

# **Standing Committee on Veterans Affairs**

Tuesday, February 13, 2018

#### • (1105)

# [English]

The Chair (Mr. Neil Ellis (Bay of Quinte, Lib.)): We'll start meeting number 75, pursuant to Standing Order 108(2), study of barriers to transition and measurable outcomes of successful transition.

We have National Defence and Canadian Forces Ombudsman, Gary Walbourne, also Robyn Hynes, director general, operations.

Welcome to you both.

We'll start with 10 minutes of testimony and then we'll swing into questions.

Thank you, Gary. The floor is yours.

Mr. Gary Walbourne (Ombudsman, National Defence and Canadian Forces Ombudsman): Thank you to the committee for inviting me here today.

Ladies and gentlemen, I am entering the last year of my mandate, and this may well be the last time I appear before this committee to discuss transition from military to civilian life. On the subject of a seamless transition, I believe the cycle of constant review is doing more harm than good to the current and former members of the Canadian Armed Forces. This committee is currently studying the barriers to transition. The barriers are well known; hundreds of recommendations have been made to fix them by this committee and others over the course of successive governments. Dozens of recommendations have been accepted and implemented, however, many more have not.

Ladies and gentlemen of this committee, in 2010, Veterans Affairs Canada conducted a major survey on transition in concert with Statistics Canada. A related study with Statistics Canada was also done in 2012. The release of the results of another StatsCan survey of over 400 Canadian Armed Forces members, veterans, and their families on the subject of transition and well-being is anticipated this month. I can guarantee you that those results will tell us exactly what we know. Enough is enough.

Prior to this committee appearance, I circulated my testimony at previous committee appearances. The points I will make on transition today are the same ones I made in the reports produced by my office. I believe that much of what you are looking for has already been presented by me and other witnesses.

If at the end of my appearance here today I have persuaded you to shift direction and focus on implementing what has already been studied, then I—indeed all of us here today—will be doing right by our transitioning members. They and we do not need another study into transition. We just need to do it. We know what needs to be done.

I would respectfully suggest to members of this committee that you take a hard look at why, after years of studies and ignored recommendations, so little has been done. Senior leadership needs to be held accountable for implementation, not tasked with more research. The recommendations I have made to government are scarcely given credence. This includes one simple recommendation that would greatly benefit our transitioning members: authorizing the Canadian Armed Forces to determine if a member's illness or injury can be attributable to service. As I have said, the Canadian Armed Forces knows when, where, and how you have become ill or injured. The Canadian Armed Forces should tell Veterans Affairs Canada that the illness or injury is attributable to their service, and this determination be accepted. This recommendation would significantly decrease wait times for veteran services and benefits. I made this recommendation in 2016, and Veterans Affairs Canada and the Canadian Armed Forces keep passing the hot potato back and forth, creating some very fanciful excuses as to why it cannot or should not be done. The only thing they seem to agree on is maintaining the status quo at all costs. That is a problem of bureaucracy; it serves itself.

Between the two parliamentary committees, both ACVA and NDDN, 14 studies have been conducted, with 190 recommendations made. The Office of the Veterans Ombudsman and my office have also made a number of recommendations. As all of you are aware, my recommendations are based on evidence. Evidence is not created, it is uncovered. True to mandate, everything our office publishes is evidence-based and factual. To contribute to lasting improvements for the defence community, we take our research seriously. Evidence-based decision-making is championed across government. Political parties and senior public servants commit to its principles. However, my fear is that little of what our government does for its ill and injured members is measured in a way that can be easily understood. The outcomes of various programs are simply not well known. Yes, there is some tracking on turnaround times, on adjudications, and some basic operational items. However, there is no reporting on rehabilitation programming and other key indicators that any private sector benefits administrator would follow.

As a result, current and former members of the Canadian Armed Forces, members of Parliament, senators, and the Canadian public have an incomplete picture of where the issues lie. To change what ails us, the bureaucratic approach and the bureaucratic systems need to fundamentally change. We need a transition process informed by evidence-based, user-centric design. It is not enough to try to fix inefficiencies here and there when the system is broken.

Ladies and gentlemen, I have a five-year appointment. I know the exact date I will vacate my office. Similarly, you, as members of Parliament, know roughly when you will have to seek re-election. We do what we do because we want to make positive and lasting changes for our constituencies. Bureaucracies cannot do this for us. If you want real change, I encourage you to pressure senior leadership and hold them accountable to measurable promises. Please take a hard look at some of the evidence-based solutions that have already been suggested. Of course, there is the need to be up-to-date on transition, and it is helpful to be aware of best practices and other solutions that may be adaptable to the Canadian Armed Forces context. However, I fear that a redundancy of studies only feeds bureaucracy. It lets senior leadership off the hook. When questioned, one can respond, "We are studying it". The ill and injured continue to lose out.

Like the Veterans Ombudsman, I have begun publishing report cards that reflect the status and effort that has gone into implementing accepted recommendations. It is my humble opinion that asking the government why accepted recommendations have not been implemented will bring timelier, more concrete results than doing an additional study. The current system is broken, however it can be fixed. Please do not be an impediment to transition by standing in the way of action. The people who make up the members of the defence community are important. I ask that we stop defending positions on the subject of transition that are indefensible.

Now, I stand ready for your questions. Thank you, Mr. Chair.

The Chair: Thank you.

Mr. McColeman, you have six minutes.

Mr. Phil McColeman (Brantford—Brant, CPC): Thank you, Chair, and thank you, Mr. Walbourne, for your testimony here today.

My first question has to deal with something that I've heard from veterans and I believe I've heard it from yourself and others. It's a description of the management and senior leadership of VAC as the Four Horsemen of the Apocalypse. Could you tell me what that means to you?

**Mr. Gary Walbourne:** I've heard that phrase in two different contexts. One was a reflection on the management and inside of Veterans Affairs Canada and the other one had to do with certain policy suites. It depends who you're talking to, but I have heard the expression, and I do believe that's what it was referring to.

• (1110)

**Mr. Phil McColeman:** In your opinion, does it speak favourably to the way the leadership runs affairs at VAC?

**Mr. Gary Walbourne:** Again, these are opinions that I received from members and former members of the Canadian Armed Forces. I do have to ask the question, "Why are we at the same place today as we were 8 to 10 years ago?" Maybe there is a reflection. Maybe

some of our policies and managerial procedures are too strict or unable to change.

Mr. Phil McColeman: Okay. I'll move onto another subject.

Late last year, after the House adjourned, the government rolled out its Liberal pension scheme for veterans. They did so saying and maintaining that this met their commitment for lifelong pensions. What's your opinion of the program and the scheme that was rolled out?

**Mr. Gary Walbourne:** I wasn't in the room when the conversation went on about whether we were returning to "a" lifelong pension or "the" lifelong pension. I believe there were expectations on one side and promises on the other. I'm not sure if both have aligned.

As for the rollout, we ran into a bit of an issue. We wanted to run some of the scenarios ourselves because our former members or transitioning members would like to see what their future looked like. We asked for access to the tool, so that we could run some scenarios. We were led to believe that the tool wasn't as stable as we would like. It was considered that manual manipulation was required before they could enter the scenarios into the system. Therefore, I don't have a full view of how this works. I know there have been multiple benefits combined and then they're going to be rolled out in a different fashion. The communications on this have been absolutely horrendous. Last week at a town hall, I had someone ask me if the new pension would impact the Canadian Forces pension.

There's much confusion in the environment. I still wouldn't be able to answer your question about whether it's adequate. I do believe that there has been some positive movement for those most permanently incapacitated or most severely disabled, but I have no idea what the window looks like for those who are between 25% to 70% disabled.

**Mr. Phil McColeman:** From the veterans advocates that I've spoken with and others who have spoken out about it—and I could read probably a dozen quotations here—it doesn't measure up to what was promised during the election campaign, when the Prime Minister stood up and said that they would deliver lifelong pensions. Clearly, the announcement claimed that this would return to the benefits equivalent of what existed pre-new veterans charter.

When you do some of the analysis—and again, I don't have time to go through some of the analysis of what benefits would be for the more moderately medically discharged service members—it doesn't measure up, and it doesn't measure up even in the most severe cases either. It's still less than that. As you have so wonderfully articulated, due to the issues with implementation and the fact that we repeatedly look at the things that are problematic in the transition of a service member, the scheme that was rolled out is woefully inadequate. Without going into detail, would I be fair to characterize your comments here today as saying that, although it's difficult for you to determine, it does not measure up to pre-new veterans charter?

**Mr. Gary Walbourne:** We can safely say, dollar for dollar, it does not line up to an exact same type of financial compensation that was under the Pension Act. Again, not having access to the tool and understanding how it works, I'm kind of out on a limb here making a comment on something that I haven't had the chance to review.

**Mr. Phil McColeman:** You made the recommendation, in one of your reports, that a concierge service should be set up, and we've heard that the government responded to that saying, "Well, the pilot project that we put together is indeed, a concierge service." You've looked at the pilot program, you know what's happening there.

Is it the same as what you envisaged for another one of your recommendations to help veterans?

#### • (1115)

The Chair: I apologize for interrupting, but you only have a few seconds to answer.

**Mr. Gary Walbourne:** No, when I was talking about the concierge service, I was talking about something that was to be embedded inside the Canadian Armed Forces. General Jonathan Vance is looking at this type of service in the program called "the journey".

