



Merton CIL Briefing on PIP Assessment Challenges

October 2016

Background

Merton CIL are a user-led Disabled people's organisation run by Disabled people, for Disabled people. We deliver a range of services to disabled people in London Borough of Merton, including advice and advocacy services. Through our case work with local disabled people, we have gathered evidence of significant issues facing disabled people who apply for benefits, and this briefing focuses on Personal Independence Payment (PIP) issues. This is in addition to the fact that Disabled people are facing disadvantage across key areas of their lives¹, and are experiencing health inequalities as a consequence².

In particular, disabled people are disproportionately impacted by the policies of Welfare Reform, with disabled recipients of both benefits and social care affected 19 times more than non-disabled people by the cumulative impact of Benefit cuts and Social care cuts, resulting in an annual reduction in income of £8,832 per person.³ Barriers to employment, accessing the community, hardship and homelessness follow.⁴ Disabled people have poorer health and lower life expectancy,⁵ and the resulting perceived discrimination is associated with increased likelihood of psychological distress.⁶ Laws and regulations already in place to support disabled people, such as the Equality Act 2010, and the UNCRPD, are not being effectively adhered to.^{7, 8}

¹ The Equality Act 2010: The Impact on Disabled People, House of Lords Select Committee on the Equality Act 2010 and Disability, 2016

² Is Britain Fairer? Equalities and Human Rights Commission, 2015

³ A Fair Society? How the Cuts target Disabled People, Centre for Welfare Reform, 2010

⁴ Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015

⁵ Is Britain Fairer? Equalities and Human Rights Commission, 2015

⁶ Perceived Discrimination and Psychological Distress in Sweden, S Wamala, G Bostro, K Nyqvist, British Journal of Psychiatry, 2004

⁷ The Equality Act 2010: The Impact on Disabled People, House of Lords Select Committee on the Equality Act 2010 and Disability, 2016

⁸ Dignity and Opportunity for All: Securing the Rights of Disabled People in the Austerity Area, Just Fair, 2014

Barriers to claiming benefits to which disabled people are entitled directly impacts on disabled peoples day-to-day lives, principally in the realm of having an inadequate income and experiencing poverty, which leads to isolation and a negative impact on health and sense of well-being.

Focus on Personal Independence Payments (PIP)

The welfare benefit reforms that the government brought in through the Welfare Reform Act 2012 are having a significant and disproportionate negative impact on Disabled people, which seriously jeopardises Disabled people's standard of living and reduces the level of social protection. The changes contained in the Act include:

- Disability Living Allowance (DLA) abolished, replaced by Personal Independence Payment (PIP)
- Changes to Housing Benefit, including the Spare Room Subsidy removal, (commonly known as 'the bedroom tax')
- Tougher sanctions for JobSeekers and Employment Support Allowance claimants
- Time-limiting and means-testing Employment Support Allowance
- Universal Credit - a new benefit that will replace 6 other benefits.
- The over-all Benefit Cap⁹

Around 22% of DLA claimants in London are entitled to the lowest care and mobility elements. People in this group are the most likely to lose their entitlement under the changeover to Personal Independence Payments (PIP). In the migration, about 20% of those entitled to DLA are expected to lose their entitlement to PIP.¹⁰

Disabled people are particularly vulnerable to welfare reforms, given the high proportion lacking paid work, many will be less able to supplement the lost income by moving into work. In addition DLA/PIP is not conditional on lacking work, so those claimants that are able and can find a suitable job are presumably already in work.

Individuals in receipt of DLA/PIP are exempt from a number of other welfare changes: the single room rate change, the overall benefit cap and in some boroughs, council tax support. If entitlement to DLA/PIP is

⁹ Evidence of Breaches of Disabled People's Rights Under the UN Convention on the Rights of Persons with Disabilities, Inclusion London, 2015, p. 13

¹⁰ <http://www.londonspovertyprofile.org.uk/indicators/topics/receiving-non-work-benefits/dla-caseload-by-care-award-type/>

lost, not only will individuals lose their DLA/PIP income, but they could also lose income from other benefits as they are no longer exempt.¹¹ For example, we have a current case where the individual has received a lower rate of PIP than their previous DLA claim, resulting in the loss of their Motability vehicle. It takes 7 weeks for the vehicle to be removed following the change of benefit, but the benefits appeal process takes much longer so they could lose a vehicle they are later proven to have been entitled to on appeal.

