

The Department of Veterans' Affairs' communication with veterans making claims for compensation

January 2022

Report by the Acting Commonwealth Ombudsman,
Penny McKay, under the *Ombudsman Act 1976*

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EXECUTIVE SUMMARY

This report is the outcome of the Commonwealth Ombudsman’s own motion investigation into the Department of Veterans’ Affairs’ (DVA) communication with veterans who make claims for compensation for injuries and conditions related to their service. The investigation considered the appropriateness of DVA’s policy and procedural framework for communicating with veterans during the claim process.

DVA has been implementing a Veteran Centric Reform (VCR) program since 2017 to deliver on the Government’s vision for improved service delivery, person-centred design, and digital transformation. One of the main initiatives under the VCR program is to improve services for veterans and their families through better claims processing. Good communication with veterans is essential to this initiative. In particular, good communication through the provision of clear and regular information to veterans throughout the claim process can help to manage veterans’ expectations and reduce feelings of uncertainty, anxiety or frustration while waiting for their claim to be assessed.

The following principles of good public administration are broadly applicable to all Australian Government agencies:

- Agencies should clearly communicate to individuals who access their services what they should expect from the agency. For service delivery agencies, publishing expected or current average timeframes for completing certain administrative actions minimises uncertainty for individuals and may reduce complaints.
- Internal policies and procedures should support decision makers to make consistent and transparent decisions. Policies and procedures that set out how agencies should engage with individuals accessing their services should clearly and explicitly set out what information needs to be communicated to, or sought from, an individual to support effective service delivery.
- Agencies should ensure information and services are provided in a non-discriminatory accessible manner. This includes meeting digital service standards to ensure online government services are simple, clear and fast for all users.

Our investigation did not identify any significant concerns about DVA’s policy and procedural framework for managing communication with veterans during the claim process. We observed that DVA’s policy and procedural framework is relatively mature, and DVA is progressing several positive initiatives to further improve its approach to service delivery, including better communication with veterans throughout the claim process.

We acknowledge that DVA is currently implementing some initiatives as part of the VCR program and this is likely to further improve DVA’s approach to communicating with veterans. Notwithstanding this, we identified some opportunities for improvement and make 8 recommendations aimed at strengthening the accessibility and transparency of information available to veterans and the internal guidance available to support DVA’s decision makers.

RECOMMENDATION 1: PUBLISH TIMELINESS STANDARDS

We recommend DVA publish and update regularly, current average processing timeframes for claims under the *Veterans’ Entitlements Act 1986*, *Military Rehabilitation and Compensation Act 2004* and *Safety, Rehabilitation and Compensation (Defence-related claims) Act 1988*.

RECOMMENDATION 2: DIRECT VETERANS TO PUBLISHED TIMELINESS STANDARDS

We recommend DVA include in its acknowledgement letters to veterans, a statement advising that current average processing timeframes are published on its website.

RECOMMENDATION 3: REVIEW INFORMATION ON DVA WEBSITE

We recommend DVA introduce a policy requiring regular review of its webpage design and content about compensation claims to ensure information is published consistent with the Australian Government Digital Service Standards.

RECOMMENDATION 4: UPDATE INFORMATION REQUIRED IN ACKNOWLEDGMENT LETTERS

We recommend DVA update its Guidelines to include all information delegates should include in acknowledgement letters.

RECOMMENDATION 5: PUBLISH INFORMATION ABOUT GENERAL CLAIM PROCESS

We recommend DVA publish information that outlines the general steps involved in the claim process.

RECOMMENDATION 6: DEVELOP GUIDANCE TO ASSIST DECISION-MAKERS COMMUNICATING WITH VETERANS WITH UNALLOCATED CLAIMS

We recommend DVA develop guidance materials to assist its staff to communicate with veterans so they can identify and make decisions on claims that should be prioritised.

RECOMMENDATION 7: DEVELOP POLICY ABOUT FREQUENCY AND MODE OF CONTACT EXPECTED WITH VETERANS

We recommend DVA develop a policy to outline the frequency and mode of contact it requires delegates to have with veterans.

RECOMMENDATION 8: COMMUNICATE CONSEQUENCES OF NOT PROVIDING INFORMATION

We recommend DVA clearly outlines to veterans as early as possible, the potential consequences of not providing additional information.

Part 1: INTRODUCTION AND SCOPE OF INVESTIGATION

1.1. The Department of Veterans' Affairs (DVA) is responsible for delivering Australian Government programs for war veterans, serving and former serving members of the Australian Defence Force, the Australian Federal Police and their families.¹ DVA offers a range of support and services as part of these programs, including facilitating access to compensation, income support, rehabilitation, funded health care and other services to improve health and wellbeing outcomes for veterans and their families.²

1.2. In 2017, DVA commenced the Veteran Centric Reform (VCR) program to improve support to veterans, including facilitating easier and faster access to support and services. The 6-year reform program aims to achieve better service delivery to the veteran community through targeted changes to DVA's business processes and policies, and redevelopment of information and communications technology systems.³

1.3. DVA is in its fourth year of the VCR program and is reporting significant improvements to its service delivery approaches, including an updated agency website and the introduction of an online claim platform, MyService.⁴

1.4. DVA acknowledges while it is making progress to improve service delivery to veterans, more work is needed to give veterans and their families the support they need from DVA.⁵ In particular, DVA is prioritising improving the claim processing system and reducing waiting times for veterans and their families.⁶

1.5. In 2019–20 DVA reported a 15 percent increase in claims for compensation, on top of an 83 per cent increase in claims during 2018–19. DVA attributes the unprecedented volume of claims to 'the connection to and engagement with veterans and their families because of the success of the VCR'. The significant increase in claims is impacting DVA's ability to meet timeliness targets and created a backlog of claims yet to be processed.

The Ombudsman's role

1.6. Under Part IIA of the *Ombudsman Act 1976* (Ombudsman Act) the Ombudsman is also the Defence Force Ombudsman. The Ombudsman can investigate complaints about administrative actions of Australian Government departments and agencies, including DVA. The Ombudsman may also investigate, on their own motion, administrative actions of an Australian Government department or agency in the absence of a specific complaint.

