

▽ RSVP QUESTIONNAIRE SUMMARY

 Veterans Affairs  
Canada Anciens Combattants  
Canada

Canada

# RSVP ADKAR Change-o-Meter Pulse Questionnaire Summary

MAY 2022

## RSVP QUESTIONNAIRE SUMMARY

### PROSCI ADKAR MODEL

Based on Prosci's research, the foundation for organizational change is successful change at the **individual level** by building the elements of the ADKAR change model (Figure 1) in each individual.

ADKAR stands for:

- **Awareness** provides the "why" the change is happening and "why now" (Question 2.a-c)
- **Desire** is environment that provides the motivation and willingness for the change (Question 2.d-g)
- **Knowledge** is the information, training and learning needed to apply the change (Question 2.h-l)
- **Ability** removes obstacles that could prevent the change (example: implementation) (Question 2.j-k)
- **Reinforcement** sustains the change past the implementation phase (Will be asked after implementation)

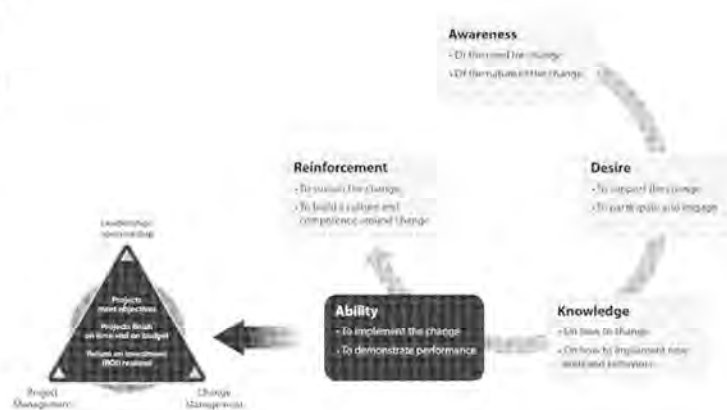


Figure 1. ADKAR Change Model

## ▼ RSVP QUESTIONNAIRE SUMMARY

### BACKGROUND:

The ADKAR Change-o-Meter provides a framework to determine whether our working group participants are ready to adopt RSVP.

Our second assessment was administered in October 2022 to gauge the level of awareness, desire, knowledge and ability towards the upcoming changes.

This questionnaire will be administered throughout the project (every 4-6 months) to check the variance and to adjust the strategy and plans.



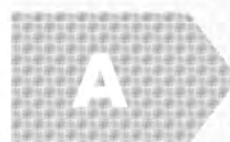
AWARENESS



DESIRE



KNOWLEDGE



ABILITY



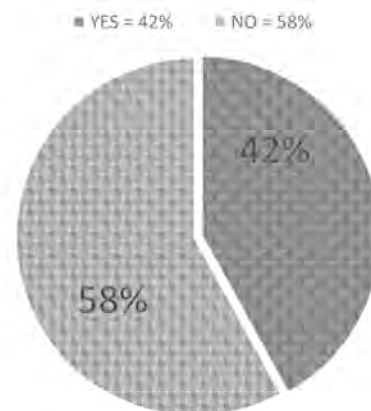
REINFORCEMENT

## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS - PARTICIPATION

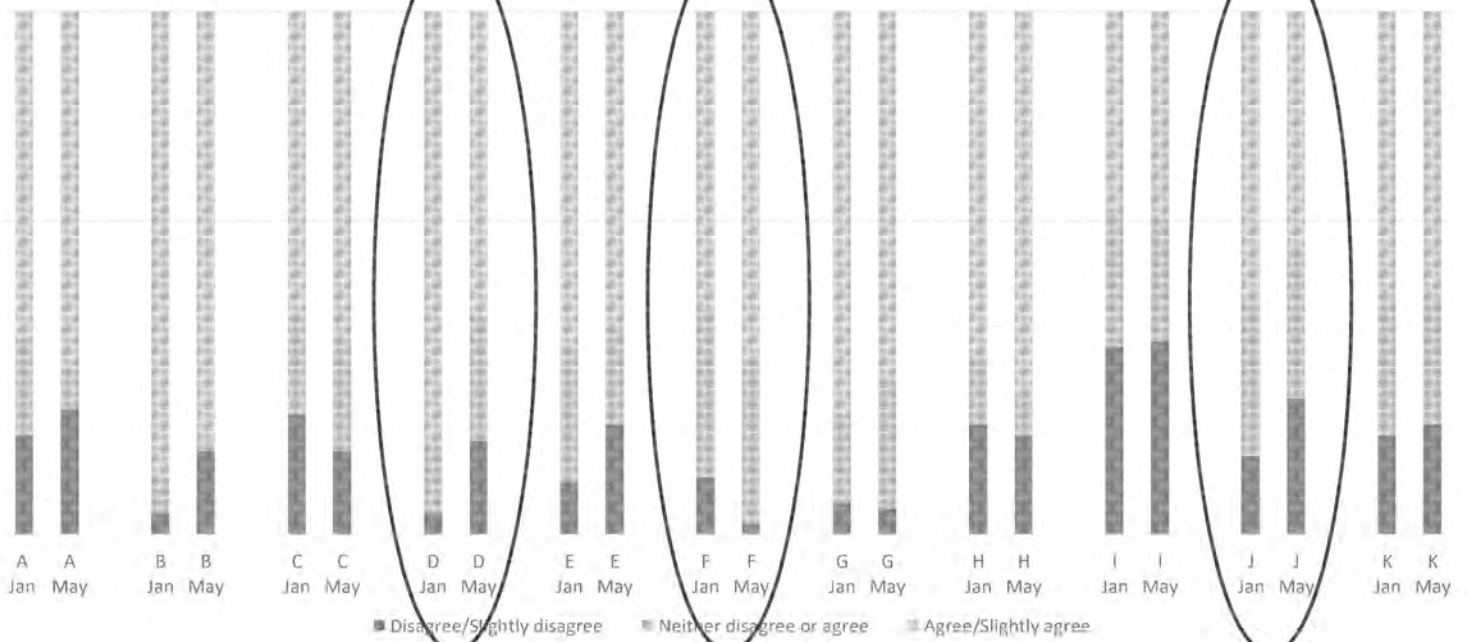
- A total of **38 surveys were completed** from May 24<sup>th</sup>, 2022 – June 3<sup>rd</sup>, 2022.
- 42% of surveys completed were by **working group participants in field operations**.
- Question three asked 'Please list any risks or concerns you have related to the implementation of the new PCVRS service contract'. This generate **26 individual comments**.

#### 1. Do you work in Field Operations?



## RSVP QUESTIONNAIRE SUMMARY

### January VS May Pulse Questionnaire Results



## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS - AWARENESS

2.A. I am well informed of the changes that will take place with the implementation of the new Partners in Canadian Veterans Rehabilitation Services (PCVRS) service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	68%	26	63%	10
Neither disagree nor agree	8%	3	12%	2
Disagree/ slightly disagree	24%	9	25%	4

\*Similar to the January pulse questionnaire.

2.C. I understand the impact of the upcoming changes with the implementation of the new PCVRS service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	63%	24	75%	12
Neither disagree nor agree	21%	8	19%	6
Disagree/ slightly disagree	16%	11	6%	1

\*Increase in 21% agree/slightly agree in FO compared to January pulse questionnaire.

2.B. I understand the reasons for the upcoming changes to the Rehabilitation Services and Vocational Assistance Program.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	82%	31	94%	15
Neither disagree nor agree	3%	1	0%	0
Disagree/ slightly disagree	15%	6	6%	1

\*Relatively similar to the January pulse questionnaire.

- 68 - 63% reported they are **well informed of the changes taking place with the implementation of the new PCVRS service contract** (Question 2.A).
- 82-94% reported they **understand the reasons for the upcoming changes to the RSVP** (Question 2.B).
- 75% of working group participants in FO reported they **understand the impact of the upcoming changes**. This was an increase in 21% compared to Jan 2022 (Question 2.C).

## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS: DESIRE

**2.D. I am personally motivated to be part of the proposed changes to the RSVP service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	58%	22	62%	10
Neither disagree nor agree	24%	9	19%	3
Disagree/ slightly disagree	18%	7	19%	3

\*Decrease in 25% (all responses) agree/ slightly agree compared to the January pulse questionnaire.

