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## **Standing Committee on Veterans Affairs**

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**EVIDENCE**

**Wednesday, March 8, 2017**

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**Chair**

**Mr. Neil Ellis**



## Standing Committee on Veterans Affairs

Wednesday, March 8, 2017

•(1535)

[English]

**The Chair (Mr. Neil Ellis (Bay of Quinte, Lib.)):** I call the meeting to order.

Good afternoon, everybody. We are meeting pursuant to Standing Order 81(5) regarding supplementary estimates (C) 2016-17, votes 1c and 5c under Veterans Affairs, referred to the committee on Tuesday, February 14, 2017.

Appearing today in our first panel of witnesses is the Honourable Kent Hehr, Minister of Veterans Affairs and Associate Minister of National Defence. Joining him from the Department of Veterans Affairs is Walter Natynczyk, deputy minister.

We'll start with them for 10 minutes, and then we'll go into questions.

Welcome, gentlemen. The floor is yours.

**Hon. Kent Hehr (Minister of Veterans Affairs and Associate Minister of National Defence):** Thank you very much.

Good afternoon, Chair Ellis and members of the Standing Committee on Veterans Affairs.

I am pleased to present the 2016-17 supplementary estimates (C) and the 2017-18 main estimates to Parliament on behalf of Veterans Affairs Canada.

I'd like to thank the members of the committee for their dedication to veterans' issues, particularly for their recent focus on mental health and their study of service delivery.

Our government is committed to ensuring that eligible veterans, retired Royal Canadian Mounted Police members, and their families have access to the mental health support they need, when and where they need it. No doubt the work of this committee will add to our knowledge and understanding of how we can do better in this regard.

Our government continues to focus on increasing access to mental health care and expanding outreach to ensure improved supports and services for veterans at risk of suicide. That is why I am working closely with my colleague, the Minister of National Defence, to close the seam between our two departments and to ensure a smoother, easier transition for releasing military members.

Turning to the subject of this meeting, the 2016-17 supplementary estimates, I'd like to point out that the largest increases are for the earnings loss benefit and the disability award. Furthermore, the number of disability claims submitted to Veterans Affairs increased

by 19% in fiscal year 2015-16. This is a good thing. It means more people are coming forward to get the help they need.

I will now turn to the main estimates for the 2017-18 fiscal year.

The Prime Minister charged me with ensuring that we honour the service of our veterans, reduce complexity, and do more to ensure the financial security of Canada's veterans. I can say with pride that we have made lots of progress. The main estimates before you today reflect many of our accomplishments to date. In fact, they reflect a net increase of \$1.06 billion over 2016-17. This is nearly 30% more than that in the previous fiscal year. This demonstrates that we have dramatically increased financial security and access to services for veterans and their families, and we are not done yet.

As of April 1, the disability award will be increased from \$310,000 to a maximum of \$360,000 and will be indexed to inflation. We will issue a top-up payment to anyone who has already received a disability award, meaning more money in the pockets of ill and injured veterans. Furthermore, this change will be retroactive to 2006, when the disability award was first introduced. This demonstrates our commitment to "one veteran, one standard".

Also beginning this April, changes to the permanent impairment allowance will ensure that veterans are more appropriately compensated for the impact of service-related impairments on their career. The benefit will be renamed the "career impact allowance" to better reflect its intent of assigning different gradients to adequately reflect how an individual might have moved through their career had they not become ill or injured.

Increasing the maximum of the disability award and expanding access to the permanent impairment allowance were recommendations made by the Veterans Ombudsman, Mr. Guy Parent. I always value the ombudsman's feedback, and I am proud to be implementing substantive changes that were recommended to us by the ombudsman. Our ombudsman has indicated that this move has moved the marker forward in regard to access to fair compensation. We will continue to work towards building a veteran-centric model that supports a seamless transition from military to civilian life.

One increase in the operating expenses you will note is for the reopening of Veterans Affairs offices. I am very proud to say that our government has already opened seven of the nine offices closed by the previous government. This May we will reopen the remaining two, plus an additional office in Surrey, British Columbia.

We also expanded outreach to veterans in the north. VAC staff will visit northern communities every month to meet with veterans and their families and to connect them with services and benefits.

Commemorating all the brave men and women who serve is a core responsibility of Veterans Affairs Canada. Honouring the service of our brave soldiers, sailors, and aviators is essential to ensuring that we as a nation never forget their dedication and sacrifice.

● (1540)

The Canada Remembers program keeps alive and promotes an understanding of the achievements of and the sacrifices made by those who served in times of war, military conflict, peacekeeping, and beyond. Our government is investing approximately \$11 million to commemorate the 100th anniversaries of the Battle of Vimy Ridge and the Battle of Passchendaele, as well as the 75th anniversary of the Dieppe raid. We will continue to pay tribute to and acknowledge those who have made Canada the country it is today.

Over the last year and a half we have accomplished a great amount for Canada's veterans. We increased the earnings loss benefit from 75% to 90% of a veteran's pre-release salary. This will be indexed to inflation. This ensures those undergoing rehabilitation have the financial support they need during their recovery.

We've simplified the approvals process for a number of disability claims, such as PTSD and hearing loss, allowing us to respond to more claims faster. In fact, compared to the year before, we made 27% more decisions in the last fiscal year.

We are well on our way to delivering on our commitment to hire 400 new employees, with 381 of them hired to date. This includes 113 new case managers. We are making great progress in reducing the average veteran-to-case-manager ratio from 40:1 to 25:1.

In October we increased the amount of the survivor's estate exemption for the funeral and burial program so that more veterans and their families have access to dignified funerals.

While we have achieved a lot, we recognize that there is much, much more to be done.

We continue to dedicate resources to finding ways to improve the mental health services and supports available to veterans and their families. I know that this is the focus of your current course of study and that there is an increased awareness of this important issue. I maintain that we can always do better, and I recognize that while the majority of veterans receive the mental health support they need, we can do more to reach those who do not. I am looking forward to hearing your recommendations as to how we can continue to improve.

There is still work to be done to develop a lifelong pension, an option for that. We will continue to consult with stakeholders and parliamentarians to develop the best approach.

A crucial area where VAC can and must do better is in delivering timely benefit decisions. We are pursuing this on a number of levels. I am working with the Minister of National Defence to close the gap between National Defence and Veterans Affairs by reducing complexity, overhauling service delivery, and strengthening partnerships.

Veterans Affairs has done an extensive review of its service delivery model with the goal of putting veterans first in programs and services, making things simpler and easier to understand, and facilitating improved access. We consulted widely with veterans, staff, external experts, and Canadians, and we'll publish a final report that outlines key recommendations. We will have a plan to put 90% of the recommendations into action within three years and the full suite of changes in five.

The physical, mental, and financial well-being of our veterans is our overarching goal. Veterans Affairs Canada has done much, and with the estimates delivered today, we will be able to fulfill many of our promises.

Thank you so much.

**The Chair:** Thank you.

We will begin our questioning with Mr. Brassard.

**Mr. John Brassard (Barrie—Innisfil, CPC):** Thank you, Mr. Chair.

Thank you, Minister and General, for being here today.

One of the items that is noticeably missing from the main and supplementary estimates is one of the main things, which is a campaign promise that was made by the Prime Minister as he stood in Belleville. It's part of your mandate letter as well, Minister. It's to establish lifelong pensions as an option for injured veterans. I don't see that anywhere in here, and I'm asking why.

**Hon. Kent Hehr:** We remain fully committed to providing an option for a pension for life for our veterans who have been injured or have become ill as a result of their service in the military. This is part of our campaign commitment. It remains part of the to-do list. I know that we have accomplished much in terms of financial security in moving \$5.6 billion last year in improving the ELB and improving the disability award, all of these things that will flow into a better system of financial compensation for our veterans.

I can say that we are committed to this. It will be delivered.

● (1545)

**Mr. John Brassard:** Can I ask what timeline you're committed to for this, Minister?

**Hon. Kent Hehr:** We have a timeline that we are elected as a government for a four-year term. Of course, that—

**Mr. John Brassard:** So when can veterans expect this promise to be kept?

**Hon. Kent Hehr:** Your veterans can expect this promise to be kept within the four-year term of the Liberal government. I will be proud to stand up and say we have delivered that pension option for our veterans.

**Mr. John Brassard:** The next question I have is with respect to the issue you spoke about before. We're currently going through a mental health study on PTSD. One of the issues we're consistently hearing about is the transitional aspect out of the military into civilian life, and the challenges that exist with that. One of them is employment challenges.

