



Framework for Veterans' Health Care

2016 -2020
Shaping the future of veterans' health in South Australia



Government of South Australia
SA Health



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TO PERPETUATE THE
COURAGE, LOYALTY
AND SACRIFICE OF
THOSE WHO SERVED
IN THE GREAT WAR
1914-1918

NEW ZEALAND

Ministers' Foreword

Shaping the future of health care for our veterans

Through their courage and commitment in serving our nation, veterans have helped to form part of Australia's national identity. All South Australians should recognise and acknowledge the value of their contributions to society. Within the health system, the onus is on everyone involved in the provision of health care to engage veterans with respect, understanding and dignity.

The profile of a veteran is changing, and we now recognise that younger contemporary veterans, both men and women, face many different health needs to those of previous generations. Our health system must understand these changes and adapt to meet them. We must continue to work with veterans, their families and the veteran community to understand and meet the unique health care needs of veterans.

These changes come at a time when we are embarking on the biggest ever transformation of South Australia's health system. At the heart of Transforming Health is the pursuit of quality and we have the opportunity to align the health care we provide for veterans with this ambitious quality agenda. One way this is happening is through the development of the new \$15 million Veterans' Mental Health Precinct, which will provide high quality facilities to match our reputation as a leader in the delivery of mental health care to veterans.

South Australia's Framework for Veterans' Health Care 2016-2020 informs South Australians of the health needs of veterans. It incorporates within it a Guarantee for all veterans that will apply across the entire SA Health system.

Veterans' health care is provided by many dedicated and committed organisations. Within a complex health system, it is vital that these organisations work together to provide quality, person centred care that meets the health and wellbeing needs of veterans.

The framework sets the strategic direction for the provision of veterans' health care and encourages all partners in veterans' health care to work together to help shape the future for veterans' health in South Australia.

Hon. Jack Snelling MP
Minister for Health

Hon. Leesa Vlahos MP
Minister for Mental Health
and Substance Abuse

Hon. Martin Hamilton-Smith MP
Minister for Veterans' Affairs

Introduction

The veteran context

Veterans face unique health challenges as a result of their service. We also know the profile of veterans is changing. Historically, veterans have been understood as older men who served during World War I or World War II, or more recently in Korea or Vietnam. Over the past ten to fifteen years a contemporary group of veterans has emerged. These contemporary veterans may have been involved in peacekeeping activities or service in the Middle East; and they include a higher proportion of women compared to previous generations. These differences are forcing us to rethink our traditional approach to providing health care for veterans and their families as well as the broader veteran community.

Whilst in service, the Australian Defence Force (ADF) provides health services to its members. Upon discharge and transition to the civilian community, veterans are faced with an unfamiliar and complex health system. Veterans must learn to navigate numerous public, private and not for profit providers, within a variety of funding streams and pathways.

All of this leads to the need for an integrated, coordinated, planned and dynamic approach to meeting the healthcare needs of veterans, that can adapt to meet their changing needs through transition from service and beyond, whilst engaging veterans with respect, understanding and dignity.

Purpose of the framework

The purpose of the framework is to set the strategic direction for the provision of veterans' health care in South Australia. The framework informs us of the health needs of veterans so that we can develop a shared understanding of how we will work together to improve the quality of care for veterans.

The previous Framework for Veterans' Health Care 2012-2016 and the Veterans' Service Guarantee were developed within a context of different priorities, infrastructure and understanding of veteran healthcare needs. These documents are being updated and expanded to reach beyond the grounds of Repatriation General Hospital, Daw Park to all veterans in South Australia, regardless of locality.

The framework incorporates within it a Guarantee for all veterans that will apply across the entire SA Health system. The Guarantee sets the high level principles to create a minimum standard of quality health care for veterans. This will align the health care provided to veterans with the quality mandate of Transforming Health to provide the Best Care, First Time, Every Time.

The framework encourages all partners in veterans' health care to work together to help shape the future for veterans' health in South Australia. While the framework is principally a SA Health document, it is written to inspire all partners in veterans' health care to take action and be held accountable to the minimum standard set out by the Guarantee.

This framework is the result of close collaboration between Veterans' Health Advisory Council (VHAC) and SA Health as well as consultation with veterans and the veteran community in South Australia. A five year timeframe has been chosen for the framework to acknowledge the many changes underway in the health system and lay the foundations for a new system of health care for veterans. The VHAC will monitor implementation of the framework.

Definition of veteran

We respect the meaning of the term 'veteran' and acknowledge it has special meaning to veterans themselves. For the purpose of the framework, a veteran is defined as anyone who has served in the ADF, including the Reserve forces.

Some veterans have service related injuries and illnesses and others do not. Similarly some veterans have Department of Veterans' Affairs (DVA) entitlements and others do not. In order to develop best practice that incorporates veterans' needs over time, we have chosen a broad definition which incorporates all those who have served. We also recognise that some people may not identify as a veteran, and prefer to be considered as ex-service. We accept a person's choice to identify with the term veteran, or not.

We also aim to recognise the different needs of veterans based on their period of service. We consider our older veterans as those who served primarily in (but not limited to) World War I and World War II; Vietnam and Korea veterans as those who served in and around the time of those conflicts; and contemporary veterans as those who served from the mid-1970s which is inclusive of peacekeeping activities, humanitarian commitments and conflict in the Middle East. Based on these periods of service, veterans are likely to have different needs based on their experiences, age group and social support systems.

The ADF coordinates health care services for full time members whilst they are serving. For the purpose of this framework, ADF members are considered veterans upon discharge and transition from the ADF to the civilian community. This transition stage is a critical element of the veteran health pathway and is addressed in this framework.

Importantly, the provision of quality health care does not and will not depend upon the definition of a veteran or whether a person chooses to be identified with the term veteran or not.

Definition of veteran community

Military service can have a significant impact on the lives of those close to veterans, including their families and dependants. As defined in South Australia's Charter for Veterans, the veteran community is inclusive of veterans and their families with a direct link to a service or a veteran. This includes widows, partners, former partners, children, parents, siblings and relatives of ex-servicemen and women, and should include anyone with an evident link to, or interest in, matters associated with veterans' welfare or wellbeing.

Limitations of the framework

The health system is complex. No one organisation, agency or group has overarching responsibility for veterans' health. This makes accountability for veterans' health care difficult. While SA Health is committed to upholding this framework, it is not possible to prescribe the actions for all of the partners in veterans' healthcare. This framework aims to inform, influence and encourage coordination, collaboration and joint responsibility. We explore the partners in veterans' health care in more detail in the next section.



