



Minutes

Agenda Item 1 Welcome, apologies and conflicts of interest

The Deputy Secretary for Policy and Programs opened the meeting, welcoming attendees, noting membership changes and representation arrangements for the meeting, as well as apologies received. Details are listed at **Annexure A**. No conflicts of interest were declared.

The Ode was recited, and members acknowledged the service and sacrifice of all veterans and families.

The Chair's apologies for her delay were **CONVEYED** due to late aircraft arrival.

The Deputy Secretary for Policy and Programs welcomed the new representative from Soldier On.

DVA Update – Secretary Alison Frame

The Chair joined the meeting at 11:30am.

The Secretary **BRIEFED** members on the department's current focus, including:

- Continuity under the returning Minister for Veterans' Affairs.
- Acknowledging the passage of key legislation at the end of the last term of Parliament.
- Continued focus on Royal Commission (RC) Recommendations, including the work of two taskforces and co-design work on the wellbeing agency and veteran peak body.
- Efforts to improve transition pathways between Defence and the Department of Veterans' Affairs (DVA), including reducing hand-off points.
- ICT system challenges and funding pressures, with departmental focus on finding efficiencies to improve services under increasing demand.
- Recent international engagement with Canadian counterparts, with upcoming bilateral discussions on shared issues including Artificial Intelligence (AI), wellbeing initiatives and Mild Traumatic Brain Injury (mTBI).
- A dedicated combined virtual session with the ESORT and the Younger Veterans-Contemporary Needs Forum (YVF) on Medicinal Cannabis will be scheduled.
 - Members **DISCUSSED** the increase in the prescribing of medicinal cannabis online.
 - Members **SOUGHT** consideration of additional substances - such as emerging alternative medications for pain management - and emphasised the need for greater General Practitioner (GP) oversight in prescribing practices.
- Success of the overseas commemorations, with plans to expand the program of including veterans and family members as a part of the delivery teams and the Governor-General's interest in hosting an afternoon tea reception to acknowledge and thank veterans who participated in this year's overseas commemorations.
- Future opportunities for the Governor-General to support veteran initiatives, including the potential to host a future ESORT meeting at the Government House.
 - Members **PROPOSED** a potential joint ESORT/YVF meeting hosted by the Governor-General to elevate focus on the RC and veteran definition issues.

Members **SOUGHT** clarity on DVA's priority areas for RC Recommendation implementation to better align sector efforts and **NOTED** priorities will be shaped in conjunction with the PMC taskforce and Defence.

Members **HIGHLIGHTED** the ambiguity in the public understanding of the definition of a 'veteran', referencing legislative definitions and community perceptions and **AGREED** this was a communications opportunity.

Members **NOTED** challenges regarding eligibility and ownership of reservists in transition and **NOTED** that all Australian Defence Force (ADF) members undertake at least one day of full-time service, meeting the eligibility threshold for some entitlements.

Members **RAISED** ongoing issues with the ability of advocates to engage directly with DVA staff, including lack of direct contact with delegates and email communication such as file size restrictions. The Chair **ACKNOWLEDGED** these concerns and **ADVISED** that system upgrades and service changes are being pursued, including with Services Australia.

Members **SOUGHT** an update on processes for managing death notifications and were **ADVISED** that work is underway to streamline and improve these systems, with a strong focus on consent and recording preferences in advance.

No.	Action	Assigned to
2025ESORT/A07	DVA to consider the inclusion of additional substances in the review of prescribing practices and report back to the forum.	Chief Health Officer

Agenda Item 2 Action Items

Members **NOTED** the 25 March 2025 ESORT Minutes were endorsed out of session on 13 May 2025.

Members **AGREED** to close Action Items 2024ESORT/A14, A17, A29, A32, A34, A35, 2025ESORT/A01, A02 and A03.

Members **NOTED** 2020ESORT/A27, A37, 2025ESORT/A04 and A05 remain in progress.

Members **DISCUSSED** the War Widow's Pension and **NOTED** a continued interest in seeing an increase, despite the item having been technically completed.

Members **AGREED** it would be more appropriate for this issue to be progressed through a member submission and **ADVISED** they would submit a proposal for consideration at a future meeting.

No.	Action	Assigned to
2025ESORT/A08	Legacy Australia Inc to submit a member submission advocating for an increase to the War Widow's Pension.	Legacy Australia Inc

MEMBER SUBMISSIONS

In the Chair's absence, the Deputy Secretary for Policy and Programs led members through the member submissions agenda items.

