

The National Disability Insurance Scheme

The World Health Organisation Disability Assessment Schedule (WHODAS) 2.0

April 2017





Overview of the WHODAS

- a generic assessment instrument developed by the World Health Organisation
- standardised method of measuring health, level of functioning, and disability in adult populations
- covers six domains of functioning: cognition, mobility, self-care, getting along, life activities, and participation
- there are several versions of the WHODAS 2.0 based on the number of items and administration method (for example 36-item self-administered)
- the 12-item (interview-administered) version will be covered today and used for data collection.



WHODAS 12-item version

Core questions

Rating scale for level of difficulty experienced:

1 = None 2 = Mild 3 = Moderate 4 = Severe 5 = Extreme (or cannot do)

Please indicate the level of difficulty you had in the past 30 days, in the following areas:

1	Standing for long periods such as 30 minutes?	7	Walking a long distance such as kilometre (or equivalent)?
2	Taking care of your household responsibilities?	8	Washing your whole body?
3	Learning a new task, for example, learning how to get to a new place?	9	Getting dressed?
4	Joining community activities (for example, festivities, religious or other activities) in the same way as anyone else can?	10	Dealing with people you do not know?
5	How much have you been emotionally affected by your health problems?	11	Maintaining a friendship?
6	Concentrating on doing something for 10 minutes?	12	Your day-to-day work/school?



WHODAS 12-item version (cont.)

Additional questions

Please record the number of days for each of the questions below

13	Overall, in the past 30 days, how many days were the difficulties above present?	Num. of days
14	In the past 30 days, for how many days were you totally unable to carry out your usual activities or work because of any health condition?	Num. of days
15	In the past 30 days, not counting the days that you were totally unable, for how many days did you cut back or reduce your usual activities or work because of any health condition?	Num. of days



Frames of reference

Frames of references for answering questions*

Respondents should answer questions with the following frames of reference:

- frame 1 – degree of difficulty
- frame 2 – due to health conditions
- frame 3 – in the past 30 days
- frame 4 – averaging good and bad days
- frame 5 – as the respondent usually does the activity
- frame 6 – items not experiences in the past 30 days are not rated.

*see pages 38 to 40 in the manual



Frames of reference (cont.)

Frames of reference 1 – degree of difficult

Respondents are asked questions about the degree of difficulty that they experience in doing different activities. For WHODAS 2.0, having difficulty means:

- increased effort
- discomfort or pain
- slowness
- changes in the way the person does the activity.



Frames of reference (cont.)

Frames of reference 2 – due to health conditions

- respondents are asked to answer about difficulties due to their **primary disability**, rather than other causes.

Frames of reference 3 – in the past 30 days

- the timeframe for WHODAS 2.0 is 30 days, as recall abilities are most accurate for the period of one month.

Frames of reference 4 – averaging good and bad days

- some respondents will experience variability in the degree of difficulty that they experience over a 30 day period.
- in these cases, respondents should be asked to give a rating that averages good and bad days.



Frames of reference (cont.)

Frames of reference 5 – as the respondent usually does the activity

- respondents should rate the difficulty experienced by taking into consideration how they usually do the activity. For example, if assistive devices are usually available, respondents should keep this in mind.
- support from a person should not be taken into account when responding.

Frames of reference 6 – items rated as not applicable

- the instrument seeks to determine the amount of difficulty encountered in activities that a person actually does, rather than activities that person would like to do or can do, but does not actually do.
- for example, considering item D2.5 “how much difficulty did you have in walking a long distance, such as one kilometre?”
 - If a participant cannot walk one kilometre because of his/her impairment, the item would be rated a “5” (for example “extreme or cannot do”)
 - However, if a participant has not tried to walk one kilometre simply because he/she drives everywhere, then the item would be coded “N/A (not applicable)”



Clarifying unclear responses

Rules for clarification and probing

- if a question is misunderstood or not fully heard > repeat the question
- when a specific part of the question is queried > repeat only that portion
- if repeating the question is not helpful > use the explanations from the question-by-question specifications.
- if still not sure > instruct respondent to answer the question using their own definition or interpretation of the word, phrase or concept.
- when asked to repeat one or more response options > repeat all response options.
- use only the question text or neutral probes to avoid introducing bias > for example “Can you tell me what you mean by that?” “Can you be more specific?”