Over the course of the last week, I've received several letters from veterans. In one case, his application to work for the public service sat in the queue for a year. There was another case in which a 26-year veteran was actually willing to move to get work. There seemingly is a vacuum right now that exists with respect to hiring veterans.

I'm asking, where is VAC today with respect to hiring veterans in the public service? I'll remind you, Minister, that in December you told the committee that VAC was focusing on hiring opportunities for veterans, not only in VAC but in other departments in the public system. Right now we see the current levels of veterans being hired at 2.2% in the public service.

What has VAC done with other departments, including Veterans Affairs, to promote priority hiring of veterans?

**Hon. Kent Hehr:** I'd really like to thank the member for his question. This is an area I have flagged in my department as one we would like to see better results in, both in hiring people within the public service as well as in seeing more success of our veterans once they transition out of military life. I know some of that work is starting with closing the seam with Minister Sajjan. I know we're putting an increased focus on some of his work within my department.

For more details on that, I think, General, perhaps you could enlighten us.

**General (Retired) Walter Natynczyk (Deputy Minister, Department of Veterans Affairs):** Mr. Chair, ladies and gentlemen, we are certainly focused on engaging veterans and getting them into the government, and indeed finding them their new purpose. We know, as you mentioned, that as part of mental well-being, veterans need to have a purpose and a focus and they need to move on. Many of them get out of the Canadian Armed Forces at the average age of 37, so they have many years to serve.

Based on the minister's direction, I and Deputy Minister Forster from National Defence have reached out to all of the deputy ministers. We actually gave a presentation to all of the deputy ministers across government. The minister has also authorized the creation of a veterans hiring unit inside Veterans Affairs that will work with the human resources departments of all of the departments and match those veterans seeking employment with those departments.

We've also sent letters to agencies such as Parks Canada because they have special hiring rules, and we need to ensure that veterans have access to those rules. We're ensuring that it's not only Ottawa-centric but also coast to coast, keeping in mind that we have parks across the country and Correctional Services has offices across the country and Revenue Canada has offices across the country. It has to be more than just Ottawa.

We're working with the rest of the government to enable all of that. Also, we're working with companies. We're going through Canada Company, the military employment transitions program, so that veterans have the appropriate skill sets and the right resumés to get into commercial companies.

**Mr. John Brassard:** I may come back to that if I have time.

Within the supplementary estimates, there's a line item of \$2.5 million for advertising—advertising what?

**Hon. Kent Hehr:** As you're aware, we had a very robust year in our first year of government, opening offices, providing information about changes to benefits that were coming down, and even moving forward on giving veterans a better burial. There was much information that needed to be shared with our veterans and the people who were out there.

To get more specifics on that, I'll turn it over to General Natynczyk.

**Mr. John Brassard:** Can you break down what the advertising is for, General?

**Gen Walter Natynczyk:** Mr. Chair, ladies and gentlemen, we get the advertising from a central pot for the Canada Remembers program. This is something that is organized out of the Privy Council Office. We make a bid so that for Remembrance Day and so on we can get access to that.

When my chief financial officer is up here, she could probably expand on that answer.

• (1550)

**The Chair:** Mr. Eyolfson is next.

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

Thank you, Minister, and General, for coming.

You were talking about the reopening of the Veterans Affairs offices. I had the honour of taking your place to open one of them in Brandon, Manitoba. It was quite an honour to be able to do that.

Obviously this happened before your mandate started. Was it ever made clear to you why these were closed in the first place?

**Hon. Kent Hehr:** My understanding is that this was part of the deficit reduction initiative under the former government's direction. Of course, when you cut taxes, you obviously many times have to cut services. In my view, Veterans Affairs was the department that got hit, in many instances in terms of a reduction in front-line staff. At one point there was close to a one-third reduction in front-line staff in my department as a result of the directives of that initiative. As well, there was the closing of offices, and there were some things that we found didn't get moved on that in our view should have gotten moved on.

That was how that happened. Nevertheless, we've now re-committed to veterans. We've found that it's important to have these service locations for veterans and their families to have points of contact, to come in with their concerns, to share their stories, to find information, and to be able to better their lives. I'm proud to say that seven of the nine have been opened, with a view that more people are using those services. I know that when we've gone back to communities where they were closed, from Corner Brook to Brandon and everywhere in between, people have been very excited. They look at it not only as a place where people can get help but as a way we honour the men and women who have served our military, and in fact honour the 2.3 million Canadians who have served since Confederation in our armed forces.

I'm very proud of this government's achievement and of what we've all done to make this happen for our veterans and those who have served.

**Mr. Doug Eyolfson:** Thank you.

Further to that, I understand that when these offices were closed, staff was laid off. Where are we in getting the staff for the ones that have opened up to get to the staffing levels we need?

**Hon. Kent Hehr:** For the exact details of this, I'll kick it over to General Natynczyk.

**Gen Walter Natynczyk:** As the minister said in his opening remarks, sir, we have hired 381 employees across the country. Of that number, 113 are case managers. Office by office, we're staffing up in all of them. In some parts of the country, it is a challenge to find the right skill sets—the social workers, the psychologists, and so on. At the same time, we're also seeing that people do want to join the Veterans Affairs team. Our mission is noble and they want to serve our veterans, so we have great quality to choose from.

We'll continue to staff right up to the mark. At the same time, the ratio of veterans to case managers, as the minister mentioned, is declining, which is all the better for the service to our veterans.

If you wanted information office by office on who we have out there, we could have Mr. Michel Doiron, the assistant deputy minister for service delivery, give you that breakdown.

You mentioned visiting the Brandon office. When I was visiting the Kelowna office recently, I was thrilled to see these folks who are so keen there, to see veterans there, and to see a master corporal, a former medic who served in Petawawa, as a case manager in Kelowna now. I'm just thrilled to see that kind of experience and to see those skill sets applied to our mission.

**Mr. Doug Eyolfson:** Thank you.

Further to the increase in services with these offices opening, can you give us a general idea of how the service is being improved for veterans who are in the northern and more isolated communities?

**Hon. Kent Hehr:** I have one thing to add to what we said earlier. We're also rapidly approaching our 25:1 average for case managers to veterans. This is a very important milestone that we're close to reaching. Social work best practices say we need an average of 25:1 to best serve our veterans who need that additional support, so I'm very proud of that as well.

With regard to our veterans offices in the north, of course we have many indigenous as well as other people in the north who have served in the military. We're very proud of that. We've never had a Veterans Affairs presence up there. That has entailed oftentimes long travel time to cities far away and time away from family, which we thought was unnecessary and unfair.

We acted on those concerns. We've now allowed for a mobile VAC operating unit. It's a mobile operation, because it's a vast territory to get around in. They are up there on a once-a-month basis. They travel around communities finding veterans who need to sign up for services, supporting those who are already on VAC services, and making sure that veterans get the timely help they need even in our northern and remote areas.

• (1555)

**Mr. Doug Eyolfson:** Thank you.

There was a reference to our strategy in developing mental health services. In the half minute we have left, what would you say, in general terms, are the biggest challenges to improving mental health services for veterans?

**Hon. Kent Hehr:** In many ways we do very well, and yet, as our Prime Minister always says, "Better is always possible."

It's a matter of a couple of things. One is ensuring that we're keeping and adding to our expertise and our staff component when necessary in order to provide that mental health hands-on outreach that we need. We think we have a better ability to do that through the hiring of an additional 381 people to date. We think that assists us.

Also, I have other mandate letter items I need to accomplish. One concerns the centre of excellence, which will be on mental health and post-traumatic stress disorder. We believe it will allow for us to capture best practices, to go out robustly into the academic world and otherwise to make sure we're at the top of our game and that we're continuing to do the best we can with the emerging information that comes out in this field.

**The Chair:** Thank you, Minister.

Ms. Mathysen is next.

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

Thank you for being here, Minister.

I have a number of questions.

I note an increase in the estimates, but you know that there are a number of veterans who are not happy. They feel that they have not been provided with the benefits they have earned and are entitled to and that they're falling through the cracks.

What kind of funding do you anticipate you would need to rebuild that trust with veterans and to move through the backlog of veterans waiting for pensions?

The DND ombudsman crunched the numbers and came to this committee and provided us with those numbers. How prepared are you to allocate that sum of money outlined by the ombudsman to Veterans Affairs?

