

GUIDE TO CLAIMING PERSONAL INDEPENDENCE PAYMENT

STEP 1: STARTING YOUR CLAIM

- To start a claim for PIP, telephone the DWP on 0800 917 2222.
- If you are concerned about the cost of the call, you can ask the DWP to call you back.
- If English is not your first language, ask the agent answering your call to use the DWP translation service called 'thebigword'.
- Someone to support you or act on your behalf
- If you need someone to support you, a relative, carer or friend can make the call for you. You must be present so that you can confirm that the person supporting you has your permission to make the call.
- If you have a person appointed to act on your behalf (an 'appointee'), they must telephone to make the claim and you do not have to be present.
- If you have no one to support you to make the call
- If you need support to make the call but do not have anyone to help you, you will still need to make the initial phone call.

If you are unable to deal with making the claim over the phone, when you call you can ask for a paper claim form to be sent to you. You can then work through the form in your time and seek independent advice if needed. Alternatively, you can request a home visit from a DWP visiting officer to help you complete the claim form.

To make a claim

Tel: 0800 917 2222
Textphone: 0800 917 7777

Lines are open Monday to Friday, 8am to 6pm

Calls are free from UK landlines and from most mobile networks

Preparing for the call

You will need the following information ready before calling the DWP:

- your full name, address and telephone number;
- your National Insurance number;
- your date of birth;
- your bank or building society account details;
- details of your GP and any other health professionals who support you;
- details of any recent stays in hospital or care homes;

- your nationality or immigration status; and
- details of time spent abroad if you have been abroad for more than four weeks at a time over the last three years.

What will you be asked during the call?

When you make the phone call, you will be put through to a DWP agent. The agent will ask you a number of questions. The call should take about 15 minutes.

The agent will ask you questions to confirm your identity and to find out if you satisfy the basic qualifying conditions for PIP (*see Appendix A*). They will also ask how you would want to be paid if you are awarded PIP. You have the option to answer 'don't know' to some of these questions.

You will be asked whether you have any of the following conditions:

- a mental health condition;
- a behavioural condition;
- a learning difficulty;
- a developmental disorder;
- a memory problem.

This is to help the DWP find out if you might need additional support or help through the claim process.

Tell the agent if you have a terminal illness so that they can fast track your claim and send you the relevant form.

At the end of the telephone call, the agent will read out a declaration and ask you to agree to it. Your agreement confirms that the information you have given is true and accurate. The date on which you agree this declaration will be the date your PIP will be paid from if your claim is successful (unless you are claiming PIP as a previous DLA claimant).

WHAT HAPPENS NEXT?

Once the DWP has established that you meet the basic qualifying conditions (*see Appendix A*), you will be sent the claim form to complete.

If you do not meet the basic qualifying conditions, you will be sent a letter explaining that your claim for PIP is disallowed. If you believe that you do meet the basic qualifying rules, you can ask the DWP to look again at the decision (*see Step 5 of Section 2*).

Claiming PIP if you are terminally ill

There are different rules known as the 'special rules' to enable people who are terminally ill to make a PIP claim and receive a decision more quickly. You are considered to be terminally ill if your death can 'reasonably be expected' within the next six months.

If you meet the conditions for claiming under the 'special rules' you:

- will not have to complete the How your disability affects you (PIP2) claim form;
- will not need to attend a face-to-face consultation; and

- are guaranteed an award of the enhanced rate of the daily living component without having to wait until you satisfy the qualifying period (see the disability conditions in Appendix A).

You will only receive the mobility component if you meet the relevant disability conditions (see Appendix C), there is no automatic entitlement. If you do qualify, it will be paid straight away.

How much money is PIP?

The weekly **daily living** component is:

Enhanced rate £87.65 from April 2019

Standard £58.70 from April 2019

The weekly **mobility** component is:

Enhanced £61.20 from April 2019

Standard £23.20 from April 2019

Making a claim

A 'special rules' claim can be made by telephoning the normal PIP claim line on 0800 917 2222 (textphone 0800 917 7777). The call can be made by someone supporting you (such as a family member or a support organisation) without you needing to be present. You will be asked some questions about your condition and how it affects your ability to get around.

The DS1500 form

You will be asked to get a DS1500 medical report from your GP, hospital consultant, nurse, Macmillan nurse or social worker to support your 'special rules' claim.

The DS1500 is a report about your medical condition and should be provided free of charge. Either you or the person issuing you with the DS1500 can send it to the DWP but it should be sent as quickly as possible. You will also be given a freepost address to return the medical report when you have got it. The DWP should fast track a decision on your PIP claim once it has received the DS1500.

STEP 2: COMPLETING THE CLAIM FORM

How your disability affects you

If you satisfy the basic qualifying conditions for PIP (see *Appendix A*), the DWP will send you a *How your disability affects you* (PIP2) claim form. They will also send an information booklet to help you complete the form and a freepost envelope in which to return your completed form. We recommend that you read about the PIP assessment in *Section 1* before you start completing the claim form. You can view a sample PIP2 form at

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/259311/pip2-how-your-disability-affects-you-form.pdf

How the form is structured

Questions 1 and 2 ask you to list your health professionals, health conditions and medication.

Questions 3 to 12 are about the ten daily living activities.

Questions 13 and 14 are about the two mobility activities.

Question 15 asks you to provide any additional information.

Scoring points

Each question from 3 to 14 asks about your ability to carry out an everyday activity. The aim is to find out if you can carry out these activities 'safely', to an 'acceptable standard', 'repeatedly' and within a 'reasonable time period' (See the *Glossary* and *Section 1* for what these terms mean and some examples). If you can't perform a task, you will score points.

Your entitlement will be assessed against a series of 'descriptors' which describe different levels of ability to carry out each activity. The form asks questions to find out which of these best describes your situation. The 'descriptors' are not listed on the claim form so refer to *Appendices B and C* to see each descriptor and the points scored.

Points can be scored in any activity that applies to you. The highest descriptor score from each activity is added together to work out your points for each component.

Question format

Each question from 3 to 14 takes up a couple of pages. At the start of the question, the activity and the relevant issues are explained.

