



*Syndicat des employé(e)s des Anciens combattants / Union of Veterans' Affairs Employees  
de l'Alliance de la fonction publique de Canada / of the Public Service Alliance of Canada*

Statement by Union of Veterans' Affairs Employees  
to the  
House of Commons Committee on Veterans Affairs

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Virginia Vaillancourt  
National President

Mike Martin  
Communications

Thank you for the opportunity to appear before the committee today.

We are here this morning as representatives of the Union of Veterans' Affairs Employees, which is a component of the Public Service Alliance of Canada.

UVAE represents over 2800 employees with Veterans Affairs' Canada including most of the front-line staff who deal with veterans and their families every day.

We are here particularly today to talk to you about the work and challenges of Case Managers within Veterans Affairs' Canada as it pertains to their caseloads and the backlog of disability claims.

Veterans Affairs programs and services, like the needs of veterans, are vast, complex and always evolving.

Our Case Managers are one group of front-line staff who are subject matter experts in VAC Services and Benefits.

They must understand applicable legislation and the various regulations, policies and acts that are used to determine eligibility for those services and benefits.

They must know how to deal with mental health issues, crisis intervention, frustrated and sometimes angry clients as well as suicide prevention and understand and use motivational interviewing techniques.

As you have heard from departmental officials and others; one of the major problems is that the backlogs and wait times for services continue to grow and veterans are waiting longer for service. This is causing financial, physical, mental and emotional pain and hardships for veterans and their families. It is also having a direct impact on those on the front lines who are attempting to serve them.

We wish we could tell you that this is a new development, but the backlog and increased caseloads for Case Managers at Veterans' Affairs have been growing for years.

In 2015-2016 the Minister of Veterans' Affairs made a commitment to reduce Case Manager ratios to 25:1 in order to "allow for more time and focus on the needs of veterans and their families. This was also supported in a 2016 brief to the House of Commons by the Veterans' Ombudsman. Despite this promise and several attempts by the federal government since that time, VAC has failed to meet that target. By any metric, they have failed miserably as you will see from the information we are about to provide.

This Committee has already heard about the impact that this has had on veterans and their families. This includes increased wait times and reduced services, fewer home visits and less frequent physical and mental health

interventions unique to the veteran population. This morning we will also tell you about the impact this is having on the front-line staff who work with veterans and their families every day.

When we learned that your Committee was studying this issue we started to gather information from Case Managers across the country. In the last two weeks we interviewed Case Managers from the regions about their case loads, their working conditions and the impact this was having on their work and the veterans they serve.

### **Current Case loads**

We asked them about their current case loads. Here's what they told us, and we would like to read this into the record. This is how many individual veterans they are being asked to assist.

55, 55, 50, 66, 64, 56, 45, 53, 55, 40, 56, 46, 47, 50

We asked if they could manage that workload. Here's what they told us.

"Trying to manage this many cases is ludicrous, impossible"

"I'm trying to play catch up and I never can catch up"

"I try to make a difference every day, but this job is making me sick"

"I love my job and love helping vets. But I don't have the time to give them the attention they deserve"

## **Working Conditions**

We asked about their working conditions. Here's what they told us.

"We're just putting out fires, on to the next call"

"We don't have time to do proper intake, assessments, referrals, follow up or consultation with providers"

"We used to do home visits every 2-3 weeks, now it's once a year"

"We're doing triage, focusing on high-risk cases, but even some of them fall through the cracks"

"We're dealing with complex mental health issues that need constant care and intervention, and we just don't have the time"

"Veterans and their families deserve better than this"

## **Retention**

The high case loads and demanding working conditions have led directly to high staff vacancies and an employee retention problem, particularly at the Case Manager level within VAC. In the Atlantic region there are reports of upwards of 25 percent vacant positions and even more in bilingual areas.

This is exacerbating an already difficult situation at the workplace.

"The pattern is to hire, train, give them their case loads, and then watch them transfer out or quit because of the work load."

"We've been short-staffed in our office for 4 years"

"The hiring process takes 6 months. That means we're without a body for at least that long."

"We need some incentives or bonuses to get people to stay as Case Managers. The turnover is killing us."

## **Stress and Burnout**

Every single Case Manager we spoke with had suffered from stress and burnout to some degree. That included anxiety, sleeplessness, weight gain and physical, mental and emotional strain from their work. Here's some of what they told us.

"We have to find outside ways to manage the stress. Some take leave, but then the workload is even higher when they come back."

"The intensity and pressure is relentless. Everyone in our office is suffering."

"Many vets are suicidal and that has an impact on us. We take that home with us to our families."

