

**Government Response to the Standing Committee on Veterans Affairs Eleventh Report
New Contract For The Administration Of Veterans Affairs Canada's Rehabilitation Program**

The Government of Canada (Government) welcomes the opportunity to respond to recommendations made in the eleventh report of the Standing Committee on Veterans Affairs (ACVA). The Government would like to thank both ACVA, for this report, as well as the witnesses who appeared before ACVA.

The Government is pleased to provide a response to ACVA's recommendations, and highlight the significant efforts that have already been made, and that continue to be made, by the Government to address the concerns.

VAC is committed to the well-being of Veterans. The Rehabilitation Program is specifically designed to support Veterans as they transition from service to post-service life. VAC has contracted services to support Veterans' rehabilitation needs with professionally regulated external providers since the program began in 2006. With the new contract rehabilitation service specialists and rehabilitation service professionals provide appropriate rehabilitation services to Veterans and their families, as they transition, while ensuring continuity of care as they are referred to PCVRS.

In the context of this Government Response, "participant" means "a Veteran or Spouse/Common Law partner or Survivor who meet specific program eligibility participating in VAC's Rehabilitation Program".

ACVA Recommendation 1

That Veterans Affairs Canada (VAC) directly inform Veterans participating in the rehabilitation program about the changes resulting from the new contract to their relationship with their case manager and the health professionals who will be providing them with services, and that a letter explaining the changes be sent to the participants.

Government Response

The Government agrees with this recommendation.

VAC directly informed Veterans and their families participating in the Rehabilitation Program about the changes resulting from the new Rehabilitation Program contract with Partners in Canadian Veterans Rehabilitation Services (PCVRS). A multi-pronged communication and change management strategy was implemented to support Veterans and those supporting them through the migration process. This included direct case management contact, participant letters, e-newsletter website articles, interactive voice response (IVR) messages for participants calling the 1-800 line, video broadcast at Service Canada locations nationally, targeted social media and MyVACAccount messaging.

Three letters were distributed to Veterans at various stages of the process to explain the service delivery changes, how participants would continue to work with their VAC case

managers and provide confirmation they could retain any existing rehabilitation professionals, if desired to support continuity of care.

The first letter was sent to participants in August 2022 from Veterans Affairs Canada to advise of the upcoming service delivery changes. In early October 2022, a second letter was sent to participants accessing vocational services from Canadian Veterans Vocational Rehabilitation Services (CVVRS), advising the contract with CVVRS was ending and to advise PCVRS was the new incoming national medical, psycho-social and vocational rehabilitation contractor. A third letter from PCVRS was sent to all Rehabilitation Program participants beginning late October through November 2022 to introduce PCVRS and provide additional migration process details/expectations.

From October 2021 through August 2023, six articles were published in VAC's monthly Veteran e-newsletter Salute and one article on the VAC Website. Articles explained the updates to the service delivery and contract. As well, they included requests for Veterans and their families to engage in the consultation strategy regarding the new contract, processes and communication approach.

As a result, across three separate periods January/February 2022, April/May 2022 and February/March 2023, three rounds of consultations with 67 Veterans and family members were conducted. The outcome of this consultation was used to inform the development of communication products, including the participant letters and participant migration process and guide. Case Managers contacted participants to support and prepare them for the migration process and answer any questions. As well, an electronic message was sent to participants through MyVACAccount informing them of the improvements, where they could find more information, directing them to both VAC and PCVRS websites where they could refer to Frequently Asked Questions, a Rehabilitation Program Participant Guide or contact the VAC toll free line or PCVRS User Support Call Centre.

Copies of the participant letters and articles, referred to above, are available upon request.

ACVA Recommendation 2

That Veterans Affairs Canada communicate regularly with the Union of Veterans Affairs Employees (UVAE) and that it consult the union before making changes to programs affecting the work of departmental employees.

Government Response

The Government agrees with this recommendation.

VAC communicated regularly with the UVAE regarding the procurement, contract award and implementation phases of the Rehabilitation Program contract implementation. VAC will continue to consult the Union before making changes to future programs affecting the work of departmental employees.

Union engagement leading to and post contract award is consistent. Prior to contract award, VAC's Assistant Deputy Minister of Service Delivery provided updates during the National Labour Management Consultation Committee Meetings in May and in October of 2020. Representatives of the UVAE were present and had the opportunity to ask questions during the meetings. As well, the Assistant Deputy Minister has a standing bi-weekly meeting with the National President of UVAE providing opportunity to engage in discussions regarding the contract and its impact on employees.

