A Guide to Personal Independence Payments and how to complete the form
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What is a Personal Independence Payment (PIP)?

Personal Independence Payment (PIP) is a new benefit that has replaced working age Disability Living Allowance (DLA) for new claimants from 8th April 2013.

PIP may seem similar to DLA but it is a completely new benefit. It has a points-based test and claimants will be measured against descriptors to see if they score enough points to qualify for an award.

Like Disability Living Allowance it is intended to help meet the extra costs that arise from having a long term illness or disability, is additional to other benefits and is not taxable.

Like DLA, PIP is not means-tested. It can be paid whether someone is in or out of work. If you receive an award of PIP you will be able to spend the money in the way that suits you.

To claim PIP you need to be aged between 16 and 64 years.

You should have a long term condition because you are expected to satisfy the test for the previous 3 months and expect to continue to satisfy the test for a further 9 months.

You must have been present in Great Britain for 104 weeks out of the 156 weeks before claiming (ie. two out of the last three years). If you are an EU national seek advice as the EU co-ordination rules may exempt you from having to meet this.

Be habitually resident. If you have been living abroad the habitual residence test will be applied. This is a test to see if you normally live and have a right to reside in the United Kingdom

You must score at least 8 points on either the daily living or mobility test to receive any benefit.

How is PIP assessed?

PIP Components

As with Disability Living allowance PIP has two components:

Daily Living Component

1. The daily living component consists of 10 activities to assess your ability to participate in everyday life. This is paid at either:

   - The **standard** rate if you have a limited ability to perform daily living activities. You will need to score 8 points to get this awarded.
OR

- The enhanced rate if you have a severely limited ability to perform daily living activities. You will need to score 12 points to get this awarded.

**Mobility Component**

2. The mobility component consists of two activities. This is paid at either:

- The standard rate if you have a limited mobility. You will need to score 8 points to get this award.

OR

- The enhanced rate if you have a severely limited mobility. You will need to score 12 points to get this award.

**Special Rules**

If you have a terminal illness you may automatically receive the daily living component at the enhanced rate. You can also apply for the mobility component and may receive it immediately.

To qualify under these Special Rules you are suffering from a progressive disease where death can be expected within six months. A DS1500 form needs to be completed by a medical practitioner confirming this likely prognosis and claims should be fast tracked.

**Daily living and mobility activities**

In order to qualify for and receive PIP the DWP needs to be satisfied that you have limited or severely limited abilities to carry out daily living and/or mobility activities. These two groups of activities relate to the two components of PIP you could receive.

The activities you will be assessed on are:

**Daily Living activities**

- Preparing food
- Taking nutrition
- Managing therapy or monitoring a health condition
• Washing and bathing
• Managing toilet needs or incontinence
• Dressing and undressing
• Communicating verbally
• Reading and understanding signs, symbols and words
• Engaging with other people face to face
• Making budgeting decisions

**Mobility activities**

Your ability to mobilise is assessed by 2 activities:

• Planning and following journeys
• Moving around

Each activity for both daily living and mobility has a number of descriptors which summarise varying levels of ability to carry out that activity. Each descriptor carries a number of points.

The DWP Case Manager will decide which descriptor best fits your situation most of the time, and you will get the set amount of points for that activity. The total number of points you get for each component will then determine your entitlement to the benefit and the level of payment you receive.

**Qualifying time test**

People wishing to claim will need to satisfy the daily living and/or mobility activities test for three months before claiming and it must be expected that you will continue to satisfy this test for a period of at least nine months after claiming.

The qualifying period begins when the needs started so you may not have to wait for three months from the date of claim before payment can be made if your needs started longer than three months ago.

**Length of awards**

Unlike Disability Living Allowance there will not be indefinite awards made. Most PIP awards will be for a set period of time after which they will be reassessed.
What happens to existing DLA claimants?

Existing claimants who receive Disability Living Allowance (DLA) will gradually be invited to claim PIP. Initially those invited first will be people whose DLA award ends, those whose child DLA ends or those who report a change of circumstances (such as their condition worsening). It will eventually include all claimants who receive DLA. This includes those with a DLA award for an indefinite period and those receiving DLA who became 65 on or after the 8th of April 2013 when PIP was introduced. It is anticipated all existing DLA claimants will be invited to claim PIP by 2018 (this may be subject to change).

NOTE: the government anticipate less people will meet the stricter criteria for PIP than the old DLA so it is worth taking advice if you receive DLA before reporting a change of circumstances that will lead to a reassessment for PIP.