#### The Chair: Mr. Fraser.

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

Mr. Walbourne, I know your term is coming to an end as the ombudsman for the Department of National Defence. I want to thank you for the work that you've done. I understand and take fully what you say, and the fact that it must be frustrating to make recommendations that then don't see implementation after making those recommendations time and time again.

I want to begin with the conversation you were just having regarding the rollout of the lifelong pension option. The veterans charter that came into effect in 2006, as I understand, was to be a living tree, to be a living document that would be improved over time. It seemed there weren't very many improvements made for a number of years.

There were additional suites of benefits that recently came into being, education and training benefits, caregiver benefits, and other things.

Do you see these as a positive additional step, not only to the lifelong pension option but for the well-being of medically released veterans who can then use those tools in order to regain livelihood in the workforce?

**Mr. Gary Walbourne:** Most definitely. Any of those programs or services that help an injured veteran move forward, for example, the caregiver benefit, which gives some relief to families and takes some of the pressure off, is a benefit.

All of these programs are bringing benefits, without exception. There has been an incremental movement over time, but when we get to the end of this, we still find ourselves talking about those slipping through the cracks. There's been good work done on both sides.

The Department of National Defence and the Canadian Armed Forces are headed toward a solution with "the journey". That's why I challenge to go back and look at the implementation of that project. When is it going to happen? What are the milestones? How can it be tracked? Is it resourced properly? If we could start asking these types of questions, we could really start to change the game.

As for the other benefits that have been brought in by Veterans Affairs, the ones you had mentioned, they all bring value back to the veterans community, without a doubt.

**Mr. Colin Fraser:** Along those lines with retraining and vocational benefits, SISIP provides income and vocational rehabilitation after release, but vocational rehab is not mandatory, as it is in VAC.

Can you comment on that, and give an opinion, perhaps, as to whether that poses challenges to people going through the system of transition?

**Mr. Gary Walbourne:** It comes down to the core of what we're talking about. We have two entities doing a very similar job, at roughly the same time, the end of career. SISIP is first payer, so its programs will come to bear first. I believe there should be a phase-in from SISIP to Veterans Affairs Canada.

Why do we have one program that starts and stops, and then another picks up and goes on from there? Having these dual programs running at the same time can be confusing. They can cause issues. I think SISIP and its performance standards are second to none. It really does a good job.

There are synergies in those programs that could be melded together to make something that would be cost saving to taxpayers, there could be continuity as a member transitions, and lots of opportunities. Having dual programs, run by different entities with different sets of criteria, with different rules, different applications, different entry processes, you can see how this could cause a problem.

**Mr. Colin Fraser:** You mentioned in your comments and expressed the frustration, as I mentioned, about making recommendations and them not being implemented. You talked about DND and Veterans Affairs seeming to play this game of not taking ownership of the issue. Why do you think that the recommendations that you've made—some of them that seemed very common sense—have not been implemented? What can this committee do to see them implemented?

### • (1120)

**Mr. Gary Walbourne:** I can't answer to why they haven't been implemented. As for the second part of that question, what can the committee do? I've said it, and I'll say it again. We need a timeline when these new entities, or new programs, are going to be introduced, when do I need the resources, when does it happen, who is responsible, and what's the outcome I'm looking for? We need to map and measure these things because, sadly, what gets measured gets managed. Any recommendations that are out there that have been accepted, and there have been some, I think we need to start measuring. We need to find out if we're actually putting the resources on the ground when we said we would. I think that would go a long way.

**Mr. Colin Fraser:** Can I ask one quick thing that you had mentioned as a recommendation that seems to be a very good idea that's not been implemented? That's CAF actually determining attribution of service not being accepted by VAC. Have you had a response from the government on whether or not that is something that they would consider doing?

**Mr. Gary Walbourne:** I've had a couple of responses, because when we submit the report, we look for an initial response, and then we will follow up, depending on the report, eight to 12 months later. I've had two responses, and both of them are different. They both have little nuances inside that are different in the response, but, again, I do not have a clear, concise response as to why it cannot be implemented. I keep hearing that legislation would have to change. I don't think so. I think we have opportunity there that we don't have to do that, but if we do, then let's do that. That's what we're all here for. I haven't got a clear answer for you. I'm sorry, but that's where we find ourselves today.

The Chair: Thank you, Mr. Walbourne.

Mr. Johns, you have six minutes.

**Mr. Gord Johns (Courtenay—Alberni, NDP):** Thank you for being here today, Mr. Walbourne, Ms. Hynes, and for the work you do. It's greatly appreciated. Certainly we share your frustration, and you're here again bringing recommendations that aren't being applied. Mr. Fraser talked about measurement of spending. What do your numbers say about how this spending has affected the veterans community so far, and what performance indicators measure the effects of spending so far that you can speak to?

Mr. Gary Walbourne: The only reports I see are probably the same ones everyone in this room sees when the department reports on its performance. When I speak to measurement, I want to talk about the programs that are actually helping transitioning members. Let's take vocational rehabilitation for an example. I'd like to know how many people are getting into that program, what courses of study they're following, and if they are having a successful completion. Once they've completed that, are they finding employment, and what types of resources are we bringing to bear there? I do believe we measure full outputs of money at the end of the year. We've spent x number of billions of dollars, but those are not the performance indicators I'm talking about. I'm talking about the dayto-day operational performance indicators that help move implementation of a recommendation forward. We see a lack of that. We see it sporadically. I think it's something that we really need to start focusing on if we're going to see real improvement here.

**Mr. Gord Johns:** How's the government collecting data that you see, and what could they be doing differently in how they're doing that?

**Mr. Gary Walbourne:** I think we're collecting data from multiple sources, maybe too much of it. It's how we present that data, and how we hold it up against what our end goal was. If my end goal is to make sure everyone receives a paycheque, but I'm measuring the number of windows I have in the building, they don't align. This is what I'm finding. We talk at a very high level about measurement. I'm turning over this many applications in this length of time. What's the outcome of that? What is the impact of that? These are the things that we don't have visibility on. I believe if we're going to really change things, we have to get down to that level of detail.

**Mr. Gord Johns:** Do you believe that there should be an independent officer of Parliament who would be overseeing and looking at that and moving that forward?

**Mr. Gary Walbourne:** That goes back to another report where the recommendation wasn't accepted. It's always been my opinion that any conversation in and around this community is of national importance. I believe if Parliament is going to dictate what the lives of serving members and veterans look like, then they should have a voice at the table.

**Mr. Gord Johns:** My friend Mr. McColeman just starting talking to you about concierge service and the importance of that. I know you only had a short moment to speak to it. Do you want to elaborate more about what's necessary there?

**Mr. Gary Walbourne:** We submitted a report to the department on a new service delivery model. Inside were three recommendations, one of which was a concierge service. Though I never got an official response back saying they accepted the recommendation, I have seen it in "Strong, Secure, Engaged", the defence policy. It's been written in there. From what I understand from General Jon Vance, they have now mapped out "the journey" and what it will look like. I believe he is picking up on the concierge service inside of that. There will be transition services provided to every transitioning member, not just the ill or injured. All members will receive personal service as they leave the military. I think that's exactly where we want to be.

My concern, which I'll go back to, is with some of the timelines. We're looking at 2020, 2022, 2025. This is why I say we need to hold people accountable to what they have committed they would do, have measurable goals that we can review on a regular basis, and question why we're either meeting or not meeting that target.

I think that's where we need to go. I do believe the concierge service will be a big part of "the journey" going forward.

#### • (1125)

**Mr. Gord Johns:** We have a lot of veterans who are falling through the cracks. There will be a rally on Thursday for homeless vets, those who are not getting service. I certainly appreciate the concierge service moving forward. I think it's totally necessary. We believe soldiers shouldn't leave the military without services in place.

What do we do to help those veterans who are falling through the cracks, who are on the streets?

**Mr. Gary Walbourne:** Well, I think we're started down the right path, although another recommendation I made was to hold the member until all benefits and services from all sources were in place. Again, I never received an acceptance of that recommendation, but I know that it's been talked about. I haven't seen the policy suite behind it, but the rule of thumb now is that we hold the member until everything's in place. It has been said by General Vance and it has been said by the minister.

I still wait for the policy suite to come in behind that so that the commanding officers across the country have something they can hang their hats on. We wait for that.

**Mr. Gord Johns:** The Veterans Hiring Act came into effect in July 2015. Do you have numbers on how many vets have been able to access public service jobs through this act since it came into place?

**Mr. Gary Walbourne:** I'm sorry. I do not. We started to track the numbers over the summer. In August the performance standards were published. I think about 27% or 28% of the files were being turned on time.

I wrote a bit of an op-ed, and ever since I've been trying to find the numbers again. They seem to have disappeared. I have no idea what the current performance is, not since about September or October of last year. I have not seen the numbers published since.

The Chair: Thank you.

#### Mr. Bratina.

**Mr. Bob Bratina (Hamilton East—Stoney Creek, Lib.):** Mr. Walbourne, no one will disagree with your essential point that we keep having reviews and nothing gets done. When did you actually start? How many years back did you begin this process?

**Mr. Gary Walbourne:** I became deputy ombudsman at Veterans Affairs Canada about eight years ago. I remember the first day I walked in on a conversation. We were talking about a couple of things. We were talking about the Pension Act. One of the words that came up in that conversation was "transition".

I've been at it for about eight years. I know that others have been at it for far, far longer than I. Transition has been within the top five issues I've been dealing with for the last eight years, consistently.

