

# Disability Support Pension Impairment Tables Questionnaire

Response: 052

Anonymous

<b>11a Select the key theme of the proposed changes to the Impairment Tables that is the most important to you</b>
Mental health
<b>11b Select the theme of the proposed changes to the Impairment Tables that is the second most important to you</b>
Chronic Illness
<b>11c Select the theme of the proposed changes to the Impairment Tables that is the third most important to you</b>
Neurodiversity
<b>12a (i) The removal of the term 'permanent condition' provides greater clarity that a condition must persist for two years as part of the DSP eligibility criteria</b>
Agree
<b>12a (ii) The proposed changes more clearly describe the requirements of diagnosis, treatment and stabilisation of conditions for DSP assessment</b>
Agree
<b>12b Please provide any additional comments regarding changes to the FDTs requirement</b>
It needs to be more clear within the table regarding - significant improvement not likely in the next two years, even with further treatment. Many assessors miss this point which is included in the guide to the tables, and instead determine a person immediately isn't FDTs as they're may be other treatment options. Some assessor's fail to investigate whether even with further treatment, is significant improvement expected or not within the next 2 years.
<b>13a (i) The inclusion of additional defined terms provides greater clarity around terminology used in the Instrument</b>
Agree
<b>13a (ii) Simplification in Part 2 of the Instrument improves the guidance and readability of the section</b>
Agree
<b>13a (iii) The proposed changes to Table introductions and descriptors has made it easier to understand the requirements of Tables</b>
Agree
<b>13a (iv) The additional guidance in appropriate Tables provides greater clarity when considering functional impairment. For example an additional guidance point to all Tables on fluctuating and episodic conditions</b>
Strongly agree
<b>13a (v) The updating of references to relevant assistive technology provides clearer guidance and modernises the Tables</b>
Agree
<b>13a (vi) The broader range of examples in the Tables illustrates how a person's functional impairment may impact their ability to work</b>
Agree
<b>14a The proposed changes recognise and capture the functional impacts relating to alcohol, drug and other substance misuse in appropriate Tables</b>
Disagree
<b>15a The addition of guidance recognises the impacts of ongoing side effects from prescribed medication and treatment</b>
Agree

**16a (i) Proposed changes better represent the functional impact of pain**

Agree

**16a (ii) Additional examples of pain related conditions that result in functional impairment provide more clarity around the types of conditions that may be assessed against a Table**

Agree

**17a Additional examples of chronic illnesses that result in functional impairment provide greater clarity around the types of conditions that may be assessed against a Table**

Strongly agree

**18a Additional examples of renal conditions that result in functional impairment provide more clarity around the types of conditions that may be assessed against a Table**

Strongly agree

**19a (i) Additional examples of fatigue related conditions that result in functional impairment provide greater clarity around the types of conditions that may be assessed against a Table**

Strongly agree

**19a (ii) The inclusion of a personal care descriptor captures the functional impacts of fatigue on a person's ability to undertake personal care activities**

Strongly agree

**19a (iii) Proposed changes better represent the functional impact of fatigue related conditions**

Agree

**20a Additional examples of cancer and subsequent conditions that result in functional impairment provide more clarity around these types of conditions that may be assessed against a Table**

Strongly agree

**21a (i) Additional examples of specific pieces of evidence that may be used to support a claim assists individuals to identify the accepted range of medical evidence that can be provided**

Strongly agree

**21a (ii) Additional examples of professionals assists individuals identify the range of appropriate practitioners who are able to provide medical evidence in support of their claims**

Strongly agree

**21b Please provide any additional comments regarding changes to medical evidentiary requirements.**

The change to accept evidence from General Psychologist is absolutely crucial. The requirement for a Clinical Psychologist or Psychiatrist disadvantages some of our most vulnerable Australians who are linked with a General Psychologist, yet don't have reasonable access to a a clinical psychologist or psychiatrist due to cost, availability or location.

**22a (i) Addition of descriptors better capture shoulder function in Table 2 - Upper Limb Function**

Agree

**22a (ii) The addition of descriptors for the loss of function of a dominant limb under Table 2 – Upper Limb Function better recognises functional impacts of losing a dominant upper limb**

Strongly agree

**22a (iii) Additional examples of specific skin conditions that result in functional impairment provide more clarity around the types of conditions that may be assessed against a Table**

Strongly agree

**23a The proposed changes better capture the functional impacts of balance, dizziness and a person's ability to stand**

Strongly agree

**23b Please provide any additional comments regarding changes about balance.**

I have Bilateral Vestibulopathy and Oscillopsia due to ototoxicity from an antibiotic. This is permanent but isn't reasonably captured in the current tables.

**24a The proposed change will better support individuals by providing a broader range of medical professionals allowed to provide corroborating evidence in support of a diagnosis of a mental health condition for assessment under Table 5 – Mental Health Function**

Strongly agree

**24b Please provide any additional comments regarding changes about psychologists.**

Absolutely most definitely agree!

**25a The proposed changes improve alignment with other recognised mental health assessment tools (including the World Health Organization Disability Assessment Schedule –WHODAS, Diagnostic and Statistical Manual of Mental Disorders – DSM, World Health Organization International Classification of Diseases - ICD)**

Strongly agree

**26a (i) Proposed changes better reflect conditions on the spectrum of neurodiversity**

Strongly agree

**26a (ii) The addition of a new social skills descriptors in the table relating to brain function recognise difficulties a neurodivergent person may experience in social situations**

Strongly agree

**26b Regarding the proposed change on Table 6 – Brain Function to better recognise social skills difficulties, would you prefer to:**

add a new social skills descriptor and require a person to meet at least two descriptors for the relevant impairment rating to be assigned

**27a The proposed changes better recognise the need for culturally appropriate assessments**

Strongly agree

**28 In accordance with the Privacy Collection Notice, please select one of the following.**

I would like my submission to be published anonymously