

Media Report 02 FEB 2024

This weeks media reports will cover and answer great questions veterans are still asking and local Media Articles and An illness or injury can have an impact on your ability to adjust to life after service. We all need healthcare services. The Treatment benefits program provides coverage for a variety of benefits and services to help you get—and stay healthy'

Letter from the Honourable Ginette Petitpas Taylor Minister of Veterans Affairs and Associate Minister of National Defence/Lettre de l'honorable Ginette Petitpas Taylor ministre des Anciens Combattants et associée de la Défense nationale

Earlier today, the final report from the [Desmond Inquiry](#) was filed with the Nova Scotia Provincial Court. The conclusion of the inquiry and release of the report may renew feelings of loss — for those in the military and Veteran community and for many of you in your service and support roles for them. Days like today can be difficult. They can bring up many memories and emotions and I hope you find comfort and support from the people around you.

For my department, Veterans Affairs Canada, Veteran well-being is at the heart of everything we do. VAC supported the inquiry process from the start and we will closely review the final report to assess its findings.

By working alongside you and your organizations, we will continue to look for ways to improve our benefits, supports and services in our mission to best support Veterans and their families.

Since this tragedy occurred, we have made changes to our supports to improve the health and well-being of Veterans and their families. This includes increased case management services, more robust and immediate mental health supports, and a re-designed transition process in partnership with our colleagues in the Canadian Armed Forces.

I know each of you are dedicated and focused on serving Veterans and their families. We share the same goal of ensuring Veterans and families have access to the support they need.

Veterans should not hesitate to reach out to Veterans Affairs Canada – support is available. Veterans can call 988, contact their health care provider, and as always, mental health professionals can be reached 24 hours a day, seven days a week, through the Veterans Affairs Canada Assistance Service at 1-800-268-7708.

Thank you for your contributions and I look forward to working together to care for and commemorate those who have served our country.

Sincerely,

The Honourable Ginette Petitpas Taylor, P.C., M.P.
Minister of Veterans Affairs and Associate Minister of National Defence

Chers partenaires,

Plus tôt aujourd'hui, le rapport final concernant l'[enquête sur l'affaire Desmond](#) a été déposé devant la Cour provinciale de la Nouvelle-Écosse. La conclusion de l'enquête et la publication du rapport pourraient raviver des sentiments de perte, autant pour les membres de la communauté militaire et de vétérans et vétéranes que pour plusieurs d'entre vous qui occupez un rôle de service et de soutien à leur égard. Les jours comme aujourd'hui peuvent être difficiles. Ils peuvent faire réapparaître de nombreux souvenirs et émotions et j'espère que vous trouverez réconfort et soutien auprès des personnes qui vous entourent.

Chez mon ministère, Anciens Combattants Canada, le bien-être des vétérans et vétéranes est au cœur de tout ce que nous faisons. ACC a soutenu le processus d'enquête dès le début et nous examinerons attentivement le rapport final pour évaluer ses conclusions.

En travaillant à vos côtés et avec vos organisations, nous continuerons de chercher des moyens d'améliorer nos avantages, nos mesures de soutien et nos services dans le

cadre de notre mission visant à mieux soutenir les vétérans et vétéranes ainsi que leur famille.

Depuis cette tragédie, nous avons apporté des changements à nos mesures de soutien pour améliorer la santé et le bien-être des vétérans, vétéranes et de leur famille. Cela comprend des services de gestion de cas accrus, du soutien en santé mentale plus solide et immédiat et un processus de transition repensé en partenariat avec nos collègues des Forces armées canadiennes.

Je sais que chacun d'entre vous est dédié à servir les vétérans, vétéranes et leur famille. Nous partageons le même objectif : faire en sorte que les vétérans, vétéranes et leur famille aient accès au soutien dont ils ont besoin.

Les vétérans et vétéranes ne doivent pas hésiter à communiquer avec Anciens Combattants Canada – du soutien est disponible. Tout vétéran ou vétérane peut composer le 988, contacter son professionnel de la santé et comme toujours, des professionnels de la santé mentale sont joignables 24 heures sur 24, sept jours sur sept, par l'intermédiaire du Service d'aide d'Anciens Combattants Canada au 1-800-268-7708.

Merci pour vos contributions et j'ai hâte que nous travaillions ensemble pour prendre soin des personnes qui ont servi notre pays et leur rendre hommage.

Très sincèrement,

L'honorable Ginette Petitpas Taylor, C.P., députée
Ministre des Anciens Combattants et ministre associée de la Défense nationale

Attendance Allowance

Introduction

The purpose of this chapter is to provide criteria for use in determining the entitlement and assessment for an Attendance Allowance award.