In September 2022, UVAE identified nine union members from across Canada (Case Managers and Veteran Services Team Managers) to participate in the three overarching Rehabilitation Services and Vocational Assistance Program (RSVP) cross-functional working groups and several sub-working groups. These UVAE members were included in cross-functional working groups established to guide decisions, consult and develop all materials required to implement the service delivery changes affecting the work of departmental employees. The project leaders facilitated working group sessions with the members and service designers which led to the development of all communication and training products as well as the workflow process and the innovative, integrated IT systems/portals in support of the new service delivery model.

VAC will continue to communicate regularly with the UVAE and various other unions of Veterans Affairs Employees (i.e. PIPSC, CAPE, etc.) and will consult the UVAE before making changes to programs affecting the work of departmental employees.

ACVA Recommendation 3

That Veterans Affairs acknowledge the lack of communication and consultation it had with Veterans and their families, Veterans Affairs employees and their union, and service providers regarding the PCVRS contract, and that it commit to properly consulting and communicating with them in the future.

Government Response

The Government disagrees with the recommendation to acknowledge the lack of communication and consultation, but agrees to commit to consulting and communicating in the future.

VAC acknowledges that ongoing communication and consultation is imperative for any program change of this scope and magnitude that impacts Veterans and their families, employees and stakeholders. Therefore VAC implemented a comprehensive internal and external communication strategy beginning in June 2019 which continues through the implementation process. The strategy included internal and external communications (e.g. VAC website, social media and contact center key messages, letters to veterans in the Rehabilitation program, town halls, questions and answers sessions, articles targeting VAC staff and Veterans, stakeholder information packages, service provider bulletins and social media messages and posts) to

announce, explain, expand knowledge and improve understanding of the service delivery changes.

To ensure a case management perspective was well represented in the re-contracting process, a Veteran Services Team Manager (VSTM) from the Field Operations Division at VAC was appointed RSVP Project Lead in May 2019. The project lead is a health professional field representative, UVAE union member with extensive case management, field operations management and military life experience.

In June 2019, at the beginning of the project, communications and consultations began with the posting of the Rehabilitation Services and Vocational Assistance Procurement Letter of Interest and an article to staff. Presentations were delivered regularly to all affected teams and units across the department. Immediately three working groups were established with subject matter experts within VAC including Case Managers, Health Professionals, Policy, Information Technology, Security, Service Delivery and Program Management, Information Management, and Privacy.

On November 8, 2019, a survey was provided to the Case Managers and VSTM working group representatives nationally appointed by the Director General of the Field Operations Division. Their input was included in the rehabilitation program contract requirements. Cross-functional working groups were established to provide input from various areas, to consult on the proposed service delivery changes and provide feedback related to any service delivery challenges they wanted improved.

Consultation/meetings occurred throughout the project with the Care and Support Advisory Group (CASAG) beginning in September 2020 whose membership includes Veterans, their families and advocates. Input was included in the rehabilitation program contract requirements.

As part of the procurement process, all feedback through internal and external cross functional engagement of subject matter experts, including ministerial advisory groups, was instrumental in the development of the request for proposal that outlined the contract requirements.

VAC directly informed Veterans and their families participating in the Rehabilitation Program about the changes resulting from the new Rehabilitation Program contract with Partners in Canadian Veterans Rehabilitation Services (PCVRS). Three letters were distributed to Veterans at various stages of the process to explain the service delivery changes, how participants would continue to work with their VAC case managers and provide confirmation they could retain any existing rehabilitation professionals, if desired to support continuity of care.

As noted in Recommendation 1, a first letter was sent to participants in August 2022 from Veterans Affairs Canada to advise of the upcoming service delivery changes. In early October 2022, a second letter was sent to participants accessing vocational services from Canadian Veterans Vocational Rehabilitation Services (CVVRS), advising the contract with CVVRS was

ending and to advise PCVRS was the new incoming national medical, psycho-social and vocational rehabilitation contractor. A third letter from PCVRS was sent to all Rehabilitation Program participants beginning late October through November 2022 to introduce PCVRS and provide additional migration process details/expectations.

In addition, a stakeholder engagement plan included three rounds of consultations with 67 Veterans and family members across three separate periods January/February 2022, April/May 2022 and February/March 2023. These consultations focused on gathering feedback regarding the new service delivery model experienced to date, the migration process and the communication products used.

Three separate provider bulletins targeting existing health professionals delivering rehabilitation services to Veterans and their families, were sent through Medavie Blue Cross August 2020, October 2022 and April 2023. These bulletins explained the upcoming service delivery changes and the potential impacts to existing service providers. Toll free numbers and email addresses were provided to have any of their questions/concerns answered.

