

PRINCESS PATRICIA'S CANADIAN LIGHT INFANTRY



VOLUNTEER PATRICIA PROGRAM

HANDBOOK

OCTOBER 2008



FOREWORD

This Handbook reflects another evolution in our ongoing experience in providing VPP support and information to retired and serving members of the Regiment. We continue to bring the VPP into line with the extensive changes implemented by the Canadian Forces (CF), Department of National Defence (DND) and Veterans' Affairs Canada (VAC).

We are all well aware that the Regiment remains engaged in overseas operations. An unfortunate reality of this engagement is that the Regiment will continue to sustain casualties. Death, serious wounds and operational stress injuries - the hidden wound, will affect serving members and their families in life-altering ways. Regimental Headquarters, through the regimental Veterans' Care cell, is now monitoring over 140 such casualties across Canada. We are now reaching the point where casualties and their families will begin the transition from service to civilian life. For many this transition will inevitably involve the move away from major garrison areas and their associated support systems. Indeed, there are currently serving members who are convalescing in locations across the country, far removed from their parent units.

Our soldiers need to know that they have and will continue to have the full support of the entire Regimental family, in the field and here at home. We initially assumed that our Branches in Alberta and Manitoba would be the ones called upon for support based on their proximity to the Regiment's garrisons. So far our experience has indicated that this is not the norm. The cases involving serving members that we have been involved with have been with members who are serving or convalescing away from their parent unit. It is expected that this trend will continue and all Branches of the Association can expect to be called upon to provide support. The continued success of the VP Program rests with Branches, specifically with Branch volunteers.

The National Director and Facilitator will continue to provide policy guidance, assistance as and when needed and will coordinate volunteer training as necessary for volunteers. However, the actual program rests with the Branches.

This Handbook has been revised to help Branches help others with the minimum of outside involvement. It supersedes the 2006 Handbook and is effective on receipt. It is intended to be both a Standing Operating Procedure for the VP Program and an aide memoir for volunteers. It is also available on the Association website for other interested parties.

Questions on the intention and content of this Handbook should be directed to the Association Vice-President East.

Dave Pentney
Vice-President East
PPCLI Association

TABLE OF CONTENTS

What Section	Page	What's There
Foreword	2	Introduction by Association Vice President East
TOC	3	Table of Contents
Part 1	4	Overview and Governing Principles
Section 1	4	Introduction
Section 2	5	Who we Help – Our Clients
Section 3	5	VPP Principles and General Guidelines
Section 4	6	A Simple Process
Section 5	7	RHQ-VPP Coordination
Section 6	7	Our Responsibilities as Canadian Citizens – Duty and Standard of Care
Section 7	8	Privacy
Section 8	9	Assistance Policies
Section 9	10	Public Affairs
Section 10	11	The VPP Handbook
Part 2	12	Organizations and programs that support Veterans and Their Families
Section 1	12	Introduction
Section 2	12	Supporting Departments and Agencies
Annex A	16	Veterans' Support Programs
Part 3	20	Policy and Guidelines for Support to Retired Veterans
Section 1	20	Introduction
Section 2	20	Listening, Assessing, Referring
Section 3	23	Problems Between the Cracks
Section 4	26	Risks
Section 5	27	Crises
Part 4	29	Guidelines for Support of Serving Soldiers and Their Families
Section 1	29	Introduction – Supporting our Units and Soldiers
Section 2	29	Casualty Protocols
Section 3	30	Casualty Administration – Lessons Learned
Section 4	31	VPP Assistance
Section 5	32	Mental health
Section 6	32	Operational Support
Part 5	33	VPP Structure and Administration
Section 1	33	Organization, Volunteering and Training
Section 2	35	VPP Job Descriptions
Section 3	36	Monitoring and Reporting
Section 4	37	VPP Administration
Annex B	39	VPP Job Descriptions

VOLUNTEER PATRICIA PROGRAM HANDBOOK

PART 1 – OVERVIEW AND GOVERNING PRINCIPLES

Section 1 - Introduction

Veterans' Care in the Regiment

We are our brother's keeper. Whether a wounded or injured serving soldier, a long-retired veteran, a widow or family member, the Regiment owes each a Duty of Care. This care bonds the Regiment together. It keeps the faith with those who have served in its ranks and who have contributed to the peace and security Canadians enjoy. Governments provide programs and benefits, but only comrades and effective caregivers can deliver assistance that really works. This in turn gives soldiers, retired veterans and their families the assurance that as they face challenges in their lives the Regiment will be there to help. This assurance is particularly meaningful to young soldiers who face a determined enemy.

Who is Involved?

Veterans' Care is the responsibility of all members of the Regimental family. Since 2004, the Regiment has developed a framework of support to meet both the demands of our current operational tempo and the aging of our retired members. This framework reflects the rapid developments in veterans' support within the Department of National Defence and Veterans' Affairs Canada and the Regimental response to these changes. The Regimental care framework has three components:

1. **Units.** Recent changes in DND and CF policies have placed the responsibility for support to serving soldiers squarely on the lap of unit commanding officers. This responsibility extends beyond posting to a holding list and even medical release. Given their heavy responsibilities to train for and conduct operations, part of this burden is being taken on by Regimental Headquarters.
2. **Regimental Headquarters (RHQ).** In the autumn of 2006, the Regiment established a Veterans' Care cell within RHQ to provide support to units and individual casualties and members in need of assistance. The Regimental Veterans' Care (RVC) cell performs these functions:
 - Provides information on veterans' support programs on the ppcli.com website,
 - Maintains a library of information and brochures for individual soldiers and units,
 - Assists units by training and advising Assisting Officers and other casualty support personnel,
 - Acts as a contact point for any veteran or family member seeking assistance from the Regiment and refers them to the most appropriate program or agency,
 - Maintains a data base of casualties,
 - Ensures the Colonel of the Regiment and the Colonel in Chief are informed of the welfare of members of the Regimental family,
 - Organizes events related to Regimental veterans and casualties,
 - Receives, disperses, secures and accounts for funds collected to support Regimental veterans,
 - Provides feedback and information to CF and other care-giving agencies on the effectiveness of their programs, and
 - Provides assistance to any veteran searching for personal or operational documents or finding witnesses to past events.
 - Coordinates support to veterans using Regimental resources including VPP volunteers.
3. **PPCLI Regimental Association.** The Association's Volunteer Patricia Program (VPP) supports retired and retiring members of the Regiment and their families who need assistance adjusting to changes in their lives and in obtaining support from professional caregivers. The VPP may also assist in the support of units and serving personnel at the request of a unit or RHQ or as a local initiative. The program has been established under Article III.1 of the Association's Constitution *'to foster and maintain the spirit of the Regiment, circulate information regarding the Regiment amongst its members, perpetuate the close bonds of comradeship, mutual regard and esprit de corps amongst all ranks formed whilst serving in the regiment by assisting members, including serving members of the Regiment, widows and children of deceased*

members, when and where social assistance is not available'. The VPP is branch-based and acts as the Association's action arm. The VPP:

- Provides information and referral services to veterans and to their families and survivors and referring them to the most appropriate program or agency,
- Investigates requests for support, gathers information, and finds witnesses and documents to support a request for support from a third party,
- In the absence of other caregivers, provides direct assistance to veterans and their families who are in need,
- Sponsors fundraising activities,
- Stands ready to provide morale and material support to units in operations, assistance to rear parties and families, and assistance to units in delivering humanitarian support to local populations and
- Assists serving soldiers at the request of a unit or RHQ.

The VPP organization and job descriptions of VPP volunteers are contained in Part 5.

Section 2 – Who We Help

Eligibility

All members of the Regimental family will be supported as well as other serving or former members of the CF who have served with the Regiment. In cases of doubt as to eligibility or for extension to these guidelines, the circumstances will be forwarded to VP East for decision.

Who Our Potential Clients Are

While the core clients of the program are casualties and their families and retired veterans in need of assistance, the scope of veterans' care in the Regiment extends to those who may be in financial difficulty, having administrative or family problems, are imprisoned or who may be in other difficulties.

Casualties most likely to require the assistance of RHQ or the Association are those who are extra-regimentally employed, in medical care or on the Service Personnel Holding List (SPHL), and without the strong support units provide.

Meeting Member Needs

For our members at any stage of their lives the Regiment assists by:

1. Providing information to units, individuals and VPP volunteers on support programs through the www.ppcli.com website, through brochures and advertising and through personal contact with branch and national volunteers.
2. Referring clients to CF, VAC and other agencies with programs aimed at identifying and resolving their problems and ensuring support that they require is provided.
3. Assisting members in overcoming obstacles and crises on a one-to-one basis where established processes and programs are unable to help or are unavailable because of distance or other factors.
4. Providing companionship and by listening to their concerns.

Section 3 – VPP Principles and General Guidelines

Philosophy

The underlying philosophy of Regimental veterans' care is that the Regiment is a family whose members are under a lifelong bond to support one another and their families. Through this support, serving members of the Regiment draw strength, and those who are retired maintain and increase their commitment to the Regiment and to the values for which it stands.

Principles

The following principles apply to the VPP:

- The Regiment supports all who have served in or with the Regiment and to their families and survivors.
- The Regiment will complement and not replace existing care providers.
- Care provided by the Regiment will respect the Chain of Command. RHQ and the Association VPP will assist serving soldiers only at the request of the unit and will keep the unit fully informed of the status of cases, consistent with the Privacy Act.
- The VPP is a no fault and totally non-judgemental support program. No person will be denied a fair hearing and the support he or she may need.
- Support will not be denied under any of the areas of discrimination in the Charter of Rights and Freedoms.
- All members seeking support are entitled to the Duty of Care and Standard of Care expected within Canadian society under Common Law (see Section 6 below).
- Serving members must comply with CF regulations, orders and instruction.
- The PPCLI Association is responsible for the actions of its volunteers and must ensure that all necessary actions are taken and sustained to ensure a reasonable standard of care.
- All members engaged in the VPP will be volunteers who will be provided with the necessary information and guidance to accomplish their task. They will also be provided with protection should they be exposed to personal or financial risk.
- All Canadian legislation, regulations and common practice relating to privacy, access to information and security of personal information will be observed.
- Association volunteers will be entitled to reimbursement for major out of pocket expenses related to their service.
- Association branches will operate independently based on the policies and procedures contained in this handbook.

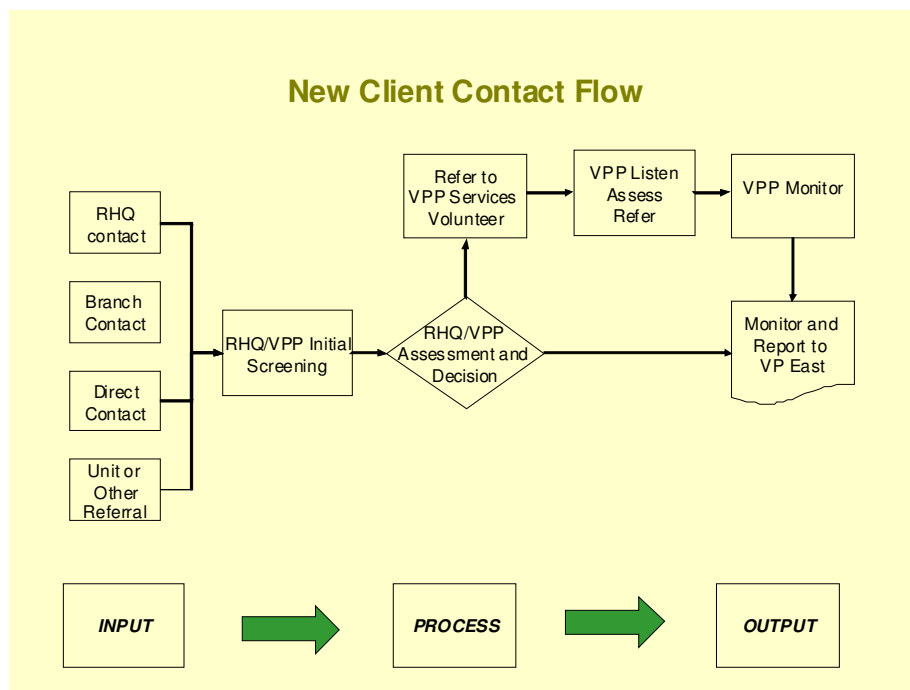
Section 4 – A Simple Process

Overview

The VPP support structure is pretty simple and adaptable. Not only are people's problems unique, but so are factors such as geography and the quality of care available. In essence, the structure is one of input, process and output. With input being the identification of a problem, process being the expression, analysis, referral or assistance of the problem, and output being a member of the Regimental family who is well cared for and confident in the future.

