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# **ODSP applications: Information for Health Professionals**

**This pamphlet provides information to help health professionals complete the forms in the Ontario Disability Support Program's disability determination package.**

**It is important to complete these forms carefully. The decision to accept or reject an applicant will be based on the information you provide.**

**OHIP will pay you for completing these forms.**



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# About the Ontario Disability Support Program

The Ontario Disability Support Program (ODSP) provides financial assistance primarily to people with disabilities who have low incomes. It is funded by Ontario's Ministry of Community and Social Services.

To be eligible for benefits, all applicants must show that they qualify financially. Most applicants must also meet ODSP's definition of disability. Some people—for instance, those who get Canada Pension Plan disability benefits, and those over 65 who are not eligible for Old Age Security—can qualify without meeting the definition.

This pamphlet relates to people who must prove that they meet the ODSP definition of disability.

## Qualifying for disability benefits

The forms filed with the application must clearly demonstrate to the Ministry's **Disability Adjudication Unit (DAU)** that the applicant is a person with a disability as defined by the *Ontario Disability Support Program Act*.

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According to the *ODSP Act*, an applicant who is financially eligible can get disability benefits if:

- he or she has a “physical or mental impairment”,
- the impairment is “substantial”,
- the impairment will last for at least one year, either continuously or recurrently,

**and**

- the impairment has a direct effect on, **and** will substantially restrict, **at least one** of the following activities of daily living:
  1. attending to personal care,
  2. functioning in the community, or
  3. functioning in the workplace.

The impairment, how long it is likely to last, and how it restricts the applicant’s activities must be verified by an approved health professional.

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# Applying for disability benefits

People can apply directly at offices of the Ministry of Community and Social Services or through a municipal Ontario Works (social services) office.

The first step in the process is proving financial eligibility. An applicant who is found financially ineligible has a right to appeal that decision.

A **disability determination package** is provided to applicants who are found financially eligible, as well as to those who are appealing a decision that they are not financially eligible.

The disability determination package contains the following forms:

- **HEALTH STATUS REPORT,**
- **ACTIVITIES OF DAILY LIVING INDEX,**
- an optional **SELF REPORT** (which must be signed by the applicant and included with the application even if the applicant chooses not to complete it),
- forms which require the applicant to consent to the release of medical information.

The applicant must submit the completed forms to the DAU within **90 days** of receiving the package. It is important to meet the deadline. An applicant who does

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not meet the deadline may have to begin again with a new application.

If any test results or other medical reports are not available within the 90 days, this can be indicated in the application and the information can be sent in later.

The **HEALTH STATUS REPORT** must be completed by a physician, psychologist or psychological associate, optometrist, or nurse practitioner who is a registered nurse in the extended class.

The **ACTIVITIES OF DAILY LIVING INDEX** can be completed by a physician, psychologist or psychological associate, optometrist, audiologist, occupational therapist, physiotherapist, chiropractor, speech language pathologist, registered social worker, registered nurse, or nurse practitioner who is a registered nurse in the extended class.

## How the Disability Adjudication Unit decides

The DAU, which is based in Toronto, reviews each application. If the DAU approves an application, the applicant should begin to receive financial benefits within a few months.

The DAU states that it applies the “whole person” approach to its decisions.

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Therefore, the applicant could be entitled to benefits if:

- many minor impairments, taken together, create a “substantial impairment”, and
- that overall impairment substantially restricts the applicant’s activities of daily living.

For this reason, it is critical to describe all impairments and how the different symptoms interact.

In most cases, the DAU will base its decision solely on the information in the **HEALTH STATUS REPORT** and the **ACTIVITIES OF DAILY LIVING INDEX**.

## Essential information to include

The applicant will not be interviewed or examined by the DAU. Therefore, it is crucial that the **HEALTH STATUS REPORT**:

- clearly describe the applicant’s physical or mental impairments, and
- include details of the restrictions experienced by the applicant.

The Intellectual and Emotional Wellness Scale should be completed for an applicant with any mental health condition, even if it is not the applicant’s principal condition.

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The **ACTIVITIES OF DAILY LIVING INDEX** must clearly indicate any and all restrictions the applicant may experience as a result of his or her condition(s). You may need to interview the applicant to obtain sufficient information about his or her restrictions. It can be important to indicate how an applicant's ability to work is affected by his or her condition(s).

Make sure that the applicant's situation is **fully** described on the forms. You are not limited to the "grading systems". You can add your own comments in order to thoroughly depict the applicant's condition and its effect on his or her ability to function. For example, if pain limits the applicant's activities, either directly or indirectly, explain the impact of pain on the applicant.

It is very helpful to add further comments on the form and attach any written reports and "objective information" such as x-ray reports and test results.

As much as possible, note and explain how the objective data supports your medical opinion. Without these supporting facts, the DAU is not likely to accept your conclusions.

You should note any medications or treatments as well as side effects if the applicant experiences them regularly and they affect his or her ability to function.

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## Mental illness

Documenting mental illnesses on the forms can be difficult. In such cases, your own comments are crucial in presenting a full picture of the applicant's condition and its impact upon his or her daily life. You need to provide details of both:

- the applicant's symptoms, and
- the effects of these symptoms.

For example, a reference to "depression" will not be sufficient without describing how the depression affects the applicant's ability to function on a daily basis.

## The most important questions

The forms do not ask the most important questions:

- Does the applicant have a substantial impairment?
- If so, does the impairment substantially restrict the applicant's ability to care for himself or herself, or to function in the workplace or community?

If the answer to these questions is yes, then you should clearly state that opinion in the forms or attachments. You will also need to explain why you have formed this opinion.

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## If an applicant is refused by the DAU

An applicant who is refused can ask the DAU to conduct an internal review. The applicant must request the internal review within 10 days of receiving the decision to refuse benefits. Applicants who miss the deadline can ask for an extension of time.

If the internal review does not result in a decision to grant benefits, the applicant can appeal to the Social Benefits Tribunal (SBT).

The applicant can submit additional medical evidence on an internal review or an appeal. New medical evidence on an appeal must be filed with both the SBT and the DAU at least 30 days before the SBT hearing. Such additional evidence may result in a decision to grant benefits.

An applicant who has been refused by the DAU can contact a community legal clinic for help with requesting an internal review or an appeal.

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## For further information

If you would like more information about the disability application process and advice on filling out the forms, you may contact a community legal clinic.

The community legal clinic nearest you can usually be found under “Legal Aid” or “Lawyers” in your phone book. You could also check Legal Aid Ontario’s web site at <[www.legalaid.on.ca/en/locate](http://www.legalaid.on.ca/en/locate)> or call them:

Toll-free ..... **1-800-668-8258**

Toll-free TTY ..... **1-866-641-8867**

In Toronto ..... **416-979-1446**

TTY in Toronto ..... **416-598-8867**

You can also call the Disability Adjudication Unit:

Toll-free ..... **1-888-256-6758**

In Toronto ..... **416-326-5079**

TTY in Toronto ..... **416-326-3372**

TTY users in all other area codes, call collect using Bell Canada Relay.

**The law can change, and policies and practices can also change or vary. This pamphlet contains general information. It is not a substitute for getting legal advice about your particular situation.**

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