**2.F. I feel supervisors and managers support the new PCVRS service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	66%	23	81%	13
Neither disagree nor agree	32%	12	19%	3
Slightly disagree	2%	1	0%	0

\* Increase in 31% agree/slightly agree in FO compared to the January pulse questionnaire.

**2.E. I look forward to the implementation of the new Partners in Canadian Veterans Rehabilitation Services (PCVRS) service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	61%	23	63%	10
Neither disagree nor agree	21%	8	12%	2
Disagree/ slightly disagree	18%	7	25%	4

\*Slight increase compared to the January pulse questionnaire.

**2.G. I feel executives support the new PCVRS service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	71%	27	69%	11
Neither disagree nor agree	24%	9	25%	4
Slightly disagree	5%	2	6%	1

\* Slight decrease to the January pulse questionnaire.

## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS: KNOWLEDGE

2.H. I know where to go to get information on the upcoming changes to the RSVP project and PCVRS service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	74%	28	75%	12
Neither disagree nor agree	8%	3	6%	1
Disagree/ slightly disagree	18%	7	19%	3

\* Increase in 10% agree/slightly agree in FO compared to the January pulse questionnaire.

- 74% - 75% reported they agree/ slightly agree on **where to get information on the upcoming changes to the RSVP project and PCVRS service contract**. There was an increase in 10% for working group participants in Field Operations (Question 2.H).
- 37% - 50% reported they disagree or slightly disagree with **having the knowledge to be successful in their new role as part of the implementation of the PCVRS service contract** (Question 2.I).

2.I. I have the knowledge to be successful in my new role as part of the implementation of the PCVRS service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	39%	15	31%	5
Neither disagree nor agree	24%	9	19%	3
Disagree/ slightly disagree	37%	17	50%	8

\* Slight decrease in FO compared to the January pulse questionnaire.

- Individuals' knowledge should increase once we have tangible products to share, such as the personas, the migration guide and more.
- Individuals' knowledge should increase once they are trained on the new service delivery model, IT systems and business processes.



## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS: ABILITY

2.J. I am confident I will be able to perform my work tasks effectively after the implementation of the new PCVRS service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	45%	17	31%	5
Neither disagree nor agree	29%	11	31%	5
Slightly disagree	26%	10	38%	6

\* Decrease in 19% agree/slightly agree in FO compared to the January pulse questionnaire.

- 45-31% reported they agree or slightly agree **they will be able to perform their work tasks effectively after the implementation of the new PCVRS service contract**. This was a decrease in 19% for working group participants in Field Operations compared to the January pulse questionnaire (Question 2.J.).
- 69% of field operations working group participants vs 55% of all responses reported they agree or slightly agree they are **concerned about the risks associated with the implementation of the new PCVRS service contract** (Question 2.K.).

2.K. I feel concerned about the risks associated with the implementation of the new PCVRS service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
<b>Agree/ slightly agree</b>	<b>55%</b>	<b>26</b>	<b>69%</b>	<b>11</b>
Neither disagree nor agree	24%	9	18%	3
Disagree/ slightly disagree	21%	8	13%	4

\* Relatively similar to the January pulse questionnaire.

- Individuals' ability should increase once they have a chance to see the wire frames, the portals and have hands on training.
- At this point in the project, there are still a lot of concern for the risks associated with the implementation of the new PCVRS service contract as 69% of field operations employees reported agree/ slightly agree to feeling concerned about the risks associated with the implementation of the new PCVRS contract.
  - Once employees can visualize their roles (personas) and the portals are in place, employee's ability should increase.

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### OBSERVATIONS (QUANTITATIVE DATA):

- **AWARENESS** – The majority of our working group participants are **well-informed of the changes** that will be taking place, **understand the reasons** for the upcoming changes and they **understand the impacts** of the changes (Question 2 A, B & C.).
- **DESIRE** – Communication and engagement initiatives should aim to increasing employees' motivation to be part of the proposed changes as this has **decreases from 26% (all responses) and 25% (field operations)** (Question 2.D.).
- **DESIRE** – 66% (all responses) and **81% (field operations) reported they feel their supervisor and manager support the PCVRS contract** (Question 2.F).
- **KNOWLEDGE** – **Increasing employees' knowledge to enable them to be successful in their new role is critical** as 37% - 50% reported they disagree or slightly disagree to having the knowledge to be successful in their role as part of the implementation of the PCVRS service contract (Question 2I.).
- **ABILITY** – **Building confidence in employees' ability to perform their work tasks effectively after go-live is critical** as only 45% - 31% reported they are confident they will be able to perform their work tasks effectively after implementing the PCVRS service contract (Question 2J.).

▼ RSVP QUESTIONNAIRE SUMMARY

**Please list any risks or concerns you have related to the implementation of the new PCVRS service contract.**

**THEME 1:**

**CHANGE FATIGUE & HIGH STAFF TURNOVER/JOB SATISFACTION**

**THEME 2:**

**WILL PCVRS DELIVER WHAT THEY SAY THEY WILL DELIVER?**

**THEME 3:**

**MIGRATION PROCESS & GO-LIVE (TECHNOLOGY/TRAINING)**

## ▽ RSVP QUESTIONNAIRE SUMMARY

### THEME 1: CHANGE FATIGUE & HIGH STAFF TURNOVER/JOB SATISFACTION

"I am worried that we will lose CM staff because the **hands-on aspect of the job will change**. It will look like more of a WSIB or CAF LTD model where the CM is in the background approving services and have some interactions with clients but not as many and some staff will not be happy with this change."

" 'Agile' to staff equals **constant changes/fatigue and frustration**, never feeling competent over the systems they need to use to do their jobs and leading to serious job dissatisfaction for some.

"There are **so many changes all at once it is overwhelming and we can't keep up**. This massive change and huge transition of files coming just feels too big to manage."

**"Change fatigue on the field" "Embracing changes in technology" "Too much change too quickly"**

"This will be done in conjunction with the return to the office in greater numbers in the fall as well as the finalization of the complexity index tool. There will also be the United Way campaign and the usual workload. **I believe this will create an atmosphere of breathlessness.**"

"I am concerned **we will never have a relatively stable and well-trained workforce**. Hopefully, Veterans will at least have a consistent RSS because they may have many VAC Case Managers during their program participation."

"I am also worried that we will see **an increase in burnout** as CM's attempt to transition their files."

**"High staff turnover** of the main group affected by this change (Case Managers, VSTMs, some consultant groups)."

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### THEME 2: WILL PCVRS DELIVER WHAT THEY SAY THEY WILL DELIVER?

"I fear that the case managers will **be tasked to deal with complaints from Veterans** and required to follow up when the RSS isn't able to deal with a particular issue or concern. They will be stuck in the middle between the Veteran and the RSS."

"**Continuity and quality of individualized service; conflict of interest** for PCVRS contractor."

"PCVRS will **lack a Veteran centric approach** and will be **too rigid for are most complex Veterans.**"

"I am also worried that **working with the contractor will be cumbersome and the escalation process related to issues will be complicated.**"

"Risk that monitoring will be challenging given large scale/scope."

"Concerned with quality issues such as those experienced with CVVRS"

"Risk that service provider will continue current/past trends that are intended to be corrected through the new contract."

"Rehab clients who wish to receive services from providers who are not one of the approved Rehab providers"

"Staff are concerned that the intention that RSS being able to connect clients to RSP/providers is **not realistic/achievable in areas where our clients and staff are already are struggling to find available providers** like GP's/physicians, specialists, mental health providers."

"I am concerned about the **lack of providers in this section of the country** and don't see how the contractor will be able to handle the volume when we already lack providers."

## ▽ RSVP QUESTIONNAIRE SUMMARY

### THEME 3: MIGRATION PROCESS & GO-LIVE (TECHNOLOGY/TRAINING)

"The migration plan will have **Case Managers potentially frustrated** of having possibly old rehab plans for complex rehab plans to be migrated later and the new rehab plan for migrated/new rehab plans."

"Concerned that **it will create 2-tiered service for our clients** - some will be with the new contractor, others will continue with present provider, different expectations, not the same accountability for both staff and clients. Could be difficult for CMs to explain this to clients."