1.7. This investigation was initiated by the Ombudsman on their own motion. This investigation recognises that DVA's VCR program and the effective delivery of services

¹ DVA (Department of Veterans' Affairs) (2019) [Our purpose | Department of Veterans' Affairs](#), accessed 24 August 2021

² DVA (Department of Veterans' Affairs) (2021) [Who we are | Department of Veterans' Affairs](#), accessed 20 September 2021

³ DVA (Department of Veterans' Affairs) (n.d.) [Veteran Centric Reform](#), accessed 17 June 2021

⁴ DVA (Department of Veterans' Affairs) (2020) [Department of Veterans' Affairs Annual Report 2019-20](#), accessed 17 June 2021

⁵ DVA (Department of Veterans' Affairs) (2021) [Securing the future of veteran welfare and support | Minister for Veterans' Affairs](#), accessed 20 August 2021

⁶ DVA (Department of Veterans' Affairs) (2021) [Veterans claims system to be overhauled | Minister for Veterans' Affairs](#), accessed 21 October 2021

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to veterans is of interest to both the public and the Parliament. This investigation aims to provide assurance over, and support improvements to, one specific aspect of these ongoing reforms – communication with veterans making claims for compensation.

Objective and scope

1.8. This investigation considers the appropriateness of DVA’s policy and procedural framework for communicating with veterans making a claim for compensation for injuries or health conditions related to their service.⁷ We also consider DVA’s approach to communicating with, and providing appropriate assistance to, at-risk veterans, which DVA defines as veterans who may be ‘seriously ill, vulnerable or at risk of self-harm or harm to others’.

1.9. To assess whether DVA’s procedural framework is appropriate, we examined the policies and procedures in place to support delegates to communicate with veterans at 3 points in the claim process: claim lodgement, claim assessment and claim outcome (see Figure 1). In this report, ‘delegates’ refers to the DVA staff responsible for assessing and making decisions about claims for compensation administrated under the *Military Rehabilitation and Compensation Act 2004* (MRCA), *Safety Rehabilitation and Compensation (Defence-related Claims) Act 1998* (DRCA) and *Veterans’ Entitlements Act 1986* (VEA).

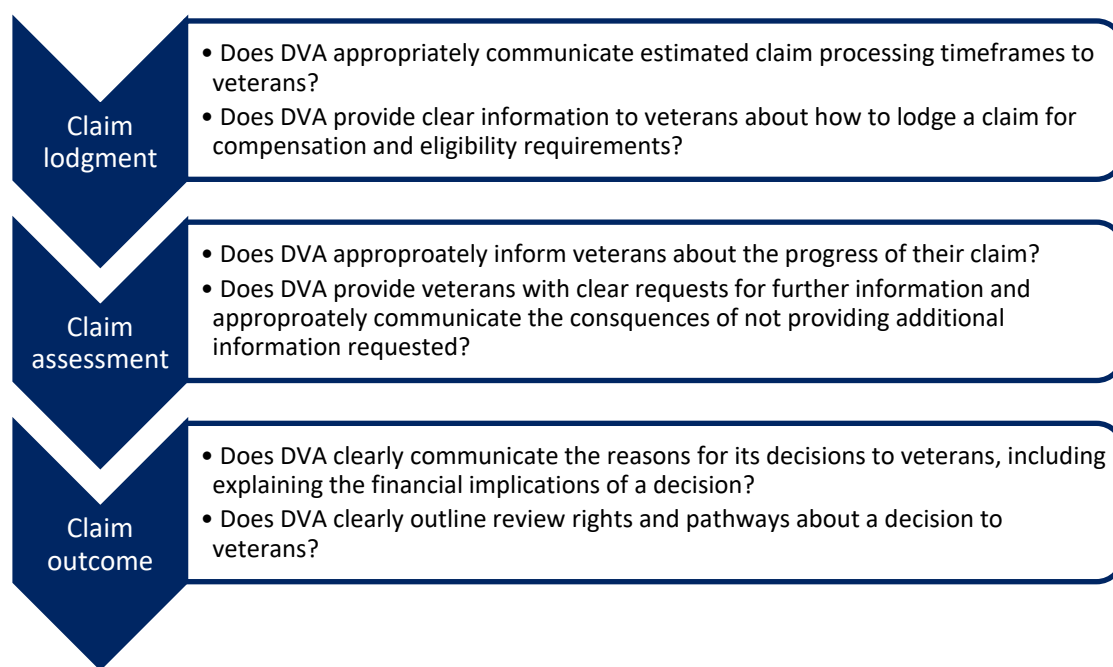


Figure 1: Investigation scope and focus areas

⁷ DVA provides compensation and other benefits to veterans who are injured or endured health conditions as a result of their service under the *Veterans Entitlement Act 1986* (VEA); *Safety, Rehabilitation and Compensation (Defence-related claims) Act 1988* (DRCA) and the *Military Rehabilitation and Compensation Act 2004* (MRCA)

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1.10. This investigation did not consider:

- DVA's communication with ex-service organisations or advocates
- DVA's communications about claim types other than compensation for injuries or health conditions related to service, including compensation to dependents following a service-related death of a member
- DVA's compliance with policies and procedures
- how DVA makes decisions on whether to accept or deny claims
- veterans' individual experiences of the claim process.

Methodology

1.11. We conducted a desktop review of DVA's website to consider the information DVA publishes to provide veterans with information about eligibility requirements and the process for making a claim for compensation for injury or health conditions related to service. We reviewed:

- DVA's online forms for claiming compensation for injuries or health conditions related to service
- webpages with information about compensation claims, including service criteria eligibility, benefits available for specific conditions, and how to make a claim
- webpages with information about how to appeal a decision made by DVA about a claim.

1.12. In April and May 2021, we met with DVA to gain an understanding of how it manages veterans' claims for compensation in practice. DVA provided information about:

- how claims submitted by veterans are registered by DVA
- how claims are screened by DVA staff for the purposes of identifying at-risk veterans who may require additional assistance or prioritisation and how the Triage and Connect (TAC) team aims to support these veterans
- what happens when a claim is allocated to a delegate for assessment
- how veterans are notified about the outcome of their claim
- how delegates communicate with veterans about the progress of the claim
- recent initiatives designed by DVA to enhance the veteran experience, including a demonstration of the MyService portal and an overview of DVA's ongoing outcome letters improvement project.

