Department for Work & Pensions

GOVERNMENT SOCIAL RESEARCH
Social Science in Government

Personal Independence Payment Claimant Research – Final Report

Findings from three waves of qualitative and quantitative research exploring claimants' experiences of the PIP claim process

Joanna Barry, Margaret Blake, Lauren Bridges,
David Candy, Emma Carragher, Kate Duxbury,
Harriet Fowler, Claire Lambert, Leila Morris

September 2018

Research Report 963

A report of research carried out by Ipsos MORI on behalf of the Department for Work and Pensions

If you would like to know more about DWP research, please email: Socialresearch@dwp.gsi.gov.uk

First published September 2018.

ISBN 978-1-5286-0673-8

Contents

Executive Summary 11

Background 11

Methods 12

- Motivation for claiming PIP and prior knowledge 12
- Making the PIP application 13
  - Call to the claim line 13
  - Completing the form 13
  - Evidence 13
- The PIP assessment process 14
  - Knowledge and expectations 14
  - Evidence 14
  - Attending the face-to-face assessment 15
  - The PIP decision 15
- Mandatory Reconsideration 16
  - Knowledge and expectations 16
  - Evidence 16
  - Decision 17
- Appeals 18
  - Knowledge and expectations 18
  - Attending the tribunal 18
  - Evidence 18
  - Decision 19
- Overall themes in the research 19
  - Evidence 19
  - Communications from DWP and understanding of the process 19
  - Support throughout the process and contact with DWP 20
  - Face-to-face assessment 20
  - Differences between groups 20

Glossary of terms 21

1 Background and methodology 24
  1.1 Background 24
  1.2 Methodology 25
    1.2.1 Quantitative methodology 25
    1.2.2 Qualitative methodology 27
  1.3 The PIP application process 27
  1.4 The structure of the report 29
  1.5 Note about presentation and interpretation of the quantitative data 29
  1.6 Note about presentation and interpretation of the qualitative data 30

Wave one: Introduction 31

2 Before claiming 32
  2.1 Reasons for applying for PIP 32
  2.2 Deciding to make a claim 33
  2.3 The decision not to claim 37
  2.4 Concerns about applying for PIP 37
  2.5 Chapter summary 38

3 Making the application 39
  3.1 Experiences of the initial call to the claim line 39
  3.2 Experiences of filling in the form 41
    3.2.1 Seeking help 41
    3.2.2 Suitability of the form 42
  3.3 Submitting supporting evidence 43
    3.3.1 Help, support and guidance on submitting evidence 43
    3.3.2 Submitting evidence 44
  3.4 Chapter summary 47

4 Next steps 48
  4.1 Understanding of next steps 48
  4.2 How an award of PIP would be used 51
  Chapter summary 52

Wave two: Introduction 53

5 Information seeking and communication from the DWP 54

5.1 Use of advice or information from DWP about the assessment process 54

5.2 Clarity of DWP advice or information about the assessment process 56

5.2.1 Clarity of DWP information in general 56

5.2.2 Clarity of DWP communications about the specific aspects of the assessment 57

5.3 Expectations about the process 60

5.4 Chapter summary 61

6 Pre-assessment 62

6.1 Evidence 62

6.1.1 DWP information about evidence 62

6.1.2 Taking evidence to the face-to-face assessment 62

6.1.3 Longitudinal findings related to evidence 65

6.2 Preparing for the assessment 65

6.2.1 Location and timing of the assessment 65

6.2.2 Preparation for the face-to-face assessment consultation 67

6.3 Chapter summary 68

7 The assessment 69

7.1 Support 69

7.2 What happens during the assessment 72

7.2.1 Overall reported experiences of the face-to-face assessment 72

7.2.2 Role of the assessor 73

7.2.3 Overall experience compared with expectations 75

7.2.4 Longitudinal findings for experience of the assessment 78

7.3 Chapter summary 78

8 Post-assessment 79

8.1 Next steps after the assessment 79

8.1.1 What happens after the face-to-face assessment 79

8.1.2 The outcome of PIP applications 79

8.2 Understanding the decision 80

8.2.1 Seeking help to understand the decision letter 82
8.2.2 Longitudinal analysis about the outcome of the award......................... 83
8.3 Chapter summary 84
9 Overall experiences of the assessment and decision stages and next steps 85
9.1 Suggested improvements to the assessment and decision stages 85
9.2 Clarity of the next steps 86
9.2.1 Using the award 87
9.3 Chapter summary 89
Wave three: Introduction 90
10 Mandatory reconsideration 91
10.1 Awareness of mandatory reconsideration 91
10.1.1 Information seeking 93
10.1.2 Deciding whether to request MR 94
10.2 Additional evidence 98
10.3 Decision 100
10.3.1 Information seeking 103
10.4 Chapter summary 105
11 Appeals 106
11.1 Before appealing 106
11.1.1 Information seeking 109
11.1.2 Deciding to appeal 110
11.2 The tribunal 113
11.2.1 Additional evidence 116
11.2.2 The tribunal itself 118
11.3 Decisions and next steps 120
11.4 Chapter summary 125
12 Key themes 126
12.1 The role of evidence 126
12.1.1 Background 126
12.1.2 Awareness around the need for evidence 126

12.1.3 Perceived responsibility for gathering and collating evidence 127
12.1.4 Knowledge of what types of evidence should be provided.................128
12.1.5 Barriers to providing evidence...129
12.1.6 Support with evidence...129
12.1.7 How evidence fed into claim decision 130

12.2 Communications from DWP 130
12.2.1 Background 130
12.2.2 Accessibility of DWP communications 130
12.2.3 Comprehensiveness of DWP information provision 131

12.3 Contacting DWP...133
12.3.1 Background 133
12.3.2 Reasons for contacting DWP 133
12.3.3 Usefulness of contact with DWP 134
12.3.4 Reasons for not contacting DWP 135

12.4 Overall views of the process 135
12.4.1 Background 135
12.4.2 Experiences throughout the process..135
12.4.3 Claimant views of the process as a whole 137
12.4.4 Experience of the assessment providers 137
12.4.5 Summary..138

13 Conclusions 139

Appendix A: Longitudinal survey findings 140

A.1 Methods and background 140

A.2 Views of the process as a whole...143

A.3 Longitudinal findings related to assessment and initial outcome 146

A.4 Longitudinal findings related to mandatory reconsideration 146
A4.1 The decision to request MR...146
A4.2 Understanding of the MR notice...147

A.5 Longitudinal findings related to appeals 147

A.6 Section summary 147

List Of Figures and Tables

Figure 1.1 PIP claim process and research process flow diagram............................ 28

Figure 2.1 Main reasons for applying for PIP 32

Figure 2.2 Where new claimants first heard about PIP... 33

Figure 2.3 Sources of information about PIP: before calling claim line 35

Figure 2.4 Types of information about PIP: before calling claim line.......................... 36

Figure 2.5 Prior worries or concerns about applying for PIP 37

Figure 3.1 Experience of the initial call 40

Figure 3.2 Sources of help with completing form...41

Figure 3.3 Whether the form allowed the claimant to explain how their condition affects them...42

Figure 3.4 Help and support about information and evidence to provide.................. 44

Figure 3.5 Clarity of explanation about evidence 45

Figure 3.6 Deciding on evidence to provide.. 46

Figure 4.1 Understanding the next steps: application form 50

Figure 4.2 Understanding the next steps: face-to-face assessment...........................51

Figure 4.3 What difference a PIP award would make 52

Figure 5.1 Information from DWP about the assessment process............................ 56

Figure 5.2 Types of information sought from DWP 57

Figure 5.3 Clarity of DWP information about the assessment process...................... 58

Figure 5.4 Clarity of DWP communications overall and for new claimants 59

Figure 5.5 Clarity of DWP communications by PIP award 59

Figure 5.6 What claimants thought they would be asked about during face-to-face assessment 61

Figure 6.1 Supporting evidence: What was taken to assessment............................. 64

Figure 6.2 Reasons for taking supporting evidence to face-to-face assessment....... 65

Figure 6.3 Convenience and accessibility of face-to-face assessment offered 66

Figure 6.4 Preparations made in advance of assessment 67

Figure 7.1 Who claimant took to the face-to-face assessment consultation................70

Figure 7.2 Reasons claimants took someone to the face-to-face assessment consultation room 71

Figure 7.3 Experience: The content of the assessment 72

Figure 7.4 Experience: The role of the assessor..74

Figure 7.5 Reasons claimants found the face-to-face assessment consultation easier than they expected...76

Figure 7.6 Reasons claimants found the face-to-face assessment consultation more difficult than they expected 77

Figure 8.1 Understanding the decision.. 80

Figure 9.1 How money from PIP will be used 87

Figure 9.2 What difference an award of PIP will make 88

Figure 10.1 Awareness of aspects of mandatory reconsideration.............................. 92

Figure 10.2 Information from DWP about mandatory reconsideration....................... 93

Figure 10.3 Type of information or advice obtained from DWP about mandatory reconsideration 94

Figure 10.4 Reasons for requesting MR 95

Figure 10.5 Reasons for not requesting MR 96

Figure 10.6 (A-D) How experience of the face-to-face assessment influenced decisions to request MR 97

Figure 10.7 Knowledge about submitting additional evidence for mandatory reconsideration 98

Figure 10.8 Additional supporting evidence submitted.. 99

Figure 10.9 Reasons for submitting additional evidence at MR and not earlier in the PIP process 100

Figure 10.10 Change in award outcome between initial application and MR 101

Figure 10.11 Clarity of MR notice and whether claimants believed all evidence was considered 102

Figure 10.12 Whether claimants sought help to understand the mandatory reconsideration notice 104

Figure 10.13 Who claimants sought help from 104

Figure 11.1 Clarity of information about appeals in the original decision letter 107

Figure 11.2 Clarity of information about appeals in the mandatory reconsideration notice 108

Figure 11.3 Sources of information from DWP 109

Figure 11.4 Types of information obtained from DWP 110

Figure 11.5 Reasons why claimants appealed the mandatory reconsideration decision for claimants who had no increase to their award at MR 111

Figure 11.6 Reasons why claimants did not appeal the mandatory reconsideration decision for claimants who had no increase to their award at MR 112

Figure 11.7 Who was brought to the assessment tribunal 114

Figure 11.8 Why was someone brought to the assessment tribunal 115

Figure 11.9 Additional supporting evidence submitted at the appeal 116

Figure 11.10 Why this evidence was not submitted earlier in the process 117

Figure 11.11 Experience of the appeal tribunal 119

Figure 11.12 Change in award outcome between MR and appeal 121

Figure 11.13 Perceived reasons for appeal decision 122

Figure 11.14 Understanding the tribunal decision 124

Figure 11.15 Next steps for claimants 125

Table A.1 Sample composition at wave two 143

Table A.2 Sample composition at wave three 143

Figure A.1 Overall experience of the entire PIP claims process 144

Figure A.2 Overall experience of the entire PIP claims process by initial PIP outcome 145

Executive Summary

Background

Personal Independence Payment (PIP) is a new benefit which contributes towards the extra costs of long-term ill-health or a disability for people aged 16 to 64 who need help with mobility or daily living costs. PIP is replacing Disability Living Allowance (DLA) but maintains the key principles as a non-means-tested, tax free cash benefit available to people in and out of work. It has been rolled out since 2013 initially for people making new claims, then for DLA claimants whose award ended (reassessment) and then for those who had an indefinite DLA award (full PIP roll-out). In order to claim PIP, claimants first make a call to the PIP claim line and then complete a paper form about how their disability affects them. They may then be invited to a face-to-face assessment consultation or may be assessed on paper before receiving the PIP decision letter informing them of their award. Claimants may be awarded one or both of two elements (mobility and daily living) and may be awarded one of two levels for each element (standard or enhanced). Alternatively they may receive no award. If claimants think the outcome of the assessment is incorrect they can request a mandatory reconsideration (MR), where the DWP re-examine the case. If they think the outcome is still incorrect after the MR they may appeal the decision at a tribunal.

Between the introduction of PIP in April 2013 and April 2018, over 3.4 million claims for PIP had been cleared, resulting in 1.8 million claims in payment. Forty-five per cent of new claims and 72 per cent of reassessment decisions had been awarded PIP, with over a quarter of normal rules claims receiving the highest level of award. Nearly all special rules (terminally ill) claimants were awarded PIP.

By the end of April 2018, there had been 781,000 requests for a mandatory reconsideration (23 per cent of all cleared claims) resulting in 83 per cent of new claims and 77 per cent of reassessment decisions receiving no change to the award[1]. As of March 2018, there had been 300,000 PIP appeals lodged (9 per cent of all cleared claims) of these 211,000 PIP appeals were cleared at hearing, resulting in 35 per cent of these cases being upheld and 65 per cent in favour of the appellant [2].

---

[1] Official statistics on Personal Independence Payment published by the DWP are available online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/714950/pip-statistics-to-april-2018.pdf

[2] Official statistics on Tribunals published by the Ministry of Justice are available online: https://www.gov.uk/government/statistics/tribunals-and-gender-recognitions-certificates-statistics-quarterly-january-to-march-2018

Methods

Ipsos MORI carried out three waves of quantitative and qualitative research during 2016 and 2017 to explore PIP claimants' experiences of the whole PIP claims process, from the decision to apply for PIP to the outcome of the appeal (if applicable). At each wave, a survey and qualitative interviews were carried out to explore one stage of the process. At wave one, 1,106 survey interviews and 50 qualitative interviews focused mainly on the initial phone call and completing the 'How your disability affects you' questionnaire[3]. At wave two, 1,203 survey interviews and 50 qualitative interviews explored claimant experiences of the assessment and decision stages. During wave three, 1,205 survey interviews and 50 qualitative interviews focused on the MR and appeals processes. Survey interviews were carried out by telephone and qualitative interviews in person and by telephone using quota samples. At waves two and three, some of the survey participants were newly sampled and some were claimants who had taken part in a previous wave.

In this summary, findings presented as percentages come from the surveys and those from the qualitative research are referred to as such.

Motivation for claiming PIP and prior knowledge

Claimants in the survey applied for PIP for a variety of reasons, including covering the extra costs related to their disability or illness (35 per cent) and sometimes to replace lost income and pay for the basic costs of living (18 per cent said they could no longer work, 13 per cent to supplement money from other benefits). Other reasons given related to previously being on DLA and being told to claim or feeling entitled to PIP (12 per cent and eight per cent respectively).

While most claimants (83 per cent) were clear about how to take the first step in claiming PIP (calling the claim line), the survey showed that before they called the claim line, claimants had limited understanding of the process of claiming PIP (46 per cent said they knew nothing) or about why someone might be awarded PIP (36 per cent said they knew nothing). The qualitative research also highlighted that there was limited understanding of PIP as a benefit, in terms of its different components and levels of award.

---

[3] The 'How your disability affects you' questionnaire is the questionnaire that claimants are sent after their initial phone call. During the interviews we referred to this as an application form, so in question wording that term is used.

Making the PIP application

Call to the claim line

Most survey claimants reported that calling the claim line was as easy as or easier than expected (52 per cent and 27 per cent respectively). However, 15 per cent found it more difficult than expected and the qualitative research showed that some claimants needed help from someone else to make the call, especially where they had a speech or hearing impairment, learning disabilities, anxiety or memory problems.

Completing the form

When it came to completing the ‘How your disability affects you’ questionnaire, over half of survey claimants sought help (59 per cent). The most common source of help was a friend or relative (33 per cent) followed by help from a charity or support group, a social care professional or from Citizens Advice. Help from Department of Work and Pensions (DWP) with completing the form was sought by two per cent of survey claimants. The qualitative research showed that not requesting help from DWP related to a lack of trust or previous poor experience of calling government departments, desire for face-to-face contact (including the need to find someone who could write down their responses and complete the form on their behalf), and a lack of awareness that DWP could help with this.

Most claimants agreed that the form allowed them to explain how their condition affects them (69 per cent) and 92 per cent were able to complete all sections of the form. Although most found completing the form as easy or easier than they expected (63 per cent), around one-third (34 per cent) found it more difficult than expected. The qualitative research showed that difficulties with completing the form related to the questions not being deemed suitable for conditions which fluctuated or which were not physical. In other cases, difficulties with completing the form resulted from the claimant’s disability, literacy or English language skills, making it difficult for them to read or understand the form and the guidance document sent with the form. The form was also felt by some to be repetitive and designed to ‘catch out’ claimants.

Evidence

Evidence is an important element in applying for PIP and completing the application form. About half of survey claimants sought help in relation to the information or evidence they should provide to support their claim, with the most common source (mentioned by 34 per cent) being a health or social care professional. Claimants varied in their understanding of evidence and their ability to provide it. Over three-quarters (78 per cent) were clear about how to submit evidence but fewer, just under two-thirds (65 per cent), were clear about how much evidence to provide. When deciding what to provide, nearly one-third (30 per cent) said they provided everything they could whether or not it was requested.

Most claimants did provide evidence with the PIP claim (84 per cent). However, claimants were not always able to provide all the evidence they wanted, with almost one-third (31 per cent) saying there was evidence they wanted to submit but did not. The main reasons for this were that they could not get hold of the evidence in time, that they would be charged for it or that they thought DWP would contact their doctors if they needed more evidence. There was a widespread misconception (shown in the survey and the qualitative research) that DWP would gather medical evidence as part of the assessment process, partly because claimants were asked to provide contact details for their doctor on the ‘How your disability affects you’ questionnaire.

The PIP assessment process

Knowledge and expectations

In the wave one survey (before claimants had reached the assessment stage), less than half of claimants (46 per cent) said they expected a face-to-face assessment. Qualitative interviews (wave one and wave two) showed that claimants who had been on DLA were most likely to be surprised about being invited to an assessment.

When asked about whether information from DWP was clear about specific aspects of the process, 89 per cent agreed DWP made it clear they might need to have a face-to-face assessment. However, claimants were less likely to agree that DWP made it clear why they might need a face-to-face assessment (53 per cent) or what happens at a face-to-face assessment (57 per cent). The survey showed that about half (48 per cent) thought the assessment would involve assessing how their condition affects their day-to-day life, which is the aim of the assessment. The qualitative interviews also showed that claimants made misplaced assumptions about the assessment, particularly that it would involve a medical assessment by a doctor familiar with their condition.

Evidence

Over half of the survey claimants agreed DWP made it clear that they could take additional supporting evidence to their assessment (58 per cent). About half of claimants (48 per cent) did not take any supporting evidence to their assessment, and just under one-third (30 per cent) took reports from health professionals. The main reasons for bringing evidence at this stage were that they thought it would be helpful to bring everything (33 per cent) or that they did not have it in time to submit with their original application (29 per cent). Around a fifth of claimants (21 per cent) had evidence they wanted to bring to the assessment but did not have it at this stage. Other reasons for not bringing evidence to the assessment raised by claimants in the qualitative research included: having already provided everything they had, a belief that their verbal evidence and physical presence at the assessment would be enough, not being aware they could provide evidence at that stage, and an assumption that DWP would gather the evidence themselves anyway.

Attending the face-to-face assessment

Surveyed claimants were presented with several positive statements about attending the face-to-face assessment. While over 80 per cent agreed with each of the statements about the convenience of the appointment time, notice given and the accessibility of the venue for the face-to-face assessment, fewer (65 per cent) agreed that it was in a place they could get to easily.

In the survey, 60 per cent of claimants indicated they did not make any preparations for the assessment (for example, doing research on the internet, or speaking to a health professional, someone who had a face-to-face assessment before, social worker or support group). However, some of these claimants said they had gathered together evidence to take, despite saying they did not make any preparation. A general theme in the qualitative interviews was that claimants did not know what or how they should prepare.

Two-thirds (67 per cent) of claimants who attended a face-to-face assessment took someone with them and the most common person to take was a relative (70 per cent). The main reasons for taking someone with them was to support them with needs related to their disability (62 per cent) or for moral support (42 per cent). The qualitative research showed that having someone to support them at the assessment was invaluable, particularly in answering questions.

While most claimants understood what was being asked of them at their assessment (80 per cent) and that they had enough time to explain how their condition affects them (74 per cent), fewer agreed that the measurements and functional tests were relevant and appropriate (60 per cent). The qualitative research also highlighted that claimants felt the assessment repeated the same questions as the ‘How your disability affects you’ questionnaire so difficulties experienced with completing the form were also experienced at the face-to-face assessment. On the whole, claimants were happy with the role of the assessor. However, while 89 per cent agreed that the assessor treated them with dignity and respect, a lower proportion (71 per cent) agreed the assessor understood their form and supporting evidence.

Among the quarter of claimants (26 per cent) who found the assessment more difficult than they expected, the main reasons were that the assessment was stressful (42 per cent) or the assessor was seen as unhelpful and/or unfriendly (24 per cent).

The PIP decision

Although 82 per cent of claimants understood what their award was, understanding was lower when it came to how DWP had reached their decision (66 per cent) and how the form, evidence and assessment had been taken into account in reaching the decision (68 per cent). The qualitative research showed that lack of understanding of the decision was related to skimming the letter, having a condition or disability which made reading, understanding or remembering information difficult, or disagreeing with the outcome of the application.

Claimants sought help with understanding the decision letter from friends or family (42 per cent), DWP (23 per cent), a social care professional (15 per cent) or a charity or support group (12 per cent). Among those who sought help from DWP, half (51 per cent) said they did not have a clearer understanding after contacting them.

Those who had been awarded PIP were asked how they would use the money. Just under half (48 per cent) said they would use it to cover basic living expenses, 40 per cent for costs of travel associated with disability, and 33 per cent for additional costs of daily living associated with their disability. Claimants also felt that the award would improve their quality of life (48 per cent), increase their independence (26 per cent) or allow them to live more independently (22 per cent).

Mandatory Reconsideration

After receiving their PIP decision letter, claimants who are unhappy with the outcome can request a mandatory reconsideration (MR), before going to appeal. Wave three focused on MR and appeal, so the sample was designed to include sufficient numbers of claimants who had been through these.

Knowledge and expectations

Broadly speaking, understanding of MR was lower than understanding of previous stages of the PIP claim process.

After receiving their decision letter about half of survey claimants (53 per cent) reported that the information about MR in the letter was clear and about one-quarter said they knew why a person might request MR (25 per cent) or how to request MR (23 per cent). Despite this, about half of claimants (51 per cent) did not proactively request any information from DWP about MR. Among the claimants who did seek information from DWP, the main sources of information were the decision letter (35 per cent of all claimants reported this) and the ‘How your disability affects you’ questionnaire (30 per cent).

The qualitative research revealed that claimants were sometimes reluctant to contact the DWP for advice or further information after receiving their decision letter, due to concerns that it would not be impartial.

There was also some confusion among participants in the qualitative research about the difference between MR and appeal, and why it was necessary to go through MR before being able to appeal.

The most common reasons for requesting a MR were that they did not get an award (40 per cent), that the assessor was seen to be unfair (22 per cent) or that DWP was not thought to have taken into account all the evidence provided (18 per cent). Claimants also requested a MR because they did not get an element or a level of award they expected.

Evidence

At MR, 65 per cent of claimants submitted additional supporting evidence, although of these, 35 per cent said they submitted evidence they had already provided. The main reasons for submitting additional evidence at MR, rather than earlier in the process, were that they did not have it in time for the original application (29 per cent) or that they did not know it would be useful when they submitted their application (27 per cent). Among the 29 per cent of claimants who did not submit any additional supporting evidence, the main reason was not knowing that they could.

Decision

Some claimants who requested MR also reported on their initial and post-MR award outcome in this survey. Half of these claimants reported they did not receive an award at either stage (52 per cent). One-quarter had an award which was not changed after MR (25 per cent) and 15 per cent received a new or improved award as a result of MR. These outcomes broadly reflect the outcomes of MR applicants as a whole.[4]

About half of claimants agreed that DWP made it clear how they had reached their decision (53 per cent) and one-quarter felt the decision was based on all the information available to DWP (25 per cent). This is lower than the 68 per cent who felt their form, assessment and evidence had been taken into account in reaching the original decision.

---

[4] Official statistics on Personal Independence Payment published by the DWP are available online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/714950/pip-statistics-to-april-2018.pdf

Appeals

Knowledge and expectations

Most claimants (61 per cent) agreed that information in the MR notice about appeals was clear but one-third (33 per cent) did not. Over three-quarters (77 per cent) did not seek any information or advice from DWP about the appeals process before making an appeal. Where information was sought from DWP, over half (58 per cent) said the information was clear, while 35 per cent said the information was not very or not at all clear.

The main reasons for appealing the MR decision among those who had no change to their award at MR were that they did not get an award (42 per cent), that DWP did not take their evidence into account (26 per cent) or that the assessor was unfair at the face-to-face assessment interview (25 per cent). The qualitative research also showed that some claimants doubted their application had been properly reconsidered at the MR stage, as the initial decision letter and MR notice were so similar. Of those who did not appeal their decision after having no change to their award at MR, the main reason was that the process would be too stressful (37 per cent), while one-fifth mentioned that they did not expect the award to change (20 per cent) or that they were too unwell (20 per cent). The reasons identified in the qualitative research included not being able to get help to navigate the appeals process, the view that the stress and anxiety that an appeal would cause would be detrimental to their condition, and not having the physical and emotional energy that the appeals process was deemed to require.

Attending the tribunal

The qualitative research highlighted the importance of support in enabling claimants to go to appeal. Indeed among the surveyed claiamants who appealed and attended the tribunal in person, 86 per cent took someone with them. The main reasons cited in the survey for taking someone to the tribunal were to support them with needs related to their disability (68 per cent), for moral support or company (38 per cent), to help with information or answer questions (20 per cent) or to speak on behalf of the claimant (16 per cent). The qualitative research also showed the importance of emotional support at this stage.

Among those who attended the tribunal in person, the majority agreed that they were asked relevant and appropriate questions (73 per cent) and that the questions allowed them to fully explain the impact of their condition on their day-to-day life (71 per cent).

Evidence

The survey showed that 62 per cent of claimants who went to appeal submitted additional evidence as part of this process, whether or not they attended the tribunal in person. The main reason for not submitting this evidence earlier in the process was that they did not have it in time for their application (33 per cent).

Decision

For those survey participants who appealed and also reported on their post-MR and appeal award outcome, over half went from having no award at MR to having an award, or having an increase in their award (34 per cent and 22 per cent respectively)[5].

Participants were asked what they considered to be the reason for their award changing at appeal. The main reason given for the outcome among those who received a new or improved award after appeal was a belief that the original assessment understated their condition (23 per cent). The qualitative research showed that claimants felt the tribunal panel were independent and impartial and valued the expertise of the doctor on the panel.

After the appeal outcome, the majority said they understood the decision (83 per cent), how the judge reached their decision (73 per cent) and the reasons for the decision (74 per cent) which shows a higher level of understanding than after MR.

Overall themes in the research

Evidence

Despite the importance of evidence for DWP in making decisions about PIP, understanding of the role of evidence varied among claimants. There was a widespread misunderstanding that DWP would gather evidence or consult medical professionals themselves which affected the evidence which claimants provided. In addition there was a perception that their condition would speak for itself and would be sufficient evidence (particularly at the face-to-face assessment stage). At later stages of the process some of these claimants did submit evidence, having realised or been told by organisations supporting them with their claim that it was important, but some went through the whole process without submitting any evidence. Even among those who understood the value of evidence, difficulties with obtaining it in time or in paying for it meant they did not always submit all the evidence they wanted and only submitted it at MR or appeal.

Communications from DWP and understanding of the process

The majority of survey claimants reported a good understanding of each stage of the process, and when asked to reflect on the process as a whole longitudinal claimants were positive. However, the research highlighted that there is a small group of claimants who struggle to understand the process throughout. The qualitative research uncovered that those with disabilities which affect their ability to read, understand or remember information, or who have limited literacy or English language

---

[5] Official statistics on Tribunals published by the Ministry of Justice are available online: https://www.gov.uk/government/statistics/tribunals-and-gender-recognitions-certificates-statistics-quarterly-january-to-march-2018

skills are most affected. Furthermore, a much larger group of claimants found understanding or going through the process at one or more stages of the process difficult.

The research has shown that understanding also varied for different elements of the process. Understanding was less good when it came to how DWP reaches decisions, how evidence is used and why people might be awarded PIP. Understanding of the MR process and outcomes was less good than other stages of the process.

Support throughout the process and contact with DWP

Support with the process was extremely important for claimants. This could be help with the call to the claim line, with completing the form, advice on what evidence to provide, someone to accompany them to the face-to-face assessment or tribunal, and help with understanding the decisions at each stage. The help was needed because of difficulties related to claimants' disabilities or literacy (which might affect their ability to complete the forms or answer questions themselves), for moral and emotional support and for practical matters such as transport. Help was most often given by family and friends, but health and social care professionals, charities, support groups and Citizens Advice also offered support, help and advice throughout the process.

A minority of claimants made contact with DWP or used the DWP website[6] for help. At early stages of the process not seeking help from DWP was related to not needing help, not being aware DWP could help, or wanting face-to-face support. However, particularly at the MR and appeal stages an additional factor was distrust of DWP since the claimants were going through those stages because they were dissatisfied with their award.

Face-to-face assessment

Although most claimants who had a face-to-face assessment had a positive experience, for example, being treated with dignity and respect and being able to explain themselves, a minority did not. Longitudinal analysis showed that those who had negative experiences at the assessment were more likely to request MR and appeal. Participants themselves cited dissatisfaction with the assessor as a reason for requesting MR and appealing.

Differences between groups

The research has shown that at all stages those who received an award (whether initial award or after MR or appeal) tend to have a better understanding of the process and report a more positive experience (for example, in being able to explain themselves at the assessment or in feeling that the award takes into account all of the evidence). There are two possible explanations. One is that those who have a better understanding and experience of the process are more likely to be successful in their applications. The other explanation is that those who do not receive an award

---

[6] Although the answer category wording in the survey referred to the DWP website, claimants may have been referring to the GOV.UK website when responding.

feel more negative about the PIP claims process and therefore give more negative answers in this survey which retrospectively asks about their experience. In practice, it is likely to be a mixture of both these explanations.

The analysis of results from across the waves for those longitudinal claimants who took part in more than one wave of the survey, suggests that there is a small group who find the process more difficult throughout and therefore require additional support to navigate the process effectively and achieve the right outcome.

Glossary of terms

Personal Independence Payment (PIP) - contributes towards the extra costs of long-term ill health or a disability for people aged 16 to 64 who need help with mobility and/or daily living costs. PIP is replacing Disability Living Allowance (DLA) but maintains the key principles as a non-means-tested, tax free cash benefit available to people in and out of work. Applications for PIP are made to the DWP. It involves an initial call to a claim line followed by completing a paper form.

Appeal - if claimants still think they should receive a different award after going through a mandatory reconsideration process they can appeal the decision at the Social Security and Child Support tribunal. Claimants must have gone through mandatory reconsideration before they can appeal their award. Appeals are independent of the Department for Work and Pensions (DWP) and are the responsibility of Her Majesty's Courts and Tribunals Service (HMCTS).

Assessment provider - assessment providers conduct PIP assessments on behalf of DWP. Depending on where claimants live, their assessment provider was either Independent Assessment Services (IAS; previously known as Atos) or Capita.

Department for Work and Pensions (DWP) - the government department responsible for welfare, pensions and child maintenance policy. As the UK's biggest public service department it administers the State Pension and a range of working age, disability and ill health benefits to over 22 million claimants and customers.

Disability Living Allowance (DLA) - a tax-free, non means-tested benefit for disabled people who need help with mobility or care costs, available to those both in and out of work. This is being phased out and people aged 16-64 who were previously on DLA are now being rolled onto PIP. Those aged under 16 years can still claim for DLA.

Face-to-face assessment - after submitting the 'How your disability affects you' questionnaire, most claimants will be invited to a face-to-face assessment (carried out by an assessment provider). At face-to-face assessments, claimants are asked about their ability to carry out activities and how their condition affects their daily life. The face-to-face assessment may be either at home or at an assessment centre.

Full PIP roll-out - those who previously claimed DLA who have been invited to apply for PIP as part of the process for replacing DLA (even if their previous award has not ended).

'How your disability affects you' questionnaire - this is the form which claimants are asked to complete after making their initial call to the PIP claim line. It is titled 'How your disability affects you' and is printed to be specific to the claimant. Claimants have one calendar month to complete and return it. In this report the 'How your disability affects you' questionnaire is sometimes referred to as the application form where it was referred to as that in the survey question wording.

Mandatory reconsideration (MR) - after receiving their initial decision, claimants who think they should receive a different award can ask DWP to look again at the application. Claimants must ask DWP to reconsider the decision within one month of receiving the initial award decision.

New claimant - those who have started an entirely new PIP claim and have never claimed DLA, or claimed in the distant past, but have not had a recent award.

PIP award - PIP awards are made up of the following two components:

- **The daily living component** - intended to act as a contribution to the extra costs people with disabilities face in their day-to-day lives that do not relate to mobility.
- **The mobility component** - intended to act as a contribution to the extra costs people with disabilities face in their day-to-day lives related to mobility.

Both components are payable at either a standard or enhanced rate, depending on a claimant's circumstances.

Points system - claimants are assessed at the face-to-face assessment against a list of activities (10 activities for daily living and two for mobility) and are allocated a score which determines their award.

Reassessment - also known as natural reassessment - those who have been claiming DLA who have been asked to apply for PIP because their circumstances have changed.

1 Background and methodology

1.1 Background

Personal Independence Payment (PIP) is a tax free, non-means tested benefit that helps with some of the extra costs caused by long-term ill health or disability. It is the replacement for Disability Living Allowance (DLA) and was first introduced in 2013. It has been rolled out initially for people making new claims, then for DLA claimants whose award ended (reassessment) and then for those who had an indefinite DLA award (full PIP roll-out). In order to claim PIP, claimants first make a call to the PIP claim line and then complete a paper form about how their disability affects them. They may then be invited to a face-to-face assessment consultation or may be assessed on paper before receiving the PIP decision letter informing them of their award. Claimants may be awarded one or both of two elements (mobility and daily living) and may be awarded one of two levels for each element (standard or enhanced). Alternatively they may receive no award. If claimants think the outcome of the assessment is incorrect they can request a mandatory reconsideration (MR), where the DWP re-examine the case. If they think the outcome is still incorrect after the MR they may appeal the decision at a tribunal.

Between the introduction of PIP in April 2013 and April 2018, over 3.4 million claims for PIP had been cleared, resulting in 1.8 million claims in payment. Forty-five per cent of new claims and 72 per cent of reassessments had been awarded PIP, with over a quarter of normal rules claims receiving the highest level of award. Nearly all special rules (terminally ill) claimants were awarded PIP.

By the end of April 2018, there had been 781,000 requests for a mandatory reconsideration (23 per cent of all cleared claims) resulting in 83 per cent of new claims and 77 per cent of reassessment decisions receiving no change to the award[7]. As of March 2018, there had been 300,000 PIP appeals lodged (9 per cent of all cleared claims) of these 211,000 PIP appeals were cleared at hearing, resulting in 35 per cent of these cases being upheld and 65 per cent in favour of the appellant[8].

An Independent Review of PIP was carried out by Paul Gray in 2014, which recommended further research by the Department for Work and Pensions (DWP) to better understand claimant experiences[9]. This research seeks to fulfil this aim.

---

[7] Official statistics on Personal Independence Payment published by the DWP are available online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/714950/pip-statistics-to-april-2018.pdf

[8] Official statistics on Tribunals published by the Ministry of Justice are available online: https://www.gov.uk/government/statistics/tribunals-and-gender-recognitions-certificates-statistics-quarterly-january-to-march-2018

[9] Gray. P. (2014) An Independent Review of the Personal Independence Payment Assessment. London: Stationary Office. Available online: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/387981/pip-assessment-first-independent-review.pdf

The research consisted of three waves, each investigating a key stage of the PIP application process. Wave one looked at the claimant experience of the initial claims process, including their reasons for claiming, the initial call to the claim line, completing the form, and their understanding and expectations of next steps. Wave two focused on the face-to-face assessment stage and award decisions, including preparing for the assessment, the evidence provided at the assessment, experiences of the assessment itself, and the decision stage. Wave three examined the mandatory reconsideration (MR) and appeals processes, as well as experiences of the PIP claims process as a whole.

Headline quantitative findings for wave one were published in March 2017[10], and wave two headline findings were published in December 2017[11]. This report contains quantitative and qualitative findings from all three waves of the research.

1.2 Methodology

Each wave employed both a quantitative and qualitative methodology. The qualitative research consisted of a mix of in-depth face-to-face interviews in claimants' homes and in-depth telephone interviews. The quantitative research consisted of a large scale national survey (including a longitudinal element following claimants through the three waves) via structured telephone interviews.

1.2.1 Quantitative methodology

Three waves of quantitative fieldwork were carried out. The primary method was a structured questionnaire which was administered via telephone interviews, and postal questionnaires were available as an alternative for those who were not able or willing to take part by telephone. Detailed information about the samples at each wave can be found in the technical report.

Participants could be the claimant themselves or someone claiming on another's behalf (for example, a family member or a carer of a claimant). In each wave the majority of participants were claiming for themselves. For simplicity, all those who took part in the research are referred to as 'claimants'. The questionnaire was developed so that people claiming on behalf of someone else would see questions relevant to

---

[10] Ipsos MORI/DWP (2017) Personal Independence Payment Evaluation: Wave one Claimant Survey Findings. Available online: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/604211/pip-evaluation-wave-1-claimant-survey.pdf

[11] Ipsos MORI/DWP (2017) Personal Independence Payment Claimant Research: Interim Headline Findings. Interim survey findings from wave two of the quantitative research: claimants' experiences of the PIP assessment. Available online: https://www.gov.uk/government/publications/personal-independence-payment-evaluation-wave-2-claimant-research-interim-findings

their situation – asking about ‘the person you are claiming on behalf of’ rather than ‘you’[12] – but for clarity, all question wording given in this report has been simplified to just show the direct ‘you’ version of the question.

Data have been analysed by a number of different demographic factors, including whether claimants received an initial award of PIP, their age, gender, the type of claim (full PIP roll-out, reassessment, or new claimants[13]), which assessment provider claimants were assessed by and their employment status. The differences between groups highlighted and described in the text of this report are statistically significant unless otherwise stated. Where the term ‘significant’ is used, this refers to statistical significance. Where the term ‘other’ is used this refers to a discrete answer category and does not include any other categories mentioned by a small proportion of participants that are not included on the chart due to the low percentage (each chart states the threshold above which answer categories are included). Further information on sampling and statistical reliability can be found in the technical report.

At each wave DWP provided a new sample of PIP claimants and quotas were used to ensure the achieved sample was representative by type of claim, assessment provider, age group and gender. The quantitative research included a longitudinal element, whereby participants who had taken part in a previous wave were invited to take part in waves two and three of the research. Quotas were not set for the longitudinal sample. Data from waves one and two has been used for longitudinal analysis in order to look at experience across stages of the PIP claims process. This methodology meant it was possible to track claimant experiences across the entire PIP journey and ask them to reflect on the process as a whole. Analyses are found in the relevant places in the report and are also brought together in appendix A.

Further information about each of the three waves is detailed below.

Wave one

In wave one, Ipsos MORI sought to interview claimants who had called the PIP claim line to request a form, had received the form, but had not yet attended an assessment interview or received a final decision.

Mainstage fieldwork took place between 19 September and 17 October 2016, and 1,106 interviews were achieved.

Wave two

At wave two, most of the claimants interviewed had had a face-to-face assessment and all had received a decision on the outcome of their PIP claim.

Mainstage fieldwork took place between 6 and 28 February 2017 and 1,203 interviews were achieved.

Around one-third of the sample (388 participants) were *longitudinal participants* who had taken part in wave one. The remaining two-thirds of the sample (815 participants) were *new sample participants* who were taking part at wave two for the first time.

---

[12] For example, participants in wave three who were claiming on behalf of someone else were asked question F4 as ‘What type of information or advice did you or the person you are claiming for obtain from DWP at this point?’ while people claiming for themselves were asked ‘What type of information or advice did you obtain from DWP at this point?’

[13] See glossary for definitions of these groups.

Wave three

Mainstage for wave three took place between 13 July and 7 August 2017. In total, 1,205 interviews were achieved.

Around two-fifths of interviews (450) were with *longitudinal participants* who had taken part in wave two or in waves one and two. The remainder of the interviews (755) were with *new sample participants* who had not taken part in the research before.

