



CASUALTY SUPPORT

FOR CF PERSONNEL AND THEIR FAMILIES

When a member of the Canadian Forces (CF) is injured or dies during training, on exercise or in a theatre of operations, a number of support agencies and staffs are ready to be called upon to assist that person and his or her family members.

The Department of National Defence (DND), the CF and other federal government departments and programs assist personnel and their families, and the military community, through this trying time. Each of these is charged with a specific mandate to fulfill with respect to the treatment of CF personnel, providing social support to them and their families,

ensuring that their medical and spiritual needs are met, co-ordinating a solid recovery plan, and guiding them and their families into a future that may or may not be with the Forces.

Many support agencies contribute to an overall process comprising action taken at first-line medical facilities, during the repatriation of casualties, throughout pre- and post-release procedures, and continuing through post-release medical care and follow-up.

The CF Unit is the front-line entity responsible for the overall well-being of CF personnel. Beyond the Unit, personnel and their families can count on a variety of

sources for support, including:

- CF Health Services Group (CFHSG);
- Director Quality of Life (DQOL);
- Director Military Careers Administration and Resource Management (DMCARM);
- Service Income Security Insurance Plan (SISIP);
- Director Accounts Processing, Pay and Pensions – Pension Services (DAPPP PS);

- Second Career Assistance Network (SCAN); and
- Veterans Affairs Canada (VAC).

In concert with these departments and agencies, The Centre for the Support of Injured Members, Injured Veterans and their Families (The Centre) works behind the scenes to bring all of these services together.

The Centre is a joint DND-Veterans Affairs Canada (VAC) resource dedicated to supporting injured CF personnel and their families. ✦

Frequently Asked Questions

Q 1

What are the primary sources of assistance for me and my family if I suffer a service-related injury, and how do they help?

A 1

If you are injured while serving in the CF, you and your family will receive the assistance you need through a variety of departments, programs and services. They may include, among others:

Canadian Forces Health Services Group (CFHSG): Through its network of health-care professionals such as Unit Medical Officers, Case Managers, Social Workers and others, CFHSG will ensure that you receive medical treatment, psycho-social assistance, and follow-up services if and when you require them.

Director Medical Policy (D Med Pol): D Med Pol reviews all medical files put forward with Permanent Medical Categories, and confirms medical employment limitations to Director

Military Careers Administration and Resource Management (DMCARM).

Director Military Careers Administration and Resource Management (DMCARM): DMCARM determines your career disposition if you have permanent medical employment limitations, and issues a medical release instruction if you cannot be retained.

Director Quality of Life (DQOL): DQOL's mission is to monitor, promote and continuously improve your quality of life, and that of your family, in family-related issues, accommodation, morale and welfare, ready for release, and others.

Service Income Security Insurance Plan (SISIP): SISIP offers vocational rehabilitation training to prepare you to obtain gainful civilian employment by enhancing your existing education, skills, training and experience if needed, and Long Term Disability (LTD) benefits of up to 75% of your salary on release – less your other relevant sources of income such as pension benefits, Canada Pension

Plan (CPP) or Quebec Pension Plan (QPP), employment income, etc.

Director Accounts Processing, Pay and Pensions – Pension Services (DAPPP PS): DAPPP PS will ensure that you receive all the pension funds you're entitled to receive, and the appropriate return of contribution upon your release. For example, if you are medically releasing and have more than 10 years of Regular Force service, you are entitled to an unreduced annuity immediately indexed to the cost of living.

Second Career Assistance Network (SCAN): Through local Personnel Selection Officers (PSOs), SCAN offers second-career planning services such as workshops on resume writing, job search techniques, the administration of interest inventories, etc.

Veterans Affairs Canada (VAC): Under the New Veterans Charter, VAC offers you a multitude of benefits and services, including but not limited to rehabilitation services; health benefits; job placement

assistance; economic loss support; disability awards; death, funeral and burial benefits; and case management.

Q 2

How does Director of Casualty Support Administration (DCSA)/The Centre complement the services provided by these organizations?

A 2

The Centre works collaboratively with these bodies to ensure that "all parts of the puzzle" fit as seamlessly as possible, and helps explain the process to you and your family, and the appropriate chain of command, as required.

Q 3

What kinds of services can The Centre offer me?