1.13. The briefings provided by DVA informed our formal request for information under section 8 of the Ombudsman Act, which included a request for all internal policies and

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procedures that set out DVA’s approach to communicating with veterans during the claim process.

1.14. We obtained access to DVA’s beta version of the MyService portal, which allowed us to access all current features of the portal that are available to a veteran with a MyService account. Reviewing the MyService portal enabled us to consider whether DVA provides clear information to veterans about how to lodge a claim via MyService and the documentation required to support a claim.

1.15. We also reviewed a small sample of de-identified communications between DVA and veterans who claimed compensation for injuries or health conditions related to their service. The Office requested DVA identify claims under the VEA, MRCA and DRCA that included outcomes that were successful and unsuccessful, and instances in which DVA identified at-risk veterans. We selected a random sample of these claims for review. We did not design the sample to be representative or assess compliance, but to assist our assessment of whether DVA’s policies and procedures appropriately support its staff in practice when communicating with veterans.

1.16. The Office provided the Secretary of DVA with the opportunity to comment on the draft report. DVA’s response is attached to this report.

1.17. The Office thanks those staff from DVA who provided information to assist with the investigation.

Part 2: IMPROVING COMMUNICATION WITH VETERANS

2.1. DVA progressed several improvements to business processes and policies under the VCR program with the aim of improving the delivery of services to the veteran community through better communication. We considered whether revised policies and procedures support effective communication with veterans during the claim process.

2.2. We also assessed whether the standards set by DVA in its Service Charter support appropriate communication with veterans and considered progress taken by DVA to improve communication with veterans as part of its Letters Improvement Project.

DVA’s communication strategies

2.3. DVA’s Channel Strategy and Correspondence Strategy form part of DVA’s service delivery framework and outline DVA’s plans to improve communication with veterans. These two strategies have separate, but related functions: a channel strategy usually sets out a formal plan for providing a service to a customer, while a correspondence strategy sets out a plan for how the entity will communicate with a customer while providing those services.

2.4. DVA’s Channel Strategy outlines how it intends to improve access to DVA services for veterans under the VCR program.⁸ The Channel Strategy supports a plan to assist eligible veterans to use self-service methods, enabling DVA to free up staff to better support veterans with more complex claims or needs. DVA advised us that to successfully implement its Channel Strategy, it will need to achieve the following in the next 2 years:

- increase the functionality of MyService
- simplify its correspondence to veterans
- improve tools, such as chat support, to assist veterans to access support
- improve case management systems.

2.5. DVA’s Correspondence Strategy provides that all communications to veterans should be simple, consistent in timing and adapted to the needs and preferences of the veteran. It acknowledges that correspondence to veterans often varies significantly between business areas and this inconsistency can be distressing for veterans. It sets out DVA’s plan for improving communication with veterans, including transitioning to digital communication, and states that it respects the choices and preferences of veterans to decide how they want or need to receive correspondence.

2.6. The Correspondence Strategy recognises the importance of engaging with veterans and advocates to ensure veterans’ preferences are considered in the transition to online services and communications. We understand DVA is in the process of implementing both its Channel Strategy and Correspondence Strategy. DVA’s plan to consult veterans about its transition to digital communication is consistent with a better practice approach to designing government services that consider the needs of users.

⁸ DVA advised at the time of the investigation that the Channel Strategy will require updating to reflect budget measures announced for 2021–22.

DVA’s Service Charter

2.7. A Service Charter is a public document that advises what an organisation does, how to communicate with the organisation, and the standards of service that customers can expect. All Commonwealth organisations engaged in service delivery must develop service charters.⁹

2.8. In October 2019, DVA removed the public version of its Service Charter from its website.¹⁰ DVA informed us that due to the recent increase in claims received and the difficulty forecasting how quickly delegates will work through their current caseload, the updated Service Charter (which was subsequently published in September 2021) will no longer include claim processing timeframes. DVA advised it intends to continue to publish performance indicators, including claims processing targets, in its Annual Reports.

2.9. Administrative delays can happen despite an agency’s best effort to avoid them. In our Office’s recently published insights report, Preventing and Managing Administrative Delays, we explain that the absence of timeliness standards for completing administrative actions can create uncertainty and frustration for people, which can lead to complaints.¹¹ Developing and publishing timeliness standards for services assists agencies to:

- manage expectations of individuals accessing the agency’s services and reduce uncertainty
- mitigate the risk of increased work due to complaints and follow up contacts with individuals
- keep the agency accountable which can promote confidence in government.

2.10. We acknowledge that DVA may not always be able to accurately predict timeframes for processing claims, particularly where there are significant changes in the level of resources needed to deliver this service. While expected timeframes may not always be accurate, we consider it better practice for agencies to publish the current average timeframes for completing administrative action. These average timeframes should ideally be re-assessed and re-published each financial year, or when a significant measurable change in processing timeframes occurs.

Recommendation 1

We recommend DVA publish and update regularly, current average processing timeframes for claims under the *Veterans’ Entitlements Act 1986*, *Military Rehabilitation and Compensation Act 2004* and *Safety, Rehabilitation and Compensation (Defence-related claims) Act 1988*.

2.11. Our Office’s Preventing and Managing Administrative Delays insight report emphasises the importance of communicating effectively with individuals to mitigate the adverse impact that delays in administrative decision making can have. This includes

⁹ APH (Parliament of Australia) (2001) [Commonwealth Government Service Charters](#), accessed 13 May 2021

¹⁰ DVA (Department of Veterans’ Affairs) (2021) [DVA Service Charter | Department of Veterans’ Affairs](#), accessed 5 November 2021

¹¹ Commonwealth Ombudsman (2021) [Preventing and Managing Administrative Delay](#), accessed 13 September 2021

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communicating a timeframe for completion when acknowledging receipt of a request and advising individuals of situations where agencies are working through a backlog.¹²

2.12. DVA’s Claims Management Guidelines (the Guidelines) emphasise ‘it is important to keep clients informed, as they may be feeling high levels of anxiety and uncertainty during the claim process.’ The claims acknowledgement template letters we reviewed include a paragraph explaining to veterans the potential impact of DVA’s current backlog on claim processing times. We consider that directing veterans to DVA’s published current average timeframes in its acknowledgement letter will assist DVA to further minimise uncertainty, anxiety or frustration that veterans may experience while waiting for claims to be processed.