1.2.2 Qualitative methodology

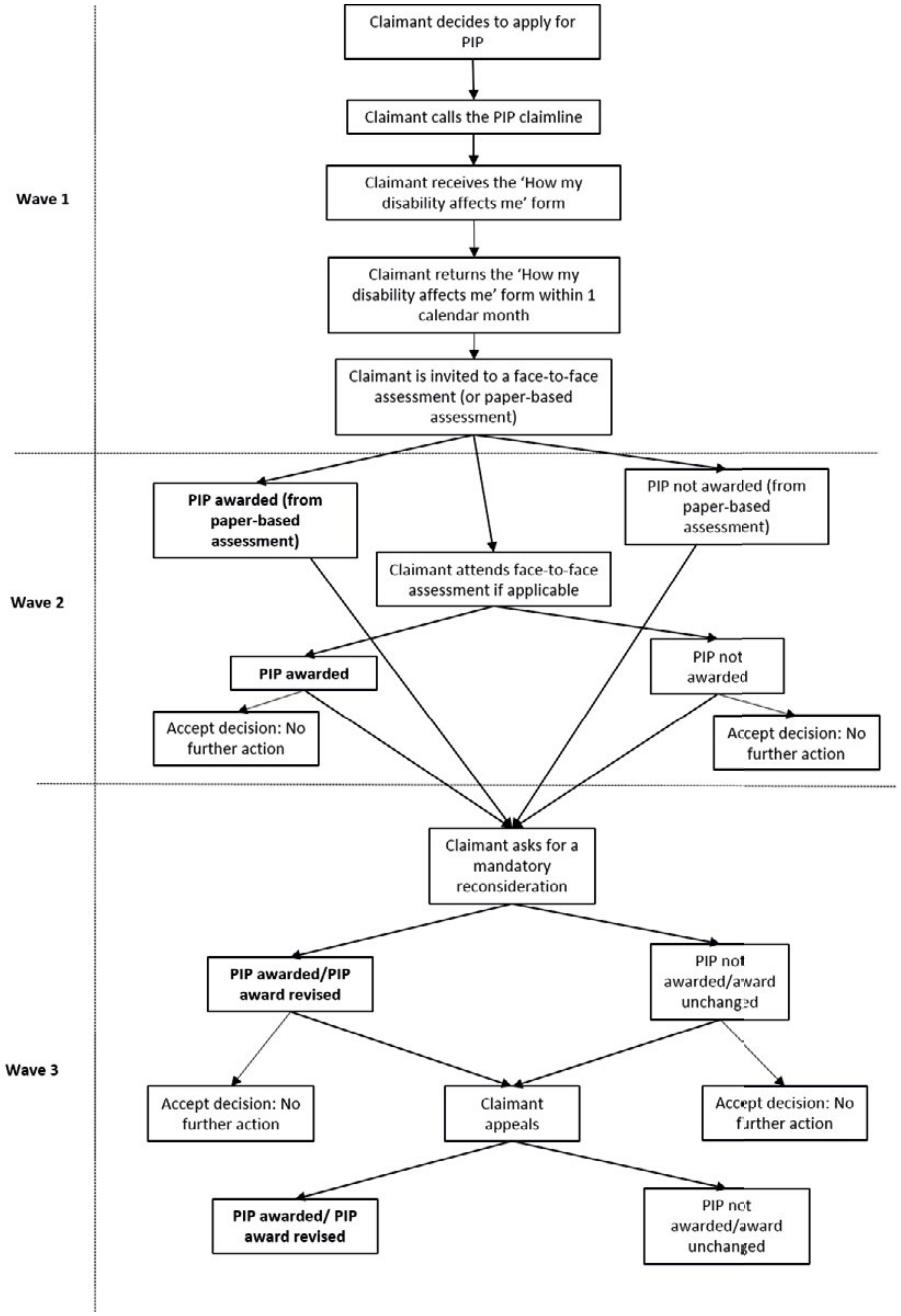
The first wave of qualitative fieldwork took place between 18 October and 28 November 2016, and focused on the claimant's initial PIP claim, the 'How your disability affects you' questionnaire, the PIP assessment, and the decision letter. The second wave took place between 20 February and 7 April 2017, and focused on the PIP assessment and the decision. The third wave took place between 10 July and 25 August 2017, and focused on the claimant's experiences of the dispute process, including both MR and appeal.

In each wave, 50 interviews were achieved. In wave one, 30 interviews were conducted with claimants focusing primarily on the initial stages of the claim process (registering a claim over the phone, and completing the 'How your disability affects you' questionnaire), and 20 interviews were conducted with claimants focusing primarily on assessment and decision. In wave two, all 50 interviews focused on the assessment and decision. In wave three, 25 interviews were conducted with claimants who had gone through MR, but had not (at the time of the interview) pursued an appeal, and 25 interviews were conducted with claimants who had gone through both MR and an appeal.

1.3 The PIP application process

Figure 1.1 shows how the stages of the Personal Independence Payment (PIP) application process are covered by the three waves of this research.

Figure 1.1 PIP claim process and research process flow diagram



1.4 The structure of the report

Wave one: Chapters 2-4 describe the findings in detail from wave one of the research.

Wave two: Chapters 5-9 describe the findings in detail from wave two of the research.

Wave three: Chapters 10-11 describe the findings in detail from wave three of the research.

Chapter 12 brings together findings from across all the three waves of this research highlighting key themes of the research, including: the collection and submitting of supporting evidence, communications and contact with DWP and overall experience of the process.

Additional information about sampling and statistical reliability are included in a separate technical report.

1.5 Note about presentation and interpretation of the quantitative data

This report presents the data from all three waves of the research, both quantitative and qualitative. However, additional survey findings can be found in the technical report.

This report examines differences in the data between different sub-groups within the total sample surveyed in each wave, for example, differences in views between those receiving different PIP awards. A difference has to be of a certain size in order to be statistically significant and only differences which are statistically significant at the 95% confidence level are commented on in this report. Furthermore, sub-group comparisons have not been commented on where the difference between groups may reflect another underlying difference (e.g. a difference in claimant experience between sub-groups may be influenced by a difference in award type).

In addition to being statistically significant, only sub-group differences which are relevant in the context of the question being analysed are commented on in the report.

Where percentages do not sum to 100, this may be due to computer rounding, the exclusion of ‘don’t know’ categories, or participants being able to give multiple answers to the same question. Throughout the report an asterisk (*) denotes any value of less than half of one per cent but greater than zero.

Where this report refers to figures for those who ‘agree’, this is an aggregate sum of those who say they ‘strongly agree’ and those who say they ‘tend to agree’. In turn, ‘disagree’ figures refer to an aggregate sum of those who say they ‘strongly disagree’ and those who say they ‘tend to disagree’.

In this report, findings presented as percentages come from the surveys.

1.6 Note about presentation and interpretation of the qualitative data

It is important to note that qualitative research is used to explore the range of views and why people hold a particular view, rather than to estimate or quantify how many people hold those views. Therefore, the findings presented here are designed to be illustrative, detailed and exploratory. The qualitative findings have been used in this report to provide further explanation of the quantitative findings.

The sampling approach for qualitative research differs to quantitative, as the types of data and analysis required are different. The samples for the interviews were selected purposively, to ensure specific experiences and attitudes were explored in-depth. As such, the findings are not generalisable to a wider population, but offer insight into the experiences, perceptions, feelings and behaviours of research participants.

Verbatim comments from the interviews have been included in the report. These comments have been selected to provide insight into a particular issue or topic and should not be taken to define the views of all participants.

Quotes are labelled with the following information, unless it was not known at the time of the interview:

- Whether the participant was a new claim, someone who was reapplying as part of the full PIP roll-out (FPR), or if they were reapplying as part of the natural reassessment process.
- Whether they had received an award and whether their award was for both mobility and daily living (if available at the time of the interview), or the stage of the claim at the time of the interview.
- For wave three findings, if the participant went to MR only or if they went on to appeal.
- For wave three findings, whether their award was changed at the last stage of the dispute process they went through e.g. if they went through both MR and appeal this will refer to the appeal stage.

Wave one: Introduction

The following chapters present the findings from wave one of the research. This wave investigated the experiences of claimants of initial claims process, including motivations for claiming, the initial call to the claim line, completing the form, and expectations of next steps.

Mainstage quantitative fieldwork took place between 19 September and 17 October 2016, with a pilot stage on 13 September 2016. In total, 1,106 mainstage interviews were achieved with claimants who had called the claim line to request a form and had received it, but had not attended a face-to-face assessment. Thus, the quantitative research included some participants who decided not to apply for PIP after receiving the form.

Mainstage qualitative fieldwork took place between 31 October and 28 November 2016 and a total of 50 interviews were achieved. The sample comprised 30 participants who were completing the 'How your disability affects you' questionnaire or were undergoing their assessment and 20 participants who had experienced the face-to-face assessment and received the outcome of their claim.

2 Before claiming

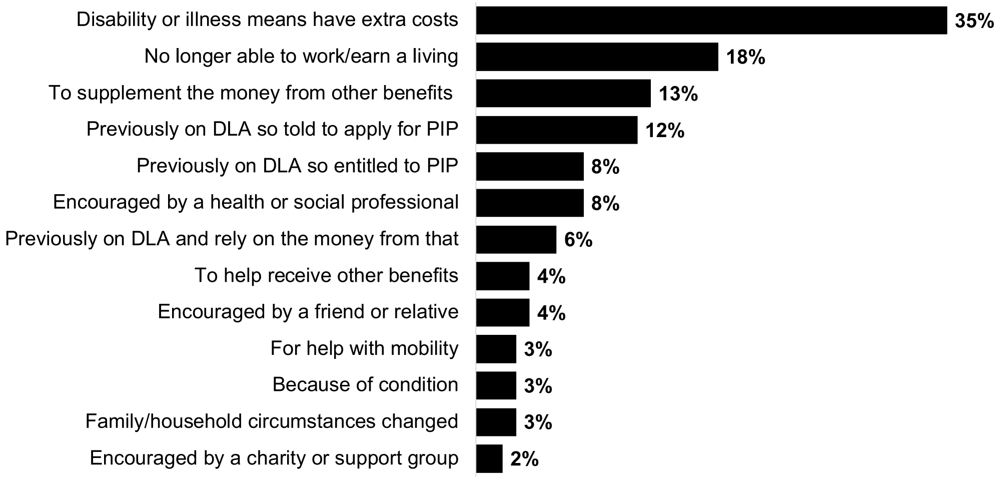
This chapter presents claimants' understanding, reasons for applying and actions before making a claim for Personal Independence Payment (PIP). It discusses their reasons for applying and their understanding of PIP at this point of their claim, including how they found out about it and any advice they sought. For claimants who decided not to claim PIP, it discusses the reasons for this decision. Finally, it discusses the concerns that claimants had about applying for PIP. For a summary of the findings, please refer to section 2.5.

2.1 Reasons for applying for PIP

The most commonly cited reason claimants in the survey gave for applying for PIP was because they had extra costs associated with their disability or illness (35 per cent). Smaller proportions said they applied for PIP because they were no longer able to work (18 per cent), or to supplement the money from other benefits (13 per cent). Other reasons for claiming PIP were that the person was previously on Disability Living Allowance (DLA) and was told to claim as part of the full roll-out of PIP (12 per cent), that they were on DLA so felt entitled to PIP (eight per cent) or that they were previously on DLA and relied on the money from that (six per cent).

Figure 2.1

Main reasons for applying for PIP



Base: All participants in wave one (1106)

Please note that more than one response could be given to this question

Question wording: B8a. What were your main reasons for applying for PIP?

New claimants were most likely to say they applied for PIP because they were no longer able to work (26 per cent, compared to 12 per cent of reassessment cases and eight per cent in full PIP roll-out).

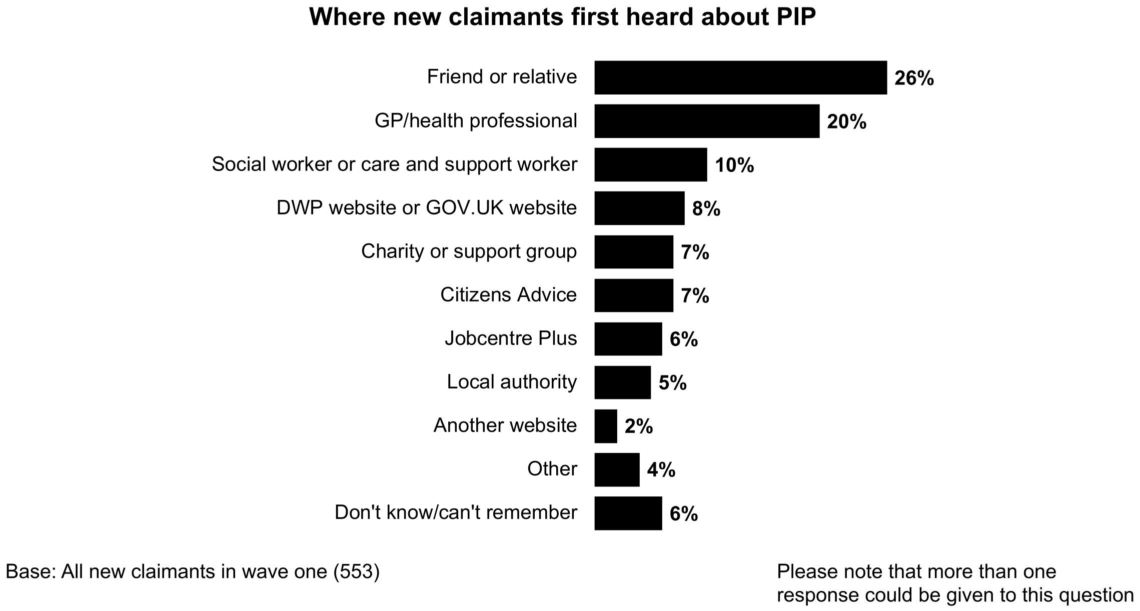
Those who said their disability or illness meant they had extra costs were asked what costs they incurred. Travel was the most common additional cost mentioned (54 per cent). As well as travel, 29 per cent of claimants reported help at home as an additional cost. This was particularly the case among those in the full PIP roll-out process in comparison with new claimants (42 per cent compared to 23 per cent).

One-quarter of claimants cited general extra costs without specifying further (25 per cent), while almost one in five had extra costs from aids or adaptations or had extra costs from medication or treatment (both 19 per cent). A smaller proportion of claimants cited more fundamental costs, such as for food or shopping (five per cent), for clothing or footwear (two per cent), for bills, rent or mortgage (two per cent) or for heating (two per cent).

2.2 Deciding to make a claim

New claimants taking part in the survey were asked how they first heard about PIP[14]. As shown in Figure 2.2, new claimants were most likely to have heard about PIP from a friend or relative (26 per cent), followed by a GP or health professional (20 per cent) or social worker / care and support worker (10 per cent). Fewer than one in ten new claimants had heard about PIP through the Department for Work and Pensions (DWP) website or GOV.UK website (eight per cent).

Figure 2.2



Question wording: B1. How did you first hear about PIP?

---

[14] This question was not asked to people who had previously been on DLA as they would have been invited to apply for PIP by DWP.

All claimants in the survey were asked about their knowledge of the PIP process before they called the claim line. Generally, claimants reported low levels of prior knowledge, with 36 per cent of claimants saying they knew nothing about why a person might be awarded PIP and 46 per cent knowing nothing about the process for claiming PIP. In contrast, between one-quarter and one-fifth of claimants felt they knew a great deal or fair amount (24 per cent and 20 per cent respectively). This is not to say that claimants knew nothing about PIP itself, but rather that they did not consider themselves knowledgeable about the award criteria or the process beyond the initial telephone call.

The qualitative interviews revealed that most participants were unable to explain exactly what PIP was intended for and who was eligible. Understanding of the two components (daily living and mobility) and of the different levels of award (standard and enhanced) was very limited. There were misconceptions about PIP, which included: PIP being a benefit just for people with mobility problems; PIP being a new name for DLA; having a disability, illness or impairment being enough to be eligible for PIP; and PIP being a benefit for people who cannot work as a result of a disability, illness or impairment. Those who had previously claimed DLA found it particularly difficult to understand PIP and distinguish between DLA and PIP. Claimants who had previously received DLA were not always sure why they needed to reapply, particularly in instances where they had been told that they had a lifelong award for DLA.

> *"I didn't understand why I needed to reapply to be honest. It was all confusing."*
>
> Full PIP roll-out, no award

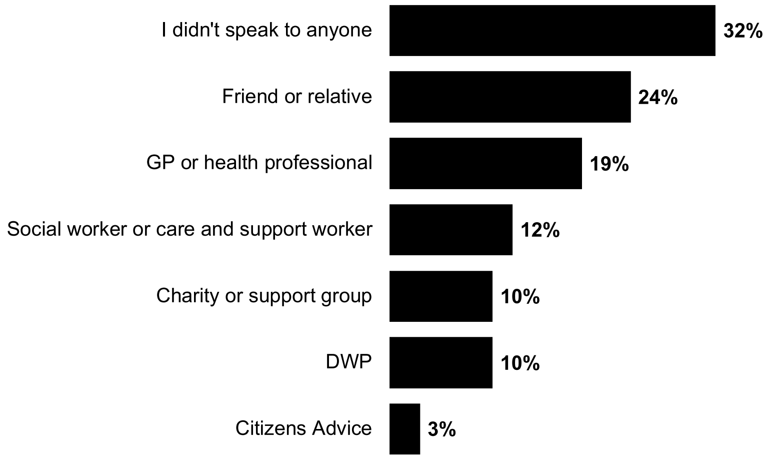
This high level of confusion about PIP impacted on claimants' perceptions of the process. Instead of thinking about the impact of their disability, illness or impairment on their day-to-day life, claimants in the qualitative research frequently assumed that they would be eligible for PIP simply because of the condition(s) they had been diagnosed with, or because they had previously been awarded DLA. This confusion affected their expectations about the assessment (for example, assuming it would involve a medical examination to confirm their diagnosis), and also their views of the outcome of their claim (for example, not understanding why they did not qualify for PIP despite a medical diagnosis stating their disability).

In the survey, new claimants reported the lowest awareness of PIP. Two in five (42 per cent) said they knew nothing at all about why a person might be awarded PIP (compared to 32 per cent of people in the full PIP roll-out process and 28 per cent of reassessment cases), and 51 per cent said they knew nothing about the process for claiming (compared to 35 per cent of reassessment cases). The qualitative research found that new claimants tended to have been advised to apply by someone else, such as friends, family, health professionals and organisations supporting them with other benefit claims. Often, these claimants had been given the PIP number to call along with limited verbal information about what PIP was, and they had gone through the steps without carrying out research, assuming that they would probably be eligible because they had been advised to claim, were disabled, or could no longer work.

Survey claimants were also asked who, if anyone, they spoke to about PIP before contacting the claim line. Around one-third did not speak to anyone (32 per cent), while around one-quarter spoke to a friend or relative (24 per cent) and around one-fifth spoke to a GP or health professional (19 per cent). Only one in ten claimants obtained information about PIP from DWP before calling the claim line (10 per cent).

Figure 2.3

Sources of information about PIP: before calling claim line



Base: All participants in wave one (1106)

Please note that more than one response could be given to this question

Question wording: B3. When deciding to apply for PIP, who, if anyone, did you speak to about it, before you contacted the claim line?

New claimants were most likely to have spoken to someone before calling the claim line (84 per cent compared to 61 per cent of reassessment cases and 46 per cent of full PIP roll-out cases). New claimants were also more likely than the cohort overall to have consulted a range of different people about PIP. This could be a reflection of these claimants having had less experience of DWP processes than those who had previously claimed DLA.

There is no relationship between reported knowledge of the PIP application process and whether or not claimants sought information from other people when deciding to apply for PIP. Those who spoke to someone in advance of applying for PIP were equally likely to say they knew nothing about why a person might be awarded PIP as those who did not speak to anyone (35 per cent compared to 32 per cent, which is not a significant difference), and to say they knew nothing about the process for claiming (46 per cent compared to 41 per cent, again not a significant difference). There is thus no evidence that those who seek advice from others are better informed.

Claimants who had spoken to someone were asked what information they received from these sources. The most common advice they received was whether they would be awarded PIP as a benefit[15] (24 per cent). A further 16 per cent received information on who to contact to make an application, 13 per cent on how to complete the form, and 10 per cent on how the process works. As shown in Figure 2.4, new claimants

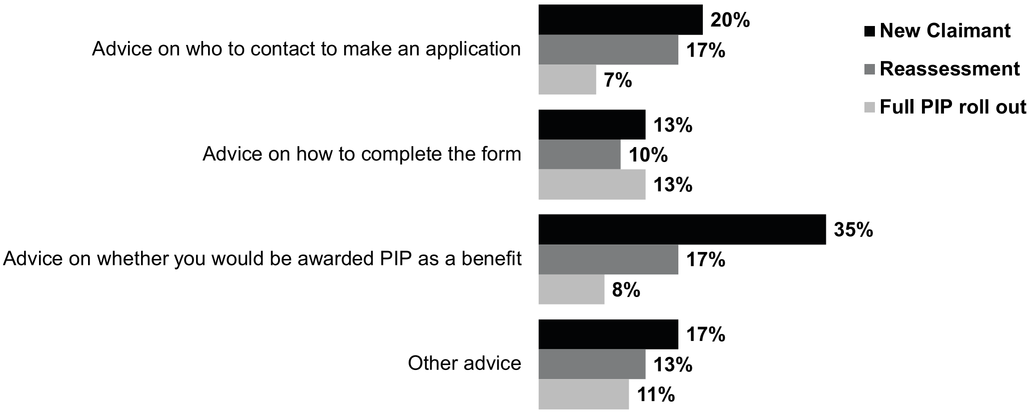
---

[15] Please note that this is the wording of an answer code in response to the question 'What information did you receive from [source]?', covering any comments made by claimants relating to their eligibility for a PIP award.

were the claimant group in the survey most likely to receive each type of advice. In particular, they were most likely to get advice about whether they would be awarded PIP as a benefit, with over one-third receiving advice on this (35 per cent) compared to 17 per cent of reassessment cases and eight per cent of those in the full PIP roll-out group. They were also more likely to receive information about who to contact to make an application than those in the other groups (20 per cent of new claimants compared to 17 per cent in the reassessment group and seven per cent in the full PIP roll-out group).

Figure 2.4

Types of information about PIP: before calling claim line



Base: All participants in wave one who spoke to someone about their decision to apply for PIP before they contacted the claim line (757)

Please note that more than one response could be given to this question

Question wording: B5. What information did you receive?

Different types of advice were given by different sources. Advice about eligibility was most commonly given by GPs or health professionals (47 per cent), social workers or support workers (48 per cent), or friends or relatives (32 per cent). Charities or support groups were most likely to be contacted for advice on completing the form (41 per cent). Two-fifths (40 per cent) of claimants who contacted DWP did so for advice on who to contact to make the application.

Beyond speaking to other people such as friends and family or a GP or healthcare professional, the qualitative interviews found that very few claimants had proactively researched PIP prior to starting the claims process. Those who did mentioned the following sources of information:

- GOV.UK website
- Online disability forums
- General online searching for PIP

Claimants in the qualitative interviews who actively researched PIP (beyond speaking to someone) tended to have a better understanding of its purpose and eligibility criteria, and of the claims process. They could discuss what PIP involved in greater detail than those who did not conduct any research. It is notable that in the early stages of the process new claimants who had not previously been on DLA tended to seek more advice and so despite poorer initial knowledge of PIP they were better informed about the process and less worried about it.

2.3 The decision not to claim

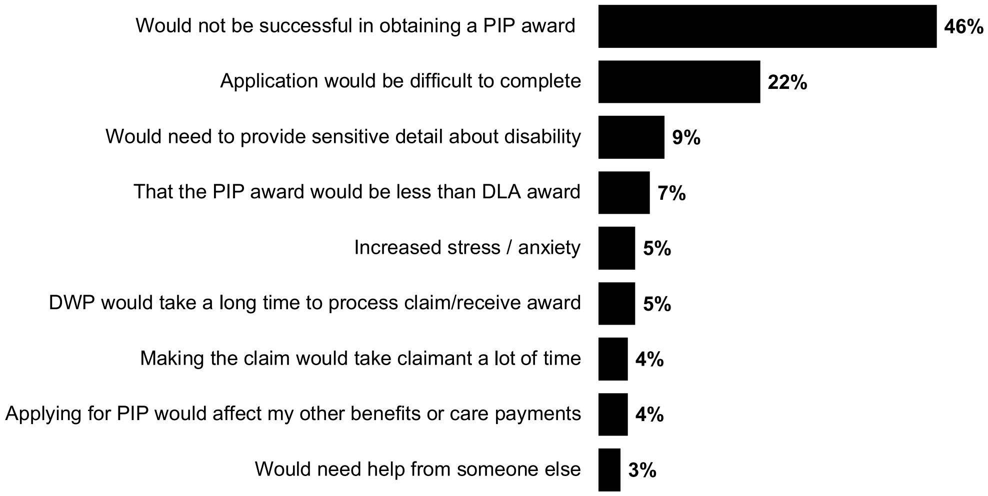
At the time of the survey research, only 25 out of 1,106 participating claimants had decided not to go ahead and claim PIP[16]. Eight did not claim because they did not think they would be successful in obtaining an award, while seven found the form too difficult. Four did not claim because their circumstances changed, and three were not well enough to complete the form. Because so few people taking part in the survey decided not to claim, it is difficult to draw any conclusions about what stops people from applying, so these findings should be treated as indicative only.

2.4 Concerns about applying for PIP

Just over half of claimants in the survey said they had worries or concerns about applying for PIP (52 per cent) before they applied. Of those with concerns, the most common worry was that they would not be awarded PIP (46 per cent). Just over one-fifth worried that the application would be difficult to complete (22 per cent). The next most common worries were that they would need to provide sensitive details about their disability (nine per cent) or that the PIP award would be less than DLA awards (seven per cent). As shown in Figure 2.5, a smaller number of claimants expressed other concerns such as increased stress, that it would take a long time to make a claim or receive an award, that it would affect other benefits or that they would need help from someone else to apply.

Figure 2.5

Prior worries or concerns about applying for PIP



Base: All participants in wave one with worries or concerns about applying for PIP (573). Mentions of 3% and over

Please note that more than one response could be given to this question

Question wording (if stated had worries): B7. What were your main worries or concerns about applying for PIP?

---

[16] Please note that, due to the small number of participants able to answer these questions (25), results are given as numbers of claimants rather than as percentages. Please treat results with caution.

2.5 Chapter summary

Claimants reported applying for PIP for a variety of reasons, in particular to cover the extra costs related to their disability or illness (often related to travel or help at home) and, in some cases, to replace income lost because they could not work. They heard about PIP from a range of sources such as friends and relatives or GPs and other health professionals.

Prior knowledge about PIP was low (particularly among new claimants), with a number of misconceptions around what the benefit is intended for and who is eligible, along with limited understanding about the two components (daily living and mobility) and the different levels of the award (standard and enhanced). Where claimants spoke to someone else before calling the claim line, they tended to receive advice about whether they would be awarded PIP or who to contact to make an application. A sizeable minority did not speak to anyone else before calling the claim line.

Just over half of claimants said they had worries or concerns about applying for PIP, with the most common concern being that they would not be awarded the benefit.

3 Making the application

This chapter presents claimants' experiences of making an application for Personal Independence Payment (PIP). This includes experiences of the initial call to the claim line, of completing the 'How your disability affects you' questionnaire, and of submitting evidence. Sources of information and support for each of these elements are explored. For a summary of the findings, please refer to section 3.4.

3.1 Experiences of the initial call to the claim line

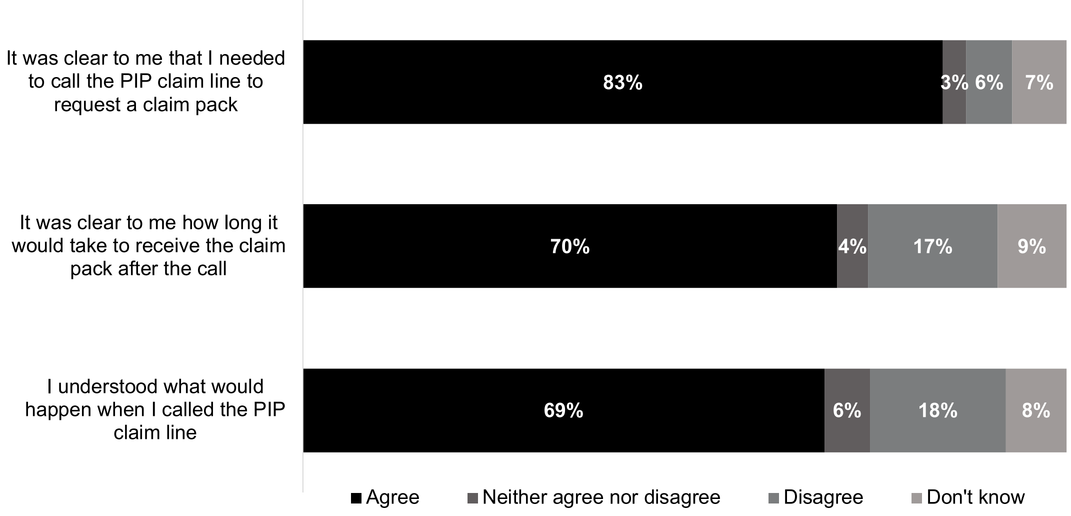
Claimants were asked in the survey if they agreed or disagreed with a series of statements about their experience of the initial call to the claim line. Nearly all claimants knew they needed to call the claim line to request the claim pack (83 per cent). Slightly fewer said that they understood what would happen when they called the claim line (69 per cent), and a similar proportion knew how long it would take them to receive the claim pack after the call (70 per cent).[17] This contrasts with the reported low levels of prior knowledge about why someone might be awarded PIP: although claimants may have felt they knew little about the PIP, they were clear on how to initiate the claim (although note that the sample comprises those who had requested a 'How your disability affects you' questionnaire).

---

[17] The DWP standard operating process is to issue claim packs within approximately three working days of the claim registration date.

Figure 3.1

Experience of the initial call



Base: All participants in wave one (1106)

Question wording: C1. To what extent you agree or disagree with each of the following statements? Statements summarised in the figure above.

Claimants in the qualitative research said it was straightforward to find the correct phone number to call. Sources included websites on PIP (including GOV.UK), health professionals, charities or local community groups. Full PIP roll-out claimants tended to find it on the letter sent to them by the Department for Work and Pensions (DWP).

Claimants were also asked how the process of making a call to the PIP claim line compared with their expectations. Just over half found the call as expected (52 per cent) and 27 per cent found it easier than expected. A smaller proportion – 15 per cent – found the process more difficult than they expected.

Claimants in the qualitative research generally reported that providing the registering information to DWP was straightforward and that they found DWP staff friendly and helpful.

> *“Once you dialled the number it was very easy…I’d rather do it [register the claim] on the phone…I don’t really work with a computer much…”*
>
> New claim, successful, daily living and mobility (level not known)

However, some claimants said they needed assistance from another person in order to make the call. Reasons for this included needing help to remember the information requested, or to spell out an address. Receiving help to register the claim was more common for claimants with a speech or hearing impairment, learning disabilities, anxiety or memory problems, and those who spoke limited English.

3.2 Experiences of filling in the form

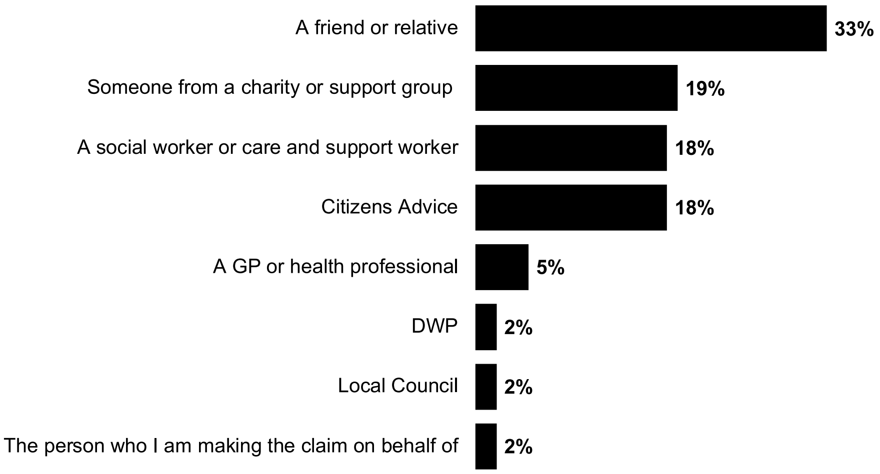
3.2.1 Seeking help

Over half of survey claimants sought or planned to seek help with completing the claim form (59 per cent). There were some differences by claimant type, with new claimants being more likely to seek help than those in the full PIP roll-out category (62 per cent compared to 54 per cent).

Claimants sought (or planned to seek) help from a range of sources. One-third of claimants who sought help asked a friend or relative (33 per cent). Around one in five people sought help from someone from a charity or support group (19 per cent), a social worker or care and support worker (18 per cent), or Citizens Advice (18 per cent).

Figure 3.2

Sources of help with completing form



Base: All participants in wave one who have sought or will seek help with completing the PIP application form itself (637)

Please note that more than one response could be given to this question

Question wording: D9. Who helped you to complete the PIP application form?

Only two per cent of claimants in the survey sought help from DWP with completing the form. In the qualitative research, claimants generally did not consider DWP to be a source of support for completing the form, or did not think about asking DWP for support at that point, for the following reasons:

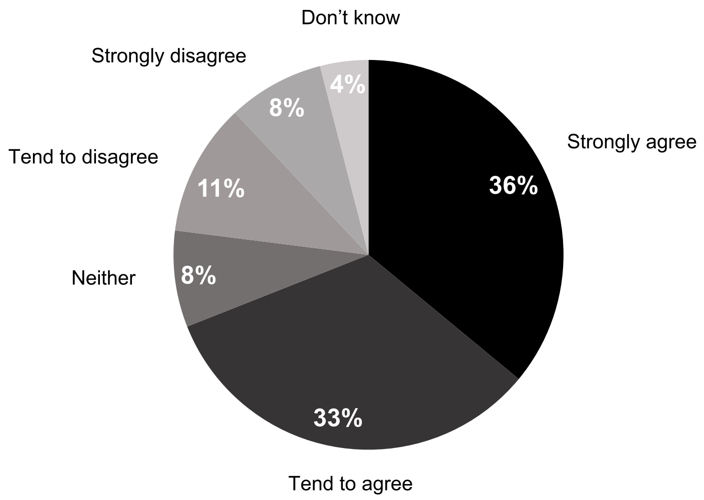
- An assumption that DWP could only provide administrative support, such as helping with extensions. This was underpinned by a general lack of awareness that DWP could support claimants with their form.
- A lack of trust in DWP to provide impartial advice, and/or a preference for sources of support that would not be involved in the assessment and decision.
- Negative previous experiences with government departments, including long waiting times when calling and expensive phone numbers.
- A desire for face-to-face contact or needing someone to write down the responses on the form on their behalf, combined with limited awareness of DWP's ability to carry out home visits for that purpose.
- Not knowing what number to call to access support from DWP.

3.2.2 Suitability of the form

The majority of claimants interviewed in the survey agreed that the claim form allowed them to explain how their condition affects them (69 per cent), with fewer than one in five disagreeing (19 per cent).

Figure 3.3

Whether the form allowed the claimant to explain how their condition affects them



Base: All participants in wave one who have completed the PIP application form (1022)

Question wording: D15. To what extent do you agree or disagree that the form allowed you to explain fully how your condition affects you?

Most claimants (92 per cent) said they were able to complete all sections in the form, with only four per cent unable to do so. Of this four per cent (44 claimants), 21 claimants said some sections or questions were irrelevant or did not apply to them, while 11 claimants said the form was too complex for them to complete[18]. Seven claimants did not complete all the sections because they did not know the answers to all the questions. Only one person did not complete the form because it was too long, and three people did not have time to complete all the sections.

The majority of claimants found the application form either as they expected or easier to complete than they had expected (a combined 63 per cent). There were also claimants in the qualitative research with this type of experience:

> *"My experience has been absolutely fine. No complaints."*
>
> New claim, not received outcome

However, just over one-third (34 per cent) of survey participants found it more difficult to complete than they had expected. The qualitative research uncovered the circumstances in which claimants encountered difficulties with the form and the nature of those difficulties. Those with fluctuating conditions found it hard to explain the nuances of their health condition(s) or the changing nature of its/their impact. Claimants with mental health conditions found that the form was more appropriate

---

[18] Please note that, due to the small number of participants able to answer this questions, results are given as numbers of claimants rather than as percentages. Please treat results with caution.

for describing the impact of physical health conditions and was less suitable for explaining the impact of mental health conditions. For example, questions about managing toilet needs and dressing and undressing were considered less relevant and there were accounts of finding these difficult to answer.

> *"It should depend really on what someone is applying for, so if they say they have a dodgy shoulder then assess it like that but don't assess it like that for someone with mental health. It's the struggle of daily living that's the problem…"*
>
> New Claim, no award

Some questions were also felt to be repetitive, which claimants found confusing or believed was a deliberate attempt by DWP to 'catch them out'. Furthermore, some claimants found it difficult to articulate their responses or felt unsure of what DWP expected.

> *"You know what you want to put down, but you're also not sure on what people are expecting from you."*
>
> New Claim, awaiting outcome

Finally, not being able to read, understand or remember the instructions on the form was a common issue in the qualitative research, because of concentration or memory problems, poor literacy skills, limited English or finding the instructions too long. This may have compounded some of the difficulties that claimants experienced in completing the form.

3.3 Submitting supporting evidence

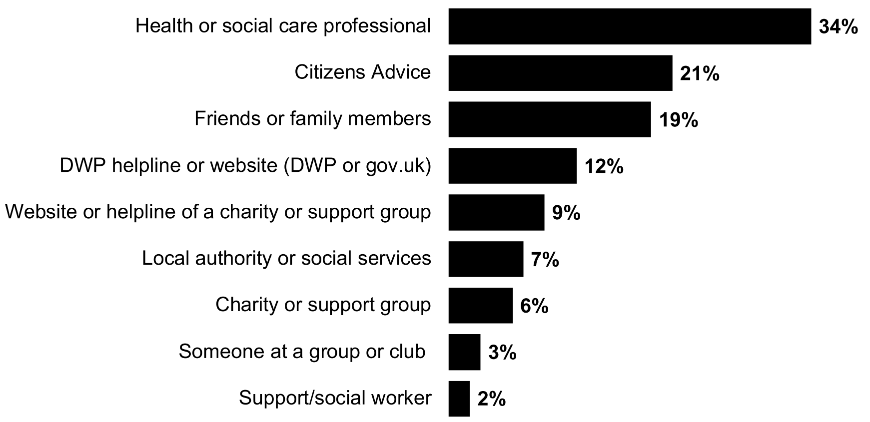
3.3.1 Help, support and guidance on submitting evidence

Around half of claimants in the survey (52 per cent) sought or planned to seek help regarding the information and evidence they should provide to support their claim, and this help came from a range of sources.

Figure 3.4 shows the proportions of people who sought help from each source. Just over one-third sought help from a health or social care professional (34 per cent), and around one-fifth sought help from Citizens Advice (21 per cent) or friends or family members (19 per cent). Around one in ten (12 per cent) used the DWP helpline or website specifically for advice about submitting evidence.

Figure 3.4

Help and support about information and evidence to provide



Base: All participants in wave one who receive(d) advice about which information or evidence to include (563)

Please note that more than one response could be given to this question

Question wording: D3. Which people, or information sources, did you / will you consult when thinking about which information or evidence to include when completing the PIP application form?

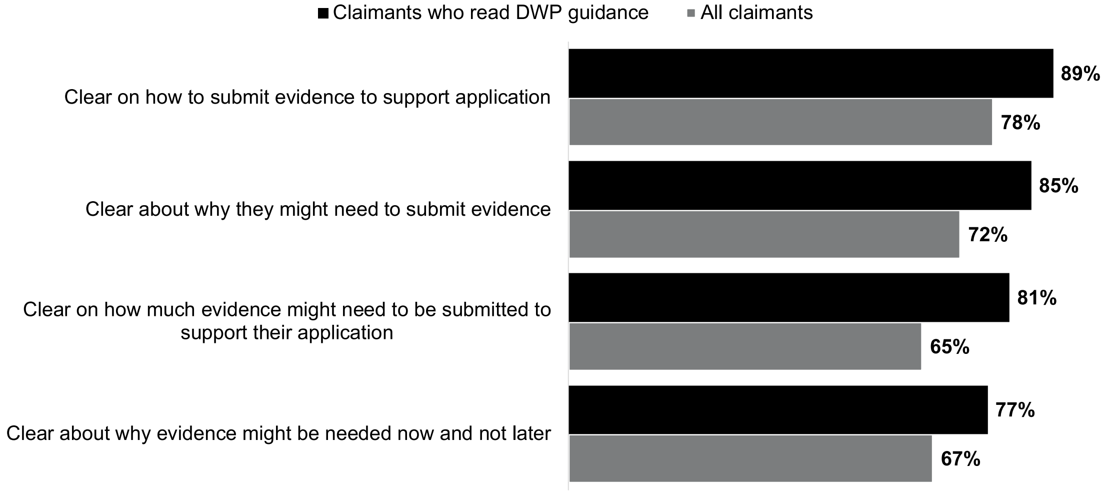
3.3.2 Submitting evidence

Claimants in the survey were asked how clear the explanation in the application form was about various elements surrounding submitting evidence. The majority reported that the form made it clear how they should submit evidence to support their application (78 per cent) and about why they might need to submit evidence (72 per cent).

Claimants were slightly less clear about why evidence might be needed at this stage rather than later (with 67 per cent reporting that the form was clear about this) or how much evidence they needed to submit to support their application (65 per cent). Around one-quarter of claimants in the survey (24 per cent) said they read the guidance provided by DWP (in the information booklet that comes with the form) in deciding what evidence to provide. Those who read the DWP guidance in deciding which evidence to submit were more likely than claimants overall to agree that the form was clear about each piece of information.

Figure 3.5

Clarity of explanation about evidence



Base: All participants in wave one who have completed the PIP application form (1022) and all participants in wave one who read DWP guidance in deciding what evidence to provide (243)

Please note that more than one response could be given to this question

Question wording: D19. And how clear, if at all, was the explanation in the form about the following statements? Statements summarised in the figure above.