Agenda Item 3.1 Broadening of the Criteria for Qualifying Service (Australian Special Air Service Association)

Members **NOTED** the member submission from the Australian Special Air Service Association regarding broadening of the criteria for Qualifying Service to include Counter Terrorism/Special Recovery (CT/SR) duties.

The Deputy Secretary for Policy and Programs **WELCOMED** BRIG Nick Foxall, Director General Military Strategic Commitments from the Department of Defence to discuss the matter further.

Members **ACKNOWLEDGED** the contributions of the member who brought forward the submission and the importance of recognising the evolving nature of operational service.

Members **NOTED** that Defence personnel who pioneer new capabilities or develop new operational procedures contribute significantly to Defence outcomes, often through iterative learning in challenging environments.

Members **RECOGNISED** that these contributions, while not classified as warlike, are acknowledged through mechanisms such as the Australian Active Service Medal.

Members were **REFERRED** to Defence's formal response on this matter, which outlines existing legislative definitions of warlike service, and the criteria required for the grant for Qualifying Service.

Members **DISCUSSED** that under the current legislative framework, amending eligibility would require a reconsideration of determinations already made by responsible authorities.

Members **NOTED** that further engagement on this issue may occur outside the forum.

Agenda Item 3.2 VetAffairs Vol 40 No. 2 August Misinformation (Defence Force Welfare Association)

Members **NOTED** the member submission from the Defence Force Welfare Association raising concerns regarding an article published in VetAffairs on the Defence Force Retirement and Death Benefits (DFRDB) scheme.

The Deputy Secretary for Policy and Programs **WELCOMED** Sarah McGregor, A/g Director General, People Policy and Employment Conditions, Defence People Group from the Department of Defence to discuss the matter further.

Members **NOTED** surprise that the article appeared to reflect a position from Defence rather than the Commonwealth Superannuation Corporation (CSC) and sought clarity on the article's authorship and basis for the assertion made.

Members **NOTED** that the issue of DFRDB has been longstanding and has been the subject of multiple investigations, including by the Commonwealth Ombudsman and Senate Committee.

Members were **BRIEFED** that Defence had acknowledged historical provision of misleading information to members, with the Secretary of Defence and Chief of Defence Force issuing formal apologies.

Members **NOTED** that DFRDB is a structured benefits scheme, and all aspects must be considered collectively. Isolated changes, including to the life expectancy tables, would impact other components and not necessarily enhance the overall benefits provided.

Members were **INFORMED** that the life expectancy tables were intended to be static, as reflected in the scheme's design and confirmed by the Ombudsman.

Based on collective consideration requirement identified, members **NOTED** that findings from those inquiries concludes that no changes should be made to the scheme, and that any perceived detriment may be addressed through the Scheme for Compensation Detriment caused by Defective Administration (CDDA).

Members **DISCUSSED** the contrast between the flexibility to amend components in other superannuation schemes.

Members **QUESTIONED** the absence of CSC in the current dialogue and **AGREED** it may be helpful to involve CSC in future discussions.

Members **NOTED** support for the submission and that key components of the scheme, including commutation and notional age, remain unresolved despite repeated inquiries.

Members were **ADVISED** that while CSC administers the scheme, the policy responsibility rests with the Superannuation Policy Directorate within Defence.

Members **NOTED** Defence's position that, considering previous investigations and recommendations, no legislative changes to the scheme are being considered at this time, as the scheme would need to be reviewed in full.

No.	Action	Assigned to
2025ESORT/A09	Defence Force Welfare Association to follow up with Defence for further discussion.	Defence Force Welfare Association and Department of Defence

Agenda Item 3.3 The Style of ESORT Minutes (Vietnam Veterans' Association of Australia Inc)

Members **NOTED** the member submission from the Vietnam Veterans' Association of Australia Inc regarding the style of the ESORT meeting minutes.

Members **DISCUSSED** the importance of accurately representing member organisations' views in the ESORT minutes and communicate, reflecting their representative role on behalf of their memberships.

Members **NOTED** concerns that current minutes do not always reflect the breadth of discussions, which may contribute to negative perceptions about the forum's value within the veteran community.

