



CPP-D Overview

Provincial Advocates
Training Conference 2021



Legal Aid BC



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CPP-D: HANDS- ON SESSION

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PRESENTATION OVERVIEW

- *Introduction*
- *Eligibility and Criteria*
- *Severe and Prolonged*
- *How to Determine MQP*
- *Late Applicant and Provisions*
- *Fact Patterns and Group Work*

WHAT CPP-D ISN'T:

- ☐ No medical coverage
- ☐ No additional supplements (health, nutritional, transportation)
- ☐ Not income-tested
- ☐ Minimal reporting duties, except around working
- ☐ Non-taxable income



THE CPP-D BENEFIT

- ❑ Base disability/fixed amount (changes yearly due to inflation) + 75% of client's CPP contributions over their working lifetime.
- ❑ **2021 Amounts:**
 - ❑ **Fixed: \$510.85**
 - ❑ **Maximum: \$1,413.66**
 - ❑ **Children's benefit (flat rate): \$257.58**
- ❑ Contrast with PWD: total amount for single individual is \$1358.50
- ❑ Everyone's CPP-D benefit will be different – no standardized rate tables.

ELIGIBILITY CRITERIA FOR CPP-DISABILITY BENEFITS

- ☐ have a severe **and** *prolonged* disability
- ☐ be under the age of 65
- ☐ meet the contributory requirements for CPP
- ☐ due to severe **and** prolonged physical or mental disability, prevented from regularly pursuing substantial gainful occupation

Tip for Advocates:

[Canada Pension Plan Adjudication Framework](#)

SEVERE

Severe: disability is severe if it renders a person incapable regularly of pursuing any substantially gainful occupation

Medical Condition:

- nature of condition
- functional limitations
- impact of treatments
- co-morbidities
- direct statements by medical professionals
- personal characteristics

PROLONGED

*Prolonged: likely to be “long continued” **and of** “indefinite duration” **or** result in death.*

- ❑ Only considered after “severe” has been met
- ❑ Assessment of whether the severe disability will continue into the future and if likely or not that person will return to work
- ❑ 2 components:
 - ❑ “likely to result in death” (no expected recovery and grave prognosis resulting in death in near future), *or*
 - ❑ “likely to be long continued” and “of indefinite duration” (no legislated time, but 12 months is “reasonable”)

"SUBSTANTIALLY GAINFUL"?

68.1 (1) For the purposes of...the Act, substantially gainful, in respect of an occupation, describes an occupation that provides a salary or wages equal to or greater than the maximum amount a person could receive as a disability pension.

The amount is determined by the formula:

$$(A \times B) + C$$

Where

A is .25 x the Maximum Pensionable Earnings Average;

B is .75; and

C is the flat rate benefit, calculated as provided in subsection 56(2) of the Act, x 12.



MINIMUM QUALIFYING PERIOD (MQP)

The Minimum Qualifying Period is the *minimum* amount of time a person is required to work and contribute to CPP during their working life-time (known as the contributory period) prior to becoming disabled.

The current MQP rules are as follows:

- ☐ **If your client worked for less than 25 years then they need to have worked and contributed to CPP 4 out of the last 6 years.**
- ☐ **If your client worked for over 25 years, they need to have contributed 3 out of 6 years.**

***“WHAT IF MY CLIENT STOPPED
WORKING YEARS AGO AND IT’S
NOW ‘TOO LATE’ TO APPLY?”***



**Various provisions that could potentially mitigate
lateness of application or low contributory years.**

CHILD REARING PROVISION

- ❑ Meant to assist a parent who stayed home/out of workforce to raise child(ren) (up to age 7)
 - ❑ Drops/cancels low-earning years during period of child-rearing and providing pension credits (extending their MQP)
 - ❑ Protecting value of CPP earnings during period of low earnings



CREDIT SPLIT PROVISION

- ☐ If your client was the lower-earning spouse/common law partner during a relationship, they may be able to apply for a credit split which means they will share credits equally with their former partner.
- ☐ Sharing = mirroring, so both individuals would have the higher-earning person's contribution years and contribution amounts for the period the Credit Split is approved for.
- ☐ Can be contentious!