Tick boxes: On the first page there are two or three tick box questions about your abilities or your need for aids or help with the activity.

Extra information box: The tick box questions are followed by a page with space for you to explain how your health conditions or disabilities affect your ability to do the activity.

Describe the difficulties you face in as much detail as possible.

- Do you need help from another person to do the activity?
- If you do need help, what kind of help do you need? Does someone physically help you, reassure you, encourage you, remind or explain to you how to do something? Or do they need to supervise you?
- Do you use aids and/or appliances to help you in an activity? If you do, say what they are and how useful they are.
- Can you do some parts of the activity but not others?
- Are you unable to do the activity at all? Explain why.
- Can you do an activity but it takes you a long time?
- If your needs vary, describe in what way and how often? Explain about good and bad days or how your needs vary throughout the day.
- If you regularly have accidents – such as falls – or are at risk of having accidents, explain why and when they happen.
- Do you have any side effects from doing the activity? Do you experience pain, breathlessness, tiredness or stress and anxiety either during or after the activity?

FILLING IN THE FORM

Question 1: Your health professionals

The first question on the form asks for details of the professional(s) who are best placed to provide advice on your circumstances. This can be social workers, counsellors, support workers or medical professionals, such as your GP. Whoever you list will need to know about your daily living needs and any mobility problems you have. If possible, make an appointment with them to discuss the claim. If you have written a diary, give them a copy (see *Appendix D*).

Question 2: Your condition and medication

The second question asks you to list your health conditions or disabilities and approximately when each of these started. Don't explain in detail how your health conditions or disabilities affect you here – you will be asked about this later in the form.

You are asked to list any tablets or medicines you are taking or treatments you are having; if you have a printed prescription list, you can attach that. If you have any side effects as a result of the medication, list these here.

DAILY LIVING

Questions 3 to 12 are to find out if you qualify for the daily living component of PIP. Each question relates to one of the ten daily living activities. See Appendix B for the 'descriptors' related to the tasks described in each question.

Remember, if you cannot complete a task described in the activity, you score points. To be entitled to the standard rate of the daily living component, you need to score at least 8 points. To be entitled to the enhanced rate, you need to score at least 12 points.

The tick boxes: In each question you are first asked if you use an 'aid or appliance' to complete the activity. If it is accepted that you do and using it is necessary, you will usually be awarded at least two points for that activity.

You are then asked if you need help from someone with that activity. If it is accepted that you do, you will be awarded at least two points. You can score up to eight points, depending on the activity concerned and the kind of the help you need (from just prompting, encouragement or reminding, to supervision or physical assistance).

In each case, you are offered one of three boxes to tick: 'yes', 'no' or 'sometimes'. Choose 'sometimes' if your condition is variable. See *The PIP Assessment in Section 1* for information about variable and fluctuating conditions.

The extra information boxes: Referring to *Appendix B*, write in the box for each question, which descriptor applies to you and explain why it applies. Below, we now look at these questions in more detail, suggesting the kind of things you need to describe in the 'extra information' box. The right hand column reminds you which activity each question on the form relates to.

Question 3: Preparing food – see activity 1

Write down if there is any aspect of preparing or cooking a simple meal that is a risk to you. List any incidents that may have happened in the past. Have you cut yourself mishandling knives or burnt yourself on hot pans? Let them know if you are not able to work out sell-by dates or read or understand cooking instructions on packets. If you use any aids or appliances to cook, do you need some help even when you use them? Make a note if you have difficulty timing the cooking

correctly. Let them know if you are so exhausted after cooking a meal that you could not do it again that day.

Question 4: Eating and drinking – see activity 2

Write down if you need someone to encourage you to eat the right portion sizes. If you can cut up some food, but cannot cut up tougher items, such as meat, make a note of this. If you need an appliance such as a feed pump to eat, let them know if you need any help to use it properly.

Question 5: Managing treatments – see activity 3

Write down if there have been any times in the past when you have forgotten to take your medication, or have taken too much. Let them know if you have taken a deliberate overdose, or if you self-harm. Make a note if you need someone to keep an eye on you because you are not aware that your condition is getting worse; sometimes this is the case with conditions such as diabetes or epilepsy.

If you need supervision, prompting or assistance to be able to manage your treatment, let them know how many hours on average each week you need this.

Question 6: Washing and bathing – see activity 4

Write down any aids or adaptations you use to wash or bathe yourself. These could include a long-handled sponge, shower seat or bath rail. Let them know if there are any parts of your body that you cannot reach even using such aids (for example, if you could not wash your back properly).

Question 7: Managing toilet needs – see activity 5

Write down if you need to use any aids or appliances, such as a commode, raised toilet seat, bottom wiper, bidet, incontinence pads or a stoma bag. Let them know if you need help even when you use an aid, or if you need help to use an appliance (for example, securing a stoma bag, or washing around it to prevent infection). If there is an aid that could help, but you do not use it, explain why. For instance you may not use a commode during the day because there is no private space where you spend the day.

Question 8: Dressing and undressing – see activity 6

List any aids you use to dress, such as modified buttons, zips, front fastening bras, trousers, Velcro fastenings and shoe aids. Write down if you still need assistance, despite using such aids, even if this does not take long. Let them know if you need someone to choose clothing that is clean and appropriate (for example if you have a visual impairment and cannot see stains or marks on your clothing).

Question 9: Communicating – see activity 7

Write down if you cannot speak so that others can understand you properly or hear and understand what people are saying to you. Let them know if you have a support worker (including a sign language interpreter) who helps you to communicate or if a family member or friend helps you. Make a note if you have nobody to help you, and what difference help would make.

Question 10: Reading – see activity 8

Write down if you need to use aids to help you read, for example a magnifier or magnifying glass. If you can manage indoors, but cannot adequately read signs, symbols and words outdoors, let them know.

Question 11: Mixing with other people – see activity 9

If you avoid mixing with other people because you have nobody to help you, write this down. How would you feel mixing with others without any support? Let them know if you would get panicky, angry or paranoid. Do you have difficulty understanding the behaviour of others?

Question 12: Making decisions about money – see activity 10

Write down if you would have problems buying a few items from your local shop. Would you be able to give the shop assistant the right amount of money? Would you know if the change was correct?