Recommendation 2

We recommend DVA include in its acknowledgement letters to veterans, a statement advising that current average processing timeframes are published on its website.

DVA’s Letters Improvement Project

2.13. In 2019, DVA commenced its Letters Improvement Project to improve the standard of the letter templates used by DVA staff to communicate with veterans. The project is part of DVA’s strategy to incorporate a ‘layering approach’ in its communication to veterans, providing veterans with a succinct version of the most crucial information at the beginning of a letter, and including links to more detailed information available on DVA’s website.

2.14. DVA advised us it consulted with veterans, ex-service organisations, health professionals and its own mental health experts to gain feedback on the letters. The feedback received was considered as part of the review of its letters. DVA also advised it sought to incorporate better practice Australian guidelines for managing trauma-related mental health and wellbeing from Phoenix Australia,¹³ and readability tools with a view to ensure letter templates support clear and compassionate communication with veterans.

2.15. DVA’s Letter Improvement Project is not yet complete, with about a quarter of its letters redesigned at the time of our investigation. We assess the appropriateness of the redesigned letter templates in subsequent parts of this report.

¹² Commonwealth Ombudsman (2021) [Preventing and Managing Administrative Delay](#), accessed 13 September 2021

¹³ Phoenix Australia is an international leader and the national centre of excellence in posttraumatic mental health.

Part 3: COMMUNICATION ABOUT CLAIM LODGEMENT

3.1. We assessed whether DVA provides veterans with clear information about how to lodge claims for compensation on its website, in online and paper-based claim forms and in the MyService portal. We also considered whether DVA acknowledges the receipt of claims promptly, clearly explains the next steps in the claim process and provides veterans with regular updates about the status of a claim.

Accessibility of information on DVA’s website

3.2. The Australian Government’s Digital Service Standards (the Standards) and the Style Manual (the Manual) support government agencies to design and deliver digital government services that are simple, clear and fast to use.¹⁴ The Standards and the Manual support website design that is accessible to all users, regardless of their personal ability, and provides that web based information should be consistent, plain and in the language of users.¹⁵

3.3. We reviewed the information available on DVA’s webpages about eligibility requirements and how to apply for compensation to consider whether it is consistent with the Standards and the Manual. We also considered whether information about the legislation under which a compensation claim can be made is expressed in plain, easy to understand language.

3.4. At the time of our investigation, we assessed that most of the information on DVA’s website is clear, presented logically and written in accessible language. DVA includes detailed information on its website about how veterans can apply for compensation for injuries or health conditions related to their service. The website also provides information about the benefits that may be available to a veteran depending on their date of service and eligibility entitlements.

3.5. While the claims information on DVA’s website broadly meets the Standards and the Manual, there is an opportunity for DVA to improve how information is presented to increase user accessibility. The Manual provides that agencies should structure webpages consistently to enable users to find and understand content easily.¹⁶ The Manual also notes that headings should be consistent in structure, should avoid using questions and use keywords to help users make a connection to the information.¹⁷

3.6. DVA’s website presents information about claims across separate webpages, depending on the legislation DVA administers the compensation and benefits under, with some inconsistencies. For example:

¹⁴ DTA (Digital Transformation Agency) (n.d.) [About the Digital Service Standard | Digital Transformation Agency](#), accessed 14 July 2021

¹⁵ DTA (Digital Transformation Agency) (n.d.) 9. [Make it accessible | Digital Transformation Agency](#), accessed 14 July 2021.

¹⁶ DTA (Digital Transformation Agency) (2021) [Types of structure | Style Manual](#), accessed 14 July 2021

¹⁷ DTA (Digital Transformation Agency) (2021) [Headings | Style Manual](#), accessed 14 July 2021.

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- Landing pages about the MRCA, DRCA and VEA provide inconsistent links about the legislation, how to make a claim and benefits or support that are available.
- Webpages providing information about each Act are inconsistently structured and the focus of content is different.
- Headers on the DRCA and MRCA pages are listed as questions, while headers on the VEA page are usually listed as statements.

3.7. Minor changes to DVA’s webpages in line with the Standards and the Manual will assist DVA to ensure all individuals who need information about its services and support are able to navigate the webpages easily.¹⁸

Recommendation 3

We recommend DVA introduce a policy requiring regular review of its webpage design and content about compensation claims to ensure information is published consistent with Australian Government Digital Service Standards.

How to make a claim for compensation

3.8. A veteran who suffers an injury or health condition related to their service may claim compensation and benefits by submitting an online or paper-based form to DVA. Claim forms can be accessed on DVA’s website or in person at DVA offices. DVA posts paper-based claim forms to veterans who cannot access the internet or attend a DVA office.

3.9. Veterans may also claim compensation by applying online through DVA’s MyService portal. MyService is an online platform launched in April 2017, which aims to streamline the claim process by automatically populating information about the veterans’ service and verifying identity information through the Australian Defence Force. DVA advised most claims are lodged through MyService, with over 110,000 claims lodged in the 2019–20 financial year.¹⁹

3.10. For DVA to make a claim decision it must first determine liability, that is, confirm that the injury or health condition is related to service. Paper-based claim forms allow the veteran to claim for multiple conditions in one form, while claims submitted via MyService only allow the veteran to claim one condition at a time. When a veteran lodges a claim for multiple conditions, DVA combines these claims and assigns them to one delegate, wherever possible, so each veteran has a single contact point at DVA.

Providing evidence to support a claim

3.11. It is better practice for agencies responsible for service delivery to explain clearly to individuals what documentation and evidence they need to provide when using its services. Agencies should make sure the information provided in application forms enables an

¹⁸ DTA (Digital Transformation Agency) (n.d.) [9. Make it accessible | Digital Transformation Agency](#), accessed 14 July 2021.