A 3

The Centre provides the following bilingual services, among others:

- Advocacy and advisory support, including problem identification, possible referral, co-ordination of follow-up action, and resolution;
- Management and analysis of the CF Casualty Database;
- Management of the review and processing of all CF-98 (Report on Injuries) forms;
- Peer and Family Support Co-ordinators, assisting you and your family members suffering from or experiencing the impact of an Operational Stress Injury (OSI);
- Bereavement Peer Support Program, providing social support to grieving families;
- Post-release pastoral assistance, through the Pastoral Outreach Program (POP);
- Management of the National Military Cemetery, located in Ottawa;
- Short-term contingency fund, providing you immediate aids to daily living;
- Management of the Transition Assistance Program (TAP), assisting you, if you medically release, to find gainful and suitable civilian employment;
- Administration of the CF's Vocational Rehabilitation Program for Serving Members (VRPSM);
- Facilitation of the administration of Public Service Priority appointments for you if you are medically released;
- Consultation with external associations and organizations mandated to support injured and retired personnel and their families; and
- Publication of the bilingual booklet *Death and Disability Programs and*

Services – A Guide for Serving and former Canadian Forces personnel and their families.

Note: Not all services may be available to all clients (eligibility criteria may vary depending on circumstances).

Q 4

Will my dealings with The Centre be private? What about my family's privacy?

A 4

Absolutely. All telephone calls, consultations, and referrals are indeed confidential, including calls placed by members of your family.

Q 5

Will my Unit be contacted if I call The Centre?

A 5

No, not unless you give staff at The Centre permission to discuss your case in

order to clarify certain details and/or advocate on your behalf. It may also become essential to contact your Unit to obtain additional information, as needed.

Q 6

Does The Centre interact with the Chain of Command?

A 6

Yes. The Centre complements what occurs at the respective Formations, Bases and Wings, and maintains an advisory role across the CF in order to assist in ensuring that you and your family, and all CF personnel and their families, receive fair and equitable treatment. ✦

Scenarios & Testimonials

While the following scenarios are based on actual cases, the names have been changed to protect the privacy of personnel and their families.

These scenarios demonstrate how CF personnel and their families may realistically benefit from programs and services offered by the Canadian Forces, Veterans Affairs Canada, and other internal and external agencies and departments.

It should be noted that these scenarios are not all-inclusive; they do not present all possible benefits available to personnel and their families.

All of the CF personnel and civilian employees who have provided testimonials have agreed to allow the use of their real names.

Thank you to everyone who has contributed to this insert. ✦

Having been a caregiver for the past seven to eight years, I can assure you that I could not have provided the support to those I've assisted without the support I received from The Centre.

Why is it that I think so highly about The Centre and what it can do for people who suffer from OSI (Operational Stress Injury)? Why is it good to refer people who suffer from OSI, and their families, to The Centre when there are organizations elsewhere that can address their needs?

I refer people to The Centre because I know that the people who work there have been hand-picked. They are not only experienced in their fields, whether it be medical or administrative, but they truly understand some of the issues that are out there. They are individuals who can communicate with those who are often very stressed and in need of assistance.

The assistance The Centre can provide appears to be endless. No matter why I call on them, there is always someone at the other end of the line who is willing to go the extra mile to assist. They belong to a very strong network of professionals who truly understand what it's like to serve in the Canadian Forces, to be family of a Canadian Forces member, to be injured while serving, or to be caregiver.

The Centre is there for the use of everyone who wears or has worn the uniform, Regular and Reserve Force, and their families.

Keep up the good work - you are all on a worthwhile mission.

*J.F. Emond, M.M.M., CD
Chief Warrant Officer*

You have been of great assistance; please keep up the good work. There are a lot of us coming into this situation thinking that we know what we are doing, when we really do need all the help and advice that the true experts (at The Centre) can give us.

Thank you.

LCdr (Ret) Dwight Brewster

Compensation for Disability – Reserve Force

Master Seaman George Ramsay is a 26-year-old Naval Reservist. In civilian life, Mr. Ramsay is a mechanic at Canadian Tire.

During a weekend training exercise, MS Ramsay breaks his hip when he falls on board a ship. Following emergency surgery, he is hospitalized for three weeks and then sent home. He isn't able to walk without a cane or walker for the next six weeks. As a result, he isn't able to return to his job at Canadian Tire. Without his Class "A" pay (once released from hospital), he has no income for almost two months.

MS Ramsay's supervisor, Petty Officer, 2nd Class Stevens, is familiar with the support benefits available to injured

personnel. He ensures that a CF 98 (Report on Injuries) form is completed.

The next step is to ensure that MS Ramsay applies for Reserve Disability Compensation. The application process for disability compensation includes an investigation completed by his Unit.

Because his injury is duty-related, and because his Unit Medical Officer declares that MS Ramsay is not able to resume parading with his Unit or return to his civilian job for another six weeks, MS Ramsay's application for compensation is approved by Director Casualty Support and Administration (DCSA). He receives daily military pay until he is able to return to his civilian job.

A copy of the CF 98 (Report on Injuries) form remains in MS Ramsay's record. The original is verified by DCSA and filed for future reference. Even though MS Ramsay's hip heals sufficiently for him to return to work and duty, there is still a possibility that he could develop osteoarthritis in the joint.