If going to the local shop would pose no problems but you would have problems with more complex budgeting decisions, such as working out the monthly household budget or sorting out a gas bill, note this down. Let them know if you can do most of the task by yourself, but would still need some support to finish it properly.

MOBILITY

Questions 13 and 14 are to find out if you qualify for the mobility component of PIP. Each question relates to one of the two mobility activities. See Appendix C for the 'descriptors' related to the tasks described in each question.

Remember, if you cannot complete a task described in the activity, you score points. To be entitled to the standard rate of the mobility component, you need to score at least 8 points. To be entitled to the enhanced rate, you need to score at least 12 points.

Question 13: Going out – See activity 1

This activity assesses your ability to work out and follow a route safely and reliably. Two types of route are considered: familiar and unfamiliar. You should only be considered able to journey to an unfamiliar destination if you are able to use public transport such as a bus or train.

The tick boxes: These ask whether you need help from another person, a guide dog or a specialist aid to plan a route or get to a location. Descriptor scores range from 0, if you can plan and follow a route unaided, to 12 if you cannot follow a familiar route without help or an aid. They also ask whether you are unable to go out because of severe anxiety or distress. Again you are offered one of three boxes to tick: 'yes', 'no' or 'sometimes'.

The extra information box: Write down if you are unable to use public transport due to stress or anxiety, for example if you get claustrophobic on buses or trains. Let them know if you would find small disruptions or unexpected changes difficult to deal with, for example roadworks where you normally cross the road or if your bus stop has been moved.

Let them know if you would need to have someone with you to get somewhere and why, or if you would need an assistance dog or aid (such as a long cane or a white stick). Would you need such support only on unfamiliar routes or would you also need it in places you know well?

Question 14: Moving around – See activity 2

This activity focuses on your physical ability to 'stand' and then 'move around' (see the *Glossary* for definitions of these terms).

The tick boxes: This part of the question gives you the opportunity to identify how far you can walk or move around using, if necessary, any aids such as a walking stick, frame, crutches, prostheses

or a wheelchair. A number of different distances are covered by the descriptors and scores range from 0 to 12.

It is important that you identify how far you can walk 'safely', in a 'reasonable time period' and without severe discomfort (such as breathlessness, pain or tiredness). If you could walk 50 metres, but would be in severe discomfort over the last 30 metres, then your walking ability will be considered to be limited to 20 metres.

Your ability to move around should be judged in relation to the type of surface normally expected outdoors, such as pavements, roads and kerbs.

You are given a number of boxes stating different distances to tick as well as a box: '*it varies*'. Only tick the box '*it varies*' if none of the other boxes apply for at least 50% of the time.

You are then offered one of three boxes to tick: '*yes*', '*no*' or '*sometimes*' to confirm whether you use an aid or appliance or wheelchair to walk or move around.

The extra information box: If you have ticked the '*it varies*' or '*sometimes*' box, clarify what you mean in the extra information box on the next page. For example: "In an average week, I can manage to walk about 40 metres before I can go no further on three days; another three days this distance is 20 metres, and on one day I cannot walk at all without severe discomfort."

A diary kept over a week, identifying your walking limit on each day, may help clearly show how your condition is worse on some days. You can send a copy of a diary with the completed form.

List any symptoms that you feel when walking, such as pain, fatigue or breathlessness. Once the symptoms come on, how long do they take to subside?

Write down if you are at risk of falling; give examples of falls you have had outdoors in the past. Were you injured? Were you able to get up again?

Describe the way you walk, for example do you find it hard to balance, limp or often lose balance? Give an idea of your speed. If you walk slowly and were to cover 20 metres, what distance would someone without a disability or health condition cover in that time?

A walking test

If you are not sure how limited your mobility is, you can do a walking test on your outdoor walking ability. Find a safe location on level ground. Walk until you feel that you are unable to continue (if it is safe for you to do so). Record what happens and when in terms of distance and time. You may find it helpful to have someone with you to record both of these. Note down any pain, dizziness, coughing, spasms, uncontrollable actions or reflexes, breathlessness, angina or asthma attacks and how long it takes you to recover before you feel able to walk again.

ANYTHING ELSE YOU THINK THEY SHOULD KNOW

Question 15: Additional information

The box here provides more space to explain your problems. If you run out of space, you can use extra sheets of paper. You need to write your name and National Insurance number on each one.

What other evidence could you provide?

The DWP encourages you to send supporting evidence back with your completed form. Prescription lists, care plans and information from health professionals will all be helpful.

You can also send evidence from other people such as a letter from your social worker or a carer, relative or friend who helps you or knows your difficulties well.

You can include a diary to illustrate how your condition affects you over a number of days or varies over time.

Keeping a diary

If your condition varies from day to day, it's a good idea to keep a diary to provide a picture of what your abilities are like over time. In a diary over a typical week, you could note down that you need help going to the toilet over four days, but that you can manage your toilet needs on your own on the other three days. This will help you answer the questions on managing toilet needs in the form. Longer-term diaries can be useful when explaining intermittent problems that result from your condition such as stumbles, falls or fits. If your condition is getting slowly worse, a diary can help pinpoint the date that you start to meet the appropriate disability conditions.

THE DECLARATION

Once you are satisfied that what you have written on the form is a true and accurate reflection of your situation, sign the declaration to confirm this. Attach to the form any evidence that you have, such as a letter from your GP or consultant outlining your condition, a report from an occupational therapist or a certificate of visual impairment. If you have written a diary, attach a copy.

RETURNING THE FORM

How long do you have to complete the claim form?

You do not have to complete the form all in one go. Take your time to make sure that you can fully describe the difficulties you have and the help and support that you need.

You have one month in which to return the form from the date it was sent out. If you do not return the form within the month without good reason (taking into account your state of health and the nature of any disability) your claim will be disallowed.

If you are not able to return the form within one month – for example because you need help to complete it, but cannot get an appointment with an advice centre in time – contact the DWP to explain this. It can extend the one month time limit for you if it agrees there is a good reason to do so.

Keep a copy

Keep a copy of your completed form and any diary or other supporting evidence you send back with it. This is both for your own future reference or in case the DWP loses any documents.

