Disability Alliance BC’s Advocacy Access Program helps people with disabilities to apply for benefits, services and programs.

Advocates can use this Guide to help their clients qualify for the Persons with Disabilities Benefit (PWD). We have also written this Guide to help people with disabilities who want to apply for this benefit on their own.

PWD is a provincial benefit provided by the Employment and Assistance for Persons with Disabilities Act (EAPWD) and regulations. The benefit is administered by the Ministry of Social Development and Social Innovation (the Ministry or MSDSI).

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The information in this Guide is based on the legislation and policy that was current at the time of writing. The legislation and policy are subject to change. Please check the date on this page.
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Qualifying for PWD

To qualify for PWD, an applicant must meet two basic tests. The person must be:

- financially eligible
- eligible under the PWD definition of disability ("persons with disabilities")

Financial Eligibility

The PWD benefit is "means tested." In other words, there is a limit to the amount of money and assets a person applying for PWD can have. If the applicant is not already receiving income assistance, they will need to talk to the Ministry to see if they are financially eligible.

The basic rules for PWD recipients regarding assets are:

- single people with no dependents can have up to $100,000
- couples when both partners are designated PWD, with or without dependents, can have up to $200,000

Some of the basic rules for PWD recipients regarding assets are:

- they can own their own home as long as they live there
- they can own one car, regardless of its value

If the applicant is married, living common-law or in a “dependency” relationship, then the partner’s or dependent’s income and assets are included in the means test. For example, if an applicant’s wife is working and earns $3,000 a month, the Ministry would probably say that the applicant is not financially eligible for PWD.

If a person intends to apply for PWD, but is not eligible for basic income assistance because they have assets exceeding the income assistance limit, they can receive basic income assistance while they wait for PWD. For example:

- a single person with assets over $2,000, but under $100,000, can receive basic assistance of up to $610 a month while awaiting PWD.
- PWD applicants who own a car worth more than $10,000 can receive basic assistance while they wait for PWD.
- If MSDSI denies the PWD, the applicant does not have to pay back the money they received during the PWD application process.
PWD Definition of Disability

We have provided below an overview of the definition of disability used to decide eligibility for disability assistance (for the exact definition contained in the Employment and Assistance for Persons with Disabilities (EAPWD) Act, please see the appendices in this Guide).

It is the Ministry’s job to decide whether or not an applicant qualifies for the disability designation. The Ministry’s Health Assistance Branch (HAB) in Victoria makes the decision based on the information the applicant has in their PWD designation application form.

To qualify for PWD, applicants must:

• be at least 18 years of age
• have a severe mental or physical impairment that, in a medical doctor’s opinion, will likely continue for at least two or more years.

The Ministry’s Health Assistance Branch (HAB) in Victoria makes the decision based on the information the applicant has in their PWD designation application form.

A “prescribed professional” (see the PWD definition in the appendices) must confirm that the applicant’s impairment(s):

• “directly and significantly restricts” their ability to perform daily living activities either “continuously or for extended periods.”

Also, in order to perform “daily living activities,” the person must need:

• help from an assistive device (such as a hearing aid or walking cane), or
• significant help from another person, or
• help from an assistance animal.

Activities of daily living are defined in the legislation as:

• preparing meals
• managing personal finances
• shopping for personal needs
• using public or personal transportation
• keeping the home clean
• moving about indoors and outdoors
• performing personal hygiene and self care
• taking medications.
For people with mental health disabilities, daily living activities also include:
• making decisions about personal activities, care or finances
• relating to, communicating with, or interacting with others effectively (in other words, getting along with other people).

The more of these things that are “true” about the applicant—that is, the more difficulty they have with daily activities—the stronger their application will be.

We will look at this definition of disability in more detail as we go through the Guide.

Getting Started

PWD Applicants Already Receiving Income Assistance
People who are already receiving income assistance should contact MSDSI and say they want to apply for PWD. The office will provide the person with a PWD designation application. The form must be signed and dated by a worker on the front page in the section marked “Office Use Only.”

