



# PERSONAL INDEPENDENCE PAYMENT APPEALS SELF HELP PACK

This pack is for people who are waiting to have their claim for Personal Independence Payment decided by a social security tribunal. This is a hearing which can be referred to as an “appeal” a “tribunal” or simply a “hearing”.

Inside the pack are the following documents:

- General information about the appeals process – what information you have, who to contact and what to do with evidence
- At the Hearing – knowing what happens when you are there
- Understanding the Personal Independence Payment criteria – this explains how you may qualify
- A Score Sheet – to allow you to assess your own score
- A Definitions Sheet – to ensure you know what is included in the different activities
- Writing a Submission – guidance on what you might want to say

Community Law Service is able to provide advice on appeals but will make an assessment on what level of support we are able to offer on a case by case basis.

Any further queries can be addressed via telephone or face to face advice. More information is available by calling 01604 621038 or by going to

[www.communitylawservice.org.uk](http://www.communitylawservice.org.uk)

# PERSONAL INDEPENDENCE PAYMENT APPEAL - GENERAL INFORMATION

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## What paperwork should I have?

You should have a large bundle of paperwork, known as the **appeal bundle**, which has been sent to you by the Personal Independence Payment department. The appeal bundle has numbered pages to make it easier to find documents. This same bundle will also have been sent to Her Majesty's Courts and Tribunal Service (HMCTS). You should be sent this within 6 weeks of completing your SSCS1 appeal form. If you do not have it and it has been more than 6 weeks since you asked for an appeal contact Personal Independence Payment Enquiries on 0345 850 3322.

Do not feel overwhelmed by the size of the appeal bundle. There are lots of smaller pieces of information in this and much of it you will have already seen:

- A submission from the DWP – this summarises their case, primarily why they have reached the decision they have
- A copy of the SSCS1 appeal form
- A copy of the PIP2 form which you completed
- A copy of the medical assessment (if you had one)
- All decision letters which have already been sent to you
- A copy of any other information you sent to Personal Independence Payment

It is best if you read the paperwork all through initially, then look back at individual pieces of information as you prepare for your appeal.

## What if I have new information or have a query about my tribunal?

HMCTS arrange your hearing. They can be contacted on 0300 123 1142 if you have any queries. Their address is at the top of any letters they have sent you and you should send any new evidence or information to that address and NOT to Personal Independence Payment. You should send any new information to HMCTS as soon as possible. Any new evidence should ideally be provided to HMCTS at least 7 days before your hearing. If you have anything more to add, take it to your hearing but you should make sure only small pieces of information are provided at the last minute, if you provide lots of information just before or on the day of your hearing, the tribunal may adjourn, meaning they will not deal with your case on the planned day.

## What is the process now?

You will be sent a letter when your case is to be heard. The only time they will not do this is if you asked for your case to be decided on paper when you completed your SSCS1 appeal form. If you have asked for a paper hearing, you will not be informed when your case will be dealt with, so it is very important you provide any additional evidence and information as soon as possible so that the tribunal can include this when they consider your case. If you have said you wish to attend a hearing, you will be sent a time and date for this with a map of where the venue is. It is very important you attend; if you do not attend the tribunal is entitled to reach a decision without you being there.

## What should I do before the hearing?

- Read all the appeal bundle
- Make any notes you wish to take in with you – this could be just a few very important points you want to ensure you get across
- Think about your medical history and have a good idea of dates when illnesses started and what general treatments you have had. Write it down if it is hard to remember – you may wish to take this to the hearing with you.
- See if you have any letters or documents which support your appeal – appointment letters are not helpful, but letters from consultants, test results or your GP records may assist. If you do not have any, could you get any?
- Consider whether you are going to write a submission. This is a document which is sent in before the hearing telling the tribunal exactly what you would like them to consider. See the page WRITING A SUBMISSION.
- Ensure you know where the hearing is and that you have transport to get there. You will be sent a map with your appointment letter. You can claim travel expenses for public transport and mileage if coming by private car. However if you intend to travel by taxi and wish to claim this as an expense, you will need to obtain 2 verbal quotes and telephone HMCTS to get prior agreement for a taxi. They will take approximately 3-5 days to confirm if they will allow the expense.