The Input/Process/Output Diagram

This diagram shows the three step flow.



Section 5 – RHQ-VPP Co-ordination

RHQ is one of the sources for client referral shown in the above diagram. When RHQ refers a client to a branch or volunteer, the branch or volunteer will initiate the process shown in Part 4 of the Handbook. When the situation is assessed, the branch or volunteer will provide a sitrep to RHQ/RVC cell indicating the information gathered and the action planned. RHQ should be kept informed at key points in the care process. The RVC Cell in Edmonton may be contacted at (780) 973-4011 ext 5546.

Section 6 – Duty and Standard of Care – Policy Guidelines

Overview

Recent events in Canadian society involving the mistreatment of some of our most vulnerable citizens have resulted in a revolution of regulations, policies and practices that effect every organization or individual caring for others. Regimental Veterans' Care will conform to standard practice among Canadian care-giving organizations, including those of Canadian Government departments and agencies. They are based on the common law principle that **a person is responsible for providing a reasonable level of care consistent with the circumstances.**

Definitions

Duty of Care – This is the relationship or obligations of one person or organization to another person. In particular **the obligation of one person to exercise reasonable care with respect to the interests of the other, including protection from harm.** The Duty of Care arises from Common Law as well as from municipal, provincial and federal legislation.

Standard of Care - the level or degree of care that **a prudent or reasonable person of average skill, judgment, memory and experience should be expected to exercise** in any given set of circumstances.

A Vulnerable Person – Anyone who has difficulty protecting him or her self from harm and is at risk because of age, disability, handicap, or temporary or permanent circumstances.

Position of Trust – A position occupied by a person upon whom a vulnerable individual relies upon for assistance. That includes all our volunteers dealing with a client.

Harm – Physical, emotional or mental harm caused by the actions or omissions of another, including defamation, financial harm or breaches in confidentiality.

Liability – The *duties, obligations or responsibilities imposed on a person or an organization by common law or statute*. Liability can be direct, that is on an individual as a result of an act or omission, or vicarious, in that an organization has a fundamental responsibility to ensure that its clients and volunteers are protected against harm.

Duty of Care – Our Policy

The Regiment is bound to provide Duty of Care. The policy with regard to Duty of Care is that:

- The Regiment owes Duty of Care to our members, our volunteers, and to the community as established in Common Law.
- The Association will take all measures possible to ensure that its members and VPP volunteers are protected from harm.
- VPP Volunteers will be screened according to the position of trust they hold to ensure that risks to our clients are minimized.
- Job descriptions will be prepared for every VPP volunteer position.
- VPP Volunteers will be provided with information on how to avoid harm to themselves or to members.
- Situations of great risk will be avoided by referral to professional agencies.
- VPP Volunteers will be acquainted with crisis management concepts in the event such a situation cannot be avoided.
- Vulnerable persons should be connected with professional caregivers at the first opportunity.

Standard of Care – Our Policy

The Regiment will:

- Exercise reasonable care for the well-being of its members and those others that it assists.
- Take reasonable care to protect the community from its actions and those of its members and others.
- Respect the privacy of its members and others except when the member, his family, a caregiver or members of the community are at risk from the member's actions.
- Avoid offering direct personal advice to its members and other clients.
- Refer its members and others to a professional caregiver at the first opportunity.
- Avoid slandering or defaming its clients.

In short, the best way to apply Common Law is to practice the Golden Rule by treating others as you would expect to be treated yourself.

Section 7 - Privacy

Legislative Requirements

We build and maintain people's trust in part by protecting their privacy. The serving component of the Regiment is bound by federal and provincial legislation relating to Access to Information and Privacy (ATIP). Legislation is intended to protect individuals from intentional or unintentional release of personal information that brings harm to them. Inappropriate release of personal information is counter to the Duty of Care and undermines the credibility of the Regiment and the VPP. VPP volunteers will also respect federal and provincial legislation.

Career, medical and situational (i.e., what happened to whom, where and when) information will often be required to understand and develop a situation. Access to such information held by federal government departments and agencies is governed by *The Privacy Act* and *the Access to Information Act*. These acts may be found at <http://laws.justice.gc.ca/en/P-21/index.html> and <http://laws.justice.gc.ca/en/a-1/8.html> respectively.

Requirements of the Acts

Departments and agencies are required to provide certain types of information to a requesting party subject to the limits of the Act and its supporting regulations. In DND, DAOD 1002 spells out the protocols. Personal information may be released if the request complies with Sections 3 and 8 of the Privacy Act. The Privacy Act allows a third party to obtain personal information with the written consent of the principal.

Where to Find It

Personal information is normally held as follows:

- Serving Soldiers and those in Transition. Information is held at the supporting unit or base/administrative unit. DND holds personal information for a minimum of one year after release and may hold specific types of personal information for up to five years.
- VAC Clients. Information related to VAC activities regarding serving or retired members who are VAC clients is held by VAC.
- Retired Members. Military records of retired members (retired over one year) are held by the National Archives.
- Others Cases. Social development Canada (SDC), Health Canada and the Department of Indian Affairs and Northern Development (DIAND) are holders of information that may affect individual cases. Foreign, provincial and municipal governments and non-governmental agencies may also hold such information. Given the number and complexity of such possibilities, such situations are best dealt with on a case-by-case basis.

Each of the above departments conforms to the requirements of legislation and Treasury Board regulations. DND and the National Archives have extensive departmental Access to Information and Privacy (ATIP) organizations in Ottawa. VAC Corporate Services Branch in Charlottetown runs the VAC ATIP program.

How to Get It

Experience has shown that many low level officials respond to a request for personal information with an automatic 'NO', citing privacy laws or rules of which they have only a vague knowledge. If the information is essential, ask to speak to a supervisor or to see the policy in writing. Medical information can be a particular problem, but COs can arrange protocols in advance to ensure they are aware of emerging personal difficulties by arranging for MOs to assign a temporary medical category to soldiers who may be un-deployable. This provides both an alert to unavailability and prompts treatment

To avoid negative responses or confrontation, access to people and organizations is best done informally. While each circumstance must be treated differently, the following steps are likely to occur:

- Identify the organizations that will likely hold useful information.
- Determine the role and structure of the organization.
- Identify key players in the organization.
- Identify organizational and personal sensitivities and develop strategies for handling them.
- Determine the protocols used by the organization.
- Meet with key players and describe the role of the Regiment or Association in advance so that requests do not come as a surprise and receive a knee-jerk negative reaction.
- Agree on information request protocols and release correspondence formats and requirements. These are often available on the agency website, such as those in use by VAC. See <http://www.vac-acc.gc.ca/clients/sub.cfm?source=services/pensions/orange/forms>.
- Agree to procedures for handling sensitive information.

Section 8 – Assistance Policies

Support to Individuals

Support to individuals, be they veterans, serving soldiers, family members or survivors, is the primary focus of the VPP. The Association will engage in activities that provide a sense of well being for the client and his or her family and survivors. The Association will endeavour to support its members through early and effective assistance through existing programs from the simple provision of information on support programs to comprehensive and complete support in the event other programs do not apply; an individual has been rejected by an existing program or is unable to represent his or her case effectively to these programs. Once care is in place, support then aims at ensuring effective monitoring and follow up.

Operations Support

Providing moral and material support to units in operations alleviates the stress of operations and seals the bond between soldiers and the Regiment. Providing this form of assistance requires close coordination between the unit, RHQ and the Association. Regimental assistance to unit rear parties and families can form part of the total rear party support plan.

Public Advocacy

Public Advocacy is the act of attempting to resolve a dispute by using the media and other public means to bring pressure on an opposing governmental or a non-governmental agency to change its position in favour of an individual veteran or veterans in general. The reputation and credibility of Regiment are always at risk. Association members considering this option must seek the concurrence of the Association VP East.

Personal (Client) Advocacy

Personal advocacy is the act of representing a member or client when an individual is essentially incapable of representing him or herself effectively or those efforts are rejected. RVC/VPP volunteers may act, at the client's request, as personal advocates in the context of obtaining specific program benefits and support. Such advocacy should aim at providing light rather than heat by ensuring all facts are available, assumptions are challenged and blockages are overcome in pursuit of a client's interests. Confrontation with CF, VAC, or other care providers should be avoided.

Section 9 – Public Affairs

Introduction

Effective Public Affairs (PA) strategies are essential if the goals of the VP Program are to be met. For clients, the purpose, scope and contacts for support must be known. Program credibility, objectivity and legitimacy must be established and maintained. For friendly and not so friendly outside parties, the Regiment must be seen as a cohesive, supporting family, worthy of their concern and support.

The terminology and processes described in DAOD 2008-5, Public Affairs Planning and Program Delivery will be used. The PPCLI Association is not subject to the authority of the DAOD whereas RHQ and units are so bound. Using the DAOD eases information flow and understanding with DND.

NDHQ, formations and units may issue PA guidelines for specific operations or circumstances, which must be followed. RHQ will ensure that any Association elements involved in a situation are informed of such policies.

PA activity includes all internal and external communications related to the program but excludes normal operational communications related to day-to-day activities. Thus the scope includes all brochures, announcements, activity reports to the media, the Regimental web site, briefings, symposia and similar measures. All such activity falls within the scope of the PA plan and should conform to the plan's objectives, themes and priorities.

PA Planning Environment

The PA planning environment foreseen for the next several years is one of continued support for the military offset by concern that our soldiers and veterans are not well cared for.

Target Audiences

The targets of the PA plan are a combination of internal and external audiences. The internal audiences include serving and past members of the Regiment. External audiences include the remainder of DND/CF, the media, government and the general public, Also included are supporters of the Regiment and military affairs generally who are less disinterested than the general public and from whom support is most critical.

PA Themes

The PA themes are:

1. Theme 1 - For Internal Audiences – (Serving and past members of the Regiment, their families and survivors). The Regiment is a close-knit family that supports its members while they serve and after they have left the Colours. It supports their families and survivors.
2. Theme 2 - For External Audiences – The theme for internal audiences above PLUS the message that a strong Regimental family is an effective and essential prerequisite to effective forces deployed in the defence of Canada or in support of her international goals and commitments. This family deserves their full support.
3. Theme 3 – All - To establish and maintain the credibility of the Association and the Regiment.

PA Delivery

PA delivery falls into three categories:

Category 1 – Releases on Program Activity and On Support Programs Available

There are three standing outlets for program information; the PPCLI.com website, newsletters and brochures.

Category 2 - Local Media Coverage of Regimental Veterans' Care Activities.

Media releases may be required to explain and draw attention to any local activities in support of Regimental veterans. These should be prepared in accordance with the CF media plan.

Category 3 – Responses to Crises or Complaints

Serving members or VPP Volunteers may face situations where the Regiment must respond to media inquiries that are both serious and sensitive. Such situations could include a suicide or attempted suicide, violence against others, or a threat of lawsuit because of an implied act or neglect. In these circumstances, responses should be limited to facts.

Section 10 - The VPP Handbook

This Interim Handbook provides all members of the Regimental family with the purpose, philosophy, principles, policies and procedures employed in Regimental Veterans' Care. The Handbook is available in either hard copy or electronic form. Requests for hard copies may be submitted to RHQ. The Handbook is divided into four parts.

- Part 1 describes the purpose and organizational framework of the Program as well as pertinent legal and policy guidance for both serving and retired workers in the VPP program.
- Part 2 identifies the departments and agencies involved in veterans' care and the programs they provide.
- Part 3 contains policies and guidelines for assisting retired veterans and their families.
- Part 4 contains guidance on the application of DND/CF policies and procedures for the care of serving veterans and their families.
- Part 5 provides the policies and administrative guidelines for Association members in the VPP, including volunteering and administrative support.

All members of the Regimental family are encouraged to submit their comments, suggested corrections, errors and omissions in this interim handbook to the VPP Facilitator.

PART 2 – ORGANIZATIONS AND PROGRAMS THAT SUPPORT VETERANS AND THEIR FAMILIES

Section 1 - Introduction

Overview

Part 2 of the Handbook is a resource centre VPP volunteers and all members of the Regimental family. Section 2 identifies the primary support departments and agencies and Annex A lists programs they provide for veterans and seniors.