Based on the qualitative research, where claimants did not read the guidance, this was because:

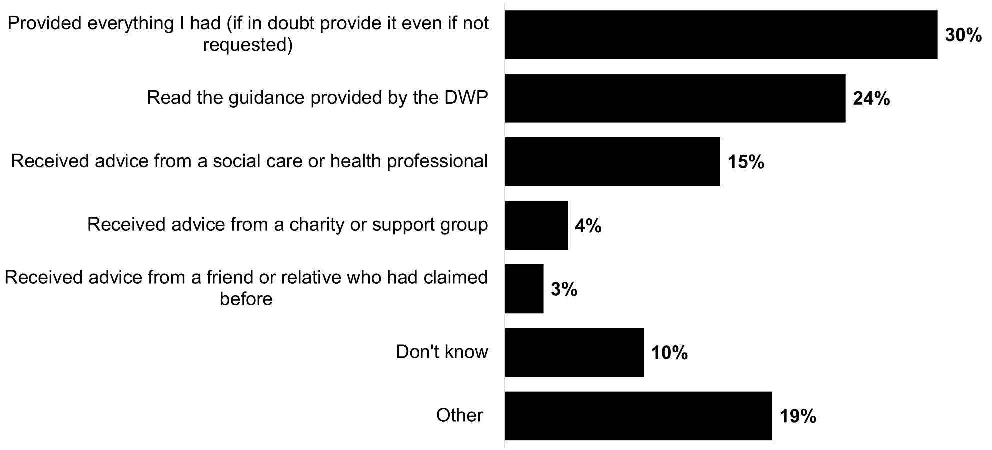
- They found it too lengthy to read alongside the form.
- They thought that reading it was unnecessary due to previous experience of claiming Disability Living Allowance (DLA) or Employment and Support Allowance (ESA), which made them think that they were familiar with the questions asked on the form.
- They had problems with concentration and/or memory, low level literacy or limited English.
- They expected those assisting them to have read it.
- They preferred alternative sources of guidance. For example, the Citizens Advice website was considered to be clearer and more detailed, with ‘worth knowing’ and ‘important’ boxes flagging up key points.
- They were not aware of the guidance.

When deciding what evidence to provide, claimants were most likely to say they provided everything, whether or not the information was requested (30 per cent). Advice from a social care professional or health professional was also an important source for deciding what evidence to provide, with 15 per cent taking their advice into consideration. Around one in five claimants (19 per cent) said they had decided what evidence to submit using other sources of information (beyond those shown in Figure 3.6), covering aspects such as claimants’ own common sense or best judgement (three per cent).

The qualitative research found uncertainty among claimants about what and how much evidence to provide, especially for those who did not read, remember or understand the guidance. There was also some uncertainty about how recent the evidence needed to be. This sometimes lead to claimants taking a precautionary approach and sending all the information they could access, without taking further steps to determine whether the information would help DWP assess their claim.

Figure 3.6

Deciding on evidence to provide



Base: All participants in wave one who have completed the PIP application form (1022)

Please note that more than one response could be given to this question

Question wording: D20. How did you decide what evidence, if any, to provide?

Most claimants interviewed in the survey provided evidence with their claim (84 per cent), and the majority provided evidence that would be classed as relevant.[19] The most common evidence claimants supplied were reports from health professionals (62 per cent), prescriptions lists (24 per cent) and hospital discharge letters (11 per cent).

Smaller proportions provided evidence that cannot be used in deciding a claim – seven per cent provided appointment letters or cards, and four per cent provided factsheets about their condition or treatments. Sixteen per cent did not provide any evidence to support their application, falling to nine per cent of those who had used the DWP guidance (in the information booklet which comes with the form) when deciding what to provide.

Around three in ten claimants (31 per cent) said they had evidence they wanted to submit but could not. Of these claimants, 28 per cent said they did not have time to put the evidence together, 17 per cent never had the evidence, and eight per cent had lost or mislaid the evidence. Seven per cent said they were not able to provide evidence due to the cost of providing it. Lack of time was mentioned more frequently by new claimants (28 per cent) and reassessment cases (34 per cent) than by full PIP roll-out cases (21 per cent).

When claimants in the qualitative research acknowledged that the evidence they supplied was not comprehensive or did not include the latest information, or that they did not send any evidence at all, the reasons given for this included:

---

[19] https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/448596/pip-advisers-claimant-journey.pdf

- They could not get hold of (all) the evidence by the deadline (because printed copies of results from tests conducted in hospital or letters from health professionals took time and effort) and they did not know that they could ask DWP for an extension.
- Their GP surgery said they would charge them to provide a copy of their medical records.
- The health professionals involved in their care told them DWP would contact their doctor(s) directly if they needed (more) evidence.

The qualitative research also showed that there was a widely shared and incorrect assumption among claimants that DWP had access to their medical records, and/or that DWP would contact their doctor(s), regardless of the evidence submitted. This assumption was partly driven by the question included in the form asking claimants to provide the contact details of the health professionals involved in their care. Some also expected that the face-to-face assessment would involve a medical examination that would constitute evidence. Consequently, many claimants did not realise the importance of providing comprehensive and up-to-date evidence to support their application.

> *"But obviously they have my doctor's address and telephone number and my physio and I signed the form to say I was happy for them to contact them…if they needed anything else from me they only had to ask."*
>
> New Claim, awaiting outcome

3.4 Chapter summary

Experiences of the initial call to the claim line were generally positive, with many finding the experience as expected or easier. Many claimants sought help with filling in the form, often from friends and family, charities, social workers or Citizens Advice. Few sought help from DWP. Most claimants in the survey agreed that the claim form was suitable, although a significant minority said it was more difficult to complete than they had expected.

The qualitative research identified a number of aspects of the form that claimants found challenging, including: difficulties for those whose condition(s) fluctuate; the form feeling less relevant for claimants with mental health conditions; perceived repetitiveness; finding it difficult to articulate their responses or not being sure what DWP expected; and difficulties reading, understanding or remembering the instructions on the form.

Most claimants in the survey provided evidence to support their claim. Around half of claimants sought help with selecting the evidence to provide, although only a minority used the DWP helpline and website or read the DWP guidance. The information in the application form about how and why to provide evidence was generally agreed to be clear by those in the survey. Those who read the DWP guidance (in the information booklet that comes with the form) were more likely to agree that the form was clear.

However, claimants in the qualitative research expressed some confusion about what was required, along with an incorrect belief that DWP would gather outstanding evidence on their behalf. When deciding what evidence to provide, claimants were most likely to say that they provided everything they had, with around one-quarter using DWP guidance to help them decide what to submit. However, nearly one-third of claimants said they had evidence they wanted to submit but could not (the most common reason being they did not have time to put the evidence together). There were also accounts within the qualitative research of submitting the application late due to being unable to collect evidence in time.

4 Next steps

This chapter presents claimants' awareness of the next steps in the application process for Personal Independence Payment (PIP) once the form had been submitted. It also explores the differences that claimants reported a PIP award would make to their lives. For a summary of the findings, please refer to section 4.3.

4.1 Understanding of next steps

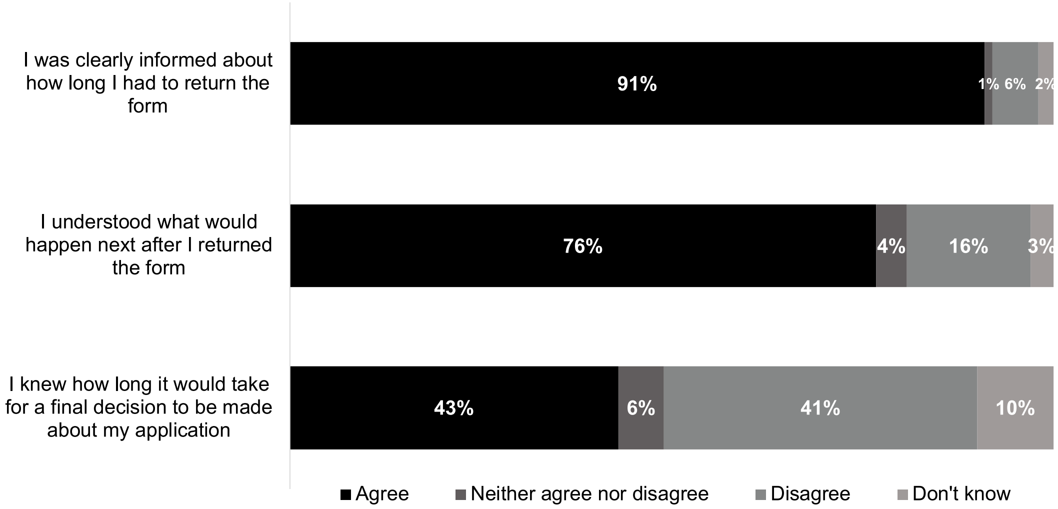
The majority of claimants interviewed in the survey (91 per cent) agreed that they were clearly informed about how long they had to return the form, with only six per cent disagreeing[20]. Claimants knew a little less about the next stages of the process, linking back to the low levels of knowledge about the process overall as discussed previously. Three-quarters (76 per cent) understood what would happen next after they returned the form (and 16 per cent disagreed). There was a particular lack of clarity around how long it would take for a final decision to be made about their application, with 43 per cent saying they knew this and 41 per cent that they did not. New claimants were more likely to agree that they knew the timescales for a decision than those in the full PIP roll-out group (48 per cent compared to 36 per cent).

---

[20] The standard claims process allows one calendar month for the claim form to be returned, but this can be extended in some circumstances.
PIP Handbook: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/519119/personal-independence-payment-handbook.pdf

Figure 4.1

Understanding the next steps: application form



Base: All participants in wave one (1106)

Question wording: D30. Please tell me to what extent you agree or disagree with each of the following statements? Statements summarised in the figure above.

The qualitative research found that claimants who were signed up to the text message service were generally clearer about next steps and how long they would need to wait. These claimants spoke of getting text messages at regular intervals informing them of the status of their claim, which they appreciated.

> *“When they received my form they texted me to tell me that they had received it and that I would possibly get an appointment through the post and that it would come from Capita and then I did get an appointment come through – so it was quicker than I thought”.*
>
> New claim, awaiting outcome

Claimants completing the survey were also asked when they expected to hear the outcome of their application from the Department for Work and Pensions (DWP). There was no consensus on the timeframe, with 31 per cent expecting to hear within a month, 21 per cent expecting to hear within one to two months, and 28 per cent saying they did not know when they would hear.

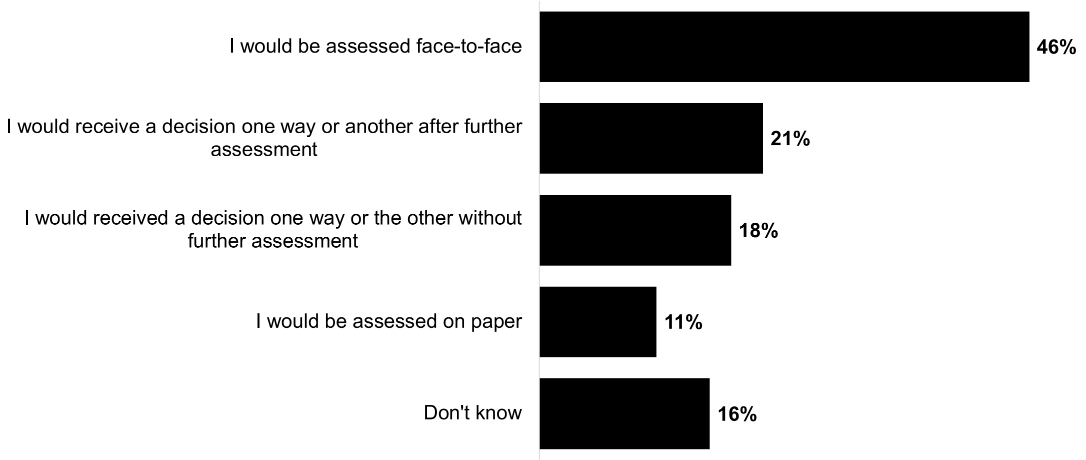
Knowledge about the assessment process was also low, suggesting a high degree of uncertainty about the next stage in the claims process. Under half of claimants expected a face-to-face assessment (46 per cent), despite the fact that the majority of claimants are required to be assessed face-to-face[21]. Just over one in five, correctly, expected a decision to follow after an assessment (21 per cent). However, just under one in five (18 per cent) expected a decision without an assessment at all which, given the less common circumstances in which this would be the case, is likely to be an incorrect assumption for many. Some 16 per cent of claimants said they did not know what the next steps were.

---

[21] https://www.gov.uk/government/publications/personal-independence-payment-assessment-guide-for-assessment-providers/pip-assessment-guide-part-1-the-assessment-process

Figure 4.2

Understanding the next steps: face-to-face assessment



Base: All participants in wave one who had completed their PIP application form (1022)

Please note that more than one response could be given to this question

Question wording: D31. What do you expect will be the next steps in the process after completing and returning the form?

Expectations varied to some degree between different claimant types in the survey: 54 per cent of new claimants expected a face-to-face assessment, compared to 40 per cent of those in the full PIP roll-out category and 37 per cent of reassessment cases. This could be because those previously claiming Disability Living Allowance (DLA) anticipated a similar process for PIP with no requirement for an assessment. Indeed, 23 per cent of people in the full PIP roll-out group expected to receive a decision without assessment, compared to 13 per cent of new claimants.

This low level of knowledge about the assessment stage could be because claimants had not yet reached this stage in the claims process – as discussed previously, the wave one sample population was drawn from people who had received a form but not yet attended an assessment or received a final decision. As such, their focus may have been on the form and not the next steps in the process.

This is corroborated by findings from the second wave of the research (discussed in more detail in Chapter 5). In this wave, claimants completing the survey were asked about the clarity of DWP communications around assessments, and the majority (89 per cent) agreed that DWP were clear that they might need to have a face-to-face assessment. This is significantly higher than the proportion expecting a face-to-face assessment in wave one.

However, both wave one and two qualitative interviews highlighted claimants' uncertainty about what the assessment would involve and how it would be conducted. Awareness of how long it would take to receive an appointment for an assessment was low, and most claimants were just waiting to hear about the next steps. Not knowing what to expect, which happened when claimants did not know if their application had been received or how long it would take to process it, was a source of worry and anxiety.

Even at this stage of the process, the wave one survey shows that there was greater knowledge and awareness about the mandatory reconsideration (MR) and appeals processes than about how long the decision process would take or of the likelihood of having a face-to-face assessment. Two-thirds (67 per cent) of claimants agreed that DWP made it clear that they could ask for their application to be reconsidered, while 59 per cent agreed that DWP made it clear that they could appeal if they were still unhappy with the decision.

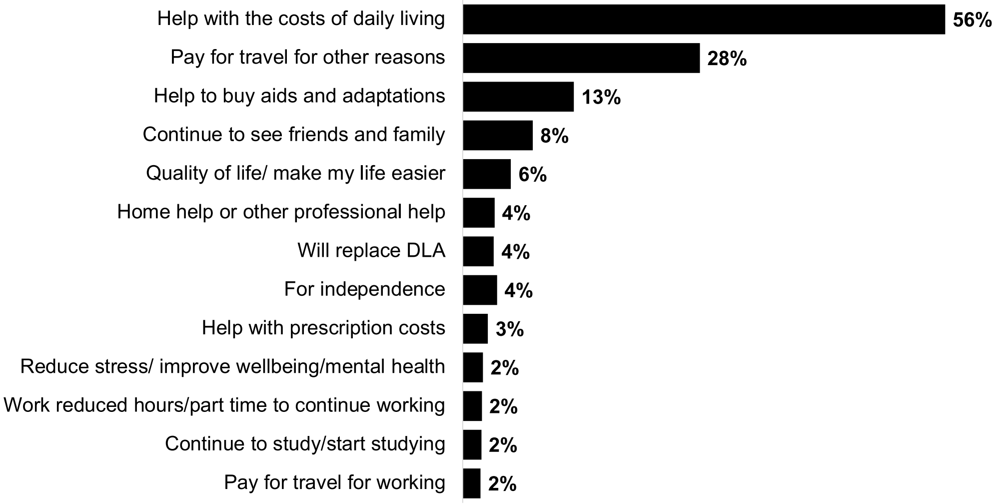
While claimants taking part in the survey were aware of the existence of MR at this stage, this does not necessarily translate into detailed knowledge about the process. This is discussed further in Chapter 10.

4.2 How an award of PIP would be used

Claimants interviewed in the wave one survey (before they knew the outcome of the application) were also asked what difference they thought receiving a PIP award would make to their lives. The most commonly cited difference was help with the costs of daily living (56 per cent). A further 28 per cent of claimants said that PIP would help them pay for travel for other reasons (while two per cent said it would help them to pay to travel to work). Other perceived impacts included those related to quality of life: eight per cent said it would allow them to continue to see friends and family, six per cent said it would improve their quality of life or make their lives easier, and four per cent said it would enable independence. A limited proportion thought PIP would enable them to work reduced hours or work part-time to help them to work (two per cent).

Figure 4.3

What difference a PIP award would make



Base: All participants in wave one (1106)

Please note that more than one response could be given to this question

Question wording: F2. What difference, if any, do you think receiving a PIP award will make to your life?

4.3 Chapter summary

Awareness of the next steps in the PIP application process was mixed. Most claimants in the survey knew how long they had to return the application form, but slightly fewer understood what would happen after they returned the form and knowledge of how long it would take for a final decision to be made about their claim was very low. There was also no consensus around when claimants expected to hear about the outcome of their application from DWP.

Knowledge about the assessment process among those in the survey was poor, with expectations about what would happen next not matching normal claimant pathways. The qualitative research revealed that this could be a source of anxiety for claimants. However, there was greater knowledge about the existence of the MR process and appeals process even at this early stage.

Claimants were most likely to say that PIP awards would make a difference to their lives by helping them with the costs of daily living. Few claimants thought that PIP would enable them to work reduced hours or work part-time.

Wave two: Introduction

The following chapters present the findings from wave two of the research. This wave explored experiences of the assessment stage. It covered information used by claimants, evidence provided and claimants' views of the face-to-face assessment and the initial award decision.

Mainstage quantitative fieldwork took place between 6 and 28 February 2017, with a pilot stage between the 23 and 24 January 2017. During the pilot stage 23 interviews were achieved.

Around one-third of the sample (388 participants) were *longitudinal participants* who had taken part in wave one. The remaining two-thirds of the sample (815 participants) were *new sample participants* who were new to the research. Data from wave one has also been used for longitudinal analysis (among the 388 longitudinal sample only), to look at the links between experiences of the initial application process and the assessment process.

Mainstage qualitative fieldwork took place between 20 February and 7 April 2017. A total of 50 interviews were achieved with claimants who had been through a face-to-face assessment, and had received a decision. Across participants in the qualitative research there was an even spread across PIP awards (a nil award, and an award for one or both for mobility or daily living) and claim type (full PIP roll-out, new claim, natural reassessment). Full sample details can be found in the technical report.

5 Information seeking and communication from the DWP

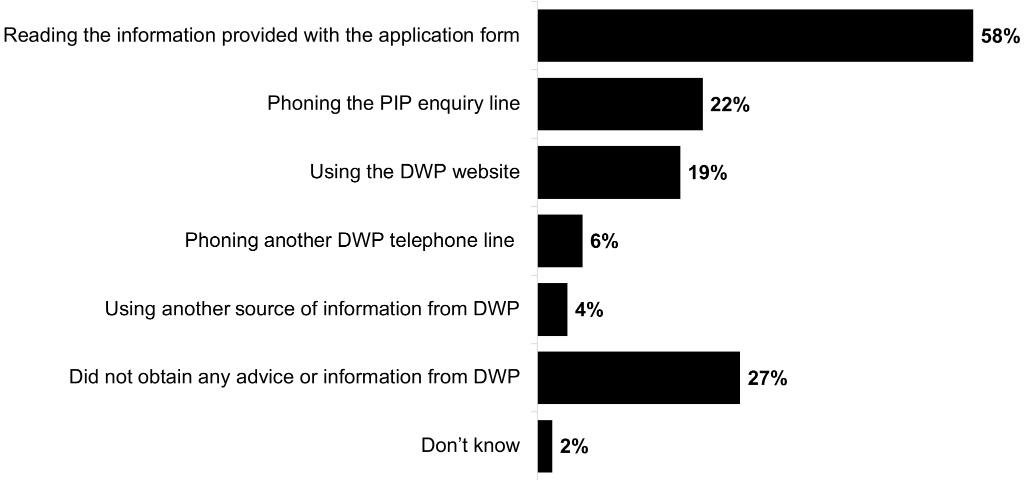
This chapter begins by looking at information and advice obtained from the Department for Work and Pensions (DWP) as well as the clarity of the Department's communications. It explores the types of advice or information obtained from DWP and the reasons for obtaining this information, before moving on to discuss the clarity of DWP communications and claimants' expectations of the face-to-face assessment. For a summary of the findings, please refer to section 5.4.

5.1 Use of advice or information from DWP about the assessment process

The survey asked claimants who had a face-to-face assessment whether they obtained advice or information from DWP about the assessment process (Figure 5.1). Over half (58 per cent) said they read the information provided with the application form, 22 per cent phoned the Personal Independence Payment (PIP) enquiry line and 19 per cent used the DWP website. Smaller proportions said they phoned another DWP telephone line (six per cent) or used another source of information from DWP (four per cent). Over one-quarter of claimants (27 per cent) said they did not obtain any advice or information from DWP about the assessment process.

Figure 5.1

Information from DWP about the assessment process



Base: All participants in wave two who had a face-to-face assessment consultation (1026)

Please note that more than one response could be given to this question

Question wording: B4. Did you obtain any advice or information from DWP about the assessment process in any of these ways?

Younger claimants were more likely than claimants as a whole, to say they used the DWP website, with around one-quarter (24 per cent) of those under 40 obtaining information this way (compared to 19 per cent overall).

Those who were not awarded PIP after the initial claim process were less likely to have obtained advice or information from DWP about the assessment process. Around one-third (32 per cent) of this group did not contact DWP at all, compared to one-quarter (25 per cent) of those who were awarded PIP. Those who were awarded PIP were more likely to have used the DWP website (22 per cent compared to 15 per cent of those who did not get an award) or another DWP source (five per cent compared to one per cent) to get information about the process.

Claimants in the full PIP roll-out process were more likely to say they had read the information provided with the application form (65 per cent, compared to 57 per cent of new claimants and 53 per cent of reassessment cases).

The qualitative research found that the 'How your disability affects you' questionnaire and the letter inviting claimants to an assessment were the main sources of information about the assessment. Other non-DWP sources were also used, including word of mouth or the organisations that had supported claimants during the earlier stages of the process (for example in completing the 'How your disability affects you' questionnaire).

The qualitative research also found that claimants tended to do very little active seeking of information and advice about the assessment process.

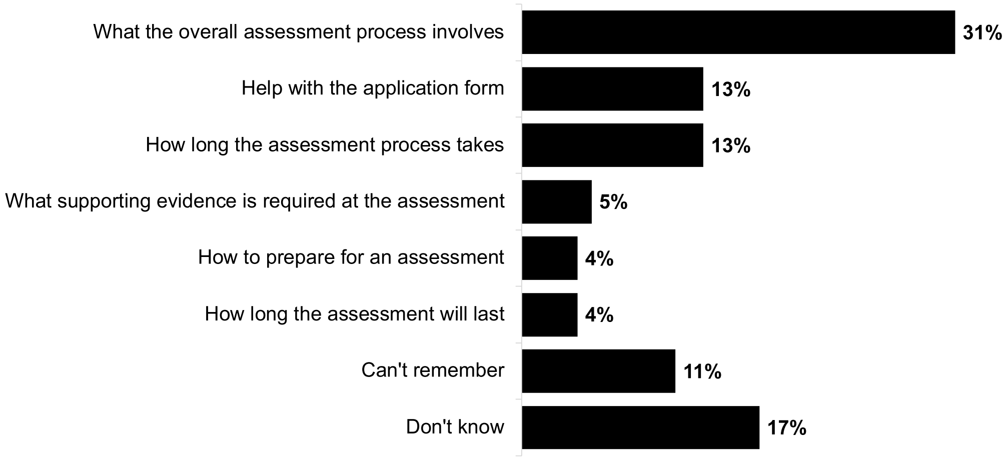
> *"No I didn't [seek or receive guidance or information], I just expected them to ask me questions and I tell them the truth and that basically be it."*
>
> Full PIP roll-out, nil mobility and enhanced daily living

It should also be noted that a small minority of claimants in the qualitative research lacked the ability to seek information and guidance about the assessment. They tended to have limited capacity (largely as a result of difficulties with memory and comprehension) to search for sources of information and guidance. Further, they tended to have limited access to family, friends and professionals who could support them in accessing this information.

Claimants in the survey who had obtained advice or information from DWP about the assessment process were asked what type of information they obtained (Figure 5.2). The most common type of information mentioned was what the overall assessment process involves (31 per cent). Thirteen per cent of claimants said they got help with the application form or found out how long the assessment process takes, while smaller proportions obtained information about the face-to-face assessment itself (five per cent about what supporting evidence is required, four per cent about how to prepare, and four per cent about how long it would last).

Figure 5.2

Types of information sought from DWP



Base: All participants in wave two who obtained advice or information from DWP (724). Mentions of 4% and over

Please note that more than one response could be given to this question

Question wording: B6. What type of information or advice did you obtain from DWP?

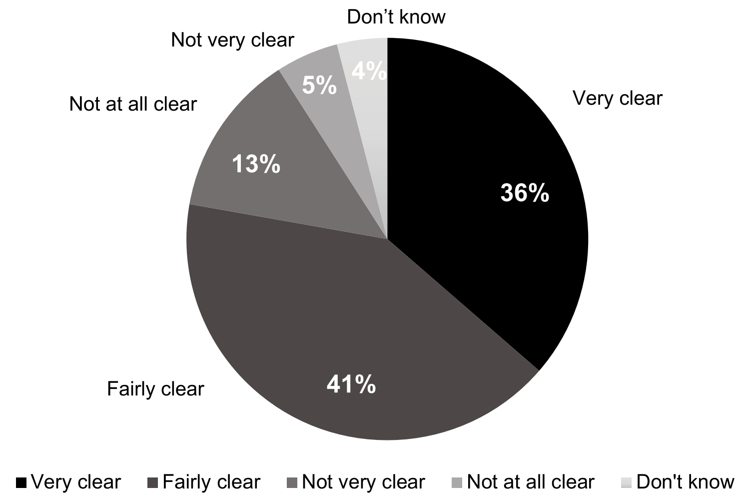
5.2 Clarity of DWP advice or information about the assessment process

5.2.1 Clarity of DWP information in general

The majority of survey claimants who obtained advice or information from DWP about the assessment process found the information they received was clear (Figure 5.3). Over three-quarters (77 per cent) said the information was clear, while fewer than one-fifth (18 per cent) did not find the information clear.

Figure 5.3

Clarity of DWP information about the assessment process



Base: All participants in wave two who obtained advice or information from DWP (724)

Question wording: B7. How clear or not was the information you got from DWP about the assessment process?

Claimants who received a PIP award were much more likely to think the information they received from DWP was clear than those who did not (86 per cent compared to 59 per cent).

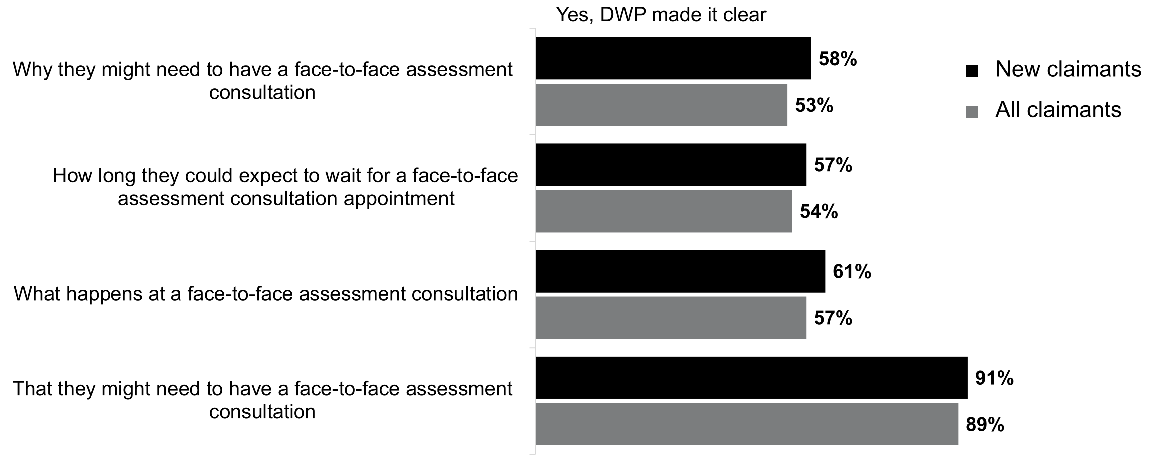
5.2.2 Clarity of DWP communications about the specific aspects of the assessment

Nearly all claimants in the survey agreed that DWP made it clear to them that they might need to have a face-to-face assessment (89 per cent). There was less clarity about other specific information relating to the face-to-face assessment, although a majority still thought they were clear: 57 per cent agreed that DWP made it clear what happens at a face-to-face assessment, 54 per cent agreed that DWP made it clear how long they could expect to wait for an appointment after submitting their application, while 53 per cent agreed that DWP made it clear why they might need to have a face-to-face assessment.

As shown in Figure 5.4, new claimants were more likely than claimants as a whole to think DWP's communications were clear for each measure.

Figure 5.4

Clarity of DWP communications overall and for new claimants



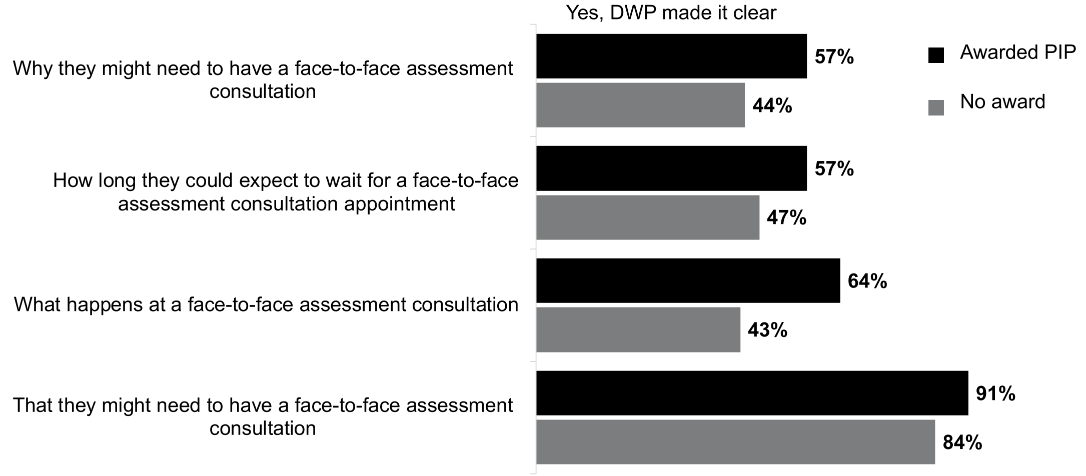
Base: All participants in wave two who had a face-to-face assessment consultation (1026), all new claimants in wave two who had a face-to-face assessment consultation (524)

Question wording: B16. Did DWP make it clear or not … [statements summarised in the figure above].

As shown in Figure 5.5, claimants who were awarded PIP were more likely than those who were not awarded PIP to agree that DWP communications were clear.

Figure 5.5

Clarity of DWP communications by PIP award



Base: All participants in wave two who had a face-to-face assessment consultation and were not awarded PIP (335), all new claimants in wave two who had a face-to-face assessment consultation and were awarded PIP (674)

Question wording: B16. Did DWP make it clear or not …[statements summarised in the figure above].

Claimants who attended or were invited to a face-to-face assessment were also asked if DWP made it clear that they could bring someone to the face-to-face assessment with them. Awareness of this was high with 87 per cent agreeing, including 71 per cent *strongly* agreeing. Claimants were also asked whether they knew who to contact if they needed to ask questions or rearrange appointments. Four-fifths of claimants (82 per cent) agreed including 56 per cent who *strongly* agreed that they knew who to contact.

The qualitative research showed that claimants tended to be made aware of the requirement to attend a face-to-face assessment when they registered their claim, and that the information they received from DWP after that point reiterated it.

> *"They [DWP] do keep you well-informed, to be fair. She [person at DWP] told me that I may need an assessment or may not. I may need to go somewhere or somebody may need to come to my house…so I was well informed."*
>
> New claim, attended assessment but not had outcome

Those who were surprised at being invited to a face-to-face assessment were usually former DLA claimants who knew that the PIP application process usually involved a face-to-face assessment but assumed they would automatically be entitled to PIP:

> *"I had been on mobility so many years and I had a letter which said I had got it for life and I knew years ago I wasn't going to improve...so I was a bit surprised [to be invited for a face-to-face assessment]."*
>
> Full PIP roll-out, no award

While the qualitative research found that DWP communications were clear around the practicalities of the assessment process (e.g. when and where the assessment would take place; that claimants could take someone else to the assessment with them and the number to call if they needed to reschedule), it also highlighted that claimants would have liked more information on why they were being asked to attend a face-to-face assessment and what to expect on the day. Claimants suggested it would have been helpful to know what type of health professional they would be meeting, what format the meeting would take (e.g. interview style) and roughly what they would be asked about. Uncertainty around the assessment sometimes generated worries or anxiety about what was going to happen, especially for claimants with mental health conditions.

> *"I would have like to know in a nutshell what was going to happen…they could have given a bit more of a heads up on what to expect."*
>
> New claim, enhanced mobility and standard daily living

A minority of claimants, in the qualitative research, sought additional clarity around what would happen during the face-to-face assessment consultation through sources of information outside DWP. These sources included:

- Charity websites specific to the claimants' illness or disability.
- Websites focussed on the rights of people claiming benefits, such as 'Fightback4Justice', 'Benefits and Work' and 'Citizens Advice'.
- Online disability forums and those linked to support websites. For example, the 'Benefits and Work' website also has a forum.

These sources of information tended to be described as more comprehensive than the information provided by DWP because they provided more detail about what to expect during the assessment.

> *"When you go on the government website they give you information about who can claim but they don't actually tell you what the assessment will be and what they will ask you to do."*
>
> New claim, standard mobility and daily living

5.3 Expectations about the process

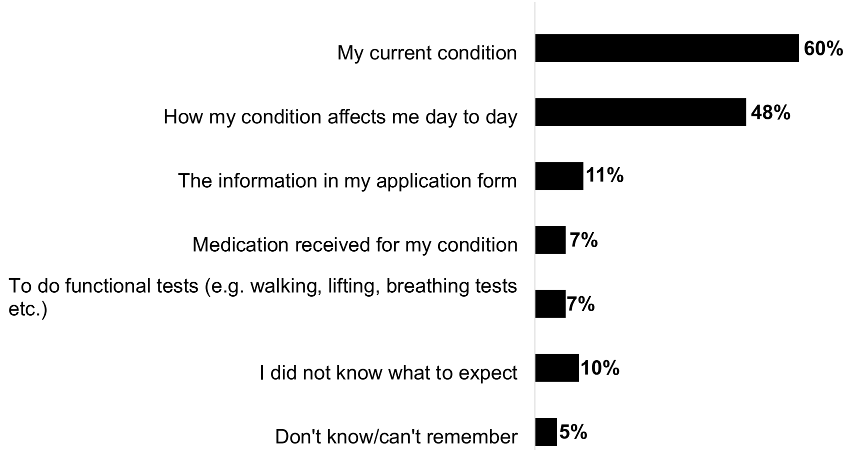
Claimants in the survey were asked how long it took for them to receive an appointment relative to their expectations. Around half of claimants (48 per cent) said it took about the time they expected, with around one-third (31 per cent) saying the appointment was sooner than they expected, and 13 per cent saying it was later than expected.

Claimants assessed by Independent Assessment Services (IAS) were more likely than those assessed by Capita to say it was sooner than expected (33 per cent compared to 24 per cent).

Claimants were asked what they expected to happen during the assessment, which is a functionality assessment (Figure 5.6). The majority said they expected to be asked about their current condition (60 per cent), with just under half (48 per cent) saying they expected to be asked about how their condition affects them day-to-day (which is the main purpose of the assessment). Around one in ten (11 per cent) said they expected to be asked about the information in their application form, with a smaller proportion saying they expected to be asked about the medication they take or to do functional tests (both seven per cent). One in ten claimants (10 per cent) reported that they did not know what to expect at the face-to-face assessment.

Figure 5.6

What claimants thought they would be asked about during face-to-face assessment



Base: All participants in wave two who had a face-to-face assessment consultation (1026). Mentions of 5% and over

Please note that more than one response could be given to this question

Question wording: B17. What did you expect to be asked during the face-to-face assessment consultation?

The qualitative research found that DWP communications around what would happen at the face-to-face assessment did not allow claimants to form a clear picture of what the assessment would involve. As a consequence, expectations about the face-to-face assessment tended to be based on assumptions about the process and previous experience of other benefit claims. The exception to this was claimants who had sought additional information from sources outside of DWP. One particular assumption many claimants made was that the assessment would involve a medical assessment of their condition(s). These claimants often wrongly assumed that the face-to-face assessment would be conducted by a doctor or health professional who was familiar with their condition and that the questions asked would be specific to their condition, or the difficulties they had outlined in their PIP application form.

5.4 Chapter summary

The quantitative research found that claimants who sought information or advice from DWP about the face-to-face assessment process sought this from a variety of sources, but were most likely to use information from the application form, which was already available to them. The qualitative research with claimants showed that claimants did not generally feel they needed to gather additional information or advice, beyond what they already had. Claimants stated that the information or advice they already received had come through word of mouth or from the organisations that had supported them, and so they did not seek any more advice or information.

In the survey, claimants were asked what type of advice or information they sought from DWP relating to the face-to-face assessment or application form. Those who sought advice or information were most likely to ask about processes relating to the face-to-face assessment (including what it involved overall and how long it would take) with some also asking for help with the application form. Over three-quarters of those who sought advice or information from DWP thought that the information they were provided with was clear.

Nearly all claimants who had a face-to-face assessment agreed that DWP made it clear to them that they might need to have one. There was less clarity about other pieces of information relating to the face-to-face assessment. The qualitative work also found that claimants were clear that they would need to undertake a face-to-face assessment but the practicalities of doing so were not so well understood. In particular, there was less understanding of why they needed to have a face-to-face assessment and what to expect on the day.

6 Pre-assessment

This chapter covers submitting evidence for the face-to-face assessment, including claimants' knowledge about evidence, their use of evidence and the reasons for supplying it at this stage in the process. It also covers the convenience of the location and time of the assessment offered, whether changes were made to the appointment and issues relating to the accessibility of the assessment venue. The final section concerns preparations made for face-to-face assessments by claimants. For a summary of the findings, please refer to section 6.3.

6.1 Evidence

6.1.1 DWP information about evidence

Over half of survey claimants agreed that the Department for Work and Pensions (DWP) made it clear that they could take additional supporting evidence to their face-to-face assessment (58 per cent), while one-third disagreed (34 per cent) and eight per cent did not know. Those who had been awarded Personal Independence Payment (PIP) were more likely than those who had not been awarded to agree that DWP had made it clear they could take additional evidence to their face-to-face assessment (66 per cent and 42 per cent respectively).

6.1.2 Taking evidence to the face-to-face assessment

Claimants taking part in the survey were asked about whether they took additional supporting evidence to their face-to-face assessment. For this question claimants reported on evidence they had previously submitted with their application and brought along to the face-to-face assessment for reference, as well as new evidence which they presented for the first time at the face-to-face assessment.

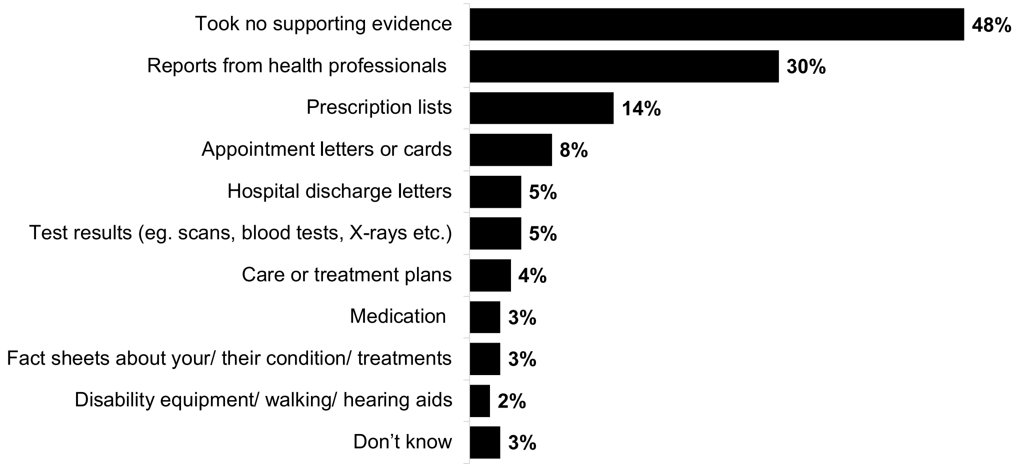
Around half of claimants said they did not take any supporting evidence to their face-to-face assessment (48 per cent). Full PIP roll-out claimants were less likely than claimants as a whole to report taking evidence to their face-to-face assessment (56 per cent said they took none compared to 48 per cent overall). Those who were not awarded PIP were also less likely to have taken evidence to their face-to-face assessment (53 per cent took none compared to 45 per cent of those awarded PIP).