"For staff who were here through 2019 there is fear of GCCase and the new portal NOT functioning as promised."

"Just worry with how smooth things will go considering how PFL roll out went."

"Issues with the actual go live transition and issues that may emerge"

"Making sure the systems work well and giving staff good time to practice and gain mastery over them in advance of going live will be very important!"

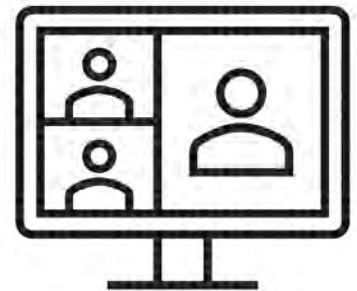
"I fear, as in many other major IT changes at VAC, the new training systems (new Case Flow system of the new contractor and GC Case enhancements, that the training systems will only be read just in time for implementation (and just in time training). This leads to insufficient time to absorb the IT changes."

"Fear of not getting enough training before the new program is implemented."

## What would help you prepare for the new way in which we will be delivering rehabilitation services?

**1. Myth buster** - "Myth busters and open-sessions that quickly and clearly illustrate the positive changes we can expect to see from RSVP compared to the current system, preferably using data if possible and how VAC expects to see improvements."

**2. Open Sessions** - "Opportunities to attend virtually-held information sessions and interactive training modules (similar to what was provided for PFL)."



## ▽ RSVP QUESTIONNAIRE SUMMARY

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### 3. Training (personas, business processes and workflows)

- “More hands-on knowledge about how the implementation is going to work and how the CM role and practice is going to change would be helpful.”
- “Staff are looking for **detailed information on how their jobs will be affected** pre and post RSVP implementation and talk about change in practice (roles and expectations).”
- “Training on how the **everyday ins and outs of the case managers role** are going to change and we should be preparing staff for this.”
- “Training on how the **new contract will change our operations** at the local level.”
- “More training on **vocational rehabilitation** for both VAC staff and PCVRS so there is a mutual understanding of same.”
- “I would like to have a better understanding of **how it aligns or does not align with existing treatment benefits.**”

“More communications for all staff and not just Field Operations.”

“It would be beneficial to have meetings with PCVRS to ensure that we are all on the same page.”



## ▼ RSVP QUESTIONNAIRE SUMMARY

### NEXT STEPS:



Schedule townhalls and/or open sessions with our project sponsor and/or PCVRS to create excitement for the new contract.



Prioritize training, including the migration process, and ensure we allow enough time for training prior to implementation.



Build confidence in employee' ability to perform their work tasks by sharing tangible products that will demonstrate the future state (IT systems).



Plan to launch the third pulse survey prior to go-live (October 2022) once initiatives have been met; such as open-sessions, training sessions, personas, business process and workflows.

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# RSVP ADKAR Change-o-Meter Pulse Questionnaire Summary

JANUARY 2022

## ▼ RSVP QUESTIONNAIRE SUMMARY

### BACKGROUND:

The ADKAR Change-o-Meter provides a framework to determine whether our working group participants are ready to adopt RSVP.

Our first assessment was administered during the early stage (January 2022) to gauge the level of awareness, desire, knowledge and ability towards the upcoming changes.

This questionnaire will be administered quarterly (every 3-4 months) to check the variance and to adjust the strategy and plans.



AWARENESS



DESIRE



KNOWLEDGE



ABILITY



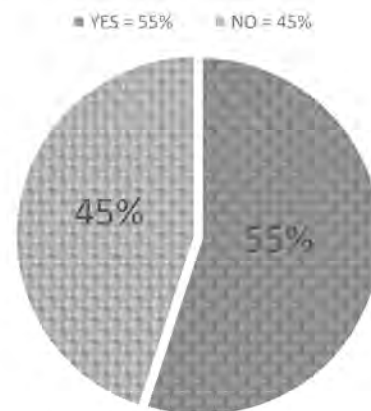
REINFORCEMENT

## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS - PARTICIPATION

- A total of **47 surveys were completed** from January 5<sup>th</sup>-14<sup>th</sup>, 2022.
- 55% of surveys completed were by **working group participants in field operations**.
- Question three asked '**Please list any risks or concerns you have related to the implementation of the new PCVRS service contract**'. This generate **25 individual comments**.

#### 1. Do you work in Field Operations?



## RSVP QUESTIONNAIRE SUMMARY

### PROSCI ADKAR MODEL

Based on Prosci's research, the foundation for organizational change is successful change at the **individual level** by building the elements of the ADKAR change model (Figure 1) in each individual. ADKAR stands for:

- **Awareness** provides the “why” the change is happening and “why now” (Question 2.a-c)
- **Desire** is environment that provides the motivation and willingness for the change (Question 2.d-g)
- **Knowledge** is the information, training and learning needed to apply the change (Question 2.h-l)
- **Ability** removes obstacles that could prevent the change (example: implementation) (Question 2.j-k)
- **Reinforcement** sustains the change past the implementation phase (Will be asked after implementation)

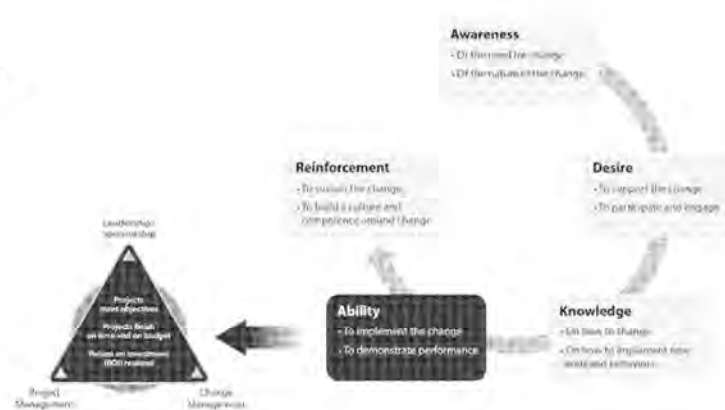


Figure 1. ADKAR Change Model

## RSVP QUESTIONNAIRE SUMMARY

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### SUMMARY OF RESULTS - AWARENESS

**2.A. I am well informed of the changes that will take place with the implementation of the new Partners in Canadian Veterans Rehabilitation Services (PCVRS) service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	62%	29	65%	17
Neither disagree nor agree	19%	9	19%	5
Disagree/ slightly disagree	19%	9	15%	4

**2.B. I understand the reasons for the upcoming changes to the Rehabilitation Services and Vocational Assistance Program (RSVP) service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	89%	42	88%	23
Neither disagree nor agree	6%	3	12%	3
Disagree/ slightly disagree	4%	2	0%	0

**2.C. I understand the impact of the upcoming changes with the implementation of the new PCVRS service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	57%	27	54%	14
Neither disagree nor agree	19%	9	23%	6
Disagree/ slightly disagree	23%	11	23%	6

- 62 - 65% reported they are **well informed of the changes taking place with the implementation of the new PCVRS service contract** (Question 2.A).
- 88-89% reported they **understand the reasons for the upcoming changes to the RSVP** (Question 2.B).
- 42-46% reported they **do not understand or unsure if they understand the impact of the upcoming changes** (Question 2.C).

## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS: DESIRE

**2.D. I am personally motivated to be part of the proposed changes to the RSVP service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	83%	39	88%	23
Neither disagree nor agree	13%	6	12%	3
Slightly disagree	4%	2	0%	0

**2.E. I look forward to the implementation of the new Partners in Canadian Veterans Rehabilitation Services (PCVRS) service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	64%	30	58%	15
Neither disagree nor agree	26%	12	23%	6
Disagree/ slightly disagree	11%	5	19%	5

**2.F. I feel supervisors and managers support the new PCVRS service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	57%	27	50%	13
Neither disagree nor agree	32%	15	35%	9
Disagree/ slightly disagree	11%	5	15%	4

**2.G. I feel executives support the new PCVRS service contract.**

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	77%	36	77%	20
Neither disagree nor agree	17%	8	15%	4
Slightly disagree	6%	3	7%	2

## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS: KNOWLEDGE

**2.H. I know where to go to get information on the upcoming changes to the RSVP project and PCVRS service contract.**

	All Responses (N = 47)		Field Operations (N = 26)	
	%	#	%	#
Agree/ slightly agree	66%	31	65%	17
Neither disagree nor agree	13%	6	12%	3
Slightly disagree	21%	10	23%	6

- + 21-23% reported they slightly disagree **where go to get information on the upcoming changes to the RSVP project and PCVRS service contract** (Question 2.H).
- + 36-42% reported they disagree or slightly disagree with **having the knowledge to be successful in their new role as part of the implementation of the PCVRS service contract** (Question 2.I).

