

Disability Support Pension Impairment Tables Questionnaire

Response: 266

Royal Australian and New Zealand College of Psychiatrists

11a Select the key theme of the proposed changes to the Impairment Tables that is the most important to you
Neurodiversity
11b Select the theme of the proposed changes to the Impairment Tables that is the second most important to you
Fully diagnosed, treated and stabilised (FDTS) requirement
11c Select the theme of the proposed changes to the Impairment Tables that is the third most important to you
Cultural appropriateness
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
Agree
12b Please provide any additional comments regarding changes to the FDTS requirement
The RANZCP notes that overall, the draft is an improvement on the current Impairment Tables.
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
Unsure
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.
Please note that throughout the survey where 'Unsure' is selected, this indicates an 'non applicable' response.
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
Unsure
16a (i) Proposed changes better represent the functional impact of pain

Unsure
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
Unsure
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
Unsure
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
Unsure
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
Unsure
19a (iii) Proposed changes better represent the functional impact of fatigue related conditions
Unsure
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
Unsure
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
Unsure
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
Unsure
21b Please provide any additional comments regarding changes to medical evidentiary requirements.
<p>The DSS has previously received stakeholder feedback regarding the challenge for people living in remote and regional areas to gather the required medical evidence due to availability of required services and barriers to accessing them. The RANZCP echoes this sentiment, and add that general practitioners are vital partners in providing support to individuals in these areas.</p> <p>The RANZCP notes that the list of examples of professionals does not include general practitioners. To best provide support for applicants in remote and regional areas, general practitioners could be better included in the DSP application process. The RANZCP adds that some reports have shown that the challenge can be worsened by compounding disadvantage: for example, for Indigenous Australians living in rural and remote areas.</p>
22a (i) Addition of descriptors better capture shoulder function in Table 2 - Upper Limb Function
Unsure
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
Unsure
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
Unsure
23a The proposed changes better capture the functional impacts of balance, dizziness and a person's ability to stand
Unsure
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

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

25b Please provide any additional comments regarding changes about mental health.

RANZCP members have noted that in young people, diagnoses can be unstable and require revision as new symptoms emerge.

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 with identifying information (including name or name of organisation as provided in the questionnaire)