Of all claimants who had a face-to-face assessment, the evidence taken to their face-to-face assessment included reports from health professionals (30 per cent), prescription lists (14 per cent), appointment cards or letters (eight per cent), hospital discharge letters (five per cent) and test results (five per cent) as well as a wide range of other types of evidence mentioned by fewer than five percent of claimants (Figure

6.1). Those who were awarded PIP were more likely to say they brought reports from health professionals (34 per cent) and care or treatment plans (five per cent), than those who had not been awarded PIP (24 per cent brought reports from health professionals and three per cent brought care or treatment plans).

Figure 6.1

Supporting evidence: What was taken to assessment



Base: All participants in wave two who had a face-to-face assessment consultation excluding a small number of cases not asked this question owing to a routing change (1007). Mentions of 2% and over

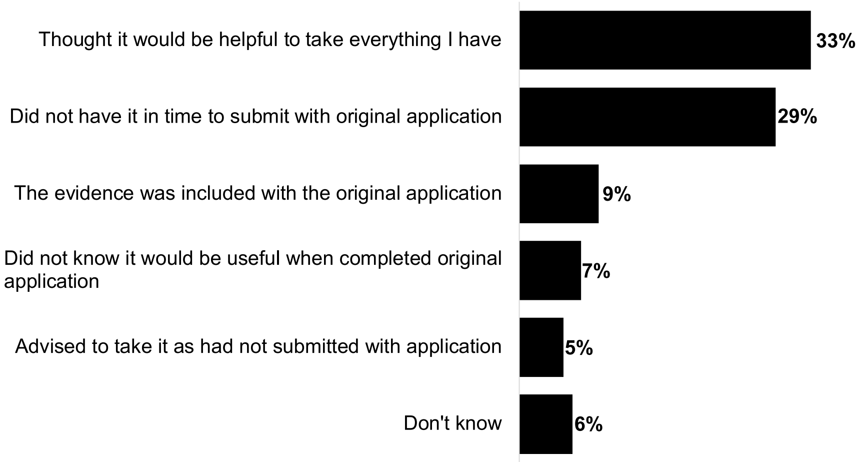
Please note that more than one response could be given to this question

Question wording: D14: What, if any, additional supporting evidence did you take to the face-to-face assessment consultation?

The main reasons for bringing this evidence to the face-to-face assessment were that they thought it would be helpful to bring everything just in case (33 per cent), they did not have time to submit it with the original application (29 per cent), they did not know it would be useful when they submitted the original application (seven per cent) and they were advised to take it to the face-to-face assessment (five per cent) (Figure 6.2). Additionally, nine per cent commented that the evidence had been submitted with the original application (confirming that this was not always additional evidence).

Figure 6.2

Reasons for taking supporting evidence to face-to-face assessment



Base: All participants in wave two who took additional supporting evidence (495). Mentions of 5% and over

Please note that more than one response could be given to this question

Question wording: D15: Why did you take this additional supporting evidence to the face-to-face consultation and not include it with the original application?

Those who had a face-to-face assessment consultation were asked whether there was evidence they wanted to bring to the assessment but did not. While the majority reported that there was not (76 per cent), around one-fifth (21 per cent) said there was evidence they wanted to take but did not at this stage.

The qualitative research found a range of reasons why claimants did not bring any additional evidence to their assessment, which included:

- Having already provided everything that was available to them at the earlier stages.
- A perception that the physical and verbal evidence they would provide at the face-to-face assessment would be enough.
- Additional evidence not being available in time.
- Not being aware that they could provide evidence at that point.
- An assumption that DWP would gather the evidence as part of the process of assessing their claim, by contacting the health professionals whose contact details claimants had provided in their ‘How your disability affects you’ questionnaire.

Those who provided additional evidence in the qualitative research tended to be claimants who had spent time building their awareness of PIP (reading letters in full, actively looking for evidence to support their claim) or had been advised to do so by someone supporting them (usually someone specialising in benefit applications).

6.1.3 Longitudinal findings related to evidence

Analysis of data from claimants who took part at both wave one and wave two shows that submitting evidence with the application form is related to whether claimants brought additional evidence to the face-to-face assessment. Among claimants who reported that they submitted evidence to support their original application in wave one, 54 per cent (131 claimants) reported taking (additional) evidence to their face-to-face assessment in wave two, compared with 38 per cent (17 claimants) who said they did not submit evidence with their original application. Of those who had not submitted evidence originally, 60 per cent (27 claimants) did not bring evidence to the face-to-face assessment either, thus not submitting evidence at any stage of the process[22].

Claimants were also asked at wave one whether there was evidence they wanted to provide when submitting their form but were unable to. Of those who had wanted to submit evidence with their application form but could not, 61 per cent brought additional evidence to their face-to-face assessment. However, 28 per cent of those who had evidence that they wanted to submit with the original application form but could not, also reported that there was evidence they wanted to take to the assessment and did not. Thus, for a minority of claimants, problems with accessing the evidence they needed persisted throughout the claims process.

One-third (33 per cent) of claimants had evidence they wanted to submit but did not at either the application stage or at the face-to-face assessment stage.

6.2 Preparing for the assessment

6.2.1 Location and timing of the assessment

Claimants taking part in the survey were asked about the suitability of the face-to-face assessment time and location initially offered and whether they were given enough warning of the appointment time (Figure 6.3). The majority agreed that the appointment offered was convenient (81 per cent) and they were given sufficient warning of it (88 per cent). There was also a high level of agreement that the interview was offered in a building that was accessible (83 per cent). While the majority agreed that the face-to-face assessment was offered in a place they could get to easily (65 per cent), around one-third (31 per cent) disagreed, including 18 per cent who strongly disagreed they could get to the face-to-face assessment venue easily.

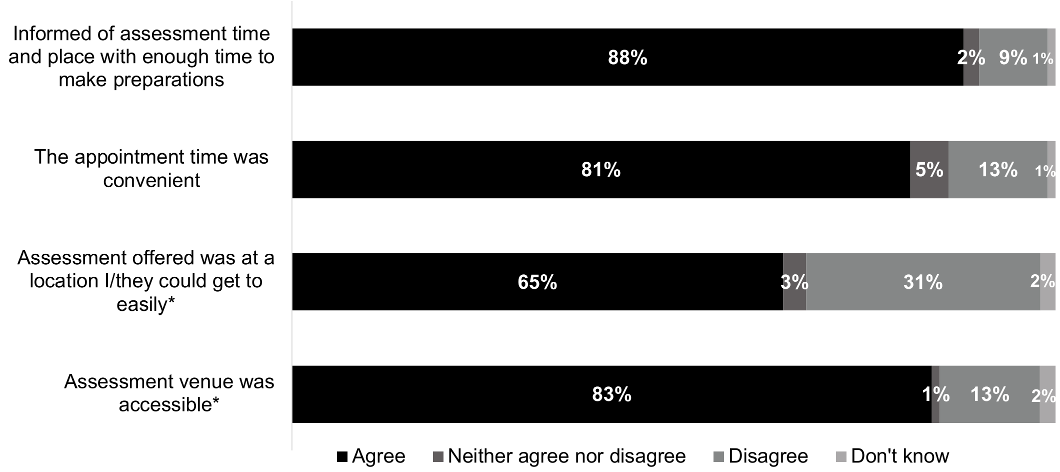
Those who were awarded PIP were more likely than those who were not awarded PIP to agree that the time was convenient (82 per cent compared to 77 per cent), they were given enough warning of the appointment (90 per cent compared to 83 per cent) and that they could get to the location easily (68 per cent compared to 58 per cent).

---

[22] Please note that due to the small number of longitudinal participants able to answer these questions, results are given as numbers of claimants in addition to percentages. Please treat results with caution.

Figure 6.3

Convenience and accessibility of face-to-face assessment offered



Base: All participants in wave two who had a face-to-face assessment consultation or were invited to one (1041)

*Base: All participants in wave two who had a face-to-face assessment consultation or were invited to one and who did not have a face-to-face assessment consultation at home (758)

Question wording: C3: To what extent do you agree or disagree with each of the following statements. Statements summarised in the figure above.

The qualitative research also found that, on the whole, claimants reported being given sufficient notice of their assessment date and time.

> *"It was ample time. I think it was about two or three weeks."*
>
> New Claim, successful, nil for mobility and standard for daily living

However, last minute rescheduling of assessment appointments by assessment providers occasionally happened, which created frustrations. For those who needed time to physically prepare to travel to, and attend, the assessment centre, this last minute rescheduling had a substantial impact on them and on their experience of the assessment process.

The qualitative interviews shed some light on why some claimants found the location inconvenient. Reasons primarily focused on the location being a long distance from their home (e.g. over an hour's drive), the lack of parking places close to the assessment centre (which was an issue for those with mobility problems), and the difficulty and cost of reaching the assessment centre by public transport (which was an issue for those with mobility problems, chronic pain, low energy and/or anxiety).

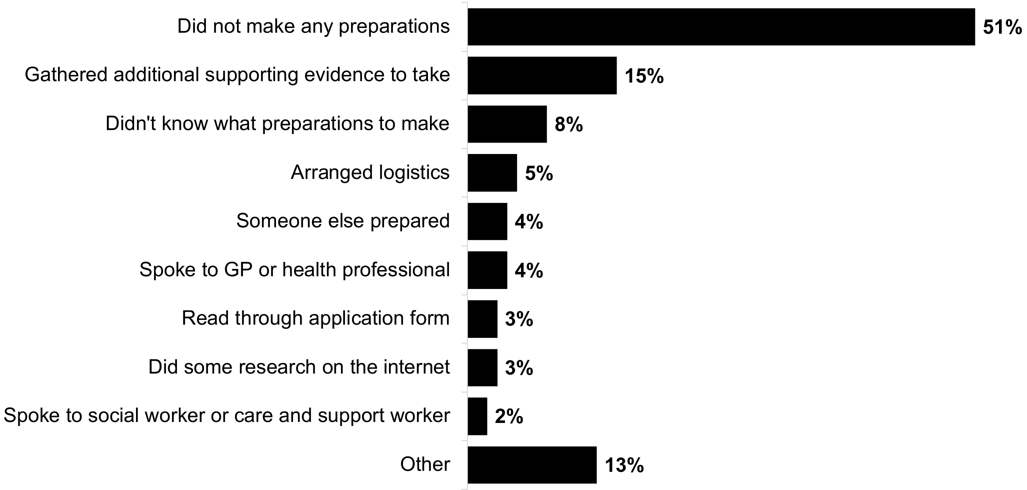
Claimants in the qualitative research who faced these types of difficulties suggested that they would have preferred to have had a home assessment. It was felt that this would have reduced the practical difficulties with getting to the assessment and would have helped them to feel more relaxed and comfortable. This view was certainly reflected by claimants who were assessed at home. However, despite this preference for a home assessment among a number of claimants, awareness of the availability of home assessment was patchy, with many claimants unable to recall reading any information about home assessments in the material they received from DWP.

6.2.2 Preparation for the face-to-face assessment consultation

As shown in Figure 6.4, around half of survey claimants (51 per cent) reported that they did not make any preparations in advance of the face-to-face assessment, while eight per cent (some overlapping with the 51 per cent) said they did not know what preparations to make. Fewer claimants were not well enough to prepare (one per cent) or had the preparations made by someone else (four per cent). When claimants were asked what preparations they had made, the most common type of preparation reported was gathering additional supporting evidence to take with them (15 per cent), followed by arranging logistics e.g. how to get there (five per cent), speaking to a GP or health professional (four per cent), reading the application form (three per cent) or doing some internet research (three per cent). In addition, a wide range of other preparations were made, each by two per cent or less of the sample. It should be noted that about half of claimants took evidence to their face-to-face assessment (section 6.1.2) and so some of those who reported making no preparation had in fact gathered evidence.

Figure 6.4

Preparations made in advance of assessment



Base: All participants in wave two who had a face-to-face assessment consultation (1026). Mentions of 2% and over

Please note that more than one response could be given to this question

Question wording: C13: What preparation, if any, did you or they do in advance of the face-to-face assessment consultation?

New claimants were more likely than full PIP roll-out claimants to say they gathered supporting evidence (17 per cent compared with 11 per cent). There were no significant differences in preparation behaviour by whether or not PIP was awarded.

When asked about what preparation, if any, they made ahead of their assessment, it was common for claimants in the qualitative research to predominantly discuss the arrangements they made to travel to the assessment location, with some doing a read through of their application form in advance to ensure this was fresh in their minds.

There was little evidence in the qualitative research of claimants taking steps to familiarise themselves with the assessment process and prepare answers to potential questions. In fact, there was a general lack of clarity among participants around whether, what and how they should prepare for their assessment – they did not recall reading this in the information they had received about PIP. In some cases, this lack of preparation was deliberate, to ensure that they presented an authentic picture of their condition and the impact it had on their life, with the underlying thought that if they did too much to prepare, their responses would look rehearsed and may not be believed. These claimants believed that their condition(s) served as sufficient evidence of their need for PIP:

> *"Why would I prepare? To prepare for it would mean that I was pretending…I'm not pretending. As you see me is who I am."*
>
> New claim, no award

6.3 Chapter summary

Over half of claimants were not aware they could bring additional evidence to the assessment, and almost half did not take any evidence with them. Those who did take additional evidence were most likely to do so either because they thought they should take everything or because they did not have it with them at the time of their initial application. Claimants in the qualitative research rarely mentioned bringing any additional evidence with them, as they either felt that they had provided everything before or that their physical and verbal evidence would be enough.

Most claimants were happy with how long in advance they were told about the location and time of their face-to-face assessment. The majority also agreed that the timing of their face-to-face assessment was convenient, and that the venue was accessible but claimants were less likely to agree that the location of the assessment was convenient. The qualitative research also identified that claimants found the location difficult to get to. Additionally, qualitative claimants who had their interview rescheduled at the last minute found this frustrating – particularly those who needed some time to physically and mentally prepare for the assessment. This led some to feel that the process was against them from the beginning.

In the quantitative research it was found that half of claimants did nothing to prepare for their face-to-face assessments, with some claimants stating that they did not know what preparations to make. This relative lack of preparation was also highlighted in the qualitative research, with preparation mostly involving planning how to get to the assessment venue or reading through the application form, which was also brought up in the quantitative research by a small number of claimants. The quantitative research found that the most common way for claimants to prepare was by gathering additional evidence.

7 The assessment

This chapter presents claimants' experiences of attending the face-to-face assessment. It looks at the support claimants took to their assessment and reasons for this, before moving on to explore their views on the actual assessment, including the questions they were asked, the functional test, and the opportunity to explain how their disability affects them. It also explores views on the assessor, particularly in relation to whether claimants felt as though they were treated with respect and dignity and listened to. It finishes by summarising the overall experience of the face-to-face assessment. For a summary of the findings, please refer to section 7.3.

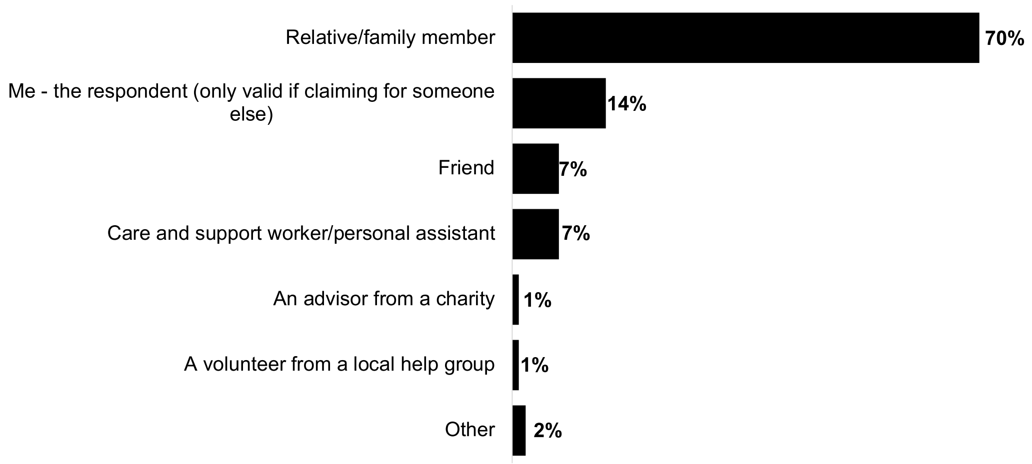
7.1 Support

Around two-thirds of claimants (67 per cent) taking part in the survey reported that they took someone with them into the face-to-face assessment. Those who were not awarded Personal Independence Payment (PIP) were less likely to say they had taken someone to the assessment than those who were awarded PIP (62 per cent compared with 70 per cent).

Where claimants took someone into the face-to-face assessment they were most likely to take a relative or family member (70 per cent), with those who were making a new claim slightly more likely to do this (Figure 7.1). Some said they took the person who was making the claim on their behalf with them (14 per cent), and seven per cent said they took a friend or care worker. Legal representatives, advisors from a charity group or volunteers were also reported to have been taken by a minority of claimants.

Figure 7.1

Who claimant took to the face-to-face assessment consultation



Base: All participants in wave two who took someone into the face-to-face assessment consultation (689). Mentions of 1% and over

Please note that more than one response could be given to this question

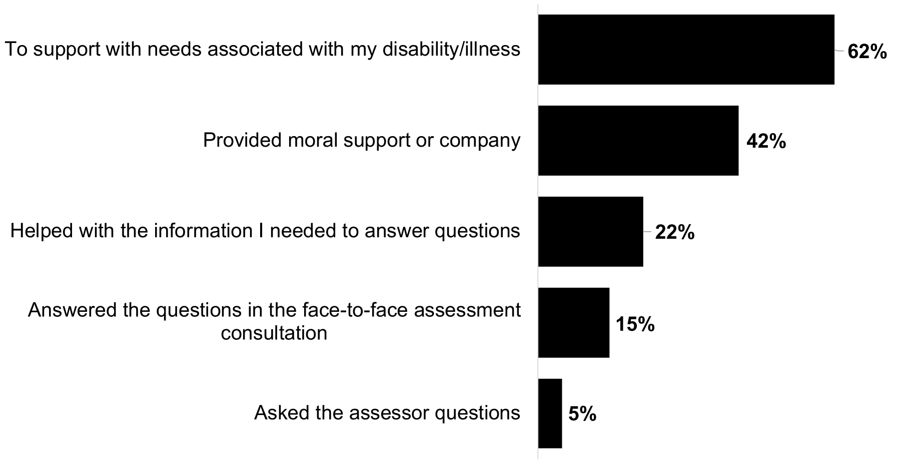
Question wording: D2: Who did you take into the face-to-face assessment consultation?

Claimants who took someone with them into the face-to-face assessment were asked why they did so. There were a wide variety of reasons and the most frequently cited were for support with needs relating to their disability (62 per cent) or for moral support (42 per cent). Those who were making a new claim were slightly more likely to say they took someone for moral support (47 per cent compared to 42 per cent overall).

Around one-fifth (22 per cent) said they took someone with them to provide information that was needed to answer questions while 15 per cent took someone to answer questions (Figure 7.2). A minority of claimants cited other reasons including taking someone with them to *ask* questions (five per cent), because they were their carer (four per cent), because they were driving them there (three per cent), that they were advised to take someone (one per cent), that they needed someone to help with the language barrier (one per cent) or to take notes (one per cent).

Figure 7.2

Reasons claimants took someone to the face-to-face assessment consultation room



Base: All participants in wave two who took someone into the face-to-face assessment consultation (689). Mentions of 5% and over

Please note that more than one response could be given to this question

Question wording: D3: Why did you take someone with you into the face-to-face assessment consultation room?

The qualitative research found that claimants who felt that the assessment had gone fairly smoothly, tended, in part, to attribute this to being able to bring someone with them. The physical and emotional support that these helpers provided was considered essential when it came to answering questions, particularly where claimants had mental health conditions or learning disabilities. A number of claimants did not have the capacity to answer questions without support (or felt they did not), either because they did not have the memory or the ability to articulate their experience clearly. Consequently, they relied heavily on their supporter during the assessment. Occasionally, the person who accompanied the claimant was also asked to translate some questions and responses, where the claimants did not speak or understand English well enough.

Awareness that claimants could take someone with them to the assessment was very high in the qualitative research. The majority of claimants who did not take someone spoke of feeling comfortable attending the assessment alone, or of not having anyone around them available to attend with them on that day. Some claimants also spoke of not feeling comfortable talking about the intricacies of their condition(s) in front of others. Indeed, there were claimants who suggested that they would have liked to have known the amount of detail they were expected to go into about their condition in advance, as they would not have invited friends and family members to attend, had they known this.

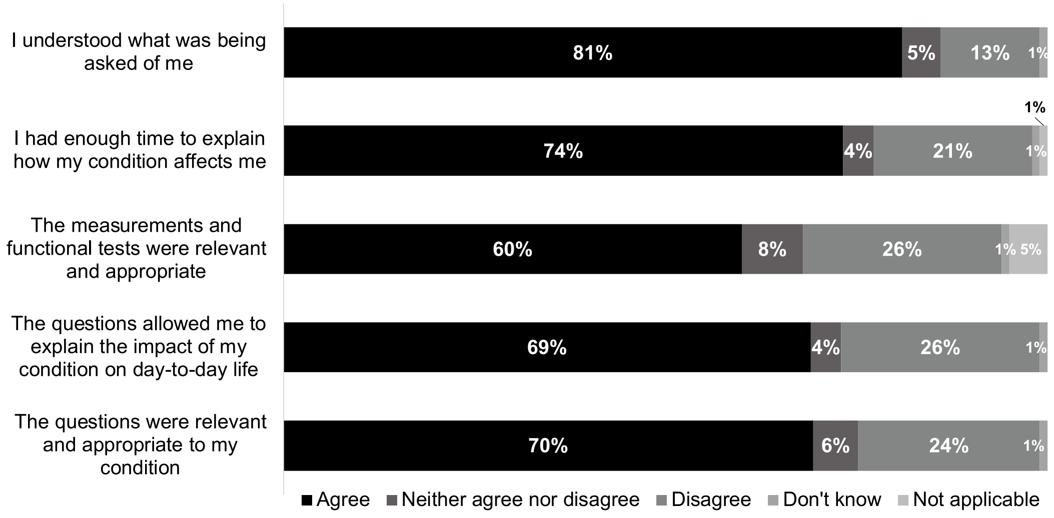
7.2 What happens during the assessment

7.2.1 Overall reported experiences of the face-to-face assessment

Claimants in the survey who had a face-to-face assessment were asked a series of statements about their experiences of the assessment itself (Figure 7.3). Overall, the findings about their experiences were positive, with a majority agreeing with each statement. Eight in ten claimants (81 per cent) felt that they understood what was being asked of them. Similarly, about three-quarters (74 per cent) agreed that they had enough time during the face-to-face assessment to explain how their condition affects them. Looking specifically at the questions that claimants were asked, 70 per cent thought that the questions were relevant to their condition and 69 per cent thought that they allowed them to fully explain the impact of their condition on their day-to-day life. However, a significant minority (around one-quarter of claimants) disagreed with these statements. Similarly, 60 per cent of claimants agreed that appropriate measurements and functional tests were carried out, but about one-quarter (26%) disagreed with the statement.

Figure 7.3

Experience: The content of the assessment



Base: All participants in wave two who had a face-to-face assessment consultation (1026)

Question wording: D5: To what extent you agree or disagree with each of the following statements about the face-to-face assessment consultation? Statements summarised in the figure above.

Claimants who did not go on to receive an award of PIP were less positive about all of these aspects of the face-to-face assessment than claimants who were awarded PIP. For example, 42 per cent of those not awarded PIP agreed that they were asked questions which were relevant and appropriate to their condition compared to 82 per cent of those awarded PIP, and 42 per cent agreed the questions allowed them to explain how their condition impacts their everyday life compared to 82 per cent of those awarded PIP.

The qualitative research highlighted a degree of frustration with the nature of the questions asked during the assessment among some claimants, who expressed dissatisfaction with being asked questions which they felt closely mirrored those asked in the 'How your disability affects you' questionnaire. The perceived similarity between the questions asked made them wonder about the purpose of the assessment. Others became suspicious about the motive behind the questioning, wondering if their story was being tested to try and catch them out and find inconsistences:

> *"They just asked about what was on the form. At one point I thought they were trying to trick me. I thought 'is she trying to see if I am lying about my illness?'"*
>
> New Claim, enhanced mobility and standard daily living

The repetition of questions also meant that the difficulties claimants had experienced when completing the 'How your disability affects you' questionnaire were also experienced at the assessment. For example, some felt that the questions were too focused on physical impairments or not relevant to their own conditions, that they did not take into account the fluctuating nature of their condition, or that that the questions did not always allow them to elaborate around how their condition affected them. This was particularly prevalent for claimants with a mental health condition or a condition affecting their behaviour, who raised similar concerns about the relevance of the functional tests.

> *"I came away feeling the questioning fell short of my expectations. The questions didn't let me give a true indication of what my life was like at all…the questioning didn't lead me in the right direction…"*
>
> New Claim, no award

> *"If they asked questions about the mental side of things, he'd be able to answer them and they'd have got more of an answer from him…physically he is able to do everything. It's mentally and emotionally that he struggles quite a lot."*
>
> Full PIP roll-out, no award

7.2.2 Role of the assessor

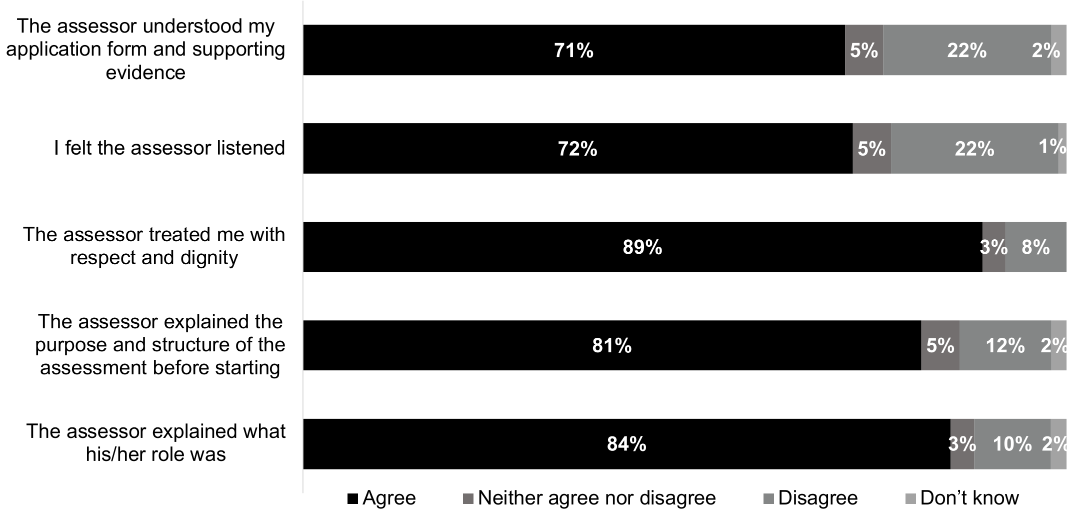
Claimants taking part in the survey were mostly positive about their experience of the assessor and the role they played during their face-to-face assessment.

The majority of claimants (71 per cent) agreed that their assessor had understood their application form and supporting evidence sent in advance correctly. Four in five (81 per cent) agreed that the assessor had explained the purpose and structure of the face-to-face assessment before starting, and a similar proportion (84 per cent) agreed that the assessor explained what his or her role was.

Once the assessment was underway, most claimants were satisfied with how they were treated by the assessor (Figure 7.4). They agreed overwhelmingly that the assessor treated them with respect and dignity (89 per cent), and most felt listened to during the face-to-face consultation (72 per cent).

Figure 7.4

Experience: The role of the assessor



Base: All participants in wave two who had a face-to-face assessment consultation (1026)

Question wording: D5: To what extent you agree or disagree with each of the following statements about the face-to-face assessment consultation? Statements summarised in the figure above.

Claimants' experiences of the role of the assessor were broadly consistent between assessment providers. The only exception was in relation to whether the assessor understood the application and supporting evidence sent in advance correctly, where claimants whose assessments were undertaken by Independent Assessment Services (IAS) were more likely to agree this was the case than those whose assessments were undertaken by Capita (73 per cent compared with 66 per cent).

As observed earlier, those who did not receive an award were far less likely to be positive about their experiences of the assessor. However, the differences between their views were particularly stark in relation to feeling listened to during the face-to-face assessment: 41 per cent of those with no award disagreed that they felt listened to compared with 13 per cent of those who were awarded PIP. Similarly, those who did not receive an award were more likely to disagree that the assessor had correctly understood their application form and supporting evidence sent in advance (40 per cent compared to 12 per cent of those who received an award).

The qualitative research highlighted some factors that shaped claimants' views about how they were treated by their assessor. Those who held positive views about their assessor described them as friendly and engaging, making eye contact, signalling that they were listening, asking claimants to expand on what they were saying and giving them adequate time to answer questions.

> *"She [the assessor] just introduced herself, said her name and the fact that she was a qualified paramedic. She also said that she would be going through the questions, I can't remember if she specified that she would be going through the form or if it would just be a chat. She was lovely, very bubbly. She was approachable and everything."*
>
> Full PIP roll-out, enhanced mobility and standard daily living

These interpersonal skills were considered key, and meant that these claimants felt less intimidated by the process and better able to open up to the person they were speaking to.

> *"She [the assessor] listened to my mum and me…we were able to say what we wanted, together…she spoke clearly. The questions were okay to answer…[the assessor] was not rude in any type of way…communication was good. She listened, she gave me a chance to explain."*
>
> New claim, enhanced mobility and standard daily living

Claimants felt that assessors who displayed these interpersonal skills were able to temper any frustrations with the questioning and enabled them to describe how their condition affected them in full and to provide additional information.

Claimants were also more likely to speak favourably of the assessor where they felt that the assessor had taken on board the comments of those supporting them (which was not always the case).

> "[Representative] *Just think the interaction, the fact that she was friendly and willing to interact with my daughter as well and take the opinion of the third party rather than just ignoring them. She was willing to listen and willing to listen to lengthy answers – it was more of a conversation."*
>
> Full PIP roll-out, enhanced mobility and standard daily living

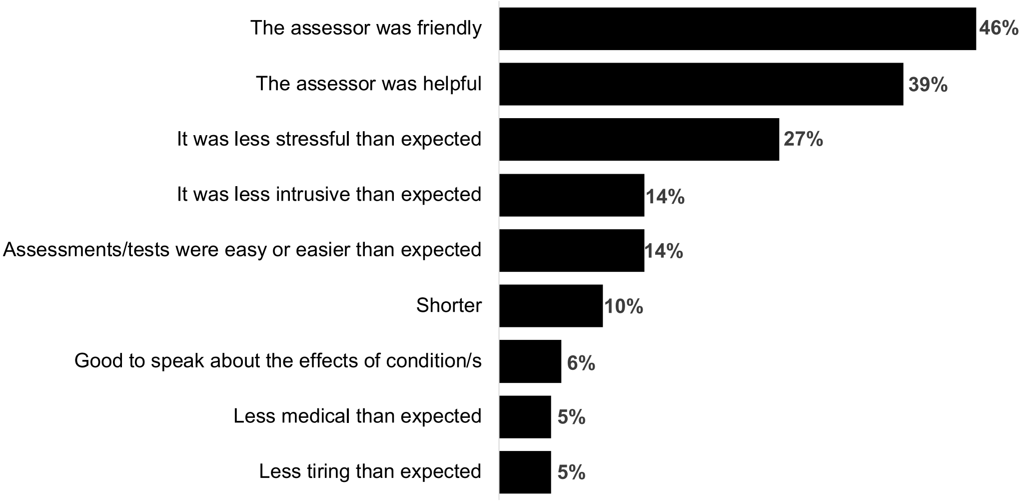
7.2.3 Overall experience compared with expectations

Under half (44 per cent) of claimants taking part in the survey said their experience of the face-to-face assessment was as they expected. Views of the remaining claimants were split, with around one-quarter who felt it was easier than expected, and one-quarter who felt it was more difficult than expected (both 26 per cent), and five per cent who said they had no opinion.

Those who found the experience easier or more difficult than expected were asked in what ways they had found the assessment easier or more difficult. Those who found the experience easier were most likely to say that this was because the assessor was friendly (46 per cent) or helpful (39 per cent) (Figure 7.5). Other reasons included the assessment being less stressful than expected (27 per cent), less intrusive or easier than expected (14 per cent each), or that the tests were shorter than they had anticipated (ten per cent).

Figure 7.5

Reasons claimants found the face-to-face assessment consultation easier than they expected



Base: All participants in wave two who found the face-to-face assessment consultation easier than expected (264). Mentions of 5% and over

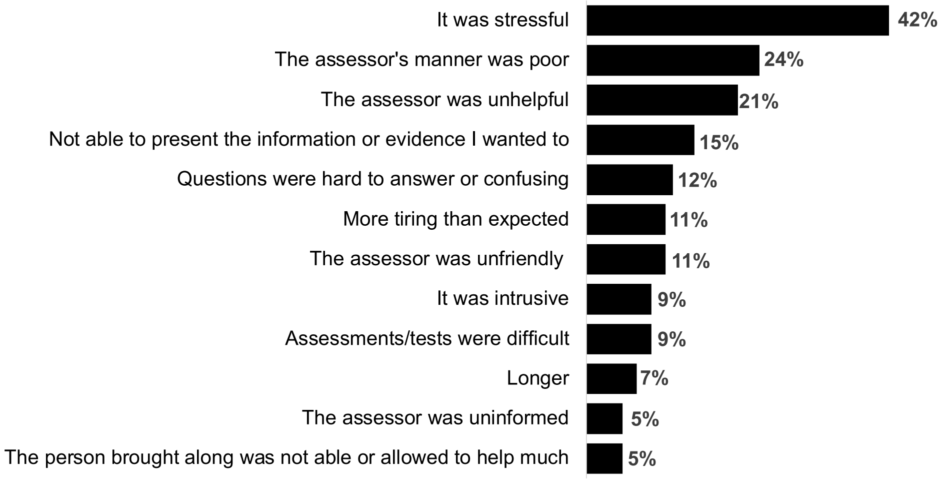
Please note that more than one response could be given to this question

Question wording: D23: In what ways was the face-to-face assessment consultation easier than you expected?

Of those who found the assessment more difficult than expected, 42 per cent said the assessment was stressful (Figure 7.6). Around one-quarter said their experience had been more difficult because the assessor's manner was poor (24 per cent) and one-fifth because the assessor was unhelpful (21 per cent). Other reasons included not being able to present the information or evidence they wanted to (15 per cent), the questions being hard to answer or confusing (12 per cent) or the process being more tiring than expected (11 per cent).

Figure 7.6

Reasons claimants found the face-to-face assessment consultation more difficult than they expected



Base: All participants in wave two who found the face-to-face assessment consultation more difficult than expected (266). Mentions of 5% and over

Please note that more than one response could be given to this question

Question wording: D22: In what ways was the face-to-face assessment consultation more difficult than you expected?

The qualitative interviews highlighted a number of factors as central in ensuring a good overall experience of the face-to-face assessment consultation. In particular, claimants were more likely to speak of a good experience where:

- The assessor had given them a clear overview of what would happen during the assessment.
- They found the assessor personable, friendly and understanding of their condition.
- They were given time to say everything they wanted to and they felt listened to by the assessor.
- Those supporting them had been given the opportunity to contribute.
- The questions and functional tests were perceived to be relevant to the claimant's condition.
- The assessment location was close to home.

> *"I'm not too sure if it was easier but it was better than I expected it to be. Almost unnervingly so because she was so friendly and so chatty, I was almost coming out thinking is she one of those people who can back stab afterwards. From reading her report it was very factual – there were no outright lies or contradictions, just purely what happened and what was said. I did come out thinking that was actually easier than I thought it would be."*
>
> Full PIP roll-out, enhanced mobility and standard daily living

7.2.4 Longitudinal findings for experience of the assessment

The link between the ability of claimants to explain the impact of their condition on the application form and at the face-to-face assessment was investigated by interviewing 388 longitudinal participants across the wave one and wave two stages of the PIP claims process. Of those who agreed that the application form (wave one) allowed them to explain how their condition affects them, 74 per cent (148 claimants) agreed that they were asked questions at the face-to-face assessment (wave two) which allowed them to fully explain the impact of their condition on their day-to-day life. In contrast, 45 per cent of those who did not think the form allowed them to explain how their condition affects them (33 claimants) thought they were able to explain this at their face-to-face assessment.

The analysis also showed that there were people who felt unable to explain the impact of their condition at both stages. Of those who disagreed that the form allowed them to explain how their condition affects them (wave one), 42 per cent (31 claimants) also disagreed that they were able to explain at the assessment (wave two). There was no relationship between ability to explain impacts of the condition at the face-to-face assessment and whether there was information on the form which was difficult to explain. Nor was there a significant relationship between the relevance of questions asked at the assessment and the relevance of the questions on the form or assistance required with completing the form.

7.3 Chapter summary

From the quantitative research it was clear that most claimants were satisfied with the experience of their face-to-face assessment. Most claimants expressed positive views about their experience of the assessor and the role that they played in their assessment, in both the quantitative and qualitative research. The qualitative research found that a positive perception of interactions with the assessor did much to temper frustrations with the questioning or concerns about the assessment.

The majority of claimants thought that the questions asked allowed them to explain the impact of their condition on their day-to-day life; however one-quarter disagreed. The qualitative research showed that there were claimants who felt that the questions asked were very similar to the ones in the ‘How your disability affects you’ questionnaire, making them feel as if it was designed to catch them out. Some felt the questions were not condition-specific and did not give them a chance to explain their condition; this was particularly problematic for those with mental health conditions.

There were mixed feelings around how claimants found the face-to-face assessment consultation overall in relation to their expectations. The main reasons claimants felt the assessment was easier than expected were relating to the assessor (being more helpful or more friendly than expected), with stress being the main reason claimants thought it was harder than expected.

8 Post-assessment

This chapter explores claimants' awareness of the steps following the face-to-face assessment. It also discusses clarity around the decision including understanding of how the decision had been made and how evidence supplied had been used. Finally, it explores the help claimants required to understand their decision letter and why this help was needed. For a summary of the findings, please refer to section 8.3.

8.1 Next steps after the assessment

8.1.1 What happens after the face-to-face assessment

The majority of claimants in the survey who had a face-to-face assessment agreed that the Department of Work and Pensions (DWP) made it clear that they did not need to do anything after the face-to-face assessment except wait for the decision (93 per cent), while six per cent felt DWP did not make this clear and two per cent did not know.

Two-thirds of claimants who had a face-to-face assessment (66 per cent) agreed that DWP made the timescale for receiving a decision after the face-to-face assessment clear.

8.1.2 The outcome of PIP applications

Of the claimants in this survey, 29 per cent received no Personal Independence Payment (PIP) award. The most common type of award was standard daily living (30 per cent), followed by enhanced daily living (22 per cent), enhanced mobility (21 per cent) and standard mobility (18 per cent). New claimants were more likely than reassessments and full PIP roll-out claimants to have received no award (37 per cent, 28 per cent and 17 per cent respectively). There was a difference in awards received by assessment provider with 40 per cent of those assessed by Capita receiving no award and 27 per cent of those assessed by Independent Assessment Services (IAS) receiving no award.

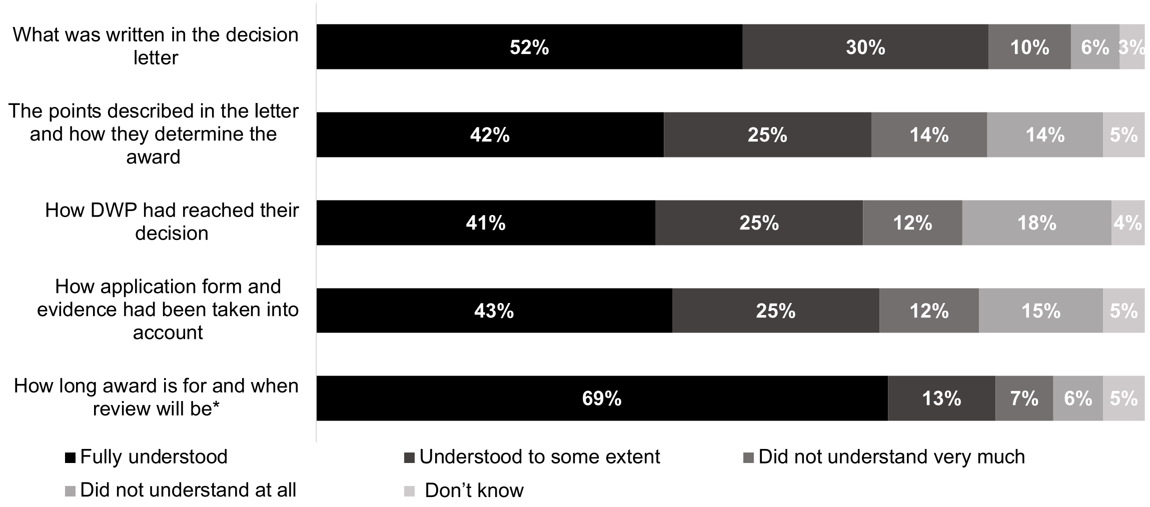
8.2 Understanding the decision

Claimants taking part in the survey were asked about their experiences of receiving a decision from DWP about their PIP claim. They were asked about the extent to which they understood various aspects of the decision letter, what information was included in the letter, whether they sought help in understanding the letter, and the sources of support they used.