Entitlement to Attendance Allowance is based on three legislative requirements of the *Pension Act*.

Assessment of Attendance Allowance is the grade level determination of the extent of attendance required for specific elements, as outlined in this policy.

Related Legislation

Subsection 38(1) of the *Pension Act* reads as follows:

A member of the forces who has been **awarded a pension or compensation or both**, is **totally disabled**, whether by reason of military service or not, **and is in need of attendance** shall, on application, in addition to the pension or compensation, or pension and compensation, be awarded an attendance allowance at a rate determined by VAC in accordance with the minimum and maximum rates set out in Schedule III.

Related Policy

Allowances

Entitlement

Definitions:

For the purposes of Attendance Allowance eligibility:

"awarded a pension or compensation" is defined as in receipt of a Disability Pension of 1% or more or Prisoner of War compensation.

"totally disabled by reason of military service or not" is defined as an applicant who meets the definition of "totally disabled" in accordance with Table 1 of this policy.

"in need of attendance" is defined as the need for assistance or supervision of another individual with feeding, bathing, dressing, toileting, mobility or medication administration, **that is not already being met by** benefits, services or care provided to the client by VAC pursuant to veterans' legislation or any other program, including but not limited to federal, provincial, municipal or community programs, whereby the benefits services or care is provided at no expense to the client.

Relevant Table:

- [Table 1](#) is used to determine whether an individual is "totally disabled" for the purposes of establishing eligibility for Attendance Allowance.

Establishing Entitlement:

To establish entitlement, an applicant must meet **all three** legislative requirements. Use the following steps to verify that each requirement is met.

- **Step 1:** Is the applicant in receipt of Disability Pension of 1% or more and/or POW compensation?
- **Step 2:** Is the applicant "totally disabled"? Use [Table 1](#) to establish this requirement. In accordance with [Table 1](#), if the evidence establishes that the applicant suffers from a prolonged impairment which has lasted or is expected to last at least 12 months and the applicant meets the criteria outlined in [Table 1](#), the applicant is determined to be "totally disabled" for the purposes of Attendance Allowance eligibility.
- **Step 3:** Is the applicant in "need of attendance"? If the applicant demonstrates a need for attendance in feeding, bathing, dressing, toileting, mobility or medication administration; then the applicant meets this requirement.

If any one of the three legislative requirements are not met, the applicant does not meet eligibility and entitlement to Attendance Allowance must be denied.¹

Footnote 1

Applicants who fall into one of the "Special Categories", i.e. paraplegia; blindness or amputations, would meet the "totally disabled" requirement; however, if they do not demonstrate a "need of attendance" in any of the six elements, they would not be eligible for an attendance allowance.

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Assessment

As with any other award under the *Pension Act*, once entitlement is granted, an assessment determination is made for payment purposes.

With respect to Attendance Allowance, once the three legislated requirements are met and an applicant is found to be eligible for an award, the extent of the applicant's need for attendance is then assessed to determine the grade level for payment purposes. The extent of the need for attendance is expressed as the "grade level".

Attendance Allowance is assessed based on a record of factual information covering the applicant's actual need for attendance. The need for attendance is assessed using five grade levels ranging from Grade 5 (occasional attendance) to Grade 1 (total attendance).

The elements which are taken into consideration in the determination of a grade level include:

- The need for assistance or supervision with:
 - Feeding
 - Bathing
 - Dressing
 - Toileting
 - Mobility
 - Medication administration.

Relevant Tables

Assessment of grade levels for Attendance Allowance are to be determined by using [Table 2](#), [Table 3](#) and [Table 4](#) of this chapter.

- Table 2 outlines the five grade levels ranging from Grade I to Grade V.
- Table 3 outlines Special Categories and their prescribed Grade Level assessments.
- Table 4 contains guidelines to be used in conjunction with [Table 2](#). The guidelines help determine the extent of attendance required.

Establishing Assessment

- **Step 1:** If "Special Categories" exist, i.e. paraplegics, blindness or amputations, refer to [Table 3](#) and establish the prescribed grade level. If no "Special Categories" exist, skip this step.
- **Step 2:** Refer to [Table 2](#) and accompanying [Table 4](#) Using [Table 4](#) as a guide, rate the level of attendance required for each of the six elements indicated in [Table 4](#).
- **Step 3:** Based on the ratings from [Table 4](#), establish the grade level determination using the following instructions:

In cases where a client demonstrates a need for attendance at the same level for **two or more** of the elements found in [Table 4](#), i.e. feeding, bathing, dressing, toileting, mobility or medication administration, and demonstrates a need for attendance at another level for **two or more** of these elements, assign the grade level that is most advantageous.