"The support is just not there for staff"

There were also some disturbing reports of bullying and harassment by managers within VAC towards the front-line staff. While this was not the case in all regions, some offices reported that negative attitudes and harassing comments by some of their managers made their already stressful jobs even more difficult. Formal complaints did not achieve positive results, so this became another burden that Case Managers in those areas had to deal with in addition to their heavy workload.

## **Backlog of Disability Claims**

The backlog of disability claims has added another level of stress to the system, for veterans and for VAC staff. Case managers reported feeling it every day. Veterans and spouses are very angry and frustrated at the delays. They call and ask for information and the case managers have nothing new to provide them. For the Case Managers it is heart-breaking to see veterans and their families suffer. But they have no ability to help them. Even worse, this is a definite barrier to the Case Managers developing a positive, working relationship with the veteran and their families. The trust is often just not there.

“Vets are frustrated, angry and often screaming at us”

“We understand why they’re pissed off. They don’t have any money to live on.”

“This impacts their treatment plans and if their pension monies are held up, too, they are suffering. It hurts to watch this every day.”

“Why does the website say it will take 16 weeks when it could take up to two years? Vets see that and they ask me what’s going on. I have nothing to tell them.”

“The veterans feel lied to, and so do we”

## **Security Concerns**

The backlog has also created security concerns at a number of offices including those that are located on bases. There is easy access and little protection for front line staff. There were reports ranging from verbal abuse to threatening phone calls to actual in-person threats. Several Case Managers, male and female, reported feeling unsafe at work. They have reported these incidents and local managers have requested action and additional security measures, but they are slow in being acted upon by headquarters.

“Vets and their spouses yell at us all the time. I get it. They’re frustrated and angry. But I have felt afraid for my physical well-being.”

## **GC Case System and Disengagement**

The change over from the old CDSN into the new GC Case has caused and continues to cause problems for everyone in the VAC pipeline. From the Case Manager perspective this change as of April 1, 2019 was abrupt and not well-planned for. They do not feel they were adequately trained, and they continue to have problems with making the system work effectively.

One of the impacts of this rapid change was that they received direction to ‘disengage’ veterans who were on the old system as of April 1, 2019. They were given lists of veterans and asked to justify why they were still on the system and encouraged strongly to get them to transfer out of the old programming into the new streams like Guided Support. This process felt



and looked heavy handed to the Case Managers who had to advocate for veterans who still needed support and had not gotten themselves to the point where they could be self-sufficient or employable.

Yet, in many areas there was continuing pressure to cut veterans off and Case Managers were told they could be negatively affected if they did not follow this direction. This was a very difficult time for many Case Managers and the policy of active disengagement is still, to our knowledge, being actively pursued by VAC headquarters.

### **Family Counselling**

Another issue that was raised by many Case Managers when we spoke to them was the apparent change of direction by VAC when it comes to counselling services for spouses and children of families. Several Case Managers reported that they had been directed to tell family members that they were no longer entitled to access counselling or see a psychologist because of the policy change. Understandably, the clients are not happy about this change and the Case Managers are worried about the impact on spouses and children.

“Kids are getting kicked off counselling when they have issues like ‘If I’m good, maybe Dad won’t kill himself”

“Medavie Blue Cross has been calling social workers telling them they have to cut family members off”

“Cutting veterans or family members off benefits like counselling is utterly ridiculous and short-sighted”

“I’m told to send these children to the provincial system, when I know there is a handful of programs and a year-long waiting list”

## **Recommendations for Change**

We realize that we have only given you a snapshot of what we heard and what is happening across the country when it comes to how veteran’s services are being provided. But we hope you will appreciate that from the perspective of the front-line workers, the Case Managers, this is a system in crisis. And it has been in crisis for far too long. When we were talking to them we also asked them to give their recommendations to help fix this problem. Here are their recommendations for change.

First and foremost, they want the case loads to be lowered as quickly as possible to a manageable level. 25 may not be possible in the short-term, but that should be the goal over time. But not another 5 years waiting. They have already been waiting for 5 years since the initial promise to reduce case loads to 25:1, and there has to be immediate change for the benefit of veterans and the employees.

They also demand that Veterans Affairs’ Canada immediately hire more front-line staff to clean up the backlog and start treating veterans with the respect they deserve in a timely manner. This, too, is a situation that has dragged on far too long and we hope that this Committee will press the government and the department for swift action in this regard.

They also want better support systems for employees and more training and support for employees and higher-level training and support for managers and supervisors so that they can help them do their job more effectively. Finally, they would like the federal government to review their job descriptions and classification levels to ensure that it fully captures the important work they are engaged in.

Thank you for inviting us to meet with you to raise the issues, concerns and recommendations of our Case Managers. They have given us their voice to bring you these messages. Their hope, and ours is that positive change can come for the benefit of veterans, their families and those who have the honour to serve them. Our veterans deserve better.