Most claimants had a good understanding of the decision about their PIP claim (Figure 8.1). Levels of understanding were highest regarding what was written in the decision letter (82 per cent said they fully understood or understood to some extent), how long the award was for and when it would be reviewed (82 per cent said they understood fully or to some extent). Although a majority understood them, less well-understood areas included how DWP reached the decision (66 per cent understood fully or to some extent), how points were allocated to determine an award (67 per cent understood fully or to some extent) and how the application form, supporting evidence and what was said in the face-to-face assessment had been taken into account in reaching the decision (68 per cent understood).

Figure 8.1

Understanding the decision



Base: All participants in wave two (1203)
Base*: All participants in wave two who were awarded PIP (755)

Question wording: F3. Please tell me to what extent you understood or did not understand each of these things? Statement summaries shown in the figure above.

New claimants were more likely to say they understood what was written in their decision letter (85 per cent) compared with those who were being reassessed (76 per cent). Similarly, new applicants reported a better understanding of the points allocated and how these points determine an award (70 per cent) than those being reassessed (62 per cent). There were no significant differences between the new claimant group and the full PIP roll-out group.

Those assessed by IAS were more likely than those assessed by Capita to understand fully or to some extent how DWP had reached their decision (68 per cent and 60 per cent respectively). Similarly, those assessed by IAS were significantly more likely to understand (fully or to some extent) the points, how they determine the award and why points may not have been allocated (69 per cent compared with 61 per cent for Capita). These differences between assessment providers remain even when comparing those who received an award (see 12.4.4).

Claimants who were awarded PIP were more likely to report a good understanding of what was written in the decision letter (86 per cent), compared with those who did not receive an award (72 per cent). Around three-quarters of those who were awarded PIP understood the points allocated (76 per cent) compared to less than half of those without an award (47 per cent).

Around one in five claimants said their decision letters had referred to medical evidence or information from the assessment report (19 per cent) and 56 per cent said their decision letters had not. However, one-quarter of claimants who received a decision (25 per cent) did not know or could not remember whether their letters had referred to medical evidence or assessment reports.

Of those who were awarded PIP, 21 per cent reported that the letter referred to medical evidence, 49 per cent said it did not and 30 per cent did not know. In contrast, of those not awarded PIP, 13 per cent reported that the letter referred to medical evidence, 74 per cent said it did not and 13 per cent did not know. Claimants who were assessed by IAS were more likely to report that their decision letters referred to medical evidence or information from the assessment report (20 per cent compared with 14 per cent of Capita) and were more likely to report that they did not know (27 per cent for IAS and 18 per cent for Capita). Of those assessed by Capita, 68 per cent reported the letter did not contain medical evidence or information from the assessment report compared with 53 per cent of IAS claimants.

The qualitative research showed that when reading their PIP decision letter, claimants were able to quickly and easily find out what award, if any, they had been given. However, claimants in the qualitative research varied in their understanding of specific details such as how the decision had been made, how evidence had been used, and their options if they disagreed with their decision. This perceived lack of clarity could be attributed to several factors:

- Claimants skim-reading their letter, on the grounds that they were primarily interested in their decision and not in the details, or that it was too long and wordy. Consequently, these claimants missed key information such as when their award would be reviewed, or how the decision had been made.
- Difficulty reading, comprehending and remembering information as a result of a health condition, illness or disability. These claimants tended to get help to read and understand the letter’s contents.

> *“Because of my memory and brain damage, I don’t understand a lot of things… there wasn’t anything explaining why I didn’t get it though.”*
>
> Full PIP roll-out, nil mobility and enhanced daily living

In some cases, claimants read the letter in full but still did not understand things such as how the decision had been made and how evidence had been used. This was usually related to a disagreement with the decision, or a feeling that the points awarded did not accurately reflect the impact that their condition or disability had on their life, or what they had said to the assessor. Lack of understanding of the points awarded was particularly prevalent among claimants with a mental health condition, who felt that the points system did not adequately reflect their experiences. In some cases the letter was thought to contain important inaccuracies regarding what was said during the assessment, including factual inaccuracies, which affected claimants' understanding of how their decision had been made.

There were some claimants who read their letter in full to understand all the details and agreed that it was a fair reflection of the information they had provided during the claim process. They tended to speak more confidently about the decision and how it had been made:

> *"It was very clear about what it was as they actually list out what points they are awarding you and then they go into a write up about how they have made that decision. They also tell you what they are going to pay you and when it was back-dated to, so that was all very clear…They were telling me how they deemed my condition to affect me and to what level it affected me, so I am the normal standard level."*
>
> New claim, standard mobility and daily living

8.2.1 Seeking help to understand the decision letter

One-third of survey claimants who had a decision said they sought help to understand the decision letter (32 per cent). Those claimants who had been awarded PIP were less likely to seek help than those who had not; 72 per cent of those who received an award said they did not seek any help in understanding their decision letter, compared with 55 per cent of those who were not awarded PIP.

Those who did seek help to understand their decision letter said they did so mostly from friends or relatives (42 per cent), DWP (23 per cent), a social worker or care and support worker (15 per cent) or someone from a charity or support group (12 per cent). Other sources of support with understanding the decision included Citizens Advice (eight per cent) and GPs or health professionals (five per cent).

The sources of help used to understand the decision letter varied according to the outcome of the PIP award. Those who were not awarded PIP were more likely to seek help from organisations compared to those awarded PIP. For example, those not awarded PIP were more likely than those awarded PIP to say they consulted DWP (32 per cent and 18 per cent respectively) or Citizens Advice (13 per cent and five per cent respectively). Whereas those awarded PIP were more likely to seek help from family or friends than those not awarded PIP. Of those awarded PIP, 48 per cent reported seeking help from friends or relatives, compared with 33 per cent of those not awarded PIP. Claimants who were being reassessed were also more likely to report contacting DWP for help with understanding their decision letter (31 per cent) compared with new claimants (17 per cent).

Of claimants who had sought help from DWP, 44 per cent felt they had a clearer understanding of what their decision letter meant, but around half said they did not have a clearer understanding after contacting DWP (51 per cent). Of those awarded PIP, 63 per cent reported that they had a clearer understanding after contacting DWP compared with 29 percent of those with no award[23].

---

[23] It should be noted that the bases are 49 for no award and 40 for awarded PIP for this analysis but the difference between these groups is statistically significant.

Of those who did not contact DWP to help them understand their decision letter, just over half reported that they did not need any help (52 per cent). One in ten claimants sought help from elsewhere instead (11 per cent). Other reasons for not seeking help with understanding the decision from DWP were that they did not think DWP help would be useful (seven per cent), that they did not know DWP could help (seven per cent) or that they felt DWP would be biased or they did not trust DWP (five per cent).

The qualitative research showed that claimants who needed support to read and understand their letter tended to be claimants who had a learning disability, low levels of literacy, or who spoke little English. They found that the decision letter used complex terminology (e.g. ‘cognitive impairment’), which they sometimes described as ‘jargon’, or contained a large amount of information. Support was drawn on to explain the content of the letter using simpler words or shorter sentences, translate it into another language, or to break the letter down into something easier to absorb. These claimants would have found receiving the letter in a more accessible format helpful.

The qualitative interviews also showed there were claimants who did not seek support to understand the decision but suggested that they needed some to understand the letter. These claimants tended to lack confidence in their ability to discuss the situation, particularly around what questions they should be asking to help them better understand. Others had not sought help to understand the decision because they did not know who to ask, were fearful of causing themselves further stress, or because they felt there would be nothing to gain and did not have the energy to pursue the issue further.

8.2.2 Longitudinal analysis about the outcome of the award

Data from the wave one interview was analysed alongside the award outcome collected at wave two, for claimants who took part at waves one and two.

In the wave one survey, claimants were asked why they had applied for PIP: common reasons included because their disability or illness meant they had extra costs, they were no longer able to work or earn a living, or to supplement the money from other benefits. There were no significant differences in the outcome of the PIP application by what the original motivation for applying had been, nor were there any significant differences in whether or not a PIP award was made by how much the claimant knew about why a person might be awarded PIP or the process for claiming PIP when asked at wave one.

Those claimants who had not sought any help with completing the application form were more likely to have received no award (32 per cent, or 50 claimants) than those who had sought help with the form (22 per cent, or 51 claimants). Although qualitative interviews showed those who had support in providing evidence were more likely to supply detailed and relevant evidence, there was no clear difference in outcome of the award according to whether the claimant sought help about what information or evidence to provide with the application.

There was no significant difference in whether or not a PIP award was received by whether claimants felt that the application form had allowed them to explain their condition. Those who had submitted evidence with their original application were more likely than those who had not submitted evidence to receive an award of PIP (73 per cent and 56 percent respectively). There was no significant difference in the outcome of the application according to whether the claimant reported there was evidence they wanted to submit with the application but were unable to.

Of those who reported at wave one that they were very or fairly likely to receive an award, 20 per cent did not receive one. Those who did not know the likelihood of getting an award or felt an award was unlikely were more likely to not receive an award (32 per cent and 35 per cent respectively).

8.3 Chapter summary

Most claimants understood the next steps after their assessment, and that they needed to do nothing but wait for the decision. While the majority of claimants reported that they understood their decision letter, there was poorer understanding of particular elements. For example, most claimants said they understood what was written in the decision letter, but fewer understood how DWP reached the decision. There was a difference in understanding by the outcome of the PIP claim, with those who received no award being less likely to understand the decision letter than those who received an award. The qualitative research found that the perceived lack of clarity regarding some aspects of the letter could be attributed to a number of factors, including a disagreement with some of the content or with the decision, difficulty with reading and comprehension due to a health condition or impairment, and claimants skim-reading the letter.

9 Overall experiences of the assessment and decision stages and next steps

This chapter explores claimants' suggested areas of improvement to the claims process before moving on to explore clarity around next steps both in terms of future review of the award and appealing the Personal Independence Payment (PIP) decision. It finishes by exploring how claimants plan to use the award. For a summary of the findings, please refer to section 9.3.

9.1 Suggested improvements to the assessment and decision stages

Claimants taking part in the survey were asked what, if anything, they thought the Department of Work and Pensions (DWP) could do to improve the assessment and decision stages of PIP, and the open responses given by claimants were split into thematic groups. Commonly mentioned areas for improvement were around the PIP processes themselves, with over one-quarter of claimants (28 per cent) suggesting that the assessment process could be improved in some way and eight per cent suggesting the claims process could be improved.

An area in which claimants suggested improvements could be made was for claimants to be better understood during the assessment process (16 per cent). This was a combined category of suggested improvements including having a better understanding of different conditions (mentioned by eight per cent of claimants) and listening more or taking accurate notes of things said by the claimant (mentioned by five per cent of claimants).

Additional, specific suggestions to improve the assessment process were that claimants should be asked questions or given tests which are more relevant to the claimant's condition or age (five per cent) and to make the decision faster (five per cent).

Just under one in ten claimants (nine per cent) suggested improvements in relation to the assessors, with six per cent suggesting that an assessor should be a medical professional such as a GP or a nurse, and a further four per cent saying that the assessors' manner could be improved.

There were some differences in suggested improvements by different groups of claimants. Claimants who were not awarded PIP were more likely to think that the assessment and decision stages of PIP needed to be improved than claimants who received an award. In particular, over one-third (36 per cent) of those who did not get an award thought that claimants needed to be understood more, compared to eight per cent of those who were awarded PIP.

New claimants were the least likely to suggest improvements to the claims process (five per cent compared to ten per cent of reassessment cases and ten per cent of those in the full PIP roll-out process). There are also some differences in results by provider. Claimants who were assessed by Capita were more likely to suggest that the assessors needed to improve, with 15 per cent suggesting this compared to eight per cent of those who were assessed by Independent Assessment Services (IAS). In particular, eight per cent of those assessed by Capita thought that the assessor's manner needed to improve, compared to only three per cent of those assessed by IAS. In addition, 21 per cent of those assessed by Capita thought that claimants being understood could be improved, compared to 15 per cent of those assessed by IAS. This mostly seemed related to wanting assessors to have a better understanding of different conditions (11 per cent of Capita claimants said this should be improved, compared to seven per cent of IAS claimants).

In addition to the areas for improvement outlined above, claimants in the qualitative research identified other areas. A recurring theme, discussed in relation to both the initial PIP form and the assessment, was the need to simplify some of the information and questions to make them easier for claimants to absorb and understand. Claimants in the qualitative research also mentioned the need to ensure questions were focused on, and relevant to, different types of conditions (e.g. mental health).

> *"The questions: they're a bit ambiguous, it's very difficult to understand what they're trying to get at."*
>
> Full PIP roll-out, enhanced mobility and daily living

Even those who found the claim process relatively straightforward thought that others might struggle with it. Therefore, there was a general feeling that more could be done in the way of providing support to claimants or signposting them in the direction of appropriate support:

> *"If you are like me, you need a bit of help understanding, but if you don't know anyone and they don't tell you [that you] can get help, that's when I think it would be hard. It's only because I knew someone who was able to help. If I had done it on my own then I might have done it all wrong."*
>
> Full PIP roll-out, standard mobility and enhanced daily living

9.2 Clarity of the next steps

Claimants who had received a decision at the time of the survey interview were asked about how clearly they understood the next steps in the PIP claim process. The majority of claimants who had received a decision about their claim agreed that DWP made it clear that they could ask for their application to be reconsidered if they were unhappy with the outcome (83 per cent) and that they could appeal if they were still not happy with the decision after it was reconsidered (73 per cent).

Those who did not receive an award of PIP were more likely to disagree that DWP communications on the next steps were clear than those who did receive an award. Of those with no award, 16 per cent disagreed that DWP made it clear that they could ask for their application to be reconsidered, compared to 11 per cent of those awarded PIP. Similarly, those who did not receive an award were also more likely to disagree that DWP made it clear that they could appeal the decision, with around one-quarter (24 per cent) disagreeing that DWP made it clear compared to 16 per cent of those awarded PIP.

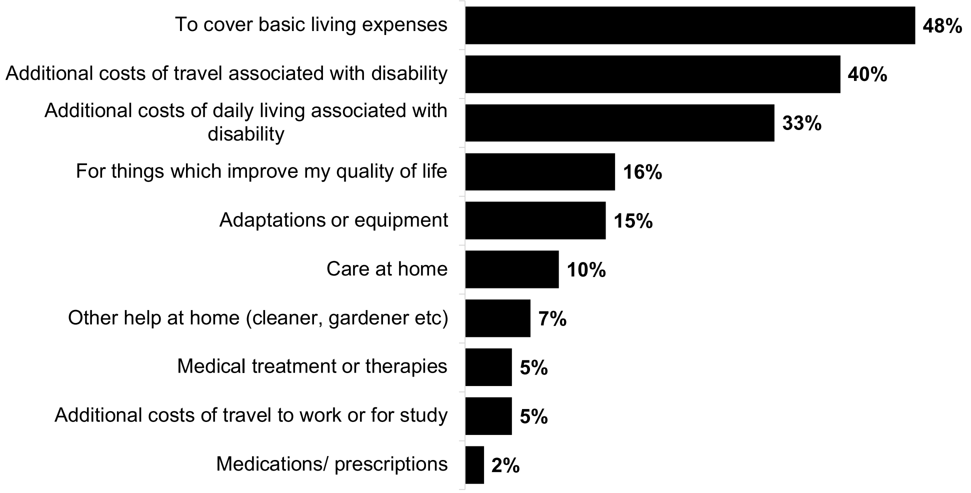
The vast majority of claimants who were awarded PIP agreed that DWP made it clear that they should report a change in their circumstances (such as a change in their condition). Ninety-six per cent of claimants agreed with this statement, compared to three per cent who said DWP did not make this clear. There were no notable differences between different groups of claimants on this issue.

9.2.1 Using the award

Survey claimants who received a PIP award were asked how they would use the money and the impact it would have on their life (Figure 9.1). Just under half of claimants (48 per cent) who were awarded PIP said they expected to use the money to cover their basic living expenses, such as rent, food and heating. Others said they would use PIP for disability-related expenses, with 40 per cent saying they would put PIP money towards the additional costs of *travel* associated with their disability, and one-third (33 per cent) saying they would use it for the additional costs of *daily living* associated with their disability. Smaller proportions said they would use it to pay for things that improve the quality of their life (16 per cent), for adaptations or equipment (15 per cent), for home help, carers, or assistants (ten per cent) or for other help like cleaners or gardeners (seven per cent).

Figure 9.1

How money from PIP will be used



Base: All participants in wave two who were awarded PIP (701)

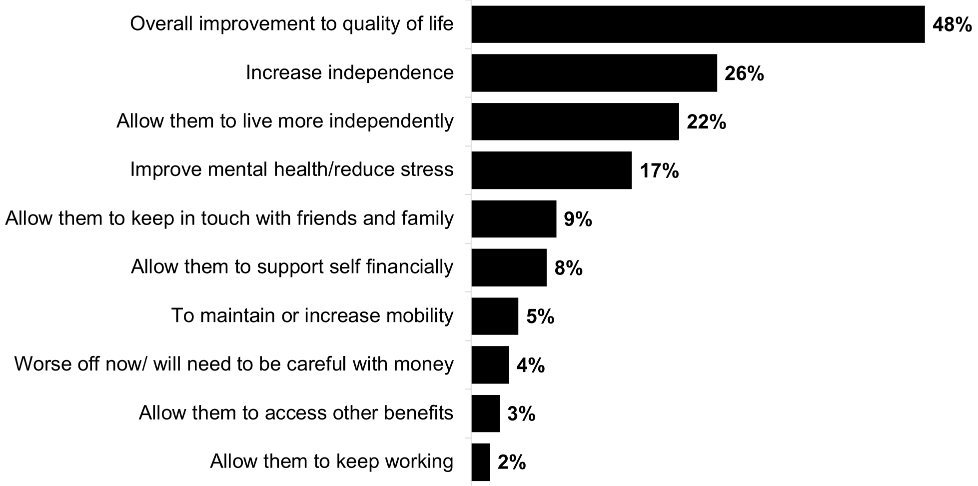
Please note that more than one response could be given to this question

Question wording: G2. How will you use the money you have been awarded?

As well as being asked about what they would spend their award on, claimants who received an award were asked what difference they thought it would make to their lives (Figure 9.2). Just under half (48 per cent) of those awarded PIP said that the award would make an overall improvement to their quality of life. PIP was also seen to enable independence, with around one-quarter (26 per cent) saying it would increase their independence and just over one-fifth (22 per cent) saying it would allow them to live more independently[24]. Just under one-fifth (17 per cent) said their mental health would be improved or stress reduced because of their award, while smaller proportions said PIP would allow them to keep in touch with friends and family (nine per cent), to support themselves financially (eight per cent) or to maintain or increase their mobility (five per cent). Four per cent said that they were now worse off or needed to be careful with money: these claimants are likely to have received an award lower than they expected.

Figure 9.2

What difference an award of PIP will make



Base: All participants in wave two who were awarded PIP (701). Mentions of 2% and over

Please note that more than one response could be given to this question

Question wording: G3. What difference will the award of PIP make to you/them?

Younger claimants were more likely than older claimants to say that PIP would allow them to increase their independence (33 per cent for those under 40, compared to 22 per cent of those aged 40 and over) or keep in touch with their friends or families (15 per cent for those under 40, compared to six per cent of those aged 40 and over).

New claimants were more likely than claimants as a whole to say that their award of PIP would improve their mental health or reduce stress (22 per cent, compared to 15 per cent of reassessment claimants and 12 per cent of full PIP roll-out claimants).

Claimants who were unemployed were more likely than those who were employed to say that the award would make an overall improvement to their quality of life (50 per cent compared to 35 per cent), which may be related to the proportion of unemployed claimants who intend to use PIP for their daily living expenses. Conversely, employed claimants were more likely to say their PIP award would allow

---

[24] 'Increase independence' and 'Allow me to live more independently' were two separate categories in the question to which interviewers coded answers given by claimants.

them to live more independently (31 per cent compared to 20 per cent). In addition, 15 per cent of the employed claimants said that their PIP award would allow them to continue working. Linked to this, six per cent of employed claimants said their award would allow them to work part-time while one per cent of unemployed claimants said it would allow them to start working.

9.3 Chapter summary

After receiving a decision, the majority of claimants were clear about what the next steps in the process would be if they did not agree with the decision (i.e. mandatory reconsideration or appeal), and nearly all knew they should report a change in their circumstances. Despite the majority of claimants saying they were satisfied with the assessment and the assessor, suggestions were made for improvements to the assessor and their understanding of claimants. The qualitative research highlighted suggestions for information and questions to be simplified and focused around claimants' specific conditions.

Those who were awarded PIP, at this stage, were most likely to say it would make a big difference to their quality of life, allow them to live more independently, improve their mental health or reduce their stress. Linked to this, claimants most frequently stated that the money would be spent on basic living expenses or additional costs associated with their disability.

Wave three: Introduction

The following chapters present the quantitative and qualitative findings from wave three, the final wave of research. This wave investigated the mandatory reconsideration (MR) and appeals processes. Additionally, the quantitative strand examined claimants' experiences of the whole application process (discussed further in Chapter 12). Chapter 10 covers themes including knowledge of MR, deciding whether or not to request an MR, providing additional evidence for MR and MR decisions. Chapter 11 then covers knowledge of appeals, the appeal tribunal, appeals decisions and next steps.

Mainstage quantitative fieldwork took place between 13 July and 7 August 2017 after a pilot of 32 interviews carried out between 3 and 4 July. In total, 1,205 mainstage interviews were achieved. Around two-fifths of interviews (450) were with *longitudinal participants* who had taken part in wave two or in waves one and two. Longitudinal participants included 289 who did not request MR, 91 who did request MR and did not go on to appeal, and 70 who requested MR and went on to appeal[25]. The remainder of the interviews (755) were with *new sample participants* who had not taken part in the research before. Of all new sample participants had requested MR[26], 278 did not appeal the decision and 465 did appeal the decision. The numbers here reflect the composition of the new sample for which quotas were set so that the sample comprised about half claimants who were MR only and half who had appealed, to ensure that sample sizes for each were large enough to allow analysis. During analysis the sample has been weighted to reflect the profile of PIP claimants more generally (see technical report for more details). However, where questions specific to those who have experienced a stage of the process such as requesting MR, the sample for that analysis consists only of a sub-group (e.g. those who requested MR) which is not representative of claimants as a whole.

Where relevant, data from waves one and two have been used for longitudinal analysis, where experiences of the application and assessment process might influence whether claimants requested MR or appealed and their experiences of these processes.

Mainstage qualitative fieldwork took place between 10 July and 25 August 2017, comprising a total of 50 interviews. Where possible, claimants themselves were interviewed, and where this was not possible paired depth interviews were conducted with the claimant and a person supporting them. Of the 50 completed interviews, 35 were conducted face-to-face, and 15 were conducted by telephone. The achieved sample was almost equally split in terms of gender and claim type. Half of the interviews conducted were with claimants who had gone through MR but who had not, at the time of interview, pursued an appeal. The other half of interviews conducted were with claimants who had gone through both MR and an appeal.

---

[25] Participants who did not go on to MR and/or appeal were retained in the sample. This was to explore people's reasons for not disputing their PIP award decision.

[26] 12 cases reported that they did not know whether they had requested MR.

10 Mandatory reconsideration

This chapter discusses the process of mandatory reconsideration (MR). Mandatory reconsideration is the process that claimants first go through if they would like the initial decision on their Personal Independence Payment (PIP) application to be re-examined. Claimants must go through this before they can make an appeal. By the end of April 2018, there had been 781,000 requests for a mandatory reconsideration (23 per cent of all cleared claims) resulting in 83 per cent of new claims and 77 per cent of reassessment decisions receiving no change to the award[27].

The findings covered in this chapter include claimants' prior knowledge of the MR process before they decided to request it, where they got their information from, and what led them to request MR. It also explores what claimants knew about submitting additional evidence when they requested MR, what additional evidence they submitted, and why they submitted the evidence at this stage and not earlier in the PIP process. Furthermore, it covers the decisions made by the Department for Work and Pensions (DWP) regarding MR, whether claimants understood the MR notice, and whether they believed the notice took account of all evidence available. Finally, it explores whether claimants sought further help or information to understand the MR notice, in particular from DWP. For a summary of the findings please refer to section 10.3.

10.1 Awareness of mandatory reconsideration

Claimants in the survey were asked whether or not, before applying for PIP, they were aware that they had to go through MR before they could appeal the decision at an appeal tribunal. Under half (44 per cent) were aware of MR at that early stage in the claim process.

Having received a decision letter about their PIP award, around half (53 per cent) reported that the information about MR in the letter was clear.

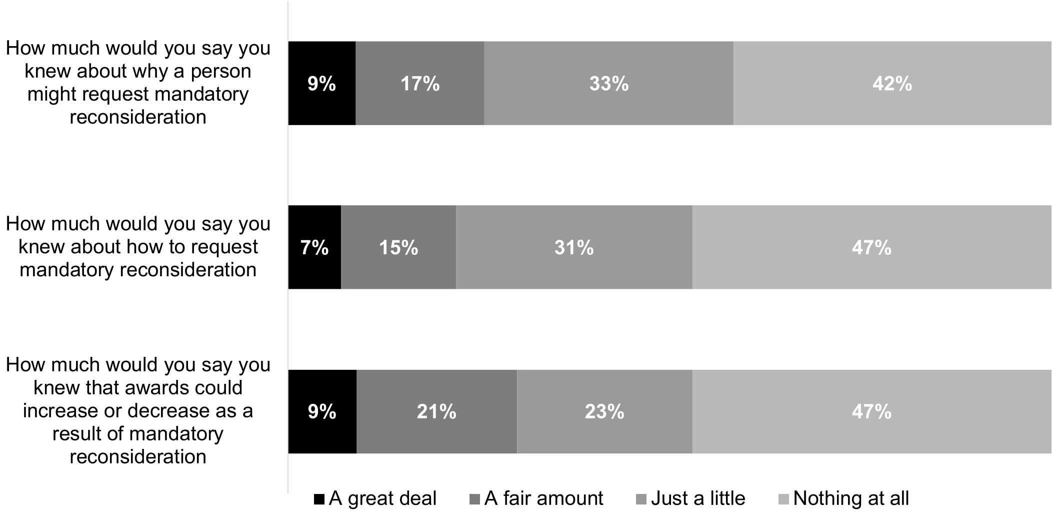
---

[27] Official statistics on Personal Independence Payment published by the DWP are available online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/714950/pip-statistics-to-april-2018.pdf

Despite this, claimants were less certain about the specific details of MR (Figure 10.1). At the point they received the decision letter, around one-quarter reported that they knew a great deal or a fair amount about why a person might request MR (25 per cent) or how to request MR (23 per cent). Slightly more – though still a minority – said they knew that an award could either increase or decrease as a result of MR (30 per cent). Some participants said they knew a little about the specific details of MR, but a larger proportion said they did not know anything at all about some of the specific details. The qualitative research found it was only where claimants had done thorough research online and on social media sites, that they felt they had a clear understanding of the next steps in terms of disputing the decision on their claim.

Figure 10.1

Awareness of aspects of mandatory reconsideration



Base: All participants in wave three (1205)

Question wording: B7. At the point when you received the decision letter, how much would you say you knew about each of the following aspects of mandatory reconsideration? Statements summarised in the figure above.

Those who subsequently appealed their initial decision were more likely to say that they knew about the details of MR at the point they received the decision letter. Three in ten claimants from the survey who appealed said they knew why a person might request MR and the same proportion said they knew how to request MR (both 31 per cent), compared to 21 per cent of claimants who did not appeal.

Those who received an award at any stage of the application process (as shown in Figure 1.1) were more likely to say they knew that an award could increase or decrease as a result of MR. For example, 34 per cent of those who initially received an award knew an award could change as a result of MR compared to 22 per cent of those who did not receive an award initially.

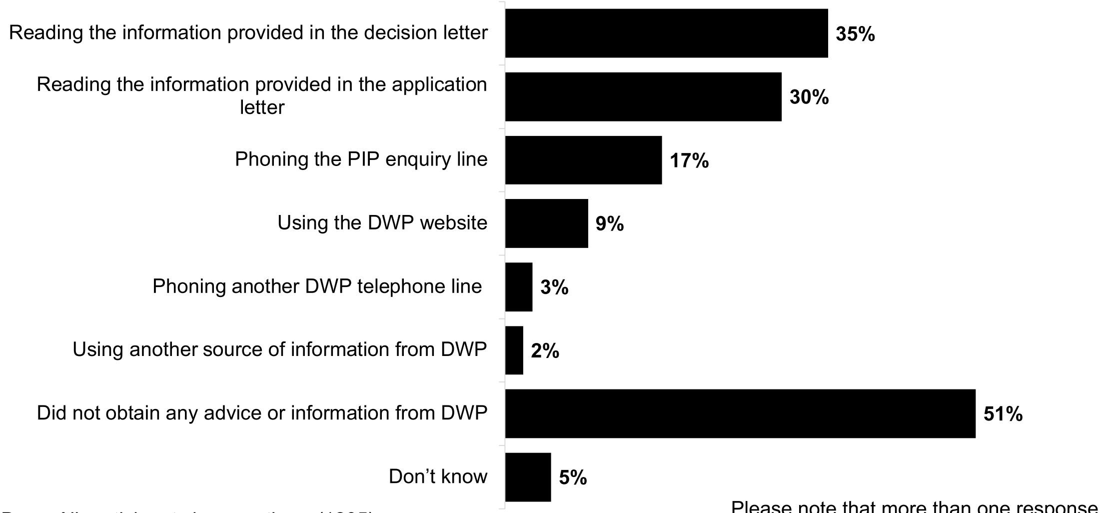
Analysis of data from longitudinal participants who took part in both the wave two and wave three surveys suggests there were people with lower levels of understanding than others throughout the PIP process. Of those participants who said they understood what was written in the original decision letter in wave two, 57 per cent thought that information about MR in the MR notice was clear in wave three. In contrast, those who said they did not understand the original decision letter in wave two were less likely to think that information about MR in the MR notice was clear in wave three (40 per cent). However, those who understood what was written in the PIP decision letter at wave two were no more likely than those who did not, to report that they understood specific aspects of MR.

10.1.1 Information seeking

When deciding whether or not to request MR, claimants could seek advice or information from DWP. As shown in Figure 10.2, around half of claimants in the survey (51 per cent) did not seek additional advice or information from DWP when deciding whether or not to request MR. Those who did seek more information about MR were more likely to obtain it from the application form (30 per cent) or the decision letter (35 per cent), than to seek it from other sources such as the PIP enquiry line (17 per cent) or the DWP website (nine per cent).

Figure 10.2

Information from DWP about mandatory reconsideration



Base: All participants in wave three (1205)

Please note that more than one response could be given to this question

Question wording: B9. When deciding whether or not to request mandatory reconsideration, did you obtain any advice or information from DWP about mandatory reconsideration in any of these ways?

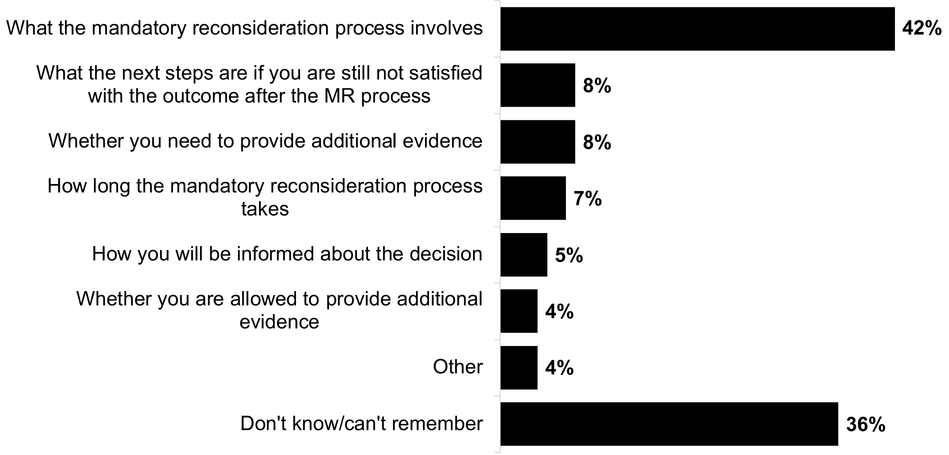
Claimants in the qualitative interviews felt that despite some interaction with DWP, it was not generally seen as a source of advice and support for the MR process, and this was largely emotionally driven. Having received a decision which did not reflect what they felt they should have been awarded, claimants attributed blame to DWP. Some thought from the beginning of the process that they would not get an award, and this preconception, coupled with disappointment with the award outcome, left some claimants distrustful of DWP. Consequently, they did not feel that DWP would provide impartial advice and referred to DWP as ‘them and us’. Instead these claimants looked to other organisations to provide them with help.

> *“I avoid them as all of their stuff is designed to dig you over. It isn’t a case of being straightforward and honest, they interpret everything in their own way.”*
>
> Natural reassessment, appeal, award maintained, standard mobility and nil daily living

In the survey, where claimants did obtain advice or information from DWP when deciding whether or not to request MR, a range of different types of advice or information were sought (Figure 10.3). The most common information sought was what the MR process involved (42 per cent). Less common types of information or advice obtained included next steps if they were not satisfied with the MR outcome (eight per cent), whether they needed to provide additional evidence (eight per cent) and how long the proces would take (seven per cent). Over one-third (36 per cent) said they didn't know or couldn't remember what information or advice they obtained.

Figure 10.3

Type of information or advice obtained from DWP about mandatory reconsideration



Base: All participants in wave three who obtained advice or information from DWP whilst deciding whether or not to request mandatory reconsideration (736). Answers truncated. Mentions of 4% and over

Please note that more than one response could be given to this question

Question wording: B10. What type of information or advice did you obtain from DWP at this point?

Of the claimants who obtained additional information or advice from DWP, almost two-thirds (65 per cent) thought it was very or fairly clear, with 30 per cent saying it was not very or not at all clear.

10.1.2 Deciding whether to request MR

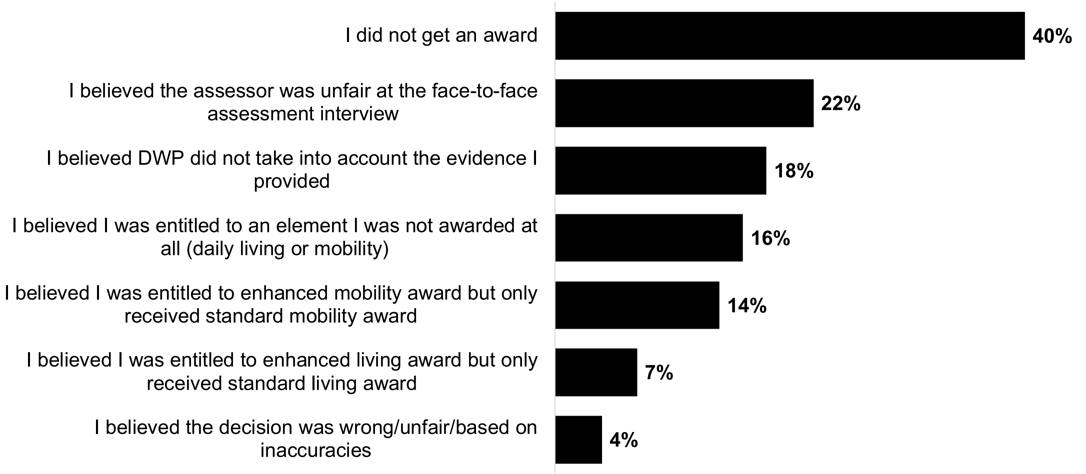
A variety of reasons were given for requesting a MR (Figure 10.4) by claimants in the survey. The most common reason was that the claimant did not originally receive an award (40 per cent). Relating to this, 16 per cent requested a MR because they believed they were entitled to an element (either daily living or mobility) that they were not awarded. Similarly, 14 per cent thought they were entitled to enhanced mobility but only received standard, and seven per cent believed that they were entitled to enhanced daily living but only received standard.

Claimants also requested a MR because of what they perceived as an unfairness at an earlier stage in their application. Around one-fifth believed the assessor was unfair at the face-to-face assessment (22 per cent).

Others did not believe that DWP took into account all of the evidence provided (18 per cent) and four per cent felt the decision was wrong, unfair, or based on inaccuracies. Some requested MR because they were advised to (four per cent).

Figure 10.4

Reasons for requesting MR



Base: All participants in wave three who requested mandatory reconsideration (904). Answers truncated. Mentions of 4% and over

Please note that more than one response could be given to this question

Question wording: B4. Why did you request mandatory reconsideration?

The qualitative interviews found that those with a mental health condition were particularly likely to request a MR on the basis that they disagreed with the face-to-face assessment findings outlined in the decision letter. This group spoke of feeling that the face-to-face assessment had been overly focused on physical conditions and had not touched on the key reasons they were claiming PIP. It was also felt that the assessor did not have the expertise to understand the impact of their condition and that the face-to-face assessment had not accurately reflected their experiences.

> *"I obviously didn't see an assessor who knew anything about depression – who obviously wasn't listening to what I was saying properly, otherwise that would have been reason to award me something in the first place."*
>
> New claim, MR only, award maintained, no award

Additionally, the qualitative interviews showed that on receiving the decision, claimants realised that DWP rarely contacted health professionals to ask for evidence, and that the process requires claimants to provide evidence themselves or to inform DWP that it is available. Consequently, some claimants applied for a MR as a means of ensuring that all their medical evidence was considered when making a decision on their claim:

> *"They hadn't been in contact with my doctor because when I did ring them up to say I was putting in for the mandatory reconsideration I said I thought you would have been in touch with my doctor and they said that it is very seldom that they ask for a doctor's report…and that's the only reason they went on to get in touch with my doctor at mandatory."*
>
> Full PIP roll-out, MR only, award changed, standard mobility and enhanced daily living

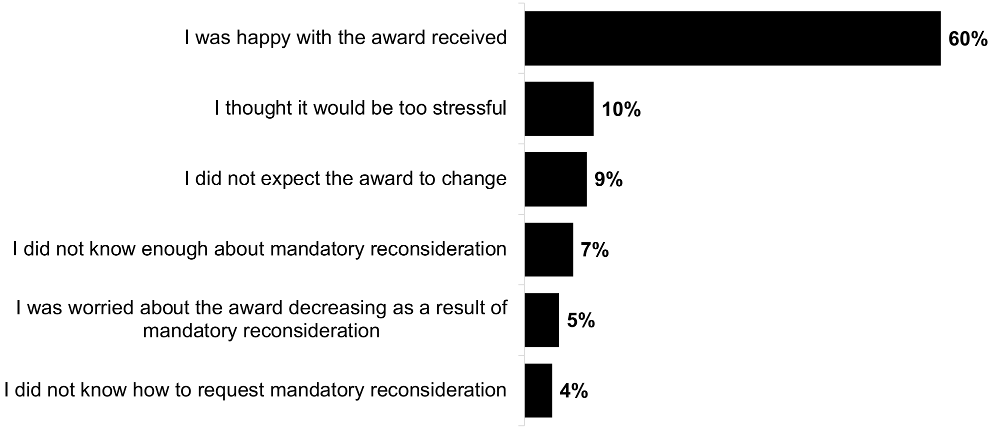
The qualitative strand highlighted that receiving a nil award or lower award than expected was sometimes emotionally difficult. There was some sense among claimants that the severity and impact of their health conditions had not been recognised.

Claimants with a mental health condition, who spoke of their condition being stigmatised and under-recognised, were particularly likely to suggest that this negation of their condition was a motivating factor for pushing for a review of their decision.

As shown in Figure 10.5, in the survey those who did not request MR were most likely to say this was because they were happy with their original award (60 per cent). Others said that they did not request it because they thought it would be too stressful (ten per cent) and some did not expect their award to change (nine per cent) or were worried that their award would decrease as a result (five per cent). Other reasons given for not requesting MR were that they did not know enough about MR (seven per cent) or simply did not know how to (four per cent).

Figure 10.5

Reasons for not requesting MR



Base: All participants in wave three who did not request mandatory reconsideration (281). Answers truncated. Mentions of 4% and over

Please note that more than one response could be given to this question

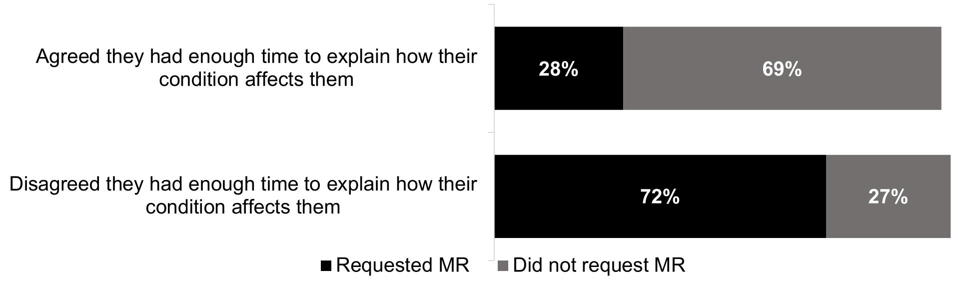
Question wording: B3. Why did you not request mandatory reconsideration?