Members **DISCUSSED** the continuing application of Chatham House Rule and **NOTED** differing views on its relevance in facilitating open discussion on sensitive or in-progress matters.

It was **NOTED** that when members communicate with their respective organisations, there is an expectation that ESORT discussions provide clear evidence of advocacy and engagement on behalf of veterans and families.

Members **NOTED** that external perceptions of ESORT can be impacted by how the minutes and communiques are presented.

Members **AGREED** that clarity and precision of language (e.g. whether members were briefed, consulted or views were sought) should be applied consistently in both minutes and the communique and **AGREED** that communiques should clearly indicate the attendees.

Members **AGREED** on the importance of striking an appropriate balance between detailed representation of discussions and a manageable, readable format for the minutes and the communique.

It was **DISCUSSED** that members' broader advocacy efforts extend beyond ESORT, and that the minutes should not be viewed as the sole mechanism for communicating these efforts.

The Chair and members **RECOGNISED** the value of the communique in providing members with content that can be directly shared with their organisations and **AGREED** to continue refining the communique to better reflect discussions and advocacy undertaken under ESORT.

Members **NOTED** the willingness of the department to provide them with additional supporting information to assist with communicating ESORT outcomes to their members where needed.

No.	Action	Assigned to
2025ESORT/A10	Secretariat to ensure that future communiques include a list of organisations present at the meeting and any apologies provided.	Secretariat

Agenda Item 3.4 The 35-Day Rule for Hospitalisation (Vietnam Veterans' Association of Australia Inc)

Members **NOTED** the member submission from the Vietnam Veterans' Association of Australia Inc regarding the 35-Day Rule for Hospitalisation.

Members **DISCUSSED** the application of the 35-Day Rule for hospitalisation and its implications for DVA clients.

It was **NOTED** that the 35-Day Rule is not a DVA Policy but rather a provision under the *Health Insurance Act 1973*, applicable to all hospital patients.

Members were **ADVISED** that where a patient remains hospitalised for clinical treatment, as certified by their treating doctor, the 35-Day Rule does not apply.

It was **CLARIFIED** that the Rule applies where patients are occupying hospital beds for non-treatment reasons, such as delays in accessing aged care placements, incurring an additional daily fee.

Members **NOTED** that only a very small proportion of DVA clients incur a fee beyond 35 days (0.20% of public hospital and 0.01% of private hospital admissions in 2023-24).

Members were **INFORMED** that DVA is working with state and private hospitals through contractual arrangements to improve discharge planning and mitigate extended hospital stays.

Members **DISCUSSED** the challenges in securing suitable accommodation and community support services, particularly for clients in existing mental health facilities.

Members **NOTED** the pressures on facilities and the need for effective discharge pathways to support client wellbeing and optimise bed availability.

It was **AGREED** that proper discharge planning, enhanced case management, and access to community-based services are essential to addressing these issues.

Members were **ADVISED** that as long as a treating doctor certifies a patient as requiring inpatient care, the additional 35-Day charge does not apply.

Members **DISCUSSED** the role of discharge planners in facilitating suitable accommodation options and managing transitions out of hospital care.

It was **NOTED** that hospital-in-the-home services, community nursing, and in-home care options are available to support clients' transition, subject to appropriate referral and clinical circumstances.

Members **AGREED** that further clarity on hospital-in-home pathways would be helpful, particularly for advocacy groups supporting elderly veterans during period of increased hospital admissions (e.g. during flu season).

No.	Action	Assigned to
2025ESORT/A11	Clear information on available hospital-in-the-home and community care supports, including points of contact and referral processes to be circulated to members.	Program Delivery

Agenda Item 3.5 National Monument on Anzac Parade to Honour ADF Personnel Who Have Died in Training (Australian Peacekeeper and Peacemaker Veterans' Association Ltd)

Members were **BRIEFED** on a member submission from the Australian Peacekeeper and Peacemaker Veterans' Association Ltd (APPVA) proposing a National Monument on Anzac Parade to honour Australian Defence Force Personnel who have died in training and **ENDORSED** this proposal.

Members **NOTED** that the APPVA is seeking to establish a Steering Committee, comprising of ESORT members and external representatives, to guide the early stages of the initiative.

Members **NOTED** that the preferred site is Anzac Parade, requiring approval from the National Capital Authority and the Monuments Committee of 1928.