If you currently receive DLA, the Department for Work & Pensions (DWP) will contact you to see if you wish to make a claim for PIP. It is important to note transfers from DLA to PIP will not be automatic - you will have to make a claim.

When your existing award of DLA is due for renewal you will be contacted and invited to make a claim for PIP. If you decide not to make a claim for PIP your DLA will end. When you have been contacted and invited to apply, you will only get 28 days to make your claim. You will then go through the same process as claimants making a new claim for PIP. If your assessment is delayed you should still be able to continue receiving DLA pending the outcome of your PIP claim.

How do you apply for PIP?

There are usually 3 stages to be completed for a PIP claim – a telephone call, a claim form and a face to face medical assessment.

The telephone number to make an initial claim is 0800 917 2222. You can also visit www.gov.uk/pip

You will need to make the initial claim over the phone. The call will take around 20 minutes, during the call the DWP will collect basic information to check your identity including national insurance number, bank/ building society details, GP or consultants address, what hospitals you attend and you will also be asked about how your disability affects you.

TIP: Make sure you have these details at hand when you call.

If you are not able to use the phone because of your illness or disability someone else can call on your behalf but you do need to be there so you can give your consent that the DWP can talk to them instead of you.
Following the initial call you will then be sent claim form PIP2 headed ‘How your disability affects you.’

There are strict time limits for returning the form. If you fail to return the form on time and you do not have a good reason for doing so, your claim will be refused and you will need to re-apply or seek advice from an advice agency.

TIP: It is advisable to keep a copy of your claim and make a note of when you returned your form to the DWP.

This is usually followed by an appointment letter to see a Capita medical assessor face to face.

**Guidance on filling in the form**

The claim form has some useful notes for each question. It will remind you that if you are unable to complete an activity safely (in a way that is unlikely to lead to harm to yourself or others), to an acceptable standard and repeatedly (as often as is reasonably required) within a reasonable time (not more than twice as long as average), you need to tell them this.

It’s really important that you explain if activities take a long time and if you need to keep resting either during the activity or afterwards. You may be able to do an activity such as getting dressed and undressed but it takes you a long time, leaving you completely exhausted, drained and experiencing a worsening in your symptoms. Therefore, although technically you can do the activity, you are not able to do it in the way laid out above.

Each question has a series of tick boxes plus a blank text box in which you can add further detail and clarify your answers. It is important that you provide plenty of detail in the text box. This is your opportunity to give a detailed and accurate account of how your condition affects you.

When you start completing the claim form, look at our examples for each question; also look at the descriptor that relates to the activity. We have included the descriptors at the end of this guide (p21). This will show you how you are being assessed and the points that you can score for an activity.

It can take time to complete the form and you will probably need to do a little at a time but be aware of the deadline for returning it.

TIP: Many people underestimate their problems and have adapted to manage everyday life within their limitations. It is useful to keep a daily *diary* which will show the help required or frequency of your needs.
When answering each question, think about the symptoms that cause you to have problems with it. Describe the problems that you have in carrying out the activity and give any examples that you think may be relevant.

**Aids and adaptations**

The assessment will look at the use of aids and adaptations which according to DWP legislation, means “any device which improves, provides or replaces your impaired physical or mental function.” This includes walking aids such as a wheelchair or stick, and domestic items that help you prepare food or enable you to deal with your personal care.

You can score points if you use an aid or adaptation and it is accepted that you need to use this as a result of your illness or disability. And you are unable to use it without the help from another person.

You may lose points if it is decided that you do not need help from another person if you use an aid or adaptation that replaces an impaired function.

Carefully consider any help you may need even when using an aid/adaptation or if you have tried aids that have not helped remember to record this information and why on the form.

**Tick boxes and blank boxes**

When completing the form you will see that each question has a series of tick boxes think carefully about the tick boxes. You may find that in some sections you need to tick the No’ box, while in others your chose the ‘Yes’ or ‘Sometimes’ box.

Each section has a blank box. The blank box is to add relevant details about your illness and disabilities. Use the blank boxes to give as detailed an account as possible about the difficulties that you have with the activity you are being asked about.

**How do the descriptors work?**

There are rules to take into account fluctuating conditions. For a descriptor to apply, an individual must meet that descriptor for more than 50% (majority) of the days in a one year period.

