A Guide to Personal Independence Payment Assessments.

About This Guide.

Welcome to this Guide to the Personal Independence Payment (PIP) assessment process.

We've brought together all the information you need to get you through the assessment, whether it's you going through it, or a relative or someone else that you care for.

We've included some basic information in the guide on PIP itself, but our main focus is on the assessment process, and helping you get the benefit to which you are entitled.

This guide will be of use both to people making new applications for PIP, and those who are moving from Disability Living Allowance, DLA, to PIP.

Basic Information about PIP.

Who is PIP For?

PIP is a new benefit paid to people who live with one or more disabilities, and/ or one or more long term health conditions which impact on their daily life.

It's replacing Disability Living Allowance, DLA, but only for people aged between 16 and 64:

- You can't apply for DLA any more, all new applications are now for PIP.
- If you're currently claiming DLA you'll have to change to PIP at some point over the next few years.

PIP is meant to help people towards the extra costs they may face as a result of their health or disability, but if you're claiming it, you can spend it how you want.

Because PIP is meant to help towards these extra costs:

- It's not means tested, you can claim it however much you earn.
- You can claim it whether or not you are working. Some people use it to help them stay in work.
- You don't get taxed on it, i.e. you won't pay any extra tax because you get it.
- You won't lose any tax credits or Universal Credit because you get it, in fact you may get more, depending on the level of impact of your condition/ disability.
- You can claim it whatever the level of National Insurance contributions that you've made in the past.

PIP is also a benefit that supports people who are terminally ill. There are special rules for applying for PIP if you are terminally ill. The best summary of these rules can be found on the Citizens Advice Website.

Helping You with the Extra Costs of Daily Life.

PIP is designed to help you with the extra costs you in your day to day life.

It has two parts, called 'components' by the DWP:

- The daily living component.
- The mobility component.

Payment in relation to each of these components is either at:

- Standard rate, or
- Enhanced rate, for those whose conditions have a greater impact on them.

You can receive payments in relation to both daily living and mobility components, or just one of the two, and any combination of standard and enhanced rates.

PIP is for People with Long Term Disabilities/ Health Conditions.

PIP is not designed to help people whose disability or health condition only impacts on them in the short term.

This means that it should have been affecting you for 3 months prior to your filling in the form, and that you expect it to impact on your health for a further 9 months. (This rule does not apply for people applying for PIP who are terminally ill.)

If you are transferring from DLA to PIP, it will be assumed that you have already had your condition for 3 months.

If you are due to have an operation that may improve your health within the next 9 months, you will be assessed as if the treatment or operation was not taking place.

Who Can Apply for PIP?

There are two groups of people who can apply for PIP:

- Those who are starting a new claim.
- Those who are already claiming DLA and are making the transfer to PIP.

If You Are Starting a New Claim.

If you wish to make a new claim for PIP, you start the process by contacting the DWP.

This can be done by calling the following numbers, Monday to Friday, 8am to 6 pm:

- The DWP's telephone line on 0800 917 2222.
- The DWP's textphone line on 0800 917 7777.

When you call, you will be asked for the following information:

- National Insurance Number.
- Your contact details.
- Your date of birth.
- Your Bank/ Building Society account number if you have one.
- The name of your doctor or the health care worker who knows you best.
- Whether you have spent any recent time in hospital, a care home, or whether you have been living abroad.

You can get someone to call on your behalf, but you must be with them when the call is made, unless you complete a mandate form, so that the DWP know that it is genuinely you that they are helping.

To take your claim forward, the person you speak from the DWP will make sure that you satisfy some 'basic conditions':

- You must normally live in the UK (see here for more), and have done so for at least two of the last three years.
- You must not be subject to immigration control (see here for more).

You should also be aware that PIP is not paid to people during a long term (more than a month) stay in a hospital or care home, so they will check that your are not in one of these situations.

Once the DWP are happy that you are eligible for PIP, they send you a form, 'How Your Condition Affects You', and the main part of the process begins.

If You Are Currently on Disability Living Allowance.

You may be one of the 1.7m people in Great Britain aged between 16 and 64 who are currently claiming Disability Living Allowance, DLA.

If so, unless you turn 65 before the process reaches you, you will at some point have to move off DLA, and will be asked if you wish to claim PIP instead.