Because the arthritis could be linked to this current injury that has been documented and is duty-related, Veterans Affairs Canada (VAC) may, in the future, be able to extend to MS Ramsay treatment and a disability award in support of a future diagnosis of osteoarthritis of the hip. ♣



INFORMATION

A member of the Reserve Force who, while on Class A, B, or C service, suffers any injury, disease or illness attributable to the performing of that service, is entitled to receive pay at the rate established for his or

her rank at the time he or she suffered the injury, disease or illness. Pay will continue until he or she is released on medical grounds or until treatment for the incapacitation is complete, enabling him or her to

resume active participation with the Reserve Force, or to resume or obtain civilian employment, whichever occurs first. ♣

REFERENCES

➤ Compensation for Disability – Reserve Force

Canadian Forces Administrative Order (CFAO) 210-29, at www.admfincs.forces.gc.ca/admfincs/subjects/cfao/toc_e.asp and at http://admfincs.mil.ca/admfincs/subjects/cfao/toc_e.asp

➤ Compensation for Disability – Reserve Force

Compensation and Benefit Instruction (CBI) 210.72, at www.forces.gc.ca/dgcb/cbi/engraph/home_e.asp and at http://hr.ottawa-hull.mil.ca/dgcb/cbi/engraph/home_e.asp



I would like to take this moment to thank you all for your personal interest and help in this highly stressful situation.

I have never before in my 18+ years of service seen so many pull together for my (and my family's) personal welfare.

I am starting out on my new life, and I will take the memory of your dedication with me. When we all signed on the line to serve, it was also to serve each other, which you all have done.

Thank you on behalf of my family.

LS (Ret) David Jenks

My actual leaving of the military was far from what I had expected. Always knew that when I left it would be tough, like parting from dear friends; always assumed that I would leave reluctantly, with genuine longing.

I guess the honeymoon was over 'cause those last few months were chock full of bullshit, cold indifference and disappointments. Never ever expected it; never thought that I would be leaving so bitter, so utterly disappointed and resentful with the military and all the "lack of support" groups that were out there. I had an opportunity to go to school, to go to a tech college, but that, too, was going south and no one seemed to really give a rat's ass.

I got in touch with The Centre, expecting the usual BS, but not finding it... The Centre worked very hard on my behalf, and they came through big time. They walk the walk.

They didn't just help get me to school; their efficiency and competency got me to a place where I was no longer so resentful and bitter with the military. I found a small group of thoughtful and committed government workers who not only helped me but, because of their efficiency, changed my perspective.

I spent 29 years with the military and The Centre helped return to me an invaluable possession – my feelings of loyalty and devotion. Thank you ever so much.

Sgt (Ret) David Snashall

Return to Work

Returning to work after summer holidays is never easy. Imagine having to do so after having been away for several months on sick leave, not

knowing who is at work anymore. You don't know which tasks have piled up and which ones have been delegated to others. You don't know what your co-workers and supervisors think of your "time off", and how they felt about doing your work when you were gone.

This might be enough to make many of us stay home for another several months.

Master Corporal Michael Malligan is deemed fit to return to work after two months of stress leave. Following consultation with his Medical Officer (MO) and Case Manager (CM), he embarks on a gradual return to work plan and with the intent of being eventually reintegrated full-time in his job. To the delight of his supervisor, although MCpl Malligan is uncertain about facing the personality conflict that led to his sick leave, he is back as one of her top-notch technicians in his seriously understrength occupation.

"I woke up one day and I knew if I did not return to work soon, I would never return to work," MCpl Malligan says. "But

I was so scared of what was waiting for me at my Unit."

He successfully returns to work because he is determined to and, fortunately, he does not have to do it alone – nor should any member of the Canadian Forces (CF). You're CF in sickness and in health, through good times and bad – we're all in it together.

MCpl Malligan has the help and support of his co-workers, superiors, local CF Return to Work team, and local Alternative Dispute Resolution Centre (ADRC) team. To ensure MCpl Malligan and his Unit are given the best possible chance of success, all aspects of his return to work are reviewed, addressed and planned before his first day back at work. Past and potential new conflicts are addressed. With his participation, a transitory work plan is developed and his co-workers are informed of what to expect. He is gradually returned to his former duties on a temporary modified work plan adapted to his recovery needs.

MCpl Malligan and his Unit may not be specialists in recovery and/or return to

work issues and programs, but they are a well-organized and caring team with the right tools to get the job done. ♦

Note: While this scenario reflects a medical situation resulting from a conflict of interest, the RTW program is aimed at anyone affected by a physical or mental illness.

There are likely too many MCpl Malligan(s) out there, and it is important to note that cases such as this one may involve a variety of programs and agencies, such as the Medical Chain of Command, the Case Manager and RTW Co-ordinator, the Chain of Command and/or other programs such as, in this case, the ADRCs.