If two or more descriptors are met for more than 50% of days, the highest scoring descriptor will be chosen. If no descriptors apply for more than 50% of days but when taken together two or more scoring descriptors are met on more than 50% of days, the one that applies for the greatest amount of that time will be chosen.
To get both the daily living and mobility component you would need to score at least eight points in both sections (ie a total of 16 points.) You can only score once in each activity so only the descriptor with the highest points that applies to you will be awarded from each activity.

**How do you complete the form? (page by page guide)**

This section of the guide will help you to complete the form step by step in more detail.

Make a list of any medical evidence you will be sending with the form.

**Daily living activities**

Q1. **Please tell us who are the professional(s) best placed to advise us on your circumstances.** For example, a GP, hospital doctor, specialist nurse, community psychiatric nurse, occupational therapist, physiotherapist, social worker, counsellor, or support worker.

   TIP: It is advisable to speak with any of the people that you list here before filling out the claim form to tell them that you are claiming, update them on your condition and to inform them that the DWP may contact them about you.

   The DWP may contact some of the professionals that you put on the form so you may want to consider asking the most relevant person to write a letter to support your claim.

Q2

   a. **Please use the space below to tell us:**

      **What are your health conditions or disabilities, and approximately when each of these started?**

      List all your conditions here and also list your symptoms. For example ‘arthritis in both knees is very painful and I can’t walk far, it causes them to give way and I fall.’

Q2

   b. **Tell us about any:**

      Tablets or other medication you’re taking or will be taking, any treatments you’re having or will be having, such as chemotherapy, physiotherapy or dialysis, regardless of whether NHS or private, and

      • please include information on any side effects these have on you.
This is self-explanatory - list any medication that you take and any side effects that you experience. If you do not take medication that may help because you have had adverse effects from medication in the past it is worth explaining this here.

TIP: If you have a printed prescription list you can attach it here.

Questions 3-15 are about how your conditions or disabilities affect your ability to carry out certain day to day activities. Each of these questions relates to an activity in the daily living or mobility test so should be answered carefully and thoroughly.

**Q3. Preparing food**

  a) Do you use an aid or appliance to prepare or cook a simple meal?

  b) Do you need help from another person to prepare or cook a simple meal?

**Q3) extra information**

This activity looks at your ability to prepare a cooked main meal for one person. The form and guidance notes tell you what kinds of activities they are assessing.

When completing this question you need to include problems with preparing food and list any incidents that have happened in the past causing a risk.

In this context prepare means making food ready for cooking or eating. This can include things like washing, peeling and chopping food. In your answer you need to explain any difficulties with cooking a meal. It may be that you are never able to cook or you may not be able to do all the tasks involved in cooking. Perhaps you only rarely manage to cook or you may only be able to cook on some days of the week.

It may be that you are too exhausted and unwell to set about preparing and cooking a main meal at all and this would need to be explained on the form. You may be able to do it but only with discomfort or pain or you may not be safe to do it.

If preparing food causes discomfort, explain what causes the discomfort and why. For example ‘chopping vegetables causes pain in my hands and wrists due to arthritis and I cannot grip things’.

Do you have a mental health problem that affects your concentration or memory. It may not be safe for you to prepare a meal.
Make sure that you include any problems and examples with forgetting pans, timing things and concentrating to cook a meal. If it takes a long time to do this activity because you need to keep stopping and resting include this in the form.

If you can do it sometimes but feel unwell afterwards, explain why. You may notice an increase in your symptoms or have to rest for a prolonged period after carrying out part or all of this activity.

Q4. **Eating & Drinking**

   a) Do you use an aid or appliance to eat and drink?

   b) Do you use a feeding tube or similar device to eat or drink?

   c) Do you need help from another person to eat and drink?

This activity considers your ability to eat and drink. Think about whether your ability to regularly eat and drink is affected by your illness or the medication you take. Do you often miss meals or forget to eat or drink? Do you binge eat or purge? Does your medication cause tremors or spasms which make eating or drinking alone difficult? Do you need someone to remind, prompt, supervise or assist to ensure to eat and drink?

Do you have a mental health issue and you need help with motivation to eat, if you are feeling too exhausted and ill to eat? Are you unable to feed yourself and need help tube feeding? If you are unable to bring food to your own mouth and need someone to help you. Describe the process of eating and how long it takes. Do you avoid food and need prompting to take nutrition?

If you use any aids to help you eat and drink mention this in this section and any help you need to use them.