As part of the Rehabilitation Services and Vocational Assistance Program (RSVP) training, VAC case managers, field operations staff and service delivery employees, were provided a *Migration to PCVRS Participant Guide, Migration Summary Form and User Guide*, example scenarios, a Migration Process Map as well as a video training module to support them in their conversations with participants leading up to and through the migration process.

Case Managers were provided four weeks advanced notice of planned weekly participant migrations to ensure they could adequately prepare participants for the process. As well, Case Managers were provided the flexibility to advance or delay the migration of a participant depending on the participant's status and/or needs. Case Managers and participants were provided a *Participant Guide* to help frame their discussions. The comprehensive *Participant Guide* includes information about participant's roles and responsibilities and those of the rehabilitation team. It also describes what to expect as participant's progress through the Rehabilitation Program. PCVRS developed a website to ensure Case Managers and participants were able to easily access and refer to the guide, learn about PCVRS, the services, resources and contact information.

Several Town Hall meetings and Question and Answer sessions were offered to employees prior to contract award and continue throughout the implementation phases of the contract.

Communication and consultation began in June 2019 during the contracting process, continues through the implementation phase of the project and during the operational phase. Veterans, case managers and stakeholders were consulted throughout the contracting process and into the transition to the new contract. These consultations were done through an online platform, advisory groups, and face-to-face meetings. All service providers were contacted to advise them about the changes as a result of the new rehabilitation contract. We will continue to consult and provide information on the feedback we received.

Copies of the participant letters, referred to above, are available upon request.

ACVA Recommendation 4

That the Minister of Veterans Affairs commit to meeting regularly with the Veterans, advocates, and experts who make up Ministerial Advisory Groups.

Government Response

The Government agrees with this recommendation.

Throughout all phases of the procurement and implementation phases of the project, VAC met regularly with Veterans, advocates and experts that make up Ministerial Advisory Groups.

In September, 2020, VAC delivered a presentation to Care and Support Advisory Group (CASAG) which included an overview of the objectives of the proposed contract. The potential positive service delivery impacts to Veterans and their families along with the decreased administrative burden on VAC case managers was highlighted. One month prior to the presentation, VAC provided the draft Request for Proposal to CASAG members who were invited to share feedback and provide questions before the presentation date. Thirty-seven comments and questions were received and answered by the project team during and after the presentation. The discussion focused on clarity and quality of service delivery, performance measurement, and advocacy for equitable and culturally inclusive access, particularly for Indigenous populations. This feedback was instrumental in the augmentation of the contract requirements contained in the Request for Proposal. Furthermore, throughout the Fall/Winter of 2022-2023, regular RSVP updates were provided to CASAG at monthly meetings.

In addition, representatives from the Canadian Armed Forces Transition Services attended a presentation delivered at the VAC National Health Professionals Conference in Ottawa on March 2020, as well as at several VAC Corporate Policy and Program Management Committee meetings. In May 2022 a presentation was given to Transition Services to outline the planned updates and outcome of the new contract.

Presentations and consultation has continued throughout contract implementation with the Mental Health Advisory Group on October 27, 2022, and Service Excellence and Transition Advisory Group on November 18, 2022. The Department has a standing offer to return upon request to provide further updates as project implementation is completed and the new service delivery model with PCVRS is operational.

Most recently, the project team presented to the Royal Canadian Legion (RCL) at the RCL Professional Development Meeting – *RSVP presentation* on March 29, 2023 (rescheduled from September 2022 due to Hurricane Fiona) and supported an ADM Stakeholder Brief on March 29, 2023. On March 8 2023, the project team presented to CAF Continuity of Care with DND Nurse Managers with another presentation to DND Case Managers on April 18, 2023.

ACVA Recommendation 5

That Veterans Affairs Canada acknowledge the gaps in its initial case managers communications strategy and immediately specify which of the case managers' responsibilities will be transferred to PCVRS' rehabilitation service specialists.

Government Response

The Government agrees in principle with this recommendation.

VAC acknowledges that there are different communication preferences in the workplace. The Department applied a change management strategy to support employees and participants in successfully adapting to the updates to how we deliver the Rehabilitation Services and Vocational Assistance Program. The change management methodology includes effective change leadership, communication, employee engagement, and training.

Throughout all phases of the Rehabilitation Program procurement and implementation phases from 2019 to present, VAC met and continues to meet regularly with VAC employees, including Case Managers to consult and gather feedback and recommendations on the proposed service delivery changes.

In 2019, an external public opinion study on the Rehabilitation Program was commissioned. The outcome determined a need for greater accountability for the Program by ensuring clear objectives and processes and well-defined outcomes, expectations and milestones for participants to measure their progress.