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With today's veterans a special bond exists as they have shared similar experiences and hardships on their road to recovery that aren't easily shared by others. Which is why the peer to peer support is so integral to the friendship and companionship of their own road to recovery whether it be a long or short road. It is veterans caring for veterans.

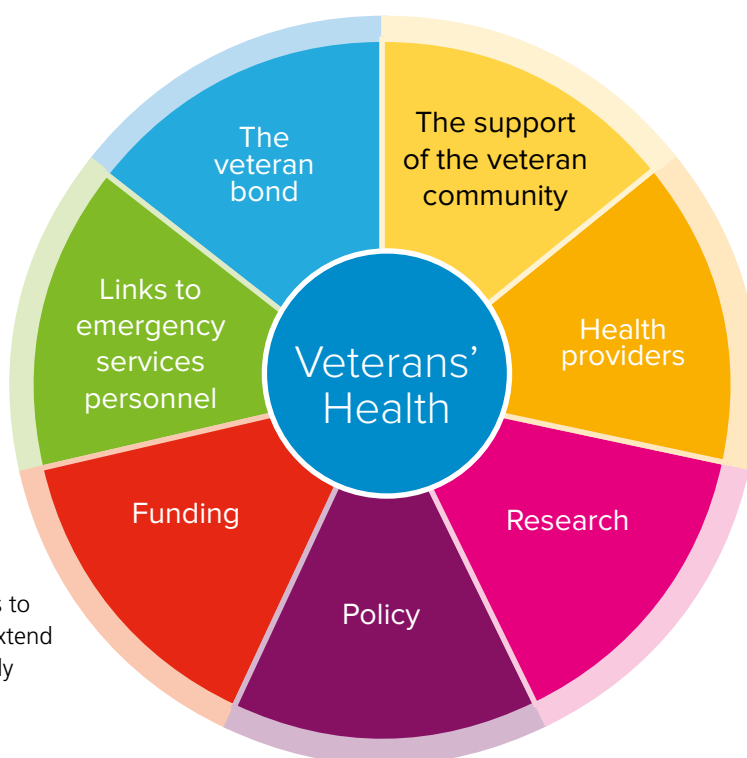
- Mark Reidy -

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Partners in Veterans' Health

The veteran bond

The first and most important relationship to recognise in the provision of veterans' health care is that of peer support between veterans themselves. The veteran bond is part of the veteran culture, and the support provided by veterans for veterans needs to be recognised and encouraged. These bonds may extend across differing generations of veterans and currently serving personnel.



The support of the veteran community

Critical to the health and wellbeing of veterans is the support provided by the veteran community, including families, carers, a wide range of recognised ex-service organisations, pastoral care and the general public. This group supports veterans and where necessary, advocates for and on behalf of veterans. The veteran community provides support and advocacy for both individuals and groups of veterans within local communities and within broader systems of care.

Health providers

The largest and most diverse group of partners in veterans' care are health care service providers, representing primary, secondary and tertiary care within government and non-government organisations. For example:

- > General Practices and primary health services within local communities
- > Allied health services in the community
- > Some ex-service organisations
- > Private hospitals and private clinics
- > SA Health public hospitals
- > SA Health community health services, including mental health, drug and alcohol and oral health
- > SA Health prison health services within the judicial system
- > DVA services such as the Veteran and Veterans Families Counselling Service (VVCS)
- > Non-Government organisations
- > ADF Health and community services for currently serving members

The veterans' health online portal, available at <http://www.sahealth.sa.gov.au/veteranshealth> provides up to date links and information on a range of health services for veterans.

Research

Veterans' health research has the potential to improve health outcomes in both the short and longer term and helps us to understand veterans' health needs. More effective policies and programs can be developed by understanding the impacts of service. The translation of research into practice and the continuous review of services to reflect evidence based care improves the quality of care provided to veterans.

The Department of Defence and DVA are currently funding the largest and most comprehensive study undertaken in Australia to examine the impact of military service on the mental, physical and social health of serving and ex-serving ADF personnel and their families. The Transition and Wellbeing Research Programme, led by the Centre for Traumatic Stress Studies at the University of Adelaide, consists of three studies: the Mental Health and Wellbeing Transition Study, the Impact of Combat Study, and the Family Wellbeing Study.

Policy

The strategic policy direction of veterans' health care is led by both the State and Commonwealth Governments.

The SA Government's role in veterans' health is led by the Minister for Health, the Minister for Mental Health and Substance Abuse and the Minister for Veterans' Affairs. The Ministers are supported by:

- > VHAC, who provide advice to the Minister for Health and the Minister for Mental Health and Substance Abuse on matters relating to veterans' health
- > Veterans' Advisory Council (VAC), who provide communication between the veteran community and the SA Government for matters relating to the wellbeing of the veteran community
- > Veterans SA, which provides South Australia's veteran community with a central contact point for information about the State Government's services to veterans
- > SA Health, which manages the public health system in South Australia, including both public hospitals and community health services.

DVA has a significant role in the development of health policy for veterans, due to their broad role in supporting veterans by maintaining and enhancing the financial wellbeing and self-sufficiency of veterans; maintaining and enhancing their physical wellbeing and quality of life; and acknowledging and commemorating those who served. For example:

- > DVA's Veterans' Mental Health Strategy 2013-2023 was released on 27th May 2013 and provides a ten year framework for mental health care in support of current and future veterans and their families.
- > DVA's Social Health Strategy 2015-2023 for the Veteran and Ex-Service Community aims to improve the community's quality of life, achieved through preventing illness where possible, fostering social connectedness and enhancing health and wellbeing.

The Commonwealth Government has also established the Prime Ministerial Advisory Council on Veterans' Mental Health to advise the Prime Minister, the Minister for Veterans' Affairs, and the Government on high level strategic and complex matters relating to the mental health of veterans and their families.

Funding

Funding for veterans' health care is provided through a combination of Commonwealth and State Governments, and private sources such as private health insurance. For veterans with DVA entitlements who elect to be treated as DVA patients, health care is funded by DVA.

Veterans may choose to be treated as public or private patients in the public health system, under which services are funded by State and Commonwealth Governments, as well as private health insurance.

Veterans may also choose to be treated as patients in the private sector in Australia. This system of private hospitals, medical practices and pharmacies is owned and operated by individual private organisations and supported by private health insurance, Medicare and individual patient contributions.

Across both the public and private sectors, eligible veterans may have entitlements provided by DVA. There are different levels of eligibility for treatment benefits, but all entitlements are for services provided under the Repatriation Health Care system and funded by DVA.