¹⁹ DVA (Department of Veterans’ Affairs) (2021) [Department of Veterans’ Affairs Annual Report 2019-20](#), accessed 17 June 2021

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individual to make informed choices about actions they will or will not take, including the impact of their actions or decisions.²⁰

3.12. We consider the information provided in DVA’s claim forms and MyService portal appropriately prompts the individual to provide the supporting evidence required to assist DVA to establish liability. DVA’s claim forms and the MyService portal encourage veterans to provide any supporting medical documentation or other relevant evidence, decreasing the likelihood of delays to claim decisions because incomplete information is provided.

Acknowledging receipt of a claim

3.13. DVA’s Guidelines provide that it must send an acknowledgment letter to the veteran to advise their claim was received within 5 days of receipt. Claims submitted via MyService are generally acknowledged sooner than paper-based claims because they are automatically registered in the claim processing system.

3.14. The Guidelines provide that acknowledgment letters must advise veterans:

- that a delegate will contact them when the claim is allocated
- they should contact DVA if their circumstances change
- about information on MyService and the DVA website
- DVA contact details.

3.15. We reviewed a de-identified sample of actual letters to veterans acknowledging their claim for compensation to consider what information DVA provides to veterans about the claim process. Our review found no instances where DVA did not include the information required under the guidelines. However, some letters provided additional information to veterans not covered in DVA’s Guidelines. This additional information included:

- the date the claim was received by DVA
- the impact of the backlog on claim processing timeframes
- information about how to access other supports such as Open Arms or provisional medical treatment.

3.16. In November 2021, DVA advised us it recently updated its acknowledgment letter templates to automatically include the additional information we observed in the de-identified sample of letters. We consider the addition of this information is appropriate and aligns with better practice. DVA should update the Guidelines to explicitly list all information that it requires in acknowledgment letters to ensure communication with veterans is both appropriate and consistent between decision makers.

²⁰ Commonwealth Ombudsman (2020) [Commonwealth Ombudsman Insights Report](#), accessed 13 September 2021

Recommendation 4

We recommend DVA update its Guidelines to include all information delegates should include in acknowledgment letters.

3.17. DVA does not explain in its acknowledgement letters to veterans about the next steps in the claim process. We also found DVA does not include this information in its claim forms, MyService or on its website. In briefings provided to us by DVA, the general stages of the claim process, from lodgement to outcome, were explained clearly and succinctly.

3.18. We consider this information would be of benefit to veterans. DVA should provide veterans with a factsheet or explanation on the general claim process from lodgement to outcome as well as the actions it may take at each stage. This would provide veterans with clear expectations of what they should expect as part of the claim process and may assist to minimise uncertainty or frustration veterans may experience during the claim process.

Recommendation 5

We recommend DVA publish information that outlines the general steps involved in the claim process.

Screening claims for at-risk veterans

3.19. We considered the procedures DVA has in place to support delegates to identify ‘at-risk’ veterans when communicating with veterans during the claim process. We also reviewed DVA’s guidance materials for referring veterans to the Triage and Connect (TAC) team, including scripts for gathering information from at-risk veterans.

3.20. DVA’s screening team reviews all initial liability claims to ensure at-risk veterans receive immediate support. DVA considers at-risk veterans to be those who show signs of financial or family hardship, homelessness, serious illness, or are at risk of self-harm or harm to others. DVA also considers other risk factors that indicate a claim should be prioritised, including where a veteran has medically discharged from the ADF, or made claims of serious abuse.

3.21. DVA’s Guidelines outline the internal process for screening at-risk veterans. DVA’s screening team is responsible for assessing whether a veteran is at-risk based on the information provided in the claim form, accompanying documentation or in DVA’s existing records. The Guidelines require the screening team to assign these claims a status of ‘action immediately’ and allocate the claim for assessment to a delegate without delay.

3.22. DVA’s TAC team is responsible for assessing a veterans’ personal circumstances to determine the most appropriate action for the claim before making contact. Delegates are guided to refer at-risk veterans to the TAC team or contact the TAC team for advice if they are unsure about making a referral. The TAC team will assign a case manager based on its assessment of the veterans’ individual circumstances.

3.23. We consider DVA’s procedures provide sufficient guidance to assist delegates to identify at-risk veterans. The guidance supports delegates to understand the individual needs of veterans and to refer to this information to assist them to support veterans to navigate the claim process.

Managing unallocated claims

Claims that remain unallocated up to 90 days

3.24. We expect service delivery agencies like DVA to have in place systems to provide updates to individuals at regular intervals about the status of their request for services.²¹ We assessed DVA’s approach to communicating with veterans whose claims remain unallocated up to 90 days, including its SMS initiative.

3.25. DVA advised us that as at April 2021 it had 500 delegates responsible for assessing claims. DVA aims to provide each delegate with an ‘ideal caseload’ to ensure allocated claims progress in a timely manner. DVA also advised us that an increase in the number of claims for compensation in recent years resulted in a backlog which lengthened average processing times for claims.

3.26. DVA advised that in May 2021 it began making regular contact with veterans via SMS if their claim remained unallocated after 30, 60 and up to 90 days. If DVA does not have a mobile phone number on file, it sends an email or calls a landline. DVA advised this initiative serves to update veterans about their claim status and prompt veterans to advise DVA of any changes to personal circumstances or request additional support. In our view, this initiative is a valuable prompt for veterans to update DVA regarding any changes in circumstances and keep veterans informed about the status of their claim.

Claims that remain unallocated after 90 days

3.27. DVA’s Outbound Call (OC) team manages communication with veterans with initial liability claims that remain unallocated after 90 days. DVA advised us the OC team is responsible for contacting veterans to set expectations about claim processing times, provide advice about support services available through DVA and Open Arms and check for changes in veterans’ personal circumstances that may indicate a claim should be prioritised. DVA provided us with guidance it gives to the OC team to support its staff to ‘deliver and set expectations regarding the claims processing times’ which include a flowchart of the general process and points of decision making, as well as talking points to assist with frequently asked questions during the phone conversation with the veteran.