**Hon. Kent Hehr:** We ran on a commandment to do things better for veterans and their families, full stop. I have a mandate letter from our Prime Minister that encompassed our commitments to veterans. We accomplished six of those 15 things, and two of them regarding financial security have really moved the meter a long way, and that's according to our Veterans Ombudsman. In the last budget we committed \$5.6 billion to veterans and their families. That is now rolling out.

We've moved the disability award from \$310,000 to a maximum of \$360,000. We've moved the earnings loss benefit from 75% of a soldier's pre-release salary to 90%. These are tangible results that are putting more money in veterans' pockets. We are answering the bell on financial security and we remain committed to providing more financial security, including an option for a pension for life. That is still in our mandate letter. We are still committed to it, and of course we will be delivering on that promise.

We see that we have moved a great deal forward in terms of financial security, and we will continue to look at ways in which we can do that to have our veterans live firmly in the middle class.

**Ms. Irene Mathysen:** Okay, so you've moved the disability award up, but it's not realized yet. That's still on the to-do list. It's just technically on paper. It hasn't actually happened yet. At least, that was my sense from what you said.

• (1600)

**Hon. Kent Hehr:** The cheque will be in the mail, I believe, by April 1, unless the general wants to correct me on that.

**Ms. Irene Mathysen:** You said you're going to deliver on those lifelong pensions within the term of this government. How will you make sure that veterans who receive lump sums under the new Veterans Charter and who want to transition to a lifelong pension are dealt with? How will you make sure that they receive what they should have been entitled to under the lifelong pension? As an act of good faith, would you be prepared to drop the case that you're fighting with Equitas?

**Hon. Kent Hehr:** There are two separate questions here, and I'll try to separate them.

You'll note that we did make our disability award retroactive. We went back to 2006, and people who had received a disability award of only up to \$310,000, if they were 100% disabled, will now get \$360,000. We thought that was the right thing to do. We brought that forward because we were committed to showing a one veteran, one standard approach, and that's what we try to do in every aspect of what we bring.

We are dealing with a system right now that has been made up of a patchwork of programs slapped together from our government to other governments, and that actually makes it awfully difficult. In my department, I have injured soldiers who are 20 years old and injured soldiers who are 100. It makes it very complex. That said, we are committed to bringing in a pension option that works for veterans and families.

In terms of the court case, we are governing in terms of bringing in good public policy for veterans and their families. That's what I can do; that's in my control. Many of the things in our mandate letter are issues that were brought up by the Equitas lawsuit. In fact, many of the people who are on the Equitas lawsuit are part of my advisory team on financial security, mental health, and others. I'm very proud that they are working with us on solutions to problems facing the veterans community that were ignored for an awfully long time. They are actually very happy with many of the solutions we've brought to bear.

That said, they, like you, want us to get it done. I recognize that.

**Ms. Irene Mathysen:** Yes, I met with some of those folks, and some of them aren't happy.

You talked about the maximum disability award. It's a lot of money, but how many veterans actually receive it?

**Hon. Kent Hehr:** Do you want a breakdown of who receives what range in Veterans Affairs, from 5% to 100% disability? Is that what you'd like?

**Ms. Irene Mathysen:** Yes. Actually, you can send that later. It's just that \$360,000 sounds like a lot of money, and there is this sense that a lot of people are getting it. I wonder exactly how many are getting it.

**Hon. Kent Hehr:** I will get you the information, but I think it would help if I framed veterans compensation with a little more clarity for you.

One, there is an income stream. Any ill or injured soldiers who cannot work because of their service to this country will receive an income stream. That's called earnings loss benefit, or another program similar to it, whereby no injured soldier will receive less than \$44,000 and change, I believe. That would be their annual income. Even if they were a senior private, which is the lowest rank on the file, they will receive that as a yearly benefit to them and their families.

Furthermore, the \$360,000 is a pain and suffering payment. These two programs mirror each other. They help and augment each other to stabilize veterans and their families and allow them, if they are ill or injured and cannot work, to be fully compensated. If they can work, they are still going to get a payment through the disability award for pain and suffering, to recognize that they have suffered as a result of their military service.

**The Chair:** Thank you, Minister.

Mr. Bratina, go ahead.

**Mr. Bob Bratina (Hamilton East—Stoney Creek, Lib.):** Thank you.

We've been hearing a lot of testimony on a number of issues, but one thing that keeps cropping up seems to be the gap or the seam that occurs between the active service part at the Department of National Defence and the issues that we are dealing with at Veterans Affairs. What have you been working on in terms of closing the gap between the active service area and the veterans area?

• (1605)

**Hon. Kent Hehr:** That's an excellent question. That's much of the work that has been taken over by our department and through our work with the Minister of National Defence and Chief of the Defence Staff Vance over the course of the last eight to nine months, understanding that we need to professionalize the release of members from our Canadian Armed Forces. It's what we essentially have to do.

We do a great job of getting people into the military and getting them through basic training, getting them on missions, and getting them places to live and everything while they're in service. We have to get that same type of attitude and structure in place so that when they are released, medically or otherwise, they're 100% good to go on the day they leave. They have their pension cheque lined up and they understand what their supports look like so that if they're going to move to a community, they understand whether that community has services to help them or not. We need to do that, and that's why I'm very pleased that those conversations are happening and that the work is being done to recognize whether our soldiers are releasing with better outcomes.

Here's the real truth, guys, and I think.... "Guys"—ladies and gentlemen; it is 2017, by the way.

**Mr. Bob Bratina:** Yes.

**Hon. Kent Hehr:** Just understand that it was a euphemism. It was a slip. Chair Ellis, I apologize. You were looking at me with great scorn and disdain there for a second.

Many people in the military do their military service and transfer successfully. Still, we have a far too large number, roughly 27%, who struggle in some form or fashion, whether that be employment, education, addiction, mental health, illness, or injury, and that is why we have Veterans Affairs. That's why we need to professionalize the release. We have a lot of work to be done. This is not going to be solved overnight. I wish it were, but it's not.

We're working to ensure that we professionalize the release, and I am very happy with the commitment of the Minister of National Defence, the Chief of the Defence Staff, and our department, who

are working together to solve these issues. It's a financial issue, a rehab issue, a return-to-work issue, a return-to-school issue. There are a whole host of things that are going to allow us to have more success. Those conversations are getting detailed, and I can tell you they're moving along.

Is that fair?

**Mr. Bob Bratina:** Yes. I've had the honour of presenting young veterans with civic pins and commemorative materials over the past few years. These are remarkable young men and women. I'm shocked when I see the number. The number I just looked up is 75,000 Second World War veterans, one of whom in my city is a 96-year-old Dieppe veteran who's hale and hearty and looking forward, actually, to the 75th anniversary commemoration this year.

I wonder if you could comment on these individuals who have been under the care and compassion of Veterans Affairs for 70 years. Do you hear much about the cohort of the oldest veterans? The Korean War I would put in there too; I believe those men and women are in their eighties now. What about them?

**Hon. Kent Hehr:** We're proud to commemorate the service and sacrifice of the men and women who have served in our military from the start of this great country to Vimy Ridge to Juno Beach to Korea to our peacekeeping missions, and then the Gulf War, Afghanistan, and all the peacekeeping missions in between our current efforts. It really is glorious, and veterans and Canadian Armed Forces members continue to keep this country safe, proud, and free.

We also know that we've been delivering our services to World War II and other veterans for a long time now. We have pretty good expertise in providing that service at various locations across this country. I know that around 6,400 people use long-term care paid for in some ways and fashions by Veterans Affairs. We work with over 1,500 locations across this country to get them the help they need to better live their lives. This is essentially through augmentation of national health care. We've gone to community care, and despite how you will sometimes hear something to the contrary, the vast majority of veterans want to live in the community where they're from, wherever it is, across this nation. That allows us to run a reasonable, pragmatic system with an eye to fiscal responsibility that allows us to deliver services in an efficient way.

One of the sad things is that many of these veterans will be moving on. Nevertheless, our government is committing to commemorating what they've done and continuing to keep their services and sacrifices alive. That's often why we do these various things, but I think it's also why we always have to look at November 11, our Remembrance Day ceremony in Ottawa and in this country. I know I was very happy with MP Fraser's private member's bill that now recognizes that we will be moving towards having a national holiday, at least federally. I think that sets the tone and sets the direction we're going as a nation.

• (1610)

**The Chair:** Thank you, Minister.

Go ahead, Mr. Fraser.



**Mr. Colin Fraser (West Nova, Lib.):** Thank you very much, Minister, for being here today. General, it's nice to see you again, and thank you so much.

