A Guide to Form Filling: Completing - PIP2 Form

Information Guide 10: For Residents and Advisers

21st October 2024

www.wolverhampton.gov.uk

1. Introduction

This Information Guide is intended to provide information to those who are faced with having to complete the PIP2 How your disability affects you form for Personal Independence Payment (PIP) on behalf of themselves or on behalf of another person in a voluntary or professional capacity.

The guide:

- explains the importance of completing the PIP2 form
- the role the PIP2 form plays in the overall assessment of an individual's entitlement to Personal Independence Payment
- what the consequences might be if a person does not complete the PIP2 form

Perhaps more importantly this guide provides information on what information to provide and some tips on how best to get the job done.

It's not just about what you can't do, it's also about how you manage to do the things you can do. It's not just about the help that you get, it's about the help that you reasonably require.

2. What is PIP...

Personal Independence Payment is a Social Security benefit that is designed to provide extra money to people of 'working age' (i.e. people aged 16 or over but under State Pension Age) who need help with their:

- daily living personal care/daily living
- mobility getting around/general mobility

by reason of a physical or mental health condition'.

A person's actual entitlement is neither 'means-tested' nor dependent upon their contributions record. This means that a person can qualify for PIP irrespective of their income / capital and irrespective of whether they work or have worked in the past and paid National Insurance contributions.

The actual amount of PIP awarded depends upon the nature and level of help a person needs with their 'daily living' and/or 'mobility'. The assessment process operates on a point scoring system. Put simply, the more points you score the greater chance you have of qualifying for a payment.

The amounts that can be paid are:

Daily Living Component:

£108.55 per week - enhanced rate

£72.65 per week - standard rate

Mobility Component:

£75.75 per week - enhanced rate

£28.70 per week - standard rate

If you are 'terminally ill' (you have been given a **SR1 form** (formerly a DS1500 form) by your GP or another health professional) then you should automatically get the 'daily living component' at the 'enhanced rate'.

If you want more information on the PIP qualifying rules, then please refer to our Information Guide 8 Personal Independence Payment (which provides an overview of PIP) and Information Guide 9 Personal Independence Payment - Toolkit (which provides detailed information on how the actual regulatory tests for PIP apply).

The money awarded under PIP is meant to cover the extra cost you may incur due to your disability. However, there is no rule on what it should actually be spent on. Some people use their PIP to e.g. buy in care and pay for taxi fares. However, many others use it to supplement their day-to-day living costs. It is up to you how you spend it.

3. Why the PIP2 Form is Important...

Entitlement to PIP is dependent upon how your physical and/or mental health problems impact on your ability to undertake particular physical and mental activities. The form is designed to enable you to provide details to the Department for Work and Pensions (DWP) about what conditions you suffer from, the treatment you receive for those conditions (if any) and how this all affects you day-to-day.

Once you have completed and returned the PIP2 form it will go to a Healthcare Professional who will assess you in a, so called, face-to-face consultation.

The Healthcare Professional will then compile their own report known as a PA4 which will then go to a DWP Decision Maker (together with your completed PIP2 form and any other medical evidence collected), for them to make a decision on your overall PIP entitlement.

Therefore, completion of the PIP2 form is most important. The PIP2 form enables you to tell both the Healthcare Professional and the DWP Decision Maker about your health problems and how they impact on you. It is your opportunity to tell your side of things / to tell your story.

4. Online PIP2 Form...

Historically the DWP has always used a paper PIP2 form. This has involved people completing the form in handwriting and returning it by traditional postal methods.

However, more recently the DWP has developed an online PIP2 form in the same format as the paper PIP2 form which you can complete online.

The new digital PIP2 form service involves the DWP emailing a password protected link to an online PIP2 form that people can then complete. When completing the online PIP2 form it is possible to dip in and out of it thereby completing it in stages. Once done you can then 'submit' the form. It should be up to you to select the format you would prefer to complete the PIP2 form - paper or online with each having its own advantages and disadvantages.

5. What if I do not Fill-in and Return my Form?

The relevant regulations provide that the DWP may ask people who claim PIP to provide 'information or evidence' in order that their entitlement can be assessed.

This normally involves the DWP asking people to complete a PIP2 form. In doing so, a onemonth time limit is normally given to complete and return the form. If you fail to do this then your PIP claim will be ended.

However, the important thing to remember is:

- **1.** The DWP should not end / stop your claim until after they have sent you a reminder and given you a further 14 days to complete and return the form in question.
- 2. If you have a 'good reason' for not having been able to return your form in time, then the DWP can extend the time limit. You may have a 'good reason' if you were simply too ill to complete and return the form on time or some domestic emergency prevented you from doing so.
- 3. If you need more time to get the job done then simply contact the DWP, who can extend the time limit giving you more time to complete and return the form.

Moreover, be aware that the requirement to complete a PIP2 form is a discretionary one. The rules state that the DWP may (not shall) require a person to complete a PIP2 form.

It is, therefore, permissible for the DWP to, in effect, waiver the requirement for a person to complete the PIP2 form as part of the decision-making process. This might be, for example, in circumstances whereby it would be unreasonable to expect a person to complete the PIP2 form. It could also be in circumstances in which a person cannot complete the form (e.g. because their first language is not English) and they cannot get anyone to help them to complete the form (e.g. due the pandemic).

Regulation 8 of the Social Security (Personal Independence Payment)
Regulations 2013 - Statutory Instrument 2013 No. 377

Indeed, if the DWP is aware/has been made aware that you suffer with a mental health condition, behavioural condition, learning disability, development disorder or memory problems then it can relax the requirement for you to return the form. It can simply proceed to the 'face-to-face consultation' stage without the PIP2 form.

Do not forget that completing the PIP2 form is your opportunity to inform the DWP / Healthcare Professional about how you see your health problems and how they affect you. Do not give up this opportunity lightly.

If you are terminally ill and a SR1 form (formerly DS1500 form) has been obtained perhaps from a person who is treating you, then there should be no need for you to complete a PIP2 form or to attend a face-toface consultation.

The DWP should award you the 'daily living component' at the 'enhanced rate' and assess your entitlement to the 'mobility component' based on the information available.