**2.I. I have the knowledge to be successful in my new role as part of the implementation of the PCVRS service contract.**

	All Responses (N = 47)		Field Operations (N = 26)	
	%	#	%	#
Agree/ slightly agree	38%	18	38%	10
Neither disagree nor agree	26%	12	19%	5
Disagree/ slightly disagree	36%	17	42%	11

- Individuals' knowledge should increase once we have tangible products to share, such as the personas.
- Individuals' knowledge should increase once they are trained on the new portals and business processes.



## RSVP QUESTIONNAIRE SUMMARY

### SUMMARY OF RESULTS: ABILITY

2.J. I am confident I will be able to perform my work tasks effectively after the implementation of the new PCVRS service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
Agree/ slightly agree	55%	26	50%	13
Neither disagree nor agree	30%	14	23%	6
Slightly disagree	15%	7	27%	7

- + 50-55% reported they agree or slightly agree **they will be able to perform their work tasks effectively after the implementation of the new PCVRS service contract** (Question 2.J.).
- + 73% of field operations working group participants vs 55% of all responses reported they agree or slightly agree they are **concerned about the risks associated with the implementation of the new PCVRS service contract** (Question 2.K.).

2.K. I feel concerned about the risks associated with the implementation of the new PCVRS service contract.

	ALL RESPONSES (N = 47)		FIELD OPERATIONS (N = 26)	
	%	#	%	#
<b>Agree/ slightly agree</b>	<b>55%</b>	<b>26</b>	<b>73%</b>	<b>19</b>
Neither disagree nor agree	26%	12	12%	3
Disagree/ slightly disagree	19%	9	15%	4

- + Individuals' ability should increase once they have a chance to see the wire frames and the portals are in place closer to RSVP launch.
- + At this point in the project, there are still a lot of concern for the risks associated with the implementation of the new PCVRS service contract as 73% of field operations employees reported agree/ slightly agree. Once employees can visualize their new roles (personas) and the portals are in place, employee's ability should increase.

## ▼ RSVP QUESTIONNAIRE SUMMARY

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### OBSERVATIONS (QUANTITATIVE DATA):

- **Working group participants want to be engaged** and share their perspectives and concerns as 47 surveys were completed within January 5-14, 2022 .
- Our working group participants are **personally motivated to be part of the proposed changes** as 83-88% agree or slightly agree (Question 2. D.).
- 88-89% of our working group participants **understand the reasons for the upcoming changes to the service contract** (Question 2B.).
- Communication to managers is critical as only **50-57% reported they feel their supervisors or managers support the new PCVRS service contract** (Question 2. F.).
- Communication initiatives should highlight tangible changes as **24-38% reported they do not feel well informed or unsure if they feel well informed about the changes** (Question 2. A.)
- Communication initiatives should include the impacts of the changes as **42-46% reported they do not understand or unsure if they understand the impact of the upcoming changes** (Question 2.C).

## ▽ RSVP QUESTIONNAIRE SUMMARY

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### WRITTEN RESPONSES:

#### THEME 1: Case Managers Roles and impacts

- “My concerns are related to the **impact on case managers**. Many are worried that their jobs will change and it will become **more administrative**. That they will **only be used as decision makers**.”
- “The role of CM is becoming **less and less involved with the veteran** and immersed in their life, and more of an overseeing/checking in role.”
- “There is a lack of clarity of what the **role of the case manager will be after RSVP** takes place.”
- “**Job losses and impact**. Reclassification of Case Managers and their wages. Contracting out to private sector and associated price tag when things seemingly were working fine.”
- “In general: they (CMs) are cautiously hopeful that the new contract will deliver what they are being told (less admin burden, more time for direct client contact and relationship building); they are frustrated that so far the info being shared **is vague and without tangible details that they can understand the HOW it will make their jobs better**; they are fearful and mistrusting that this will roll out smoothly and not be another GC Case-like disaster that leaves them and their clients facing all the consequences with too-little support, and fearful that they are being **cut out completely from having any relationship with client's providers**.”

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### WRITTEN RESPONSES CONTINUED:

#### THEME 1: Case Managers Roles and impacts

- “I am concern as it is still difficult contextually to really see where the **CMs will fit into the overall flow**, why they will still have involvement in some respects.”
- “My concern is that the **rapport, the emotional support and seeing real changes in veterans** (what makes my job worth while) **will be gone** as a VRS equivalent will now hold much of that role.”
- “The primary factor is **time and workload impacts** with an existing caseload. Also, **clear direction on what is required from each role in the field** and the timelines to complete.”
- “I am worried that staff will not be prepared for the **huge change this is going to mean for their role.**”
- “I am **super excited** to see this roll out, and I appreciate all the consultation that is going into the project thus far but feel more CM buy in will develop when the finer details are available (as long as they like what they see).”

## ▽ RSVP QUESTIONNAIRE SUMMARY

137

### WRITTEN RESPONSES:

THEME 2: Transition, deadline of 2023, and progress to date.

- “I am concerned about all the aspects of **file migration**.”
- “I am not concerned with clients that start our with the new contractor. I am more concerned about the **transition process**.”
- “We don’t have enough information about how to **manage this transition**, to go from how we do things now to the new way of administering the rehab program.”
- “I am very concerned about the **deadline of 2023** and the work that the committee/working groups have accomplished thus far. There are a lot to do, and it looks like we are not moving fast enough.”
- “I would like to see more meetings held and simple messages being sent out more regularly to keep us **informed about the progress of the project**. Right now, committee meetings don’t take place often enough. The current pace would unfortunately not allow us to get **anywhere close in 2023**, especially since an implementation phase needs to start before day 1 and not after.”
- “How will the more **standardized program** (same care provider for everyone) **meet particular needs on a case-by-case basis?**”

## ▼ RSVP QUESTIONNAIRE SUMMARY

137

### WRITTEN RESPONSES:

THEME 3: Communication (to providers and clients) and well-being of veterans.

- “I am concerned about how this will be **communicated to Veterans and expectations outlined.**”
- “How will information about the changes be communicated to veterans and staff?”
- “Concerned over the **impact on staff, clients and current providers.** Are staff going to be expected to educate private community providers as well as clients?”
- “I am concerned about the **impact the change may have on the veteran,** but also about the **relationship between the veteran and his case manager.**”
- “Protection of Veteran **privacy as files will be accessed by private sector contractor.** **Lack of consultation with or input from the Veteran stakeholder community** about these changes.”

## ▽ RSVP QUESTIONNAIRE SUMMARY

11

### WRITTEN RESPONSES:

#### THEME 4: Lack of Providers and RSS Role

- “A big concern is that there are **nowhere near enough providers now in Atlantic Canada**, that will not change with RSVP, and despite what the hope is, I **don't see this improving timelines for reports.**”
- “Even when national contractor takes over medical/psychosocial/vocational rehab, **there will be continued challenges obtaining the information from providers that is necessary** (through assessments and progress reports) regarding SMART goals, timelines, how progress will be measured, effective progress reporting, etc.”
- “I am worried that the **provider will cause more administrative work as we work to correct errors in reports**, similar to the issues currently experienced with CVVRS.”
- “**Lack of investment in VAC personnel** and hiring as these duties could be better managed internally.”
- “Some of these rehabilitation specialists seemed to struggle with the last RSVP change and when hired by CVVRS operated the same as they had with their previous employer. Some have displayed poor judgement and limited patience in working with our clients and seemed more prone to cancelling than counselling clients about voc rehab.”
- “Thank you for asking our opinions and for taking our comments into consideration.”

## ▼ RSVP QUESTIONNAIRE SUMMARY

### NEXT STEPS:



Continue to communicate changes and their impacts on Providers, Veterans and Case Managers with the implementation of RSVP.