Links to emergency services personnel

Emergency services personnel are people in our community who work for emergency services, such as police, fire and ambulance officers. It is commonly accepted that exposure to significant, often repetitive, deeply traumatic events in the course of their duties results in patterns of mental health presentation for emergency service personnel that is similar to those of veterans. Given this similarity, the development of a mutually supportive relationship between the veteran community and emergency service personnel would improve health and wellbeing opportunities and outcomes throughout South Australia.

The Veterans' Health Context

Capturing Information

When service personnel are discharged, the ADF ceases collecting information on them. Veterans may then be identified through the DVA system which captures those with a DVA entitlement. This system is limited because it only captures veterans at the point at which DVA have accepted responsibility for meeting the cost of health services provided to veterans. Identification of veteran status is not routinely captured by public or private health service providers, making it impossible to analyse the large amounts of information with regard to veterans. Where information on health service usage by veterans is captured, it is not linked or shared extensively between health providers, funders or policy makers and therefore cannot be used for service planning.

As such, information provided by DVA is currently the only reliable source of information related specifically to the health care provided to veterans. DVA information related to healthcare costs of veteran's and ex-service personnel are currently measured using treatment population statistics which captures only approved gold and white card services. Only accounting for DVA information can mean the conclusions we make about prevalence, utilisation of services, and other patient characteristics may be biased. Analysing this information provides us with a general picture of the health care needs and usage patterns of veterans, noting that the limitations will mean our analysis may not truly represent the breadth of veterans' health care needs.

The changing demographics of veterans

Figure 1 provides a snapshot of the current DVA treatment population in South Australia and nationally. The older cohorts of veterans, which is inclusive of World War I and World War II service personnel and their dependants, still represent the largest group of DVA entitled veterans.

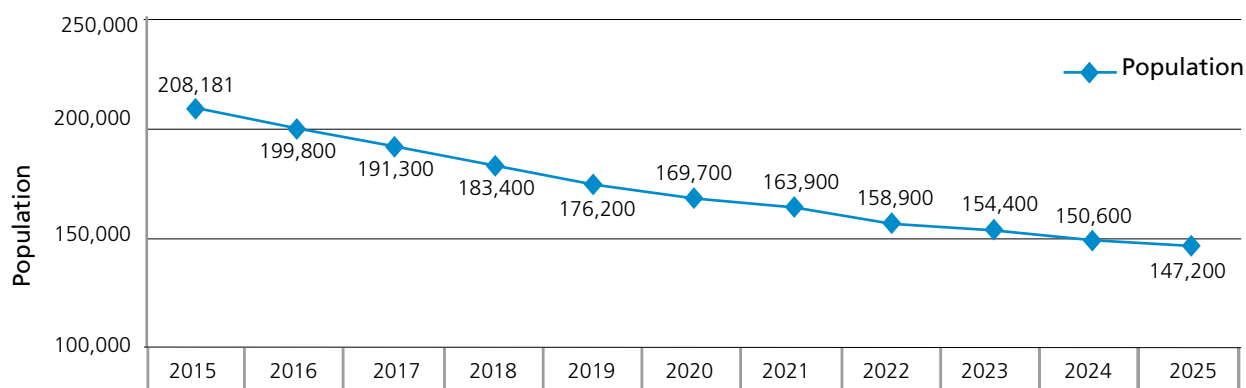
FIGURE 1: DVA TREATMENT POPULATION BY STATE/NATIONAL AND AGE GROUP AS AT 01 JANUARY 2016

	SOUTH AUSTRALIA	NATIONAL
UNDER 30	239	3,605
30-39	350	6,157
40-49	679	11,816
50-59	1,230	18,258
60-69	3,496	41,149
70-79	2,128	30,371
80-89	3,303	45,256
90 & OVER	4,090	47,393
TOTAL	15,515	204,008

Source: DVA Treatment Population Statistics Quarterly Report December 2015

Overall the total veteran population is changing, with total numbers of DVA entitled veterans expected to decrease steadily over time, as shown in Figure 2.

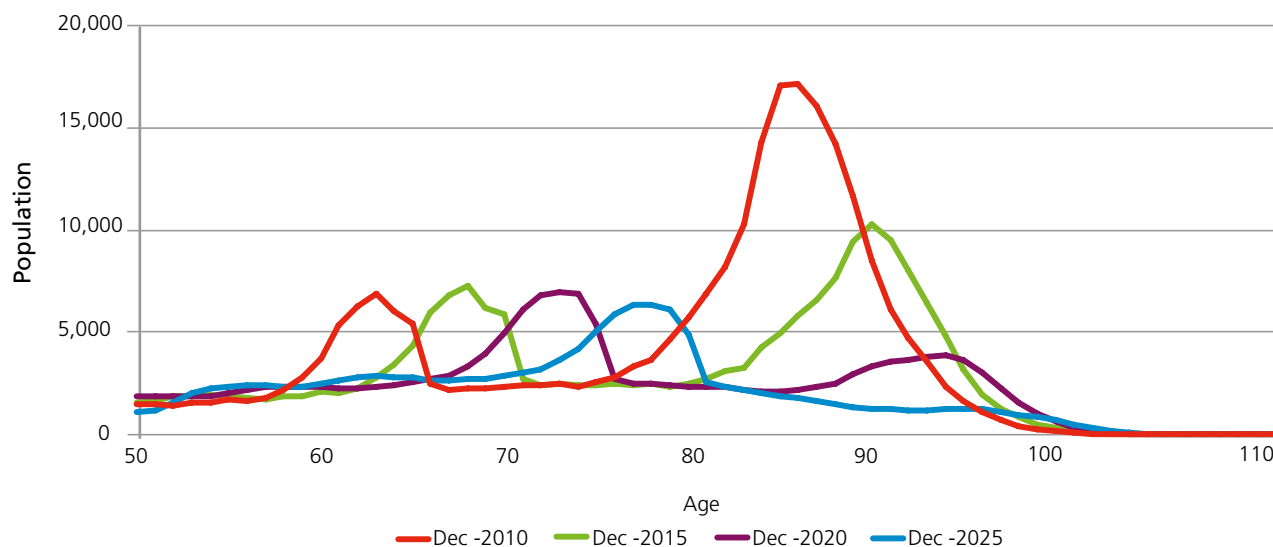
FIGURE 2: TREATMENT POPULATION PROJECTIONS AS AT 31 DECEMBER 2015



Source: DVA Treatment Population Statistics Quarterly Report December 2015

The profile of veterans within the total veteran population is also changing. The graph in Figure 3 illustrates the expected change in the distribution of the age of the veteran treatment population nationally. By 2025, the cohort of veterans inclusive of veterans who served in Vietnam and Korea is projected to become the largest cohort of veterans accessing DVA entitlements. The cohort of contemporary veterans is projected to become an increasingly larger proportion of the total DVA veteran treatment population by 2025.

