what we as a nation are trying to achieve for our veterans is not clear. Simply stating what we are going to do to meet the needs of veterans and their families is not enough. What does “meeting their needs” mean?

For example, let’s consider a veteran who has a service-related injury and cannot work. We know that such a veteran needs to have his or her income replaced. Does income replacement mean we only replace the salary at the time of release? Do we consider career progression, and what do we mean by “career progression”? Is there a retirement component to this after age 65? Is a survivor benefit available after death? Are we trying to replicate what the veteran could have received if she or he had a full military career, or is it a recognition benefit that recognizes some aspects of a full military career but does not fully compensate for it? How do we determine where we draw that recognition compensation level?

This example illustrates why I have continued to push for clearly defined benefit outcomes. When we know what we need to achieve for the veteran, we can design our programs to achieve that outcome.

• (0955)

[Translation]

The current approach to income replacement is intended to improve existing programs or create new programs without truly understanding the results we are trying to achieve. No one has taken the time to clearly define the level of income replacement that should be offered to veterans.

[English]

In addition to defining the outcomes for what benefits are provided, we also need to define the outcomes for how those benefits are provided. If we look at homeless veterans, for example, we see that local authorities at municipal and provincial levels are better positioned to meet the immediate needs of these veterans. We should define how the federal government is going to work with those organizations to enable their efforts so that these veterans in crisis can then access the federal programs that will take them out of homelessness.

With clearly defined outcomes through partnerships, we can leverage the expertise of other levels of government and third parties to meet the immediate and long-term needs of veterans and their families more effectively. Without clearly defined outcomes, we cannot measure success and we cannot communicate effectively with our veterans. If we could focus on specific outcomes, then we can focus the support on what the veteran actually needs, and we can communicate clearly the types of programs available. From the

veterans' perspective, this makes the system easier to navigate and understand.

In conclusion, as I cautioned earlier, while it is worthwhile to learn from others when developing new programs, it is difficult to draw direct comparisons, because each country designs and administers their programs differently to meet their own national needs, imperatives, and economic realities. These comparisons are made more challenging when we do not clearly understand the outcome we are trying to achieve in our own system. Above all, to achieve wellness for our veterans and their families, we need to stay focused on finding Canadian solutions to Canadian problems.

Thank you, Mr. Chair.

The Chair: Mr. McColeman.

Mr. Phil McColeman: Thank you for being here, Mr. Parent, and for your words today.

The theme of what I have just heard seems to be putting the cart before the horse, almost, in terms of creating another program, yet another level of benefits that complicate the system more. I want affirmation that what I'm hearing you say is that we need to do it at the other end and figure out what it is that we want the veterans to have, and then work back from that.

Is that correct?

Mr. Guy Parent: That's quite correct. It's a good statement.

Mr. Phil McColeman: That's what I'm taking from your words today.

Now, you're also saying, in the context of this study, that we have to be cautious about the fact that these are all different contexts around the world that have different settings and different goals to achieve. You've been in this job long enough now to have looked at what might be the best in class around the world. Can you share with me any perspective that you have in terms of systems that you would take something from and put into play in Canada?

Mr. Guy Parent: Yes. Thank you very much.

It's obvious in our report and so on that we have done comparative studies in the past with other jurisdictions as well. Personally, after having been almost around the world to talk to other veterans' organizations, I still believe we have one of the best systems around. However, there are ideas around the world that need to be considered, and one good idea that comes to mind, for instance, is Australia. Once you have been part of the armed forces there, you are entitled to mental health services, for instance, for the rest of your life. Things like that are things we should look at in the future.

I believe there are other countries as well that have good ideas, but to put them into our own system would be very awkward. For instance, one question that I didn't hear asked during the committee's work was how they define a veteran in other countries. I know that in some of those countries, for instance, it only includes people who have been deployed outside the country.

If that were the case in Canada, that would make a big difference in our support to veterans, so, really, I think our system is good as it is. It needs improvement, obviously, and maybe when we had the chance four or five years ago, instead of building benefits on top of benefits, we might have had better success if we had just decided to start over again and redesign a service for our veterans and their families.

• (1000)

Mr. Phil McColeman: Let's talk about that. Blue sky that one for me. What would your views be, having your knowledge now, being in the position you've been in? If you had a blank canvas and you were to start redesigning this whole system, how would you propose it, in very broad strokes?