Disclaimer

Information on departments, agencies and programs they offer has been summarized from their published material. Information published in print or on websites by the sponsor agency should be accepted as the authoritative source and not the information summaries contained in this Handbook.

Section 2 – Supporting Departments and Agencies

What's out there for Veterans

There are many federal departments and agencies providing care to Canadian veterans and their families. DND and Veterans Affairs (VAC) are the two most obvious. Provincial, regional and municipal governments provide a range of services to veterans and seniors. The challenge is to match the client with the program and refer him or her to it. This section of the handbook identifies key departments and agencies at the federal level and the principle programs they run to support soldiers and veterans. The list of programs and agencies represents the ones most commonly met, but it is not exhaustive.

Annex A is designed to allow you to identify a program area and then drill down on the appropriate website using the links shown. You can also call the agency at the number provided. The information changes frequently.

NGO Programs

There are many non-governmental organizations (NGOs), such as The Royal Canadian Legion that sponsor programs across Canada. A good website for locating NGOs is <http://www.canadian-charities.com/alpha.htm>. This website lists all charitable agencies in Canada with links to them.

DND

DND support is a combination of well-established programs and new initiatives. An extensive array of new programs has been introduced to help serving soldiers and their families and to assist those facing medical release with their reintegration into Canadian society. These new programs are well staffed and funded. Most are effective, but some are having difficulty meeting that objective primarily due to workload, the resources available and their capability, distance and loss of contact with the individual. This weakness is compounded by personnel rotations, vacant positions and hastily developed implementation plans. Consequently administrators can be either unaware of current policies or unsure of who does what.

DND has forged an alliance with VAC at the national level. The focal point for support of medical and stress (OSI) casualties and their successful transition to civilian life is The Centre located in Ottawa. This is a joint DND/VAC office providing support to serving and retired soldiers. The Centre and the Centre's regional representatives are program expeditors and are primary points of contact. All is not perfect and the two departments still remain at a distance from one another.

The DND website has a wealth of information but it is so large it is not particularly easy to use. The search engine is a document search, not a program or activity search. It may even be easier to use Google than the D-Net itself. There are three excellent references for DND casualty assistance programs. These references are:

- *Death and Disability Benefits Guide* www.forces.gc.ca/centre/engraph/ddbenefits_e.asp
- *Assisting Officer Guidelines* www.forces.gc.ca/hr/centre/engraph/aogidelines_e.asp?subject=1

- [Casualty Admin Manual](http://www.forces.gc.ca/hr/centre/engraph/coverpage_e.asp?subject=1&docid=21) www.forces.gc.ca/hr/centre/engraph/coverpage_e.asp?subject=1&docid=21

A further useful source of information is the ADM (Fin CS) website where all DAODs, QR&Os and CFAOs in force may be found. Go to http://www.admfincs.forces.gc.ca/intro_e.asp.

VAC

VAC provides benefits to veterans and their families and to serving members in receipt of a disability pension. Receipt of a disability pension under the Pension Act has been a major gatekeeper for VAC support, however under the NVC this is no longer the case. There are two branches in VAC of direct interest; the Veterans' Services Branch, which administers programs and benefits, and the Bureau of Pension Advocates, which supports appeals. District offices are located across Canada at the locations shown at this website: <http://www.vac-acc.gc.ca/clients/sub.cfm?source=contact>. Within these district offices, a client services team follows each case and each client is assigned a specific Area Counselor. A central contact number for all VAC services is now available at 1-866-522-2122.

New Veterans' Charter (NVC). The NVC was passed into law in May, 2005. These services and benefits apply to veterans who retire or apply after April 1, 2006. Veterans who retired prior to that date receive entitlements under the Pension Act and other VAC programs. The NVC or *The Canadian Forces Members and Veterans Re-establishment and Compensation Act* focuses on providing benefits and services to ensure a successful transition to civilian life. This is exactly what the VPP is about as well. While the benefit or PROGRAM elements of the NVC affect those in transition on or after April 1, 2006, the SERVICES elements apply to all veterans.

NVC – An Overview

The new suite of programs replaces existing monthly disability pensions with a package that includes lump-sum disability awards and wellness programs that will be available based on need. These programs will ensure that the public interest will be served and that those injured while serving their nation will have an opportunity to return to civilian life, prepared to participate and contribute as learners, workers and members of families and communities. The New Veterans Charter provides a comprehensive suite of programs to meet the needs of CF members, Veterans and their families. The programs include

- job placement assistance;
- rehabilitation services and vocational assistance;
- financial benefits, including
 - earnings loss benefit,
 - supplementary retirement benefit,
 - Canadian Forces income support benefit,
 - permanent impairment allowance; and
- disability, death and detention benefits.

VAC provides separate and distinct benefits to recognize the non-economic and economic impacts associated with a service-related or career-ending injury or illness. The non-economic loss impact will be recognized by a lump-sum disability award and a death benefit. Where a lump-sum benefit is payable, clients will also have access to independent financial advice aimed at assisting them with the management of the award. The disability award is paid in recognition of pain and suffering, physical and/or psychological loss, functional impairment and impact on the member's or the Veteran's overall quality of life and the impact on the lives of the member's or the Veteran's family. The death benefit is paid in recognition of the loss of the member's or the Veteran's life; the resulting loss of guidance, care and companionship; and the impact of the member's or the Veteran's death on the functioning of the household. Economic loss impact will be recognized by four financial benefit programs: earnings loss, supplementary retirement benefit, permanent impairment allowance, and Canadian Forces income support benefit.

In co-operation with current CF programs and services, the Job Placement Program offers post-release job-finding support to eligible CF Veterans. The Rehabilitation and Vocational Assistance Program focuses on improving the Veterans' level of functioning and employability, fostering wellness, independence and successful re-establishment.

These programs are implemented in collaboration with other government departments and agencies involved in the delivery of similar programs. VAC's intent in delivering these new programs is to fill existing gaps in services and

benefits. The NVC bolsters the current benefit packages provided by the Service Income Security Insurance Plan (SISIP) and VAC. Most CF members who voluntarily release and later develop a service-related disability could, up to now, only qualify for a VAC pension and related health care. SISIP will continue to provide eligible medically releasing CF members with income replacement and vocational rehabilitation benefits. Under the NVC, VAC provides top-up benefits for the SISIP group, such as additional vocational rehabilitation or earnings loss benefits, medical or psychosocial rehabilitation, and CF income support.

The VAC website is thorough and includes both client information and details of departmental operating procedures. It is a complex website thus older clients may not be able to find information easily. VAC issues many brochures that provide simple explanations of programs and benefits. The VAC website remains the best source of information short of speaking with a VAC DO benefits officer or counselor. Documents that should be bookmarked for reference are:

- *The Pension Act* <http://laws.justice.gc.ca/en/P-6/index.html>,
- *The Canadian Forces Members and Veterans re-establishment and Compensation Act* at <http://www.vac-acc.gc.ca>, and
- *A Guide to Access VAC Health Benefits and The Veterans Independence Program* <http://www.vac-acc.gc.ca/clients>. This is an extensive and valuable reference.

Service Canada

Service Canada has recently absorbed responsibilities for income security programs. Almost all of today's seniors receive income from Canada's Public Pensions. Basic financial support is also available to survivors and to people who become too disabled to work and to their children through the Old Age Security (OAS) program and the Canada Pension Plan (CPP).

Most seniors will be well aware of their entitlements under these programs but some may not, and a few may not be receiving their full entitlements. While the most obvious route to follow is to refer clients to the nearest Service Canada office, it may be necessary to enquire what benefits a client is receiving in order to determine what his or her problem really is. SC website is at www.servicecanada.ca.

Health Canada

The delivery of health care services in Canada is a provincial responsibility. Nevertheless, Health Canada plays a big role in collecting and disseminating health information. Its website at <http://www.hc-sc.gc.ca> contains a number of sections that are particularly useful and help find links to provincial and NGO caregivers, including healthy living, health care, diseases and conditions and health protection. The division of Aging and Seniors is also useful (<http://www.hc-sc.gc.ca/seniors-aines>, email - seniors@hc-sc.gc.ca , telephone: (613) 952-7606). The handbook *Seniors Guide to Federal Programs and Services* is an excellent guide to both federal and provincial services. It may be downloaded from the Health Canada website publications page (http://www.hc-sc.gc.ca/seniors-aines/index_pages/a_z_index_e). It contains program descriptions, contact points and websites of many support agencies and at all levels.

SISIP

SISIP provides a range of financial services for serving and retired members of the CF. The range of services has expanded since the Quality of Life study and the introduction of the NVC. The SISIP website is at <http://www.sisip.ca/en/index.asp>. It is easy to use and provides a comprehensive list of programs, benefits and other information. Offices are located at many bases across Canada where SISIP representatives work closely with VAC and DND transition support teams. Several SISIP programs are being integrated with VAC programs under the New Veterans' Charter, particularly those related to disability and rehabilitation services. Be alert to changes in this area.

Royal Canadian Legion (RCL)

The RCL is the largest veterans' based community service organization in Canada mandated by its members to care for the needs of veterans, ex service members and their families. Programs include direct assistance to veterans at the community level as well as advocacy and advisory services. The Legion's flagship in this endeavor is the Veterans' Service Bureau. The Bureau is a free service to all veterans. The RCL has a national network of

service officers who assist veterans with claims for disability pensions involving their service with those agencies or with financial problems following retirement.

Today, most Legion branches conduct seniors' programs or provide services focused on health care, home support and housing. At the national level there is advocacy for seniors' rights and their well-being.

PPCLI Regimental Programs

The PPCLI Association provides support to members of the Regimental family through two programs: the Hamilton Gault Memorial Fund Bursaries and the PPCLI Benevolent Fund.

ANNEX A – VETERANS’ SUPPORT PROGRAMS

TYPE OF SUPPORT	PROGRAM	SPONSOR	ELIGIBILITY S-Serving R-Retired F- Family A-All	CONTACT	WEBSITE	COMMENTS
Archives	Provide personal and unit histories on request (Ottawa)	L&A C	A	1 866 578-7777	http://www.collectionscanada.gc.ca/contact/index-e.html	Note privacy limits and procedures in obtaining archives.
CF Pensions	CPSA pension benefits including Supplementary Death Benefits	DND	S/R	1 800 267-0325	http://www.forces.gc.ca/dgcb/dpsp/engraph/pensionretirement_e.asp?sideaction=4&sideaction=15	Background to all CF pension benefits.
CPP	Canada Pension Plan benefits	SC	A	1 800 622-6232 or Service Canada office	http://www.servicecanada.gc.ca/en/home.shtml	Benefits vary by age and situation
Coordinated Support – The Centre	VAC/DND Centre Services (Stress, Disability, TAP)	VAC/DND	A	1 800-883-6904	www.forces.gc.ca/hr/centre/engraph/links_e.asp	
Court Martial Appeals	Court Martial Appeal Court guidelines	Fed Court of Canada	S, R	(613) 996-6795 or nearest registry office	http://www.cmac-cacm.ca/business/military_law_e.shtml	
Disability Pensions and Appeals	Pension Act (pre Charter)	VAC	A, R	1 866 522-2122	http://www.vac-acc.gc.ca/clients/sub.cfm?source=dispen	
Disability	Long –term Disability Insurance (LTD)	SISIP	S	1 800 267-6681 or base SISIP office	http://www.sisip.ca/en/Insurance_e/servingplans_e.asp	See also Vocational Rehabilitation.
Disability, Death and Detention Awards (NVC)	Disability, death and detention awards. Awards are a feature of the New Veterans Charter (NVC)	VAC	S, R	1 866 522-2122	www.vac-acc.gc.ca/clients	Must qualify for NVC benefits.
Disability claims and appeals	Claims and Appeals Support services	RCL	A	1 (613) 591-3335	http://www.legion.ca/asp/docs/serv_bur/dis_pens_e.asp	Legion Service Bureau
Dismemberment	Injured Military Members Compensation Act	DND	S	1 800-883-6904	http://www.dnd.ca/hr/centre/engraph/ad_e.asp?subject=1	Compensation for loss of limb on duty.
Education	Hamilton Gault Memorial Fund bursaries	PPCLI	A	(780) 973 4011 Ext 5453	www.ppcli.com/support	
Emergencies	Veterans’ Assistance Service	VAC	A	1 800 268-7708	http://www.vac-acc.gc.ca/clients/sub.cfm?source=forces/assiseve	Emergency and off hours support for personal problems, substance abuse stress and similar situations
Emergencies	Member Assistance Program (MAP)	DND	A	1 800 268-7708	http://www.forces.gc.ca/health/services/engraph/member_assist_program_home_e.asp	Emergency and off hours support for personal problems, substance abuse stress and similar situations.