FIGURE 3: TOTAL DVA TREATMENT POPULATION BY AGE TREND FROM DECEMBER 2010 TO DECEMBER 2025



Source: DVA Treatment Population Statistics Quarterly Report December 2015

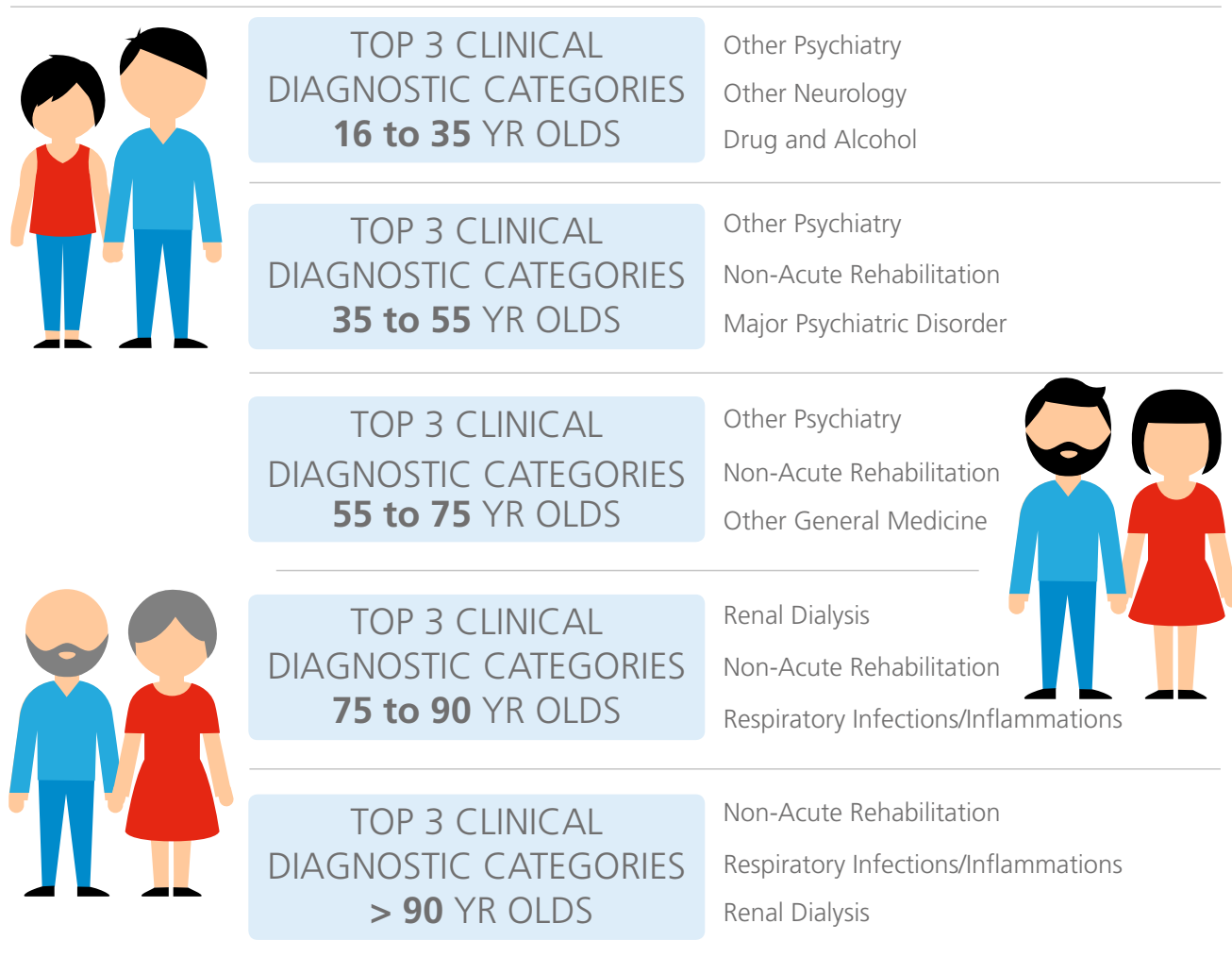
The changing health needs of veterans

While the overall number of contemporary veterans is not expected to be as high as other cohorts have been in the past, contemporary veterans will have social, health and wellbeing challenges different to those faced by the previous generations of veterans. Some of these differences may include:

- > Differing diagnoses and co-morbidities (psychiatric and non-psychiatric)
- > Lesser focus in the short term of ageing related health conditions
- > Employment and occupational rehabilitation issues
- > Young families
- > Greater focus on health needs unique to female veterans
- > Increased diversity and number of deployment experiences (including multiple deployments, mixture of peacekeeping and combat operations, full time and reserve service)
- > Diversity of entitlements
- > Differing presentations and latency of presentations

Figure 4 indicates the top three clinical diagnostic categories by age group for veterans who have been treated in South Australian public hospitals as DVA patients. The increase in mental health related needs is evident for the younger age groups.

