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Australian Government

Services Australia

Special Disability Trust (SDT) beneficiary assessment process 043-04070010

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Background

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This document outlines information on the process to determine if a child or adult can be approved as a beneficiary for a Special Disability Trust (SDT).

Special Disability Trust

A person or representative may contact Services Australia to:

- see if a new or existing trust can be considered a Special Disability Trust (SDT), or
- ask for a beneficiary assessment for the sole purpose of seeking a land tax exemption

When this happens, the proposed beneficiary must be assessed to see if they are a [person with a severe disability or medical condition for SDT purposes](#).

If possible, this must be done **before** the trust is created. There may be circumstances when this does not occur, such as a trust created as part of an estate.

Although there is no requirement for either the beneficiary or a carer to be in receipt of an income support payment, any existing information held on the beneficiary's record may be used to make the assessment on eligibility.

To qualify as a beneficiary, a person must be:

- under 16 years of age and assessed as having a severe disability or medical condition under Section 197 of the Social Security Act 1991, or
- 16 years of age and:
 - has an impairment that would medically qualify for Disability Support Pension (DSP) **or**

receiving a Department of Veterans' Affairs (DVA) Invalidity Service Pension **or**

receiving DVA Invalidity Income Support Supplement (ISS)

- needs the level of care to qualify a carer for Carer Payment (CP) or Carer Allowance (CA) **or** reside in an institution, hostel or group home in which care is provided for people with disabilities for which funding is provided under an agreement between the Commonwealth, States and Territories, and
- has a disability that inhibits them from working and there is no likelihood of working for more than 7 hours per week for a wage that is at or above the relevant minimum wage, **or** works in the [Supported Wage System](#)

Note: express permission for a beneficiary assessment is required before a Complex Assessment Officer (CAO) in the SDT team can proceed (unless the SDT has already been established without prior contact). Permission can be expressed by a nominee, parent or legal guardian for a child, or, in some cases, the beneficiary themselves.

The [Resources](#) page contains links to forms, the Department of Social Services website, Complex Assessment Branch and contact details for the Level 2 Policy Helpdesk. It also contains additional information used in the assessment for an SDT.

Related links

[Special Disability Trust \(SDT\) - initial contact](#)

[Assessing a Special Disability Trust \(SDT\)](#)

[Gifting concessions to a Special Disability Trust \(SDT\)](#)

[Cessation of a Special Disability Trust \(SDT\)](#)

[Coding a Special Disability Trust \(SDT\)](#)

[Review of a Special Disability Trust \(SDT\)](#)

[Rates and thresholds index](#)

[Assessing house and curtilage](#)

[Supported Wage System \(SWS\)](#)

Process

For Complex Assessment Officer (CAO) use only.

This document outlines information on the process to determine if a child or adult can be approved as a beneficiary for a Special Disability Trust (SDT).

On this page:

[Beneficiary assessment - under 16](#)

[Beneficiary assessment - over 16](#)

[Complete the beneficiary assessment](#)

Beneficiary assessment - under 16

Table 1: this table describes the process to determine whether a child qualifies as a potential beneficiary of a Special Disability Trust.

| Step | Action |
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| 1 | <p>Begin beneficiary assessment + Read more ...</p> <p>Beneficiary assessments are generally requested by a parent or caregiver verbally or in writing. Permission to conduct a beneficiary assessment is implied.</p> <p>If an SDT is already established, assess both the trust and beneficiary, regardless of any expressed permission.</p> <p>Is approval to conduct a beneficiary assessment given?</p> <ul style="list-style-type: none"> • Yes: <ul style="list-style-type: none"> ○ for a child under 16, go to Step 2 ○ for a child 16 or over, see Table 2 > Step 1 • No, contact was for general information only. Refer the person to Department of Social Services, Special Disability Trusts, see Resources for a link <p>A person, or a representative, may contact to see if a new trust (including private trusts yet to be established) or an existing trust can be considered a Special Disability Trust (SDT). The proposed sole beneficiary must be assessed to see if they are a person with a severe disability or medical condition for SDT purposes.</p> |
| 2 | <p>Determine if child has a carer receiving Carer Payment + Read more ...</p> |