TYPE OF SUPPORT	PROGRAM	SPONSOR	ELIGIBILITY S-Serving R-Retired F- Family A-All	CONTACT	WEBSITE	COMMENTS
Family Support Services	Military Family support program (MFSP)	DND	S, F	(613) 992-1327 or local C/MFRC	http://www.cfpsa.com/en/psp/dmfs/about.asp	C/MFRCs run a range of family support services and programs.
Personal Finance	Financial Planning Assistance	SISIP	A	1 800 267-6681 or base SISIP office	http://www.sisip.ca/en/Planning_e/index.asp	Useful in conjunction with disability award.
Financial	Financial Counselling	SISIP	S	1 888 753-9828 or base SISIP office	http://www.sisip.ca/en/Counseling_e/index.asp	
Financial Assistance	CF Personal Assistance Fund (CFPAF)	SISIP	S, R	1 800 267-6681 or base SISIP office	http://www.sisip.ca/en/Cfpaf_e/index.asp	Grants, loans
Financial Assistance	CF Contingency Fund	DND The Centre	S,R,F	1 800-883-6904	http://www.forces.gc.ca/centre/engraph/css_e.asp	Emergency grants
Financial Assistance	Family Visitation Fund	DND The Centre	S,F	1 800-883-6904	http://www.forces.gc.ca/centre/engraph/css_e.asp	Family travel to or from isolated locations to hospitals
Finance	PPCLI Benevolent Fund	PPCLI	A	(780) 973 4011 Ext 5453	www.ppcli.com/support	Loans or grants Retired members must be Assn members.
Finance	Hamilton Gault Memorial Fund student bursaries	PPCLI	A	(780) 973 4011 Ext 5453	www.ppcli.com/support	Loans or grants. Retired members must be Assn members.
Funerals	Funeral Expenses	DND	S	1 800 883-6094	http://www.forces.gc.ca/centre/engraph/ddbenefits_e.asp	
Funerals	National Military Cemetery	DND	A	1 800 883-6094	http://www.dnd.ca/hr/nmc-cmn/engraph/home_e.asp	
Funerals	Last Post Fund – Funeral costs.	VAC	R	1 800 465-7113	www.lastpostfund.ca	Means test applies.
Grievance Appeal	CF Grievance and Appeal process	DND	S	1 877 276-4193	http://www.cfqb-cgfc.gc.ca/english/View.asp?x=1	
Health	Health Care services – Spectrum of Care	DND	S	Base Surgeon or The Centre	http://www.forces.gc.ca/health/engraph/services_e.asp?Lev1=1	
Health	Health Care program	VAC	S, R	1 866 522-2122	http://www.vac-acc.gc.ca/clients/sub.cfm?source=services/healthcare	Serving members receiving benefits under the Pension Act
Health Travel Costs	Veterans health services	VAC	S, R	1 866 522-2122	www.vac-acc.gc.ca/clients	
Job Placement Assistance	Non medically released job placement assistance.	VAC	R	1 866 522-2122	www.vac-acc.gc.ca/clients	
OAS	Old Age Security Pension	SC	R, F	1 800 622-6232	http://www.servicecanada.gc.ca/en/home.shtml	
Operational Stress	Peer Support program	DND	A	1 800 883-	http://www.osiss.ca	Social support to serving members,

TYPE OF SUPPORT	PROGRAM	SPONSOR	ELIGIBILITY S-Serving R-Retired F- Family A-All	CONTACT	WEBSITE	COMMENTS
Social Support	(OSISS)			6904		retirees and families.
Operational Stress Medical Treatment	Operational Stress Medical Support Centres (OTSSC)	DND	S	1 800 267-6681 or MO	http://www.forces.gc.ca/health/services/engraph/otssc_home_e.asp?Lev1=1&Lev2=2	
Pastoral Care	Pastoral Support in Emergencies	DND	A	1 800 883-6094 or 613 944-4047	http://www.dnd.ca/hr/centre/engraph/pop_e.asp?subject=1	
Penitentiary Inmate Counselling	Prisoner counselling and advocacy	JHS	A	1 (613)384-6272 or regional office	http://www.johnhoward.ca/	
Provincial, Regional and Municipal Seniors Services	Local assistance to seniors in need	Various	R, F	Various	Google the province, region or municipality and 'seniors', e.g., 'south Alberta seniors' services'	Many local services are available.
Public Service Employment	Priority for Disabled members	DND	R (medically released)	CPO or 1-800-883-6094	None	Member must have suffered a disabling injury or illness in a special duty area and be medically released and qualify for a disability pension.
Residential Care	Residential Medical Care in community care facilities or in hospital	VAC	R	1 866 522-2122	http://www.vac-acc.gc.ca/clients/sub.cfm?source=services/residentcare	Must be in receipt of VIP or disability pension.
Retirement Assistance and Training	Moving On Program includes SCAN	DND	S	BPSO or (613) 541-5010	http://www.cda.forces.gc.ca/DLM/engraph/services/movingon/civilian_e.asp	Retirement planning, education and related assistance.
Retirement Preparation	Transition Assistance Program (TAP)	DND	R (Medical released)	1-800-883-6094	http://hrapp.dnd.ca/tap/engraph/home_e.asp	Rehabilitation, job search, training, resume, talent bank
Return to Work	Return to work program – Jobs with limitations	DND	S	1-800-883-6094	http://www.forces.gc.ca/hr/centre/engraph/rtw_e.asp?subject=1	Alternative employment organized at base level.
Veterans Housing Support	Housing, home care assistance	RCL	R, F	1 (613) 591-3335	http://www.legion.ca/asp/docs/about/senior_e.asp	
Veterans Home Support	Veterans Independence Program (VIP) – grounds, cleaning, etc.	VAC	S, R, F	1 866 522-2122	http://www.vac-acc.gc.ca/clients/sub.cfm?source=services/benefits/vip	DND provides support while serving members are under treatment. VAC if pension is awarded.
Vocational Rehabilitation Services (NVC)	Medical, psychological, vocational and other rehabilitation services and financial benefits to ensure effective transition to civilian life	VAC	A	1 866 522-2122	www.vac-acc.gc.ca/clients	NVC conditions on eligibility.
Vocational	Training and education to	SISIP	S	1 866 442-	www.sisip.ca	Eligible for LTD insurance

TYPE OF SUPPORT	PROGRAM	SPONSOR	ELIGIBILITY S-Serving R-Retired F- Family A-All	CONTACT	WEBSITE	COMMENTS
Rehabilitation Services (NVC)	obtain gainful employment on release			2370		
Rehabilitation Services (CF)	Vocational Rehabilitation Program for Serving Members (VRPSM)	DND	S	1 800 883-6094	http://www.forces.gc.ca/centre/engraph/vrpsm_e.asp?subject=3	

PART 3 – POLICY AND GUIDELINES FOR SUPPORT TO RETIRED VETERANS AND FAMILIES

Section 1 - Introduction

Overview

This part of the Handbook provides guidance to national and branch volunteers on what the VPP does in providing support to retired veterans and their families. Many of the policies and guidelines outlined here also apply to assistance provided to serving soldiers and those being medically released.

The support programs for retired veterans available are listed in Part 2. However the spectrum of situations members and volunteers may face is virtually endless. The guidelines in this part of the handbook are a combination of established policies and procedures for the execution of a *Duty of Care*, together with lessons learned over the past few years. This part is thus essential background reading for VPP volunteers and a useful aide memoir to refer to as a situation unfolds.

The fundamental role of the volunteer is to listen to a problem, assess its significance and refer an individual to the most appropriate department or agency support program. This sounds simple, but there are many aspects to this three step process just below the surface that can affect just how useful support can be, or how harmful an error in judgment can become. These include how to assess a situation that is unclear, how to deal with the issue of risk and how to proceed when no obvious programs are in place.

Section 2 – Listening, Assessing, Referring

Contact is made

As shown in the input-process-output diagram in Part 1, a volunteer may encounter a personal problem requiring some form of response in any number of ways. The most common are:

- Hearing about a case from a third party such as a friend or relative,
- A direct approach or call from the individual member,
- Referral from a unit of the Regiment or RHQ, and
- Referral from a care giving agency.

Opening Assumptions

When first contact is made with a client seeking guidance or assistance, volunteers must start from two assumptions:

- First, that **an appeal for assistance or information is valid until shown to be otherwise**, and
- Second, that **a request for information or assistance may mask more extensive problems** than those described at an opening discussion.

Deciding How to Respond

THE CHALLENGE IS TO DETERMINE WHETHER AN INDIVIDUAL NEEDS INFORMATION OR WHETHER HE OR SHE NEEDS MORE EXTENSIVE ASSISTANCE. FAILURE TO IDENTIFY HIDDEN PROBLEMS EARLY COULD PROVE HARMFUL LATER ON.

Meeting this challenge requires a simple process for receiving and responding to calls (emails and post being simpler by definition). This process aims at ensuring that the caller or writer who is simply requesting information is provided with prompt and effective service and that the caller or writer who may need more extensive or professional assistance is identified at an early stage. Experience has shown that some requests for information can be dealt with over the telephone. However, the majority of cases we have seen are requests from those who have been rejected by an existing program or are unable to undertake the administrative work involved in pursuing an application. Effective response requires that the volunteer be a good listener and a good judge of character.

There are three basic elements in the response process:

Listening and Screening	Assessing	Referring
Establishing communications with the member and hearing his or her story, while being alert to underlying problems	Determining how best the member's problem should be handled and by whom	Referring the member to the most appropriate program and caregiver

Stage 1 - Listening - Screening the Initial Request

The purpose of screening is to gather basic information about an individual and his or her problem. Many calls will be straight forward, such as a simple question of verifying what program might apply or responding to a member request for a phone number. Dealing through a third party increases the risk of misinformation or opinion entering the process and thus verifying what you read or hear is essential. Here are a few indicators that a volunteer may use to determine that more extensive assistance could be required and that screening should continue to uncover other possible problems:

- A client is confused,
- A client has been previously rejected by a department or agency and needs help,
- There are unspoken agendas, defensiveness, fears or aggressiveness in the client's behaviour, or
- There are a number of related or unrelated problems evident that together indicate that the client is having difficulties coping with life generally.

Stage 2 - Assessing the Caller's Situation

If a volunteer senses from the presentation of the case or from the attitude of the client that more assistance may be required, proceed to the assessment stage. The purpose of assessment is to define the problem(s) and arrive at a course of action. To complete an assessment on how to proceed, the volunteer should:

- Advise the member that their call will be returned ASAP.
- Review the screening material gathered.
- Identify the problem(s) if possible.
- Determine whether the problem(s) falls within the Association's scope of action.
- Assess whether the problem stated by the member is indicative of any other factors, such as financial need, housing, loneliness, etc.
- Determine the risk.
- Determine if more information is needed from the individual, relatives or friends and obtain that information.
- Call any agencies that have or should have been involved and get more information.
- If required, contact the VPP Facilitator or the RVCWO and obtain advice.

The outcome or course of action will likely take one of three principle directions or options below:

1. *Refer the member to a care-giving agency, such as VAC or the Legion.*
2. *Determine whether assistance is required beyond the scope of an established program and the possible nature and scope of that assistance.*
3. *Reject the call as being frivolous or without merit. The Association cannot assist the individual the substance of the case as presented, provided the client's message has been properly decoded and understood.*

Ensure your decision is based on an objective decision and that your reasoning is documented. DO NOT make decisions regarding program access without carefully reviewing the eligibility and scope of the program on the agency website. Off the cuff and erroneous information undermines our credibility and harms the client.

Rejection should only be considered if a proposal is frivolous or vexatious. That is, aimed at stirring up trouble rather than getting help. The Association may lose credibility and the support of VAC and others if it supports such claims. When in doubt, check it out with the provider or a Legion service officer. VP East should be advised on any cases recommended for rejection.

