

Audit report of the 2024–25  
annual performance statements

Department of Veterans' Affairs



## **INDEPENDENT AUDITOR'S REPORT on the 2024-25 Annual Performance Statements of the Department of Veterans' Affairs**

**To the Minister for Finance**

### ***Qualified Conclusion***

In my opinion, except for the possible effects of the matter described in the Basis for Qualified Conclusion section of my report, the 2024-25 Annual Performance Statements of the Department of Veterans' Affairs (DVA):

- present fairly DVA's performance in achieving its purpose for the year ended 30 June 2025; and
- are prepared, in all material respects, in accordance with the requirements of Division 3 of Part 2-3 of the *Public, Governance, Performance and Accountability Act 2013* (the PGPA Act).

### ***Audit criteria***

In order to assess whether DVA's annual performance statements complied with Division 3 of Part 2-3 of the Act, I applied the following criteria:

- whether the entity's key activities, performance measures and specified targets are appropriate to measure and assess the entity's performance in achieving its purposes;
- whether the performance statements are prepared based upon appropriate records that properly record and explain the entity's performance; and
- whether the annual performance statements present fairly the entity's performance in achieving the entity's purposes in the reporting period.

### ***Basis for Qualified Conclusion***

#### ***Performance measures 3.1-1***

DVA has reported a result for performance measure 3.1-1, as described in Appendix A, that is not based on reliable and verifiable data sources. As a result, I was unable to obtain sufficient appropriate audit evidence that the reported result for performance measure 3.1-1 fairly presented DVA's performance for the year ended 30 June 2025.

### ***Accountable Authority's responsibilities***

As the Accountable Authority of DVA, the Secretary is responsible under the PGPA Act for:

- the preparation of annual performance statements that accurately present DVA's performance in the reporting period and comply with the requirements of the PGPA Act and any requirements prescribed by the Public Governance, Performance and Accountability Rule 2014 (the Rule);

- keeping records about DVA's performance as required by the PGPA Act; and
- establishing internal controls that the Accountable Authority determines are appropriate to enable the preparation of annual performance statements.

### ***Auditor's responsibilities for the audit of the performance statements***

My responsibility is to conduct a reasonable assurance engagement to express an independent opinion on DVA's annual performance statements.

I conducted my audit in accordance with the Australian National Audit Office Auditing Standards, which include the relevant Standard on Assurance Engagements (ASAE) 3000 *Assurance Engagements Other than Audits or Reviews of Historical Financial Information* issued by the Auditing and Assurance Standards Board.

I plan and perform my procedures to obtain reasonable assurance about whether the annual performance statements of the entity present fairly the entity's performance in achieving its purposes and comply, in all material respects, with the PGPA Act and Rule.

The nature, timing and extent of audit procedures depend on my judgment, including the assessment of the risks of material misstatement, whether due to fraud or error, in the annual performance statements. In making these risk assessments, I obtain an understanding of internal controls relevant to the preparation of the annual performance statements in order to design procedures that are appropriate in the circumstances.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my conclusion.

### ***Independence and quality control***

I have complied with the independence and other relevant ethical requirements relating to assurance engagements and applied Auditing Standard ASQM 1 *Quality Management for Firms that Perform Audits or Reviews of Financial Reports and Other Financial Information, or Other Assurance or Related Services Engagements* in undertaking this assurance engagement.

### ***Inherent limitations***

Because of the inherent limitations of an assurance engagement, it is possible that fraud, error or non-compliance may occur and not be detected. An assurance engagement is not designed to detect all instances of non-compliance of the annual performance statements with the PGPA Act and the Rule as it is not performed continuously throughout the period and the assurance procedures performed are undertaken on a test basis. The reasonable assurance conclusion expressed in this report has been formed on the above basis.

Australian National Audit Office



Lorena Skipper  
Executive Director

Canberra

30 September 2025

**Appendix A — Referencing for Measures in the Basis for Qualified Conclusion paragraph**

In preparing the Basis for Qualified Conclusion, I have used the following referencing system.

<b>Outcome 3: Acknowledgement and commemoration of those who served Australia and its allies in wars, conflicts and peace operations through promoting recognition of service and sacrifice, preservation of Australia’s wartime heritage, and official commemorations.</b>		
<b>Program 3.1 War graves</b>  This program acknowledges and commemorates veterans’ service and sacrifice and promotes an increased understanding of Australia’s wartime history. To meet the Australian Government’s commitment, the Office of Australian War Graves cares for and maintains official commemorations and sites of collective official commemoration to the standards set by the Commonwealth War Graves Commission (CWGC).  Key Activities: <ul style="list-style-type: none"><li>• Provide and maintain war cemeteries, war plots, gardens of remembrance and memorials to the missing and other individual official commemorations for those eligible veterans who have died as a result of their service to Australia in wars, conflicts and peace operations.</li></ul>		
<i>Measure number</i>	<i>Performance criteria</i>	<i>Target</i>
<b>2024-25 Performance measure</b>		
Measure 3.1-1	Quality of Service: New official commemorations are completed within published timeframes	>75%
Measure 3.1-3	Quality: Official commemorations are satisfactorily maintained to recognise the service and sacrifice of veterans	<10 complaints regarding the maintenance of any official commemoration

# 04

## Annual Performance Statements

# Statement by the accountable authority

I, as the accountable authority of the Department of Veterans' Affairs, present the 2024–25 Annual Performance Statements of the department, as required under section 39(1) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act).

In my opinion, these Annual Performance Statements accurately reflect the performance of the department and comply with section 39(2) of the PGPA Act.



**Alison Frame**  
Secretary  
Department of Veterans' Affairs  
30 September 2025

## Introduction

The Annual Performance Statements 2024–25 present achievements against the department's purpose, outcomes, key activities, programs, performance measures and targets set out in the department's Portfolio Budget Statements 2024–25 (PBS) and Corporate Plan 2024–25 (Corporate Plan).

### Key changes for 2024–25

The department continues to review and refine its performance measures and targets to improve accuracy in reporting and to better reflect the breadth of support and services it provides. This ongoing process has resulted in some key changes as set out in Table 1.

**TABLE 1: CHANGES TO PERFORMANCE MEASURES FOR 2025**

Performance measure	Description of changes
<b>Program 1.4:</b> Funeral Benefits (measures 1.4-1 and 1.4-2)	The key activity has been amended from 'provide income and financial support and compensation payment to eligible veterans and families' to 'provide financial assistance towards the cost of a funeral for eligible veterans'.
<b>Program 1.4:</b> Defence Service Homes Insurance (measure 1.4-4)	Reference to the Defence Home Ownership Assistance Scheme has been removed from the key activity as the Department of Defence is the policy owner of this scheme and has a Memorandum of Understanding with the department to administer the scheme. The key activity now reads 'enable veterans and families to access housing-related support via Defence Service Homes Insurance'.
<b>Program 2.1:</b> General Medical Consultations and Services (measure 2.1-1)	To more accurately reflect the services provided under Program 2.1, the key activity has been updated from 'work with a range of medical, dental, hearing and allied health providers throughout Australia to ensure veterans and families have access to a comprehensive range of services' to 'work with medical and dental providers throughout Australia to ensure veterans and families have access to a comprehensive range of services'.  Broader allied health providers are covered under key activities in Program 2.5 and related performance measures.
<b>Program 2.5:</b> Open Arms – Veterans & Families Counselling services (measures 2.5-4 and 2.5-5)	To remove duplication, the key activity 'provide veterans and families with access to mental health care services, including primary prevention through counselling and complex care coordination' has been removed against performance measures 2.5-4 and 2.5-5.
<b>Measure 3.2-2:</b> Increase the public's understanding and awareness of the service and sacrifice of those who have served Australia in wars, conflicts and peace operations	This measure is assessed against a target demonstrating increased engagement with the Anzac Portal. To address data integrity issues related to reporting for this measure, the methodology has changed from measuring 'engaged sessions' (a session that lasts longer than 10 seconds, has key events or has at least 2 page views) to 'sessions' (when a user views a page and no session is currently active).

(Corporate Plan pp 34–35)

## Changes to the department's performance measures post 2024–25

For 2025–26, the department has introduced a new performance measure and key activity structure that more closely reflects its core functions in delivering effective support and services to veterans and their families. This has resulted in streamlining the key activities from 17 to 4 and consolidating the 44 performance measures to 12. The performance measures are organised into 5 categories: client satisfaction, wellbeing, timeliness, quality, and effectiveness and awareness. The 4 key activities that define the department's supports and services are:

1. Provide financial support and compensation payments to eligible veterans and families.
2. Providing access to health, rehabilitation, physical and mental wellbeing and care services for veterans and families.
3. Supporting transition and employment for veterans and families.
4. Recognise the service of veterans who served in wars, conflicts and peace operations and their families.

The redesign of the Performance Reporting Framework integrates insights from the Royal Commission into Defence and Veteran Suicide (RCDVS), aligns to departmental priorities, addresses findings from the Australian National Audit Office and is grounded in robust evidence and data. Measuring against the 2025–26 Performance Reporting Framework will involve a multi-layered tolerance approach using a 4-point scale to articulate the department's performance results. This approach better reflects the complexity of the department's administered programs, supports transparency and provides visibility of continuous improvement. By adopting a more focused and simplified framework, the department will be well positioned to build its capabilities and better serve the evolving needs of veterans and families.

Further details about the new performance measures can be found in the department's 2025–26 Corporate Plan on the DVA website, [www.dva.gov.au](http://www.dva.gov.au).

## A renewed focus on wellbeing

The department places veterans and families at the centre of its strategic approach through its Wellbeing Framework and 9 domains of wellbeing.



FIGURE 2: WELLBEING FRAMEWORK



While the wellbeing of veterans and families is shaped by a complex ecosystem of factors, the Wellbeing Framework helps to illustrate these interconnected areas. The department acknowledges that it cannot be solely responsible for addressing every aspect of wellbeing, as this is a shared responsibility across the veteran support ecosystem. However, the department plays a meaningful role in supporting the veteran community across key domains where its services intersect with specific needs. By working collaboratively and with awareness of the wider context, the department aims to contribute positively to veteran and family wellbeing within its scope of influence.

In 2024–25 the department commenced work on the ‘department longitudinal wellbeing of veterans and their families’ data analytics project. This project will run over 4 years and link the department’s administrative data with Australian Bureau of Statistics’ Person Level Integrated Data Asset data such as employment, income, occupation and educational attainment. Over time this could help the department better measure its performance across various programs, policies and operations and support a greater understanding of veterans’ health and wellbeing.

A dedicated **wellbeing** performance measure will be introduced in 2025–26 and will provide insights into how well clients perceive they are supported by the department's services across various aspects of their lives, which will enable the department to take a more holistic view of client outcomes, beyond transactional service delivery. It also reflects a growing recognition, reinforced by the RCDVS, that genuine support means improving clients' overall quality of life, not just meeting individual service benchmarks. By embedding a broader focus of wellbeing into reporting, the department is better positioned to understand client needs, monitor outcomes over time, and continuously improve how services are delivered, strengthening its ability to provide responsive, veteran-centred support that truly supports client wellbeing.

The measure will be an interim measure which may change with the establishment of an agency focused on veteran wellbeing, aligned with Recommendation 87 of the RCDVS Final Report. The agency will connect veterans and families to appropriate supports and help them navigate both the department's system and the broader veteran services and support system.

### Engagement with veterans and families

Meaningful engagements are integral to all of the department's interactions with veterans and families and are a core driver for producing quality outcomes. These are a key part of the department's performance measures. The department continues to innovate and enhance its engagement with veterans, families and other key stakeholders. This is supported by the Veteran Family and Stakeholder Engagement Strategy, which ensures a structured and consistent approach to engagement across the department. The Veteran, Family and Stakeholder Experience Group and initiatives like the 2024 Veteran Families Policy Forum demonstrate the department's intent to elevate the lived experiences of the veteran community into policy and service design. Through ongoing engagement and consultation with veterans and families, the department can better understand their wellbeing needs and the pivotal role it plays in supporting positive wellbeing outcomes.

### Transition

Supporting veterans and families as they transition from service in the Australian Defence Force (ADF) is central to the department's purpose. It is key to improving veterans' wellbeing and is a shared responsibility between individuals, community, providers and the government.

The department has several initiatives to improve and better support the transition journey for individuals and families. Veteran Support Officers (VSOs) and Community Support Advisors are 2 examples. These support officers provide veterans with information on the department's services, help veterans apply for benefits and supports, and assist veterans and families during transition to civilian life.

VSOs are located on Defence bases and offer personalised support to veterans and families. They also present and connect with veterans at transition seminars, providing information on the department's support and services at approximately 30 seminars nationally, which are available virtually throughout the year. VSOs provide regular outreach services, ensuring veterans have access to support regardless of where they are located. VSOs are able to expand the level of support by referring veterans to Open Arms, Veterans' Chaplains or Coordinated Client Support.