Mr. Guy Parent: I would think, first of all, that the transition is the most important element, because people serve willingly. They have unlimited liability, but the transition from one culture to another is quite important. I think the start would be to look at a transition that is positive for the member, so that there's hope in going forward to another life.

One thing that has always struck me as strange is the fact that the Canadian Forces, and VAC, in fact, have never designed a transition process for the healthy veteran. The process that exists right now has been designed for injured veterans, and that's why I really welcome the opportunity coming forward from the chief of defence staff's announcement of a transition centre that will look after all veterans. Then if we have a healthy veteran who can transition well, we can actually look after the injured one when there are difficulties and barriers and those sorts of things that need to be eliminated.

That would be the starting point.

Second—I go back to my speaking notes—you have to have an outcome. What is it that you want our veterans to accomplish? Do we want them financially to reach the poverty line, to have the median income level, to have the same kind of revenue that they would have had, had they stayed in the forces uninjured? I think these are the things that should be considered in looking for the best system. I think it's important.

Mr. Phil McColeman: Okay. You are, sir, highly respected in your role. You have many years of experience in this role. You're going to see a broad cross-section of what those definitions should be in terms of outcomes, from various points of view and contexts.

Sir, you are probably, in my estimation, better seated than anyone else, with the knowledge that you have from advocating for veterans. What would you see those levels being? Really when you boil it down here, what you're saying in your notes today, to me—correct me if I'm wrong—is that it's the determination of income, the level of income, or the level of remuneration that an injured veteran...or whatever that outcome would be. What would you recommend specifically?

The Chair: Can you make that a very short answer? We're at the end of the time.

Mr. Guy Parent: My starting point would be something equivalent to what you would have made if you had stayed in the forces uninjured. In other words, people have a career plan. They know when they are going to be promoted. They have a

superannuation plan that they can plan retirement with, and that sort of thing.

To me, we have to look at what the equivalent would be. If they can't earn that, then Veterans Affairs Canada should supplement the rest.

Mr. Phil McColeman: Thank you.

The Chair: Ms. Lambropoulos, go ahead.

Ms. Emmanuella Lambropoulos (Saint-Laurent, Lib.): I'm going to start by saying that the outcome for these veterans.... Seeing as they've given their lives for their country, they should be given whatever services they need to get back, to have fulfilled lives after service.

[*Translation*]

Let me be completely honest: this seems much more complicated than necessary.

Sharing information between the two departments seems to be the solution, but that is not what is happening. I have trouble understanding why, since this is the only way to make sure that every veteran receives the services they need.

One of the biggest problems is probably related to the culture in the two departments. I do not know exactly what the problem is, but it is certainly related to the culture. Typically, if you want to change the culture in an institution or department, it has to be from the top down.

[*English*]

I don't know what the structure is within the department, but can we have a bit more information as to where you think the problem lies?

Mr. Guy Parent: Thank you. That's a very good comment.

I would say that culture is certainly where to start. On the National Defence side, obviously, if there is a resistance to sharing information, because some secret information may be contained within personal files and that sort of thing.... On the other hand, Veterans Affairs Canada, as we know, have had their fingers burned in the past with having privacy of members accessed.

In the end, if a client of Veterans Affairs or a serviceperson signs confidentiality waivers, information should be flowing back and forth. It's the individual's wish. The problem right now, as we know, in the transition process is that there are about six different confidentiality waivers that have to be signed for the transfer of documents to take place. Again, it's very complex. There is a bit of a culture of protectionism. It's a bit of everything.

Another thing is the fact that on the National Defence side, for instance, right now your service records are held by National Defence, but your medical records are held by Archives Canada, which is in Winnipeg but the access office is here in Ottawa. You can't make it any more complicated than that.

All of that goes into that particular issue.

•(1005)

Ms. Emmanuella Lambropoulos: When a member begins service, is there no way to sign waivers for both departments, or to have one document saying that whatever information they share with this department will also be shared with...?

Mr. Guy Parent: That would be one of the ideal approaches. In fact, I'll go back to one of the questions before. One thing they do in Australia, for instance, is that the veterans affairs side gets in contact with the recruits. As soon as they are enrolled in the forces, they are clients of veterans affairs, and veterans affairs has access to their records.

Right now, Veterans Affairs Canada is trying to introduce My VAC account to everybody who is serving. Then we will be in the same position as Australia.