Stage 3 - Providing Information and/or Referral

If the volunteer decides to provide information or to refer the member to an agency, the volunteer should:

- Identify the program and agency best able to help.
- Determine the most appropriate source of information (call centre, web site, mail, brochure, etc).
- Identify the most appropriate geographic contact point, together with a name and phone number and/or email address
- Inform the member of the program and contact point and arrange a follow-up contact
- Log action taken and BF for follow-up action

Members may also be referred to departments and agencies the other way round; by contacting the best department or agency contact point and requesting they in turn contact the member directly. This is particularly useful with timid or confused members who are assessed as moderate or high risk. Follow up and ensure the department or agency has acted.

In summary, getting proper assistance has four components: To be successful, a client must be effective in all: If he or she is not, assistance is probably needed. These components are:

1. **KNOWLEDGE** of the support available and what is needed to get it.
2. **WILL** to pursue matters in his or her own interest.
3. **CAPABILITY** to gather the information, complete the required applications (most assistance requires some for of application).
4. **PERSISTENCE** to see the application through to success.

The VPP volunteer must assess when to step in and help things happen or be more aggressive and make them happen.

Recording Information Gathered

Accurate documentation is critical whatever the circumstances. One of the main reasons why veterans fail to gain benefits from VAC is because their documentation is poor. For all cases that are referred to an established program, a log showing the member's name, telephone number, question, action taken and follow up (if called for) should be kept.

Hints

To help provide accurate information quickly, volunteers should consider the following:

- Bookmark the program contacts shown in Part 2 in your computer and group them by department and agency. This allows fast access while on the phone (if you have cable or high speed internet).
- Keep brochures and downloads in a binder by department and agency.
- Meet your nearest VAC, Legion and Base CSU/SPHL reps. Contact them periodically to exchange information. Keep a list of the major phone contacts you have.
- Keep a file for each client in a secure area.
- Ensure that you limit access to personal information if others use your computer.
- Set up a separate email account that only you can access, such as vppcontactcalgary@xxxx.com. A holiday replacement can use this email address on his or her computer without having access to your personal mail while you are away from home.
- *Remember always that a request for information may mask a deeper problem.*

What is Advice and What Isn't?

In the VPP context, advice means telling a client what he or she must or should do, such as *'This is a lousy decision from VAC. You must appeal this one.'* This is clearly advice as the volunteer is recommending a distinct course of action. What is preferable is that the volunteer point out the options and the pros and cons, suggesting a possible or 'could do' course of action, such as: *'This VAC decision is probably not in your best interests. You could accept it or you could speak to a Bureau of Pension Advocates lawyer and ask if an appeal would be worthwhile. If you decide to go ahead with an appeal and need help finding witnesses or documents, give me a call. I'll get in touch in a couple of days to ask what you have decided to do'.* The volunteer helps the client but the decisions are the client's to make based on the appropriate professional advice.

Action Plans

Action plans identify the long and short-term outcomes expected, the priorities assigned to member needs, and the strategies to meet the desired outcomes. Plans should also include roles, responsibilities for all the parties and the time frames for completion of each element of the plan. A VPP action plan is not unlike any other plan. It should define:

- WHAT is to be done.
- WHY it is being done.
- WHO is to do it.
- WHEN it is to be done.
- WHERE it will be done.
- HOW it will be done

Section 3 – Problems between the Cracks

Problems that Don't Fit the Plan

Established programs do not cover all problems faced by veterans and their families or take time to bring to bring to bear. Some clients may feel more comfortable discussing matters with a volunteer before approaching official channels. Others may have been rejected and have 'switched off' VAC or another agency. Still others or their families may be in such a state that they do not know where or how to begin solving their problems that may have many dimensions, not all of which are open to view. They may lack knowledge, will, capability or persistence.

This list represents some but by no means all of the situations a volunteer might face:

- Death
- Serious illness or injury
- Hospitalization and health care
- Palliative care
- Unresolved grievances
- Financial difficulties
- Rejected pension claims
- Appeals for administrative release
- Disciplinary action appeals

Death

A volunteer can assist bereaved next of kin and an estate executor by assisting in funeral arrangements and in estate settlement by identifying veteran benefits and programs not normally seen by an executor. The volunteer can also provide practical help to survivors.

Funeral arrangements are the responsibility of the next of kin. DND and VAC may provide assistance. The volunteer can, at the request of the next of kin, confirm the individual's eligibility for support by reviewing the programs available and contacting the program sponsor. The volunteer may also help in protocol by providing flags, flag parties or other arrangements. If Regimental resources are not available the volunteer may approach the local Legion or ANAF Veterans branch for assistance. The volunteer should also advise the next of kin on how to seek information on Last Post Fund support for a military headstone.

Support to an executor can be critical. If one is not identified by the will, the Volunteer may assist, through a family lawyer in determining who is best placed to perform this service or what the implications of provincial law are in this case. A good guide to executors may be found at www.easywill.ca. Few executors are experienced and may not know where to look for assistance. At the request of the executor the role of the volunteer will likely be to provide advice and assistance on matters related to the member's estate that are unique to military retirees such as information on military pension entitlements to survivors, disability pensions, SDB entitlements and similar issues. In addition to financial matters, the volunteer may determine whether the estate plans to make any donations of money or memorabilia to the Regiment and if so, facilitate their transfer.

Serious Injury or Illness

In the event of serious illness, a veteran may be able to assist in problem identification and solving, but the more likely event is that the spouse or next of kin will be in charge. An executor may also be available in the event of

imminent death. The volunteer may be required to assist in resolving short-term problems or in stabilizing a situation for the longer term. These actions may include:

- Child care,
- Transportation,
- House care,
- Bill payments,
- Accommodation,
- Funeral planning, and
- Medical care.

If death is imminent, the volunteer should determine the name of the executor and ensure the will is located and available.

Hospitalization and Health Care

Volunteers may become involved if a veteran is hospitalized and has no immediate family in a position to assist. Assistance can be provided in finding medical assistance, in gathering insurance information, clothing and other elements, home security and snow clearance and similar services. This is very much a local decision.

Palliative care

Palliative care poses unique problems, particularly for veterans without immediate family. For these veterans, home closure and clearance and similar help may be needed. Visits and counseling may also be required. A Branch may be asked to help a palliative patient arrange a will and consolidate his or her assets and liabilities for ease of settlement later on. Palliative care is usually covered by provincial health insurance and supplemented by private health insurance. However additional support may be required. Counseling is normally provided through Community Services, but where these do not exist, the branch may feel it necessary to supplement the care available from community resources. Should third party resources be used at the recommendation of a VPP volunteer or branch, ensure that this party meets the requirements for screening and duty of care described in Part 1.

Unresolved Grievances

Veterans who are released may have outstanding Grievances and may ask a volunteer for support. In such cases, the volunteer should determine if in fact Grievance is still outstanding or if the veteran is simply unhappy with the outcome. For more information see the CF Grievance Board website at www.cfqb-cgfc.gc.ca. When in doubt, suggest that the veteran obtain legal advice.

Financial Difficulties

Federal and provincial programs exist to provide financial support to veterans and their families (see Part 2). Emergency loans or grants are also available through the Legion. Legion service officers are knowledgeable of all possible sources and are excellent points of contact. If none of these routes are open, contact the VP Director to determine if emergency Regimental assistance is available.

Rejected Pension Claims

Rejected pension claims normally follow the appeal and review process described at www.vac-acc.gc.ca. However, if a veteran is confused he will likely have difficulty deciding how or even if to proceed. Review the decision letter and identify why the claim was rejected. If it is for lack of information, see whether witnesses or documents can be found and get the detective work started. The Ottawa Branch can be contacted to work with the National Archives. Note that file searches require the written agreement of the veteran. There are two routes to proceed on appeals, through the Bureau of Pension Advocates or The Legion. If the veteran has already made contact with the BPA, then this route should probably be used. For advice, contact a Legion Service Officer in Ottawa at (613) 591-3335.

Appeals for Disciplinary and Administrative Release

Recently released veterans, including those who may be in or just out of penitentiary, may seek VPP assistance in appeals. In such cases the *listen, assess and refer* process applies, with referral usually being to a lawyer. VPP assistance may be provided to families, for job and house seeking and in finding witnesses and documents that would assist a veteran or his legal advisor. The no fault rule applies.

Financing Care

The costs of local assistance such as gas, parking, flowers etc are normally borne by the volunteer and the branch. Out of town travel is funded as described in Part 5. Veteran support, such as emergency loans, medical assistance, child care or palliative counseling that is not covered by existing programs or requires emergency assistance may be provided from Regimental resources. Requests for such support, identifying the situation, the funds required, their purpose, and the need for urgency, should be sent to VP East.

A branch can establish a fundraising plan for a specific veteran or purpose if Regimental funds are not available. If a branch determines that this is the best way to proceed VP East should be advised. Such fundraising will not normally be eligible for donor income tax relief without the approval of CRA. The minimum requirements to establish a fundraising plan is a bank account and a short charter that defines the purpose and governance of the fund. Here are a few hints for drafting a charter of this sort.

The Fund

The xxx Branch of the PPCLI Regimental Association establishes the xxx Fund as a pro-tem fund to support medical and related services to xxx not provided for under Federal and Provincial Legislation.

Objectives of the Fund

To assist in funding costs of treatment and related expenses for xxx and his family.

Governance

The xxx Fund is an unregistered charity formed by the xxx Branch of the PPCLI Association, but is not subject to the PPCLI Regimental Association's Constitution and By-Laws per se. The Fund will (not) be incorporated. The Directors of the Fund shall report the results of the Fund's activities to the PPCLI Regimental Association Council in xxxx when it is expected the Fund will be dissolved.

Directors.

The Directors of the Fund (3) shall be Chairman – Mr. xxxx, Director – Mr. xxxx, Secretary Treasurer – Mr. xxxx.

Meetings

The directors shall meet as and when required to establish fund policies, review progress, adjust strategies and decide on the dispersal of funds. A quorum shall consist of two directors. Records shall be kept of all decisions reached by the directors.

The directors shall serve as such without remuneration and no director shall directly or indirectly receive any profit. The Fund shall be carried on without the purpose of gain for its members and any profits or other accretions shall be used in promoting its objects. Expenses of the fund shall be expressly limited to costs incurred in receiving, securing and dispersing the funds obtained, such as banking and postage expenses. The Secretary Treasurer shall keep a record of all receipts, expenses and disbursements of the Fund.

Security of Funds

All funds received by the Fund shall be placed in a designated bank account at the xxx Bank xxx Branch.

Dispersals

xxx will advise the directors when funds are required and for what purpose. Within the funds available and considering other foreseen needs, the directors will determine the monies to be provided and prepare a cheque accordingly. The signatures of two directors will be required on all cheques. Cheques will be sent by registered mail or be hand delivered to xxx.

Remaining Monies

The directors will assess whether the objectives of the Fund have been realized. If such monies exceed the needs of achieving the Fund's objectives, they will be deposited with the Hamilton Gault Memorial Fund for

express and sole use of other Regimental casualties with similar needs not met by federal or provincial care programs.

Closure of the Fund

Once all funds have been dispersed and a written report of the Fund's activities presented to the PPCLI Regimental Association Council and to xxx, the Fund will be closed

Section 4 - Risk

Overview

This section is provided as background reading for volunteers whose judgment indicates that an element of risk may be involved in dealing with a client. Here is a brief five step tool for determining and dealing with these situations.

Five Steps in Risk Management

- Step 1 – Identify who is most likely to be at risk.
- Step 2 – Determine what risk they may face.
- Step 3 – Individual risk assessment.
- Step 4 – Avoiding risk.
- Step 5 – Dealing with risk situations.

Step 1 - Who is at Greatest Risk?

Members likely to be at the greatest risk and those that are most likely to pose a risk to volunteers and to the Association are those who are likely to carry the greatest personal burdens. They are also members who are least able to look after themselves. They are also the members most vulnerable to Association or volunteer abuse. Volunteers are at small risk of physical, emotional or financial danger.

Step 2 – The Risks They Face

Risk from Volunteer Action or Neglect

Clients may be exposed to risk of abuse, defamation or financial loss resulting from the actions of a volunteer. The level of risk corresponds to the level of vulnerability. The overall risk is slight given the nature of the Association and the background of its members. There is also a possibility of negligence where undertakings are not met or advice is given that is incorrect, thus the need to verify your referral information and to follow-up later on.

Risk of Self-Abuse

Some clients may be at risk of self-abuse, suicide, or pose a risk to other members of their family or to their community. In principle, volunteers should avoid crisis situations. Since avoidance is not always possible, volunteers must be aware of crisis intervention practices. Crisis Management is outlined later in Section 5.