VSOs provide this service nationally, with a permanent presence at 14 Defence bases across Australia. VSO services are also provided routinely or when needed at an additional 45 bases.

Community Support Advisors provide further support to veterans through a range of outreach services to veteran organisations, including information sessions on the department's services and programs, and representation at network and interagency events like expos and health promotion events. This helps community organisations to identify and guide veterans to the best supports available.

The new interim **effectiveness and awareness** measure in 2025–26 will improve understanding of the effectiveness of communication with transitioning personnel by indicating the level of client engagement and connection with the department. The insights gained from this measure will be used to refine interactions with veterans and families who are transitioning into civilian life.

### Royal Commission

Implementation of the government's response to the reports of the RCDVS involves significant reform which will impact the defence and veteran community. The department has acted with urgency on key recommendations, reflecting our commitment to suicide prevention and to improving the wellbeing of our serving and ex-serving ADF personnel.

Of the 122 recommendations made by the RCDVS, the department leads or jointly leads 41 of these recommendations and is working with Defence, other government stakeholders, ex-service organisations, and the veteran community to implement them. The department's progress on implementing the government response during the reporting period includes:

- undertaking extensive consultation on and co-design of the establishment of a new agency to focus on veteran wellbeing (Recommendation 87: Establish a new agency to focus on veteran wellbeing) and an ex-service organisation peak body (Recommendation 89: Establish a national peak body for ex-service organisations). Further information is provided in 'The Taskforce on Wellbeing Agency and National Peak Body' section of the Annual Report
- establishing 2 new oversight bodies to support the implementation of Recommendation 61: Establish a brain injury program. These are a Veterans' Affairs/Defence Expert Advisory Panel and a Defence-led mild traumatic brain injury Steering Group, which aim to develop baseline cognitive monitoring, mitigate risk, and support people experiencing symptoms of brain injury to access the right health care. The department has also engaged researchers from the University of New South Wales to conduct an ongoing (6-monthly) literature review to examine the impact of military service and the likelihood of brain injuries, including the potential link to low-level blast overpressure exposure
- implementing Recommendation 95: Support the expanded application of 'presumptive liability', through legislative amendments introduced under the *Veterans' Entitlements, Treatment and Support (Simplification and Harmonisation) Act 2025* (VETS Act). These amendments provide authority for the Repatriation Commission to determine an instrument to allow for presumed connection to service for specified conditions, from 1 July 2026. Further information on the VETS Act is provided in the 'Veterans' legislation reform' section of the Annual Report

- redesigning the department's Performance Reporting Framework in response to Recommendation 98: Strengthen Department of Veterans' Affairs performance targets for claims processing times and improve transparency. The new 2025–26 Performance Reporting Framework was tabled in parliament on 25 March 2025. It includes a new timeliness target for claims processing: for ≥90% of investigation ready claims to be processed within timeliness targets. Further information is provided in the 'Recommendation 98: Strengthen Department of Veterans' Affairs performance targets for claims processing times and improve transparency' section of the Annual Report
- implementing Recommendation 101(b): to reimburse veterans for travel costs to see their preferred healthcare providers, through legislative amendments introduced under the VETS Act. The amendments remove the 50 km minimum return travel distance for claims for reimbursement for travel for treatment, from 1 July 2026. Further information on the VETS Act is provided in the 'Veterans' legislation reform' section of the Annual Report
- developing a new partnership model for research and evaluation: the Veterans and Families – Learning and Innovation Network of Knowledge (VF-LINK). The objective of VF-LINK is to increase the production, use and sharing of evidence to support decision-making and policy, program and service design, including a focus on collaborating across networks and sectors to share learnings and leverage co-investment opportunities. The outcomes of VF-LINK align with a number of the RCDVS's recommendations related to research and evaluation – in particular, recommendations 14, 62, 114, 115, 116 and 121.

To ensure appropriate monitoring and governance oversight, the department has established the Royal Commission Implementation Committee (RCIC) to be responsible for overall delivery of the department's response to the RCDVS and provide assurance to government. The RCIC is chaired by the Secretary and includes membership across the Australian Public Service, as well as an external member to provide independent assurance.

Noting the interconnectedness and complexities of many of the recommendations, the department is working closely with Defence on jointly led recommendations, including joint governance through the RCIC and Defence's Royal Commission Implementation Program Board, chaired by the Chief of the Defence Force.

The department reports regularly on all of its recommendations to the Commonwealth-led Implementation Taskforce established within the Department of the Prime Minister and Cabinet and expects reporting to continue with the new Defence and Veterans' Services Commission (DVSC) once it is fully established. The DVSC will provide independent oversight and evidence-based advice to improve suicide prevention and drive better outcomes for ADF members and veterans.

# Overview

**FIGURE 3: PERFORMANCE REPORTING ALIGNMENT ACROSS THE PORTFOLIO BUDGET STATEMENTS, CORPORATE PLAN AND ANNUAL PERFORMANCE STATEMENTS**

CORPORATE PLAN PURPOSE	<b>Our purpose</b>  The purpose of the Department of Veterans' Affairs is to support the wellbeing of those who serve or have served in the defence of our nation, and families, by:		
	Partnering with organisations and individuals to help design, implement and deliver effective programs and benefits, which enhance wellbeing of veterans and families.	Providing and maintaining war graves and delivering meaningful commemorative activities to promote community recognition and understanding of the service and sacrifice of veterans.	
PORTFOLIO BUDGET STATEMENTS	<b>ENHANCE WELLBEING</b>		<b>RECOGNITION AND RESPECT</b>
	<b>Outcome 1:</b> Maintain and enhance the financial wellbeing and self-sufficiency of eligible persons and their dependants through access to income support, compensation and other support services, including advice and information about entitlements.	<b>Outcome 2:</b> Maintain and enhance the physical and mental wellbeing and quality of life of eligible persons and their dependants through health and other care services that promote early intervention, prevention and treatment, including advice and information about health service entitlements.	<b>Outcome 3:</b> Acknowledgement and commemoration of those who served Australia and its allies in wars, conflicts and peace operations through promoting recognition of service and sacrifice, preservation of Australia's wartime heritage, and official commemorations.
PORTFOLIO BUDGET STATEMENTS	<b>Outcomes</b>  1.1 Veterans' Income Support and Allowances 1.2 Veterans' Disability Support 1.3 Assistance to Defence Widow/ers and Dependants 1.4 Assistance and Other Compensation for Veterans and Dependants 1.5 Veterans' Children Education Scheme 1.6 Military Rehabilitation and Compensation Acts Payments – Income Support and Compensation		<b>Budget programs</b>  2.1 General Medical Consultations and Services 2.2 Veterans' Hospital Services 2.3 Veterans' Pharmaceutical Benefits 2.4 Veterans' Community Care and Support 2.5 Veterans' Counselling and Other Health Services 2.6 Military Rehabilitation and Compensation Acts – Health and Other Care Services
	<b>Budget programs</b>  3.1 War Graves 3.2 Commemorative Activities		
ANNUAL PERFORMANCE STATEMENTS	<b>Report against performance measures</b>		
	<b>Performance criteria</b>  Performance measures established to assess that DVA is enhancing the financial wellbeing of eligible persons and their dependants through access to income support, compensation and other support services.	<b>Performance criteria</b>  Performance measures established to assess that DVA is enhancing the physical and mental wellbeing of eligible persons and their dependants by having arrangements in place for all of our clients to have timely access to high-quality health care, counselling and rehabilitation services.	<b>Performance criteria</b>  Performance measures established to assess that DVA cares for and maintains official commemorations and sites of collective official commemoration to the standards and acknowledges and commemorates those who served Australia and its allies in wars, conflicts and peace operations.

# How performance is measured

The Annual Performance Statements illustrate the department’s achievements against its purpose as set out in the 2024–25 Corporate Plan. This is done through reporting the department’s actual performance for the year against the performance measures and targets in the department’s PBS and Corporate Plan and providing analysis of the extent to which the department has achieved its purpose, including factors contributing to the performance result. These Annual Performance Statements were developed in accordance with the PGPA Act and Department of Finance guidelines. Refer to pages 22–24 of the Corporate Plan for more information.

The department’s PBS and Corporate Plan set out performance measures and targets for each program which are a mix of qualitative and quantitative measures. For Outcome 1 and Outcome 2, performance is measured by assessing timeliness, quality and client satisfaction. For Outcome 3, performance is assessed across the Office of Australian War Graves and commemorations. This is summarised in the tables below.

TABLE 2: OUTCOME 1 PERFORMANCE MEASURE CATEGORIES

Performance category	Performance measure number
Timeliness	1.1-1, 1.1-2, 1.2-1, 1.3-1, 1.4-1, 1.5-1, 1.6-1, 1.6-2, 1.6-3, 1.6-7, 1.6-8, 1.6-9
Quality	1.1-3, 1.1-4, 1.2-2, 1.3-2, 1.4-2, 1.4-4, 1.5-2, 1.6-4, 1.6-5, 1.6-6, 1.6-10, 1.6-11, 1.6-12
Client satisfaction	1.1-5, 1.2-3, 1.3-3, 1.4-3, 1.6-13

TABLE 3: OUTCOME 2 PERFORMANCE MEASURE CATEGORIES

Performance category	Performance measure number
Timeliness	2.5-2, 2.5-4, 2.6-1
Quality of service	2.1-1, 2.2-1, 2.3-1, 2.4-1, 2.5-1
Client satisfaction	2.5-5, 2.6-3

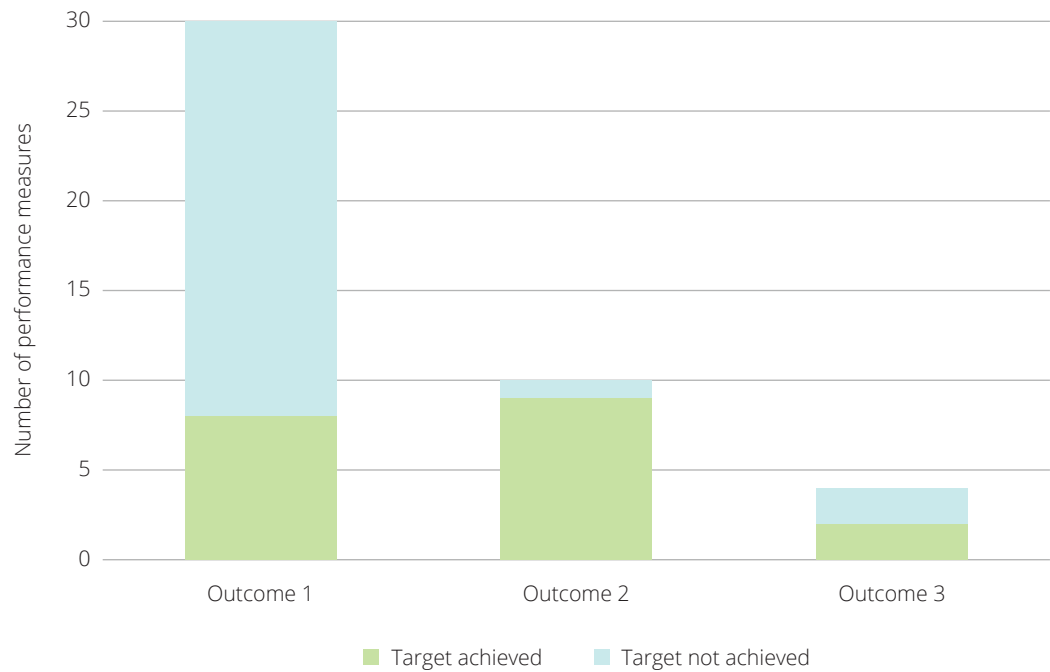
TABLE 4: OUTCOME 3 PERFORMANCE MEASURE CATEGORIES

Performance category	Performance measure number
War graves	3.1-1, 3.1-3
Commemorations	3.2-1, 3.2-2

# Overview of performance

The department achieved 19 of its 44 performance measures. Figure 4 provides a snapshot of overall performance, summarising the number of targets achieved or not achieved across the 3 outcomes.

FIGURE 4: PERFORMANCE SNAPSHOT, 2024–25



For Outcome 1, the department achieved 3 of the 12 timeliness measure targets, 3 of the 13 quality (correctness rate) measure targets, and 2 of the 5 client satisfaction targets. In the 2024–25 Budget, the department was provided an additional \$149.3 million over 4 years, including \$61.9 million in 2024–25, as part of additional resourcing to support service delivery. This funding was to maintain and increase the department’s claims processing staffing levels, ensuring the department met increased demand for claims processing and avoided the return of the claims backlog. The increasing volume and complexity of incoming claims continues to place pressure on processing capacity, despite the increase in workforce in 2023–24. Under the assumptions of the demand-driven funding model, it was estimated that 41,600 Initial Liability<sup>1</sup> (IL) claims would be received in 2024–25. However, the department received 51,201 IL claims, representing a 23% increase above expected levels. As at 30 June 2025, the department had 82,645 claims on hand,<sup>2</sup> when compared to 77,293 claims on hand at 30 June 2024.