I'd like to ask a question regarding long-term care.

Minister, I appreciate the work you've been doing, and a lot has been accomplished in the first year. With regard to long-term care, though, there's a recurring issue within my province of Nova Scotia, and I know in many care facilities across the country, with regard to how VAC is adapting to long-term care and how we are serving non-traditional veterans within these care facilities moving forward.

I wonder if you could comment on that and give us some light about how your department is thinking on this issue and what we can expect in the future.

**Hon. Kent Hehr:** That's a good question. As I said in the previous answer, we're committed to providing veterans who have taken part in various endeavours to serve this country with long-term care in appropriate places.

We must also remember that we work very closely with provincial governments that are now primarily responsible for much of the long-term care apparatus in this country. Veterans Affairs partners with them on an ongoing basis to continue having a pragmatic government that recognizes different levels of governments' responsibilities and ensures that veterans still get the help they need, when and where they need it.

Over the course of the last three months, I know we have tried to get more flexibility into our arrangements. Particularly in your province, we've had some success on that, working with your premier and your health minister to try to make some more flexible, reasonable arrangements that sometimes the line items in government documents don't allow for when the hands of the minister are tied with respect to authorities.

We're proud of the work we did in that regard. We now have more agreements out there with various places.

General, maybe you could highlight some of the work we've done to add some flexibility into what we're doing, to get more veterans the help they need in their older years.

**Gen Walter Natynczyk:** Mr. Chair, ladies and gentlemen, again, as the minister indicated, the federal government doesn't run hospitals. With the handover transition of Ste. Anne's Hospital last year, all hospitals are now in the possession of the provinces, yet, as the minister mentioned in an earlier question, we support veterans in approximately 1,500 long-term care facilities coast to coast, because the research shows, and our veterans are saying, that veterans want to be close to family. Some of them want to be in one of those traditional 18 hospitals.

Province by province we are working, as we did in Nova Scotia and as we are in Ontario with Parkwood in London, Ontario, and Sunnybrook and others, to ensure for that generation of post-World War II and post-Korea veterans, we can work with the provinces to get community beds for veterans in each of those facilities. I'm really pleased that we have the kind of co-operation that we have from them.

Those same community beds would be available to allied veterans, veterans who fought for other nations, who clearly are eligible, and also for modern-day veterans, those from the peace-keeping era and through the Afghanistan era. If indeed they need access to long-term care, they will have those long-term beds. We have in excess of 600 modern-day veterans in community beds coast to coast.

• (1615)

**Mr. Colin Fraser:** Great. Thank you.

I'd like to turn now to something you touched on earlier, which is the improvement in the case management ratio from 40:1 to 25:1. I know a lot of good work has been done in that regard already in one year.

We've heard about something, and I'm wondering if you could comment on it. It is not just the improved ratio, which is very important to ensuring that the veterans are receiving adequate service and that they're being paid attention to; it's also whether there have been improvements in training for the case managers to ensure that they have a better understanding of the needs of the veteran and that they are more sensitive to some of the situations we've seen in the past that we are trying to avoid as we go forward.

**Hon. Kent Hehr:** I've had the honour and privilege of being in this job for a year and almost six months, and I can tell you I'm very proud of the Veterans Affairs staff throughout this country, from our head office in P.E.I., where Veterans Affairs is located, right through this country where people are working in our various offices, our various centres, and our OSI clinics and the like. They are highly professional public servants, highly committed to veterans' outcomes, who are doing their job every day, and I'm very proud of them. I'll put our case managers and their effectiveness and their commitment to the job up against virtually anyone you can name throughout government and throughout the private sector.

People in my department are very committed to the job, and I know if they need... We have very many programs within Veterans Affairs that allow them to skill up, to get the help they need should they wish to have more opportunities to learn. I've just been super-thrilled with the commitment of our public servants.

As politicians, we get to do some neat things. We get to set the direction and do some public policy, but it's really the people on the front lines, the public servants, who better our veterans' lives. You see that throughout government and you definitely see it in mine.

**Mr. Colin Fraser:** Thank you so much.

I want to briefly acknowledge and thank the minister for the recognition of my private member's bill, which made it through the heritage committee yesterday. Just to make sure it's clear, it does modify the language in the federal Holidays Act to make it consistent and also affirms Parliament's recognition of this important day, but of course it's still up to the provinces to determine whether it is a non-working day.

We look forward to that going to the House for third reading. Thank you for mentioning that, Minister.

**Hon. Kent Hehr:** Thank you for the details. The devil's off them now.

**The Chair:** Thank you.

Ms. Wagantall is next.

**Mrs. Cathay Wagantall (Yorkton—Melville, CPC):** Thank you, Minister and Deputy Minister, for being here today.

My first question is around the whole process of getting our veterans employed. We've heard here that the public service is very much focused on hiring our veterans when they're qualified to serve. There's a priority there.

I had a veteran contact me last week who was highly qualified, having served in the forces in accounting, who applied to help with the Phoenix system, and never did have a communication of any kind with an actual human being. Is there any kind of an identifier to flag veterans applying for positions? If so, is there any kind of a tracking of applications, interviews, and placements of veterans?

**Hon. Kent Hehr:** That's an excellent question, and one that I identified as a problem when I came in as a minister. We're not transitioning veterans successfully to jobs in the public service as well as I would like, nor are we having as much success in getting private sector jobs for some veterans who struggle. We are working on that, and the general filled in my answer on that.

**Mrs. Cathay Wagantall:** It's going to be a priority.

**Hon. Kent Hehr:** I hope you would bring us your individual case, if he'd allow us as a department to—

**Mrs. Cathay Wagantall:** Sure, I'll send it over.

**Hon. Kent Hehr:** That would be good. We could possibly assist. We have to make sure that is happening with other veterans who may be finding the same thing. General, would you comment?

**Gen Walter Natynczyk:** Again, we are very much focused on hiring those priority veterans, especially those who have left the Canadian Armed Forces with an injury, and all those others with the right skills. We are engaging all the departments. The minister sent a letter to all his colleagues across government—all the cabinet ministers—to engage ministers.

Rear-Admiral Elizabeth Stuart, our chief financial officer in corporate services, our retired ADM, will be at this table later. She can probably fill in a few more details on that.

• (1620)

**Mrs. Cathay Wagantall:** We'll look forward to getting actual numbers. That would be great.

Second, I am from Saskatchewan. An office has been reopened in Saskatoon. When it was opened, you weren't able to be there, and I understand that, but—

**Hon. Kent Hehr:** It was in the summer, just—

**Mrs. Cathay Wagantall:** The announcement was in the summer, before it opened in November. That's correct. It indicates approximately 2,900 veterans will be served there. If you're looking at 25 per case manager, you'd be looking at around 115 case managers to deal with things there. Right now there is one case

worker, and that individual commutes from Regina. When they can't make it, there's no one else there to fill that role. What is the timeline? What are you thinking? There are a lot of veterans in rural Saskatchewan. They have to come to Saskatoon, and timing is an important issue.

**Hon. Kent Hehr:** You ask an excellent question. In many jurisdictions across this country, it is easier to hire people with the unique skill set needed to serve veterans than it is in other—

**Mrs. Cathay Wagantall:** But there are none in Saskatoon, the whole city?

**Hon. Kent Hehr:** I'll get to that.

**Mrs. Cathay Wagantall:** Okay.

**Hon. Kent Hehr:** We know the importance of getting to that average ratio in terms of supporting people in their communities. That's why we reopened that office.

For more details on the specifics of Saskatoon, I'll have to turn to the general.

**Gen Walter Natynczyk:** We'll see how quickly this cascades to the assistant deputy minister of service delivery.

**Voices:** Oh, oh!

**Gen Walter Natynczyk:** I know that we've hired in Saskatchewan. I also know that in Regina we have an office. We have the integrated personnel support centre at CFB Moose Jaw. With regard to where the actual individuals are on these lists and how many are parked in Saskatoon, I'll have to rely on the assistant deputy minister, Michel Doiron.

Again, we are working toward finding the right folks in the area, with the right skill sets and the case management experience for these roles. In some parts of the country it's been tough. It's not a shortage of resources from a funding standpoint; it's making sure we find the right folks with the experience and skill sets for those locations.

**Mrs. Cathay Wagantall:** That would probably apply to the...I understood that when this office opened, there would also be an OSI clinic there, on the fifth floor. That's what I was told.