Ms. Emmanuella Lambropoulos: I have one last question.

In your experience—I know you have a lot of it and you've been doing great work—do you think it would be best at this point to merge the two departments, or to find a way to have them work better together?

Mr. Guy Parent: What we need to look at is harmonization, and maybe look at a sequential process. If we merge the two completely, we'll be facing the risk of having money that is supposed to go to operations taken away from the veterans' side to support our veterans and their families. The Canadian Forces are an operational unit.

We are lucky to have two separate departments. If you go around the world.... That's why I'm saying that our veterans and families are well looked after because of that, the independence of the departments.

Ms. Emmanuella Lambropoulos: Thank you.

The Chair: Ms. Mathysen, go ahead.

Ms. Irene Mathysen: Thank you, Mr. Chair.

I'd like to touch briefly on what Mr. McColeman and Ms. Lambropoulos said.

You said it in your brief, that, essentially, there is frustration in regard to the complexity of it all. For example, if someone has a service-related injury and can't work, does income replacement means only the salary, etc., down through the line? It is complicated—I understand that—and it seems to be unnecessarily complicated. Do we need an advocate who is simply there and says, "No, this individual has given his or her life to the country, so there must be an automatic assumption that we are simply going to compensate and make sure that there is the financial security that should go with a full career"? You talked about financial goals and whether we should bring people up to the level of poverty. I would say that this would be a slap in the face to everyone who served.

Do we need someone who is given the authority to say, "No, we're going to cut through this, and we're going to make sure that we have been absolutely fair and honourable in terms of dealing with this veteran"?

•(1010)

Mr. Guy Parent: I believe that's happening right now. The departments are working together, even with the central agencies, to

try to make it simpler and reduce complexity in the access to programs, for instance by consolidating benefits. As I said before, if a person is able to generate a certain percentage of the revenue that they could generate while they were serving, then the payment financially is the difference between that and what they can generate themselves.

However, I think we have to be careful that we don't concentrate just on the financial aspects. That's one of the complications. We always say that financial well-being is important because it will allow you to transition successfully to the vocational rehabilitation and the psychosocial rehabilitation. Unless you have a decent income while you are doing that, you are facing some risks. I think that's important. It will never be simple, but there are instances right now, as you've seen in our reports, where people are actually compensated more. They are actually earning more than they would have earned if they had stayed in the forces uninjured. Sometimes they are getting less...but never at the right time in their transition. I think that's important.

The one hope now is that, with the veterans affairs minister having the responsibility of an associate defence minister, there would be more reach inside and more possibility of harmonizing the programs that were in existence before.

Ms. Sharon Squire (Deputy Veterans Ombudsman, Executive Director, Office of the Veterans Ombudsman): One other way to reduce the complexity is to have the onus on the department versus the veteran. For example, if the department met with the veteran and looked at the file, looked at everything, and then they were responsible for determining every benefit the veteran was eligible for, instead of the veteran having to understand the system and apply for every benefit, that would help a lot as a first step, in addition to what Guy said.

Ms. Irene Mathysen: Yes, it's the old government game. If you can guess what you are entitled to, then maybe, if you put it in the right format, you might get what you've earned. I am very familiar with that.

Ombudsman, you talked about financial security and the various programs. I wonder if you could give an opinion in regard to the three primary methods of compensation that are currently in place for those who are medically released. There is the lump-sum payment, such as the disability award, along with the adequate income replacement measures. There is the lifetime monthly benefit, and third, the convertible pension, whereby the veteran can receive the lifetime monthly pension and then convert it into a lump sum.

Can you comment on the advantages and disadvantages? In regard to some of the pensions, I understand that benefits—medical services, etc.—have been substituted for some of the monetary things. When I start to look at all the possibilities, I'm trying to figure out whether veterans are further ahead or behind.

Mr. Guy Parent: That's a good question. Holistically, the new Veterans Charter provides three types of payment. The first, as you say, is the lump sum award payment, which is strictly for pain and suffering. It has nothing to do with replacing income or anything like that. It's strictly for pain and suffering.

Unfortunately, that has been misinterpreted in the past. People looked at that and thought maybe it was to replace income. The only challenge with that particular payment is that you have to be careful, because when it's given to people who have mental injuries and illness, they might have some difficulty managing that lump sum payment.