## AT THE HEARING

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The hearing is held in an office, all people dealing with your appeal will be wearing normal clothing. It is no way a court hearing. There will be 3 people on the panel: a judge who is the chair of the tribunal and is legally qualified, a doctor and a carer member who has experience in disability. These people may not be experts in your particular area of disability. They are independent from the DWP and will make a new decision. The decision could be different or be the same as the DWP decision. They have the same appeal bundle as you have been sent, plus copies of any further information you have sent in to HMCTS.

If you have chosen to attend a hearing, you will wait in a waiting room and a Clerk will come to speak to you. The Clerk deals with the administration of the appeals and can take any last minute papers from you for the tribunal; they will also explain to you what will happen in the hearing if you have any queries about this.

### **What if my condition has changed?**

The tribunal will only be able to decide your case based on how you were at the time the decision was made on your case. If you have got worse since then the tribunal cannot take this into account. Instead you should take advice from an independent advisor and potentially notify Personal Independence Payment of a change. If you have got better since the decision, again the tribunal cannot take this into account. Any evidence you give to the tribunal should be about how you were at the time the decision was made.

### **What happens in the hearing?**

The panel will have the same appeal bundle as you. All of the 3 tribunal members can ask you questions. These are to enable the members to better understand your situation. You can take a friend or family member with you for support. They will be able to speak in the hearing if you are happy for them to do so, to give their thoughts on how you are, but they will not be able to answer questions for you. The tribunal has a legal duty to make sure they have obtained all relevant information from you. You may however wish to make some notes to refer to in the hearing about your conditions or about things you really want to make sure you tell the tribunal. Try to answer the questions asked and avoid talking at length about something you have not been asked about. Refer to your notes (if you have any) and ensure you have said everything you want to before you leave the room. Once you have left, you will not be able to add anything more. Once everyone has said what they want to say you will be asked to leave the room whilst the decision is made. The judge will be writing down what is said in the hearing.

### **What happens at after I have my decision?**

You may be given the decision on the day, but if not it will be posted to you that evening. If you are not satisfied with the decision, there are very limited options to make a further appeal. The Clerk will give you notes about this and our advisors can advise you further about this. The Clerk will give you an expenses claim form for you to complete and post to HMCTS to claim any travel expenses – remember if you need to use a taxi you would have to get permission for this prior to your hearing.

## UNDERSTANDING THE PIP CRITERIA

It is very important that you understand how entitlement to Personal Independence Payment is assessed from the outset. The criteria is set out in law and the Tribunal will have to apply the law to your case. Therefore you have to consider your case against the criteria which is set. This is a point scoring system. Any problems you have outside of the scoring system is not relevant.

### How is Personal Independence Payment structured?

Personal Independence Payment is divided into two separate sections called **components**: “Daily Living” component and “Mobility” component. Within each component there are two rates: Standard and Enhanced. You could get an award from both components or just one component, but never two different rates from one component.

The Daily Living Component has 10 different activities to score from and the Mobility Component has 2. Within each of the activities there are a range of descriptors. These detail specific problems with the activity. The more difficulty a person has doing the activity, the higher they score. Usually only where a descriptor applies for the majority of the time can the score apply. Where more than 1 descriptor applies, the highest scoring descriptors applies.

*For example, this is the scores for the activity of Preparing Food:*

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

*John has very poor memory problems. He often forgets he is cooking and is at risk of leaving food to burn. John does not remember how to check whether food is cooked and is safe to eat. He also forgets to prepare food. He could score (d) and (e). Because both of these apply for the majority of the time, John could potentially*

score from both. Therefore the highest scoring descriptor applies – (e), and John scores 4 points for preparing food.