LIVING OR WORKING OUTSIDE CANADA



- ☐ Your client may be able to use pension credits/amounts from another country to help qualify for CPP-D benefits.
- ☐ Only really possible if there is a pension-sharing agreement between Canada and that country.

THE LATE APPLICANT PROVISION

- ☐ You have enough years of CPP contributions when you first became severely disabled **and...**
- ☐ You have been **continuously disabled** from that time up until present.
- ☐ Look at the Statement of Contribution to determine the *most recent* period of six years where your client made valid CPP contributions for either 4 or 3 years (do not have to be consecutive years).
- ☐ Why most recent?
 - ☐ Potentially more/better medical evidence
 - ☐ Less likely to have had interruptions in healthcare/not having a doctor
 - ☐ Client's memory and ability to submit a stronger application

ANY QUESTIONS?

***FACT PATTERNS AND
GROUP WORKTIME!***

Fact Pattern 1 –

Year	Your contributions				Your pensionable earnings		
	Base portion	First additional portion	Second additional portion	Total	Base portion	First additional portion	Second additional portion
2003	1,801.80			1801.80	39,900 M		
2004	1,409.81			1,409.81	31,981		
2005	1,861.20			1,861.20	41,100 M		
2006	1,449.86			1,449.86	32,790		
2007	1,989.90			1,989.90	43,700 M		
2008	2,049.30			2,049.30	44,900 M		
2009	2,118.60			2,118.60	46,300 M		
2010	2,306.70			2,306.70	50,100 M		
2011	2,356.20			2,356.20	51,100 M		
2012	0.00			0.00	0 B		
2013	0.00			0.00	0 B		
2014	0.00			0.00	0 B		
2015	0.00			0.00	0 B		
2016	0.00			0.00	0 B		
2017	0.00			0.00	0 B		
2018	0.00			0.00	0 B		
2019	0.00			0.00	0 B		
2020	0.00			0.00	0 B		

B – Below basic exemptions amount for the year | CS – Credit Split | M – Maximum pensionable earnings for the year | P – Post retirement benefit | S – Self-employed earnings

Background:

- Client decided to stop working in 2012 due to the birth of her first child as her spouse was able to support their family. She was the primary caregiver and received Canada Child Benefit.
- In 2019, your client had plans to return to work but suffered a severe MS attack. Her doctor advised her to stop working.
- Client feels due to her severe physical and cognitive issues she is unable to return to work. She comes to your advocacy office in 2021 asking for assistance to apply for the CPP-D benefit and provides you with the above Statement of Contributions.

Questions:

1. What is the client's Minimum Qualifying Period (MQP)?
2. Does she qualify for child-rearing provisions?
3. Does she qualify for late applicant provisions?
4. Based on her situation, would she qualify for CPP-D? What would you advise her?

Provincial Training Conference – CPP-D Fact Patterns

Fact Pattern 2 –

Year	Your contributions				Your pensionable earnings		
	Base portion	First additional portion	Second additional portion	Total	Base portion	First additional portion	Second additional portion
1990	0.00			0.00	0 B		
1991	58.26			58.26	5,532		
1992	75.41			75.41	6,341		
1993	1.36			1.36	3,354		
1994	0.00			0.00	0 B		
1995	0.00			0.00	0 B		
1996	0.00			0.00	0 B		
1997	0.00			0.00	0 B		
1998	0.00			0.00	0 B		
1999	0.00			0.00	0 B		
2000	0.00			0.00	0 B		
2001	279.50			279.50	10,000		
2002	517.00 S			517.00	9,000		
2003	544.50 S			544.50	9,000		
2004	841.50 S			841.50	12,000		
2005	841.50 S			841.50	12,000		
2006	321.75			321.75	10,000		
2007	1,039.50			1,039.50	24,500		
2008	1,546.37			1,546.37	34,740		
2009	669.46			669.46	17,024		
2010	688.52			688.52	17,409		
2011	915.17			915.17	21,988		
2012	355.16			355.16	10,675		
2013	586.67			586.67	15,352		
2014	710.52			710.52	17,854		
2015	799.11			799.11	19,643		
2016	405.63			405.63	11,694		
2017	745.18			745.18	18,554		
2018	354.94			354.94	10,670		
2019	658.51	19.95		678.46	16,803	16,800	
2020	136.43	8.27		144.70	6,256	6,256	
2021	0.00			0.00	0 B		