In addition, a copy will also be useful if you later wish to seek advice from an advice agency in relation to the decision made on your PIP claim.

What if you lose the claim form?

The form is personalised with your details on the top of every page. This means that it cannot be copied and used for someone else. It also means that if you lose or damage the form you will need to contact the DWP to ask that they send you another one.

STEP 3: THE FACE-TO-FACE CONSULTATION

Who carries out the PIP assessment?

Once your *How your disability affects you* (PIP2) claim form (and any supporting medical or other evidence you attach with it) has been returned, your case will be passed to one of the two companies contracted to carry out the PIP assessments. The two companies are Atos Healthcare and Capita.

Once your case has been passed to one of these companies, they will allocate it to a healthcare professional working for them.

This healthcare professional may initially contact your doctor, consultant or other medically qualified person treating you for further information. They may just talk to them on the phone or they may ask them to produce a factual report.

If you have a 'appointee' dealing with your claim or if there is evidence of a suicide attempt or self-harm, the healthcare professionals are advised to seek further information from your doctor, consultant or other medically qualified person treating you.

The face-to-face consultation

In most cases, you will be asked to see a healthcare professional at a 'face-to-face consultation'. The consultation will be carried out by whoever is assigned to your case.

Where will the consultation take place?

Where consultations are delivered by Atos Healthcare, it will normally take place in an Examination Centre. If you have to attend a centre you can claim travel expenses for you and a companion or carer. You can also make a claim if you have a young child who needs to come with you if they cannot be left unattended.

Your expenses can be for public transport fares, travel by private motor vehicle or in some circumstances, where prior approval has been given by the assessment provider, taxi fares. You can also claim for other payments related to the journey such as parking, road tolls or congestion charges. Your expenses should be reimbursed within 14 calendar days of you making a claim.

Capita aim to deal with the majority of consultations in claimants' own homes but also has assessment centres. You can claim expenses if you have to travel to one of these.

A home visit should be arranged if you provide evidence from your GP (or another healthcare professional who is treating you) that you are unable to travel on health grounds.

How much notice will you be given?

You must be given at least seven days' notice of the time and place for the consultation, unless you agree to accept a shorter notice period. If you cannot attend, tell the office that arranged the consultation as soon as possible.

Can you take someone with you?

If you need or want the help or support of a carer, relative or friend, you can bring them to the consultation with you. While they are not able to answer questions on your behalf (unless the healthcare professional cannot understand your speech or you cannot understand their questions), they will be able to add to what you have to say.

What will happen if you do not attend?

If you do not attend or take part in the consultation without good reason (taking into account your health and the nature of any disability) your claim will be disallowed. You will first be contacted and asked to explain your reasons for not attending. If the DWP decides that you did not have a good reason, you can ask them to reconsider. If you are unhappy with their reconsidered decision, you then have a right to appeal (see step 5).

What happens at the consultation?

At the face-to-face consultation, the healthcare professional will identify the descriptors that they consider apply to you with respect to the PIP assessment.

To do this, they will ask you questions about your day-to-day life, your home, how you manage at work if you have a job, and about any social or leisure activities that you engage in (or have had to give up). They will often ask you to describe a typical day in your life.

When answering, explain your difficulties as fully as you can:

- Tell them about any pain or tiredness you feel, or would feel, while carrying out tasks, both on the day of the examination and over time.
 - Consider how you would feel if you had to do the same task repeatedly.
 - Tell them if you need reminding or encouraging to complete the tasks.
 - Don't overestimate your ability to do things.
-
- If your condition varies, let them know and tell them what you are like on bad days as well as good days. The healthcare professional's opinion should not be based on a snapshot of your condition on the day of the consultation; they should consider whether your condition is variable, fluctuates or may change over time.

Will there be a medical examination?

At the consultation, the healthcare professional will be able to observe your ability to stand, sit and move around. They may watch you getting on and off the examination couch or your settee and bending down to pick up your belongings. They will check whether you have any aids or appliances, and the extent to which you use them. They will also be able to assess your levels of concentration and your ability to understand them and how well you express yourself.

The healthcare professional may also carry out a brief physical examination. They should explain each stage of the examination and ask your permission before carrying anything out. You should not be asked to do anything that will cause you pain or discomfort either during or after the consultation.

The overview

Before the face-to-face consultation ends, the healthcare professional should give you an overview of their findings and invite you to ask questions and add or clarify anything you wish.

You will not receive a formal indication at the face-to-face consultation of whether you will be awarded PIP.

STEP 4: THE DECISION

After the consultation

When you leave your face-to-face consultation, the healthcare professional will complete their report. Once they have done this, they will send it to a DWP case manager who will decide whether or not to award you PIP and, if it is awarded, at what rate and for how long.

If you are awarded PIP

If the case manager decides to award you PIP, you will be sent a letter telling you about this decision. Your award will usually be for a set period of time. This might be for a short time such as one or two years or a longer period of five or 10 years. You will only be awarded PIP for an indefinite period if the case manager feels it is unlikely that your condition will improve in the future so your needs will remain broadly the same.

If you have been awarded PIP but think you should have been awarded a higher rate, you can ask for reconsideration (see Step 5 for how to do this).

If your claim is turned down

If the case manager decides to disallow your claim, you will be sent a letter notifying you. The letter should tell you why they have chosen the descriptors that they think apply to you.

After receiving your notification letter, you should get a phone call from the DWP to talk through their decision and explain why you have not been awarded PIP. They should tell you that if you are not happy with their decision, you can ask for a reconsideration. If you do disagree with the decision, tell them during this phone call. See Step 5 for more information on what to say and ask for.

STEP 5: IF YOU ARE NOT HAPPY WITH THE DECISION

Asking for your claim to be looked at again

If your claim is turned down, you have one calendar month from the date of the decision in which to ask the Department for Work and Pensions (DWP) to look at their decision again. This is called a reconsideration.

You can also ask for a reconsideration if:

You are unhappy with the level of the benefit that you have been awarded (for example, if you are awarded the standard rate of the daily living component but believe you are entitled to the enhanced rate); or the period for which it has been granted.

