

# Disability Benefits Evaluation: Supporting Information



**EQUALITY AND WELFARE**

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# Executive Summary

## Background

The Scotland Act 2016 gave the Scottish Government new powers which included responsibility over administering certain benefits such as disability benefits. Social Security Scotland was established in order to do this, and one of the fundamental tenets of the Social Security (Scotland) Act 2018 is the provision of social security as a human right.

The Scottish Government's [Devolved Disability Benefits Evaluation Strategy \(PDF, 582.6kB\)](#) outlines our approach to evaluating the impact of policy commitments regarding the delivery of disability benefits. These benefits include:

- Child Disability Payment (CDP), which replaces Disability Living Allowance for children administered by the UK Department for Work and Pensions (DWP), and was rolled out across Scotland in November 2021, following a pilot that started on 26 July 2021.
- Adult Disability Payment (ADP), which replaces Personal Independence Payment (PIP) and Working Age Disability Living Allowance administered by DWP, and was rolled out across Scotland in August 2022, following a pilot that started on 21 March 2022.
- Pension Age Disability Payment, which will replace Attendance Allowance in the future.

Policy impact evaluations involve the systematic assessment of a government policy's design, implementation, and outcomes. In the context of social security, this involves understanding how a benefit is being implemented and what effects it has had, for whom, and why, as well as whether its implementation and delivery are in line with the policy and meet the policy intent.

## Supporting Information Policy

Individuals can apply to receive disability benefits such as ADP or CDP by completing an application asking them about their situation, condition or disability, including how it impacts them and their ability to move around. It also asks them what support they need and any medication, equipment, or treatment they need in relation to their condition, disability, or needs.

Supporting information can be provided with an individual's application or review form, or after an individual has submitted their application or review form. It is information that describes how an individual's situation, condition, or disability affects them and what support they need. Supporting information can therefore be instrumental in helping staff make decisions over entitlement to an award.

There are two main types of supporting information:

- Supporting information from a professional. This is supporting information from someone who, in their professional capacity, is familiar with the impact of the individual's condition and/or their treatment, care, or needs. This could include people who work in health or social care, education, or any other professional who is involved in the individual's treatment or care.
- Supporting information from an individual's wider support network. This can give insight into the impact the condition or disability has on the individual on a daily basis. This can include, amongst others, family, partner, friends and unpaid carers (the mygov website provides a more detailed [list of supporting information examples](#)).

The evaluation of supporting information forms an integral part of the [Devolved Disability Benefits Evaluation Strategy \(PDF, 582.6kB\)](#) to evaluate the policy impact of the devolution of disability benefits. Policy commitments for the supporting information process are:

- Clear and accessible guidance is provided on what supporting information is most useful. This includes internal guidance for Social Security Scotland staff and external guidance for applicants, individuals currently receiving benefits, and individuals providing supporting information.
- Case Managers (Social Security Scotland staff) work collaboratively with individuals to identify the most useful supporting information.
- Case Managers can gather supporting information on the individual's behalf.
- Supporting information only needs to broadly support the application or review, rather than confirm every detail the individual has given in their application or review form.
- Case Managers have discretion to make an award in the absence of supporting information.
- Generally, only one piece of supporting information is sought from a professional per application.
- Supporting information both from professionals and the individual's wider support network is accepted.
- Different types of supporting information are given equal consideration.

## Methodology

This evaluation is based on qualitative research that was commissioned and undertaken by Ipsos Scotland. Fieldwork took place between September 2022 and January 2023 and involved interviews or focus groups with ADP and CDP

applicants, Social Security Scotland staff and third sector staff. The evaluation also draws on a survey run undertaken by Social Security Scotland that was sent to all CDP and ADP applicants who had a decision on their application between September and December 2022.

To support continuous improvement, key findings have been shared throughout the evaluation project. Overarching themes identified through data analysis are presented below.

## Key findings across themes

### Theme 1: The supporting information experience

The way in which Social Security Scotland staff spoke about their role, interact with applicants, and understand supporting information, suggested that the values of **dignity, fairness, and respect** are embedded in their approach.

Interview and survey data showed that successful applicants believed their experiences were in line with **dignity, fairness, and respect** and that the **right decision had been made first time**. This was evident from how staff treated them, their comparative experience with the DWP, and their belief that supporting information was a key part to fair decision-making. However, being successful in their application and agreeing with the determination made were clearly contributing factors.

Indeed, unsuccessful interviewed applicants were **less likely to think** their supporting information had been **considered fairly** and that the **right decision had been made first time**. Unsuccessful survey respondents were also less likely to feel that they had been treated with dignity, fairness, and respect. Furthermore, survey respondents who disagreed with the decision made on their application were less likely to agree they had been treated fairly and respectfully throughout the application process.

These differences were also evident in how applicants felt about the transparency of decision-making. Successful interviewed applicants highlighted that it was **clear from decision letters** the reasons why they were provided with an award. However, unsuccessful survey respondents were more likely than successful survey respondents to disagree that the reason for their application being unsuccessful was clear.

It should also be noted that **staff's unconscious bias towards supporting information from professionals**, and in particular GPs, may impact on the supporting information process. However, the client survey results indicate that there were no differences on success rates between those who supplied only a confirmation of diagnosis as supporting information and those who supplied only information from another person who knows them/ their child.

In interviews, some applicants said that one of the key purposes of supporting information was to allow Social Security Scotland staff to make a fair decision on

their application. However, there were **mixed views** on the concept of **equal consideration** of different types of supporting information: there were those who felt it would support fair decision-making and those who felt strongly that supporting information from family and friends should be given less weight.

## **Theme 2: A trust-based approach is applied to supporting information and individuals trust in the application process and wider Social Security Scotland**

Social Security Scotland staff spoke positively about starting from a position of trust. However, staff also reported **challenges in balancing a trust-based approach** with feeling fully confident that the supporting information available is sufficient for them to make a decision.

**Successful applicants tended to feel a trust-based approach** had been applied to the collection and use of their supporting information. They reported that Social Security Scotland did not question any aspects of the application and did not ask for any further information. They also said their overall approach was sympathetic and understanding. They also contrasted their experience favourably with applying for benefits administered by DWP, noting the feeling of being trusted as a key difference.

However, **unsuccessful applicants** in interviews **were less certain whether a trust-based approach** had been taken, highlighting that application outcome will impact on feelings of trust towards Social Security Scotland.

Overall, **successful applicants reported being more willing to apply for benefits** delivered by Social Security Scotland in the future and 80% of all survey respondents agreed or strongly agreed that they could trust Social Security Scotland with significant variation depending on the outcome of the application.

## **Theme 3: Individuals feel less stress and/or anxiety about the supporting information and application process**

Interview and survey data indicated that individuals who are able to provide supporting information with their application are **likely to feel less worried about the process**. Misunderstandings about the supporting information process (discussed in the subsequent theme) are likely to negatively impact on overall experiences.

Overall, there was evidence that individuals found the supporting information process simple and straightforward. Interviewed applicants reflected positively on the online systems available for uploading supporting information and the ability of Social Security Scotland to gather supporting information on their behalf, which they thought would speed up this process. However, the **main source of applicant dissatisfaction was the length of time** it took for Social Security Scotland to obtain supporting information on their behalf.



Some applicants with previous experience of applying for benefits through DWP indicated that the application process with Social Security Scotland **was less difficult and stressful**, and said that they felt **more confident** applying for future Social Security Scotland benefits. Unsuccessful applicants were less positive about the application process.

All applicants **typically expected** the process of applying for disability benefits to be **stressful** but the findings show that having a positive experience of the supporting information and application process can challenge these expectations.

#### **Theme 4: Knowledge and understanding of supporting information**

**Individuals do not fully know how to access supporting information guidance and support.** Understandably, the guidance on the application form is the most utilised form of guidance, however, there is a lot less awareness of the other forms of guidance available (e.g., that on my MyGov, Social Security Scotland, and the Scottish Government websites).

Overall **mixed views regarding the clarity of the guidance** provided suggest the need for guidance, especially that on the application form, to be reviewed with the aim to further clarify as well as to signpost to other guidance.

The most utilised form of support for the supporting information process is that from friends and family followed by Social Security Scotland. However, **awareness of support** offered by Social Security Scotland and other organisations **was mixed**.

**There was mixed evidence** around whether individuals understand what supporting information is most useful. A number of misconceptions about supporting information were highlighted, for example, applicants not knowing that supporting information could be from their wider support network and not understanding that one piece of supporting information from a professional may be sufficient. Furthermore, individuals tended to put more weight on supporting information from professionals and, specifically, GPs.

On a similar note, the **quality of the supporting information provided was mixed**. Indeed, over half of survey respondents were recontacted after submitting their application to ask for further information or to clarify something. Case managers provided context to this, explaining that many applications arrive without supporting information, individuals sometimes provide contradictory or partial information as well as partial or blurry photos of documents. Other staff who support applicants also commented on the lack of awareness individuals have about different types of supporting information.

Nonetheless, evidence suggests that the **majority of determinations** are being made without the need for a consultation (only available for Adult Disability Payment), highlighting the importance of supporting information to the decision-making process.

## **Theme 5: Ease of individuals supplying their own supporting information and going through the application process**

As discussed in Theme 3, individuals like the idea of case managers being able to gather supporting information for them and, indeed, the main reason they ask them to do so is they think that this will speed up the decision-making process. Contrarily, this process of gathering information on an individual's behalf was cited by staff as the main cause of lengthy processing times. This highlights the importance of **individuals supplying supporting information themselves, where possible.**

Highlighting the importance of supplying supporting information more generally, evidence suggests that those who submit supporting information with their application are **more likely to obtain an award.**

However, some **difficulties and barriers** to supplying supporting information were identified, highlighting areas for improvement to facilitate the process of individuals supplying their own supporting information. A lack of understanding about and access to supporting information were key barriers. So too were having a disability or specific condition that makes the completion of tasks more difficult.

The evidence also highlighted differences between groups in the experience of supplying supporting information. Having access to and the skills required to submit supporting information seem to be **key facilitators** in enabling individuals to supply supporting information.

In relation to the application process more generally, survey respondents seemed **content with the clarity of the process** and **the eligibility criteria** as well as the **content and relevancy** of the application. There was **less satisfaction** around how long the application form took to complete, highlighting areas for action.

## **Key recommendations for policy and practice**

### **Key recommendations identified from the cross-cutting themes**

- Ensure decision letters are as transparent as possible in communicating the reasons for the decision made.
- Further staff training on the usefulness of different types of supporting information from professionals as well as the wider support network.
- Better communication of the concept of equal consideration (formerly equal weight) to individuals.
- Clarification that staff will establish importance of different pieces of supporting information on a case-by-case basis, depending on the relevance of the pieces at hand.
- Take steps to increase staff confidence in making decisions without all aspects of the application being 'confirmed' by supporting information.

- Further clarify supporting information guidance on the application form.
- Raise awareness of other types of guidance available and ensure these are in line with that provided on the application form.
- Raise awareness of the different types of support available and how to access these.
- Raise individuals' awareness of the different types of supporting information and what might be most useful in different situations/circumstances.
- Encourage individuals to check that supporting information is in line with information on application form.
- Showcase examples of "good quality" supporting information to individuals to increase understanding.
- Raise awareness of the benefits of individuals supplying supporting information themselves and incorporate this in external messaging.
- However, continue to implement and raise awareness of the policy of gathering supporting information on individuals' behalf for those who are not able to supply supporting information themselves.

### **Additional key recommendations identified from policy commitments and anticipated outcomes**

- Ensure support organisations are sufficiently trained and kept up to date on current policy on supporting information.
- Increase accessibility to Social Security Scotland staff to offer support to individuals when they need it.
- Better communication of the policy message that supporting information only needs to broadly support application or review.
- Staff training to help them process cases with varying amounts and types of supporting information.
- Awareness-raising on the policy that mostly, one piece of supporting information is sought from a professional for both individuals and staff.
- Clear communications to individuals and staff that a professional does not necessarily mean a GP.
- Clarification and support so individuals are empowered to request supporting information from not just medical professionals but also their wider support network if they feel that it captures the impact of their condition or disability on their every-day life.

# Introduction

## Background

The Scotland Act 2016 gave the Scottish Government new powers which included responsibility over administering certain benefits such as disability benefits. The responsibility of delivering these benefits was therefore transferred from the Department of Work and Pensions (DWP) under the UK Government to Social Security Scotland under the Scottish Government.

One of the fundamental tenets of the Social Security (Scotland) Act 2018 is the provision of social security as a human right, necessary for the realisation of other human rights. Disability assistance has therefore been designed with the intention of supporting individuals to access this right. This is reflected, amongst others, in Social Security Scotland's approach to making decisions on people's entitlement to disability benefits. Rather than performing a gatekeeping function, Social Security Scotland staff's role is to ensure individuals receive the level of support they are entitled to. Importantly, this must be done in a way that preserves people's dignity, is fair, and treats them with respect.

The approach to delivering disability benefits has been developed by listening to individuals who have lived experience of the DWP benefits as well as working with organisations who represent disabled people. This approach has transpired into a series of policy commitments that underpin Social Security Scotland's approach to delivering benefits.

The Scottish Government's [Devolved Disability Benefits Evaluation Strategy \(PDF, 582.6kB\)](#) outlines our approach to evaluating whether the delivery of disability benefits is done in line with these policy commitments, and whether our policy commitments have the intended impact. These benefits include:

- Child Disability Payment (CDP), which replaces Disability Living Allowance for children administered by the DWP, and was rolled out across Scotland in November 2021, following a pilot that started on 26 July 2021.
- Adult Disability Payment (ADP), which replaces Personal Independence Payment (PIP) and Working Age Disability Living Allowance administered by DWP, and was rolled out across Scotland in August 2022, following a pilot that started on 21 March 2022.
- Pension Age Disability Payment (PADP), which will replace Attendance Allowance when it is launched in 2024.

Policy impact evaluations involve the systematic assessment of a government policy's design, implementation, and outcomes. In the context of social security, this involves understanding how a benefit or aspects thereof are being implemented and what effects it has had, for whom, and why as well as whether its

implementation and delivery are in line with the policy and meet the policy intent. These evaluations provide insight into how benefits are contributing to Social Security Scotland principles and wider Scottish Government objectives. This includes, for example, individuals trusting in Social Security Scotland and public services treating people with dignity, fairness, and respect.

## Supporting Information Policy

Individuals can apply to receive disability benefits such as ADP or CDP. The application form for these benefits asks them about their condition or disability, how it impacts them and their ability to move around. It also asks them what support they need and any medication, equipment, or treatment they need in relation to their situation, condition, or disability.

Supporting information is information provided by a person or organisation other than the individual themselves which is presented to support the decision-making process on their application or award review. Supporting information can be provided with an individual's application or review form, or after an individual has submitted their application or review form. Supporting information describes how an individual's condition or disability affects them and what support they need.

There are two types of supporting information:

- Supporting information from a professional. This is supporting information from someone who, in their professional capacity, is familiar with the impact of the individual's condition and/or their treatment, care, or needs. This could, amongst others, include people who work in health or social care, education, or any other professional who is involved in the individual's treatment or care.
- Supporting information from an individual's wider support network. This can give insight into the impact the condition or disability has on the individual on a daily basis. This can include, amongst others, family, partner, friends and unpaid carers (the mygov website provides a more detailed [list of supporting information examples](#)).

Supporting information performs an important role in the decision-making process. People are asked to provide one piece of supporting information from a professional that broadly confirms their condition, disability or needs. Additionally, supporting information is one of several decision-making tools that support case managers in establishing the individual's level of need, should their application or review form not provide all the details needed to establish entitlement.

Other decision-making tools are, amongst others, case discussions, guidance, or consultations (for ADP cases only). Providing additional detail to application and review forms and allowing Social Security Scotland staff to have a better, more rounded understanding of an individual's disability, situation, or condition, supporting information can be extremely instrumental in helping staff make decisions over entitlement to an award.

The evaluation of supporting information forms an integral part of the [Devolved Disability Benefits Evaluation Strategy \(PDF, 582.6kB\)](#) to evaluate the policy impact of our disability benefits. Policy commitments for the supporting information process are:

- Clear and accessible guidance is provided on what supporting information is most useful. This includes internal guidance for Social Security Scotland staff and external guidance for applicants, individuals who are currently receiving benefits, and other individuals providing supporting information.
- Case Managers (Social Security Scotland staff) work collaboratively with individuals to identify the most useful supporting information.
- Case Managers can gather supporting information on the individual's behalf.
- Supporting information only needs to broadly support the application or review, rather than confirm every detail the individual has given in their application or review form.
- Case Managers have discretion to make an award in the absence of supporting information.
- Generally, only one piece of supporting information is sought from a professional per application.
- Supporting information both from professionals and the individual's wider support network is accepted.
- Different types of supporting information are given equal consideration.

As the above context shows, supporting information is an essential policy area of disability benefits, feeding into the wider decision-making process. All decisions made on disability benefits are based on the balance of probabilities. This means that a factual circumstance must be accepted as true if the information provided shows that it is more likely than not that it occurred. Rather than seeking further supporting information to ensure they have all details confirmed, Case Managers should make decisions based on the balance of probabilities if they do not have all the information needed to establish the facts of a case.