PWD Applicants Not Already Receiving Income Assistance
People who are not receiving income assistance cannot receive a PWD application until they complete the application process to demonstrate that they are financially eligible to apply for disability assistance. The following is an overview of the application process.

There is one contact number for applicants and recipients of disability assistance:

1-866-866-0800

Stage 1: The Self-Serve Assessment Application

It is the practice of the Ministry to ask all new applicants to complete the first stage of the application process online: the Self Serve Assessment and Application (SSAA).

Find the SSAA at www.iaselfserve.gov.bc.ca

The SSAA has over 90 questions that are used by the Ministry to determine the applicant’s financial eligibility for disability assistance. These questions cover a broad range of topics from the applicant’s name, family composition, financial status and employability. All these questions must be answered, even if the applicant has indicated they have a disability that prevents them from working. Once the questions are answered they can be submitted online to the Ministry.
Stage 2: The eligibility interview and determining eligibility

Several days after the application has been submitted, a Ministry worker will telephone the applicant and clarify the information provided on the application. The worker will also ask the applicant to submit documents such as ID, tenancy agreements, bank statements, and vehicle registration. These documents can be taken or faxed to a Ministry office.

Once these requested documents have been submitted, the Ministry can take several days to review them and confirm eligibility for income assistance and/or a PWD application.

If an applicant is told that they are not eligible to apply for the PWD designation, it is important that they ask the Ministry worker the reason(s) for denial. The person may want to make a reconsideration request and seek the advice of an advocate.

For a more detailed explanation of the income assistance application process, read Help Sheet 12: Income Assistance Application Process for People with Disabilities.

The PWD Designation Application Form

**NOTE:** Starting in September 2016, people in the following provincial and federal programs will complete a much simple PWD application process:

- Community Living BC
- The Ministry of Children and Family Development (MCFD) At Home Program
- BC PharmaCare Plan P – Palliative Care
- Canada Pension Plan – Disability

The PWD designation application form is available only from the Ministry. The form has three sections that must be completed— in the following order:

**Section 1 (client information): is completed by the applicant**

**Section 2 (physician report): must be completed by a medical doctor**

**Section 3 (assessor report): must be completed by an assessor**

Only certain people are considered an “assessor” in the EAPWD legislation:

- a medical doctor (this can be the same person who completed Section 2)
- a registered psychologist
- a registered nurse or psychiatric nurse
- an occupational therapist
- a physical therapist
• a registered social worker
• a chiropractor
• a nurse practitioner

Start by making at least one photocopy of the whole application form. It is a good idea for the applicant to use a copy to practice what they want to say in their section of the application.

Section 1: Client Information

Applicants must complete this section before taking the form to their doctor and/or assessor.

A. Personal Information

This section asks applicants to provide their contact information, date of birth and Personal Health (Care Card) Number. The applicant can also give their Social Insurance Number. If the person’s contact information changes while the Ministry is deciding their case, they should give the new information to the HAB right away.

A final question asks applicants if they needed help to complete the form and, if they did, what kind of help they had. If they have had help with, for example, writing answers on the form, it is a good idea to say so on the form.

B. Disabling Condition

This section gives applicants “an opportunity to describe your disability and the impact it has on your life.” On the form, MSDSI says that completing this part is optional.

B(1) “Please describe your disability”

The applicant should list all their conditions in as much detail as they can. For example, an applicant might have Hepatitis C, with depression and anxiety. It is important to list all these conditions because the effects of a number of conditions together can cause significant limitations.

B(2) “How does your disability affect your life and your ability to take care of yourself?”

Most people with disabilities prefer to focus on the things they can do, rather than on the things they cannot do. However, when an applicant fills out the form, they need to think about how their medical condition(s) affects them on their worst days.