After that, the other payments are two vocational rehabilitation programs. There's an earnings loss payment—which is now 90%, up from 75%—but over and above that, once vocational rehabilitation is done, there is what you could call a pension for life. It's really a payment for life under the CIA, which is actually for the most seriously injured people. It gives a monthly payment for the rest of your life.

These are the three cash or income replacement and pain and suffering payments that are available, and they're much more generous than in some of the other countries you've talked about.

• (1015)

The Chair: Thank you.

Mr. Bratina.

Mr. Bob Bratina: Thank you.

It's good to have you here once again. It would have been interesting if you had been at this table an hour earlier, for a bit of give and take between your colleague and you. I'm going to ask you directly: is there a working relationship between the two ombudsmen?

Mr. Guy Parent: Yes, there is. What Gary was alluding to is that not only do we personally keep in touch, but also there is a relationship between my deputy and his deputy. Almost on a weekly basis, people are talking about different reviews that we're doing, helping each other, and that sort of thing. There's a consultation going on continually.

Also, very often we have to transfer files over to the military ombudsman. For instance, in PTSD cases, where information is required from the DND side, we would do a hot transfer to the DND ombudsman. This means we would speak on behalf of the client, so they don't have to repeat their story. There is a relationship in that respect.

Mr. Bob Bratina: In any government, we're always dealing with silos—these people don't talk to these people, and it would be a lot better if.... You made reference to the fact that there is no veterans department in the U.K. What would you say to a potential harmonization or rationalization of the two entities? Is that something that would be useful, or are things working fine the

way they are in your view, with the two ombudsmen and the two departments somewhat separate? Is that something we should be moving toward or not?

Mr. Guy Parent: The model we have now, with two separate ombudsmen and two separate departments, is working fine. It certainly needs some tweaking. It's going to take some refinement, but we're fortunate to have a full entity looking after our veterans and their families. What I see in other countries that don't have the actual veterans department is that, sometimes, a lot of money that should be flowing towards supporting veterans and families is flowing into the department for more toys, more missions, and that sort of thing. I think we're fortunate to have the two.

Mr. Bob Bratina: As a former councillor and mayor, I couldn't get over the comment in your presentation that local authorities at municipal and provincial levels are better positioned to meet the immediate needs of homeless veterans.

As the mayor, I actually had a senior adviser on military heritage and protocol, which some of my colleagues and the media made fun of, as though we were going to attack Burlington or something. The point that I wanted to stress was the importance of reacquainting the city with its military heritage and presence. We have a large garrison and lots of soldiers. The sad loss of Nathan Cirillo was under my watch.

Is there currently any working relationship or a sharing of information with community services people in various communities? I would assume that if a homeless veteran was discovered, someone would say, "Here's a phone number. Go call that guy," as opposed to embracing the person and working with him at the local level. Can you tell me whether there is a flow of information to municipalities and provincial governments, or at what level it is with regard to veterans and municipalities, as you suggest in your line?

Mr. Guy Parent: I don't think there is presently—

Mr. Bob Bratina: I don't think so either.

Mr. Guy Parent: It's nothing coordinated.

It happens by word of mouth and by experience. I'll give you a good example of the sequence, for instance.

Vets Canada is an association that is contracted with Veterans Affairs and is actually responsible for homelessness for veterans. They are contacted when a homeless veteran is found. They are only looking at getting him off the street and into housing. The housing is the responsibility of the municipality, normally. Once the veteran is housed, medical care becomes the next step. The province looks after that. When people are receiving provincial health care, the federal programs for veterans should fall into place after that. There's never been any linking of all these levels of responsibility, and that's what's needed.

My hope is to talk to the Federation of Canadian Municipalities at their next meeting, to talk about what I've heard from mayors around Canada, what they do for veterans, and how they deal with homelessness. We need to try to get that link in there. Right now, the only place where there might be that connection is in Nova Scotia, because they have a provincial parliamentary committee for veterans. When you have Halifax and the province involved with veterans, then we can make the link, and that's my point. Some services are provided, probably now, by some of the levels that are available in some other jurisdictions.

• (1020)

Mr. Bob Bratina: It would be an interesting proposition for the veterans committee of our city—and I'm sure most cities would have one—to introduce the notion and have some interplay. The veterans committee would report to council, ultimately, and bring it into consideration.

Thanks very much.

The Chair: Mr. Eyolfson.

Mr. Doug Eyolfson: Thank you.