Specific Issues with Personal Independence Payment (PIP) Benefits Assessments

Our work with local disabled people has identified three key issues with assessments for PIP:

1. Inaccessible assessment centres. This includes centres which are physically inaccessible, or those located far away from the person's home
2. Overbooking of assessment centres. This leads to last minute cancellations or excessively long waits at assessment centres
3. Inaccurate Assessments. Many disabled people are wrongly being found ineligible for PIP at assessment stage, and are being forced to go to tribunal

It is not our intention to try to address or highlight all the issues with PIP which exist and which have been well-documented elsewhere^{12, 13}. Our intention is to focus on specific local challenges and, where appropriate, show these within a national context.

1. Inaccessible Assessment Centres

At Merton CIL we regularly get calls from Merton residents who are being asked to attend assessment centres which are difficult for them to get to. This includes being told to travel to Deptford, East London or Vauxhall, all of which require independent travel skills, and the ability to

¹¹ <http://www.londonpovertyprofile.org.uk/indicators/topics/receiving-non-work-benefits/dla-caseload-by-care-award-type/>

¹² <https://www.gov.uk/government/publications/personal-independence-payment-pip-assessments-first-independent-review>

¹³ <https://www.gov.uk/government/consultations/personal-independence-payment-pip-assessment-second-independent-review-call-for-evidence>

make lengthy journeys with multiple changes. Even closer assessment centres can be difficult to get to, with typical centres being located in Wandsworth and Croydon, neither very easy to get to for Merton residents.

PIP assessment centres appear to have been set up with little consideration for the access needs of the people visiting them. For example, in a Wandsworth¹⁴ centre, there is no parking. The nearest disabled parking spaces are over 200 meters away, and the nearest general car park requires you to walk through a shopping centre before reaching the assessment centre (see pictures 1 and 2). We have had to resort to asking people to get dropped off outside the centre, even though this requires them to drive into a private road and wait on yellow lines and is in direct conflict with the information provided by the centre which tells people not to do this. In addition, this particular centre is very poorly marked and signposted and almost impossible to find unless you have been before. Another example is when assessment centres have wheelchair inaccessible buildings, as described in our case study below.

Inaccessible centres are also those which fail to take into account the communication, health or support needs of people attending the centres. For example, one particular centre¹⁵ has very poor support for people waiting for appointments and we have frequently witnessed people crying in the waiting room, which is distressing for everyone else too, and on occasion distressed individuals displaying aggressive or challenging behavior. In one case we witnessed an individual repeatedly banging their head against the wall, which was ignored by staff at the centre. Our advocate was with someone with support needs, otherwise we would have intervened.

Case Study 1 – An Inaccessible Centre

A woman with severe learning difficulties had been invited to an assessment for PIP in Croydon¹⁶. Before her involvement with Merton CIL she had to rearrange her appointment twice¹⁷ due to 1. As she was unable to get support to go to this appointment. 2. For a hospital appointment.

¹⁴ PIP Consultation Centre, Unit 4 & 5 Ground Floor, The Filaments, Buckhold Road, London SW18 4AT

¹⁵ 1st Floor, Stephenson House, 2 Cherry Orchard Road, Croydon, Surrey, CR0 6BA

¹⁶ Synergy Centre, 1D Church Road, Croydon, CR0 1SG

¹⁷ People are now only allowed to rearrange an appointment once

When she came to Merton CIL to prepare for her assessment her assigned worker noticed that the centre she had been asked to go to was one that Merton CIL knows not be accessible. Since her assigned worker is a wheelchair user they rang the provider to request that the appointment be moved.

The worker explained that the lady could not attend alone as she is unable to communicate without prompting. She cannot remember the names of her conditions. She is fearful of new places. The worker explained that a wheelchair user would therefore be attending the appointment with her.

The worker was told that the appointment could not be rearranged as it had been moved twice already. The worker said she was aware of that and the guidelines however she would like them to be clear that the inaccessibility of the property was not the fault of the claimant. The rep said he would speak to his manager. After a period on hold the rep can back online and explained that the building was accessible. The worker stated that both she and her colleagues had been to this building and that it was not. After the worker explained the multiple problems with the building the rep admitted he had not been there himself and was not aware of these problems. The rep at one point suggested the wheelchair user could fold up their wheelchair to access the assessment room. The worker explained that it was unacceptable to expect any wheelchair user to do this particularly without ever inquiring whether it was physically possible or safe to do so.

The worker was told that herself and the claimant would have to wait for the only accessible room in the building to become available to have the assessment. The worker suggested that this was impractical and asked why the provider could not book appointments based upon access needs. The worker explained that this was not the first time that this problem had occurred and that previously Merton CIL and their service users had had to wait hours for the accessible room to become available despite turning up at their appointment times. The worker suggested it might be more supportive for the Centre staff and claimants if the centre could ensure that access needs were accounted for before claimants turn up for their appointments. The rep said that the person should attend the centre at the time booked and wait for the accessible room to become available if she wanted to continue with the claim (see picture 3 for waiting room).