The survey participants who took part in two or more waves comprised both claimants who requested a MR and those who did not. This allowed for analysis of whether experiences of the face-to-face assessment influenced claimants' decisions to request a MR. The analysis showed a strong link between perceptions of the face-to-face assessment consultation and whether or not claimants requested a MR. Those who agreed with a number of positive statements about their experience at the face-to-face assessment in the wave two survey were less likely to request a MR than those who disagreed with the positive statements. For example, 28 per cent of those who agreed that they had enough time to explain how their condition affects them requested a MR (compared to 72 per cent of those who said that they did not have enough time).

Figure 10.6 shows the percentage of people who requested a MR, according to whether they agreed or disagreed with statements about the face-to-face assessment in the wave two survey. Overall, those who reported a poorer experience at the face-to-face assessment were more likely to request a MR. However, analysis from wave two showed claimants who did not receive an award were less positive about all aspects of the face-to-face assessment. Therefore the relationship between experience of the assessment and decision to request a MR may be confounded by award outcome.

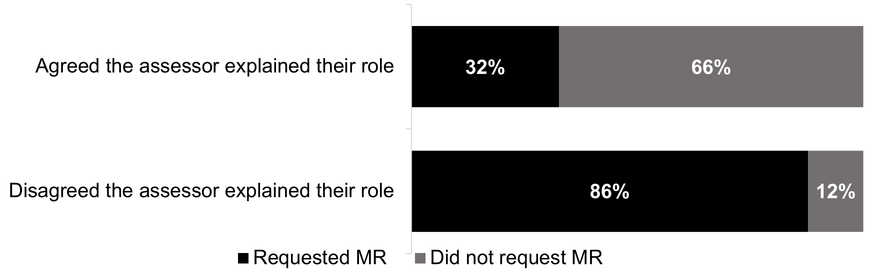
Figure 10.6 (A-D)

How experience of the face-to-face assessment (whether they had time to explain their condition) influenced decisions to request MR



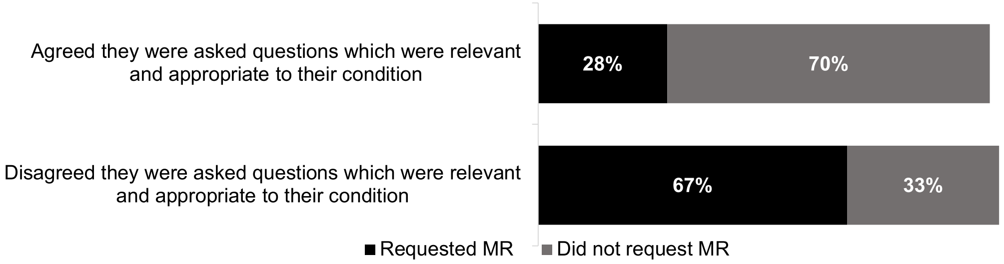
Base: All participants from the longitudinal sample who answered questions about their assessment at wave two (452)

How experience of the face-to-face assessment (whether the assessor explained their role) influenced decisions to request MR



Base: All participants from the longitudinal sample who answered questions about their assessment at wave two (452)

How experience of the face-to-face assessment (whether they were asked relevant and appropriate questions) influenced decisions to request MR



Base: All participants from the longitudinal sample who answered questions about their assessment at wave two (452)

How experience of the face-to-face assessment (whether they felt listened to) influenced decisions to request MR

Base: All participants from the longitudinal sample who answered questions about their assessment at wave two (452)

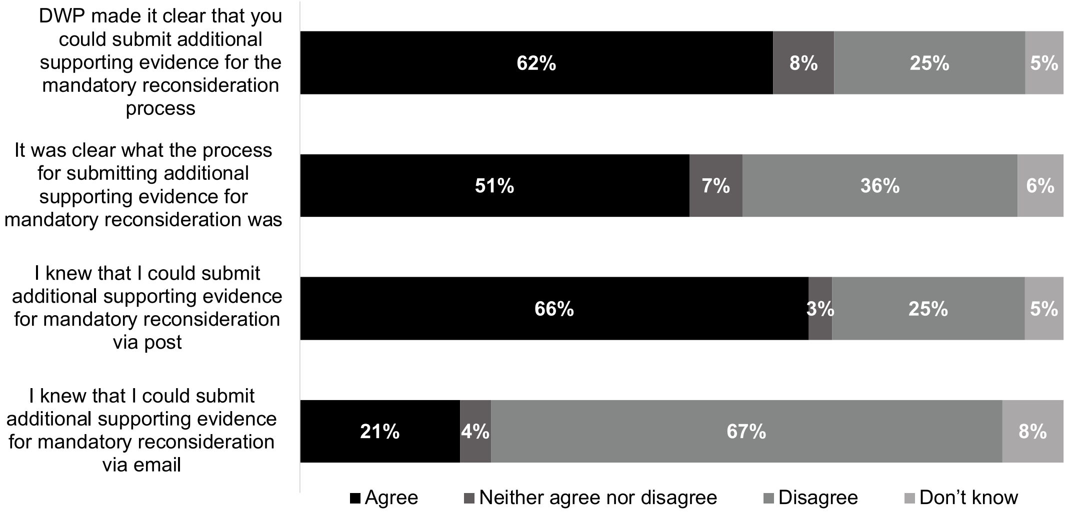
Question wording: D5 wave two. To what extent do you agree or disagree with each of the following statements about the face-to-face assessment consultation?
B2 wave three. Did you request mandatory reconsideration of your PIP decision?

10.2 Additional evidence

As shown in Figure 10.7, claimants in the survey who went through MR generally understood that they could submit additional supporting evidence, with 62 per cent saying that DWP had made it clear that they could submit additional supporting evidence for the MR process (though 25 per cent disagreed that this was the case). However, while the majority of claimants knew that they could submit additional supporting evidence – and that they could do so via post (66 per cent) – there was less clarity about the specifics of submitting evidence. Just over half of claimants (51 per cent) said the process for submitting additional evidence was clear and two-thirds (67 per cent) did not know they could submit evidence via email.

Figure 10.7

Knowledge about submitting additional evidence for mandatory reconsideration



Base: All participants in wave three who requested mandatory reconsideration (904)

Question wording: D1. Please tell me to what extent you agree or disagree with each of the following statements? Statements summarised in the figure above.

The qualitative interviews highlighted that support from professional organisations was important in encouraging claimants to provide further evidence at the MR stage. They made claimants aware of the importance of providing comprehensive and up-to-date evidence to support their request for a MR – up to that stage some claimants had not realised that they needed to do this.

Further evidence was often collected directly by those providing support.

> *"I was asked by Mind to visit my GP and my mental health people, the reablement people, mental health hospital I went to, and to provide photographs of all the mess that was around* [the claimant's home] – *quite a lot of evidence and they sent it off."*
>
> New claim, appeal, award changed, nil mobility and standard daily living

At MR, 65 per cent of claimants submitted additional supporting evidence. As shown in Figure 10.8, of the survey claimants who went through MR, 29 per cent did not submit any supporting evidence. Of these claimants, one-third (33 per cent) said they did not know they could submit additional evidence.

The qualitative research revealed that when claimants provided evidence, this was sometimes not new and was a repeat of what they had already submitted at the application stage. There were some who continued to provide no evidence. Barriers included not realising it would be helpful and a lack of awareness that there was an option to provide further evidence. Some believed that DWP would obtain evidence by contacting healthcare professionals or accessing claimants' medical records, although this is not part of the PIP claim process. There was a tendency for such claimants to have received little support with their claim.

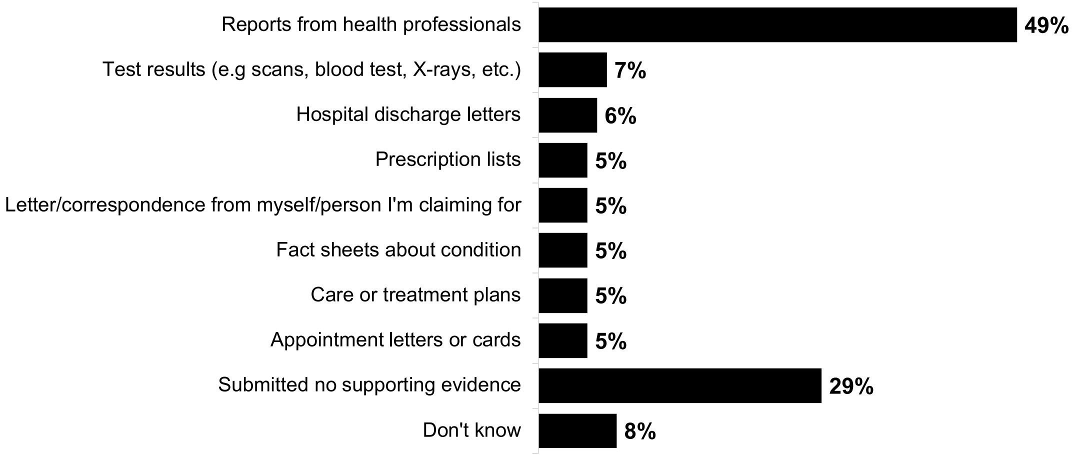
> *"Doctors have all the records. DWP can go to the doctor and get all of my records. I'm sure I've already given them my permission. All my evidence is there."*
>
> Full PIP roll-out, MR only, award changed, standard mobility and daily living

Other claimants had difficulties getting further evidence because they felt they had supplied everything that was available, they were unable to collect (more) evidence within the time available, or could not afford the required fees to obtain it.

Of those in the survey who went through MR (Figure 10.8), nearly half submitted reports from health professionals (49 per cent) at this stage, with a range of other medical information also submitted. Some submitted test results (seven per cent) or hospital discharge letters (six per cent), while five per cent of claimants submitted prescription lists, letters or correspondence, fact sheets about the condition, care or treatment plans and appointment letters or cards.

Figure 10.8

Additional supporting evidence submitted



Base: All participants in wave three who requested mandatory reconsideration (904). Mentions of 4% and over

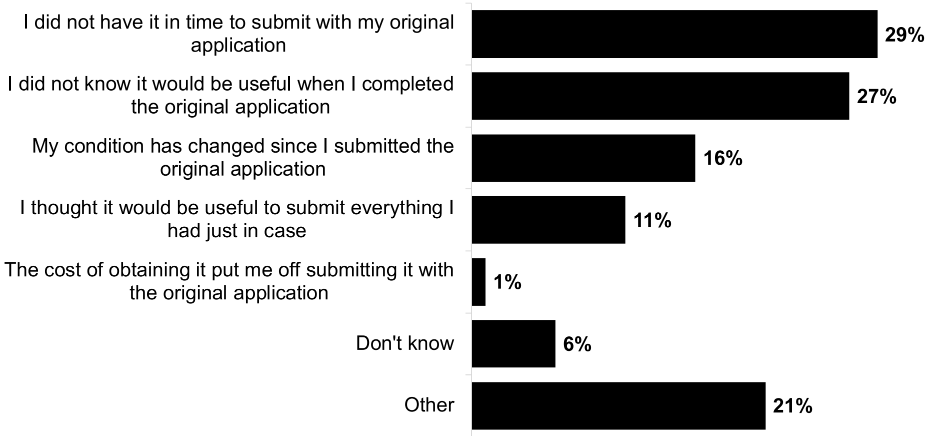
Please note that more than one response could be given to this question

Question wording: D3. What, if any, additional supporting evidence did you submit for the mandatory reconsideration process?

Of the 65 per cent of survey claimants who submitted additional evidence at this stage, 61 per cent were submitting this evidence for the first time, while 35 per cent had submitted the evidence previously in the process (although the question asked about additional evidence). The most common reason for submitting evidence at MR that was not submitted in the original application was that the claimant did not have it in time for the original application (29 per cent), with a similar proportion saying that they did not know it would be useful when they submitted their original application (27 per cent). Some claimants' conditions had changed since the original application (16 per cent) and others thought it would be useful to submit everything just in case (11 per cent).

Figure 10.9

Reasons for submitting additional evidence at MR and not earlier in the PIP process



Base: All participants in wave three who submitted additional evidence during mandatory reconsideration that had not been submitted before (362). Answers truncated

Please note that more than one response could be given to this question

Question wording: D5. Why did you submit this additional supporting evidence for the mandatory reconsideration process, and not include it with the original application or present it at the assessment?

10.3 Decision

Claimants surveyed in wave three were asked about the decisions[28] they received in order to provide context for their other answers. Of the survey claimants who requested a MR, 54 per cent reported they received no PIP award. Of those receiving an award, the most common type of award was standard daily living (26 per cent). This was followed by standard mobility (20 per cent), enhanced daily living (ten per cent) or enhanced mobility (nine per cent). Some claimants were awarded PIP but the type of award was unknown (two per cent) and some did not know the outcome (two per cent).

Figure 10.10 looks at changes in awards between the initial award and MR. Of those who requested a MR and also reported on their initial and post-MR award outcome in this survey, 52 per cent were not awarded PIP at either stage and one-quarter (25 per cent) had an award which was not changed after MR. Other claimants received a new or improved award as a result of MR (eight per cent were

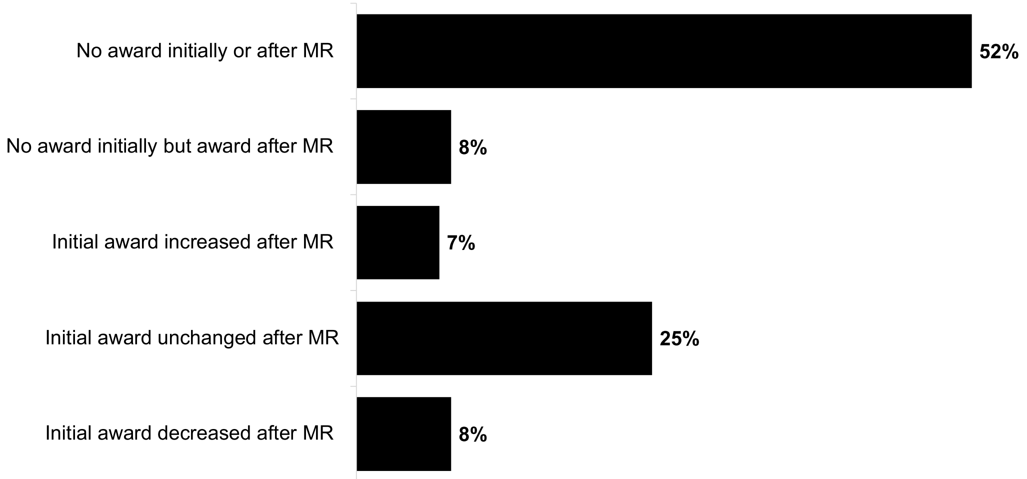
---

[28] While the DWP hold separate administrative data on award rates the survey included questions on outcomes so that they could be explored in relation to other variables. Broadly speaking the outcomes reported by respondents reflect those of PIP applicants as a whole.

awarded PIP after MR but not initially and seven per cent had an initial award which increased after MR). Some claimants had an initial award which decreased after MR (eight per cent).[29]

Figure 10.10

Change in award outcome between initial application and MR



Base: All participants in wave three who provided details of their initial award, requested MR, received an MR outcome and provided details of the award after MR (754)

Data on change of reward is based on a derived variable and not a survey question.[30]

Claimants were asked about their understanding of MR decisions and the MR notice, which is sent by DWP to notify claimants of the outcome of their reconsideration. As shown in Figure 10.11, around half of claimants agreed that the MR notice explained how DWP had reached its decision (53 per cent). A higher percentage agreed that

---

[29] In order to look at changes to awards, participants were assigned a score for their initial award and their award after MR with no award having a score of zero, a standard award of daily living or mobility giving a score of one and an enhanced award of daily living or mobility giving a score of two. The maximum score is four – for enhanced mobility and enhanced daily living. No change to the award is where the score has not increased. The precise award may have changed e.g. someone may have gone from enhanced mobility and no daily living to standard award for both but this is counted as no change as the number of combinations is too great to analyse each individual type of change. The initial award can increase after MR through receiving enhanced rather than standard for one or both elements or receiving an element which was not previously awarded.

[30] Derived variable created from answers to:

Wave three E7. Thinking about the mandatory reconsideration notice you received from DWP, what was the outcome of the request? We are interested to know what you were awarded as a result of the mandatory reconsideration process.

Wave three B2. Did you request mandatory reconsideration of your PIP decision?

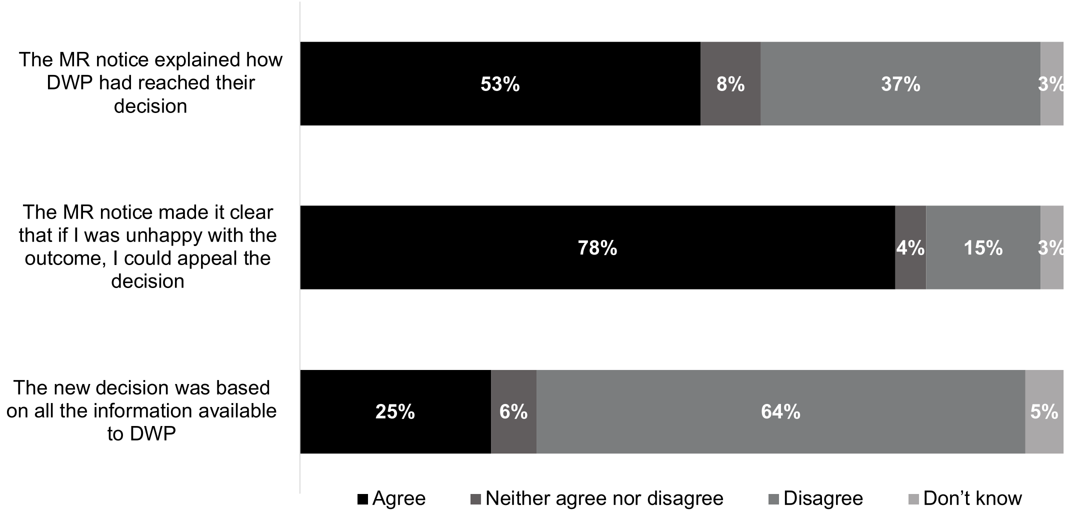
Wave three A12 for new sample participants. Thinking about the decision letter you received from DWP, what was the outcome of the application? We are interested to know what you were first awarded, before going through the mandatory reconsideration or appeals processes.

Wave two F2 for participants who took part at waves two and three. Now thinking about the decision letter you received from DWP, what was the outcome of the application?

the notice made it clear that if they were unhappy with the outcome, they could appeal the decision (78 per cent). There was a low level of agreement that the new decision was based on all the information available to DWP (25 per cent agreed with this statement).

Figure 10.11

Clarity of MR notice and whether claimants believed all evidence was considered



Base: All participants in wave three who received a mandatory reconsideration notice (797)

Question wording: E6: Thinking specifically about the mandatory reconsideration notice you received from DWP, to what extent do you agree or disagree with each of the following statements? Statements summarised in the figure above.

E8: To what extent do you agree that the new decision was based on all the information available to DWP, including your application form, the face-to-face assessment consultation and any additional evidence provided at the mandatory reconsideration stage?

The research considered whether levels of understanding varied by award outcome. Claimants in the survey who were awarded PIP after MR were more likely to agree that they understood how DWP had reached their decision (58 per cent, compared to 49 per cent of those with no award).

Claimants who continued to appeal were more likely to agree that the MR notice made it clear the decision could be appealed (86 per cent) compared to those who did not appeal (72 per cent). Reassessments were also more likely to agree with this statement (84 per cent) compared to new claimants (75 per cent).

In contrast, survey claimants not awarded PIP after MR were less likely to agree that the decision was based on all of the evidence (15 per cent) compared to those awarded PIP after MR (38 per cent). Claimants who appealed and had not yet received a decision were less likely to agree with this statement (15 per cent) compared to those who did not appeal (29 per cent). Finally, claimants who submitted additional evidence at MR were more likely to agree that the new decision was based on all evidence (29 per cent compared with 16 per cent of those who did not submit additional evidence).

The qualitative interviews showed that while the decision in the MR notice was felt to be clear, claimants tended to feel there was a need for further information. On the whole, claimants in the qualitative research found the MR notice clear in terms of whether their award was changed or not.

They could see the breakdown of the decision points and understood the text concerning their award outcome. Those who had taken a more proactive approach to MR, and who felt able to engage with the claim process throughout, were more likely to report that the letter was clear compared with those who had found the process challenging or were more disengaged with it. Those who had found the process challenging often found it difficult to bring together the various points in the letter so as to have a clear picture of what the decision was. Like the initial decision letter, for some, the language of the MR notice was felt to be confusing, overly legalistic and formal, and not expressed in plain English. Some also spoke of not being able to digest the amount of information included within it.

> “*They talk as if everybody are lawyers and, you know, what I call ‘learned people’ because half of it you don’t understand.”*
>
> Full PIP roll-out, MR only, award changed, standard mobility and daily living

While few claimants struggled to understand what the decision was from the MR notice, claimants in the qualitative research had difficulty in understanding exactly how the decision had been made from reviewing the MR notice alone. This was true regardless of the outcome of the MR. Claimants spoke of wanting a clearer understanding of what the reconsideration had actually involved. In particular, they wanted to know what had been considered when making the decision and if any new evidence had been taken into account.

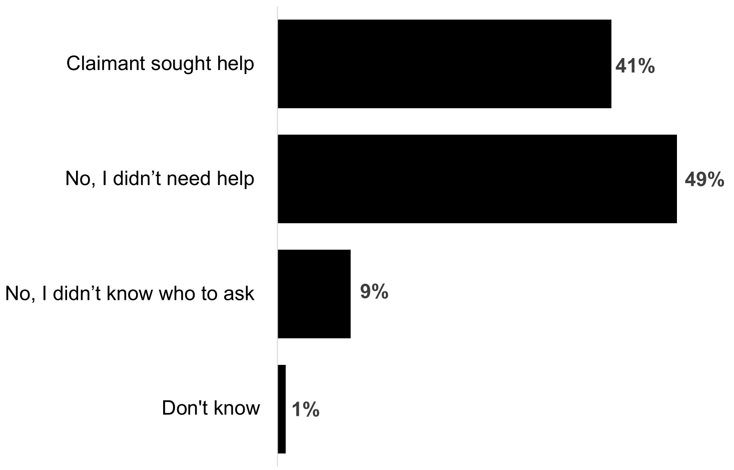
> *“It was fairly clear…but I wanted to know what they did to reconsider it, I think they just read my letter and still said no, what’s the point.”*
>
> New claim, MR only, award maintained, no award

10.3.1 Information seeking

As shown in Figure 10.12, 41 per cent of those who had received an MR notice sought help to understand it. About half (49 per cent) of claimants did not seek help as they said they did not need it. However, nine per cent said they did not seek help because they did not know who to ask.

Figure 10.12

Whether claimants sought help to understand the mandatory reconsideration notice



Base: All participants in wave three who received a mandatory reconsideration notice (797)

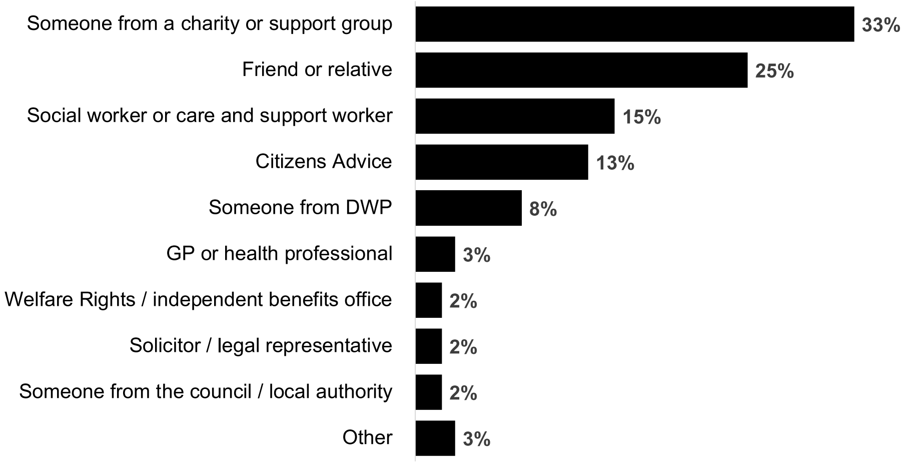
Please note that more than one response could be given to this question

Question wording: E2: Did you seek any help to understand the mandatory reconsideration notice?

As shown in Figure 10.13, claimants could seek help from a variety of sources to understand the MR notice. The most common sources of help were someone from a charity or support group (33 per cent), friends or relatives (25 per cent), social worker or care and support worker (15 per cent) and Citizens Advice (13 per cent), while eight per cent sought help from DWP[31].

Figure 10.13

Who claimants sought help from



Base: All participants in wave three who sought help to understand their mandatory reconsideration notice (374). Mentions of 2% and over

Please note that more than one response could be given to this question

Question wording: E3: Who did you seek help from to help you understand the mandatory reconsideration notice?

---

[31] The number of claimants who reported that they sought help from DWP was too small to present data on whether DWP gave them a clearer understanding of the MR notice.

In the qualitative interviews, the claimants who had sought support with their MR request usually went back to those who had supported them in requesting a MR (to ask for further assistance to understand the notice and what it meant for their claim). These claimants needed face-to-face support to go through the letter point by point.

10.4 Chapter summary

Claimants became clearer about the general process of MR as they came closer to that stage in the application process; while fewer knew about MR when they made their initial application, more knew about it once they received their initial PIP decision letter. However, they were less certain about specific details such as why or how a MR might be requested. When deciding whether to request a MR, less than half of claimants sought additional information from DWP. Those who sought more information generally used pre-existing sources (such as the decision letter), rather than contacting DWP directly. This tended to be related to a lack of trust in DWP resulting from not receiving the award they thought was appropriate, as well as media coverage of benefits. Claimants who sought information were more likely to request a MR than those who did not.

The primary drivers behind requesting a MR were claimants not receiving an award or a particular award element, or not being happy with the assessment process. Other reasons for requesting a MR and appealing were linked to not believing the award they received was correct, feeling that the evidence they provided was not taken into account, or that the assessor was not fair. There was also a clear link between perceptions of the face-to-face assessment and decisions about requesting a MR, with those more positive about different aspects of the assessment much less likely to request a MR.

There was a general understanding among claimants that additional evidence could be submitted for a MR, although less certainty about the process for doing so. There were many reasons for not submitting evidence at an earlier stage, including not having it in time, not thinking it would be useful for the original application, or assuming that DWP would contact their health professional.

Around two-fifths of claimants who had received their award notice sought help to understand it, most commonly from a charity, support group, or friends or relatives. Most claimants agreed that the MR notice provided clarity on how to appeal this decision, while fewer agreed the notice explained how DWP had reached their decision.

11 Appeals

This section discusses the appeals process, which is independent from the Department for Work and Pensions (DWP), and led by HM Courts and Tribunals Service. As such, DWP does not sit on tribunal panels, though they may have a Presenting Officer present to support the DWP decision. As of March 2018, there had been 300,000 PIP appeals lodged (9 per cent of all cleared claims) of these 211,000 PIP appeals were cleared at hearing, resulting in 35 per cent of these cases being upheld and 65 per cent in favour of the appellant[32].

The chapter includes the factors influencing claimants' decisions to appeal, the clarity of information about appeals in the original decision letter and the mandatory reconsideration (MR) notice, whether claimants contacted the DWP for information about appeals, what information they obtained and how clear the information was. This chapter also covers who attended the tribunal and whether claimants believed decisions were based on the assessment report and submission of additional evidence during the appeals process. Claimants were asked about their experience of the tribunal (if they attended in person), the outcome and their understanding of their decision. Those who had an outcome from their appeal were asked about their awareness of the upper tribunal and what they plan to do next. For a summary of the findings, please refer to section 11.4.

11.1 Before appealing

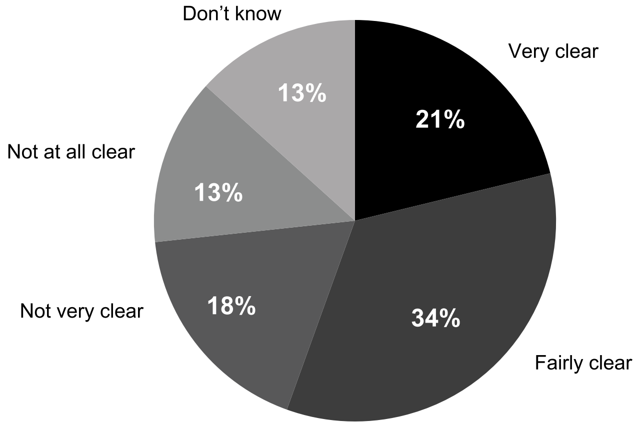
All claimants in the survey were asked how clear they thought the information about appeals was in the original Personal Independence Payment (PIP) decision letter. The majority of claimants (56 per cent) agreed that the original PIP decision letter gave clear information about appeals, while around three in ten claimants (31 per cent) felt the letter was not very or not at all clear. A further 13 per cent said they did not know (Figure 11.1).

---

[32] Official statistics on Tribunals published by the Ministry of Justice are available online: https://www.gov.uk/government/statistics/tribunals-and-gender-recognitions-certificates-statistics-quarterly-january-to-march-2018

Figure 11.1

Clarity of information about appeals in the original decision letter



Base: All participants in wave three (1205)

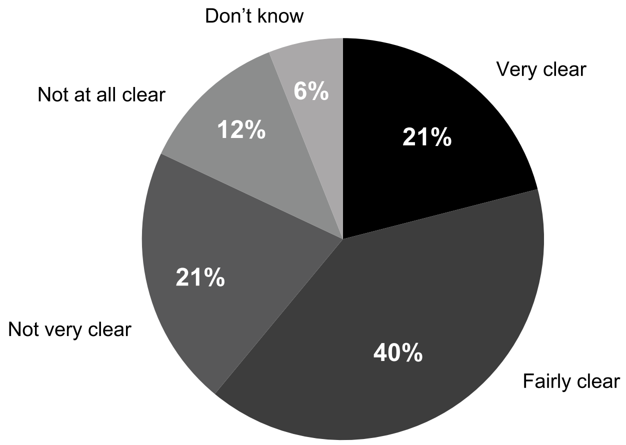
Question wording: F1. How clear or not was the information about appeals in the original PIP decision letter?

The analysis considered whether there were any differences in understanding between those who had and hadn't received an award. Claimants who received an award initially were more likely to say that the information about appeals in the decision letter was clear. Nearly three in five (59 per cent) of those who received an award initially thought the information was clear (compared to 50 per cent of those who did not receive an award). Claimants who appealed the MR decision were more likely to find information in the original PIP decision letter clear (62 per cent) compared to those who did not appeal (51 per cent).

Survey claimants who requested a MR were also asked how clear the information about appeals was in the MR notice, and responses were fairly similar to those around information in the initial decision letter. Again, the majority of claimants (61 per cent) thought that information about appeals was clear, while one-third (33 per cent) felt the information was not very or not at all clear (Figure 11.2).

Figure 11.2

Clarity of information about appeals in the mandatory reconsideration notice



Base: All participants in wave three who received a mandatory reconsideration notice (797)

Question wording: F2. How clear or not was the information about appeals in the mandatory reconsideration notice?

Again, those who received an award initially were more likely to find the appeals information clear in the MR notice (66 per cent compared to 57 per cent of those who did not receive an award). Similarly, those who received an award after MR were more likely to find the information clear (66 per cent compared to 56 per cent).

Claimants who appealed were more likely to find information in the MR notice clear (69 per cent) compared to those who did not appeal (55 per cent) and those who received an award after appeal were also more likely to find the appeals information clear (76 per cent) than those who did not receive an award after appeal (64 per cent). Overall, across both sources of information, claimants who received an award were more likely to agree that information about appeals was clear.

Claimants who understood information provided in one stage of the PIP process were more likely to understand information in another stage. For example, four in five (79 per cent) of those who understood information about *MR* in the original decision letter also understood information about *appeals* in the original decision letter. In contrast, only 28 per cent of those who found MR information unclear understood information about appeals in the original letter. Similarly, 75 per cent of claimants who understood information about MR in the original decision letter understood information about appeals in the MR notice (compared to 43 per cent who did not).

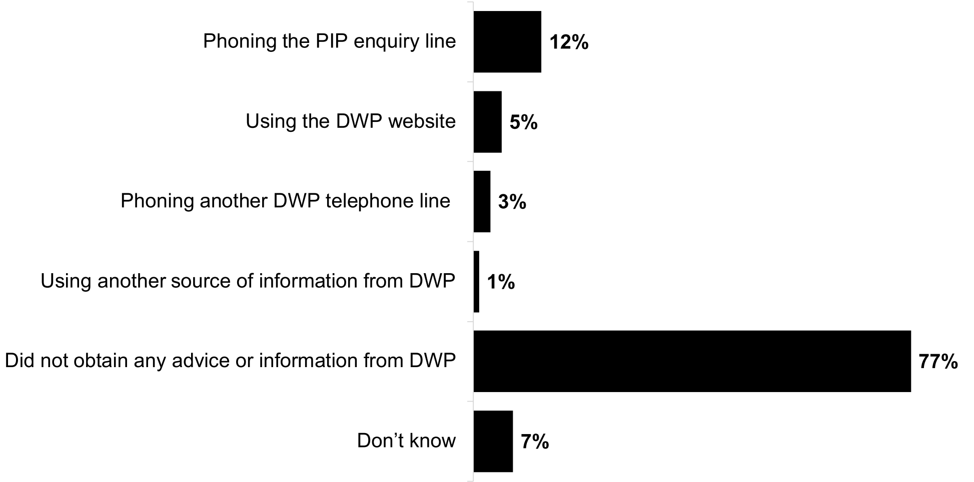
The qualitative interviews found that claimants' awareness of the appeals process and the distinction between appeals and MR was patchy. Common misperceptions included claimants describing MR as the paperwork leading up to appeal, or subsuming it within the appeals process. Understanding of the appeals process was largely dictated by the amount and type of support claimants had: those who received little or no support with the appeals process generally had a lower understanding of what was going to happen compared to those who received some support through the process.

11.1.1 Information seeking

Claimants could seek additional information or advice from DWP about the appeals process. As shown in Figure 11.3, the majority of survey claimants (77 per cent) did not obtain any advice or information from DWP about the appeals process after receiving their original decision letter. However, 12 per cent of claimants phoned the PIP enquiry line, five per cent used the DWP website and three per cent phoned another DWP telephone line. This varies according to whether or not the claimant requested a MR or appealed. Of those who had requested a MR, 59 per cent did not seek any information from DWP about appeals compared with 86 per cent of those who did not request a MR. Over half of those who had appealed (56 per cent) had not contacted DWP to seek information about the appeals process compared with 65 per cent of those who had requested a MR but not appealed.

Figure 11.3

Sources of information from DWP



Base: All participants in wave three (1205)

Please note that more than one response could be given to this question

Question wording: F3. Did you contact DWP in any of the following ways to seek information about the appeals process at any time after submitting your PIP application but before making an appeal?

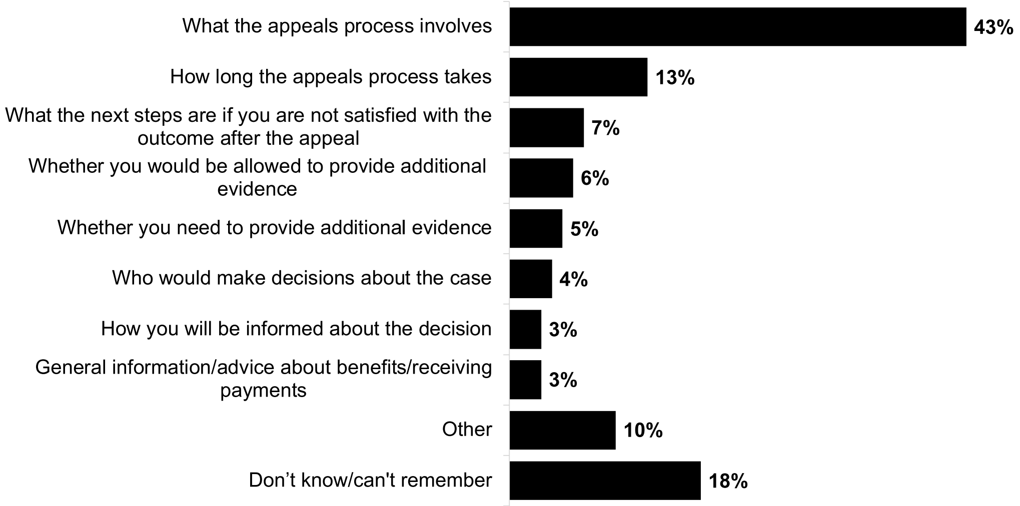
The qualitative interviews suggested that where claimants did call DWP this was largely to discuss factual information related to the documentation required and the location of the tribunal. DWP was not perceived as an organisation they could approach for help with their appeal because they were effectively appealing against a decision made by DWP. In these circumstances, they did not think that DWP was well placed to give them fair and impartial advice. This is in line with the findings about MR.

Seeking advice about MR was linked to seeking advice about appeals. Those who sought advice from DWP about MR were more likely to seek advice about appeals (36 per cent) compared to those who had not (10 per cent).

Those who obtained advice or information from DWP about appeals were asked what type of information they received. As shown in Figure 11.4, over two-fifths (43 per cent) obtained information about what the appeals process involves, and 13 per cent found out how long the process takes. All other types of information were mentioned by seven per cent of claimants or fewer. Around one-fifth (18 per cent) could not remember or did not know what information they obtained.

Figure 11.4

Types of information obtained from DWP



Base: All participants in wave three who obtained advice or information from DWP about the appeals process (334). Mentions of 3% and over

Please note that more than one response could be given to this question

Question wording: F4. What type of information or advice did you obtain from DWP at this point?

Claimants who obtained information about appeals from DWP were asked how clear the information was. The majority of claimants (58 per cent) said the information was clear, while around one-third said the information was not very or not at all clear (35 per cent).

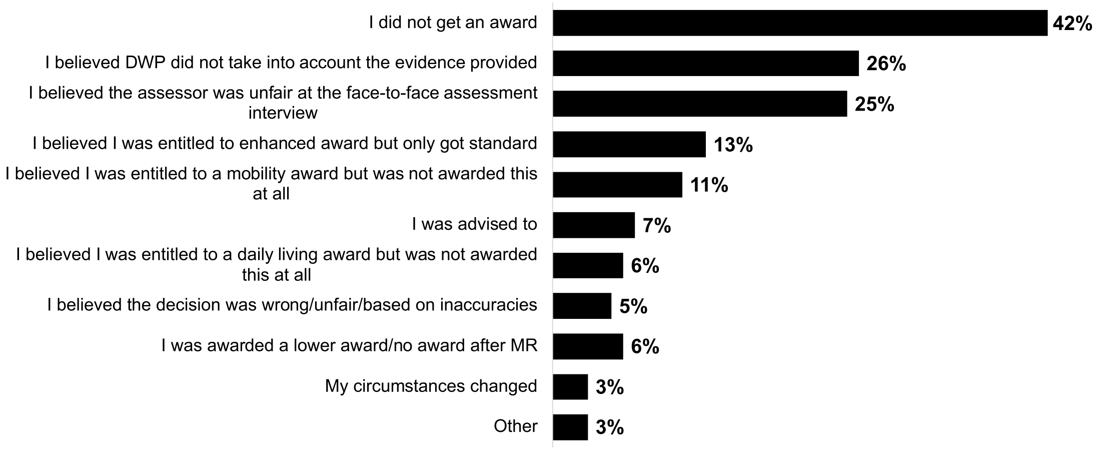
11.1.2 Deciding to appeal

Half (50 per cent) of claimants who did not receive an award after a MR appealed while just over one-third (35 per cent) of those who has received some sort of award at MR appealed.

In the survey 475 participants who provided information on their initial award and post-MR award went through MR and subsequently decided to appeal. Figure 11.5 shows that of these participants, 42 per cent reported that they appealed because they did not get an award, 26 per cent did not believe DWP took into account the evidence provided and 25 per cent believed the assessor was unfair at the face-to-face assessment interview. Smaller proportions appealed because they believed they were entitled to an enhanced award but only received standard (13 per cent), because they believed they were entitled to a mobility award but were not awarded this at all (11 per cent) or because they were advised to (7%).

Figure 11.5

Reasons why claimants appealed the mandatory reconsideration decision for claimants who had no increase to their award at MR



Base: All participants in wave three who appealed (after going through MR) and who provided information on initial award and award after MR and whose award did not increase at MR (475). Answers truncated. Mentions of 3% and over

Please note that more than one response could be given to this question

Question wording: F11. Why did you choose to appeal the decision?

The qualitative research provides further insight regarding the decision to appeal. Claimants who disagreed with their award usually highlighted that they felt the decision on their claim at MR continued to be based on the original assessment which many took issue with. These claimants often suggested that they did not feel their case had been looked at in more detail at the MR stage, something they expected from the process. The similarity between the initial decision letter and the MR decision letter was a common example drawn on as evidence for this belief. These claimants wanted to appeal the decision as a means of ensuring a full review of their case.