**Mr. Bob Bratina:** Your frustration is that we identify problems and possible remedies, and then nothing gets done.

**Mr. Gary Walbourne:** You know, to hold a member was I think a good recommendation. Whether it's accepted officially or not, it's good that it's in there. It's a great step forward. But I have no policy suite behind that. There is a resource implication coming. I wonder if people understand. Holding people in situ for a period of time comes with a cost. Have we thought about that cost? How do we mitigate that going forward?

In terms of where my frustration comes from, I think we have all talked about what the solutions are. I think those in positions of command have accepted what are logic- and evidence-based recommendations, but now we see that it's about implementation and delivery. When is it going to happen? Is it resourced? Has it been delayed? We need to know these things.

As an example, if General Vance has decided that "the journey" is the way forward, then I would like to see a report card, by month, that takes me through to that end state so that we can find out exactly where we are. I do believe that the solutions to our problems exist in all the recommendations that have been made. It's coming down to implementation.

I do believe that senior management is seized with these issues. Nobody is running away from them. But we seem to come at this from a very disjointed position. We don't measure it. We don't report on it. That, I think, is a fundamental flaw.

**Mr. Bob Bratina:** Let me bring it right down to ground level. I have a very recent issue in my own office with a veteran. He is perhaps in his fifties and served in his twenties. He is now seeking a disability award. He has been turned down.

In my interview with him, I found out that he wasn't aware of a My VAC Account, so we got that straightened out. He wasn't aware that there was an ombudsman, or that if you have a complaint that you haven't been treated fairly, you can go to the ombudsman. Because we're getting the message out, this awareness process seems to be creating this backlog that we're hearing about of thousands more. Would you agree that there is greater awareness being created, and that this is bringing its own kinds of problems?

### • (1130)

**Mr. Gary Walbourne:** I do believe we've raised the level of awareness. I think there has been more talk, more publicity, more advertising around this community, so I do believe you're right. The level of awareness is coming up, and it's going to present some challenges. I don't know if I'd call them problems, but it is going to present some challenges for the department, especially with those who have been away from the organization for a period of time. That time lag does cause problems, "my file is probably over at archives, so it has to be retrieved".

It can cause some delays and backlogs, but I do believe that part of the creation of the new veterans charter was the idea that you can come to it at any point in time. Thirty years after you've left, 40 years after you've left, if there's a malady that has a relationship to service, you can come back to the new veterans charter.

That's a good thing, but yes, we're going to get some more people who have not been aware coming forward.

**Mr. Bob Bratina:** This is a case that I think can be applied generally, so I don't mind talking about it. You say, "Well, they know if it's attributable to service, so why don't they just tell them?" However, he's saying that in his twenties he took on a condition that has now created problems for him. He has a signed doctor's note saying that, but his application is being denied.

If you had something like that on your desk, how would you try to deal with it?

**Mr. Gary Walbourne:** First and foremost, if the person has an illness or injury that is attributable to service and if we can do the causation between the two, he's entitled to services and benefits from Veterans Affairs Canada. There can be no question around that.

I don't know the details. This individual has a veterans ombudsman he can approach. There is nothing that stops him from coming back into the system at any point in time. It's an old file. I suspect there may not be the causation between illness or injury and time served. Without the details, it would be a little difficult, but if I have an injury where there's a clear attribution to military service, the person is entitled to benefits and services from Veterans Affairs Canada.

Mr. Bob Bratina: Thanks for your work, and thanks for your comments.

I know we can't argue about specific cases, but this is generally how the cases flow within our office, so one of our problems is actually having a full understanding with our staff about the programs and so on.

The other problem I might suggest is that we have to look at the general health care system, how municipalities may be addressing questions of homelessness since they're the front line in terms of providing residential spaces, the provinces' role, and so on.

Would you agree with me that everybody has to take on the challenge that veterans awards and benefits require?

The Chair: You'll have to make your answer very short. I'm sorry.

**Mr. Gary Walbourne:** Without a doubt, they're a national treasure. I think we all have a role to play.

The Chair: Thank you.

Ms. Lambropoulos, you have six minutes.

**Ms. Emmanuella Lambropoulos (Saint-Laurent, Lib.):** Mr. Walbourne, thank you very much for being here with us today. Every time I hear you speak, I can see your passion, and I know that you really do want to make a positive difference for these veterans. Thank you for everything that you do, and for being here with us today.

You mentioned several times that the study has been done and that we have not followed through with the recommendations. Obviously, it's our goal to make sure that the recommendations do get implemented.

I know Colin touched on this, but since you have a lot more experience than we do, I was wondering if you could tell us where in the bureaucracy, at what level, you think it is being stopped. Why aren't these recommendations being implemented? Do you think it's more on the DND side or on the Veterans Affairs side?

**Mr. Gary Walbourne:** There's blame enough to go around. I believe we both have issues inside our own organizations that could be addressed to make this much easier.

Where exactly does the problem lie? Well, I think it comes from how, if we look at the current structure we have, there are two case managers, there are two nurse case managers, there are two vocational rehabilitation programs. There's SISIP as first payer, and then there's the new veterans charter that kicks in. When you look at the number of programs and services, and the duplication, those are major problems. Both DND and Veterans Affairs Canada have a role to play there. It is what it is.

How do we hold people accountable? We need to go to the most senior leadership level. For my organization, if I don't perform, guess what? I own those performance standards. They're mine. I can berate my staff as much as I like, but I'm going to wear it at the end of the day. That's just the way it is, in my opinion, but I believe that's where we start. People have to be responsible for what we've committed to doing.

• (1135)

#### Ms. Emmanuella Lambropoulos: Thank you.

You also recommended that DND transfer to VAC information about medical releases and medical conditions, especially when they're attributable to military service. You mentioned that this would make the process a lot easier for people who are medically released. Can you explain why, and what other solutions exist or what other changes would be necessary in order to help the process?

**Mr. Gary Walbourne:** Right now, when a veteran is applying for a service or benefit at Veterans Affairs Canada, there's a 16-week adjudication process. Veterans Affairs can take up to 16 weeks to just determine whether or not it is attributable to service. Their service standard is to meet that 80% of the time. The last stats I looked at in October, they were nowhere close to meeting that number. That's how it gets measured.

I have to be careful. We know how it gets measured. We know the two programs are there. Where we go from here is the question. I'm not quite sure if I have an answer to that question. I go back to it again. I keep going back to it. We know what, where, when, and how, but I want the....

I mean, if you go to a private sector insurance company, you're hurt or injured, and you ask for service, they want to know when, where, and how you got injured. We know when, where, and how a soldier has become ill or injured. That's enough to release them from their career, but not enough to be accepted at Veterans Affairs Canada. That, for me, is a problem.

What would happen in my world is the member would leave with their piece of paper saying that this illness or injury is attributable to service that happened on such a date, and we have the evidence for that. Veterans Affairs then takes that file and just determines the level of impact of this illness or injury on the person's life. That would make a tremendous difference on the ground. **Ms. Emmanuella Lambropoulos:** With regard to transition in general, not necessarily just medical releases but for any time a soldier ends his or her service, can you make any recommendations as to how the transfer of information can happen in an easier way? I mean not just when it comes to medical issues, but in general, to get the support they need when they're done with their service.

**Mr. Gary Walbourne:** The information flow between Veterans Affairs Canada and the Canadian Armed Forces is a fairly easy fix. What we need to do with our recruits, when they're coming in, is to have them sign off that the information the CAF collects can be shared with Veterans Affairs Canada for the application of benefits and services, and so on and so forth. We can do that with our new recruits coming in.

As for the situation we find ourselves in today, we're going to have to just work our way out of it as they come forward. As the gentleman was saying, people may come back 30 years later, but if we start to process and make it part of the tempo of what we do, I think we'll find ourselves coming out of that issue as we move forward.

## Ms. Emmanuella Lambropoulos: Thank you.

I have one minute, so I'm just going to thank you once again for everything you do. I know your term is coming to an end soon, but I appreciate everything you've done until now.

# The Chair: Thank you.

Ms. Wagantall, you have six minutes.

Mrs. Cathay Wagantall (Yorkton—Melville, CPC): Thank you, Mr. Walbourne, so much for being here today. I do share your angst with regard to the fact that so many studies have been done. When I was new to the House at the beginning of our term two years ago, my first question to this committee was why are we restudying this? Why don't we look at what was recommended unanimously in the previous report and at what is and isn't being done at this point?

I would think it would be part of the role of this committee as well to hold the powers that be to the recommendations that we put forward to see if they are being implemented the way we suggested they would.

You mentioned in your opening statement that senior leadership needs to be held accountable with regard to implementation. Then when questioned, you also said you couldn't really speak to why it's not being implemented.

On page 8 of your report, "Simplifying the Service Delivery Model for Medically Releasing Members", you make a statement:

A willingness by the Canadian Armed Forces to state on the release message whether an injury or illness is attributable to or aggravated by service—and that the Canadian Armed Forces determination be presumed by Veterans Affairs Canada to be sufficient evidence to support an application for benefits—would open the door for significant improvements in the delivery of service.

The elephant in the room is the willingness side of things. Why is there a lack of willingness, it seems, and where does the buck stop on that willingness to make these changes?

#### • (1140)

Mr. Gary Walbourne: As I said, for my organization, I'm responsible. At the end of the day, I think it's the same for any

organization. I think that's where the responsibility lies. I don't know if it's a reluctance to implement these recommendations. I do believe they're accepted in good faith, but I wonder, as times change, if resources are pulled away and put somewhere else or, for some reason, we go off the trail we were on and we find ourselves not implementing the recommendations. There's a multitude of reasons, but I'll go back to it again. If we were measuring this on a timeline of what was supposed to happen and when it was supposed to happen, we'd know very quickly if someone pulled the resources of a couple of million dollars away from an entity. We would understand quickly what the impact of that was going to be, so I'll go back to it. You need to measure and manage.

