



March 2022

# Disability Support Pension (DSP) Help Project

Year Two Implementation and Evaluation Report

DSP Help [dsphelp.org.au](https://dsphelp.org.au)

Social Security Rights Victoria (SSRV) is an independent, state-wide community legal centre that specialises in social security and related law, policy and its administration. **Our vision is for a fair and just society in which all people are able to receive a guaranteed adequate income in order to enjoy a decent standard of living.**

SSRV's contribution is the provision of legal and related services to vulnerable and disadvantaged Victorians, and those who support them, which assist them to secure and protect their right to equitable social security entitlements.

The values that underpin SSRV's work include respect, empowerment, quality, integrity and courage.

For more information visit [ssrv.org.au](https://ssrv.org.au)



## Acknowledgements

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We also acknowledge and appreciate the contributions of:

- DSP applicants, support workers, health workers and other stakeholders who participated in consultations and provided feedback;
- Steering Committee Members – Patrick McGee and Natasha Thompson (Australian Federation of Disability Organisations), Len Jaffit (Victoria Legal Aid), Yvette Maker (University of Tasmania) and John Berrill (Berrill & Watson Lawyers);
- Reuben Stanton, Eily Williams, Emily Hamilton, and Willow Berzin (Paper Giant, Strategic Design Consultancy);
- Taimur Siddiqi (The Incus Group, Monitoring & Evaluation Consultant);
- Josef Legal; and
- SSRV staff who contributed to the development, implementation and management of the DSP Help Project, in particular Dermott Williams (DSP Help Project Community Lawyer), Emily Singh (Principal Lawyer), and Gillian Wilks (Director).

We acknowledge the traditional owners of the land on which we work and provide services. We pay our respects to Elders past and present. We also pay our respects to First Nations people who access DSP Help services, with whom we collaborate and who may be reading this report.

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This report documents the conceptualisation, implementation, evaluation and recommendations arising from Year Two of the DSP Help Project. This report covers the period July 2020 to December 2021.

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## Background and Project Overview

Social Security Rights Victoria (SSRV) is an independent, state-wide community legal centre that specialises in social security related law, policy and administration. SSRV's vision is for a fair and just society in which all people are able to receive a guaranteed adequate income in order to enjoy a decent standard of living. SSRV's contribution to this vision is the provision of legal services to vulnerable and disadvantaged Victorians and those who support them, which assist them to secure and protect their right to equitable social security entitlements.

In late 2019 SSRV was awarded a two year funding grant by the Victorian Legal Services Board Grants Program to design, implement and evaluate the Disability Support Pension (DSP) Help Project.

The primary aim of the Project was to use human-centred design and technology to address the question of "How might we help people with disability prove their eligibility for the Disability Support Pension so that they can enjoy a fairer, faster pathway to adequate income support?" Preliminary activities took place in 2019, while the Project began in earnest in 2020 and was completed in March 2022.

Full details of the background to the DSP Help Project are available in the *DSP Help Project Year One Report* [ssrv.org.au/wp-content/uploads/2021/07/SSRV\\_DSP-Help-report\\_Web.pdf](https://ssrv.org.au/wp-content/uploads/2021/07/SSRV_DSP-Help-report_Web.pdf).

The DSP Help Project involves multiple core activities intended to achieve the overall goal of improving access to the DSP, including:

- using human-centred design and technology to design and make available an online self-help resource applicants and others can access for assistance with the DSP;
- providing wrap-around legal advice and casework services to DSP applicants applying for, or appealing a rejection of, the DSP;
- providing advice and information to community and other support workers through secondary consultation and community legal education;
- promoting the use of DSP Help resources and tools, the DSP Help Legal Service, and SSRV more generally;
- contributing to systemic and policy activities in the DSP space; and
- contributing to organisational and sector knowledge regarding the use of human-centred design and technology to address legal problems in new and innovative ways.

In Year One, a website [dsphelp.org.au](https://dsphelp.org.au) was developed and launched. The website brought together information about the DSP and presented it in a friendly and easy to understand format. The website also incorporated a "chatbot" users can interact with to help unpack their situation and the reasons they are considering the DSP. The chatbot would then produce a "medical evidence kit" they could take to their doctors to assist in gathering evidence to support their application or appeal.

Applying human-centred design principles, the resource was designed as a "minimum viable product", a basic version that does enough to be useful for the cohort of people the Project is trying to assist, without necessarily doing everything that cohort could possibly find helpful. The intention is to iterate on this in further development cycles to go beyond "minimum" through incremental improvement.

In addition to the online resource, the Project also included a wrap-around legal service for DSP applicants, targeted at people experiencing forms of vulnerability and disadvantage. The service provided specialist legal advice and casework, helped applicants make better applications, and assisted them with appeals where necessary. With a focus on DSP matters, the DSP Help Project was integrated with other SSRV activities, including staffing the Worker Help Line service for one day a week, providing community workers with community legal education (CLE), and engaging in promotional activity for the DSP Help online resource and service. The Project also led SSRV's advocacy efforts at a systemic level in the DSP space.

In Year Two of the Project, a priority was on further developing the DSP Help website with a focus on doctors and other health workers. The underpinning assumption being that if we could make it easier for them to provide appropriate medical evidence the quality of DSP applications should be improved. SSRV once again engaged and collaborated with service design consultancy firm Paper Giant in undertaking this work. Project staff also maintained the applicant section of the website, continued to provide legal services, professional development for other workers, service promotion and undertake systemic advocacy activities.

## Context

The further design, implementation and evaluation of the DSP Help Project in Year Two was informed by relevant legislative, societal, sector and other contexts, as well as the learnings from the first year of the project. This section details the impact and effects of these on the second year.

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### Disability Support Pension Eligibility Criteria

DSP eligibility remains at the core of the DSP Help Project in Year Two. The criteria are complex, technical, and the cause of many frustrations applicants experience in accessing the DSP.

For a DSP claim to be successful the applicant must show:

- they have physical, intellectual or psychiatric impairment or impairments;
- the condition(s) causing the impairment(s) is/are fully diagnosed, fully treated, and fully stabilised;
- the impairment(s) attracts a severe rating (20 points) under the Impairment Tables; and
- they have a Continuing Inability to Work.

Each of these criteria have their own nuance, for example there are specific rules covering the kinds of practitioners who can diagnose certain conditions, the treatment that needs to have been undertaken for a condition to be “fully treated”, and how the tables should be applied where there are multiple conditions or impairments.

Additionally, if the person has multiple impairments and no single impairment is assigned a severe rating but together the impairments add to more than 20 points, the applicant may also have to have participated in a Program of Support. This usually means being on JobSeeker Payment for 18 months and participating in the activity requirements for that payment.

As noted in the Year One Report, many people call SSRV having had their claim for DSP rejected without understanding why or what it is they are being assessed on. This continued to be true in Year Two, particularly among vulnerable clients unable to self-advocate or make effective use of an online resource.

### Impact of COVID-19

Year Two of the DSP Help Project commenced in March 2021. At that time SSRV staff and operations had begun returning to work from the office following COVID related restrictions. It was hoped that with restrictions being wound back and vaccine rollout beginning, the Project would be delivered in a more traditional manner than in Year One. By June, with the reintroduction of stay-at-home measures, it was clear this was not to be the case. COVID-19 and continuing government responses to the pandemic impacted upon the DSP Help Project in the following ways:

#### Substantive changes to the social security system and framework

In Year One the rate of JobSeeker Payment was effectively doubled and remained significantly increased for a substantial period of time. By Year Two, these measures had been wound back. This meant the atypical incentive to remain on JobSeeker for a higher rate of payment did not exist as it did in 2021.

Mutual obligations were either reduced or suspended at varying times throughout the year. Recipients of JobSeeker Payment were not required to attend their Job Service Providers and were required to look for fewer (at times as few as zero) jobs each reporting period to continue receiving the payment while full lockdowns were in place.

Debt recovery and other compliance activities remained reduced or suspended. For some individuals this may still have had an impact on how urgently they sought to access the DSP. Paused recovery of an overpayment may have been the financial difference between their income support being adequate for their needs and requiring the higher rate the DSP offers.

New payments were created and administered by Centrelink, including Pandemic Leave Payment and Covid-19 Disaster Payment. This meant there were new options for people seeking income support due to being unable to work.

## Impact at SSRV

SSRV was able to transfer back into remote operation with little difficulty given the experience of 2020. However, the ongoing pandemic did have an impact on the DSP Help Project.

The major effects were:

- stakeholders had to continue engaging with the project via remote tools such as Zoom. Only one face-to-face meeting – the kick-off meeting with Paper Giant – was able to be held during Year Two;
- the DSP Help Project continued to use remote delivery for CLE. While this was largely successful, there were organisations seeking CLE who expressed disappointment the session couldn't be run in person. Other organisations chose to forgo CLE unless it could be carried out face-to-face; and
- some options for legal service delivery remained unavailable in a pandemic environment. Most notably, face-to-face legal appointments could not be offered as part of the DSP Help Legal Service.

## Policy and Systemic Advocacy Landscape

2021 was a big year for policy and systemic advocacy activities in the DSP landscape. Most notably, the Department of Social Services (DSS) initiated a review of the Impairment Tables – the tables used to assess functional ability when assessing a person's DSP eligibility – before their expiry in April 2022. SSRV was aware this was a possibility and envisioned leveraging the DSP Help Project in some way in order to contribute to this process.

Prior to that review commencing, the Senate referred an *Inquiry into the purpose, intent and adequacy of the Disability Support Pension* to the Senate Community Affairs References Committee. The terms of reference for this inquiry were very broad, not only looking at the eligibility criteria, but other things such as labour market participation, discrimination, and the appropriateness of support for people living and working with disability.

In the wider disability landscape, the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability continued throughout 2021. While not directly looking at the DSP in the same way the Senate's inquiry, stakeholders have consistently noted this may be a forum interested in the DSP's shortcomings, and there may be opportunities to contribute.

One of the objectives for Year Two of the Project was to contribute to research and systemic advocacy aimed at addressing barriers to fair access to the DSP. In pursuing this, each of the above was integral to decision making within the DSP Help Project. These activities will be discussed further in the relevant section below.



## Project Management & Guidance

In Year Two, the DSP Help Project continued to be managed via SSRV's internal structures and processes. Project funding supported the employment of a four day per week Community Lawyer, management and legal supervision, and support contributions and assistance with project administration and promotions. Service design consultancy firm, Paper Giant, were again engaged to lead the process to further develop and iterate on the project's online and other resources. The Incus Group returned to lead project monitoring and evaluation.

The DSP Help Project Steering Committee also returned to guide and advise on project development, implementation and review. Steering Group members contributed a broad range of lived, legal, disability sector, policy and advocacy expertise. All members are active in advocacy and other activity related to the DSP. Opportunities to invite a new member from a medical or health background were explored

during Year Two, however, given the short design and development timelines and the nature of the consultation with health workers already planned, this was ultimately not pursued. The Steering Committee met formally three times during Year Two. All members contributed to service design and evaluation consultations, and to service promotions.



*Photo: DSP Help Project Steering Committee Meeting – Gillian Wilks (SSRV), Dermott Williams (SSRV), Yvette Maker (University of Tasmania), Eily Williams (Paper Giant), John Berrill (Berrill & Watson Lawyers), Taimur Siddiqi (The Incus Group), Natasha Thompson (Australian Federation of Disability Organisations). Not present: Patrick McGee (Australian Federation of Disability Organisations), Len Jaffit (Victoria Legal Aid).*

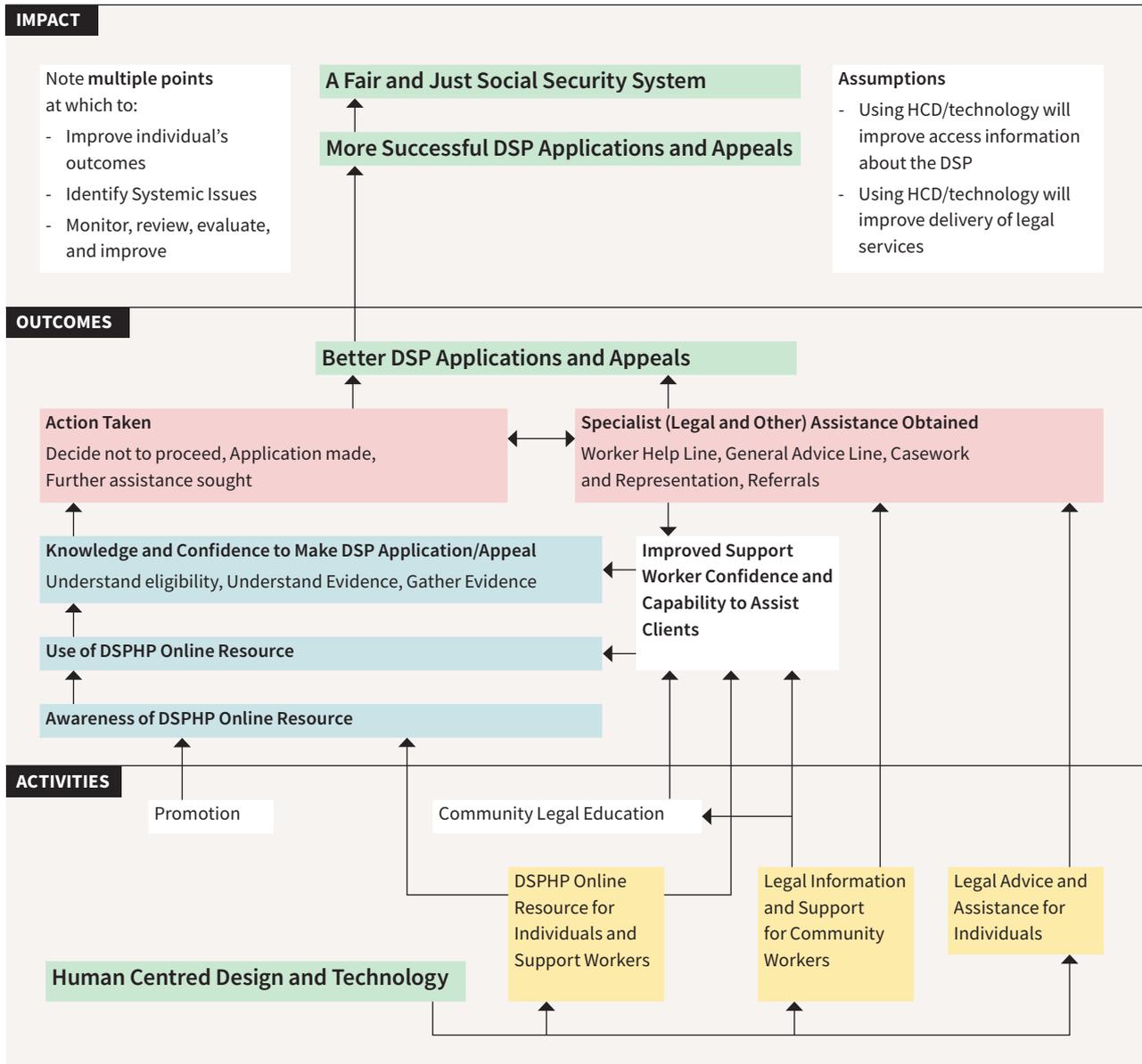
# Conceptual Framework

## Theory of Change

In Year One a theory of change was developed to demonstrate how the project envisaged that the application of human-centred design principles and the use of technology would lead to better DSP applications and appeals, as well as how the activities of the Project overall would contribute to bringing about change.

The theory of change was reconsidered during Year Two. It was decided with the Steering Committee that this did still accurately reflect how the DSP Help Project hoped to bring about change. No modifications were made.

The theory of change, along with the project's *Work Plan and Monitoring and Evaluation Plan* continued to inform decision-making process throughout the DSP Help Project.



## Human-Centred Design

Human-centred design remains a cornerstone of the DSP Help Project. The central questions during the inception of the project were “How might we help people with disability prove their eligibility for the Disability Support Pension so that they enjoy a fairer, faster pathway to adequate income support?”, and “How can we use human-centred design and technology to achieve this?”.

In the context of the second year of the project, the group of people at the centre of the design process was expanded to include doctors and other health workers. DSP Help already provided resources that were useful and appropriate when considering the applicants’ needs, but in Year Two the focus shifted to doctors and other health professionals who were responsible for creating and providing medical evidence, and the challenges they face.

Some of the things the design process considered included:

- the frustrations and issues doctors face when asked to support a DSP application;
- the time available to write reports within consultations;
- the kinds of resources doctors would be happy to see patients bring with them to appointments and would be happy to read and engage with in that context; and
- the kinds of resources doctors would actively seek on their own when providing evidence for a DSP application or appeal.

Importantly, this shift in focus was very much an expansion, rather than an outright change. The needs of DSP applicants, family and friends of applicants, and community support workers also had to be considered in this new context. The Project aimed to design for doctors and health workers needs, while at the same time remembering that the people we were assisting were still ultimately the applicants themselves. These needs did not always align, which was the crux of the design challenge.

## Integrated Project Plan

As part of the project’s funding agreement, an Integrated Project Plan was developed and updated to reflect priorities in the second year of DSP Help. Notably, in Year Two there was an additional objective: Contribute to research and systemic advocacy aimed at addressing barriers to fair access to the DSP. As discussed in the context section of this report, ongoing policy and systemic advocacy activities were a key factor when making decisions about direction of the second year of the Project.

The evaluation sections below will refer to targets and indicators of success from the Integrated Project Plan when assessing how effective the project has been in its second year.

## Monitoring and Evaluation Plan

At the outset of the project, SSRV identified the need to develop and implement a Monitoring and Evaluation Plan. The benefit of establishing this kind of document at the beginning of a project has been evident in SSRV’s experience with other projects, both to ensure monitoring and evaluation is able to be carried out smoothly and progressively throughout the life of the project, and also as a source of guidance for accountability and improvement.