3.28. In our view, the talking points appropriately help the OC team to advise veterans of the current backlog and delay in processing times and provide advice about supports that may be available to them through DVA and Open Arms while they wait for their claim to be processed. DVA’s flowchart prompts the OC team staff to check if there are any factors to change claim priority and if the veteran meets the risk criteria during the phone conversation. DVA does not provide the OC team with guidance to support clear communication with a veteran to identify changes in veterans’ circumstances or assess if their circumstances meet the risk criteria.

3.29. DVA also advised our Office, if a claim is still unallocated after 365 days, a member of its Claims Support (CS) team contacts the veteran. Similar to the OC team, the CS team also checks for any changes in circumstances that may indicate a claim should be prioritised. DVA

²¹ Commonwealth Ombudsman (2021) [Preventing and Managing Administrative Delay](#), accessed 13 September 2021

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did not inform us how often a claim remains unallocated by DVA after 365 days or provide us with any resources specific to the CS team.

3.30. Wherever possible, agencies should support staff with appropriate guidance in policy or procedure to facilitate clear communication with individuals accessing its services about how the agency manages and prioritises claims. This includes ensuring staff are appropriately supported to make decisions consistent with that messaging, including decisions about how a claim should be prioritised.

3.31. We found that DVA provides delegates with sufficient guidance to assist them to identify at-risk veterans at the point at which a claim is initially screened, however it is not clear whether this guidance is also used by staff responsible for communicating with veterans with unallocated claims. DVA should ensure this guidance is provided to these teams and that additional supports are developed so they can appropriately communicate with veterans to elicit information that may indicate a veteran is at-risk. This will assist DVA to communicate with veterans in a clear and consistent manner, and to be able to make decisions to identify at-risk veterans whose claims should be prioritised.

Recommendation 6

We recommend DVA develop guidance materials to assist its staff to communicate with veterans so they can identify and make decisions on claims that should be prioritised.

Part 4: COMMUNICATION ABOUT CLAIM ASSESSMENT

4.1. The DVA delegates responsible for communicating with veterans about compensation claims and making decisions about claims are generally 'officer level' staff at Australian Public Service (APS) levels 4–6. Where administrative decision making is delegated, clear internal policies and procedures are an important internal control for supporting accuracy and consistency in those decisions. This includes where staff are responsible for receiving or communicating information as part of a decision-making process, such as claim decision.

4.2. We assessed whether DVA's policies and procedures appropriately support delegates to communicate clearly and accurately with veterans. We considered whether DVA provides veterans with clear and timely progress updates about the status of their claim. We also considered whether requests from DVA for further information during the claim assessment process are clear.

Verbal communication between delegates and veterans

4.3. DVA's Open Door Policy (the Policy) instructs delegates to call veterans at the start of every claim process. The Policy outlines that the purpose of this phone call is to 'improve service delivery performance and the [veterans'] understanding of the claim process and increase client satisfaction.' The Policy explains that 'good communication is the key to good relationships' and emphasises that phoning veterans at the start of the claim process is important for building rapport between delegates and veterans.

4.4. We assessed whether DVA's Guidelines appropriately support delegates to verbally communicate with veterans making a claim for compensation. We also considered whether the Guidelines give effect to DVA's Policy requirement to contact clients at the start of the claim process.

4.5. The Policy provides that during the initial phone call delegates should discuss 'the likely milestones' and 'any possible delay points.' The Policy includes a script to guide delegates during the mandatory phone call, which includes providing information about the current average timeframe for processing a claim under the relevant Act. DVA has not amended the Policy or the attached script since its issue in March 2013 to reflect recent delays in processing claims for compensation, or the current backlog. The Policy does not include further information about what relevant milestones are, or guidance to support delegates to communicate information about possible delay points.

4.6. DVA's Guidelines, which were amended in October 2020, inform delegates that 'it is important to keep clients informed' and emphasise phoning clients is the 'quickest way to clarify existing information or ask for additional information and explain why it is required.' The Guidelines also provide that delegates should contact a veteran to communicate expected delays in assessing their claim and refer to approved talking points delegates may use at their discretion to support communicating reasons for delays. While it is not clear in the Guidelines which talking points delegates may use, DVA advised that the talking points are the same as those used by the OC team which we previously assessed as appropriate in this report.

4.7. The Guidelines advise delegates to consider referring a veteran to the TAC team if the delegate assesses they meet the criteria of being 'at risk' during the initial phone call.

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Our review of the Policy, and the script attached to the Policy and the Guidelines, found that DVA does not provide guidance for delegates to identify at-risk veterans during the initial phone call.

4.8. DVA’s Guidelines emphasise that ‘it is important to keep clients informed, as they may be feeling high levels of anxiety and uncertainty during the claim process.’ DVA does not expressly address in its policy and procedures what this means in practice. The Policy provides that a delegate should make a minimum of one phone call with a veteran at the start of the assessment process. The Guidelines highlight the importance of good communication by phone between delegates and veterans during the assessment of a claim, but do not expand on what frequency of contact is appropriate or what it means for a veteran to be appropriately informed.

Written communication between delegates and veterans

4.9. We assessed whether DVA’s Guidelines support delegates to keep veterans informed about the progress of their claim in writing. Where important information is being communicated by an agency, providing information in writing gives individuals a permanent record of information that may be considered by the individual in their own time and with support from a third party if needed. It is also important in circumstances where written correspondence may be an individual’s preferred means of communication.

4.10. DVA’s procedures set out when delegates should update veterans on the progress of their claim, which is dependent on the Act under which the claim is administered. For example, for claims made under the MRCA, DVA’s Guidelines require delegates to provide veterans with regular written reports about the progress of their claims, where a claim is not finalised after 60 days and again after 110 days. Progress reports must include details of any outstanding matters and explain the reason for the delay. While DVA advised there is an expectation that progress letters also be sent for claims made under the VEA and DRCA, there is no direction for delegates to do so in the Guidelines.

4.11. We consider DVA would benefit from providing clearer guidance on the frequency and mode of contact it expects between delegates and veterans. While delegates should maintain some discretion to decide the best approach in each case, strengthening policy and procedural guidance will assist DVA to ensure a minimum consistent standard of communication is maintained and the individual needs of each veteran is taken into account.