**Gen Walter Natynczyk:** I can tell you right now that we're still supporting Saskatchewan from Deer Lodge in Manitoba, which is—

**Mrs. Cathay Wagantall:** Not good.

**Gen Walter Natynczyk:** —not optimized, but I would not go into future intention like that.

**Mrs. Cathay Wagantall:** Okay. Thanks.

**The Chair:** You have one minute and 20 seconds.

**Mrs. Cathay Wagantall:** All right.

Very briefly, you heard my question in the House today in regard to mefloquine.

**Hon. Kent Hehr:** You're asking it to the right person.

**Mrs. Cathay Wagantall:** Good. I'm glad to hear that.

Australia just released information on what they are doing for all their soldiers, the impacts on them and what the effects are. Attempted and committed suicide are possible outcomes. They are providing treatment and care specifically for individuals identified as having taken mefloquine and needing this care.

How do we get this on the radar here so that these individuals have the care they need? They're not being treated for mefloquine toxicity, and it's not being recognized.

**Hon. Kent Hehr:** First off, I'm very proud of the 4,000 people we have working from coast to coast to coast on mental health issues—

**Mrs. Cathay Wagantall:** This isn't mental health. This is a brain stem injury. It's physical. It requires different treatment than PTSD requires. That's what's come through very clearly in the studies in Germany, Australia, the U.S., and Britain.

**Hon. Kent Hehr:** Any veteran who comes forward who has an illness or injury tied to military service will be served by our department with the best available technology and expertise that this country can provide.

**Mrs. Cathay Wagantall:** Thank you.

**The Chair:** Go ahead, Ms. Lockhart.

**Mrs. Alaina Lockhart (Fundy Royal, Lib.):** Thank you, Mr. Chair.

Thank you, Minister and General, for being with us today. As you know, we've been working on a mental health study and have concluded our service delivery study. A lot of the testimony you've given today has given us some answers to some of the things we've been hearing through that testimony, so I thank you.

One thing we've heard from veterans is that their access to cannabis for medical purposes has really made a positive change in their lives. Some of them feel that the changes VAC has made are really taking away their medication. In regard to your department's decision to reassess the acceptable amounts of marijuana for medical purposes, what evidence led you to make that decision?

• (1625)

**Hon. Kent Hehr:** I think we have to start with this at a higher level. When I came into the department, there was no policy rationale for the provision of 10 grams a day of cannabis for a veteran for their medicinal purposes, whether for mental health, physical ailments, or whatever. We searched and we searched, and lo and behold, none was found.

Because cannabis is not a drug that is regulated by Health Canada—there are no provisions on that there or otherwise—I said we needed to get together with the medical community, veterans, stakeholders, and licensed producers to try to get a policy framework. It's not a drug regulated by Health Canada. We felt we were in a policy void, in a vacuum.

Through those meetings, our searching, our consultations with the medical community and otherwise, and other expertise—people are looking at this emerging field—we came across much information. The studies go both ways. In fact, there are some medical practitioners who believe it's harmful. Some say there's a benefit. Our government is trying to do things based on evidence and science and good policy.

We even came across information from the Royal College of Physicians and Surgeons stating that the vast majority of people should not be taking more than three grams a day. They look at that as an upper limit for people to safely use when dealing with any medical condition. It's evidence like this that we are coming across from talking with many doctors, with veterans.

We understood that many of them were, in their situation, finding their lives improved. We get that. This was no easy decision that we made, but we felt we had to do it.

We feel we have allowed for some flexibility. Of course, we will reimburse. Remember that Veterans Affairs Canada is a reimbursing of marijuana. People can get medicinal marijuana, should they choose, from various licensed producers across this country. Right now we will only pay for three grams, and only when you go to your physician.

We've understood that treating everyone the same is not always going to be effective, so we've allowed some flexibility in the program. If you go to a specialist and they affirm your diagnosis and affirm that cannabis is a valid treatment for it, and they've looked at your medical file and agree with your physician that this is where you should go, then there is that ability for us to reimburse for more.

We felt that this was necessary. You have to remember that the health and wellness of veterans and their families is at the core of what we do, and our policy decisions are driven toward that end. In our view, this policy fits with that mandate, full stop.

**Mrs. Alaina Lockhart:** Thank you, Minister.

When we've been studying mental health, one of the things we've been talking about that ties into this as well is research on marijuana use when it comes to mental health treatment and PTSD. Is that an area that you anticipate...? Is there some way that VAC can contribute to research in the future for all of these items?

**Hon. Kent Hehr:** I think that's an excellent question.

One thing we're going to be moving ahead on is having a centre of excellence for mental health and PTSD. We envision a large component of that being dedicated for research to understand the best practices out there and allow us to get people help in regard to mental health. There is no doubt that is a growing issue for us at Veterans Affairs Canada.

I'm also very proud of an organization called CIMVHR. I forgot the acronym. Can you help with that?

• (1630)

**Gen Walter Natynczyk:** The Canadian Institute for Military and Veteran Health Research.

**Hon. Kent Hehr:** Very good, General.

It's where our university systems have tied into researching this area. There's a long history of funneling in information and of getting people moving the needle forward on veterans' issues. We have a strong partnership with them. In fact, before I make some stuff up and get myself in trouble, General, would you fill in the details here?

**The Chair:** Sorry, Minister. Thank you. I have to move on to the next round.

**Hon. Kent Hehr:** Okay, good, but it's a very good program.

**The Chair:** Mr. Kitchen, you have five minutes.

**Mr. Robert Kitchen (Souris—Moose Mountain, CPC):** Thank you, Mr. Chair.

Minister and General, thank you both for being back with us here today.

I'd like to go back to medical marijuana. How much are you anticipating saving with the changes that you've made?

**Hon. Kent Hehr:** I'm frankly not sure. I didn't factor any of that into my calculations. You'd have to look at.... I don't even know if we have any calculations on that.

**Gen Walter Natynczyk:** Sir, if I may, from our perspective this is an issue, as the Minister said, about wellness, about well-being, about the medical professionals' advice that anything north of three grams may not be in the best interests of the veteran, so this was not costed in terms of what we foresaw with regard to cost savings because this is not about the money. This is about wellness.

**Mr. Robert Kitchen:** That's what we've heard from a lot of our witnesses in our studies. A lot of the witnesses have said to us something along the lines of it being in the best interests of their families and of the veterans, and we found that a lot of these witnesses have told us that the use of marijuana has actually given them back some functionality in their lives, has reduced their heavy opioid use over the years and minimized the number of medications that they have to take. Would you not agree, then, that we should be doing a study on medical marijuana?

**Hon. Kent Hehr:** Well, I'll talk about the policy as we implement it.

Because of the information we had from meeting with the medical experts and the veterans, we believe that we've come up with a flexible policy that allows us to keep people safe as well as allowing for flexibility if they want to go to a specialist or want to get what they believe is in their best interest.

In terms of research, I believe it's something we are looking into. It's something that people at CIMVHR and other organizations out there are doing, and I believe we have an obligation as a department to keep track of this emerging research to see where it goes.

Do you have anything to add?

**Gen Walter Natynczyk:** I'd just like to add that when the minister spoke at the CIMVHR conference in Vancouver in November, he tasked the department, in partnership with the Canadian Armed Forces, to conduct the research to again look at best practices with regard to the merits and the details of using marijuana for medical purposes.

**Mr. Robert Kitchen:** Right, but what I'm talking about is more along the lines of actually doing an efficacy study. I'm not talking about talking to people. I'm talking about doing an actual study, a good research study. Would you not agree that it should be done?

**Hon. Kent Hehr:** I think this is an emerging field where we need much more information—

**Mr. Robert Kitchen:** We need more information on it, so do you not agree that we as a committee here should be accessing that information so that we can provide a better outcome and service to our veterans?

**Hon. Kent Hehr:** It's probably something to take under advisement.

**Mr. Robert Kitchen:** Mr. Chair, I'd like to move a motion, if I can. We have before us a notice of motion:

That the committee undertake a study of no more than six meetings on the implications to Canadian veterans' mental health following the reduction of the daily limit of medical marijuana through the medical marijuana program administered by Veterans Affairs Canada.

**The Chair:** It's on the floor.

**Mr. Colin Fraser:** Mr. Chair, I move that we now adjourn debate on that. We have the minister before us to answer our questions, and before debating this motion and taking it into consideration, I believe it would be better to adjourn debate on it and finish up with the minister.

