

### **Personal Independence Payment**

**Personal Independence Payments (PIP)** replaced Disability Living Allowance for people aged 16 to 64 inclusive from the 10 June 2013. Like DLA, it has two components: mobility and daily living. Unlike DLA the way that you claim to benefit has changed dramatically and is now done in two stages.

**Stage one:- Starting your claim.** You can start your claim by telephoning 0800 917 2222, the lines are open 8am to 6pm Monday to Friday. You do not have to make this call yourself. It can be made by family or a support worker, for example, but you will need to be with them. The first call should last approximately 15 minutes and you will be asked for your basic details. Please have the following details ready to give the call centre:

- Your full name,
- Address,
- Contact details,
- National Insurance Number,
- Nationality,
- Dates away from UK if you have spent any time abroad over the last three years.
- Any dates you have been a patient in hospital, hospice or care home over the last 28 days.
- The names and contact details of your health care professionals i.e. GP, Consultant etc. (It would help if you kept a diary of the problems that you have so this information can be used by them if they are asked about you).
- Your bank details or where you would like payments made.
- Information on your conditions if claiming under special rules (terminal illness).
- You will also be asked if you would have difficulty returning your form due to learning difficulties, mental health or memory problems.

If you have all this information to hand it will speed up the length of your call. Once you have given all this information you will be asked to agree a declaration. Your claim will start on the day that you make your call. You can ask for a paper claim form to be sent out to you if you cannot deal with the phone call.

If it is clear from the information that you have supplied that you do not satisfy the basic entitlement conditions for PIP, the DWP will send you a letter stating that your claim has been disallowed. If you do qualify, you will be sent a form to complete called "How your disability affects you". This form gives you the chance to describe how your condition(s) affect you and your daily life. You have one month in which to return the



completed form. If this is returned late without good reason, your claim will be disallowed.

Make a copy of your answers and post the form in the envelope supplied by the DWP.

### **Stage two:- Assessment stage.**

Your claim for PIP will be handed first to one of the regional Disability Benefit Centres. Decisions are made by decision makers referred to as Case Managers and an assessment will be carried out by Capita or Atos Healthcare. Once the DWP has received your “How your disability affects you” form, they will refer you to the assessors in your area. They will allocate your case to one of their healthcare professionals who may initially contact your GP, Consultant or other medical professional treating you for reports. This may be done by telephone or by writing to them requesting a report. The healthcare professionals are advised to seek such information where there is evidence of a previous suicide attempt or self-harm. In most cases however the healthcare professional will arrange to see you at a face to face consultation. These examinations will take place in centres across the county in which you live. If you are not able to attend an examination centre and need the consultation to take place in your own home, you should inform the office arranging your assessment as soon as possible. You must be given at least 7 days notice of the time and place of your assessment, unless you agree to accept a shorter notice period.

If you do not attend or participate in the consultation without good reason (taking into account your disability or state of mental health) your claim will be disallowed. You will be contacted and asked to explain your reasons. If the case manager refuses to accept that you had good reason, you have the right to appeal.

At the face to face assessment, the healthcare professional will identify the descriptors that they consider apply to you. To do this they will ask you questions about your day to day life, your home and how you manage work if you have a job and about social or leisure activities that you engage in or have had to give up. They may ask you to describe a “typical day” in your life. You must tell them all your problems, difficulties and about the amount of help that you “need”. See our guide that shows the descriptors used and the number of points that each of these carry. You can have someone with you during the assessment i.e. family member, case worker etc. Once the assessment has been carried out, the healthcare professional will send his/her report to the case manager who will decide if you are entitled to a PIP award. If your claim is disallowed or you do not agree with the level you have been awarded, you have one month to appeal.



The way that a PIP is assessed is similar to Employment and Support Allowance in as much as it is based on the number of points awarded to you for various functions to do with your mobility and ability to carry out basic day to day care needs. Our second PIP factsheet gives you the questions that you will be asked and the number of points that the case manager will give you – subject to your needs/assessment report. You have to have been awarded a minimum of 8 points to get the lower rate of mobility and/or care and 12 points for the higher rate. As the criteria used to claim PIP is far harder than that used to claim DLA it is important that you do not understate your problems or the amount of help that you need.

Checklist – please fill out as much detail as possible before making your first call.

Your full name.	
Date of Birth	
Address.	
Contact telephone number.	
National Insurance Number.	
Nationality/Immigration Status.	
Dates away from the UK over the last 3 years.	
Any dates you have been in hospital, hospice or care home over the last 28 days.	
Name and contact details of your doctors, consultants or healthcare professionals who treat you.	
List your disabilities and medication (you may not be asked for all of these over the phone but have them ready if asked).	
Information on your conditions if claiming	

under special rules (terminal illness) DS1500 required.	
Your bank details for payments (optional at this stage).	
Details of any other benefits or pensions received from or paid into in another EEA state or Switzerland.	

You should have as much information as possible to hand when making your initial call to the PIP claim line. The questions asked may not be in the exact order as above but we understand that these are the questions that you will be asked. The more information that you can provide at the time of your call the quicker your claim can be processed and the second part of your claim "How your disability affects you" form can be sent out. This form is bar coded to you so it is no longer possible to pick up a spare or replacement copy from the Jobcentre.

If due to mental health problems or learning difficulties you cannot deal with the telephone interview or deal with the form, you can give someone else permission to give your answers but you will have to give your permission to the interviewer for that person to speak/act on your behalf.