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| | <p>Is someone receiving Carer Payment (CP) for the child with a grant date post 1/7/2009?</p> <ul style="list-style-type: none"> • Yes, the child meets the requirement to be a potential beneficiary. See Table 3 to complete the beneficiary assessment process • No, go to Step 3 <p>Make sure payment was granted under the Disability Care Load Determination (DCLAD) with a qualifying rating of intense. This is achieved when there is a score of:</p> <ul style="list-style-type: none"> • greater than zero on the Treating Health Professional (THP) functional assessment, and • 85 or greater on the Care Needs Assessment (CNA) questions <p>If the carer is receiving Carer Allowance (CA) for the beneficiary, go to Step 4.</p> |
| 3 | <p>Carer payment granted before 1 July 2009 + Read more ...</p> <p>If the person providing care was granted before 1 July 2009, or assessed with an insufficient score:</p> <ul style="list-style-type: none"> • Send the carer all of the following: <ul style="list-style-type: none"> ○ Carer Payment Care Needs Assessment (For a Child Under 16 years) (SA394) ○ Carer Payment and Carer Allowance Medical Report (for a child under 16 years) (SA431) ○ Beneficiary Assessment RFI letter to complete and return the forms • Once the forms are returned, go to Step 5 <p>Note: if the CNA score is high (but not quite 85) or involves complex issues, for example, shared care, refer to the Carer Specialist Team (CSAT) to make sure all factors are considered.</p> |
| 4 | <p>Current Carer Allowance (CA) payment + Read more ...</p> <p>Is the customer currently getting a Carer Allowance (CA) payment?</p> <ul style="list-style-type: none"> • Yes, send the carer a: |

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| | <ul style="list-style-type: none"> ○ Carer Payment Care Needs Assessment (For a Child Under 16 years) (SA394), and ○ Carer Payment and Carer Allowance Medical Report (for a child under 16 years) (SA431) <ul style="list-style-type: none"> • No, tell the carer to lodge a CA (and/or CP) claim online, with all questions completed, that is, continue past the question about recognised disability. If the carer does not wish to claim either payment, send them: <ul style="list-style-type: none"> ○ the Carer Payment Care Needs Assessment (For a Child Under 16 years) (SA394), and ○ Carer Payment and Carer Allowance Medical Report (for a child under 16 years) (SA431) <p>Record all requests for information on a DOC on the customer and trust records.</p> <p>Does the child, as potential beneficiary, have their own record?</p> <ul style="list-style-type: none"> • Yes, record progress of the assessment on a DOC • No, create a record using child to person record conversion and record a DOC with progress of the assessment <p>Is there an existing trust record?</p> <ul style="list-style-type: none"> • Yes, use this to record progress of the assessment on a DOC • No, see Coding a Special Disability Trust <p>When the RFI review date falls due, check all linked records for requested information. If all documents are:</p> <ul style="list-style-type: none"> • returned, go to Step 5 to continue the beneficiary assessment • not returned, the beneficiary assessment cannot be completed. See Table 3 > Step 2 to finalise the assessment as unsuccessful <p>Note: if documents are returned and the beneficiary is not eligible, invite further information if the contact wants to proceed with reassessment.</p> |
| 5 | Documents returned + Read more ... |