1 Initial liability is the first step in the veterans’ compensation claims process. It determines whether the Commonwealth is liable for an injury, illness or death related to service. Establishing liability is essential to access support services and compensation under the legislation the department administers. This figure does not include Disability Compensation Payment Application for Increase claims.

2 Claims ‘on hand’ includes claims that are unallocated and claims that are being processed. Unallocated claims are those received but not yet assigned to a departmental officer for processing.

Building staff proficiency in claims processing is an ongoing focus. While notable progress has been made, time remains essential to consolidate experience and ensure sustained capability development.

For Outcome 2, the department achieved all 5 quality (service) measure targets, 2 of the 3 timeliness measure targets, and both client satisfaction targets. The department's delivery of programs under Outcome 2 reaffirms its commitment to deliver programs that foster veteran and family wellbeing. Throughout 2024–25 veterans and their families continued to benefit from access to high-quality healthcare, counselling and rehabilitation services. The department continues to maintain and develop services that support the holistic wellbeing of veterans and families, reviewing and improving business practices and enabling systems to ensure programs are delivered efficiently and effectively.

For Outcome 3, the department achieved both performance measure targets related to commemorative events but did not achieve the performance measure targets relating to war graves. In 2024–25, the department's performance results for measure 3.1-1 are not supported by sufficient evidence, due to limitations in the War Graves System. Official commemoration recognises the service of eligible veterans or serving members after their death. This takes the form of a personalised physical marker, such as a plaque. The marker can be at a site the veteran or their family have chosen. The Office of Australian War Graves (OAWG) arranges and pays for the commemoration for eligible veterans. The time to assess eligibility, construction and completion may be subject to conditions specific to site locations and factors that are outside the department's control such as climate, accessibility and/or weather conditions. For ashes placement, the timeframe for completion is reliant on the family or next of kin, who are provided the commemorative plaque for placement in the cemetery or crematorium. This has impacted on the OAWG's performance in 2024–25. The department's effectiveness in maintaining official commemorations is measured under the new performance measure 3.1-3, through the number of complaints received. Eleven complaints were received in 2024–25.

In 2024–25, the department delivered 4 commemorative events and activities, all of which were well received by the Australian and international communities. The department gauges the increase in community understanding and awareness of the service and sacrifice of those who served Australia in wars, conflicts and peace operations through increased engagement<sup>3,4</sup> with the Anzac Portal, in comparison to 2023–24. The department saw a 6% increase in sessions for 2024–25.

---

3 Engagement with the Anzac Portal is measured, using Google Analytics, as the total number of sessions. A session starts when a user views a page and no session is currently active – for example, their previous session has timed out. For the Anzac Portal, a session ends or times out after 30 minutes of user inactivity, so total sessions is not a true indicator of total audience reach.

4 The performance results are generated based on Google Analytics. The department was unable to provide assurances as to how Google Analytics was implemented on the Anzac Portal website to measure sessions, which impacts on the data accuracy and completeness of this measure.



## Outcome 1

**Maintain and enhance the financial wellbeing and self-sufficiency of eligible persons and their dependants through access to income support, compensation and other support services, including advice and information about entitlements.**

**Outcome 1** contributes to the wellbeing domains of income and finance by playing a central role in facilitating financial support through liability, compensation and income support programs. Timely processing of claims contributes to financial security by providing access to medical treatment and reducing periods of financial uncertainty. The RCDVS found that delays in the processing of claims may contribute to increased stress and financial pressure for some veterans which can impact wellbeing. Through ongoing refinement of systems and processes under Outcome 1, the department aims to enhance the experience of veterans lodging a claim, promote timely access to financial support and help safeguard the economic stability that underpins wellbeing. These efforts also support broader goals of improving service delivery and fostering more positive experiences for veterans and their families.

### Operational environment

There has been a substantial growth in the demand for benefits and services, and claims are becoming more complex. In 2024–25, the department received over 101,000 new claims, with claim lodgments per annum increasing by nearly 53% since June 2022. The number of conditions attached to each IL claim has also increased, growing to an average of 4.6 in June 2025 from 2.6 in May 2022, with a total of 156,261 conditions claimed during the financial year.

FIGURE 5: INCREASE IN INCOMING<sup>5</sup> CLAIM<sup>6</sup> VOLUMES SINCE 2021–22

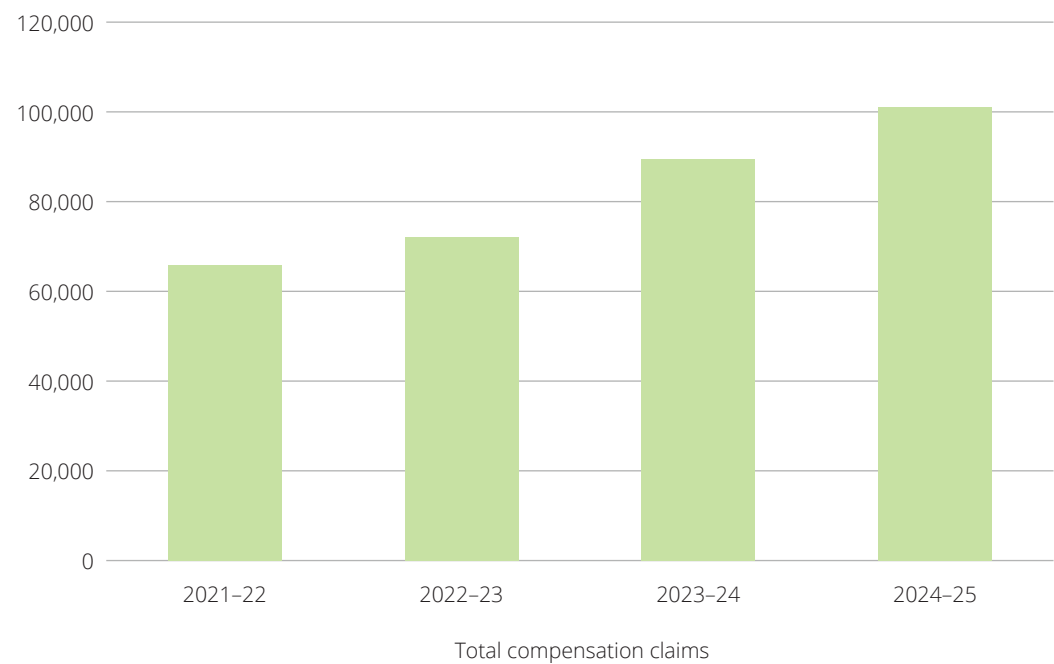


TABLE 5: INCOMING CONDITIONS VOLUME SINCE 2021–22

Incoming conditions – net conditions received	2021–22	2022–23	2023–24	2024–25
Total conditions	110,991	96,804	140,386	156,261

TABLE 6: CONDITIONS ON HAND – CONDITIONS PER CLAIM – AS AT 30 JUNE

Conditions on hand – conditions per claim	30 June 2022	30 June 2023	30 June 2024	30 June 2025
Total conditions	2.67	3.20	4.48	4.55

More conditions mean more complex claims, which often require additional information, detailed assessment and coordination which can extend processing times. Despite this pressure, the department determined nearly 103,000 claims in 2024–25, surpassing the 2023–24 result by over 2,000 determinations.

5 These figures are the number of net claims received. Net claims do not include claims that have been withdrawn. A claim can be withdrawn for a number of reasons. Most commonly, this occurs when multiple claims that are lodged online on the same day by the same client are combined into a single claim with multiple conditions, with the consent of the claimant.

6 This includes DRCA IL, MRCA IL, VEA Compensation Payment, Dual Act IL (VEA/DRCA), Tri Act IL (VEA/DRCA/MRCA), VEA Application for Increase, MRCA Permanent Impairment (PI), DRCA PI, MRCA/DRCA Incapacity, VEA War Widow and MRCA/DRCA Death Compensation. Further details about these claim types are available on the DVA website, [www.dva.gov.au](http://www.dva.gov.au).

The timeliness of claims processing continues to be a top priority for the department. Throughout 2024–25, the department has focused on finalising its oldest claims. These are claims that are aged 800+ days since lodgement. This deliberate focus has led to a marked improvement in the age of claims, with these claims representing only 1.1% of the department’s active caseload,<sup>7</sup> down from 3.7% as at 30 June 2024. This has led to a corresponding reduction in the overall age of claims on hand, with the average age of MRCA IL claims reducing by 8.6% over the last 6 months of 2024–25 and MRCA Permanent Impairment (PI)<sup>8</sup> claims reducing by 14.9%.<sup>9</sup> This result reflects the department’s commitment to resolving longstanding matters and finalising claims for those veterans who have been waiting the longest.

**TABLE 7: PERCENTAGE OF MRCA CLAIMS AGED 800+ DAYS OF CLAIMS ON HAND – AS AT 30 JUNE**

Cases over 800 days	2023	2024	2025
MRCA Initial Liability – percentage on hand	5.4%	3.5%	0.6%
MRCA Permanent Impairment – percentage on hand	0.4%	0.3%	0.5%
<b>Total – percentage on hand (as at 30 June)</b>	<b>4.9%</b>	<b>3.7%</b>	<b>1.1%</b>

**TABLE 8: AVERAGE DAYS ON HAND – 30 JUNE 2022 TO 30 JUNE 2025 (MRCA IL AND MRCA PI)**

Month	Claim type	Average days on hand	Month	Claim type	Average days on hand
June 2022	MRCA IL	324.5	June 2022	MRCA PI	158.9
December 2022	MRCA IL	341.6	December 2022	MRCA PI	172.7
June 2023	MRCA IL	315.1	June 2023	MRCA PI	164.2
December 2023	MRCA IL	285.8	December 2023	MRCA PI	147.4
June 2024	MRCA IL	231.2	June 2024	MRCA PI	148.6
December 2024	MRCA IL	214.5	December 2024	MRCA PI	169.0
June 2025	MRCA IL	196.1	June 2025	MRCA PI	143.8

While the reduction in aged claims contributes to a stronger long-term performance result, average days to determine claims is expected to remain high as the oldest claims are processed. There have already been some significant improvements in processing timeframes for some claim types. For the most common claim type, MRCA IL, the average time taken to process (TTTP) for claims received and determined within the last 12 months was 108 days. The median TTTP for this claim type was 94 days. For all claims on hand, including older claims being processed, in 2024–25 the average TTTP for MRCA IL was 315 days, down from 368 days in 2023–24. The median TTTP was 214 days.

<sup>7</sup> Active caseload refers to claims allocated to a departmental officer for processing.

<sup>8</sup> PI compensation is a tax-free, non-economic loss payment made to eligible veterans to compensate for permanent impairment caused by accepted service-related injury or disease.