• (1635)

**The Chair:** This will be a vote on adjourning the debate.

**Mr. Robert Kitchen:** Mr. Chair, I would ask that we have a recorded vote.

**The Chair:** Okay.

(Motion agreed to: yeas 6; nays 3)

**The Chair:** The motion is carried.

We stopped the clock. You have about a minute and a half left.

**Mr. Robert Kitchen:** Minister, I have a question for you on the increase of \$1 billion mentioned in the report in front of us. Can you tell us how many veterans have come forward this year to access the services?

**Hon. Kent Hehr:** If you look at our numbers, primarily our \$1 billion.... We saw a 19% increase in the number of disability benefit claims that came into our office. That's a good thing. It means more people are coming in to get the help they need when they need it.

We've also had an increase in the number of claims that have been rolled through our department. People have actually received the services they applied for, and we're very happy with the direction we're moving on that.

**Mr. Robert Kitchen:** Are you privy to tell us the comparison between the year before and this one?

**Hon. Kent Hehr:** It's about 19%, but I'll give that to the General.

**Gen Walter Natynczyk:** Sorry, I don't have that particular detail. I've got year-by-year in terms of releases from the Canadian Armed Forces, but when I put it through folks who've come in after their release, I don't have that data point, so we'll have to come back to you.

**The Chair:** Thank you for getting that back to us.

Go ahead, Ms. Mathysen, for three minutes.

**Ms. Irene Mathysen:** I want to get back to the issue of veterans and jobs. When veterans remain in the reserves but they're not on the government payroll, the Canadian government claims their intellectual property right. That makes it very difficult for them to find work in their field, because their particular expertise is being taken by the government.

Have you looked into this policy, and are you willing to address this problem?

**Hon. Kent Hehr:** First, reserves are more under the purview of the Department of National Defence, but we are working on a whole host of issues in closing the seam and looking at the whole host of people who are involved in our military apparatus and how they transition out.

To your exact question, I've heard this from time to time. I'm certain it's been brought up by reserves. It's something to consider in the mix when we continue to go forward and close the seam with General Vance to make sure we professionalize the release service to make sure people are getting the supports they need.

**Gen Walter Natynczyk:** I have nothing to add.

**Ms. Irene Mathysen:** It seems only fair that these reservists have access to their own intellectual property.

The DND ombudsman has suggested a concierge service to ensure those being medically released are helped through the process—pension services, medical needs—because we're hearing from some veterans that it can be overwhelming.

What is your response to that? Is this something you'd be prepared to look at?

**Hon. Kent Hehr:** I appreciate the ombudsman's report and I always review it with vigour. He and our Veterans Ombudsman are hearing what people are saying about the issue. I know the gap between National Defence and Veterans Affairs can and must be closed. We are working with Minister Sajjan and CDS Vance to ensure, as I said earlier, that release is professionalized.

We want to ensure that when men and women who have served in our Canadian Armed Forces leave, they have their pension, they're good to go, and they have a place to live. We want to ensure they're going to find their new normal and know how they're going to access, if necessary, Veterans Affairs services, so that they're not struggling for five or 10 years before they come in our door. They will know right away that we're out there, that we can help and get them the services they need.

• (1640)

**Gen Walter Natynczyk:** If I can just add, as the minister indicated in his opening comment, the department has gone through a service delivery review, and a key part of it is ensuring that the department is helping each and every one of those veterans, as

they're transitioning out, to begin that process earlier in their release process. Currently it's at six months before they're released. We're trying to go even earlier, working side by side with the Canadian Armed Forces case managers, so that when these people leave the Canadian Armed Forces, they are settled on where they want to live, and if they can find a job, we do our utmost to find them a job, try to find a doctor, and so on and so forth.

It's all of that. Actually, we've been using the term “concierge” as a goal. We've got some ways to go, because again, we're seeing about 5,000 to 6,000 members of the Canadian Armed Forces leaving the force each and every year. We're trying to tailor a package for every one of them based upon their specific individual and family needs.

**The Chair:** Thank you.

That ends our day of testimony with this panel. On behalf of the committee, I'd like to thank both the minister and the deputy minister for showing up here today.

I want to add a comment about hiring veterans, and I encourage all members to do so. I have hired one from my riding in the Bay of Quinte, and this person is a very hard worker and well trained. General, and thank you for that.

**Gen Walter Natynczyk:** Thank you.

**The Chair:** We will break for a minute, and we'll bring the next—

**Hon. Kent Hehr:** I'd like to thank everyone on the committee for their hard work, their focus, and their efforts on behalf of Canadian veterans. It really means a lot.

**The Chair:** We'll adjourn for a couple of minutes.

• (1640)

\_\_\_\_\_ (Pause) \_\_\_\_\_

• (1645)

**The Chair:** We'll come back to order.

We have votes at 5:30 p.m. and we need to have a couple of votes here at the end of the meeting for the main and supplementary estimates, so we're going to have to go with probably just one round of questioning.

Our witnesses are here. From the Department of Veterans Affairs, we have with us Elizabeth Stuart, assistant deputy minister, chief financial officer, corporate services branch; Michel Doiron, assistant deputy minister, service delivery; and Bernard Butler, assistant deputy minister, strategic policy and commemoration.

You guys aren't here to present formally, I guess, so we can start our first round.

Go ahead, Mr. Brassard.

**Mr. John Brassard:** Thank you, Mr. Chair.

I have a real treat for you, Mr. Doiron. Thanks to you for coming back, and thanks to Ms. Stuart and Mr. Butler.

I have some questions from some veterans. Specifically, I have four questions here, but if I may, Mr. Chair, I will share a bit of my time with Ms. Wagantall.

How much time do I have?

• (1650)

**The Chair:** You have six minutes.

**Mr. John Brassard:** Okay. Can you give me notice at the four-minute mark?

Here's one of these questions that need to be asked. You can open nine offices and hire 400 staff, but what is the approval rate for the applications for benefits?

**Mr. Michel Doiron (Assistant Deputy Minister, Service Delivery, Department of Veterans Affairs):** We are running in the mid-80s right now in the approval rate on first applications.

**Mr. John Brassard:** The mid-80s...?

**Mr. Michel Doiron:** If you're talking about mental health or PTSD, we're actually running at about 94%. It would depend on the exact...but the average for all is in the mid-80s.

**Mr. John Brassard:** The next question is, what is the feedback cycle from veterans regarding services and benefits?

**Mr. Michel Doiron:** That's a loaded question, sir.

**Mr. John Brassard:** It's from a veteran, Mr. Doiron.

**Mr. Michel Doiron:** Okay—

**Mr. John Brassard:** You can expect it to be loaded.

**Voices:** Oh, oh!

**Mr. Michel Doiron:** Yes, sir.

It would all depend on which services we're talking about. If you're talking about our adjudicative services, the comments we get back are that they're too long and we need too much information. As part of the service delivery review and some other things we're doing, we're trying to facilitate that, to de-medicalize the process and make it a bit easier. Notwithstanding the fact that we're doing it with an approval rate in the mid-80s, the forms are too complicated and the process is too complicated.

If you're talking about case management, we get very positive comments back, but those are mostly in terms of the ill and injured. That's more of a hand-holding, more of a partnership, with the veteran. It would depend on what services we're talking about.

That said, though, we don't hear a lot from the silent majority, so we are in the process of doing a survey with veterans to actually go out and solicit their views on Veterans Affairs. We're hoping to have the results of that at some point in April.

**Mr. John Brassard:** The next question is about case managers sending the applications to Charlottetown, adding time and bureaucracy to the process. Is there any intent or thought being given to letting case managers approve benefit applications to save time?

**Mr. Michel Doiron:** Not for the case managers themselves, but we are looking at whether we can move some of that decision-making closer to the veteran at a different level. That's not with the case managers themselves, but with some of our veterans service agents, or by having some disability benefit agents in the offices across the country who could do that on site much faster.

**Mr. John Brassard:** This is the last question.

How much time do I have, Mr. Chair?

**The Chair:** You have about three and a half minutes.

**Mr. John Brassard:** In terms of the appeal board, why aren't the appeal board decisions communicated to VAC so that those decisions are followed at VAC?

**Mr. Michel Doiron:** You mean from VRAB, right?

**Mr. John Brassard:** Yes, the Veterans Review and Appeal Board. I'm sorry. I tried to shorten my question due to the time.

**Mr. Michel Doiron:** That's fine.

We do receive some information from VRAB and we do work with them to see if there are trends, so that if they're reversing something that we're doing systematically, we can adjust. If it's going to go to VRAB and be overturned every time, we might as well look at what's happening at the front end. That we are doing, but we don't receive the individual rulings. They are sent to the veteran. It's personal information.