Q5. **Managing treatments**

   a) Do you use an aid or appliance to monitor your health conditions, take medication or manage home treatments?

   b) Do you need help from another person to monitor your health conditions, take medication or manage home treatments?

Q5) **Extra information**

This activity considers your ability to monitor any health conditions, to manage your medication and to cope with treatments.

Are able to take your medication without help, do you forget to take tablets and need prompting. Can you detect changes in your health condition and to manage treatments? Do you need help with physiotherapy?
Think about whether you are able to monitor fluctuations in your own mental health or physical problems. Can make appropriate changes or seek help to avoid becoming more unwell. Also consider your ability to manage your own prescribed medication or home therapies (such as relaxation techniques or physiotherapy).

Do you know when you are becoming unwell? Do you need a pill organiser to remind you what medication to take? Does someone need to supervise you to ensure you take the correct amounts of prescribed medication? Do you need any special adaption to manage treatments?

Describe why you need the help and what happens if you do not get the help that you need.

Q6. **Washing and bathing**

   This activity is about your ability to wash and bathe and to use a bath or shower.

   a) Do you use an aid or appliance to wash and bathe yourself, including using a bath or shower?

   b) Do you need help from another person to wash and bathe?

Q6) **Extra information**

   If you can’t wash or bathe due to exhaustion or feeling too ill explain this. If you have any problems with washing yourself, because of problems with grip or pains that make holding soaps or reaching certain parts of your body hard.

   Perhaps you get dizzy and standing up in the shower or getting out of the bath could be dangerous. If you ever faint and have fallen explain when and how.

   Do you neglect yourself and need prompting to wash and bathe?

   Think about whether your ability to regularly wash and bathe is affected by your illness or the medication you take. Do you often lack the motivation to wash or bathe? Do you need to sit down in the shower because your medication causes light-headedness? Do you need someone to remind or assist you to wash or bathe?

   Describe the problems that you have with this activity and any help that you require, including help with aids or adaptations.

Q7. **Managing toilet needs**

   This activity considers the ability to get on and off the toilet and to clean yourself afterwards.
a) Do you use an aid or appliance to go to the toilet or manage incontinence?

b) Do you need help from another person to go to the toilet or manage incontinence?

Q7) Extra information

It will not be common for people to score in this section solely due to a mental illness. It will be possible in some cases if your illness or medication causes incontinence. If you have a physical health issue as well as mental illness that affect your ability to manage toilet needs you may score points.

Explain any problems with getting on and off the toilet and adjusting your clothing. Give examples of any accidents where you have been unable to get to the toilet quick enough due to your illness.

Q8. Dressing and undressing

a) Do you use an appliance to dress or undress?

b) Do you need help from another person to dress or undress?

Q8 Extra information

This activity looks at your ability to dress and undress yourself.

Do you not want to get dressed or undressed due to exhaustion or feeling too ill? Do you have any problems with dressing yourself because of problems with grip, muscle weakness or pains that make reaching or bending difficult?

Think about whether your illness affects your ability or motivation to dress yourself. Do you need someone to prompt you to get dressed or undressed?

Do you find it difficult to determine what clothing is appropriate for the time of day or weather conditions? Are you able to keep your clothes clean so that you are able to dress appropriately?

Maybe you are not able to wear the clothes that you would like anymore as you need items that can be pulled on easily without buttons and zips. Do you often stay in your nightclothes to conserve your energy or due to depression.

If you can do this activity but it takes a long time and increases your symptoms me. You may need to keep resting whilst dressing or undressing or afterwards.

Describe the problems that you have with this activity and any help the help you need.
Q9. Communicating

a) Do you use an aid or appliance to communicate with others?

b) Do you need help from another person to communicate with others?

Q9) Extra information

This activity considers your ability to communicate verbally and includes your ability to understand what someone is saying and be understood by someone else.

In the context of the descriptor communication support means support from a person who is trained or experienced in communicating with people with specific communication needs, for example a sign language interpreter.

NOTE: this does not include interpreter support for other languages such as Gujarati.

Think about whether your illness or the medication you take makes it difficult for you to be understood by, or understand other people when you are talking. Is it hard for you to keep your train of thought when you are speaking to people?

Do you get easily confused when someone is explaining things to you? Do you use an aid or appliance such as a hearing aid or electro larynx?