The Department for Work and Pensions, DWP, has now begun the process of moving people to the new benefit.

If you're currently claiming DLA and haven't yet been contacted by the DWP, there is no need to panic. You don't need to do anything yourself about the situation and can wait until the DWP contacts you.

The process of getting everyone onto the new benefit will take some time, and is currently being rolled out on a phased basis across the country. The Government currently plans to finish the transition by May 2018.

You can choose to apply for PIP now if your disability worsens and you think you would be entitled to more money under PIP than you are under DLA. You should take advice from a trained welfare rights adviser before taking that course of action.

If you live in another area you should continue to report any changes to your condition to the DWP. You DLA might go up and down, but you will not be transferred to PIP until the transfer programme reaches you.

When it's time for you to make go through the process the DWP will write to you. You will then have 28 days to start your claim for PIP. If you do not start your claim within this time, your DLA may be suspended after four weeks, and after a further four weeks it may be terminated.

Assessing Your Claim.

Assessment Process Basics

The process of applying for PIP involves the following stages:

- Everyone must complete the 'How Your Condition Affects You' form.
- Most people are then invited to attend a face to face medical assessment with a medical assessor working for an independent contractor commissioned by the government.
- A DWP decision maker deciding on the outcome of your claim, based on the recommendation of the medical assessor.

Each bit of the process is important to the final result. When making their recommendation, the assessor will consider:

- Everything that you write on the application form.
- All the evidence that you gather and send in.
- The answers you give at your face to face medical assessment.

This section explains in more detail how that recommendation and final decision are reached.

'Activities'

The decision about whether or not you are entitled to PIP is made by looking at how your disability or health conditions affect the way you carry out a number of different 'activities'.

To make their decision about the daily living component of PIP, the assessor looks at the impact of your disability/ health conditions on ten different activities.

These are:

- Preparing food.
- Eating and drinking.
- Managing your treatments.
- Washing and bathing.
- Managing your toilet needs/ continence.
- Dressing and undressing.
- Communicating verbally.
- Reading and understanding written information.
- Mixing with others.
- Making decisions about money.

To make their decision about the mobility component of PIP, the assessor looks at the impact of your disability/ health conditions on just two different activities:

- Planning a journey.
- Moving around.

'Descriptors' and Scores.

For each of these activities, the assessor looks at which of a number of 'descriptors' best describes your situation. Each of these descriptors has a score attached.

You can see what this means in more detail by looking at the descriptors for dressing and undressing, and for moving around.

The descriptors, and points scores, for dressing and undressing are as follows:

- The applicant can dress and undress unaided- this scores no points.
- The applicant needs to use an aid or appliance to be able to dress or undressthis scores two points.
- The applicant needs either -
 - (i) prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed- *this scores two points*; or
 - (ii) prompting or assistance to be able to select appropriate clothing- this also scores two points.
- The applicant needs assistance to be able to dress or undress their lower bodythis scores two points.
- The applicant needs assistance to be able to dress or undress their upper bodythis scores four points.
- The applicant cannot dress or undress at all- this scores eight points.

The descriptors for moving around are as follows:

- The applicant can stand and then move more than 200 metres, either aided or unaided- this scores 0 points.
- The applicant can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided- *this scores 4 points*.
- The applicant can stand and then move unaided more than 20 metres but no more than 50 metres- this scores eight points.
- The applicant can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres this scores ten points.
- The applicant can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided *this scores twelve points*.
- The applicant cannot, either aided or unaided, -
 - (i) Stand- this scores twelve points; or
 - (ii) (ii) move more than 1 metre this scores twelve points.

The Final Score.

At the conclusion of the assessment, the assessor will have a score, on which they base their recommendation to award you the benefit or not. The actual decision to award you PIP or not is made by a DWP decision maker.

The score is worked out by adding together the highest score under each of the activities.

For both the daily living and the mobility components, you need eight points in total to get the standard rate, and twelve points to get the enhanced rate.

You can get to those scores by having a disability or health condition which has some impact on lots of areas of your daily life, or by having a disability or health condition which has a major impact on one area of your daily life.

Key Messages When Applying.