The **Definitions Sheet** will explain exactly what is relevant within each activity. You should make sure you read this and remember what is relevant to each activity.

### **How does the scoring decide the award?**

To decide entitlement to Personal Independence Payment, the Decision Maker adds up all scores from the 10 Daily Living activities. They will separately add up all scores from the 2 mobility activities.

You must score 8-11 points from 1 component's activities to get the Standard Rate and 12 or over to be awarded the Enhanced Rate. If you score less than 8 points in total from either component, you will not be entitled to an award from that component.

Remember:

- you can only score ONCE from each of the activities
- activities from the 10 Daily Living activities are added to score give a total score for the Daily Living Component; scores from the 2 Mobility activities are added to give a total score for the Mobility Component.

### **What should I score?**

Enclosed in this pack is a **Score Sheet**. Scoring from the list of activities is what the tribunal will do. They will consider the facts and apply these to the scoring criteria. Nothing other than tasks including in the scoring criteria is relevant. You should focus on the scoring activities when preparing your appeal.

You should also consider whether you can do an activity

- safely,
- as often as you would want to be able to do it,
- to a reasonable standard and
- whether you can achieve it in a reasonable time (ie it does not take you twice as long as it should to complete)

If you cannot to an activity safely, repeatedly to a reasonable standard and/or in a reasonable time, then you would score for that activity as if you were not able to do it at all.

You should work through the scores to see what you would score yourself based on your answers given in the PIP2 questionnaire you completed. Ensure you think you score at least 8 points from one of the components; if you do not, it is unlikely you are entitled to Personal Independence Payment.

## SCORE SHEET

### Daily Living Activities

Add together 1 score from each activity to give an overall score for the 10 Daily Living activities and separately add together 1 score from the two Mobility activities.

		POINTS
<b>1</b>	<b>Preparing food</b>	
a	Can prepare and cook a simple meal unaided	0
b	Needs to use an aid or appliance to be able to either prepare or cook a simple meal.	2
c	Cannot cook a simple meal using a conventional cooker but is able to do so using a microwave.	2
d	Needs prompting to be able to either prepare or cook a simple meal.	2
e	Needs supervision or assistance to either prepare or cook a simple meal.	4
f	Cannot prepare and cook food.	8
<b>2</b>	<b>Taking nutrition</b>	
a	Can take nutrition unaided.	0
b	Needs – (i) to use an aid or appliance to be able to take nutrition; <i>or</i> (ii) supervision to be able to take nutrition; <i>or</i> (iii) assistance to be able to cut up food.	2
c	Needs a therapeutic source to be able to take nutrition.	2
d	Needs prompting to be able to take nutrition.	4
e	Needs assistance to be able to manage a therapeutic source to take nutrition.	6
f	Cannot convey food and drink to their mouth and needs another person to do so.	10
<b>3</b>	<b>Managing therapy or monitoring a health condition</b>	
a	Either – (i) does not receive medication or therapy or need to monitor a health condition; <i>or</i> (ii) can manage medication or therapy or monitor a health condition unaided.	0
b	Needs any one or more of the following: (i) to use an aid or appliance to be able to manage medication; <i>or</i> (ii) supervision, prompting or assistance to be able to manage medication. (iii) supervision, prompting or assistance to be able to	1

	monitor a health condition.	
c	Needs supervision, prompting or assistance to be able to manage therapy that takes no more than 3.5 hours a week.	2
d	Needs supervision, prompting or assistance to be able to manage therapy that takes more than 3.5 but no more than 7 hours a week.	4
e	Needs supervision, prompting or assistance to be able to manage therapy that takes more than 7 but no more than 14 hours a week.	6
f	Needs supervision, prompting or assistance to be able to manage therapy that takes more than 14 hours a week.	8