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| | <p>When the forms are returned, either wait for the assessment of the CA/CP claim or assess the child against the Disability Care Load Assessment (DCLAD).</p> <p>Is there an existing assessment on the s47E(d) screen?</p> <ul style="list-style-type: none"> • Yes, go to Step 6 • No, see Calculating the total Disability Care Load Assessment Determination (DCLAD) (2020) score for steps to complete a Care load and Care needs assessment that will not be finalised (but recorded on the trust record before cancellation). Does the score meet the qualifying rating of intense? <ul style="list-style-type: none"> ○ Yes, the child qualifies as a beneficiary. See Table 3 ○ No, the child does not qualify, but allow the opportunity to provide further medical information. If not provided, or a qualifying rating is not achieved, go to Step 7 |
| 6 | <p>Continue beneficiary assessment coding + Read more ... s47E(d)</p> <p>See Calculating the total Disability Care Load Assessment Determination (DCLAD) (2020) score for more help.</p> <p>Did the child achieve a qualifying rating of intense with a THP score of > 0 and Care Needs Assessment (CNA) score >= 85?</p> <ul style="list-style-type: none"> • Yes, see Table 3 > Step 1 to finalise the Beneficiary Assessment as eligible • No, go to Step 7 |
| 7 | <p>Check DCLAD outcome + Read more ...</p> |

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| | <p>See Carer Specialist Assessment Team (CSAT) Referrals for Carer Payment (CP) (child) for guidance in cases which require further assessment by a CSAT social worker, including those where the CNA score is a near miss.</p> <p>Once the CSAT social workers provide a recommendation in a CSAT report, it is the decision of the CAO as to whether the child qualifies as a beneficiary of an SDT.</p> <p>If the recommendation in the report is to update the CNA to a qualifying score and this is accepted by the CAO, see Table 3 > Step 1 to approve the beneficiary assessment.</p> <p>If the recommendation in the report is the CNA does not need updating, or the CAO does not accept the recommendation and the child does not qualify, see Table 3 > Step 2.</p> |
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Beneficiary assessment - over 16

Table 2: this table describes the process to determine whether a person over 16 qualifies as a potential beneficiary of a Special Disability Trust (SDT).

| Step | Action |
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| 1 | <p>Criteria to qualify as a potential SDT beneficiary + Read more ...</p> <p>To approve an over 16 beneficiary they must satisfy all 3 of the following criteria:</p> <ul style="list-style-type: none"> • have an impairment that would medically qualify for: <ul style="list-style-type: none"> ○ Disability Support Pension (DSP), or ○ a Department of Veterans' Affairs (DVA) Invalidity Service Pension or DVA Invalidity Income Support Supplement (ISS), and • need the level of care to qualify: <ul style="list-style-type: none"> ○ for a carer for Carer Payment (CP) or Carer Allowance (CA), or ○ reside in an institution, hostel or group home in which care is provided for people with disabilities for which funding is provided under an agreement between the Commonwealth, States and Territories, and • have a disability that stops them from: |

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| | <ul style="list-style-type: none"> ○ working for more than seven hours per week for a wage at or above the relevant minimum wage, or ○ works in the supported wage system <p>Another indicator that would satisfy the medical criteria is evidence of residing in aged care. See the s47E(d) screen.</p> <p>Is the medical criteria satisfied?</p> <ul style="list-style-type: none"> • Yes, go to Step 5 • No, go to Step 2 |
| 2 | <p>Invite customer to lodge DSP claim + Read more ...</p> <p>If the potential beneficiary is not receiving DSP, invite the customer, or authorised contact, to lodge a claim online. Create a Centrelink record if the potential beneficiary does not have one. See Adding a customer to the system.</p> <p>Does the customer wish to claim DSP?</p> <ul style="list-style-type: none"> • Yes, they must submit the required documents for the claim and the CAO must wait for the outcome before completing the beneficiary assessment. See Table 3 • No, if they do not wish to claim DSP or would not qualify for other reasons, a separate assessment of the medical criteria is required. For example, age, income or assets. Ask for the following: <ul style="list-style-type: none"> ○ SU684 Verification of medical conditions(s) ○ Other supporting information. See Request an Employment Services Assessment (ESAt) for more details of medical evidence <p>Is there an existing trust record?</p> <ul style="list-style-type: none"> • Yes, use this to record progress of the assessment on a DOC • No, see Coding a Special Disability Trust <p>Has the requested information been provided within the specified time?</p> <ul style="list-style-type: none"> • Yes, go to Step 3 to action referrals to Assessment Services • No, see Table 3 > Step 2 to finalise the beneficiary assessment as withdrawn |