At each of the stages of applying for PIP you should think about:

- What it really means when you say you can do something.
- Whether the impact of your disabilities/ health condition varies over time.

You should also make sure that everything you say about the condition is honest and accurate.

You Can Do Something, but How Do You Do It?

If someone asks you whether you can do something, the answer is not always simple. You might usually answer that you can, even though it takes you a long time, or causes you pain when you do it.

Your PIP medical assessor will looking to see what doing something actually means in practice.

To count as being able to do something under the PIP assessment you must be able to do something:

- Safely, without any risk to yourself or others.
- To a reasonable standard. Looking at the washing or bathing activity as an example, this means the assessor is interested if you can actually wash yourself properly.
- Repeatedly. This means as often as might reasonably be required. Looking at
 the mobility activity as an example, this means the assessor will want to know
 when you walk a certain distance whether it exhausts you, and if you can make
 the journey back the way a short time later.
- Within a reasonable time period. Looking at the dressing and undressing
 activity, this means the assessor will want to know how long it takes you to get
 dressed, in particular if it takes you more than twice as long as the longest time
 it would someone without a disability or health condition.

The assessment will make one other key assumption when it looks at whether you can carry out an activity; that you are wearing or using relevant aids and appliances that might help you. This assumption is made even if you don't use such aids and appliances. If you do use such, you should make that clear, as it can help you score more points on some activities.

When Your Condition/ Disability Varies

You may well be someone who has good days and bad days, good weeks and bad weeks, and never be certain about how your disability or health condition is going to impact on you over the next while. The DWP calls this a fluctuating condition.

The assessment will take this into account. It will not assume that just because you can carry out a particular activity on your best day, you can usually carry it out.

Because your condition varies, more than one descriptor might apply to you over the course of a week, month, or year. The assessor therefore looks at how often each of the range of descriptors under an activity apply to you.

You need to make clear on your form, in your assessment, and in the supporting information you submit, how your condition varies day to day. In particular, it needs to be clear how it affects you on your worst day.

You may find it useful to keep a diary of the way your condition/ disability affects you. This help you identify the impact on you of carrying out a task, for example if you do a lot of an activity one day, does that leave you exhausted the next or next few days? It may also help you identify the impact of treatment on one day over the days that follow. This could include being left exhausted by the effort of being engaged in counselling.

You should also ask the person who knows your condition best to be clear in the evidence they provide about how your condition varies.

Answering Honestly and Accurately.

You may be used to hiding the full impact of your disability and health conditions on your daily life. When people ask you how you are, you may often say 'Not so bad', and it can be difficult to admit that things are as difficult as they are.

When you apply for PIP you should not put on a brave face, but should be honest about the impact of your disability and health conditions on your life. The information that you provide is confidential and will only be used to assess your entitlement to benefit.

In the same way as you shouldn't hide the impact of your condition/ disability on your daily life, you should also not pretend that things are worse than they really are. Knowingly submitting false information as part of a benefit application in order to access benefits is a criminal offence.

Going Through the Process

Completing the Form

Once your claim has started you will be sent the 'How Your Disability Affects You' Form.

This asks you about how your disability or health condition makes things difficult for you in your daily life.

The form might look long at first, and it does ask you personal questions.

But it is less daunting than it looks at first glance. You don't have to complete it in one sitting, and all you have to do is answer the questions honestly and accurately, there are no trick questions.

If you aren't sure about how to complete the form, it is a good idea to seek help. You may be able to get help from your local CAB, another local advice centre, or from your local council.

Information about where to get help is available from the CAB and Advice UK. If you're getting support with your disability/health condition from a charity, a health worker or a social worker, they will also be able to point you towards help.

You must complete and return the form within 4 weeks.

Collecting Evidence

The DWP ask you to send in evidence about how your condition affects your daily life along with the form.

You can get this evidence from a number of different people. Do not feel that the only person you can ask is your GP, a letter from your GP is a good idea, but you should also ask the health worker or social worker who knows you best.

You can provide as much supporting information as you like, as long as it is focused on the impact of your disability/ health condition on YOUR life.

What Happens Next.

The DWP pass your completed form, and all the evidence you have sent in, to the medical assessor.

The assessor will be a health professional employed by one of the companies contracted to do the assessments.