## Evaluation Aims

This report focusses specifically on the supporting information aspect of the application process for disability benefits. At the time this evaluation took place, reviews of existing CDP or ADP awards were in early stages of being carried out. The number of reviews for disability benefits was therefore minimal. Thus, the decision was taken to focus on the application process specifically with regard to supporting information. Though, the policy for supporting information is the same across both applications and reviews, so findings from the current evaluation can also feed into the review process.

Furthermore, as the two devolved disability benefits that have been launched nationwide are ADP and CDP, the supporting information process concerning these disability benefits specifically will therefore be the focus of this evaluation.

The overall aim of the evaluation is to provide the Scottish Government with robust, timely research on the supporting information aspect of the decision-making process concerning applications, in line with the government's [Devolved Disability Benefits Evaluation Strategy \(PDF, 582.6kB\)](#).

This evaluation will help to increase our knowledge of whether and how the policy commitments are being implemented as intended. It will also increase knowledge of their corresponding impacts, and whether these impacts are in line with Social Security Scotland principles and wider government objectives. It will also feed into policy and process improvements, where required, to ensure that the policy intent is being met.

This evaluation has also been iterative in nature. To improve the existing supporting information process, implementation of the supporting information policy, as well as the overall experience of individuals during the decision-making process, emerging research findings and recommendations have been made available to relevant teams across Scottish Government and Social Security Scotland throughout the evaluation. This has allowed for recommendations being implemented in a timely manner.

The Methodology section on page [13](#) illustrates and describes the theoretical approach underpinning this evaluation.

In order to achieve these aims, the following research questions will be addressed:

- How did individuals experience the supporting information aspect of the application process? What went well and what did not go well?
- Do individuals and staff (see Annex A - Glossary of staff roles) fully understand what constitutes useful supporting information and the role that supporting information plays in the application process?

- Do individuals fully understand how to access relevant guidance and support in relation to supporting information?
- Do individuals feel that a person-centred approach was taken in the collection and use of their supporting information?
- What were the relevant impacts of individuals' experiences of the supporting information process in relation to Social Security Scotland principles and wider government objectives?



# Methodology

This section provides an overview of the evaluation approach for the supporting information aspect of the application process. Below is an illustration of the logic model that underpins the approach.

**Table 1** Logic model illustrating the supporting information policy commitments and anticipated short, medium, and long-term outcomes.

Policy Commitments	Short-term Outcomes	Medium-term Outcomes	Long-term Outcomes
Clear and accessible guidance on what SI is most useful	Individuals know how to access SI guidance/information/support	High quality applications enable a determination to be made quickly and correctly	More determinations made without the need for a consultation (only applicable to ADP)
Case managers help individuals identify most useful SI	Individuals understand what SI is most useful	Individuals trust in the application and review process	Individuals have no worries about the application or review process
Case managers can gather SI on the individual's behalf	The SI process is simple and straightforward and SI is relevant and high quality	Individuals feel less stress and/or anxiety about the application and review process	Individuals trust in Social Security Scotland
SI broadly supports application or review			
Discretion to make an award in the absence of SI	A trust based approach is applied to the collection and use of SI	Values of dignity, fairness and respect are embedded	No barriers to applying for disability benefits
Mostly, only one source of SI is sought from a professional	Experience of the SI process is in line with dignity, fairness, and respect	Decision-making is transparent and fair	Public services treat people with dignity and respect
SI from professionals and individual's wider network is accepted	SI is used to make a fair and transparent decision	Individuals experience positive contact with case managers, where relevant	The right decision is made first time
Different types of SI are given equal consideration	Individuals feel less stress and/or anxiety about the SI process		

**Risk factors/ external factors:** Policy changes are not implemented as intended; other parts of the application and/or decision-making process negatively outcome on experience of providing supporting information; Individuals unaware of policy commitments and approaching applications/ reviews similar to the way they would with the UK system

**Note:** SI = Supporting information

As can be seen, the first column contains the various policy commitments for supporting information. These are also detailed above on page [9](#). The second, third, and fourth columns represent anticipated short, medium, and long-term

outcomes that align with Social Security Scotland Principles and wider government objectives.

The model is underpinned by the following assumptions:

- if the policy commitments are implemented as intended, then their impacts will reflect the short, medium, and long-term outcomes.
- The short-term outcomes are seen as immediate policy impacts and are directly related to the policy commitments.
- Going from the short to the medium to the longer-term outcomes represents going from direct, immediate impacts to less direct, wider impacts of the policy commitments. The medium and long-term outcomes are therefore assumed to be impacted by other policy areas and factors that are outside of supporting information.

## Summary of Data Sources

In accordance with the [Devolved Disability Benefits Evaluation Strategy \(PDF, 582.6kB\)](#), the evidence used in this report was drawn from multiple data sources including externally commissioned qualitative research and the Client Satisfaction Survey (from now on referred to as Client Survey). These data sources are explained more clearly in their corresponding subsections below.

### Commissioned qualitative research

Ipsos Scotland was commissioned by the Scottish Government to conduct qualitative research with people who had applied for ADP or CDP, Social Security Scotland staff who make entitlement decisions on applications and existing awards (Case Managers), Social Security Scotland local delivery staff, and third sector organisation staff. The latter two groups of participants work directly with individuals and have experience of supporting them through the application process. This includes supporting them with the provision of supporting information for their application.

The aim of the research was to address the following questions:

1. Do applicants understand what supporting information they should or could be providing to support the decision-making process as much as possible?
2. Do applicants feel that their supporting information has been considered fairly?
3. What impact does supporting information have on Case Managers' decision-making process?
4. Is the process of requesting and obtaining supporting information done in line with policy commitments?

These questions help to increase understanding of how the supporting information policy commitments are being implemented in practice, whether they are being implemented as intended, and what the consequent impacts are of these commitments.

A targeted approach was taken to the recruitment of people who had previously applied for ADP and CDP. This was to ensure a variety of voices were heard and therefore that a variety of experiences could inform the findings. It should be noted that the aim of sampling in qualitative research is not to obtain a representative sample of the population of interest, but to obtain a mix of people with a range of different characteristics. This maximises the chance of identifying different issues. The two steps that were taken were:

- **Targeting on the sample to approach for recruitment.** Characteristics that were targeted on prior to approaching potential participants were age (for ADP applicants only), Scottish Index of Multiple Deprivation (SIMD), rurality, ethnicity (by whether English was first language), application outcome (successful vs. unsuccessful).
- **Screening interested participants.** Screener questions included: confirmation that the applicant had heard the outcome of their application, award determination (positive vs. negative), SIMD, rurality, age (for ADP applicants only), ethnicity, and information about an individual's condition or disability (i.e., physical vs. mental health condition).

Semi-structured interviews lasting around 45 minutes were conducted with 22 CDP applicants (i.e., parents/carers/guardians applying on the child's behalf) and 20 ADP applicants. These interviews were held over the phone, by video call or face-to-face. Fieldwork was conducted between 6 September and 17 November 2022. Their applications for disability benefits were submitted between 2 January and 1 March 2022 (for CDP) and between 21 March and 15 April 2022 (for ADP).

A mixture of interviews and focus groups lasting around an hour to an hour and a half were conducted with 31 members of staff, with a balanced mixture of those who work on ADP and those who work on CDP. All fieldwork was conducted face-to-face and participants were made up of 18 Case Managers, 8 Decision Team Managers, and 5 Operations Managers (see Annex A - Glossary of staff roles). Fieldwork was conducted in Social Security Scotland offices in Dundee and Glasgow in early November 2022.

Four video call interviews were also conducted with local delivery staff who are employed by Social Security Scotland. They work within local delivery teams and provide face-to-face, video and phone support to applicants. Furthermore, two video interviews were conducted with staff from advice and advocacy charities who provide support to applicants in relation to the overall application process, including supporting information. Fieldwork with these latter two participants groups took place in December 2022 and January 2023. The full report from Ipsos Scotland is available at Annex B – Qualitative report.

## Client survey

This report draws on data conducted by the client survey team in Social Security Scotland. The survey is administered to all those who have applied for benefits under Social Security Scotland or who have had their benefits transferred from the DWP. It is therefore an ongoing piece of research led by social research colleagues in Social Security Scotland.

The data that is being used for this report reflects one round of the survey. Specifically, all applicants who had received a decision on their CDP or ADP application between 1 September 2022 and 31 December 2022 were invited to take part. The survey ran from 13 February 2023 to 12 March 2023.

The survey collects equalities and socio-economic information from respondents. It also asks about their experience of Social Security Scotland and receiving benefits, including, for this specific evaluation, their experience of the supporting information aspect of the application process.

In total, there were 2977 applicants to either ADP or CDP. Of which,

- 2314 had applied for ADP, and
- 663 had applied for CDP.

Annex C – Tables from Client Survey Analyses contains the output from the analyses conducted on the Client Survey data that were used to feed into this report.

Please also note the following technical points about how Client Survey findings are presented throughout this report:

- The number of respondents providing a valid answer to each individual question/statement varied slightly, depending on who was exposed to the question and whether respondents “skipped” the question by choosing not to answer.
- Most results to the closed questions are rounded to whole numbers. As such, results (e.g., those presented in tables) may not sum to 100% due to rounding.
- Some percentages quoted in the report relate to questions that allowed respondents to choose more than one response. These percentages will not sum to 100%.
- Most results are presented to zero decimal places. ‘0%’ should therefore be interpreted to mean less than 0.5%. If no responses were given then this is denoted by ‘-’.
- Unless otherwise presented, proportions and numbers have excluded those who reported “can’t remember/don’t know” or who have skipped the

question through their own choice or through a routing condition placed on that question.

- Numbers and proportions are based on those who reported either applying to CDP **only** or applying to ADP **only**. Those who applied for other benefits or for both ADP and CDP were excluded from the sample.
- Unless otherwise stated, statistics for those who applied to ADP and CDP were combined throughout the report.
- Some questions asked about individuals' experience since they received a decision on their application. This does not necessarily include going through re-determinations or appeals.
- The vast majority (89%) of people who took part in the survey were successful in obtaining an award for CDP or ADP. The results are therefore under-representative of those who were unsuccessful.
- Only significant differences were included in this report (however, see Annex C – Tables from Client Survey Analyses for a full breakdown of the output including both significant and non-significant findings).
- Significant differences between groups were tested using the online [GIGA calculator](#). A difference is reported as significant when the p value < .05, in line with best practice for social research. However, if the p value was between .02 and .05, the difference was referred to as “small” or “marginal”.

### Equalities breakdowns for Client Survey

The following table illustrates the proportions of those taking part who represented different equality groups.

**Table 2** Equalities breakdowns for Client Survey respondents

	Proportions
<b>Gender</b>	
Man	31%
Woman	69%
Total valid	2853
<b>Age category</b>	
16-34	19%

35-54	50%
55+	32%
Total valid	2865
<b>Ethnicity</b>	
White	97%
Minority ethnic	3%
Total valid	2840
<b>Rurality</b>	
Urban	85%
Rural	15%
Total valid	2344
<b>SIMD Quintile</b>	
1-2	53%
3	20%
4-5	27%
Total valid	2306
<b>Household income</b>	
<= £15,599	51%
£15,600 - £36,399	35%
>= £36,400	14%
Total valid	1619
<b>Type of Disability (ADP applicants only)*</b>	
Mobility such as walking short distances or climbing stairs	70%
Mental health	59%

Breathing, fatigue, or stamina	47%
Dexterity such as lifting or carrying objects or using a keyboard	33%
Learning, understanding, or concentrating	30%
Memory	30%
Social or behavioural such as associated with Autism, attention deficit disorder or Aspergers' syndrome	16%
Hearing such as deafness or partial hearing	8%
Vision such as blindness or partial sightedness	7%

Total valid	2222
<b>Number of areas affected** (ADP applicants only)</b>	
1	18%
2-3	45%
4-6	33%
7-9	4%
Total valid	2106

\* All respondents who indicated they have a physical or mental health condition or illness lasting or expected to last 12 months or more were asked to indicate whether it affects them in these areas (e.g. Vision, Hearing, Mobility etc).

\*\*This factor was created as a new variable based on the “type of disability” data where, for example, if an individual thought their condition or illness impacted on their vision only, then this would be computed as them having one area affected under this new variable.

**Source: Client Survey Data**

## **Considerations and limitations**

This section discusses what can and cannot be determined from the data sources that are available for this evaluation. It will also highlight how this influences the extent to which robust conclusions can be drawn regarding the impacts that the supporting information policy commitments have.

**Commissioned qualitative research:** This evaluation is largely dependent on findings from externally commissioned work. The work aimed to capture a variety of experiences based on rurality and socioeconomic status in order to provide context and narrative to the quantitative findings from the other data sources on supporting information. However, the work did have the following limitations:

- Though not the goal, the findings are not representative of all applicants to CDP and ADP because the overall sample was small, and participants were self-selecting, meaning that they actively chose to take part, as opposed to being randomly selected.
- Due to the sample being self-selecting, there is also the likelihood that these participants are more likely to be able to deal with administrative tasks (including people with higher levels of literacy; those less severely affected by their own or their child's condition, whether physical or mental; and those with less chaotic lives and with more resource or means to take part). Consequently, this also means the sample is likely to be biased towards those more able to understand supporting information requirements and to supply supporting information.
- Only people who had completed an application were included in the research. The findings therefore do not provide insight into people who might be eligible but did not apply or did not complete their application, and whether their reasons for not doing so relate to supporting information.
- The sample contained only five applicants who were unsuccessful. While this is not hugely out of line with the proportion of all applicants who are unsuccessful (based on Social Security Scotland [ADP High Level Statistics](#) and [CDP High Level Statistics](#)), it is a small number from which to draw conclusions.

**Social Security Scotland research:** While the commissioned research was explicitly conducted for the current evaluation, Social Security Scotland research (the Client Survey) was conducted to provide information relevant to operations and policy and does not therefore serve as a direct measurement of the policy goals concerning this evaluation.

On a similar note, the Client Survey is currently targeted towards those who applied to disability benefits as well as those who applied to a range of low-income benefits, there is a possibility that some of the applicants to CDP and ADP had also applied for other benefits. This might therefore mean that responses to the survey are referring to other benefit experiences as well as experiences of applying to disability benefits. Nonetheless, Social Security Scotland staff have tried to minimise this risk by framing questions in relation to the benefit i.e., ADP or CDP.

Other limitations of the Client Survey apply that are similar to those described in relation to the commissioned qualitative data: (i) Again, survey recipients are self-



selecting. They are therefore more likely to be those who are more willing to take part in research and those who are more likely to be able to deal with administrative tasks. The results are also therefore not representative; (ii) Only people who had completed an application were included in the research.

**Supporting information for undergoing a review:** The sample from which all the data was drawn, including interview data and survey data, for this evaluation consists of applicants only. It should be noted that individuals might also be asked to provide supporting information when they are undergoing a review or have requested a re-determination on a recent entitlement decision. This could include individuals who have had their existing DWP benefits transferred to Social Security Scotland and individuals who applied directly to Social Security Scotland. However, because the timing of this evaluation was just after the launch of ADP (29 August 2022), there would have been no opportunity to capture those who had undergone a review for ADP. It was therefore decided to only focus on the application process specifically with regard to the supporting information experience. Nevertheless, the policy is the same for supporting information across different situations, so learning from this report can also be applied to overall learning on supporting information policy.

**Medium- and long-term outcomes:** These are outcomes that are likely impacted by other factors as well as supporting information. Nonetheless the report aims to provide an insight into how supporting information has contributed to these outcomes by linking up the policy commitments and short-term outcomes with the medium- and longer-term ones.

# Findings

In this chapter, the data sources outlined in the Methodology section on page [13](#) (qualitative commissioned research and the Client Survey) are used to evaluate progress towards short-term, medium-term, and longer-term anticipated outcomes of supporting information policy.

## Progress towards short-term anticipated outcomes

The short-term outcomes of the supporting information policy commitments are:

- Individuals know how to access supporting information guidance and support.
- Individuals understand what supporting information is most useful.
- The supporting information process is simple and straightforward and supporting information is relevant and high quality.
- A trust-based approach is applied to the collection and use of supporting information.
- Experience of the supporting information process is in line with dignity, fairness, and respect.
- Supporting information is used to make a fair and transparent decision.
- Individuals feel less stress and/or anxiety about the supporting information process.

## Individuals know how to access supporting information guidance and support

Interviewed applicants had varying levels of knowledge about how to access supporting information guidance and/or support. Guidance in the application form was the most commonly referred to source of information with less mention of accessing Social Security Scotland or Scottish Government webpages. There were also mixed views about the clarity and helpfulness of guidance within the application form on submitting supporting information.

Some interviewed applicants mentioned accessing support through case managers, local delivery staff, and third sector organisations. Furthermore, 38% of survey respondents said they had got help or support to complete their application, 41% for ADP and 29% for CDP. As Figure 1 shows, of those who had support, 41% said that this was from a friend or family member, 33% said this was from Social Security Scotland, 25% said this was from a support organisation such as Citizens Advice Scotland, welfare rights, advocacy, and money or housing support organisations, and 8% said this was from health services.