SSRV re-engaged Taimur Siddiqi from The Incus Group to assist with the reviewing, updating and implementing the Monitoring and Evaluation Plan. The plan was framed around a series of guiding questions under four themes: Appropriateness, Process, Effectiveness and Sustainability of the project. Guiding questions were further categorised as either evaluation questions (that is, the project could assess how well it performed on the question) and research questions (questions that helped guide the project and contributed to building knowledge and understanding, but do not lend themselves to an assessment).

An example of these questions is presented below and the full set as Appendix A.

| THEME   | GUIDING QUESTIONS   |
|---|---|
| <b>Effectiveness</b>  | In what ways and to what extent was the confidence and capability of support workers to effectively assist their clients in making DSP applications built |
| In what ways and to what extent did the DSP Help Project assist people to increase their chance of success when making a DSP application? |   |

The evaluation and project team also identified relevant data sources and created data collection tools to answer the evaluation and research questions.

An example of the data collection sources is presented below and the full set as Appendix B.

| ITEM                                  | DESCRIPTION   |
|---------------------------------------|---|
| 1. Online resource usage              | Google analytics to identify usage volume and trends  |
| 2. Online resource user feedback      | Built-in feedback tools to capture user feedback in different sections and at exit (including invitation to participate in follow up interview/survey)  |
| 3. CLE Activity summaries             | Summaries of activity performed by DSPHP staff in 3 categories: <ul style="list-style-type: none"> <li>- Community legal education sessions delivered</li> <li>- Online resource promotion activity</li> <li>- Any systemic issues and policy related activity</li> </ul> |
| 4. Community Legal Education Feedback | Feedback forms completed by participants following attendance at a CLE session delivered by DSPHP staff   |

For each of the evaluation questions, a set of rubrics were developed to assess performance. These rubrics were devised by The Incus Group and reviewed by SSRV and included predefined indicators to determine the degree to which performance in an area could be judged as 'poor', 'adequate', 'good' or 'excellent'.

An example of the rubrics is presented below and the full set as Appendix C.

**Appendix C – Evaluation Rubric**

| Evaluation questions  | Poor  | Adequate  | Good   | Excellent  |
|---|---|---|--|--|
| <b>Process</b>  |   |   |  |  |
| <b>Effectiveness</b>  |   |   |  |  |
| 1. To what extent and in what ways did the DSP Help online resource assist applicants to make a successful DSP application?                                   | <p>Fewer than 20% of users providing immediate feedback indicate the resource was assessed from "understand requirements for DSP eligibility" / "understand evidentiary requirements" / "gather relevant data to support application"</p> <p>Over 50% of individuals / workers consulted in follow up state that resource made some difference to the preparation or outcome of application</p> <p>Drop off in number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>  | <p>50 - 70% of users providing immediate feedback indicate the resource was assessed from "understand requirements for DSP eligibility" / "understand evidentiary requirements" / "gather relevant data to support application"</p> <p>Over 70% of individuals / workers consulted in follow up state that resource made some difference to the preparation or outcome of application</p> <p>Similar number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>  | <p>70 - 80% of users providing immediate feedback indicate the resource was assessed from "understand requirements for DSP eligibility" / "understand evidentiary requirements" / "gather relevant data to support application"</p> <p>Over 70% of individuals / workers consulted in follow up state that resource made some difference to the preparation or outcome of application</p> <p>Moderate increase (5 - 25%) in number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>  | <p>Over 80% of users providing immediate feedback indicate the resource was assessed from "understand requirements for DSP eligibility" / "understand evidentiary requirements" / "gather relevant data to support application"</p> <p>Over 70% of individuals / workers consulted in follow up state that resource made some difference to the preparation or outcome of application</p> <p>Large increase (Over 25%) in number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>  |
| 2. In what ways and to what extent was the confidence and capability of support workers to effectively assist their clients in making DSP applications built? | <p>Fewer than 4 CLE sessions delivered and/or 20 participants</p> <p>Fewer than 12 legal workers</p> <p>Fewer than 10% of support workers who attend CLE sessions and complete Feedback sheets report they "anticipate they will use learnings to better assist clients" or "feel more confident to assist clients with DSP applications"</p> <p>Fewer than 50% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>Fewer than 50% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they "used the information / advice provided to assist a client" or "felt more confident assisting the client"</p> <p>None of the workers consulted can give an example in follow up of how this has been reflected in their work</p> | <p>4 CLE sessions delivered / 50 participants</p> <p>15 - 20 legal information and advice services to support workers</p> <p>50 - 70% of support workers who attend CLE sessions and complete Feedback sheets report they "anticipate they will use learnings to better assist clients" or "feel more confident to assist clients with DSP applications"</p> <p>50 - 70% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>50 - 70% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they "used the information / advice provided to assist a client" or "felt more confident assisting the client"</p> <p>A few of the workers consulted can give an example in follow up of how this has been reflected in their work</p> | <p>More than 4 CLE sessions delivered and/or 100 participants reached</p> <p>20 - 25 legal information and advice services to support workers</p> <p>70 - 80% of support workers who attend CLE sessions and complete Feedback sheets report they "anticipate they will use learnings to better assist clients" or "feel more confident to assist clients with DSP applications"</p> <p>70 - 80% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>80% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they "used the information / advice provided to assist a client" or "felt more confident assisting the client"</p> <p>At least half of the workers consulted can give an example in follow up of how this has been reflected in their work</p> | <p>More than 6 CLE sessions delivered and/or 200 participants</p> <p>Over 25 legal information and advice services to support workers</p> <p>Over 80% of support workers who attend CLE sessions and complete Feedback sheets report they "anticipate they will use learnings to better assist clients" or "feel more confident to assist clients with DSP applications"</p> <p>Over 80% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>Over 80% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they "used the information / advice provided to assist a client" or "felt more confident assisting the client"</p> <p>Majority of the workers consulted can give an example in follow up of how this has been reflected in their work</p> |

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Appendix c sample

The Monitoring and Evaluation Plan, including the data sources and rubrics, were all reviewed at the start of Year Two. These documents were updated with minor adjustments to reflect:

- recommendations made from Year One, for example to simplify the Community Legal Education feedback form;
- there was information that did not need to be collected again (e.g. downloads of SSRV's DSP Toolkit) and new information that needed to be collected (e.g. interviews with health professionals); and
- that a year of the project had elapsed, and performance should be assessed against both the first year of the project and activity at SSRV before the project was launched.

# Human-Centred Design Process

Paper Giant have kindly contributed the following section of this report, detailing their experience with Year Two of the DSP Help Project, the activities undertaken with their involvement, and the outcomes and deliverables produced.

## Collaborating on better outcomes for the Disability Support Pension

Paper Giant has been working with the legal help sector for its entire seven year history, from their first client YouthLaw through to legal innovation projects for Victoria Legal Aid, the Victoria Law Foundation, multiple community legal centres, and the Supreme Court of Victoria.

Paper Giant's core purpose is to help organisations work towards a more fair, just, equal and sustainable society, and collaborating with SSRV to improve the application process for the DSP has been an opportunity to help further that mission.

In 2020, Paper Giant was engaged to work collaboratively with SSRV to design and build an online tool that supports applicants to apply for DSP. The result was the launch of DSP Help, an online resource designed to guide applicants and those who support them to understand assessment criteria and how to apply for the DSP.

The success of DSP applications is largely dependent on the quality of medical evidence provided by health professionals to support claims. The first phase focused on applicants and immediate support. In 2021, SSRV and Paper Giant commenced Phase 2 of DSP Help, this time focusing on the utility and impact of the online resource to assist medical professionals to understand the requirements of DSP eligibility and provide supporting medical evidence.

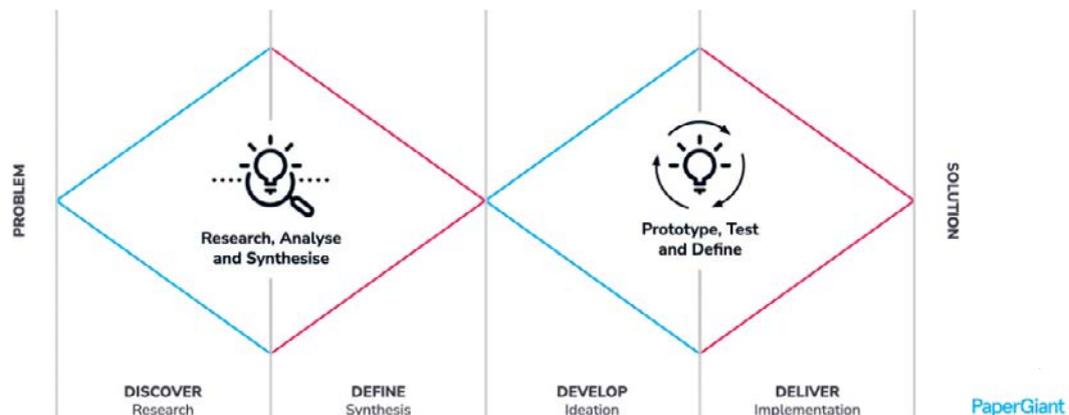
## Leveraging a human-centred design approach to engage health professionals

The project took a human-centred design approach to consult with health professionals and understand their experiences with the DSP with preparing medical evidence to support DSP applications. Human-centred design is a creative approach to problem-solving that builds empathy by involving the people you are designing for to ensure solutions meet their needs.

To understand the problem from the perspective of the people involved, we set out to capture the behaviours and challenges of health professionals by speaking with them directly to know how we could support them to create appropriate medical evidence. In addition, the approach allowed us to gather feedback and input from health professionals that could inform and validate multiple possible outcomes that were valuable and appropriate for their needs and challenges.

We were also mindful of gathering evidence and insight on broader issues relating to the DSP to grow project impact into the future. For example, we identified systemic barriers in helping applicants and issues with the usability of the Impairment Tables so that knowledge developed in this project could be leveraged with further impact.

The double diamond  
HCD101



## Project journey

Phase 2 of the project commenced in July 2021 with a kick-off session at SSRV. The face-to-face session was a chance for the project team to meet, establish the project vision and our focus areas. As undertaking systemic advocacy to address barriers to accessing the DSP was a project objective, we also discussed what opportunities for systemic advocacy may look like and how possible outcomes from this project could contribute.

Before the session, Paper Giant prepared a draft user journey of the assumptions on how health professionals engage with the DSP application process based on prior research and available information. The team used this journey to map questions, current resources and unknowns to form the basis of our research questions. Visualising this journey helped us to align on how health professionals may engage with different tools and where to focus our research.

Following the session, we created our research plan outlining the project and research. Part of this research included a scan of current resources and literature to build an understanding of existing resources.

We recruited a total of 9 health professionals including general practitioners, psychologists and psychiatrists with varying experience with the DSP through our networks. These people participated in 60 minute online consultations to understand their experiences, challenges and current behaviours when creating medical evidence. We also walked through and reviewed existing resources, including DSP Help and the Medical Evidence Kit, and other resources such as the DSP Toolkit, to gauge their usefulness when compiling evidence. This feedback enabled us to understand how to iterate and improve these resources for health professionals.

As health professionals are notoriously time-poor, we also designed a short survey to capture further feedback on experiences. The survey consisted of 11 questions covering their experiences, barriers and resources used regarding the DSP. Survey respondents were also asked to quantify the time to complete medical evidence and how they bill for their time. In addition, we collated a spreadsheet of contact details of 21 peak health bodies and organisations to distribute to their networks. We received responses from 30 professionals, including psychiatrists, psychologists and GPs, helping us to understand broader improvement patterns.

## We found that creating medical evidence is a frustrating and time-consuming process for many health professionals

By consulting with health professionals, we developed an understanding of the constraints they faced when creating medical evidence. We heard that creating medical evidence was time-consuming and often completed unpaid, outside of consultations. Many health professionals described the process as an administrative burden as the eligibility criteria is confusing and frustrating; even those with a high degree of experience creating DSP medical evidence had varying interpretations of what was required. The barriers to engage with the DSP included the time it takes, the amount of experience or history they have with a patient, and general perceptions on the value of the DSP. Many health professionals expressed it was "incredibly difficult" to get patients on the DSP if they don't fit the medical criteria neatly. The lengthy and ambiguous review processes also contributed to additional strain for all involved. We heard stories about a lack of transparency from Centrelink, including appeals, resources and clarity ineligibility.

These experiences directly informed the development of project opportunities. We synthesised 810 data points into insights and developed three challenge statements to improve the experience of creating medical evidence for the DSP:

- How might we reduce health professionals' frustrations and concerns (time, understanding and effort) to make the compilation of medical evidence less of a burden?
- How might we build the capacity for supporting resources to become more visible?
- How can we support the roadmap towards systemic advocacy?

The project team ideated on these statements and developed potential project outcomes. Next, we reviewed these potential outcomes with SSRV's steering committee, which includes people with deep expertise in the disability space including advocacy, legal, policy and research. The steering committee helped us to refine the areas this project could provide the most value.

## Five project outcomes

**Outcome 1: Submission to the Senate's inquiry** into the purpose, intent and adequacy of the Disability Support Pension including recommendations for systemic change

**Outcome 2:** Development of DSP Help to include a **new resource for health professionals** with an outline of an awareness campaign

**Outcome 3:** An outline of an **awareness campaign**

**Outcome 4:** Ideas towards **systemic advocacy**

**Outcome 5:** Training outline and guidance of a **Continued Professional Development** module

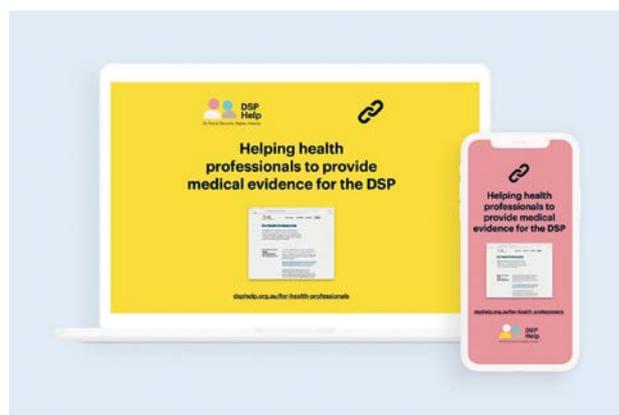


### Outcome 1: Submission to the Senate inquiry including recommendations for systems change

Leveraging evidence of challenges with the requirements and structure of the DSP, we compiled an insights and recommendations report for submission to the Senate Committee on Community Affairs inquiry into the purpose, intent and adequacy of the Disability Support Pension.

The submission included four recommendations to redesign the system based on our conversations with health professionals:

1. Provide health professionals access to appropriate funding that covers the assessments
2. Provide applicants timely and affordable access to required specialists
3. Provide access to support staff to help coordinate the complicated process
4. Redesign the system putting care and the users first



### Outcome 2 & 3: Development of DSP Help to include a new resource for health professionals with an outline of an awareness campaign

To resolve the lack of clarity about eligibility, language and Impairment Tables we designed a new resource on the DSP Help website for health professionals. The discussions with health professionals taught us that the resource needed to be concise, clarify the language of Centrelink, and outline what kind of assessment Centrelink required. The resource aims to reduce the administrative burden by providing health professionals with important information regarding the DSP and a concise outline of criteria to meet in medical evidence via a letter template, the preferred guidance format. We updated the Medical Evidence Kit on DSP Help to reflect this new format and improve the experience based on health professionals' feedback on the resource.

We emailed participants to gather further input and feedback. Although we received low response rates, the feedback we did receive was positive with professionals commenting the resource improves quality and ease of medical evidence, saving time as a result. Further evaluation with these participants is recommended to review use and application of the new resource following DSP submissions.

To support the greater uptake of the new resource, we identified that visibility was vital to ensure health professionals could use them during their time of need. So we designed an awareness campaign to educate professionals about new resources to be distributed through various peak bodies and health professional networks.

## **Outcome 4: Ideas towards systemic advocacy**

While potential Senate Inquiry outcomes are on the horizon and extensive coalitions are working towards change, emerging movements are also happening outside of the disability sector that provides an opportunity to support a greater narrative shift. These movements offer alternatives to current structures, building coalitions to create momentum to influence government and lead to policy change.

We provided a document that outlines opportunities to create change for the DSP by tapping into these existing and emerging movements and networks.

## **Outcome 5: Training outline and guidance towards a Continued Professional Development module**

During the research, Paper Giant helped SSRV to make connections with peak health organisations the Royal Australian College of General Practitioners and Australian Association of Psychologists Inc for further training and education opportunities. To support the training opportunities we provided an outline presentation deck. The training outline addresses the key challenges and questions health professionals have, filling the gap in current available professional training for the DSP, and building on the resources and experiences of SSRV.

The opportunity builds on ways to increase awareness and engagement from health professionals, ensuring we are using effective channels to reach health professionals and educate about how to engage with the DSP.



# DSP Help – Online Resource

The online resource [dsphelp.org.au](https://dsphelp.org.au) was first launched in July 2020 with an official launch event held in August of that year. The resource did three main things:

1. it provided information applicants and those supporting them can use to better understand the DSP and make better applications and appeals;
2. it provided a chatbot users could use to create a medical evidence kit to assist in gathering medical evidence to support their application or appeal; and
3. it provided a way for users who were not able to self-advocate with the assistance of online tools to link into SSRV's other more intensive services.

The online resource was initially aimed at an audience of DSP applicants and those who support them to do this, including friends, family and community workers such as financial counsellors, social workers and advocates. Within these cohorts, the resource was aimed at the “missing middle”: the users with mid-level support needs who can self-advocate with the right tools.

For further discussion of the Year One design process, please see the Year One report.

In Year Two the focus was expanded to include doctors and health workers. In the vast majority of applications, a decision about DSP eligibility will turn on the medical evidence and whether or not this demonstrates the person is qualified for the payment. As above, the project started the year with a resource that is good at helping applicants understand the DSP and what they need to seek from their doctor. The next step was improving that resource to make the doctors' role in that process easier.