It could be worth including information here about the effect communication has on you. Consider whether talking and listening has an effect on your health. Do you feel exhausted after conversations or as a result of having to listen and take in information? Perhaps you have to time when you can have conversations and plan them into your day-for example maybe you are only able to communicate effectively in the mornings and need to rest afterwards. Perhaps there are times when you are simply too unwell to communicate with other people. Do you put off making phone calls due to your illness? Do you have poor concentration and cannot follow conversation?

Q10. Reading

a) Do you use an aid or appliance other than spectacles or contact lenses to read or understand signs, symbols and words

b) Do you need help from another person to read or understand signs, symbols and words?

Q10) Extra information

This activity is about your ability to read and understand written signs, symbols and words in your own language.
Think about whether you illness affects your ability to read signs, symbols and words?

Are you able to read and understand the post you receive, for example your gas bill or bank statement?

Can you follow simple written instructions for example the guidance on your medication which explains how much and when you should take it?

As a result of your illness you may struggle cognitively with taking in and understanding information.

Describe the problems you have and the help you need?

Q11. **Mixing with other people**

   a) Do you need another person to help you to mix with other people?
   
   b) Do you find it difficult to mix with other people because of severe anxiety or distress?

Q11) **Extra information**

This activity is about your ability to get on socially with other people when you are face to face.

Think about how your illness affects your ability to deal with people face to face. Do you socialise with other people? If not, why not? What happens when you do? Do you have any physical symptoms such as sweating or an increased heart rate?

Describe any problems such as extreme fatigue or poor concentration. Do you have difficulty following what people are saying to you or understanding them and responding appropriately.

If you become anxious in social situations you could describe this here. Perhaps you are not able to engage in social situations, reliably and repeatedly even if you can do so some of the time. As a result of your illness you may have lost confidence in dealing with these situations and may even avoid them due to the effect that they have on you. Explain how you feel.

Q12. **Making decisions about money**

   a) Do you need someone else to help you to understand how much things cost when you buy them or how much change you’ll receive?
   
   b) Do you need someone else to help you to manage your household budgets, pay bills or plan future purchases?
Q12) Extra Information

This activity is about your ability to deal with your money.

This activity considers your ability to make everyday budgeting decisions, such as buying items from a shop or paying bills.

Simple budgeting decisions are defined as being able to calculate the cost of goods and change required following the purchase.

Complex budgeting decisions are defined as the ability to calculate household and personal budgets, managing and paying bills and planning future purchases.

Think about whether you illness affects your ability to manage your money, bills and everyday financial transactions.

Do you need help to ensure all your bills are paid and you have enough money to buy essential items such as food?

Does your illness make you overly generous with your money? Do you give money away without realising?

Do you need someone to go to the shops with you to help you with making payment and getting the right change? Do you get confused by the different amounts of money? Do you forget that you have paid for items?

Do you become overwhelmed and find it hard to make decisions about budgeting? Do you become exhausted dealing with paperwork and bills and need help with managing this?

Mobility activities

Q13. Going Out

a) Do you need help from another person to plan a route to somewhere you know well? Or do you need another person, guide dog or specialist aid to help you get there?

b) Do you need help from another person, guide dog or specialist aid to get to a location that is unfamiliar to you?

c) Are you unable to go out because of severe anxiety or distress?

Q13) Extra information
This activity considers your ability to plan and follow the route of a journey. It covers mental distress caused by making a journey and planning a journey. It also covers your physical and sensory ability to manage the journey itself.

If you are not capable of using public transport, you should not be considered able to plan and follow an unfamiliar journey alone.

Think about whether your illness affects your ability to get to places. Can you go places that you are familiar with? Do you struggle to go somewhere new?

Are you capable of using public transport? Do you need someone with you when you leave you home? How does going out and making a journey make you feel?

If there was a disruption to a journey you have planned would you be able to carry on with your journey? Do you never leave your house or familiar environment? Why not? What would happen if you did?

Do you experience anxiety or panic attacks? Describe how you feel or what happens when you feel anxious or have a panic attack? Do you experience both emotional and physical symptoms.

Do you feel overwhelmed in noisy environments and are you noise or light sensitive? Do you avoid environments that are too crowded or noisy.

Does your condition mean that you get confused and disorientated when you are out? Do you sometimes feel so ill when out that you need someone to take you home?

Does it help you to have someone with you to ensure your safety and help you manage any feelings of anxiety?

**Q14. Moving around**

a) How far can you walk taking into account any aids you use?

b) Do you use an aid or appliance to walk?

c) Do you use a wheelchair or similar device to move around safely, reliably and repeatedly and in a reasonable time period?