**Figure 1** Proportions in response to question: What help or support did you get to complete your application?



**Source:** Client Survey Data

Of those who said they had received help from Social Security Scotland, 94% agreed or strongly agreed that it was easy to get help from them to complete their application. Interviewed applicants described Social Security Scotland staff as “really helpful”, “understanding”, “approachable”, “patient”, and “compassionate”. Overall, these phone conversations were seen by individuals as very valuable for understanding what supporting information to provide.

Support organisations are an important source of advice around supporting information and the application process more generally. However, in the interviews, third sector organisations also exhibited some misunderstandings about supporting information. This lack of understanding specifically involved what constitutes useful supporting information, who should be providing supporting information, and in what circumstances they should be providing supporting information.

Overall, there is room to improve individuals’ and external stakeholders’ knowledge and awareness of different types of support and guidance available.

### **Individuals understand what supporting information is most useful**

As described on page [22](#), perceptions of the guidance available on application forms was mixed. This may also impact here and contribute to individuals knowing what supporting information is most useful.

80% of survey respondents who provided supporting information agreed or strongly agreed that it was clear what they should supply. Interview data also showed that applicants had some understanding of what supporting information is most useful.

Specifically, interviewed applicants mentioned a variety of different types of supporting information, including that from professionals (GPs, occupational therapists, teachers, and health visitors) and their wider support network. Where applicants were able to compare their experiences with applying for disability benefits administered by DWP, they reported that it was clearer what supporting information was required and most useful.

However, interview data also showed that there was a lot of misunderstanding and lack of awareness around this. Common misunderstandings were:

- Not knowing that supporting information could be from their wider support network.
- Not knowing that Social Security Scotland can contact professionals on their behalf.
- Not understanding that one piece from a professional may be sufficient, or large amounts of documentation are not necessarily needed.
- Not knowing that Social Security Scotland cannot (at the time of interviews) directly contact their wider support network even when their contact details are provided.
- Being unsure whether having no diagnosis would work against them.
- Expecting that staff would probably give more weight to supporting information from professionals than from their wider support network.

Indeed, 38% of survey respondents reported that the reason they received a call from Social Security Scotland after submitting their application was to ask for more supporting information.

Furthermore, Third Sector staff and Local Delivery staff highlighted this lack of awareness that applicants have of the different types of supporting information they can provide. They reported that the most vulnerable groups tend to show less awareness about these different types of supporting information.



Local Delivery  
staff member

I have to explain things maybe slightly differently to how it's written on the form, to help clients understand... when you mention [supporting information] their minds seem to just go blank. They don't know what we want, they don't know what they have in the house... so I list plenty of examples to help them think of things.

Interviewed applicants tended to put more weight on supporting information from medical professionals as it was seen to best “back-up” the detail included in their application. This highlights the need for better communication about what supporting information is most useful. Whilst one piece of supporting information from **any professional** familiar with the applicant’s needs is usually needed, applicants’ tendency to put more weight towards supporting information from **medical professionals** may lead to people disregarding supporting information from other professionals that may be important in explaining their condition, disability, or needs.

These issues could be further exacerbated in cases where the individual cannot access supporting information from a medical professional and may lead them to think that they cannot provide the “correct” supporting information.

### **The supporting information process is simple and straightforward, and supporting information is relevant and high quality**

Overall, interview data showed that applicants found the process simple and straightforward. Those who had previous experience of applying to DWP also said that many aspects of the supporting information process were much better with Social Security Scotland. Client Survey findings were also positive. Of those who provided supporting information with their application:

- 84% agreed or strongly agreed that it was clear how to include supporting information,
- 80% agreed or strongly agreed that it was clear what information they should supply,
- 78% agreed or strongly agreed that it was easy to provide supporting information, and;
- 71% agreed or strongly agreed that it was easy to get the supporting information they wanted.

Social Security Scotland’s ability to **gather supporting information on the individual’s behalf seemed to be a contributing factor**. Applicants thought this simplified and sped up the process. Survey data also showed that the main reason for asking Social Security Scotland to gather information on their behalf was because individuals thought staff would be able to obtain the information faster than them (47%). However, some interviewed applicants were not fully aware of this possibility, with others saying that they only became aware once they were told this by case managers.



Successful CDP  
applicant

Once I had the phone call [with Case Manager who reassured him he could just give consultants' names], the pressure was taken off me [...] but it would have been nicer to know from the beginning that that was enough.

Furthermore, interview data indicated that this process can be lengthy regarding the time it takes for **case managers to obtain supporting information** and consequently, delays in the decision-making process. Social Security Scotland staff highlighted that some of the main causes of these delays revolved around professionals not using the SCI Gateway system (the system used for requesting supporting information from GPs) and not complying with requests from case managers.

Therefore, although the process of gathering information can make applicants' experience of the overall process more simple and straightforward, there is also a need to communicate to those applicants who can provide their own supporting information easily that they should try to do so in order to avoid lengthy processing times.

**The online system for uploading documents** was another factor contributing to the ease of the supporting information process. Interviewed applicants said it was convenient and easy to use. Being able to upload photos of documents to the Social Security Scotland system was felt to be easier than posting copies of them – which was what required at the time some of these people had applied to DWP. Applicants who were less familiar with IT, or were unsure how to upload documents, said that Social Security Scotland staff were helpful in talking them through how to upload documents.

However, those who were more computer literate found it easier to use the online system and not all applicants were aware they could supply their supporting information online, suggesting a need to increase awareness of the online system. In addition, applicants suggested some improvements:

- Being able to upload several documents at once in a zipped folder.
- It being clear that they can upload additional supporting information after the original supporting information has been submitted (those who raised this were not aware this is possible).

Survey data also provided an insight into how simple and straightforward different groups found the supporting information process. There was some evidence to suggest that individuals with more than one area affected were less likely to have an easy experience of submitting supporting information compared to those reporting one area affected. A lower proportion agreed or strongly agreed that:

- it was clear how to include supporting information (82%-84% of those reporting two to nine areas affected vs. 90% of those reporting one area affected),
- it was clear what information I should supply (75%-80% vs 85%)
- it was easy to provide supporting information (70%-78% vs. 83%), and
- it was easy to get the supporting information I wanted (61%-69% vs. 79%).

Finally, interview and survey data indicates that the quality of supporting information supplied by individuals is mixed. Interviews with Social Security Scotland staff highlighted that many applications are submitted without any supporting information at all. Furthermore, staff said that some supporting information was contradictory to what was included in the application, some of it contained a lack of detail, only part of a document or blurry images of documents.



CDP Case  
Manager

I think they just don't know what it means... and you've called them to say... I'm just looking to know what support it is that you need [around supporting information]. "I just didn't know what to send" ...and then they are like, right, okay, I can get that, I just wasn't sure what was actually meant by it. I feel as if they don't have a proper understanding of what is actually meant by supporting information and I think this is why we get so many cases that don't have any on it.

Survey data also supports these findings, where 53% of respondents reported that they did receive a call from Social Security Scotland after they had submitted their application to ask for more information or to clarify something. Of these, 38% had been contacted to ask for more supporting information, 10% had been contacted to ask for authorisation to contact a professional to collect supporting information, 6% had been contacted to clarify contact details for a professional to collect supporting information, and 2% had been contacted to ask if they need help sourcing supporting information.

Indeed, that participants' responses indicated a lot of remaining uncertainty as to what supporting information is most useful also suggests that some supporting information submitted may not be of a high quality.

### **A trust-based approach is applied to the collection and use of supporting information**

Whilst there was evidence that most applicants in the qualitative research trusted the supporting information process, there were differences between successful and

unsuccessful applicants. Successful applicants felt that a trust-based approach had been applied to both the collection and use of their supporting information. They reported that they felt Social Security Scotland staff trusted them and the information they provided them with about their conditions or disability. Individuals also said that Social Security Scotland did not question any aspects of the application and did not ask for any further information.<sup>1</sup> Furthermore, individuals said that staff were sympathetic and understanding to their situation.



Successful CDP  
applicant

They are not these big bad [people] sitting in ivory towers. They trust both ways – they look at your info and they are agreeing with you.

On the other hand, unsuccessful applicants were more likely to indicate that they did not know if they or their supporting information had been trusted.

The way in which the Case Managers who took part in the qualitative research spoke about their approach to decision-making indicated they were starting from a position of trust. However, they highlighted difficulties they faced in trying to achieve a balance between starting from a position of trust, considering all the information provided in the application form and the supporting information available, and identifying any areas where they need clarification in order to make a decision.



Operations  
Manager

I think [staff] are aware of [position of trust] and always try and adopt that sort of attitude when they are dealing with the clients, but sometimes something just doesn't look right and it might need a bit of further investigation.

Case Managers were clear that they are not looking for everything in an application to be supported by supporting information, just enough to be able to justify a decision to their Decision Team Manager or other staff who quality assured the decision. This was contrasted with the approach under DWP, where staff said that they used to require all the information in the application to have some sort of corroboration, whether from the supporting information or a physical assessment. Staff commented that, where supporting information supports one thing in the application form, then other information is usually supported too.

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<sup>1</sup> Although it should be noted that 53% of survey respondents did receive a call from Social Security Scotland to ask for further information or to clarify something





ADP Case  
Manager

Most of the time the application can help support itself, you just need that supporting information to confirm at least one thing or to support one thing and then you can go to everything else.

Senior staff have played a role in reminding Case Managers of this trust-based approach. There was a suggestion that it is not always easy, in practice, for staff to take a position of trust. This is because there is a tension between requiring supporting information to support the decision-making process, and trusting the individual where information has not been 'confirmed' by another party.



CDP Decision  
Team Manager

...whilst we do try and, you know, to trust everything that the client is saying, I think sometimes there is such an urge to make sure that we get that supporting information, I don't know if that is a bit of a disconnect between fully trusting the client if you are then saying we need all this information from a professional before we can even progress things.

When staff felt unsure about decisions in this regard, they would have a discussion with senior colleagues and refer to decision-making guidance. Decision Team Managers explained that, as Case Managers gained experience, they felt more confident in their decision-making.

In general, staff spoke positively about starting from a position of trust and felt it was in keeping with the overall approach of Social Security Scotland. That said, discussions around trust raised concerns among some staff who took part over what amount of supporting information they do need in order to award, particularly when it comes to supporting information from an individual's wider support network.



ADP Case  
Manager

...sometimes I would feel uncomfortable about giving someone points for something that has not been confirmed, like giving out money that they could potentially just be lying about, I think you need to be careful about that as well.

This concern was mentioned by participating staff at all levels, and more so among those working on ADP applications. Again, staff were aware that words such as ‘proof’ and ‘evidence’ were not deemed as appropriate language, but these words were still used by some:



ADP Decision  
Team Manager

...it is taxpayers’ money that we are awarding people, there needs to be some...it’s like folk are afraid to say words like ‘proof’. You know, ‘where is the proof?’

The staff who made these points felt there is a contrast, or even a contradiction, between trusting applicants while also requiring supporting information from them, again highlighting the difficulties staff face when having to make a real decision in practice about someone’s level of need and therefore entitlement to award. This tension is perhaps something which could be addressed directly in staff training on supporting information.

### **Experience of the supporting information process is in line with dignity, fairness, and respect**

When survey respondents were asked how they felt they were treated throughout the application process, 85% either agreed or strongly agreed that they had been treated fairly and respectfully. Again, it should be borne in mind that the majority of respondents were successful in their applications. One of the key reasons to applicants thinking that they had been treated fairly was because of their application being successful. Indeed, of those who agreed with their decision, 92% said they were treated fairly and respectfully, compared to 44% of those who did not agree with their decision.

Interviewed applicants who had previous experience with the DWP compared their experiences and highlighted some of the positive impacts going through the supporting information process with Social Security Scotland had had on them. They indicated that their experience of the supporting information process was in line with dignity, fairness, and respect. This was highlighted through their belief that Social Security Scotland staff took a more person-centred approach with them, and that staff tried to understand the individual and their needs more.

However, interviewed unsuccessful applicants were less likely to feel that they had been treated fairly or with dignity and respect. This was evident from how they felt their application and supporting information were considered, and their interactions with Social Security Scotland. Specifically, when they spoke about their contact with Social Security Scotland staff they said, even though they were respectful, they were unhelpful because they ultimately did not receive an award. They were also more likely to have mixed feelings about whether their supporting information had been considered fairly, and to feel frustrated by the whole process.

## Supporting information is used to make a fair and transparent decision

In interviews, successful applicants felt their supporting information had been considered fairly. Whilst being successful in their award was clearly a contributing factor, applicants also commented on the clarity and transparency of information provided to them in the decision-making letters which helped them to understand why they had been given the award.



Successful ADP  
applicant

Well, obviously since they gave me the money, I'm going to say I think they're great. No, on the whole obviously I got the award letter which says in detail what they have considered for each point in awarding points I think and I thought that it was professionally done and I think they did a good job and I think, yes, I mean thumbs up to them. [...] Had I been unsuccessful for the award my opinion might have been different.

Survey data revealed that 62% of unsuccessful respondents disagreed or strongly disagreed that it was clear why their application had been unsuccessful. This did not speak to the clarity of the decision letter specifically, so it is unclear whether this disagreement was due to lack of clarity on the decision letter or lack of clarity more generally.

In interviews, some unsuccessful applicants wondered if they had been unfairly disadvantaged due to the type of supporting information they submitted i.e., that from someone from their wider support network as opposed to that from a professional. Furthermore, interview data showed that applicants felt strongly that equal consideration should not be given to different types of supporting information because individuals' wider support network such as family and friends have a "vested interest" in the outcome. However, there were mixed views on this, where others thought that the concept of equal consideration supports fair decision-making.

Furthermore, survey data indicates no differences in success rates between those who supplied a diagnosis and those who supplied supporting information from another person who knows them/their child. Specifically, 93% of survey respondents who reported only supplying supporting information from another person who knows them/ their child, were successful in obtaining an award, and 89% who only supplied supporting information which contained their diagnosis reported they were successful.

## Individuals feel less stress and/or anxiety about the supporting information process

As noted earlier, overall, satisfaction with the supporting information process was very high amongst successful applicants interviewed for this research. Satisfaction

with the process was highest among those who were able to submit supporting information at the start of their application, or after a phone call with a Case Manager to clarify what to upload. Those who had more contact with Social Security Scotland, for example, because they wanted them to obtain supporting information for them, felt things could have happened more quickly or efficiently.

The main source of applicant dissatisfaction in the qualitative research was the length of time taken for Social Security Scotland to obtain supporting information on their behalf. This caused applicant dissatisfaction and was also the biggest source of frustration for staff.

Survey data revealed that clarity of the supporting information process was high amongst those who submitted supporting information with their application (see page 25). However, of those who did not supply supporting information with their application, 14% said this was because they found the supporting information process too stressful and 9% said they found the process too difficult. This suggests that some applicants may find this process more difficult than others. This is explored more in the section starting on page 40.

### **Other outcomes requiring prioritisation: Individuals are empowered to provide their own supporting information**

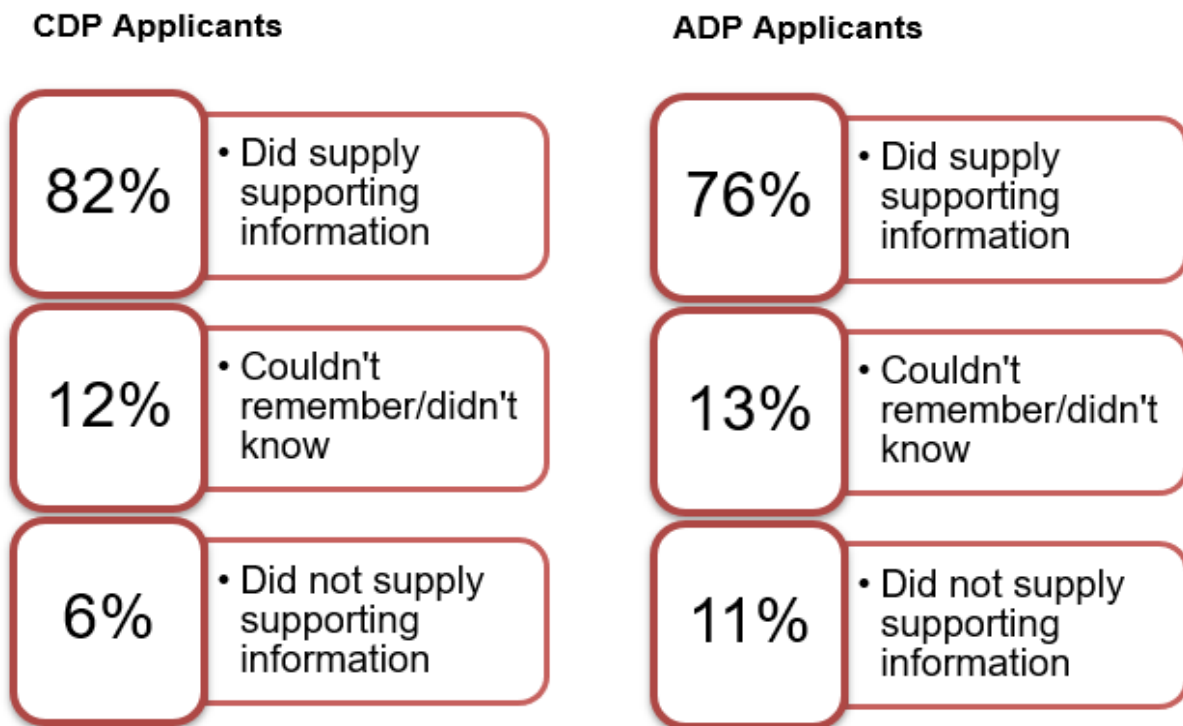
Evidence points to the benefits of individuals providing supporting information themselves, where possible. Indeed, one of the barriers (see also Figure 7), highlights a lack of awareness of this.