Doctors and other health workers (notably psychologists and psychiatrists) were consulted as part of the human-centred design process. The learnings from this process were distilled into a plan of action that in part included changes to the DSP Help online resource. New pages were added for health professionals (see, for example [dsphelp.org.au/for-health-professionals](https://dsphelp.org.au/for-health-professionals)), and the Medical Evidence Kit produced by the chatbot was updated to be more streamlined and front end the information doctors want to see first.

For Paper Giant's perspective on the design and update of DSP Help, see their section above and the Year One report.

## Use of DSP Help - Visits

Usage of the DSP Help online resource was tracked and recorded using a combination of Google Analytics and other tools built into the website (e.g. the Josef chatbot).

Between the launch of DSP Help on 13 July 2020 and 31 December 2021, a total of 31,470 unique users visited the website.

Total unique visits to DSP Help

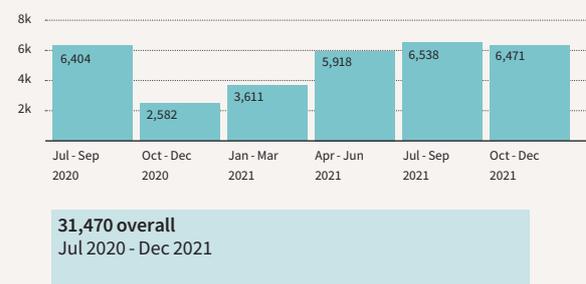


Figure 1 - Total unique visitors to DSP Help website, over time

This equates to an average of approximately 1800 visits per month over the course of the project. As expected, there was a high level of interest and traffic to the site in July and August 2020 when it was launched and there was significant accompanying media promotion. The visits then dropped markedly over the following six months, but steadily increased from April 2021 with an average of nearly 2200 per month over the last six months. Overall, this meant that DSP Help website visits increased by 26% in Year Two, with an average of 1878 per month compared to 1489 per month in the first 6 months after the launch (July – December 2020).

Average visits per month to DSP Help

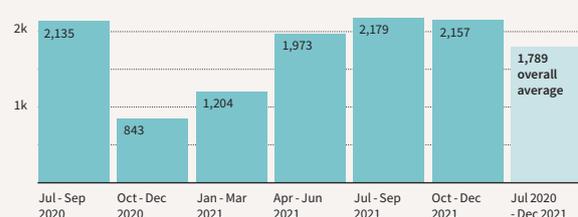
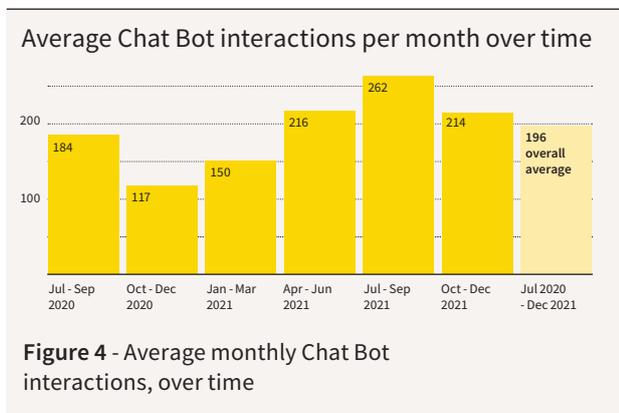
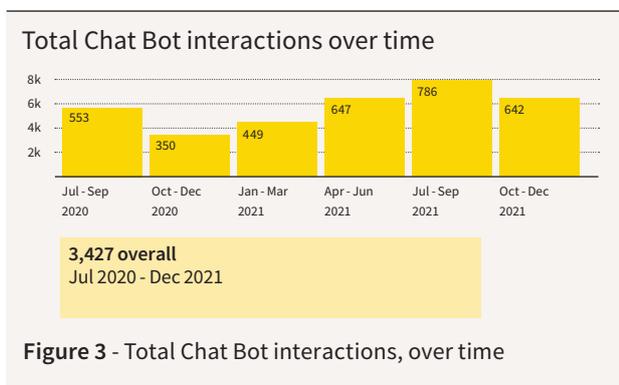


Figure 2 - Average monthly visitors to DSP Help website, over time

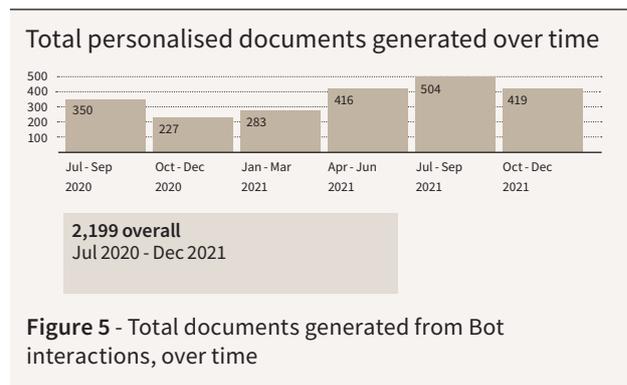
Within the DSP Help website, there is a separate Medical Evidence chatbot, powered by Josef [joseflegal.com](http://joseflegal.com). This ‘bot’ allows users to input data on their/an applicant’s condition to create a personalised evidence kit for their doctor.

Since the launch of DSP Help, there have been over 3,400 recorded interactions with the Bot. This means approximately 11% of website visitors went on to interact with the Chat Bot, and its usage mirrors the website more broadly, with a decline in interactions in late 2020 and steadily increasing number of interactions in 2021. However, unlike website visits, the average Bot interactions declined in the final quarter of 2021. Overall Chat Bot interactions increased 40% over time with an average of 151 per month in Year One and 210 per month in Year Two.

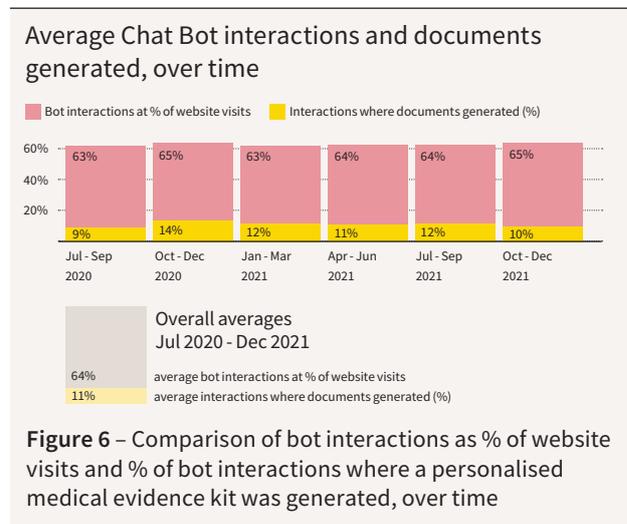


A critical feature of the Bot interactions is the ability to generate documents at the conclusion of the session, representing personalised medical evidence kits that can be used in applications. Since being launched, nearly 2200 documents were generated by those who interacted with the Bot.

This represents an average of 126 documents per month over the course of the project, fluctuating from lows of 60-80 in late 2020 to peaks of 150-170 in mid 2021.



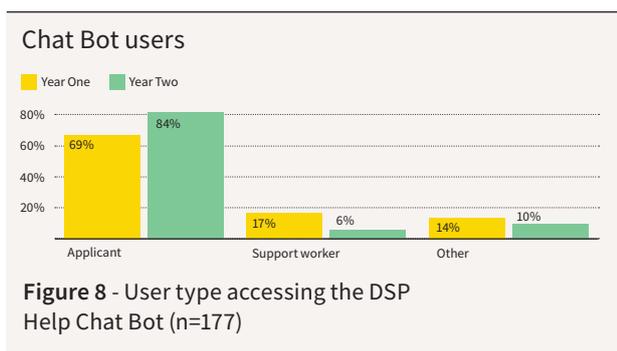
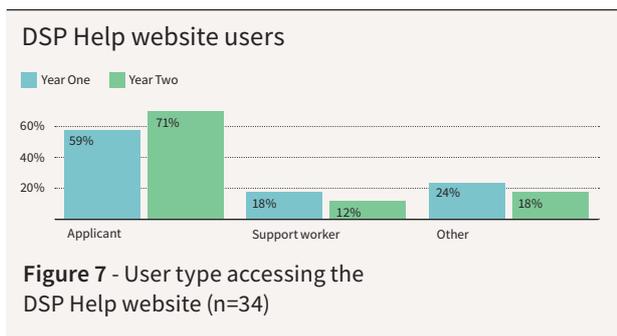
It would be expected that not all users of the website would engage with the Bot and not all Bot interactions would result in documents being generated as some users would only be exploring the resources. Therefore, it is important to note that even though the number of Bot interactions fluctuated over time, the proportion of website users who interacted with the Bot and the number of Bot interactions where a personalised document was generated remained stable throughout the project period. Between 9 – 14% of website users interacted with the Chat Bot and 63-65% of those interactions led to a personalised evidence kit being generated. This suggests that a majority of all those who engaged with the Bot were seeking to gather evidence for an application.



## Use of DSP Help - Demographics

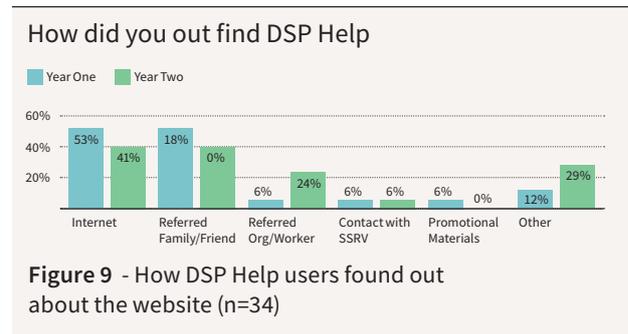
The provision of demographic information was not a pre-requisite to accessing the DSP Help website and this information was only captured through the optional feedback mechanisms built into the website and the Chat Bot. As such, limited information is available on who accessed the resource. Between 34 - 64 visitors to the website responded to the various website feedback questions, including on who they were and how they found out about DSP Help (less than 1% of the total users). A larger proportion (177 people, or 5%) of the Chat Bot users provided feedback and indicated who they were.

Based on this, we know that around 65% of website users were applicants themselves while a further 15% were support workers and 20% were 'other', likely family members and health professionals. This varied slightly between Year One and 2, with more applicants responding in Year Two. Unsurprisingly, applicants were more likely to utilise the Medical Evidence Chat Bot in both years (69 – 84%). This information, broken down by Year One and 2, is conveyed in the charts below.



The DSP Help general users were also asked how they found out about the website and while it only represents a small sample, it is instructive that the largest change in the second year was the reduced proportion who had searched the internet or been referred by a family member/friend and increase in those who had been referred by an organisation/ support worker or found it through 'other' means.

This suggests that awareness among workers and support services has increased and they are referring their clients.



## Experience of Online Resource Users – Feedback

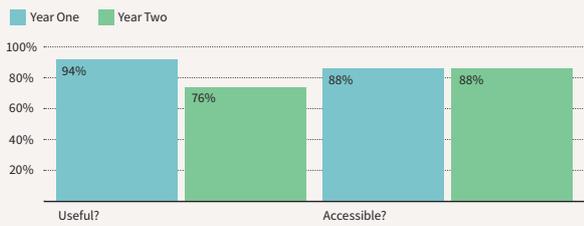
Feedback on the DSP Help online resource was gathered in two ways:

1. Users were provided the option to complete a short survey on the website itself and another survey after using the Medical Evidence Chat Bot.
2. A sample of users who consented to be followed up on their survey feedback were contacted to provide additional feedback to the evaluation consultant.

Only 34 – 64 users of the website users responded to the various feedback questions on their experience (less than 1% of the total users), while a larger number (177 people, or 5%) of users provided feedback on the Chat Bot.

While these are small sample sizes, they provide an indication of the value of the resources to users. Across the two years, over 80% of website users who provided feedback found it both useful and accessible. While still positive, there was a decline in the proportion who found the website useful in Year Two, while the accessibility response was exactly the same over both years.

### Did you find this resource...

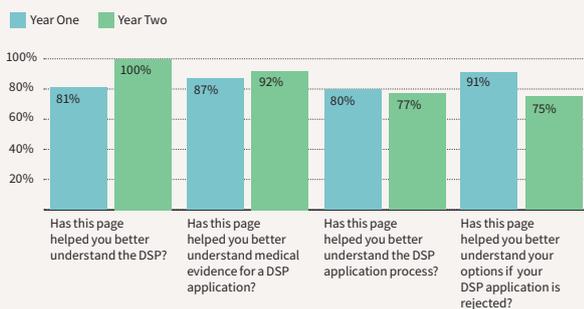


**Figure 10** - Proportion of Users who found the DSP Help resource useful and accessible (n=34)

When asked specifically whether navigating DSP Help had helped their understanding around the DSP, the medical evidence required and the application process, the response was equally positive. For these questions, the results for Year One and Two are presented and it should be noted that there were more respondents in Year Two (approx. 35 – 45 compared to 15 – 25 in Year One)

- 100% of respondents in Year Two felt the website helped them better understand the DSP, a moderate increase from 81% in Year One
- Around 90% in both years felt the Website helped them better understand the medical evidence required
- 77% felt the page helped them better understand the DSP application process, a slight decrease from 80% in Year One
- 75% felt the page helped them better understand their options if an application was rejected, a moderate decrease from 91% in Year One.

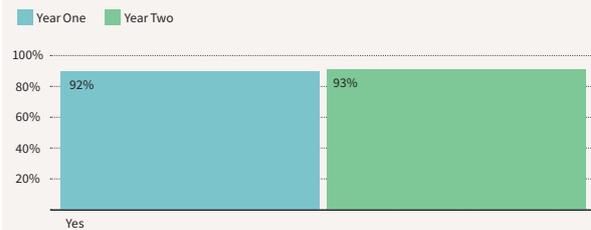
### Proportion of users who responded “Yes” to the following questions



**Figure 11** - Proportion of users who responded “Yes” to the following questions

DSP Help visitors who used the Medical Evidence Chat Bot were also asked to provide specific feedback on their experience. As noted, a larger number of users responded to this survey and the responses indicate that over 90% found the tool beneficial for gathering medical evidence.

### Has this tool helped you understand and gather medical evidence?



**Figure 12** - Proportion of users who believed the Bot helped them understand and gather medical evidence (n=177)

Open-ended comments from website users and the evaluation interviews provided more detailed feedback on how users found the resource. The vast majority of comments were complimentary of the resource, praising the generation of documents that can be taken to medical professionals, the supportive language used, and the ease of navigating the tool.

*“Many people with severe health conditions, who cannot work, are being disadvantaged, not due to their legitimate incapacity to work, but due to the government ensuring criteria cannot be obtained [met]... Improved tool ideas, as this, can assist doctors immensely as they only have time to complete forms (tick boxes & sign) and I find achieving just that a struggle. This is a saviour for people claiming DSP... I'd suggest you share this great resource with other agencies "nationally". Hats off to you!”*  
 – Applicant, website feedback

*“I have to say, well done and thank you so very much. I now have a document to take to my doctor that I have been struggling to put together for over 6 years. What a great effort has gone into this and such a valuable resource to have available. Even if I could find room for improvement I would hesitate to say. It was very easy to follow and complete, even with me being ADHD, Cognitive and sight challenged. And the end result (document) compiled was just as impressive.”*  
 – Applicant, website feedback

*“This is a fantastic tool. I've been so overwhelmed in trying to apply for DSP and this tool has helped so much. It makes me feel supported. Thank you. I don't know if it needs improving.”* – Applicant, website feedback

*“This website is extremely well presented and easy to understand. The medical bot is a tool that I plan to use with a client in the coming days and will provide a wonderful reference point for them when they attend their doctor for assistance in seeking the DSP. Thank you for sharing this information and setting it out in a way that is accessible for a large majority of people.”*  
 – Support worker, website feedback

Three people who had used the website (one applicant and two family members) completed a follow up interview to share their experiences. All three had spent a lot of time navigating the DSP and found the website to be very straightforward and helpful, particularly as a first port of call for someone looking to apply for the DSP. None of the three had yet had a successful application to the DSP and did not feel the website had made much difference to their own understanding or ability to make a successful application. They noted that the language used, the links and the examples were all valuable and would be beneficial to others. They felt that the website was a starting point and even the most adept applicant or support person would still benefit from speaking to someone who has been through the application process (not necessarily a legal or social worker).

*“It was very well laid out, easy to follow and you knew what was being asked of you, but it did not make too much difference for me because I already knew quite a lot about both the eligibility criteria and evidence required but it was still good to know it was all there. I don’t think anyone is comfortable navigating systems like the DSP application without support whether it’s a website or preferably a person helping you. In the end, I decided I am not going to apply, not confident I’ll get support and it was so difficult chasing up medical evidence during covid restrictions. I didn’t contact SSRV because I thought I wouldn’t be eligible as I was not in Victoria and couldn’t find an equivalent in NSW” – Applicant, interview feedback*

*“My sister was on DSP for 20 years and got cut off because she received some additional money from overseas and we got incorrect information about whether that would put her over the threshold. It’s an extremely difficult, complicated process so I went online for assistance. [DSP Help] is a really useful starting point but then I found a private Facebook group that ended up being the thing that helped the most. I took templates from them and DSP Help to adapt and took to various practitioners. The Facebook group understands the process but also understand experience of applicants and group members were responsive with timely, targeted info when I needed it” – Family member of applicant, interview feedback*

*“[Without DSP Help] I would have kept looking online for hours, hadn’t found anything as useful. At the end of the day, what I really needed after all the reading was to speak with someone who could unpack the application process for me, e.g. telling me to be careful what I put in this field or to make sure I put x,y,z in that field” – Family member of applicant, interview feedback*

Users completing the feedback survey on the DSP Help website identified opportunities for improving DSP Help, both around the functionality and content. Feedback from Year One was used to refine the website and tool and a sample of feedback from Year Two is provided below:

*“Have a form for specialists to complete because they never include all relevant information in a letter” – Applicant, website feedback*

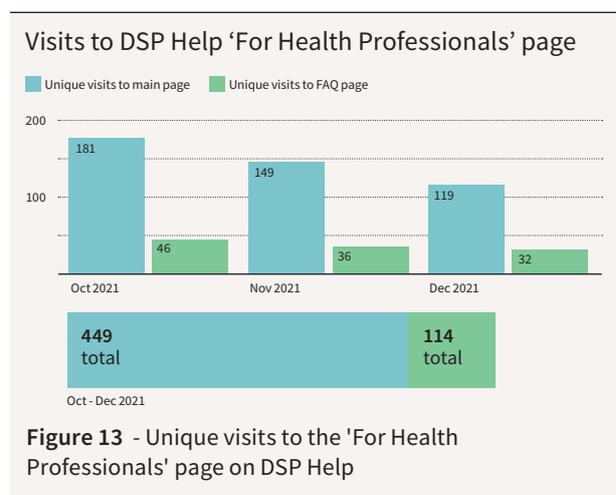
*“There are many diagnosed conditions that are severe but do not meet the manifest category. If these could be grouped into listings that allow for a more specific and targeted kit it would make the information much more relevant to individual circumstances.” – Applicant, website feedback*

*“Leave examples for “Please describe how this affects your day-to-day life and your ability to work” so it’s easier to respond to” – Family member, website feedback*

## Experience of Health Professionals – DSP Help use and Feedback

As noted, there was significant consultation undertaken by Paper Giant in Year Two with health professionals and a specific page was added for them to the DSP Help website in late 2021.