B – Below basic exemptions amount for the year | CS – Credit Split | M – Maximum pensionable earnings for the year | P – Post retirement benefit | S – Self-employed earnings

Background

- Client was diagnosed with MS about 15 years ago. He is 50 years old.
- He felt that over the years he was health enough to work until recently when he had a major setback.
- In December 2020, he suffered a major MS relapse and decided it is time to stop working.
- Client has variety of assets valued at about \$250,000 but is looking to apply for the CPP-D benefits.
- Client's neurologist retired in early 2020 and since then has not found a new neurologist. He also hasn't had a GP for several years. Therefore, he does not have a medical doctor to support his application.

Questions

1. What is the client's MQP? Does he have sufficient contributions to qualify for CPP-D?
2. As he has no doctor, what would you suggest to the client?
3. What could you suggest to strengthen his application?

Fact Pattern 3

CPP (Canada Pension Plan) Earnings and Contributions

Date of Birth: Jan 1971

Earnings and contributions last updated on 8 Oct 2021

Year	Your contributions	Your pensionable earnings	Notes
1981	\$4.14	\$0.00	B
1982 to 1984	\$0.00	\$0.00	
1985	\$5.71	\$0.00	B
1986	\$0.00	\$0.00	
1987	\$0.00	\$0.00	B
1988 to 2001	\$0.00	\$0.00	
2002	\$469.24	\$8,492.00	S
2003 to 2010	\$0.00	\$0.00	
2011	\$78.92	\$0.00	B
2012	\$31.23	\$0.00	B
2013	\$440.72	\$7,623.00	
2014	\$1,047.16	\$23,577.00	
2015	\$485.03	\$14,430.00	
2016	\$8.17	\$0.00	B
2017 to 2020	\$0.00	\$0.00	
2021	\$0	\$0	

Legend for Notes:

B – Below basic exemption | M – Maximum | P – Post-Retirement benefit | S – Self-Employed earnings | CS – Credit Split

What is client's MQP? No current years on contribution, so look to see if client would be eligible as a late applicant.

Fact Pattern 4

CPP (Canada Pension Plan) Earnings and Contributions

Date of Birth: Feb 1987

Earnings and contributions last updated on 8 Oct 2021

Year	Your contributions	Your pensionable earnings	Notes
2004 to 2006	\$0.00	\$0.00	
2007	\$129.44	\$6,115.00	
2008	\$129.44	\$6,115.00	
2009	\$0.00	\$0.00	
2010	\$681.73	\$17,272.00	
2011	\$114.39	\$5,811.00	
2012 to 2015	\$0.00	\$0.00	
2016	\$42.96	\$4,368.00	
2017	\$596.04	\$15,541.00	
2018	\$296.30	\$9,485.00	
2019	\$1,840.49	\$39,587.00	
2020	\$2,445.00	\$50,081.00	
2021	\$0.00	\$0.00	

Legend for Notes:

B – Below basic exemption | M – Maximum | P – Post-Retirement benefit | S – Self-Employed earnings | CS – Credit Split

MQP: The person's MQP is 2017-2021, meaning that the person would need to prove a prolonged and severe disability dating from December 31 2021.

This person was born with a physical disability, making them completely dependent on a motorized wheelchair for all mobility. In 2013, they were also diagnosed with anxiety, depression, and PTSD, and underwent involuntary admission to a psychiatric hospital for 4 months. Since that time, they have been prescribed and taking psychiatric medication, have ongoing psychological assessments, and access counselling services.