Furthermore, the previous section highlights that the main source of individual dissatisfaction and Social Security Scotland staff frustration is the length of time taken for Social Security Scotland staff to obtain supporting information on an individual's behalf and, consequently, for a decision to be made. One of the main causes for this is case managers taking on the task of collecting supporting information on individuals' behalf. Individuals supplying supporting information themselves will therefore speed up the processing of their application, and reduce staff frustration and individual dissatisfaction.

This section will explore key differences between those who supplied supporting information and those who did not, highlighting further the overall importance and benefits to supplying it.

Figure 2 shows the proportions of CDP and ADP survey respondents who reported supplying supporting information with their application, who did not know/couldn't remember if they had supplied it, and who did not supply it with their application. Though the majority of respondents did report that they had supplied supporting information with their application, just over one in ten (13%) of the overall sample responded that they couldn't remember or didn't know. This potentially suggests some misunderstanding around what supporting information is.

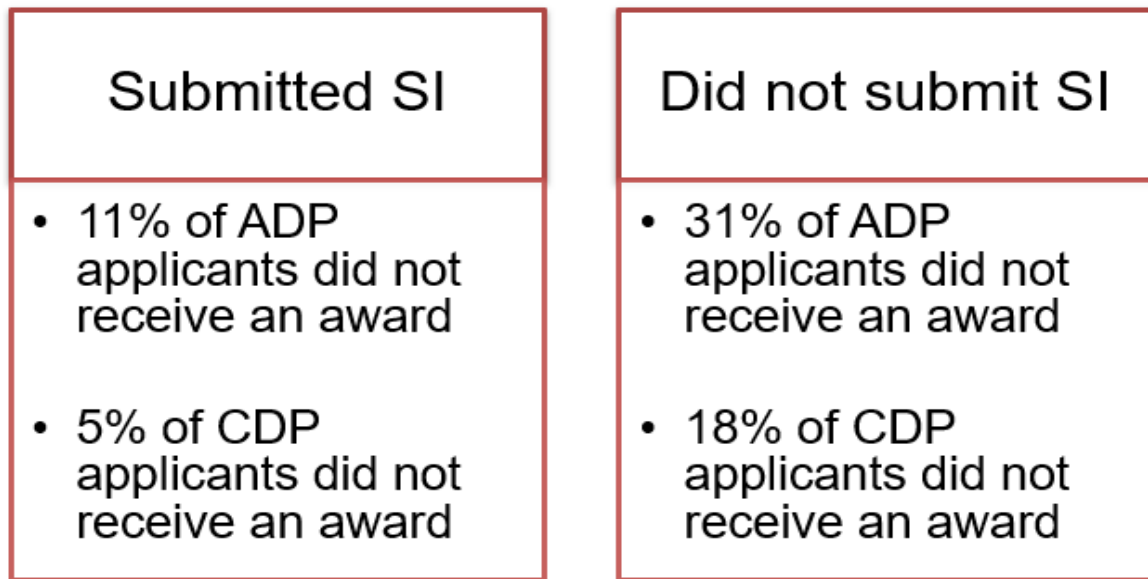
**Figure 2** Proportions of CDP and ADP applicants who supplied/did not supply/ couldn't remember if they supplied supporting information with their application.



**Source:** Client Survey Data

Figure 3 shows that there were large differences between those who obtained an award and those who did not, depending on whether they submitted supporting information with their application. Specifically, only 11% and 5% of ADP and CDP applicants respectively, who supplied supporting information with their application, did not receive an award. However, 31% and 18% of ADP and CDP applicants respectively, who did not supply supporting information, did not receive an award.

**Figure 3** Successfulness of ADP and CDP applicants who submitted vs. did not submit supporting information in obtaining an award.



Source: Client Survey Data

These proportions do not take into account those who subsequently provided supporting information, and so the proportion who provided no supporting information and who received an award will likely be lower. This further increases the importance of providing supporting information, where possible and highlights the need to clearly communicate that discretion to make an award in the absence of supporting information is limited to cases where good cause can be established.

### **Progress towards medium-term anticipated outcomes**

The medium-term outcomes of the supporting information policy commitments are:

- High quality applications (i.e., including all relevant detail and supporting information) enable a determination to be made quickly and correctly.
- Individuals trust in the application and review process.
- Individuals feel less stress and/or anxiety about the application and review process.
- Values of dignity, fairness and respect are embedded.
- Decision-making is transparent and fair.
- Individuals experience positive contact with case managers, where relevant.

**High-quality applications enable a determination to be made quickly and correctly**

As discussed on page [23](#), levels of understanding about what supporting information was most useful were mixed. Social Security Scotland staff also highlighted a view that applicants were not always sure what supporting information to provide.



CDP Case  
Manager

I think they just don't know what it means... and you've called them to say... I'm just looking to know what support it is that you need [around supporting information]. "I just didn't know what to send" ...and then they are like, right, okay, I can get that, I just wasn't sure what was actually meant by it. I feel as if they don't have a proper understanding of what is actually meant by supporting information and I think this is why we get so many cases that don't have any on it.

As discussed in other sections of this report, the qualitative research highlighted misunderstandings that applicants have around the supporting information process.

Though this evidence speaks to the supporting information aspect of the application specifically, and not the application process as a whole, issues with supporting information will likely impact on the overall ease and efficiency of the decision-making process.

In line with these findings, over half of survey respondents (55%) reported receiving a call from Social Security Scotland to ask for more information or to clarify something after submitting their application, impacting on decision-making and processing times. Of those who had been contacted:

- 44% had been contacted to clarify information from their application,
- 38% had been contacted to submit more supporting information,
- 10% had been contacted to ask for authorisation to contact a professional to collect supporting information,
- 6% had been contacted to clarify contact details for a professional to collect supporting information, and
- 2% had been contacted to ask if they need help sourcing supporting information.

These proportions similarly highlight the need for further clarification of guidance provided on the application form.

## Individuals trust in the application and review process

As noted earlier, successful applicants interviewed for this research tended to feel that Social Security Scotland trusted them and their supporting information. This was largely because they did not ask for any more information and their overall approach was sympathetic and understanding.

This position of trust individuals felt from Social Security Scotland staff was also contrasted with their experience with their experience of applying for benefits administered by DWP.



Successful ADP  
applicant

I think that is the fundamental difference between the system here and the system in the rest of the UK as I understand it. Up here fundamentally their policy is ‘we believe you’. We still need corroboration, but we are not going to set out and disprove, you know, if you say you can walk 20 metres, we're not going to go ha-ha, you walked 21, you know.

The challenges that staff reported in balancing a position of trust with ensuring that the amount of supporting information an applicant has provided is enough for them to make a decision of entitlement was discussed in more detail in the section starting on page [27](#). The evaluation did not find evidence regarding how this may have impacted on individuals’ trust in the application process. Further, long-term research is needed to establish this.

Trust in the application process can also be measured by whether individuals felt that they would be able to apply for other benefits delivered by Social Security Scotland in the future. Overall, successful applicants tended to say they were now more likely to apply for benefits in the future. An applicant, with experience of DWP, suggested they would only apply if the benefit was being administered by Social Security Scotland:



Successful CDP  
applicant

If it's Social Security Scotland I would apply – whereas previously DLA – I wasn't prepared to put myself through it [again].

Applicants can ask Social Security Scotland to obtain supporting information from professionals on their behalf<sup>2</sup>. This is done by ticking the relevant box and providing

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<sup>2</sup> Although not possible at the time of the research, applicants can also now ask Social Security Scotland to gather information from their wider support network.



contact details for the relevant professional on the application form. Nearly half of client survey respondents (49%) said they did not ask, just over a third (34%) said they did ask and 17% were not sure whether they asked Social Security Scotland staff to collect supporting information on their behalf. Of those that did not ask, less than 1%<sup>3</sup> said that the reason for not doing so was because they did not trust Social Security Scotland.

### **Individuals feel less stress and/or anxiety about the application and review process**

A positive experience of supplying supporting information and making an application can help individuals feel less worried overall. In the qualitative research, successful applicants reported that they were now more likely to apply for benefits in the future. One reason was they now have more confidence to apply given that they have successfully applied once. This increase in confidence suggests that these applicants feel less stress and/or anxiety about application processes more generally. This response comes from an applicant who had applied for a Blue Badge following their successful CDP application:



Successful CDP applicant

I feel so much more confident in applying for things. I feel like Social Security Scotland have got my back. I feel like they agree with me and they support me. You can feel like you're not deserving of these things.

Another indicator of less anxiety over the application process comes from applicants with previous experience of applying for benefits through DWP. These individuals, and even those who had not applied to the DWP before, reported they had the general expectation that applying for any benefit would be difficult and therefore stressful. However, they were pleasantly surprised when going through the ADP or CDP application process.

However, there was some evidence around applicants' lack of awareness and understanding of supporting information that may have inadvertently led to more stress and/or anxiety about the application process. For example, not knowing what supporting information to provide, and a lack of awareness that Social Security Scotland can gather supporting information on applicants' behalf. This latter point may have been particularly useful for those who had more difficulty providing supporting information.

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<sup>3</sup> Those who answered "no" to supplying supporting information with their application were not asked whether they had requested Social Security Scotland to gather information on their behalf because of a routing error. Therefore, 49% is likely to be an underreporting of the overall proportion of respondents who would have reported not asking Social Security Scotland to gather information on their behalf.

In addition, unsuccessful clients interviewed for this research were less likely to be positive about the application process, reporting it as difficult and onerous.

### **Values of dignity, fairness and respect are embedded**

Survey findings revealed that 88% felt that they had been treated with respect, 88% felt that they had been treated with dignity, and 85% felt that they had been treated fairly, since receiving a decision on their award. Note that this time period may not have captured individuals' application experiences since many applications had been made prior to September 1 2022.

However, when examining this data by successfulness in obtaining an award, there are clear differences. Successful survey respondents were more likely than unsuccessful survey respondents to report they had been treated with dignity (94% vs. 50%), fairness (94% vs. 30%), and respect (95% vs. 51%).

During interviews with Social Security Scotland staff, they spoke about a number of ways in which they demonstrated the values of dignity, fairness, and respect in their approach. This suggests that they are embedded within the Social Security Scotland approach. These ways included:

- staff describing their role. Staff emphasised their role as supporting those who met the eligibility criteria. They contrasted this with being a “gatekeeper” to an award or an “investigator” of someone’s entitlement to receive an award,
- speaking about applicants. Staff referred to applicants in a respectful way that demonstrated they were starting from a position of trust,
- speaking to applicants. During interviews, staff gave examples of how they would approach the topic of needing further supporting information when they reached out to applicants after they had submitted their application. Staff described how they sensitively worded conversations to gauge whether applicants were happy and able to provide supporting information themselves or whether they preferred staff do it for them, and
- describing the role of and value of different types of supporting information, including that from an individual’s wider support network. It was clear that this was in line with the policy commitment that supporting information only needs to broadly support an application rather than confirm each detail.

However, staff tended to put more weight on supporting information from a medical professional such as a GP which could lead to them considering different types of supporting information differently.

## **Decision-making is transparent and fair**

In interviews, some applicants said that one of the key purposes of supporting information was to allow Social Security Scotland staff to make a fair decision on their application.

90% of CDP survey respondents [ADP applicant data was not available] either agreed or strongly agreed that they understood the decision made on their application and 88% agreed or strongly agreed that the decision had been explained clearly.

However, as stated in the Section: Supporting information is used to make a fair and transparent decision, when asking unsuccessful applicants only, 62% disagreed or strongly disagreed that it was clear why their application had been unsuccessful. Furthermore, 43% of those who had received a no award decision took some further action about this decision, indicating that they did not agree with the decision, and likely did not think that it was fair.

## **Individuals experience positive contact with case managers, where relevant**

Interview data gathered feedback from applicants who had contact with Social Security Scotland, for example, if case managers made a phone call to them after they submitted their application to ask about supporting information. As also described in the Section: Individuals know how to access supporting information guidance and support, these applicants described case managers as being “really helpful”, “understanding”, “approachable”, “patient”, and “compassionate”.

Although some applicants felt that the supporting information process could have progressed more quickly and efficiently, they still described staff as helpful on the phone. In addition, whilst unsuccessful applicants interviewed for this research tended to be less positive, some did describe the interaction as being positive or neutral. Many of the client survey questions ask applicants to report on their contact with Social Security Scotland since receiving a decision on their application and therefore is limited in what it can reveal about interactions in relation to the supporting information process specifically.

However, of those who received a call from Social Security Scotland after submitting their application to ask for more information or to clarify something:

- 93% agreed or strongly agreed that the person they spoke to listened to them,
- 91% agreed or strongly agreed that it was clear why Social Security Scotland contacted them,
- 88% agreed or strongly agreed that they felt comfortable sharing their information,
- 85% agreed or strongly agreed that they trusted the person they spoke to, and

- 80% agreed or strongly agreed that it was clear what was going to happen next.

As described in other sections of this report, the positive contact that applicants described they had with Social Security Scotland led some individuals to say they would be more likely to make contact with Social Security Scotland in the future.

### **Other outcomes requiring prioritisation: Modes of, and barriers to, supplying supporting information**

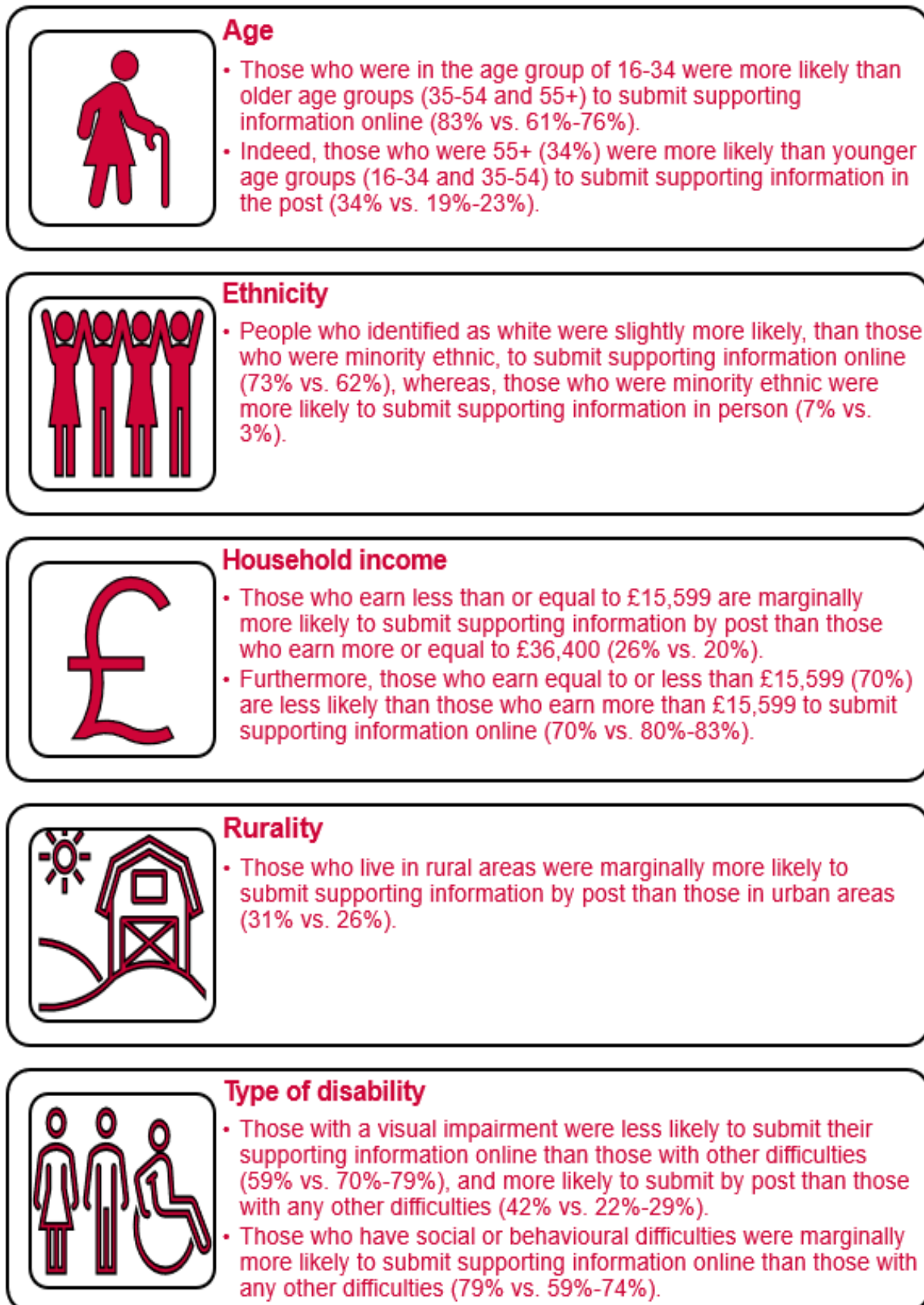
As discussed in the Section: Other outcomes requiring prioritisation: Individuals are empowered to provide their own supporting information, there is a need for clearly communicating to clients and those supporting them during the application process that, while Social Security Scotland can gather supporting information on people's behalf, supplying supporting information with their application, where possible, may speed up the decision-making process. This could mitigate against both staff frustration and applicant dissatisfaction.