Over the final 3 months of 2021, the main page attracted 449 unique views and there were 114 views of the Frequently Asked Questions subpage. It is difficult to gauge the level of interest and need from data over three months, but these numbers demonstrate at least 400 health professionals have viewed the site and 25% of them were seeking further clarification/answers to questions via the FAQs.



**Figure 13** - Unique visits to the 'For Health Professionals' page on DSP Help

Feedback from health professionals on the DSP Help resource and their dedicated page was sought in three ways:

1. All users were provided the option to complete a short survey on the website itself.
2. There was a feedback form on the dedicated page for health professionals with a single question “Has this page helped you better understand how to create medical evidence?”
3. A sample of health professionals involved in the consultations for developing the Health Professionals page were invited to discuss their feedback with the evaluation consultant.

As noted, there was an option to identify yourself as Applicant, Support Worker or Other in the general website survey but there was not a specific ‘health professional’ category. As such, it was not possible to distinguish the responses of health professionals from other or support worker.

Unfortunately, only one health professional responded to the feedback question on their dedicated page. That person selected ‘yes’ but obviously it is not possible to draw any conclusions from this on whether the resource helped health professionals create medical evidence.

There was more detail on how the resource has and will be useful provided by four health professionals who agreed to provide further feedback for the evaluation. Two GPs, a clinical psychologist and a representative of the Australian Association of Psychologists Inc. completed an interview with the evaluation consultant. All four were involved in the consultations with Paper Giant to develop the online resource and were highly satisfied with both the page for health professionals and the DSP Help resource overall.

*“I was really impressed [by the DSP Help page for health professionals]. It will certainly make it easier for me to provide support to psychologists who are confused by the DSP process. I will be able to direct them to the resource directly as it is very simple and easy to use.”*  
– AAPI representative

*“I looked at all the different parts of the website and it felt very organised. Really like the FAQs on the website because you can send applicants to that resource before they get to you or once they come to you for an initial consult.”* – GP

*“I like the layout, that it’s simple and clear, uses supportive language, focuses on key points, generates documents and has working links to the Impairment Tables”* – GP

All four health professionals indicated that the DSP is time-consuming, challenging and complex for them and so felt the resource would be beneficial to a wide array of health professionals and those at any stage of their career. They felt the suggested letter templates and wording would be widely used by time-poor professionals and appreciated that documents could be generated/printed for further discussion with their clients.

*“For a practitioner, it can be very time consuming to provide supporting documentation and requires a multidisciplinary approach as applicants often have co-morbidities. All psychologists will benefit from the templates but they will be particularly helpful for newer practitioners and psychologists who work in private practice where they don’t work in multidisciplinary teams who can support them. We don’t really get taught about DSP in our training / education [as psychologists] so unless you have work experience, you won’t have much knowledge and confidence so handy to have resources. The DSP can be quite hard to navigate, it is complex and doesn’t take cultural factors into consideration. For example, it can be hard to get access to complete medical history and records in remote Aboriginal areas and so have to rely on observational records and be careful about labelling someone ‘intellectually disabled’ in a western, Anglo context because there will be flow on effects from them in their community.”* – Clinical psychologist

*“I think all medical practitioners (GPs, psychologists, physios, speech therapists) can have DSP Help as a link on their desktop. It would help both new and experienced health doctors because we just don’t get much training on [the DSP] at a student level and it wouldn’t help teaching it at the time of initial training because you need to go through experience of completing the applications to fully appreciate it.”* - GP

*“It’s good that professional can look at website but then also print it out and discuss with patient so they own it, so good shared tool for a GP and patient”* – GP

*“[DSP Help] has made it much easier to know what is expected and required for clients which will reduce the time spent on reports for psychologists.”*  
– AAPI representative

All four felt that the resource would be extremely helpful for their patients/clients and one GP provided an example of how her client used the resource to make a successful application.

*“I have a patient who has extreme obesity and mental health issues and I could push her through for psychiatry but wouldn't get her many points so we focused on obesity which is also more objectively measurable. I went onto DSP Help website and pulled out a resource around obesity which produced a simple 1 page document that she could use for her application. It was rejected on first attempt but through this [the DSP Help website], the patient really got to learn the process and how there's an automatic rejection on first attempt so she advocated for herself to Centrelink on what grounds she was rejected and how much discretion was applied. She was accidentally forwarded material that proved it was discretionary so she challenged it and was ultimately successful in getting on DSP.” – GP recounting client experience*

The health professionals felt that very little needed to be improved/modified in the overall resource (beyond ensuring information and links are kept up to date) and that it was pitched well to applicants, though some would still require support to work through the site where there are technology access challenges or cognitive limitations.

*“If the patient has internet access and literacy to understand [the website], will be very empowering to drive it through themselves” – GP*

*“In my experience, many clients do not have regular access to internet or computers so would have a lot of difficulty accessing this information. Some are also illiterate or cognitively impaired so would be limited in how much use they could get from the resource. That is why it is so important for us to distribute this to health care workers and others in the disability support field so that they can support clients to navigate this tricky process.” – AAPI representative*

The health professionals were unanimous in wanting the DSP Help resource maintained, expanded and be more widely promoted. They also noted that the project overall was valuable and should be replicated.

*“The interprofessional learning enabled by a project like this is great where we not only work across health but also social workers + lawyers working together. I hope participating in this project sows the seeds for others to work on similar projects” – GP*

*“The only thing that needs to be improved is the distribution/dissemination of information to all the sectors involved so that the resource is used to its full potential. We are happy to support this” – AAPI representative*

*“I thought it was a really great process to be involved with. DSP challenges are not just a medical problem, it's a social problem and this project pulled the views of many together to produce something that's been driven by community and not government driven. It can be frustrating and demoralising witnessing these systemic issues and feel helpless to affect them and here I could be an instrument of change rather than working one on one with patients in my consultations. I've even had a few case workers or social workers who don't know me too well and contact me and recommend the website to use!” – GP*

*“Probably best to pitch it to patients and social workers first but then to College of GPs because that's where GPs go to get info and pull out templates/resources. It would be very useful if it was endorsed and/or linked to RACGP.” – GP*



## Promotions & Communications

Promotions and communications in Year Two of the project were very much an extension and continuation of Year One with slight modifications in response to new objectives. Notably, doctors and other health workers were identified as a key audience – given their focus in the human-centred design process – in addition to those identified in the first year.

Doctors proved to be a difficult audience to reach. While there was good engagement with particular organisations and amongst specific stakeholders, doctors in general showed a mixed interest in the DSP. There were a couple of observations made around this:

1. The appetite for involvement with the DSP tended to vary between different cohorts of doctors. For example, those practising in community health were generally more engaged with the issue and more willing to be part of the project than private doctors. This was by no means universal.
2. In 2021, COVID-19 vaccination was a key focus for doctors, especially general practitioners. During one meeting with a stakeholder the DSP Help Community Lawyer was informed that it was very unlikely the doctors they were working with would be interested in talking about DSP issues until at least February 2022 when the core vaccination drive was predicted to have peaked.

Despite these challenges, the project continued its push to leverage contacts within peak bodies and supportive stakeholders to get the message out about DSP Help and the resources developed to help doctors and health workers. Towards the end of the project a community legal education session was planned and delivered, with the intention of not only upskilling health and other community workers in relation to the DSP, but also raising the profile of the DSP Help online resource. Targeted communications pushes were made to doctors and health workers via their peak bodies and associations. More detail about this session is included below in the community legal education section of this report.

### Social Media and Newsletter

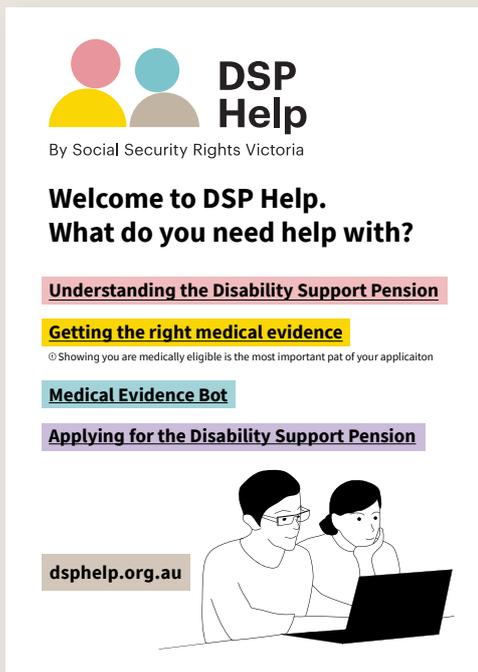
2021 saw the introduction of SSRV's newsletter, a monthly e-bulletin for community workers, stakeholders, and other friends of the organisation. The newsletter provided a convenient method for driving interaction with DSP Help and engaging organisations within SSRV's sphere of influence for other activities, such as community legal education and other more informal presentations. A DSP Help related article appeared in the majority of newsletter editions throughout 2021, and this is continuing into 2022.

Since Year One, SSRV has also placed greater importance on engaging with Centrelink recipients, DSP applicants and other stakeholders through social media. Information about DSP Help, how it can be used to assist with the DSP, and how to get further support was regularly posted to Facebook and other social media channels.

### Network Engagement

In Year One stakeholder interest in the project was high. SSRV was able to leverage this to spread the message beyond their immediate sphere. In Year Two this has again been an important messaging channel with peak bodies again helping to spread awareness.

Of particular note, Economic Justice Australia and Community Legal Centres Queensland collaborated with the DSP Help Project to organise and present a workshop about the DSP and the challenges applicants face when trying to access the pension. On top of being a highlight of the community legal education activities the project has delivered this year (discussed further in the relevant section of this report) the session had the added benefit of spreading awareness amongst a wider audience, and particularly an audience outside Victoria. Several conversations and opportunities flowed in part from this awareness, including engagement with advocacy services in Western Australia and Canberra.



Promotional postcard

## Proposed Campaign and Assets

As Paper Giant discuss above, research and experience has made it clear that visibility is an important factor in uptake and use of a resource like DSP Help, and especially so amongst a group of time poor professionals such as doctors. As such, one of the outcomes from the human-centred design process was the design and creation of a campaign and associated assets to raise awareness of the project and resources amongst doctors and other health workers.

Due to the timeframes of the project implementation of this awareness campaign has not been explored fully, however, SSRV hopes to be able to further pursue this in the future as part of the form DSP Help takes beyond the life of this project specifically.

## Other Promotional Materials

In Year One the DSP Help Project produced a series of postcards and other promotional materials in both hardcopy and electronic format. The intention was to have these distributed to stakeholders and services regularly interacting with DSP applicants in order to raise awareness of DSP Help and the assistance it offers.

Due to pandemic restrictions in place during 2020 this approach was altered. Physical resources were deprioritised, while electronic resources were used more extensively. It was envisioned the hardcopy resources would become more important in 2021 with a return to face-to-face servicing in most of these organisations. Unfortunately, with restrictions reintroduced for much of 2021 opportunities to distribute these materials were limited.

Nevertheless, the DSP Help Project did update these to reflect changes to the service and project, continued to focus on electronic distribution, and envisions the physical resources produced being used more extensively in SSRV's activities into 2022 and beyond.

# Legal Services to Individuals

In Year Two of the DSP Help Project, legal services continued to be offered through a wrap-around model where the legal service and DSP Help online resource could complement and support each other. For full details of the design of the legal service please see the Year One Report.

## Clinic Model

The most notable change to DSP Help’s legal service occurred in September when SSRV moved to a “clinic model” of service delivery.

Prior to the change clients would access SSRV via the General Advice Line (or be referred by a worker using the Worker Help Line). Clients appropriate for the DSP Help Legal Service would be triaged to the DSP Help Community Lawyer on a needs basis. Further assistance services, including casework and representation, could develop out of these advice services if the matter fit within SSRV’s eligibility criteria.

Following the change, the General Advice Line (GAL) was replaced with a Legal Assistance Line (LAL), an intake and triage system where clients would call and be booked into appointments with an appropriate lawyer or clinic. Most SSRV projects and initiatives included a clinic offering so, for example, matters involving family violence could be triaged to the Family Violence Clinic, while matters where an integrated approach may be appropriate could be triaged to the Integrated Services Project Clinic.

The DSP Help Project was able to offer four to five appointments by running a clinic one day a week. Matters triaged to the DSP Help Clinic all related to DSP eligibility. Most were post rejection, so where an adverse decision had been made and the client was considering or pursuing an appeal, though some were clients seeking advice before applying.

It should be noted that while a formal human-centred design process was not undertaken in the same way as for the DSP Help online resource, the design of the clinic model incorporated human-centred design principles in several ways:

- The driving impetus for moving to a clinic model was the experience of SSRV’s users, and was aimed at addressing the challenges and issues they faced in accessing assistance.
- Feedback from users was collected formally through surveys and interviews with clients. This was integral to designing the clinic model.
- The process was iterative in the same way designing DSP Help was. Since beginning, two reviews of the clinic model have been undertaken

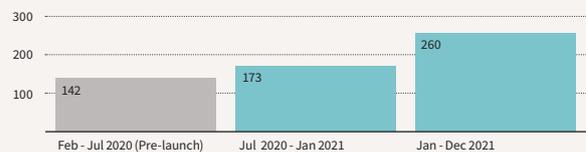
with modifications suggested and implemented at each. For example, the timing and number of appointments available each day has been altered to better balance client needs with SSRV’s ability to provide services.

## Delivery

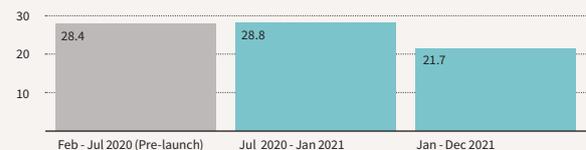
For consistency, all enquiries related to DSP matters are reported together in the charts below with no distinction made between GAL and LAL. Three periods are covered:

- The period from the start of the project until the launch of the DSP Help website (February – July 2020)
- The first six months after the launch (July 2020 – January 2021)
- The subsequent 12 months of the project representing Year Two (January – December 2021)

Number of enquiries about DSP



Average DSP enquiries per month



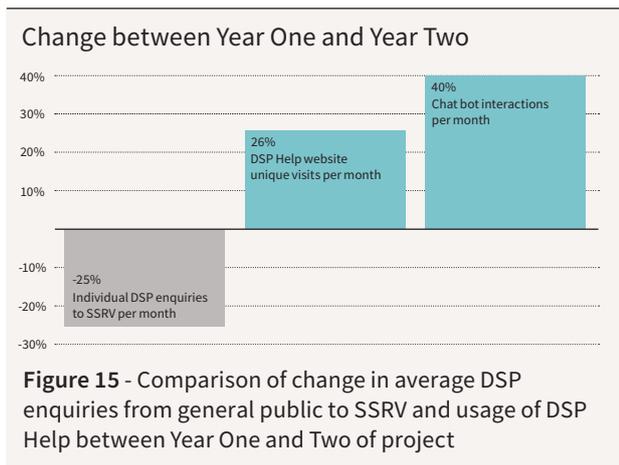
**Figure 14** - Enquiries from individuals to SSRV related to DSP matters (February 2020 - January 2021). First chart: All matters relating to the DSP. Second chart: Average number of enquires per month relating to the DSP.

These enquiry figures indicate that there was no substantial change in the average number of enquiries about the DSP in the few months after the launch of DSP Help but the average numbers declined in Year Two.

Breaking down the data further, it was clear that there was an uptick in calls from the public about DSP in July – September 2021 immediately after the launch of the DSP (an average of 37 calls per month compared to 28 pre-launch), however, this

dropped to 20 calls per month in the October – December 2020 period. As with the DSP Help online usage trends, this likely reflects the media and promotion around DSP Help in July and August 2020 and the subsequent decline towards the end of the year also coincides with a drop off in calls about all matters to SSRV around the end of year holiday period.

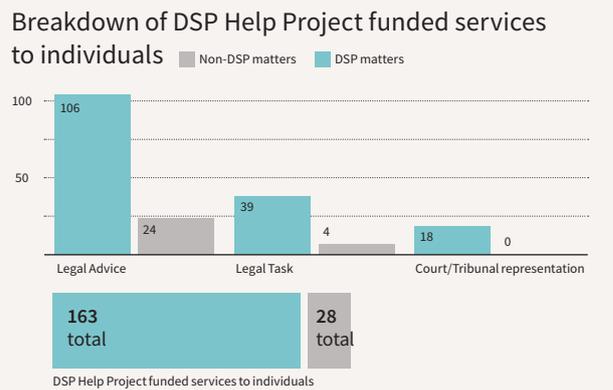
The ~25% drop in average monthly enquiries from individuals in Year Two is likely due to several factors. For example, individuals who would otherwise call about the DSP specifically may have called about pandemic leave payments or other social security issues (for example, Robodebt and Jobkeeper) that were of greater concern to them. It may also reflect the increase in usage of the DSP Help online resources with website visits up 26% and Chat Bot interactions up 40% in Year Two. In other words, it is possible that many of the individuals who would have contacted SSRV about a DSP matter are now working through their issues using the DSP Help online resources and do not require further legal assistance.