Example: if a client demonstrates a need for attendance at level 5 for feeding, dressing and medication administration and a level 4 for toileting and mobility, the client will be awarded a grade level of Grade 4.

In cases where a client demonstrates a greater degree of attendance in only **one** of the elements of Table 4 i.e. feeding, bathing, dressing, toileting, mobility **or** medication administration, which is one or two levels higher than the remaining elements, the isolated higher level will not be used to establish the grade level determination. In such cases, the assessor will refer to the next highest degree of attendance required for the remaining elements in Table 4 to establish the grade level determination.

Example: If a client demonstrates a degree of attendance at level 5 for feeding, bathing, and dressing, level 4 for toileting and level 2 for mobility, in accordance with this policy, the client will not be awarded Grade 2 on the basis of the degree of attendance for mobility alone, but will be awarded the next highest degree of attendance required, which in this example is Grade 4.

In cases where a client demonstrates a degree of attendance in only **one** element of Table 4, i.e. feeding, bathing, dressing, toileting, mobility **or** medication administration, and **no need of attendance** in any of the remaining five elements, a Grade 5 attendance allowance should be awarded.

Example: If a client demonstrates a degree of attendance at level 4 for bathing only, the client will be awarded a Grade 5 attendance allowance.

In order for a client to be awarded a Grade 1 attendance allowance, the client must demonstrate a need for attendance at the Grade 1 level in **all six elements** found in Table 4, i.e. feeding, bathing, dressing, toileting, mobility **and** medication administration. In cases where a client demonstrates a need for attendance at the Grade 1 level for two to five of the elements, the attendance allowance must be awarded at one of the lower Grades, whichever the adjudicator determines is most appropriate.

Example 1: If a client demonstrates a need of attendance at level 1 for dressing, bathing, toileting, and mobility, and level 2 for feeding and medication administration, the client should be awarded a Grade 2 attendance allowance.

Example 2: If a client demonstrates a need of attendance at level 1 for bathing, dressing, toileting and mobility, level 2 for medication administration and level 3 for

feeding, the client may be awarded either a Grade 2 or 3 attendance allowance, whichever is determined to be more appropriate.

Example 3: If a client demonstrates a need of attendance at level 1 for bathing, dressing, toileting and mobility and level 3 for medication administration and feeding, the client may be awarded either a Grade 2 or 3 attendance allowance, whichever is determined to be more appropriate.

In cases dealing with "Special Categories", i.e. paraplegia; blindness or amputations, the applicant will be awarded the most beneficial grade level for which he/she qualifies using [Table 3](#) and [Table 2/](#)[Table 4](#).

Example: Using the Special Categories [Table 3](#), a Grade 4 is prescribed for blindness where an individual cannot count fingers beyond several feet. Using [Table 2](#) and accompanying [Table 4](#), the client demonstrates a need for attendance at level 4 for feeding, bathing and dressing and level 3 for mobility and medication administration. In cases such as this, compare the assessment resulting from [Table 3](#) with the assessment resulting from the rating from [Table 4](#) and select the higher assessment. In this example, Grade 3 would be awarded.

Table 1 - Definition of Totally Disabled for Attendance Allowance Eligibility

In establishing whether a person is "totally disabled" for the purposes of AA, there must be evidence of prolonged impairment - lasting 12 months or expected to last at least 12 months.

Persons in receipt of 100% Disability Pension ² from VAC are considered totally disabled for AA purposes; those in receipt of less than 100% pension must meet one of the following criteria:

1. Paraplegics, blindness and amputations as defined in [Table 3](#) - Special Categories of Chapter 5 of the Table of Disabilities.
2. Has a single amputation of one upper limb (at or above the wrist) **or** of the lower Limb (at or above the ankle).
3. Requires life sustaining therapy to support a vital function, e.g. oxygen, clapping therapy to help in breathing, kidney dialysis to filter blood. Life sustaining therapy does not include implanted devices such as a pacemaker or special programs of diet, exercise, hygiene, or medication. Medical evidence must certify that you need, and dedicate time specifically for this therapy at least three times per week to an average of at least 14 hours per week. The need for this therapy must have lasted, or be expected to last, for a continuous period of at least 12 months.