**Q14) Extra information**

This activity is all about your ability to physically move about. The DWP say that this activity should be judged in relation to the type of surface normally expected out of doors such as pavements and kerbs.
Before completing this section, look at the descriptors for this activity. Remember to take into account issues such as safely, reliably and repeatedly and whether you can walk the distance in a reasonable time period.

It should be your ability to move around without severe discomfort such as pain, breathlessness or fatigue that is assessed.

For example, if you can walk 20 or 50 metres but only with discomfort and you cannot do so reliably or repeatedly you may want to tick the box stating that you can walk less than 20 metres or the between 20 and 50 metres box.

You can then explain in more detail about the problems that you have with walking, in the other information section below. Tell them about how far you can walk before you experience issues like pain, severe discomfort, fatigue, breathlessness, muscle weakness etc. You also need to explain if you are not able to walk repeatedly and reliably.

You may be able to walk a short distance but this exertion may then cause an increase in your symptoms and may result in you needing complete bed rest for several hours and this should also be taken into account when you claim is assessed.

If you use a wheelchair to cover the distance in Q14a and can only cover this distance by wheelchair then you should score the points for the activity. A stick may help with balance problems but would not help with levels of exhaustion and fatigue. It may be that it is not possible to use a stick due to pains in the hands or arms or because of muscle weakness or lack of grip in the hands. If an aid would be useful it does not discount you scoring here so have a careful look at the descriptors and think about exactly what you want to say.

Q15. Additional information

This section is for information that has not been covered elsewhere on the form, summarise any important points that you wish to reiterate or give some background information about your condition and how it limits you.

If you are supplying extra supporting evidence make sure it is up to date and attach it to the form.

It may also be helpful to send copies of other medical documents, such as your care plan, a prescription list, details of any therapies you are undertaking and any other medical documents you may have. Photocopy any supporting evidence. If you can provide evidence that clearly demonstrates that there is limited or severely limited ability to perform the specified activities, it is possible for a decision to be made without a face to face assessment.
Make sure you check the information is accurate, all the relevant evidence is attached and sign the declaration before sending the form.

**What happens next?**

You will be contacted to arrange a face to face consultation with a health professional. You'll be able to take someone with you. If you sent in supporting medical evidence information it may be decided that a consultation is not be needed.

If you have difficulties with attending a face to face medical you need to inform the DWP. FOR EXAMPLE if traveling and having to participate would cause a worsening in your symptoms you need to let them know. If you are unable to get there for health reasons you can ask for a home visit and should provide a medical letter confirming this for a better chance of a home visit being granted.

**Face-to-face medical assessments**

Capita have been employed to carry out face to face medical assessments at an examination centre in Leicester.

You can request a home visit on grounds of your disability but they can ask for a letter from your doctor confirming you are unable to attend.

**What happens at an assessment?**

Most people will be asked to attend a face to face assessment with a health professional. You can take someone with you such as a family member, friend or carer. If you do not attend without a good reason your claim can be rejected so if you cannot attend when you receive the appointment, telephone and explain why.

The healthcare professional will have read everything on your file (but not your medical notes) before beginning the assessment. They may ask you about a typical day, so it is useful to keep a diary.

At the assessment the healthcare professional will ask you about your illness/disability and how you manage your daily life. They will ask questions about your daily routine covering the activities that PIP assesses. They will also observe you throughout the assessment. In some cases they may carry out a physical examination.

You should be asked about how your condition fluctuates and you may be asked about the pattern of your fluctuations and may be asked to state how many “good” and “bad” days you have. If you never have symptom free days it is important that you make this clear.
Once a medical report has been completed and returned to the DWP, a case manager will review all the evidence to decide if you meet the criteria for an award of PIP.

Once they have reached a decision you will receive a decision letter telling you whether you have been awarded PIP.

**Mandatory Reconsideration & Appeals**

If you are not happy with the decision you have the right to request a mandatory reconsideration within one month of the date at the top of the decision letter. If the decision is not changed, you will receive a mandatory notification letter explaining why. You will then need to submit this letter with the appeal form SSCS1 (this can be downloaded from HM Courts & Tribunal Service website) to the Tribunals service address on the form, again within a month of the date of the decision.

At this stage it is important to seek advice as you may need help to gather evidence and put your case forward at the hearing. It is recommended that you opt for an oral hearing where you attend in person so the Tribunal can clarify any outstanding issues and this gives you a much greater chance of success than a paper hearing.