For these reasons, it is of the utmost importance that excellent communication links be established. A well-orchestrated co-ordination process by the RTW Co-ordinator will ensure this communication, as well as monitor long-term goals in order to facilitate a safe and successful return to work or transition. ♦



Challenges may arise at different stages of your RTW process.

Check out your local Alternative Dispute Resolution Centre (ADRC) for

services such as conflict coaching, mediation and group intervention. Qualified ADR practitioners can help you and/or your Unit resolve pre-existing conflicts that may be adversely affecting your return to work. Their services are voluntary, confidential, impartial, and flexible. ♦

INFORMATION

The Canadian Forces (CF) Return to Work (RTW) program was developed to ensure a safe early return to work for all CF personnel who suffer injury or illness. It is a personnel management tool that complements

existing programs by providing a framework for enhanced communication between members of the CF, medical authorities, and the Chain of Command. Services and support are provided through local

(Base/Wing) CF RTW co-ordinators and Unit representatives. The *CF RTW Program Guide* is available through DCSA 8. ♦

REFERENCES

➤ Return to Work

Canadian Forces General Message (CANFORGEN) 090/03 at http://vcds.dwan.dnd.ca/vcde-exec/pubs/canforgen/intro_e.asp

➤ Return to Work

Chief Military Personnel (CMP) [formerly Assistant Deputy Minister (Human Resources – Military) (ADM(HR-Mil))] Instruction 05/03 at www.forces.gc.ca/hr/instructions/engraph/home_e.asp and at http://hr.d-ndhq.dnd.ca/docs/instruction/instructions/engraph/home_e.asp

➤ Alternative Dispute Resolution

Defence Administrative Orders and Directives (DAOD) 5046, at www.admfincs.forces.gc.ca/admfincs/subjects/daod/intro_e.asp and at http://admfincs.mil.ca/admfincs/subjects/daod/intro_e.asp



I am a CF Case Manager (CM) in Halifax. I've been with the CM Program since 2001.

I help CF members when they are transitioning from the military to civilian life, and tell them about the services and benefits available to them.

I have relied on the staff at The Centre many times when I've had questions or concerns, and every time I've called, I've experienced nothing short of true and dedicated professionalism from every staff member.

Without the assistance of the folks at The Centre, my job would be very difficult.

Thank you to you all for your support and dedication in looking after our men and women of the Canadian Forces.

Cathy Chadwick

To be brief, had it not been for the efforts and knowledge of the folks at The Centre, today I would not be in receipt of my VAC or my CFSAs pensions. I would not be receiving my SISIP entitlements either. With much understanding, they guided me in my quest for entitlement to these benefits. Displaying a level of leadership that I had not encountered in years, they aptly guided me through the frustrating maze of bureaucracy, keeping me focused and on track.

From my first phone call to the 1-800 number, to the on phone screenings and subsequent dealings, The Centre gave me the assistance and support that I never received while I was a serving member. They did so in a caring, professional and timely manner that has finally allowed me to concentrate on the important things in life.

Derrick Zimmerman

Service-related fatality

Sergeant Dorothy Karasc, 32, dies during a United Nations tour in Croatia. She leaves behind a husband, James, and a daughter, Brittany. Dorothy, a Supply Technician, has been a member of the Primary Reserve for 10 years.

Upon hearing of the death, Dorothy's Unit Commanding Officer immediately appoints an Assisting Officer (AO) to help James. AOs are Canadian Forces (CF) representatives assigned to families in the event of the death of a serving member. A Duty Officer from The Centre is available to guide the Assisting Officer whenever needed.

Among his or her initial duties, the AO learns the family's wishes concerning funeral and burial arrangements, and provides advice to the family on what expenses and entitlements will be covered by the Department of National Defence (DND). The AO then relays the family's wishes to the appropriate points of contact to ensure that those wishes are carried out properly and promptly. When the time is appropriate, the AO also ensures that the family receives a briefing on the various benefits to which they are entitled.

When Director of Casualty Support Administration (DCSA) is notified of Dorothy's death, the staff of The Centre for the Support of Injured and Retired Members and their Families (The Centre) will begin their work in support of Dorothy's family.

If James decides that he wants Dorothy buried in the National Military Cemetery, for example, the Pastoral Outreach Program (POP) section, along with Beechwood Cemetery staff in Ottawa, will help James complete the application.

The Centre staff provide immediate guidance to Dorothy's unit, ensuring that key documents and information such as the Death Certificate and the CF 742 [Personal Emergency Notification (PEN)] form, are forwarded for action. This facilitates the payment of all related death benefits.

