

Social Security Experience Panels: Personal Independence Payments Assessments and Expenses

Background

The Scottish Government are becoming responsible for some of the benefits currently delivered by the Department for Work and Pensions (DWP). As part of work to prepare for this change, the Scottish Government set up the Social Security Experience Panels.

**Department
for Work and
Pensions**



**Scottish
Government**



Over 2,400 people from across Scotland have joined the Experience Panels. They all have recent experience of the benefits that are coming to Scotland.



The Scottish Government is working with Experience Panel members to create Scotland's new social security system.

**2,400+
Experience Panel
members**

About the research

This report gives the findings of the 'Personal Independence Payment (PIP) Assessments and Expenses' research.

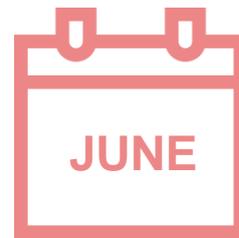


2,456
invites



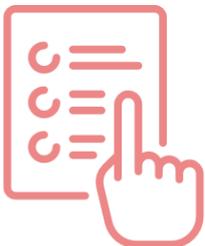
128
survey
responses

The research took place in

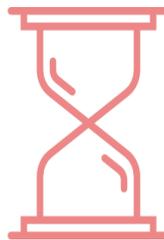


2018

The research explored:



Participant's views on
booking PIP health
assessments



How long health
assessments should
last



Participant's
experiences of
claiming expenses
after a health
assessment

Participants were between

25 – 80+

years old



33%

Man or boy



67%

Woman or girl



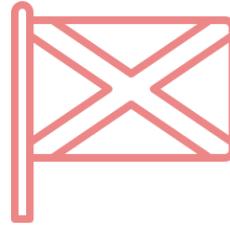
77%

lived in an urban location



23%

lived in an rural location



Participants took part in

28

out of

32

local authority areas

Most survey participants had a disability or long term health condition, including:



chronic pain



severe hearing impairments



severe visual impairments



other kinds of long term health condition

More than half of survey participants were:



a carer due to **old age**,



a carer to a **child**, or



a carer to an **adult**.

This report outlines the views of people who responded to this survey. These may not be shared by all PIP claimants.

Booking a health assessment

In the future, Social Security Scotland may allow clients to choose how they book an assessment. Participants were asked **how they would like to book an assessment**.



We also wanted to understand **what was important to participants when booking an appointment**. We asked **what things they would like to be able to choose** if participants were able to book an appointment online.



Almost all participants felt that the assessor's knowledge and the location were important.



Over three quarters said the **time of day** was important.



The **least important thing to choose was the date.**

Respondents told us they wanted to book their own health assessment because:



They had to organise a carer, advocate, friend or family member to come with them.



Their changeable health condition meant being able to re-arrange appointments was important.

Rearranging a health assessment

Just under a fifth of respondents told us they had to rearrange a health assessment after they missed or cancelled their initial one.

We heard lots of reasons for rearranging a health assessment:

I was unwell, in hospital or caring for an unwell family member.

I couldn't arrange transport to the venue.

I lost my appointment letter.

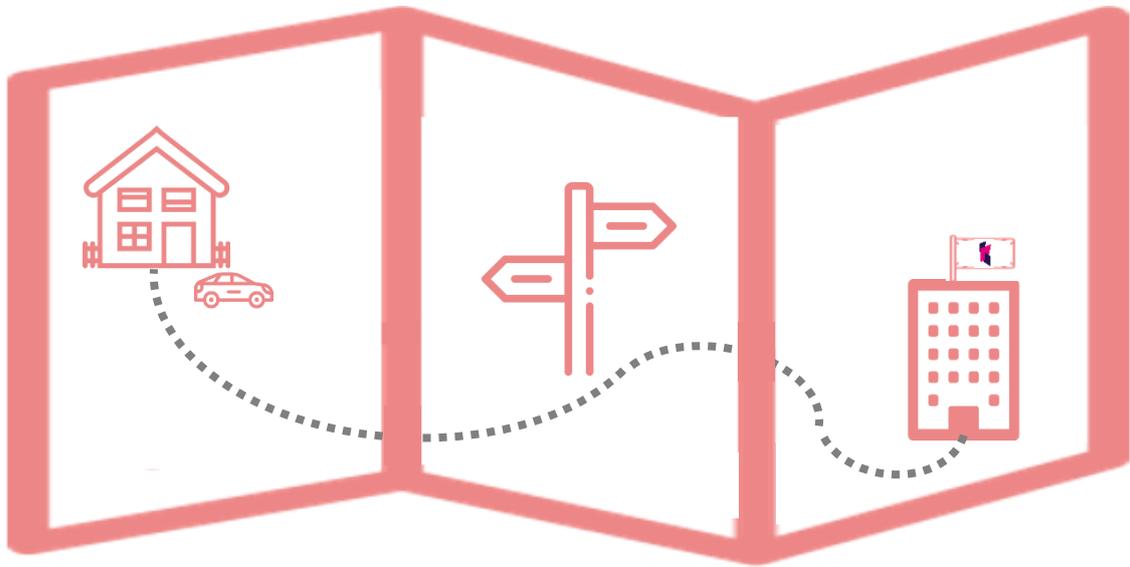
I was having a bad day and my health condition flared up.

The appointment letter arrived too late.

