



**Benefits and Work**  
Guides you can trust

# The Best Possible Personal Independence Payment Appeal Submissions

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## PIP Sample Appeal Submissions

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### Disclaimer

Every care has been taken to ensure that the content of this work is accurate and that legislation and caselaw used is current at the time of writing. However, no responsibility for loss occasioned to any person acting or refraining from action as a result of any statement in this work can be accepted by the authors.

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## Introduction

This guide contains sample documents to help you get through the complex appeals system for Personal Independence Payment (PIP)

It isn't intended to be used on its own, however. You need to use our detailed guide to PIP mandatory revisions and appeals to take you step by step through the entire process

## Sample mandatory reconsideration request

The first step on the road to a successful challenge of a PIP decision is a mandatory reconsideration request. Whilst in theory you can request a mandatory reconsideration by telephone, we would always advise making the request in writing – even if you have already done so by telephone. You can write a letter (see sample letter below) or complete a [CRM1](#) form which can be downloaded from [www.gov.uk](http://www.gov.uk)

We would advise you to make the request in writing as there are an increasing number of examples of the Department for Work and Pensions (DWP) failing to keep any record of verbal requests for a mandatory reconsideration.

There are also an increasing number of examples of the DWP failing to respect mandatory reconsideration requests and instead telephoning the claimant and then deciding themselves whether you really want to have the decision looked at again.

Clearly this is not lawful, but once the one month time limit has passed it can be a big challenge to get your request accepted. There is an absolute time limit of 13 months. If you are outside the one-month time limit but within the 13 months for submitting a mandatory reconsideration it is still possible to challenge the decision, but you should quote the following case law –

[https://assets.publishing.service.gov.uk/media/5bb61f8040f0b64a3f97a671/2018\\_AACR\\_5ws.pdf](https://assets.publishing.service.gov.uk/media/5bb61f8040f0b64a3f97a671/2018_AACR_5ws.pdf)

So, below is a sample mandatory reconsideration request letter that we hope will help reduce the chance of anything going wrong for you and also make it easier to put things right if the DWP don't follow the rules.

Name:

Date of birth:

NINO:

Date:

Dear Sir/Ms,

### MANDATORY RECONSIDERATION REQUEST

I request that you reconsider your decision dated 12 March 2019

I consider that I provided enough evidence for a decision to be made that I am entitled to PIP at the rate of standard/enhanced for daily living/mobility.

I do not consider that the decision maker took full account of the severity of my condition or of the way that it affects my everyday activities and bodily functions.

I do not have any further evidence to add at this stage.

OR

I wish to add the following evidence: *[see the sample written submissions later in this guide for the kind of additional evidence you may wish to add, although at this stage you may not have copies of things like the Atos or Capita medical report]*.

**Important note:** should I wish to withdraw this request I will only do so in writing. Under no circumstances will I withdraw this request verbally. If you speak to me on the telephone about this matter, nothing I say should be construed as a withdrawal unless and until it is confirmed in writing.

Yours faithfully,

## Appeal form

Once you have got your reconsideration decision, if you are not happy with it the next step is to complete a SSCS1 form, (to be renamed SSCS1PE from early 2020,), and send it to the Tribunals Service along with a copy of your mandatory reconsideration decision notice. Don't worry if you use a copy of the old form it will still be accepted, but it may take longer to process your appeal. The SSCS1 can be downloaded [here](#).

Alternatively, if you live in England Scotland or Wales, you can now submit a PIP appeal online [here](#) and the information required is similar to the paper SSCS1 form. Scroll down and click on the box 'Start now'.

You have one month from the date of the decision to submit your appeal. If you miss this time limit you will need to explain why your appeal is late. The absolute time limit is 13 months from the date of the decision

Again, there is more information about this in our guide to PIP appeals.

Your grounds of appeal may be very basic, especially if you do not have copies of documents such as the Atos or Capita medical report at this stage. For example, you may just write that:

*I wish to appeal against the decision that I am not entitled to PIP. I consider that I provided enough evidence for a decision to be made that I am entitled to PIP at the rate of standard/enhanced for daily living/mobility.*

*I do not consider that the decision maker took full account of the severity of my condition or of the way that it affects my everyday activities and bodily functions.*

*I wish to have an oral hearing so that I can explain the full effects of my condition to a tribunal and answer any questions that they may wish to ask.*

Alternatively, you may wish to give a detailed explanation of why you think the decision is wrong.

You can do this using five of the steps in the seven-step system we describe below

## Sample written submissions

Below we've set out a framework you can use for creating a written submission. You can also use steps 2-7 below to complete the grounds of appeal in a SSCS1 appeal form or online appeal form.