**Figure 15** - Comparison of change in average DSP enquiries from general public to SSRV and usage of DSP Help between Year One and Two of project

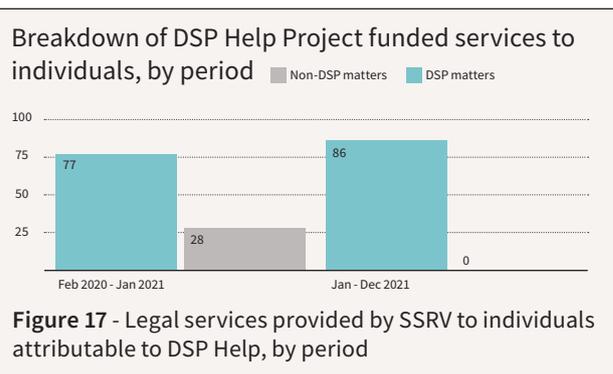
Flowing on from these enquiries and subsequent referrals into the DSP Help Legal Service, DSP Lawyers delivered a total of 163 legal services to individuals in support of their DSP matter. These included 106 legal advices, 39 legal tasks (discrete legal services greater than advice but short of ongoing representation), and 18 representations since the DSP Help Project began in February 2020.

As noted previously, the DSP Help project also contributed to non-DSP related services and casework. This is reflected in the chart below.



**Figure 16** - Legal services provided to individuals, attributable to DSP Help between February 2020 and December 2021

As the next chart demonstrates, slightly fewer legal services were provided in Year Two compared to Year One although there were more DSP specific legal services provided in Year Two. After the launch of the DSP Help online resource in mid-July 2020, as shown in the graph below.



**Figure 17** - Legal services provided by SSRV to individuals attributable to DSP Help, by period

## Demographics of Individuals who Received Legal Assistance

The demographics of individuals who received legal assistance from the DSP Help Project was also compared against those who received legal assistance for DSP matters prior to DSP Help.

The results, as shown in the table below, indicate that the vulnerability or mix of clients has not changed significantly since DSP Help was launched:

1. There was very little difference based on gender, Aboriginal Torres Strait Islander status or the risk of homelessness.
2. There was a slight difference based on family violence with post-DSP Help clients 10% less likely to be experiencing family violence.

Table 1 - Demographic characteristics of clients who received legal assistance for DSP matters (excluded those where characteristic was 'not recorded/unknown')

|  | Pre-DSP Help<br>Jul 2019 - Jun 2020 | Post-DSP Help<br>Jul 2020 - Dec 2021 |
|--|-------------------------------------|--------------------------------------|
| Total clients who received DSP services      | 335                                 | 505                                  |
| <b>Gender</b>                                |                                     |                                      |
| Female                                       | 53%                                 | 51%                                  |
| Male   | 47%                                 | 49%                                  |
| <b>Aboriginal and Torres Strait Islander</b> |                                     |                                      |
| Yes  | 5%                                  | 4%                                   |
| No   | 95%                                 | 96%                                  |
| <b>Income level</b>                          |                                     |                                      |
| Nil income                                   | 11%                                 | 7%                                   |
| Under \$400 weekly                           | 80%                                 | 75%                                  |
| \$400 - \$800 weekly                         | 7%                                  | 17%                                  |
| Over \$800 weekly                            | 2%                                  | 2%                                   |
| <b>Experiencing family violence</b>          |                                     |                                      |
| Yes  | 28%                                 | 18%                                  |
| At risk                                      | 0%                                  | 0%                                   |
| No   | 72%                                 | 82%                                  |
| <b>Experiencing homelessness</b>             |                                     |                                      |
| Yes  | 2%                                  | 3%                                   |
| At risk                                      | 6%                                  | 6%                                   |
| No   | 92%                                 | 91%                                  |

## Feedback of Individuals who Received Legal Assistance

Over the course of the project, SSRV collected immediate feedback from 136 individuals (65 in Year One, 71 in Year Two) about their enquiry. **99% of these individuals indicated the service was both 'Accessible' and 'Useful'.**

A follow up phone survey of SSRV's clients was conducted in 2021. There were 10 responses from clients who received support from the DSP Help project in the October – December 2021 quarter. The results from these clients confirmed that their experience with SSRV was mostly positive and that they felt they benefited from the service.

When asked about their experience with the service, 60% agreed that it was easy to contact SSRV when they needed help, however, 30% disagreed with this. Once

they got through, however 90% agreed that they felt safe and secure using SSRV and 80% agreed that the service cared about their individual needs. Only four of the clients (40%) indicated they had any applicable personal or cultural needs and of those four, three felt they were met by SSRV. One area where a large proportion actively disagreed (40%) was when asked if they received support to manage any stress or anxiety. However, when asked if they would recommend SSRV to other people, 100% of clients stated they would with 50% 'strongly agreeing'.

How much do you agree with the following about SSRV's service...

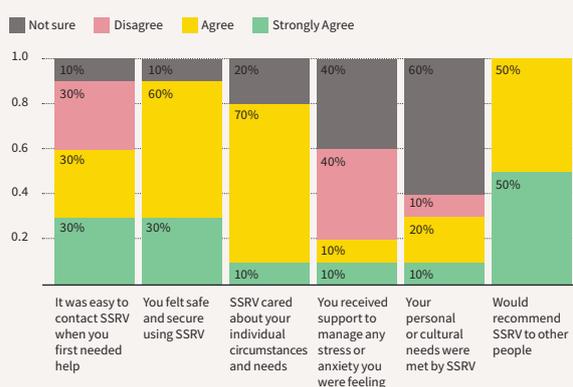
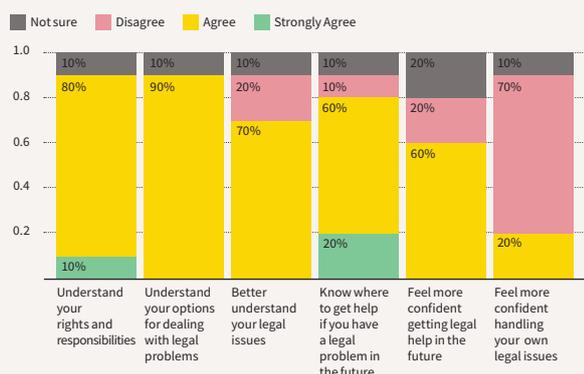


Figure 18 - Experience of DSP Help clients who responded to follow up survey (n=10)

When asked about the outcomes for them, clients were positive about the legal support provided:

- 90% agreed that the service helped them understand their rights and responsibilities, as well as their options for their DSP matter
- 70% agreed the service helped them better understand their matter, although 20% did not agree with this
- A further 80% now knew where to get help in future, although only 60% felt confident getting that help and 20% felt more confident handling their own legal issue in future.

### How much do you agree with the following about whether SSRV's support helped you...



**Figure 19** - Experience of DSP Help clients who responded to follow up survey (n=10)

SSRV also sought to track the overall demand for services flowing from DSP Help and to date, all internal referrals to the project were able to be addressed and there was no unmet demand for legal services. This is largely a result of the structure of the project. Not all DSP matters were referred to the DSP Help legal service; SSRV's other advice lines, projects and lawyers continue to provide advice and casework in relation to the DSP.

### Case Study - Paul

Paul\* is living with severe mental health difficulties. He has been experiencing these for more than 25 years. Paul was supported financially by his family, but due to a change in circumstances decided to apply for the DSP in 2020. Paul was supported by his daughter Harlow\* throughout this process.

Paul's application was initially rejected by Centrelink and then by an Authorised Review Officer, but with Harlow's help he was successful at the Social Services and Child Support Division of the Administrative Tribunal. The Tribunal accepted Paul's mental health conditions were fully diagnosed, treated and stabilised and warranted 20 points under the Impairment Tables.

However, the Department of Social Services elected to appeal this decision to the Tribunal's General Division. Now having engage in a contested process where the Department is represented by a lawyer, Harlow realised she was out of her depth and sought assistance from SSRV.

The DSP Help Community Lawyer began assisting Paul by first reviewing the decision. She could not see an obvious reason the Department had elected to appeal this decision. After explaining this to Paul and Harlow she decided to take the matter on and provide legal representation at the General Division.

Through this process it became clear the Department was not satisfied with the evidence in support of the initial Tribunal decision. The Department's lawyer wanted Paul to undergo a psychiatric assessment. The DSP Help Community Lawyer took Paul through this option. Paul decided that despite this potentially being a traumatic experience, he would prefer to undergo the assessment. The DSP Help Community Lawyer facilitated this.

Following the assessment, the Department decided to withdraw their appeal. While no reason was given, presumably they were then satisfied with the evidentiary basis for Paul's eligibility.

While this was a positive outcome, it should be noted that Paul was subjected to unneeded stress and pressure throughout this lengthy process, having to make decisions with limited information and potentially exposing himself to trauma. Without SSRV's assistance with Tribunal proceedings, Paul and Harlow would not have been able to advocate effectively. This case study also highlights the importance of being able to provide the relevant medical evidence in the form required by decision makers.

In a debrief with the DSP Help Community Lawyer, Harlow made the following comments:

*This is such amazing news and dad and I could not be more happy. This is such a relief and such a huge pressure off our shoulders. I absolutely cannot thank you enough for all your help and support it was invaluable. Again, words cannot express how thankful we are for your support in this matter.*

\*Names have been changed.

## Case Study - Curbert

Cubert\* is a young man living with Autism Spectrum Disorder. Cubert is supported day to day by his father, Philip. Cubert has never held full time employment, though he was able to complete tertiary education in a creative field he enjoys. Cubert works part time recording small events and as a crossing supervisor, though due to the COVID-19 pandemic and restrictions this work has been limited in recent years.

Philip reached out to SSRV to get Cubert assistance in accessing the DSP. Cubert and Philip had lodged an application, but it was rejected both at the Centrelink original decision and Authorised Review Officer levels. Philip was seeking someone to assist Cubert in taking this matter to the Administrative Appeals Tribunal, or to find another way Cubert could access the DSP.

One of Philip's main concerns was that Cubert would not be able to support himself once Philip was no longer able to help. Cubert lacked the ability to improve his work capacity, and while he had some work, this was never going to be enough to be self-sufficient without income support. Philip saw getting Cubert access to the DSP and the National Disability Insurance Scheme (NDIS) as essential in letting him live his best possible life.

The DSP Help Community Lawyer assessed the matter and determined that this was not a matter of poor-quality medical evidence leading to an unfavourable decision. Rather, the evidence supported eligibility in multiple ways and Centrelink had simply applied the evidence to the rules poorly. Accordingly, this was not a matter where the DSP Help online resource would be sufficient, and the wrap around legal service was engaged.

The DSP Help Community Lawyer represented Cubert at the Administrative Appeals Tribunal, working with him and Philip to present the medical evidence in a way that makes Cubert's eligibility clear, while guiding them through the procedural aspects of the Tribunal process.

The Tribunal decided that Cubert was in fact eligible for the DSP. This decision has now been implemented and the payment granted.

During a debrief with the DSP Help Community Lawyer, Philip provided the following comments:

*Your advice and preparatory work prior to the AAT hearing has contributed extensively to this positive outcome and as I have said many times - thank you - to you, your colleagues and the SSRV for your guidance. Your extensive knowledge of the legislation around disability and implementation procedures, your passion for the needs of people with disabilities and your attention to detail is outstanding.*

\*Names have been changed.



# Legal Services to Support Workers and Professionals

As in Year One, the DSP Help Project was able to integrate with and contribute to SSRV’s broader offering of services. Specifically, the project contributed one day a week to the Worker Help Line service, providing secondary consultation and accepting referrals primarily from community workers (such as other community legal centre staff, financial counsellors, disability advocates, social workers).

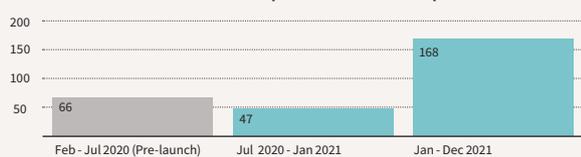
As with any on demand telephone advice service, it is difficult to predict what callers would require assistance with. Many calls were about the DSP, though many were also about other issues including debts, mutual obligations, and eligibility for other payments and benefits. This range of enquiries is reflected in the data below.

## Delivery

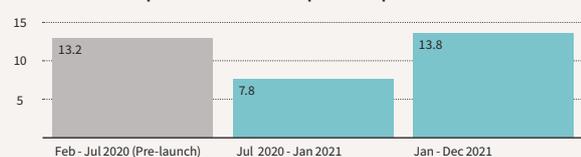
SSRV tracked enquiries to the Worker Help Line that were related to DSP matters and these are presented in the charts below for three periods:

- The period from the start of the project until the launch of the DSP Help website (February – July 2020)
- The first 6 months after the launch (July 2020 – January 2021)
- The subsequent 12 months of the project representing Year Two (January – December 2021)

Number of Workers Help Line DSP enquiries



Workers Help Line DSP enquiries per month



**Figure 20** - Enquiries from workers and professionals to SSRV related to DSP matters (February 2020 - January 2021). First chart: All matters relating to the DSP. Second chart: Average enquires per month relating to DSP eligibility

The enquiry figures indicate there were fewer calls to the SSRV Worker Help Line in the months after the launch of DSP Help, compared to the preceding months. As discussed in the Year One Report, the initial decline in mid-2020 partly reflected broader trends from the COVID-19 pandemic, that is, fewer

applications for the DSP relative to JobSeeker and fewer calls for support from workers / organisations for all matters, not just DSP. For the 2021 calendar year, however, DSP enquiries from workers returned to the pre-launch (and pre-pandemic) level of approximately 13 enquiries per month. This means that the WHL DSP enquiries have increased nearly 80% on average in Year Two compared to the post-launch period of Year One (July – December 2020).

Changes in usage between Year One and Year Two



**Figure 21** - Comparison of change in average DSP enquiries by workers to SSRV and usage of DSP Help between Year One (July – Dec 2020) and Year Two (Jan – Dec 2021) of project

Given that there was also an increase in traffic to the DSP Help website in 2021 without any drop in worker enquiries to SSRV, there are likely to be several potential dynamics at play, for example. it may be that:

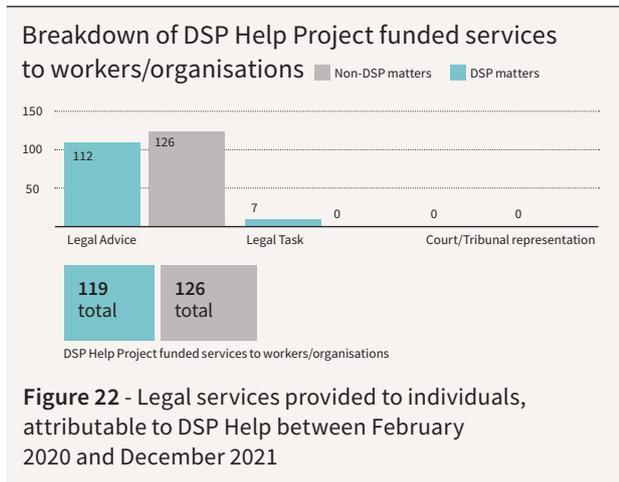
- demand for DSP assistance has increased overall in 2021;
- workers are using the website as a *supplement* to support from SSRV and other legal assistance providers, e.g. before or after a call to a help line; or
- more workers from outside Victoria are utilising the website.

Without knowing the aggregate demand for DSP assistance and the proportion of all DSP Help users who are workers, it’s not possible to conclusively identify which of these (or other) dynamics are most likely. Although it is clear that since traffic to DSP Help has increased in 2021 *and* calls to SSRV’s Worker Help Line have returned to pre-pandemic levels, that demand from workers for *assistance* around DSP applications has increased this year.

The majority of these enquiries to the WHL are secondary consultations and since the DSP Help Project commenced in February 2020, SSRV has

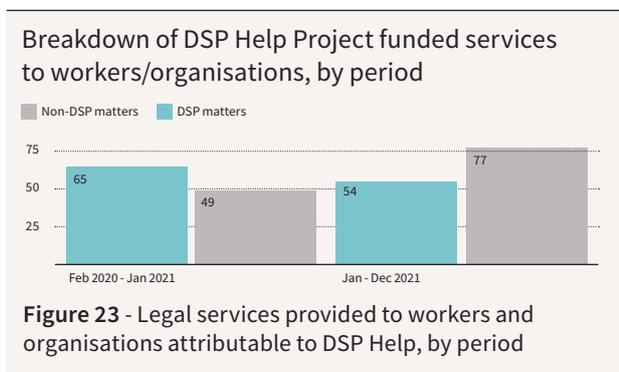
provided a total of 119 legal services to a number of organisations and workers in support of DSP matters. This included 112 secondary consultations and seven legal tasks (for example, reviewing documents and providing a more extensive consultation).

As noted previously, the DSP Help Project also provided advice about non-DSP matters via the Worker Help Line and this is reflected in the following charts.



**Figure 22** - Legal services provided to individuals, attributable to DSP Help between February 2020 and December 2021

This means that in just under two years, the DSP Help Project has contributed a total of 245 legal services to workers and organisations within SSRV’s overall service provision. These were nearly evenly split between DSP and non-DSP matters and, as shown in the chart below, a slight majority (53%) of these services have been provided in Year Two although fewer related to DSP matters. It should be noted that the lawyer working on DSP Help was rostered on the Worker Help Line and the types of enquiries are determined by the caller not by SSRV and therefore she provided advice on non-DSP matters but conversely, other lawyers at SSRV who were rostered on the WHL at other times would have also provided advice on DSP matters outside of the funded project.