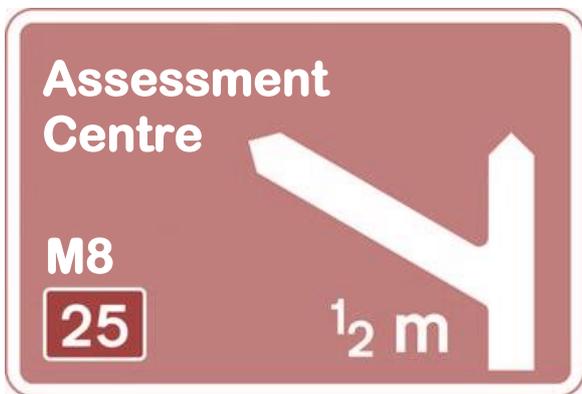
Respondents said they would value being able to re-arrange their appointment at short notice.

Travelling to the health assessment

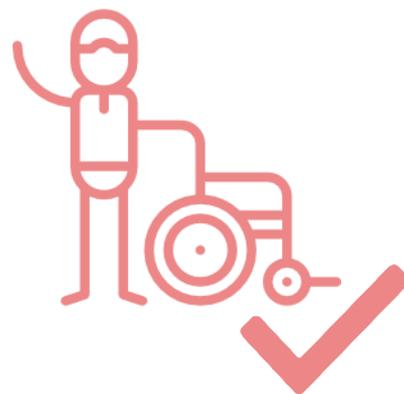
Respondents thought the location of the assessment centre was 'hugely important' for reasons of accessibility, privacy and cost.



They wanted assessment centres to:



Be well signposted



Be fully accessible



Be close to home





Respondents also said that **when they travelled was also important to them.**

Some respondents said they couldn't travel early in the morning as their medication hadn't kicked in.

Others preferred early appointments as they felt more awake.

At the health assessment

Many Experience Panel members have told us undergoing a health assessment is the **most stressful part of applying for a benefit.**

Many Experience Panel members felt that **health assessors were unfair, treated them with suspicion and were not respectful.**

'...we have been through this process with my son and it felt like we were on trial at court, not a good experience what so ever.'

'I have attended PIP interviews with my children and been appalled at how little the person knew about their conditions. They wrote ridiculous comments on the report.'

Respondents used words such as 'arrogant' and 'self-confident' to describe assessors.

Many respondents felt that assessors did not know enough about their health condition or disability.

‘Having been through two health assessments for PIP, it is obvious that health professionals have no real understanding of the effects of my condition and only very limited and out of date medical knowledge.’

Respondents tended to feel that if assessors were more knowledgeable about their conditions, they would be able to provide a higher quality assessment.

‘You can’t assess complex conditions without at least a working knowledge of the claimant’s issues.’

Respondents also felt that greater knowledge would stop assessors asking inappropriate questions and mean the assessment was more tailored to their individual needs.

Recording health assessments

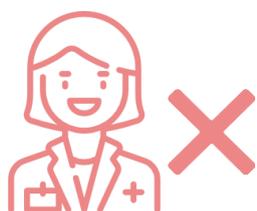
We asked respondents if they would want their health assessment to be automatically recorded.



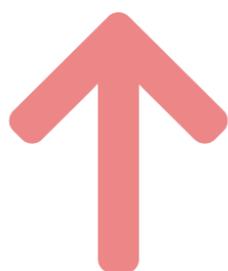
Almost **three quarters of respondents** said they would want their health assessment recorded, with almost a further quarter saying they would maybe want it recorded.

Only one in twenty respondents said they would not want it recorded, or had no opinion.

Respondents gave different reasons for wanting their assessment recorded. This included:



- **Not trusting the health assessor to accurately report what happened**



- **Improving the quality of the assessment**

Many respondents also said they would value using the recording in a potential future appeal.

Some respondents said they would not want assessments recorded. These respondents were **worried about data security and the privacy of their recording.**



Most respondents wanted assessments to be audio recorded.

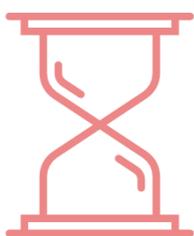
Respondents said audio recording felt 'less intrusive' and 'less intimidating' than video recording.

'An audio recording would capture the relevant information without being as uncomfortable as being filmed during an already traumatic experience.'

Respondents who preferred a video recording said they felt it captured ‘the whole picture’.

‘If I have a partial seizure during a conversation, sometimes it can be seen in a video but is not noticeable if you don’t know what to look for.’

How long should health assessments last?



Most respondents said that health assessments should last ‘as long as necessary’. In practice, this meant between 30 and 45 minutes. Very few respondents said they would want an assessment to last longer than an hour.

If an assessment lasted longer than someone felt able to handle, respondents suggested a number of solutions, including:



- Offering clients a break during the assessment



- Making clear the assessment can be continued on a future date

Expenses after a health assessment



After attending an assessment, some clients are able to claim expenses.

Less than a fifth of respondents told us they had claimed expenses after a health assessment.



Respondents who had claimed expenses said they were generally happy with the process of claiming money back.

A few respondents said they did not like having to be out of pocket, and would have preferred an up front payment.

What's Next?

The Scottish Government will continue to work with the Experience Panels in the development of Scotland's new social security system.

The content of this report will be used to help guide the ongoing development of the health assessment process in Scotland.



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St Andrew's House
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ISBN: 978-1-83960-047-0 (web only)

Published by the Scottish Government, August 2019