You don't have to follow this layout and you can change and adapt it to suit your purposes, but it does give you a starting place for writing your submission.

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name:

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision being challenged:

### 2 Introduction

*What you are appealing against and how many points you scored.*

### 3 Potted history – optional

### 4 Undisputed scores

*Any points awarded that you think are correct*

### 5 Each disputed activity in detail

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity by using steps 5a-e below. Then repeat 5 a-e for each additional activity you want to dispute.*

**5a Descriptor you think is incorrect.**

**5b What you think the correct descriptor is**

**5c What error the Healthcare Professional (HCP) or DWP Decision-maker (DM) has made**

**5d What evidence is in the papers to support you**

**5e Any further evidence you want to add including any Upper Tribunal decisions relevant to this activity you wish to quote.**

### 6 Any general points about the evidence

### 7 Conclusion

## Example 1 Chronic Fatigue Syndrome

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision I am appealing:

### PIP Appeal submission

#### 1 Introduction

*What you are appealing against and how many points you scored.*

I am appealing against the decision to award me the standard rate of the daily living component of PIP and nothing for mobilising. I was awarded 10 points for daily living, which takes into account my lack of motivation and my anxiety. However, my difficulties have been underestimated. I will set these out below.

#### 2 Potted history – optional

I am 55 years old and have Chronic Fatigue Syndrome and Anxiety (a state of hyper-arousal). I last worked in an office 10 years ago, but kept reducing my hours until I could no longer work. I spend my days doing very little as, if I over-exert myself, I cannot manage even the basics. I lack the energy and motivation to look after myself and hardly ever venture outdoors due to overwhelming fatigue and anxiety.

#### 3 Undisputed scores

*Any points awarded that you think are correct*

Needs supervision or prompting to be able to wash or bathe - 2 points

Needs prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed - 2 points

Needs prompting to be able to engage with other people - 2 points

Needs prompting or assistance to be able to make complex budgeting decisions - 2 points

Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant - 4 points

#### 4 Each disputed activity in detail

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity using the following steps:*

*4a Descriptor you think is incorrect.*

*4b What you think the correct activity is*

*4c What error the HP or DM has made*

*4d What evidence is in the papers to support you*

*4e Any further evidence you want to add*

*Repeat 4 a-e for any other activities you want to dispute.*

### **Preparing Food**

I have been awarded 2 points for my problems with preparing food as the HP says the descriptor; 'cannot cook a simple meal using a conventional cooker but is able to do so using a microwave', applies.

However, I believe I should have been awarded 8 points for this activity. This is because I 'cannot prepare and cook food'.

I am not able to do this because of fatigue. I do eat ready-meals that can be warmed in a microwave, but sometimes this is too much effort, so I eat sandwiches, toast or noodles. Very often, I will just eat cereal as anything else is too tiring to prepare and involves planning. On the rare occasion that I have attempted to prepare a meal from scratch, I have given up as the task is overwhelming for me and I cannot plan the steps needed to complete it. I could not make a meal to an acceptable standard, within a reasonable timescale, and I would not be able to repeat the activity due to fatigue. The HP has stated that I use a microwave to warm up meals and I do not believe he has taken into account that I do not cook a simple meal but one that has been already prepared and cooked. I believe that the HP's account is incomplete without this additional information.

My Psychologist has written a letter, which I submitted with my claim, and this details my anxiety and hyper arousal. However, he does state that I cannot look after myself adequately at times, without help, as I find most tasks overwhelming due to my anxiety and my fatigue.

### **Moving around**

I have not been awarded any points for moving around.

Although I can stand and then move more than 50 metres, I cannot move more than 200 metres, either aided or unaided. I should have been awarded 4 points for this descriptor.

The HP has stated that I was observed to walk to the consultation room with no problem. I did manage to walk that short distance but the HP has used this snapshot to form a picture of my mobility difficulties. I had taken more painkillers than usual in order to do this, and because I have CFS, I had to go to bed as soon as I got home due to the extreme fatigue and could not leave the house due to pain and exhaustion for 5 days after the medical. I stayed in bed most days, only getting up to go to the toilet or to get a drink and snack from the kitchen. The HP has not taken into account the effect of fatigue. I told the HP that because of CFS I get fatigued very easily. I can move slowly from room to room indoors, but if I walk outdoors more than about 100 - 150 metres I become very fatigued. If I have to travel any distance I will always get a lift or use a taxi. The HP has not taken into account the effect of fatigue on walking.