This is a clear example of centres adding needless stress to an already daunting process.

2. Overbooking of Assessment Centres

We have identified that assessment centres appear to have moved in the last 18 months to a model that we compare to budget airline bookings, ie, they are overbooking appointments in the assumption that some people will not turn up. This was confirmed by one of the assessors who told us that she had 20 assessments on her list per shift, but that she could only reasonably do 6 in the time available. This means that a number of our service users are seeing last minute cancellations by the assessment centres – sometimes while they are en route or just as they are getting ready to leave. This is clearly distressing for people who have prepared for the assessment and may already have faced a lengthy wait to get to this point. For those who do get to the assessment centre we have seen long waits at the centres causing distress and anxiety for our service users. For example, we have had people vomiting at the centre due to anxiety over the wait.

Practical issues also arise such as people unable to take their medication or having difficulty with childcare arrangements.

Case Study 2 – Long Wait results in Cancelled Assessment

A mother of a toddler had had to change her initial assessment as she had no one to go with. When she re-booked her assessment¹⁸ she made it clear that she would only be able to attend with support as she suffers from pain, exhaustion and panic attacks.

Despite this, when she arrived for her assessment, she waited from 1.30pm until 3.55pm. Her booked appointment time was at 1.45pm. During the wait she kept asking the receptionist how long she would have to wait and kept being told she was next. She was with a friend, but struggling with exhaustion and the seating was uncomfortable. She has chronic fatigue, fibromyalgia, sores and depression, so the long wait on uncomfortable seating caused significant pain and distress.

When she was finally called in she had almost no time left as she had to collect her son from nursery, as no one else was available to pick him up

¹⁸ The Quadrant, 213-217 The Broadway, Wimbledon, London, SW19 1NL

as the mother had experienced domestic violence and had no support from the father.

She was told to come back for an assessment on another day, which was eventually booked 2 months later. She felt that the wait and cancellation had caused her stress and exhaustion, she hadn't slept for days in anticipation, and she subsequently got ill too.

3. Inaccurate Assessments

PIP works on a points system¹⁹ and at Merton CIL we are witnessing a growing number of assessments where people are being assessed as having zero or very few points at assessment, which is later overturned in tribunal. In a number of cases, people felt their assessment reports were so far removed from their situation and what had been discussed at the assessment itself, that they thought their details had been mixed up with someone else. Assessments for people with mental health needs or for people with fluctuating conditions seem particularly poorly done. Our observations about inaccurate assessments is backed up by the NAO report which highlights that only 13% of PIP and ESA assessment reports reached the necessary standard.²⁰

Despite these known issues, in some cases our advocates have been stopped from taking notes during the assessment or stopped from asking the person clarifying questions when they feel an issue hasn't been properly explored, in direct contravention of DWP guidelines²¹. In one case the disabled person said they had felt very uncomfortable throughout the assessment and that they had been frightened of the assessor who they felt had spoken to the advocate in an aggressive manner. They person felt they had not been listened to and in fact were denied the benefit, which on appeal was overturned and they were awarded PIP. However, getting to tribunal is a complicated and time-consuming process.

Once a person has been denied PIP and they wish to appeal, they first have to go through a mandatory reconsideration (MR) process which

¹⁹ <https://www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-carers/pip/appeals/how-decisions-are-made/>

²⁰ <https://www.nao.org.uk/wp-content/uploads/2016/01/Contracted-out-health-and-disability-assessments.pdf>

²¹ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/547146/pip-assessment-guide.pdf

was introduced for PIP in April 2013. But since its introduction, 85% of decisions for new claims - and 76% of DLA/PIP reassessment decisions - have remained unchanged.²² The individual then has to make a submission to the tribunal, and attend tribunal where the proportion of appeals awarded in favour of the claimant has been increasing significantly, reaching 65% in the most recent figures for the first 3 months of 16/17.²³ This means that 2/3 people are being forced to undergo hardship and wait months longer in order to access a benefit to which they were entitled in the first place.

Case Study 3 - One point to 28 points

A local disabled mum was referred to Merton CIL support with an upcoming appeal PIP claim. Following the initial claim and mandatory reconsideration, she had been awarded just 1 point and was told she was not eligible. This was despite the fact that she lives with bipolar disorder, depression and borderline personality disorder. Her day-to-day challenges mean that she does not leave her home, answer her phone or read her post. She does not eat, cook, wash or change her clothing regularly due to her depression. She has to be supported to take medication and maintain her health, and she is unable to manage her finances.

