

## **ESO Roundtable Meeting 25 & 26 Nov 2009. Report.**

### **Minutes of Previous Meeting.**

As per attached.

### **Consultation Framework - Update.**

A verbal update.

1. National Mental Health Forum, working through Dunt report – ESO transition arrangements – Defence Links.
2. Emerging Issues Forum, Transition issues – Regional Stake holders forums ( as per attached) – Reserves support on RTA – problems with arising from multi-deployments – more use of technology like the interactive “right mix”.
3. Operational Working Party, - As per my report of that meeting earlier, dealing with matters concerning Compensation, Transport, Income Support and DVA performance.
4. National Health, Aged & Community Carer, no report.
5. State Forums, have now begun to meet and as reported by Shane Carmody issues will be raised as they arise.

### **NAC – Update,**

Verbal report and direction to VVCS website for minutes of meetings as published.

### **Business Raised by Members,**

1. Interdepartmental Working Group (IWG), now been working for 2 years and the good work is reducing some of the duplication of reports and procedures required. Some of the progress made revolves around proof of identity using ADF documentation, in 2008 the IWG produced a handbook and at this time it is being amended by Defence. The Australian Tax Office (ATO) has been contacted and work is being done on having all allowed paid to ADF members exempt from Fringe Benefit Tax (FBT) and also some work in the area of child support.  
Work is also ongoing on a single claim form for Com-Super/DVA  
Continued pressure is seeing some shift in the requirement for TPI veteran to not have to be continually periodically reviewed at other agencies.  
The feeling is that personnel would like to have a DVA Case Manager handle all their dealings with other agencies.
2. Respite Care for Carers, as per attached.
3. Unique Nature of Military Service, as per attached.

### **Robotic Surgery & Prostate Cancer,**

As per attached.

### **Nature of Service Review – update.**

Brig. David Webster presented, via power point, the matrix of how DoD look at all service and deployments within the ADF and determine by all elements of the risks and exposures the classification of Warlike, Non-Warlike, Hazardous and Defence Service.

### **Legal Aid.**

As per attached.

### **Research Framework - Update.**

As per attached.

### **Centenary of ANZAC.**

A verbal report was presented on the beginning of the organisation of the commemorations of this event starting in 2015 to 2018. in the very early stages of consideration and the planning stages.

### **PMAC – Report.**

This was a verbal report by Dr. Allan Hawke.

Their last meeting was 15 Oct. and there will be a telephone hook-up before Xmas.

The committee is working through the Clarke review, F11 issues and had significant input into the consultative framework and forums now in place.

Consideration is also given to focus and future commemorations.

Implications and action from the Dunt report under consideration.

The PMAC has a good working relationship with DoD and a 2 way information flow.

Reviewing the operations of the Defence Community Officers (DCO) and find their operations in some areas to be unsatisfactory.

Considering reviews of MRCA and Pharmaceuticals.

### **Departmental Reviews – Update.**

1. Military Compensation, as per attached.
2. Clarke review, as per attached.
3. F111 Deseal/Reseal, as per attached.

### **Implementation of the Recommendations of the Independent Study into Suicide.**

As per attachment.

### **Future directions of the DVA in service delivery.**

Verbal report projected DVA business in 5 – 10 years.

DVA to stay as a stand alone dept.

WWII veterans will be in excess of the number of Vietnam Veterans until 2014.

Now more dependants than veterans until 2018.

MRCA claims now 2,000 current a rise of 15%.

Of interest is that there are currently 370 WWI War Widows.

### **Pharmaceuticals Review.**

Verbal report very short report that obviously all pharmaceuticals under the Gold and White card are being considered.

Average cost per person annually is \$1,800

Average scripts per person comes out as 53.

### **Unique Healthcare Identification Service.**

As per attachment.

### **Update on Reducing Duplications for Home-Front and RAP Assessments.**

As per attachment.

### **Review of DVA Funded ESO Welfare & Advocacy Services.**

As per attachment.

Ron Coxon.