Staff at The Centre prepare an information package for the Minister of National Defence and the Chief of Defence Staff (MND/CDS). As well, they inform staff at the Canadian Comfort Remembrance Program, who will later offer James and Brittany a quilt in memory

of Dorothy, and a carved wooden portrait of her.

Because Dorothy's death is duty-related, a Casualty Notification Report and a Death Certificate are provided to Veterans Affairs Canada (VAC). This ensures that James begins receiving benefits such as the survivor's lump sum death benefit right away.

Staff from The Centre send James a letter with information about headstones and memorials, and contact the Last Post Fund to co-ordinate the arrangements for a headstone or memorial if requested.

Finally, James receives a card with information on how he can reach staff at The Centre if he has any questions, or if problems arise, after the AO is relieved of his or her duties.

James continues to struggle in his grief, a common reaction for someone dealing with the sudden death of a spouse. He can also contact the Bereavement Peer

Support Network, a component of the Operational Stress Injury Social Support (OSISS) program, jointly managed by DND/VAC. This program is specifically intended to provide social support to grieving families during their time of need. The support of others will provide James with comfort during a very trying time, as well as the guidance of someone who has experienced just such a loss and is trained to provide invaluable assistance. ✦



The Canadian Comfort Remembrance Program is a tangible demonstration of the appreciation felt by Canadians for CF personnel who suffer a very serious injury, and for

next-of-kin who have lost a loved one on deployed operations. In partnership with a number of quilting guilds throughout Canada, quilts are offered to personnel who are very seriously injured and to the next-of-kin of CF personnel who die during a deployed operation. ✦

INFORMATION

The responsibility of an Assisting Officer (AO) at the time of death of a member of the CF is enormous. The AO is the vital link between the Forces and the next-of-kin, and will handle many inquiries. AOs are guided

by the Base/Wing/Unit Administration Officer and various references, and The Centre provides an aide-memoire entitled "Assisting Officer Guidelines". Additionally, there is a Duty Officer on call specifically to respond to

questions from AOs. The magnitude and importance of this position cannot be overstated, and The Centre will assist those assigned to this duty in every way possible. ✦

REFERENCES

➤ Funerals and Burials

CBI 210.20 at www.forces.gc.ca/dgcb/cbi/engraph/home_e.asp and at http://hr.ottawa-hull.mil.ca/dgcb/cbi/engraph/home_e.asp

➤ Provision of headstones and memorials

CBI 210.27 at www.forces.gc.ca/dgcb/cbi/engraph/home_e.asp and at http://hr.ottawa-hull.mil.ca/dgcb/cbi/engraph/home_e.asp

➤ Canadian Comfort Remembrance Program

CANFORGEN 082/06 at http://vcds.dwan.dnd.ca/vcds-exec/pubs/canforgen/intro_e.asp



I want to thank you for all your assistance. This was a very stressful time, and your assistance proved invaluable!

WO(Ret) Joseph Gallant

I remember back in my infantry days ('82-'88), when guys were released with zero fanfare and rarely with any time to prepare for a transition.

The Centre is an incredible organization that is doing what they had intended it to do. It's not often a program actually delivers as intended.

Cpl (Ret) Richard Martin

SCENARIO 4

Operational Stress Injury

One day in October, Warrant Officer Bill Bloggins, a field engineer who has served in the Canadian Forces (CF) for 23 years, is counselled for insubordination following a shouting match with his Squadron Sergeant Major and his Commanding Officer.

During the preceding months, many of WO Bloggins' subordinates and colleagues noticed Bill was less patient than usual, often over-reacted to day-to-day situations, and withdrew from many of his friends and colleagues. In fact, during the two weeks prior to the incident, Bill stopped having lunch with his friends at the mess and was no longer attending happy hour on Fridays.

Following the counselling session, Bill takes two days of annual leave and stays home with his wife, April, and his teenage children, Jake and Bettina. During this short leave period, he and April have a major argument. April feels Bill hasn't been drinking more since he returned from his second tour of duty in Bosnia in 1999. She also says he's been drinking more since he returned from Afghanistan in 2003. He isn't around the house much, and when he is, all he does is yell at the kids.

After the argument, April is very upset, and leaves the house to go grocery shopping.

Bill goes to the basement and starts to drink heavily. By the time the kids get home from school, he is passed out on the floor, drunk. Jake calls 911.

By the time April gets home, she's already made up her mind that she's going to leave Bill, take the kids and go to stay with her parents till Bill gets help. She feels sad and guilty about her decision because she knows Bill isn't the same person she married years ago, but she's exhausted and can't go on living like this. Neither can the kids.

As their relationship has deteriorated over the years and she has pleaded with Bill to get help, she feels he has always come up with excuses not to.

Bill is admitted to the hospital that evening and he tells a mental health specialist he wants to be left alone to die. When the attending physician learns Bill is a soldier, she calls the Base to co-ordinate his discharge and after-care.