Starting in 2016, they were able to return to work, and have had both their highest years of pensionable earnings and contributed the highest amounts in CPP contributions since entering the workforce in 2007. Unfortunately, due to the ongoing pandemic, in late May 2021 they unexpectedly lost their job, and their spouse makes slightly too much money for them to qualify for provincial disability benefits (PWD) as a family unit.

Would they be a good candidate for CPP-D benefits?

What kind of information would their Application and Medical Report need to confirm?

Is there information you can identify that actually works against their chance for success, and what information would you want to verify to try and challenge this?

Fact Pattern 5

CPP (Canada Pension Plan) Earnings and Contributions

Date of Birth: Nov 1978

Earnings and contributions last updated on 8 Oct 2021

Year	Your contributions	Your pensionable earnings	Notes
1989	\$0.00	\$0.00	
1990	\$0.00	\$0.00	B
1991	\$0.00	\$0.00	
1992	\$0.35	\$0.00	B
1993	\$0.00	\$0.00	
1994	\$113.89	\$7,780.00	
1995	\$159.35	\$9,302.00	
1996 to 1997	\$0.00	\$0.00	B
1998	\$62.09	\$5,440.00	
1999 to 2003	\$0.00	\$0.00	B
2004	\$849.27	\$20,657.00	
2005	\$952.90	\$22,013.00	
2006	\$463.84	\$12,869.00	
2007	\$1,006.09	\$23,824.00	
2008 to 2011	\$0.00	\$0.00	B
2012	\$113.08	\$5,784.00	
2013	\$545.16	\$14,513.00	
2014	\$816.11	\$19,986.00	
2015 to 2017	\$0.00	\$0.00	B
2018	\$486.99	\$13,338.00	
2019 to 2020	\$0.00	\$0.00	B
2021	\$0.00	\$0.00	

Legend for Notes:

B – Below basic exemption | M – Maximum | P – Post-Retirement benefit | S – Self-Employed earnings | CS – Credit Split

This client has struggled with mental health disorders since late adolescence. She took several breaks between jobs to raise her children. She stopped working in 2019 just prior to the 2020 COVID pandemic, and has found it impossible to go back into the workforce since that time. Her mental health has significantly worsened over the last three years, and she has also begun experiencing chronic pain, migraines, and severe/chronic fatigue, further impacting her cognitive functions. Understanding she is a late applicant, she applies for the child rearing provision, to exclude some of her most recent low-no earnings years of 2015, 2016, and 2017

	Pensionable Earnings	Child's age
1998	37, 500	
1999	35, 000	Child born
2000	0	1
2001	0	2
2002	0	3
2003	0	4
2004	35, 000	5
2004	35, 000	6
2005	35, 000	7
2006	0	8
2007	0	9
2008	0	10
2009	0	11
2010	35, 000	12
2011	40, 000	13
2012	42, 000	14
2013	0	Child born / 15
2014	0	1 / 16
2015	0	2 / 17
2016	0	3 / 18
2017	0	4
2018	0	5
2019	0	6
2020	0	7

Wade is married and has 2 children and was the parent who stopped working to take care of them. Calculate Wade's MQP using the Child Rearing Dropout Provision. Please remember that you can only pull out full calendar years so that amounts to a total of 6 years while the child is under the age of 7.

1. Calculate Wade's MQP.
2. If Wade became disabled in 2017 and all the doctors support the application for disability benefits as they believe Wade fits the definition of severe and prolonged what are the chances of success currently?
3. Are there any options or possible ways for Wade to qualify for CPP Disability benefits? Any provisions that could be used or actions that could be taken to allow for an application to have a possible chance of success.

Sam and Scott were married in 1986 and began living together. In 2004 they separated and began divorce proceedings. There was no mention of not pursuing CPP credits in the divorce agreement.