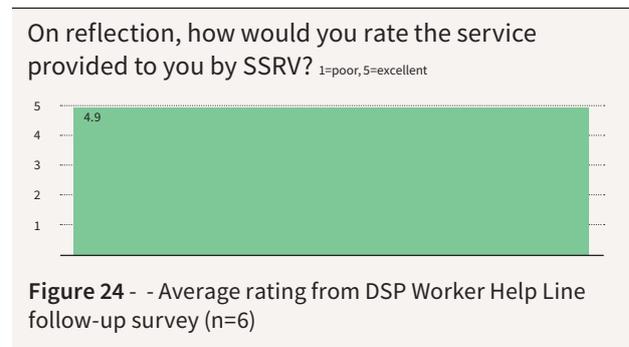


**Figure 23** - Legal services provided to workers and organisations attributable to DSP Help, by period

## Feedback from Workers who Received Legal Assistance

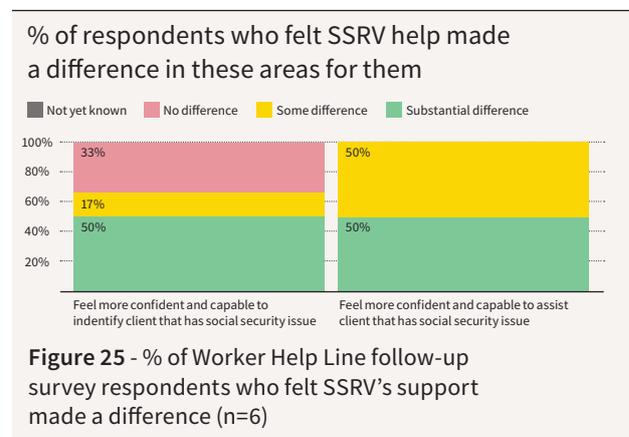
Immediate feedback was recorded from 80% of workers who contacted SSRV for a DSP matter through the DSP Help Project. Nearly all of these workers (over 95%) indicated that they felt the service was ‘Accessible’, ‘Useful’, and ‘Timely’. Importantly, 95% reported that they better understood their matter after speaking with SSRV and 100% felt more confident in dealing with the matter.

SSRV also conducted a follow-up survey with a sample of workers who contacted SSRV for support in 2021. Six workers who had DSP enquiries responded to the survey: three legal workers, one social worker, one financial counsellor and one student welfare officer. All six were unanimous in the quality of SSRV’s support, rating the service as an average of 4.9 out of 5 and 100% stating they would use SSRV again, if needed.



**Figure 24** - Average rating from DSP Worker Help Line follow-up survey (n=6)

In terms of the benefits of the support provided, 67% of the workers stated that SSRV’s support made a difference to their ability to *identify* a client with social security issue and 100% felt it made them more confident to *assist* a client with a social security issue. 50% of the workers felt it made a ‘substantial difference’ to both areas.



**Figure 25** - % of Worker Help Line follow-up survey respondents who felt SSRV’s support made a difference (n=6)

# Community Legal Education

Community legal education (CLE) remained a core activity of SSRV during Year Two of the DSP Help Project. As per SSRV's strategic plan, 'building the capacity and capability of other professionals, enabling them to better identify and assist people experiencing, or who may encounter, social security problems' is a priority for the organisation. As such, CLE remained a priority within the project as well.

In Year Two, CLE targets were set more conservatively than in Year One. The project aimed to deliver four sessions over the year as a minimum, however, the participant target was set at the same level. This reflected the learnings from the first year in that delivering sessions remotely offered flexibility and generally allowed larger audiences than face-to-face sessions traditionally have. Remote sessions were envisioned to remain a key way in which SSRV delivered CLE in 2021 regardless of COVID-19 restrictions because of this flexibility. However, as restrictions were in place this once again became a necessity.

In addition to the sessions described below, an additional session facilitated by Financial Counselling Victoria as part of their annual conference was planned to be delivered within the project. This was originally planned for October 2021 but was postponed due to COVID-19 restrictions to February 2022. Sadly, the conference was again postponed to September 2022 due to rising case numbers and now falls outside the project's timeframes. SSRV is still intending to contribute a session covering the DSP at this conference in another capacity.

## Delivery

Over the two years, eight CLE sessions have been delivered by the DSP Help Project to provide legal education around DSP and promote DSP Help. These sessions were attended by approximately 245 attendees:<sup>1</sup>

| Session  | Timing         | Attendees | Mix of attendees   |
|--|----------------|-----------|--|
| 1. Financial Counselling Victoria Centrelink Working Group       | August 2020    | 23        | Mainly financial counsellors and lawyers   |
| 2. Monash Health   | September 2020 | 25        | Social workers and health workers  |
| 3. Disability Advocacy Resource Unit                             | October 2020   | 40        | Social workers and disability advocates  |
| 4. Northern Health   | December 2020  | 25        | Social workers and health workers  |
| 5. Economic Justice Australia/Community Legal Centres Queensland | June 2021      | 95        | Community lawyers and other community workers including social workers and advocates |
| 6. Action on Disability within Ethnic Communities                | August 2021    | 8         | Disability advocates   |
| 7. Eastern Regions Mental Health Association                     | September 2021 | 15        | Mental health workers  |
| 8. Drummond Street   | October 2021   | 14        | Community support workers and caseworkers  |
| 9. Advocates and Health Workers Session (SSRV)                   | February 2022  | 51        | Mostly disability advocates with some doctors and health workers                     |

1. All CLE sessions were delivered online and participants may not have remained for entire time so there were some discrepancies between the number of participants who registered, those who attended and those who were counted as attending.

The CLE sessions were tailored for the audience but broadly covered the following topics:

- Overview of DSP eligibility and applications;
- The importance of medical evidence;
- Introduction to DSP Help;
- What we did and how it works;
- How it can be used by applicants and workers;
- The future of DSP Help;
- Understanding what options a client has if a DSP application is rejected; and
- Referral pathways for casework at SSRV and other resources.



Additionally, the DSP Help Project contributed to several other events over the two years. While these were not considered formal CLE sessions they are still important to note, and included:

- Contributing to Economic Justice Australia’s national conference;
- A Q+A session with a group of financial counsellors who regularly engage with SSRV;
- Participation in and contribution to the “Future of Social Security for People with Disability in Australia” workshop series organised by the Australia Federation of Disability Organisations;
- A session at the Disability Liaison Officer network meeting; and
- Conversations with Financial Counselling Victoria’s Centrelink and Carer’s Working groups.

Feedback on the formal CLE sessions was solicited from participants through an online survey. In Year One, the response rate to these surveys was relatively low (~27%) and flagged as an area to improve in Year Two and fortunately the response rate for the 4 sessions in Year Two was twice as high (55%). This resulted in an overall 42% response rate (103 of 245 attendees) and the response was very positive. All respondents indicated that the content was relevant to them and virtually all found the presentation to be engaging, the materials provided to be useful and the presenter to be knowledgeable.

Please rate the following aspects of the workshop

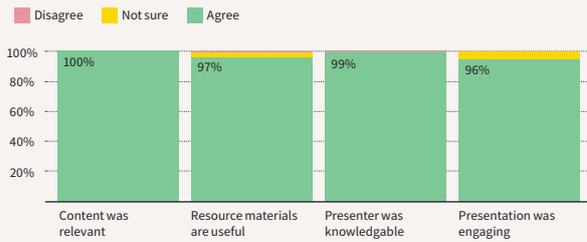


Figure 26 - Participant feedback from 8 CLE sessions on the session itself (n=103)

When asked whether the sessions had helped them better understand SSRV and how to identify and support clients with a social security issue, the feedback was also positive:

1. 99% of respondents had a greater understanding of SSRV.
2. 98% of respondents felt their confidence to identify and respond to social security matters had increased.
3. 99% respondents felt the session improved their ability to better assist clients, including 71% to ‘a large extent’.

CLE session impact on participant understanding and ability

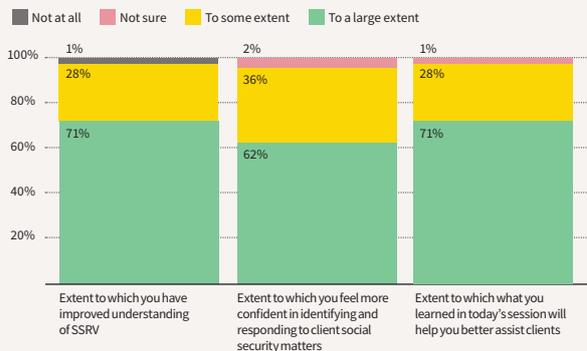


Figure 27 - Participant feedback from 4 CLE sessions on how session impacted their understanding and ability (n=103)

“Great presentation from SSRV - extremely informative but aimed at a level where a generalist unfamiliar with the DSP could understand.” – CLE participant

“This was such a useful and helpful presentation and provided very valuable information for social workers. The DSP Chat Bot – fabulous.” – CLE participant

# Systemic Advocacy and Expertise Sharing

2021 was an important year for policy and systemic advocacy in relation to the DSP. The driving factor was the review of the DSP Impairment Tables, the legislative instrument used to assess work related impairment for DSP eligibility that has been in place for 10 years and is due to sunset in April 2022.

SSRV has a history of engagement with social security policy and issues at the systemic level, and knowing this review was likely to occur, planned to utilise the DSP Help Project to contribute knowledge and expertise to policy makers.

## DSP Senate Inquiry

In May 2021 the Senate referred an inquiry into the purpose, intent and adequacy of the Disability Support Pension to the Senate Community Affairs References Committee. After consultation with key stakeholders in this area, SSRV decided to focus resources on this inquiry being the broader than the Impairment Table review, and to use the DSP Help Project to lead the advocacy efforts.

A submission was developed bringing together knowledge from within the project and SSRV more generally to detail the challenges and injustices SSRV's regularly sees clients facing in accessing the DSP. The submission included 16 recommendations, including:

- removing 'fully' from the requirement conditions are fully diagnosed, fully treated, and fully stabilised in the DSP eligibility criteria;
- remove Program of Support as an eligibility criterion for the DSP; and
- reintroduce a 'treating doctor's report' or similar document to assist doctors in providing evidence to Centrelink.

The full submission is available here: [aph.gov.au/DocumentStore.ashx?id=84ee1218-90ad-4d71-9ad2-9b800c616702&subId=712126](https://aph.gov.au/DocumentStore.ashx?id=84ee1218-90ad-4d71-9ad2-9b800c616702&subId=712126)

SSRV had two more opportunities to contribute to this inquiry. First, during the human-centred design research and consultation processes it became obvious that the data and experiences the project was collecting from doctors and other health workers was incredibly relevant to the inquiry. These were direct, firsthand experiences of the challenges professionals face when asked to support a patient's DSP application. While these professionals may have had opportunities to contribute to the inquiry in other ways, whether it be as individuals or through another organisation, SSRV realised that this context was unique and different from those and should be given its own voice.

Working with Paper Giant, a supplementary submission was developed focussing on these experiences and the learnings from talking to doctors as part of the project. The Community Affairs Reference Committee agreed to accept this submission, which can be viewed here: [aph.gov.au/DocumentStore.ashx?id=76d05d09-7301-4249-9a44-4c654b084f59&subId=712126](https://aph.gov.au/DocumentStore.ashx?id=76d05d09-7301-4249-9a44-4c654b084f59&subId=712126)

Second, Economic Justice Australia (EJA) were invited to give evidence to the inquiry at a hearing in September 2021. The DSP Help Community Lawyer was invited to support the evidence EJA provided as a lawyer working in a member centre. She used this opportunity to reiterate the recommendations in SSRV's and EJA's submissions to the inquiry, with a focus on those above. She also structured her evidence around the experience of SSRV's clients, amplifying their voices and stories in front of the Committee. A transcript of the hearing is available here: [parlinfo.aph.gov.au/parlInfo/search/display/display.w3p;query=Id%3A%22committees%2Fcommsen%2F5034c390-2c7c-42a3-8630-af52fbc449b7%2F0002%22](https://parlinfo.aph.gov.au/parlInfo/search/display/display.w3p;query=Id%3A%22committees%2Fcommsen%2F5034c390-2c7c-42a3-8630-af52fbc449b7%2F0002%22)

SSRV is currently exploring opportunities to further advance the activities above, including whether the submissions made to the Senate inquiry are relevant and can be submitted to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability.

## Technical Experts on Social Security

Organised by the Australian Federation of Disability Organisations (AFDO), the Technical Experts on Social Security (TESS) working group is a collection of experts in social security and Centrelink issues, including lawyers, advocates and other stakeholders. The DSP Help Community Lawyer was invited to take part in TESS and has been doing so throughout 2021, contributing legal expertise to AFDO and other members of the group.

Involvement in TESS provided a way to further share SSRV's expertise and experience, and pursue the goal of improving confidence and capability across the assistance sector. Some activities the DSP Help Community Lawyer contributed to include:

- contributing knowledge and experience to The Brotherhood of St Laurence's paper "Dead ends: how our social security system is failing people with partial capacity to work" ([bsl.org.au/research/publications/dead-ends-social-security/](https://bsl.org.au/research/publications/dead-ends-social-security/));
- communicating SSRV's own and client experience to key stakeholders in the DSP space, including politicians and peak organisations in other sectors;
- acting as a general sounding board for further systemic and policy activities; and
- helping non-legal stakeholders understand the complexities and nuance of social security law.

## Other Opportunities to Share Knowledge and Expertise

Outside of the above, the DSP Help Project also had a number of opportunities to share SSRV's expertise with other organisations within the legal assistance and community sectors. The DSP Help Community Lawyer was invited to assist St Kilda Legal Service with their own DSP project. The focus of their project was on clients of housing services who may not be on appropriate income support which is affecting their housing options. Specifically, residents receiving NewStart/JobSeeker when they should really be on the DSP.

The DSP Help Community Lawyer took part in initial discussions, providing feedback and support for the funding application. Once the project commenced, she also took part in the Theory of Change workshop, contributing knowledge around the DSP, social security law, and SSRV's experience with assisting clients facing similar issues.

The DSP Help Community Lawyer was also invited to speak to working groups on a semi regular basis to help them grapple with social security and DSP related issues better, including:

- Financial Counselling Victoria's Centrelink Working Group;
- Financial Counselling Victoria's Carers Working Group; and
- The monthly network meeting of Victorian Disability Liaison Officers



# Evaluation Assessment

## Integrated Work Plan Indicators of Success

The DSP Help Project Integrated Work Plan informed decision making within the project. It contained a number of objectives, outcomes, deliverables and indicators of success. The following is a summary of the indicators of success and how the project performed against each.

### Indicator of Success for Use of DSP Help Online Resource

*Number of 'hits' on the DSP Help online resource is equal to or increases compared to Year One.*

The number of individuals accessing the DSP Help website increased by 26% in Year two, with an average of 1878 per month between January – December 2021, compared to 1489 per month in the first 6 months after the launch (July – December 2020).

This appears to demonstrate the appeal of the website as the average visits for the final few months of the project exceeded even the visits immediately after it was launched, which is when interest would be expected to be highest. The interest likely reflects growing awareness of the resource as well as a renewed focus on DSP matters as pandemic responses and additional JobSeeker payments have been wound back.

### Indicator of Success for DSP Help online resource Feedback

*Majority of users who provide feedback indicate that the resource has assisted them to better:*

- *Understand requirements for DSP eligibility*
- *Understand evidentiary requirements*
- *Gather relevant evidence to support applications*

Immediate feedback from users of the main DSP Help website show that nearly 90% of users better understand the DSP application process and evidentiary requirements and over 90% of Chat Bot users felt that it helped them understand and gather the medical evidence they required.

Based on this, the project has clearly met its target of ensuring that a majority of users feel the resource has assisted them with understanding requirements and gathering evidence.

### Indicator of Success for Health Workers using DSP Help Online Resource

*Majority of health workers who provide feedback indicate that the resource has assisted them to better:*

- *Understand requirements for DSP eligibility*
- *Understand evidentiary requirements*
- *Provide evidence to support applications*

As only one health professional provided feedback on any of these specific questions, it is not possible to make an assessment on this indicator. However, the four health professionals who participated in reflective interviews were unanimous in their praise of DSP Help and were confident that it would help health workers better understand DSP requirements and provide evidence.



## Indicator of Success for DSP Help Legal Services to Individuals

- Guidelines and procedures reviewed and updated at least once during Year Two.
- 30 information and advice services to DSP applicants
- 15 further legal assistance services
- Majority of people to whom information and/or advice is provided indicate that the service was accessible and useful
- In the majority of matters the client and the SSRV lawyer report that the legal assistance provided made a difference to the conduct and/or outcome

The DSP Help Legal Service guidelines were reviewed and updated. As discussed above, this was done as part of organisation wide shift to a clinic model of service delivery, moving away from on demand telephone advice.

SSRV was seeking to provide at least 30 information and advice services, and 15 further legal assistance services (task/casework/representation), to DSP applicants in the second year of the project.

Based on the legal services data, SSRV has far exceeded these targets with 106 information/advice services and 57 tasks/representations to individuals applying for the DSP.

Virtually all (99%) of individuals who contacted the telephone advice / clinic service and provided feedback noted that it was both accessible and useful.

As described in the case studies throughout this report, the legal assistance provided through the DSP Help Legal Service did make a difference to the conduct and outcome of matters.

Lastly, there was no unmet demand within the DSP Help Project (but as per above, it should be noted that demand continues to outpace capacity for SSRV at an organisational level).

## Indicator of Success for DSP Help Legal Services to Professionals

- 30 information/ secondary consultation services provided to support and health workers
- Majority of workers assisted via the DSP Help Legal Service indicate that the service was useful and accessible

The DSP Help Project Community Lawyer was seeking to provide at least 30 legal information and advice services to support workers in the second year and based on the data to date, SSRV has far exceeded these targets with 54 information/advice services related to DSP. Over the entirety of the DSP Help Project, a total of 119 legal services related to DSP matters were provided to workers against a target of 50.