Be careful when you ask for a reconsideration, because the DWP will look at your whole award and they can take away any rate of PIP that you have already been granted. If you are in doubt, seek advice.

How to ask for a reconsideration

You will have the opportunity to ask for a reconsideration when the DWP contacts you by phone to talk through their decision to disallow your claim. If you do not get a call, telephone the number on the decision letter they send you.

When you speak to the DWP:

1. Request a reconsideration of the decision. Explain why you disagree with their decision simply at this stage, for example, 'I believe that you have underestimated the effect of my disability

and consequently underestimated the extent of my mobility problems and/or the difficulties I have in carrying out daily living activities.

2. Ask them to send you copies of all the evidence that was used in making their decision.
3. Ask them not to take any further action until you have had the chance to respond to that evidence.

Put your request in writing as well and send it to the address on the decision letter. Keep a copy for yourself. If you have not received the evidence after two weeks, ring the DWP again to remind them to send it. When you do receive the evidence, you should have a better idea of why the decision was made.

Building a case

When you receive the evidence from the DWP, you will see that sometimes the only information used to make their decision was the information you gave on your claim form How your disability affects you. In most cases there will also be a report produced by the healthcare professional at the face-to-face consultation. Compare their report with what you explained on your form. Look for where a difference of opinion arises.

For example: you may have written on the claim form that you could not get on and off the toilet without support but the healthcare professional may have noted in their report that they thought you could manage your toilet needs by yourself.

Where you find the differences, collect medical evidence showing that what you said on the form was correct – for example, a letter from your doctor or consultant confirming the difficulties and risks you have getting on and off the toilet unassisted.

Once you have gathered evidence to support your case, send it to the address on the decision letter. If you need more time, you must inform the DWP how long this is likely to take, so they do not make a decision straight away.

A case manager will look at the further evidence you send. They will then either change their decision in your favour or write back to you explaining that they have been unable to change the decision. They will send you a mandatory reconsideration notice which proves that you have asked for a reconsideration (you will need this if you want to lodge an appeal).

You now have one calendar month from the date of the mandatory reconsideration notice to lodge an appeal to an independent tribunal.

What if your condition changes in the future?

If you are awarded PIP and there is a change in your condition some time in the future, you can also ask for a reconsideration. This is worth doing if you think you might qualify for another component or if you think you should get a higher rate of either component.

Be aware that the DWP will look at the whole of your award. If you think you qualify for a higher rate of PIP or the other component, make sure that you satisfy the relevant conditions (see Appendices B and C). You will have to have satisfied these conditions for three months before you can get a new rate.

HOW TO LODGE AN APPEAL AGAINST THE DECISION

Completing the SSCS1 appeal form

You will have to download a copy of the official notice of appeal form SSCS1. Alternatively, you can phone your local HM Courts and Tribunals Service (HMCTS) and ask to be sent the appeal form. You cannot make an appeal unless you have first asked for a reconsideration of your decision (see above).

On the form, give your name and address and the name of your representative if you have one. You can also give an address where documents can be sent to you if your own address is inappropriate.

Provide details of the decision you are appealing against (the decision date, name of the benefit and what the decision is about).

State clearly why you disagree with the decision. Explain what rate of PIP you think you should have been awarded and your reasons for this.

Sending back the SSCS1 form

Make a copy of the completed appeal form and send it to your local HMCTS. You need to include a copy of your reconsideration notice to prove that you have first asked for a reconsideration of your decision.

WHAT HAPPENS WHEN YOU APPEAL?

When the HMCTS receive your appeal form, they will send you an acknowledgment letter. A copy of your appeal will also be sent to the DWP for their comment. The DWP should write a response to your appeal and return it to HMCTS along with all the documents relevant to their decision. You will also be sent a copy of everything.

Getting a hearing

The SSCS1 form asks whether you would like your appeal to be decided with or without a hearing. If you choose to have a hearing, you will be invited to attend. Opting for a hearing and attending can greatly improve your chances of a successful appeal.

Your appeal will be heard by an independent appeal tribunal. These tribunals are informal; they are not like courts. If you have a carer, they can attend the tribunal hearing as well to provide their account of your needs.

Support or representation

Contact DIAL on 01736 759500 for further information and advice about support and representation in Cornwall.

If you choose not to have a hearing, the tribunal will study all of the appeal papers and come to a decision based on these papers alone. You can send extra evidence and comments for the tribunal to consider at any time but do so as soon as possible as the tribunal will not tell you when they will be meeting to decide your case.

THE APPEAL TRIBUNAL DECISION

You will get a decision notice on the day of your hearing or very soon after. A copy of the decision notice will also be sent to the DWP so they can put the decision into effect.

If the decision is a positive one (that you are entitled to PIP) the DWP will start paying you and will pay you any benefit you are owed to cover the period you were appealing. If your appeal is unsuccessful, you can ask for a more detailed explanation of why.

APPENDICES AND REFERENCE

APPENDIX A

Qualifying conditions

Basic qualifying conditions

To be entitled to personal independence payment, you must satisfy all of the following basic qualifying conditions:

- Be aged 16-64 when you claim. You will not be able to claim PIP once you are 65 years old but you will be able to stay on PIP if you claimed or received it before you reached the age of 65.
- Have been present in Great Britain for 104 weeks out of the 156 weeks before claiming (two out of the last three years). If you are terminally ill, you only have to be present in Great Britain – you do not need to have been present for two out of the last three years.
- Be habitually resident (normally live) in the United Kingdom, the Channel Islands, the Republic of Ireland or the Isle of Man.

Disability conditions

In addition, you must satisfy both of the following disability conditions:

- The daily living and/or mobility activities test (see Appendices B and C)
- You must also have satisfied the daily living and/or mobility activities test for a 'qualifying period' of at least three months before you can be paid. You must also be likely to continue to satisfy whichever test applies for a period of at least nine months after that three month period. These conditions will not however apply if you are terminally ill.

APPENDIX B

Daily living activities and descriptors

The activities, descriptors and points listed below are the legal test laid out in the Social Security (Personal Independence Payment) Regulations 2013.

The entitlement thresholds (pass mark) for the daily living rates and components of PIP are 8 points for the standard rate and 12 for the enhanced rate.