Create a training plan and ensure we allow enough time for training prior to implementation.



Encourage managers and supervisors to share RSVP updates with their teams.



Plan to launch the second pulse survey (3-4 months) once additional initiatives have been met; such as sharing data wire frames, personas and targeted communication products.



## Alexander J Condon (VAC/ACC)

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**From:** Rehabilitation Procurement - L'Approvisionnement en réhabilitation (VAC/ACC)  
**Sent:** June 1, 2022 12:16 PM  
**To:** Rehabilitation Procurement - L'Approvisionnement en réhabilitation (VAC/ACC)  
**Cc:** Deanna Carroll (VAC/ACC); Tammy MacWilliams (VAC/ACC); Danica Arseneault (VAC/ACC); John Stavert (VAC/ACC); Deirdre Mercier (VAC/ACC); Peggy Nash-Butt (VAC/ACC); Cory Woodford (VAC/ACC)  
**Subject:** LAST CHANCE - RSVP Pulse Check | Dernière chance - Vérification du pouls PSRAP

### Le français suit.

Dear RSVP Working Group Participants,

Friday, 3 June 2022, is your last day to participate in the short [pulse questionnaire](#) and help shape future initiatives and products, before launching our new National contract in November 2022. If you haven't already completed the short questionnaire, we invite you to click the link below to participate. The questionnaire should take approximately 3-5 minutes to complete.

Begin the [pulse questionnaire](#).

Thank you for your participation!

---

Bonjour,

Vendredi, le 3 juin 2022, est la date limite pour répondre au [questionnaire sur le pouls](#) et contribuer à façonner les initiatives et produits futurs, avant de lancer notre nouveau contrat national en novembre 2022. Si vous n'avez pas encore rempli le court questionnaire, nous vous invitons à cliquer le lien ci-dessous pour y participer.

Le questionnaire vous prendra environ 3-5 minutes pour le compléter.

Commencer [le questionnaire](#).

Nous vous remercions de votre participation.

**From:** Rehabilitation Procurement - L'Approvisionnement en réhabilitation (VAC/ACC) <rehabilitationprocurement-lapprovisionnementenrehabilitation@veterans.gc.ca>

**Sent:** May 24, 2022 2:45 PM

**Cc:** Deanna Carroll (VAC/ACC) <deanna.carroll@veterans.gc.ca>; Tammy MacWilliams (VAC/ACC) <tammy.macwilliams@veterans.gc.ca>; Danica Arseneault (VAC/ACC) <danica.arseneault@veterans.gc.ca>; John Stavert (VAC/ACC) <john.stavert@veterans.gc.ca>; Deirdre Mercier (VAC/ACC) <deirdre.mercier@veterans.gc.ca>; Harmonie Harris (VAC/ACC) <harmonie.harris@veterans.gc.ca>; Peggy Nash-Butt (VAC/ACC) <peggy.nash-butt@veterans.gc.ca>; Cory Woodford (VAC/ACC) <cory.woodford@veterans.gc.ca>; Rehabilitation Procurement - L'Approvisionnement en

réhabilitation (VAC/ACC) <rehabilitationprocurement-lapprovisionnementenrehabilitation@veterans.gc.ca>

**Subject:** RSVP Pulse Check #2 | Vérification du pouls PSRAP # 2



**Le français suit.**

Dear RSVP Working Group Participants,

We want to hear your feedback on the RSVP Project to help shape future initiatives and products, before launching our new National contract with PCVRS in November 2022.

**Your participation is important and valued in shaping the future service delivery model for rehabilitation service.** Please consider completing a short [pulse questionnaire](#) by Friday, June 3, 2022. The results of the pulse questionnaire will be used to improve project planning, communication products and more before launching in November 2022.

The questionnaire should take approximately 3-5 minutes to complete.

Begin the [pulse questionnaire](#).

Become involved and learn more about the RSVP implementation by joining our [MS Team](#). You can also email the [RSVP mailbox](#) with any questions.

Thank you for your participation!

Sincerely,  
RSVP Project Team

---

Bonjour,

Nous souhaitons connaître votre avis sur le projet PSRAP afin de contribuer à l'élaboration des initiatives et produits futurs et ce, avant le lancement de notre nouveau contrat national avec le PSRVC en novembre 2022.

**Votre rétroaction est précieuse et appréciée pour façonner le futur modèle de prestation de services de réadaptation.** Nous vous invitons à remplir un court [questionnaire](#) afin de donner votre opinion avant le vendredi 3 juin 2022. Nous utiliserons les résultats du questionnaire pour améliorer la planification du projet, les produits de communication avant le lancement en novembre 2022.

Le questionnaire vous prendra environ 3-5 minutes pour le compléter.

Commencer [le questionnaire](#).

Vous pouvez vous impliquer et en apprendre davantage sur la mise en œuvre du projet, nous vous invitons à vous joindre à notre espace sur [MS Teams](#). Vous pouvez également communiquer avec [la boîte de réception du PSRAP](#) pour toute question.

Nous vous remercions de votre participation.

Cordialement,  
L'équipe du projet du PSRAP

**Harmonie Harris**

A/Change Manager, Re-establishment and Financial Well-being  
Service Delivery & Program Management, Veterans Affairs Canada  
[harmonie.harris@veterans.gc.ca](mailto:harmonie.harris@veterans.gc.ca) (782) 377-0309

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Prestation des services et gestion des programmes, Anciens Combattants Canada  
[harmonie.harris@veterans.gc.ca](mailto:harmonie.harris@veterans.gc.ca) (782) 377-0309



### **Pulse Question #1 – January 5<sup>th</sup> - 14<sup>th</sup>, 2022.**

1. Pulse Question #1 – [ENG](#) | [FR](#)
2. Results Presentation (attached)
3. Raw data (attached)
4. Email to working group participants (attached)
5. Privacy Statement in the questionnaire:
  - a. Participation is voluntary and completely confidential. Your answers will remain anonymous. The information obtained from this survey will be consolidated into a report that will not contain any personal information that could potentially be used to identify you.

**For security and privacy reasons, please do not include any personal or identifiable information in your responses.**

- b. Privacy – The questionnaire did not ask names, job title or any information that would identify any individuals. The results have been saved in a restricted GCdocs folder.
6. Design/Rational/Intended use
  - a. The ADKAR Change-o-Meter pulse questionnaire, originally created by PROSCi, is listed as an initiative in the RSVP Change Management Plan. The ADKAR Change-o-Meter provides a framework to help measure and report on the effectiveness of our strategies and adjust methods, including resistance, to ensure that employees are supported with appropriate tools and supports prior to the contract implementation date in November 2022.
7. The first RSVP questionnaire was administered during the early stage (January 2022) to gauge the level of awareness, desire, knowledge and ability towards the upcoming changes.
8. Analysis
  - a. The analysis was completed by the RSVP Change Manager and presented in a deck (attached).

### **Pulse Questionnaire #2 May 24<sup>th</sup> – June 3<sup>rd</sup>, 2022.**

1. Pulse Questionnaire [ENG](#) | [FR](#)
2. Results Presentation (attached)
3. Raw data (attached)
4. Email to working group participants (attached)
5. Privacy Statement in the questionnaire:
  - c. Participation is voluntary and completely confidential. Your answers will remain anonymous. The information obtained from this survey will be consolidated into a report that will not contain any personal information that could potentially be used to identify you.

**For security and privacy reasons, please do not include any personal or identifiable information in your responses.**

- d. Privacy – The questionnaire did not ask names, job title or any information that would identify any individuals. The results have been saved in a restricted GCdocs folder.

6. Design/Rational/Intended use

- a. The ADKAR Change-o-Meter pulse questionnaire, originally created by PROSCI, is listed as an initiative in the RSVP Change Management Plan. The ADKAR Change-o-Meter provides a framework to help measure and report on the effectiveness of our strategies and adjust methods, including resistance, to ensure that employees are supported with appropriate tools and supports prior to the contract implementation date no later than January 1<sup>st</sup>, 2023.
- b. A first RSVP questionnaire was administered during the early stage (January 2022) to gauge the level of awareness, desire, knowledge and ability towards the upcoming changes. The second pulse questionnaire was administered on May 24-June 3<sup>rd</sup>, 2023 to check the variance and to adjust the strategy and plans prior to implementing the new PCVRS service contract in November 2022.