Clarifying unclear responses (cont.)

Common probing situations

“I Don’t know “ (DK)

- general rule is to repeat the question. If this is unsuccessful, probe using the neutral probe examples for example “Could you give me your best estimate?”
- if respondents still cannot respond, record as “DK”.

Not applicable (N/A)

- probe all responses of N/A for example “Can you tell me why this question does not apply to you?”

Discrepancies

- refer back to the frames of reference for example where difficulties are indicated for reasons other than the health condition.



Clarifying unclear responses (cont.)

Examples of suitable neutral probes

- Can you tell me what you mean by that?
- Can you tell me more about that?
- What do you think?
- Which would be closer – slight or moderate?
- Can you think of any others?
- What is your best estimate?
- Can you be more specific?
- Can you give me your best guess?
- Can you provide one overall rating?



Break-out activity (15 mins)

- In pairs, administer the 12-item WHODAS:
 - one person is the interviewer asking the WHODAS questions
 - the other person plays the role of respondent.
- Take a few minutes to read over the rules / strategies for clarifying unclear responses, and the specifications for your allocated question.
- Carry out the interview, clarifying and probing accordingly.
- At the end, debrief with your partner about how it went.
- Feedback to the broader group for discussion / questions.



Preamble for the WHODAS

Script for introducing the 12-item WHODAS

Hello. I'm going to ask you a set of questions that relate to everyday activities that you may perform. I would like to understand the level of difficulty you have in doing these activities, as a result of your primary or core disability.

When I ask about difficulties in doing an activity, think about: increased effort, discomfort or pain, slowness, or changes in the way you do an activity.

Also, when answering, I'd like you to think back over the past 30 days about how much difficulty you have had on average.

Finally, please consider how you usually do an activity and use this scale when responding: none, mild, moderate, severe, extreme or cannot do.



Question-by-question specifications*

Domain	Question	Specification
D2: Mobility	1. Standing for long periods (such as 30 minutes)	-
D5: Life activities	1. Taking care of your household responsibilities	<p>This global question is intended to elicit respondents' appraisal of any difficulty they encounter in maintaining the household and in caring for family members or other people they are close to. Ask respondents to consider all types of household or family needs, including: physical needs; emotional needs; financial needs; and psychological needs.</p> <p>In some cultures, males may indicate that they do not have household responsibilities. In this situation, clarify that household responsibilities include; managing finances; car and home repairs; caring for the outside area of the home; picking up children from school; helping with homework; and disciplining children.</p> <p>Here, "household" is defined broadly. In the case of participants who do not have a stable dwelling place, there are still activities surrounding the upkeep and maintenance of their belongings. This question refers to those activities.</p>

* Source: WHODAS 2.0 manual. See pages 48 to 54 for more detailed information.



Question-by-question specifications* (cont.)

Domain	Question	Specification
D1: Cognition	3. Learning a new task (for example, learning how to get to a new place)	If respondents ask for clarification or appear to be thinking only about learning how to get to a new place, encourage them to think of other situations in the past month where learning something new was required, such as a task at: work (for example a new procedure or assignment); school (for example a new lesson); home (for example learning a new home-repair task); or leisure (for example learning a new game or craft). Ask the respondents when rating themselves to consider how easily they acquired new information, how much assistance or repetition they needed in order to learn and how well they retained what they learned.
D6: Participation	4. Joining community activities (for example festivities, religious or other activities) in the same way as anyone else can	If necessary, clarify this question using other examples of community activities, such as attending town meetings, fairs, leisure or sporting activities in the town, neighbourhood or community. The relevant issue being asked in this question is whether respondents can participate in these activities or whether there are inhibitors to them doing so. If respondents appear confused by the phrase “in the same way anyone else can” ask them to use their judgement to: assess the extent to which average people in their community can join community activities; and consider their personal level of difficulty in joining community activities in relation to the assessment.