Preparing food – Activity 1

- a. Can prepare and cook a simple meal unaided. Score 0

- b. Needs to use an aid or appliance to be able to either prepare or cook a simple meal. Score 2
- c. Cannot cook a simple meal using a conventional cooker but is able to do so using a microwave. Score 2
- d. Needs prompting to be able to either prepare or cook a simple meal. Score 2
- e. Needs supervision or assistance to either prepare or cook a simple meal. Score 4
- f. Cannot prepare and cook food. Score 8

Taking nutrition – Activity 2

- a. Can take nutrition unaided. Score 0
- b. Needs either
 - i. to use an aid or appliance to be able to take nutrition; or
 - ii. supervision to be able to take nutrition; or
 - iii. assistance to be able to cut up food. Score 2
- c. Needs a therapeutic source to be able to take nutrition. Score 2
- d. Needs prompting to be able to take nutrition. Score 4
- e. Needs assistance to be able to manage a therapeutic source to take nutrition. Score 6
- f. Cannot convey food and drink to their mouth and needs another person to do so. Score 10

Managing therapy or monitoring a health condition – Activity 3

- a. Either
 - i. does not receive medication or therapy or need to monitor a health condition; or
 - ii. can manage medication or therapy or monitor a health condition unaided. Score 0
- b. Needs any one or more of the following
 - i. to use an aid or appliance to be able to manage medication;
 - ii. supervision, prompting or assistance to be able to manage medication.
 - iii. supervision, prompting or assistance to be able to monitor a health condition. Score 1
- c. Needs supervision, prompting or assistance to be able to manage therapy that takes no more than 3.5 hours a week. Score 2
- d. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 3.5 but no more than 7 hours a week. Score 4
- e. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 7 but no more than 14 hours a week. Score 6
- f. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 14 hours a week. Score 8

Washing and bathing – Activity 4

- | | |
|---|---------|
| a. Can wash and bathe unaided. | Score 0 |
| b. Needs to use an aid or appliance to be able to wash or bathe. | Score 2 |
| c. Needs supervision or prompting to be able to wash or bathe. | Score 2 |
| d. Needs assistance to be able to wash either their hair or body below the waist. | Score 2 |
| e. Needs assistance to be able to get in or out of a bath or shower. | Score 3 |
| f. Needs assistance to be able to wash their body between the shoulders and waist. | Score 4 |
| g. Cannot wash and bathe at all and needs another person to wash their entire body. | Score 8 |

Managing toilet needs or incontinence – Activity 5

- | | |
|---|---------|
| a. Can manage toilet needs or incontinence unaided | Score 0 |
| b. Needs to use an aid or appliance to be able to manage toilet needs or incontinence | Score 2 |
| c. Needs supervision or prompting to be able to manage toilet needs | Score 2 |
| d. Needs assistance to be able to manage toilet needs | Score 4 |
| e. Needs assistance to be able to manage incontinence of either bladder or bowel | Score 6 |
| f. Needs assistance to be able to manage incontinence of both bladder and bowel. | Score 8 |

Dressing and undressing – Activity 6

- | | |
|--|---------|
| a. Can dress and undress unaided. | Score 0 |
| b. Needs to use an aid or appliance to be able to dress or undress | Score 2 |
| c. Needs either | |
| i. prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed; or | |
| ii. prompting or assistance to be able to select appropriate clothing | Score 2 |
| d. Needs assistance to be able to dress or undress their lower body | Score 2 |
| e. Needs assistance to be able to dress or undress their upper body | Score 4 |
| f. Cannot dress or undress at all. | Score 8 |

Communicating verbally – Activity 7

- | | |
|--|----------|
| a. Can express and understand verbal information unaided | Score 0 |
| b. Needs to use an aid or appliance to be able to speak or hear. | Score 2 |
| c. Needs communication support to be able to express or understand complex verbal information. | Score 4 |
| d. Needs communication support to be able to express or understand basic verbal information. | Score 8 |
| e. Cannot express or understand verbal information at all even with communication support. | Score 12 |

Reading and understanding signs, symbols and words – Activity 8

- a. Can read and understand basic and complex written information either unaided or using spectacles or contact lenses. Score 0
- b. Needs to use an aid or appliance, other than spectacles or contact lenses, to be able to read or understand either basic or complex written information. Score 2
- c. Needs prompting to be able to read or understand complex written information. Score 2
- d. Needs prompting to be able to read or understand basic written information. Score 4
- e. Cannot read or understand signs, symbols or words at all. Score 8

Engaging with other people face to face – Activity 9

- a. Can engage with other people unaided. Score 0
- b. Needs prompting to be able to engage with other people. Score 2
- c. Needs social support to be able to engage with other people. Score 4
- d. Cannot engage with other people due to such engagement causing either
 - i. overwhelming psychological distress to the claimant; or
 - ii. the claimant to exhibit behaviour which would result in a substantial risk of harm to the claimant or another person. Score 8

Making budgeting decisions – Activity 10

- a. Can manage complex budgeting decisions unaided Score 0
- b. Needs prompting or assistance to be able to make complex budgeting decisions Score 2
- c. Needs prompting or assistance to be able to make simple budgeting decisions Score 4
- d. Cannot make any budgeting decisions at all. Score 6

APPENDIX C

Mobility activities and descriptors

The activities, descriptors and points listed below are the legal test laid out in the Social Security (Personal Independence Payment) Regulations 2013.

The entitlement thresholds (pass mark) for the mobility rates and components of PIP are 8 points for the standard rate and 12 for the enhanced rate.

Planning and following journeys – Activity 1

- a. Can plan and follow the route of a journey unaided Score 0
- b. Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant Score 4
- c. Cannot plan the route of a journey Score 8

- d. Cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid Score 10
- e. Cannot undertake any journey because it would cause overwhelming psychological distress to the claimant Score 10
- f. Cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid Score 12

Moving around – Activity 2

- a. Can stand and then move more than 200 metres, either aided or unaided Score 0
- b. Can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided Score 4
- c. Can stand and then move unaided more than 20 metres but no more than 50 metres Score 8
- d. Can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres Score 10
- e. Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided Score 12
- f. Cannot, either aided or unaided,
 - i. stand; or
 - ii. move more than 1 metre. Score 12

APPENDIX D

KEEPING A DIARY

Writing a diary

A diary is useful as evidence to help the DWP understand how you manage day to day both with your daily living and getting out and about. You are the best person to give this evidence.