Virtually all (over 95%) workers who contacted the telephone advice service and provided immediate feedback noted that it was both accessible and useful, and helped them better understand their matter. The small sample of six workers who provided reflective feedback later were also unanimously positive about the quality of the service and benefit it provided to them assisting their client.

## Indicator of Success for DSP Help Community Legal Education

*Total of 10 workshops (6 in Year One, 4 in Year Two) with 100+ participants*

*Majority of workshop participants who provide feedback indicate that they:*

- Anticipate that they will use what they have learned in the workshop to assist their clients
- Better understand DSP evidentiary requirements
- Feel more confident to assist clients with DSP applications

In Year One, SSRV delivered 4 out of an anticipated 6 CLE sessions on DSP Help. The target was formulated before the onset of the COVID-19 pandemic and associated restrictions and so while it did not meet its session target, it did exceed its participant target of 50. In Year Two, the target was also 4 CLE sessions and 50+ attendees, which SSRV met.

Virtually all CLE participants who provided feedback felt that attending the session made them more confident in identifying and responding to social security matters and will help them assist their clients, although there was no specific feedback sought on whether it had helped attendees better understand DSP evidentiary requirements.

## Evaluation Rubric

The following table summarises the Evaluation Rubric performance for each evaluation question and details for each assessment are provided in coloured boxes with accompanying commentary where relevant. The rubrics have been updated from Year One to enable assessment of the performance of the project over time – see Appendices A,B & C.

| Evaluation questions  | Poor | Adequate | Good | Excellent |
|---|------|----------|------|-----------|
| 1. To what extent and in what ways did the DSP Help resource assist applicants to make a successful DSP application?  |      |          |      |           |
| 2. In what ways and to what extent was the confidence and capability of support workers to effectively assist their clients in making DSP applications built?   |      |          |      |           |
| 3. To what extent has community worker awareness and understanding of SSRV's services and pathways changed?   |      |          |      |           |
| 4. In what ways and to what extent did the provision of accessible legal advice and representation services assist applicants and their support workers to make more effective DSP applications and challenge unfavourable decisions? |      |          |      |           |
| 5. To what extent was the DSP Help Legal Service able to meet demand for legal advice and representation services generated by the project?   |      |          |      |           |
| 6. Did the project have any impact upon other SSRV services – GAL WHL casework and representation, CLE?   |      |          |      |           |

1. To what extent and in what ways did the DSP Help online resource assist applicants to make a successful DSP application?

### Good

- The number of individuals accessing DSP Help increased by 37% in Year Two, with an average of 1950 per month in Year Two compared to 1420 per month in the first 6 months after launch
- 11% of DSP Help users engaged with the Chat Bot, but 64% of Bot interactions resulted in documents being generated. This remained consistent throughout Year One and 2.
- 77% of DSP Help website users who provided feedback indicated that the resource helped them better understand the DSP application process and gather evidence. This figure was consistent in Year One and 2, although the feedback sample represents less than 1% of total visitors to the site.
- 5% of Chat Bot users provided feedback and the vast majority of them (93%) reported that the Bot helped them gather the requisite medical evidence.
- In Year One, a small sample of 12 individuals who used DSP Help responded to a follow up survey, however most of them (91%) reported that DSP Help made some difference to them gathering medical evidence and half (55%) stated that it made a difference to the outcome of their application/appeal.
- A further 3 users of the DSP Help resource interviewed for the evaluation indicated that the website helped them better understand DSP eligibility and application process, although none felt it had made a difference to the success of the application as 1 decided not to apply and the other two were not at the stage of lodging.
- 1 health professional interviewed for the evaluation provided an example of where a DSP Help resource was used by her client to challenge a rejection and ultimately led to a successful application.

2. In what ways and to what extent was the confidence and capability of support workers to effectively assist their clients in making DSP applications built?

### Excellent

- A total of 8 CLE sessions were delivered reaching 296 attendees over the course of Years 1 and 2
- 99% of CLE attendees surveyed reported that the learnings made them more confident and able to assist their clients with social security issues
- 99% of workers who provided feedback on SSRV's Worker Help Line indicated the service was accessible, timely and useful. Over 95% felt they better understood their matter and felt more confident addressing it, after speaking with SSRV
- A small sample of 6 workers responded to a follow up survey on legal support provided by SSRV for a DSP matter. All of them felt the legal support made a difference to their confidence and capability to assist clients
- 4 health professionals interviewed for the evaluation in Year Two felt the DSP Help online resource was valuable for them as a source of information as most had very little training in the DSP and also as a way to manage their workload and empower their clients by directing them to the resource. 1 GP gave an example of how she had used the resource to help a client make a successful DSP application
- All 4 believed the resource should be promoted widely to all support workers and health professionals at any stage of their career.
- 99% of CLE attendees surveyed reported that they had greater understanding of SSRV and its services

3. To what extent has community worker awareness and understanding of SSRV's services and pathways to services changed?

### Good

- 99% of CLE attendees surveyed reported that they had greater understanding of SSRV and its services
- There were no survey responses available from workers who received legal services about a change in their awareness and understanding of SSRV's services

4. In what ways and to what extent did the provision of accessible legal advice and representation services assist applicants and their support workers to make more effective DSP applications and challenge unfavourable decisions?

### Good

- Overall 163 legal services were provided to individual DSP applicants over the course of the project. This included 106 legal advices and 57 further legal assistance services (39 Legal Tasks, 18 Representations)
- 77 of these legal services were provided in Year One while the remaining 86 in Year Two, more than doubling the targets that SSRV had set for each year.
- 119 legal services related to DSP matters were also provided to workers via the Worker Help Line, the majority of which were secondary consultations. 65 (approx. 55%) were provided in Year One and a further 54 in Year Two
- There was no feedback available from individuals and support workers who received legal assistance on whether the assistance made a difference to the outcome of the matter, however between 70-90% of clients who responded to a follow up survey felt SSRV helped them better understand their legal issue and their options, while 100% of workers surveyed felt SSRV's assistance made a difference to their confidence to support their clients with a DSP matter.
- The DSP Help lawyer at SSRV provided examples of how legal assistance provided to applicants and support workers through the project makes a difference to the conduct and outcome of matters. See above for case studies.

5. To what extent was the DSP Help Legal Service able to meet demand for legal advice and representation services generated by the project?

### Excellent

- All individuals who contacted SSRV's General Advice Line and Worker Help Line for DSP matters were assisted
- All individuals eligible for legal assistance were assisted by the DSP Help team at SSRV

6. Did the project have any impact upon other SSRV services – General Advice Line, Worker Help Line, casework and representation, CLE? (e.g. Changed demand? Did the services provided by the project enable SSRV to re/direct other services to more vulnerable DSP clients?)

### Adequate

- This rubric was particularly challenging to assess and has been assessed as 'adequate' but, as explained here, this should be seen as a conservative assessment in the light of limited information to make a judgement rather than a judgement of adequate performance.
- The DSP Help Project's impact on demand for legal services at SSRV was difficult to determine conclusively. At one level the project clearly allowed SSRV to expand its services and provide greater support for DSP matters but it also could not control demand for DSP enquiries which fluctuated over the life of the project.
- There was a decline in individual enquiries about DSP matters between Year One and Year Two, which may reflect a displacement of demand as people address their issues via the DSP Help resources rather than contact SSRV. This view is supported by the increase in website traffic and Chat Bot usage mirroring the decline in enquiries to SSRV. However, worker enquiries about DSP matters fell immediately after the launch of DSP Help online (in mid-2020) and then increased in 2021 but only to pre-launch levels rather than an outright increase.
- It was also not possible to identify the impact of DSP Help on referrals to SSRV, i.e. individuals who had used the online resources and then contacted SSRV, as the systems available to community legal centres (i.e. CLASS) were not able to distinguish between referrals from DSP Help vs to DSP Help.
- In terms of the mix of clients supported, there has been no change in the demographics and priority characteristics so while this is an inexact proxy for 'vulnerability', it's not possible to state whether SSRV was able to (re) direct legal services to more vulnerable DSP clients.
- As the focus of Year Two was developing a specific resource for health professionals, the DSP Help project did increase the visibility of SSRV among this cohort with over 400 health professionals viewing the site.



## Evaluator Comments and Reflections

Over a two-year period, the DSP Help project has developed the DSP Help website, a Medical Evidence chat bot and a resource specifically for health professionals. Each of these elements have been created and refined through extensive primary consultation with individuals and professionals with experience of the DSP application process. This has resulted in a set of online resources that have been viewed by over 30,000 individuals and actively used to generate nearly 2,200 medical evidence kits, as well as provide information to over 400 health professionals with a dedicated page for them. The resource has been supported by the provision of 282 DSP related legal services and 8 community legal education sessions to 245 individuals by SSRV over two years.

Evidence gathered for the evaluation and detailed throughout this report demonstrates the success of the approach undertaken. In Year One, the project had already been well received by applicants and those supporting applicants (workers, family and friends) and there was significant momentum going into Year Two. The focus of Year Two was on additional information tailored to health professionals and while only a small sample of health professionals provided feedback, this limited evidence confirmed the value of this resource and the need for it. The feedback provided by users on the website and in evaluation interviews in Year Two backed up the positive reception of the resource in Year One, with a large majority of users finding the website to be beneficial to their understanding of the DSP and ability to prepare their application.

The project has met/exceeded most of its targets and 'indicators of success' over the two years, including several which were not in its direct control (i.e. number of advices provided to workers who called, increased usage of DSP Help online) There were however a few research and evaluation questions that were not able to be conclusively answered due to a lack of feedback provided / information available (e.g. almost no health professionals who used the online resource provided feedback on it, there was limited evidence to determine whether the resource and/or any legal assistance provided contributed to a successful application/avoided rejection).

As discussed throughout this report, there are multiple opportunities to further refine and promote the resource if funding is available, and several lessons for similar projects in other areas of law. A set of recommendations are provided below to guide SSRV with the future of DSP Help as well as for the broader legal assistance and disability support sectors. These are provided on the following pages.

# Project Reflection and Learnings

## Staff Reflections

The DSP Community Lawyer and SSRV's Director have been present throughout the life of the project. Having seen this develop from idea, to funding proposal, to work in progress, to delivered, they have a number of observations and reflections about DSP Help, human-centred design, and the project generally.

*By its nature, the human-centred design process moves very quickly* – The human-centred design process moves quickly and the development of the minimum viable product is completed over a relatively short period of time with a view to further iterations and refinement at later times. Given the nature of the issues being dealt with in DSP Help and the other demands on project staff, it sometimes felt as though there was insufficient time to digest and respond to learnings and proposals at different stages of the process. Decisions needed to be made, directions needed to be pursued and challenges addressed within the pre-established timelines. In both years Paper Giant and SSRV did agree to extend the timelines in order to reach the result being sought. This is an important learning that will be kept at front of mind when using human-centred design processes in the future. Perhaps the process may need to be spread over a longer period. Perhaps project staff should be freed up from other responsibilities during the design phase.

*Two years is a relatively short time frame for a project of this kind* – The two-year funding provided by the Victorian Legal Services Board grant has been critical to the success of the DSP Help Project. It is relatively unusual to be able to access multi-year project funding and we appreciate that this opportunity was made available. In the context of this particular project, the human-centred design process, and its outputs, benefited from the time and resources that supported undertaking a series of design and iteration processes over an extended period. We would recommend that a minimum of two years funding is required for such a project and suggest that, for some projects/issues, resources to continue development over a longer period would be appropriate. We also note that considerable investment has been made by the funder, SSRV and stakeholders over the first two years. Planning for the production of resources such as a website and chatbot that have utility beyond the life of the grant, must also consider how these resources will be maintained, both practically and financially.

*Project leads have to be subject matter experts* – Before beginning design work on the project there was a general feeling that the roles would be compartmentalised. SSRV would provide the social security and DSP expertise and knowledge, and Paper Giant would do the design work based on this. While this was true to an extent, in that this is definitely and obviously where the strengths of each organisation lay, it became apparent that such a strict separation was not in the best interests of project implementation and approaching the design challenge. It became apparent that the design team needed to have a good understanding of the substantive law, policy, processes, client and service experiences in relation to the DSP. In approaching a similar project SSRV would allow more time for this 'upskilling', and also approach it with more formality from the outset.

Conversely, the host organisation may also be required to develop new skills and resources. In the DSP Help Project the community lawyer was the central position and it became clear that the community lawyer needed to have a special skillset that may not be that of a "standard" community lawyer role. The lawyer couldn't just be "the one who knows the DSP inside and out", they needed to take an active role in engagement and facilitation of stakeholder consultation. The lawyer also undertook a significant portion of content generation for the website, the content being legal in nature, and required an understanding of the technology and systems being used. In order to make the best contribution and generate great results, these kinds of projects require designers and lawyers to work in a very integrated way.

*Design projects of this kind will inherently involve assumptions at the outset. Some will be affirmed, while others will be challenged* – Perhaps the most notable assumption within the DSP Help Project was the idea that a technology-based solution would be appropriate for some but not all cohorts of people. This was definitely affirmed over the last two years. Clients able to use DSP Help were generally very happy with a referral to the resource, while other clients who were very unlikely to be able to self-advocate did not want such a referral (and were subsequently able to be assisted in a more traditional sense).

One assumption that was challenged was the idea of an appropriate sample size. At the outset it was envisaged the consultation and design process would involve relatively large 'focus groups' or similar, with a priority being a broad sample of the target audience. This approach could not be implemented due to

COVID restrictions. The design team instead consulted with and tested ‘products’ with a smaller sample of people and via telephone or online rather than in person. While the samples the Project used *were* sufficiently broad and engineered to cover numerous perspectives, the actual number of people consulted was fewer than originally anticipated. The consultation was perhaps far deeper though, diving further into individual experiences than was envisaged.

Overall, the Project has demonstrated the importance of being cognisant of the assumptions that are being made, and in allowing flexibility to respond and adapt to those assumptions that are challenged or otherwise not borne out.

*Monitoring and evaluation of outcomes in a technology-based project will always be a challenge* – The idea behind using technology to assist people to access the DSP was very much based in the idea that a certain cohort of people will be able to self-help or self-advocate with the right tools (see discussion of the “missing middle” in the Year One Report). Users of DSP Help or similar resources can, in theory and by design, engage with the tool, get the assistance they need, and leave all without having any interaction with SSRV or the feedback mechanisms in place. While this is a good outcome in itself which can be inferred from the feedback that is provided, the people who *do* reach out and contact SSRV, and the continued and increasing popularity of DSP Help, gathering evidence to demonstrate the outcomes achieved by people who have used the resource is a challenge.

The learning here is that this will always be a challenge as there is only so much that can be done to incentivise engagement with feedback tools and processes, and this should be considered at the outset of any such project. Indirect methods of data collection and analysis can be designed and agreed to ensure reasonable conclusions about the project outcomes can be drawn and accepted.

*There is a clear interest in these kinds of projects within the community support sector* – Throughout the life of the DSP Help Project other organisations have contacted SSRV and expressed a desire to do something similar for an issue they’re seeing. Some of these projects have since begun. Notably are the projects aimed at addressing access to the NDIS and dealing with tenancy issues.

## Steering Committee Reflections

In February 2022 the project’s Steering Committee convened for a final meeting in order to bring this phase of the project to a close. Committee members were given an opportunity to reflect on the project, what worked, and what could be improved upon in future. The following is a summary of those reflections.

*Communication with doctors and health workers is a key part of moving forward* – The Committee noted that engaging with doctors can be difficult for an organisation not within their limited sphere. Doctors tend to go to their own professional bodies and associations for advice and guidance first, and these can be hard to break into. It is nevertheless important to continue building and leveraging these relationships as DSP Help progresses.

*The versatility of DSP Help is surprising* – Many of the Committee members were part of the initial exploratory activities prior to funding being granted, and recall that initially the feeling was that multiple tools would be required to meet the needs of the varied audiences DSP Help seeks to assist. The fact that the online resource was able to address the needs of varied audiences in an integrated way is therefore surprising and a credit to the design work done throughout the project.

*DSP Help needs to be maintained, resourced, and kept up to date* – With funding not currently continuing for DSP Help the Committee noted with concern the risk that DSP Help could quickly become outdated due to changes to legislation and policy within Centrelink. This is particularly true with the review of the Impairment Tables yet to be finalised, but likely to result in a new legislation instrument impacting on DSP eligibility criteria. The Committee’s recommendation was that DSP Help be maintained and kept up to date as a priority for SSRV.