6. The PIP2 Form...

The both the paper PIP2 form and online PIP2 form are 40+ pages long. Whilst the format of each form is slightly different the central parts of each form are essentially the same.

Whilst the paper PIP2 form has 4 Sections in total and the online form has 5 Sections in total it is clear to see that each form has four key areas of information which are as follows:

Key Area One: Enquires in to details of your health conditions / disabilities and approximate dates of when they onset. It also asks you for details of any medication or treatment you are undergoing (e.g. physiotherapy / chemotherapy) and any side effects.

Here list your conditions and treatments as best you can. Use any NHS prescription you may have from your GP to obtain details of the medicines you have been prescribed.

If you have access to a computer or smart phone you can use e.g. Google, Bing or Yahoo to help you find the correct spelling of particular conditions, medications and treatments.

Key Area Two: Enquires about professionals who are best placed to advise the DWP about your health condition and how it impacts on you. Such a person could be someone who is treating you or someone who is working with you like a Social Worker or Support Worker. If you are going to provide details here of someone then do ask their permission first or at least let them know that you have provided their details.

If you are going to submit the details of someone whom the DWP may contact for more information on your health problems and how they impact on you then do let them know that this is what you have done. This will at least give then some advanced notice that they could be contacted.

Key Area Three: Enquires about how your physical, mental and/or cognitive impairments impacts on you day-to-day. Each question focuses on the difficulties you may experience and the help you might need in relation to the various activity areas covered by PIP both for the 'daily living' component and the 'mobility' component.

Please see 10. PIP2 Form: Section 3 for further information on this part of the form and about things that are relevant to mention.

Taxi?
Taxi?
Taxi?

Key Area Four: Enquires about your ability to attend / the support you might need to attend a face-to-face consultation with a Healthcare Professional.

It is likely that you will be expected to attend / take part in a face-to-face consultation in person (at a venue possibly several miles from where you live or in your own home if you are unable to leave home) or on the phone or digitally as part of the assessment process. Therefore, it is important if you would be unable to do this that you explain things here. It could be that you have problems travelling or using public transport or that you can only journey by taxi or in any event that you would need the support of another person to take part. You may suffer from impaired hearing and so could not be assessed over the phone without help. Your English may be poor and so you may need the aid of an interpreter. Make whatever difficulties might present known

Please see 7. Some Top Tips for some pointers to bear in mind when completing your PIP2 form.

7. Some Top Tips...

The following are some general tips to bear in mind when completing the form.

- 1. Remember that neither the Healthcare Professional nor the DWP Decision Maker will know anything about you. Whilst the Healthcare Professional will eventually get to meet you / talk to you on the phone and chat to you about your health problems and how they impact on you, up to that point their only real knowledge of you will be that provided on the PIP2 form.
 - Be mindful that whilst a DWP Decision Maker could at some point in the process phone you to discuss your circumstances, this does not happen very often.
- **2.** The important information to get across in your PIP2 form are:
 - What health problems you suffer
 - What medication and treatments you have been prescribed
 - How your health problems impact on your functional abilities (both physical and mental) and day-to-day living including the problems you have with the different aspects of 'daily living' and your mobility.

3. The PIP2 form is long and ask for lots of different information. It is probably best not to attempt to complete the form in one sitting. Take your time - complete the form in stages if it helps. In any event, allow plenty of time. It can take between 1 and 3 hours (and sometimes even longer) to do a good job of completing the form.

- 4. If you have family or friends who know you well, let them see the form before you return it. Get their views on whether they think you have fully covered your difficulties or whether you have left out some important details
- **5.** Remember that lots of people find it difficult sharing information about themselves particularly if it is personal information. Unfortunately, if you miss out information then this will affect the DWP's ability to assess your claim properly. This may lead to you not getting an award of PIP to which you are entitled or getting an award which is less than what it should have been.
- **6.** It is <u>important</u> not to exaggerate your difficulties. If it is seen that you have overstated your difficulties, then this will affect the credibility of the information you provide in the form (including any further evidence you may provide at an appeal hearing should your claim need to go to appeal in order to be resolved) and could serve to undermine your overall claim.
- 7. It is important not to simply complete the PIP2 form based upon how you are at your worst or solely based upon your worst day.

If your condition is variable / fluctuates, so you have good and not so good days (or good times of the day and not so good times of the day), simply state this. In this situation try your best to give an accurate picture of how things are.

Explain what you can manage when you are feeling well (on a 'good day') and when you are unwell (on a 'bad day') and how things are when you are having an average day.

Be aware that for PIP the help you need does not need to be throughout the whole of the day/night or on each and every day of the week. What matters is that at least at some point during the day / night you would need such help / be unable to undertake a particular activity and that it be on the majority of days. You could have periods when for weeks you do not need any help with a particular activity but then have periods when you do need help for weeks at a time.

In any event be aware that in order to qualify for PIP the help you need must be for a period of at least 12 months. Put simply this means that you must have needed help at least 3 months before you claim. Moreover, you must continue to need this help for a period of at least 9 months after you claim. Therefore, you will not qualify for PIP if your difficulties are short lived.

It is also important that you be aware that to qualify for PIP the needs you have must be present for the majority of the time / on the majority of days. That is to say that if you were to count the number of days on which you need help vs the number of days on which you do not need any help during the 3/9 month period, the number of days you would need help should be the greater.

- 8. If you do have 'good days' and 'not so good days' when explaining this look at the language you use. The following are some words that can be used to emphasise how things are.
 - sometimes
- occasionally
- often
- frequently
- seldom
- never
- always
- every day
- some days
- most days
- 9. If you do have days when things are very painful then try to avoid using words like 'agony' unless this is an accurate description of how you feel.

When seeking to describe how much pain / discomfort you are in look at using phrases such as:

- mild pain
- mild discomfort
- moderate pain
- moderate discomfort
- severe pain
- severe discomfort
- significant pain
- significant discomfort

Do your best to describe where the pain / discomfort is located. For example, you might suffer pain / discomfort in between your shoulder blades, at the base of your spine, in your neck or in your right knee or left knee or both. Try also to explain whether you believe the pain is, for example, muscular in type or a joint pain. If your pain / discomfort onsets or becomes more acute upon certain movements then put this on the form.