7. Analysis

- a. The analysis was completed by the RSVP Change Manager (attached).

## Alexander J Condon (VAC/ACC)

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**From:** Rehabilitation Procurement - L'Approvisionnement en réhabilitation (VAC/ACC)  
**Sent:** January 12, 2022 9:46 AM  
**To:** Rehabilitation Procurement - L'Approvisionnement en réhabilitation (VAC/ACC); Amber McNally (VAC/ACC); Amy Caine (VAC/ACC); André Daigle (VAC/ACC); Andrew Hennebery (VAC/ACC); Angela Aultman (VAC/ACC); Arash Youssefian (VAC/ACC); Arlo MacDonald (VAC/ACC); Bianca Zito (VAC/ACC); Bobby Mckinnon (VAC/ACC); Brandi Boles (VAC/ACC); Brent Taylor (VAC/ACC); Carol Caissie (VAC/ACC); Catherine Smith (VAC/ACC); Grey MacIsaac (VAC/ACC); Cynthia Brideau (VAC/ACC); Cynthia Lewis (VAC/ACC); Dana Fotiadis (VAC/ACC); Daniel Andrews (VAC/ACC); Danielle Gauthier (VAC/ACC); David Atkins (VAC/ACC); Deirdre Mercier (VAC/ACC); Denise LeClerc (VAC/ACC); Dianne Snell (VAC/ACC); Donna A Henderson (VAC/ACC); Erin Thompson (VAC/ACC); Fran Healey (VAC/ACC); François Beaupré (VAC/ACC); Fred McKim (VAC/ACC); Garth Moore (VAC/ACC); Gayle Legge (VAC/ACC); Geoff Murray (VAC/ACC); Gloria Yam (VAC/ACC); Greg White (VAC/ACC); Gurinder Dev (VAC/ACC); Gurminder Bhangoo (VAC/ACC); Heather Rogers (VAC/ACC); Helen Benes (VAC/ACC); Ivan MacPhail (VAC/ACC); Jacqueline Smith (VAC/ACC); James Currie (VAC/ACC); Jared C Matthews (VAC/ACC); Jason Jennings (VAC/ACC); Jason Tempke (VAC/ACC); Jean Davis (VAC/ACC); Jean-Luc Lamothe (VAC/ACC); Jeff Reissner (VAC/ACC); Jennifer Marten (VAC/ACC); Jennifer Ross-McMullan (VAC/ACC); Jennifer Thibeau (VAC/ACC); Julia Pike (VAC/ACC); Julie Allard (VAC/ACC); Karen Clare (VAC/ACC); Karen Cowan (VAC/ACC); Kathleen McBryan (VAC/ACC); Kathleen McLaughlin (VAC/ACC); Kathy Fougere (VAC/ACC); Kelsey D Clelland (VAC/ACC); Kent MacLean (VAC/ACC); Kerri Wilkinson (VAC/ACC); Kevin Mycroft (VAC/ACC); Kristofer McKinnon (VAC/ACC); Laurie Molyneaux-Smith (VAC/ACC); Laurie Warren (VAC/ACC); Lisa Garland Baird (VAC/ACC); Lisa Jessome (VAC/ACC); Lianne Cindric (VAC/ACC); Lori MacFarlane (VAC/ACC); Magatte Fall (VAC/ACC); Marie Josée Tremblay (VAC/ACC); Marie Sabbat (VAC/ACC); Marlee Franz (VAC/ACC); Meghan MacDonald (VAC/ACC); Melissa E Coffin (VAC/ACC); Nathan Hardy (VAC/ACC); Nicole Catalli (VAC/ACC); Nicole Warren (VAC/ACC); Patricia Card (VAC/ACC); Patti Stavert (VAC/ACC); Paula Ling (VAC/ACC); Philip Bain (VAC/ACC); Rejeanne Paulin (VAC/ACC); Renée Gamache (VAC/ACC); Rita Dhaliwal (VAC/ACC); Rosa Martin (VAC/ACC); Saira Ashraf (VAC/ACC); Sebastien Perigny-Lajoie (VAC/ACC); Shahina Khan (VAC/ACC); Simon Renaud (VAC/ACC); Stéphanie Harvey (VAC/ACC); Susan L Hughes (VAC/ACC); Susan Shay (VAC/ACC); Susan Way (VAC/ACC); Sylvie Girard (VAC/ACC); Teri McComber (VAC/ACC); Tracey King (VAC/ACC); Vincent Charbonneau (VAC/ACC); William Hand (VAC/ACC)  
**Cc:** Danica Arseneault (VAC/ACC); Tammy MacWilliams (VAC/ACC); Peggy Nash-Butt (VAC/ACC); Deanna Carroll (VAC/ACC); Amy MacDougald (VAC/ACC); John Stavert (VAC/ACC); Cory Woodford (VAC/ACC)  
**Subject:** RE: LAST CHANCE - RSVP Pulse Check | Dernière chance - Vérification du pouls PSRAP

### Le français suit.

Dear RSVP Working Group Participants,

Friday, 14 January 2022, is your last day to participate in the short [pulse questionnaire](#) and tell us about your experiences and perspectives of on the RSVP Project. If you haven't already completed the short questionnaire, we invite you to click the link below to participate. There questionnaire should take approximately 1-3 minutes to complete.

Begin the [pulse questionnaire](#).

Thank you for your participation!

---

Bonjour,

Vendredi, le 14 janvier 2022, est la date limite pour répondre au [questionnaire sur le pouls](#). Vous avez l'occasion de nous faire part de vos expériences et perspectives en ce qui concerne le projet du PSRAP. Si vous n'avez pas encore rempli le court questionnaire, nous vous invitons à cliquer le lien ci-dessous pour y participer. Le questionnaire prendra environ 1-3 minutes.

Commencer [le questionnaire](#).

Nous vous remercions de votre participation.

**From:** RehabilitationProcurement-lapprovisionnementenréhabilitation (VAC/ACC) <rehabilitationprocurement-lapprovisionnementenrehabilitation@veterans.gc.ca>

**Sent:** January 5, 2022 8:31 AM

**Subject:** RSVP Pulse Check | Vérification du pouls PSRAP

**Le français suit.**

Dear RSVP Working Group Participants,

We want to hear from you about your experiences and perspectives of the RSVP Project. Please consider completing a short [pulse questionnaire](#) – **your participation is important and valued**. The results of the pulse questionnaire will be used to improve project planning, communication products and more over the next few months.

The questionnaire should take approximately 1-3 minutes to complete.

Begin the [pulse questionnaire](#).

Become involved and learn more about the RSVP implementation by joining our [MS Team](#). You can also email the [RSVP mailbox](#) with any questions.

Thank you for your participation!

Sincerely,  
RSVP Project Team

Bonjour,

Nous voulons en savoir plus long au sujet de vos expériences et de vos points de vue en ce qui concerne le projet du PSRAP. Nous vous invitons à remplir un court [questionnaire sur le pouls](#) – **vos rétroactions sont précieuses**. Nous utiliserons les résultats du questionnaire pour améliorer la planification du projet, les produits de communication et bien plus au cours des prochains mois.

Le questionnaire prendra environ 1-3 minutes.

Commencer [le questionnaire](#).

Pour avoir votre mot à dire et en savoir plus long au sujet de la mise en œuvre du projet, nous vous invitons à vous joindre à notre espace sur [MS Teams](#). Vous pouvez également communiquer avec [la boîte de réception du PSRAP](#) pour toute question.

Nous vous remercions de votre participation.