Beginning in July 2019, ongoing presentations to Field Operations Management Committee (FOMC) and Field Operations Committee (FOC) were delivered. Immediately, VAC Field Operations, Service Delivery and Operations cross-functional working groups were established. Case Manager and Veterans Services Team Manager representatives nationally were appointed by Director General Field Operations and UVAE.

On November 8, 2019, the project team solicited direct feedback from Case Managers and Veteran Service Team Managers (VSTMs) across the country to gather their input and insights to ensure the challenges they and their colleagues experienced were incorporated in the contract requirements. As representatives of their respective area offices, they indicated the following:

- they were spending too much time administering a dual contract model;
- they did not have enough time for direct client contact and case management;
- they needed improved tools and standardized reports;
- they wanted easy access to consult with interdisciplinary rehabilitation experts;
- they needed national consistency; and
- they wanted improved provider turn-around-times.

The representatives provided continual engagement within working groups, then shared what they learned in their area offices, gathered additional feedback and reported back to the working groups. This process was instrumental in the development of the service delivery changes, the workflow process including the innovative integrated IT systems and portals. This input was also instrumental in the development of all training and communication products.

An online communications channel within Microsoft Teams was created in September 2021 to offer all VAC staff, including CMs, easy access to all project documentation, updates and resources, including presentations, Q&As from all Open Houses, Town Halls, copies of email updates to staff, employee and veteran articles, letters to Veterans, bulletins to providers, job aids, business processes, system training, etc. The channel included a section for Myth Busters developed to provide additional clarity and updates on the progress of implementation.

Several Case Managers participated in user testing for the proposed system updates. Their feedback was incorporated in the IT changes to the existing case management system. This ensure connected systems were giving Case Managers access to service providers, reports and recommendations for timely approvals and decision making. These working groups were highly active from 2019 through to going live in late November 2022.

A project email address set up in 2019 for employees to contact the project team was re-purposed in August 2022 as a *Centre of Expertise (COE)*. The COE was implemented in tandem with the launch of the first round of migration training for Case Managers to ensure they had a avenue to ask questions to the project team as they supported participants through the process. The questions and responses were compiled and used to develop incremental communications products and shared by email or posted in the project Microsoft Teams Channel.

A VAC/PCVRS champion network was initiated in February 2023 to further support VAC Case Managers and PCVRS Rehabilitation Service Specialists in the migration, onboarding and updates to program service delivery. The network is comprised of Case Managers, Veteran Service Team Managers, Standard Training and Evaluation Officers, Case Manager Practice Consultants, Rehabilitation Service Specialists, PCVRS Team and Regional Managers, led by VAC Program Management staff and PCVRS Director of Service Delivery. The network collaborates to broaden the understanding of the service delivery changes, facilitate strategic support and communications within and between VAC and PCVRS, act as an advocate and agent of change and facilitate office level support to staff within their geographic area.

The role of VAC Case Managers has not changed and their role remains pivotal in the Rehabilitation Program. VAC Case Managers remain the delegated decision maker for all case management services including rehabilitation. The new contractor is responsible to provide the administration and delivery of comprehensive, coordinated, quality assured rehabilitation focused care to Veterans and their families. VAC Case Managers were never responsible to deliver rehabilitation services directly to Veterans, this service along with billing and invoicing was always contracted. The new contract brings efficiencies, streamlined processes, improved

performance measurement and quality assurance using innovation and technological advancements.

Case managers have identified that spending more time working directly with Veterans and their families is a priority for them. The new PCVRS national contract for rehabilitation and vocational services aims to reduce Case Managers' time spent on administrative tasks. The coordination of rehabilitation service providers, chasing down reports, scheduling appointments and the sharing of information within the team around the participant approach will be completed by PCVRS. Rehabilitation Service Specialists (RSSs) will coordinate rehabilitation assessments and interventions using a network of over 12,000 multilingual medical, psycho-social, and vocational providers across the country. The services and reports provided by Rehabilitation Service Providers (RSPs) will be standardized and quality assured to ensure VAC Case Managers have high-quality information they need in a timely manner to monitor and evaluate rehabilitation plans and support evidence-based decision-making for rehabilitation services.

ACVA Recommendation 6

That Veterans Affairs Canada hire more permanent case managers to limit the number of cases assigned to each case manager to a maximum of twenty five (25).

Government Response

The Government takes note of this recommendation.

The government is exploring options to ensure reasonable case managers caseload and high quality services to Veterans, and defining caseloads with indicators that would not limit it to a volume/ number of case ratio. The current average ratio is 30:1.