When describing the pain you experience you could use the scale 0 - 10, at one end meaning no pain / mild pain and at the other meaning extreme pain / agony.

If you do this make sure to explain on the form / questionnaire that this is what you are doing.

If you are taking pain relief medication then make sure you mention this and how it helps, if indeed it does. If it has little impact, then state this on the form.

If your condition fluctuates (or you have problems remembering events) then you may like to keep a diary to record what help you need and when you need it.

10. If you have a mental condition meaning that there are times when you feel anxious, angry, overwhelmed or depressed, then explain this the best you can. If it arises when faced with certain task or prevents you from undertaking certain tasks due to a lack of drive or motivation, then put this down on the form.

- 11. If you are drug or alcohol dependent and this means that there are times when you are unable to undertaking / undertake properly things then put this down on the form.
- **12.** If you suffer from a condition such as fibromyalgia / chronic fatigue syndrome / myalgic encephalomyelitis (ME) whereby you suffer from episodes of acute tiredness / fatigue particularly after some physical or mental exertion which prevents you from being able to do things, then explain this as best you can.
- **13.** When it comes to completing the PIP2 form, think about the way you want to do it. Having (✓) *TICKED* what you consider to be the relevant boxes / answers when providing further details, be clear in the way you want to do this. For example, you may say:

- "I have difficulties..." / "This causes me..." - which would create the impression that the form has been completed by you.
- "He is unable to..." / "She suffers with... which means" - which would indicate that the form has been completed by another person.
- "Have difficulties with..." / "Suffers with... which means" - which is a neutral language and could mean that you or another person has completed the form.

You may think that it probably does not matter the format in which you complete the form, but it may do.

Take, for example, if you are completing the form on behalf of another person who is not able to read and write because they have a significant learning disability. Yet the form states 'I have difficulties with....' or 'My problems are....' then it may appear as though they have completed the form themselves and so paint a picture that their cognitive impairment is not in fact as severe as being presented/stated.

In any event be aware of the different approaches, pick one and stick with it. At the very least be mindful of the different styles. Moreover, if you are completing the form on behalf of another person then point this out. As stated, the PIP2 form has an Additional Information section. You could, for example, put here a statement like:

'This form has been completed by John Smith (Volunteer Casework at Helping Hand Advice Centre) using information provided by both the claimant and her husband during two telephone interviews which took place on 28.1.2022 and 2.2.2022'.

Tick the boxes you think apply to you!



14. When capturing information, you can use sentences / paragraphs, bullet points or a series of short statements. It depends on your writing ability and what works for you.

For example, if you need help with preparing or cooking a simple meal you could say:

Example 1: "Due to my depression I am (most of the time) not sufficiently motivated to either prepare food or cook. My wife prepares all my meals. If I had to prepare and cook food on my own I would, most of the time, not do it. I would need someone to prompt and encourage me to do it. Just recently when my wife was away visiting her family for a few days, I did not make myself any meals. I lived off what snacks that were in the cupboard, the food in the fridge and takeaways from the local chip shop."

Example 2: "Do not prepare food / cook. Lack motivation. Wife cooks all meals. Would need lots of support to encourage / motivate me to make meals and/or cook."

- 15. When answering questions, it is better to say 'Don't know' than to simply guess. This is because the answers provided could be treated as a factually correct account of your abilities. It could be perceived from the answers that your abilities are far greater than they actually are. It is a well-known fact that people are poor when judging matters of time (How long?) and distance (How far?). If you are unsure, then state "Not certain", "Not sure" or "Do not really know".
- 16. Sometimes people think that the more that they write, the better chance they have of getting an award. This is not necessarily the case. What is important is to provide relevant information, not lots of information.
- 17. Remember that the disability-related qualifying conditions for PIP are based upon a point scoring system. The score you achieve will determine how much PIP (if any). Therefore, be as clear as you can with the information you provide. A single extra point score or two could make all the difference.

18. You can obtain copies of our Information Guide 9: Personal Independence Payment Toolkit which provides an insight to the actual regulatory tests for PIP (including the point scoring system) from us. All you need do is email us and we will send you a copy. This will ensure that you are completing the form knowing beforehand how your disability / functional limitations should score under the system.

Email: wrs.training@wolverhampton.gov.uk

19. In any event if you have a copy of the actual rules, try to refrain from using statutory language. So, for example, in the case of the cooking test do not state that you are unable to prepare and cook a 'simple meal' (this is the legal test). Instead substitute 'simple meal' for perhaps a 'basic meal' and then give some examples of the types of meals you mean not forgetting to explain why you cannot. Similarly, if you need someone to help you to do something or to watch out for your (or another person's) safety whilst doing something then state this.

Do not simply put that you need 'assistance' or 'supervision' or 'prompting' to do things. Let the DWP Decision Maker (and if need be the First-tier Tribunal members) decide whether the help you need amounts to 'assistance' or 'prompting' or 'supervision'.

Avoid contradiction. You cannot say you have difficulties walking but then explain how you run marathons in your spare time...

- **20.** Once you have completed the PIP2 form, read it back. Make sure you are happy with it, that you have not left out some important information.
- 21. If you have any supporting information about your condition, medication and treatment and how it impacts on you (e.g. perhaps from your GP, hospital consultant, physiotherapist, CPN and/or Social Worker) then send this when returning your form.

- 22. If you can then take a photocopy of the form before sending it off, it can be useful for future reference. You can read the form through before your 'face-to-face consultation'. That way you can remind yourself of the details already provided.
- 23. If something important should happen after the PIP2 form is returned (e.g. your health deteriorates), then you can always write to the DWP or the organisation undertaking the 'face-to-face consultation' to advise them of this.

If your claim is refused, then you can ask for a 'mandatory reconsideration'. This would involve the DWP reviewing its decision. If you are not happy with the outcome, then you can take your case to appeal.

