

Disability Support Pension Impairment Tables Questionnaire

Response: 177

Anonymous

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

Fatigue

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

Balance

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

Strongly agree

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

Agree

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

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

Agree

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

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

Disagree

17b Please provide any additional comments regarding changes about chronic illness.

functional neurological disorder
POTS - postural orthostatic tachycardia syndrome

Both well documented and researched functional disabilities with a history of people diagnosed having difficulty accessing DSP.

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

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

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

Agree

19b Please provide any additional comments regarding changes about fatigue.

Addition of POTS - Postural Orthostatic Tachycardia Syndrome - is often linked with fatigue due to poor cerebral perfusion and orthostatic intolerance

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

Agree

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

Orthoptist - would be of value as a person who can provide evidence an orthoptist has the responsibility of seeing how the eyes work together and interact with the brain to create vision.

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

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 disagree

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

Balance and dizziness are the function that result from complex neurological systems
- having balance listed under lower limb function rather than a item of its own oversimplifies balance to a mechanical function rather than a complex function of collaborating vestibular, visual, proprioceptive and neurological systems.

This also goes for dizziness, both of these should be assessed under their own isolated functional assessment heading - not hidden within other domains where they could potentially be overlooked.

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

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)

Agree

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

Unsure

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

Unsure

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

Unsure

27b Please provide any additional comments regarding changes to address cultural appropriateness.

I'm not fit to comment as someone who is from a non-marginalised group

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

I would like my submission to be published anonymously