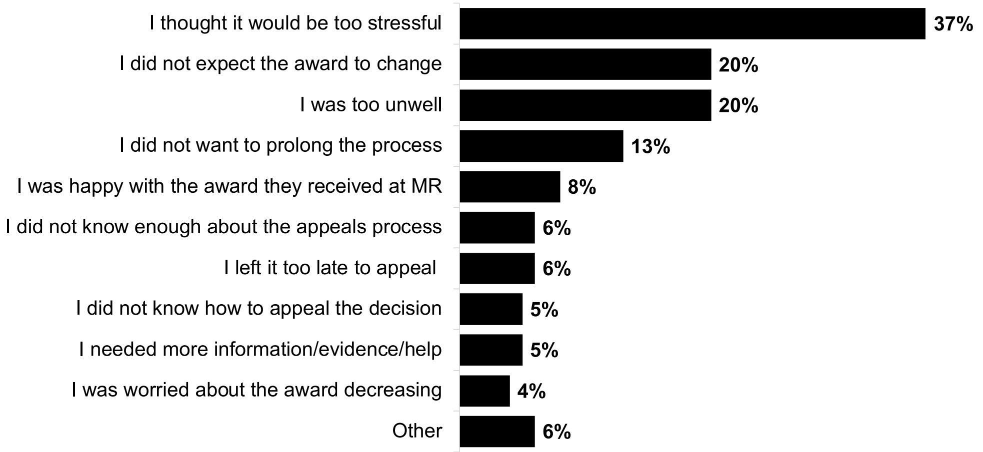
> *“I felt my health problem was not listened to, and it’s quite a serious problem that I have got…I felt that my condition had not been looked at and not really taken into account.”*
>
> Natural reassessment, appeal, award changed, enhanced mobility and daily living

Claimants who did not appeal the MR decision were asked why they chose not to. Figure 11.6 shows responses to this question for the claimants whose awards were not increased after MR and who reported elsewhere in the survey their award outcomes after initial assessment and MR.

Of these claimants, 37 per cent did not appeal because they thought it would be too stressful. One-fifth (20 per cent) said they did not expect the award to change and one-fifth (20 per cent) said they were too unwell.

Figure 11.6

Reasons why claimants did not appeal the mandatory reconsideration decision for claimants who had no increase to their award at MR



Base: All participants in wave three who did not appeal (after going MR) and who provided information on initial award and award after MR and whose award did not increase at MR (189). Answers truncated. Mentions of 4% and over

Please note that more than one response could be given to this question

Question wording: F10. Why did you choose not to appeal the decision?

Claimants interviewed in the qualitative research who decided not to appeal despite being dissatisfied with their decision highlighted the amount of stress and anxiety their PIP claim had brought, which they felt was sometimes detrimental to their condition. This was especially the case for people with a mental health condition. These claimants and their carers sometimes reported that they felt that they did not have the physical and emotional energy that was required to complete the paperwork and then attend the tribunal. Some settled with the decision they had been given following MR to avoid further prolonging the process:

> *"I just found it very stressful. I just thought I can't cope with it if I went to appeal. It's the running round and trying to get evidence, having to wait for them, and then ringing up again; it was all running round trying to get things and then thinking 'have I got the right information?'; 'Have I got what they want to know?' I couldn't face doing it all again."*
>
> Full PIP roll-out, MR only, award changed, standard mobility and daily living

Related to the above, the qualitative research found that the extent to which claimants were able to get support with the appeals process was a key factor in their decision about whether or not to appeal, with lack of support prompting some claimants not to appeal. Claimants for whom this was an issue did not feel confident or able to manage the appeals process independently. They spoke of only doing it if they could do it 'properly' and it was felt this could only be done with support. These claimants often reported feeling fearful of the formal nature of the tribunal, tying it closely to a court summons. Consequently, they needed someone to guide them through the process both practically, in terms of writing documents and thinking about how to answer questions, and emotionally, in terms of preparing them for the hearing and ensuring they understood what would happen then. These claimants expected the appeals process to be daunting, emotionally and physically draining, and they felt they could not face it unsupported. While they wanted to appeal, the lack of support resulted in them not actually appealing. These were usually the most vulnerable claimants, for instance those with behavioural conditions, learning disabilities or cognitive impairment, who struggled throughout the whole of the PIP claim process.

11.2 The tribunal

The majority of survey claimants who appealed attended their tribunal in person (77 per cent). However, whether or not they attended in person, almost all claimants knew that they could bring someone to the appeal (94 per cent). Of those who attended themselves, most (86 per cent) brought someone with them.

The qualitative interviews indicated that, where claimants had requested a paper hearing rather than attending a tribunal, this was largely because they felt too unwell to attend in person.

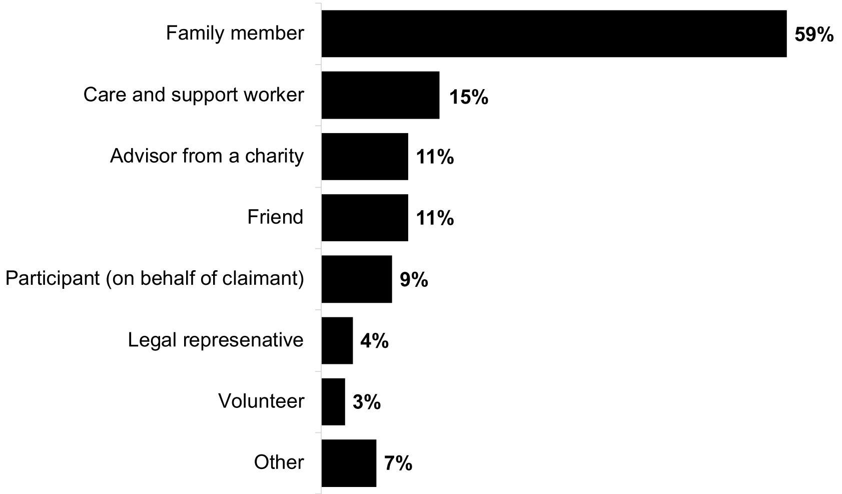
Where claimants in the qualitative interviews spoke of difficulties travelling to the tribunal, this was largely related to the cost of travelling. Some claimants were aware that they could claim back travel expenses but there were examples of claimants who found it difficult to pay the taxi fare upfront. Claimants would have liked to have been made aware of the availability of financial assistance to travel to the tribunal or spoke of wanting financial assistance to have been provided in advance of the appeal.

> *"The cost of travelling there were an issue. I got a taxi there as I can't catch buses. Nobody mentioned paying the taxi fares back."*
>
> New claim, appeal, award changed, enhanced mobility and daily living

As shown in Figure 11.7, family members were the group most commonly brought to the appeal tribunal (59 per cent). Other people brought to the tribunal included care and support workers (15 per cent), an advisor from a charity (11 per cent) and friends (11 per cent). There were also nine per cent of participants in the survey who reported that they had attended in person together with the claimant (as they were not the claimant themselves). Legal representatives were brought by four per cent of those who took someone to the tribunal.

Figure 11.7

Who was brought to the assessment tribunal



Base: All participants in wave three who brought someone with them to the assessment tribunal (232)

Please note that more than one response could be given to this question

Question wording: G5. Who did you bring with you to the tribunal?

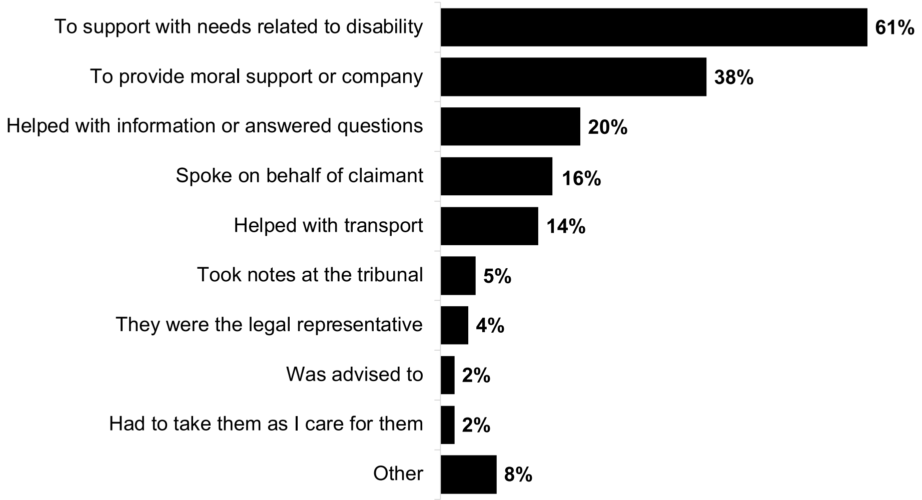
In a small number of cases in the qualitative interviews, organisations such as charities or advocacy groups were able to send formal support to the tribunal with the claimants. However, budgets and lack of capacity often prevented claimants being accompanied by those who had been providing them with formal support earlier in the process:

> *"I wanted a legal person with me, which was CAB, but because of their cuts they couldn't come with me...to this day, I really wish CAB could've been there."*
>
> New claim, appeal, award changed, standard mobility and daily living

Figure 11.8 shows that the main reasons why survey claimants took someone to the tribunal were to support them with needs related to their disability (61 per cent), to provide moral support or company (38 per cent), to help with information or answer questions (20 per cent), to speak on behalf of the claimant (16 per cent), or to help with transport (14 per cent).

Figure 11.8

Why was someone brought to the assessment tribunal



Base: All participants in wave three who brought someone with them to the assessment tribunal (232)

Please note that more than one response could be given to this question

Question wording: G6. Why did you bring this person/these people?

Where they had brought someone with them, two-thirds (68 per cent) reported that the person they brought had spoken to the judge at the tribunal.

The qualitative interviews highlighted the emotional support claimants felt they needed to attend the tribunal and the reasons for taking informal support with them. Claimants wanted someone who knew them well to come with them to help them with answering questions where they struggled to recall examples or lacked confidence in their ability to articulate their situation.

Although most survey participants reported that someone who came with them spoke to the judge, there were qualitative claimants who reported that on entering the tribunal they were told that those supporting the claimant would not be able to speak on their behalf. This caused difficulties for claimants as they felt they needed to draw heavily on the person supporting them to help give clear and detailed responses.

> “[Carer speaking on behalf of claimant] *Basically she was being drilled by four people, and I know the wife, she couldn’t cope with it, she just went along and agreed with what they said, whereas I didn’t. If I had been able to say something I would have risen the questions which I wanted to answer but I wasn’t allowed to do that.”*
>
> Natural reassessment, appeal, award maintained (nil)

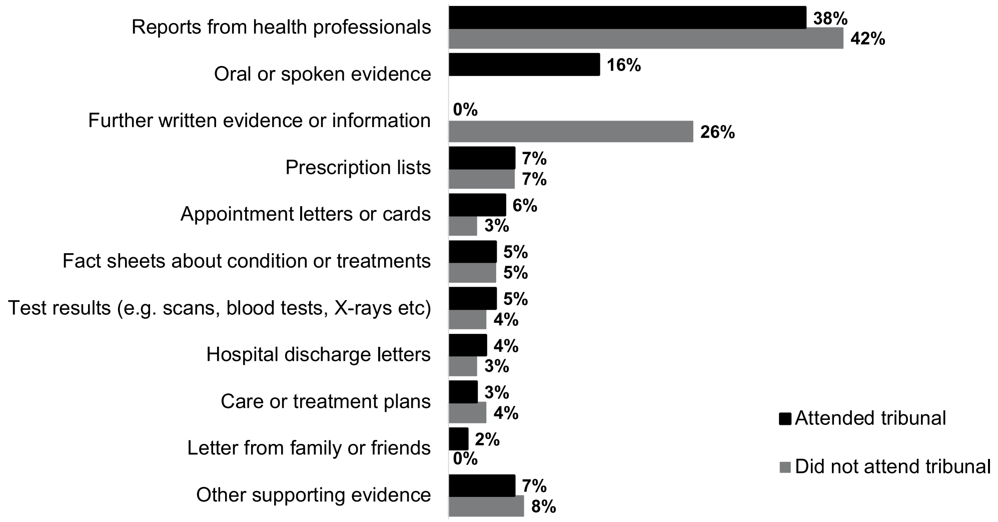
11.2.1 Additional evidence

The majority of those in the survey who appealed their PIP decision provided additional supporting evidence[33] at the appeal stage (62 per cent). Around three in ten claimants who had attended the tribunal had not submitted any evidence at the appeal tribunal (31 per cent) and a similar proportion who did not attend the tribunal had also not submitted any evidence as part of the appeals process (28 per cent). A further seven per cent of both groups could not remember or did not know whether they had submitted evidence.

The additional evidence most commonly submitted was reports from health professionals (38 per cent of those who attended the tribunal in person and 42 per cent of those who did not attend in person). Of those who attended in person, oral or spoken evidence[34] was reported by 16 per cent and of those who did not attend in person further written evidence was mentioned by 26 per cent. There were a wide range of other types of evidence submitted by both groups, including prescription lists, appointment letters and cards, fact sheets, and test results (Figure 11.9).

Figure 11.9

Additional supporting evidence submitted at the appeal



Base: All participants in wave three who have attended appeal tribunal (269) and all who have had appeal decision but did not attend tribunal (83).

Please note that more than one response could be given to this question

Question wording: G12/14. What, if any, additional supporting evidence or information did you submit at the appeal tribunal?

The qualitative interviews highlighted that where claimants supplied further evidence, they did so for many of the same reasons as those who supplied further evidence at MR stage. Often they were prompted by those supporting them in the PIP process to search for more evidence after having been twice unsuccessful in getting the award they wanted. Supporting organisations advised claimants about which evidence

---

[33] The question asked about additional supporting evidence but participants were not asked whether they had ever submitted this evidence before so some of this may have been evidence previously submitted.

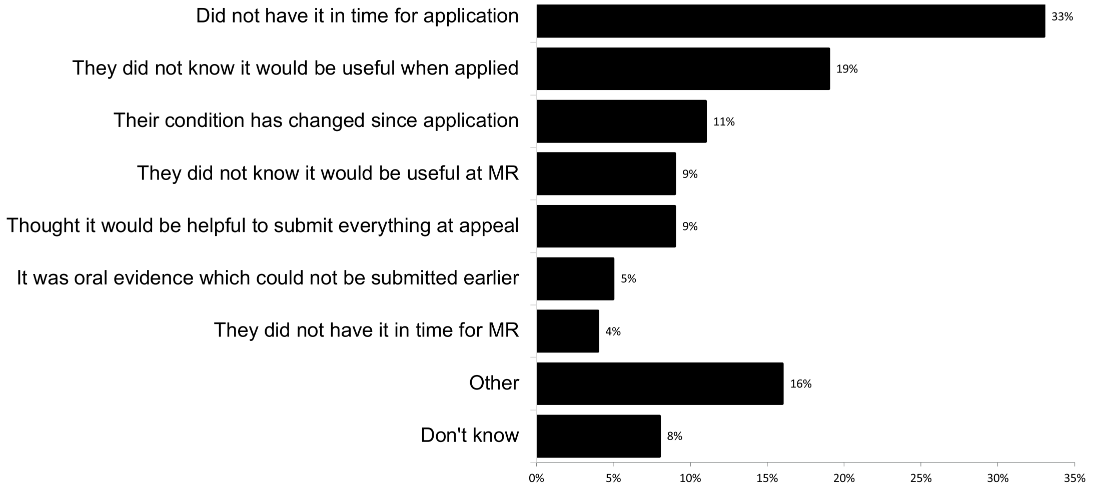
[34] In addition to the written evidence considered by the tribunal, the tribunal will also take into account oral evidence which is given in response to a series of questions from tribunal members.

they should collect and why providing comprehensive evidence was important. Furthermore, the time between getting their decision and getting an appeal date was often used to gather evidence they had not had the time to get for their initial application. For example, claimants were able to contact and get evidence from busy health professionals who had not been available at the time of making their initial application.

As shown in Figure 11.10, of the survey claimants who attended the tribunal and submitted additional evidence, the most common reason for not submitting this evidence at the original application or MR stage was that they did not have it in time for the application (33 per cent). Four per cent also mentioned that they did not have it in time for MR. Claimants also reported that they did not know it would be useful when they applied (19 per cent) and that they did not know it would be useful at MR (nine per cent). Other reasons for not submitting it earlier were that their condition had changed since their application (11 per cent), they thought it would be helpful to submit everything at the appeal stage (nine per cent) or that it was oral evidence which could not be submitted earlier (five per cent).

Figure 11.10

Why this evidence was not submitted earlier in the process



Base: All participants in wave three who submitted additional supporting evidence at their tribunal (168). Answers truncated

Please note that more than one response could be given to this question

Question wording: G13. Why did you submit this additional supporting evidence at the tribunal, and not include it with the original application or submit it during the mandatory reconsideration process?

Claimants who received no award after the tribunal were more likely to report that they didn't submit evidence earlier as they didn't know it would be useful in the original application (32 per cent). In contrast, only 14 per cent of those who received an award stated this reason.

Some claimants in the qualitative interviews thought the panel would collect information on their behalf and were often surprised to find that this had not been the case. These claimants mentioned that they would have liked to have been made aware of this earlier in the process:

> *"We went into the tribunal thinking all this information was there what they should have had but they hadn't had it…If I had known, this was the way it was going, we would have gone to the hospital and got all the relevant information."*
>
> Natural reassessment, appeal, award maintained (nil)

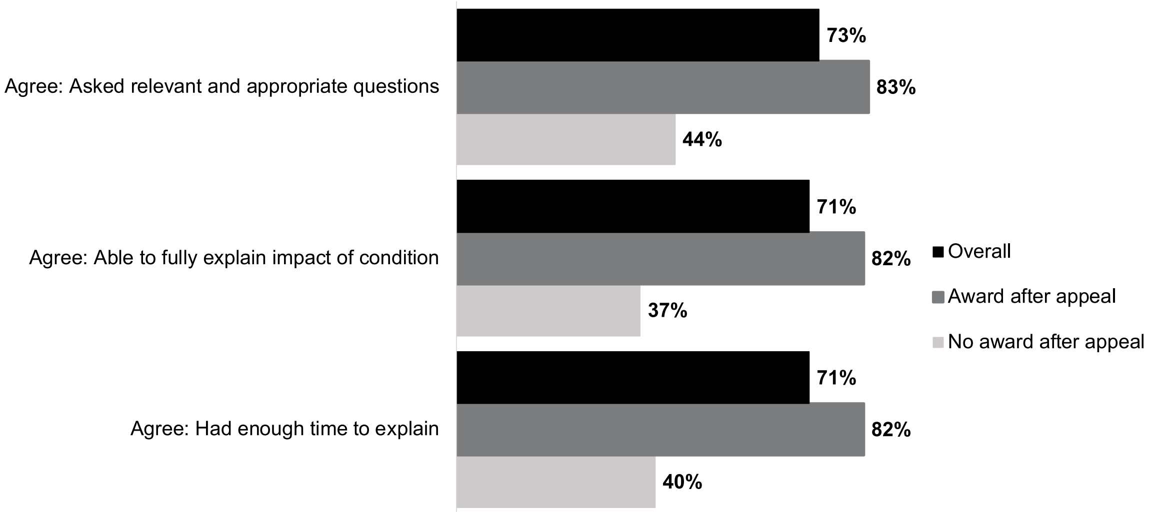
Additionally, one claimant in the qualitative research suggested they had deliberately not provided some evidence in earlier stages of the claims process. This claimant was legally trained and had felt that some of the evidence they had available would have simply been ignored at the MR stage. As such, they had decided to withhold it until the appeals process where they felt it would have a greater impact.

11.2.2 The tribunal itself

Claimants in the survey were asked for their views on the appeal tribunal. The majority agreed that they were asked relevant and appropriate questions for their condition (73 per cent), that they were asked questions which allowed them to fully explain the impact of their condition on their day-to-day life (71 per cent) and that they had enough time to explain how their condition affects them (71 per cent). There were clear differences between claimants according to the outcome of their appeal, with those who received an award reporting a much more positive experience of the appeal tribunal than those who did not. For example, 82 per cent of those who received an award reported they had enough time to explain themselves, compared with 40 per cent who received no award after appeal (Figure 11.11).

Figure 11.11

Experience of the appeal tribunal



Base: All participants in wave three who attended tribunal (269). Subgroups of all with award after appeal (199) and all with no award after appeal (69)

Question wording: G16. Please tell me to what extent you agree or disagree with each of the following statements about the appeal tribunal?

The qualitative interviews revealed that claimants' experiences of the tribunal were very varied. Some spoke positively about the panel members, describing them as sympathetic and understanding in their approach.

Additionally, claimants were particularly positive about having a doctor on the panel, feeling this brought expert knowledge to the proceedings. There was discussion of the doctors showing a high awareness of their condition and helping them to develop their answers when struggling to talk about how it impacted on them.

> *"When I'm nervous, my legs go numb and I was practically shivering when they were asking me stuff…the judge was giving the questions like the assessor was doing it, and she* [the doctor] *kept on saying 'wait, wait' and she* [the doctor] *would ask me more things and I was thinking 'she knows a lot about epilepsy.'"*
>
> Natural reassessment, appeal, award changed, nil mobility and standard daily living

The expertise and professionalism of the panel contributed to the perceptions that it was independent.[35] Claimants in the qualitative research felt that the panel adopted a neutral stance towards their case. This was highlighted for claimants by the way in which the panel interacted with each other with some suggesting that the panel questioned each other around the relevance of the questions being asked and tempered their questions accordingly.

However, not all claimants spoke of the tribunal as a positive experience. In some cases, claimants spoke of feeling rushed by the panel to answer their questions. Consequently, they felt the panel had not adequately explored or listened to their

---

[35] Appeals are under the responsibility of HMCTS, and DWP is not represented on tribunal panels. Instead it is a party to the appeal in the same way as claimants.

answers before moving on to the next question. Claimants also spoke of feeling overwhelmed by the line and volume of questioning which was described as a ‘barrage’ of questions. This was most readily felt by those who had difficulties articulating themselves and recalling experiences, and so relied heavily on those supporting them. Claimants who had a mental health condition were most likely to feature among these claimants.

> “*I felt like it was an inquisition…I understand that it was part of the process but why they did it in such* [a way] – *maybe to save time...?*”
>
> New claim, appeal, award changed, nil mobility and standard daily living

Additionally, some claimants in the qualitative research, particularly prevalent among those with a mental health condition, spoke of the questions feeling irrelevant and intrusive. These claimants felt that at times the questions went beyond how their condition(s) affected them and into details about their personal life that they did not feel comfortable disclosing or which they felt were not relevant. This led some claimants to feel as though the panel were trying to ‘catch them out’.

In terms of next steps, the majority of claimants said they would accept the decision after appeal. However, this varied according to outcome, with those with no award being less likely to accept the decision.

11.3 Decisions and next steps

Survey claimants who had received a decision were asked about the outcome of their appeal. The majority received a PIP award (72 per cent) and one-quarter received no PIP award (26 per cent). The most common award received was standard daily living (38 per cent), followed by standard mobility (26 per cent), enhanced mobility (20 per cent) and enhanced daily living (20 per cent). Some claimants were awarded PIP but they didn’t know what type of award they had received (two per cent).

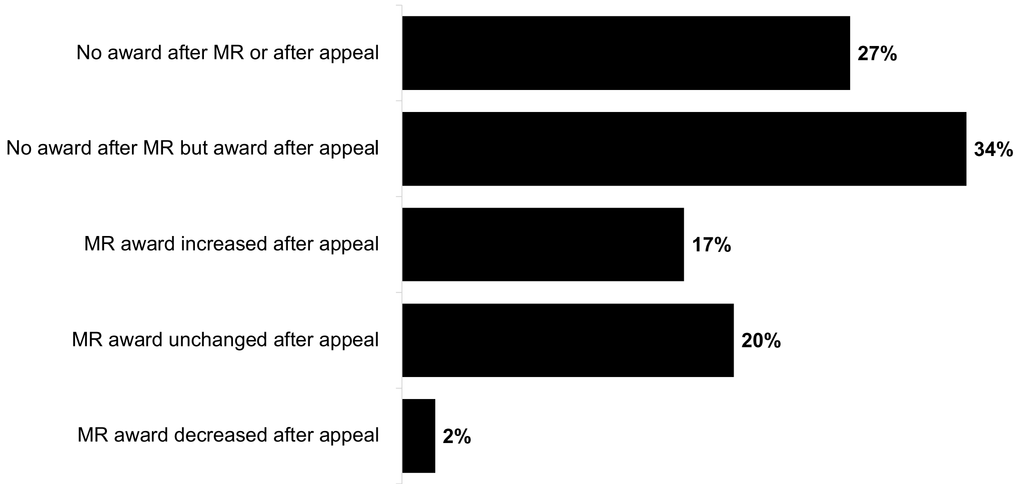
Furthermore, it was possible to look at the change in award between MR and appeal among participants who appealed and for whom we had information about their award after MR and after appeal. As shown in Figure 11.12, 27 per cent had no award after the MR and no award after the appeal. About one-third (34 per cent) had no award after MR but did have an award after appeal and 17 per cent had an award after MR which had increased after appeal (by adding another element or going from standard to enhanced). One-fifth had an award after MR but overall there was no change to their award after appeal[36] (20 per cent) and two per cent had a decrease in their award after appeal.

---

[36] In order to look at changes to award, participants were assigned a score for their award after MR and appeal with no award having a score of zero, a standard award of daily living or mobility giving a score of one and an enhanced award of daily living or mobility giving a score of two. The maximum score is four – for enhanced mobility and enhanced daily living. No change to the award is where the score has not increased. The precise award may have changed e.g. someone may have gone from enhanced mobility and no daily living to standard award for both but this is counted as no change as the number of combinations is too great to analyse each individual type of change. The MR award can increase after appeal through receiving enhanced rather than standard for one or both elements or receiving an element that was not previously awarded.

Figure 11.12

Change in award outcome between MR and appeal



Base: All participants in wave three who provided details of their MR award, went to appeal, received an appeal outcome and provided details of the award after appeal (329)

Data on change of reward is based on a derived variable and not a survey question.[37]

The outcome of the appeal tribunal did not differ significantly by assessment provider. New claimants were more likely to receive no award (39 per cent) compared to reassessments (21 per cent) and full PIP roll-out claimants (nine per cent).

Figure 11.13 compares the perceived reason for the decision for survey claimants whose award was unchanged or declined between MR and appeal and those claimants who received a new or improved award after appeal[38].

Participants were asked what they considered to be the reason for their award changing at appeal. Of those who received a new or improved award after appeal, the most common reasons given were that the tribunal believed the original assessment understated their condition (23 per cent compared with ten per cent of those with an unchanged or smaller award after appeal) and oral evidence given at the appeal (19 per cent of those with new or improved award compared with three per cent of those with an unchanged or lower award). Other reasons given included that the tribunal believed the assessor did not award the correct number of points (14 per cent of those with new or improved award compared with five per cent of those with an unchanged or lower award) and additional written evidence submitted for the appeal (12 per cent and eight per cent).

---

[37] *Question wording: Derived variable created from answers to:*

Wave three E7. Thinking about the mandatory reconsideration notice you received from DWP, what was the outcome of the request? We are interested to know what you were awarded as a result of the mandatory reconsideration process.

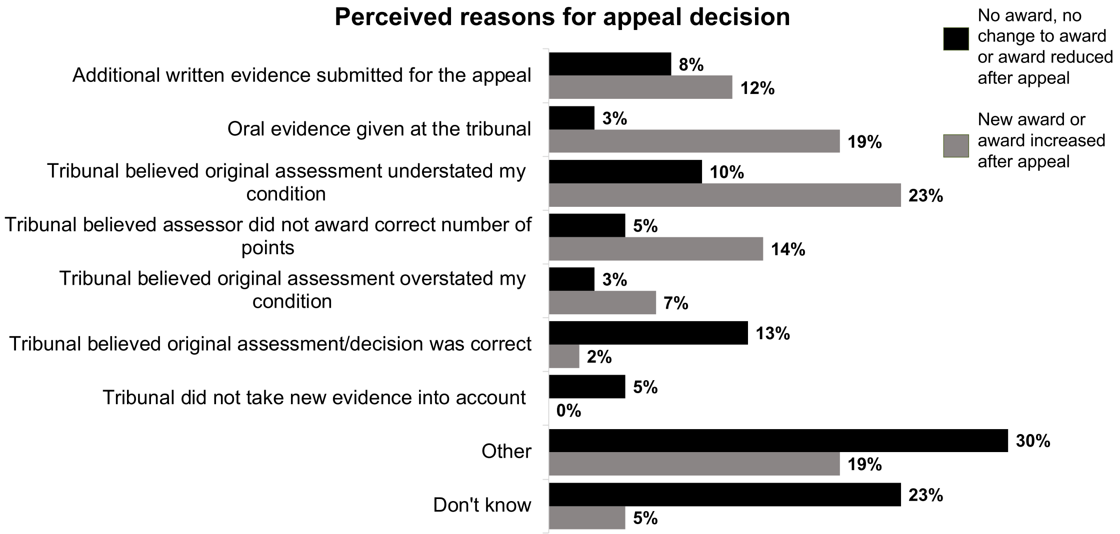
Wave three F9. Did you appeal the mandatory reconsideration decision?

Wave three H1. Thinking about the decision you received after you appealed, what was the outcome of your appeal? We are interested in the decision you received at the end of the appeal process.

[38] *See 31 above.*

Claimants with no award, no change to their award or a reduced award after appeal were more likely than those who had a changed award after appeal to respond that the tribunal believed the original assessment was correct (13 per cent and two per cent). Those who had no change to their award or a reduction were also more likely than those with a new or improved award to say that the tribunal did not take new evidence into account (five per cent and zero per cent), to give other reasons (30 per cent and 19 per cent) or to say they did not know the reason for the decision (23 per cent compared with five per cent).

Figure 11.13



Base: All participants in wave three who provided details of their initial award, went to appeal, received an appeal outcome and provided details of the award after appeal (329). Answers truncated. Mentions of 5% and over (for at least one group)

Please note that more than one response could be given to this question

Data on change of reward is based on a derived variable and not a survey question.[39]

The qualitative interviews found that claimants who were happy with the outcome of their appeal largely credited the panel for the change in decision. As described previously, this was related to the perceived impartiality and independence of the panel, and a doctor's presence on the panel with the right expertise to understand their condition and its impact. This view was often contrasted with their experience of the health professional in their face-to-face assessment who was felt to lack this expertise and so failed to make a fair assessment.

---

[39] Survey question: *What do you believe was the main reason you received this decision?*

Wave three A12 for new sample participants. Thinking about the decision letter you received from DWP, what was the outcome of the application? We are interested to know what you were first awarded, before going through the mandatory reconsideration or appeals processes.

Wave two F2 for old sample participants. Now thinking about the decision letter you received from DWP, what was the outcome of the application?

Wave three F9. Did you appeal the mandatory reconsideration decision?

Wave three H1. Thinking about the decision you received after you appealed, what was the outcome of your appeal? We are interested in the decision you received at the end of the appeal process.

Wave three H2. What do you believe was the main reason you received this decision?

> *"I think they had the right type of people on the panel…there was something that flagged up to them that they needed more information…and they then got that information and made the decision on that… on the panel, they'll know the legal side of things...and some sort of medical professional – they'll know the other side...I just think it was the right people who looked at the information."*
>
> New claim, appeal, award changed, enhanced mobility and daily living

Some qualitative claimants who were disappointed with the outcome of their appeal expressed feelings that the panel's questions had not allowed the claimant to adequately explain how their condition(s) impacted their life. Often these were claimants with mental health conditions who felt that the panel did not show enough expertise around their condition and its impact on them. Others concluded that the panel needed to pay some heed to DWP.

> *"I think they have to balance it up. They can't go against the DWP decision. I do feel for the court in some respect. They are impartial but they have to take DWP into consideration. I don't know. I think given the feedback from people around me, my family and those in a professional capacity, the award should have been higher and for longer."*
>
> New claim, appeal, award changed, standard mobility and daily living

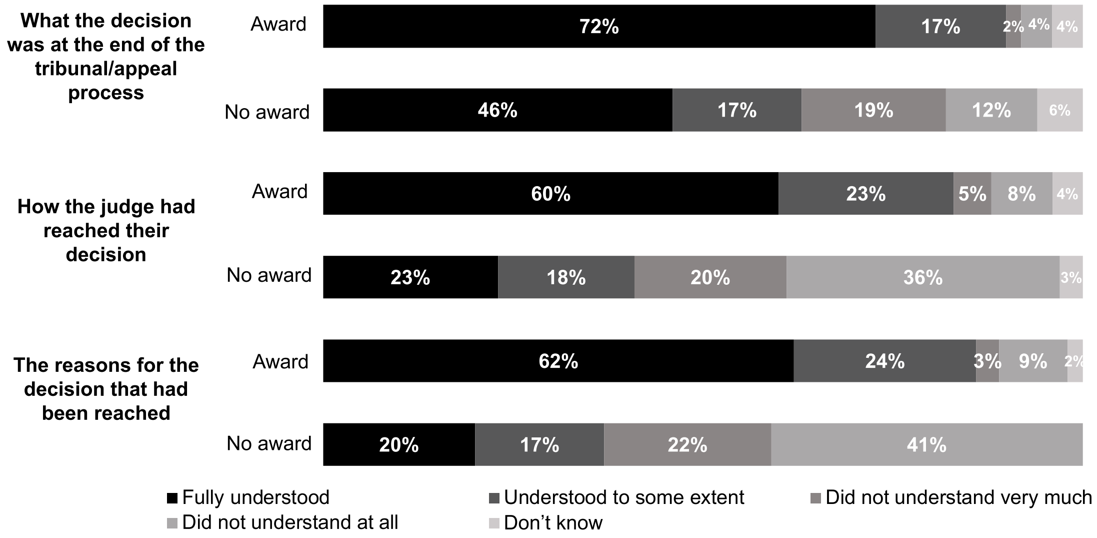
Where claimants accepted some responsibility for not receiving the decision they wanted, this was not largely felt to be because they did not meet the eligibility criteria but more because they had not supplied the right information to support their case. They either came to this conclusion through being told by the tribunal panel that they did not have all the evidence they needed to support what they were saying, or because they had been actively trying to collect evidence (for example, diagnosis information) but had been unsuccessful in collecting it before the tribunal.

Overall, 83 per cent of survey claimants said they understood the decision at the end of the tribunal, 73 per cent understood how the judge reached their decision and a similar proportion (74 per cent) understood the reasons for the decision that had been reached.

Generally, those who received an award after appeal had a better understanding of the decision than those who did not receive an award (Figure 11.14). Survey claimants awarded PIP after appeal were more likely to fully understand what the decision was (72 per cent) compared to 46 per cent of those without an award. Claimants awarded PIP were also more likely to fully understand how the judge reached their decision (60 per cent) compared to 23 per cent of those not awarded PIP. Finally, those awarded PIP were more likely to fully understand the reasons for this decision (62 per cent) compared to 20 per cent of those without PIP.

Figure 11.14

Understanding the tribunal decision



Base: All participants in wave three who attended their tribunal (269). Subgroups of all participants who received an award after appeal (199) and all who did not receive an award after appeal (69)

Question wording: H3: Please tell me to what extent you understood or did not understand each of these things? Statements summarised in the figure above.

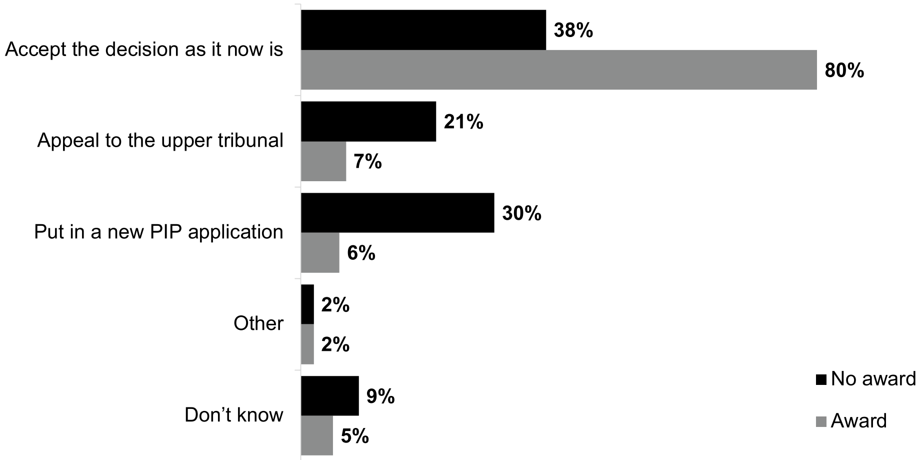
As with MR, not all claimants in the qualitative interviews were clear about why they had received the decision that they did and what this meant for them. For example, one claimant spoke of not understanding why the points they had been awarded had increased but their award had not changed. Where claimants had received a change of decision this was less of a concern than among those who did not get the decision they wanted.

The qualitative research showed that being given enough time at the end of the tribunal to process and understand the decision was the main determining factor as to whether claimants felt they were clear about how their decision had been made. Where claimants did not feel clear about their decision, it was common for them to suggest that the panel only told them what the decision was when they came back into the hearing and did not give them further information about the decision. Often they were referred to the letter provided after the hearing, to get more information, but this was felt to lack any reasoned explanation about their decision. Feeling overwhelmed also contributed to claimants' lack of understanding of the decision.

After receiving an appeal tribunal decision, 69 per cent of claimants in the survey intended to accept the decision as it was. Other intended next steps included appealing to the upper tribunal (11 per cent) or putting in a new PIP application (13 per cent). Some claimants did not know what they would do next (six per cent).

As shown in Figure 11.15, claimants who were awarded PIP after appeal were more likely to plan to accept the decision (80 per cent) compared to those not awarded PIP (38 per cent). Those not awarded PIP were more likely to plan to appeal to the upper tribunal (21 per cent) or put in a new PIP application (30 per cent) compared to those awarded PIP (seven per cent and six per cent respectively).

Figure 11.15
Next steps for claimants



Base: All participants in wave three who received a decision after an appeal tribunal (353). Subgroups of all who received an award after appeal (253) and all who did not receive an award after appeal (95). Mentions of 2% and over

Please note that more than one response could be given to this question

Question wording: H6: What do you think you will do now in relation to your PIP application?

11.4 Chapter summary

The majority of claimants agreed clear information about appeals was provided in the PIP decision letter and MR notice, and most did not seek additional information from DWP. Where claimants did seek information from DWP, this tended to be factual information on what the appeals process involved. The qualitative strand indicated that it was common for claimants to seek advice from organisations about the appeals process, especially if they had already done so at the MR stage.

Most claimants attended the appeal tribunal in person and most people who did so took someone with them (mainly for moral support or support with needs related to disability).

A small number of claimants did not submit additional evidence at tribunal, but most submitted reports from health professionals, oral or written evidence. The most common reason for not submitting this earlier in the PIP process was that they did not have it in time for the application.

The experience of the appeal tribunal differed between claimants according to the outcome of their appeal. Those who received an award tended to report a more positive experience. Positive experiences related to a perception of the panel being independent and impartial, as well as the doctor on the panel asking relevant questions and understanding their condition. Claimants who reported a poor experience tended to be those who found it difficult to articulate themselves and to recall experiences. They reported struggling to explain to the panel the issues they experience as a consequence of their health conditions. They also described being asked a series of challenging questions, which is the expected process during a tribunal. However, they felt these questions did not give them the time to fully explain their condition and its impact, or did not seem relevant.

In terms of next steps, the majority of claimants said they would accept the decision after appeal. However, this varied according to outcome, with those with no award being less likely to accept the decision.

12 Key themes

The main part of this report has been structured around the three individual waves of the Personal Independence Payment (PIP) claimant experience research which examined each stage of the PIP claims process:

Wave one: Applications for PIP

Wave two: Assessment and decisions

Wave three: Mandatory reconsideration (MR) and appeals

This approach has allowed each element of the PIP claimant journey to be explored in detail. This chapter brings together some key themes which cut across all stages of the PIP claims process and to compare and contrast experiences at different stages.

12.1 The role of evidence

12.1.1 Background

The PIP process is designed to allow claimants to submit evidence to support their claim at each stage of their journey. Claimants are advised of this option within Department for Work and Pensions (DWP) communications at various stages of the application process. Despite this, claimants' awareness of the importance of providing evidence to support their claim was variable, and so was the amount of evidence they actually went on to provide.

This thematic section looks more closely at evidence provision, the key drivers for the provision of evidence, what is typically supplied and why, and how it is understood to have fed into key decisions in the claim process.

12.1.2 Awareness around the need for evidence

The majority of claimants showed an awareness of the need to provide some form of evidence when completing their initial 'How your disability affects you' questionnaire. Section 3.3 shows that 78 per cent of claimants in the survey said the form made it clear how to submit evidence to support their application (compared with 14 per cent who were not clear) and 72 per cent said they were clear about why they might need to submit evidence (compared with 19 per cent who were not clear). Later in the process, claimants also indicated a high awareness of the possibility of providing further evidence. However, while reported awareness of the possibility of providing further evidence at different stages of the process remained relatively high (for example, 62 per cent of claimants in the survey said DWP made it clear that they could submit additional supporting evidence at MR), the actual provision of evidence at the stages between the ‘How your disability affects you’ questionnaire submission and the appeal tribunal was much more variable. For example, nearly half of claimants (48 per cent) did not take any supporting evidence to their face-to-face assessment (sections 6.1 and 10.2). Well over half submitted evidence at their appeal tribunal (62 per cent) (section 11.2).