If you do appeal, then a copy of your completed PIP2 form will be given to the First-tier Tribunal, the body who would then decide your claim. The PIP2 form will form part of the evidence upon which the tribunal members will decide your case. Therefore, looking ahead, it is important that you do as good a job as possible in completing your form and try to get across the difficulties your ill-health / disability presents.

You can use this part of the form to tell the DWP things about yourself that you have not already done so. This can help as it will give the DWP more insight to your personal circumstances. For example, you could include something like:

Example 1: "I live with my wife and two young children. My wife is my primary carer. Before the onset of my ill-health, I used to take my children swimming and go to the park with them to play football. I am no longer able to do this. I used to walk my dog. I cannot do this anymore."

Example 2: "Before my injury I was a quite outgoing person. I enjoyed travelling and meeting new people. I used to drive and have my own car. Now I rarely leave my home. I am no longer physically able to drive. I am unable to navigate a steering wheel because of my lack of grip and manual dexterity."

Example 3: "Since leaving school I always worked. Most recently I worked for a local engineering company as a cleaner. The job was not well paid, but I liked it. I was made redundant from this job in 2018. At first, I found it difficult to find a job. Then when my health took a downturn it became clear that I would probably never be able to work again. My hobby used to be fishing. I can no longer do this due to my current difficulties. I am unable to sit for long periods due to my back pain. I could not use a fishing reel due to the numbness and poor movement of my fingers due to my arthritis."

8. Additional Information

Both the paper and online PIP2 form have a section to enable you to provide additional information. If, when completing the form, you run out of space on a particular page then use this part of the form to add in the extra information.

On the paper PIP2 form it tells you that you can also use this part of the form for your carer, family or friends to provide additional information about you. This could be what they witness about the difficulties you experience day-today and what help and support (if any) they provide.

9. What if I am a Poor Writer? Getting Some Help...

Not everyone can write, let alone write well. It may have been many years since you left school and had to write a great deal.

Indeed, English may not be your first language, therefore your reading of the English word and the fact that your ability to write in English may be poor could prevent you from being able to complete the PIP2 form. In this situation you could ask someone you know to help you to complete the form.

If your normal style of handwriting is difficult to read then change it, using capital letters throughout if necessary. It is important the information you provide can be read.

Do not worry about poor spelling or grammar. Just write words down as you think they are spelt. Further, do not worry about putting things down as you would say them.

If your writing ability is not good and this has prevented you from being able to fully answer the questions / provide all of the information you would have liked, then be sure to put this on the PIP2 form. Explain at the end of the form (in 'Other Information') that due to your poor writing skills you have been unable to fully convey your difficulties but that you hope to be able to do this at your 'face-to-face consultation'.

If it is the case that you simply cannot face having to put things down on paper about your poor health then again ask someone you know and trust, to help you.

10. The PIP2 Form

Quite clearly the key area of the PIP2 form is the part which is designed to capture the difficulties / help you need in relation to your 'daily living' and/or 'mobility'. The questions that are set out and the information it asks for reflect the legal test for PIP.

There are ten 'daily living' activity areas which are examined under the PIP rules. They are:

- 1. preparing food
- 2. eating and drinking / taking nutrition
- 3. managing treatments managing therapy or monitoring a health condition
- 4. washing and bathing
- 5. managing toilet needs or incontinence
- 6. dressing and undressing
- 7. communicating verbally
- 8. reading and understanding signs, symbols and words
- 9. engaging with other people face to face
- 10. making budgeting decisions.

There are two 'mobility' activity areas which are examined under the PIP rules. They are your mobility in the sense of:

- your ability to be able to plan and/or follow a particular journey; and/or
- your ability to moving around by means of walking.

The important things to bear in mind when completing the PIP2 form are as follows:

- **A. Your Difficulties:** It is important that you tell the DWP in the PIP2 form of the difficulties you have in relation to each of the 'daily living' and 'mobility' activity areas. It is important that if you are simply unable to do a particular task that you say so. However, if you are able to 'manage' then explain how you manage.
- B. When You Need help: It is important not only to state the difficulties you have but to make clear whether the difficulties you have are at only certain times of the day (e.g. the morning) and whether or not the difficulties you experience are on each and every day of the week, on the majority of days of the week or only on some days. If you have periods (weeks on end or months on end) when you need help and then other periods (weeks on end or months on end) where you do not need any help then make this clear.
- C. Why You Need Help: Try and explain why you need help. Is it because of your health problems or because of the side effects of your medication or treatments.
- D. Use of an Aid or Appliance: If you reasonably need to use an 'aid' or 'appliance' to enable you to undertake a particular activity then say so. Here by 'aid' or 'appliance' we mean some form of device that you need to use which helps you to overcome or cope with a particular activity due to your impaired physical or mental function. An 'aid' or 'appliance' would, for example, include a dossette box, hearing aid, magnifying glass, walking stick, crutches, Zimmer frame, an artificial limb, grab rails, shower seat, raised toilet seat, commode, incontinence pads, wheelchair, liquid level indicator. It does not include lens implants or joint replacements. If you can only manage by holding on to an item of furniture or equipment at home then make this clear.

E. Help from Another Person: It is important that you think about and state the 'help' that you may need from another person to undertake a particular activity.

Here 'help' means the help you would reasonably need (at some point throughout or during the undertaking of the particular activity). It includes:

- assistance someone to be present to physically (hands-on) help you with the task in question or some parts of the task in question; and/or.
- prompting someone to (by speaking to you or phoning you or texting you) remind you to do the activity in question or explain how to do the activity in question or encourage you to undertake or complete the activity in question; and/or
- supervision someone to be with you to ensure that when you are undertaking the particular task you do so safely.

If you would reasonably need 'help' on every occasion or most occasions or some occasions you were expected to undertake the particular activity involved, then you should indicate this.

It does not matter that you do not actually get any help because, for example, you have no one to help. All that matters is that in order to undertake the task you 'reasonably require' the help in question.

What is not mentioned on the PIP2 form is that what should be assessed is your ability to undertake or complete a particular activity:

- safely in a manner unlikely to cause harm or danger; and
- to an acceptable standard a standard that is good enough - a standard that most people would expect to achieve; and
- repeatedly meaning as often as might be reasonably required; and
- within a reasonable time period the time it takes to undertake the task is not twice as long as it might take a person in good health without a disability.