4. Unable, all or most of the time, to feed oneself, **or** takes an inordinate amount of time to do so, even with the aid of medication, therapy or a device.
5. Is dependant on another individual to wash most of body i.e. may be able to wash face and hands independently.
6. Is dependant on another individual to dress entire body.
7. Unable, all or most of the time, to personally manage bowel or bladder functions, **or** takes an inordinate amount of time to do so. (i.e. requires assistance with ostomy care, catheter care, or the changing of incontinent pads or briefs).
8. Unable, all or most of the time, to walk 50 metres (164 feet) on level ground, **or** takes an inordinate amount of time to do so, even with the aid of medication, therapy or a device.
9. Unable, all or most of the time, due to a psychological or cognitive impairment, to perceive, think or remember, even with the aid of medication, therapy or a device, i.e. cannot initiate or manage basic personal care or take medications without constant supervision.

Footnote 2

Does not include cases where the combined Disability Pension and Prisoner of War compensation is equivalent to a 100% disability pension, or the disability is assessed at 100% but only partial entitlement was awarded, e.g. $(100\% \times 4/5 = 80\%)$.

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Related Definitions

Prolonged: An impairment is prolonged if it has lasted, or is expected to last, for a continuous period of at least 12 months. In cases where terminally ill clients are not expected to live more than 12 months, their impairment will still be considered prolonged because it is impossible to know with any degree of certainty if they will indeed die within a 12-month period.

Markedly Restricted: One may be markedly restricted if, all or almost all the time, one is unable (or it takes you an extremely long time) to perform a basic activity of daily living, even with therapy (other than life-sustaining therapy) and with the use of appropriate devices and medication.

For the purposes of establishing "total disability" for AA eligibility purposes, the following elements have been taken into consideration:

- walking
- perceiving, thinking or remembering

- basic personal care, i.e. washing
- feeding
- dressing
- toileting, i.e. bowel or bladder functions

In determining the Grade of AA, activities such as housekeeping, preparing meals, shopping/errands, laundry, grounds keeping, repair and maintenance, using transportation or driving, using the telephone, managing money and social or recreational activities, are not taken into consideration.

Life-sustaining Therapy: Life-sustaining therapy includes therapy to help in breathing, i.e. oxygen, or kidney dialysis to filter blood. Life-sustaining therapy does not include implanted devices such as a pacemaker or special programs of diet, exercise, hygiene, or medication. Medical evidence must certify that you need, and dedicate time specifically for, this therapy at least three times per week, to an average of at least 14 hours per week. The need for this therapy must have lasted, or be expected to last, for a continuous period of at least 12 months.

Inordinate amount of Time: An "inordinate amount of time" is defined as significantly more time than it would take an individual of the same age to complete an activity in the absence of the impairment.

Table 2³ - Grade Levels

- Needs total care.
- Needs significant supervision or assistance (either personal or mechanical with all activities of daily living.)
- Needs intermittent daily supervision or assistance in performing some activities of daily living.
- Needs minimal supervision or assistance on a daily basis with activities of daily living but is essentially independent within home environment and can be safely left unattended for significant periods of time, overnight or throughout the day.
- Needs occasional assistance or supervision with activities of daily living.

IN THE MEDIA

[Canada takes command of Combined Task Force 150](#)

Government of Canada

Canada assumed command of Combined Task Force 150 (CTF 150) from France at a ceremony held earlier today in Bahrain. Captain (Navy) Collin Matthews of the Royal Canadian Navy has assumed command of the multinational coalition tasked with conducting maritime security operations and capacity building in the Gulf of Oman and North Arabian Sea, until July 2024. [Read More](#)

[The 'most diverse' military regiment in Canada is in Vancouver](#)

Vancouver Sun

Iranian-Canadian Farid Rohani calls it the "most diverse" regiment in the Canadian military, made up of "brothers and sisters" bonded by adversity and the willingness to serve. The Vancouver-based regiment, of which Rohani is honorary colonel, consists of men and women of Filipino, Arab, Chinese, Indigenous, European, South Asian, Latin American and Korean heritage. It's led by a Sikh-Canadian. [Read More](#)

[Les forces spéciales canadiennes se retirent du Niger](#)

Ottawa Citizen

Les forces spéciales canadiennes se sont retirées dans l'intention de poursuivre leur mission au Niger et ont retiré les commandos restants de ce pays. Cette décision intervient alors que les dirigeants militaires du Niger s'orientent vers davantage de coopération avec la Russie. [Lire Plus](#)

[Serving those who serve us](#)

Queen's University

Canadian military personnel, veterans, and their families have significantly greater risks of

experiencing many health problems than the civilian population, including mental health conditions such as