



Step modifications of two or more steps to allow for a mobility frame and/or walker access are considered a complex modification. This form or similarly detailed information should be provided when submitting a complex step modification application using the [Home/Access Modifications Application form \(D1327\)](#) with other supporting documents as outlined in Part K. **THIS FORM IS NOT COMPULSARY.**

As per [RAP National Guidelines](#): DVA does not pay for the installation of steps where steps do not currently exist. DVA does not repair, maintain or replace steps that do not meet the relevant building code and are uneven and /or unsafe.

Modifications are limited to widening/ increasing depth of the step tread or reducing the height of the step to accommodate a walking aid such as a walking frame, where simpler access and mobility options are not suitable.

Simpler access options and other options such as a provision of a second walking frame should be considered before submitting a complex step modification application.

In Australia there are no Building Standards that provide recommended dimensions for platform steps to accommodate mobility frame and walker access.

Client Name: \_\_\_\_\_ DVA Card No: \_\_\_\_\_

Date of this specification: \_\_\_\_\_

Has a joint site visit taken place with the building contractor?  Yes  No

If yes, date of site visit: \_\_\_\_\_

Persons present at site visit: \_\_\_\_\_

**General Description of Proposed Modifications**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please tick all relevant specifications required for this modification.*

Occupational Therapist's specifications for major modification – step modifications		Comments
The simpler option of having two walkers, one at the top of the stairs and the other at the bottom of the stairs has been considered	<input type="checkbox"/> Yes <input type="checkbox"/> No	
The footprint/dimensions of the client and relevant walking aid _____mm x _____mm	<input type="checkbox"/> Yes <input type="checkbox"/> No	



Occupational Therapist's specifications for major modification – step modifications		Comments
<p><b>Location</b> Steps to be installed at the</p> <p><input type="checkbox"/> Front access   <input type="checkbox"/> Rear access   <input type="checkbox"/> Internal</p> <p><input type="checkbox"/> External other: _____</p>		
<p><b>Landing at door</b> If leading directly to a door, a landing is required at the door</p> <p><i>Note: Refer to AS 1428.1 (2021) with consideration of circulation space for person, equipment and carer/s.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>	
<p>Upper landing dimensions comply with AS 1428.1 (2021) - Figures 31 &amp; 32 – Circulation spaces at doorways</p> <p>Doorway clear opening: _____ mm</p> <p>Direction of approach to doorway from ramp:</p> <p><input type="checkbox"/> Hinge-side <input type="checkbox"/> Latch-side <input type="checkbox"/> Front approach</p> <p>Top landing to be _____ mm length x _____ mm width</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>	
<p><b>Platform steps</b> Step tread depth to be _____ mm length x _____ mm width</p> <p><i>Note: Suggested minimum tread depth 850 mm</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Step height to be _____ mm length x _____</p> <p><i>Note: Suggested maximum height 95- 105mm</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>The step nosing should have a strip of slip resistant paint /colour contrast, with a minimum slip resistant classification of P4 or R11 (dry surface) or P5 or R12 (wet surface). The width of the strip should be approximately 50-75mm</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p><b>Railing</b> Handrails to be positioned on</p> <p><input type="checkbox"/> Left   <input type="checkbox"/> Right   <input type="checkbox"/> Ascending   <input type="checkbox"/> Bilateral</p>		
<p>Has the client been advised of their ongoing responsibilities in terms of maintenance of the platform steps?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	



Diagrams with measurements attached (please attach and tick)  Yes  No

[Authority to Install \(D1323\)](#) attached which reflects the final specifications  Yes  No

OT Signature: \_\_\_\_\_ Contact Number: \_\_\_\_\_

OT Name: \_\_\_\_\_ Contact Email: \_\_\_\_\_