This section will explore the differences in how different groups of people supplied supporting information and where they obtained their supporting information from. It will also highlight some of the facilitators and barriers faced in obtaining supporting information.

Survey data allows for the exploration of differences across groups in terms of: i) how they provided supporting information (Figure 4) (ii) the type of document submitted as supporting information; and (iii) from where they sourced that supporting information (Figure 5 and Figure 6). Overall, these data do not provide an insight into particular barriers people face. However, they do highlight that supporting information is supplied in different ways, forms, and from a variety of sources, highlighting potentially varying needs across different groups of people.

Figure 4 highlights that those who are older, live in rural areas, on lower income, and have visual impairment difficulties were more likely to supply supporting information by post. Whereas, those who were younger, from a white ethnic background, earn more, and have social or behavioural difficulties were more likely to supply supporting information online.

**Figure 4** Differences across groups in submitting supporting information online, in person, or via post.



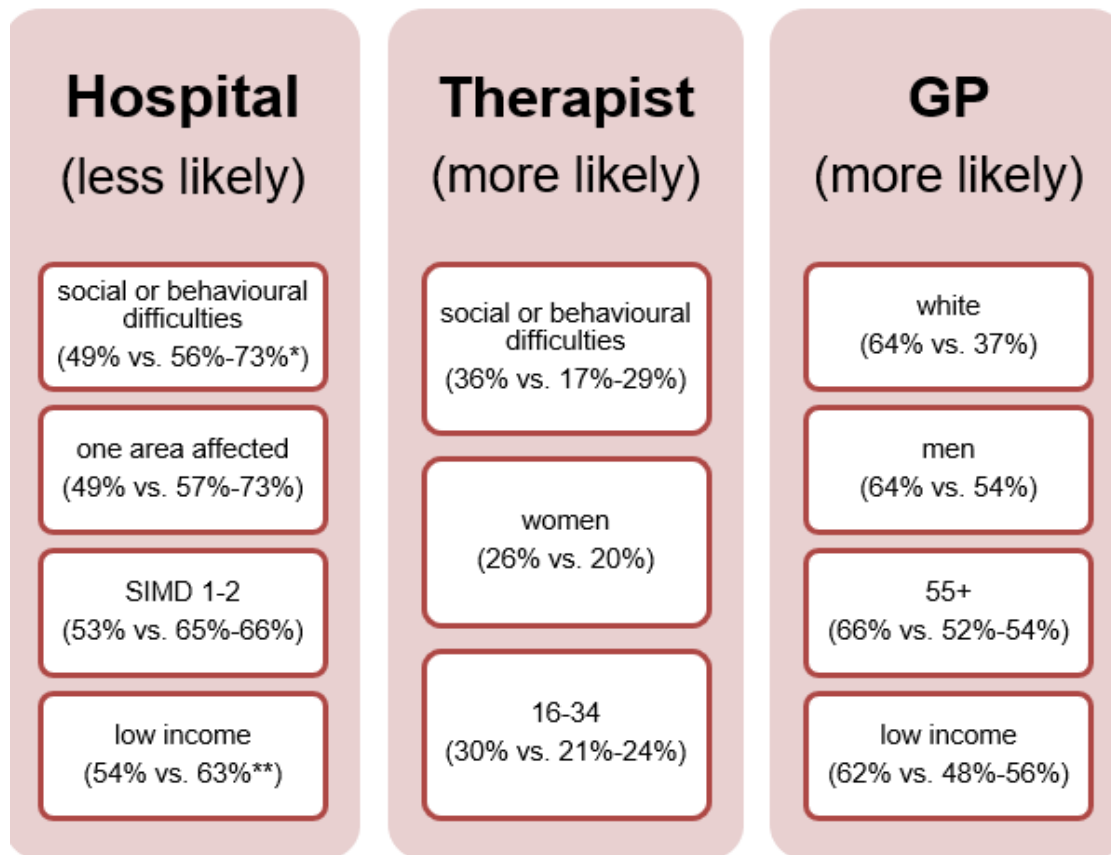
Source: Client Survey Data

There were differences across groups in being more or less likely to supply different documents as supporting information:

- Those with mental health difficulties were less likely (65%) to submit confirmation of diagnosis than those with all other difficulties (70%-78%).
- Those with social or behavioural difficulties (22%) and with mental health difficulties (25%) were less likely to submit test results than those with any other difficulties (30%-47%).
- Those with visual impairments were more likely (47%) to submit test results than any other groups (22%-36%) except from those with hearing difficulties (42%).
- Those with one area affected are less likely (19%) to submit test results than those with more than one area affected (25%-45%), and less likely (50%) to submit medical or social work reports (56%-63%).

Figure 5 highlights the key differences found in where different groups were more or less likely to obtain their supporting information from. Specifically, those with social or behavioural difficulties, one area affected, live in a lower SIMD area, and who are on a lower income are less likely to supply supporting information from a hospital. Those with social or behavioural difficulties, women, and who are younger were more likely to supply supporting information from a therapist. Those who are from a white ethnic background, men, who are older, and who are on a low income were more likely to supply supporting information from a GP.

**Figure 5** Differences across groups in obtaining supporting information from different sources



\*Excluding those with mental health difficulties (52%)

\*\*Excluding those in the middle-income group (£15,600 – £36,399; 58%)

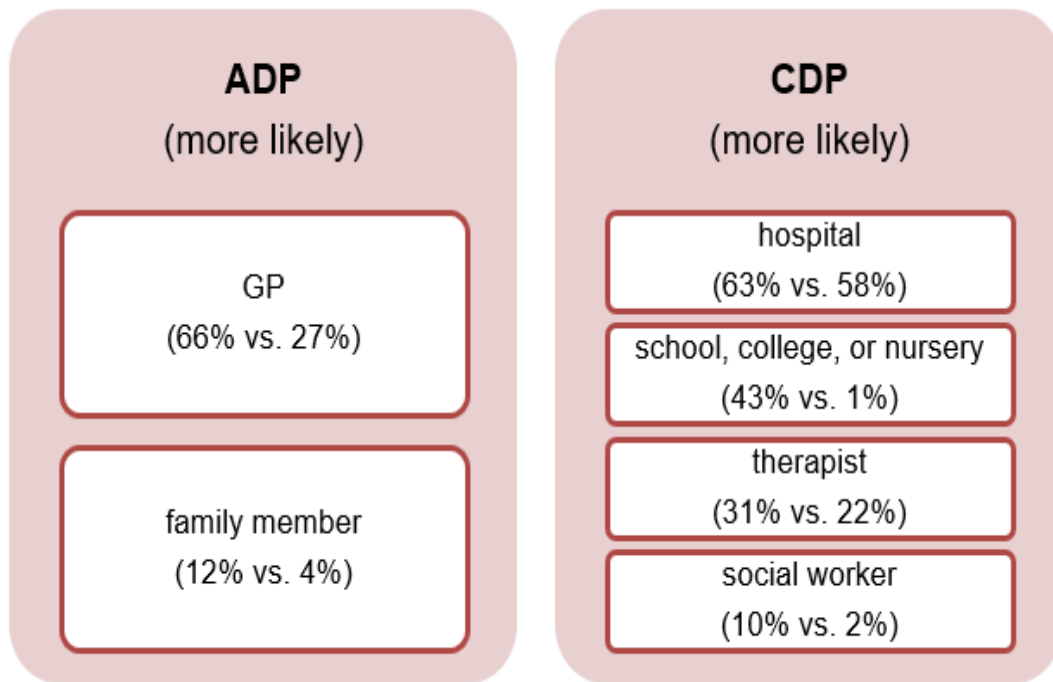
**Source: Client Survey Data**

Other findings:

- Those from minority ethnic groups more likely to obtain supporting information from a hospital (72% vs. 58%), and from a school, college or nursery (24% vs. 10%).
- Women were more likely to obtain supporting information from a school, college or nursery (14% vs 3%).
- Those in SIMD Quintiles 1 or 2, were less to obtain supporting information from a therapist, such as an occupational or physiotherapist (22% vs. 27%-33%).

Figure 6 shows key differences across ADP and CDP survey respondents in where they obtained their supporting information from. Specifically, the figure shows that ADP applicants were more likely to obtain supporting information from a GP or family member. CDP applicants were more likely to obtain it from a hospital, school setting, therapist, or social worker.

**Figure 6** Differences between ADP and CDP applicants in obtaining supporting information from different places.

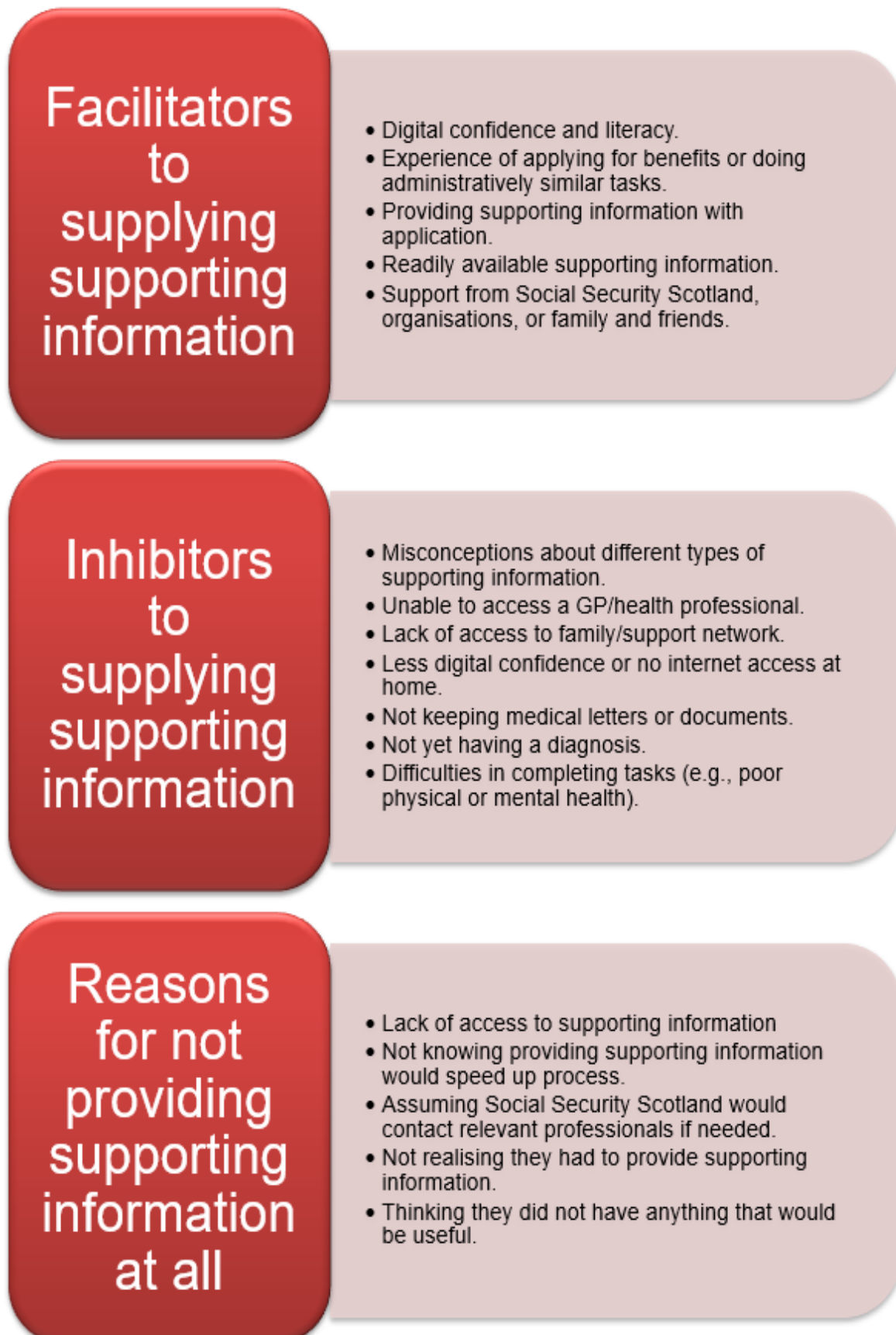


**Source: Client Survey Data**

From interviews, it was clear that some groups of people found the process of supplying information easier than other groups. See Figure 7 for factors that facilitated and inhibited individuals to supply supporting information as well as factors that stopped them from doing so all together. Specifically, the figure shows that access and skills required to submit supporting information were key facilitators to supplying supporting information. Whereas, a lack of understanding about and access to supporting information were key barriers. So too were having a disability or specific condition that makes the completion of tasks more difficult.



**Figure 7** Facilitators and inhibitors to providing supporting information as well as reasons for not providing it at all.



Source: Qualitative Interview Research

Many of the barriers to supplying supporting information come from a lack of understanding or misconceptions about supporting information, suggesting again the need for better communication about the different types of useful supporting information and about the benefits of supplying supporting information immediately with an application.

Third Sector staff and Social Security Scotland local delivery staff also highlighted other groups who were more likely to struggle with providing supporting information and/or understanding what is required:

- people with severe mental health difficulties
- people with addictions
- people with difficulties completing tasks
- the Gypsy/Traveller community and some religious communities
- homeless people
- prison leavers
- people with little or no English or low levels of literacy more broadly
- people who do not access the healthcare



Local delivery  
staff member

He had such a small [social] circle. He had extreme paranoia and was so anxious, he doesn't like leaving the house at all. Doesn't go and see a GP because he has distrust in them... The only person he's got is his mother but he doesn't tell her the true extent of his mental health problems... He really did have nothing to provide in terms of supporting information.

## Progress towards long-term anticipated outcomes

The long-term outcomes of the supporting information policy commitments are:

- More determinations made without the need for a consultation (only applicable to ADP).
- Individuals have no worries about the application or review process.
- Individuals trust in Social Security Scotland.
- No barriers to applying for disability benefits.
- Public services treat people with dignity and respect.
- The right decision is made first time.

As explained in the section starting on page [19](#), changes to support the implementation of the supporting information policy will play an important role in contributing towards these long-term outcomes. However, it will not play an exclusive role. For example, continuous improvement, other changes, and policies relevant to the delivery of disability benefits will also have an impact. In this section, evidence currently available relating to these long-term outcomes is presented.

### **More determinations made without the need for a consultation (only applicable to ADP)**

Overall, 22% of ADP survey respondents reported that they have had a consultation, 65% said they had not had one, and 13% reported that they didn't know or couldn't remember if they had had one. This highlights that the majority of determinations were made without the need for a consultation.<sup>4</sup>

In interviews, ADP applicants acknowledged and appreciated the role of supporting information in minimising the need for a consultation. Applicants said that they much preferred this approach in comparison to the DWP one which they felt emphasised the need for a physical assessment.



Successful ADP  
applicant

Well, I thought it was great. I mean the fact that it kind of replaces the idea of going for a physical assessment which, you know, I would have done if you wanted me to, I mean I'm not saying that I wouldn't have passed it, of course I would, but just the lack of hassle the fact that you can just take your time and get together information that you think supports your case and send it off to them and hopefully they agree it supports your case, so I thought it was very good.

This suggests that applicants agree and support the concept behind supporting information, that is, if supporting information adequately supports the case then there is no need for a consultation.

### **Individuals have no worries about the application or review process**

All applicants interviewed for this research typically expected the application process to be stressful. For some, the application process was experienced as the exact opposite.

Whilst a positive experience of the application process and submitting supporting information can challenge applicants' previous experiences and expectations, it will take time and other factors outside improvements to the supporting information

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<sup>4</sup> There are no official statistics on the number of consultations. However, it is likely that there are different interpretations of the term 'consultations' by survey respondents (e.g., informal call)

process to reduce the overall worry individuals have about the application process. Improvements to applicants' understanding of supporting information should also help to reduce concern about the application process as a whole.

There is a clear need to improve applicants' understanding of supporting information and some of the policy commitments that could lead to reduced worry over the application process as a whole. However, as benefits are a significant source of financial security for so many, it will be difficult to eradicate all worry related to the application or review process. This report provides insight into the role that supporting information plays in reducing this worry.