Please also bear in mind that **pain and discomfort** are relevant factors. If you can
only undertake a particular task whilst in a
degree of pain, discomfort, breathlessness or
fatigue then you should be treated as though
you are unable to undertake that particular
task.

Therefore, when completing the PIP2 form it is important to explain / point out if you do not think you can do something safely, to an acceptable standard, repeatedly and/or within a reasonable time period.

It is also therefore important to point out the pain / discomfort and fatigue you experience (if any) when undertaking to a particular activity.

10. Extra Information...

When completing the PIP2 form you will notice that once you indicate that your condition affects your ability to be able to undertake a particular activity (e.g. prepare food, eat and drink, manage your treatments, etc) that you are given space on the form to explain things.

Not forgetting all of the points raised above please use the following as a guide as to what may be relevant to enter here.

The Daily Living Component

- **1. Preparing Food:** This activity is about whether or not, given your disability, you are able to prepare and cook a simple meal. Things, for example, to mention here include:
- If you are unable to prepare and cook a simple meal. If this is the case, then explain why.
- If you would need someone to remind you to prepare a simple meal for yourself
- If you would need someone to encourage you to prepare a simple meal for yourself
- If you would need someone to explain how to prepare and/or cook a simple meal to you
- If you would need someone to watch over you when you are preparing or cooking a simple meal in order to avoid any possible harm or danger
- If you would be unable to prepare and cook a simple meal without the physical assistance of another person
- If you are able to undertake the tasks that could be involved in preparing a simple meal e.g. chopping and peeling vegetables, opening cans and other types of packaging
- Whether or not you would be able to use / use safely a cooker hob or microwave without the help of another person
- If you are unable to read sell-by dates / follow cooking instructions on packaging
- If there would be any risk to you from cutting yourself when using sharp knives or burning yourself when handling hot pots and pans, etc

 If you lack the mental ability or patience to bring the different ingredients / parts of a simple meal together at the right time

- If you lack the motivation to start and finish making a meal for your self
- If you cannot judge when food was cooked properly so would be at risk of food poisoning
- If you would be unable / unable to safely serve food onto a plate
- If the activity of preparing a simple meal would leave you physically / mentally fatigued
- If having undertaken the activity you would not be able to do so again at next mealtime due to things like fatigue / general tiredness.

You should include information here on how long it might take you overall to prepare and cook a simple meal. If it varies (e.g. between on a good day and a not so good day or between certain times of the day) then explain this.

You should list what (if any) 'aids and appliances' (e.g. a perching stool, a timer, a special jar or bottle opener, lever taps) you may use to help you in the kitchen.

You should list any other help (if any) you may get or reasonably need from another person to prepare and cook a simple meal.

You should provide details about what pain, discomfort, state of breathlessness, state of anxiety or fatigue you would experience in preparing and cooking a simple meal.

2. Eating and drinking (Taking nutrition):

This activity is about whether or not due to your disability you are able to drink and eat food. Things, for example, to mention here include:

- If due to your disability you are unable to eat and drink
- If someone has to remind to eat
- If someone needs to encourage you to eat
- If you would need someone to explain to you how to eat / explain the different stages of eating (e.g. how to use a knife and fork / how to eat and drink)

- If you need someone to watch over you whilst you are eating to ensure that you do not come to any harm (e.g. you do not choke or eating / drinking when the food / drink is too hot)
- If you are unable to cut up food into bite size pieces ready to eat
- If you need someone to physically feed you - put food into your mouth / put a cup to your mouth
- If you are unable to raise a cup to your mouth / drink from a cup / drink from a cup without spills, etc
- If you are able to put food into your mouth and/or chew and swallow it without dropping
- If you are unable to drink, chew and swallow food and/or do so without risk of choking
- If you need to use any 'aids or appliances' (e.g a weighted cup or adapted cutlery) to help you to eat and drink.

If you can eat and drink but it takes you a long time, then explain this stating how long it would take you to eat a meal and have a drink. If things vary (e.g. between on a good day and a not so good day or between certain times of the day) then explain this.

You should list what (if any) 'aids and appliances' you use and how they help you. You should list any other help (if any) you may get or reasonably need from another person.

You should provide details about what pain. discomfort, state of breathlessness, state of anxiety or fatigue you experience when eating or drinking.

3. Managing treatments - managing therapy or monitoring a health condition: This activity looks at what help you may need with taking medication or monitoring your health condition or managing any therapy you need.

Here 'therapy' includes physiotherapy and home dialysis. It could mean a special diet in the sense that you need to eat the right food at the right time and if you failed to do so it could result in a fairly immediate deterioration in your health (e.g. if you were diabetic you might suffer a hyperglycaemic event).

Things, for example, to mention here include:

- If you are unable to attend to your own medication (including use of a nebuliser or inhaler) and treatments
- If there are times when you have forgotten to take your medication or have taken the wrong medicine at the wrong time or have taken too much medication at one time / overdosed
- If you need someone to remind you to take your medication or undertake the treatments and/or manage the therapy (e.g. exercise prescribed by a physiotherapist) you have been prescribed
- If you need encouragement to take your medication or undertake the treatments and/or mange the therapy (e.g. exercise prescribed by a physiotherapist) you have been prescribed
- If you need someone to physically administer your medication (including use of a nebuliser) for you or physically assist you to enable you to manage your therapy (e.g. exercise prescribed by a physiotherapist) you have been prescribed
- If you have suicidal thoughts / attempted suicide
- If you self-harm
- If you are diabetic and have difficulty / are unable to monitor your blood sugar levels or changes in your condition
- If you suffer from epilepsy and your seizures are uncontrolled

- If you are unable to realise when your mental state changes
- If you need someone to help you to monitor changes in your health condition which would lead to you feeling more poorly than you would otherwise feel
- If you are unable to detect when your pain levels increase.

You should seek to explain here roughly how long you receive / would need help with managing your medication and treatments. If it varies (e.g. between on a good day and a not so good day or between certain times of the day) then explain this.