**Mrs. Cathay Wagantall:** In the business world it's the same thing —you look for efficiencies and effective ways to meet your goals but it seems the idea that our veterans are the true priority in all of this is lost.

You also said earlier on in your report that this reduction in processing time that would be achievable by having their illness or injury identified before they leave is " achievable as the Veterans Affairs Canada adjudicator would no longer have to gather evidence from both the member and the Canadian Armed Forces."

Do you have any sense of what that would mean for VAC? When you look at how much longer it takes because they have to do that, the number of weeks it takes people employed within VAC to come to those determinations, when really a lot of it is predetermined at the Canadian Armed Forces level, would that impact the number of people working within that bureaucracy?

**Mr. Gary Walbourne:** First and foremost, I don't think if we have an opportunity we should be pulling resources out of this community as it is today. I've often talked about how I've worked with Veterans Affairs Canada through the ombudsman's office. I can honestly say they're a good group of people trying to do the best they can with what they have on the ground. There's no doubt about it.

I believe if we look at all of the other issues that are inside of these transitioning members—getting a vocation, getting rehabilitation, getting family care, and getting medical care—that's where the focus of these employees who are not doing adjudication could be turned, to look forward instead of looking backwards to find out if somebody is in the club or has an injury, yes or no. I think you could take that energy and put it forward and let's talk about vocation, rehabilitation, and the follow-up and the constant concierge service whereby somebody would be in contact with this veteran as they transition out of the military and into civilian life.

Opportunity is there. I would shudder to think that if we could save a few bucks on adjudication, we'd pull those people out of the system. I think there are enough gaps in the system. **Mrs. Cathay Wagantall:** Just to clarify, that's not where I was going with that. Really then what I'm looking at is that we struggle to have enough qualified, informed, educated case managers. Really, to me, if they were where the buck stopped within VAC to make those decisions—because they are educated, they know their role, and they know the people they're involved with—you could have significantly more impact there if they weren't having to deal with this other side of the issue.

Would that make sense to you?

**Mr. Gary Walbourne:** Yes, as I've said, I think we can be future looking and looking forward for the member.

One of the big things about transitioning members—and I think others have said this—is that they need more hope in front of them than they have in the past. I think there's opportunity inside of.... Even these changes we're making are going to have other benefits that we haven't fully realized yet.

**Mrs. Cathay Wagantall:** I'd like to follow up on the question of how best to use your office. The information that you provide is significant, and everything that you're suggesting here could be implemented; but again it's that accountability portion of the picture and who is going to make sure that is happening. Where do you see the best place for the ombudsman's position to be? Right now, you're accountable to DND, correct?

# • (1145)

Mr. Gary Walbourne: Yes.

**Mrs. Cathay Wagantall:** Where would you see a better place for that accountability to be?

The Chair: You'll have to make your answer very short, please.

**Mr. Gary Walbourne:** Where would I see a better place for the ombudsman to be reporting to? Again, another report I released said I think this office should report to Parliament. I've said that before.

Mrs. Cathay Wagantall: Right, thank you.

The Chair: Mr. Samson, you have six minutes.

**Mr. Darrell Samson (Sackville—Preston—Chezzetcook, Lib.):** Thank you once again for your presentation. It's always exciting to talk with you about veterans, and you have the experience and the knowledge around that. Then of course, with your leaving in a year's time, we get the opportunity to get all the key points.

I have a couple of very important questions. First, you're making mention that CAF should tell VAC what is attributable to service, and I agree with that one hundred percent. But if someone develops PTSD 10 years later, how would you capture those individuals?

**Mr. Gary Walbourne:** In the report we released, we talk about those individuals. There's always going to be a need for an adjudication cell at Veterans Affairs Canada because the new veterans charter gives us that flexibility where someone can come back 10, 15, 20, or 25 years later, the late manifesters, as we call them. That system would have to stay in place because there probably wouldn't be another vehicle for those members.

# Mr. Darrell Samson: Thank you.

The second one is extremely important. I'm not saying we should join DND and Veterans Affairs 100%, but what do you think of being joint when it comes to transition? You can have DND and you can have VAC here, there, and everywhere, but when it comes to transition, it's one department. How do you see that?

**Mr. Gary Walbourne:** I believe there are roles for both sides here. Where I think we get into trouble is when we don't clearly define what those roles should be. Who owns the member when they're transitioning? I think we're going to have to make some very hard decisions. I think while you're wearing the uniform, you are the responsibility of the Canadian Armed Forces. As the client in this particular case reaching out to a service provider, Veterans Affairs, I think the Canadian Armed Forces should determine when Veterans Affairs gets engaged and on what it gets engaged. I think if we had that type of a format, where the clients could dictate the services they wanted, it would work much better. I don't know if we need a third separate entity to do this; I just think we need to have clear roles and responsibilities.

**Mr. Darrell Samson:** I didn't mean necessarily a third entity, but that is the entity when you talk about transition. There is only one.

**Mr. Gary Walbourne:** If you look at the program that General Jon Vance is talking about, "the journey", much of what we're talking about will be captured inside that. I do believe it's a good program, and I guarantee it will change as we grow, but it's a good start.

**Mr. Darrell Samson:** You talk about no release, and again I agree one hundred percent with that. What do you think of universality of service? Is that affecting us as far as no release is concerned? Should we be looking at maybe making some flexibility around that, so that we're able to ensure there is no release before everything is in place?

**Mr. Gary Walbourne:** Again, General Jon Vance has spoken about this, universality of service. I know they've set up a tiger team and they're looking at it, which for me is very encouraging because this conversation would not have taken place as little as three to five years ago.

I think the Canadian Armed Forces under General Jon Vance had determined that there is value in these members. Yes, they might be ill or injured and might not be able to do everything, but they can bring value back to the organization. There's talk around looking at easing of universality of service, and I think that's a good thing. I think the assets we can hang onto are going to be tremendous.

Secondarily, easing of the universality of service may allow those —and we always talk about the stigma that's attached to operational stress injuries and mental health. There may be an opportunity where we could open that door a little further where people wouldn't feel so stigmatized or that this is the end of their career if they come forward.

I think there is great possibility in that. I think this is a modernization piece. I'm very pleased to see that the conversation has started.

**Mr. Darrell Samson:** The other piece is the pension. Some members across the room here made reference to the pension and trying to iron out what was there before and what's there today. It's amazing because for 10 years a livable document did not live very much when it came to trying to answer to those ill individuals. If we look at the pension that we brought forward and add all the benefits that tie into that, there seems to be a big forward movement. Ten billion dollars has been invested in the last two years compared to the last 10 years.

When you put in the pension, you can't just leave the pension by itself. Can you comment on the pension with all the extra benefits that came to support our injured veterans, because the question was asked solely on the pension without talking about the full picture.

• (1150)

**Mr. Gary Walbourne:** I have always said that the new veterans charter is a modern piece of legislation. I think there's a lot of benefit inside the new veterans charter, access to health care and family benefits, and so on. I firmly believe that.

My question—and this is what keeps coming back to the desk—is financially, how am I going to be now compared to what I would have been under the Pension Act? There is a delta there. How big that delta is, I don't know. I can't get visibility on the tool they're using to do these projections. The \$10 billion has been costed, not funded. We have it costed out for a period of years.

Where do we go? I think this is going to change as we go forward. The amount of pain and suffering was always the problem with the new veterans charter, and then at age 65 all the benefits ceased. These were always problems with the new veterans charter, but the new veterans charter is a more modern piece of legislation. It's about rehabilitation and reintegration, all those things that we talk about under modern management techniques. Again, it keeps coming back to the comparison of dollar for dollar, unfortunately.

**Mr. Darrell Samson:** You do realize that the old veterans charter did not have all those benefits in place?

The Chair: Sorry, we're out of time.

Mr. Kitchen for five minutes.

Mr. Robert Kitchen (Souris—Moose Mountain, CPC): Thank you, Mr. Walbourne, for being here again.

I read your report last night and I could feel the frustration in your report. It resonated with me extremely because I have that same frustration; we're seeing the same witnesses, hearing the same responses, and getting nothing out of this.

You were asked questions earlier around why these recommendations we're making are not being put in place, and why we're restudying the same transition. Recommendations that we make go to the minister, and then the minister needs to respond to that. When we talk about where it comes from, it comes from the top.

Can you delicately answer.... Is that where it's coming from, more so directing that to the supervisors below?

**Mr. Gary Walbourne:** Ministers, like ombudsmen, come and go, but the bureaucracy never changes. The minister has to reach down into his department, both on the civilian side of the house or the military side of the house, to get the information that will assist him

in defining his position, that evidence that's given to him by the department. However, at the end of the day, folks, what hasn't changed? That's as delicate as I can be. Thanks.

Mr. Robert Kitchen: That's what I thought. I appreciate that.

Sir, under the legacy of care initiative, a range of service benefits for the ill and injured were introduced. Some benefits appeared to only be available for the members who served in Afghanistan. The JPSU is denying benefits like child care support for the seriously ill and injured because of this Afghanistan requirement. I believe the child care benefit is under section 211.005(2).

Can you look into this and report back if you can't answer this right now? Will all of our operations need this?