**After a PIP award what other help is available?**

If you are awarded PIP this can act as a gateway to other additional help depending on your personal circumstances. For example you may be entitled to additional elements or premiums on other benefits or you may no longer be subject to a benefit cap or non-dependent deductions from your housing benefit. This will depend on personal circumstances so it is important to seek advice so you do not lose out.

**Blue Badge and Motability scheme**

If you have been awarded eight points or more in the ‘moving around’ activity of personal independence payment (PIP) you will be able to get a Blue Badge. You will be exempt from road tax if you get the enhanced mobility element of PIP and you can get a 50% discount on your road tax if you receive the standard mobility element of PIP.

You will be able to qualify for the Motability Scheme help if you are receiving the enhanced mobility (moving around) component of PIP.
Carers Allowance

If the person you care for gets either rate of daily living component and you meet the other criteria for Carers Allowance you may be eligible to claim this additional benefit. It is important to get advice before claiming to ensure the benefits of the person you are caring for are not affected.

**Where can I get further advice?**

You can contact the Welfare Rights Service public advice line on 454 5570 (Monday, Tuesday and Thursday between 1-4pm) for further help if you did not get the award you expected and want to challenge the PIP decision.

For help with claiming or filling the PIP form see the Advice Agencies in Leicester guide.
Appendix I: activities and descriptors

In order to qualify for the daily living component (activities 1 to 10 in the table below) of PIP you need to score:

- at least 8 points to be awarded the standard rate
- at least 12 points to be awarded the enhanced rate

In order to qualify for the mobility component (activities 11 and 12 in the table below) of PIP you need to score:

- at least 8 points to be awarded the standard rate
- at least 12 points to be awarded the enhanced rate

To get both the daily living and mobility component you would need to score at least eight points in both sections (ie. a total of 16 points.)

You can only score once in each activity so only the descriptor with the highest points that applies to you will be awarded.

**Daily living component activities**

Activity Descriptor

1. Preparing food
   a. Can prepare and cook a simple meal unaided – 0 points
   b. Needs to use an aid or appliance to either prepare or cook a simple meal – 2points
   c. Cannot cook a simple meal using a conventional cooker but is able to do so using a microwave – 2 points
   d. Needs prompting to be able to either prepare or cook a simple meal – 2 points
   e. Needs supervision or assistance to either prepare or cook a simple meal – 4 points
   g. Cannot prepare and cook food – 8 points
Activity Descriptor

2. Taking nutrition

a. Can take nutrition unaided – 0 points

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 – 2 points

c. Needs a therapeutic source to be able to take nutrition – 2 points

d. Needs prompting to be able to take nutrition – 4 points

e. Needs assistance to be able to manage a therapeutic source to take nutrition – 6 points

f. Cannot convey food and drink to their mouth and needs another person to do so – 10 points

Activity Descriptor

3. Managing therapy or monitoring a health condition

a. Either:
   (i) does not receive medication or therapy or need to monitor a health condition unaided OR
   (ii) can manage medication or therapy or monitor a health condition unaided – 0 points

b. Needs either:
   (i) to use an aid or appliance to be able to manage medication OR
   (ii) supervision, prompting or assistance to be able to manage medication or monitor a health condition – 1 point

c. Needs supervision, prompting or assistance to be able to manage therapy that takes no more than 3.5 hours a week – 2 points

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 – 4 points
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 – 6 point

f. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 14 hours a week – 8 points

Activity Descriptor

4. Washing and bathing

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

Activity Descriptor

5. Managing toilet needs or incontinence

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

Activity Descriptor

6. Dressing and undressing

a. Can dress and undress unaided – 0 points
b. Needs to use an aid or appliance to be able to dress or undress – 2 points
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 – 2 points
d. Needs assistance to be able to dress or undress their lower body – 2 points
e. Needs assistance to be able to dress or undress their upper body – 4 points
f. Cannot dress or undress at all – 8 points

Activity Descriptor

7. Communicating verbally

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

8. **Reading and understanding signs, symbols and words.**
   a. Can read and understand basic and complex written information either unaided or using spectacles or contact lenses – 0 points
   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. – 2 points
   c. Needs prompting to be able to read or understand complex written information – 2 points
   d. Needs prompting to be able to read or understand basic written information – 4 points
   e. Cannot read or understand signs, symbols or words at all – 8 points

Activity Descriptor

9. **Engaging with other people face to face.**
   a. Can engage with other people unaided – 0 points
   b. Needs prompting to be able to engage with other people – 2 points
   c. Needs social support to be able to engage with other people – 4 points
   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 – 8 points.