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| 3 | <p>Referrals to Assessment Services + Read more ...</p> <p>Is the potential beneficiary showing as Jobseeker Active (JSR/ACT) on the benefit status line?</p> <ul style="list-style-type: none"> • Yes, go to Step 4 • No, refer to assessment services: <ul style="list-style-type: none"> ○ Use Process Direct, and in the customer's record, s47E(d) ○ s47E(d) ○ s47E(d) ○ For more information see Registering a customer as a job seeker ○ Once the registration is completed and the job seeker status is active, go to Step 4 |
| 4 | <p>Proceed with referral + Read more ...</p> <p>Use Fast Note - select s47E(d)</p> <p style="text-align: right;">Make sure the</p> <p>option for not current DSP is selected and the activity correctly maps to Assessment Services.</p> <p>If the customer is not claiming DSP but needs the ESAt for a beneficiary assessment, the referral follows a different process to when a DSP claim is lodged.</p> <p>When the assessment is due or the outcome result is urgent, use the ESAt referral template to email Operational Workload Management Team - Disability and Carers.</p> |

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| | <p>Once the ESAt referral is returned, it is finalised by the CAO completing the beneficiary assessment. s47E(d)</p> <p>screens populate with details from the Report. See Checking and actioning Employment Services Assessment (ESAt) reports for help with finalising the ESAt assessment.</p> <p>When the referral is finalised, does the report show an impairment rating of 20 points or more?</p> <ul style="list-style-type: none"> • Yes, the customer meets the medical criterion and can be assessed for care requirements. Go to Step 5 • No, the customer does not meet the Medical Criterion: <ul style="list-style-type: none"> ○ discuss the assessment with the customer or nominee and invite further medical evidence and possible reassessment ○ if there is no request for a reassessment (or new evidence does not support a change in the rating), see Table 3 > Step 2 to finalise the beneficiary assessment as a rejection |
| 5 | <p>Care needs criteria + Read more ...</p> <p>Is care provided to the customer from a person receiving Carer Allowance (CA) or Carer Payment (CP), or through an institution, hostel or group home with government funding (under an agreement between the Commonwealth, States or Territories) in which they reside?</p> <p>Note: care which is only privately funded will not satisfy the care needs criteria and an assessment under the Adult Disability Assessment Tool (ADAT) will still be required.</p> <p>If not, check the s47E(d) screen. Has the customer been granted DSP with the manifest code s47E(d) (Assessment showing nursing home level care is required)?</p> <ul style="list-style-type: none"> • Yes, a further care assessment is not required as they meet the care criteria. Go to Step 8 for assessment of Work Capacity • No, go to Step 6 |
| 6 | <p>Care assessment + Read more ...</p> <p>Although it is not mandatory for a customer to be getting CP or CA to qualify, they must require a level of care that would entitle a sole carer to CA and/or CP.</p> |