ACVA Recommendation 7

That Veterans Affairs Canada, given the importance of institutional knowledge, ensure that the conditions offered to providers registering with PCVRS will support the retention of health care professionals who have experience with the unique services provided to Veterans.

Government Response

The Government agrees with this recommendation.

The retention of health care professionals who have experience with the unique services provided to Veterans, especially those who specialize in rehabilitation is of utmost importance to VAC. Therefore the conditions offered to existing and new rehabilitation service professionals is paramount in ensuring a state of the art rehabilitation program, the goal of this new service delivery model. PCVRS offers providers many benefits including being part of a collaborative, interdisciplinary team and network of 900 locations and over 12,000 rehabilitation professionals across the county who will provide world class care that is

standardized and accessible. PCVRS provider experience includes on-going program and service delivery training, enhanced quality management, professional collaboration and support for billing and reporting with template consistency.

The comprehensive and complex migration process developed between VAC and PCVRS aims to ensure seamless migration without interruption to care. PCVRS will work with each participant who is attached to an existing provider at time of referral to support continuity of care and provide a team around the participant approach.

In addition, PCVRS is contracted to provide a network of rehabilitation service professionals committed to serving Veterans and their families with rehabilitation focused care, that is culturally sensitive, equitable and inclusive.

PCVRS has a comprehensive rehabilitation consultation and learning strategy that is committed to ongoing partnership with Atlas Institute for Veterans and their families and the Chronic Pain Centre of Excellence for Canadian Veterans, as well as ensuring vocational professionals are Certified Vocational Rehabilitation Professionals (CVRP).

ACVA Recommendation 8

That Veterans Affairs Canada specify the terms and conditions that will allow it to oversee how the rehabilitation program management contract is implemented and ensure the quality of services delivered by PCVRS and its providers.

Government Response

The Government agrees with this recommendation.

Measuring the effectiveness of our programs and services is imperative to ensure we are meeting the needs of Veterans. Under the previous dual contract service delivery model, medical and psycho-social rehabilitation services were delivered by thousands of providers, while vocational rehabilitation services were managed under a national contract, making it challenging to achieve a holistic rehabilitation program performance measurement and quality assurance framework. The new national contract consolidates medical, psycho-social and vocational rehabilitation service delivery under one contract, where VAC has specified the terms and conditions to oversee its implementation and operations to ensure quality services are provided.

Requirements under the new contract with PCVRS to provide medical, psycho-social and vocational services under one contract includes a comprehensive performance and quality assurance framework. New innovative reporting coupled with a comprehensive quality assurance management strategy provides VAC with concrete data to determine program outcomes are achieved, how participants feel about the service delivery, and if the contractor is achieving the prescribed service standards.

There are avenues for Veterans and their families to provide feedback on the quality of the services received in real-time at various points in the rehabilitation process. This provides VAC and PCVRS the opportunity to make timely ongoing improvements to the new service delivery model to meet the dynamic needs of Veterans and their families. PCVRS and VAC meet for an annual insights meeting to review all quality and incident reporting to identify trends and develop action plans on lessons learned and improvements to be made. Additionally, VAC Audit and Evaluation Division has scheduled an evaluation in fiscal 2024/2025 to determine if the anticipated service delivery efficiencies have been realized with the new contract.

ACVA Recommendation 9

That Veterans Affairs Canada provide the Committee with a comprehensive update on the impacts of the rehabilitation contract awarded to PCVRS on service delivery to Veterans by November 2023.

Government Response

The Government agrees with this recommendation.

VAC will be pleased to provide the Committee with a comprehensive update on the impacts of the rehabilitation contract awarded to PCVRS on service delivery to Veterans by November 2023.

ACVA Recommendation 10

That the Office of the Veterans Ombud be asked to publish a report in one year's time on the affects the contract has had on Veterans, VAC employees, and service providers.

Government Response

The Government agrees with this recommendation in principle.

The mandate of the Veterans Ombud office includes identifying and reviewing emerging and systemic issues related to programs and services provided or administered by the Department, or by third parties on the Department's behalf, that negatively impact VAC's clients (Veterans Ombud's Order in Council).

The Ombud does not have the authority to examine the effects of the contract on VAC employees and service providers.

The Veterans Ombud advises that her office has received only a few complaints concerning the new contract and has not found unfairness in those that have been reviewed. The majority were directed back to VAC for follow-up. Further, the Veterans Ombud has advised the department that she would be pleased to report on complaints received related to the rehabilitation contract as of June of 2024, following completion of its implementation.

The Ombud advises that she is keeping a close eye on the nature of complaints received and would initiate a systemic investigation if she determines that there is evidence of a systemic issue negatively impacting Veteran clients related to the implementation of the rehabilitation contract.