### Individuals trust in Social Security Scotland

Regarding survey respondents' overall experience following receipt of a decision on their application, 80% agreed or strongly agreed that they could trust Social Security Scotland, 16% neither agreed or disagreed and 5% disagreed or strongly disagreed. However, when looking across successfulness in obtaining an award, the proportions are largely different (see Figure 8). The figure highlights that those who were successful in obtaining an award were much more likely to agree that they trusted Social Security Scotland (87% vs. 34% respectively).

**Figure 8** Differences in trusting Social Security Scotland by successfulness in obtaining an award.

<b>For those who were successful in obtaining an award</b>	<b>For those who were unsuccessful in obtaining an award</b>
<ul style="list-style-type: none"><li>• 87% agreed or strongly agreed they can trust Social Security Scotland</li><li>• 12% neither agreed nor disagreed</li><li>• 1% disagreed or strongly disagreed</li></ul>	<ul style="list-style-type: none"><li>• 34% agreed or strongly agreed they can trust Social Security Scotland</li><li>• 38% neither agreed nor disagreed</li><li>• 28% disagreed or strongly disagreed</li></ul>

Source: Client Survey Data

Successful applicants' willingness to contact Social Security Scotland in the future regarding their benefit or when applying for a benefit suggests a level of trust. This willingness came from the positive contact that applicants felt that they had with Case Managers with regard to supporting information. Specifically, they described staff as being very helpful. Though the same willingness was not felt by unsuccessful applicants.

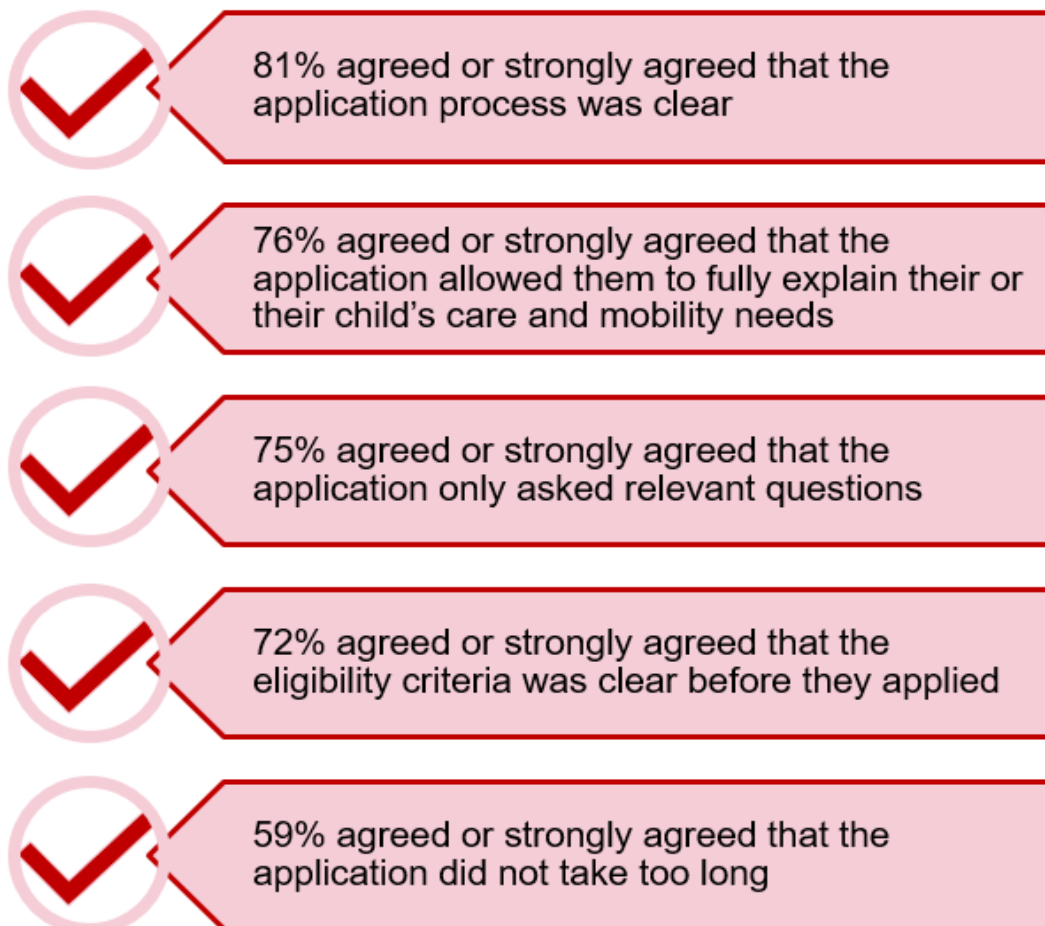
## No barriers to applying for disability benefits

Other sections of this report describe barriers in relation to the supporting information process specifically. This section focuses on data relating to the application process more generally.

The majority of survey respondents agreed or strongly agreed that the application process was clear (81%), asked only relevant questions (75%), allowed them to fully explain their or their child's needs (76%), and that the eligibility criteria was clear before they applied (72%). Figures were similar when disaggregated by ADP and CDP applicants.

However, regarding the application process more specifically, a lower proportion agreed or strongly agreed that the application process did not take too long (59%). As above, figures were similar for ADP and CDP applicants.

**Figure 9** Proportions who agreed or strongly agreed on the ease of the supporting information and application processes.



Source: Client Survey Data

## Public services treat people with dignity and respect

Neither interviewed applicants nor survey respondents were asked about how they think public services treated them more broadly. Nonetheless, interview and survey data can show how applicants' experiences of the supporting information and application process can contribute in some way to this broader outcome.

The sections starting on pages [30](#) and [38](#) demonstrated that the way Social Security Scotland staff spoke about applicants and how they treated them contributes to public services treating people with dignity and respect. It also highlighted how successful applicants also echoed this sentiment.

Key factors identified here were:

- 88% of survey respondents felt that they had been treated with respect and dignity.
- Staff demonstrated how they spoke sensitively with applicants when contacting them to ask for or clarify something regarding their supporting information.
- Staff demonstrated a clear understanding of supporting information including the different types and their respective roles.
- Applicants describing staff as “really helpful”, “understanding”, “approachable”, “patient”, and “compassionate” when they reached out to them.

However, these sections also highlighted that the perception of being treated with dignity, fairness, and respect was linked to whether applicants agreed with the decision made in their application and whether they were successful in obtaining an award. Furthermore, staff bias towards supporting information from medical professionals could result in differences in how they consider supporting information. Key factors identified here were:

- 92% who agreed with their decision said they were treated fairly and respectfully, compared to 44% of those who did not agree with their decision.
- Unsuccessful applicants were more likely to have mixed feelings about whether their supporting information had been considered fairly and feel that staff were unhelpful.
- Staff tend to put more weight towards supporting information from medical professionals such as GPs.

### **The right decision is made first time**

Overall, 85% of survey respondents agreed or strongly agreed with the decision made on their application. Though this does not necessarily mean that the right decision was made the first time in practice. Indeed, there is likely the need to look across other data sources over the longer term to establish this.

Successful interviewed applicants were more likely to believe that the right decision had been made on their application. They said that the reason for this was because they were offered an award to which they believed they were entitled. However, unsuccessful applicants were less likely to believe that the right decision had been made first time because they also felt that they deserved an award.

# Conclusions

## Summary of findings for anticipated outcomes

The theory of change guiding the evaluation was outlined in the Methodology. This approach involved identifying the policy commitments underpinning supporting information as well as the short, medium, and long-term anticipated outcomes that the Scottish Government and Social Security Scotland hope to achieve if the policy commitments are implemented as intended.

Overall, findings suggest the policy commitments are aligned with the anticipated outcomes. However, in order to ensure the commitments are a means to obtaining these outcomes, the implementation of them in practice (such as, communication of the policy, understanding, application, existing processes) needs to be improved. In this regard, the following sections highlight what works well and what needs to be improved upon for the outcomes to be achieved. The last section describes recommendations for policy in order to ensure that the commitments are a means to achieving the anticipated outcomes.

## Findings for the short-term outcomes

Highlighting the importance of supplying supporting information, client survey data suggests that those who submit supporting information with their application are more likely to obtain an award.

The findings show that **individuals do not fully know how to access supporting information guidance and support**. Understandably, the guidance on the application form is the most utilised form of guidance, however, there is a lot less awareness of the other forms of guidance available. The most utilised form of support is that from friends and family, followed by that from Social Security Scotland. However, awareness of support offered by Social Security Scotland and other organisations was mixed. Furthermore, organisations exhibited some misunderstandings around supporting information themselves.

**There was mixed evidence around whether clients understand what supporting information is most useful.** Some interviewed applicants thought the guidance was helpful and others thought it could provide more clarity. Though, most survey respondents agreed that it was clear what information they should supply, interview data provided a more complex picture. A number of misconceptions about supporting information were highlighted, for example, not knowing that supporting information can be from their wider support network or that large amounts of documentation as supporting information are not necessarily needed.

The **quality** of the supporting information provided by applicants was mixed. This was evident from interviews with applicants and staff as well as survey findings showing over half of applicants were recontacted after submitting their application to ask for further information or to clarify something. This seemed to be



underpinned by the uncertainty of knowing what to provide but also providing contradictory or partial information as well as partial or blurry documents.

Overall, evidence suggested **the process of supplying supporting information was simple and straightforward**. Most survey respondents said it was easy and clear. Interviewed applicants said that the online system for uploading documents and the ability for case managers to gather information on their behalf helped to simplify the process and mitigate stress and anxiety. Indeed, the main reason individuals asked Social Security Scotland to gather information on their behalf was because they thought that they would obtain the information faster than them.

At the same time, interviewed applicants and staff did acknowledge that the process of case managers gathering supporting information on behalf of individuals can take a long time which consequently impacts on the time taken to make a decision as well as to process an application. Indeed, the **main cause of applicant dissatisfaction was the length of time it takes for Social Security Scotland to gather information on their behalf**.

One potential way to **reduce individual dissatisfaction and staff frustration related to processing times is by enabling individuals to supply supporting information themselves, where possible**.

Interview and survey data point towards applicants agreeing that **a trust-based approach had been applied to the collection and use of their supporting information**. However, unsuccessful applicants in interviews were less certain whether a trust-based approach had been taken, suggesting that whether individuals received an award contributed to their feelings of trust towards Social Security Scotland.

In line with this, the biggest impact on interviewed applicants' perceptions of whether their **supporting information had been considered fairly** was whether they had received an award. Furthermore, survey respondents were more likely to agree they had been treated fairly and respectfully throughout the application process if they agreed with the decision.

Survey and interview data support that **applicants' experience of the supporting information process is in line with dignity, fairness, and respect**. Interview applicants also felt that Social Security Scotland staff took a person-centred approach and listened to them and staff themselves saw their role as helping those who are eligible receive an award, rather than an "investigator" or "gatekeeper".

However, staff reported challenges and practices which were not fully aligned with policy. Specifically, staff spoke of **the difficulty that Social Security Scotland face in balancing taking a trust-based approach** where not all information has been 'confirmed' by another party. Senior staff advised that when confidence increased, this became less of a problem. Furthermore, despite staff being aware of the different types of supporting information, there was a bias towards supporting

information from professionals and, particularly that from medical professionals. These issues may impact staff's approach in practice.

### Findings for the medium-term outcomes

Evidence suggests that the supporting information being supplied is **not always of good quality and might negatively impact the speed of decision-making**. Over half of survey respondents received a call from Social Security Scotland after they had submitted their application to, for example, clarify information from their application or to ask them to submit (more) supporting information.

In interviews, successful applicants felt that Social Security Scotland trusted them and the information provided, leading to them **trusting in the supporting information process**. This position was contrasted favourably with relevant applicants' experiences with the DWP. A main reason for this was because staff did not ask for any more supporting information for their application. Successful applicants also said they were more likely to apply for other benefits delivered by Social Security Scotland in the future.

Interviewed applicants with previous DWP experience indicated that the application process with Social Security Scotland **was less difficult and stressful**, and said that they felt **more confident** applying for future Social Security Scotland benefits now that they have gone through the process. However, a lack of knowledge about what supporting information is most useful and that Social Security Scotland can gather information on their behalf, could potentially lead to more stress and anxiety about the application process more generally.

The way in which Social Security Scotland staff understand their role, supporting information, and handle their interactions with applicants, suggests that the **values of dignity, fairness, and respect are embedded**. Both survey respondents and interviewed applicants also agreed that their experience was in line with dignity, fairness, and respect. However, unsuccessful survey respondents were less likely to agree with this.

Staff tended to put more weight towards supporting information from a medical professional such as a GP which could impact on the supporting information process.

Some applicants felt that a key purpose of supporting information was to allow **Social Security Scotland staff to make a fair decision on their application**. The majority of successful survey respondents agreed that they understood the decision made on their application and that it had been explained clearly. However, the majority of unsuccessful survey respondents disagreed that it was clear, and nearly half of them took further action.

Survey and interview data showed that those who had **contact via a phone call with Social Security Scotland staff indicated that this was extremely positive**, with interviewed applicants describing staff as "approachable" and "helpful" and agreeing that they felt listened to. The majority of survey respondents also agreed

that it was clear why Social Security Scotland staff contacted them, they felt comfortable sharing their information, they trusted the person they spoke to, and they knew what was going to happen next. However, interviewed applicants also said that despite the positive contact, the application process could have progressed more quickly and efficiently than it did, likely impacting on their overall experience.

As highlighted throughout this report, the process of case managers gathering information on individuals' behalf has likely led to increases in application processing times. This highlights **the importance of encouraging individuals to supply supporting information themselves, where possible**. However, interview data showed that it was clear that some factors made supplying supporting information easier, some made it more difficult, and some made it impossible.

The evidence also showed that there are **differences in the experience of supplying supporting information between groups**, for example, those reporting one versus multiple areas affected, those within different age groups, and those from lower income households. This suggests the need for **continued flexibility** in process of supplying supporting information.

Interviews with applicants also highlighted that having access to and the skills required to submit supporting information seem to be key facilitators in enabling individuals to supply supporting information. Whereas, a lack of understanding about and access to supporting information were key barriers. So too were having a disability or specific condition that makes the completion of tasks more difficult.

Local delivery and third sector staff also identified other groups of people who may struggle to provide supporting information. This included:

- People with severe mental health difficulties
- People with addictions
- The Gypsy/Traveller community
- Some religious communities (particularly where women might be less likely to access a GP)
- Homeless people
- Prison leavers
- People with little or no English
- People with low levels of literacy

## Findings for the long-term outcomes

Survey data suggested **that the majority of applicants received a determination without a consultation**. Interviewed ADP applicants were positive about the role of supporting information in replacing the need for a consultation.

All applicants interviewed for this research typically **expected the application process to be stressful**. However, many reported that their experience was the exact opposite and said that now they have gone through it, they feel less worried about it. Nevertheless, it is likely that all worries regarding applying for benefits will never be completely eradicated given that they offer financial security for so many. The aim is therefore to **reduce any undue stress or worry about** applying for benefits delivered by Social Security Scotland.

Survey data provided evidence for **individuals trusting Social Security Scotland**. The majority of survey respondents agreed that **they trusted** Social Security Scotland. However, those who were successful in obtaining an award were more likely to say they trusted Social Security Scotland than those who were unsuccessful. Successful interviewed applicants were also willing to contact Social Security Scotland in the future, indicating a level of trust. However, the same willingness was not felt by unsuccessful applicants.

Regarding **barriers to applying for disability benefits**, the majority of survey respondents agreed that the eligibility criteria and application process were clear, and that the application was relevant and allowed them to fully explain their/their child's needs. However, markedly less agreed that the application process did not take too long.

Survey and interview data showed that successful applicants did agree that the **right decision was made first time on their application**. However, when speaking to only unsuccessful applicants, they were less likely to agree that the right decision had been made first time.

## Key recommendations for policy and practice

### Key recommendations identified from the cross-cutting themes

- Ensure decision letters are as transparent as possible in communicating the reasons for the decision made.
- Further staff training on the usefulness of different types of supporting information from professionals as well as the wider support network.
- Better communication of the concept of equal consideration (formerly equal weight) to individuals.
- Clarification that staff will establish importance of different pieces of supporting information on a case by case basis, depending on the relevance of the pieces at hand.

- Take steps to increase staff confidence in making decisions without all aspects of the application being 'confirmed' by supporting information.
- Further clarify supporting information guidance on the application form.
- Raise awareness of other types of guidance available and ensure these are in line with that provided on the application form.
- Raise awareness of the different types of support available and how to access these.
- Raise client awareness of the different types of supporting information and what might be most useful in different situations/circumstances.
- Encourage individuals to check that supporting information is in line with information on application form.
- Showcase examples of "good quality" supporting information to individuals to increase understanding.
- Raise awareness of the benefits of individuals supplying supporting information themselves and incorporate this in external messaging.
- However, continue to implement and raise awareness of the policy of gathering supporting information on individuals' behalf for those who are not able to supply supporting information themselves.