It's nice to see you again. Thank you again for coming.

I'm at a disadvantage in that at least four of the questions that I came up with have been asked by other people, so I'm crafting new ones.

One of the things we talked about is that we need a Canadian-made solution, but we also need to look at best practices. You mentioned Australia being geographically and societally very similar. Can you think of any specific elements—things they're doing very well, in terms of their veterans affairs—that we can take an example from to use in Canada?

Mr. Guy Parent: Yes. I've mentioned two already. One was the fact that once you've served in the Australian Defence Force, even for one day, you become a client under the mental health care system for the rest of your life, which is a very important aspect.

The other is that there are records and information that are shared with veterans affairs right from the time an individual joins the forces, so they become clients. Everybody who serves in the Australian Armed Forces is a client of Australian veterans affairs. They do that right from the start. It goes back to what we talked about before, that we have the My VAC account now, which is useful for all serving members. Those things are important.

Ms. Sharon Squire: Building on that, for the Australian model Guy just described, the idea is that once that cohort is through, they will not have to make an application because it will be paperless. Once they have been injured and need something, veterans affairs already knows. There's no application necessary when they leave, as they have all the information. There's no application necessary for that veteran. That's where they're trying to head with their huge transformation.

Mr. Doug Eyolfson: Can you think of any barriers to establishing that in Canada?

Mr. Guy Parent: No. If the VAC account were introduced for recruits as soon as they joined the forces, then the link would be there.

An important point that goes back to a culture issue is what my colleague mentioned before. We now have to encourage serving members to be their own promoter of wellness, as it were. They need to record what they do, where they've been, and every time they have treatment. Instead of relying on a third agency to do that, we need to change the culture of the serving members, so they say, okay, I'm responsible for my future as well. If we have that in the future—if we have a link between two departments and the people are actually conscious that they have a responsibility—then I think we're heading in the right direction.

Mr. Doug Eyolfson: Thank you.

As a happy coincidence, just like your predecessor from an hour ago, you made a comment that segues into my next question. You talked about medical records, and I made an earlier comment about how we have the two different systems.

We know that there have been many difficulties with transferring records from CAF to the different civilian agencies or to the different provincial systems. Many provinces haven't gone paperless. I worked in the emergency department of a major teaching hospital where we still used paper charts. For long-term patients, they would be seven volumes thick—in the 21st century.

Right now, is the ability to transfer medical records from CAF to the different civilian health agencies improving across the country?

• (1025)

Mr. Guy Parent: It is improving, because of the digitized system. Where we face difficulty is with the tracking down when somebody has been out of the forces for a few years. Some are paper records. Others are microfiche. Some are digitized. This is one of the issues we are faced with on the medical side.

One of the things that have improved is that... At one point in time, the interpretation of an injury or illness was different on the DND side and on the VAC side. They used different language. Now, at least, they have harmonized that and they use the same language, which makes it helpful for application and that sort of thing.

The other challenge on the medical side was with medication. For instance, the compendium of drugs for DND was different from that of Veterans Affairs Canada, so in the transition there was always a problem for the individual switching to a medication available on the Veterans Affairs Canada side.

Moving forward, these things are improving.

Mr. Doug Eyolfson: Yes.

I can tell you that there are also interprovincial barriers for medical records. Where I worked, the hospital could certainly pull up a computer record of every prescription that this patient had had in the last six months, but only in Manitoba. If the patient came from Ontario or Alberta, we had no idea what they had been taking. That seems to be another barrier. The provincial systems aren't talking to each other.

The Chair: Thank you.

Mrs. Wagantall, you have five minutes.

Mrs. Cathay Wagantall: Thank you.

Thank you so much for being here.

I want to focus on your conversation about outcomes and communication. You say, “Without clearly defined outcomes, we cannot measure success and we cannot communicate effectively with our veterans. If we could focus on specific outcomes, then we can focus the support on what the veteran actually needs, and we can communicate clearly the types of programs available. From the veterans’ perspective, this makes the system easier to...understand.”

Basically, you say that we need to clearly define outcomes, including outcomes on how services are provided and what we are actually trying to provide and measure for veterans. In talking about those things, this impacts every other part of the conversation completely, yet it doesn't seem to be something that has been focused on.

You've done a number of reports. Do you have any idea how many?

Mr. Guy Parent: Do you mean on this particular subject?