Volunteer Risk

Volunteers are subject to physical or mental abuse, financial loss, defamation, legal action and similar acts by members who are unhappy with the results of the program, have grudges against the Army or the Regiment, or who are otherwise temporarily or permanently unstable. Physical abuse could occur from serving soldiers or from those who have recently been retired and are having difficulty adjusting to their circumstances. The risk from older clients is likely to be defamation or legal action from purported negligence or claims of financial loss or abuse.

Step 3 – Individual Risk Assessment

Volunteers must assess client and volunteer risk. They must assess the risk of member self abuse or the risk to the member's family and community, and the risk the member may pose to the volunteer and to the Association. This assessment is critical in determining the support the Program can provide and the protective actions needed. This requires an understanding of the individual and the circumstances that can be obtained by interviewing friends,

relatives or medical and other caseworkers. When the volunteer has a reasonable view of the risks a risk management plan can then be developed to protect all parties.

Step 4 – Avoiding Risk

Risk avoidance must be a drill. The Association will take the following measures to minimize the possibility of abuse to our members and ensure that ongoing preventative and corrective measures are in place and will:

- Identify the risk to members inherent in each volunteer job.
- Screen and interview all candidates according to the needs of the specific job.
- Conduct orientation sessions for volunteers according to the risk they may face.
- Follow up every complaint.
- Identify members who are likely to be at the greatest risk (as outlined above).

The risk of abuse or loss by volunteers or the Association remains very small. Nevertheless, protective actions are necessary. The Association will:

- Provide insurance coverage for directors and volunteers.
- Ensure communications with and support of volunteers in high-risk situations as described in Step 5 below.
- Ensure that selection and orientation of volunteers reflects the risks inherent in their jobs.
- Identify, in conjunction with other agencies, members most likely to abuse a volunteer.

Step 5 – Dealing with Risky Situations

Situations that are known to contain an element of risk but cannot be avoided require a few common sense steps to lower the level of tension and give the volunteer the ability to respond to unforeseen events. Here are some hints on dealing with these situations:

- Avoid intimate or one-on-one situations. Meetings, if held, should be in an office or another public place. If meetings in a residence cannot be avoided a witness should be arranged.
- Volunteers should have a cell phone.
- Notes of one-on-one discussions should be taken and the time, date, location and essence of the discussion recorded.
- Volunteers must avoid situations where the member becomes dependent on them for advice and advocacy. The volunteer is essentially a referral agent for the member and is neither an advisor nor an advocate.

Any threats to the volunteer, the Association, or the Regiment, including the threat of legal action, should be taken seriously. When such threats are made, contact with the client should be terminated and a report submitted to VP East outlining the situation and the actions taken by the volunteer.

Section 5 - Crises

What is a Crisis?

A crisis is a state of emotional distress resulting in a temporary inability to cope by means of one's usual resources and coping mechanisms. A crisis may have the potential to result in harm to the client, the family, the volunteer or others in the community.

Causes. Three probable causes that may lead to a personal crisis are:

- *A precipitating event.* The experience of stressful events is not in itself a crisis and is not always evident to the member but can trigger suppressed anxieties.
- *Perception of events leads to subjective distress.* Subjective distress can take the form of many feelings or emotions that often feel overwhelming or confusing for the person in crisis
- *The member's usual coping methods fail.* As long as the member's ability to function emotionally, occupationally, and interpersonally is not impaired, he/she is not in crisis.

Crisis Intervention is a process that focuses on resolution of the immediate problem through the use of personal, social and environmental resources. The goals of crisis intervention are rapid resolution of the crisis to prevent further deterioration, to achieve at least a pre-crisis level of functioning, to promote growth and effective problem solving, and to recognize danger signs in order to prevent negative outcomes.

Policy

It is the Association's policy that volunteers should refer crisis cases to the most appropriate source of help and should not attempt to resolve the problem. The volunteer must be prepared to stabilize a crisis long enough to enable other resources to be effective.

Protocol

There is no complete answer for responding to a crisis, which may come when least expected. There are guidelines, which, if followed, should help volunteers stabilize situations. These guidelines are similar to those used by DND Peer Support Coordinators. Here are seven basic steps that should be taken in advance, as the volunteer may face such situations with no warning:

Step 1 – Have a plan in hand. This includes knowing whom to call when faced with a crisis that may involve harm to the member or to others. Keep emergency numbers handy. Know who is the best placed to respond to crisis ranging from depression to suicide. Complete this table.

Problem	Who to Call	Number	Remarks
Suicide			
Murder			
Anger			
Confusion			
Stress and anxiety	MAP/VAP - Health Canada Help	1-800-268-7708	

Step 2 – Remain calm and in control. Calmness may have a balancing effect on a distraught client.

Step 3 – Try to determine the level of risk of suicide or harm to others.

Step 4 – Prioritise the needs of the member and focus specifically on those requiring immediate action. Clients may be unable to separate the important from the trivial and the sum of these may precipitate the crisis. Focus on the important and find a way to stabilize these issues by pointing the client in the right direction.

Step 5 – Don't become a rescuer or make promises you can't keep. The only assurance you can give is that you will help the member in crisis contact a professional who will be able to provide their assistance.

Step 6 – Determine with the member who the most appropriate source of help is and agree to a plan to contact that resource (either can call, but both must agree who it will be).

Step 7 – Leaving enough time for referral, follow up to assess results and if needed, repeat Step 6.

Dos and Don'ts

- Do have a crisis plan ready for when you might need it
- Do remain calm
- Do not overload the member with information or instructions
- Do prioritize needs and act on the most pressing
- Do stay focused on the high priority needs
- Do encourage the member to set aside problems that don't have to be dealt with now
- Do validate the member's fears and perceptions
- Do be supportive but do not make false promises
- Do be aware of your own stress levels
- Do be supportive and listen well
- Do focus on the member's known strengths
- Do stay in contact with the member until a referral has been made and acted on
- Do not be afraid to seek the support of others

- Do ask for help

PART 4 – GUIDELINES FOR SUPPORT OF SERVING SOLDIERS AND THEIR FAMILIES

Section 1 – Introduction – Supporting our Units and Soldiers

The focus of care for our serving soldiers and their families is the unit. Supported by programs at the departmental level and by other agencies on the base, units provides most of the material and moral needs of their soldiers. Their CO is accountable within the chain of command for the quality and effectiveness of that care. The CO is also accountable to the soldiers themselves, to the Regimental chain of command and to the legacy of the Regiment. Thus as a Regiment our services may go beyond what regulations require to meet our collective and individual needs.

From an Association perspective, our goal is to support these units, their soldiers and their families. Despite the many programs and services available, issues and situations arise that fall beyond their boundaries and where we can assist. This is nowhere more evident than in the case of wounded soldiers and particularly those who are being medically released and who are far from their parent units.

This part of the handbook addresses these issues in the following sections:

- Section 2 –Casualty protocols
- Section 3 – RHQ support to units
- Section 4 – Casualty administration – lessons learned
- Section 5 – Medical releases
- Section 6 – Operational support

Section 2 –Casualty Protocols

The primary authority and guidelines for the administration of casualties is The Casualty Admin Manual (CAM), DCSA, July 2007. This manual describes the full scope of casualty care and the responsibilities of those involved in that care. DND and CF policy and procedures are constantly being updated and upgraded. For volunteers who have not served recently, both programs and terminology have changed. This section provides an introduction to the process

Terms of Service – Universality of Service Policy

Members of the CF are currently engaged for periods of service according to their time in service, much as in the past. However, to remain in the CF, a member must meet minimum operational standards of fitness. If it is determined after an administrative review (AR) by the appropriate authority that a member is permanently unable to meet one or more of the minimum operational standards, the CF member shall be released from the CF, or a recommendation made for release, as applicable; or retained subject to employment limitations on a temporary, transitional basis. Casualties are normally given up to three years to meet this standard before a decision to release or occupational transfer is made. This policy is contained in DAOD 5023-1. The process is described more fully in the Casualty Administration Manual.

Definitions

Here are a few of the major definitions used in casualty administration.

Assisting Officer (AO)

An officer appointed by a parent unit or authority to each casualty requiring extended medical care. Duties and responsibilities include:

- Keeping the CO informed at all times;
- Being the CO's representative for all matters involving the injured member.
- Acting as injured member's immediate superior. As such, assuming responsibility for all aspects of his/her welfare,(less med); keep him/her informed of unit activities, ensure the member/family is aware of benefits to which they are entitled, services available., and to assist in procuring benefits and services as necessary.

Medical Case Manager (MCM)

MCMs are nurses located at CF bases across Canada. A case manager is assigned to each casualty requiring extended medical care. Case Managers provide access to the CF medical system and co-ordination with the civilian health care system as necessary. They also act as a liaison to various other organizations CF members may need to access. A professional Case Manager is on the medical staff to assist units in dealing with seriously injured or very seriously injured casualties.

The Case Manager's duties include:

- a. advising the Base/Formation medical staff on issues related to members and their families;
- b. providing information on programs and services;
- c. providing advice and direct assistance to the unit CO and/or the AO;
- d. assisting units in developing structures and procedures for effective casualty assistance;
- e. monitoring the effectiveness of casualty assistance and programs;
- f. providing or arranging for long-term assistance to members and families once unit obligations have been fully met;
- g. facilitating individual case management, at the departmental and interdepartmental levels.

Service Personnel Holding List (SPHL)

The Service Personnel Holding List (SPHL) is an administrative tool which facilitates support to Reg F members who are injured or become ill and are not expected to return to normal duties for a period of six months or more. The intent of the SPHL is to provide the injured or ill member the best opportunity to recover and return to normal duties, or to prepare for compulsory occupational transfer. Conversely, if a member has been notified of a pending medical release, a posting to the SPHL can be used, in conjunction with other programs and services, to prepare for release. The SPHL administers the casualty and may provide the AO. Casualties are posted to the SPHL and are no longer on unit strength.

Casualty Support Unit (CSU)

A unit with a command and control element that replaces and provides better structure than the SPHL. CSUs are currently established for Edmonton and Shilo.

Administrative Review (Medical Employment Limitations) (AR/MEL) Process

When the medical category of a CF member has changed, the Canadian Forces Health Services (CFHS) Centre medical staff will initiate Change in Medical Category form. The completion of this form may initiate a series of administrative activities with long-term significance for the casualty. The process may lead to an AR/MEL and a decision affecting the member's career and replaces the former Career Medical Review Board (CMRB).

Section 3 – Casualty Administration – Lessons Learned

Overview

Many lessons have been learned over the past few years that have an impact on ensuring care is successful. Success or failure is measured from both a Regimental and an individual perspective. In every case, we seek a win-win outcome: the individual and his family are well treated and adapt well and the bond of the Regimental family is strengthened.

Two Key Lessons – Process and People

Process is how a casualty gets the assistance he or she needs and how it is delivered to him or her. In general, the process described in the CAM appears appropriate, with the who, what and how described. The main problem is that many support programs for casualties are treated just like travel claims – as a mechanical process. There is a form, an instruction and a process. The casualty is expected to use this information and 'pull' his own support from a range of programs. In practice, casualties are in a weak position both physically and emotionally. They are ill equipped to read through, comprehend and execute complex administrative process. They need help. Casualty Management Teams, which are depicted in the CAM as being multi-disciplined, seldom are. In practice they focus on one aspect of the casualty's recovery, usually medical treatment. The AO must ensure that all other components of a casualties recovery are identified and are being addressed.

Second, it is risky to assume that processes in orders are actually understood by those who must implement them or that they are implemented as they should be. Caregivers who should visit casualties in their home may do so by telephone, administrators give advice without verifying the source material and contracted administrators or reserve replacements may lack depth of knowledge. Thus the AO must take nothing on trust and should verify what should happen against what is actually happening.