Please see the Checklist of Daily Living Activities in the appendices of this Guide. This can be photocopied and used by applicants to mark off the things they cannot do or find hard to do on their worst days. It can then be used to help complete question B(2). If the applicant cannot complete this question on the form even with assistance, they can attach the completed Checklist to their application when they send it to the HAB.
Remember, to qualify for disability assistance, the applicant must need significant help to do daily living activities—either from another person, from an assistive device or from an assistance animal. All direct assistance that the person gets should be listed. This can include help from support groups, family members, mental health teams and friends.

It is very important that applicants show they need help, even if they are not actually getting help. An applicant can show this by saying that daily living activities:

- are only possible once in a while,
- take them a lot longer to complete than most people, or
- that they can do the task, but it takes them a long time to recover afterward.

For example, a person with arthritis may be able to vacuum their apartment, but it takes all day, plus the next day to recover from that activity. If that’s the case, applicants should say so.

C. Declaration and Notification

When Section 1 is completed, the applicant should sign it in front of a witness who can be anyone over the age of 18. The witness signs the form and provides an address and phone number, if they have one.

Section 2 - Physician Report

The Ministry pays close attention to what a doctor says about the applicant’s condition, so this section is very important.

If the applicant has more than one doctor, the person should take the form to the doctor who knows their medical condition the best. The doctor is paid by the Ministry for completing Section 2.

Applicants should make an appointment with their doctor to discuss the form and the PWD benefit. It is important that the doctor understand that receiving disability assistance can improve the person’s health and well-being. People who receive disability assistance can get medical goods, services and other benefits that people who are not receiving disability assistance cannot. They may also have more opportunities for job training and programs.

It is the doctor’s responsibility to complete their sections of the form based on their understanding of the way the applicant’s medical condition(s) affect their life. The applicant needs to give the doctor the most accurate picture they can of this, but it is the doctor that must complete the form in their own handwriting.
The applicant may also want to give their doctor a completed copy of the Checklist and a letter explaining more about Section 2. We have provided a sample letter in the appendices of this Guide. Applicants can copy the letter and take it to their doctor or use it as a guide to write their own.

Once the doctor has completed Section 2 (and Section 3, if they are completing both sections), they should return the form to the applicant. The doctor should be reminded that the form is to be returned to the applicant. Some doctors prefer to send the completed forms to the HAB. It is a good idea to remove the postage paid, self-addressed envelope in the application form before providing it to the doctor and/or assessor. That might help them remember to return the form to the applicant.

**Troubleshooting and Tips for Section 2**

Below are tips on some of the questions the doctor has to complete in Section 2. These may help applicants to work with their doctor in completing the form.

**Subsection A**

**Diagnoses**

It is important that the doctor list all the applicant’s medical conditions and how long each has lasted (if known).

**Subsection B - Health History**

**Q1 – Indicating the severity of the medical conditions**

The doctor should describe all the health limitations that arise from each of the applicant’s medical conditions. It is helpful if the doctor describes a condition or impairment as severe—or the overall disability as being severe.

**Q3 – Side effects to medication**

The Ministry does not ask for a list of medications the applicant is taking—they want to know if the applicant has side effects from medication and treatment that limit daily functioning.

**Q4 – Assistive devices**

The doctor should list any assistive devices that the applicant requires to better manage daily life—even if the person does not have these items at the time of application.
Subsection C - Degree and course of impairment. In this section the Ministry asks the following questions: “Is the impairment likely to continue two years or more from today?”

In order to qualify for the PWD benefit, this question must be answered “yes.” If the doctor is not certain how long the person’s impairment will last, they should understand they can still answer “yes.” The question asks if the impairment is “likely to continue,” so it is all right for the doctor to answer “yes” if they believe the condition might last for as long as two years.

If the doctor says there are remedial treatments available that may resolve the impairment, the application could be denied. If the doctor lists treatments that may help, he or she can point out that these treatments will not resolve the disability.

Subsection D – Functional Skills

Question 1-6
The response “unknown” should be avoided wherever possible because the Ministry reads ‘unknown’ as not being able to confirm limitations.

