



Completing the Personal Independence Payment claim form

What is Personal Independence Payment?

Personal Independence Payment (PIP) is a benefit for working age claimants who have additional care and/or mobility needs as a result of an illness or disability. It is a new benefit that replaces Disability Living Allowance for claimants aged between 16-64 years.

How do I qualify for PIP?

There are two separate elements of Personal Independence Payment: the daily living and mobility components. Each component has two rates – the standard or enhanced rate; the level of PIP awarded depends on the difficulty experienced by the claimant.

Each component is divided into a list of activities, which cover the main areas of daily living and mobility. Within each activity is a further list defining the extent of functional difficulty experienced (called 'descriptors'). Each descriptor has an allocated number of points – according to the level of difficulty experienced.

In order to meet the conditions for an award of either component at the standard rate a 'score' of 8 points is required. To qualify for the enhanced rate a 'score' of 12 points is required. The activities used and the points allocated are laid out in law; you can see our factsheet listing the 'descriptors'.

How is my claim assessed?

There are a number of non-disability tests that apply and these are checked during the initial claim registration telephone call. Once these are satisfied a PIP2 form "How your disabilities affect you" is sent out.

Once this has been completed and returned a medical assessment will be arranged with a Healthcare Professional unless it is decided that a reliable decision can be made on the evidence available. In Northamptonshire these assessments are carried out on behalf of the DWP by a private firm – CAPITA.

All the information relating to the claim is then passed to a DWP Decision Maker, who makes the decision on whether to make an award of Personal Independence Payment and at what rates.

Why is the PIP2 form important?

It is important to give accurate and consistent information so that the Healthcare Professional who carries out the medical assessment and the DWP Decision Maker can rely on this as a basis for their conclusions. You should include all health problems you have, including things that are not yet confirmed or still being investigated. This may mean you need to include information which is embarrassing or personal, but it is vital to include it so the DWP know how you are affected.

Completing the PIP2

The first few pages of the PIP2 form ask for detail of any medical professionals involved with your care (Q1). You should first detail a health professional who knows you best. You can include your GP or a hospital specialist or any other healthcare professional, eg counsellor or physiotherapist. It is better to give details of someone who has seen you recently.

You are then asked to also list your health problems (Q2): remember – you do not have to have a formal diagnosis and you can just describe your symptoms. It is helpful if you can be specific about the location, frequency or severity of any symptoms. You are also asked to give information about your medication and/or treatment, and do include the dosage (Q3).

It is important to note that to qualify for Personal Independence Payment you must show how you are affected by any health condition, not simply list the diagnosis or health conditions; different people with the same condition can be affected in different ways or with different levels of difficulty.

The form then goes through each of the activities used for the daily living (Q3-12) and mobility (Q13-14) components.

The form is structured to focus on these activities; if you have other difficulties you can mention these in the “Additional Information” box at the end of the form (Q15). However, you should remember that the Assessment is primarily concerned with a person’s ability to carry out the actions laid down in the regulations, asked at questions 3-14 and so other issues might not be relevant.

Under each activity is a series of tick boxes and space to write further information. The same form is used for everyone, so it is unlikely that each and every activity will apply to you and you do not have to write something in each box. However, if you do think that you have difficulty with an activity it is helpful if you can give a bit more information as well as ticking the relevant boxes. The form contains quite a lot of helpful direction within each question, giving hints as to the type of information that could be useful.

You should try to explain why you might struggle to perform an activity – eg because of specific pain, or what would prevent you from performing the action, or how you would feel afterwards. You should not exaggerate your difficulties but do not under-estimate your problems or the level of help you get.

If you tick the box to indicate ‘sometimes’ you should try to give as much information about this – how often might you not be able to perform the action in a typical week? What can you manage on a ‘good’ day and what can you manage on a ‘bad’ day?

The Assessment should take into account whether the claimant can perform the activity **safely, to an**

acceptable standard, repeatedly and in a reasonable timescale. It is important to explain if you can only manage to perform the activity once or a limited number of times but not again and again. You should explain if you experience increased pain or fatigue and this limits the number of times you can perform an activity or if you would need to rest. Also you should explain how you feel afterwards.

The assessment takes into account your ability to carry out the activities using any aids, adaptations or prosthesis that you normally use or that you could be reasonably expected to use.

What do I do with the completed form?

You have one month to return the PIP2 form. You should be provided with an envelope to return the form – make sure that the FREEPOST address is correctly showing in the window of the envelope.

Do I need to send in additional evidence?

It is not necessary to send in additional evidence but it certainly helps if you have any reports from your doctor or letters from specialist clinics – particularly if these are recent. There is no need to send appointment letters.

Community Law Service can assist with completion of PIP2 forms – but appointments are limited and it is important to contact us as soon as possible. We can also assist with understanding decisions and the process of challenging a decision; our specialist benefit caseworkers may be able to assist to prepare an appeal.



Community Law Service offer specialist benefit advice to assist with identifying benefit entitlement, claiming benefits, understanding benefit decisions and registering benefit challenges and appeal. We can offer appointments to give advice and assistance to prepare for benefit appeals.