FIGURE 4: TOP 3 CLINICAL DIAGNOSTIC CATEGORIES BY AGE GROUP IN 2013-14



Source: SA Health Statewide Patient Data 2013-14

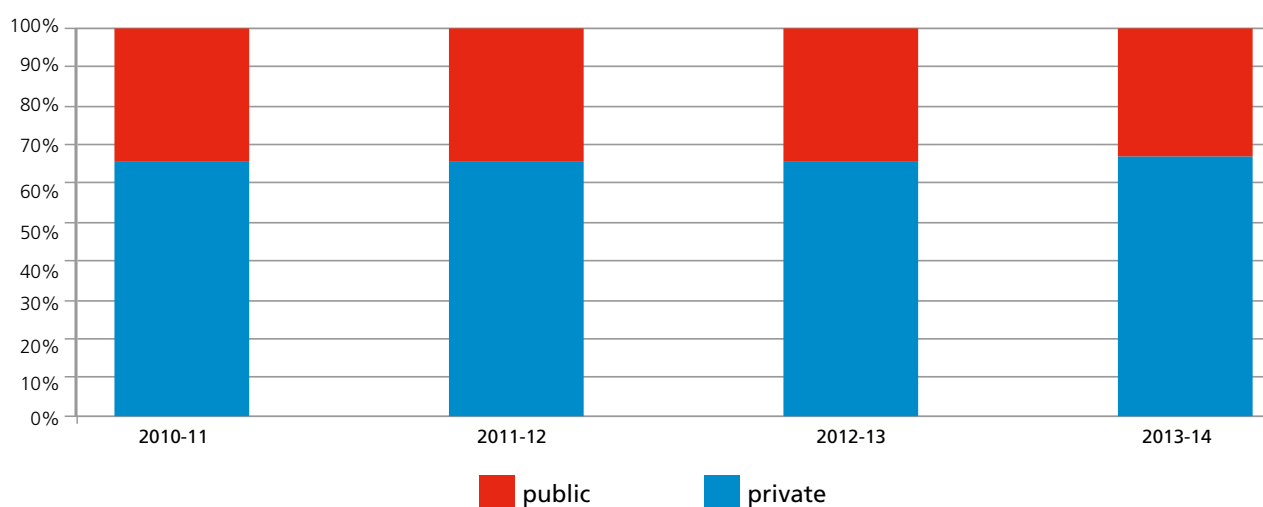
How veterans access services

Under the national health care arrangements between the Commonwealth and South Australian Governments, all Medicare eligible persons have the choice to be treated as public or private patients in public hospitals. Similarly, Medicare eligible persons are able to access a range of primary and specialist health services in the community. All Medicare eligible veterans can access these health services.

A large number of veterans are also eligible for DVA entitlements. These are veterans for whom DVA has issued a gold Repatriation Health Card for all conditions or a white Repatriation Health Card for specific conditions. To be treated as DVA patient in a public hospital, a veteran must make a valid election to be treated as a DVA patient and they must be admitted for a condition that DVA has accepted as a service related condition. Card holders may be veterans or the widows / widowers or dependants of a veteran.

The ability to use DVA entitlements to pay for health services means veterans broadly access a higher proportion of private sector services than the general civilian population. Figure 5 highlights the proportions of health service use for the DVA treatment population across the public and private sectors.

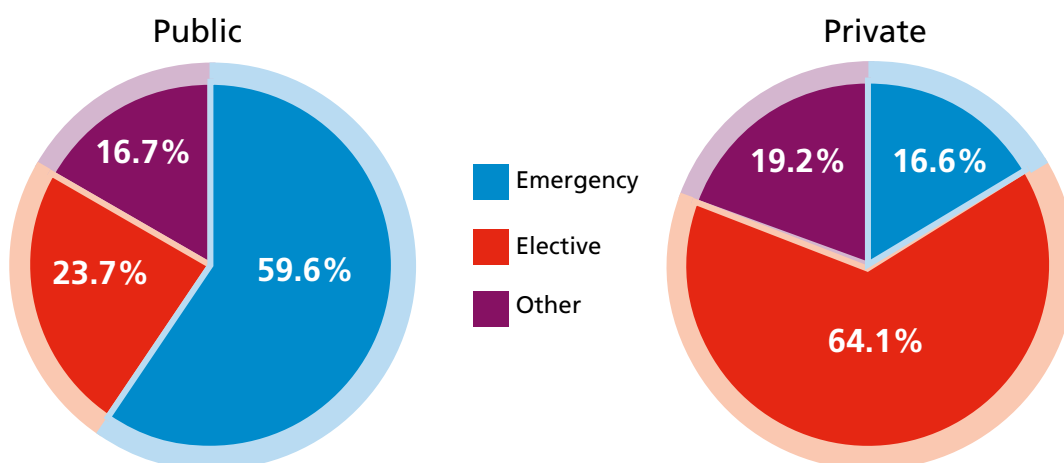
FIGURE 5: PROPORTION OF PRIVATE AND PUBLIC HOSPITAL DVA DISCHARGES 2010–11 TO 2013–14



Source: DVA Annual Report 2014-15

Figure 6 shows the comparison of the types of services accessed by DVA entitled veterans at public and private hospitals in South Australia. Public hospitals provide a higher proportion of emergency services, while private hospitals provide a higher proportion of elective services.

FIGURE 6: PROPORTION OF PRIVATE AND PUBLIC HOSPITAL DVA DISCHARGES 2010–11 TO 2013–14



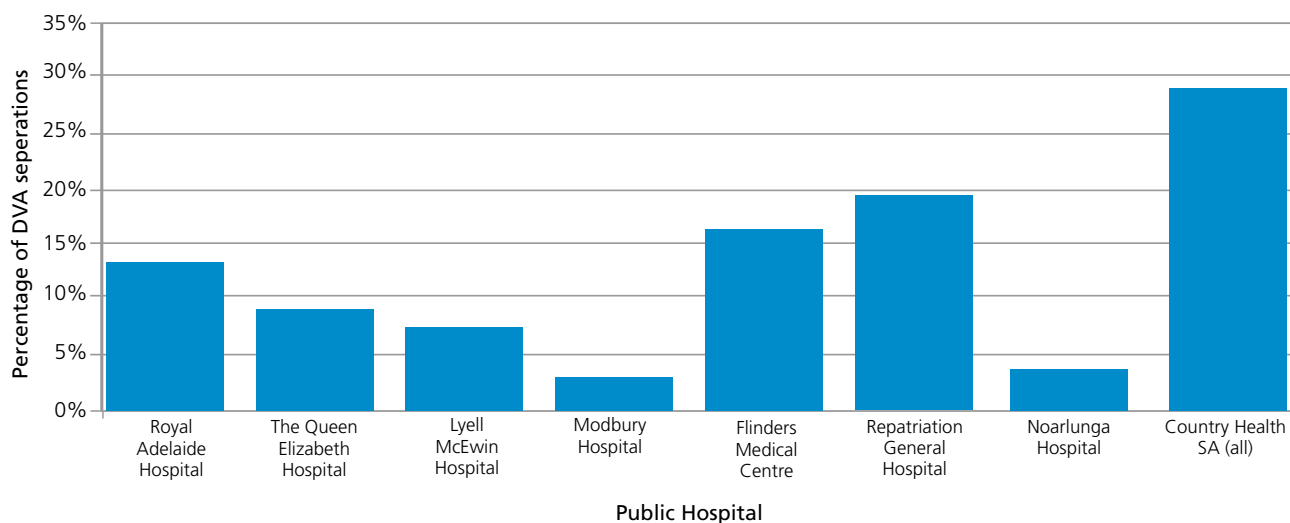
Source: Admitted Activity II Universe November 2014, SA Health Statewide Patient Data 2013-14

Changes in veterans' health care infrastructure over time

Veterans' hospitals were established around Australia in the early 1940s by the Commonwealth Government, although services were provided to veterans by the Commonwealth Government prior to this. The Repatriation General Hospital, Daw Park was built for service personnel returning to South Australia from World War II to provide support and rehabilitation for physical and mental injuries of war.