**Mr. Gary Walbourne:** I will have to get back to you on the specific answer, but if I may, let's just talk about that for a second.

We do that a lot. Every time there's a theatre of operation or another footprint that we've assumed somewhere in the world, we'll come back and develop a program that's just for that cohort of people. If we look at Veterans Affairs and ask why they find themselves behind the eight ball sometimes, just look at the number of programs. There are three different types of soldiers in three different elements, and that gets multiplied and it just goes on and on. It's so complex and convoluted. You may have two veterans who serve side by side and one may be eligible for a suite of benefits and services that the other is not. That is a possibility; that can happen.

As for the specifics on your question, we will get back to you, sir.

• (1155)

Mr. Robert Kitchen: Thank you.

You mentioned data collection and its use.

We do collect a lot of data and information, but as you say, specifics such as what program is being offered, who is using it, how often, and how successful it is; that's the information I would like to know.

Is your research set up to be collected in that manner, or does something need to be put in place to make certain we see it?

**Mr. Gary Walbourne:** I think we do some measurement. I don't know how structured it is and what cycle it comes on. I believe we have to get to a structured reporting cycle whereby we can clearly see how recommendations are being implemented over time. But the information we have now is the same as anyone else would receive on the website.

Mr. Robert Kitchen: Thank you.

**Mr. Gary Walbourne:** Again, I think any way we want to slice and dice this could work, but I think it's going to come down to no matter what the entity is, who is responsible to do what, and on what timeline? I think this is where people slip through the cracks and this is a handover instead of a hand-off.

The Chair: Thank you.

Mr. Johns, you have three minutes.

Mr. Gord Johns: Thank you.

You mentioned that you don't have the numbers of veterans who have gone into public service positions. Certainly we know that return-to-work training is really important, and having case workers who understand the issues. Other countries have hired former veterans to be case workers for their veterans affairs. I think in the U. S. it's 30%.

Can you speak to the importance of that?

**Mr. Gary Walbourne:** To be with someone who has walked through the same life you have walked through does go a long way in helping some transitioning members. I believe there is a lot in that camaraderie, to have walked through the exact same process. I think a certain level of acceptance readily becomes available when you get two people together like that, so I think there is opportunity in that.

**Mr. Gord Johns:** But about decision-making at the front line, early on, is that...?

**Mr. Gary Walbourne:** If we put people in the positions we're talking about, they should have the appropriate authority that goes with that position and be allowed to make the decisions that need to be made within the parameters of the policy or regulation, whatever it may be.

**Mr. Gord Johns:** There was an article yesterday about the government turning to a private firm to help soldiers transition into civilian work after leaving the military. Some have expressed concern that they're unsure of what this means.

Can you expand on how this might work, or any thoughts you might have on that?

**Mr. Gary Walbourne:** I have absolutely no visibility on it. I was as surprised as anyone else. I had the same concerns.

We have 7,000 people currently in a program. What is to become of them?

It's this type of thing...we throw it out there without the communications behind it. I guarantee you—Robyn, as my DG, will man her phones a little heavier because it's going to start. But I think our comms on how we dump some of these things is a little lacking; this is another case of that.

**Mr. Gord Johns:** In DND you talked about the importance of health records being transferred to VAC, and that it would reduce wait times. Can you speak to the 29,000 who are waiting right now? I think 48% aren't going to meet the 16-week threshold, the way it's

going. Can you speak to what that might look like on the numbers side?

**Mr. Gary Walbourne:** I don't know the full makeup inside the 29,000. I do know a large portion of those applications will be trying to bridge to 75% to 90% when they've updated the ELB. They went from 75% last year to 90%. That's going to be a portion of them.

I don't know if actual operational files are coming in daily in that 29,000, so I have no visibility on what the breakdown of that looks like.

**Mr. Gord Johns:** You don't have any idea of whether it would cut it in half or...?

Mr. Gary Walbourne: None whatsoever.

Mr. Gord Johns: Okay. Thank you.

• (1200)

The Chair: That concludes our round today.

Mr. Walbourne, on behalf of the committee, I'd like to thank you, and wish you the best in retirement, unless you decide to come out of retirement and maybe help MPs with our cases in our offices. The office is always open. Thank you.

We'll recess for a couple of minutes, and then we'll come back with another panel.

(Pause)

• (1200)

• (1205)

The Chair: We'll call the meeting back to order.

We have, from the Department of National Defence, Mr. Cantelon, director general, Canadian Forces morale and welfare services.

Welcome back.

We also have Colonel C.D. Harris, director of military family services.

We have a point of order.

Mr. Phil McColeman: I mean no disrespect to the witnesses. Thank you for being here.

I wasn't here last week, but when I read my briefing notes this morning I noted that these witnesses have already testified to this committee on this particular study.

My question to you, Chair, is why are we having repeat witnesses? I notice that another one, in a subsequent meeting, is scheduled to reappear on the subject matter. Can you tell me whether it is a practice that is normal to this committee that we would have the same witnesses back, when we have others who have asked to be part of this program and who are not on our witness list but are people who have made specific requests? Can you enlighten me on this?

**The Chair:** The process on witnesses is held by the clerk. She organizes the witnesses and puts the schedule through. I'll have the clerk answer that for you.

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The Clerk of the Committee (Ms. Karine Parenteau): The reason Mr. Cantelon is here again is to talk about the specific issue of family programs. The Minister of National Defence suggested that Mr. Cantelon would be the best representative, the best spokesperson to talk about this specific program. Last time it was on another subject.

**Mr. Phil McColeman:** Are you saying that this is at the discretion of the Minister of National Defence? Is that what you're saying?

**The Chair:** No. I think these witnesses, and I'll see who these witnesses are.... I think someone on the committee asked that DND be asked to talk about military family resources. This is who they recommended as the subject expert from the department.

**Mr. Phil McColeman:** Sir, it is highly unusual for a committee to undertake a study in which we bring the same officials from the same department back. We have a chance as committee members, and it's our right as members of Parliament, to ask any specific questions outside of the single issue you just mentioned today. This committee meeting, in my opinion, is not held on that single issue today. Or are we tasked today to ask questions on that single issue, and is that why they've been asked back to report on this?

#### • (1210)

**The Chair:** No, I don't think I would limit or have ever limited a question around this table, being chair for the last two years. Today is about family military resources, but if you wanted to ask them another question, as long as it was on the subject matter we're studying, I don't see there being an issue with it.

**Mr. Phil McColeman:** This study is about transition; it's not about family service matters. We're not specifically coming here today thinking about family service matters. We're coming prepared to talk about all transition issues. We've had our chance with these witnesses to ask those questions, and now we're put into a position in which we have repeat witnesses—not only this day, but also on a subsequent day, as we've noticed on the witness list. We're getting the same people back to whom we could have asked fulsome questions, including on this particular subject matter, which is what the broader study is. We're not tasked every day to deal with a specific question.

As you can tell from my comments, I'm not very pleased. Again, I mean no disrespect to the minister, if he's the one who said these are the people he wanted to testify, or to the top people at DND for having selected who they want to speak. I would, however, much rather get a broader understanding from the people inside the departments on the issues that are affecting transition in a much wider context, which I believe is what this study is about.

The Chair: Today we have them discussing questions on family resource centres.

#### Mr. Kitchen.

**Mr. Robert Kitchen:** Chair, I have similar concerns about having the same witnesses. Again, I mean no disrespect to the commodore. I'm sure he can answer these questions; he's done it quite adequately in the past.

My concern is that we're doing the same thing next week with someone who couldn't answer those questions and had to continually defer to giving us responses further along. I wonder why we could not have had this same presentation at the same time by one and then one by the other instead of having them come back and forth.

**The Chair:** In the sense that we had two hours and we had panels, I can bring that up with the clerk the next time that maybe we can schedule the panel as a two-hour discussion and we'll have more time.

Mr. McColeman.

**Mr. Phil McColeman:** Through you to the clerk, have you exhausted all of the people on all of the witness lists from the various parties?

The Clerk: Not all.

**Mr. Phil McColeman:** You haven't. So there were options to have different people come to this committee meeting today on the general subject matter. We haven't exhausted the list, you're not at the end of the line, and you don't need to look for repeat witnesses.

The Chair: I think right now-

**The Clerk:** On the list there was the military family services program. It was adopted by the committee. It was one of the names.

**Mr. Phil McColeman:** This is about transition, not about specific subsets of what transition means. At least my discussions at committee and my discussions at subcommittee have never been about a subset of questions about transition. If we had known that, we might have developed a different witness list about a bunch of other issues that we'd like to see questioned. I can look at the transcripts to make sure, but I never recall us discussing a subset of questions that we were going to focus on at any given committee meeting.

Chair, do you recall that?

**The Chair:** I would have to have some time to think about that, but the witnesses are here. We can vote on whether we hear them today. I think the witness list was voted on by the committee, and I believe the family resource centres have a lot to do with helping our men and women transition.

**Mr. Phil McColeman:** Chair, we never discussed or voted on having people come back on a repeat basis.

The Chair: Well, we didn't, and I can say to you that we did not vote not to.

**Mr. Phil McColeman:** That's fine. If that's the way you're interpreting it, I'll respect that.

The Chair: Thank you.

**Mr. Phil McColeman:** However, I'm going to say to you, again, with due respect, that it would be our position that in the future—

The Chair: Mr. McColeman—

• (1215)

Mr. Phil McColeman: Could I finish, please?

The Chair: Yes.

**Mr. Phil McColeman:** Our position would be that it not be a practice of this committee to have repeat witnesses come back on the same study.