The tribunal judges over-turned the original DWP decision and awarded 28 points and the enhanced rate for both daily living and mobility components of the benefit.

In Conclusion – Significant Risk Factors for Disabled Merton Residents

There is a growing body of evidence indicating that the very process of forcing disabled people to undergo an assessment is damaging to their wellbeing. Many disabled people are not only being assessed for PIP, but also for Employment Support Allowance (ESA) and for Social Care, and in many instances being reassessed annually and, in the words of

²² https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/529079/pip-statistics-to-apr-2016.pdf

²³ <https://www.gov.uk/government/collections/tribunals-statistics>

one of our service users, “being asked to prove I am needy enough all the time”. In one example, we supported a man at a PIP assessment²⁴ which was quite lengthy because of the range of issues being discussed. During the assessment, he needed to take numerous breaks as he felt a seizure may be coming on. At the end of the assessment it was our advocate who had to accompany him home (something we don’t typically do) as we were so worried about his health.

In several other examples, people have told us about how they feel disbelieved and how they feel they are being accused of being liars following assessments. This is backed up by recent press coverage highlighting how negative the assessment experience can be.^{25, 26}

Sadly, our experience is by no means unique. Discussions at the Merton Health and Social Care Forum make it clear that other support agencies are seeing the same issues arising for the people they are supporting. This shared experience is further verified by recent national reports on PIP by Inclusion London²⁷ and Citizens Advice.²⁸

However, while the aims of PIP, and the eligibility criteria are national issues, we can challenge problems with the local experience and implementation of PIP in order to get a better and more accurate assessment process for local disabled people. This is important because of the negative affect the PIP assessment process is having on disabled people financially, and in terms of their wellbeing. It is important also because of the sheer numbers involved.

At the last Census there were 4,760 people between the age of 16 and 70 claiming DLA in Merton²⁹. The vast majority of these people will be told to reapply for PIP if they want to keep receiving a benefit, even people who previously received lifetime DLA awards^{30, 31}. Assuming 20%

²⁴ PIP Consultation Centre, Unit 4 & 5 Ground Floor, The Filaments, Buckhold Road, London SW18 4AT

²⁵ <https://www.theguardian.com/commentisfree/2016/sep/26/i-feel-ashamed-in-a-way-i-never-did-before-your-stories-of-pip-assessment>

²⁶ <https://www.theguardian.com/commentisfree/2016/sep/22/we-cant-help-being-disabled-reassessment-hysteria-scroungers-cheating-system>

²⁷ <https://www.inclusionlondon.org.uk/campaigns-and-policy/facts-and-information/welfare-reform/evidence-pip-review/>

²⁸

<https://www.citizensadvice.org.uk/Global/CitizensAdvice/welfare%20publications/CitizensAdviceresponsetoPIPSecondIndependentReview.pdf>

²⁹ <http://neighbourhood.statistics.gov.uk/>

³⁰ People over the age of 65 on 08th April 2013 will not have to reapply

of these people are denied PIP through the changeover process, that would be 952 people no longer receiving this important benefit. However, because a greater proportion of Merton residents are on low or middle rate DLA claims compared to the England average, it is possible that far more than 20% of people are at risk, and up to 2,000³² people could lose their benefit locally just in the DLA to PIP changeover. In addition, new people are regularly claiming PIP and many of those are also being also unfairly denied the benefit.

³¹ Some people claiming ESA will no longer be repeatedly reassessed
<https://www.theguardian.com/society/2016/oct/01/dwp-scrap-retesting-for-chronically-ill-sickness-benefits-claimants>

³² We have written to the Job Centre to ask for more accurate assessments but they are unable to provide this information