The Repatriation General Hospital, Daw Park was transferred to the South Australian Government in 1995. Veterans' hospitals in other states were either transferred to the respective state governments or to private providers. Over the last decade, SA Health has also invested significantly in capital upgrades to the State's major public hospitals. Veterans now access a wide range of public hospital services across all of South Australia's public hospital services, as shown in Figure 7.

FIGURE 7: PROPORTION OF DVA DISCHARGES BY PUBLIC HOSPITAL IN 2013-14



Source: SA Health Statewide Patient Data 2013-14

Existing facilities at the Repatriation General Hospital, such as the services currently provided at Ward 17, are housed in buildings that are incompatible with leading clinical service provision as well as contemporary health and mental health management systems. To address these issues, a new \$15 million Veterans' Mental Health Precinct is being developed, which will provide high quality facilities to match South Australia's reputation as a leader in the delivery of mental health care to veterans.

At the same time, changes in models of care have shown us that some services, such as rehabilitation, are most successful when they commence as soon as the patient is ready. Providing these types of services at sites where veterans are already accessing other acute medical care will mean better recovery and support closer to home.



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Traditions such as ANZAC Day and significant military events acknowledge the sacrifice made by many and perpetuate history in generations to come.

- Jock Statton AM -

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The Veterans' Health Transition Pathway

Improving the transition for veterans to improve veterans' health outcomes

The Veterans' Health Transition Pathway outlines the journey for veterans from active service to continued care after discharge and during civilian life. Whilst in service, the Australian Defence Force (ADF) provides health services to its members. Upon discharge and transition to the civilian community, veterans are faced with an unfamiliar and complex health system. Veterans must learn to navigate numerous public and private providers, supported by a range of funding streams. Transition out of the ADF can increase feelings of anxiety for some veterans especially in relation to losing their bonds, feeling on the 'outer' and losing their identity.

The pathway is intended to promote veteran health and wellbeing and encourage the early development of relationships between veterans and health providers. Early intervention and prevention can dramatically improve long term health outcomes for veterans.

The pathway identifies the focus of health care and expected outcomes at each stage in the transition process. The pathway also provides links to services to support and maintain veteran psychological, social and physical wellbeing. The pathway promotes culturally relevant, coordinated and networked care to best understand and meet the health needs of veterans as individuals and as a community.

Enablers to successful transition

Health service providers can contribute to the successful transition of veterans from the Defence Force to the South Australian community in many ways. Primarily, effort should be made to ensure veterans, regardless of physical or psychological changes, are not labelled or treated as victims. Instead, where possible, veterans' strengths, skills, experiences and insights may be identified and harnessed. The process of transition may also be enhanced through facilitation, connection and support.

Facilitate veteran transition through:

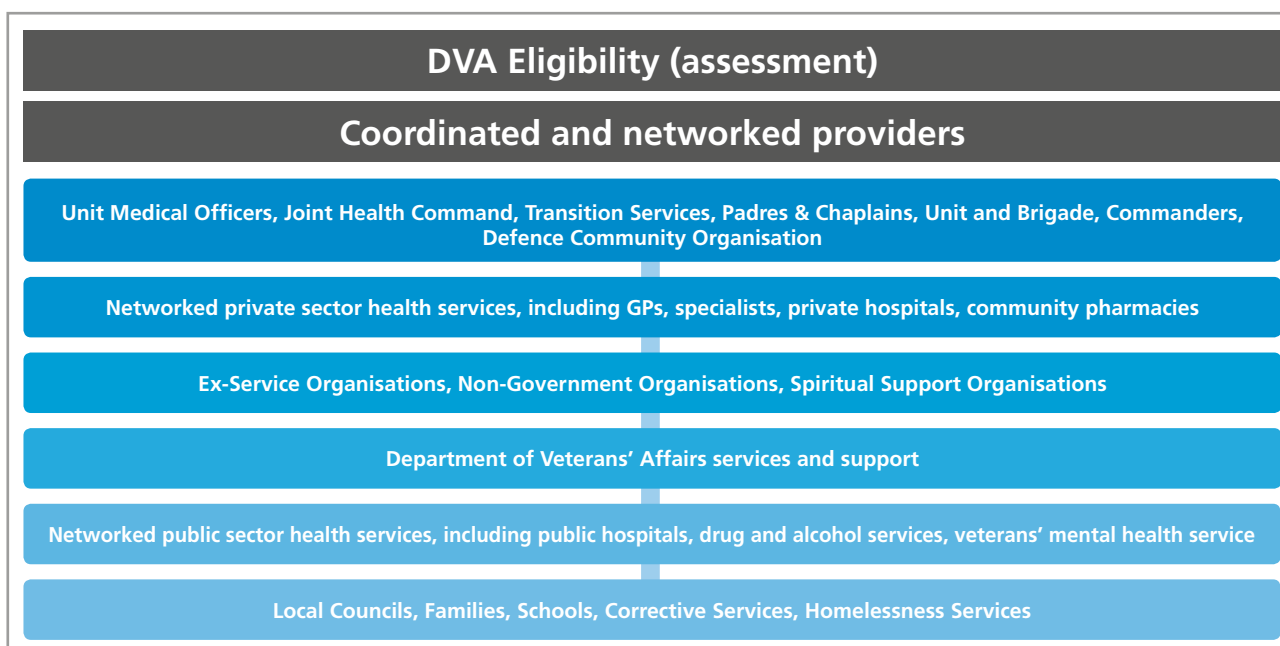
- > Informed health care choices
- > Occupational and recreational activities which have meaning and purpose
- > Opportunities for personal growth
- > Creativity

Connect veterans with:

- > Similar people, including but not limited to other veterans
- > Those who see them as 'more' than a veteran
- > Those who will facilitate growth, including but not limited to ex-service organisations

Support veterans:

- > Through acceptance
- > By attempting to understand their unique needs
- > To maintain links back to their units and/or mates
- > To spend time with their families



SA Health's Guarantee for all Veterans

SA Health is committed to improving veterans' health care through the Guarantee for all Veterans

The previous Veterans' Service Guarantee was written specifically to apply to services provided at the Repatriation General Hospital, Daw Park. The Guarantee for all Veterans will apply across all of SA Health. SA Health also encourages all partners in veterans' health to consider how they might apply the relevant aspects of the Guarantee

Providing public hospital services to meet the health care needs of veterans, including maintaining a veterans' focussed Mental Health Service

Public health care for veterans in South Australia has been, and continues to be, world class. SA Health must ensure that the state's public health system is able to maintain an excellent standard of care, while supporting the changing needs of current and contemporary veterans. SA Health must continue to build on the lessons of the past and continuously improve health services to improve the health outcomes of all veterans into the future.