Subsection E - Daily Living Activities

If the doctor is not completing Section 3 Assessor Report, they must fill out Section E - Daily Living Activities. The more activities that the applicant is restricted in, the more likely they will qualify for the PWD designation. If the applicant is restricted in an activity most of the time on an ongoing basis by their disability, we recommend that the doctor tick the “continuous” box.

Subsection F – Additional Comments

Additional comments that help the Ministry understand the severity of the condition(s) and how they limit the applicant in daily functioning can be provided by the doctor.

Sub-Section G – Frequency of Contact

“How long has the client been your patient?” “Prior to today, how often have you seen the client in the past 12 months?”
If the applicant uses a walk-in clinic or shared practice, the number of visits to the facility should be filled in, rather than the number of times the person saw the doctor filling in the application. For example, if the applicant visited the clinic 12 times, but only saw the doctor filling out the application once, the 12 visits should be written in the form.

Subsection H – Certification
The doctor must sign and date the application form.

Section 2 Recap: What the Applicant Takes to Their Doctor
They must take:
- the PWD designation application form with Section 1 completed, signed and witnessed

Section 3 - Assessor Report
The Assessor Report is another very important part of the application. Remember, Section 3 can only be completed by one of the health care professionals listed on page 8 of this Guide. This list is also included on page 8 of the PWD application form. The assessor is paid by the Ministry for completing Section 3. Ministry workers cannot act as assessors.

Remember, Section 3 can only be completed by one of the health care professionals listed on page 6 of this Guide.

Many people do not see one of these health care professionals on a regular basis, if at all. So it is often the applicant’s doctor who is most familiar with the person’s medical condition(s) and completes Section 3. However, if the applicant’s doctor does not know the person well, it is sometimes better to find another health care professional to fill out the assessor report with thorough information.

It is often a good idea for the applicant to give the assessor a completed draft copy of Section 3. The applicant should explain that they have answered the questions in this section to help the assessor better understand their disability. If the assessor disagrees with the information provided by the applicant, they should meet to discuss this. The applicant may also want to provide their assessor with a completed copy of the Checklist of Daily Living Activities.

A letter from the applicant to the assessor explaining Section 3 may also help. We have provided a sample letter in the appendices of this Guide. Applicants can copy the letter and take it to their assessor or use it as a guide to write their own.
Troubleshooting and Tips for Section 3

Here are some tips on some of the questions the assessor has to complete. These may help applicants to work with their assessor in completing the form.

Sub-section B Question 3 – Mobility and Physical Ability

This question asks assessors to give information about the applicant’s mobility and ability to perform various physical tasks. The assessor is asked, for example, to say whether or not the person sometimes needs assistance from another person to climb stairs and if they use an assistive device. The assessor should understand that they can check off more than one response. For example, the person may need help from another person and use an assistive device to climb stairs.

Sub-section B Question 4 – Cognitive and Emotional Functioning

This question is for applicants with impaired mental or emotional functioning. The assessor is asked questions about how much the person’s impairments affect their ability to complete activities of daily living. A range of responses are allowed from “no impact” to “major impact.” The application will obviously be stronger if the assessor says the applicant’s impairments have a “major impact” on their ability to perform daily living activities.

The assessor should understand that they can check off more than one response. For example, the person may need help from another person and use an assistive device to climb stairs.

Sub-section C – Daily Living Activities

This question asks the assessor to give information about the applicant’s ability to complete various activities of daily living. Again, the assessor should understand that they can check more than one response to each question.

There are two important things the assessor should be aware of when completing this part of the application.

- If the Assessor ticks the “independent” box, MSDSI will read this to mean that the applicant has no restrictions in performing that activity.
• If the Assessor indicates that the applicant has periodic restrictions or takes longer than is typical, the Ministry wants to know the frequency and duration of these periodic restrictions or how much longer than normal it takes the applicant to complete tasks.

Sub-section D – Assistance Provided for Applicant

The Assessor should note all the supports the applicant requires to better manage their daily life. Help can come from a number of sources including friends, family, health professionals and community agencies. A person may also need to use an assistive device, such as a cane, splints and braces, or grab bars. It is important to list all the assistance the applicant needs, even if that help or device is not currently available.