Mrs. Cathay Wagantall: Reporting on concerns for veterans...?

Mr. Guy Parent: There would be 30-some, so far.

Mrs. Cathay Wagantall: Great.

There are 11 reports from Mr. Walbourne, and a number of reports from us. There are reports everywhere, but never has this been dealt with, to define who we are and why we are here. Really, that has to come from our veterans. We talk about “communicating effectively to veterans”. We actually need to hear from them, as much as possible, before we try to communicate to them.

Apparently, we are about to begin another study dealing with trying to identify the impediments to transition. I've heard a lot of those discussed already. Would we not be wiser, at this point, to find a way to come up with very concise answers to what outcomes we need to clearly define and how we are going to define outcomes for how service is provided, so that we can move on? As long as that isn't defined, it's like you say, we're shooting at the target but never reaching the bull's eye.

How do we do that? How do we come up with those outcomes?

Mr. Guy Parent: Certainly, I agree that one of the best ways to get there is through consultation with our veterans. They are the ones who can best advise on what their needs are, but it is also important to recognize that now, with the ministerial advisory committee, there is a very strong consultation process in place and people are able to identify what their needs are.

On the business about successful transition, in fact we are releasing a report in the next few days that has to do with the determinants of a successful transition. I think it's important because the key factors in there are everything we are talking about right now. One of the things that are very important is that people must take control of their transition, and then they must be financially

supported throughout. They shouldn't have any financial difficulties to achieve a transition.

Again, it goes back to what the financial goal is.

• (1030)

Mrs. Cathay Wagantall: I understand that. If those goals aren't clearly defined for them, how are they supposed to navigate that? It should be clear. When these individuals sign up and say, “Yes, I'm 100% expendable”, they should know exactly what those outcomes would be.

I just heard you mention that it needs to be more the responsibility of the armed forces members to keep track of their visits when they go to the hospital. That's all done through the Canadian Armed Forces. Their care is through the Canadian Armed Forces. Why is that not all there for them?

Mr. Guy Parent: Not necessarily. Some people do see physicians and caregivers outside of the system sometimes. Again, we go back to the universality of service and not wanting to divulge some of their injuries or illnesses. They might make use of the provincial facilities for care.

Mrs. Cathay Wagantall: Not wanting to divulge means we have a culture problem.

Mr. Guy Parent: That's exactly what the universality of service has led to—the fact that now people would not divulge the full extent of their injuries because they would not meet the universality of service standard.

Mrs. Cathay Wagantall: The sad thing about this is that, when you sign up, there should be a note somewhere, “You may not want to divulge everything, so make sure you keep track of all your appointments.” That just shows a clear problem.

Mr. Guy Parent: It's a different culture.

Again, I'll go back to the outcomes. Another example is these vocational rehabilitation programs. There are two available now—one on the DND side, and one on the Veterans Affairs Canada side. We can't tell you which one is best, because there is no outcome that has ever been measured. We know that many people have been through, but nobody has ever...

Mrs. Cathay Wagantall: Who is nobody, and how do we get those outcomes measured?

Mr. Guy Parent: It was one of the recommendations of this committee, in the previous report, that the vocational programs be reviewed. That has never been done.

Mrs. Cathay Wagantall: We should, as a committee, possibly study what we would recommend as the way to approach getting those outcomes and what those outcomes should be, based on testimony.

The Chair: Thank you.

Mr. Samson, you have five minutes.

Mr. Darrell Samson: Thank you very much, Monsieur Parent and Ms. Squire, for being here today.

I have only five minutes and about 50 questions. That's not going to work. On the record, I think we should set up a meeting for an hour and have a long chat so I can continue to learn about the process. I'll try to fire the questions quickly, and hopefully you can.... I don't know where to start. I have too many of them.

My colleague Bob said earlier, and I am finding it quite interesting, that the levels of government—the federal, the provincial, and the municipal—need to work together. If you want to drive me nuts when I'm asking about a veterans issue at the federal level, you just tell me that I have to talk to a province about a doctor. It's not about the doctor. As much as we may be talking with the doctor, it's about the veteran. We have to try to solve and work and find solutions for the veteran.

I've been in this committee only a couple of times, but Bob really pushes the question about the municipal government playing a better role. I agree with that, and I learned more about that one. I don't need an answer from you on that one.