Cordialement,  
L'équipe du projet du PSRAP

**Harmonie Harris**

A/Change Manager, Re-establishment and Well-being  
Service Delivery & Program Management, Veterans Affairs Canada  
[harmonie.harris@veterans.gc.ca](mailto:harmonie.harris@veterans.gc.ca) (782) 377-0309

A/Gestionnaire du changement, Rétablissement et bien-être  
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[harmonie.harris@veterans.gc.ca](mailto:harmonie.harris@veterans.gc.ca) (782) 377-0309





Question	Response	1	2	3	4	5	6	7	8	9	10	11	Comments
1	No	Slightly agree	Slightly agree	Neither disagree nor agree	Slightly Disagree	Slightly agree	Slightly Disagree	Slightly Disagree	Slightly Disagree	Slightly Disagree	Slightly Disagree	Slightly Disagree	
2	No	Neither disagree nor agree	Slightly agree	Neither disagree nor agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	
3	No	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	
4	No	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Agree	Agree	Ensuring we do not rush the implementation.
5	Yes	Agree	Slightly agree	Neither disagree nor agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Agree	Slightly agree	Slightly Disagree	Slightly Disagree	Agree	I am concern as it is still difficult contextually to really see where the CMS will fit into the overall flow, why they will still have involvement in some respects. Also a big concern is that there are nowhere near enough providers now in Atlantic Canada, that will no change with RSVP, and despite what the hope is, I don't see this improving timelines for reports, etc., in this area at all.
6	No	Slightly Disagree	Disagree	Slightly Disagree	Slightly Disagree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Disagree	Disagree	Neither disagree nor agree	Neither disagree nor agree	
7	No	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Neither disagree nor agree	
8	No	Slightly Disagree	Agree	Slightly Disagree	Neither disagree nor agree	Neither disagree nor agree	Agree	Agree	Slightly agree	Slightly Disagree	Slightly agree	Slightly Disagree	
9	No	Neither disagree nor agree	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Agree	Agree	Slightly Disagree	
10	Yes	Slightly agree	Agree	Neither disagree nor agree	Slightly agree	Slightly agree	Slightly agree	Agree	Slightly agree	Slightly Disagree	Slightly agree	Slightly agree	I am not concerned with clients that start our with the new contractor. I am more concerned about the transition process. I am optimistic that the RSVP contract will reduce some administrative tasks.
11	Yes	Slightly agree	Agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Agree	Agree	Slightly agree	Agree	Neither disagree nor agree	

12	Yes	Neither disagree nor agree	Slightly agree	Disagree	Neither disagree nor agree	Slightly Disagree	Neither disagree nor agree	Slightly agree	Slightly Disagree	Disagree	Disagree	Agree	I have great concern that the role of the CM will be changing such that it will become equivalent to MAC - simply administrative approvals of services and less involvement with enterprise plan-ship. While it is clearly that we are all overwhelmed currently, this is the sentiment of our work that are also regarding. My concern is that the reduction in financial support and being that changes in enterprise level makes my job worth what can be done in a 1500 situation will not hold much of that role. In terms of our personal that, much of it is the fact that the timing of our services, assessment and judgment as CM's following line and see a role, as going being driven by the treatment provider. Yes, there should be treatment goals for us, as they are certainly the professionals there - but goals for the case plan can be more outside of that, and things that CM and various doctor and come up with. The risk of CM is becoming less and less involved with the action and involved in their life, and more of an assessment/checking in role. VBA is being expanded - and it is more great input to whether CM's will continue to be required in the future, whether we could be heading for a reallocation etc. The changes since PHS would make it much more costly for those things to happen. I am very hopeful that this concern is unwarranted - but it makes me uneasy just the same.
13	No	Slightly agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Neither disagree nor agree	Slightly agree	Neither disagree nor agree	I am concerned about all the aspects of file migration and how this will be communicated to Veterans and expectations outlined
14	No	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Disagree	
15	Yes	Disagree	Agree	Slightly Disagree	Agree	Agree	Neither disagree nor agree	Slightly agree	Slightly Disagree	Slightly Disagree	Agree	Slightly agree	
16	Yes	Slightly agree	Slightly agree	Neither disagree nor agree	Agree	Agree	Agree	Agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Slightly Disagree	I am very concerned about the deadline of 2023 and the work that the committee/working group have accomplished thus far. There are a lot to do, and it looks like we are not moving fast enough. The last thing that we want is for it to be under pressure in January 2023 with last minute deadlines. Please we do not want a "this or that" of March 2023 prior to the implementation of PHS. Thank you!
17	Yes	Slightly agree	Slightly agree	Agree	Agree	Neither disagree nor agree	Slightly agree	Agree	Agree	Slightly agree	Slightly agree	Agree	My concerns are related to the impact on case managers. Many are worried that their jobs will change and it will become more administrative. That they will only be used as decision makers. Their contact with clients will suffer. As a manager I am concerned that some of my case managers will seek employment as a result of the changes.
18	Yes	Slightly Disagree	Neither disagree nor agree	Slightly Disagree	Agree	Disagree	Neither disagree nor agree	Slightly Disagree	Slightly Disagree	Disagree	Disagree	Agree	there is no transparency in what is happening and the info coming to the front lines is too vague and not frequent enough.
19	Yes	Neither disagree nor agree	Slightly agree	Slightly Disagree	Agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Slightly Disagree	Neither disagree nor agree	Slightly agree	
20	No	Slightly agree	Slightly agree	Slightly agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	
21	Yes	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Slightly agree	Concerned over the impact on staff, clients and current provider. Are staff going to be expected to educate private community providers as well as clients?
22	Yes	Agree	Agree	Slightly agree	Agree	Agree	Neither disagree nor agree	Agree	Agree	Slightly agree	Slightly agree	Slightly Disagree	The primary factor is time and workload impacts with an existing caseload. Also clear direction on what is required from each role in the field and the timelines to complete. Also, clarity on short and long term impacts and goals in the transition plan. Additionally, what can clients expect and how to best support / effectively communicate the clear path and strategy in advance. Thank you and love the idea of this survey!

23	Yes	Slightly agree	Agree	Neither disagree nor agree	Slightly agree	Slightly agree	Neither disagree nor agree	Agree	Slightly Disagree	Slightly agree	Slightly Disagree	Slightly agree	Job losses and impact. Re-classification of Civil Managers and their wages. Contracting out to private sector and associated price tag when things seemingly were working fine. Protection of Veteran privacy as files will be accessed by private sector contractor. Lack of consultation with output from the Veteran stakeholder community about these changes. Lack of investment in VAC personnel and hiring as these duties could be better managed internally.
24	Yes	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Disagree	Neither disagree nor agree	Neither disagree nor agree	Disagree	Disagree	Disagree	Neither disagree nor agree	Agree
25	Yes	Slightly agree	Agree	Slightly agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree
26	Yes	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Neither disagree nor agree	Slightly agree	Slightly agree	Slightly agree	Neither disagree nor agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree
27	Yes	Slightly agree	Agree	Slightly agree	Agree	Agree	Slightly agree	Agree	Agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree
28	No	Slightly agree	Agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Slightly agree	Slightly Disagree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree
29	No	Slightly agree	Agree	Neither disagree nor agree	Agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Neither disagree nor agree	Slightly agree	Neither disagree nor agree	Slightly agree
30	No	Slightly Disagree	Slightly agree	Slightly Disagree	Agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Slightly Disagree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Slightly Disagree