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

<b>5</b>	<b>Managing toilet needs or incontinence</b>	
a	Can manage toilet needs or incontinence unaided.	0
b	Needs to use an aid or appliance to be able to manage toilet needs or incontinence.	2
c	Needs supervision or prompting to be able to manage toilet needs.	2
d	Needs assistance to be able to manage toilet needs.	4
e	Needs assistance to be able to manage incontinence of either bladder or bowel.	6
f	Needs assistance to be able to manage incontinence of both bladder and bowel.	8

<b>6</b>	<b>Dressing and undressing</b>	
a	Can dress and undress unaided.	0
b	Needs to use an aid or appliance to be able to dress or undress.	2
c	Needs either:	

	(i) prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed; <i>or</i> (ii) prompting or assistance to be able to select appropriate clothing.	2
d	Needs assistance to be able to dress or undress their lower body	2
e	Needs assistance to be able to dress or undress their upper body.	4
f	Cannot dress or undress at all.	8
<b>7 Communicating verbally</b>		
a	Can express and understand verbal information unaided.	0
b	Needs to use an aid or appliance to be able to speak or hear.	2
c	Needs communication support to be able to express or understand complex verbal information.	4
d	Needs communication support to express or understand basic verbal information.	8
e	Cannot express or understand verbal information at all even with communication support.	12
<b>8 Reading and understanding signs, symbols and words</b>		
a	Can read and understand basic and complex written information either unaided or using spectacles or contact lenses.	0
b	Needs to use an aid or appliance, other than spectacles or contact lenses, to be able to read or understand either basic or complex written information.	2
c	Needs prompting to be able to read or understand complex written information.	2
d	Needs prompting to be able to read or understand basic written information.	4
e	Cannot read or understand signs, symbols or words at all.	8
<b>9 Engaging with people face to face</b>		
a	Can engage with other people unaided.	0
b	Needs prompting to be able to engage with other people.	2
c	Needs social support to be able to engage with other people.	4
d	Cannot engage with other people due to such engagement causing either – (i) overwhelming psychological distress to the claimant;	

	<i>or</i> (ii) the claimant to exhibit behaviour which would result in a substantial risk of harm to the claimant or another person.	8
<b>10 Making budgeting decisions</b>		
a	Can manage complex budgeting decisions unaided.	0
b	Needs prompting or assistance to be able to make complex budgeting decisions.	2
c	Needs prompting or assistance to be able to make simple budgeting decisions.	4
d	Cannot make any budgeting decisions at all.	6

## Mobility Activities

Add together the highest score from each activity that applies to you.

		POINTS
<b>1 Planning and following journeys</b>		
a	Can plan and follow the route of a journey unaided.	0
b	Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant.	4
c	For reasons other than psychological distress cannot plan the route of a journey.	8
d	For reasons other than psychological distress cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid.	10
e	Cannot undertake any journey because it would cause overwhelming psychological distress to the claimant.	10
f	For reasons other than psychological distress cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid.	12
<b>2 Moving around</b>		
a	Can stand and then move more than 200 metres, either aided or unaided.	0
b	Can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided.	4
c	Can stand and then move unaided more than 20 metres but no more than 50 metres.	8
d	Can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres.	10
e	Can stand and then move more than 1 metre but no	

	more than 20 metres, either aided or unaided.	12
f	Cannot, either aided or unaided, - (i) stand; <i>or</i> (ii) move more than 1 metre.	12