* Source: WHODAS 2.0 manual. See pages 48 to 54 for more detailed information.



Question-by-question specifications* (cont.)

Domain	Question	Specification
D6: Participation	5. Emotionally affected by your health problems	This question refers to the degree to which respondents have felt an emotional impact due to their health condition. Emotions may include anger, sorrow, regret, thankfulness, appreciation, or any other positive or negative emotions.
D6: Participation	6. Concentrating on doing something for 10 minutes	If clarification is requested, encourage the respondent to think about their concentration in usual circumstances, rather than when they are preoccupied by a problem or are in an unusually distracting environment. If necessary, prompt the respondent to think about their concentration while they were doing something such as work tasks, reading, writing, drawing, playing a musical instrument, assembling a piece of equipment, and so on.
D2: Mobility	7. Walking a long distance (such as a kilometre or equivalent)	Convert distances into imperial measure where necessary (for example older people may be more familiar with miles than with kilometres).

* Source: WHODAS 2.0 manual. See pages 48 to 54 for more detailed information.



Question-by-question specifications* (cont.)

Domain	Question	Specification
D3: Self-care	8. Washing your whole body	This question refers to respondents washing their entire body in whatever manner is usual for their culture. If respondents report that they have not washed their bodies in the past 30 days, ask whether this is due to a health condition (as defined under frame of reference 2)
D3: Self-care	9. Getting dressed	This questions includes all aspects of dressing the upper and lower body. Ask respondents to consider activities such as gathering clothing from storage areas (for example closet, dresser) and securing buttons, tying knots, when making the rating.
D4: Getting along	10. Dealing with people you do not know	This item refers to interactions with strangers in any situation, such as: shop-keepers, service personnel, and people from whom one is asking directions. When making the rating, ask respondents to consider both approaching such individuals and interacting successfully with them to obtain a desired outcome.

* Source: WHODAS 2.0 manual. See pages 48 to 54 for more detailed information.



Question-by-question specifications* (cont.)

Domain	Question	Specification
D4: Getting along	11. Maintaining a friendship	This item includes: staying in touch; interacting with friends in customary ways; initiating activities with friends; and participating in activities when invited. Respondents will sometimes report that they have not engaged in friendship-maintenance activities in the past 30 days. In this case, ask whether this situation is due to a health condition.
D5: Live activities	12. Your day-to-day work and/or school	This global question is intended to elicit respondents' appraisal of difficulties encountered in day-to-day work or school activities. This includes issues such as attending on time, responding to supervision, supervising others, planning and organising, meeting expectations in the workplace and any other relevant activities.

* Source: WHODAS 2.0 manual. See pages 48 to 54 for more detailed information.



Version control

Version No	Amended by	Brief description of change	Status	Date
2.0	NAN927	Class 1 Approval Annual Review consulted with PBQ096 from Insurance Support Branch.	APPROVED	2020-03-16
3.0	NAN927	Class 1 Approval Accessibility updates	APPROVED	2020-03-18