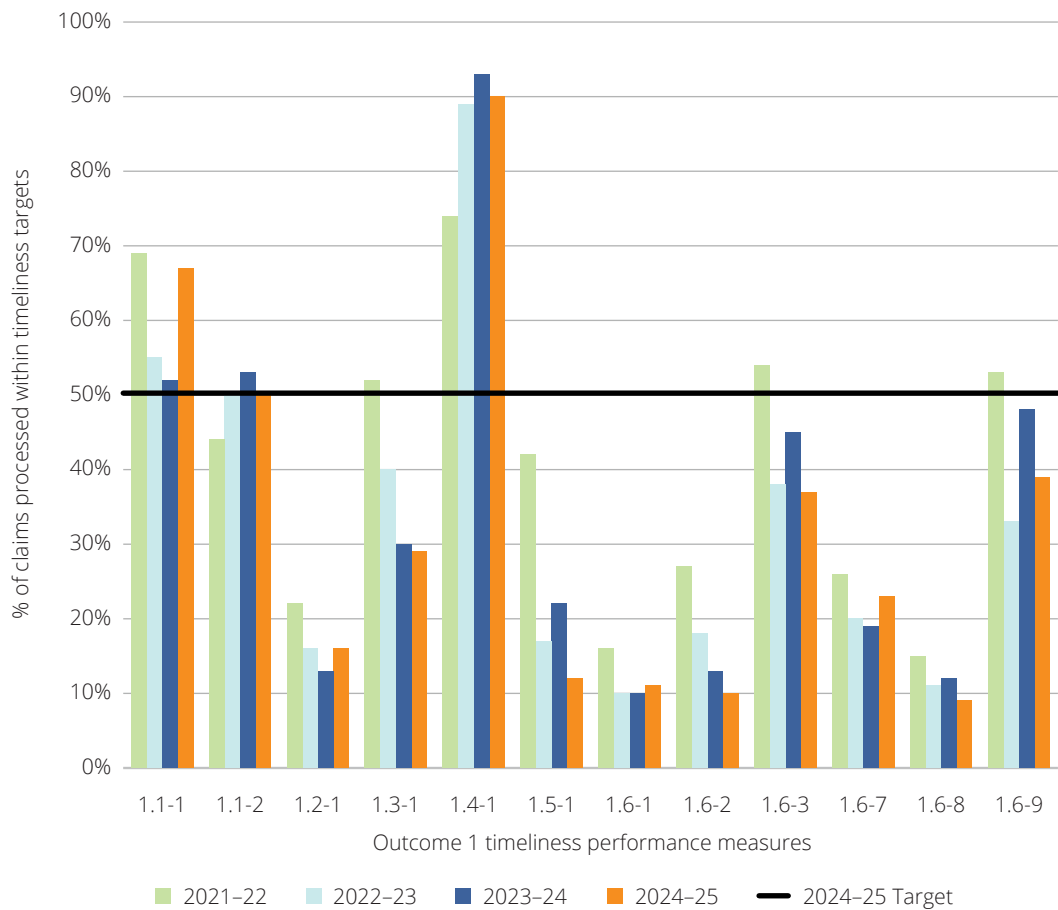
<sup>9</sup> As the department prepares to implement the VETS Act in 2026, this analysis focuses on MRCA IL and PI and is not indicative of all claim types.

TABLE 9: TIME TAKEN TO PROCESS MRCA IL CLAIMS

Time taken to process claims	Target	2022-23	2023-24	2024-25	% change since 2023-24
MRCA IL – average days	90	441	368	315	-14.4%
MRCA IL – median days	90	424	281	214	-23.8%

Figure 6 shows the 4-year trend of performance against each of the timeliness measures.

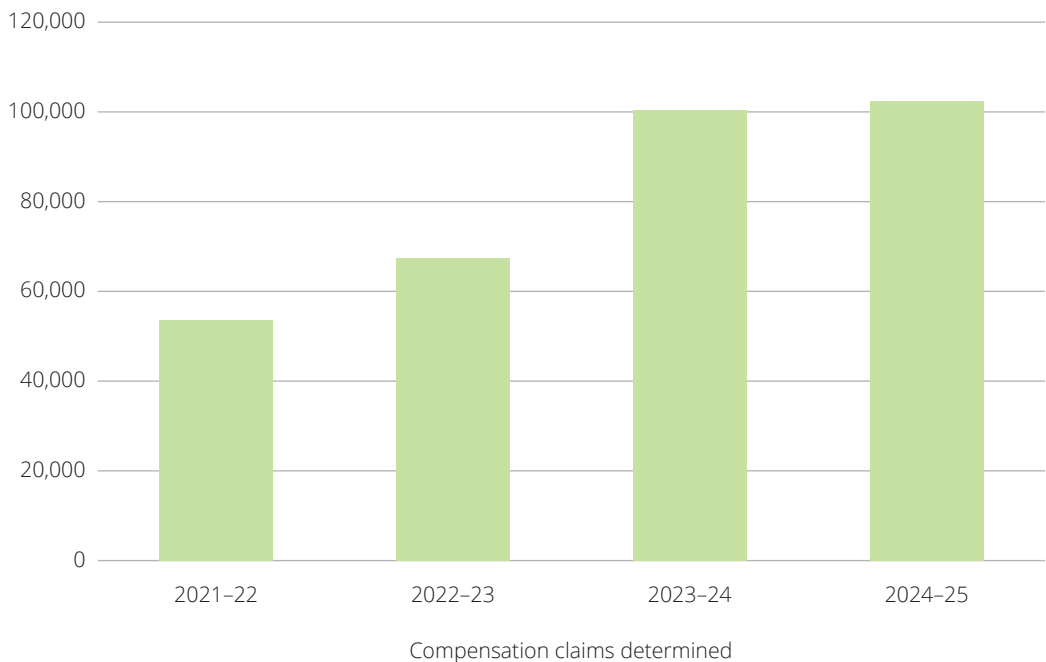
FIGURE 6: TIMELINESS – PERCENTAGE OF CLAIMS PROCESSED



The department is processing claims at record levels due to the combination of improvements in training, increasing experience of staff, and other business improvements. In 2024-25, 102,957 determinations were made, which is a 2.2% increase on the number of determinations made in 2023-24 (100,697). Since 2021-22 the number of claims determined (53,508) has risen to over 92%.

Figure 7 shows the 4-year trend of claim determinations for all claim types.<sup>10</sup>

**FIGURE 7: CLAIM DETERMINATIONS – OVERALL VOLUME OF CLAIM DETERMINATIONS**



Changes to claims lodgment, including encouraging clients to submit complete claims through the online claiming portal MyService, and transitioning to a framework where timeliness is measured from the point where a claim has all the relevant content is expected to result in shorter processing timeframes in 2025–26. These improvements position the department well for implementation of the VETS Act from 1 July 2026.

The increase in claim complexity has created challenges in achieving all quality targets for 2024–25. The recruitment of staff in recent years has temporarily shifted the overall experience profile of claims processing staff, with a higher proportion of less experienced staff. While all new staff are appropriately trained and accredited through a comprehensive blended training program (e-learning, classroom, coaching and networking), developing confidence and capability in decision-making takes time. The department continues to build the proficiency of its claims processing staff, with experienced members of staff playing a critical role in mentoring and supporting newer colleagues. This collaborative approach has temporarily impacted on outcomes as capability continues to strengthen. While notable progress has been made, embedding experience and ongoing consolidation of knowledge is vital to improving these skills over time.

<sup>10</sup> This includes DRCA IL, MRCA IL VEA compensation payment, Dual Act IL (VEA/DRCA), Tri Act IL (VEA/DRCA/MRCA), VEA application for increase, MRCA PI, DRCA PI, MRCA/DRCA incapacity, VEA war widow, and MRCA/DRCA death compensation.

The claims quality assurance (QA) program plays a key role by monitoring decision outcomes, identifying errors and analysing trends to drive systemic improvements by testing a sample of finalised claims for accuracy. Its primary purpose is to support staff in delivering accurate decisions the first time. QA findings inform targeted interventions through engagement with processing staff, training enhancements and staff accreditation, and updates to policies and procedures. The program also provides timely feedback to address knowledge gaps or clarify the application of legislation and policy. Regular reporting supports the timely correction of identified errors and helps build capability. Further improvements in performance are expected as staff proficiency grows.

The backlog of initial liability, incapacity<sup>11</sup> and permanent impairment unallocated claims identified by the RCDVS has been cleared. While clearing the backlog of unallocated claims was an important first step, the claims process is not static. Despite record numbers of claims continuing to be lodged by the veteran community, unallocated initial liability claims consistently remain below 'business as usual' expectation (assigned to a claims processing staff member within 2 weeks of receipt). This highlights the department's focus on processing liability claims, which is a crucial first step in veterans being able to access other departmental services and supports. This is essential as it helps mitigate vulnerability by ensuring veterans receive timely and effective support from the start.

## Outcome 1 performance measures and results

Outcome 1 provides veterans and their families with access to income support, compensation and other support services. The department's performance under Outcome 1 is measured by achievements in 3 categories: timeliness, quality and client satisfaction.

**Timeliness** is a measure of the time taken to process claims and change of circumstance requests. This is the length of time taken, in calendar days, for a decision to be made on a claim from the time it is received. These measures consider claims that are determined within the 2024–25 reporting year and exclude active claims that have not yet been finalised. The department uses timeliness measures as proxy tools to assess efficiency and give an indication of efficiency over time.

**Quality** (correctness rate) performance measures assess the correctness of claims processing, including eligibility, entitlements received and decision-making.

Quality correctness rates for claims are based on a random sample of claim decisions extracted from the Quality Assurance Sampling & Recording System for manual checking by a suitably qualified staff member not involved in the decision-making process. The QA program sample is determined each year using the Sawyer sampling method, which is a generally accepted methodology used for internal auditing and provides a consistent basis for selecting samples based on population volume, past results and assessed level of risk.

**Client satisfaction** is captured through a survey and considers the experience of individuals when claiming or accessing entitlements.

In 2024–25, the department achieved 3 of the 12 timeliness measure targets, 3 of the 13 quality measure targets, and 2 of the 5 client satisfaction targets.

---

<sup>11</sup> Incapacity compensation payments for veterans are designed to provide financial support when a veteran is unable, or has a reduced ability, to work due to an injury or disease accepted as service-related.

## Program 1.1: Veterans' Income Support and Allowances

This program delivers means-tested income support pensions and other allowances to eligible veterans and dependants under the *Veterans' Entitlements Act 1986* (VEA). Income support provides a regular means-tested payment for eligible veterans and their dependants with limited means.

*Key activities:*

- Provide income and financial support and compensation payments to eligible veterans and families.

**TABLE 10: PROGRAM 1.1 VETERANS' INCOME SUPPORT AND ALLOWANCES – PERFORMANCE MEASURES AND RESULTS**

No	Performance measure	Target	2023-24 actual result	2024-25 actual result	Achieved
1.1-1	Timeliness: The percentage of claims processed within 30 days <sup>1</sup>	≥50%	53%	66%	Achieved
1.1-2	Timeliness: The percentage of change of circumstances processed within 10 days <sup>2</sup>	≥50%	54%	50%	Achieved
1.1-3	Quality: Correctness rate of processed new claims <sup>1</sup>	≥95%	93%	94%	Not achieved
1.1-4	Quality: Correctness rate of processed change of circumstances <sup>2</sup>	≥95%	98%	95%	Achieved

1 This measure considers the following claim types under the VEA and the *Social Security Act 1991*: Service Pension, Income Support Supplement, Veteran Payment, Age Pension, Qualifying Service, Gold Card, Commonwealth Seniors Health Card, and Pension Bonus Scheme.

2 This measure relates to the processing of change of circumstances notifications related to income support. Change of circumstances notifications cover a range of income- and asset-based items as well as changes in living arrangements, relationship status, accommodation, financial circumstances etc.

(PBS pp 29–30, Corporate Plan p 25)

### Timeliness

The timeliness targets for measures 1.1-1 and 1.1-2 were successfully achieved. Notably, the result for measure 1.1-1 improved by 13% compared to the previous year, reflecting the impact of targeted efficiency initiatives. These included proactive case monitoring to ensure timely processing and increasing staff capability through focused training.

Although the target for measure 1.1-2 was achieved, performance declined compared to the 2023–24 result. This reduction was primarily due to the continued management of older, unresolved cases. As the volume of older work continues to decrease, further improvement is expected.

### Quality (correctness rates)

The department did not achieve the quality target for 2024–25 under measure 1.1-3; however, improvement was demonstrated by exceeding the 2023–24 result of 93%.

The quality measure for change of circumstances (measure 1.1-4) was achieved in 2024–25; however, the result fell short of the 2023–24 result.

The Veterans' Income Support and Allowances team benefits from process maturity, with strong adoption of improvements in systems, procedures and documentation. The department will continue to enhance the QA program to enable early detection and correction of errors.

Program 1.2: Veterans’ Disability Support

This program provides compensation in the form of disability pensions and ancillary benefits to eligible veterans for the tangible effects of war or defence service.

Key activities:

- Provide disability support and compensation payments to eligible veterans.

TABLE 11: PROGRAM 1.2 VETERANS’ DISABILITY SUPPORT – PERFORMANCE MEASURES AND RESULTS

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
1.2-1	Timeliness: The percentage of claims processed within 100 days <sup>3</sup>	≥50%	14%	16%	Not achieved
1.2-2	Quality: Correctness rate of processed claims <sup>3</sup>	≥95%	90%	90%	Not achieved

3 This measure relates to the processing of VEA Disability Compensation Payment Claims, VEA Applications for Increase and VEA Assessments/Reviews.

(PBS p 31, Corporate Plan p 25)

Timeliness

The timeliness performance target (measure 1.2-1) was not achieved. Performance was impacted by the increasing volume and complexity of claims, and continued management of older, unresolved cases. In most disability support claims, medical information needs to be sought before a claim can be finalised. Extended timeframes for obtaining this medical information and challenges in accessing specialist services for claim investigations have impacted on the timeframes. These systemic issues continue to affect overall performance.

Quality (correctness rates)

The department did not achieve the quality target for 2024–25 under measure 1.2-2. Disability support results were similar to those in 2023–24.