Activity descriptor

10. **Making budgeting decisions.**
    a. Can manage complex budgeting decisions unaided – 0 points
    b. Needs prompting or assistance to be able to make complex budgeting decisions –2 points
c. Needs prompting or assistance to be able to make simple budgeting decisions – 4 points

d. Cannot make any budgeting decisions at all – 6 points

**Mobility component activities**

Activity Descriptor

**11. Planning and following journeys**

a. Can plan and follow the route of a journey unaided – 0 points

b. Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant – 4 points

c. Cannot plan the route of a journey – 8 points

d. Cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid – 10 points

e. Cannot undertake any journey because it would cause overwhelming psychological distress to the claimant – 10 points

f. Cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid – 12 points

Activity Descriptor

**12. Moving around**

a. Can stand and then move more than 200 metres, either aided or unaided – 0 points

b. Can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided – 4 points

c. Can stand and then move unaided more than 20 metres but no more than 50 metres – 8 points

d. Can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres – 10 points

e. Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided – 12 points
f. Cannot, either aided or unaided: (i) stand OR (ii) move more than 1 metre – 12 points

Appendix II: DWP definitions for activities and descriptors

The information below provides the meaning of words as set out in Schedule 1 of the Social Security (Personal Independence Payment) Regulations 2013.

“aid or appliance”
A device to improve either a physical or mental function or both. It includes a prosthesis but does not include an aid or appliance ordinarily used by a person without a physical or mental condition which limits that person’s ability to carry out daily living or mobility activities

“assistance”
Physical intervention by another person (not including speech)

“assistance dog”
A dog trained to guide or assist a person with a sensory impairment

“bathe”
To clean one’s torso, face, hands and underarms. Includes getting in or out of the bath or shower.

“cook”
To heat food at or above waist height

“basic verbal information”
To convey and understand a simple sentence in the claimant’s native language

“basic written information”
Means signs symbols and dates written or printed standard size text in the claimant’s native language

“communication support”
(a) support from a person trained to communicate with people with specific communication needs
(b) support from someone experienced in communicating with the claimant;
“complex budgeting decisions”
    (a) calculating household and personal budgets
    (b) managing and paying bills
    (c) planning future purchases

“dress and undress”
To put on and take off socks and shoes

“engage socially”
    (a) to interact with others in a contextually and socially appropriate manner
    (b) to understand body language
    (c) to establish relationships

“manage incontinence”
To manage evacuation of the bowel or bladder including using a collecting device or self-catheterisation and clean oneself afterwards;

“manage medication or therapy”
To take medication or undertake therapy, where a failure to do so is likely to result in a deterioration in the claimant’s health;

“medication”
Medication prescribed or recommended by a registered doctor, nurse or pharmacist

“monitor health”
    (a) to detect significant changes in the claimant’s health condition which are likely to lead to a deterioration in the claimant’s health
    (b) to take action advised by a healthcare professional, without which the claimant’s health is likely to deteriorate

“psychological distress”
Distress related to an enduring mental health condition or an intellectual or cognitive impairment
“prepare”
In the context of food, means the activities required to make food ready for cooking or eating

“prompt”
To remind or encourage or explain by another person

“simple budgeting decision” mean decisions involving:
(i) calculating the cost of goods
(ii) calculating change required after a purchase

“simple meal”
A cooked, one-course meal for one using fresh ingredients

“read”
Includes read signs, symbols and words but does not include read braille

“social support”
Support from a person trained or experienced in assisting people to engage in social situations

“supervision”
The continuous presence of another person for the purpose of ensuring the safety of the claimant

“take nutrition”
(a) to cut food into pieces
(b) to convey food or drink to one’s mouth
(c) to chew and swallow food or drink
(d) to take nutrition by using a therapeutic source

“therapeutic source”
Parental or enteral tube feeding using a rate limiting device such as a delivery system or feed pump
“therapy”

Refers to long-term therapy which is

(a) undertaken at home

(b) prescribed or recommended by a registered doctor, nurse, pharmacist or healthcare professional regulated by the Health Professions Council [now Health and Care Professions Council]

“toilet needs”

(a) getting on and off an un-adapted toilet

(b) evacuating

(c) cleaning oneself after using the toilet

“unaided”

means -

(a) without the use of an aid or appliance

(b) without assistance, prompting or supervision