Frontline Essentials: Making Connections, Applying and Access

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Session outline: Day 1

Topic 1: Pathway and Roles

Topic 2: Early Childhood Approach

Topic 3: Local Area Coordination Approach

Topic 4: Community Connections Case

Topic 5: My profile



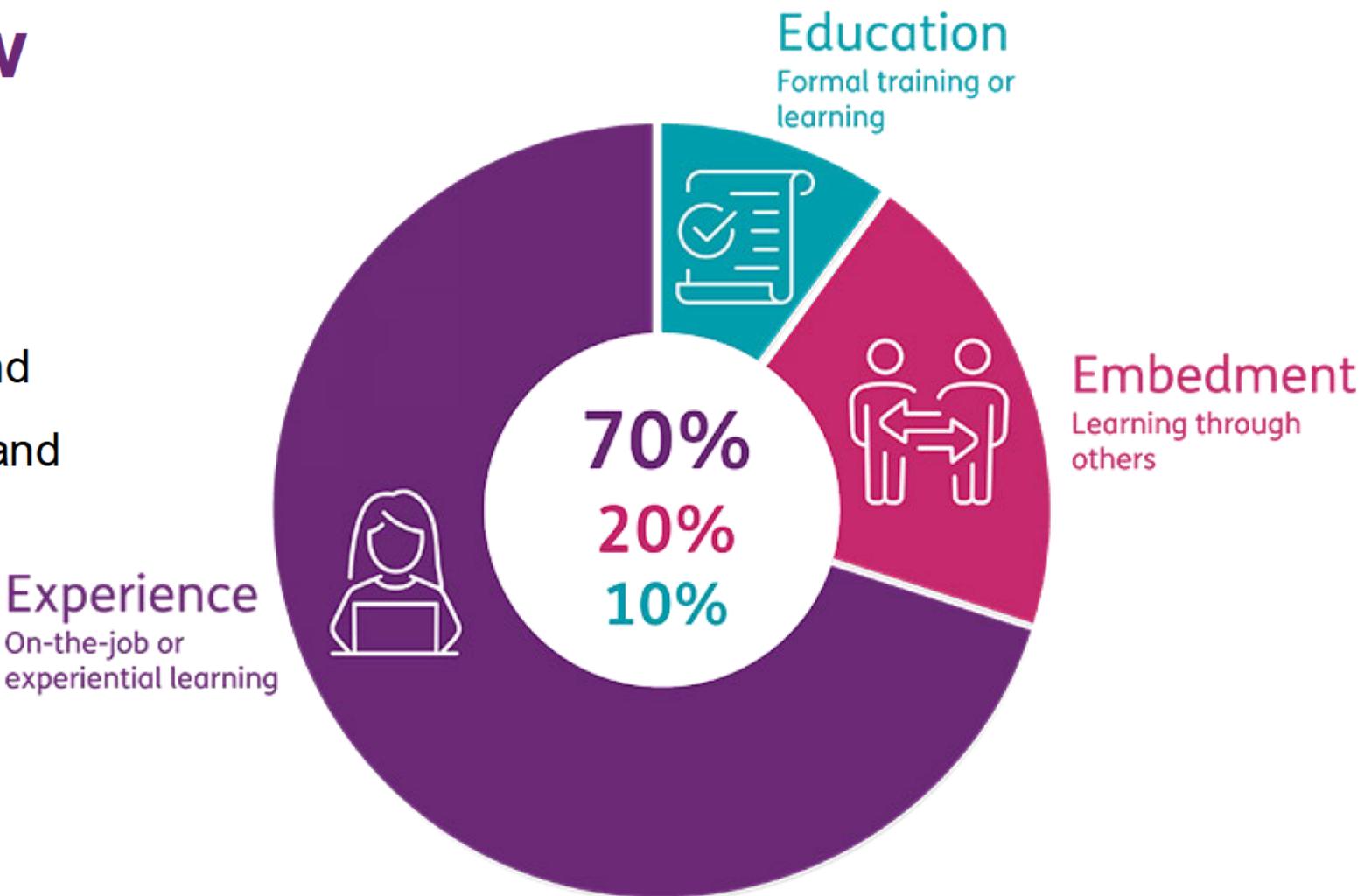
Learning outcomes: Day 1

By the end of this session, you will be able to:

- Identify pathways and roles
- Understand and apply the Early Childhood Approach
- Understand and apply the Local Area Approach
- Understand community connections cases
- Create a My Profile and understand parts of the profile

Program overview

The program includes facilitated sessions, workshops, on-the-job training, self-directed learning, and check-ins with your team leader and facilitator.





Topic 3: Tools used to gather information

Developmental concerns or developmental delay

For children younger than 6, an early childhood partner gathers a range of information to determine if the child can be described as having developmental concerns or developmental delay. Some of the ways they may do this is through:

- Talking to families
- Reviewing information from professionals who know the child well
- Making observations of the child in their natural setting
- Completing an ecomap
- Implementing the Ages and stages questionnaire
- Implementing the PEDI-CAT
- Creating a person account plus a child representative account in PACE.

The ASQ for an early childhood partner

The Ages and Stages Questionnaire (ASQ) is a developmental screening tool that Early childhood partners use to gather information about a child's development.