### **Additional key recommendations identified from policy commitments and anticipated outcomes**

- Ensure support organisations are sufficiently trained and kept up to date on current policy on supporting information.
- Increase accessibility to Social Security Scotland staff to offer support to individuals when they need it.
- Better communication of policy message that supporting information only needs to broadly support application or review.
- Staff training to help them process cases with varying amounts and types of supporting information.
- Awareness-raising on this policy that mostly, one piece of supporting information is sought from a professional for both individuals and staff.
- Clear communications to individuals and staff that a professional does not necessarily mean a GP.
- Clarification and support so individuals are empowered to request supporting information from not just medical professionals but also their

wider support network if they feel that it captures the impact of their condition or disability on their every-day life.

# Annexes

## Annex A - Glossary of staff roles

Within Social Security Scotland:

**Case Manager** – responsible for reviewing application forms and supporting information in order to make the right decision on ADP and CDP cases. Their role involves supporting applicants to provide supporting information and obtaining it on behalf of applicants. They are also responsible for making the final decision on award entitlement.

**Decision Team Manager** – managing and supporting a team of Case Managers. Responsible for Quality Assurance checks on decisions.

**Operations Manager** – Senior member of staff, responsible for operations across a large team delivering either ADP or CDP.

**Local Delivery Staff** – works in a Local Delivery hub and supports applicants by phone, video and face-to-face to apply for disability benefits. They may visit applicants at home or meet them in a community setting. They usually type the applicant's answers to questions into the online application form and can scan and upload supporting information for them.

**Practitioner** – a medical or social care professional who provides advice and information, for example on symptoms of a specific condition, to Social Security Scotland colleagues to support decision making. Practitioners do not make entitlement decisions.

Within support organisations:

**Advisor** – provides support and advice to members of the public applying for benefits. This can include completing ADP and CDP applications and/or uploading supporting information on an applicant's behalf.

## Annex B – Qualitative report

(uploaded as a separate document here: [Qualitative research into how supporting information is used in the context of disability benefits in Scotland](#))

## Annex C – Tables from Client Survey Analyses

**Table S1** Did you get any help or support to complete your application?

	Frequency	Proportion
Yes	1044	38%
No	1684	62%

<b>Total</b>	2728
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**Table S2** Who gave you support to complete your application? (Select all that apply)

	Frequency	Proportion
<b>Friends or family</b>	424	41%
<b>Social Security Scotland</b>	347	33%
<b>Citizens Advice Scotland</b>	112	11%
<b>Welfare rights (for example, your local council)</b>	73	7%
<b>Money help (for example, Money Advice Service)</b>	31	3%
<b>Housing support</b>	11	1%
<b>Health services</b>	79	8%
<b>Advocacy services</b>	29	3%
<b>Total Responses to Question</b>	1042	

**Table S3** How much do you agree or disagree with the following? : It was easy to get support from Social Security Scotland to complete your application

Responses	Frequency	Proportion
<b>Strongly agree or Agree</b>	326	94%
<b>Neither agree nor disagree</b>	14	4%
<b>Disagree or Strongly disagree</b>	6	2%
<b>Total</b>	346	

**Table S4** Thinking about your experience of including Supporting Information, how much do you agree or disagree that



	<b>Strongly agree/ agree</b>	<b>Neither disagree/ agree</b>	<b>Strongly disagree/ disagree</b>	<b>Totals</b>
<b>It was clear what information I should supply</b>	1796 (80%)	300 (13%)	137 (6%)	2233
<b>It was easy to get the Supporting Information I wanted</b>	1571 (71%)	382 (17%)	255 (12%)	2208
<b>It was clear how to include the Supporting Information</b>	1874 (84%)	244 (11%)	102 (5%)	2220
<b>It was easy to provide Supporting Information</b>	1745 (78%)	310 (14%)	171 (8%)	2226

**Table S5** Why did Social Security Scotland call you after you had submitted your application?

		<b>Frequency</b>	<b>Proportion</b>
<b>To ask for more supporting information</b>	No	881	63%
	Yes	529	38%
	Total	1410	

**Table S6** Why did you provide the supporting information that you did?

		<b>Frequency</b>	<b>Proportion</b>
<b>I wanted to provide other information but could not get it</b>	0	2082	94%
	1	133	6%
	Total	2215	

**Table S7** Thinking about your experience with Social Security Scotland since 1 September 2022...How much do you agree or disagree with the following statements?

	<b>Strongly agree or agree</b>	<b>Neither agree nor disagree</b>	<b>Strongly disagree or disagree</b>	<b>Totals</b>
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<b>Social Security Scotland treated me with dignity</b>	2562 (88%)	253 (9%)	87 (3%)	2902
<b>Social Security Scotland treated me fairly</b>	2471 (85%)	259 (9%)	165 (6%)	2895
<b>Social Security Scotland treated me with respect</b>	2573 (88%)	242 (8%)	93 (3%)	2908

**Table S8** Crosstab showing type of supporting information provided broken down by successfulness in receiving an award

	<b>Award</b>	<b>No Award</b>	<b>Totals</b>
<b>Confirmation of diagnosis</b>	1264 (92%)	118 (9%)	1382
<b>Test results</b>	479 (93%)	39 (8%)	518
<b>Medical or social work reports</b>	1073 (92%)	90 (8%)	1163
<b>Care plans</b>	146 (97%)	5 (3%)	151
<b>Information from another person who knows you/your child</b>	442 (93%)	31 (7%)	473
<b>Total</b>	1857	189	

**Table S9** Thinking about receiving the no award decision on your application, how much do you agree or disagree that it was clear why your application had been unsuccessful?

<b>Responses</b>	<b>Frequency and proportion</b>
<b>Strongly agree or Agree</b>	50 (19%)
<b>Neither agree nor disagree</b>	53 (20%)
<b>Disagree or Strongly disagree</b>	163 (61%)
<b>Total</b>	266

**Table S9** After you had submitted your application for CDP/ADP, did you receive a call from Social Security Scotland to ask for more information or to clarify something?

	<b>CDP applicants</b>	<b>ADP applicants</b>	<b>Both ADP and CDP applicants</b>
<b>Yes</b>	275 (48%)	1137 (57%)	1412 (55%)

<b>No</b>	293 (52%)	872 (43%)	1165 (45%)
<b>Total</b>	568	2009	2577

**Table S10.** Thinking about when you received the call from Social Security Scotland, how much do you agree or disagree with...?

		Frequency and proportion
<b>It was clear what was going to happen next</b>	Strongly agree or Agree	1107 (81%)
	Neither agree nor disagree	161 (12%)
	Disagree or Strongly disagree	106 (8%)
	<b>Total</b>	1374

**Table S11** Thinking about your experience with Social Security Scotland since 1 September 2022...: How much do you agree or disagree with the following statements?

	Agree or strongly agree	Neither agree nor disagree	Disagree or strongly disagree	Total
<b>Social Security Scotland treated me with dignity</b>	2562 (88%)	253 (9%)	87 (3%)	2902
<b>Social Security Scotland treated me fairly</b>	2471 (85%)	159 (9%)	165 (6%)	2895
<b>Social Security Scotland treated me with respect</b>	2573 (88%)	242 (8%)	93 (3%)	2908

**Table S12** Thinking about when you made your application for CDP/ADP, how much do you agree or disagree with the following?: I was treated fairly and respectfully throughout the application process

	CDP applicants	ADP applicants	Both ADP and CDP applicants
<b>Agree or strongly agree</b>	518 (83%)	1857 (86%)	2375 (85%)
<b>Neither agree nor disagree</b>	75 (12%)	195 (9%)	270 (10%)
<b>Disagree or strongly disagree</b>	31 (5%)	121 (6%)	152 (5%)
<b>Total</b>	624	2173	2797

**Table S13** Thinking about the decision made on your application for Child Disability Payment since 1 September 2022...

	<b>Strongly agree or agree</b>	<b>Neither agree or disagree</b>	<b>Strongly disagree or disagree</b>	<b>Total</b>
<b>It was explained clearly</b>	507 (88%)	41 (7%)	26 (5%)	574
<b>I understood the decision</b>	517 (90%)	31 (5%)	24 (4%)	572

**Table S14** After any of your unsuccessful applications, did you... (select all that apply)?

	<b>Frequency and proportion</b>	
<b>Take no further action</b>	0	125 (43%)
	1	165 (57%)
<b>Total</b>		290

**Table S15** Crosstab showing those who received an award vs. those who did not, broken down by the type of supporting information they submitted in their application.

	<b>Received an award?</b>		<b>Total</b>
	<b>Yes</b>	<b>No</b>	
<b>Supplied “Confirmation of diagnosis” only</b>	305 (89%)	39 (11%)	344
<b>Supplied “Information from another person who knows you / your child” only</b>	92 (93%)	7 (7%)	99

**Table S16** Thinking about your contact with Social Security Scotland staff since 1 September 2022, how much do you agree or disagree with the following?:

	<b>Strongly agree or agree</b>	<b>Neither agree nor disagree</b>	<b>Strongly disagree or disagree</b>	<b>Totals</b>
<b>I was treated with kindness</b>	1716 (94%)	81 (4%)	30 (2%)	1827
<b>I felt trusted</b>	1553 (87%)	152 (8%)	87 (5%)	1792
<b>I trusted staff</b>	1586 (87%)	157 (9%)	76 (4%)	1819

<b>Staff listened to me</b>	1631 (90%)	103 (6%)	88 (5%)	1822
<b>Staff made me feel comfortable</b>	1622 (90%)	127 (7%)	64 (4%)	1813
<b>Staff were able to help me</b>	1540 (85%)	136 (7%)	140 (8%)	1816

**Table S17** Thinking about when you received the call from Social Security Scotland, how much do you agree or disagree with the following?

	<b>Strongly agree or agree</b>	<b>Neither agree nor disagree</b>	<b>Strongly disagree or disagree</b>	<b>Totals</b>
<b>It was clear why Social Security Scotland called me</b>	1269 (91%)	76 (5%)	44 (3%)	1389
<b>The person I spoke to listened to me</b>	1264 (93%)	50 (4%)	48 (4%)	1362
<b>I trusted the person I spoke to</b>	1177 (85%)	151 (11%)	54 (4%)	1382
<b>I felt comfortable sharing my information</b>	1222 (88%)	114 (8%)	47 (3%)	1383
<b>It was clear what was going to happen next</b>	1107 (81%)	161 (12%)	106 (8%)	1374

**Table S18** Thinking about when you made your application for CDP/ADP, how much do you agree or disagree with the following? The eligibility criteria was clear before you applied.

	<b>CDP applicants</b>	<b>ADP applicants</b>	<b>Both ADP and CDP applicants</b>
<b>Agree or strongly agree</b>	455 (72%)	1552 (72%)	2007 (72%)
<b>Neither agree nor disagree</b>	100 (16%)	359 (17%)	459 (16%)
<b>Disagree or strongly disagree</b>	75 (12%)	257 (12%)	332 (12%)
<b>Total</b>	630	2168	2798

**Table S19** Thinking about when you made your application for CDP/ADP, how much do you agree or disagree with the following?: The application process enabled you to fully explain your / your child's care and mobility needs

	CDP applicants	ADP applicants	Both ADP and CDP applicants
<b>Agree or strongly agree</b>	507 (81%)	1632 (75%)	2139 (76%)
<b>Neither agree nor disagree</b>	60 (10%)	250 (11%)	310 (11%)
<b>Disagree or strongly disagree</b>	63 (10%)	301 (14%)	364 (13%)
<b>Total</b>	630	2183	2814

**Table S20** Did you ask Social Security Scotland to collect any Supporting Information on your behalf?

	Frequency and proportion
<b>Yes - when I first applied</b>	478 (22%)
<b>Yes - when Social Security Scotland contacted me to ask for further information</b>	115 (5%)
<b>Yes - both when I first applied and when Social Security Scotland contacted me</b>	145 (7%)
<b>No</b>	1074 (49%)
<b>Can't remember / don't know</b>	400 (18%)
<b>Total</b>	2212

**Table S21** Thinking about your experience with Social Security Scotland since 1 September 2022...: I feel I can trust Social Security Scotland

Frequency and proportion	
Strongly agree or Agree	2298 (80%)
Neither agree nor disagree	454 (16%)
Disagree or Strongly disagree	136 (5%)
<b>Total</b>	<b>2888</b>

**Table S22** Did you agree with the decision made on your application for CDP/ADP since 1 September 2022?

	CDP applicants	ADP applicants	Both ADP and CDP applicants
Agreed with decision	514 (87%)	1802 (84%)	2316 (85%)
Did not agree with decision	77 (13%)	344 (16%)	15%
<b>Total</b>	<b>591</b>	<b>2146</b>	<b>2737</b>

**Table S23** Crosstab showing those who provided supporting information, broken down by type of disability.

Type of disability	Frequency and proportion	Total
Vision (for example blindness or partial sight)	106 (86%)	123
Hearing (for example deafness or partial hearing)	126 (91%)	138
Mobility (for example walking short distances or climbing stairs)	1101 (90%)	1230
Dexterity (for example lifting or carrying objects, using a keyboard)	532 (90%)	589
Learning or understanding or concentrating	458 (88%)	522
Mental health	901 (88%)	1029
Memory	479 (90%)	534
Stamina or breathing or fatigue	734 (89%)	828

<b>Socially or behaviourally (for example associated with Autism, attention deficit disorder or Aspergers' syndrome)</b>	240 (90%)	267
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**Table S24** Crosstab showing those who provided supporting information, broken down by number of areas affected

Number of areas affected	Frequency and proportion	Total
1	251 (85%)	297
2-3	659 (89%)	742
4-6	501 (90%)	557
7-9	57 (86%)	66

**Table S25** Crosstab showing whether individual provided supporting information, broken down by whether they received an award

	CDP		ADP	
	Supplied SI	Did not supply SI	Supplied SI	Did not supply SI
<b>Received an award</b>	442 (95%)	28 (82%)	1416 (89%)	143 (69%)
<b>Did not receive an award</b>	25 (5%)	6 (18%)	167 (11%)	63 (31%)
<b>Totals</b>	467	34	1583	206

**Table S26** Crosstab for how SI was submitted by gender, age, and ethnicity

		Online	Post	In person	Totals
<b>Gender</b>	<b>Man</b>	435 (70%)	167 (27%)	36 (6%)	623
	<b>Woman</b>	1108 (74%)	383 (25%)	39 (3%)	1510
<b>Age</b>	<b>16-34</b>	325 (83%)	74 (19%)	10 (3%)	390
	<b>35-54</b>	827 (76%)	254 (23%)	32 (3%)	1092



	<b>55+</b>	401 (61%)	223 (34%)	33 (5%)	656
<b>Ethnicity</b>	<b>White</b>	1495 (73%)	521 (25%)	70 (3%)	2050
	<b>Minority Ethnic</b>	42 (62%)	19 (28%)	5 (7%)	68

**Table S27** Crosstab for how SI was submitted by SIMD Quintile, Rurality, and Household Income

		<b>Online</b>	<b>Post</b>	<b>In person</b>	<b>Totals</b>
<b>SIMD Quintile</b>	<b>1-2</b>	347 (70%)	234 (27%)	36 (4%)	793
	<b>3</b>	94 (74%)	94 (29%)	8 (3%)	326
	<b>4-5</b>	126 (73%)	126 (26%)	17 (3%)	493
<b>Rurality</b>	<b>Urban</b>	1049 (72%)	379 (26%)	55 (4%)	1466
	<b>Rural</b>	191 (72%)	81 (31%)	6 (2%)	264
<b>Household income</b>	<b>£15,599-</b>	414 (70%)	154 (26%)	21 (4%)	589
	<b>£15,600 – £36,399</b>	345 (80%)	97 (22%)	19 (5%)	434
	<b>£36,400+</b>	166 (83%)	39 (20%)	1 (1%)	199

**Table S28** Crosstab for how SI was submitted by type of disability

	<b>Online</b>	<b>Post</b>	<b>In person</b>	<b>Totals</b>
Vision (e.g., blindness or partial sight)	63 (59%)	45 (42%)	8 (8%)	107
Hearing (e.g., deafness or partial hearing)	94 (71%)	32 (24%)	6 (5%)	132

Mobility (e.g., walking short distances or climbing stairs)	801 (71%)	300 (27%)	49 (4%)	1122
Dexterity (e.g., lifting or carrying objects, using a keyboard)	382 (70%)	152 (28%)	28 (5%)	544
Learning or understanding or concentrating	348 (72%)	141 (29%)	20 (4%)	487
Mental Health	747 (74%)	247 (25%)	37 (4%)	1007
Memory	362 (73%)	138 (28%)	13 (3%)	499
Socially or behaviourally (for example associated with Autism, attention deficit disorder or Aspergers' syndrome)	208 (79%)	58 (22%)	13 (3%)	265
Breathing, fatigue, stamina	522 (71%)	213 (29%)	28 (4%)	737