Bill sees a CF Medical Officer and is granted two weeks' sick leave, but his condition deteriorates. He is referred to the Base mental health staff for an assessment scheduled for mid-November.

By the end of October, however, Bill has accumulated so much anger, guilt and shame about not being able to perform his duties as a soldier that he submits his voluntary release memo to his Chain of Command.

By January, he has missed all of his medical appointments at the Base Mental Health Clinic and has been released from the Forces. He's moved out of Married Quarters and is hoping to start a new life.

April believes all of Bill's problems were caused by the military, so she and the kids move back in February, anticipating a fresh start – Bill has lined up a good job and seems much happier and relaxed.

Six months later, Bill is fired from his job after fighting with a co-worker. April gives him an ultimatum: get help or she will file for divorce.

Through his network of military contacts and friends, Bill hears about The Centre and, in particular, the Operational Stress Injury Social Support (OSISS) program for CF personnel and veterans who suffer from Operational Stress Injuries (OSIs). He decides to call the local OSISS Peer Support Co-ordinator (PSC), Ralph.

They meet for coffee and discuss Bill's situation. Ralph makes a few suggestions to help Bill. Bill expresses anxiety about walking into a "shrink's" office, and Ralph offers to coordinate the appointment and accompany him the first time.

Three days later, Ralph has made arrangements for an initial consultation with a Veterans Affairs Canada (VAC) counsellor, and a short visit with a mental health professional in the community for an assessment. These first visits lead to regular appointments with a psychiatrist who diagnoses Post-Traumatic Stress Disorder (PTSD), mild depression and an alcohol addiction – all linked to Bill's 1994 tour in Bosnia-Herzegovina.

Bill's care over the next two years includes treatment to control his anger and irritability, a six-week in-patient program for his alcohol addiction problem, and regular psychotherapy with a psychologist. Gradually, Bill learns to better cope with his symptoms.

Then, with Bill's consent, Ralph contacts staff at The Centre to have them advocate on Bill's behalf that his condition is service-related. As a result, Bill is

awarded all relevant benefits and support from VAC, including the possibility of retraining for a new career through VAC or through Service Income Security Insurance Plan Financial Services (SISIP FS).

Because he, too, is a veteran who suffered from PTSD, Ralph has been able to connect with Bill and build a relationship based on trust and common experience. Through this relationship, Bill learns he is not crazy and he is not alone.

Today, Bill receives financial benefits for his OSI from VAC, and is attending classes to learn a new trade. He is also an OSISS volunteer, and helps co-ordinate and manage Peer Support Groups where CF personnel and veterans get together to help each other move on.

April also receives help through OSISS, and attends monthly family peer support group meetings. She now understands the impact Bill's illness has had on her, and she is getting help.

Bill admits that while he is doing a lot better, he still struggles now and then. Support from his family, his therapist and OSISS has helped him realize that he has a service-related injury, and that he is not "sick, lame or lazy". He has stopped drinking, he is coaching his son's hockey team, and he and his daughter belong to the local "Dads and Daughters" bowling league.

He is often called upon by the OSISS Speakers Bureau to talk to CF units and to personnel on career courses about his experiences. He conducts awareness and information sessions for CF personnel on how to recognize OSIs and what to do about them as an individual, a friend or a supervisor.

As a family, the Bloggins' are getting healthier day by day. ♦



The OSISS program, launched in 2001, is a partnership initiative between the Department of National Defence and Veterans Affairs Canada (DND/VAC).

Its mission is to establish, develop and improve social support programs for CF personnel, veterans and their families affected by operational stress, and to provide education and training in the CF community to create understanding and acceptance of operational stress injuries. ♦

The OSISS Speakers Bureau develops educational and professional development modules for delivery in formal training establishments or to units. The people delivering this information are veterans who have experienced the effects of OSIs and who are prepared to share that experience. The goal is to increase understanding and acceptance of OSIs and to teach CF personnel how to help themselves, friends and subordinates. You can contact the Speakers Bureau at 1-800-883-6094. ♦

INFORMATION

An Operational Stress Injury (OSI) is any persistent psychological difficulty resulting from operational duties performed by a member of the Canadian Forces. The term OSI is

used to describe a broad range of problems, which usually result in impairment in functioning. OSIs include diagnosed medical conditions such as anxiety, depression and post-

traumatic stress disorder (PTSD) as well as a range of less severe conditions, but the term OSI is not intended to be used in a medical or legal context. ♦

REFERENCES

- **OSISS**
CANFORGEN 117/02, at http://vcds.dwan.dnd.ca/vclds-exec/pubs/canforgen/intro_e.asp
- **Ombudsman for the Department of National Defence and Canadian Forces**
Review of DND/CF Actions on Operational Stress Injuries, at www.ombudsman.forces.gc.ca/reports/annual/2002-2003/2002-2003_e.asp#review

Transition

A year ago, Captain Carla Jones suffered a blow to the head while on exercise with her Battalion. Now, she learns from her Medical Officer (MO) that the severe vision loss in her left eye, resulting from that blow to the head, is permanent and cannot be corrected by prescription lenses.