- It involves asking the child representative questions around the child's daily life, including development.
- A score is generated that is used to interpret if the child shows developmental concerns or developmental delay.
- This information provides supporting evidence for the applying to the NDIS, or for if early connections/ supports alone is the best pathway.

The PEDICAT

- We always use the PEDICAT assessment with children younger than 6
- Sometimes, we use PEDICAT for children aged 7-16 if there isn't another tool available





Topic 2: Functional capacity assessment

Functional capacity assessment

Functional capacity assessments are a form of evidence.

We use them to:

- help us identify the level of support and funding they will need in their plan
- understand how they manage everyday activities
- assist us in making decisions.



Types of functional capacity assessments

Depending on a person's developmental delay or disability, a specific functional capacity assessment may be required. It's important to check knowledge article in PACE, as some need to be completed by a health care professional.

General (unspecified)

- Life skills profile (LSP -16)
- WHODAS
- PEDICAT

Hearing Loss

Vision Loss

Spinal Injury

Traumatic Brain Injury

Intellectual Disability

Cerebral Palsy

Individual Activity: Who can complete what assessment?

Review resources and note down whether it is the Agency or a Health professional that can complete the assessments.

There is space in your learner workbook to note down your answers.

Individual Activity: Debrief

	WHODAS	PEDI-CAT	Life skills profile	Hearing loss	Vision loss	Spinal injury	Traumatic brain injury	Intellectual disability	Cerebral Palsy
Allied or health professional	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
NDIA staff or partner	Yes	Yes	No	Yes	Yes	No	No	No	Yes

Functional capacity assessments

A **manual** assessment refers to any previously completed functional capacity assessments.

A **new** assessment refers to you completing a new PEDI-CAT or WHODAS assessment in PACE

When collecting functional capacity assessment information, the score of an external assessment needs to be provided by:

- The person
- Their nominee
- Their child representative
- Their treating health professional

Different assessment tools may have requirements over who can administer them, such as qualified health professionals.

Completing a functional capacity assessment

- Check for exceptions
- Log an activity in PACE
- Complete a new assessment



Internal disability specific severity tools

The internal disability specific severity tools that can be completed by Agency staff and partners include:

- Gross Motor Function Classification Scale (GMFCS) for **Cerebral Palsy**
- Modified Rankin Scale (mRS) for **Stroke**
- Disease Steps for **Multiple Sclerosis**
- **Hearing** tool
- **Vision** tool



Locating resources

Tools	Update Severity Indicator - Cerebral Palsy	
Tools	Update Severity Indicator - Hearing	
Tools	Update Severity Indicator - Multiple Sclerosis	
Tools	Update Severity Indicator - Stroke	
Tools	Vision Impairment Tool	



Example MS



1. What symptoms do you have due to your MS?

Details	
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2. Do your symptoms have any effect on your activity level or lifestyle?

Details	
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3. If so, what is that level of effect on your lifestyle for example, minor, moderate, severe?

Details	
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4. After an attack, do you return to normal?

Details	
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5. Does your MS interfere with your walking?

Details	
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6. Do you use a mobility aid?

Details	
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7. If so, what type?

Details	
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Group Activity 6: Using severity tools

1. Use the Intranet to locate the [Update Severity Indicator – Multiple Sclerosis](#) tool
Home > Service Delivery > Pre-Planning > Topic: preparing for Planning > Update Severity Indicator - Multiple Sclerosis
2. Watch Sonia's video: [Andrew and Sonia - Lived Experience \(external\)](#)
Home>Service Delivery>Disability Navigator>Multiple Sclerosis
3. In your groups, complete the Multiple Sclerosis severity tool for Sonia

Assessment not specific to a disability type

If there are no relevant disability specific assessments or internal disability specific tools then we would use an assessment that is not specific to a disability type.

Assessments not specific to disability type:

- Can be completed by NDIA staff and partners
- Include PEDICAT (0-16) and WHODAS 2.0 (+17).



WHODAS demonstration

We are now going to go through a WHODAS demonstration. During the demonstration, please take notes as you will complete a similar activity during your self-directed learning.