The participants in the qualitative research highlighted that claimants were often more uncertain about the need to provide supporting evidence at the stages following the completion of the ‘How your disability affects you’ questionnaire. It was not uncommon, therefore, for those being interviewed as part of the qualitative research to say that they were not aware that they could provide additional evidence in advance of the face-to-face assessment or MR (sections 6.1 and 10.2). They showed less certainty at these stages about the value of additional evidence and how it would be used.

Participants often suggested that they only became aware of the importance of providing evidence when consulting with support organisations at the appeal stage. Indeed, the survey found that around one-fifth of claimants (19 per cent) who went through to the appeal tribunal reported that they did not provide evidence earlier in the process as they did not know it would be useful when they completed their original application (section 11.2).

12.1.3 Perceived responsibility for gathering and collating evidence

There was no consensus among claimants regarding whose responsibility it was to gather and collate evidence to support a claim, with around one-third of claimants interviewed in the survey (34 per cent) thinking it was DWP’s responsibility, a similar proportion thinking it was the claimants themselves (33 per cent), and one-quarter saying they did not know (25 per cent) (technical report Chapter 8).

The qualitative research highlighted that not being clear about the importance of providing evidence, where responsibility laid for collating it and what evidence was required, led participants to make incorrect assumptions about the evidence that DWP or the assessment provider would collect. Specifically, participants sometimes assumed that medical professionals involved in their treatment would be consulted separately, regardless of the supporting evidence already provided by the participant (section 3.3). Since the ‘How your disability affects you’ questionnaire requested medical professionals’ contact details, participants assumed that they were giving DWP permission to contact them and that DWP might, therefore, approach medical professionals. Some claimants expressed surprise when they found out later in the claim process that the health professionals involved in their care had not been contacted. There were also participants in the qualitative research who assumed that DWP had access to their medical records. As they did not see information to counteract this belief, many continued to believe that DWP had access to this information throughout the process.

The participants who believed this were more likely to not supply evidence, or only supply more basic evidence such as prescriptions and medication lists. These claimants underestimated the importance of collecting evidence, until they sought help at the MR or appeal stage and were made aware of the importance of evidence. Some never understood the importance of providing evidence and so did not understand why they were not awarded PIP, despite feeling that they should have been.

12.1.4 Knowledge of what types of evidence should be provided

Even where awareness of the possibility of providing additional evidence was high, at all stages in the claims process claimants showed less clarity around what evidence they should supply and how much. The qualitative interviews in part indicated that this was linked to a tendency across claimants to skim read, or not read in full, the information provided by DWP. As such, key information about what evidence to supply was often missed by claimants. Information was also missed by participants in the qualitative interviews who had difficulty with reading and comprehending the information; largely where they had low literacy or limited English, or a condition which impacted on their concentration or memory.

The survey highlighted the importance of reading the information supplied by DWP on evidence – those who had read DWP guidance were more likely than claimants overall to agree that they were clear about evidence required. For example, 81 per cent of claimants who had read DWP guidance said they were clear about how much evidence to submit compared with 65 per cent of all claimants (section 3.3).

In the qualitative research where participants had read the information provided by DWP on evidence, there were participants who still felt confused and in need of further information on what they should be supplying. In particular they wanted more information about what constituted strong and useful evidence, how old the evidence provided could be, and what amount of evidence to provide. As a result, several participants supplemented the information provided by DWP about evidence with information from alternative support services (section 3.3 and 10.2).

The low understanding around what evidence to supply across all claimants (regardless of whether they skim-read the material), led claimants in both the quantitative and qualitative research to indicate that they supplied everything available to them regardless of whether this information had been requested. For example, in the survey, 30 per cent of claimants said that when they decided what evidence to supply with their initial application form, they provided everything they had (section 3.3). This was also reflected in the reasons for supplying further evidence at later stages in the process (for example, 33 per cent of claimants suggested they took further information to their face-to-face assessment as they thought it would be helpful to take everything they had – section 6.1).

At every stage of the process a range of evidence was supplied but the most common forms of evidence supplied across all stages included:

- Reports from health professionals
- Prescription lists
- Appointment letters or cards
- Hospital discharge letters
- Test results

12.1.5 Barriers to providing evidence

At each stage of the process, the survey findings and qualitative interviews indicated that while claimants did not provide evidence for a range of reasons, there were some key themes that ran through the whole process. Firstly, as has been mentioned earlier, with limited awareness of what specific evidence was needed and why, claimants assumed that evidence was not required at the various stages in the process (for example, see section 10.2). Secondly, claimants also had difficulties with getting the evidence required either because it was not available to them, they could not get it in time, or because the charge for getting it was too high. Consequently, there was a significant proportion of claimants who were unable to submit evidence which they wanted to (section 3.3, 6.1 and 10.2). For example, nearly one-third (31 per cent) reported that at the initial application stage there was evidence they wanted to submit but could not. However, there was no significant difference in the outcome of the application according to whether the claimant reported there was evidence they wanted to submit with the application but were unable to (section 8.2.2).

Finally, the quantitative analysis of data from those who took part in more than one wave, also indicated that some claimants experienced difficulty with pulling together and accessing the data they needed throughout the claims process and consequently were unable to provide it at any point (6.1).

12.1.6 Support with evidence

Support from others was key in supplying evidence and deciding what to supply (sections 3.3, 6.1, 10.2 and 11.2). Linked to the difficulties claimants experienced in knowing what evidence to supply, it was common for participants in both the quantitative and qualitative research to report seeking or needing support to provide evidence. For example, 17 per cent of claimants in the survey took advice from a social care or health professional when thinking about which information or evidence to supply with their application form (section 3.3 – 34 per cent of those who sought advice).

Participants received support from a range of sources including friends and family. However, the qualitative research showed that advice from support organisations was key in encouraging participants to provide evidence (section 3.3). They made participants aware of the importance of providing comprehensive and up-to-date evidence to support their claim and were able to help them obtain this evidence (sections 3.3, 6.1, 10.2 and 11.2). As such, the qualitative interviews showed that those who had support in providing evidence were more likely to supply detailed and relevant evidence such as doctors' notes and reports. Having support with evidence, therefore, directly impacted on how well they were able to put their case forward. However, it is worth noting that section 8.2 shows that there was no significant link between whether advice was sought on what evidence to provide and the outcome of the PIP award. In section 6.1, the survey data shows that claimants who were awarded PIP were significantly more likely to say they brought reports from health professionals (34 per cent) and care or treatment plans (five per cent), than those who had not been awarded PIP (24 per cent brought reports from health professionals and three per cent brought care or treatment plans).

The qualitative interviews showed that not all claimants were able to access support and where this was the case they appeared to be placed at a disadvantage by not having access to advice, particularly around evidence. Indeed, some claimants in the qualitative interviews spoke of wanting support to help them make sense of the process and the struggle they experienced at each stage without it. Difficulties experienced in accessing this support included long waiting lists preventing timely support, a lack of support available in their local area and, for some, not being aware that they could access support.

12.1.7 How evidence fed into claim decision

Views on how evidence was used in making an award decision were divided between participants. The survey findings showed that 68 per cent understood how their application form, evidence and what was said at the assessment had been taken into account while 27 per cent were not clear (section 8.2). The use of evidence was less well understood than other aspects of the decision and the decision letter. In the qualitative interviews it was common for participants to say that they would have liked the decision letter to be clearer on how their supporting evidence had been used (section 11.3). They often felt that the decisions made at each stage of the claim process had been largely based on the face-to-face assessment report rather than any evidence they had supplied. They therefore suggested that they would like the decision letter to include an acknowledgement of the evidence they had submitted, covering how it had been considered when making the decision.

12.2 Communications from DWP

12.2.1 Background

Claimants typically receive information from DWP at various points throughout the PIP process, either standard information such as the guidance to help them complete the ‘How your disability affects you’ questionnaire and the letter inviting them to an assessment, or more tailored communications about the outcome of their claim, and if applicable the MR notice and appeal documents. This thematic section looks at the accessibility of the information provided by DWP to claimants and its comprehensiveness.

12.2.2 Accessibility of DWP communications

In the survey, when claimants who took part in more than one wave were asked about the clarity and usefulness of the information provided by DWP on specific aspects of the claim journey, a majority of claimants consistently answered positively. For example, just over two-thirds of claimants (68 per cent) found the supporting information provided with the application form useful (technical report Chapter 8). When asked about the whole claims process, 70 per cent of claimants who took part in more than one wave of the survey agreed that the letters from DWP were clear, and 69 per cent agreed that other information they received from DWP was clear (appendix A).

Although clear for the majority, a small group of claimants felt that the information lacked clarity on many aspects of the claim process, despite receiving the same information as others. The qualitative research found that reading, understanding, and remembering the information sent out by DWP was challenging for some claimants, who needed help. They felt that the information provided was not accessible to them, that it was too lengthy, or that it contained complex words or ‘technical jargon’ that they were not familiar with. These difficulties particularly happened when:

- The claimant’s health condition affected their ability to concentrate, read, understand, or remember information. For example, if they had learning disabilities, ADHD, a brain injury, or dementia.
- They had low literacy skills.
- They spoke little English.

Documents sent by DWP, which these claimants found hard to digest, included the application form (and in particular how some of the questions related to the specifics of their condition), the supporting information sent alongside it (which was considered lengthy), the award letter and the MR notice. This sometimes meant that claimants did not read these documents themselves but sought help to understand them. In other cases they did not read them in full and instead just looked for the information that they really needed – for example, whether they had been awarded PIP or not. This meant they missed out the more detailed points such as the importance of evidence, which impacted on their overall experience of the claim process, and possibly on their PIP award as well.

In contrast, the qualitative research found that the information about the next stage of the claim process provided to claimants over the phone when they first registered their claim was consistently well received and well understood, and that it really helped them know what to expect. The text messages from DWP that some participants in the qualitative research mentioned were also very welcome: those who received them felt reassured that their claim was progressing, and they had a better understanding of how long the next stage of their claim was likely to take.

12.2.3 Comprehensiveness of DWP information provision

Regardless of claimants’ abilities to read, understand and remember the information provided by DWP, there were some specific aspects of PIP and the claims process where understanding was more limited or where a significant minority of claimants thought the information provided was not clear.

These included:

- What PIP is intended for as a benefit, and the application process.
- Whose responsibility it is to gather and collate evidence to support a claim.
- What the assessment would involve and why it was needed.
- The information about the MR process included in the decision letter, and the content of the MR notice.

These points are detailed in turn.

Before applying for PIP, around three-quarters of claimants interviewed in the survey said they knew just a little or nothing at all about why a person might be awarded PIP or the process for claiming (73 per cent and 79 per cent respectively; section 2.2).

This meant that claimants relied on the information they gathered during the claims process to build their understanding of PIP as a benefit and the associated claims process. However, evidence from the qualitative research indicated that even when interviewed later in the claims process, participants' understanding of PIP as a benefit and of the application process remained variable, which sometimes impacted on perceptions of fairness of the outcome of claims during the later stages of the process. This happened when full PIP roll-out claimants who had a lifelong award of DLA were not awarded PIP despite no improvement or change in their condition, or when claimants who had been told by their doctor that they were unfit for work were found ineligible for PIP.

The availability of help and assistance to navigate the claims process was particularly important for claimants who did not understand PIP as a benefit or who did not understand specific aspects of the PIP application process. However, for the group of claimants who took part in more than one survey wave, when asked questions about the process as a whole, around one-third (32 per cent) disagreed that DWP offered adequate help or assistance with navigating the process (appendix A). The qualitative research found that help was not always available, or not available within the timeframe, for example, for completing the 'How your disability affects you' questionnaire or requesting MR. As a result of this, some claimants did not request MR or did not appeal despite disagreeing with the outcome of their claim. In other cases, claimants called DWP to ask for an extension, but awareness of the possibility of asking for an extension was patchy.

Looking at the clarity of the information provided about the assessment, in the survey over one-third of claimants thought that DWP did not make it clear to them why they might have a face-to-face assessment consultation or what happens during one (39 per cent and 38 per cent respectively, section 5.2.2). When asked about the specifics of the face-to-face assessment, 60 per cent of claimants expected to be asked about their condition during the assessment, and just under half thought the assessor would ask them how their condition affects them day-to-day (48 per cent; section 5.3). Related to this, the qualitative research found that it was common for claimants to expect their assessment to involve a medical examination. They also thought this would be conducted by a doctor or nurse familiar with their conditions, but this was not necessarily the case.

While the decision letter included some information about the MR process, in the survey one-third of claimants (33 per cent) found it not very clear or not at all clear, rising to two-fifths (40 per cent) of those claimants who requested a MR (section 10.1). The qualitative research showed that claimants would have liked the letter to include more details about what the MR stage consisted of, what they needed to do to start the MR process, and whether there was a form to complete as part of that stage.

Similarly, two-fifths of claimants (40 per cent) who requested a MR sought help to understand the MR notice (section 10.2.1). Specific concerns raised by claimants in the qualitative research who had received a MR notice included it being written with formal or legalistic terminology, being too long to read and absorb, and not making it clear how the decision had been made and what the review had involved.

12.3 Contacting DWP

12.3.1 Background

This section looks at claimants' experiences of contacting DWP for information or advice at different points in the claims process. It starts by identifying the stages of the claims process when claimants were most likely to contact DWP, then looks at the usefulness of the information or advice provided by DWP to claimants who contacted them. Finally, it examines why some claimants did not contact DWP despite needing help at certain stages of the claim process.

12.3.2 Reasons for contacting DWP

In the wave one survey, around one in five claimants (19 per cent) who had received a decision by the time they were interviewed said they contacted DWP between sending their application form back to DWP and receiving their decision letter (technical report Chapter 8). For over half of them (57 per cent), this was to check on the progress of their application (technical report Chapter 8). The qualitative research showed that the claims process was often an anxious time for participants, who wanted to know if the information they provided when registering their claim had been recorded correctly, if their application had been received and when they could expect to hear about the next steps. In light of this, participants who received updates and reminders by text message from DWP felt more aware of, and reassured about, the progress of their claim than those who did not. These text messages typically told them that their application or their assessment report had been received and when they could expect to hear about the next steps. The messages provided peace of mind that their claim had not been lost or forgotten and helped them know what to expect in terms of timings.

Over one in five claimants interviewed in the survey who had a face-to-face assessment called DWP to obtain information or advice about the assessment process (22 per cent called the PIP enquiry line and a further six per cent called another DWP telephone line, section 5.1). This was likely to be related to lower levels of understanding of this stage of the claims process among claimants: around two in five claimants thought that DWP did not make it clear to them why they might have a face-to-face assessment consultation or what happens during a face-to-face assessment consultation (39 per cent and 38 per cent respectively; section 5.2.2).

A minority of claimants (15 per cent) called DWP for information about the appeals process before making an appeal and after sending their application form to DWP (section 11.1.1), rising to three in ten of those who requested MR (31 per cent). Usually this was to find out what the appeals process would involve (section 11.1.1), something that many participants in the qualitative research were keen to know before deciding whether to appeal or not. In particular, the prospect of attending a court hearing was considered daunting and stressful.

Overall, the proportion of claimants calling DWP at each stage of the process was broadly similar, suggesting that they did not require more support from DWP at a particular point in their claim. Where claimants did contact DWP, the purpose of these calls was primarily transactional, such as questions about the next steps of the process, rather than seeking advice or support.

12.3.3 Usefulness of contact with DWP

Looking at the clarity of the information and advice provided, in the survey just under three-quarters of those who sought information or advice about the assessment from DWP by phone found it very clear or fairly clear (73 per cent), with just under one-quarter finding it not very clear or not clear at all (23 per cent). Views were more mixed regarding the clarity of the information provided over the phone by DWP about the appeals process, with over one-third of claimants who obtained information from DWP over the phone saying it was not very clear or not at all clear (36 per cent).

A small number of claimants in the survey sought help from DWP to understand their decision letter (section 8.2.1), with mixed results: of the 89 claimants who did so, half said that they did not have a clearer understanding of what the letter meant afterwards (51 per cent), while just over two in five said they did (44 per cent).[40]

Looking at the helpfulness of telephone conversations with DWP when claimants who took part in more than one wave of the survey were asked about the claims process as a whole, just over half (54 per cent) agreed that these telephone conversations were helpful, and one in five (20 per cent) disagreed (appendix A). Participants in the qualitative research provided some insight as to why some claimants may have found their telephone conversations with DWP unhelpful, with the following issues being mentioned:

- Being passed on to many different people to get an answer to their query. They did not like to have to repeat their story and felt that this wasted their time.
- Call handlers lacking empathy or compassion, for instance when calling to ask for an extension for submitting their application form or MR request on the grounds of illness or death in the family.
- A perception of being made to feel as if they were undeserving when calling to query their PIP decision.

In contrast, those who reported a positive experience when calling DWP highlighted that the DWP call handler was friendly, gave them time to explain their situation and understood what they said, offered them the chance to ask questions and provided a clear outline of next steps and what to expect.

---

[40] Please treat results with caution due to the small number of participants able to answer these questions (89).

12.3.4 Reasons for not contacting DWP

The qualitative research found that claimants often needed help to navigate the claims process, and that DWP was not at the front of their minds when considering potential sources of help. Two main reasons were mentioned:

- Not being aware that DWP could provide support with the claim process, or with specific aspects of the claims process (for example, completing the application form on their behalf).
- Not trusting DWP to provide independent information and advice about their claim, especially regarding the dispute process.

12.4 Overall views of the process

12.4.1 Background

The PIP claims process involves a number of key stages, as shown in Figure 1.1. This section outlines the key elements of the PIP claims process for context before bringing together some of the key findings in the report related to claimants' views and experiences of the process. The section pulls together some analysis presented elsewhere in the report as well as some additional analysis to look at the relationships between claimant experiences at different stages.

12.4.2 Experiences throughout the process

In this research project we explored claimants' overall views and experiences of each stage of the process. The findings show that completing the form is the element which claimants were most likely to find more challenging than expected. While there are a small minority who find every stage of making the claim more difficult than expected, over half find at least one element more difficult than they expected.

Claimants interviewed in the survey were clear about how to initiate their claim (83 per cent knew they needed to call the claim line). When asked about their overall experience of making the initial call to the claim line the majority (79 per cent) found it as expected or easier than expected and a minority (15 per cent) found it more difficult than expected (section 3.1).

When asked about completing the initial PIP application form, over half (59 per cent) sought help with completing the form. At this stage around two-thirds (63 per cent) found completing the form as easy or easier than expected and about one-third (34 per cent) found it more difficult than expected. Where claimants did find it difficult, reasons given in the qualitative interviews included difficulty with reading and understanding questions (related to impairments or language difficulties) and finding that the questions on the form did not allow them to explain their condition fully, particularly where their condition fluctuated or they had a mental health (rather than physical) condition (section 3.2.2).

After submitting the claim form, some participants were invited to a face-to-face assessment with a health professional working for the assessment provider. The majority of claimants invited to a face-to-face assessment reported that they received an appointment in the time frame they expected or sooner than expected (79 per cent) and 13 per cent reported that it was later than expected. This suggests that, on the whole, the timeframe for this stage of the process was not problematic (section 5.3).

Claimants in the survey who had a face-to-face assessment were asked about whether the experience of the assessment itself was easier or more difficult than expected. The majority (70 per cent) found it as expected or easier than expected and just over one-quarter found it more difficult than expected (26 per cent). It is notable that the percentage of participants who found it easier than expected is the same as for those who found it more difficult than expected. The research shows that finding the assessor friendly or helpful, feeling the assessor understood their condition, that the questions and tests were relevant and they had time to explain themselves all contributed to a positive experience of the assessment. Finding the assessment more difficult than expected was linked to finding it stressful, feeling the assessor was unhelpful and not being able to fully explain themselves (section 7.2.3).

There was a relationship between the perception of ease or difficulty across the stages. Of those who found the call to the claim line more difficult than expected, 65 per cent also found the form more difficult than expected. Whereas those who found the call easier than expected or as expected were less likely to experience difficulty with the form (25 per cent and 29 per cent respectively).

Those who found the initial call more difficult than expected were also more likely to find the assessment more difficult than expected (41 per cent compared with 26 per cent who found the initial call as expected and 23 per cent of those who found it easier than expected).

Looking at how easy or difficult claimants found the process across multiple stages, the data from those who took part at more than one wave of the survey shows that only a small minority (five per cent) found the process more difficult than expected at all three stages – call, form and assessment. However, over half of claimants (56 per cent) found one or more stages of the process more difficult than expected.

After receiving an award most claimants interviewed in the survey felt that DWP made it clear that they could ask for their award to be reconsidered (83 per cent) and that if they were still unhappy they could appeal (73 per cent) (section 9.2). However, the findings of wave three show limited understanding of key details of MR. For example, 25 per cent knew why a person might request a MR and 23 per cent reported knowing how to request a MR (at the point they received the decision letter).

The main reasons given for requesting a MR were that the claimant did not get an award (40 per cent) or did not get the award they expected (16 per cent not getting an element they expected, 14 per cent getting only standard mobility and seven per cent getting only standard daily living). However, claimants gave other reasons related to dissatisfaction with earlier stages of the process including believing the assessor was unfair at the face-to-face assessment (22 per cent) and that DWP had not taken into account all the evidence (18 per cent) (section 10.1.2). This was sometimes related to a belief explained in the qualitative interviews that the assessment process was more applicable to physical than mental health conditions.

Once the MR process was complete and the MR notice was received, most agreed that the MR notice was clear that if they were unhappy with the outcome they could appeal the decision (78 per cent). However, only a minority (25 per cent) agreed that the MR decision was based on all the information available to DWP. Views on whether or not the MR decision was based on all the information available to DWP were not related to whether or not claimants had sought a MR because they did not think the initial decision was based on all the information available (section 10.2).

The reasons given for appealing were similar to those given for requesting a MR, including not receiving an award, being unhappy with the type or level of award or not being happy with the assessment or use of evidence (section 11.1.2). The qualitative research showed that participants felt that the decision had not always been fully reconsidered at the MR stage and that they wanted to appeal to have a full review of their case. Of those who did not appeal, in the survey around one-quarter (24 per cent) said they were happy with their award. Other reasons given related to the stress of appealing (30 per cent), being too unwell (15 per cent) or not feeling it would change their award (18 per cent) (section 11.1.2). The qualitative research highlighted the support claimants needed in order to appeal and the survey showed that most people who attended an appeal tribunal took someone with them (86 per cent) (section 11.2).

Most claimants interviewed in the survey reported positive experiences of the tribunal itself (for example, 73 per cent said they were asked relevant questions) but experiences were strongly related to the outcome of the appeal, with 82 per cent of those who received an award and 40 per cent of those who did not saying they had enough time to explain themselves (section 11.2.2). This was a common theme throughout the research, with those reporting worse experiences of each stage being less likely to receive an award. From these data it is not possible to conclude whether those who are not able to explain themselves or provide the right evidence are less likely to be successful in their application, or whether those who are not successful have a more negative view of the experience when asked about it later.

12.4.3 Claimant views of the process as a whole

We also asked claimants who had taken part at two or more waves of the survey to reflect on the process as a whole (this included claimants who had requested MR only, those who had appealed and those who had done neither, with the data weighted to reflect the sample profile at wave one and wave two which were intended to reflect the PIP claimant population). This is described in detail in appendix A. The key findings were that a majority agreed with statements about specific elements of the process (for example, letters being clear – 70 per cent, process of receiving assessment date being clear – 75 per cent). However, around half agreed that DWP offered adequate help or assistance with navigating the process (51 per cent), which is a lower level of agreement than with any of the statements about individual stages of the process and aligns with findings in section 12.2 about communications from DWP.

12.4.4 Experience of the assessment providers

The analysis in the three main parts of this report compares participant experiences by provider. On the whole, there were relatively few differences in the PIP claimant experience by provider but this section draws together what was found in the survey. Those assessed by Capita were more likely to receive no award (40 per cent) compared with 27 per cent of those assessed by Independent Assessment Services (IAS). Since those who received an award were found throughout the research to report a more positive experience of each stage, much of the difference in experience by provider is related to the fact that IAS claimants were more likely to have had an award initially. For example, when understanding of the decision letter was examined by the provider and outcome of the award, there were no significant differences between the providers, even though at the overall level, those assessed by IAS reported a better understanding. Nonetheless, some differences between providers remained and these are noted here.

When asked about their experience of receiving an appointment, claimants processed by IAS were more likely than those processed by Capita to say they received their appointment sooner than expected (33 per cent and 24 per cent respectively). However, there was no significant difference in the percentage reporting that the appointment was later than expected and small numbers do not allow us to explore the experiences, controlling for outcome of the award.

When asked about the assessment as a whole, those assessed by Capita were more likely to suggest the assessor’s manner could have been improved. This belief did not vary depending on the award outcome. Of those claimants not awarded PIP, Capita claimants were more likely to agree the assessor’s manner could be improved (11 per cent) compared to IAS claimants (five per cent). Similarly, of those awarded PIP, Capita claimants were more likely to agree there could have been a better understanding of their condition during the assessment (six per cent) compared to IAS claimants (three per cent).

There were no significant differences between the providers in understanding how DWP had made their decision once the outcome of the award was taken into account. However, of the claimants who did not receive an award, those assessed by IAS were significantly more likely to say they understood the points described in the letter (49 per cent) compared with Capita claimants (40 per cent). Similarly, of those who did receive an award, those assessed by IAS were more likely than those assessed by Capita to report that the letter referred to medical evidence (23 per cent and 14 per cent respectively) but there was no significant difference for those who did not receive an award.

At the MR and appeal stages, no clear relationships were found between the provider and experiences of the process. This may relate to the fact that at these stages, the providers are no longer closely involved.

12.4.5 Summary

The quantitative findings throughout the report generally showed that at each individual stage of the process, most claimants understood the process and were satisfied with their experience of applying for PIP. This chapter highlights that across the process as a whole there was a small minority who found multiple stages challenging and that a larger group found at least one stage challenging. The findings also suggested that negative experiences at one stage had a bearing on decisions to request a MR and appeal.

13 Conclusions

The research showed that the Personal Independence Payment (PIP) claims process works well overall: at each stage the majority of claimants understood the process and found it as easy as they expected or easier. Reported understanding of each element of the process and the steps that needed to be taken was good. However, understanding of later stages of the process which the claimant had not yet reached was less good.

A minority of claimants found the claims process difficult to navigate at every stage, and a large group of claimants found at least one stage more difficult than they expected. For example, they found it difficult to complete the application form, or to read and understand the information that was sent out to them, and they needed help with this.

Although the survey demonstrates that a majority of claimants were positive about each element of the claims process, there was a significant minority who were not positive. The qualitative research suggested that there was a sub-set of claimants who found the process difficult to navigate. For example, claimants who did not understand information about one part of the process were also less likely to understand information about other stages, suggesting that there was a group of claimants who needed more support across the process. Where they were not able to access support or were not aware of the support on offer, which was particularly the case for more vulnerable claimants, they were less able to understand the process and put together their claim. For example, they were less able to supply the evidence to support their claim.

Access to help and support during the claims process was very important to claimants, in particular for two stages: to complete the ‘How your disability affects you’ questionnaire and to navigate the mandatory reconsideration (MR) and appeals process. Some just needed low-level support, for example information and advice to help them decide what to write on their ‘How your disability affects you’ questionnaire or MR request. Other claimants needed much more hands-on support, for example someone to help them articulate their responses in the ‘How your disability affects you’ questionnaire, or someone to write the MR request on their behalf. The majority of claimants also had support at their face-to-face assessment and, for those reaching this stage, at the appeal tribunal, mainly for reasons related to their health condition or for moral support. When they did not know where to ask for help, or where help was not available within the timings allocated to complete these stages, claimants faced challenges in navigating the process. Those who did not access support were sometimes less likely to dispute their decision because they did not feel confident going to appeal unsupported or because they felt it would be too stressful.

The Department for Work and Pensions (DWP) offers a telephone helpline, website and written guidance to claimants to help them navigate the claims process. The majority of those who used these sources at various stages found that they were useful sources of information and advice. However, they were not always used as much as they could be, for a range of reasons:

- Not knowing how to use the internet or not having access to it.
- Poor literacy skills/low concentration or memory problems which impacted on claimants' ability to read and understand the written information provided by DWP.
- Claimants needing much more face-to-face support, or someone who could call the helpline, access the website, or write letters on their behalf.
- Not trusting DWP to provide impartial advice, especially during the MR and appeals process, or a preference for other sources of information and guidance perceived to be more independent.
- Not knowing that these resources existed.

In addition, few claimants actively contacted DWP, and where they did this it tended to be with more transactional questions about the process and what they needed to do, rather than for general advice and support. Instead, claimants sought information and advice from elsewhere, particularly friends and family, charities and health professionals.

This research showed that throughout the claims process, claimants varied in their provision of evidence to support their claim. During the initial application a small group did not provide any evidence to support their claim and there were others who said there was evidence they wanted to submit but could not. During the assessment and MR and appeals stages, many claimants did provide evidence but this was sometimes the same evidence already provided rather than new evidence, and there were some who continued to provide no evidence. Barriers to the provision of evidence included not realising it would be helpful, not having it in time, and not wanting or being able to pay for it. There was also some uncertainty about how recent the evidence needed to be. In addition, some claimants were under the impression that DWP would obtain evidence from their GP or other medical professionals, or that the assessment process would involve a medical examination, so they did not understand the importance of submitting evidence themselves.

The face-to-face assessment is an important element of the process for most claimants. Most found the assessment time convenient and the venue accessible, but a smaller proportion (though still a majority) felt the assessment was easy to get to. Once in the assessment, although the majority felt listened to and that they were able to explain how their condition affects them, a minority had concerns about the assessor's manner. This was related to being less likely to have received an award and also being more likely to request a MR.

There were clear relationships between the award received (initially or after MR or appeal) and claimants' views of each stage of the process. Those who did not receive an award tended to have more negative views of the assessment, MR and appeals processes than those who had received an award. This could be because those who were not able to explain themselves were less likely to be successful, or it could be because discontent about the outcome affected their perceptions of the process when asked about it subsequently.

Although most claimants agreed that they understood the decision letter, when they were asked about the specifics, there was evidence that not everyone fully understood their award. Those who had not received an award were particularly likely to feel that they did not understand specific aspects of the information in the decision letter, which may have affected their subsequent decisions to request a MR and appeal. There was also incomplete understanding of the MR notice and appeals decisions for some claimants, as well as a feeling, particularly after MR, that all the available evidence had not been taken into account in reaching the decision.

Of those awarded PIP, the most common use for the money was reported to be meeting the costs of living and improving quality of life, with some reporting that it would increase their independence or allow them to live more independently.

Appendix A: Longitudinal survey findings

This Appendix draws together findings from across the waves of data collection for claimants who took part in more than one wave of the survey. This is helpful for understanding how experiences at different stages of the process are related. The section focuses on findings related to assessment and mandatory reconsideration (MR). For a summary of the findings please refer to section A.6.

A.1 Methods and background

This research comprised three waves, each covering a different stage of the claimant journey:

- Wave one: applying for Personal Independence Payment (PIP).
- Wave two: the face-to-face assessment.
- Wave three: MR and appeals.

At wave one all participants were taking part in the study for the first time. At waves two and three, a new sample of participants were contacted to take part. In addition, claimants from previous waves who had agreed to take part in further waves were also followed up. At wave two 388 participants had taken part at wave one as well and 815 took part at wave two for the first time.

At wave three the sample consisted of:

- 143 who took part at all three waves.
- 307 who took part at wave two and wave three.
- 755 who took part at wave three only.

This means that for some of the sample there are data from multiple waves and it is possible to analyse data from across the waves. In addition, a question was included in the wave three survey which asked claimants who had taken part at more than one wave to think about their experience across the whole PIP process.

Table A.1 Sample composition at wave two

Group	Wave 1, 2	Wave 2 only
All	388	815

Table A.2 Sample composition at wave three

Group	Wave 1, 2, 3	Wave 2,3	Wave 3 only
All	143	307	755
All who requested MR	53	108	743
Appealed	20	50	465

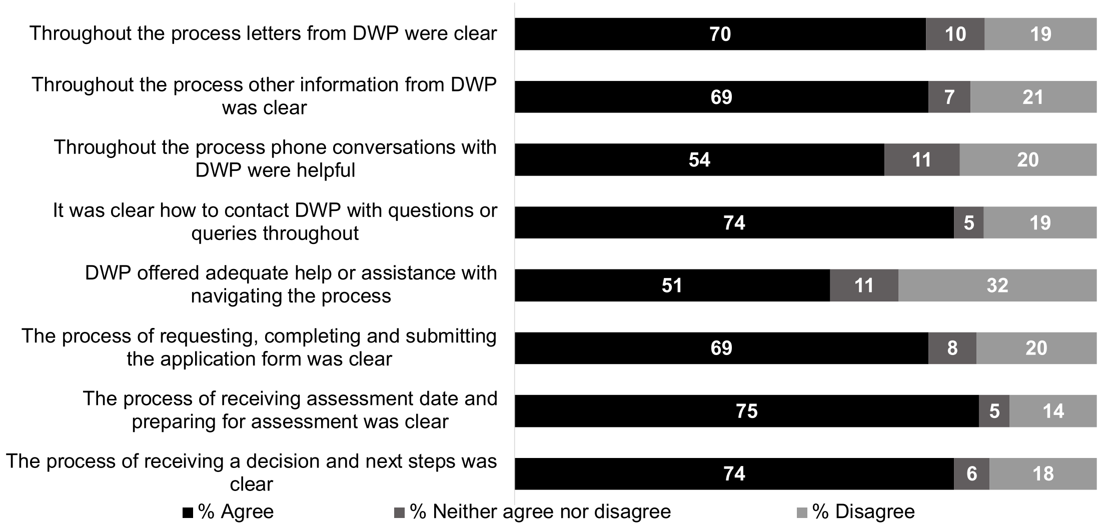
It should be noted that, particularly at wave three, small sample sizes for those who requested MR and those who appealed limits the scope of the longitudinal analysis.

A.2 Views of the process as a whole

When asked to reflect on the process as a whole during the wave three interview, overall claimants who had taken part at more than one wave were positive and agreed the PIP letters, information and processes were clear (with at least two-thirds agreeing with most statements) (Figure A.1). The two areas where there was lower agreement were that telephone conversations with the Department for Work and Pensions (DWP) were helpful (54 per cent agreed) and that DWP offered adequate help or assistance with navigating the process (51 per cent agreed).

Figure A.1

Overall experience of the entire PIP claims process



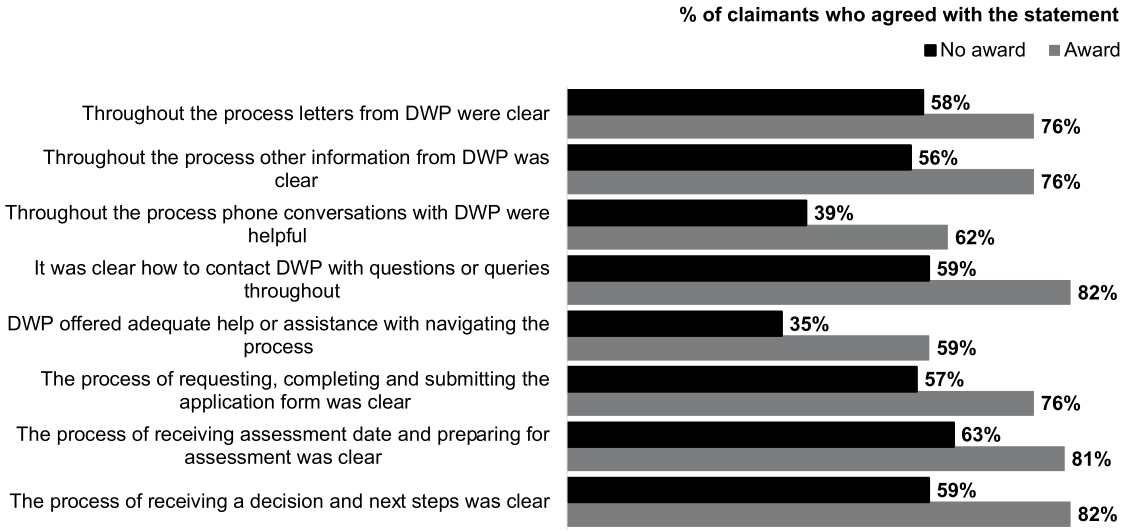
Base: All longitudinal participants who took part at wave two and wave three (450). Weighted by longitudinal weight.

Question wording: I1. We would now like you to think about the PIP process as a whole, including thinking about applying, completing the application form, receiving an appointment, attending an assessment, receiving a decision, and choosing whether or not to request mandatory reconsideration or to appeal. How far do you agree or disagree with the following statements? Statements summarised in the figure above.

There were clear differences in claimants' experiences by the initial outcome of their PIP applications, with those who received an award originally being more likely than those who did not to agree with each statement. For example, 76 per cent with an initial award agreed that throughout the process letters from DWP were clear compared to 58 per cent of those without an award initially.

Figure A.2

Overall experience of the entire PIP claims process by initial PIP outcome



Base: All longitudinal participants who took part at wave two and wave three (450). Subgroups of initial award: Award (296) and no award (148). Weighted by longitudinal weight.

Question wording: I1. We would now like you to think about the PIP process as a whole, including thinking about applying, completing the application form, receiving an appointment, attending an assessment, receiving a decision, and choosing whether or not to request mandatory reconsideration or to appeal. How far do you agree or disagree with the following statements? Statements summarised in the figure above.

A.3 Longitudinal findings related to assessment and initial outcome

Findings for those who took part at wave one and wave two show that there is a link between behaviour related to evidence at the initial claim and at the assessment. Claimants who submitted evidence with their 'How your disability affects you' questionnaire (wave one) were more likely to say they took additional evidence to the face-to-face assessment (wave two) (54 per cent compared with 38 per cent of those who did not initially submit evidence). Of those who had not submitted evidence originally, 60 per cent did not bring evidence to the face-to-face assessment either, thus not submitting evidence at any stage of the process. This includes 28 per cent of claimants who said they had wanted to submit evidence with their initial application form and also at their face-to-face assessment but could/did not (section 6.1.3).

There were no significant relationships between the help that claimants received with the initial application form and the assistance they received at, or preparing for, the face-to-face assessment.

The data show that there is a link between claimants feeling able to explain themselves at the application (wave one) and assessment (wave two) stages. Most of those who agreed that the application form allowed them to explain how their condition affects them also agreed they were able to fully explain the impact of their condition at the face-to-face assessment (74 per cent). In contrast, 45 per cent of claimants who disagreed that that the application form allowed them to explain their condition felt that they could explain this at the face-to-face assessment (section 7.2.4).

The longitudinal analysis showed that certain factors at earlier stages of the process are associated with a greater likelihood of receiving a PIP award. Those who had submitted evidence with their initial application form, who had help with completing the form and thought that an award was likely, were all more likely to receive an award of PIP (section 8.2.2).

A.4 Longitudinal findings related to mandatory reconsideration

A4.1 The decision to request MR

The findings from analysis across the waves show that some experiences at each stage of the process are related and that those who report problems at one stage are more likely to request MR, especially for reasons related to those problems. For example, those who disagreed with a series of positive statements about their experience at the assessment consultation were significantly more likely to request MR than those who agreed with positive statements about the assessment consultation (see Figures 10.6 and 10.7 in Chapter 10). For example, around three-quarters (72 per cent) of those who disagreed that they had enough time to explain how their condition affects them at the face-to-face assessment requested MR, compared to 28 per cent of those who agreed.

Overall, just over one-fifth of claimants (22 per cent) reported requesting MR because they felt the assessor was unfair at the face-to-face assessment and this was significantly higher among those who did not feel the assessor explained their role (33 per cent) or who did not feel listened to during the assessment (29 per cent; section 10.1.2). These findings suggest that a negative experience at the assessment consultation is associated with a greater likelihood of requesting MR. However, it should be noted that a negative experience of the assessment is also associated with being less likely to receive an award of PIP initially which is also related to being more likely to request MR. Sample numbers are too small to do further sub-group analysis. Nonetheless, the percentage who requested MR among those who disagreed the assessor explained what their role was (86 per cent) is higher than the percentage requesting MR among all those in the sample who took part at more than one wave who did not receive an award initially (66 per cent), suggesting that the patterns found here do not simply relate to the initial outcome of the PIP application.

A4.2 Understanding of the MR notice

Analysis of participants who took part in both the wave two and wave three surveys suggests there were people with lower levels of understanding than others throughout the PIP process. Participants who said they understood what was written in the original decision letter were more likely to say the information about MR in the MR notice was clear (57 per cent) compared with 40 per cent of those who did not understand the PIP decision letter. However, those who understood what was written in the PIP decision letter at wave two were no more likely than those who did not to report that they understood various specific aspects of MR.

A.5 Longitudinal findings related to appeals

The sample sizes for claimants who had taken part in more than one wave of the survey and appealed were small and so longitudinal analyses related to appeals was not possible. This is because the profile of the sample followed up from waves one and two broadly reflected the PIP claimant population in terms of the percentage requesting MR and appealing, and only a minority of PIP claimants appeal their PIP decision.

A.6 Section summary

The longitudinal analysis has been limited by small sample sizes but shows that experiences at the assessment stage and MR stage are related to experiences earlier in the process. In particular, experiences related to the submission of evidence, ability of the claimant to explain themselves and how they felt they were treated by the assessor seemed to cut across multiple stages of the process. For example, those who disagreed with a series of positive statements about their experience at the assessment consultation were more likely to request MR. Longitudinal analysis also showed that there were people with lower levels of understanding than others throughout the PIP process.