SA Health will continue to maintain a veterans' focussed Mental Health service. A new \$15 million Veterans' Mental Health Precinct will be built at the Glenside Health Services Campus and is expected to be completed in 2017. This investment in veterans' mental health will ensure that all veterans who access the service regardless of age, gender or service history will receive the best possible, culturally sensitive care for years to come. The Precinct will incorporate existing mental health services from the Repatriation General Hospital, Daw Park's Ward 17 within a modern facility, designed to promote veteran wellbeing and best clinical practice. The Precinct is being developed in partnership with clinical experts including lead clinicians from Ward 17, experienced veterans' representatives, and consumers.



The new precinct will ensure veterans:

- > receive care in a quiet and safe environment
- > can spend time with family and friends in open areas
- > work with a clinical team which understands their unique journey and healthcare needs
- > are accommodated with other veterans who understand their experiences and needs

Recognising the unique needs of veterans and the veteran community, including the need for early intervention and prevention

SA Health recognises the changing profile of veterans and how the health system must adapt to meet their changing health care needs. SA Health must support a focus on transition as one way to address the unique needs of veterans and encourage the early development of relationships between veterans and health care providers. Early intervention and prevention can dramatically improve long term health outcomes for veterans. Mechanisms to allow input from clinicians into quality improvement processes will also lead to continuous recognition and understanding of the unique needs of veterans.

SA Health must support training of staff to recognise the unique needs of veterans. This includes encouraging access to tools developed by DVA and other partners in veterans' health care. Internal communications mechanisms must also be developed to encourage SA Health staff to ask every patient if they have served in the ADF. SA Health staff should understand that veterans are both men and women of various ages who have unique health requirements as a result of their service and that these unique needs should be considered in the provision of health services. Supporting staff in this way will provide an additional layer of cultural awareness of the unique needs of veterans.

Veterans' health research has the potential to improve health outcomes in both the short and longer term. The translation of research into practice and the continuous improvement of services to reflect evidence based care must be strategically driven and coordinated across all partners in veterans' health care. Strategic research objectives in veterans' health should align across the DVA's research agenda, the National Health and Medical Research Council, South Australian Health and Medical Research Institute and academic institutions.

Supporting, assisting and facilitating veterans' health care needs and where appropriate facilitating priority access to services through developing and supporting access to a statewide veterans' health advocate

The Veteran Liaison Officer currently employed by SA Health, funded by DVA and located at the Repatriation General Hospital, Daw Park plays a pivotal role in assisting veterans to navigate through the health system. Following the changes to public health services under Transforming Health, and in particular the development of the new Veterans' Mental Health Precinct, the role and functions of the Veteran Liaison Officer would be more appropriately delivered on a statewide basis. A statewide veterans' health advocate would support all veterans in South Australia through:

- > Providing a single point of contact for veterans in South Australia
- > Assisting in discharge planning for veterans
- > Assisting in navigating the health system and accessing appropriate services where eligible
- > Seeking veteran input and engagement in SA Health strategy and policy development and service planning
- > Partnering with Ex-Service Organisations and the veteran community to provides links to these services for veterans
- > Receiving, investigating and responding to feedback, including complaints, from veterans to maintain and improve services
- > Developing communications programs to provide relevant information to veterans

A statewide veterans' health advocate would be embedded within the existing consumer and community engagement systems within SA Health. Working within the existing systems will provide greater access and reach for the statewide veterans' advocate at a local level across South Australia. A statewide veterans' health advocate would also work with VHAC and refer issues to VHAC for advice.

Listening and responding to the priorities of veterans and involving veterans in decisions about services that affect them and the veteran community

Best practice consumer engagement that is based on the Australian Commission for Safety and Quality in Health Care's Quality Standards must apply within the veteran context. By engaging and including veterans in the decisions that affect them, SA Health can ensure services provided to veterans meet their health care needs. The development of a dynamic and continuous feedback system between veterans and the health system would assist in maintaining understanding of veterans' health needs over time, as well as ensuring currency in expertise and the delivery of healthcare services.

Veterans should be encouraged to take part in strategy, policy and service planning committees and forums. Organisations such as the Health Consumers Alliance of SA should promote and support veteran engagement and provide training where appropriate. The existing Framework for Active Partnership with Consumers and the Community within SA Health provides an established mechanism for improving veteran engagement. The VHAC will continue to use the Veterans' Consultative Framework as the basis for engaging broadly with the veteran community.

Upholding traditions and ceremonies which are essential for making meaning of service through collective recognition of the past as a means to create and commit to a better future

SA Health recognises the importance of the commemorative and communal aspects of veteran culture. The Chapel, Museum and the Remembrance Garden at the Repatriation General Hospital, Daw Park site have long been used for ceremony and remembrance and these will be retained for their considerable significance. In addition to the facilities at the Repatriation General Hospital site, a specific place for ceremony and reflection will be developed at the Veterans' Mental Health Precinct at Glenside Health Service Campus.

Actively incorporating the themes of past, present and future, understanding the veteran journey and recognising and supporting the importance of the social aspects of veteran culture will embed respect for the traditions and ceremonies that form part of the veteran identity. Programs of events, such as ANZAC Day, will continue to ensure SA Health's recognition of the importance of commemoration and memorialisation.

Recognising the importance of the social aspects of veteran culture, including the unique bonds forged through service

SA Health recognises the importance of the bonds shared by veterans, and encourages peer support as a valuable role in meeting the health care needs of veterans'. SA Health is committed to facilitating the interaction of veterans, in particular, where this is supported by Ex-Service Organisations and other external service providers. Public health facilities should provide opportunities for veterans to meet in shared community spaces.

Recognising the importance of identifying veterans at all points of entry to the health system

The capacity of health services to accurately identify veterans at the point of entry enables the monitoring of health service access by veterans to promote more appropriate responses. Identifying veterans early ensures that their unique health needs are considered in their assessment and ongoing care. As contemporary veterans may not fit the stereotypical image that some staff may have of veterans, SA Health must support training of staff to identify veterans.

SA Health does not currently have a consistent method for collecting information to identify veterans. SA Health confirms its commitment to using the Electronic Patient Administration System (EPAS) as a mechanism to collect information on veterans as this system is rolled out progressively across South Australia.

To gain a broader picture of the health needs of veterans, better data systems are needed to identify and capture data on veteran service usage. Linking and sharing of existing data sets would contribute towards this. The Commonwealth Government's myHealthRecord has introduced a veteran status indicator. DVA also maintains a significantly large and robust data system, noting that this is limited to services provided to DVA entitled veterans. GP Clinical Software systems may also be able to capture veterans status. Data from these systems, together with data on service provision to veterans from the homelessness and judicial systems, would assist in building a more comprehensive picture of veterans' health needs.