The results were influenced by an increase in claim volumes, with multi-Act eligibility driving up claim complexity and the potential for error. An increased focus on timeliness, while positive in terms of output, demonstrated that shorter processing times can result in lower correctness rates. The identification of skills gaps between delegates and providing targeted development training opportunities will enhance future results.

Program 1.3: Assistance to Defence Widow/ers and Dependants

The war widow/ers pension is part of a compensation package provided in recognition of their special circumstances and to compensate a widowed partner of a veteran where there was a connection between the veteran’s death and their service. Eligible children are also provided with financial support.



#### Key activities:

- Provide income and financial support and compensation payments to eligible dependants.

**TABLE 12: PROGRAM 1.3 ASSISTANCE TO DEFENCE WIDOW/ERS AND DEPENDANTS  
– PERFORMANCE MEASURES AND RESULTS**

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
1.3-1	Timeliness: The percentage of claims processed within 30 days <sup>4</sup>	≥50%	31%	29%	Not achieved
1.3-2	Quality: Correctness rate of processed claims <sup>4</sup>	≥95%	95%	99%	Achieved

<sup>4</sup> This measure considers war widow/er claims under the VEA.

(PBS p 32, Corporate Plan p 26)

#### Timeliness

The department did not achieve the timeliness target for measure 1.3-1. Assistance to Widow/ers and Dependants claims require medical evidence and records. However, there have been difficulties obtaining medical records for deceased veterans, such as coroner reports or death certificates. These delays are usually lengthy, affecting overall timeliness outcomes.

#### Quality (correctness rates)

The department exceeded the quality performance target under measure 1.3-2, achieving a 99% accuracy rate for 2024–25. This result reinforces the department's commitment to delivering high-quality outcomes. The Assistance to Defence Widow/ers and Dependants team benefit from staff proficiency and experience. This is an established team with a high level of claims processing expertise, supported by robust on-the-job training and mentorship, which has maintained continuity of performance for this measure.

#### Program 1.4: Assistance and Other Compensation for Veterans and Dependants

This program delivers other allowances and assistance to eligible veterans and dependants under the VEA and related legislation, including home insurance, funeral benefits, prisoner of war ex gratia payments, and payments on behalf of Commonwealth and allied countries. Assistance is also provided to the ex-service community through funding of the Building Excellence in Support and Training grants and the Advocacy Training and Development Program.

The key activities assess performance in relation to the following subset of the broader program:

- Funeral Benefits
- Home Insurance.

#### Key activities:

- Provide financial assistance towards the cost of a funeral for eligible veterans.

TABLE 13: PROGRAM 1.4 ASSISTANCE AND OTHER COMPENSATION FOR VETERANS AND DEPENDANTS – PERFORMANCE MEASURES AND RESULTS

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
Funeral benefits					
1.4-1	Timeliness: The percentage of claims processed within 10 days <sup>5</sup>	≥50%	94%	90%	Achieved
1.4-2	Quality: Correctness rate of processed claims <sup>5</sup>	≥95%	98%	93%	Not achieved

5 This measure considers funeral benefits claims under the VEA.

(PBS p 33, Corporate Plan p 26)

Timeliness

In 2024–25, the department achieved the timeliness measure 1.4-1. Funeral benefits continue to be effectively managed, with processes in place to ensure they are completed within the 10-day target.

Quality (correctness rates)

The department did not achieve the quality measure 1.4-2, seeing a decrease from the 98% result achieved in 2023–24. The reduction in quality result reflects the involvement of recently trained delegates in finalising claims. The identification of skills gaps of delegates and provision of targeted development training opportunities will enhance future results.

Key activities:

- Enable veterans and families to access housing-related support via Defence Service Homes Insurance.

TABLE 13: PROGRAM 1.4 ASSISTANCE AND OTHER COMPENSATION FOR VETERANS AND DEPENDANTS – PERFORMANCE MEASURES AND RESULTS (continued)

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
Defence Service Homes Insurance					
1.4-4	Quality: DSH Insurance complies with/meets the requirements of the 2020 General Insurance Code of Practice <sup>6, 7</sup>	≥90%	N/A	96%	Achieved

6 This measure involves completing targeted audits, across 7 DSH Insurance transactions, to measure DSH Insurance compliance with the General Insurance Code of Practice (GICOP). The transaction types sampled for auditing within this measure are based on key touch points relating to customer experience within the insurance policy lifecycle, as well as being commitments that the Insurance Council of Australia Code Governance Committee found to be most frequently breached by general insurers. While the audits conducted could identify breaches relating to any article specified within the GICOP, the transaction types sampled are focused on the key articles relating to policy management, claims handling and complaints. A mixture of 100% and 10% samples from the 7 transaction types are selected each month for auditing.

7 The GICOP sets out the standards that general insurers must meet when providing services to their customers and sets out timeframes for insurers to respond to claims, complaints and requests for information. The results help to both gauge department performance and identify potential process deficiencies and improvement opportunities.

(PBS p 33, Corporate Plan p 26)

DSH Insurance achieved the target under measure 1.4-4 in 2024–25, which changed from a customer satisfaction survey-based measure in 2023–24 to the current measure focused on compliance with the 2020 General Insurance Code of Practice (GICOP). The new measure is multi-dimensional, encompassing service standards within both the sales and the policy and claim functions within DSH Insurance. It targets specific quality service standards including timeliness, communication and accuracy, to give a comprehensive overview of the health of DSH Insurance service delivery.

During 2024–25, DSH Insurance navigated significant weather events including the Townsville events of January–February 2025, Cyclone Alfred in February–March 2025 and Mid-North Coast New South Wales flooding in May 2025. These weather events resulted in increased customer contact, meaning increased touch points relating to GICOP compliance. All business units adopted a strong compliance focus, with ongoing improvement in processes and additional monitoring, training and feedback provided as results were reported throughout the year, which led to positive performance results in 2024–25.

**Program 1.5: Veterans’ Children Education Scheme**

Under the Veterans’ Children Education Scheme and the Military Rehabilitation and Compensation Act Education and Training Scheme, education allowances are paid to eligible children of ADF members who have died or been severely injured as a result of service. The schemes provide financial assistance, student support services, guidance and counselling for eligible students undertaking primary, secondary and tertiary full-time study within Australia.

*Key activities:*

- Provide eligible children of veterans and families with financial assistance and support to access education and skills development.

**TABLE 14: PROGRAM 1.5 VETERANS’ CHILDREN EDUCATION SCHEME – PERFORMANCE MEASURES AND RESULTS**

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
1.5-1	Timeliness: The percentage of claims processed within 28 days <sup>8</sup>	≥50%	22%	12%	Not achieved
1.5-2	Quality: Correctness rate of processed claims <sup>8</sup>	≥95%	99%	93%	Not achieved

8 This measure considers claims under the Veterans’ Children Education Scheme and the MRCA Education Training Scheme.

(PBS p 34, Corporate Plan p 27)

### Timeliness

The department did not achieve the timeliness target for Veterans’ Children Education Scheme (measure 1.5-1) in 2024–25. In the last 12 months, the number of clients supported under the scheme increased by 17%, resulting in an increase in ongoing assessments post the initial claim, which has impacted performance against measure 1.5-1. Implementation of business improvement processes will expand processing capacity and is expected to better support timely processing of claims.

### Quality (correctness rates)

The department did not achieve the quality target for 2024–25 under measure 1.5-2, with a reduction from the 2023–24 result of 99%. The results were impacted by the increase in the number of clients under education scheme, which placed additional strain on quality as staff focused on meeting the increased demand.

### Program 1.6: Military Rehabilitation and Compensation Acts Payments – Income Support and Compensation

This program provides compensation to eligible veterans and dependants under the *Safety, Rehabilitation and Compensation (Defence-related Claims) Act 1988* (DRCA), the *Military Rehabilitation and Compensation Act 2004* (MRCA) and related legislation. The DRCA (and MRCA for injuries since 1 July 2004) provides coverage for injured ADF members to support their return to health, work and independence. There is also compensation for eligible dependants, and MRCA health care and other ancillary benefits.

Key activities:

- Provide income and financial support and compensation payments to eligible veterans and families.

**TABLE 15: PROGRAM 1.6 MILITARY REHABILITATION AND COMPENSATION ACTS PAYMENTS – INCOME SUPPORT AND COMPENSATION – PERFORMANCE MEASURES AND RESULTS**

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
1.6-1	Timeliness: The percentage of DRCA liability claims processed (determined) within 100 days <sup>9</sup>	≥50%	10%	11%	Not achieved
1.6-2	Timeliness: The percentage of DRCA permanent impairment claims processed (determined) within 100 days	≥50%	14%	10%	Not achieved
1.6-3	Timeliness: The percentage of DRCA incapacity claims processed (determined) within 50 days	≥50%	46%	37%	Not achieved
1.6-4	Quality: Correctness rate of processed DRCA liability claims	≥95%	93%	88%	Not achieved
1.6-5	Quality: Correctness rate of processed DRCA permanent impairment claims	≥95%	96%	94%	Not achieved

No	Performance measure	Target	2023-24 actual result	2024-25 actual result	Achieved
1.6-6	Quality: Correctness rate of processed DRCA incapacity claims	≥95%	87%	88%	Not achieved
1.6-7	Timeliness: The percentage of MRCA liability claims processed (determined) within 90 days <sup>10</sup>	≥50%	19%	23%	Not achieved
1.6-8	Timeliness: The percentage of MRCA permanent impairment claims processed (determined) within 90 days	≥50%	14%	9%	Not achieved
1.6-9	Timeliness: The percentage of MRCA incapacity claims processed (determined) within 50 days	≥50%	47%	39%	Not achieved
1.6-10	Quality: Correctness rate of processed MRCA liability claims	≥95%	84%	87%	Not achieved
1.6-11	Quality: Correctness rate of processed MRCA permanent impairment claims	≥95%	85%	90%	Not achieved
1.6-12	Quality: Correctness rate of processed MRCA incapacity claims	≥95%	94%	87%	Not achieved

9 This measure considers DRCA IL and DRCA Death claims.

10 This measure considers MRCA IL and MRCA Death claims.

(PBS pp 35–36, Corporate Plan p 28)

## Timeliness

The department did not achieve the timeliness targets for IL measures 1.6-1 and 1.6-7. Performance in 2024–25 for these measures is below target largely due to a deliberate focus on resolving longstanding claims to deliver outcomes to clients who have been waiting the longest. Timeliness outcomes across DRCA and MRCA IL claims processing (measures 1.6-1 and 1.6-7 respectively) have been impacted by the increasing volume, size and complexity of incoming claims, extended timeframes for obtaining medical information and challenges in accessing specialist services to complete claim investigations.

The department did not achieve the timeliness targets for PI claims (measures 1.6-2 and 1.6-8) in 2024–25. Claim volumes continue to exceed available resources, impacting on the timeliness of investigations. While delegates have matured in their roles and the monthly volume of determinations has increased, high caseloads (particularly of older claims) are still affecting processing times. Claims processing staff have made significant efforts to resolve longstanding claims over 800 days old, which has also lowered the result. As the volume of older work continues to decrease, improvement in processing timeframes is expected.

The department did not achieve the timeliness targets for incapacity claims processing (1.6-3 and 1.6-9 respectively). The continued focus on determining the oldest claims impacted achievement of timeliness measures in this reporting period. While this focus is expected to continue, the average age of claims on hand decreased over the reporting period, and a commensurate improvement in the timeliness measures is anticipated.

Quality (correctness rates)

The department did not achieve the quality targets for 2024–25 under Program 1.6. The quality (correctness rate) of processed claims continues to be affected by an increase in claim complexity (multiple conditions being claimed and/or multi-Act eligibility).

Record processing levels, while positive in terms of output, placed additional strain on quality as staff worked to reduce aged claims. While increasing capacity, the influx of less experienced staff in 2023–24 temporarily affected accuracy as they progressed through induction and training. Experienced staff were taken offline to train incoming staff, which reduced overall processing capability and introduced inconsistencies during handover periods.

While the performance target of ≥95% was not achieved in 2024–25, the department demonstrated improved results from 2023–24 in DRCA incapacity claims (measure 1.6-6), MRCA IL claims (measure 1.6-10) and MRCA PI claims (measure 1.6-11). The result for DRCA PI claims (measure 1.6-5) came within 1% of achieving the quality target.

TABLE 16: CLIENT SATISFACTION RESULTS – PROGRAMS 1.1, 1.2, 1.3, 1.4 AND 1.6

Client satisfaction

Client satisfaction for measures 1.1-5 (income support), 1.2-3 (disability support), 1.3-3 (war widow/ers), 1.4-3 (funeral benefits) and 1.6-13 (Safety, Rehabilitation and Compensation – DRCA and MRCA) is measured through an annual independent Client Benefits Client Satisfaction Survey conducted by ORIMA Research. For these measures, analysis of results was conducted for the period from 1 April 2024 to 31 March 2025. The level of satisfaction reported is the annual figure. Clients were either selected at random or as a census of all clients within a program.