**Mr. John Brassard:** To go to my question, when General Natynczyk was here back in December, he mentioned the hiring of short-term employees because of the increase in the file workload. We're starting to see that through these supplementary estimates. What number of short-term employees has VAC hired? How many are actually working on caseloads? Do you have that information in front of you?

**Mr. Michel Doiron:** I'll provide you with that information.

**Mr. John Brassard:** Okay.

**Mr. Michel Doiron:** I don't have that. You mean terms and casuals? I do have a breakdown, but I don't have it here. I'll provide that.

**Mr. John Brassard:** Okay.

I'm going to cede my time to Ms. Wagantall.

**Mrs. Cathay Wagantall:** Thank you so much.

I'd like to talk about Saskatoon again just a bit. I understand that 400 new positions have been created; 381 have been filled, and 113 of those are case managers. That means there are 19 positions left to hit 400. In Saskatchewan, the indication is that there's a potential caseload of 2,900 veterans, and to date we have one case manager. We would need 115 more.

My question is, since a significant number of those 400 were in the queue already under the previous minister, is this government prepared to continue to hire past that 400 to make sure that the 25:1 —

**Mr. Michel Doiron:** Mr. Chair, I think I'm going to correct something in that. Yes, there are 2,900 veterans, but the 25:1 is for case management.

**Mrs. Cathay Wagantall:** Okay, so it's the harder and more difficult....

**Mr. Michel Doiron:** It's the harder cases. Also, in Saskatoon, presently we have five case-managed veterans.

• (1655)

**Mrs. Cathay Wagantall:** Okay.

**Mr. Michel Doiron:** That's why there are not 100 case managers in Saskatoon. It's the same thing for every office. We can pick the number. The other veterans are handled by our veterans service agents, who carry a much bigger load because it's not the same service.

**Mrs. Cathay Wagantall:** Yes.

**Mr. Michel Doiron:** Somebody may be on VIP and get a call once a year. That's the veterans independence program.

Let's say there's an issue—

**Mrs. Cathay Wagantall:** Okay, that makes sense.

How many of those are situated in Saskatoon?

**Mr. Michel Doiron:** We have one case manager. We're ready. If there's a demand, we will increase that. We have six employees, total, in Saskatoon.

**Mrs. Cathay Wagantall:** Thank you.

**Mr. Michel Doiron:** Also, I think we're fully staffed at the moment in Saskatoon.

**Mrs. Cathay Wagantall:** Thank you. That's my question.

**The Chair:** Okay. Mr. Graham is next.

**Mr. David de Burgh Graham (Laurentides—Labelle, Lib.):** Thank you.

I have a variety of questions. I'm fairly new to this committee. Minister Hehr talked about 381 new hires, and Mr. Brassard broached this a little bit. Do we know how many of those are veterans, and do we have a breakdown of their rank at retirement? I'm curious to know if we have a lot of enlisted personnel, or if it's mainly admirals and generals who are getting these jobs.

**Mr. Michel Doiron:** I don't have the number of the 381 who are veterans. We can get that. We have the total number of veterans in Veterans Affairs. When it comes to rank, though, we hire them at all levels. We have senior officers, like the rear admiral or the general here. We also have a lot of corporals, sergeants, and junior and senior NCOs with various skill sets. They're all over the organization.

As an example, in my adjudication unit I have a fair number of corporals and sergeants who do adjudications. They were nurses or medics in the armed forces, and often they are officers, but they're not all officers. We hire nurses or medics if they have the qualification.

I can try to get you the number of the people we've hired, because I don't have the breakdown of the 381.

**Mr. David de Burgh Graham:** As to the 381, I'm curious if there's a bias towards certain skill sets and ranks or if it really does cover everybody.

**Mr. Michel Doiron:** We do have the number of total hires. Do you want to...?

**Rear-Admiral (Retired) Elizabeth Stuart (Assistant Deputy Minister, Chief Financial Officer and Corporate Services, Department of Veterans Affairs):** Thank you, Mr. Chair.

As a follow-on to the statement made earlier by the deputy minister regarding the veterans in the public service hiring unit, we've stood up a team in late November and early December. It's

very small at the moment, but we have a phased approach to improve the hiring of veterans in the public service. The phased approach looks to Veterans Affairs Canada being a role model, first and foremost. Obviously DND is very experienced, because the Canadian Armed Forces and National Defence work in an integrated fashion.

We are seeking in the next phase to have a positive effect on hiring throughout the entire public service and then to branch out into industry. Also, we know there are a lot of not-for-profits and organizations that are already assisting in this manner.

Since the coming into force of Bill C-27, the Veterans Hiring Act, we have seen some take-up by priority veterans who have been medically released, either for reasons attributable to service or reasons not attributable to service. The Public Service Commission has a mandate to collect data on those veterans, but to date there is no mandatory reporting of hires in the public service who are veterans. For example, at Veterans Affairs Canada we have sent every new employee a voluntary survey. It's still not mandatory to self-identify as a veteran, and I would imagine that some veterans may not wish to do so, but it has improved our reporting.

I can give you some statistics. From the coming into force of the Veterans Hiring Act on July 1, 2015, we had 315 priority hires in the public service, 18 of them within Veterans Affairs Canada. The total of veterans employed at VAC who have self-identified through our survey currently is 115.

We are working with the Public Service Commission to try to improve our ability to collect data on veterans, and we have sent a letter asking to have a question regarding military service added to the public service employee survey.

We're working on several venues, and we haven't finished our work by any means as yet.

• (1700)

**Mr. David de Burgh Graham:** I got into this committee right in the middle of our study on veterans' suicides. That's all we've discussed until today, so I've learned quite a lot in a very short period of time.

One of the threads that I've seen is a loss of confidence in Veterans Affairs by veterans over the past decade. I'll call it that. We've seen a lot of damage caused by huge cuts by the previous government. What we're finding is that the veterans don't care about the parties; it's that they don't have confidence in the service anymore. It's not just about money.

How do we more broadly rebuild that confidence with the veterans? What steps do we need to take, and what's the path to get there?

**Mr. Michel Doiron:** Sir, we have a long way to go to rebuild that trust. We're doing a lot of stuff presently. We have stakeholder summits where we bring in veterans or our various advisory committees. We're spending a lot more time.

Some of us chair some of the advisory committees that have more interaction with veterans. It's having more open communication with veterans and trying to explain what's behind the decisions. Sometimes the right answer is no. It is unfortunate, but it is the answer. Then it's explaining why it's no and trying to make it understandable to the veteran.

We have a long way to go, because over the years—and you will excuse me if I don't get into politics, being a bureaucrat—for all kinds of reasons, when it comes to services, that trust has eroded. We're working very hard.

There was a question about training. We give a lot of training to our new employees. We're hiring. We're spending a lot of time in training those 381 new employees to bring care, compassion, and respect.

You have to remember that Veterans Affairs is not—

I'm being told to stop.

**The Chair:** Thank you.

Ms. Mathysen is next.

**Ms. Irene Mathysen:** Thank you very much. Welcome back.

I want to begin with you, Mr. Doiron. The last time you were here I asked you about military sexual assault. You said:

We've been working very closely with "It's Just 700" and we take this extremely seriously. We're talking to them so our adjudicators have a better understanding of sexual trauma. Our doctors are very well aware, and we're working with them to put something on our website.

We've heard testimony from other organizations, quite recently actually, and they said that they haven't heard anything in months. I'm wondering whether you are going to create space on the VAC website with clear links and information for veterans with military sexual trauma.

**Mr. Michel Doiron:** Thank you for the question, Mr. Chair.

First, we have been talking to the associations. I can't tell you if my director general of adjudications spoke in the last month, but in 2017 I was debriefed on a conversation he had with one of the associations, so there are some conversations going on.

We have trained our adjudicators on sexual trauma. We don't get a diagnostic for sexual trauma. We get a diagnostic for mental health. We get a diagnostic sometimes for a physical injury. Most times it's a mental health injury. We have trained our adjudicators to recognize it and to actually escalate it when there's any doubt, to make sure that we are properly covering it.

I think it was December when I was here, but since then I know we've overturned or actually looked at some pretty controversial and difficult cases. I don't want to get into them because they're personal, but they were very difficult cases.

As for the website, I'm not aware. I know we were working to put some stuff up, but I don't know if it's up or not. I'll have to check that, but I'm not sure.