Members **ACKNOWLEDGED** that the initiative is at an early stage and that significant work remains to progress the proposal.

Members were **INFORMED** that letters of recommendation are being secured from prominent individuals and organisations, with contingency planning for an alternative location at the Australian War Memorial if required.

Members were **ADVISED** that a funding contribution is being sought from interested members of ESORT and the broader community,

Members were **ADVISED** that this initiative is intended to be inclusive of the wider ex-service community.

Members **DISCUSSED** the options for DVA support for the project, but **NOTED** limitations should a grant application be made.

Members were **INFORMED** that DVA can support engagement with the National Capital Authority.

Members **NOTED** that consultancy firms have offered pro bono assistance to support the development of a business case, governance framework and project management.

Members **NOTED** advice on the typical funding cycle timelines and the importance of having design and funding arrangements prepared in advance.

Members **AGREED** on the value of the initiative and acknowledged unanimous support across the forum.

Agenda Item 3.6 MRCA SRDP (TPI) Eligible Dependant Partner (Australian War Widows Inc)

Members **NOTED** the member submission from the Australian War Widows Inc regarding the MARCA SRDP (TPI) Eligible Dependant Partner.

Members **DISCUSSED** concerns that under MRCA, widows must apply to receive entitlements which are auto granted under VEA, causing unnecessary complexity for grieving partners.

Members **NOTED** that requiring partners to complete a claim during periods of grief and financial stress imposes additional burden, particularly on older widows.

Members **NOTED** that under MRCA, legislative provisions exist to alleviate the need to establish service connection in certain cases; however, a claim must still be lodged to initiate the process, unlike under VEA where the process can begin without a formal claim.

Members **DISCUSSED** that in practice, auto-grant processes under both Acts can experience challenges and delays, particularly where partnership status was not previously established.

Members **AGREED** that adjustments to process and service delivery are needed to ensure sensitivity and support grieving partners.

Members **AGREED** to consider examples where these issues have arisen and to explore possible solutions.

UPDATES ON DVA INITIATIVES

Agenda Item 4.1 Legislative Reform Update

Members **NOTED** the update on legislation reform.

Agenda Item 4.2 Advocacy Update

Members **NOTED** that the Department continues to work closely with the Institute of Veterans' Advocacy to support its establishment.

Members were **BRIEFED** on the recent submission the department made to the Foreign Affairs, Defence and Trade References Committee.

Members **DISCUSSED** ongoing concerns about certain entities in the sector.

Members were **INFORMED** that preparation for the Institute's launch includes enhancing accessibility to advocacy support, a hotline service, and the alignment of approved advocate business processes.

Members **NOTED** the importance of ensuring veterans are aware of the ability to get support on claims that does not incur fees or commissions.

Members were **BRIEFED** that the Institute will be established as a not-for-profit organisation, supported by pro bono legal, financial and auditing services.

Members **NOTED** that a Code of Conduct is under development.

Members were **ADVISED** that a transparent and ethical business model is being implemented, including mandatory cost estimate documentation for fee-for-service activities.

Members **NOTED** that the Institute aims to launch by early August and that a three-tiered membership structure will be introduced, with associated post-nominals to professionalise the sector.

Members **OFFERED** assistance in promoting the Institute through ADF Transition Seminars and agreed to provide platforms and materials where required.

Members **AGREED** that collaborative presentation opportunities at major seminars and transition events across the country would support greater visibility.

Members **SOUGHT** clarification on the best mechanisms for ESOs to access information about claims process changes and were **ADVISED** to coordinate with Deputy Commissioners as the primary point of contact.

Members **DISCUSSED** funding challenges, including concerns about Recommendation 99's implications for the Building Excellence in Support and Training (BEST) program.

Members **NOTED** the Department is exploring more sustainable and longer-term advocacy funding arrangements in line with the Royal Commission's recommendations accepted by the government.

Members **DISCUSSED** the need to increase female representation in advocacy roles and **NOTED** this is being actively progressed through the Women Veterans Strategy and Institute pathways.

Agenda Item 4.3 Claims Processing Update

Members **NOTED** the monthly Claims Data as at 30 April 2025.

Members **NOTED** the progressive improvement in claim processing timeframes, as reflected in the table showing a declining proportion of older claims and shift toward more timely case management, available at: [Claim processing times | Department of Veterans' Affairs](#).