The Chair: Okay, noted. Thank you.

You have 10 minutes, please.

Commodore Sean Cantelon (Director General, Canadian Forces Morale and Welfare Services, Military Personnel Command, Department of National Defence): Good afternoon, Mr. Chairman and members of the committee, ladies and gentlemen.

I want to thank you for your invitation today to offer insight regarding services for military and veteran families in transition.

[Translation]

As the director general of Morale and Welfare Services, I am also the managing director of Non-Public Property and the chief executive officer of the Staff of the Non-Public Funds of the Canadian Forces.

# [English]

I'm very pleased to have this opportunity to talk about our military family services division, whose mandate is to ensure the Canadian military family community is well supported and that military families specifically are able to lead positive, nurturing lives comparable to other Canadian families.

Joining me today is Colonel Dan Harris, the director of military family services.

The military family services division is composed of regular force; reserve force; civilian, non-public fund staff; and public servants. This division oversees three major programs that serve to address the unique aspects of a military lifestyle. As the military family services program is a publicly funded program, it's delivered through a nonpublic property framework, and it includes funding to third-party, non-profit organizations, known as military family resource centres. We also have the children's education management program, a publicly funded program that manages education with compensation and benefits to military members and dependent children. This program includes the recent addition of a guidance counselling component, delivered by non-public funds staff, which has proven highly beneficial to military families as they move and transition.

The veteran family program is a program funded by Veterans Affairs Canada. It's executed by Canadian Forces morale and welfare services through a memorandum of agreement. This program extends the military family services program to all medically releasing members and released members and their families.

The military family services program is available to families via three access points so that families can access the services they require in a manner that best suits their needs. First, families can visit one of 32 non-profit military family resource centres located on bases and wings across Canada. We also staff military family services points across the United States and Europe so that families who are posted outside of Canada, known as OUTCAN, can receive the same level of support services. The staff who work OUTCAN are employees of the non-public funds, unlike the staff at the military family resource centres in Canada who have a voluntary board of directors as their own employer of record. Secondly, families can access our services through our 24-7 family information line. This service provides bilingual, confidential, and referral information services to families by trained counsellors who know how to navigate the often complicated life of the Canadian Armed Forces federal, provincial, and municipal policy infrastructure. We've also recently extended this service to now include scheduled phone or video sessions to make it easier for families to connect with our counsellors.

The third access point to the military family services program is through a central online source of information for military families at a website called CAFconnection.ca. This is a mobile-friendly web portal that allows families to access all of the military family resource centres as well as national information and resources relevant to all military families. This would include veteran families in the transition program.

The Canadian Armed Forces ombudsman's report, "On the Homefront", which was released in 2013, was an important report that identified three aspects specific to our military lifestyle: the constant geographic relocation, the extensive absences from loved ones, and the risk inherent in the profession of arms. It is these three characteristics that set our serving members and their families apart from civilian families and define their needs for supports and services.

The government's new "Strong, Secure, Engaged" defence policy recognizes the important sacrifices made by families in their role as a major source of strength and support to serving members. As part of "Strong, Secure, Engaged", and in the first phase of increased support to military families, \$6 million per year in new funding has been authorized to modernize the military family services program and provide additional support to military families, allocated to the military family resource centres and the military family services.

"Strong, Secure, Engaged" also directs a second phase of support through development of a comprehensive military family plan to augment support services and to stabilize family life for Canadian Armed Forces members and their families. The development of the comprehensive military family plan also falls within Canadian Forces morale and welfare services' responsibility on behalf of chief military personnel. Challenges such as establishing relocation expertise and engaging federal, provincial, and private sector partners to improve the coordination of services across the provinces are some of the issues we'll be tackling in this plan.

In the context of today's appearance, I'd like to touch specifically on the realities of a medically releasing member, their transition, and what it means in terms of family support, the challenges faced by those families, and how the military family services program is responding. Releasing from the Canadian Armed Forces can be challenging and emotional, and becomes even more so when it's the result of a medical condition, where a medical release is concerned. When a serving member leaves the Canadian Armed Forces, their family does as well. The entire family is a step away from their extended family and support structure, the Canadian Armed Forces and our service. The serving member and their family have to consider how to find those services in the areas of health care, employment, and education, and navigate in areas that are unfamiliar to them.

This is why the veteran family program, which began as a pilot program in November 2015 at seven family resource centre sites, was initiated for medically releasing members. As of April 1, 2018, all medically releasing members of the Canadian Armed Forces and their respective families will be eligible to access the veteran family program through all access points, such as the MFRCs, the family information line, and CAFconnection.ca. There is no specific end date to their eligibility. The focus is to support their transition to civilian services and programs.

The veteran family program is intended to ease the transition for the entire family and provide familiarity within a framework of services that are already well known by the military family. It's meant to provide a seamless transition of support and services at a time when medically releasing members and their families are struggling the most.

Our Veterans Affairs, military family services, and military family resource centre teams have been working closely together since the budget announcement of March 2017 to operationalize the nationalization of this program and ensure a seamless transition for all. Military family resource centres have hired veteran family coordinators, and joint training for new coordinators and VAC service case managers is taking place and will be completed at the end of February to ensure an alignment of information and services.

The move to nationalize the veteran family program is a testament to the efforts of seven pilot centres and the working groups who work diligently behind the scenes to lay a solid foundation. For your information, the seven pilot centres were in Esquimalt, Edmonton, Shilo, North Bay, Trenton, Valcartier, and Halifax. They have been consulted extensively, and have imparted their insights and learnings from the initial two-year period.

During this pilot period, from October 2015 to October 2017, there were over 11,000 interactions with medically releasing members, spouses, and family members at the pilot sites. Additionally, there were over 1,200 family information line interactions with releasing members, spouses, and family members, and another 15,500 unique page views on our CAFconnection website.

# [Translation]

We at Morale and Welfare Services and Military Family Services are eager to launch the new Veteran Family Program, along with our MFRC and community service partners and to continue making a real difference in a lives of members, veterans and their families.

Thank you again for the opportunity to appear before you today.

Mr. Chairman, I would be pleased to respond to the committee's questions.

# [English]

The Chair: Thank you.

We're going to have to go with four-minute rounds here.

I'll start with Ms. Wagantall.

**Mrs. Cathay Wagantall:** First of all, thank you for being here today, as you've been requested to come and share this information with us. I do appreciate that.

Again, the challenge for us is that we, as we heard from the ombudsman as well, have studied transition issues and have multiple lists of what those issues are. The challenge is to determine whether or not recommendations are being implemented, and if not, why not and how they are being followed up on.

I was able to visit a couple of the family resource centres, and it is very impressive. The fact that the veterans are being included in this now, I believe, is a very good thing.

The challenge to us, as a committee, is to try to discern—with these resources and opportunities you're giving to them—how you are determining whether or not you are being successful. Have you predetermined what outcomes you are looking for? Do you have those, and could you give them to me today? How are you planning to follow up to determine the satisfaction levels in the sense of whether or not what you're seeking to accomplish is actually being accomplished?

**Cmdre Sean Cantelon:** On a global perspective, we do surveys. We're in the process of one right now with the Canadian Forces community, which includes veterans, family members, and serving members for all services.

Specific to the military veterans programs, I'll turn to Colonel Harris to speak to how the outcomes are being measured in the program and then where we will fill in the gaps.

#### • (1225)

# Colonel C.D. Harris (Director, Military Family Services, Department of National Defence): Thank you, sir.

Yes, indeed. We went through the trial. The way we've done it with the trial is communicated with the MFRCs, making sure that, first and foremost, we catch those who are ill and injured as they're moving from the Canadian Armed Forces to retirement and they're going through their IPSC, their integrated personnel support centres, and then coming over to an MFRC. First of all, we have to make sure that we're catching all those folks who are coming through who need our assistance, so there's a huge communication plan that goes with that. Now we're in the process of determining what kinds of services they need. This is new for us, and it's new for an MFRC. It's new for the military family services program to be looking at a new population, the ill and injured population and their families, more specifically the families. We're learning what we have to do to evaluate their needs. That's done through a very comprehensive analysis with the family as they're moving out of the military and integrating into the communities that they're going to live in permanently. This is unlike the military, where they're still moving around.

Our whole evaluation is getting the community partners together to determine how we're going to meet their needs as we're moving along in this program.

**Mrs. Cathay Wagantall:** I'd like your feedback on this, although it may not be directly related to this new program for veterans. By June 2013, there had been a report done, the 2012 report of the Auditor General on what was and wasn't functioning well, and the National Defence and Canadian Forces had responded to the fact that there were issues with the effectiveness of the programs. They said that by June 2013, Canadian Forces and National Defence "would review procedures to ensure that, when required or appropriate, members who are being released for medical reasons, especially reservists, successfully make the transition to Veterans Affairs Canada care".

In this case, how are you defining what you would consider success for your program with veterans, and their families, obviously?

**Cmdre Sean Cantelon:** There are two parts to the veteran experience. The first part is they're in the Canadian Armed Forces and they're a member and that transition starts in uniform. The first part of that is being refined for outcomes, and this is what Colonel Harris has touched on. But we're looking at overall wellness assessment. Does the individual feel they're supported as they go through the program?

The specific second part is the day they release: now they're a veteran and they're in the veterans program. The second part of that will be set by Veterans Affairs in terms of the specific parameters. We have just the pilot project right now, which is what we built on. We'll run the data for about two years and then adjust the program to ensure we don't have any gaps.