Section 3 Recap: What the Applicant Takes to Their Assessor

They must take:
• The PWD designation application form with Section 1 and Section 2 completed

Optional:
• Completed Checklist of Daily Living Activities
• Letter to their assessor explaining Section 3
Frequently Asked Questions

Q. What benefits does the Ministry provide to PWD recipients?
A. A single person with no dependents can receive up to $906 (starting September 2016, $983) per month. PWD recipients are also eligible for health supplements and transportation benefits. For more information, please see our Help Sheet 3: Checklist for the Persons with Disabilities (PWD) Benefit and Help Sheet 13: Rate Amounts for Persons with Disabilities (PWD) and Persons with Persistent and Multiple Barriers to Employment (PPMB) Benefits.

Q. What can be done if a doctor refuses to fill out the PWD application?
A. The applicant should speak to him or her about the importance of the form.

If the applicant has more than one doctor, they should talk to the other doctor. They may also want to consider changing doctors if their current doctor refuses to help.

Q. What can be done if the applicant does not know any health professionals who can be the assessor?
A. The Ministry will accept only registered health professionals as assessors on PWD designation applications. Applicants should ask their doctor to complete the assessor section if they do not have another health professional who knows them.

Q. What if the person is turned down for PWD?
A. Applicants have the right to appeal if they are turned down for PWD. They have 20 business days from the day they receive the letter telling them that their application has been rejected to give the Ministry. Supporting letters should be included with the reconsideration request before the 20 business day deadline.

Q. Can PWD recipients earn any money by working and still keep their full benefits?
A. The annualized earned income exemption allows single PWD recipients to earn up to $9,600 per year without any deductions from their disability assistance. Recipients must report all income to the Ministry if their income changes (up or down) on their cheque stub by the 5th day of the following month.

Q. How long does it take the HAB to process PWD applications?
A. It usually takes 3-5 months to receive a response from the HAB.
Submitting the PWD Designation Application Form

When all 3 Sections of the PWD designation application form have been completed, and the applicant has checked that all the information is correct, they should refer to the Client Checklist section on page 25 of the PWD application form. They should go through each point to make sure everything has been included.

The applicant should check the box provided in the Client Checklist to show they want to be notified when the HAB has received their form and complete the contact information section. The HAB will return this section to confirm it received the form.

The PWD designation form should then be mailed in the postage paid, self-addressed envelope included in the application.

Applicants should keep a photocopy of their completed application form for their records.

Waiting for a Response from the Health Assistance Branch

The Ministry usually closes a client’s file if there has been no activity on it for two months. If the applicant is already receiving income assistance while waiting for the PWD application to be decided, this should not be a problem. However, applicants who are not already receiving income assistance should contact their local MSDSI office each month to tell staff they are waiting to hear about their PWD application. This will stop the MSDSI from closing the person’s file.

Applicants who are not already receiving income assistance should contact their local Ministry office each month to tell staff they are waiting to hear about their PWD application.

Resources for Appealing the Denial of PWD

If the PWD application is denied, the decision can be appealed. A Request for Reconsideration must be filed with the MSDSI within 20 business days from the date the applicant receives their denial letter. For more information on how to appeal, please see the following DABC publications:

• Appeal Guide: Persons with Disabilities (PWD)
  Part One: The Request for Reconsideration
• Appeal Guide: Persons with Disabilities (PWD)
  Part Two: The Appeal Tribunal
• Help Sheet 5A: Appealing Denial of the Persons with Disabilities (PWD)
  Benefit: The Reconsideration Request
• Help Sheet 5B: Appealing Denial of the Persons with Disabilities (PWD)
  Benefit: The Appeal Tribunal
Resources Referred to in this Guide