Members were **BRIEFED** on the shift away from email lodgement, with MyService and MyOrg now preferred platforms.

Members **NOTED** that claims submitted by email will continue to be processed in the interim, with direct support provided to transition to MyOrg.

Members **NOTED** the proposed decommissioning of the ESO portal at some point in the future and plans to develop a dashboard to support organisational oversight of advocate activity.

Members **DISCUSSED** implications of limited access to general practitioners and acknowledged the impact on claim processing timelines, particularly for medical evidence.

Members were **INFORMED** of available support mechanisms, including use of MLCOA for independent medical assessments and internal pilots to enhance front-end medical support in claims.

Members were **ADVISED** that a system to assign unique advocate numbers is in development, enabling automatic recognition of accredited advocates.

Members **AGREED** that verification and communication processes should be strengthened to support confidence in advocate credentials and system integrity.

No.	Action	Assigned to
2025ESORT/A12	DVA investigate whether any concerns have been raised regarding the quality of MLCOA assessments and report back to the forum.	Client Benefits

Agenda Item 4.4 Aged and Community Care Update

Members **NOTED** the update on activities being progressed by the Home and Community Care Branch to support ageing DVA clients and **NOTED** two new information guides to assist DVA clients living in residential aged care and their care teams were recently published on the DVA Website. These resources were developed as a result of ESORT advocacy and aim to improve awareness and understanding of available DVA supports within the aged care sector.

Members **DISCUSSED** challenges with the dissemination of DVA service information to Aged Care Assessment Teams (ACATs), noting inconsistencies in understanding what DVA provides.

It was **NOTED** that veterans may access both DVA-funded and My Aged Care services, provided there is no duplication, and assessors are encouraged to identify DVA clients during that process.

Members **RAISED** concerns regarding gaps in communication with state health authorities, and the need for information to be better integrated and shared.

Members **WELCOMED** resources developed to support veterans and providers navigating the aged care system and **NOTED** the value of distributing hard copies via DVA offices.

Concerns were **RAISED** about residential care providers potentially misapplying veterans' Total and Permanent Incapacity (TPI) pensions in fee assessments, particularly distinguishing between qualifying and non-qualifying service.

Members **NOTED** that means-tested care fees are determined by Services Australia and that further clarification on eligibility and pension inclusions is required.

No.	Action	Assigned to
2025ESORT/A13	DVA to review the treatment of Total and Permanent Incapacity (TPI) pensions in residential aged care means testing, including any instances of incorrect application, and provide advice on compliance with existing policy and regulation.	Policy and Program Delivery

Agenda Item 4.5 Open Arms Model of Care

Members **NOTED** the Open Arms Model of Care development and planned improvements.

It was **NOTED** that the veteran community remains central to the design and delivery of the service model.

Members were **INVITED** to provide feedback on the updated service offer out-of-session.

Members **DISCUSSED** the accreditation and qualifications of counsellors engaged by Open Arms, with clarification provided on the professional standards required.

Members **RAISED** concerns regarding the eligibility criteria for Open Arms access, specifically the one-day continuous full-time service (CFTS) qualification and its implications for certain reserve personnel.

Members **AGREED** that the issue should be referred to the National Advisory Committee (NAC) for further consideration and potential advice to the Minister.

Members **DISCUSSED** the evolution of the Model of Care, the scope of the NAC, and the importance of maintaining its independence to ensure objective advice to government.

It was **SUGGESTED** that any concerns regarding influence or structure be further explored with the Minister or with NAC members.

No.	Action	Assigned to
2025ESORT/A14	Secretariat to circulate the presentation on Open Arms Model of Care, including advice on how to provide feedback.	Secretariat

Agenda Item 4.6 Operational Working Party (OWP)

Members **ENDORSED** refocussing the Operational Working Party (OWP) on the implementation of the VETS Act.

Agenda item 4.7 Taskforce on Wellbeing Agency and Peak Body Update

Due to time constraints, this item was not discussed.

Members **NOTED** that a written update was provided.

Agenda item 4.8 Research and Evaluation Branch Update

Due to time constraints, this item was not discussed.

Members **NOTED** that a written update was provided.

Agenda item 4.9 Handling of Personal Information Project

Due to time constraints, this item was not discussed.

Members **NOTED** that a written update was provided.

Agenda item 4.10 Gardens of Remembrance Redevelopment – Western Australia and Hobart

Due to time constraints, this item was not discussed.