Year	Scotts Pensionable Earnings	Sam Pensionable Earnings
1986	0	25,899 M
1987	0	25, 900 M
1988	0	26, 500 M
1989	27, 700 M	27, 700 M
1990	27, 700	28, 900 M
1991	27, 700	30, 500 M
1992	0	32, 000 M
1993	0	33, 400 M
1994	0	34, 400 M
1995	0	34, 900 M
1996	35, 500 M	35, 500 M
1997	35, 800 M	35, 800 M
1998	36, 900 M	36, 900 M
1999	37, 400 M	37, 400 M
2000	37, 600 M	37, 600 M
2001	38, 300 M	38, 300 M
2002	39, 100 M	39, 100 M
2003	39, 900 M	39, 900 M
2004	40, 500 M	0

If your client was the lower income earner the credit split will be in their best interests. Out of Same or Scott who benefits from the credit split?

If Sam stopped working in 2004 due to what is now known to be disability but had no medical evidence from before 2006 would it be in Sam's best interests to apply for the credit split why or why not?

Tribunal File Number:_____ Client Name:_____

Age:_____ Date Stopped Work:_____ Date of disability:_____

Minimum Qualifying Period Requirements through the years:

- 1986-1996
5 out of the last 10 years
- 1987-1997:
5 out of the last 10 years
5 years (if less than 10 years in contributory period)
2 out of the last 3 years or
2 years if only 2 years in the contributory period.
- 1998-current day
4 out of 6 years
- Applications made after March 3, 2008
with 25 years of contributions 3 out of 6 years.

Factors Affecting Minimum Qualifying Period

1. Child Rearing Drop Out (CRDP)
2. Credit Split
3. International Agreement
4. Proration of Earnings

1.Child Rearing Drop Out

Allows the primary caregiver for a child under the age of 7 to pull remove up to 6 years from their contributory period if their earnings were below the YBE if they were:

- collecting the family alliance (1966 to December 1992) or
- Eligible individual for the child tax benefit (January 1993 to present)

DOB:_____

DOB:_____

DOB:_____

DOB:_____

DOB:_____

DOB:_____

2. Credit Split

Divorce/Annulment on or after January 1, 1987

Date they began to reside together:_____

Date of divorce or separation _____

Separated on or after January 1, 1987 but no divorce/annulment

You must have:

- Lived together for at least 12 months and
- Have been living apart for at least 12 months

No deadline to apply unless the former spouse dies. At that point there is 36 months to submit a credit split application.

Common Law Union dissolves and separation occurs on or after January 1, 1987

You must have:

- Lived together for at least 12 months
- Have been living apart for at least 12 months (if previous partner is still alive)

Documents and application must be submitted within 48 months since the date they began to reside apart. Unless, the previous partner is alive and agrees to waive the 48 month requirement and consent to the split.

Divorce/Annulment January 1978 to 1986

The only way for a person who hasn't already been awarded these credits would be if their former spouse is alive and agrees to waive the 36 month requirement and consent to a credit split.

3. International Agreement

The list of countries and their respective treaties can be found at:

<https://www.treaty-accord.gc.ca/result-resultat.aspx?lang=eng&type=1&subject=b9c50d1b-c737-eb11-96a3-005056834bd1&page=1&maxRecords=50&t=637671312627626581>

4. Proration of earnings

Note: If proration is required for a client to meet MQP, the client **must** be deemed disabled in the year that was prorated. For example a client whose MQP with proration is June 2019 must be found disabled between January and June of 2019.

This can apply in cases where a client has had *some* earnings for the earlier parts of the year but because they had to stop working due to disability they were unable to met the Years Basic Exemption for that.

