
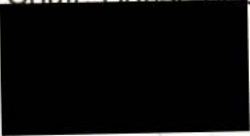




Department
for Work &
Pensions


www.dwp.gov.uk

Rt Hon Frank Field MP
Chair, House of Commons Work and Pensions Select Committee


Dear Frank,

25 July

Government response to the House of Commons Work and Pensions Select Committee Report on 'Personal Independence Payment (PIP) and Employment and Support Allowance (ESA) assessments: claimant experiences'.

Thank you for your recent letter dated 12 June 2018, which followed the government response to the Work and Pensions Select Committee's Seventh Report of 2017–19, on Personal Independence Payment (PIP) and Employment and Support Allowance (ESA) assessments. That response, published on 18 April 2018, set out the steps we are taking to improve PIP and ESA assessments and where we are continuing to explore what we can do to improve the process.

In your letter you asked that I respond to the concerns in the Committee's report on claimant experiences. I want to assure the Select Committee and all of the disabled people and their representatives who submitted evidence to the inquiry that we are addressing the core concerns expressed to the Committee by claimants. This Government is absolutely committed to improving the overall claimant experience, as this is what claimants rightly expect and deserve. To support this we are making improvements to our communications, assessment and our decision making. We will also continue to engage with disabled people and stakeholders to support further improvements to PIP and ESA, for the benefit of all our claimants. The Department currently gains feedback from disabled people through a range of forums, formal consultations and the Department's research programme. For example, the latest official DWP survey shows that 87% of PIP claimants and 82% of ESA claimants are satisfied with their overall experience of the benefit journey and this survey was independently undertaken. Claimants can also engage with the Department through their local Jobcentre, telephone helplines and the complaints process.

Responding to each of the concerns in turn:

- 1. Errors in assessment reports, such as inclusion of incorrect information and omission of relevant information shared during the assessment;**

It should be noted that assessment reports are not, and can never be, verbatim records of what the claimant says during a consultation. Health Professionals (HPs) are not required to capture everything that is said during a consultation. Instead, they listen objectively and capture information that clearly explains the functional impact of the claimants reported conditions. However, all claimants should receive high quality, objective and accurate assessments and the Department strives to achieve this. I expect the highest professional standards from our Assessment Providers and closely monitor quality through independent audit.

Decisions on entitlement to benefit are made by DWP not the Assessment Provider. DWP will consider all of the available evidence when making its decision. HPs are required to ensure that all claimants receive high quality, objective and accurate assessments. The accurate recording and reporting of the assessment is essential to this.

Furthermore, the Department recognises that attending any face-to-face assessment can be a stressful experience for some people, which is why we do not carry out face-to-face consultations where there is enough existing evidence to determine benefit entitlement.

2. The difficulty and distress that claimants can experience filling in PIP and ESA application forms;

It is concerning that the application forms for PIP and ESA could have the potential to cause distress. Consequently, we announced in the published government response that we will commission external contractors to conduct independent research. The research will address the difficulties experienced by some claimants by identifying where improvements can be made to the forms.

In addition, we have made a number of improvements to help claimants fill out the application form more easily.

In 2017, an Easy Read version of the ESA40 (ESA welcome leaflet) was launched, to improve support for claimants with complex needs. We have improved the ESA application process, and now identify claimants with alternative format needs at point of claim, ensuring they get products in their chosen format throughout their ESA journey. We will also produce an Easy Read version of the notes which accompany the PIP 2 'How your disability affects you' form.

We recently launched a series of videos which outline the PIP claim process in a simple and clear way, in order to prepare claimants better for their assessment. The PIP assessment providers also supply information to claimants ahead of their assessment appointment via their websites and direct mail sent to the claimant.

The Department has also announced it will work with stakeholders to understand the claimant need in making information regarding PIP and ESA descriptors more readily available to all claimants in either Easy Read format or video.

3. Inaccuracies in reports arising from lack of assessor knowledge about the functional implications of different conditions;

The assessment is not a clinical assessment, diagnosing a condition or recommending treatment options. Instead, the HP must listen objectively, recording information that clearly explains the functional effects of the reported conditions. This requires a very different skill set from those involved in the treatment of individuals, with less need for specialist knowledge. Assessments are undertaken by qualified health professionals who are experts in disability analysis with knowledge of the likely functional effects of a wide range of health conditions.