They will look at the information they have and then:

- Decide if they need more. If they think they do, they will contact the doctor, health work or other professional named on your form, or in your supporting evidence.
- Decide if they can award you PIP without giving you a face to face medical assessment.

In most cases, the assessor will decide that you do need to go through a face to face assessment to get PIP.

The Face to face Assessment.

Practicalities

Timing

Face to face assessments vary in length, but usually last around 60 minutes.

Notice.

You should get at least 7 days notice of the assessment, telling you the time, the place and the date. You can be offered a quicker assessment, but are under no obligation to accept that offer.

If you can't make it to the appointment you must let the DWP know. If you do not, and you do not go, your benefit will be affected and may be stopped until you do attend an assessment. You will not usually be able to cancel more than one appointment without it affecting your benefit.

Venue

The face to face assessment will usually take place in an assessment centre, specifically used for the purpose. It can also take place in a local health centre.

You can request a home visit if:

- You live more than 90 minutes travel by public transport from the assessment centre.
- You are not fit for travel. In practice this means thinking about whether the GP would usually visit you, rather than you visit his surgery. If you do request a home visit, you will usually be required to provide medical evidence to back up this request.

Travel and Expenses.

You will be able to claim back reasonable expenses in relation to attending the face to face assessment. These can include:

- Travel costs.
- Taxi fares where other options are not appropriate and you discuss in advance with the DWP.
- Other travel related costs, including parking, tolls and congestion charges.
- Child care costs for young children, if someone has to look after your child or children whilst you are at the assessment.

No other costs can be claimed back, for example for meals or loss of earnings.

You should ask for a travel reimbursement claim form at the assessment if you do not have one, and make sure you keep bus/ train tickets/ receipts or parking tickets/ receipts for both yourself and anyone who accompanies you.

Planning Your Travel

Plan your journey to the place where the assessment is being held in advance, there should be a map with your appointment letter.

- If you are using public transport, be clear about the times, numbers and destinations of the buses or trains you will be using.
- If you are travelling by car, be clear where you will park.
- Have a street plan with you that shows where the assessment will take place, so that you know how to get from your bus stop/ train station to where the assessment is being held.
- Know how long it will take you to get from the bus stop/ train station to where the assessment is being held.

NB: Travel to the assessment is a particularly important that the assessor will pick up in questions, because they will be interested in how well you can get around, and how well you can plan a journey. If you have walked some distance from a bus stop or car park to the place where the assessment is taking place, it is unlikely that you will score highly relating to mobility, unless you can demonstrate that you would usually not be able to do so.

Your Rights

Your Right to Interpretation Support

You have the right to interpretation support if:

- You struggle to communicate in English.
- You are deaf, and wish to communicate in BSL.
- You prefer that the assessment is carried out in Welsh.

You should contact the assessment company's customer service centre on the number given on the appointment letter if you wish to have interpretation support.

Your Right to Be Accompanied

You have the right to be accompanied at your assessment. You can ask a relative, friend, carer or a paid advocate or other professional working with you to attend.

They can simply be present to give you reassurance, or can speak on your behalf in the assessment, or take part in some other way, if you wish them to do so.

Your Right to Record the Assessment.

The assessment isn't recorded by the assessor. You can audio record the assessment, but you must inform the assessor before you attend the appointment that you plan to do so. If you try to record the assessment secretly, you may have your claim turned down automatically. You must also be able to provide a full and accurate copy of the recording to the health professional at the end of the session, either on CD or audio cassette. You cannot video record the assessment.

Preparing for the Face to Face Assessment.

Documents

It is a good idea to have taken a photocopy of any forms that you have submitted, including the initial application form, and of any written evidence that you have from your doctor or other health or support worker.

You should re read these before the assessment. They are the background information that the assessor will be using.

It is possible that your condition has changed since you submitted your application, in particular, it may have worsened. If you can, ask your doctor, or other health worker to write a letter about that change, which you should then bring with you to the assessment.

If you feel that there was more supporting evidence that you could have provided in your application, bring the relevant documents with you. The assessor will take a copy of these, and consider them as part of the process.

Being Ready for the Questions.

So that you don't forget to mention them, make a list of:

- Your health conditions and your disabilities.
- The ways in which these conditions and disabilities impact on the daily living and mobility activities looked at by the assessment.