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
1.1-5	Client satisfaction (Income Support): The percentage of clients satisfied with the level of customer service they received when accessing their entitlement <sup>11, 12, 13</sup>	≥80%	69%	70%	Not achieved
1.2-3	Client satisfaction (Disability Support): The percentage of clients satisfied with the level of customer service they received when accessing their entitlement <sup>13, 14, 15</sup>	≥80%	52%	50%	Not achieved
1.3-3	Client satisfaction (War Widows): The percentage of clients satisfied with the level of customer service they received when accessing their entitlements <sup>13, 16</sup>	≥80%	67%	80%	Achieved
1.4-3	Client satisfaction (Funeral Benefits): The percentage of clients satisfied with the level of customer service they received when accessing their entitlements <sup>13, 17</sup>	≥80%	86%	82%	Achieved

No	Performance measure	Target	2023-24 actual result	2024-25 actual result	Achieved
1.6-13	Client satisfaction (Safety, Rehabilitation and Compensation – DRCA and MRCA): The percentage of clients satisfied with the level of customer service they received when accessing their entitlements <sup>13, 18</sup>	≥80%	54%	60%	Not achieved

11 This measure considers the following claim types under the VEA: Service Pension, Veteran Payment, and Income Support Supplement. It also considers Age Pension claims under the Social Security Act.

12 The response rate for 2024–25 was 31% (579 clients) for Program 1.1.

13 Client satisfaction is measured through an annual independent Client Benefits Client Satisfaction Survey conducted by ORIMA Research, which for this year covered the period 1 April 2024 to 31 March 2025. The survey asks clients to rate their level of satisfaction with their experience making a claim, on a scale of 'Very satisfied', 'Satisfied', 'Somewhat satisfied', 'Somewhat dissatisfied', 'Dissatisfied' or 'Very dissatisfied'. Responses of 'Very satisfied', 'Satisfied' and 'Somewhat satisfied' are counted as satisfied for this measure. The overall survey response rate for all Outcome 1 client satisfaction measures for 2024–25 was 29% (3,615 clients).

14 This measure considers the following claim types under the VEA: disability compensation payment claims (including initial liability) applications for increase, assessments, and reviews.

15 The response rate for 2024–25 was 36% (936 clients) for Program 1.2.

16 This measure considers War Widows Pension claims under the VEA. The response rate for 2024–25 was 31% (116 clients) for Program 1.3.

17 The response rate for funeral benefits for 2024–25 was 30% (323 clients) for Program 1.4.

18 This measure considers the following claim types: MRCA and DRCA IL, MRCA and DRCA PI, and MRCA and DRCA incapacity. The response rate for 2024–25 was 26% (1,661 clients) for Program 1.6.

(PBS pp 29–36, Corporate Plan pp 25–28)

In 2024–25, the department achieved the client satisfaction target of ≥80% for 2 out of 5 measures (measures 1.3-3 for war widow/ers and 1.4-3 for funeral benefits). Key factors influencing client satisfaction were time taken to process claims, and whether benefits received were in line with clients' expectations.

This year the Client Benefits Client Satisfaction Survey was completed by 3,615 clients, representing a response rate of 29% for the overall survey. This is higher than the response rates of 19% in 2023–24 and 26% in 2022–23 and is similar to the result of 31% in 2021–22. Overall satisfaction with the benefits claims process rose to 60% in 2024–25, up from 55% in 2023–24 and 50% in 2022–23. These improvements reverse most of the decline in satisfaction recorded in the 3 years prior to 2022–23. While satisfaction ratings were stable for most benefit claim types, solid increases were recorded among MRCA and war widow/er and dependent claimants. Satisfaction rates among clients aged under 46 years increased strongly from 49% in 2023–24 to 58% in 2024–25. While satisfaction rates remained lower among younger clients than older clients (64% for those aged over 65), the gap has narrowed considerably since 2022–23. This is reflected in improvements in perceived claim processing times, with the result for clients indicating that their claim took less than 12 months to process increasing to 35%, from 29% in 2023–24, and just over 52% of respondents in 2024–25 indicating that they received most or all of the claim outcome they wanted. Modest improvements to client satisfaction rates were observed across most aspects of claims assessments in 2024–25, building on solid gains in 2023–24, including the time taken for a staff member to be assigned to claims (from 21% in 2022–23 to 31% in 2024–25), clarity of communication about what is required to finalise claims (36% to 45%) and being kept up to date about the progress of claims (24% to 34%).

## Outcome 2

**Maintain and enhance the physical and mental wellbeing and quality of life of eligible persons and their dependants through health and other care services that promote early intervention, prevention and treatment, including advice and information about health service entitlements.**

**Outcome 2** supports the health and wellbeing of veterans and their families by facilitating access to a broad range of physical and mental health services, including general and specialist medical and health care, hospital services, pharmaceuticals, rehabilitation, allied health support, mental health services, and preventative health programs. These services are delivered through arrangements with public and private sector providers and are aligned with the department's Wellbeing Framework, which recognises the interconnected nature of wellbeing across 9 domains.

Outcome 2 contributes particularly to the domains of health, social support and connection, education and skills by promoting early intervention, recovery-focused care, and tailored supports that respond to the unique needs and experiences of veterans and their families. Open Arms – Veterans & Families Counselling (Open Arms) plays a vital role in supporting the mental health and wellbeing of current and former ADF members and families through the provision of free confidential counselling and wellbeing support services. Open Arms provides 24/7 crisis support; individual, couple and family counselling; group programs; care coordination; and lived experience peer support. These services play a critical role in promoting long-term wellbeing and enhance social support networks by encouraging connection through peer support, family counselling and community-based programs. Through this approach, Outcome 2 enhances quality of life and supports long-term, sustainable wellbeing outcomes.

### Operational environment

Throughout 2024–25 veterans and their families continued to benefit from access to high-quality healthcare, counselling and rehabilitation services under Outcome 2. The department recognises that health providers are key partners in optimising health and wellbeing outcomes for veterans, through the delivery of quality services. The department is actively engaging with providers to create greater awareness of its services, programs and entitlements available to veterans and families beyond the Medicare Benefits Scheme and the Pharmaceutical Benefits Scheme.

The department remains committed to supporting veterans and their families to age well by ensuring they have access to information, services and supports that enable them to live safely and independently at home for as long as possible, and to transition into and live well in residential aged care when needed.



The department is also actively trying to reach members of the veteran community not previously known to the department who would benefit from Open Arms services. The Enhancing Access to Mental Health Services for Veterans and Families Program seeks to reach members of the veteran community who would benefit from support, by establishing partnerships enabling seamless referrals between Open Arms and mental health services.

In collaboration with the Department of Health, Disability and Ageing, Open Arms has incorporated a veteran identifier in the Initial Assessment and Referral Decision Support Tool (IAR-DST), an evidence-based protocol for conducting initial assessment and referral of individuals presenting with mental health conditions in primary healthcare settings.

Working in partnership with Statewide Mental Health Services, Tasmanian Mental Health and Alcohol Directorate, Primary Health Tasmania and the Department of Health, Disability and Ageing, Open Arms has successfully implemented 2 new pilots: the Stress Resilience and Functioning Program to support access for veterans in rural and remote areas, with a total of 5 programs delivered across Devonport, Burnie, Launceston and Hobart; and a Central Intake and Referral Service pilot enabling referrals from Tasmanian Mental Health Services directly to Open Arms.

## Outcome 2 performance measures and results

The department's performance under Outcome 2 is measured through the quality, timeliness and client satisfaction results for the services provided.

**Timeliness** targets are the percentage of claims processed, referrals allocated or assessments completed within a set timeframe. The department uses timeliness measures as proxy tools to assess efficiency. These timeliness measures can give an indication of efficiency over time.

**Quality** (service) performance measures provide a comparison of the number of complaints recorded about the programs compared to the number of clients accessing services. Details on how to provide feedback or lodge a complaint with the department are provided in the [DVA Service Charter](#) and on the department's [website](#). Feedback and complaints can be lodged via the online portal MyService using an online form, or by email, phone or post. Complaints are registered in the Client Feedback Management System when they are received by the department. Reports from a database of all client feedback identify the number of complaints registered in relation to unmet access and/or quality of service.

This is a proxy measure rather than a direct measure of satisfaction. The indicator focuses on a small cohort of the general population (that is, those who have complained rather than those who may not be satisfied with their service).

**Client satisfaction** is captured through a survey and considers the experience of individuals when claiming or accessing entitlements.

For Outcome 2, the department achieved all quality measure targets, 2 of the 3 timeliness measure targets, and both of the client satisfaction targets. This reflects the department's successful delivery of programs to maintain and enhance the physical and mental wellbeing of veterans and families.

Program 2.1: General Medical Consultations and Services

The department has arrangements in place with medical and allied health practitioners in both the public and private sectors to deliver a comprehensive range of services throughout Australia, provided in hospitals, in providers’ rooms and in the homes of veterans and families. To ensure that eligible veterans and dependants are able to access necessary services, the department will either pay for travel to the nearest service provider or pay a provider to travel to other locations to provide services to eligible veterans and dependants.

Key activities:

- Work with medical and dental providers throughout Australia to ensure veterans and families have access to a comprehensive range of services

TABLE 17: PROGRAM 2.1 GENERAL MEDICAL CONSULTATIONS AND SERVICES – PERFORMANCE MEASURES AND RESULTS

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
2.1-1	Quality of service: The proportion of clients who have registered a complaint in relation to unmet access and/or quality compared to the total number of clients accessing services	<1%	<1%	<1%	Achieved

(PBS p 45, Corporate Plan p 29)

Quality of service

The department achieved the quality target for measure 2.1-1 in 2024–25, with a low percentage of complaints recorded. This measure considers the provision of medical and dental services and enhances the wellbeing of veterans and families by ensuring they receive the health services they require. Recorded complaints are mainly about providers requiring upfront payment. This year’s result is consistent with performance in 2023–24.

Program 2.2: Veterans’ Hospital Services

This program provides access to inpatient and outpatient hospital services for eligible veterans through arrangements with private hospitals, day procedure centres and mental health hospitals, as well as all public hospitals operated by the state and territory governments.

Key activities:

- Make arrangements with public and private hospital service providers throughout Australia to ensure veterans and families have access to a comprehensive range of services.

**TABLE 18: PROGRAM 2.2 VETERANS' HOSPITAL SERVICES – PERFORMANCE MEASURES AND RESULTS**

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
2.2-1	Quality of service: The proportion of clients who have registered a complaint in relation to unmet access and/or quality compared to the total number of clients accessing services <sup>1</sup>	<1%	<1%	<1%	Achieved

<sup>1</sup> As part of quality reporting, contracted private hospitals are required to list complaints received from entitled veterans. Public hospitals are not required to submit any additional quality reporting to the department, beyond what is already managed by state and territory health departments.

(PBS p 46, Corporate Plan p 29)

### Quality of service

The target for quality measure 2.2-1 was achieved in 2024–25, with a low percentage of complaints recorded. The majority of services provided by hospitals do not require the department's intervention, as the service is based on clinical need and specialist referral for planned admissions. Veterans can access a wide range of services provided by public hospitals and by over 550 contracted private hospitals and day procedure centres across Australia. The department's comprehensive hospital arrangements, including the need for licensing and accreditation standards, allow veterans to access services when needed, resulting in a low percentage of complaints.

### Program 2.3: Veterans' Pharmaceutical Benefits

The Repatriation Pharmaceutical Benefits Scheme provides clients with access to a comprehensive range of pharmaceuticals and wound dressings for the treatment of their healthcare needs, including items available to the broader Australian community under the Pharmaceutical Benefits Scheme.

*Key activities:*

- Provide eligible veterans with access to a broader range of medicines and wound care items at a concession rate.

**TABLE 19: PROGRAM 2.3 VETERANS' PHARMACEUTICAL BENEFITS – PERFORMANCE MEASURES AND RESULTS**

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
2.3-1	Quality of service: The proportion of clients who have registered a complaint in relation to unmet access and/or quality compared to the total number of clients accessing services	<1%	<1%	<1%	Achieved

(PBS p 47, Corporate Plan p 30)

Quality of service

The department achieved the quality target for measure 2.3-1. As access to the majority of pharmaceuticals does not require the department’s intervention but is supplied directly through the health provider to the pharmacist and then to the client, there are limited points of failure. Recorded complaints are mainly about access to medication and call wait times.