## PIP ACTIVITIES – DEFINITIONS SHEET

<p><b>Activity 1 – Preparing food</b></p> <p>This activity considers a claimant’s ability to prepare a <u>simple, cooked meal for one from fresh ingredients</u>. It is not designed to assess a claimant’s culinary skills, but to assess the impact of any impairment on their ability to perform the tasks required to prepare and cook a simple meal. It assesses ability to open packaging, peel and chop, serve food on to a plate and use a microwave oven or cooker hob to cook or heat food. Carrying items around the kitchen is not included in this activity.</p>
<p><b>Activity 2 – Taking nutrition</b></p> <p>This activity considers a person’s ability to be nourished, either by cutting food into pieces, conveying it to the mouth and chewing and swallowing; or through the use of therapeutic sources (eg a tube). The type of food and drink for nourishment is not a consideration for this activity, but rather the claimant’s ability to nourish themselves. “Prompting” may apply to claimants who need to be reminded to eat (for example, due to a cognitive impairment or severe depression), or who need prompting about portion size.</p>
<p><b>Activity 3 – Managing therapy or monitoring a health condition</b></p> <p>This activity considers a claimant’s ability to:</p> <p>(i) appropriately take medications in a domestic setting that are prescribed or recommended by a registered doctor, nurse or pharmacist; (ii) monitor and detect changes in a health condition; and (iii) manage therapeutic activities that are carried out in a domestic setting that are prescribed or recommended by a registered doctor, nurse, pharmacist or healthcare professional regulated by the Health Professions Council. The outcome of this activity is taking the medication or completing the recommended therapy as prescribed / recommended, without which the claimant’s health is likely to deteriorate.</p>
<p><b>Activity 4 – Washing and bathing</b></p> <p>This activity considers a claimant’s ability to wash and bathe. ‘Washing’ means cleaning ones whole body, including removing dirt and sweat. ‘Bathing’ means getting into and out of either a standard bath or shower. Shower includes shower attachments for a bath. For the purposes of this activity, wet-rooms are not a consideration as an aid or appliance.</p>
<p><b>Activity 5 – Managing toilet needs or incontinence</b></p> <p>This activity considers a claimant’s ability to get on and off the toilet, to clean afterwards and to manage evacuation of the bladder and/or bowel, including the use of collecting devices. This activity does <b>not</b> consider the ability to manage clothing, climb stairs or mobilise to the toilet. Suitable aids could include commodes, raised toilet seats, bottom wipers, incontinence pads or a stoma bag</p>
<p><b>Activity 6 – Dressing and undressing</b></p> <p>This activity assesses a claimant’s ability to put on and take off culturally appropriate, un-adapted clothing that is suitable for the situation. This may include the need for</p>

fastenings, such as zips or buttons and considers the ability to put on/take off socks and shoes. Clothes such as front fastening bras or velcro shoes are aids (bed or chair is not an aid here)

### **Activity 7 – Communicating verbally**

This activity considers a claimant's ability to communicate verbally with regard to expressive (conveying) communication and receptive (receiving and understanding) communication in ones native language. Clarity of the claimant's speech should be considered. Communication support means support from another person trained or experienced in communicating with people with specific communication needs (for example, a sign language interpreter); or someone directly experienced in communicating with the claimant themselves (for example, a family member).

### **Activity 8 – Reading and understanding signs, symbols and words**

This activity considers the claimant's capability to read and understand written or printed information in the person's native language. To be considered able to read, claimants must be able to see the information - accessing information via Braille is not considered as reading for this activity. If the claimant cannot read, this must be as a direct result of their health condition or impairment e.g. visual impairment, cognitive impairment or learning difficulties. Illiteracy or lack of familiarity with written English are not health conditions and should not be considered.

### **Activity 9 – Engaging with other people face to face**

This activity considers a claimant's ability to engage with other people, which means to interact face-to-face in a contextually and socially appropriate manner, understand body language and establish relationships. An inability to engage face-to-face must be due to the impact of impairment and not simply a matter of preference by the claimant. Social support means support from a person trained or experienced in assisting people to engage in social situations, or someone directly experienced in supporting the claimant themselves (for example a family member), who can compensate for limited ability to understand and respond to body language, other social cues and assist social integration.

### **Activity 10 – Making budgeting decisions**

The aim of this activity is to assess whether the claimant is able to make budgeting decisions, either simple or complex. Complex budgeting decisions are those that are involved in calculating household and personal budgets, managing and paying bills and planning future purchases. Simple budgeting decisions are those that are involved in activities such as calculating the cost of goods and change required following purchases. Assistance in this activity refers to another person carrying out elements, although not all, of the decision making process for the claimant.