If you find it difficult to keep a diary you could ask a relative, carer or friend to help you (and explain in your claim form that your diary has been completed with their help).

When you send the diary with your claim form, make sure that you have included your name, address and National Insurance number at the top of every page.

More information on submitting diaries and the completing the claim form can be found in Section 2.

Example diaries

On the following pages are two example diaries – one for a person with multiple sclerosis, the other for a person with depression and anxiety.

Filling in your diary

Look at the example diaries and adapt them so that you can record where things are more difficult for you. Read your claim form and look at the activities where you filled in information. Your diary should record how you are managing in each of those areas.

Remember, you score points on the descriptors if:

- you need aids or appliances to help you manage on your own;
- you need prompting or reminding;
- you need help from someone else;
- you can manage on your own but it takes you a long time;
- you can manage at certain times of the day but not at others;
- you can manage on some days but not others;
- you are unsafe managing on your own – accidents have happened or nearly happened;
- you need someone keeping an eye on you.

If any of these apply to you put it in your diary.

Diary of a person with multiple sclerosis

This shows two days of diaries but it is helpful to keep one for even longer. If you have longer spells when you are bad and then spells when things are not so bad, include diaries that cover both periods.

25 April				
ACTIVITY	Morning 7am-12pm	Afternoon 12pm-6pm	Evening 6pm-11pm	Night 11pm-7am
Going to the toilet (always use grab rails and raised toilet seat)	Managed by myself	Slight accident on one occasion as didn't get there in time	Managed by myself	Unsteady – helped to toilet
Having a shower (always use seat and grab rails)	Managed by myself – 40 minutes			
Dressing/ Undressing	Managed by myself – 20 minutes		Co-ordination bad – help to get pants and tights off	
Cooking (always use perching stool)		Cut myself chopping vegetables		

Eating			Help chopping meat up	
Medication			Help getting pills out of dosette box	
Reading		Read paper on tablet using magnification		
Walking	Went to local shops – 400 metres – used electric wheelchair		Co-ordination bad – using indoor wheelchair	
26 April				
ACTIVITY	Morning 7am-12pm	Afternoon 12pm-6pm	Evening 6pm-11pm	Night 11pm-7am
Going to the toilet (always use grab rails and raised toilet seat)	Managed by myself – stiff and slow first thing	Managed by myself	Managed by myself	Unsteady – helped to toilet x2
Having a shower (always use seat and grab rails)	Managed by myself – 35 minutes			
Dressing/ Undressing	Managed by myself – 20 minutes	Help from friend at swimming pool	Exhausted – partner helped	
Cooking (always use perching stool)			Didn't cook today – too tired	
Eating				
Medication			Help getting pills out of dosette box	

Reading	Read paper on tablet using magnification			
Walking		Went swimming with friend – walking from car and around leisure centre I used stick on one side, friend on other – very slow	Exhausted after swim - using indoor wheelchair	

Diary of a person with depression and anxiety

This diary doesn't stick to a day but shows a bad spell and then a couple of spells when things improve a bit. Use this format if it is easier.

ACTIVITY	25 April – 4 May
Cooking	No cooking at all. Mum came round twice and cooked for me – and put leftovers in fridge for me to have other days.
Eating	Mum stayed and ate with me when she came. Was cross when I hadn't eaten leftovers from other day – forgot they were there. Ate some biscuits and things I found in cupboard when I was hungry – on four days didn't eat at all.
Medication	Mum rang every day to check I'd taken – think I did take them all but not sure.
Showering	Didn't shower at all except once when Mum came round and made me.
Dressing	Didn't change clothes at all except after shower – mum put out clean ones for me.
Seeing people	Didn't see anyone apart from mum. Someone came to door but I didn't answer it – couldn't face it. Mum has key. Didn't answer phone or texts. Mainly just stayed on sofa under quilt.
Money	Electricity meter ran out – Mum sorted when she came.
Getting out	Didn't leave flat – missed appointment with GP.
ACTIVITY	5 May – 9 May
Cooking	Been a bit better – made cup-a-soups couple of times – good to have something hot. Mum came round once and cooked.
Eating	Ate with mum and also ate leftovers cold next day – and soup when I made it. Just one day didn't eat at all.
Medication	Mum rang and reminded – all OK.

Showering	Once when mum came and once on 8th when feeling better.
Dressing	When I had shower – otherwise just stayed in same clothes.
Seeing people	Saw mum and also GP.
Money	Mum reminded me to put money in meter before it ran out.
Getting out	Saw GP – mum had rescheduled appointment – she rang and made sure I went – went on my own – 5 minutes away. Mum went with me to get money from post office another day.
ACTIVITY	10 May – 16 May
Cooking	Made bacon sandwich! And had some ready meals out of freezer heated in microwave.
Eating	Been feeling hungrier so eaten every day.
Medication	Mum reminded.
Showering	Two showers.
Dressing	When I had shower
Seeing people	Saw friend – she came round – text first to check to let me know she was coming so I'd open door.
Money	
Getting out	Went for walk with friend – just to local park – avoided play area where it's busy – too overwhelming and people stare.