Before HPs can carry out assessments they must go through a formal approval process to ensure they meet the Department's requirements in relation to experience, skills and competence. Failure to demonstrate that they have reached the necessary standards, or to co-operate with feedback and/or retraining, will result in approval being refused.

HPs must undergo a Continuing Medical Education (CME) programme for practitioners and are subject to regular audit. Failure to complete the mandatory CME and/or failure to maintain the required standards at audit will result in approval being revoked.

HPs are required to assess mental function in all cases where the claimant has a condition that affects mental, intellectual or cognitive function. HPs undergo training in Disability Assessment Medicine and must demonstrate an up to date knowledge of relevant clinical subjects. They also receive regular feedback, including positive feedback or dissatisfaction raised by customers. Prior to carrying out an assessment HPs should routinely refresh their knowledge of any condition with which they are not fully familiar.

All HPs are provided with evidence based protocols based on extensive research and training materials on a variety of health conditions that have been agreed with the DWP.

4. Problems with Mandatory Reconsideration (MR), and the stress associated with challenging a decision at MR or Appeal

The Department is focused on getting assessment decisions right the first time. However in cases where the claimant disputes the decision, the MR process enables us to look again and gather additional evidence so that the Department can make the right decision at the earliest opportunity.

First, those claimants who apply by telephone are asked if they have additional evidence they want to be considered, and decision makers themselves can make further enquiries with the claimant before the final decision is made (claimants are telephoned in the majority of cases to check whether they have evidence that has not yet been considered, which can be taken into account in the award decision.) For

those who prefer to apply in writing, we have introduced form CRMR1, available for download from the Gov.UK website. This not only helps claimants to explain their reasons for disputing the decision on their claim in a more structured way, it also promotes the provision of additional evidence.

When a decision is overturned at Tribunal, it does not necessarily mean that the original decision was incorrect. The most common reasons that the decision is overturned are:

- The appellant gives compelling oral evidence to the Tribunal; and
- The appellants provides additional written evidence not previously seen by the Decision Makers.

It is important that claimants' MRs are dealt with in good time, however it is also crucial that the decisions made are of the highest possible quality. To achieve this the Department is ensuring a joined up approach across all aspects of MR that keeps the claimant at the heart of all the process. As part of this we have introduced key 'must do' actions for case managers – the priority is ensuring that the case manager has not only reviewed the evidence that was available at the initial decision stage, but also checked with the claimant as to whether further evidence has since become available.

We have also introduced active case management, whereby case managers ensure that they gather all of the right information at the right time for that individual, including contacting the claimant to explain what information is required to progress their case. This helps to ensure not only that decisions are based on robust evidence, but that the claimants are supported through the process.

Additionally, there are strands of work in progress to drive continuous improvement in the decision making and appeals process. This includes considering the feedback gathered by the Department's Presenting Officers. The Department has recruited approximately 150 Presenting Officers, split between PIP and ESA, to represent DWP cases at Tribunals and provide valuable insight into why the Department's decisions can be overturned. The Department is also running a series of tests which explore the different ways we can improve evidence gathering and the quality of our decision making. This work draws on the recommendations made in the Social Security Advisory Committee's Decision Making and MR report.

Furthermore, we are working closely with the Ministry of Justice and Her Majesty's Courts & Tribunals Service (HMCTS) to reduce the volume of cases that go to appeal and improve appeals clearance times; not only by making improvements to our decision making processes as outlined above, but also through HMCTS' recruitment of additional judges and tribunal panel members, and work being done to increase the capacity and performance of the Tribunal. We are also working with HMCTS on their digital reform initiatives, which will improve waiting times. These reforms will include allowing evidence to be shared digitally rather than by paper between DWP and HMCTS, and will also allow claimants to submit and track their appeal online. We are also considering whether judges will be able to direct the parties on what further evidence is required, allowing DWP to review or when appropriate, change a decision before the panel makes a final determination.

I trust this information is useful. Again I would like to take the opportunity to thank the Committee for its work, and to thank the very many individuals who shared their experiences of claiming PIP and ESA. Their valuable contributions are helping inform the changes we have committed to making to the assessment process, to improve the PIP and ESA claimant journey.

If you have any further queries please do contact me again.

Best wishes,

A handwritten signature in blue ink, appearing to read 'S. Newton', written in a cursive style.

Sarah Newton MP

Minister of State for Disabled People, Health and Work