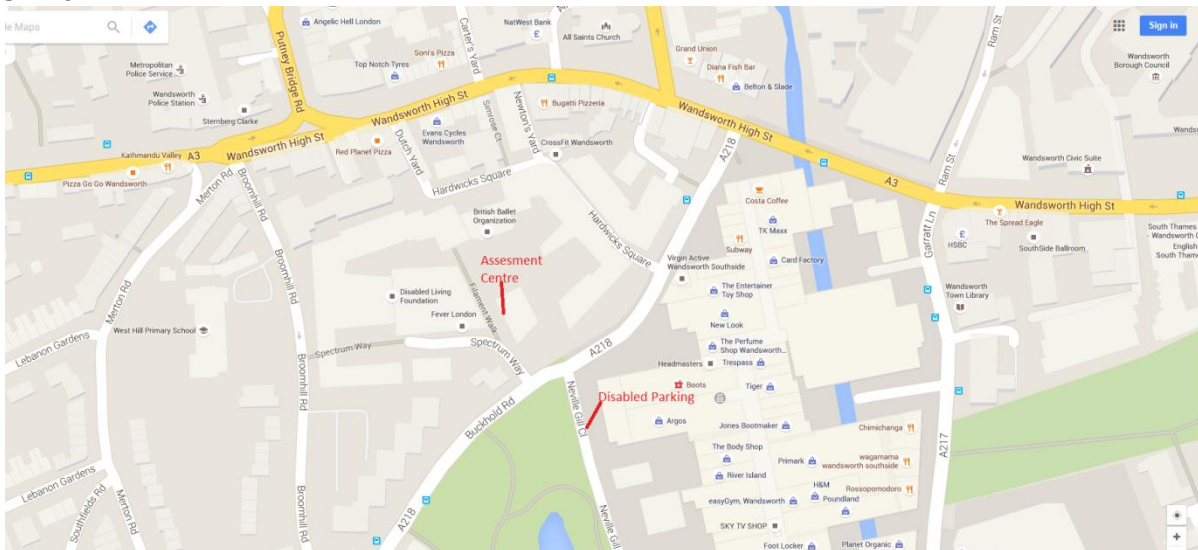
Picture 1 – Assessment centre on unmarked entrance on private road

PIP Consultation Centre, Unit 4 & 5 Ground Floor, The Filaments, Buckhold Road, London SW18 4AT



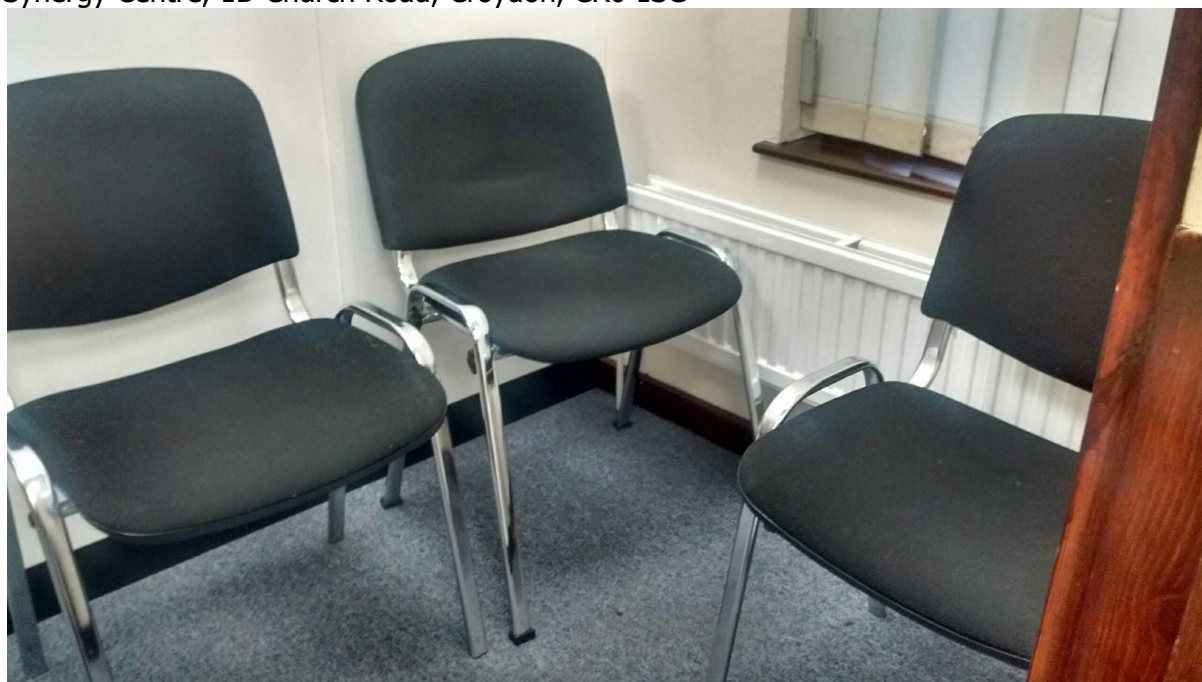
Picture 2 – Map showing distance between centre and parking

PIP Consultation Centre, Unit 4 & 5 Ground Floor, The Filaments, Buckhold Road, London SW18 4AT



Picture 3 – Small and uncomfortable waiting room

Synergy Centre, 1D Church Road, Croydon, CR0 1SG

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