ACTIVITY DIARY

Name

Address

National
Insurance
Number

ACTIVITY	Morning 7am-12pm	Afternoon 12pm-6pm	Evening 6pm-11pm	Night 11pm-7am
Cooking				

Eating				
Managing therapy				
Medication				
Washing/bathing				
Going to the toilet				
Dressing/ Undressing				
Communicating				
Reading				
Meeting people				
Budgeting				
Planning journeys				
Walking				

Glossary

TERMS USED IN THE PIP REGULATIONS 2013

These definitions are laid out in the [Social Security \(Personal Independence Payment\) Regulations 2013](#).

acceptable standard means that you may be able to actually complete the activity, but not to a good enough standard. For example where someone can physically wash themselves but does not realise they have done so badly and are still not clean after they have finished.

and then move means that you need to be able to move independently while remaining standing. So if you could only cover, say 20 metres, by standing, transferring to a wheelchair and then completing the journey, you will not be considered capable of moving that distance.

aided means with –

- (a) the use of an aid or appliance; or
- (b) supervision, prompting or assistance.

assistance means physical intervention by another person and does not include speech.

assistance dog means a dog trained to guide or assist a person with a sensory impairment.

basic verbal information means information in your native language conveyed verbally in a simple sentence.

basic written information means signs, symbols and dates written or printed standard size text in your native language.

bathe includes getting into or out of an unadapted bath or shower.

communication support means support from a person trained or experienced in communicating with people with specific communication needs, including interpreting verbal information into a non-verbal form and vice versa.

complex budgeting decisions means decisions involving –

- (a) calculating household and personal budgets;
- (b) managing and paying bills; and
- (c) planning future purchases.

complex verbal information means information in your native language conveyed verbally in either more than one sentence or one complicated sentence.

complex written information means more than one sentence of written or printed standard size text in your native language.

cook means heat food at or above waist height.

dress and undress includes putting on and taking off socks and shoes.

engage socially means –

- (a) interact with others in a contextually and socially appropriate manner;
- (b) understand body language; and
- (c) establish relationships.

limited ability (to carry out daily living activities) means obtaining a score of at least 8 points in the PIP assessment.

manage incontinence means manage involuntary evacuation of the bowel or bladder, including the use of a collecting device or self-catheterisation, and clean oneself afterwards.

manage medication or therapy means take medication or undertake therapy, where a failure to do so is likely to result in a deterioration in your health.

medication means medication to be taken at home which is prescribed or recommended by a registered (a) doctor; (b) nurse; or (c) pharmacist.

monitor health means –

- (a) detect significant changes in your health condition which are likely to lead to a deterioration in your health; and
- (b) take action advised by a (i) registered doctor; (ii) registered nurse; or (iii) health professional who is regulated by the Health Professions Council, without which your health is likely to deteriorate.

orientation aid means a specialist aid designed to assist disabled people to follow a route safely.

prepare in the context of food, means make food ready for cooking or eating.

prompting means reminding, encouraging or explaining by another person.

psychological distress means distress related to an enduring mental health condition or an intellectual or cognitive impairment.

read includes read signs, symbols and words but does not include read Braille.

repeatedly means being able to repeat the activity as often as is reasonably required. Consideration should be given to the collective effects of symptoms such as pain and fatigue. For example, if the effort it takes for you to complete a task then makes you tired and/or in pain so much so that you would not be able to do it again or take on another activity, you should not say you can do the activity repeatedly. For example, if you are able to prepare a meal once unaided, but the exhaustion caused to you by doing this would mean that you could not prepare another meal that day, you should be treated as being unable to prepare a meal unaided.

reasonable time period means no more than twice as long as the maximum period that a person without a physical or mental condition which limits that person's ability to carry out the activity would normally take to complete that activity.

safely means in a manner unlikely to cause harm to you or to another person, either during or after the completion of the activity.

severely limited ability (to carry out daily living activities) means obtaining a score of at least 12 points in the PIP assessment.

simple budgeting decisions means decisions involving –

- (a) calculating the cost of goods; and
- (b) calculating change required after a purchase.

simple meal means a cooked one-course meal for one using fresh ingredients.

social support means support from a person trained or experienced in assisting people to engage in social situations.

stand means stand upright with at least one biological foot on the ground.

supervision means the continuous presence of another person for the purpose of ensuring your safety.

take nutrition means –

- (a) cut food into pieces, convey food and drink to one's mouth and chew and swallow food and drink; or
- (b) take nutrition by using a therapeutic source.

therapeutic source means parenteral or enteral tube feeding, using a rate-limiting

device such as a delivery system or feed pump.

therapy means therapy to be undertaken at home which is prescribed or recommended by a –

- (a) registered (i) doctor; (ii) nurse; or (iii) pharmacist; or
- (b) health professional regulated by the Health Professions Council but does not include taking or applying, or otherwise receiving or administering, medication (whether orally, topically or by any other means), or any action which, in your case, falls within the definition of “monitor a health condition”.

toilet needs means –

- (a) Getting on and off an unadapted toilet;
- (b) evacuating the bladder and bowel; and
- (c) cleaning oneself afterwards.

unaided means without –

- (a) the use of an aid or appliance; or
- (b) supervision, prompting or assistance.

OTHER TERMS

aids or appliance means any device that improves, provides or replaces your impaired physical or mental function, including a prosthesis. It could also include non-specialist aids, such as electric tin openers or long-handled sponges. In assessing your ability to carry out a task, you will be assessed as if wearing or using any aid or appliance that you would normally wear or use, or which you could reasonably be expected to wear or use if you do not currently do so. It should not be considered reasonable for you to wear or use an aid or appliance if it is too expensive, difficult to obtain or is culturally inappropriate for you.

appointee means someone legally appointed to act on your behalf.

award means the rate and amount of a benefit that you have been granted.

calendar month means the period of time from the same date of one month to the same date of the next month.

case manager is the person working for the DWP who will make the decision whether or not to award you PIP. They do this by considering your claim form, the report from your face-to-face consultation and any additional evidence you submitted.

descriptor means a description of tasks of varying degrees of difficulty.

DS1500 is a medical report issued by your GP, hospital consultant, nurse, Macmillan nurse or social worker that describes your medical condition – it is not a prognosis.

healthcare professional is the medically qualified person who carries out your face-to-face consultation.

PIP1 is the form on which you start your PIP claim which is usually completed over the telephone by a DWP agent with your basic qualifying information and sent to you to sign.

PIP2 is the main claim form for PIP called *How your disability affects you*.

passported benefits are those benefits which some groups of people are automatically entitled to because of their entitlement to another benefit.

reasonably be expected means more likely than not – your doctor will be asked to complete a form (DS1500) to confirm this.

terminally ill means that your death can 'reasonably be expected' within the next six months

If you need any further support or information please contact DIAL on 01736 759500 or you can refer directly to the link below:

www.disabilityrightsuk.org

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