You should explain here any state of anxiety you might experience when seeking to take your medication or undertake your therapy.

You should list what (if any) 'aids and appliances' (e.g. a dossette box) you use or you think may help you to take your medication / manage your health condition and treatments.

4. Washing and bathing: This activity is about whether or not you are able to wash and bathe yourself. Things, for example, to mention here include:

- If you need someone to remind you when to wash and bathe
- If you need someone to encourage you to wash and bathe
- If you would need someone to explain to you how to wash and bathe
- If you need someone to be close by when you are washing or bathing to help avoid any possible harm or danger
- If you are unable to wash and bathe without the help of another person
- If you are unable to get into or out of a normal un-adapted bath and/or shower
- If you are unable to deal with soap / a flannel due to poor dexterity / grip
- If you are unable to fully wash your lower body parts (e.g. because you are unable to bend)
- If you are unable to wash your upper body wash the part of your body that is between your waist and the top of your shoulders
- If you are unable to fully wash and rinse your hair
- If you can wash and bathe but do so more often than other people or you take longer to wash and bathe because of have some obsessive rituals or ideas around cleanliness or because you find it necessary to excessively repeat the undertaking.

You should include information here on how long it takes you to wash and bathe. If it varies (e.g. between on a good day and a not so good day or between certain times of the day) then explain this.

You should list what (if any) 'aids and appliances' (e.g. grab rails, bath seat) you use or you think may help you to wash and bathe.

You should list any other help (if any) you may get or reasonably need from another person to help you to wash and bathe.

You should provide details about what pain, discomfort, state of breathlessness, state of anxiety or fatigue you experience when washing and bathing.

If you need to wash or bathe more than once a day (e.g. due to possible episodes of incontinence of bladder and/or bowel) then you need to explain this.

5. Managing toilet needs or incontinence:

This activity looks at what help you may need with attending the toilet and/or managing any episodes of involuntary evacuation / emptying of your bowel or bladder. Things, for example, to mention here include:

- If you need to be reminded when to go to the toilet and/or to clean yourself afterwards
- If you need to be encouraged to attend the toilet and/or clean yourself afterwards
- If you need someone to keep an eye on you when toileting because you might come to some harm or danger
- If someone needs to talk through the different stages of attending the toilet and cleaning yourself afterwards
- If you are unable to or have problems with getting on and off a normal toilet
- If you are unable to or unable to properly clean yourself after using the toilet
- If you need help to use a collecting device or self-catheterisation.

You should include information here on how long it takes you to attend the toilet. If it varies (e.g. between on a good day and a not so good day) then explain this.

You should list what (if any) 'aids and appliances' (e.g. grab rail, commode, raised toilet seat, bottom wipes, bidet, incontinence pads or a stoma bag) you use or you think may help you to attend the toilet.

You should list any other help (if any) you may get or reasonably need from another person to help you to attend the toilet / help you with an episode of involuntary evacuation of the bowel and/or bladder.

You should provide details about what (if any) pain, discomfort, state of breathlessness, state of anxiety or fatigue you experience when washing and bathing.

If you need to wash or bathe more than once a day (e.g. due to possible episodes of incontinence of bladder and/or bowel) then mention this on the form.

6. Dressing and undressing

This activity looks at what help you may need when dressing (meaning: put on clothing and footwear) and/or undressing (meaning: take off clothing and footwear). Things, for example, to mention here include:

- If you need to be reminded when to dress and undress
- If you need to be encouraged to dress and undress
- If you need someone to keep an eye on you when you are dressing and/or undressing because you might come to some harm or danger when undertaking the activity
- If someone needs to talk / explain the different stages of dressing and/or undressing
- If someone needs to select clothing for you that is appropriate for the weather or occasion
- If you are unable to dress/undress clothing from the lower body (e.g. put on / remove socks and shoes)

 If you are unable to dress/undress clothing from the upper part of your body (e.g. put on / remove a bra).

You should include information here on how long it takes you to dress and/or undress. If it varies (e.g. between on a good day and a not so good day or between certain times of the day) then explain this.

You should list what (if any) 'aids and appliances' (e.g. modified buttons, Velcro fastening, front fastening bra, shoe aid or audio colour detector) you use or you think may help you to dress and/or undress.

You should list any other help (if any) you may get or reasonably need from another person to help you to dress and/or undress.

You should provide details about what (if any) pain, discomfort, state of breathlessness, state of anxiety or fatigue you experience when dressing and undressing.

If you need to dress and undress more than once a day (e.g. due to possible drink/food spills or episodes of incontinence of bladder and/or bowel) then you need to explain this.

7. Communicating verbally

This activity looks at what help you may need with your communication due to poor speech or hearing or comprehension of information. Things, for example, to mention here include:

- If you have impaired speech (e.g. following a stroke) and this makes it difficult for others to understand what you are saying
- If you have impaired hearing and so this makes it difficult for you to understand what others are saying

- If you are only able to hear and talk to other people when using some form of an aid or appliance e.g. hearing aid, voice aid, picture symbols, digital assistance
- If you are unable to talk / convey information by the spoken word
- If your hearing is so impaired that you are unable to hear when other people are talking to you
- If you are unable to understand other people's spoken / verbal communication
- If you are hearing impaired and need the aid of a Sign Language interpreter to communicate effectively with hearing people
- If you need the help of e.g. a family member or friend who is able to understand you in order for your communication to be understood by others
- If you need the help of a family member or friend who understands your communication difficulties to help you understand what other people are saying when they are talking to you
- If you are unable to communicate and/or understand spoken information even with the support of someone who knows you or someone who is trained in communicating with someone with your specific communication needs
- If you would need the help of someone who is trained or experienced in communicating with someone with your specific communication needs in order for you to make yourself understood to others
- If no amount of help and support will enable you to communicate with other people.

It may well be that due to your communication difficulties you shy away from or avoid communicating with other people.

The test here is what help you need / would need to communicate with people not only on the occasions when you have to communicate with people but also on the occasions when you naturally would do so but for your communication difficulties.

If your speech and hearing vary (e.g. between on a good day and a not so good day or between particular times during the day) then explain this.

