

# Personal Independence Payment: The Claimant Journey

Updated 13 December 2012

This claimant journey explains how the claim process for Personal Independence Payment is expected to work. This uses the latest available information but please note that some of the detail may change over time as processes and ways of working are confirmed. You should always check the PIP website at [www.dwp.gov.uk/PIP](http://www.dwp.gov.uk/PIP) for the latest version – this version was issued on 13 December 2012. The site also features a range of supporting information including a quick guide to PIP (including eligibility and implementation timetable) and frequently asked questions.

## 1 Thinking about claiming

### New Claims

Information available explains eligibility criteria and helps the claimant decide if they want to make a claim



Up to date information available online, in DWP leaflets and from support organisations

DWP will provide advice and guidance for support organisations to help them help claimants

### Existing DLA claimants

After October 2013, existing DLA claimants will be reassessed for PIP if they have fixed period DLA awards coming up for renewal; are young people turning 16; or have indefinite awards and report a change in their condition.

Existing DLA claimants (between 16 and 64 on 8 April 2013) don't need to do anything now – DWP will contact them in plenty of time if they need to take any action

DWP will begin selecting existing DLA claimants and tell them what they need to do to claim PIP. We will prioritise DLA claimants who have turned 65 after 8 April 2013, when PIP was first introduced.

If an existing DLA claimant makes a claim to PIP then their DLA payments would normally continue until their PIP claim is decided.

If they choose not to claim PIP then their DLA would end

## 2 Making a claim



Paper claim forms will be by exception for those claimants that are unable to make a claim by phone

The initial information required to make a claim for PIP will be basic information covering:

- The claimant's personal and contact details
- Residency details (known as residency and presence)
- Relevant periods spent in hospital, residential care
- Claims under special rules for terminally ill people, and
- Payment (bank account) details

It can help speed up the claim if the caller has all this information ready before calling

The initial phone call can also be made by someone supporting the claimant (such as a support organisation or family member) – but they'll need to be with the claimant and pass a quick identity check

DWP will identify communication needs (such as alternative formats) and consider if the claimant needs additional support

The date of claim is set at the point of the phone call

DWP will explain what happens next

DWP checks basic eligibility conditions – if not met then a disallowance letter will be issued

A form is posted to the claimant. It is individually addressed and barcoded to speed up processing

## 3 Telling Your Story



The form allows the claimant to explain how their condition affects them in their own words

Some disabled people have fluctuating conditions, that affect them in different ways on 'good and bad' days, so they can use the form to explain this

Claimants may ask someone, such as a family member or support organisation to help them complete the form

Information about how to complete the form will be included and also available online

DWP will provide advice and guidance for support organisations to help them help claimants

Any additional evidence that may help support the claim can be returned with this form

The form and any supporting evidence is returned to DWP in a freepost envelope

## 4 Assessment

The claim information, completed form and any additional evidence is passed over to the health professional

They will decide if there is a need for any further evidence and will make all the arrangements to get this

Some assessments may be completed at this stage – such as if someone is claiming under the special rules for the terminally ill or where the written evidence is sufficient

Most will be asked to attend a face-to-face consultation

Face-to-face consultation required

Claimant will be contacted to invite them to a face-to-face consultation

Claimants can contact the health professional to ask questions about the consultation or rearrange appointments

Claimant attends face-to-face consultation with health professional

The health professional will ask the claimant to explain how their condition affects them on a day to day basis. The claimant may also be able to provide additional evidence

Claimants are encouraged to take someone along to the consultation for support – they can take an active part in the discussion where necessary

The health professional reviews all the evidence against a set of everyday activities and clear descriptors to assess the challenges faced by the individual

The health professional sends a report back to the DWP to help inform their decision

## 5 Decision

The DWP Case Manager reviews the evidence they've received – including the report from the health professional

They make a reasoned decision on entitlement, level of award and the length of any award

A decision letter is posted to the claimant

The letter provides more information about the decision and how it's been reached. It also explains other sources of support available

Claimants can call DWP to ask for more information about the decision

If a claim has been disallowed, or an existing award reduced, then the Case Manager will try to call the claimant to explain the decision

If the claimant disagrees with the decision they can ask the Case Manager to look at it again – this is known as a reconsideration