- Help Sheet 3: Checklist for the Persons with Disabilities (PWD) Benefit
- Help Sheet 7: Enhanced Medical Coverage
- Help Sheet 8: Trusts for People Receiving the Persons with Disabilities (PWD) Benefit
- Help Sheet 12: Income Assistance Application Process for People with Disabilities
- Help Sheet 13: Rate Amounts for Persons with Disabilities (PWD) and Persons with Persistent and Multiple Barriers to Employment (PPMB) Benefits

We also have produced a Help Sheet on applying for PWD:

- Help Sheet 2: Persons with Disabilities (PWD) Benefit Application

All our publications are available on the DABC website at [www.disabilityalliancebc.org](http://www.disabilityalliancebc.org). The website has a series of Help Sheets and Guides on disability benefits.

On-Line Resources

For various community resources, go to [www.povnet.org](http://www.povnet.org).

*Your Welfare Rights: A Guide to BC Employment and Assistance* can be found on the Legal Services Society website at [www.lss.bc.ca](http://www.lss.bc.ca), under publications.

For information on MSDSI policy, programs and services, the Online Resource serves as the public entry point at [www.gov.bc.ca/meia/online_resource](http://www.gov.bc.ca/meia/online_resource).

You can see BC’s income assistance acts and regulations at [www.eia.gov.bc.ca/ministry/leg.htm](http://www.eia.gov.bc.ca/ministry/leg.htm).
Appendices

Checklist of Daily Living Activities for the PWD Designation Application

This checklist is to help applicants complete Section One of the PWD designation application. The rules say that to get disability benefits you must show that you need help with daily living activities. The checklist will help you understand what daily living activities the Ministry thinks are important and help you identify whether you have limitations in these areas. You can also show it to your doctor or assessor to help them understand what daily living activities you need help with.

When going through the checklist, you should also ask yourself the following questions:

- Which activities do I have problems doing at least some of the time?
- If I have problems part of the time, how often do these problems happen?
- If there is no one to help me, what help do I need?
- If there is no help and I must do things on my own, how much longer than normal does it take to do it?

There are two sections at the end of the checklist to help you think about the people or assistive devices you may be getting or need help from. If you need help from people or assistive devices that are not on the list, jot this down in the “Other” space.

My disability makes it difficult for me to do the following activities:

1. Personal care routines:
   - getting in and out of the bathtub
   - standing in the shower
   - reaching up and down to wash my body or hair
   - shaving, brushing my teeth, hair and washing my face
   - remembering or having the motivation to do at least basic hygiene daily
   - getting ready for bed
   - getting in or out of bed
   - dressing

2. Preparing and eating meals:
   - standing at the sink, counter and stove
   - moving food from shelves to counters to stoves and ovens
   - chopping, peeling, mixing or stirring food
   - opening cans and jars, opening and resealing bags
   - understanding recipes and labels
   - remembering to take food off the stove or out of the oven
   - remembering to throw out expired or “gone off” food
   - chewing and swallowing
   - remembering to eat regular meals and healthy foods
3. Taking medications:
   - remembering to take the right medications at the right doses at the right times
   - getting prescriptions filled and remembering to get them re-filled

4. Keeping the home clean:
   - doing dishes and putting them away, cleaning counters and sink, cleaning floors
   - cleaning my bathtub, toilet, bathroom sink and floor
   - vacuuming, dusting, cleaning windows
   - carrying, doing and folding my laundry and putting it away
   - remembering or having motivation to keep my home clean

5. Shopping for personal needs:
   - walking around stores, standing long enough to make good choices from the shelves and managing cash register line-ups
   - picking out items from shelves, loading them in the basket, taking them out of the basket and putting them onto the cashier’s desk
   - taking the groceries home (carrying them to the bus, on the bus, to my home, or loading them into and out of my car)
   - not getting anxious, scared, frustrated or angry in stores because of crowds, the light, sound and motion or long line-ups

6. Moving about indoors and outdoors:
   **Indoors**
   - going up and down stairs or ramps
   - getting in and out of furniture including my bed
   - opening and closing doors and drawers
   - walking from room to room
   - bending to pick things off the floor
   - kneeling and getting up from a kneeling position