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| | <p>If the carer does not wish to test their eligibility for either CA or CP, a separate care needs assessment may be required.</p> <p>Check if the care needs were previously assessed. For example, before the recent death of a care provider/parent.</p> <p>Were the care needs previously assessed?</p> <ul style="list-style-type: none"> • Yes, and the person met the care criterion, go to Step 8 • No, go to Step 7 |
| 7 | <p>Continue care assessment + Read more ...</p> <p>If further medical details are required to determine a customer's care needs, send the carer a Carer Payment and/or Carer Allowance Medical Report for a person 16 years or over (SA332A). Record this on a DOC on all linked records.</p> <p>Is there an existing trust record?</p> <ul style="list-style-type: none"> • Yes, use this to record progress of the assessment on a DOC • No, see Coding a Special Disability Trust <p>When the medical report is returned and the carer adult assessment tool is completed, does it show the customer has the required care needs (that is, Treating Health Professional (THP) score is 10 or more)?</p> <ul style="list-style-type: none"> • Yes, the care criteria are met. Go to Step 8 to assess work capacity • No, the customer does not meet the care criteria: <ul style="list-style-type: none"> ○ Discuss the assessment with the customer or nominee and invite further medical evidence and possible reassessment ○ If there is no request for a reassessment (or new evidence does not support a change in the rating), see Table 3 > Step 2 to finalise the beneficiary assessment as a rejection |
| 8 | <p>Work capacity criteria + Read more ...</p> <p>To meet this criteria, the customer must:</p> <ul style="list-style-type: none"> • not be working, and have no likelihood of working, for more than 7 hours a week for a wage at or above the relevant minimum wage. This would show on a recent Employment Services Assessment (ESAt), or Job Capacity Assessment (JCA), or |

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| | <ul style="list-style-type: none"> • be working under the Supported Wage System (SWS) or for an Australian Disability Enterprise (ADE) <p>Is the customer currently declaring earnings under a Supported Wage, (as shown on the s47E(d) screen), or with an Australian Disability Enterprise, or undertaking long-term vocational training (as shown on the s47E(d) screen)?</p> <ul style="list-style-type: none"> • Yes, they meet the Work Capacity Criterion, and if all other criteria are met, can be approved as a beneficiary. See Table 3 > Step 1 • No, check the s47E(d) or Document Tools for any recently completed JCA/ESAt assessments, that is, in the last 2 years <p>Do any of these assessments show a Job Capacity of 0-7 hours per week with intervention?</p> <ul style="list-style-type: none"> • Yes, the customer meets the Work Capacity criterion, and if all other criteria are met, can be approved as a beneficiary. See Table 3 > Step 1 • No: <ul style="list-style-type: none"> ○ Check the work capacity rationale to decide if the customer could benefit from DES interventions but would need ongoing intervention and support beyond 24 months to maintain employment. If so, refer for an SDT ESAt. Go to Step 9. or ○ If the Job Capacity was 8+ hours per week with no intervention required, then the customer fails the Work Capacity requirements. See Table 3 > Step 2 ○ In all cases where the customer fails to meet the criteria, discuss with the nominee/contact and invite a possible reassessment, either through further medical evidence, or if the condition(s) change. After discussion with the nominee/contact, there may also be other factors to consider. Go to Step 9 |
| 9 | <p>Work capacity assessment + Read more ...</p> <p>A manifest eligible indicator on the s47E(d) screen can also help to determine work capacity.</p> |

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| | <p>Is there a condition listed in the Manifest Code field?</p> <ul style="list-style-type: none"> • Yes, and the code is: <ul style="list-style-type: none"> ○ s47E(d) (assessment showing nursing home level care is required) and the customer: <ul style="list-style-type: none"> - is still residing in aged care (check the s47E(d) screen), or - has high care needs as per the Adult Disability Assessment Tool (ADAT) on the s47E(d) screen <p>Or</p> <ul style="list-style-type: none"> ○ s47E(d) (Intellectual Disability with a valid Full Scale IQ (FSIQ) of less than 70 or inability to be tested) and the assessment was completed in the last five years with a relevant medical code <p>The customer automatically satisfies the Work Capacity criterion for a beneficiary. See Table 3 > Step 1</p> • No, go to Step 10 |
| 10 | <p>Continue work capacity assessment + Read more ...</p> <p>Although there may not be a manifest code, are there other indications of a permanent intellectual disability? For example, I.Q. score <80 and behavioural issues, previous participation in Supported Wage System, Australian Disability Enterprise, long term vocational training and/or high ADAT score:</p> <ul style="list-style-type: none"> • Yes, accept the beneficiary is unlikely to work more than 7 hours at a relevant minimum wage and meets the Work Capacity Criterion. See Table 3 • No, and there is not enough evidence to accept an incapacity to work, request further medical evidence <p>Record all requests for information on a DOC on the customer and trust records.</p> <p>Is there an existing trust record?</p> <ul style="list-style-type: none"> • Yes, use this to record progress of the assessment on a DOC • No, see Coding a Special Disability Trust (SDT) |