To assess if a client may be eligible you must convert the YBE to a Monthly Basic exemption:

Step 1

YBE \div 12 = Monthly Basic Exemption

Step 2

Clients Earnings for Year to be Prorated \div Monthly Basic Exemption from Step 1 = Number of Months of Proration (round down)

Year	YMPE	YBE Disabilitiy	CRDO met	Client met YBE
1970	5,300	600		
1971	5,400	600		
1972	5,500	600		
1973	5,600	600		
1974	6,600	600		
1975	7,400	700		
1976	8,300	800		
1977	9,300	900		
1978	10,400	1,000		
1979	11,700	1,100		
1980	13,100	1,300		
1981	14,700	1,400		
1982	16,500	1,600		
1983	18,500	1,800		
1984	20,800	2,000		
1985	23,400	2,300		
1986	25,800	2,500		
1987	25,900	2,500		
1988	26,500	2,600		
1989	27,700	2,700		
1990	28,900	2,800		
1991	30,500	3,000		
1992	32,300	3,200		
1993	33,400	3,300		
1994	33,400	3,300		
1995	34,900	3,400		
1996	35,400	3,500		
1997	35,800	3,500		
1998	36,900	3,600		
1999	37,400	3,700		
2000	37,600	3,700		
2001	38,300	3,800		
2002	39,100	3,900		
2003	39,900	3,900		

[illegible]

Name_____

SIN:_____

1. In your expert medical opinion does this patient have the capacity to return to work, retrain, o do any different types of work?

- ☐ Yes
☐ No

2. On a balance of probabilities and based on the medical information you have access is your patient likely to regain the capacity to work in the future?

- ☐ Yes
☐ No

3. When did your patient's condition(s) become so severe they lost the capacity to work?

4. Has your patient complied with all medical treatments, suggestions and medications (to the best of their abilities)?

- ☐ Yes
☐ No

5. Please indicate the areas where your patient experiences either symptoms or restrictions:

- ☐ Physical (please complete pages)
☐ Cognitive/emotional (please complete pages)
☐ Communication (please complete
☐ Seeing/Hearing (please complete
☐ Functional/life skills (please complete pages

Name_____

SIN:_____

The following areas are impacted by this patient's condition(s)

Sitting	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to sit.		
This patient can sit for a limited amount of time (please describe) _____ _____		
This patient cannot predict from hour to hour or day to day how long they will be able to sit for.		
This patient is unable to or has difficulties with transferring from sitting to standing.		
This patient has sitting related safety concerns.		

Comments:_____

Standing	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to stand		
This patient can sit for a limited amount of time (please describe) _____ _____		
This patient is not able to predict from hour to hour or day to day how long they will be able to stand for .		
This patient has standing related safety concerns		

Comments:_____

Name _____

SIN: _____

Walking	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to walk		
This patient can walk for a limited amount of time/distance(please describe) _____		
This patient is not able to predict from hour to hour or day to day how long or how far they will be able to walk. .		
This patient has walking related safety concerns.		

Comments: _____

Lifting/carrying	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to lift or carry		
This patient can lift a limited amount of weight/time (please describe) ____ _____		
This patient is not able to predict from hour to hour or day to day how long or how much they will be able to lift .		
This patient cannot perform repetitive lifting/carrying		
This patient has lifting related safety concerns		

Comments: _____

Name _____

SIN: _____

Reaching	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to reach in one or more direction		
This patient has limitations reaching in one or more direction(s) (please describe) _____		
This patient is not able to predict from hour to hour or day to day how long or how much they will be able to reach. .		
This patient cannot perform repetitive reaching		
This patient has reaching related safety concerns		

Comments: _____

Bending	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to bend		
This patient can limitations reaching in bending (please describe) _____		
This patient is not able to predict from hour to hour or day to day how long or how much they will be able to bend. .		
This patient cannot perform repetitive bending		
This patient has reaching related safety bending.		

Comments: _____

Name _____

SIN: _____

Balance	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient has balance related safety concerns.		
This patient is unable to predict when they will be able to balance safely.		

Comments: _____

Bowel function	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient has fecal incontinence		
This patient is not able to predict from hour to hour or day to day how long or often they must be in or near the bathroom to manage their bowel function.		

Comments: _____

Bladder function	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient has urinary incontinence		
This patient is not able to predict from hour to hour or day to day how long or often they must be in or near the bathroom to manage their bladder function.		