   **Outdoors**
   - walking on flat ground
   - walking on uneven ground
   - going up or down stairs or ramps
   - going out without being anxious or scared

7. Using public or personal transportation:
   - walking to and standing at the bus stop
   - getting on and off the bus or train
   - standing, getting in and out of my seat and remembering to get off at my stop
   - understanding bus or train schedules
8. Managing personal finances:
   o understanding bills and remembering to pay them on time including the rent
   o budgeting for groceries and other things I need
   o stopping myself from buying things I don’t need

Because of my mental health disability I:
   o experience a lot of anxiety, agitation, stress, or depression
   o experience a lot of confusion
   o have difficulty making decisions and planning ahead
   o have difficulty doing the most important things first and finishing tasks
   o have difficulty making rational (good) choices
   o have difficulty remembering information and remembering appointments
   o experience sensitivity to light, sound and motion
   o have difficulty socializing without becoming anxious and scared
   o have difficulty interacting with friends, family, and/or my partner
   o have difficulty interacting with strangers in public
   o have difficulty establishing and maintaining relationships with people
   o have difficulty asking for help when I need it
   o experience difficulty being able to deal with unexpected situations

Communication (Note: English language issues are not relevant here)
   o have difficulty making myself understood by others when I speak or write
   o have difficulty understanding what others say to me
   o have difficulty understanding what I read
   o have difficulty hearing what others say to me in person or on the phone
   o feel anxious or scared when I speak to or listen to other people

I get or need help from:
   o community agencies
   o counselors
   o family members
   o friends
   o health professionals
   o home support workers
   o roommates
   o support groups
   o volunteers
   o other  ______________
I get or need help from the following assistive devices:

- adaptive housing
- bathing aids
- braces
- breathing device
- cane
- commode
- communication devices
- crutches
- feeding device
- hospital bed
- interpretive services
- lifting device
- ostomy or urological appliances
- prosthesis
- scooter
- splints
- orthotics
- toileting aids
- walker
- wheelchair
- other ____________________

I need or have an assistance animal

- Yes
Letter to Doctors

Dear Doctor:

Your patient is applying for the Persons with Disabilities (PWD) designation and needs your assistance with the application. Section Two is to be completed by the applicant’s physician. You may also be asked to complete Section Three – the Assessor Report. To assist you and your patient in completing this form we have highlighted below the key components of the PWD eligibility requirements. We hope you will have the opportunity to discuss the application with your patient before you fill it in.

- The applicant’s medical condition(s) must be deemed to be a severe physical or mental impairment. It should be noted that, if your patient has a number of medical conditions, they can combine to severely impair the person’s functioning. It is helpful if you assess the full impact (especially on bad days) of your patient’s disability and to use the word “severe” to describe the level of impairment.

- The impairment must be expected to continue for at least 2 years.

- The impairment must significantly restrict your patient’s ability to perform daily living activities either continuously or periodically for extended periods. You are asked to assess your patient’s functional skills (such as walking, climbing stairs, lifting and carrying, mental functions) and their ability to manage daily living activities. Daily living activities include personal care, meal preparation, management of medications, housework, shopping, mobility, use of transportation, management of finances and social functioning. Please indicate all the tasks that your patient has difficulty performing. If your patient is restricted periodically, it is important to note the frequency and duration of the limitations.

- As a result of the above limitations, significant help from other people or assistive devices must be required. Support people may include family, friends, health professionals, and community agencies. It should be noted when assistance is needed but not available – in these circumstances the applicant may struggle and take longer than normal to complete tasks.

- The above outline describes the key PWD eligibility criteria. Your patient should be able to provide you with more details about how their disability affects their daily functioning. Please return the application form to your patient once you have completed your section(s).