You should seek to explain how other people may help you when you are trying to communicate with them or vice versa.

8. Reading and understanding signs, symbols and words

This activity looks at whether in consequence of a visual impairment, learning difficulties or cognitive impairment, you have difficulties with reading and understanding signs and words. Things, for example, to mention here include:

- If you need to use an aid or appliance (other than glasses or contact lenses) to read written information
- If you need to use a magnifying glass or screen magnification aid to read
- If you need someone to explain written words, written messages or signs to you
- If you need someone to remind you of the meaning of written words, written messages or signs
- If no amount of help / explaining will enable you to understand written messages / signs.

If your reading / understanding of written words and signs varies (e.g. between on a good day and a not so good day or between particular times of the day) then explain this.

9. Engaging with other people face to face

This activity looks at whether you have difficulties with engaging with other people (both people you know and people you do not know) face-to-face. Things, for example, to mention here include:

- If you feel uneasy, distressed or anxious at the thought of meeting / mixing with other people
- If you have difficulties engaging with people contextually
- If you have difficulties engaging with other people in a socially appropriate manner because you are prone to interrupting people or talking over people or taking in a manner or on subjects that other people might find offensive
- If you have difficulties engaging with other people because certain situations make you angry or aggressive or cause you to shout and swear
- If you have difficulties understand other people's body language when engaging with them or humour or sarcasm
- If you have difficulties establishing and/or keeping relationships
- If you need someone to be with you to support / encourage you to meet with and talk to people or develop relationships with people
- If you avoid social interaction
- If you would be at risk from inappropriate manipulation or abuse engaging with other people because you are vulnerable / too trusting
- If in engaging with other people you might demonstrate such behaviour that you could put yourself (and others) at risk of harm
- If engaging with other people / being expected to engage with other people would cause you to experience some distress and/or anxiety (including paranoia).

By 'engaging' we mean meeting with, talking to and/or developing relationships with other people. If you are able to engage with people you know but not people who you do not know then make this clear. If you have difficulties is engaging with <u>both</u> people who you know and people who you do not know then you need to state that this is the case.

It may well be that due to your disability you shy away from or avoid communicating with other people. If that is the case, then put this on the form. The test here is what help you need / would need to engage with other people not only on the occasions when you need to engage with people but also on the occasions when you might otherwise engage with people but for the difficulties you encounter engaging with others.

If your ability to engage with other people varies (e.g. between how you are on a good day and a not so good day or between certain times of the day) then explain this.

10. Making budgeting decisions

This activity looks at whether you have difficulties with making budgeting decisions. Things, for example, to mention here include:

- If you have difficulty in understanding the value of money / have no understanding of the value of money
- If you have or would have difficulty in being able to assess how much money you would have to spend if you were given a set amount of money and told that from this, you would have to pay certain bills

- If you would have difficulties in being able to work out how much money you would need to spend on certain bills (e.g. rent, council tax, gas and electric) and put it to one side
- If you would have difficulty in being able to deal with a budgeting situation whereby the bills you had to pay fluctuated / changed week to week or month to month
- If you would have difficulty in knowing the amount of change you would be given after making a purchase in a shop
- If you would need the help of another person to help you to budget and/or manage your money
- If due to e.g. low mood / depression you would need someone to encourage you to deal with budgeting matters.

If your ability to manage money and make budgeting decisions varies (e.g. between how you are on a good day and a not so good day or between certain times of the day) then explain this.

This provision is a test of your cognitive function / mental ability to be able to manage money and pay bills.

The Mobility Component

1. Planning and following journeys

This activity looks at whether due to a mental health condition, cognitive impairment and/or sensory impairment you have difficulties with planning and following journeys. Things, for example, to mention here include:

- If in the circumstances, you were expected to make a journey to a familiar and/or unfamiliar destination you would need the help and/or support of another person to plan how you would get there using public transport and/or on foot
- If you would become upset, anxious or feel overwhelmed if you were expected to make plans for a journey to a familiar and/or unfamiliar destination
- If in the circumstances, you were expected to make a journey to a familiar and/or unfamiliar destination vou would be unable to leave your home or only be able to do so with the help and support of another person due to a feeling of anxiety and/or the feeling of being overwhelmed or paranoia
- If in the circumstances, you were expected to journey to a destination by a route that was familiar and/or unfamiliar to you that you would only be able to do so with the help and support of another person
- If you would become anxious, angry or overwhelmed by having to deal with people, crowds, loud noises or sudden noises
- If in undertaking a journey you could become confused or disoriented or suffer a seizure or lose consciousness for some reason on route
- If you would be unable to cross a road or navigate other obstacles that could present during a journey due to you being sight impaired, hearing impaired or having a lack of mental capacity / traffic awareness
- If in the circumstances, you were expected to journey to a destination by a route that was familiar and/or unfamiliar to you that you would only be able to do so with the help and support of another person due to a feeling of anxiety and/or the feeling of being overwhelmed or paranoia

- If you could not use public transport (e.g. buses or trains) without someone being with you to help and/or support you
- If when journeying out of doors you would need someone to help and support, you to ensure that you were safe or to stop you from succumbing to any harm
- If when journeying out of doors you would benefit from someone being with you to help and support, you to stop you from getting lost
- If (e.g. due to the mental / emotional exhaustion) having undertaken a journey you could not repeat the activity again that morning, that afternoon, that day or for days to come
- If you need the help of an assistance dog or guide dog when journeying out of doors
- If you would need to help of a specialist aid or appliance (e.g. a white stick) when journeying out of doors.

Here, by help and support, we mean that you would need someone to either help you hands-on or to encourage you or reassure you or to keep an eye out for you in case of a risk of any harm or danger.

If your ability to plan a journey, leave your home and/or undertake a journey varies (e.g. between how you are on a good day and a not so good day or between certain times of the day) then be sure to explain this.