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| | <p>When the RFI review date falls due, check all linked records for requested information. If all documents are:</p> <ul style="list-style-type: none"> • returned, go to Step 11 for the ESAt referral process • not returned, the beneficiary assessment cannot be completed. See Table 3 > Step 2 to finalise the assessment as unsuccessful |
| 11 | <p>Referrals to Assessment Services + Read more ...</p> <p>Is the customer showing as Jobseeker Active (JSR/ACT) on the benefit status line?</p> <ul style="list-style-type: none"> • Yes, go to Step 12 • No, refer to assessment services: <ul style="list-style-type: none"> ○ In Process Direct, in the customer's record, s47E(d) ○ s47E(d) ○ Select: s47E(d) ○ For more details, see Registering a customer as a job seeker <p>When the registration is completed and the job seeker status is active, go to Step 12.</p> |
| 12 | <p>Proceed with referral + Read more ...</p> <p>Use Fast Note - select s47E(d)</p> <p style="text-align: right;">Make sure the</p> <p>option for current DSP is selected and the activity correctly maps to Assessment Services.</p> |

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| | <p>When the assessment is due or the outcome result is urgent, use the ESAt referral request to email Operational Workload Management Team - Disability and Carers. See Resources for a link to this template.</p> <p>Once the ESAt referral is returned, it is finalised by the CAO completing the Beneficiary Assessment. s47E(d) screens will populate with details from the Report. See Checking and actioning Employment Services Assessment (ESAt) reports for help finalising the ESAt assessment.</p> <p>Go to Step 13.</p> |
| 13 | <p>Completing work capacity assessment + Read more ...</p> <p>Does the ESAt show the customer has a work capacity of less than 8 hours per week in open employment?</p> <ul style="list-style-type: none"> • Yes, they meet the Work Capacity criterion. See Table 3 > Step 1 to complete the beneficiary assessment • No, they fail the Work Capacity criterion: <ul style="list-style-type: none"> ◦ Check the outcome is consistent with any care needs, and invite a possible reassessment ◦ If the nominee or customer declines to provide new information, or if new evidence does not alter the assessment, see Table 3 > Step 2 to finalise the beneficiary assessment as a rejection |

Complete the beneficiary assessment

Table 3: this table describes the process to complete the beneficiary assessment for an adult or child under 16.

| Step | Action |
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| 1 | <p>Beneficiary either under or over 16 meets all criteria + Read more ...</p> <p>Has the beneficiary, either under or over 16, met all the relevant criteria?</p> <ul style="list-style-type: none"> • Yes, record the grant outcome on a DOC on the trust record. See Coding a Special Disability Trust (SDT) • No, go to Step 2 |

Once finalised, make sure the automatic grant letter is not sent and the [s47E\(d\)](#) [screen](#) shows this. Issue a [Beneficiary Assessment approval](#) manual letter. The letter should include or request the following, **except** when the beneficiary assessment is solely for the purpose of seeking a land tax exemption:

- Copy of the SDT Trust Deed, dated and signed, including schedules
- Module SDT (to be completed by the trustee/contact)
- Statutory Declarations under S1209Q of the Social Security Act, 1991, completed by all the Trustees
- Details of the assets (if any) of the Special Disability Trust. As well as a completed Schedule A, there should also be documents that identify all assets held or donated

If the SDT will be holding or receiving assets of a deceased estate, also request:

- Copy of the Will
- Copy of the Grant of Probate
- Copy of the inventory of assets of the estate

If the SDT will be holding or receiving real estate, also request:

- Module R (Real Estate)
- Copy of the Transfer of Title
- Copy of the new Certificate of Title
- Proof of purchase or transfer of real estate into the names of the trustees

If the trust is in the process of settlement, or it has already been set up, record this on a **DOC** and hold for return of any requested information. See [Assessing a Special Disability Trust](#) for more help.