We're in a sort of half-stuck position, where I can't give you the program's outcome measures because we're refining them, as we speak, with Veterans Affairs. As soon as we have them, we'll publish them because they're a common standard.

But there are really two sides to that, to help understand it.

The Chair: Thank you.

Mr. Eyolfson, four minutes.

# Mr. Doug Eyolfson (Charleswood—St. James—Assiniboia— Headingley, Lib.): Thank you again for coming.

This is something I've asked a lot of witnesses about, and Mr. Samson actually just asked Mr. Walbourne about it as well. This is in regard to the families you have to deal with and some of the difficulties they have transitioning, particularly those who are going to be medically released due to injury.

We've talked a lot about the concept of universality of service, and people who might have an injury that is not catastrophic but prevents them from serving in every capacity. Whereas if someone lost a leg, of course they can't carry a rifle into combat, but they can sit in an air traffic control centre. Correct me if I'm wrong, I've never heard of someone who's an air traffic controller being pulled out of the tower, given a rifle, and told to carry this back out into the field.

That being said, have you heard from families about the frustration of a person who doesn't want to leave the army? "There are so many things we could do in the army or navy or air force, but we have to leave because we have this injury." Would modifying this policy make it easier for a lot of veterans, at least transitioning, or not even having to transition, due to injury?

**Cmdre Sean Cantelon:** Obviously, I won't answer the air traffic controller question, as I don't have the expertise.

Absolutely. What you've talked about is that the family experiences this as intimately as the service member because they have, in essence, enrolled together and served together. The families feel the same challenges as the service member, and in some cases they feel it even more strongly because it may affect spousal employment, it may affect children's education.

In speaking to the larger part of universality of service, the chief has been very clear that we want to come with a more flexible approach that could address exactly that type of scenario. I can tell you we have serving members in the Canadian Armed Forces who are missing parts of their limbs who are fulfilling their daily duties right now, but they're in breach of universality of service.

That is where we need to go in terms of flexible employment. The chief's been very clear on how we go there. That, then, would alleviate those stressors on the family. We need to better define this, and we're in the process of doing that.

• (1230)

**Mr. Doug Eyolfson:** This is probably a very difficult question. Is there any idea of a timeline that we might expect changes in this?

**Cmdre Sean Cantelon:** This is where we get into an awkward jurisdictional piece. It is one that the chief wants done sooner than later. We all know how it works when the boss wants it done. It's going to get done sooner than later. The process is complex to examine this. I touched on the example of medication and other items there. Can we be more flexible? There are clear signs, "yes", and it has to amend policies.

To give you a date, it's not in my purview. I think bluntly no one would be able to give you that date at a macro level, but it is currently under way.

**Mr. Doug Eyolfson:** I'm noticing a bit of a disconnect in policies. When SISIP is providing income and vocational rehabilitation after release, it's not mandatory from SISIP that they're involved in vocational rehabilitation. As part of the VAC program, it is mandatory to be part of some sort of vocational rehabilitation and training.

It appears the best practice would be that early intervention and getting things going might be better. How would you suggest handling this disconnect? Might it be desirable for SISIP to start making vocational training and rehabilitation mandatory?

**Cmdre Sean Cantelon:** I will speak to SISIP because I can; it's my mandate. There is a very clear historical reason that we have had approximately 90% take-up on vocational rehabilitation. Of the many people who would be releasing, some of those 10% will be people who plan to retire. From their perspective, if they're 53 or 50 or 47—pick an age—they're clearly at the latter half of their career, and not 23. They may choose not to do the vocational rehabilitation, and take the income support knowing that in a few years they will be retired and the pension will be adjusted. That's the vast majority.

The second case for why people do not take vocational rehabilitation under SISIP is they're physiologically, either because of their psychosocial...or their abilities, unable to do so. An important nuance is that the veterans rehabilitation program for Veterans Affairs is not just vocational. It includes psychosocial and medical. There's a way that you would obviously not do vocational, but you would be doing medical rehabilitation that would qualify you for the veteran earnings loss benefit that wouldn't apply with SISIP.

The Chair: Thank you.

Mr. Johns, for four minutes.

**Mr. Gord Johns:** Under "Strong, Secure, Engaged", military family resource centres are now receiving more funding. Can you tell me how much funding it is?

**Cmdre Sean Cantelon:** Yes. Mr. Harris will be able to address that in detail.

**Col C.D. Harris:** It's \$6 million that has gone out to the MFRCs. I don't have the breakdown with me for the exact amounts that have gone to each of the MFRCs, but they have all applied for any of the programs that are mandated with our Government of Canada. They have applied for additional funding, which we have already given to them this year, and we will continue on in the subsequent years.

Some of the core services that are offered under the military family services program are mental health, psychoeducation, spousal and family employment, special needs health care, second language training, and that kind of thing; so they have already come back with their input for additional funding to enhance those programs.

**Mr. Gord Johns:** Do you believe the money that's there right now is adequate to serve the needs?

**Cmdre Sean Cantelon:** In regard to the program design, it's important to understand MFRCs vary across the country in terms of services they deliver. It is filling a known gap that was identified going into the policy review—so the application there.

There is always more to be done. The second part of the "more to be done" will be captured under the comprehensive military family plan where we will identify other needs. Some of those needs may be better done through a national program or tailored to a local area such as an employment thing that may be related to a provincial jurisdiction issue.

• (1235)

**Mr. Gord Johns:** Speaking to that, does the MFS provide direction to MFRCs on how to use the spending directly?

**Cmdre Sean Cantelon:** Yes. The entire military family resource program is governed by orders in council as to how the money is to be allocated. We provide guidance to them, and we do oversight on behalf of DND and the defence ministers to the program being delivered for those outcomes. There are additional programs that their individual boards may choose to offer. We will provide them advice in those cases, but not oversight.

**Mr. Gord Johns:** Some OUTCAN families are not covered under MFS Europe. How do you contact and provide services to those families?

**Col C.D. Harris:** We actually do have military family service centres, which are operated from the staff of the non-public funds, Commodore Cantelon's other hat. They are not under the same governance framework that the MFRCs are in Canada, but they do have outreach programs that are for the outlying regions in Europe. We have three centres in Europe itself, and they use outreach programs to go to the other centres. It's the same with the United States, for example.

**Mr. Gord Johns:** Does the MFS have any presence in provincial entities like departments of education or health to help ease the transition of military families who are moving from one province to another?

**Cmdre Sean Cantelon:** We don't have that at present. We have a national manager who works interprovincial relationships, and we're looking to expand that capacity going forward. We have those relationships with the provinces.

There is one exception to that, which is our schools in Europe that we run. They are certified under the Ottawa-Carleton District School Board, and that relationship is a formalized one with the Ottawa-Carleton District School Board. So our guidance counselling service that we use operates under the Ottawa-Carleton District School Board, and then leverages the network across the country.

Mr. Gord Johns: Right, thank you.

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

**Mr. Colin Fraser:** Thank you both for being here. I'm glad that you're here to discuss the military family resource centres. Obviously, it is very important that they now have opened up all 32 to veterans and their families.

I represent West Nova, which has 14 Wing Greenwood. I know the great work that the military family resource centre does there on a daily basis with the entire military community, and also now with veterans.

It's extremely important that family members be engaged in the process of transition. When we had retired General Roméo Dallaire before our committee for another study, he highlighted this point in an extremely impactful way to say that this is necessary and critical to ensure that those families feel that they are part of the process. The military family resource centres do a great job of that outreach and engagement.

I wonder if you can now talk about how the MFRCs are available to all veterans and their families across the country. What level of engagement and awareness will take place to ensure that those who are eligible actually are going to come in and receive the services that will help them?

**Col C.D. Harris:** I appreciate your comments. It is not simply, for example, just opening up the doors of the MFRC and then all of a sudden our veterans and their families can come in and take advantage of the programs that were already offered. There are fundamental differences between the military family services program that we have now and the VAC-sponsored veteran family program.

For example, our whole program is built on the three unique characteristics of military lifestyle that families endure: frequent geographical relocations; extensive separation from families; and the risk of the profession of arms, which can result in illness, injury, or death. The program is built to help the families of Canadian Armed Forces members adjust to those living conditions as they're going across Canada.

Also, note the difference in the programs. For example, the CAF member, as you know, is looked after by the Canadian Armed Forces. All of a sudden, when you take off your uniform, you don't have that care from the Canadian Armed Forces. Under the veteran family program, the veteran and the family are now included. There's a distinct difference between the MFSP and the veteran family program.

As you can see, it is now totally turned opposite. A veteran and their family no longer have geographical relocations; in fact, they're permanently located in the community wherever they may live, and we don't know that at once when they're retiring. They don't have extended absences from their family, and that, of course, can have its own issues in many cases. Thirdly, not only do they not have a risky profession anymore, they have the whole culture shock of taking off the uniform.

The veteran family program is really geared to integrating a veteran and their family into the new life that they're going to be experiencing, into their community permanently. That's going to involve all kinds of community partnerships and we're going to have to educate and inform the community of what they're receiving for the ill and injured veteran and their family.

First of all, we have to recognize that the family has its own transition. It's not necessarily always linked to the member. We have to think about the families. We plan on doing that, but specifically to answer your question, we need to link up with the releasing member and their family immediately, because all the ill and injured are posted to the IPSCs, the integrated personnel support centres. We need to get linked up, right at that starting point, as soon as a member releases as an ill and injured member. We have to continue that process straight through with the family. We do have family liaison officers under the military family services program who are integrated into the IPSCs, so they will be able to start the comprehensive analysis of the needs of the family.