The second key factor is people. Casualties themselves are the focus. Here are some observations:

- Some casualties may be evacuated for a physical wound or injury without being screened for PTSD and mental health problems may emerge long after return that can remain untreated. Some are keen to return to duty and may hide critical personal problems.
- Some are reluctant to seek family or financial assistance or counseling as this might indicate weakness.
- Some casualties cannot get along with their medical or administrative caregivers. Faced with this situation, a casualty would rather do without support than deal with someone he neither likes nor trusts. Some casualties may have an innate distrust of some support agencies such as SISIP, VAC and the C/MFRC.
- OSI casualties may seek to distance themselves from a unit, either from sense that they have let the team down or that the team has let them down. Great care, with the input from medical and OSISS PSC caregivers, is needed to promote successful reintegration.
- Some gain their information from friends in the unit rather than from those who actually know the facts. Units should assume that casualties either have no knowledge of process (such as medical employment Limitations, Universality of Service, Vocational Rehabilitation, etc), or their knowledge is simply wrong.
- Caregivers tend to work in silos with little coordination. It is easier to force coordination on a specific case than to try to change a lifetime of bureaucratic experience.

All of these lessons underline the major break points in the recovery process: Lack of knowledge, Lack of will, Lack of capability and Lack of persistence.

Section 4 – VPP Assistance

Who Needs Help

VPP support to individual serving members may cover many situations, usually at the call of RHQ, but these two are the most likely:

- Members posted to a SPHL or CSU away from their battalion and who require extensive medical care. While medical care is usually well coordinated by the Medical Case Manager (MCM), the quality of administrative support will vary according to the skills of the AO and the knowledge, will, capability and persistence of the casualty. These can be low, and thus the VPP volunteer must develop an action plan accordingly. Assume nothing. Main points of contact are the AO and the MCM. Principle reference is the Casualty Admin Manual found at www.forces.gc.ca/hr/centre/engraph/coverpage_e.asp?subject=1&docid=21
- Members being medically released near a volunteer. There are two forms of support and assistance that the volunteer may provide.
 - Obtaining services and benefits. These change on release. The CF will normally arrange CFSA entitlements and offer Public Service Medical Insurance (highly recommended). Movement will also be arranged. The casualty **may** be provided with information on release benefits to which he may be entitled, including all VAC benefits and services, dismemberment insurance, SISIP disability insurance, CPP, vocational rehabilitation, Transition Assistance Program (TAP) and others. The CF may not help the casualty with applications however. The VPP volunteer may help overcome

barriers to knowledge, will, capability and persistence by gathering information, witness statements, forms and contacts. To do this the volunteer may require access to information as described in Part 1 (privacy). Principle point of contact is the VAC Area Counselor. Principle reference is the VAC website www.vac-acc.gc.ca.

- Resettlement Assistance. Finding housing, banking, schools and making contacts with disability assistance groups at the local level and many other areas of assistance might be needed.

RHQ will provide as much information as possible about the casualty and his circumstances. No two cases will be alike. Volunteers involved in supporting serving members must become highly knowledgeable about process and programs, and must be alert to the human factors affecting the casualty and those supporting him. RHQ should be kept aware of the state of the casualties recovery and integration into a new community.

Section 5 - Mental Health

Volunteers must be alert to changes in the mental health of casualties on the SPHL or after medical release. There is a relatively high incidence of PTSD and depression that often emerges long after physical recovery has started and when the casualty may be on his own. Casualties evacuated directly to Canada often miss screening given during the course of normal rotations. If you or the casualty's family detects a change in outlook advise the MCM or VAC Counselor without delay. Reread the sections on risk and crises in Part 3.

Section 6 – Operational Support

Support to units on operations beyond that provided by the CF can take many forms. Care packages, specialized equipment, entertainment packages, or mail. Needs may arise by observations from units, feedback from soldiers to families, or original ideas from the rear party, families or the PPCLI Association. When such opportunities or needs arise, either before or during deployment, the unit or rear party should contact the RM to discuss options. RHQ in turn will examine these options for feasibility and funding and develop a plan with the unit that involves those elements of the Regimental family best placed to ensure its success.

PART 5 – VPP STRUCTURE AND ADMINISTRATION

Section 1 – Organization, Volunteering and Training

VPP Organization

The organization for delivering services of the VPP is based on branches operating in accord with national guidelines as contained in this handbook, guided by the VP East as VPP Director and assisted by a VPP Facilitator.

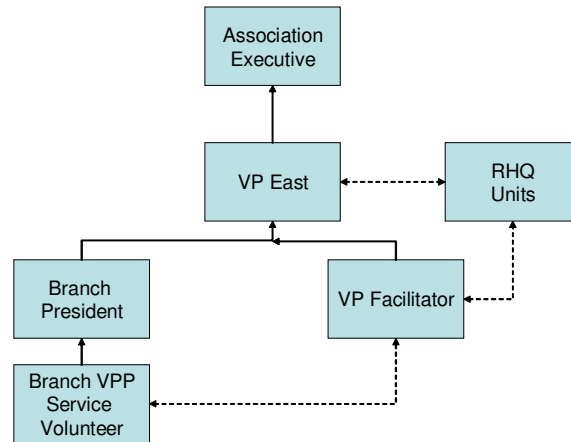
Branch Responsibilities. Veterans and families reside across Canada. The Association's branches cover many retiree areas and thus are best placed to identify problems and help solve them through local means. The capabilities of branches differ as does the likely workload. Some branches, notably those close to garrisons or in areas of many retirees, may need a number of volunteers actively monitoring and assisting members and their families. For others, a single point of contact may suffice. Each branch is free to determine how it can best contribute to the goals of the program given its resources and the immediate challenges. Branch responsibilities include:

- Identifying potential clients and screening them for risk and the support they need.
- Providing information on support programs available.
- Undertaking investigations and assisting clients in developing action plans.
- Selection, screening, and orientation of VPP volunteers within the branch.
- Advising the VP East on VPP issues.
- Helping members of the Regimental family with whatever responsible action is deemed necessary.
- Ensuring that the Association and the Regiment are not exposed to undue criticism regarding its support activities.
- Creating and implementing individual and operational support initiatives as a need is identified.

National Responsibilities. Volunteers at the national level provide two key roles: first, they provide support and guidance to branches as they implement elements of the program, and second, they ensure the interests of the Regiment and the Association are protected. Specifically, national responsibilities include:

- Setting objectives, principles and policies for the VPP.
- Ensuring that the Association's responsibilities for providing duty of care are provided for.
- Dealing with complaints of unsatisfactory service, care, or any other treatment.
- Ensuring financial support is available to cover program costs.
- Advising on the selection of volunteers for positions in the program.
- Monitoring program results.
- Representing the Association on VPP matters with other agencies and with the media.
- Preparing and maintaining the VPP portion of the RVC Handbook and other information materials.
- Keeping other agencies and units of the Regiment aware of VPP activities.
- Advising units, RHQ and branches on VPP issues.

The VPP organization chart is shown below.



Who our Volunteers are and What they Do

Volunteers are members of the Association who give their time and efforts to help others. The VPP Volunteer framework follows national guidelines published under the auspices of Heritage Canada. The duties and job descriptions of VPP volunteers are contained in Section 2. Branches are requested to advise the VP Facilitator of the names of volunteers appointed, together with their telephone numbers and e-mail addresses in order to facilitate VPP operations. A volunteer is an individual

- Who chooses to undertake a service or activity; someone who is not coerced or compelled to do this activity,
- Who does this activity in service to an individual or an organization, or to assist the community at large, and
- Who does not receive a salary or wage for this service or activity.

The rights and responsibilities of VPP Volunteers are shown in this table.

As a volunteer, I have the right to:	As a volunteer, I have the responsibility to:
<ul style="list-style-type: none"> • a clear, written position description • a carefully planned volunteer position that is worthwhile and challenging and will help me learn, grow and develop • information on the organization's mission, policies, structures and funding • an orientation session and on-going training • support from a designated volunteer or staff person • respectful treatment as a co-worker • appropriate and timely recognition • information about what is happening in the organization • be trusted with confidential information • reimbursement for approved out-of-pocket expenses where funds are available • insurance coverage while performing volunteer duties • receive feedback on the work I do 	<ul style="list-style-type: none"> • only accept a position I feel will meet my needs, skills, interests and available time • do my job to the best of my ability • ensure I understand the organization's policies, structure and mission • make suggestions, voice my honest opinion and seek honest feedback • ask my supervisor when I have a problem or question I cannot answer • fulfill my commitments • respect confidentiality, except where there is suspicion or evidence of abuse, neglect, risk of suicide, risk of murder, or where a client clearly needs help beyond that which the volunteer can provide • declare any conflict of interest, such a previous disputes with a client • treat co-workers and clients with courtesy • use my creativity and enthusiasm to enhance the quality of my organization's services

Volunteer Selection and Screening

Client Service Volunteers will be selected by branches in accordance with the Safe Steps Screening Program produced by Volunteer Canada (www.volunteer.ca). The Volunteer Canada program provides an easy-to-use method for ensuring that the people we serve are safe. Not all volunteers must go through every step, as not all will be exposed to risk. The 10 Safe Steps are:

1. Determine the risks to clients and the volunteer and assess what is required
2. Write a clear position description (below)
3. Establish a formal recruitment process
4. Use an application form
5. Conduct interviews
6. Follow up on references
7. Request a Police Records Check
8. Conduct orientation and training sessions
9. Supervise and evaluate
10. Follow up with program participants

Volunteer and Client Risk

The Association is responsible for the actions of its volunteers deployed across the country. There is an implicit risk both to clients and to volunteers. The Regiment and the Association and its officers also bear fiduciary risk. The approach we take to these risks must provide a reasonable balance between the need to help deserving veteran's and their families while protecting the interests of the Association and our volunteers. The risk management approach must be based on good common sense and the expectation that those involved with VPP act in a reasonable manner.

Risk is always with us when we are involved in a personal contact situation. The more involved a case is the more likely problems may occur. Setting up a website or writing a brochure is obviously less risky than interviewing a soldier with an operational stress injury, or a widow who faces severe financial or emotional problems. Risk analysis is essential in assessing clients.

Volunteer Recruitment Process

National Positions. Volunteers for national positions such as the VPP Facilitator will be recommended by branch presidents.

Branch Positions. Given the risk considerations, volunteers providing Case Management and Comprehensive Services must be carefully selected by Branch Executives as outlined above.

Orientation and Training. Volunteers will be provided with orientation and training according to the needs of their position. Initial orientation will be in program information (programs run by departments and agencies, contacts, etc), VAC Case Management processes, communications and interpersonal relationships and crisis intervention. Enrichment course may be provided from time to time.

National orientation and training will be organized by the VPP Facilitator with RHQ (RVCWO). Courses, usually of one to three days duration, will be conducted annually. Branches may organize local programs to meet their needs for information and skills but should take advantage of local VAC and Royal Canadian Legion training opportunities whenever possible.

Additional Reading

Canadian Code for Volunteer Involvement, Volunteer Canada

Section 2 – VPP Job Descriptions

Job Descriptions

Job descriptions are provided below for the six jobs identified in the chart above. These job descriptions conform to the format suggested by Volunteer Canada and include:

- VPP Director/VP East
- VPP Facilitator
- Branch President
- VPP Branch Client Service Volunteer

The Association Executive will provide Secretariat and Treasury services.

Job descriptions for these positions are shown in Annex B.

Section 3 - Monitoring and Reporting

The Need

Monitoring and reporting is an on-going process that evaluates and documents client responses and outcomes to services, programs and benefits. Monitoring and reporting is essential to determine;

- How well the program is working,
- Whether the right resources are in the right places and assigned to the right tasks,
- How well individual volunteers are doing and whether they need any help or additional training,
- Whether there is any evidence of member abuse or neglect, and
- How the program can be improved.

Responsibility

The VPP Facilitator is responsible for monitoring and reporting and for formulating and recommending action plans to improve the quality of services provided to members.

Monitoring

Monitoring is an essential management activity and should be seen as such. It is needed to reduce risk and improve program quality. Members must also have confidence that the Association, and not just a volunteer, is interested in their well-being. Monitoring uncovers communication problems, uncertainties, scheduling difficulties, task expansion ideas, satisfaction levels, and new ideas. It is a positive process, not a negative one.

Monitoring is required to keep the volunteer program healthy. Branch presidents should check early and often with new volunteers to see how they are getting along with their activities and to answer questions. Here are three techniques for monitoring that both reduce risks and improve the program:

- **Buddy System.** For each Case Management volunteer a buddy should be available as a sounding board. This buddy may be another volunteer or a branch president or Association member.
- **VP Branch President Volunteer Contact.** A periodic call to assess progress and discuss problems, issues and strategies.
- **VP Branch President Client Spot Check.** A call or visit to a client to determine satisfaction with the volunteer and the service provided by the Association and other program agencies.

