

Disability Support Pension Impairment Tables Questionnaire

Response: 089

Anonymous

11a Select the key theme of the proposed changes to the Impairment Tables that is the most important to you

Medical evidence requirements

11b Select the theme of the proposed changes to the Impairment Tables that is the second most important to you

Chronic Illness

11c Select the theme of the proposed changes to the Impairment Tables that is the third most important to you

Fully diagnosed, treated and stabilised (FDTs) requirement

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

Agree

12a (ii) The proposed changes more clearly describe the requirements of diagnosis, treatment and stabilisation of conditions for DSP assessment

Unsure

12b Please provide any additional comments regarding changes to the FDTs requirement

I live in a regional area. I can not drive due to the severity of my symptoms. There is a lot of transience in general practitioners, especially those who bulk bill. My diagnostic journey is ten years old as I have not had a GP see me more than three times. The nearest neurologist, ENT or psychiatrist is two hours away. Without a car this is a nearly unattainable.

At current there is no support for me in gaining my diagnosis and under the FDTs requirement I will not be "disabled enough"; either I can't get there for it to count or I can make the journey and thus I'm fine.

Moreover, there have been many occasions where though my work has adapted to my requirements, I simply can not transport myself to work and home again, and that is not reflected in the framework at all.

The framework needs to allow for transportation issues and more supports need to be allocated to the diagnostic journey for those in regional areas.

13a (i) The inclusion of additional defined terms provides greater clarity around terminology used in the Instrument

Strongly agree

13a (ii) Simplification in Part 2 of the Instrument improves the guidance and readability of the section

Agree

13a (iii) The proposed changes to Table introductions and descriptors has made it easier to understand the requirements of Tables

Agree

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

Agree

13a (v) The updating of references to relevant assistive technology provides clearer guidance and modernises the Tables

Agree

13a (vi) The broader range of examples in the Tables illustrates how a person's functional impairment may impact their ability to work

Unsure

13b Please provide any additional comments on the proposed operational improvements.

The tables need to also more heavily consider a person's ability to transport themselves to and from work as well as the availability of suitable work in their local area.

14a The proposed changes recognise and capture the functional impacts relating to alcohol, drug and other substance misuse in appropriate Tables

Agree

15a The addition of guidance recognises the impacts of ongoing side effects from prescribed medication and treatment

Strongly agree

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

Strongly 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

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

Unsure

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

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

Agree

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

Strongly 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

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

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.

Certain permanent disabilities do not suddenly go away after 2 years and shouldn't require reassessment. Terminal illness patients should be exempt from reassessment as it causes undue stress to an individual.

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

Strongly 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

Agree

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

Strongly agree

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.

Telehealth should be held with the same regard as physical appointments.

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

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

Agree

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

keep the current list of descriptors and require a person to meet only one descriptor 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