2. Moving around

This activity looks at whether by reason of a physical disablement you are able to stand and then move around / walk. Things, for example, to mention here include:

- If you are unable to stand
- If you are unable to walk / move around other than by use of a wheelchair
- If you use an aid (e.g. walking stick, Zimmer frame, crutches or a prostheses) to walk
- If you use a mobility scooter to get around

- If you rely on someone to support you (e.g. by looping arms) when you are out doors walking
- If you are without a lower limb or part of a lower limb e.g. you were born without a foot
- If you have a lower limb or part of a lower limb amputation e.g. you have had an amputation below the knee on your left leg
- If you are in any pain or discomfort when you walk / move around
- If you encounter breathlessness, fatigue or tiredness when walking / moving around
- If your speed of walking is slow
- If you have to pause or stop when walking to relieve pain or discomfort or a state of breathlessness
- If you have to pause of stop walking due to problems with e.g. balance or dizziness
- If your manner of walking is affected by a limp or poor lower limb movement so the way you make progress is really by shuffling your feet
- If your movement is more making progress by use of your lower limbs than it is by walking - making progress by putting one foot in front of the other
- If when walking your posture / gait (i.e. you are unable to walk upright) is not normal
- If you are able to move around indoors but not out of doors because you would be unable to deal with / navigate uneven pavements or roadside kerbs.

The form asks how far you can actually walk (taking into account any aid or appliance you use) and then gives a choice of boxes to tick from 'less than 20 meters' at one end of the scale to '200 meters or more' at the other end of the scale.

Before answering this think carefully. Make sure that you have a sense of distance. The form uses the length of a bus (a bus is estimated to be approximately 10 meters in length) as a guide.

You need to be aware that before answering this that your walking ability is separately assessed both:

- with the help of an aid or appliance e.g. walking stick, Zimmer frame, prosthesis
- without the help of an aid or appliance e.g. walking stick, Zimmer frame, prosthesis

Moreover, what also counts is how far you can walk without a degree of pain / discomfort and your manner of walking. It is not about how far you can drag yourself. Therefore, if you are unable to walk without the onset of a degree of pain / discomfort then it could be that you should be treated as though you are unable to walk at all.

Given the above factors if you do have problems walking distances then it is important that you explain your walking ability with and without the use of an aid or appliance whilst also explaining the difficulties you may have with pain, discomfort, breathlessness and fatigue, etc.

Moreover, remember that with each activity it is about whether or not you can undertake and repeat an activity (that is to say repeat the activity as often as it may normally be required).

Therefore, if you can walk a short distance but then you would be unable to repeat walking such a distance again perhaps due to the onset of pain or fatigue then make this clear.

If your ability to walk / move around varies between the time of the day or how you are feeling on a particular day then do explain this.

12. The Decision...

Once you have submitted your form and you have had your face-to-face consultation, a DWP Decision Maker will make a decision whether or not it is believed that you qualify for PIP. If it is decided that you do qualify then the Decision Maker will decide whether it is because you meet the conditions for the 'daily living' component and/or the 'mobility' component.

In doing so, the Decision Maker must also think about how long to make the award for. An award will usually start from the date of your claim (claims cannot ordinarily be backdated). An award will either be for a set period (e.g. two years, five years or 10 years) or an indefinite period. An award will only be made for an indefinite period if it is considered that your condition and difficulties are likely to remain unchanged even with ongoing treatment

If you are unhappy with the outcome of your claim, then you can ask the DWP to look at the decision again with a view to making a more favourable decision. This is called a 'mandatory reconsideration'. If the decision remains the same, then you can seek to challenge it by way of an appeal. In which case your claim would be decided by a Firsttier Tribunal consisting of a Judge, a medical person and a person who has experience in living with or dealing with disabilities.

What you must bear in mind is that if you ask for a 'mandatory reconsideration' then in any review of your case, a less favourable decision could be made. Similarly, if you were to ask for an appeal the decision of the First-tier Tribunal could be less favourable than the original DWP decision you are appealing.

It is therefore advisable that if you would like to embark on a course of action disputing the findings of the Decision Maker, that you study their reasoning to see what matters you think they have gotten wrong and make yourself aware of the actual qualifying rules for PIP. You may also like to seek expert advice on the actual merits of your case.

13. Information Guides and Fact Sheets

The Welfare Rights Service produces the following Information Guides and Fact Sheets on Social Security benefits and welfare reform.

Benefits Information Guides:

- 1. Universal Credit
- 2. Universal Credit Claims and Payments
- 3. Universal Credit The Claimant Commitment
- **4.** Universal Credit Sanctions and Hardship Payments
- **5.** Universal Credit and Vulnerable People Claims and Payments
- **6.** Universal Credit Unable to Work Due to III-health or Disability
- Universal Credit and The Work Capability Assessment - Toolkit
- 8. Personal Independence Payment
- **9.** Personal Independence Payment Toolkit
- 10. Form Filling: PIP2
- 11. Form Filling: ESA50 / UC50
- 12. DWP Social Fund
- 13. The Spare Room Subsidy
- 14. The Benefit Cap

- 15. Disputes and Appeals
- 16. Going to Appeal: First-tier Tribunals

Benefits Fact Sheets:

- 1. Benefits and Work
- 2. Benefits and Disabled Children
- 3. Benefits and Young People
- 4. Benefits and Older People
- 5. Benefits and People from Abroad
- 6. Private Tenants and Universal Credit
- 7. Volunteering and Benefits

The information provided is designed to provide details of the different benefits that may be available to people in a variety of different situations including when they are in work, unable to work due to ill-health, unemployed or retired. It also seeks to inform people of the steps that may be taken should they wish to dispute a decision made surrounding their benefit entitlement.

A copy of the Information Guides and Fact Sheets may, together with other topical benefit information, be obtained from our Social Security Benefits page on the City of Wolverhampton Council website.

Please also watch out for our periodical **Benefits Bulletins** which provide news on the latest developments surrounding benefits and welfare reform. These are also available on the website.

Telephone: (01902) 555351

Email: <u>WRS@wolverhampton.gov.uk</u>

Note: The details provided in this and our other Information Guides and Fact Sheets is meant to provide an overview on important and topical issues relating to Social Security benefits and welfare reform. The details should not be treated as an authoritative statement of the law. The details may be subject to change by new regulation and/or case law. Do seek further information and advice as necessary.

Welfare Rights Service Specialist Support Team City of Wolverhampton Council