## Project delivery

| Topic   | Recommendation  |
|---|---|
| DSP Help online tool – content and functionality improvements | <ol style="list-style-type: none"> <li>1. Several options for content and tool functionality have been proposed by users to SSRV/Paper Giant over the two years, including:               <ul style="list-style-type: none"> <li>- Provide more ‘real life’ examples for sections so users are clearer on type and amount of information required</li> <li>- Confirm at commencement what information will be saved / available for download</li> <li>- Allow users to edit previously entered information</li> <li>- Ensure the site is optimised for mobile and tablet viewing</li> <li>- More prominently linking to non-legal assistance (e.g. from a disability advocate via DARU)</li> <li>- Ensure links are kept up to date</li> </ul> </li> <li>2. If expanding the tool, consider adding more examples of ‘successful’ letters</li> <li>3. If expanding the tool, consider including further information on:               <ul style="list-style-type: none"> <li>- Program of Support for those who have been unsuccessful (potentially using existing DSP Toolkit material)</li> <li>- The Administrative Appeals Tribunal (potentially using existing information on the AAT website)</li> </ul> </li> </ol> |
| DSP Help online tool – potential expansion and promotion      | <ol style="list-style-type: none"> <li>4. Seek endorsement of tool from health professional peak bodies (e.g. RACGP, AAPI) and/or include direct links on their websites as professionals are likely to visit these websites for resources</li> <li>5. Approach other professional associations and organisations for healthcare workers (e.g. Primary Health Networks, Allied Health Professional Alliances) to promote the existing resources and potentially develop additional resources</li> <li>6. Continue promoting resource to community, health and disability support organisations, as well as online support groups (e.g. <b>‘DSP Australia’ Facebook group</b>)</li> </ol>  |
| Professional Development / Community Legal Education          | <ol style="list-style-type: none"> <li>7. Incorporate case studies/quotes on project from clients and health professionals into future CLE sessions, to show how it has worked in practice and been ‘peer reviewed’ by other professionals</li> <li>8. If DSP Help continues, incorporate the Chat Bot into the presentation, e.g. have participants work through the Bot and generate a letter then give feedback / ask questions</li> <li>9. Health professionals who participated in the iteration and development phase commended the approach taken for the project and there is ample opportunity to apply a human-centred design and interprofessional approach (i.e. lawyers and health workers) in other settings beyond DSP support.</li> </ol>   |

## Reference List

Social Security Rights Victoria (2019) *Application to Victorian Legal Services Board 2019 Grants Funding Round*, Victoria

Victorian Legal Services Board + Commissioner (2019) *Grants Program 2019 Grants Funding Round, Expression of Interest Form, Explore Stream*, Victoria

Victorian Legal Services Board + Commissioner website (2021) *Grants*, [lsbc.vic.gov.au/grants-and-funding/grants](https://lsbc.vic.gov.au/grants-and-funding/grants), Victoria



# Appendix A – Guiding Questions

| Theme  | Guiding Questions  |
|--|--|
| <p><b>Appropriateness</b></p> <p>To what extent was the design of the project suitable for achieving project objectives?</p>   | <ol style="list-style-type: none"> <li>To what extent were the underlying program theory and assumptions substantiated or challenged?</li> <li>During the period from when project funding was first sought (March/May 2019) and the end of Year Two of the project, were there any political, economic, socio-cultural or technological or other factors/changes that potentially impacted upon the design, implementation and outcomes of the project?</li> <li>What, if any, effect did these factors/changes have on project design, implementation and outcomes?</li> </ol>   |
| <p><b>Process</b></p> <p>In what ways was the concept of ‘designing justice differently’ applied throughout the project?</p>   | <ol style="list-style-type: none"> <li>In what ways was human-centred design applied throughout the project?</li> <li>How was the use of technology incorporated into the project?</li> <li>In what ways did the human-centred design process inform the technology/online resource, wrap around legal services and other aspects of the project?</li> <li>In what ways and to what extent did these approaches build on to, or differ from Year One of the project?</li> <li>What were the strengths and weaknesses of the approaches to human-centred design/technology as implemented in the project?</li> <li>Are there any suggestions for improvement to project design and implementation?</li> <li>In what ways and to what extent has the project provided evidence that the use of human-centred design and technology can contribute to improved client outcomes? Are certain cohorts/groups more likely to benefit from these? Are there certain types or matters/stages of matters where this is more likely to be beneficial?</li> </ol>   |
| <p><b>Effectiveness</b></p> <p>Was the project effective?<br/>In what ways and to what extent did the DSP Help Project assist people to increase their chance of success when making a DSP application?<br/>Were there any other changes or learnings arising from the project?<br/>To what extent were these anticipated/intended/beneficial?</p> | <ol style="list-style-type: none"> <li>To what extent and in what ways did the DSP Help online resource assist applicants to make a successful DSP application?</li> <li>Which components of the resource were most useful/effective to whom/how?</li> <li>In what ways and to what extent was the confidence and capability of support workers to effectively assist their clients in making DSP applications built?</li> <li>To what extent has community worker awareness and understanding of SSRV’s services and pathways to services changed?</li> <li>In what ways and to what extent did the provision of accessible legal advice and representation services assist applicants and their support workers to make more effective DSP applications and challenge unfavourable decisions?</li> <li>To what extent was the DSP Help Legal Service able to meet demand for legal advice and representation services generated by the project?</li> <li>Did the project have any impact upon other SSRV services – GAL WHL casework and representation, CLE? (e.g. Changed demand? Did the services provided by the project enable SSRV to re/direct other services to more vulnerable DSP clients?)</li> <li>Did the link with human-centred design and technology cause SSRV to do anything differently in terms of general legal advice and further assistance service delivery and operations? Was this beneficial?</li> <li>In what ways did the project design and deliver ‘justice differently’ compared to how projects and services had previously been conducted by SSRV (other services/orgs)? <i>(Do not need to revisit this in Year Two, addressed in Year One and other research questions)</i></li> </ol> |
| <p><b>Sustainability</b></p>   | <ol style="list-style-type: none"> <li>To what extent, and in what ways, did the project contribute to organisational and sector knowledge regarding the use of human-centred design and technology to ‘design justice differently’?</li> </ol>  |

## Appendix B – Data Collection Sources

| Item  | Description   |
|---|---|
| 1. Environment scan   | Review of existing documents and resources undertaken during early stages of project (by Paper Giant / SSRV)  |
| 2. Online resource usage  | Google analytics to identify usage volume and trends  |
| 3. Online resource user feedback  | Built-in feedback tools to capture user feedback in different sections and at exit (including invitation to participate in follow up interview/survey)  |
| 4. CLE Activity summaries   | Summaries of activity performed by DSPHP staff in 3 categories:<br>Community legal education sessions delivered<br>Online resource promotion activity<br>Any systemic issues and policy related activity  |
| 5. Community Legal Education Feedback   | Feedback forms completed by participants following attendance at a CLE session delivered by DSPHP staff.<br><br>With some questions removed for ease of completion (e.g. 'Presenter was engaging', 'Purpose of workshop was clear', 'Content easy to follow', etc.)<br><br>Could also add a question on where the attendee is based (e.g. inner metro, outer metro, regional, rural)  |
| 6. SSRV General Advice Line statistics  | Data collected through General Advice Line database filtered for DSP matters in 2019, 2020 and 2021: Number of calls; Source of enquiry; Location of caller; and Demographics   |
| 7. SSRV General Advice Line immediate feedback                                      | Standard questions asked at end of GAL service (including option of 'Online resource' for referral into SSRV) – asked on quarterly basis<br><br>2 week intensive period for detailed information on all SSRV GAL calls (e.g. all matters)   |
| 8. SSRV Worker Help Line statistics   | Data collected through Worker Help Line database filtered for DSP matters in 2019, 2020 and 2021: Number of calls; Type of worker; Location of caller; and Source of enquiry  |
| 9. Worker Help Line immediate feedback  | Standard questions asked at end of WHL service (including option of 'Online resource' for referral into SSRV)   |
| 10. CLASS service data  | Client data, legal tasks, other representation, legal representation, etc. filtered for DSP matters from 2019 onwards<br><br>Demographic data on clients, particularly any vulnerabilities to enable understanding of whether more vulnerable clients are being referred in (e.g. people experiencing family violence, experiencing homelessness, living with a cognitive impairment, in financial hardship, unemployed, people from culturally and linguistically diverse backgrounds, etc.) |
| 11. Unmet demand log  | Record of instances where the person sought and was eligible for SSRV DSP Help Legal Service but was not able to be assisted due to capacity  |
| 12. Medium term survey/interview with users of online resource                      | Electronic surveys or interviews administered by SSRV staff/M&E consultant to sample of users who have provided consent details for follow up   |
| 13. Medium term survey/interview with workers and clients who have received service | Electronic surveys or interviews administered by SSRV staff/M&E consultant to sample of clients and workers who have provided consent to be followed up   |
| 14. Client case studies   | Case summaries provided by DSP Help Community Lawyer and other SSRV lawyers, outlining the matter, assistance provided by SSRV staff, assistance provided, results achieved, learnings related to integrated practice and any client and/or financial counsellor feedback.  |
| 15. Consultations with SSRV, Paper Giant and Steering Committee                     | M&E Consultant monitors activity<br><br>Semi-structured interviews conducted by M&E Consultant towards end of 2020 with SSRV staff, Steering Committee, Paper Giant   |

# Appendix C – Evaluation Rubric

| Evaluation questions  | Poor   | Adequate  | Good   | Excellent  |
|---|--|---|--|--|
| <b>Process Effectiveness</b>  |  |   |  |  |
| 1. To what extent and in what ways did the DSP Help online resource assist applicants to make a successful DSP application?                                   | <p>Fewer than 50% of users providing immediate feedback indicate the resource assisted them to better “understand requirements for DSP eligibility” / “understand evidentiary requirements” / “gather relevant data to support applications”</p> <p>Over 50% of individuals / workers consulted in follow up state that resource made <b>no</b> difference to the preparation or outcome of application</p> <p>Drop off in number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>   | <p>50 – 70% of users providing immediate feedback indicate the resource assisted them to better “understand requirements for DSP eligibility” / “understand evidentiary requirements” / “gather relevant data to support applications”</p> <p>50 – 70% of individuals / workers consulted in follow up state that resource made <b>some</b> difference to the preparation or outcome of application</p> <p>Similar number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>  | <p>70 - 80% of users providing immediate feedback indicate the resource assisted them to better “understand requirements for DSP eligibility” / “understand evidentiary requirements” / “gather relevant data to support applications”</p> <p>Over 70% of individuals / workers consulted in follow up state that resource made <b>some</b> difference to the preparation or outcome of application</p> <p>Moderate increase (5 – 25%) in number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>  | <p>Over 80% of users providing immediate feedback indicate the resource assisted them to better “understand requirements for DSP eligibility” / “understand evidentiary requirements” / “gather relevant data to support applications”</p> <p>Over 70% of individuals / workers consulted in follow up state that resource made <b>some</b> difference to the preparation <b>and</b> outcome of application</p> <p>Large increase (Over 25%) in number of users accessing online resource over the course of Year Two vs Year One (average per month)</p>  |
| 2. In what ways and to what extent was the confidence and capability of support workers to effectively assist their clients in making DSP applications built? | <p>Fewer than 4 CLE sessions delivered and/or 50 participants</p> <p>Fewer than 15 legal information and advice services to support workers</p> <p>Fewer than 50% of support workers who attend CLE sessions and complete Feedback sheets report they “anticipate they will use learnings to better assist clients” or “feel more confident to assist clients with DSP applications”</p> <p>Fewer than 50% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>Fewer than 50% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they “used the information / advice provided to assist a client” or “felt more confident assisting the client”</p> <p>None of the workers consulted can give an example in follow up of how this has been reflected in their work</p> | <p>4 CLE sessions delivered / 50 participants</p> <p>15 - 20 legal information and advice services to support workers</p> <p>50 - 70% of support workers who attend CLE sessions and complete Feedback sheets report they “anticipate they will use learnings to better assist clients” or “feel more confident to assist clients with DSP applications”</p> <p>50 - 70% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>50 - 70% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they “used the information / advice provided to assist a client” or “felt more confident assisting the client”</p> <p>A few of the workers consulted can give an example in follow up of how this has been reflected in their work</p> | <p>More than 4 6 CLE sessions delivered and/or 50 participants reached</p> <p>20 - 25 legal information and advice services to support workers</p> <p>70 - 80% of support workers who attend CLE sessions and complete Feedback sheets report they “anticipate they will use learnings to better assist clients” or “feel more confident to assist clients with DSP applications”</p> <p>70 - 80% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>70 - 80% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they “used the information / advice provided to assist a client” or “felt more confident assisting the client”</p> <p>At least half of the workers consulted can give an example in follow up of how this has been reflected in their work</p> | <p>More than 6 CLE sessions delivered and/or 100 participants</p> <p>Over 25 legal information and advice services to support workers</p> <p>Over 80% of support workers who attend CLE sessions and complete Feedback sheets report they “anticipate they will use learnings to better assist clients” or “feel more confident to assist clients with DSP applications”</p> <p>Over 80% of support workers assisted through the Worker Help Line, who provide feedback indicate that the service was accessible and useful</p> <p>Over 80% of support workers who respond to follow up survey or interview indicate that, as a result of the assistance provided by SSRV, they “used the information / advice provided to assist a client” or “felt more confident assisting the client”</p> <p>Majority of the workers consulted can give an example in follow up of how this has been reflected in their work</p> |

| Evaluation questions  | Poor  | Adequate   | Good  | Excellent  |
|---|---|--|---|--|
| <b>Effectiveness</b>  |   |  |   |  |
| 3. To what extent has community worker awareness and understanding of SSRV's services and pathways to services changed?   | <p>Fewer than 50% of workers who attend CLE sessions and complete Feedback sheets report "improved awareness of SSRV and pathways to services"</p> <p>Fewer than 50% of workers who complete Medium-term survey report "improved awareness of SSRV and pathways to services"</p>  | <p>50 – 70% of workers who attend CLE sessions and complete Feedback sheets report "improved awareness of SSRV and pathways to services"</p> <p>50 – 70 % of workers who complete Medium-term survey report "improved awareness of SSRV and pathways to services"</p>  | <p>70-80% of workers who attend CLE sessions and complete Feedback sheets report "improved awareness of SSRV and pathways to services"</p> <p>70 – 80% of workers who complete Medium-term survey report "improved awareness of SSRV and pathways to services"</p>  | <p>Over 80% of workers who attend CLE sessions and complete Feedback sheets report "improved awareness of SSRV and pathways to services"</p> <p>Over 80% of workers who complete Medium-term survey report "improved awareness of SSRV and pathways to services"</p>   |
| 4. In what ways and to what extent did the provision of accessible legal advice and representation services assist applicants and their support workers to make more effective DSP applications and challenge unfavourable decisions?           | <p>Fewer than 15 legal information and advice services to applicants</p> <p>Fewer than 5 further legal assistance services to applicants / workers</p> <p>Fewer than 50% of workers / applicants who respond to follow up survey or interview indicate that the legal assistance made <b>some</b> difference to conduct or outcome of the matter</p> <p>SSRV lawyer indicates in service reflection that the legal assistance made <b>no</b> difference to conduct or outcome of matter in more than 50% of matters</p> <p>No examples provided by support applicant, worker or SSRV staff consulted on difference made by legal assistance</p> | <p>15 - 20 legal information and advice services to applicants</p> <p>5 - 10 further legal assistance services to applicants / workers</p> <p>50 - 70% of workers / applicants who respond to follow up survey or interview indicate that the legal assistance made <b>some</b> difference to conduct or outcome of the matter</p> <p>SSRV lawyer indicates in service reflection that the legal assistance made <b>some</b> difference to conduct or outcome in 50% or more of matters</p> <p>At least 1 example provided by support applicant, worker or SSRV staff consulted on difference made by legal assistance</p> | <p>20 - 25 legal information and advice services to applicants</p> <p>10 - 15 further legal assistance services to applicants / workers</p> <p>70 - 80% of workers / applicants who respond to follow up survey or interview indicate that the legal assistance made <b>some</b> difference to conduct or outcome of the matter</p> <p>SSRV lawyer indicates in service reflection that the legal assistance made <b>some or large</b> difference to conduct or outcome in at least 50% of matters</p> <p>At least 1 example provided by support applicant, worker <b>and</b> SSRV staff consulted on difference made by legal assistance</p> | <p>Over 25 legal information and advice services to applicants</p> <p>Over 15 further legal assistance services to applicants / workers</p> <p>Over 80% of workers / applicants who respond to follow up survey or interview indicate that the legal assistance made <b>some or large</b> difference to conduct or outcome of the matter</p> <p>SSRV lawyer indicates in service reflection that the legal assistance made <b>some or large</b> difference to conduct or outcome in at least 75% of matters</p> <p>At least 1 example provided by support applicant, worker <b>and</b> SSRV staff consulted on difference made by legal assistance</p> |
| 5. To what extent was the DSP Help Legal Service able to meet demand for legal advice and representation services generated by the project?   | <p>Over 25% of individuals eligible for legal assistance not assisted by DSP Help Legal Service due to capacity</p>   | <p>10 - 25% of individuals eligible for legal assistance not assisted due to capacity</p>  | <p>Less than 10% of individuals eligible for legal assistance not assisted due to capacity</p>  | <p>All individuals eligible for legal assistance assisted by DSP Help Legal Service</p>  |
| 6. Did the project have any impact upon other SSRV services – GAL WHL casework and representation, CLE? (e.g. Changed demand? Did the services provided by the project enable SSRV to re/direct other services to more vulnerable DSP clients?) | <p>Mix of DSP clients assisted, based on vulnerability compared to previous years</p> <p>Number of calls to WHL referred from online resource (outside of SSRV's control and will be hard to isolate referrals <i>from</i> DSP Help vs to DSP Help)</p> <p>Any commentary around the impact on other SSRV services</p>  |  |   |  |

| Evaluation questions   | Poor  | Adequate   | Good   | Excellent  |
|--|---|--|--|--|
| <b>Sustainability</b>  |   |  |  |  |
| <p>7. To what extent, and in what ways did the project contribute to organisational and sector knowledge regarding the use of human-centred design and technology to 'design justice differently'?</p> | <p>No evidence of project findings being shared publicly</p> <p>The majority of SSRV staff consulted do not believe that project contributed to organisational or sector knowledge</p> <p>The majority of external stakeholders consulted do not believe that project contributed to sector knowledge</p> | <p>Project findings shared publicly</p> <p>At least half of SSRV staff consulted believe that project contributed to organisational or sector knowledge</p> <p>At least half of external stakeholders consulted believe that project contributed to sector knowledge</p> | <p>Project findings shared publicly and evidence they have been accessed</p> <p>At least half of SSRV staff consulted believe that project contributed to organisational <b>and</b> sector knowledge</p> <p>Majority of external stakeholders consulted believe that project contributed to sector knowledge</p> | <p>Project findings shared publicly and evidence they have been accessed</p> <p>Majority of SSRV staff consulted believe that project contributed to organisational <b>and</b> sector knowledge and can point to specific examples</p> <p>Majority of external stakeholders consulted believe that project contributed to sector knowledge, and can point to specific examples</p> |



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