													I am worried that staff will not be prepared for the huge change this is going to mean for their role. I am worried that the provider will cause more administrative work as we work to correct errors in reports, similar to the issues currently experienced with CVRS.
31	Yes	Agree	Slightly agree	Agree	Slightly agree	Slightly Disagree	Slightly Disagree	Agree	Slightly agree	Slightly Disagree	Slightly agree	Slightly agree	
32	No	Agree	Agree	Agree	Agree	Slightly agree	Agree	Agree	Agree	Slightly agree	Agree	Slightly agree	Concern is about the breaking-in period and how long it will take for all CMs to be trained and ready to work with the changes.
33	No	Neither disagree nor agree	Agree	Slightly agree	Slightly agree	Neither disagree nor agree	Agree	Agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	
													Issue of Case Managers moving forward Impact on Veterans: Concerned the name change to PCVRS is all that will change. This new partnership will require workers, these workers in the past have been staff hired from the previous RSVP provider. Some of these rehabilitation specialists seemed to struggle with the last RSVP change and when hired by CVRS operated the same as they had with their previous employer. Some have displayed poor judgment and limited patience in working with our clients and seemed more prone to cancelling than counselling clients about voc rehab.
34	Yes	Slightly Disagree	Slightly agree	Slightly Disagree	Slightly agree	Neither disagree nor agree	Slightly Disagree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Agree	
35	No	Slightly Disagree	Agree	Slightly Disagree	Slightly agree	Slightly agree	Slightly agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Agree	Neither disagree nor agree	
36	Yes	Agree	Agree	Agree	Agree	Agree	Disagree	Slightly agree	Agree	Agree	Agree	Slightly Disagree	The is a lack of clarity of what the role of the case manager will be after RSVP takes place.
													1. availability of qualified vocational rehabilitation professionals to provide timely service. 2. Ability to work well, and achieve client-centred services in the medical and psychosocial spheres as these are new arrangements. 3. Little information around provision of medical and psychosocial services so risks are there. 4. How HO would support field staff during conflict resolution
37	No	Neither disagree nor agree	Agree	Slightly agree	Slightly agree	Slightly agree	Neither disagree nor agree	Slightly agree	Neither disagree nor agree	Slightly agree	Neither disagree nor agree	Slightly agree	
38	No	Slightly agree	Slightly agree	Slightly agree	Agree	Agree	Agree	Agree	Agree	Slightly Disagree	Agree	Slightly agree	
39	Yes	Slightly agree	Agree	Neither disagree nor agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Slightly agree	Neither disagree nor agree	
40	Yes	Slightly agree	Agree	Slightly agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Agree	Disagree	I just hope that the flow goes well with PCVRS and files don't get bogged down in red tape.
41	No	Agree	Agree	Agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Agree	Agree	Agree	Disagree	





17 No	Slightly agree	Slightly agree	Slightly disagree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Slightly disagree	Neither disagree nor agree	Slightly agree	Documents, workflow, business processes	Client choice, communication push, involves with most support services, issues with the actual go live transition and issues that may appear. CM not involved enough in planning.
18 No	Agree	Agree	Agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Agree	Neither disagree nor agree	Neither disagree nor agree	The information being provided in a variety of forms, as it is now. Town hall	CM not involved enough in planning.
19 No	Slightly disagree	Slightly disagree	Disagree	Slightly disagree	Slightly disagree	Neither disagree nor agree	Slightly agree	Slightly disagree	Slightly disagree	Slightly disagree	Agree	open sessions	many confusing and unanswered questions
20 No													Concerned that it will create 2 lined service for our clients - some will be with the new contractor, others will continue with present provider, different expectations, not the same accountability for both staff and clients. Could be difficult for CMs to explain this to clients. Need to ensure CMs are well-supported, coordinated messaging for all clients.
21 Yes	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Slightly agree	More open sessions or specific training topics would help. Make them short so that it is not time consuming.	More open sessions with the rmp team to give my co-workers more information.
22 Yes	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Agree	Slightly agree	Slightly agree	Agree	Agree	Your case management align tasks with roll out of rmp
23 No	Agree	Agree	Agree	Agree	Agree	Agree	Slightly agree	Agree	Agree	Agree	Agree	Agree	
24 No	Agree	Slightly agree	Slightly agree	Slightly agree	Slightly disagree	Neither disagree nor agree	Slightly agree	Agree	Slightly disagree	Slightly disagree	Slightly disagree	Slightly disagree	Slightly disagree
25 Yes	Slightly agree	Agree	Slightly agree	Slightly disagree	Agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Slightly disagree	Slightly disagree	Slightly disagree	Slightly disagree	Slightly disagree
26 No	Agree	Agree	Agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Agree	Agree	Neither disagree nor agree	Slightly disagree	Agree	Agree
27 No	Slightly agree	Agree	Agree	Agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Agree	Slightly agree	Neither disagree nor agree	Slightly disagree	Agree	Agree
28 No	Disagree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Disagree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Disagree	Disagree
29 Yes	Disagree	Disagree	Neither disagree nor agree	Disagree	Disagree	Disagree	Disagree	Disagree	Disagree	Disagree	Disagree	Disagree	Disagree
30 No													Many of the areas I enjoy about client interactions (in-person visits, encouraging clients through their rehabilitation efforts, connecting with providers) will no longer be part of my role. I worry that the case management role will be contracted out in the future as so many parts of it are. There are so many changes all at once it is overwhelming and we can't keep up. The massive change and huge transition of this coming year has to be managed.
31 Yes	Slightly disagree	Agree	Slightly disagree	Slightly agree	Agree	Slightly agree	Slightly agree	Slightly agree	Slightly disagree	Slightly disagree	Disagree	Opportunities to attend virtually-held information sessions and interactive training modules (similar to what was provided for PEs).	
32 No	Slightly disagree	Slightly agree	Neither disagree nor agree	Slightly agree	Agree	Agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Slightly disagree	Myth busters and open sessions that quickly and clearly illustrate the positive changes we can expect to see from RMP compared to the current system, preferably using data if possible and how VAC expects to see improvements.	Risk that vendor provider will continue current product that are intended to be corrected through the new contract. Risk that transitioning will be challenging given large scale scope.
33 No	Agree	Agree	Slightly agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Slightly agree	Neither disagree nor agree	Agree, I fear again, as in many other major IT changes at VAC, the new training systems (new Case Flow system of the new contractor and CC Case enhancements), that the training systems will only be read just in time for implementation (and just in time training). This leads to insufficient time to absorb the IT changes.	Agree, I fear again, as in many other major IT changes at VAC, the new training systems (new Case Flow system of the new contractor and CC Case enhancements), that the training systems will only be read just in time for implementation (and just in time training). This leads to insufficient time to absorb the IT changes.
34 No													are we potentially minimizing the impact by assuming the changes do not appear to be as significant as they may be experienced by the end users?
35 No												is this a learning (what method of training will best meet my learning needs) related question or is it a change management related (do I need to be ready to accept this change) related question or is it a communication (in what format do I prefer getting information of where we are at with the implementation of the new contract) related question?	high staff turnover of the main group affected by this change (Case Managers, VSMs, some consultant group)
36 No	Agree	Agree	Slightly agree	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Slightly agree	Neither disagree nor agree	This question, whatever the intended outcome for this question, probably best answered in a facilitated in-person/virtual session encouraging all to participate and provide a voice.	The migration plan will have Case Managers voluntarily transferred of being possibly old rehab plans, for complete rehab plans to be migrated later and the new EC rehab plan for migration/rehab plans.
37 Yes	Neither disagree nor agree	Agree	Slightly agree	Agree	Agree	Agree	Agree	Slightly agree	Neither disagree nor agree	Agree	Slightly agree	Open Sessions	1. All current records and service provider transfer. 2. How will communications between the subcontractor and the Case Managers like going on during the transfer. 3. How will the transition work for veterans already in the program who have ongoing rehabilitation plans with providers in the community? 4. Fear of not getting enough training before the new program is implemented.
38 Yes	Slightly agree	Slightly agree	Slightly agree	Agree	Agree	Agree	Agree	Agree	Slightly disagree	Neither disagree nor agree	Neither disagree nor agree	TRAINING - see. Need to know also how we will work with Blue Cross, CTOL, etc.	This will be done in conjunction with the return to the office in greater numbers in the fall as well as the finalization of the complexity index that there will also be the linked they campaign and the social work. Before this will create an atmosphere of institutionalism.
39 No	Slightly agree	Slightly agree	Neither disagree nor agree	Neither disagree nor agree	Neither disagree nor agree	Slightly agree	Slightly agree	Neither disagree nor agree	Slightly disagree	Slightly disagree	Slightly agree	It would be helpful to have meetings with the consultants who will be working for the new supplier to ensure that we are on the same page.	agility focus such as those experienced with COPE. The risk is in the identification of what is needed, it would be a gradual and well conducted change.
40 No	Neither disagree nor agree	Slightly disagree	Neither disagree nor agree	Disagree	Disagree	Slightly disagree	Slightly disagree	Agree	Slightly disagree	Disagree	Agree	have conversations on official language and ethics issues	agility focus such as those experienced with COPE. The risk is in the identification of what is needed, it would be a gradual and well conducted change.
41 Yes	Agree	Agree	Agree	Agree	Slightly agree	Slightly agree	Slightly agree	Agree	Slightly agree	Slightly agree	Agree	Information and training on the new operation	agility focus such as those experienced with COPE. The risk is in the identification of what is needed, it would be a gradual and well conducted change.