Just entering her seventh year of service, Capt Jones had been hopeful that her vision would return, so this news comes as quite a shock. The MO informs her that her medical file has been sent to Director Medical Policy (D Med Pol), recommending a Permanent Medical Category (PCAT) with Medical Employment Limitations (MELs). D Med Pol standardizes the MELs assigned by the MO and forwards the statement of MELs to Director Military Careers, Administration and Resource Management (DMCARM), which recommends career disposition.

Because her Unit is already short several officers, her Commanding Officer (CO) requests that Capt Jones be posted to the Service Personnel Holding List (SPHL) so a replacement capable of deploying with the unit in three months can be arranged. Capt Jones is employed within her employment limitations at the Area Headquarters.

An appointment is made for Capt Jones with the local Canadian Forces (CF) Case Manager (CM). In addition to monitoring her health care, the CM will ensure Capt Jones has knowledge of and access to the full range of services and benefits available to her in the event of a medical release.

Capt Jones learns about the Vocational Rehabilitation Program for Serving Members (VRPSM), which permits her to commence vocational rehabilitation training up to six months immediately prior to her effective release date, provided she has a thorough vocational rehabilitation plan approved by her CO.

She is also advised to initiate a long-term disability (LTD) claim with Service Income Security Insurance Plan Financial Services (SISIP FS). The LTD plan is also designed to prepare personnel to obtain gainful civilian employment through participation in the Vocational Rehabilitation Program if they are eligible.

Capt Jones is loaded on the next Second Career Assistance Network (SCAN) transition seminar and workshop series that covers self-assessment for skills identification, resume writing, job search, and interview skills workshops. She is briefed on her eligibility and the requirements and conditions of the Public Service priority appointment program.

Capt Jones receives her disclosure package from DMCARM. It reads that, based on her MELs, she is considered unfit for her occupation and for continued service in the CF with no opportunity for retention; hence, she will be medically released.

Her Case Manager provides her with an application for SISIP LTD and arranges a Veterans Affairs Canada (VAC) transition interview for her. During the interview, Capt Jones is told about the full range of programs and benefits available to her under the New Veterans Charter.

Capt Jones is also registered on the Transition Assistance Program (TAP) website, another service to help her become part of the civilian workforce.

When her release date arrives, Capt Jones has already

begun the training outlined in her voc rehab plan, has submitted all the necessary applications for SISIP FS LTD and VAC programs and services, and is well on her way to a productive and satisfying second career and civilian life. ♣



INFORMATION

If you are a retired member of the CF and believe you may have a service-related medical condition that was not

diagnosed at the time of your release, you may apply to have your release item reviewed. You must provide all relevant medical documentation in support of a diagnosis, in writing, to the following address: Director Military Careers – Administration and Resource Management, DMCARM 3-3-3, National Defence Headquarters, 101 Colonel By Drive, Ottawa ON K1A 0K2. ♣

The Service Personnel Holding List is an administrative means by which a CO can request to have a member of the CF with employment limitations posted to a local administrative list, and replaced with a fully employable and deployable member of the Forces. ♣

REFERENCES

➤ **Vocational Rehabilitation Program for Serving Members (VRPSM)**

CANFORGEN 087/99 at http://vcds.dwan.dnd.ca/vcde-exec/pubs/canforgen/intro_e.asp

➤ **Second Career Assistance Network (SCAN)**

DAOD 5031-4 at www.admfincs.forces.gc.ca/admfincs/subjects/daod/intro_e.asp and at http://admfincs.mil.ca/admfincs/subjects/daod/intro_e.asp

➤ **Service Personnel Holding List (SPHL)**

CANFORGENs 100/00 and 020/02 at http://vcds.dwan.dnd.ca/vcde-exec/pubs/canforgen/intro_e.asp

➤ **Transfer of Security Clearances**

CANFORGEN 027/04 at http://vcds.dwan.dnd.ca/vcde-exec/pubs/canforgen/intro_e.asp

Afterword from the staff at The Centre

It should be apparent by now that CF members who become casualties, and the families of members who are injured or killed in service, may all need extensive care and assistance, at one stage or another, in navigating through the complex array of benefits and services now available. At such times, the following thoughts may serve as a source of guidance and comfort on the road to recovery:

We need to nurture our relationships, because happiness in life is directly proportionate to the interactions we have with our loved ones.