Otherwise, procedure ends here.

Note: in very limited circumstances, the SDT may be converted from a pre-1 January 2011 fixed trust, from which the deed cannot be varied.

In this case, also request [Statutory Declaration - Waiver under the Social Security \(Special Disability Trust\) Guidelines 2011 under Section 1209U \(4\)](#)

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| | <p>of the Social Security Act 1991 from all the trustees or directors of the trustee company.</p> |
| 2 | <p>Beneficiary either under or over 16 fails one of the criteria + Read more ...</p> <p>Has the beneficiary been assessed as failing one of the criteria?</p> <ul style="list-style-type: none"> • Yes, go to Step 3 to finalise the rejection • No, and there is not enough information to make an assessment against any or all criteria. The trust record must be marked as withdrawn: <ul style="list-style-type: none"> ○ See Coding a Special Disability Trust (SDT) ○ Record a DOC on all linked records and issue the Beneficiary Assessment withdrawn manual letter to the customer or their nominee ○ Procedure ends here |
| 3 | <p>Finalise the beneficiary assessment as a rejection + Read more ...</p> <p>Finalise the beneficiary assessment on the trust record as a rejection. See Coding a Special Disability Trust (SDT).</p> <p>Make sure the automatic advice lists the correct rejection reason. If not, issue a manual letter instead of the automatic advice.</p> <p>If the customer who failed the assessment is under 16 years of age, amend the standard text for the rejection to include:</p> <ul style="list-style-type: none"> • 'assessed under CDAT as not meeting the qualifying rating of intense' • full details of the Treating Health Professional (THP) and Care Needs Assessment (CNA)) <p>Note: in all under 16 cases, consider whether a Carer Specialist Team (CSAT) referral is justified.</p> <p>When telling the trust contact about the rejection, explain that it can be reassessed if new information is provided, or the condition(s) deteriorates.</p> <p>Procedure ends here.</p> |

References

Policy

[Social Security Guide, 4.14 Means Test Concessions for special disability trusts](#)

Legislation

Links to the Federal Register of Legislation site go to an 'All versions' page. Select the 'Latest' version.

[Social Security Act 1991](#)

- [section 197, Definitions](#)
- [section 1209M, Beneficiary requirements](#)
- [section 1209Q, Trustee requirements](#)

Determination

[Social Security \(Special Disability Trust - Trust Deed, Reporting and Audit Requirements\) Determination 2023](#)

Resources**Template**

s22



[ESAT request](#)

Forms

[Special Disability Trust \(MOD SDT\)](#)

[Real estate details \(MOD R\)](#)

[Carer Payment and/or Carer Allowance - Medical Report \(for a person 16 years or over\) \(SA332A\)](#)

[Carer Payment and/or Carer Allowance - Care Needs Assessment \(for a child under 16 years\) \(SA394\)](#)

[Carer Payment and Carer Allowance - Medical Report for a child under 16 years \(SA431\)](#)

External websites

Department of Social Services (DSS):

- [SDT - Statutory Declaration](#)
- [SDT - Statutory Declaration reasons](#) - additional information regarding the required wording for SDT statutory declarations
- [Planning for the future](#) - information on planning for the future care of a person with disability

Contact details

s47E(d) - Use the form to submit an enquiry requesting support with determining the level of care.

Intranet links

[Complex Assessment](#)

Training & Support

Add the course number to the Search field in the s47E(d) in ESSentials:

- s47E(d) - Special Disability Trusts