The space we will put up will just say that it is something we are looking at or something that you can apply for, but you can't apply for military sexual trauma. It's not a condition. The condition they get is a mental health condition or a physical injury. There are a lot of different injuries. From working with the chair of It's Just 700, we have been educated quite a lot on what some of the psychologists and psychiatrists out there are actually diagnosing, which we did not know. We're actually working closely with them to address some of this.

**Ms. Irene Mathysen:** I'd like to know exactly what is going on when you determine that, because it seems to me that a veteran knows if he or she has been sexually assaulted and understands that yes, this is an injury, but that veteran needs to find out where to get help. If that website is the conduit, then he or she needs to be able to use it in an effective way.

I'll go to my next question. I was talking to veterans over the weekend, and they talked about still feeling very vulnerable in regard to their financial needs and this whole issue of denial. Just receiving a letter from Veterans Affairs can trigger post-traumatic stress.

In terms of repairing that broken relationship, how are you improving communications in terms of those managers? We have to do better in terms of how we deal with these individuals. Is that getting down to the rank and file and those people who are directly involved with veterans?

• (1705)

**Mr. Michel Doiron:** We can always do better. I think I'll start there. It doesn't matter that we're approving them in the mid- to high-80s, we can always do better.

Before we say no in adjudications, we do call the individual to ask if there's anything else they can provide us. Sometimes they have the documents and they didn't send them. They didn't think it was important, but as for the "no" letter, we know about the envelope syndrome, that receiving an envelope from the Government of Canada is for some people traumatic. It's not just an envelope from Veterans Affairs, but from income tax or anywhere else, so we are working and have worked closely with the ombudsman's office to try to simplify our letters.

I have to say that although they're better, I don't think we're there. We still have to do some work on that. As I said earlier, sometimes the right answer is no, because it's not related to service. We do have to comply with the act that we are given to administer. There are some traumatic stories out there, and I see them, but the reality is that if it was not caused by your military service.... The veterans affairs act says it's supposed to....



We've changed in the last three years, giving the benefit of the doubt to the veteran now. We've changed that. When I arrived a little bit more than three years ago, you had to prove it was caused by service. You had to give us your CF 98 that said you had been injured. We've now moved on that. Do we always get it right? No, but I think we've gone a long way, so that now, if you're in certain trades, if your knees are gone and you're an infantry person and you've served 25 years and you come to us, it would be a yes. You may not have blown your knee in one jump, but over 25 years of humping who knows how many miles, the joints are gone.

We're working on that, but there are still some "no" letters that go out, and they're traumatic for the individuals.

**The Chair:** Thank you.

Ms. Lockhart is next.

**Mrs. Alaina Lockhart:** Thank you, Mr. Chair, and thank you all for appearing today.

In the context of looking at the main estimates, under operating expenditures there's an increase of \$60.3 million. We've done a service delivery report, which I assume you've seen. Is there anything concrete that has happened from a service delivery standpoint, either resulting from that report or work that you're doing? I know you've just mentioned a few things, but are there other things that might be reflected in that dollar amount? Perhaps this isn't something that needed additional budget.

**Mr. Michel Doiron:** Thank you for your report. Yes, I have read your report very closely, and we're providing a government response to it, but I was quite pleased, as I said last time, with what was in the report. ACVA has always given us some good direction over the years in their reports, and we actually use them sometimes to change the rules or the laws.

We are continuously working on change. The deputy and the minister talked about the service delivery review, which we did at the same time you were doing your review. It just happened that way. We are implementing the service delivery review, which is all about improving services, improving the communication, being more veteran-centric. Those are all points that you raised in your recommendations, so we're doing the same thing.

As for the \$63 million itself, maybe the admiral would like to speak.

**RAdm Elizabeth Stuart:** Yes, I'd be delighted. Thank you, Mr. Chair.

Our vote 1 operating expenditures, as they are contained in the main estimates for the next fiscal year, consist of the following increases: \$13.5 million in regular operating expenses for the department; other health purchase services increasing by \$60.9 million, for things such as glasses, nursing services, medical and dental treatment, long-term care, and prescriptions reimbursement; and new Veterans Charter support services increasing by \$13.5 million, mainly for vocational and medical rehab issues. We have a decrease in Ste. Anne's Hospital, given the transfer of jurisdiction for the hospital last year from the federal government to the Province of Quebec, and a bit of a decrease, \$2.6 million, in the education centre at Vimy, because we've largely completed what needed to be done.

The net of all of those is a \$61.4 million increase from the main estimates of last year.

• (1710)

**Mrs. Alaina Lockhart:** Thank you.

One of the other things we're hearing about is support for families. I'm wondering if you can talk to us about any changes or improvements in our service to families.

**Mr. Michel Doiron:** Yes, we also hear about supports for families, and unfortunately the way the act is construed is that the services for the most part come through the veteran, and we have to comply with the act. However, that said, we had the pilot on the MFRCs—

**Mr. Bernard Butler (Assistant Deputy Minister, Strategic Policy and Commemoration, Department of Veterans Affairs):** Those are the military family resource centres.

**Mr. Michel Doiron:**—military family resource centres, which we're piloting across the country and where veterans and their families can go and receive certain services. We have our 1-800 helpline that a family member or a veteran can call. They can receive up to 20 sessions, because we know that when the veteran suffers, the family suffers. It's okay to bring them to an OSI clinic, but some veterans will not invite—if I can use that term—the spouse. They can go, or a kid.... I was talking to one veteran not too long ago whose child had some trauma because of the parent's trauma. We do have some programming.

The family caregiver relief program is another one that was put out a couple of years ago to give a caregiver some respite. It's not a huge amount, but it gives them some respite to help them take some time off if they're always taking care of the family. I think we have a lot more to do on the family side, but it is in all our conversations because we know that if you can help the family, you're also helping the member.

**Mrs. Alaina Lockhart:** One of the other items that has come up from our testimony is the practice of reimbursing families for third party services. Is that something that's being looked at? It's been stated as being a barrier for families.

**Mr. Michel Doiron:** Do you want to take that one?

**Mr. Bernard Butler:** I'm sorry; it's for reimbursement for what type of service?

**Mrs. Alaina Lockhart:** It's for third party services. It's perhaps an equestrian camp or something like that. It's services provided by a third party.

**Mr. Bernard Butler:** Mr. Chair, thank you for the question. I can speak to the issue generally around those types of ancillary support programs.

As you probably know, we have pilots going on in equine therapy, looking at dog therapy, and certain things like that as they become more robust in terms of formal decisions on where we're going with them. As Michel indicated, our whole approach right now is to try to tailor all of our programs in way that is more veteran-centric, as opposed to being program-based.

From a program point of view, it's sometimes much easier to do things with a contribution arrangement, insisting on receipts and a lot of invoices. This new approach that we're looking at is trying to convert as many programs as we can to grant-based programs, which would be beneficial both to veterans and to families. The whole idea is to try to streamline our approach, to reduce the administrative burden on veterans and families, and then to try to ensure that access to them is quicker, more effective, and less troublesome for them.

**Mrs. Alaina Lockhart:** I'm happy to hear that. Thank you very much.

**The Chair:** Thank you. That ends this round of questioning. I would like to thank you for appearing today and for all the great things you do for our men and women.

With that, I'm going to have to have some votes on the estimates. We're just going to keep going, as we're short on time.

First we'll vote on the supplementary estimates (C), 2016-17:

VETERANS AFFAIRS

Vote 1c—Operating expenditures.....\$65,448,828

Vote 5c—Grants and contributions.....\$69,400,000

(Votes 1c and 5c agreed to)

**The Chair:** Shall the chair report votes 1c and 5c under Veterans Affairs of supplementary estimates (C), 2016-17 to the House?

**Some hon. members:** Agreed.

**The Chair:** Now we'll vote on the main estimates, 2017-18.

VETERANS AFFAIRS

Vote 1—Operating expenditures.....\$931,958,962

Vote 5—Grants and contributions.....\$3,728,239,000

(Votes 1 and 5 agreed to)

VETERANS REVIEW AND APPEAL BOARD

Vote 1—Program expenditures.....\$9,449,156

(Vote 1 agreed to)

**The Chair:** Shall the chair report votes 1 and 5 under Veterans Affairs and vote 1 under Veterans Review and Appeal Board of the main estimates, 2017-18 to the House?

**Some hon. members:** Agreed.

**The Chair:** Thank you.

I have a motion to adjourn from Mr. Bratina. All in favour?

**Some hon. members:** Agreed.

**The Chair:** Thank you very much. The meeting is adjourned.







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