Reporting

Reporting for this program will be the minimum required to:

- Provide for case monitoring as described above,
- Provide an opportunity to assess lessons learned and areas for improvement based on volunteer feedback.

Reporting Procedure

Branch Case Management Volunteers should maintain a log of all client contacts, noting the circumstances, action taken, follow up needs and all related matters (sample log sheet below). This record should be maintained so that it may be used in the event of a change of circumstances or a claim against the Association. Overview reports from branches and volunteers will usually be requested on an annual basis to allow the VP Director to report to Council

and the AGM. This report will also be used to help formulate program changes and improvements. The VP Director and VP Facilitator will determine the form and reporting process for annual program reports to Council.

Section 4 - VPP Administration

Overview

Administrative support to the VPP will be minimized to reduce the workload burden on RHQ, paper flow and record keeping.

Responsibilities

The Association Secretary/Treasurer is responsible to:

- Maintain records keeping and correspondence on behalf of the VPP Director.
- Coordinate claims for reimbursement and ensure payment.
- Assist arranging screening and orientation programs
- Assist in the preparation of budgets for Council and AGM approval
- Ensure Alberta Gaming and Liquor Commission requirements are met.

Materiel Support

Volunteers will be provided with Association and Department and Agency brochures. Subsequent requirements will be provided by the VPP Facilitator or by direct contact with departments and agencies. Volunteers will be provided with program letterhead paper and calling cards on appointment. Other supplies must be provided by volunteers (see reimbursement below)

Travel

Travel will be subject to compensation at the rates shown below. The VPP Director must approve overnight travel requiring hotels and meals in advance.

Reimbursement Claims

Volunteers will be reimbursed for most out of pocket expenses as follows:

- Communications. VPP Facilitator will be compensated for the cost of installing and operating toll free lines. Volunteers will be reimbursed for long distance calls and fax services associated with cases. The costs of Internet connections and software will be borne by the volunteer.
- Travel. Trips over 40 km will be compensated at a rate to be set annually. Parking will be reimbursed up to \$6.00 per occasion.
- Hotels and Meals. Reimbursed for actual costs incurred.
- Postage, Printing and Stationary. Printing of program literature and the costs of ink and paper for home production will be reimbursed at cost. Postage costs will be reimbursed.
- Claims. Volunteers and branches should use the claim form below for submitting claims. Invoices or receipts should be attached for all costs except mileage. Claims should be submitted to the Secretary when they total \$100.00 or more, or annually by 31 March if they do not. VPP volunteers may donate their claimable expense amounts to the HGMF and request a tax receipt in lieu of payment.

ANNEX B – VPP JOB DESCRIPTIONS

Position Title: VPP Director

Note: This position is filled normally by VP East as part of his Association functional responsibilities.

Position Objective: To ensure the VPP achieves its goal of well-being by providing direction, guidance and support to volunteers, and by ensuring that the program is effectively coordinated with the veterans' care activities of other elements of the Regiment.

Activities and Tasks: The VPP Director is the leader of the VPP. He or she provides advice and guidance to other volunteers, responds to emergencies, and represents the program to the public. The Director briefs the Association National Council on VPP progress and sets plans and objectives for the program.

Responsibilities:

- Ensures that the responsibility of the Association for the Duty of Care is met.
- Sets objectives, principles and policies for the VP Program
- Deals with complaints of unsatisfactory service, care, or any other treatment, where a client claims that there has been prejudice or inadequate care provided by a third party.
- Determines funding requirements and develops fundraising strategies
- Advises on the selection of volunteers for positions in the program
- Monitors program results
- Provides direction and guidance for volunteers and Branch executives
- Assists in crisis intervention and management
- Represents the Association on VPP matters with other agencies and with the media
- Investigates and rules on any complaints submitted to the Association with regard to clients or volunteers
- Encourages all members of the Association to contribute to program improvement

Reporting Relationships: The VPP Director is responsible to the Association National Council.

Interactions: The VPP Director interacts with the Association National Council, volunteers, the media, departments and agencies, the general public and liaises as necessary with Commanding Officers of PPCLI and other CF units through Regimental Headquarters.

Member Abuse Risk: The VPP Director does not normally have direct contact with clients. Client abuse risk is indirect, in that the VPP Director is ultimately responsible for the actions of volunteers.

Volunteer Risk: The VPP Director is not open to physical abuse but may be exposed to defamation of character or to financial liability.

Skills and Experience Required: The VPP Director requires a high level of tact and discretion. He or she must be an excellent negotiator and be sensitive to the feelings of others working in a volunteer and care-giving environment. The Director should be an experienced organizer and financial manager.

Other Requirements: The VPP Director should have access to Internet services, email, telephone (CA), and facsimile and have secure storage facilities available.

Working Conditions: The VPP Director works from a residence or a place of business. RHQ should have a desk and telephone available for the Director.

Volunteer Benefits: The VPP Director benefits from the management of an extensive and positive program of assistance to serving and former members of the Regiment and their families thereby enhancing the value of the Regimental family and all its members.

Screening Requirements: None.

Position Title: Branch President

Position Objective: To develop and implement the VPP within the branch area of responsibility.

Activities and Tasks: The Branch President gathers the resources of the branch to meet VP Program needs in the branch area and oversees implementation of the program.

Responsibilities:

- Manages the volunteer selection, screening and orientation program within the branch.
- Monitors all volunteer activities related to the program.
- Recommends volunteer training and orientation requirements.
- Advises the VPP Director on VPP issues.
- Receives and investigates complaints regarding the actions of volunteers or complaints directed towards other caregivers within the branch area of responsibility and keeps the VP Director abreast of these activities.
- Maintains contact with care-giving agencies within the branch area, including VAC and the Legion.
- Provides advice to Client Services Volunteers regarding specific cases, including crisis intervention situations.
- Encourages feedback from all volunteers.
- Reviews and recommends volunteer expense claims.

Reporting Relationships: The Branch President is responsible to the VPP Director on VPP issues.

Interactions: The Branch President interacts with the VPP Director, the VPP Facilitator and individual volunteers on VPP issues.

Member Abuse Risk: The Branch President will normally have no direct contact with individual members, however, failure to assign a Client Services Volunteer or to follow up on a volunteer's activities could result in harm to a client.

Volunteer Risk: The VPP Leader is not open to physical abuse but may be exposed to defamation of character or financial liability.

Skills and Experience Required: The Branch VPP Leader must be a tactful and discrete individual. He or she should ideally have experience leading volunteers in a similar environment and be familiar with volunteer policy with regard to the Duty of Care and Standard of Care and the concepts of liability involved.

Other Requirements: The Branch President should have direct access to Internet services, email, telephone (CA), and have secure storage facilities and facsimile available.

Working Conditions: The Branch President works from a residence or a place of business.

Volunteer Benefits: Feedback from success of volunteers in helping others.

Screening Requirements: None.

Position Title: VPP Facilitator

Position Objective: To maintain close liaison with branches and other elements of the Regiment and thereby assist the VPP Director in implementing the VPP.

Activities and Tasks: The VPP Facilitator investigates and gathers program information from providing departments and agencies by visits, Internet searches and interviews, and disseminates this information to volunteers, to members at large and directly to clients. The Facilitator acts as liaison among all those involved in the VPP and takes action to energize and pursue VPP activities.

Responsibilities:

- Establishes and maintains a program information data base
- Promotes effective communications among all volunteers
- Prepares and issues amendments to the VPP portion of the RVC Handbook through RHQ
- Prepares and issues changes to VPP website information pages through RHQ
- Drafts contributions to the Association newsletter

- At the request of volunteers, searches national data bases for documents or other forms of information required to support a client claim for support
- Assists the VPP Director in budget preparations
- Conducts preliminary negotiations with prospective partners at the national level
- At the request of volunteers, intervenes on behalf of clients with departments and agencies
- Maintains a contact list at the national level for the major programs
- Recommends improvements to the information base and changes to procedures.
- Maintains close contact with Regimental Headquarters on matters relating to the VPP

Reporting Relationships: The VP Facilitator reports to the VPP Director

Interactions: The VPP Facilitator interacts with the VPP Director, branch presidents, and with other volunteers. Interaction also takes place with departments and agencies at the national level. The VP Facilitator may interact with members seeking information.

Member Abuse Risk: The Facilitator will normally have contact with clients at arms length, through telephone, email or post. Physical abuse risk is low. Clients may be exposed to a low to moderate risk of verbal abuse or negligent performance of care.

Volunteer Risk: The Facilitator may be subject to verbal abuse, defamation or legal action, however the risk is low to moderate.

Skills and Experience Required: When interacting with clients, the VP Facilitator should ideally have experience in counselling clients who are vulnerable or exposed to stress. The Facilitator must have the capacity to respond with empathy, patience and genuine concern for the client. The Facilitator must be an excellent listener with good telephone interview skills, be non-judgmental and be able to work independently with minimum support and advice. The Facilitator must also be able to use judgment in determining level of vulnerability and hidden agendas and issues or problems.

The Facilitator should have experience in dealing with departments and agencies at the national level and in drafting web pages and news articles. He or she should be an experienced researcher and analyst.

Other Requirements: Direct access to Internet, email, telephone (CA, CW, CD) and facsimile services.

Orientation Provided: Program Information, VAC Case Management, Communications and Interrelationships.

Working Conditions: The VPP Facilitator works from a residence or a place of business.

Volunteer Benefits: Success in support to individual cases.

Screening Requirements: None.

Position Title: VPP Client Services Volunteer

Position Objective: To assist members requiring VPP assistance.

Activities and Tasks: The VPP Client Services Volunteer normally focuses support on a particular member or family. Support may be required on single issues or a number of issues depending on client circumstances. The VPP Client Services Volunteer listens to members, assesses the issues, formulates an approach and deals with providing departments and agencies to develop and implement a plan to assist the client. The volunteer monitors the provision of services and follows up to ensure that the plan has been implemented effectively.

Responsibilities:

- Investigates the circumstances of cases referred by VAC or third parties and those that are self-reported and assesses the needs of the client
- Assesses the risks in the situation
- In conjunction with other departments and agencies, develops a comprehensive plan to support the client
- Identifies emerging issues as the case evolves and takes action to adjust the plan

- Maintains ongoing contact with the clients until it is safe to withdraw from the situation
- Provides information on the military background to cases that departments and agencies cannot provide
- Keeps the client and branch president informed of the progress of the case
- Acts as a sounding board for client complaints and concerns
- Monitors the implementation of support plans
- Takes appropriate action to intervene in the event of a crisis
- Follows up and expedites progress
- Looks for unintended results
- Maintains currency on support programs provided by departments and agencies at the national level and at the provincial or area level
- Maintains a contact list for the major programs in the branch geographic area
- Responds to requests for information from members and provides explanatory information or arranges to send program information to members

Reporting Relationships: Branch VPP Client Services Volunteers are responsible to Branch President for the effectiveness of their support.

Interactions: The VPP Client Services Volunteer's primary interaction is with the client or family. The volunteer interacts with the branch president and representatives of departments and agencies.

Client Abuse Risk: High. Members are usually highly vulnerable and meetings may take place in isolated situations.

Volunteer Risk: High. The volunteer is subject to physical abuse, defamation or legal action in the event member expectations are not met. Volunteers must assess the risks in each situation and consider the most appropriate risk avoidance measures to take. Guidance on these measures is contained in Part 3 of the Handbook.

Skills and Experience Required: The VPP Client Services Volunteer should ideally have experience in counselling clients who are vulnerable or exposed to stress. The volunteer must have the capacity to respond with empathy, patience and genuine concern for the client. The volunteer must be an excellent listener with good interview skills, be non-judgmental and be able to work independently with minimum support and advice. The volunteer should also work well as a member of a multi-disciplinary team, be a good organizer and a ruthless pursuer of results from others.

Other Requirements: The VPP Client Services Volunteer should have direct access to Internet services, email, telephone (CA, CW, CD), cell phone and have secure storage facilities and facsimile available.

Orientation Provided: Program Orientation, Communications and Interrelationships, VAC Case Management processes, and Crisis Intervention training.

Working Conditions: Much of the work done by VPP Client Services Volunteers will be directly with clients in neutral locations or in their homes. Frequent meetings and visits to departments and agency offices will be required. One-on-one client meetings will likely be stressful.

Volunteer Benefits: Successful planning and execution of actions to improve the well-being of individual clients.

Screening Requirements: Police background check, medical health care recommendation.