4.12. This approach is consistent with DVA’s Correspondence Strategy, which provides that all communication to veterans should be consistent in timing and adapted to the needs and preferences of the veteran. Regular communication with veterans may assist DVA to ensure veterans have a good understanding of, and realistic expectations about the claim process and the status of their claim, consequently minimising additional anxiety or uncertainty during the claim process.

Recommendation 7

We recommend DVA develop a policy to outline the frequency and mode of contact it requires its delegates to have with veterans.

Requests for further information

4.13. We assessed whether DVA’s policies and procedures provide appropriate guidance to support delegates to make requests to veterans in a clear and timely manner. We also considered whether DVA clearly explains to veterans the consequences of not complying with a request for additional information.

4.14. Under DVA’s Guidelines, delegates must assess the need for additional information and make a request to a veteran within 7 days of a claim being allocated to them. If a delegate considers the existing evidence is not sufficient to decide the claim, it is open to the delegate to request the veteran:

- provide further details about the injury or health condition
- attend a medical examination
- give written consent for DVA to obtain the relevant information from a third party.

4.15. DVA’s Guidelines instruct delegates to request any additional information via a phone call to the veteran or their representative in the first instance, before sending a written letter requesting the information. However, DVA advised us that requests for additional information can also be made verbally, without a written letter, for information that is ‘easily obtained over the phone’. DVA did not indicate what information it considers to be ‘easily obtained over phone’ and informed us it does not provide any specific guidance or scripts for delegates to reference when verbally requesting additional information as ‘the evidence required varies for each condition that is claimed.’

4.16. The Guidelines require delegates to follow-up receipt of a written request for information by phone call, email or reminder letter to the veteran. The Guidelines also require delegates to supplement their request by sending an SMS to veterans to remind them of upcoming appointments, any additional information that is outstanding or request a return phone call. DVA does not provide delegates with any guidance about when they should contact veterans about receipt of information or when they should send reminders.

4.17. DVA advised us it usually provides veterans with a minimum 28 days to provide the requested information. DVA also advised us that if a veteran fails to respond to a request within the 28-day timeframe, it sends a formal request for the information under the relevant section of the appropriate Act. DVA informed us ‘there is no explicit guidance’ on sending reminder letters but its practice is to send 2 reminder letters before sending the final reminder letter.

4.18. DVA should consider developing a policy that specifies when delegates must send reminder letters, as well as the final reminder letter. This will ensure consistency in communicating follow-up requests with veterans, and that delegates assess and action follow-up requests for further information in a timely manner.

4.19. Our review of DVA’s template letters to veterans found that DVA invites veterans to contact delegates if they require more time to provide any additional information requested. We are satisfied DVA’s policy approach to timeframes when managing requests for additional information is appropriately flexible. DVA allows additional time for veterans who may be assessed ‘at risk’, who are without internet access, living in remote areas or who cannot reasonably meet the 28-day timeframe.

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4.20. DVA does not clearly communicate the consequences of failing to comply with the request in its initial letter to veterans in requests for additional information. While the initial request letter advises veterans to contact DVA to discuss whether they require more time to respond, it does not outline any potential consequences of not responding, including that the claim may be decided on the basis of the information held by DVA. DVA also does not provide delegates with any specific guidance to assist them to communicate the consequences of not complying with the request for additional information to veterans during the initial phone call.

4.21. DVA should explicitly inform veterans as early as possible, of the consequences of not complying with requests for additional information. This may take the form of a short explanation which explains that not providing information when requested may affect the outcome or progress of their claim. Providing veterans with clear information as early as possible may also limit the requirement to send formal follow-up requests. We consider that in implementing the below recommendation, wherever possible, DVA should consider the most appropriate mode of communicating with the veteran depending on the veteran’s individual circumstances.

Recommendation 8

We recommend DVA clearly outline to veterans as early as possible, the potential consequences of not providing additional information.

Records of claim decisions

4.22. DVA’s Guidelines clearly instruct delegates to ‘make sure all contact is recorded in the appropriate processing system’ and to ‘keep [the system] updated with the progress of the claim so that you know exactly where you are up to and there is visibility to all staff if delegates are absent.’ The Guidelines also set out the procedure delegates should follow to write case notes, which are written records of all interactions, conversations and the reasons for a decision based on the evidence considered by DVA. The Guidelines provide that case notes should be clear, accurate and respectful, noting that veterans have a right to access their records.

4.23. We did not identify any concerns with the requirements in DVA’s guidelines. While this investigation did not focus on delegates compliance with policy and procedures, we observed inconsistencies between the requirements set out in DVA’s Guidelines and the case notes provided to us as part of the sample of claims for our review. For example, DVA’s Guidelines require that ‘phone contact[s] must be recorded as a case note’ during the initial stages of a claim. Most of the samples reviewed did not record that an initial phone call was made to the veteran. We also observed that the reason for a decision or the evidence relied upon to assess a claim was not always recorded as a case note.

4.24. DVA may wish to consider conducting an internal review of records to ensure case notes are consistent with DVA Guidelines. As case notes form the primary record of decision, assuring compliance with DVA’s existing requirements may assist DVA to ensure practices reflect good administrative decision-making principles, including enabling DVA to produce sufficient information to enable a statement of reasons to be easily produced.

Part 5: COMMUNICATION ABOUT CLAIM OUTCOMES

5.1. We assessed whether DVA clearly communicates to veterans the reasons for its decisions and whether information about review rights and pathways is accessible.

Communicating the reasons for a decision

5.2. We reviewed DVA’s policies and procedures to determine if they help delegates to communicate appropriately and clearly to veterans in writing about the outcome of a claim. We also considered whether guidance to delegates is clear on the requirements for communicating the reasons for a decision, and how the decision may affect the veteran financially.

5.3. We also reviewed DVA’s letter templates and a sample of outcome letters to consider whether the letters to veterans were consistent with DVA’s Letters Improvement Project and Layering Strategy, which aims to develop letters that are clear, compassionate and effective at conveying key information and outcomes. Where the outcome letters we reviewed included information about how payments are calculated, we also considered whether DVA clearly explains the financial implications of the decision.