Comments: _____

Name_____

SIN:_____

Cognitive/Emotional

In this section please indicate the areas your patient experiences symptoms along with the frequency and predictability of those symptoms.

- Agitation, frustration, and/or anger

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Poor attention/concentration

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Blurred sense of identity

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Depersonalization/derealisation

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Poor attention/concentration

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Disassociation

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Emotional regulation

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Executive functioning

- Judgement

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Organizing

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Planning

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

Name _____

SIN: _____

○ Problem solving

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

○ Reasoning

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

○ Sequencing

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

○ Self-monitoring

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

○ Starting and finishing tasks

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

○ Understanding different points of view

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

● Working memory

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

● Feelings of impending doom

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

● Hypomania

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

● Impulse control

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

● Inability or difficulty adjusting to change

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

● Interest in activities/tasks

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

Name_____

SIN:_____

- Making decisions

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Mania

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Memory

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Motivation

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Multi-tasking

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Negative thinking

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Obsessive thoughts

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Intrusive thoughts

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Compulsions

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Panic attacks

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Phobias/irrational fears

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Delusions

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

Name_____

SIN:_____

- Hallucinations

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Repetitive behaviours

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Rigid thinking

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Rituals

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Self-harm

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Sensory processing/sensory dysregulation

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Strict routines

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Suicidal ideation

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Thoughts of death

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Unpredictable behaviours

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

Comments:_____

Name_____

SIN:_____

Communication

The following areas are impacted by this patient's condition(s)

Writing	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to write		
This patient can write for a limited amount of time (please describe) _____		
This patient struggles with spelling and grammar		
This patient has difficulty putting their thoughts and ideas into writing in a way other people can understand		

Comments:_____

Reading	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is completely unable to read.		
This patient has difficulty reading and understanding what they have read.		
This patient cannot retain what they have read.		

Comments:_____

Name_____

SIN:_____

Conversations	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is unable to participate in conversations		
This patient has significant barriers when they attempt to take part in conversations (please describe) _____ _____		

Sensory

The following areas are impacted by this patient's condition(s)

Vision	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is blind		
This patient is partially sighted		
This patient has low vision		
This patient is unable to or has difficulties with transferring from sitting to standing.		

Comments:_____

Vision	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
This patient is Deaf/deaf		
This patient is hard of hearing		

Comments:_____

Name_____

SIN:_____

Functional life skills

In this section please indicate the areas where your patient experiences difficulty with completing tasks and the frequency and predictability of their struggles.

- Answering phone/email/mail

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Calculations

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Cleaning

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Cooking

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Eating

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Making plans and attendance

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Management of finances

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Personal care

- Dressing

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Bathing

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

- Grooming

- ☐ Not affected
- ☐ Continuously affected
- ☐ Periodically affected (predictable)
- ☐ Periodically affected (unpredictable)

Name _____

SIN: _____

- Shopping
 - ☐ Not affected
 - ☐ Continuously affected
 - ☐ Periodically affected (predictable)
 - ☐ Periodically affected (unpredictable)

- Social functioning
 - ☐ Not affected
 - ☐ Continuously affected
 - ☐ Periodically affected (predictable)
 - ☐ Periodically affected (unpredictable)

- Yard work
 - ☐ Not affected
 - ☐ Continuously affected
 - ☐ Periodically affected (predictable)
 - ☐ Periodically affected (unpredictable)

- Use of public transportation
 - ☐ Not affected
 - ☐ Continuously affected
 - ☐ Periodically affected (predictable)
 - ☐ Periodically affected (unpredictable)

- Use of personal transportation
 - ☐ Not affected
 - ☐ Continuously affected
 - ☐ Periodically affected (predictable)
 - ☐ Periodically affected (unpredictable)

- Use of screens (ie/ computers)
 - ☐ Not affected
 - ☐ Continuously affected
 - ☐ Periodically affected (predictable)
 - ☐ Periodically affected (unpredictable)

Comments: _____

[illegible]

Name _____

SIN: _____

Additional Comments:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Doctor's Name: _____ Signature: _____

Date: _____