**Table S29** Crosstab for how SI was submitted by number of areas affected

	Online	Post	In person	Totals
<b>1</b>	232 (76%)	67 (22%)	8 (3%)	304
<b>2-3</b>	492 (71%)	178 (26%)	29 (4%)	691
<b>4-6</b>	377 (73%)	142 (27%)	19 (4%)	517
<b>7-9</b>	41 (68%)	18 (30%)	3 (1%)	60

**Table S30** Crosstab for type of SI submitted by type of disability

	<b>Confirmation of diagnosis</b>	<b>Test results</b>	<b>Medical or social work reports</b>	<b>Care plans</b>	<b>Information from another person who knows you/ your child</b>	<b>Totals</b>
<b>Vision (e.g., blindness or partial sight)</b>	81 (78%)	50 (47%)	73 (68%)	6 (7%)	30 (28%)	107
<b>Hearing (e.g., deafness or partial hearing)</b>	101 (77%)	55 (42%)	80 (61%)	12 (9%)	29 (22%)	132
<b>Mobility (e.g., walking short distances or climbing stairs)</b>	781 (70%)	336 (30%)	640 (57%)	55 (5%)	218 (20%)	1119
<b>Dexterity (e.g., lifting or carrying objects, using a keyboard)</b>	398 (73%)	198 (36%)	337 (62%)	25 (5%)	124 (23%)	544
<b>Learning or understanding or concentrating</b>	345 (71%)	152 (31%)	297 (61%)	31 (6%)	134 (28%)	486
<b>Mental Health</b>	651 (65%)	253 (25%)	603 (60%)	66 (7%)	241 (24%)	1004
<b>Memory</b>	351 (70%)	153 (31%)	308 (62%)	29 (6%)	122 (24%)	497
<b>Socially or behaviourally (for example associated with Autism, attention</b>	208 (71%)	57 (22%)	167 (63%)	29 (9%)	72 (27%)	265

deficit disorder  
or Aspergers'  
syndrome)

<b>Breathing, fatigue, stamina</b>	527 (72%)	242 (33%)	429 (58%)	31 (4%)	163 (22%)	736
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**Table S31** Crosstab for type of SI submitted by number of areas affected

	Confirmation of diagnosis	Test results	Medical or social work reports	Care Plans	Information from another person who knows you/ your child	Totals
<b>1</b>	194 (64%)	59 (19%)	151 (50%)	13 (4%)	57 (19%)	305
<b>2-3</b>	464 (67%)	171 (25%)	385 (56%)	31 (5%)	131 (19%)	689
<b>4-6</b>	364 (71%)	169 (33%)	327 (63%)	32 (6%)	130 (25%)	516
<b>7-9</b>	48 (80%)	27 (45%)	36 (60%)	5 (8%)	17 (28%)	60

**Table S32** Crosstab for where obtained SI by type of disability: Part 1

	Vision	Hearing	Mobility	Dexterity	Learning or understanding or concentrating
<b>A hospital (including from doctors, consultants or nurses)</b>	71 (66%)	96 (73%)	708 (63%)	365 (67%)	270 (56%)

<b>A GP</b>	73 (68%)	90 (69%)	752 (67%)	361 (67%)	305 (63%)
<b>A social worker</b>	2 (2%)	3 (2%)	21 (2%)	12 (2%)	16 (3%)
<b>A therapist (including occupational or physiotherapists)</b>	18 (17%)	37 (28%)	243 (22%)	136 (25%)	142 (29%)
<b>School, College or Nursery</b>	3 (3%)	3 (2%)	24 (2%)	13 (2%)	26 (5%)
<b>A support worker</b>	2 (2%)	5 (4%)	44 (4%)	22 (4%)	32 (7%)
<b>A family member</b>	17 (16%)	19 (15%)	130 (12%)	72 (13%)	87 (18%)
<b>A friend or neighbour</b>	5 (5%)	6 (5%)	32 (3%)	21 (4%)	31 (6%)
<b>An unpaid carer or childminder</b>	3 (3%)	3 (3%)	12 (1%)	8 (2%)	8 (2%)
<b>A volunteer from a group or activity that you go to</b>	2 (2%)	2 (2%)	12 (1%)	8 (2%)	8 (2%)
<b>Totals</b>	107	131	1118	543	484

**Table S33** Crosstab for where obtained SI by type of disability: Part 2

	<b>Mental Health</b>	<b>Memory</b>	<b>Social or Behavioural</b>	<b>Breathing, fatigue, stamina</b>
<b>A hospital (including from doctors, consultants or nurses)</b>	518 (52%)	281 (57%)	131 (49%)	465 (63%)
<b>A GP</b>	664 (66%)	323 (65%)	159 (60%)	485 (66%)

<b>A social worker</b>	33 (3%)	14 (3%)	15 (6%)	10 (1%)
<b>A therapist (including occupational or physiotherapists)</b>	264 (26%)	135 (27%)	94 (36%)	157 (21%)
<b>School, College or Nursery</b>	65 (6%)	21 (4%)	18 (7%)	17 (2%)
<b>A support worker</b>	67 (7%)	28 (6%)	24 (9%)	31 (4%)
<b>A family member</b>	132 (13%)	79 (16%)	44 (17%)	97 (13%)
<b>A friend or neighbour</b>	45 (5%)	23 (5%)	10 (4%)	31 (4%)
<b>An unpaid carer or childminder</b>	10 (1%)	7 (1%)	2 (1%)	10 (1%)
<b>A volunteer from a group or activity that you go to</b>	15 (2%)	5 (1%)	2 (1%)	9 (1%)
<b>Totals</b>	1006	497	265	734

**Table S34** Crosstab for where obtained SI from by CDP or ADP.

	<b>CDP</b>	<b>ADP</b>
<b>A hospital (including from doctors, consultants or nurses)</b>	337 (63%)	969 (58%)
<b>A GP</b>	142 (27%)	1112 (66%)
<b>A social worker</b>	55 (10%)	26 (2%)
<b>A therapist (including occupational therapists or physiotherapists)</b>	164 (31%)	366 (22%)
<b>School, College or Nursery</b>	225 (43%)	12 (1%)
<b>A support worker</b>	50 (9%)	59 (4%)
<b>A family member</b>	22 (4%)	208 (12%)
<b>A friend or neighbour</b>	8 (2%)	53 (3%)

<b>An unpaid carer or childminder</b>	4 (1%)	16 (1%)
<b>A volunteer from a group or activity that you go to</b>	5 (1%)	16 (1%)
<b>Totals</b>	532	1683

**Table S35** Crosstab for where obtained SI from by number of areas affected

	<b>1 area affected</b>	<b>2-3 areas affected</b>	<b>4-6 areas affected</b>	<b>7-9 areas affected</b>
<b>A hospital (including from doctors, consultants or nurses)</b>	148 (49%)	396 (57%)	307 (60%)	43 (73%)
<b>A GP</b>	179 (59%)	440 (64%)	347 (67%)	39 (66%)
<b>A social worker</b>	7 (2%)	15 (2%)	16 (3%)	1 (2%)
<b>A therapist (including occupational or physiotherapists)</b>	57 (19%)	130 (19%)	156 (30%)	14 (24%)
<b>School, College or Nursery</b>	26 (9%)	32 (5%)	18 (4%)	-
<b>A support worker</b>	14 (5%)	21 (3%)	38 (7%)	-
<b>A family member</b>	29 (10%)	76 (11%)	73 (15%)	13 (22%)
<b>A friend or neighbour</b>	6 (2%)	15 (2%)	25 (5%)	5 (9%)
<b>An unpaid carer or childminder</b>	2 (1%)	7 (1%)	7 (1%)	1 (2%)
<b>A volunteer from a group or activity that you go to</b>	1 (-%)	6 (1%)	9 (2%)	-
<b>Totals</b>	304	690	516	59

**Table S36** Crosstab for where SI was obtained from by gender, age, and ethnicity

	Gender		Age			Ethnicity	
	Man	Woman	16-34	35-54	55+	White	Minority Ethnic
<b>A hospital (including from doctors, consultants or nurses)</b>	379 (61%)	876 (58%)	213 (55%)	463 (58%)	412 (63%)	1192 (58%)	48 (72%*)
<b>A GP</b>	398 (64%)	809 (54%)	209 (54%)	571 (52%)	428 (66%)	1175 (64%)	25 (37%*)
<b>A social worker</b>	21 (4%)	58 (4%)	18 (5%)	52 (5%)	7 (1%)	70 (3%)	8 (12%*)
<b>A therapist (including occupational or physiotherapists)</b>	125 (20%)	386 (26%)	118 (30%)	264 (24%)	225 (21%)	491 (24%)	17 (25%*)
<b>School, College or Nursery</b>	20 (3%)	205 (14%)	63 (16%)	162 (15%)	7 (1%)	211 (10%)	16 (24%*)
<b>A support worker</b>	30 (5%)	75 (5%)	31 (8%)	61 (6%)	15 (2%)	98 (5%)	8 (12%*)
<b>A family member</b>	58 (9%)	163 (11%)	52 (13%)	103 (9%)	70 (11%)	216 (11%)	7 (11%*)
<b>A friend or neighbour</b>	19 (3%)	42 (3%)	8 (2%)	37 (3%)	14 (6%)	59 (3%)	-
<b>An unpaid carer or childminder</b>	8 (1%)	12 (1%)	2 (1%)	14 (1%)	4 (1%)	18 (1%)	-
<b>A volunteer from a group or activity that you go to</b>	5 (1%)	14 (1%)	4 (1%)	15 (1%)	2 (-%)	18 (1%)	2 (3%)
<b>Totals</b>	623	1507	391	1092	452	2048	67

\* This group has a very small number, n = 67

**Table S37** Crosstab for where SI was obtained from, broken down by SIMD, rurality, and household income

	SIMD Quintile			Rurality		Household income		
	1-2	3	4-5	Urban	Rural	£15,599-	£15,600 - £36,399	£36,400+
<b>A hospital (including from doctors, consultants or nurses)</b>	470 (53%)	211 (65%)	328 (66%)	857 (59%)	167 (63%)	315 (54%)	255 (58%)	126 (63%)



<b>A GP</b>	521 (59%)	179 (55%)	262 (69%)	832 (57%)	149 (56%)	362 (62%)	243 (56%)	96 (48%)
<b>A social worker</b>	28 (3%)	18 (6%)	22 (4%)	52 (4%)	17 (6%)	28 (5%)	16 (4%)	13 (7%)
<b>A therapist (including occupational or physiotherapists)</b>	194 (22%)	89 (27%)	127 (33%)	350 (24%)	64 (24%)	133 (23%)	126 (29%)	45 (23%)
<b>School, College or Nursery</b>	91 (10%)	33 (10%)	51 (10%)	154 (11%)	24 (9%)	64 (11%)	51 (12%)	36 (18%)
<b>A support worker</b>	54 (6%)	18 (6%)	16 (3%)	84 (6%)	5 (2%)	45 (8%)	19 (4%)	6 (3%)
<b>A family member</b>	81 (9%)	40 (12%)	46 (9%)	146 (10%)	25 (9%)	49 (7%)	45 (10%)	23 (12%)
<b>A friend or neighbour</b>	24 (3%)	6 (2%)	14 (3%)	39 (3%)	5 (2%)	26 (4%)	9 (2%)	4 (2%)
<b>An unpaid carer or childminder</b>	8 (1%)	6 (2%)	4 (1%)	16 (1%)	2 (1%)	8 (1%)	5 (1%)	2 (3%)
<b>A volunteer from a group or activity that you go to</b>	12 (1%)	4 (1%)	3 (1%)	16 (1%)	3 (1%)	8 (1%)	3 (1%)	1 (1%)
<b>Totals</b>	883	325	494	1465	265	588	436	199

**Table S38** Crosstab for ease and clarity of supporting information process by type of disability

	Agree/strongly agree				Totals
	It was clear what information I should supply	It was easy to get the supporting information I wanted	It was clear how to include the supporting information	It was easy to provide supporting information	
<b>Vision (e.g., blindness or partial sight)</b>	75 (68%)	68 (62%)	87 (78%)	77 (69%)	110-111
<b>Hearing (e.g., deafness or partial hearing)</b>	97 (75%)	85 (65%)	104 (80%)	92 (70%)	130-131

<b>Mobility (e.g., walking short distances or climbing stairs)</b>	917 (81%)	788 (71%)	956 (85%)	881 (78%)	1117-1132
<b>Dexterity (e.g., lifting or carrying objects, using a keyboard)</b>	427 (78%)	356 (66%)	455 (83%)	408 (74%)	538-548
<b>Learning or understanding or concentrating</b>	368 (76%)	304 (63%)	397 (83%)	356 (74%)	480-484
<b>Mental Health</b>	794 (79%)	660 (66%)	846 (84%)	767 (76%)	1000-1012
<b>Memory</b>	385 (77%)	330 (66%)	412 (83%)	375 (75%)	499-502
<b>Socially or behaviourally (e.g., associated with Autism, attention deficit disorder or Aspergers' syndrome)</b>	193 (75%)	159 (61%)	214 (82%)	193 (73%)	257-263
<b>Breathing, fatigue, stamina</b>	573 (77%)	494 (67%)	622 (84%)	556 (75%)	737-745

**Table S39** Crosstab for easy and clarity of supporting information process by number of areas affected

Number of areas affected	Agree/strongly agree				Totals
	It was clear what information I should supply	It was easy to get the supporting information I wanted	It was clear how to include the supporting information	It was easy to provide supporting information	
1	261 (85%)	235 (79%)	277 (90%)	257 (83%)	306

<b>2-3</b>	555 (80%)	477 (69%)	570 (82%)	540 (78%)	694
<b>4-6</b>	398 (75%)	333 (65%)	434 (84%)	386 (74%)	520
<b>7-9</b>	44 (76%)	36 (61%)	50 (83%)	41 (70%)	58

**Table S40** Who gave you support to complete your application? (Select all that apply)

	Frequency and Proportion
<b>Friends or family</b>	424 (41%)
<b>Social Security Scotland</b>	347 (33%)
<b>Citizens Advice Scotland</b>	112 (11%)
<b>Welfare rights (for example, your local council)</b>	73 (7%)
<b>Money help (for example, Money Advice Service)</b>	31 (3%)
<b>Housing support</b>	11 (-%)
<b>Health services</b>	79 (8%)
<b>Advocacy services</b>	29 (3%)
<b>Totals</b>	1042

**Table S41** Thinking about when you made your application... Filling in and submitting the application(s) did not take too long

	CDP	ADP	CDP and ADP
<b>Agree or strongly agree</b>	356 (56%)	1318 (59%)	1674 (59%)
<b>Neither agree nor disagree</b>	98 (15%)	404 (18%)	502 (18%)
<b>Disagree or strongly disagree</b>	180 (28%)	499 (22%)	679 (24%)
<b>Total</b>	634	2221	2855

**Table S41** Thinking about when you made your application... The application process was clear

	CDP	ADP	CDP and ADP
<b>Agree or strongly agree</b>	506 (79%)	1826 (81%)	2332 (81%)
<b>Neither agree nor disagree</b>	67 (10%)	233 (10%)	300 (10%)
<b>Disagree or strongly disagree</b>	70 (11%)	192 (9%)	262 (9%)
<b>Total</b>	643	2251	2894

**Table S42** Why did you ask Social Security Scotland to collect Supporting Information on your behalf?

	Frequency and proportion	
<b>I thought they could collect the information faster than me</b>	0	386 (53%)
	1	344 (47%)
	Total	730

**Table S43** Crosstab for whether individuals received an award, broken down by “Thinking about your experience with Social Security Scotland since 1 September 2022...: I feel I can trust Social Security Scotland”

	Received an award	
	Yes	No
<b>Strongly agree or Agree</b>	1976 (87%)	94 (34%)
<b>Neither agree nor disagree</b>	276 (12%)	105 (38%)
<b>Disagree or Strongly disagree</b>	32 (1%)	78 (28%)
<b>Total</b>	2284	277

**Table S44** Crosstab for whether individuals received an award, broken down by “Thinking about your experience with Social Security Scotland since 1 September 2022...”

	Received an award	
	Yes	No

<b>Social Security Scotland treated me with dignity</b>	Strongly agree or Agree	2158 (94%)	141 (50%)
	Neither agree nor disagree	111 (5%)	93 (33%)
	Disagree or Strongly disagree	23 (1%)	47 (17%)
<b>Total</b>		<b>2292</b>	<b>281</b>
<b>Social Security Scotland treated me fairly</b>	Strongly agree or Agree	2142 (94%)	86 (30%)
	Neither agree nor disagree	104 (5%)	100 (35%)
	Disagree or Strongly disagree	40 (2%)	97 (34%)
<b>Total</b>		<b>2286</b>	<b>283</b>
<b>Social Security Scotland treated me with respect</b>	Strongly agree or Agree	2167 (95%)	142 (51%)
	Neither agree nor disagree	98 (4%)	95 (34%)
	Disagree or Strongly disagree	29 (1%)	44 (16%)
<b>Total</b>		<b>2294</b>	<b>281</b>

#### **How to access background or source data**

The data collected for this social research publication may be made available on request, subject to consideration of legal and ethical factors. Please contact [Stefania.Pagani@gov.scot](mailto:Stefania.Pagani@gov.scot) for further information.



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