The beauty of the veteran family program is that it's tailored for the specific needs of the family. It's not a matter of you coming in and taking one of these and one of those. It's "What do you need?", and we will develop a program for you to meet those needs.

• (1240)

The Chair: Great. Thank you.

Mr. Bratina, please. You have four minutes.

**Mr. Bob Bratina:** Thanks so much. This is a really interesting topic.

I'm curious about releasing members, because in my family, my sister worked her career and retired happily. Others suddenly found that they were no longer able to function as military personnel with the taking off of the uniform.

At what point in the releasing is there an interview process that determines how the member is feeling about their situation and whether it may lead to problems?

**Cmdre Sean Cantelon:** The veteran family part is what Colonel Harris has touched on. The entire goal here is to bring the family in, or meet them at a location that's comfortable for them, and do exactly that, talk through their needs and their expectations.

Specific to the Canadian Armed Forces and the serving member, there is also a process and interviews there. Really, I'm a bit ahead of next week's witness. I have the right week this time with General Misener, and that's part of that as well in terms of what they are trying to achieve. That's part of what they do: holistically, what do you need in terms of rehabilitation or vocation? Prior to release, ideally we're dealing with this in terms of looking for another activity for them to do, preferably with an occupational transfer to a different trade in the Canadian Forces and how that would go through.

It's the same type of family services. As you can imagine, in this case, the good news is that it's not a universality of service, or we've modified that policy so it's more flexible.

Let's use the air traffic controller example. If you're an infanteer in Petawawa....

That's a bad example. There is an aircraft tower in Petawawa. There are aircraft there.

I'll put you in Gagetown, where there's no permanently deployed squadron. You want to go work in Greenwood, so we're going to need to transition you to Borden for training and all of that. Your family is going to need those services. That's exactly where we would bring you in to provide those service supports through our integrated process, through the existing military family services program.

Yes, there's an interview. Yes, there's one for the families. General Misener can speak more specifically to the Canadian Armed Forces for the serving member, but that's exactly the point of this program.

**Mr. Bob Bratina:** Is there a format or template with how these centres are designed and set up? What do they look like in Trenton or Esquimalt and so on, an office in a strip mall?

**Cmdre Sean Cantelon:** Yes, there is a macro framework, which is what Colonel Harris touched on earlier. The military family services program sets out parameters that the family resource centres are to provide support. He touched on some of those points, and that's certainly available on the web or we can provide further details to the clerk.

The actual infrastructure varies across the country. It is a public responsibility to provide the infrastructure. It varies from base to base and based upon when they were last recapitalized. Some of those infrastructures will include things such as child care. Some of the MFRCs have branched out and also met through community services. It does vary.

An example I'll use is Petawawa; it has partnered with the local school board to provide child care services. In Ottawa, it's just done as a drop-in centre here. It varies across the country.

# • (1245)

**Mr. Bob Bratina:** The reason I'm asking is that I want to get a sense of the dignity of attending the centre from the released member's point of view, that it's properly done and well done in the sense that it gives somebody assurance.

**Cmdre Sean Cantelon:** I can personally testify to the committee that, when I visit every base, I sit with the executive director of the MFRC, and ideally with the chair, and we talk through these very issues. If there is a consistent theme, it is preferential for social services to be provided through the same access point as every other service, so there's no risk of stigmatization. Even though we work very hard to destigmatize that, the goal is that you have one general welcoming entrance and then when you go into the facility, you can go off to either meeting with family services or whatever, and that's the best outcome. That is the goal everyone tries to achieve.

Mr. Bob Bratina: Thanks very much.

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

Mr. Robert Kitchen: Thank you, Commodore and Colonel, for being here.

I might add on to the air traffic controller situation that my nephew just graduated last year as an air traffic controller in Moose Jaw. I'd be able to answer, hopefully, if he ever asked me the question of how he might transition to other parts of Canada and where he might go. Maybe I can at least refer to some of your comments today. I appreciate that.

As I've said before, I spent my life growing up in a military family and travelled quite a bit. Although I was a base rat for many years, my dad was posted overseas many times. We would transition through Lahr and knew the issues, when we were in Pakistan, Afghanistan, Iran, or England, when we would transition. The Lahr base is not there anymore. I'm glad to hear that there are three places....

What about other jurisdictions around the world where we deploy our soldiers as they transition out of their last posting? For example, if someone wants to take a posting in the Congo in his last UN posting and then would be transitioning out of that as his last post, can you walk us through how that might happen?

**Cmdre Sean Cantelon:** There is a nuanced difference between someone on an operational deployment such as a UN mission—deploying from a home unit and coming back to home and transitioning from that unit—and someone posted overseas.

First of all, posting overseas has to go through a screening program, to which anyone who has any complex issues like health care or child education would not go. An example might be attachés in an embassy overseas who would be at distance. They would access their release process the same as a healthy transitioning member—if I can use that term, non-medically injured transitioning member—as they come back.

In many cases, they will be posted back to their intended place of release, so that's that last posting, which may be back to where they were before or may be to a new geographic location. They'll be supported by the closest regional unit. From a family services perspective, we will support them through the national program as they identify and through the closest regional office. If you're in Europe or the United States, we have offices there. If you're the Canadian attaché to Chile, we'll support you through Ottawa.

**Mr. Robert Kitchen:** I recall when we came back from Pakistan, the NDHQ and the hospital, NDMC, were here and we went through that process, etc. Mental health issues weren't necessarily looked at as much as they are today.

As we deal with these issues today with our families, and we're looking at families now, the world is a different place. Families are different. There are a lot of issues. Divorce rates are much higher. How do we look at that aspect and how does the military identify that situation to help as that family is transitioning? In the military, as we've talked about a number of times in this committee, there's an attitude oftentimes where the soldier keeps that internally, does not share that with the spouse or to the children.

How do they access that and make certain they're looked after from a family point of view, especially when there's turmoil such as a divorce situation that might be occurring? The larger piece underlying this is destignatization. When you get out, ask for help. If you're having a bad day, don't say it's okay; say that you're having some challenges, and we'll work together.

It's a two-pronged approach. It's a culture shift, and we are providing those services to support the families outside of Canada, in that specific example.

• (1250)

Mr. Robert Kitchen: Is the information given to the spouse?

Cmdre Sean Cantelon: Absolutely.

**Mr. Robert Kitchen:** Is it guaranteed that it's given to the spouse and not given to the soldier to give to the spouse?

**Cmdre Sean Cantelon:** Leaving Canada is the one case in which I can say the spouses get the brief upon departing the country and get the services that are there. They're also met on location, either remotely by our staff, through video, or by telephone, and are provided with a rundown of all those services.

It's a little more challenging inside Canada. We do our best to contact spouses, family members, parents, and all of that.

The Chair: Thank you.

Ms. Lambropoulos, you have three minutes.

**Ms. Emmanuella Lambropoulos:** Thank you for being with us today. We all know how important a role the family plays in the transition of members into civilian life, so thank you for your input today.

A witness who came last week mentioned that he had a certain time frame within which he could apply for transition services and that if a certain amount of time had gone past, he wouldn't be able to apply anymore.

Obviously not all veterans are ready to apply for these services upon retirement, and so I was wondering why this is currently the case. If family members are allowed to...not really apply for the veterans, but if they have any input and if they can strongly suggest to Veterans Affairs Canada to look into a person's file....

**Col C.D. Harris:** Yes, in fact, this was part of the trial. A twoyear limit was put in place for the ill and injured veteran and their family to belong to the program. That has been eliminated. Under the new veteran family program, there is no timeline associated with it at all. Even if it has been two years that you've been out of the military, you're still welcome to come back into the program.

Ms. Emmanuella Lambropoulos: Thank you very much.

I have another question for the veteran family program, one Mr. Kitchen also mentioned. To what degree are families allowed to receive these services without the veteran necessarily receiving them? If he or she is reluctant to receive them, how much are families allowed to receive? How much power do they have in this whole process?

**Col C.D. Harris:** They have all the power they want. They are more than entitled or eligible to use the services of the veteran family program, as a family member is considered right now to be a current serving member within the military family services program. As that status transitions, they have the same eligibility. Sometimes a member may be isolated from them. A family is still welcome and can still contribute to the veteran family program.

**Cmdre Sean Cantelon:** I would add that there's no geographic restriction on this. Family does not just mean spouse; it can mean parents, a niece, a nephew. If you're related to a serving member and you want to contact one of our MFRCs, feel free to do so, and they will reach out—or the military family program, or the family information line.

**Ms. Emmanuella Lambropoulos:** How do you reach out to these families, if they don't necessarily know about the program?

**Cmdre Sean Cantelon:** This is multi-faceted. We have a closed Facebook community that we talk to. We use email and all the media relations that we can come up with. For the spectrum of family programs, for instance, under the Canadian Forces morale and welfare services, we have a Canadian Forces appreciation program. We'll use that list for mailing out. We have about 100,000 veterans on that list. Veterans Affairs is contacting all their known veterans. We are dealing with publicity in the local area and using good old-fashioned word of mouth. It is, then, multi-faceted, to try to reach out so that people are aware.

Ms. Emmanuella Lambropoulos: Thank you.

The Chair: Great.

I'd like to thank both of you for taking time out of your busy schedule to testify today.

We'll need to recess and clear the room very quickly: we have an in camera issue I'd like to deal with.

[Proceedings continue in camera]

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