Through the department’s administration of the Repatriation Pharmaceutical Benefits Scheme, the Veterans’ Affairs Pharmaceutical Advisory Centre continued to provide doctors and veterans with 24/7 access to information and approval related to access to subsidised medicines. The clinical appropriateness and conditions of supply of items available on the Repatriation Pharmaceutical Benefits Schedule were regularly reviewed to ensure medicines available are safe, effective and meeting the unique needs of veterans.

Program 2.4: Veterans’ Community Care and Support

The department manages community support and residential aged care programs for clients, including the Veterans’ Home Care program and the Community Nursing Program, which aim to support people to remain independent in their homes and improve their quality of life and health. This program also provides subsidies and supplements for clients living in residential care facilities.

Key activities:

- Provide a range of care and support in the home to assist eligible veterans and families to remain independent at home for longer.

TABLE 20: PROGRAM 2.4 VETERANS’ COMMUNITY CARE AND SUPPORT – PERFORMANCE MEASURES AND RESULTS

No	Performance measure	Target	2023-24 actual result	2024-25 actual result	Achieved
2.4-1	Quality of service: The proportion of clients who have registered a complaint in relation to unmet access and/or quality compared to the total number of clients accessing services	<1%	<1%	<1%	Achieved

(PBS p 48, Corporate Plan p 30)

Quality of service

The department achieved the quality target for measure 2.4-1, with a low percentage of complaints recorded. To maintain and maximise the quality of services for clients using the Veterans’ Home Care program and Community Nursing Program, the department meets and communicates regularly with service providers, which ensures that good relationships are maintained and issues are managed promptly. Regular meetings and communication with providers will continue to ensure the quality of and access to services continues.

Program 2.5: Veterans’ Counselling and Other Health Services

This program provides a wide range of mental and allied healthcare services, including counselling and referral services for veterans and their families. The program also supports eligible veterans and their families with funding for aids and appliances, and travel for treatment.

The key activities assess performance in relation to the following subset of the broader program:

- Aids and appliances
- Travel for treatment
- Allied health care services.

TABLE 21: PROGRAM 2.5 VETERANS’ COUNSELLING AND OTHER HEALTH SERVICES – PERFORMANCE MEASURES AND RESULTS

Key activities:

- Support veterans with travel for treatment and provide access to aids, appliances and modifications to support independent living.
- Provide veterans with access to allied health services, including access to telehealth services.

No	Performance measure	Target	2023-24 actual result	2024-25 actual result	Achieved
2.5-1	Quality of service: The proportion of clients who have registered a complaint in relation to unmet access and/or quality compared to the total number of clients accessing services	<1%	<1%	<1%	Achieved

(PBS pp 49–50, Corporate Plan p 31)

Quality of service

The quality target for measure 2.5-1 was achieved in 2024–25. The department’s close collaboration with service providers supported delivery of high-quality care.

The travel for treatment program helps veterans with transport costs to attend medical treatments. This includes reimbursement of travel expenses, prearranged and prepaid transport to and from medical appointments, and ambulance services funded by the department. Service quality was maintained through rigorous provider vetting, active contract management and a well-established feedback framework. Experienced program managers engaged directly and sensitively with clients and contracted providers to resolve any issues of concern, contributing to overall service quality.

The Rehabilitation and Appliance Program continued to provide veterans with essential support including aids, equipment, and modifications to promote safe and independent living. This success was underpinned by comprehensive contract management, compliance and QA processes that ensured service delivery standards were maintained across contracted suppliers.

The department provides allied health services to support veterans’ health and rehabilitation needs. These services involve a range of allied health professionals such as physiotherapists, occupational therapists and podiatrists. The department supports rehabilitation therapy by coordinating care through the allied health treatment cycle. This cycle improves communication and coordination between general practitioners, allied health providers, and veterans to ensure quality care.

The department’s programs consistently delivered high-quality care through strong partnerships with providers focused on veteran wellbeing. This success was supported by prompt service delivery and streamlined request processes, ensuring a seamless experience for both veterans and providers.

**TABLE 21: PROGRAM 2.5 VETERANS’ COUNSELLING AND OTHER HEALTH SERVICES – PERFORMANCE MEASURES AND RESULTS *(continued)***

*Key activities*

- Support veterans with travel for treatment and provide access to aids, appliances and modifications to support independent living.

*(This measure relates to the travel for treatment component only.)*

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
Travel					
2.5-2	Timeliness: Target percentage of claims for reimbursement processed within 28 days	≥95%	100%	92%	Not achieved

(PBS pp 49–50, Corporate Plan p 31)

**Timeliness**

The target for timeliness measure 2.5-2 was not achieved. As part of helping veterans with transport costs to attend medical treatments, travel for treatment includes reimbursement of claims for travel expenses. Key factors contributing to the result included claim volumes exceeding processing capacity, and higher call volumes, which delayed claim progression. To address these challenges and improve processing times, targeted initiatives aimed at streamlining the claims process have been established. This includes the introduction of a new claims processing system on 1 July 2025, which is anticipated to improve processing efficiency and reduce delays in the 2025–26 reporting period.

**TABLE 21: PROGRAM 2.5 VETERANS' COUNSELLING AND OTHER HEALTH SERVICES – PERFORMANCE MEASURES AND RESULTS (*continued*)**

*Key activities:*

- Provide veterans with access to allied health services, including access to telehealth services.
- Provide access to Open Arms including individual and family counselling, after-hours counselling, group program interventions, and peer support.

No	Performance measure	Target	2023-24 actual result	2024-25 actual result	Achieved
<b>Open Arms – Veterans &amp; Families Counselling services</b>					
2.5-4	Percentage of clients allocated to an Open Arms clinician within two weeks of initial intake	≥65%	88%	85%	Achieved
2.5-5	Client satisfaction <sup>2, 3</sup>	≥80%	90%	92%	Achieved

2 Client satisfaction is measured by a questionnaire. Satisfaction questionnaires are offered by clinicians at the end of an episode of care. The survey asks clients 'How satisfied are you with the counselling provided to you?' and responses are rated on a scale of 'Very satisfied', 'Satisfied', 'Neutral', 'Unsatisfied' or 'Very unsatisfied'. All clients who answer 'Satisfied' or 'Very satisfied' are counted as satisfied. The questionnaire is not compulsory for clients to complete.

3 Participation in the survey is voluntary. A client questionnaire is not sent when a client does not consent to receiving correspondence, when it is considered unsafe to do so and in other limited circumstances.

(PBS pp 49–50, Corporate Plan p 31)

## Timeliness

The Australian Government has been providing veteran mental health support through Open Arms for over 40 years. Founded by Vietnam veterans, Open Arms is a nationally accredited mental health service that provides 24-hour free and confidential mental health support. In 2024–25, 85% of Open Arms clients were allocated to an Open Arms clinician within 2 weeks of their initial intake (measure 2.5-4). This is slightly lower than the previous year's result. Client wait times can fluctuate due to a variety of factors (for example, clients opting to request specific clinicians, such as a male or a female clinician, or a clinician with specific expertise) that may impact ability to allocate. The nationwide shortage of mental health professionals across the sector has impacted the ability of Open Arms to recruit in its intake and triage service, Client Assist. Additionally, Open Arms moved to a contracted panel arrangement with outreach providers, which impacted on the timeliness of referrals during that period.

## Client satisfaction

The client satisfaction result confirms that services were successfully delivered and well received. Open Arms achieved a result of 92% in 2024–25, well above the 80% performance target set under measure 2.5-5. This result, based on 496 responses from 9,603 surveys, following 26,046 episodes of care,<sup>12</sup> reflects a strong endorsement of the program. Although participation in the survey is voluntary feedback, it is encouraging that trends remain highly positive.

<sup>12</sup> An episode of care is an interval of care for an individual, couple or family encompassing all counselling, treatment and support services provided to a client within an interval of engagement with Open Arms. The episode of care commences at allocation and ends either by mutual agreement that the service is complete; or when the interventions are not achieving the desired change and a new referral is required; or when the client does not wish to continue the episode; or if there is a therapeutic break of more than 3 months.

Program 2.6: Military Rehabilitation and Compensation Acts – Health and Other Care Services

The department arranges for the provision of rehabilitation, medical and other related services under the DRCA, the MRCA and related legislation. The services include payment for medical treatment, rehabilitation services, attendant care and household services.

The key activities assess performance in relation to the following subset of the broader program:

- Rehabilitation services.

Key activities:

- Provide veterans with access to medical management, psychosocial and vocational rehabilitation programs and support for employment.

TABLE 22: PROGRAM 2.6 MILITARY REHABILITATION AND COMPENSATION ACTS – HEALTH AND OTHER CARE SERVICES – PERFORMANCE MEASURES AND RESULTS

No	Performance measure	Target	2023-24 actual result	2024-25 actual result	Achieved
2.6-1	Timeliness: The percentage of rehabilitation assessments completed within 30 days of assessment referral <sup>4</sup>	≥75%	99%	99%	Achieved
2.6-3	Client satisfaction: An annual survey of client satisfaction with the rehabilitation program <sup>5</sup>	≥75%	68%	82%	Achieved

4 This measure is a calculation of the percentage of rehabilitation assessments undertaken during 2024–25 that were conducted by rehabilitation providers within 30 days of the assessment being requested by the department. The assessment date is recorded in departmental systems by a delegate based on the assessment date reported by the provider.

5 Client satisfaction is measured through a monthly independent survey by ORIMA Research of departmental clients who have recently completed the rehabilitation program. Client satisfaction for this measure is calculated through the responses to specific questions in the survey, which assess participants’ overall views of the program as well as the rehabilitation plan commencement and closure process. The 2024–25 performance result is based on rehabilitation case closures from 1 April 2024 to 31 May 2024 and case commencements and case closures from 1 June 2024 to 31 March 2025. Survey participation is voluntary. Neutral responses do not contribute to the achievement of the measure. The response rate for 2024–25 was 24%.

(PBS p 51, Corporate Plan p 31)

Timeliness

The target for timeliness measure 2.6-1 was achieved, as 99% of rehabilitation assessments were made within 30 days of referral for assessment.

Rehabilitation aims to assist veterans to build skills to enable them to maximise their wellbeing. It involves a rehabilitation assessment to understand the veteran's goals and needs in order to determine if rehabilitation is appropriate. If so, a rehabilitation plan is put in place, progress is monitored and ongoing support is provided to enable the veteran to achieve their goals, whether they relate to medical management, psychosocial or vocational matters.

The target was achieved through continued regular engagement and communication with contracted providers, including ongoing capability development sessions and feedback.



## Client satisfaction

In 2024–25 the 75% target for client satisfaction with the rehabilitation program (measure 2.6-3) was achieved. The overall percentage for client satisfaction was 82%.

For the months of April 2024 to May 2024 the survey sample includes clients who completed a rehabilitation plan, and for the months of June 2024 to March 2025 the survey sample was expanded to also include clients who commenced a rehabilitation plan. The full-year 2024–25 result therefore consists of responses received from clients whose rehabilitation plans either started or closed. This is in contrast to the 2023–24 result, which included only clients who had completed their rehabilitation plan. The 2024–25 result considering closures only would be 78%.

There was a marginal improvement in the client satisfaction survey response rate (24%) in 2024–25 following the implementation of a new survey model and of a new contracted rehabilitation model which provides a more structured approach to service delivery. The rehabilitation model includes clearer guidelines on available support and more straightforward procedures for accessing services, resulting in an improvement in client experience as services are being accessed in a more timely and consistent manner.

# Outcome 3

**Acknowledgement and commemoration of those who served Australia and its allies in wars, conflicts and peace operations through promoting recognition of service and sacrifice, preservation of Australia's wartime heritage, and official commemorations.**

**Outcome 3** reinforces recognition and respect as core pillars of the department's mission. This is reflected through the provision and maintenance of war graves and the delivery of meaningful commemorative activities. These efforts aim to promote an understanding of the service and sacrifice of veterans and to honour veterans' service while fostering a culture of appreciation and understanding within the broader Australian community. These efforts enhance the wellbeing of veterans and families by ensuring the Australian community's understanding about service and sacrifice is preserved and informs our way of life and the support provided to veterans and families.

## Operational environment

Through Program 3.1: War Graves, the Office of Australian War Graves (OAWG) is the agent of the Commonwealth War Graves Commission (CWGC) in Australia and the surrounding region. The OAWG manages the care and maintenance of 76 war cemeteries and war plots, commemorating Commonwealth war dead in Australia, Papua New Guinea and Solomon Islands in perpetuity.

The OAWG maintains 3,555 individual official commemorations for First World War war-dead and 18,413 Second World War war-dead. Commemorations are a personalised physical marker, such as a plaque which recognises the service of eligible veterans or serving members after their death. These official commemorations are located in war cemeteries, civil cemeteries, private properties and gardens of remembrance.