You might find it helpful to use the PIP assessment tool on <u>this website</u> to help you think through the things that you want to communicate to the assessor. You may also find it useful to look at the full list of activities and descriptors on the <u>Citizens Advice website</u>.

The assessor will ask you a number of questions about the impact of your condition/ disabilities on your life.

The questions won't be straightforward repeats of the descriptors and activities. They are more likely to be open questions about how you cope with undertaking certain activities.

You should also be aware that the assessor will be observing you during the assessment, and that some of the questions may focus on how you have prepared for coming to the assessment, and how you have got here.

If you are not sure what a question means, ask the assessor to explain, and take your time answering.

The Decision

Once you have been assessed, the medical assessor will look at your application, all the additional information you have provided, and review the answers you have given in the assessment.

They will then write a report, which will be sent to a decision maker at the DWP, who will check that everything has been done correctly.

The decision maker will then decide if you are entitled to support, what type of support you are entitled to, and the level of support that you will receive.

The decision maker will decide your case in one of nine different ways, and you will be paid accordingly.

These are set out in the table below.

Daily Living Component	Mobility Component
Enhanced rate.	Enhanced rate.
Enhanced rate.	Standard rate.
Enhanced rate.	No payment.
Standard rate.	Enhanced rate.
Standard rate.	Standard rate.
Standard rate.	No payment.
No payment.	Enhanced rate.
No payment	Standard rate.
No payment	No payment.

The DWP will write to you to tell you what decision they have made on your application. This may take 4-8 weeks.

They will give you an explanation of why they have come to that decision. This will include setting out the points that you received in the assessment as a whole and under each activity. The letter will also tell you how much you will get, and the length of time before the DWP will look at your case again to see if your circumstances have changed.

Payment Rates

In 2015/16 PIP is paid at the following rates.

Daily Living Component:

- Standard rate- £55.10.
- Enhanced rate- £82.30.

Mobility Component:

- Standard rate- £21.80
- Enhanced rate- £57.45

Passporting Benefits.

One of the most important aspects of PIP is that, like DLA, it acts as a 'passport' to other benefits or help.

Some of these benefits/ help are for you, some are for the person who cares for you. Some are paid in cash, as new benefits or sometimes as top ups on benefits you are already getting. Others are about entitlement to in kind support, such as access to the blue badge scheme for disabled people's parking, or Motability.

Entitlement to these benefit/ this help will depend on which components of PIP you are getting, at which rate. Entitlement may also vary dependent on where you live in the UK.

You can find a list of the benefits/ help to which you may be entitled on the Citizens Advice Website:

- Here if you live in England.
- Here if you live in N. Ireland.
- Here if you live in Scotland.
- Here if you live in Wales.

Unhappy with the Decision?

First Steps

You may be unhappy with the decision that you get from the DWP.

The DWP say that they will try and contact you to explain their decision once you have got the letter saying that you aren't eligible for PIP.

When they do, you can tell them if you don't agree with the decision. You can also give them more information to support what you are saying, for example if your circumstances change.

It is possible, though unlikely, that the DWP will decide to award you the benefit at this point.

Mandatory Reconsideration

More likely, your next step is to request what is called a 'mandatory reconsideration'.

This means formally asking the DWP to look again at their decision. The quickest way to do this is by phoning the DWP. If you do not want to call them you must write to the address on your decision notice. You need to explain why you do not agree with the decision, you can also include further supporting information.

If you are unhappy with the decision that you have received, you need to take action quite quickly. You only have one month from the date of the decision letter to ask for a mandatory reconsideration.

The DWP will then review its decision, and will write to you to tell you what that decision is, and to explain why they have reached it.

Appeal

If you are still unhappy with the decision you have received, you can appeal against it.

Again, you need to act quickly. You must make your appeal in writing or on form SSCS1 within one month of the date of the letter telling you the result of your mandatory reconsideration. You must send a copy of the DWP's mandatory reconsideration notice with your appeal.

We recommend that you get support from a CAB or other advice agency with submitting the mandatory reconsideration. We even more strongly recommend that you seek such support if you are appealing against a decision.

Information about where to get help is available from the CAB and Advice UK.