### **Mobility Activity 1 – Planning and following journeys**

This activity was designed to assess the barriers claimants may face that are associated with mental, cognitive or sensory ability. Journey means a local journey, whether familiar or unfamiliar. Environmental factors may be considered if they prevent the claimant from reliably completing a journey, for example being unable to cope with crowds or loud noises.

**‘Any journey’** means any single journey on the majority of days.  
**‘Overwhelming psychological distress’** means distress related to an enduring mental health condition or intellectual or cognitive impairment which results in a severe anxiety state in which the symptoms are so severe that the person is unable to function.

**Cannot Plan-** Applies to claimants with cognitive or developmental impairments, who cannot formulate a plan for their journey using simple materials, such as bus route maps, phone apps or timetables, but who can follow a journey planned by someone else for example take a bus journey on their own.

**Follow a route** - To ‘follow’ is the visual, cognitive and intellectual ability to reliably navigate a route. The ability to walk itself is assessed in activity 12. Small disruptions and unexpected changes, such as road works and changed bus-stops are commonplace when following journeys and consideration should be given to whether the claimant would be able to carry out the activity if such commonplace disruptions were to occur. Consideration should also be given to whether the claimant is likely to get lost. Safety should be considered in respect of risks that relate to the ability to navigate, for example, visual impairment and substantial risk from traffic when crossing a road. If the risk identified is due to something else, such as behaviour, this descriptor is unlikely to apply.

**Cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid** - This descriptor is most likely to apply to claimants with cognitive, sensory or developmental impairments, who cannot, due to their impairment, work out where to go, follow directions or deal with unexpected changes in their journey, even when the journey is familiar.

Safety should be considered in respect of risks that relate to the ability to navigate, for example visual impairment and substantial risk from traffic when crossing a road

### **Mobility Activity 2 – Moving around**

This activity considers a claimant’s physical ability to move around without severe discomfort, such as breathlessness, pain or fatigue.

This activity should be judged in relation to a type of surface normally expected out of doors, such as pavements on the flat and includes the consideration of kerbs. When assessing whether the activity can be carried out reliably, consideration should be given to the manner in which the activity is completed. This includes but is not limited to, the claimant’s gait, their speed, the risk of falls and symptoms or side effects that could affect their ability to complete the activity, such as pain, breathlessness and fatigue. However, for this activity, this only refers to the physical act of moving. For example, danger awareness is considered as part of mobility activity1.

## WRITING A SUBMISSION

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A submission need not be lengthy or detailed if you are going to attend a hearing. It should highlight any key points which you can then explain further at the hearing.

It should include:

- which component you are seeking
- which activities you think applies to you and briefly why
- any evidence in the appeal bundle which supports your arguments
- any other points you wish to bring to the tribunal's attention

### **What did you say in your Personal Independence Payment form?**

Start by reading what you have stated in your PIP questionnaire. A copy of this will be in the appeal papers you have been sent. Note briefly what you said about each activity in your PIP questionnaire and note what score each activity gives you. Make sure you understand what award this may entitle you to. (ie at least 8 points, 8-11 points and 12+ points).

### **What does other evidence show?**

Now read any additional evidence you have sent in and consider what (if any) scores this confirms.

Decide whether there is any evidence sent in which confirms any scores. If there is, record which page of the bundle they are.

### **How should I structure a submission?**

There is no right or wrong way to write a submission but remember there is no point going into huge detail if you are going to attend a hearing – you can explain more whilst you are there. It is helpful though to include which page(s) the information is on that you are referring to – this will assist the panel to see exactly where to look in the bundle.

You may wish to structure you submission like this:

1. I am asking the tribunal to consider an award of the .....(Daily Living and/or Mobility component)
2. I think the following activities apply to me:.....
3. The evidence I have given in my questionnaire supports.....  
(activities)
4. The further evidence at pages ..... supports.....
5. Any final conclusions – this could include highlighting any treatment you have from doctors, nurses or contact you have with support workers or social workers.