5.4. DVA advised us it is introducing a new procedure that will prompt delegates to view guidance documents that explain how to draft a letter to a veteran. DVA did not advise us when this procedure will be introduced. The new procedure will prompt delegates to open a Writing Letters guidance document that instructs delegates to prepare a draft letter using the Standard Letter Template’ and the Letters Checklist. The Writing Letters guidance document outlines to delegates that content should be ordered so the most important information, which requires the veteran to act, is listed first. The Letters Checklist aims to assist delegates to verify their letters are ‘clear, compassionate and useful’ to veterans.

5.5. We are satisfied that DVA’s guidance documents appropriately support delegates to write outcome letters that are clear and compassionate. DVA’s outcome letter templates use an appropriate tone, are written in plain English and provide easy to understand information about the evidence considered by the delegate to support a decision. DVA’s outcome letter templates also clearly set out the obligations of a veteran to notify DVA of any changes in circumstances that may affect future payments and provide clear information on when and how a veteran may request a review of a decision. In the sample of outcome letters reviewed, we observed that delegates write outcome letters in plain English, in an appropriate tone and clearly communicate the reason for a decision.

5.6. We also observed that DVA provides clear explanations to veterans about how payments are calculated based on the accepted level of impairment and informs veterans they may choose between a lump sum or weekly payments if an injury or health condition resulted in permanent impairment. DVA also invites veterans to contact the agency if they would like more detailed information about how calculations are made. DVA clearly outlines that the decision a veteran makes about the payment option is not reversible and provides links to its website for details about the implications of the payment options and advice about finding a qualified financial and legal adviser. Our review determined that DVA’s letters sufficiently communicate how payments are calculated and direct veterans appropriately for further information, this was also reflected in the samples we reviewed.

Negative decisions

5.7. We assessed whether DVA provides delegates with appropriate guidance to notify veterans about negative decisions in a clear and compassionate manner. We also considered whether there is an appropriate framework in place to ensure that letters outlining the reasons for negative decisions are considered from a quality assurance perspective.

5.8. DVA’s Guidelines for Contacting Clients Regarding Negative Decisions (the Negative Decision Guidelines) define a negative decision as one that results in the denial of compensation or benefits. The Guidelines expect delegates to have an ongoing relationship with the veteran throughout the progress of a claim. The Guidelines further state it is imperative that delegates guide veterans through the claim process, provide timely advice and highlight any concerns and potential outcomes to ensure the outcome of the claim is not a surprise.

5.9. The Negative Decision Guidelines require delegates to phone the veteran about a negative decision before sending an outcome letter. DVA provides delegates with a script to use to conduct the phone call which includes prompts for delegates to refer the veteran to TAC if required and to inform the veteran about available appeal avenues. The Negative Decision Guidelines assist delegates to draft decision statements in letters if a negative decision is likely to affect a veteran’s wellbeing. DVA does not provide delegates with guidance about how to assess whether the negative decision will affect a veteran’s wellbeing.

5.10. DVA advised us that it considers the impact of a negative claim outcome where the timing may have an adverse effect on the wellbeing of the veteran. The Negative Decision Guidelines instruct delegates to delay phoning a veteran about a negative decision in the days leading up to a major commemorative occasion, such as ANZAC Day, or other times when support services may not be readily available, such as a Friday afternoon or immediately prior to the Christmas closure period.

5.11. DVA does not require a second person to approve a negative decision letter prior to sending to a veteran, except where the ‘reasons for decision statement’ contained in the letter exceeds 250 words. Where the word count exceeds 250 words, the letter must be reviewed by an APS level 6 Team Leader. DVA advised this risk-based approach assumes that the longer the letter, the greater the likelihood it reflects a complex decision.

5.12. We consider DVA’s policy appropriately guides delegates to communicate with veterans about negative decisions in a clear and compassionate manner, and it is consistent with DVA’s approach to consider the needs of at-risk veterans. DVA’s threshold for review of negative decisions should be regularly reviewed to ensure DVA’s assumption around the correlation between the length of letters, and the complexity of the decision, remains accurate.

Review rights and pathways

5.13. We considered whether outcome letters and the information available on DVA’s website provides veterans with clear information about appealing a decision about a claim.

5.14. All outcome letters inform veterans about their right to request a review of a decision, how to request a review, and the allowable timeframe for requesting a review.

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Outcome letters clearly advise veterans they will be required to state why they think the decision is incorrect and to email or post their request for a review to DVA.

5.15. DVA also directs veterans to its website for further information which provides veterans with guidance to include any additional information or evidence to support their review in the request. The website also provides information to veterans about how they will be informed of the outcome of the review, and any financial costs they may incur because of the review process.

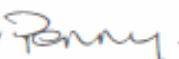
5.16. Our review of DVA’s template outcome letters and website concluded that DVA provides appropriate and sufficient information to veterans about their rights for a review of a decision and pathways available.

APPENDIX A – RESPONSE FROM DVA



Australian Government
Department of Veterans' Affairs
OFFICE OF THE SECRETARY
PRESIDENT REPATRIATION COMMISSION

Ms Penny McKay
A/g Commonwealth Ombudsman
GPO Box 442
CANBERRA ACT 2601

Dear Ms McKay 

Thank you for your letter of 26 November 2021, concerning the draft report from your Office's own motion investigation into the Department of Veterans' Affairs (DVA) communication with veterans making claims for compensation.

My staff and I appreciate the opportunity to review the draft report, and are pleased that the investigation found DVA's existing framework consistent with an approach that supports better service delivery to the veteran community through improved communication. DVA is committed to continued improvements to better support the wellbeing of those who serve or have served in the defence of our nation, and their families.

I note your Office has identified some opportunities for improvement, with eight recommendations made aimed at strengthening the accessibility and transparency of information available to the veteran community and internal guidance to support decision-makers. I can confirm DVA accepts the eight recommendations contained within the draft report, and it is expected these can all be implemented over the course of 2022.

I wish to offer my thanks for the professional approach taken by your Office while conducting this own motion investigation, including preparation of the high-quality draft report. As requested, my staff have provided some minor tracked comments on the draft to your Office for further consideration prior to its finalisation.

Please regard this letter as my formal response to the draft report, which you have requested for inclusion within the final report.

Yours sincerely



Liz Cosson AM CSC
Secretary

4 January 2022

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