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The new Precinct
will provide a safe,
caring and calm
environment.
- Jennifer Dowling -”

Providing information to improve access to health services for veterans

SA Health is dedicated to supporting veterans and their families by providing the services they need for their physical, mental and social well-being. SA Health and DVA data shows that mental health-related issues, age-related conditions and chronic disease are the main services currently required by veterans.

A new SA Health veterans' online portal

<http://www.sahealth.sa.gov.au/veteranshealth> will provide veterans, their families, their communities and their health support networks (including clinicians) with information on health services available to veterans in South Australia, including:

- > Mental Health services
- > Rehabilitation services
- > Palliative Care
- > Emergency Department treatment
- > Outpatient clinics
- > Oral health

The online portal will also provide links to services provided by the Commonwealth Government and Non-Government Organisations such as:

- > Veterans and Veterans' Families Counselling Service
- > DVA's At Ease online mental health portal
- > Primary health care providers such as general practitioners, nursing and allied health in the community
- > Ex-Service Organisations

Promoting partnerships and coordinated services

SA Health recognises the essential support provided by all partners in veterans' health care. The veterans' health transition pathway also recognises the need for coordinated and networked care across a range of providers.

To promote early intervention and prevention, SA Health will build a stronger relationship with the ADF, by developing a structural connection and governance process between the ADF Transition Cell and public health system to provide information to service personnel commencing the transition process. The continued involvement of GPs and other primary health and community based health providers is also critical to promoting early intervention and prevention and improving coordinated services for veterans.

SA Health will focus on identifying health service providers who specialise in veterans' health care through the SA Health veterans' online portal <http://www.sahealth.sa.gov.au/veteranshealth>.

Work is underway within SA Health, in collaboration with key veterans' organisations, to develop a designated Partnerships Hub within the Heritage listed building located at the Veterans' Mental Health Precinct. The development of the hub will ensure continuation of the partnership arrangements currently in place at Ward 17 whilst exploring opportunities to further enhance access to non-clinical support services. This will facilitate improved access to non-clinical services that support veterans and their families.

SA Health will continue to support opportunities for veterans and the veteran community to volunteer in SA Health activities.

Supporting eligible veterans to access Department of Veterans' Affairs health care entitlements

DVA and SA Health have arrangements in place for the care of entitled veterans, war widows or widowers under the Repatriation Private Patient Scheme. If a veteran, war widow or widower has a Gold or White Repatriation Health Card and they are admitted for a condition that DVA has accepted as a service related condition, they can elect to receive hospital care and treatment in South Australian public hospitals as a Veterans' Affairs Private Patient. Veterans' Affairs Private Patients are able to choose their specialist at the hospital.

As part of the development of training for SA Health staff to recognise the unique needs of veterans, training should also improve understanding of the use of DVA entitlements in public hospitals. DVA also provide a range of other support services to veterans that SA Health staff should be aware of. SA Health staff can also support veterans by booking DVA transport if required, for those veterans eligible for it. A statewide veterans' health advocate would also play a role in facilitating communication between veterans, public health services and DVA.



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The state wide Veterans and Veterans community Liaison Officer is a single point of contact across the state for Veterans, War Widows and Ex-Service Organisations for health information, entitlement enquiries, advice and counselling. It provides a central point to resolve confusion, misunderstanding or complaints from the Veteran community.

- Warren Featherby -

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Implementing the Framework

Implementation and monitoring

The Veterans' Health Advisory Council will have oversight of the implementation of the Framework. Regular progress reports from SA Health may be sought by VHAC to monitor implementation, and specific updates on aspects of how the Guarantee is being fulfilled may be requested from time to time.

Developing the Veterans' Mental Health Precinct

SA Health is developing the new \$15 million Veterans' Mental Health Precinct at the Glenside Health Service Campus. The Veterans' Mental Health Precinct will provide mental health services for veterans in new buildings and grounds that include garden areas and a children's play area. The facility will be purpose-built and support an improved flow of clinical and non-clinical work. A specific place for ceremony and reflection will also be developed at the Precinct. Clinical experts including lead clinicians from Ward 17, experienced veterans' representatives and consumers have been and will continue to be engaged in the development of the Precinct, which is expected to be completed in 2017.

Establishing a statewide advocate for veterans' health

SA Health will work with DVA to develop the statewide veterans' health advocate role in South Australia. This role will be embedded within the existing consumer engagement structure in place in SA Health.

Leading national policy in veterans' health

SA Health, in collaboration with Veterans SA, will present to Cabinet a proposal to raise veterans' health issues at a national level, through the COAG Health Council. Initiatives that may be raised nationally include:

- a) identifying veterans at all points of entry into health and other allied systems through a national identification initiative where veteran status could be incorporated on the Medicare card with the option for the veteran to opt out
- b) agreeing to a national, shared definition of veterans across governments and the non-government sector
- c) exploring new payment models and opportunities for innovative funding partnerships with DVA and the Department of Defence
- d) exploring with the Commonwealth Government the opportunity to implement a temporary, limited entitlement to all serving members as they leave the ADF that would encourage contemporary veterans to engage with the health system early

Improving engagement with veterans

SA Health has committed to the involvement and engagement of consumers in every aspect of designing and delivering Transforming Health. Veterans' engagement will continue in the development of the Veterans' Mental Health Precinct through the Oversight Panel and five Work Groups. VHAC also plays a role in monitoring the impacts on veterans of Transforming Health and other SA Health reforms, and VHAC has mechanisms in place to engage with veterans and the broader veteran community.

SA Health will also maintain and update the veterans' health online portal, available at <http://www.sahealth.sa.gov.au/veteranshealth> as a mechanism to provide veterans with up to date and relevant information.

Encouraging partnerships

SA Health will engage with the Commonwealth Government Department of Defence and the ADF to investigate opportunities for the public health system to link into and collaborate with the ADF Transition Cell to provide relevant health information to service personnel who are commencing transition from the ADF.

SA Health will continue to support the development of the Partnerships Hub at the new Veterans' Mental Health Precinct as a mechanism to partner with and engage Ex Service Organisations and the broader veteran community"

Exploring links with emergency services personnel

SA Health will explore links with emergency services personnel, including opportunities to share learnings and identify where social and service linkages can be made between these groups.

Acronyms

ADF – Australian Defence Force

COAG – Council of Australian Governments

DVA – Department of Veterans' Affairs

EPAS – Electronic Patient Administration System

PTSD – Post Traumatic Stress Disorder

VAC – Veterans' Advisory Council

VHAC – Veterans' Health Advisory Council

VVCS – Veterans and Veterans Families Counselling Service

LEST WE FORGET



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