The OAWG also cares for and maintains 10 gardens of remembrance and more than 334,000 official commemorations of post-war dead and certain other veterans of wars, conflicts, peace and other operations to which Australia has been committed outside the 2 world wars. This is an uncapped demand-driven veterans' entitlement. More than 1,800 new official commemorations are installed annually, stemming from post-war deaths related to the Second World War, the Korean War, the Vietnam War and post-Vietnam conflicts.

The OAWG has seen a number of constraints emerge that affect its day-to-day operations, including:

- technological limitations, with the War Graves System no longer fit for purpose and the OAWG implementing manual workarounds to continue to manage its workload
- supply chain limitations and resource availability constraints, with marble and granite supply close to exhausted in Australia and the qualified heritage tradespeople required to assist with the management of the estate in high demand

- an ageing estate, with structural failures emerging across OAWG sites that require remediation works beyond the business-as-usual maintenance schedule
- climate change, with differing weather patterns altering the way OAWG field teams maintain their sites.

In line with best practice conservation principles, the OAWG's goal is to cost-effectively, safely and sustainably manage its commemorative estate to a high standard and ensure the last physical reminders of the human cost of service are valued in perpetuity.

The OAWG considers and applies the design and delivery of sustainable, cost-effective and location-appropriate horticulture and materials to deliver a respectful commemorative presentation for visitors and an appropriate commemoration for veterans.

Under Program 3.2, commemorative events delivered for veterans are designed to honour service and sacrifice while fostering a deep sense of national respect and reflection. The department prioritises broad and meaningful engagement through a blend of in-person events, live-streamed services and targeted communications that reach veterans, families and the wider community.

### **Outcome 3 performance measures and results**

The department's performance under Outcome 3 is measured by our achievements in 2 categories: war graves and commemorative events.

The department achieved 2 of the 4 performance measure targets for Outcome 3.

In 2024–25, despite significant efforts to improve reporting on war graves, the results for performance measure 3.1-1 have been hampered by inherent data integrity issues and limitations in the War Graves System.

#### **Program 3.1: War Graves**

This program acknowledges and commemorates veterans' service and sacrifice and promotes an increased understanding of Australia's wartime history. To meet the Australian Government's commitment, the OAWG cares for and maintains official commemorations and sites of collective official commemoration in accordance with general principles set by the CWGC.

*Key activities:*

- Provide and maintain war cemeteries, war plots, gardens of remembrance and memorials to the missing and other individual official commemorations for eligible veterans who have died as a result of their service to Australia in wars, conflicts and peace operations.

TABLE 23: PROGRAM 3.1 WAR GRAVES – PERFORMANCE MEASURES AND RESULTS

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
3.1-1	Quality of service: New official commemorations are completed within published timeframes <sup>1, 2, 3</sup>	≥75%	58% <sup>4</sup>	74%	Not achieved

1 The completion timeframes differ for each commemoration type (240 days for graves, 120 days for ashes placements and 90 days for garden of remembrance plaques). The department writes to eligible families to find out if they would like to have a commemoration installed for their loved one. Installations of commemorations are undertaken by contractors, who issue an invoice when the installation is complete; the invoice date is taken to be the completion date. The time taken to install a commemoration is calculated as the time between when the department commences work to process an offer and when the contractor issues an invoice. Commemorations that are not installed are not captured by this measure, as assessment of timeliness is undertaken at the time of completion of the commemoration.

2 There are limitations in the War Graves System which have impacted on the performance result.

3 The Western Australian Garden of Remembrance is temporarily closed for planned reconstruction, which means that no new plaques can be placed. The end dates used for plaques placed there are reflective of when the work order is complete (i.e. as though installed), not the actual date of installation.

4 The 2023–24 result excluded ashes placements by crematorium authorities and plaques placed in gardens of remembrance by staff.

(PBS pp 55–56, Corporate Plan p 32)

The quality measure for 3.1-1 was not achieved in 2024–25. Official commemoration recognises the service of eligible veterans or serving members after their death. This takes the form of a personalised, physical marker, such as a plaque. The marker can be at a site they or their family have chosen. The OAWG arranges and pays for the commemoration for eligible veterans.

This measure reports on the number of days taken between the start date, when the department commences work to process an offer, and the end date, when the contractor submits an invoice to be paid after the commemoration is installed. For 2024–25, the target was revised to ≥75%, which is a more realistic but ambitious goal. It is made up of 3 components:

- Garden of remembrance plaques placed
- Grave monuments, which include garden and lawn monuments, completed
- Placement of ashes.

The time to assess eligibility, construction and completion may be subject to conditions specific to site locations and factors that are outside the department’s control such as climate, accessibility and weather conditions. For ashes placement, the timeframe for completion is reliant on the family or next of kin, who are provided the commemorative plaque for placement in the cemetery or crematorium. These factors impacted on the OAWG’s performance in 2024–25. In addition, the next of kin of the veteran has a choice as to the form of commemoration established, and individual types of commemoration have different complexities in terms of completion. For example, monumental grave builds are more time consuming and reliant on the availability of suitably qualified monumental masons to complete the work. In some states, the OAWG has limited access to monumental masons, meaning timeframes to completion may be longer.

Although the target was not achieved in 2024–25, there was significant improvement in performance compared to 2023–24 driven by enhanced planning and strengthened supplier relationships. The OAWG has worked collaboratively with its suppliers to enhance the planning of work and adjust contractor/supplier workloads as a whole, enabling the OAWG to prioritise workloads. This has resulted in the OAWG prioritising new commemorations and triaging the maintenance of historical requests.

**TABLE 23: PROGRAM 3.1 WAR GRAVES – PERFORMANCE MEASURES AND RESULTS** *(continued)*

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
3.1-3	Official commemorations are satisfactorily maintained to recognise service and sacrifice of veterans <sup>5</sup>	Less than 10 complaints regarding the maintenance of any official commemoration	New measure from 2024–25	11	Not achieved

<sup>5</sup> Complaints are registered in the Client Feedback Management System when they are received by the department.

(PBS pp 55–56, Corporate Plan p 32)

The department did not achieve the target for measure 3.1-3 in 2024–25.

The target for measure 3.1-3 has changed from ‘Official commemorations are inspected to ensure that they continue to meet the CGWC standard’ in 2023–24 to ‘less than 10 complaints regarding the maintenance of any official commemoration’. Measuring performance using the number of complaints allows the public to assess the quality of the maintenance of official commemorations.<sup>13</sup> The feedback includes all aspects of care and maintenance of official commemorations in Australia, Papua New Guinea and Solomon Islands.

Any member of the public who visits an official commemoration recognising the service of eligible veterans or serving members after their death is able to make a complaint regarding the state of repair and maintenance of the commemoration. The public can make complaints to onsite staff, or they are advised that complaints can be lodged by contacting the department directly using the online platform MyService, through the department website, by phone, email or letter, or by contacting a regional office. Complaints received by the department are logged through the Client Feedback Management System, reviewed by relevant staff, investigated and actioned appropriately based on the complaints raised. This process is recorded in the Client Feedback Management System. The expectations of the public around the standards for care and maintenance of war graves and gardens of remembrance can be subjective. Members of the public may expect gardens to look a certain way at various times of the year, and this may not align with the care and maintenance schedule adhered to by the OAWG. Issues raised in recorded complaints included uneven pavers, vandalism, and wrong details on plaques.

The OAWG manages expectations when responding to complaints and makes every effort to ensure its standards for care and maintenance are visible.

<sup>13</sup> This is a proxy measure rather than a direct measure of satisfaction. The indicator focuses on a small cohort of the general population (that is, those who have complained rather than those who may not be satisfied with the maintenance of the commemoration) and is not a direct measure of the public's assessment of the maintenance of commemorations.

Program 3.2: Commemorative Activities

Commemorative activities are delivered to enable the community to better understand, acknowledge and commemorate the service and sacrifice of the men and women who have served Australia in wars, conflicts and peace operations.

Key activities:

- Deliver domestic and international commemorative events to enable the community to better understand, acknowledge and commemorate the service and sacrifice of those who have served Australia in wars, conflicts and peace operations.

TABLE 24: PROGRAM 3.2 COMMEMORATIVE ACTIVITIES – PERFORMANCE MEASURES AND RESULTS

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
3.2-1	Commemorative event quality: Commemorative events are conducted to commemorate veterans’ service in a dignified, solemn and respectful manner <sup>6, 7</sup>	The number of discrete complaints is less than 1% of the estimated audience for any one event	<1%	0	Achieved

6 Complaints are registered in the Client Feedback Management System. For ticketed events, the estimated broadcast viewing audience figures sourced from the ABC are combined with the estimated onsite physical attendance figures to determine the total estimated audience for each commemorative service. In-person attendance at non-ticketed events is estimated based on a manual headcount and combined with the ABC broadcast viewership data.

7 Complaints are used as a proxy measure rather than a direct measure of event quality. The indicator focuses on a small cohort of the general population (that is, those who have complained rather than those who may not be satisfied) and is not a direct measure of the public’s assessment of the quality of the commemorative event.

(PBS p 57, Corporate Plan p 33)

The department achieved the target for measure 3.2-1. The department delivered 2 National Commemorative Services on Anzac Parade in Canberra to mark significant anniversaries:

- 25th anniversary of Australian service in Timor-Leste on 20 September 2024
- 75th anniversary of Australian service in the Korean War on 25 June 2025.

These anniversaries provided the opportunity to honour and remember the service of all Australian men and women who served in Timor-Leste and the Korean War, and the sacrifice of their families. No complaints relating to these services were received.

The annual Anzac Day Dawn Services were again delivered at Gallipoli (Türkiye) and near Villers-Bretonneux (France) on 25 April 2025 to honour the service of all Australian service men and women who have served our nation in times of war, conflict and peace operations. No complaints relating to these services were received.

The 2 National Commemorative Services held in Australia and the Anzac Day Dawn Services held in France and Türkiye were broadcast live nationally by the ABC, streamed online, and made available to other networks to provide all members of the community the opportunity to acknowledge the service and sacrifice of our service personnel in a solemn and dignified manner from their preferred location. No complaints relating to these broadcasts were received.

Key activities:

- Provide online resources to enable the community to better understand, acknowledge and commemorate the service and sacrifice of those who have served Australia in wars, conflicts and peace operations

**TABLE 24: PROGRAM 3.2 COMMEMORATIVE ACTIVITIES – PERFORMANCE MEASURES AND RESULTS (continued)**

No	Performance measure	Target	2023–24 actual result	2024–25 actual result	Achieved
3.2-2	Increase the public’s understanding and awareness of service and sacrifice of those who have served Australia in wars, conflicts and peace operations	Increased engagement with the Anzac Portal <sup>8, 9</sup>	New measure from 2024–25	6%	Achieved

8 Engagement with the Anzac Portal is measured as total sessions in Google Analytics. Google Analytics provides understanding of trends in user behaviour on a website over time. A session starts when a user views a page and no session is currently active (for example, their previous session has timed out). There is no limit to how long a session can last. For the Anzac Portal, a session ends or times out after 30 minutes of user inactivity, so total sessions are not a true indicator of total audience reach. The department has been unable to provide assurances about how Google Analytics was implemented on the Anzac Portal to measure sessions.

9 During the reporting period, the department was not aware of any website downtime, and no outages were recorded. However, Google’s Ads Status Dashboard showed 2 performance status incidents potentially affecting Google Analytics for one day and 10 hours, respectively. However, the status incidents were not defined and therefore it is unclear if there was any impact on data. If the data was impacted, the duration of one day and 10 hours would have been insignificant overall.

(PBS p 57, Corporate Plan p 33)

The department achieved the target for measure 3.2-2. This new performance measure was introduced to demonstrate community awareness and engagement, reflecting the important role of outreach and education in commemorating service and sacrifice.

The Anzac Portal is the most significant website used for commemorative activities. The department uses it to provide information about:

- Australian veterans’ contributions to Australia through their service in wars, conflicts and peace operations
- nationally significant and gazetted days of commemoration
- planning and hosting local community commemorative events, particularly on Anzac Day and Remembrance Day
- commemoration and Australian military history for primary and secondary school students.

The measure is assessed through increased engagement with the Anzac Portal in 2024–25, compared to 2023–24.

Engagement with the Anzac Portal is a useful proxy indicator for the general public’s awareness of veterans’ contributions to Australia’s defence. Of the total number of active users in the reporting period, 74% (696,455) were identified as being in Australia in the reporting period. Users viewing the website from outside Australia include Australians travelling, living and working overseas who engage with a national commemorative day or visit an overseas memorial site or war cemetery.

For the 12 months ending on 30 June 2025, Google Analytics measured a 6% increase in sessions on the Anzac Portal, from 1,554,488 in 2023–24 to 1,640,587.