Members **NOTED** that a written update was provided.

Agenda item 4.11 National Commemorative Service: 75th Anniversary of Australian Service in the Korean War

Due to time constraints, this item was not discussed.

Members **NOTED** that a written update was provided.

Agenda Item 5 Other Business

Members were **BRIEFED** by the Interim Head of the Defence and Veterans' Service Commission on the progress to establish the body as an independent statutory entity, with work underway to finalise legislative, operational and budgetary foundations.

Members **AGREED** that, for distribution emails sent to ESORT members, a standard phrase should be included to indicate that the information and attachments is intended to be shared with members' respective groups.

Members **NOTED** the final meeting of the Veteran Family Advocate Commissioner and **ACKNOWLEDGED** her significant contribution over the past five years, including the role played in shaping and strengthening collective efforts to support veteran families.

Members **DISCUSSED** opportunities to enhance visibility and public messaging of the forum's work, including using photos.

Members **AGREED** to explore sharing photos and messaging through departmental and community channels to support broader engagement and awareness.

Meeting closed: 4:00pm

Annexure A

ESORT Members	
Alison Frame	Chair, Secretary, Department of Veterans' Affairs, President, Repatriation Commission and Chair, Military Rehabilitation and Compensation Commission (MRCC)
Mark Brewer AM CSC and Bar	Deputy President, Repatriation Commission and MRCC Member
Kahlil Fegan DSC AM	Repatriation Commissioner and MRCC Member
Gwen Cherne	Veteran Family Advocate Commissioner, MRCC Member
Joe Iervasi CSC	Air Force Association
Rod Henderson	Australian Peacekeeper and Peacemaker Veterans' Association Ltd
Bob Hunter	Australian Special Air Service Association (proxy)
Jenny Gregory OAM	Australian War Widows Inc
Del Gaudry CSC	Defence Force Welfare Association
BRIG Mike Annett CSC	Defence Reserves Association
AIRCDRE Kaarin Kooij CSC	Department of Defence (proxy)
Wayne McNee	Legacy Australia Inc
BRIG Phil Winter AM CSC ADC	Returned and Services League of Australia (proxy)
Mike von Berg MC OAM	Royal Australian Regiment Corporation
Paul Singer CVO	Soldier On
Beverley Benporath	The Partners of Veterans Association of Australia Inc
Scott Jeffrey	TPI Federation Australia
Max Ball	Vietnam Veterans Association of Australia Inc
Bill Roberts OAM JP	Vietnam Veterans' Federation of Australia
Other Attendees	
Andrew Kefford PSM	Deputy Secretary, Policy and Programs
Alison McLaren	Deputy Secretary Veteran, Family and Stakeholder Experience
Brenton Philp	Deputy Secretary, Chief Operating Officer
James Dallas	Younger Veterans – Contemporary Needs Forum (YVF) Representative
Presenters	
Teena Blewitt PSM	Deputy Secretary, Agency for Wellbeing and Peak Body Taskforce
Brigadier Nick Foxall AM DSM	Director General, Military Strategic Commitments, Department of Defence
Sarah McGregor	A/g Director General, People Policy and Employment Conditions, Defence People Group
Luke Brown	First Assistant Secretary, Policy
Leonie Nowland	First Assistant Secretary, Open Arms
Michael Harper	A/g First Assistant Secretary, Client Benefits
Charlotte Inglis	Director, Residential Aged Care
Observers	
Keely Dreghorn	Returned and Services League of Australia
Paula Goodwin	First Assistant Secretary, Ministerial Engagement and Communications

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Peta Langeveld	First Assistant Secretary, Program Delivery
Amanda Conroy	Assistant Secretary, Ministerial, International & Stakeholder Relations
The Hon Martin Hamilton-Smith	Australian Special Air Service Association
Charlotte Webb	Defence Families Australia
RADM Letitia van Stralen AM CSC RAN	Department of Defence
David Manolas	Naval Association of Australia
MAJGEN Greg Melick AO RFD FANZCN SC	Returned and Services League of Australia
RADM Sonya Bennett AM	MRCC Member, Department of Defence
Mike Duke	MRCC Member, Comcare
Brad Clarke	Assistant Director, International and Stakeholder Relations
Jessica Law	Senior Secretariat Support Officer, International and Stakeholder Relations