We must involve our spouses/partners in order to be successful in our life transitions. Our careers have been their careers; the transition to another important phase in life is as much theirs as it is ours.

We must ask questions, become our own experts and mobilize ourselves as soon as we are able to do so. But, in the interim, we need to ask for help.

We must prepare ourselves. The more we are prepared for change, the higher the likelihood we have of a successful transition.

While the CF has come a long way, so much remains to be accomplished in our

attempt to continually improve how we care for CF casualties and their families. We must perpetuate the message that the care of the injured is everyone's responsibility. To everyone who is or will be facing life-altering transitions, we wish, and will strive to provide, the very best to you and your loved ones during these trying times. ♣

Contacts

Alternative Dispute Resolution (ADR)

- 1-888-589-1750
- www.forces.gc.ca/hr/adr-marc/engraph/home_e.asp
- http://hr.d-ndhq.dnd.ca/adr-marc/engraph/home_e.asp (Intranet)

Canadian Comfort Remembrance Program

- 1-780-960-5246
- http://groups.msn.com/CanadianComfortandRemembranceProject/_whatsnew.msnw

Canadian Forces Pension

- 1-800-267-0325
- www.admfincs.forces.gc.ca/pension/intro_e.asp

Director of Casualty Support Administration (DCSA) / The Centre for the Support of Injured and Retired Members and their Families (The Centre)

- 1-800-883-6094
- Centre@forces.gc.ca
- www.forces.gc.ca/centre
- http://hr.ottawa-hull.mil.ca/centre/engraph/contact_e.asp (Intranet)

Director Accounts Processing, Pay and Pensions - Pensions Services (DAPPPS)

- 1-800-267-0325
- www.admfincs.forces.gc.ca/pension/intro_e.asp
- http://admfincs.mil.ca/dappp/intro_e.asp (Intranet)

Director Military Careers Administration and Resource Management (DMCARM)

- http://hr.d-ndhq.dnd.ca/dgmc/engraph/DGMC_DMCARM_intro_e.asp

Human Resources and Social Development Canada (HRSDC)

- 1-800-277-9914
- www.hrsdc.gc.ca/en/home.shtml

Last Post Fund

- 1-800-465-7113
- lpfnoqc@lastpostfund.ca
- www.lastpostfund.ca/

Member Assistance Program (MAP)

- 1-800-268-7708

- www.forces.gc.ca/health/services/engraph/member_assist_program_home_e.asp
- http://hr.ottawa-hull.mil.ca/health/services/engraph/member_assist_program_home_e.asp;

National Military Cemetery

- 1-800-883-6094
- www.forces.gc.ca/hr/nmc-cmn/

Ombudsman for the Department of National Defence and Canadian Forces

- 1-888-828-3626
- FAX 1-877-471-4447
- www.ombudsman.forces.gc.ca/

Operational Stress Injury Social Support (OSISS) program / Bereavement Peer Support Network

- 1-800-883-6094
- cfpeersupportnc@aol.com
- www.osiss.ca

Return To Work (RTW) program

- see DCSA/The Centre

Royal Canadian Legion

- 1-613-235-4391

- info@legion.ca
- www.legion.ca/asp/common/prov_e.html

Second Career Assistance Network (SCAN)

- 1-613-541-5010 x3860
- www.cda.forces.gc.ca/DLM/engraph/services/movingon/scan/scan_e.asp
- http://cda-acd.mil.ca/dlm/engraph/services/movingon/scan/scan_e.asp (Intranet)

Service Income Security Insurance Plan (SISIP)

- 1-800-267-6681
- www.sisip.com/

Transition Assistance Program (TAP)

- 1-800-883-6094
- www.forces.gc.ca/centre/tap

Veterans Affairs Canada (VAC)

- 1-866-522-2122 (English)
- 1-866-522-2022 (French)
- information@vac-acc.gc.ca
- www.vac-acc.gc.ca/general/



As a Case Manager, I am frequently presented with personnel who are in need of administrative assistance to locate and/or expedite documents. Sometimes, they must take immediate action in order to expedite decisions that will assist injured members.

Words are not enough to describe the relief that personnel and their families feel when a decision is expedited by Director Medical Policy (DMedPol), Directorate of Military Careers, Administration and Resource Management (DMCARM), Directorate of Compensation Benefits Administration (DCBA) or Director of Casualty Support Administration (DCSA) that opens the door for personnel to advance on new career paths or receive emergency funding.

I can't say enough about the assistance DCSA departments provide to me as a Case Manager. It is invaluable, and measured by the expressions of satisfaction I receive from personnel who have been assisted. In the vernacular, you rock!

What a great crew! Your compassion for injured soldiers in need is always felt whenever I make contact with your office. Thank you, thank you!

Steve Stawiarski, Case Manager