The other one.... I'd love to talk about the browser and the comparison between VAC and the Canadian Armed Forces, and how we can make it blend together and that. There are all kinds of good questions there, too, but I don't want to ask you that either, because I don't have time for that.

I'd like to ask you about accessibility and awareness, because that's a big issue. You talked about those who are injured and those who are released non-medically. I could go a long way on that, too, but today I won't go there either.

I commend VIA Rail, for example—I'll get to some questions later. When I look at VIA Rail and I look at their initiative about hiring.... First of all, this year—we have not finished the year; we still have a couple of months left—veterans and their families can travel VIA Rail at 25% off. I've told that to all my networks. That's extremely important, but the time frame is running out on that.

There is also the initiative that 10% of their new hires will be veterans. That's something to be proud of. That's something we should be doing in all our constituencies, 338 of them. We represent all of Canada. I'm going to start talking to my business people and communities. Are you hiring 10%? Let's start somewhere. That's an interesting one but not a question for you, not today anyway.

In Nova Scotia, I have another issue. I'm working closely.... I'm glad you made reference to the Nova Scotia parliamentary committee, because there is something there that we need to work on. My colleague Mr. Fraser and I will study that. We've had a conversation around that, and some meetings with them, which sounds quite interesting.

Let's take quickly.... Again, I didn't get to any questions. How much time do I have?

•(1035)

The Chair: You have two minutes.

Mr. Darrell Samson: The OSI clinic is a very good clinic. I visited it and I'm quite proud of what is there. The veterans are also quite happy to some extent. By that I mean it's not a 24-7 service, so I can't time my crisis, at least I don't think I can. When I do, when I go to a regular hospital, I'm not sure.... First of all, as my colleague

said, they don't have the data because they don't track and they don't talk to each other, and second of all, the environment is not really very good for some of the crises. They're talking about a 24-hour clinic, where there would be emergency services dealing with veterans. We're having some great discussions between the group of veterans, me, and the Province of Nova Scotia. We need to continue that.

I won't ask you that question, but I'm going to go right to my questions now, Mr. Chair, because I know you're going to get frustrated with me in a minute.

Here are some questions I have. I've done town halls, but I'm going around to every Legion right now talking to veterans. Here are some of the questions they have, and maybe you can answer them. I'll give four in a row, and you can answer them quickly.

The first one is that you talked about those who are healthy. If you're forced to retire due to old age, what are your options? That's a very important question.

Second, why can't dependents collect tuition assistance if the member is released on injury or disability? If he can't—if he's not ready for it—can the kids access that?

Third, what certification is in place for when you transition? There's a big issue about certification. They could go right to the workforce and not have to upgrade a hundred times.

The final question would be about veteran ID cards. What can you say about that and when can we expect something solid?

Thank you.

The Chair: I apologize for our lack of time. Could you get the answers to those questions back to the clerk and he'll get them to the committee?

Mr. Guy Parent: Sure.

The Chair: Thank you.

Mr. Darrell Samson: I did it again. I out-talked myself, sorry.

The Chair: Mr. Calkins, you have four minutes.

Mr. Blaine Calkins: Thank you.

Mr. Parent, would you say the veterans you advocate for prefer a system that would, as a default, say yes to all the services and benefits the veterans are actually supposed to be entitled to, and that the Department of National Defence or Veterans Affairs Canada would have the duty and the diligence to have to say no to those benefits? Should the onus be on the department rather than on the veteran to prove?

Mr. Guy Parent: Certainly. We've had that discussion before. It should not be the veteran pulling out information and trying to access benefits. It should be pushed out of the department. We've heard before from my colleague that we should spend less time on that dedication and more on the audit later on, for exactly that reason.

It's a matter of trust. We trust people to defend our country, we deploy them on missions, yet when they become injured and need access to benefits and programs, we drill the information out of them and ask for all kinds of proof of service and that sort of thing. No, I agree, it should be forward. If you served, you should be eligible, and how eligible you are is determined by Veterans Affairs Canada. We talked about accessibility before, but accessibility to information is a problem as well, because nobody knows what's happening on the veteran's side.

Mr. Blaine Calkins: That was a question I had for the previous ombudsman from the Department of National Defence. You were here; you heard the questions I asked him. What are the issues legislatively with the access to information or the privacy legislation that currently is in place between the Department of National Defence and Veterans Affairs Canada? If you made a recommendation to this committee to change the legislation when it comes to that, what would it be?