Thank you for your assistance and co-operation.
Letter to Assessors

Dear Health Professional:
Your patient is applying for the Persons with Disabilities (PWD) designation and needs your assistance with the application. Section Three—the Assessor Report—is to be completed by the applicant’s physician or a qualified assessor. (The list of licensed professionals who may complete the Assessor Report is on page 14 of the application form.) To assist you and your patient/client in completing this form, we have highlighted below the key components of the PWD eligibility requirements. We hope you will have the opportunity to discuss the application with your patient/client before you fill it in.

• In order to qualify for the PWD designation, the applicant must have a severe physical or mental impairment that significantly restricts their ability to perform daily living activities either continuously or periodically for extended periods, and as a result of this disability, significant help from others or assistive devices must be shown to be needed.

• As the assessor, you are asked to assess the applicant’s physical and mental ability in relation to their ability to perform daily living activities. Daily living activities include personal care, housework, shopping, meal preparation, managing finances and medication, using transportation, and social functioning.

• The form is designed so that the assessor has to measure the applicant’s ability to perform daily tasks on the basis of whether they need help from other people, or an assistive device, or whether they take much longer to do things on their own. A person can be deemed to require help even if it is not available to them. Someone with a mental health condition, for example, may be marginalized and isolated but refuse help because of their poor social functioning – such a person can be deemed to require ongoing assistance.

• If your client has “periodic” restrictions, it is important to note the frequency and duration of their limitations. If they are struggling to do things on their own, it is helpful to estimate how much longer than normal it may take them to complete a task. In situations where symptoms may vary from day to day, be sure to explain the impact of “bad days” on your client’s overall functioning.

The above outline describes the key PWD eligibility criteria. Your client/patient should be able to provide you with more details about how their disability affects their daily functioning. Please return the application form to your patient once you have completed your section.

Thank you for your assistance and co-operation.
Definition of PWD/Daily Living Activities

Following is an excerpt of the section in the Employment and Assistance for Persons with Disabilities Act that sets out the criteria for PWD.

2(1) In this section:

“assistive device” means a device designed to enable a person to perform a daily living activity that, because of a severe mental or physical impairment, the person is unable to perform;

“daily living activity” has the prescribed meaning;

“prescribed professional” means a person who is authorized under an enactment to practice the profession of

(a) a medical practitioner,
(b) a registered psychologist,
(c) a registered nurse or registered psychiatric nurse,
(d) an occupational therapist,
(e) a physical therapist, or
(f) a social worker.
(g) chiropractor
(h) nurse practitioner

2(2) The minister may designate a person who has reached 18 years of age as a person with disabilities for the purposes of this Act if the minister is satisfied that the person has a severe mental or physical impairment that

(a) in the opinion of a medical practitioner is likely to continue for at least 2 years, and
(b) in the opinion of a prescribed professional

(i) directly and significantly restricts the person’s ability to perform daily living activities either

(A) continuously, or

(B) periodically for extended periods, and

(ii) as a result of those restrictions, the person requires help to perform those activities.

2(3) For the purposes of subsection (2),

(a) a person who has a severe mental impairment includes a person with a mental disorder, and

(b) a person requires help in relation to a daily living activity if, in order to perform it, the person requires
(i) an assistive device,
(ii) the significant help or supervision of another person, or
(iii) the services of an assistance animal.

2(4) The minister may rescind a designation under subsection (2).

Following is Section 2 from the Employment and Assistance for Persons with Disabilities Regulation that sets out the criteria of daily living activities.

**Daily living activities**

2 For the purposes of the Act and this regulation, “daily living activities”,  
(a) in relation to a person who has a severe physical impairment or a severe mental impairment, means the following activities:
   (i) prepare own meals;
   (ii) manage personal finances;
   (iii) shop for personal needs;
   (iv) use public or personal transportation facilities;
   (v) perform housework to maintain the person’s place of residence in acceptable sanitary condition;
   (vi) perform personal hygiene and self care;
   (viii) manage personal medication, and

(b) in relation to a person who has a severe mental impairment, includes the following activities:
   (i) make decisions about personal activities, care or finances;
   (ii) relate to, communicate or interact with others effectively.