• (1040)

Mr. Guy Parent: I'm not sure the legislation is actually impeding access now. It's the complexity of reaching for the information. I don't think the legislation is a problem.

Mr. Blaine Calkins: The legislation prescribes the methods by which access to information and privacy are done. Anyway, that is something you might want to examine at some point in time and get back to the committee on.

Ms. Sharon Squire: Multiple consent forms is one of the biggest issues. It adds to the complexity. Many times there are five and six consent forms that have to be signed.

Mr. Guy Parent: Yes, and people are using legislation as an excuse, very often.

Mr. Blaine Calkins: Do the veterans that you advocate for think that Veterans Affairs Canada should be duplicating the determination of physical or mental injury after the Department of National Defence has already done so?

Mr. Guy Parent: Are we talking about attribution of service?

Mr. Blaine Calkins: I know that, when veterans or serving members are released, the determination has already been made that they're not able to provide the level of service required.

If they've been injured as a direct result of their work, whether it's a combat injury or whatever the case might be, they're being asked to leave the forces because they're no longer physically capable or mentally capable of doing their job. Then they go to apply for benefits through Veterans Affairs Canada and they have to go through the exact same determination of whether or not they're injured through Veterans Affairs Canada. Do you believe that is a useful duplication of services that is in the best interest of the veteran?

Mr. Guy Parent: What happens is that, especially if a veteran has been out two or three years, they have to determine if the particular

injury that is being claimed is attributable to the service. The person might have been released medically for illness or whatever, yet the injury that they're claiming may not be what led to their release. That's why the process is in place right now. Is it necessary? Personally, right now, based on the way the system is designed to provide benefits for both injuries attributable to service or not, I think it's a moot point.

Mr. Blaine Calkins: Are you saying that, in the Department of National Defence, if somebody injures themselves playing hockey and they have to be released from the Canadian Armed Forces, the Department of National Defence doesn't clarify the source of that injury upon the release of that individual from the Canadian Armed Forces?

Mr. Guy Parent: Not necessarily. They're released on a diagnosis, not on where and how the incident happened.

Mr. Blaine Calkins: That's the only difference between Veterans Affairs Canada's assessment and the Department of National Defence's assessment.

Mr. Guy Parent: It's the attribution of the particular injury being claimed to a service instance.

The challenge of being on duty or not is a big one. Whether it was a hockey game that was supported by the forces and part of their physical training.... That's why it's complicated sometimes and Veterans Affairs does not help in reducing the complexity of understanding duty and that sort of thing.

The Chair: Thank you.

Ms. Mathyssen, you have two minutes.

Ms. Irene Mathyssen: Thank you, Mr. Chair.

I think the nation was horrified when we learned about just how many homeless veterans there are in our communities. I understand that municipalities, the people on the ground, have the best capabilities to identify those folks. They identify, then the province kicks in for the medical care and then VAC or the feds kick in about how to deal with this.

It seems to me that the federal government, specifically VAC, should be there as soon as that person is found. Due to federal policy, we have an incredible, critical, and tragic shortage of housing. It's just not there. Should federal responsibility kick in much sooner, as soon as that individual is found?

Mr. Guy Parent: It's a good question. I believe that's why Veterans Affairs has gone to contract with Vets Canada, so that they're there instantly and across the country. Within minutes, if they're called, they can have somebody there and they have a boots-on-the-ground program. They do that on a consistent basis.

That's one of the ways they can do that. I think in the past, one of the challenges has been the emergency funds because a lot of times people need money right away and it was an administrative nightmare to try to get money out of the emergency fund. Now at least, I think the last budget brought in some emergency funding that will be more accessible, with a lot less administrative burden.

•(1045)

Ms. Irene Mathysen: That's encouraging because this problem has been downloaded and downloaded and I think it should be taken up by those who are responsible. Clearly, it's a federal responsibility.

My last question concerns supports for families. Are they enough now? Do they get the kind of health, financial, and emotional supports they need? Have we done—

The Chair: Sorry. We'll have to get that answer emailed back to us, please. We've run out of time for the room here and we have another meeting after.

Our clerk can get the questions back to you, if you didn't have a chance to copy them all. On behalf of all of the committee, I would like to thank both of you for all that you have done and continue to do for our men and women who have served.

With that, I'd like to call a motion to adjourn.

(Motion agreed to)

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