My GP has written in her letter that I get fatigued after minimal exertion and have to rest for days after.

### **6 Conclusion**

I believe that I should have been awarded 16 points for daily living if the correct descriptor for 'preparing food' is taken into account, and that I should therefore be entitled to PIP daily living component at the enhanced rate.

I believe that I qualify for the standard rate for mobilising, as I should have been awarded 4 points for 'moving around', which added to the 4 points for 'planning and following journeys' would give a total of 8 points for this descriptor.

I believe that the HP has only taken my anxiety into account but not the effects of fatigue on every day activities and whether they can be carried out to an acceptable standard.



## Example 2 Anxiety & depression

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name:

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision being challenged:

### 1 Introduction

*What you are appealing against and how many points you scored.*

I have not been awarded any rate of Personal Independence Payment. However, my mental health conditions cause me many problems and I believe I am entitled to the enhanced rate of the daily living component. The medical assessment on which the decision is based is not complete or accurate and therefore the decision maker has been unable to reach a correct decision.

### 2 Potted history – optional

I am 27 years old. I suffer from anxiety and depression and for much of the time I am agoraphobic and cannot leave the house alone. I was working in a call centre for more than 4 years, but following a relationship breakdown 2 years ago, I became more and more depressed and finally I was dismissed because of my sickness absence.

Since then, I have been involved with mental health services and I am currently under the home treatment team, as I have attempted to take my own life on 3 occasions in the past 2 years. The most recent time was 14 weeks ago, when I was admitted to hospital as an emergency.

### 3 Undisputed scores

*Any points awarded that you think are correct*

I was awarded 4 points for the problems I have with preparing food. This is a correct award, as I am unable to safely cook any meal without support, assistance and supervision from another person due to my lack of motivation, concentration and focus.

### 4 Each disputed activity in detail

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity using the following steps:*

*4a Descriptor you think is incorrect.*

*4b What you think the correct activity is*

*4c What error the HP or DM has made*

*4d What evidence is in the papers to support you*

*4e Any further evidence you want to add*

*Repeat 4 a-e for any other activities you want to dispute.*

### Taking nutrition

I have been awarded no points for taking nutrition.

I had clearly stated to the health professional that I fail to eat at all if someone does not prompt me and remind me to eat. I have a very low BMI as a result of my loss of appetite and desire to eat.

In the past four weeks, I have had 3 episodes of not eating for 4 days at a time and even on the days that I do eat, I will only eat one meal or snack in a day.

My Community Mental Health Nurse has explained these difficulties in the enclosed letter. As he knows me better than the HP who examined me, I believe his evidence should be taken into account when making a decision about my capability for work.

I believe I should have been awarded 4 points for this activity.

#### **Monitoring health condition**

I was awarded no points for monitoring my health condition.

I frequently lose track of days and will sit for many hours doing nothing at all. When I become this depressed, I need someone to be aware of my mental health deterioration, in order to prevent me becoming suicidal again.

My CMHN monitors my condition in person once a week and by phone twice a week to make sure I am safe, as stated in his letter.

I believe I should have been awarded 1 point for this activity.

#### **Washing and bathing**

I was not awarded any points for washing and bathing.

This is despite explaining to the assessor that I will go for many days without maintaining my personal hygiene. I will only have a wash, shower or shave when my mental health support comes and prompts me to. On other occasions my brother will visit and remind me and encourage me to clean myself. I am unaware that my hygiene is poor until I have someone to remind and prompt me to shower and keep clean.

I believe I should have been awarded 2 points on this activity.

#### **Dressing and undressing**

I was given no points for dressing and undressing. I remain in the same clothes for days at a time, until I am prompted and encouraged to get changed into clean clothes by my support worker or my brother. I am not aware that my clothes are becoming dirty or smelly. I wear my clothes constantly and I don't get undressed for bed or get dressed when I get up. I also don't change into specific or different clothes for going out anywhere. I wear loose tracksuit-type clothing all of the time, as I have no motivation or desire to wear other clothing. I gave details of these problems in my claim pack.

I believe I should have been awarded 2 points for this activity.

#### **Communicating verbally**

I was given no points for my difficulty with communication.

Since my depression has become so severe, I have lost the ability to understand and retain information. I need everything to be explained to me several times, over the course of weeks sometimes, until I grasp the meaning of it. My CMHN is very helpful in explaining things to me in

simple terms, but I don't always remember what he has said. My brother then has to explain the same thing again, until I understand.

As I find it so difficult to communicate with anyone outside of my immediate family and my support worker, I cannot focus and concentrate on what other people are saying. I avoid contact with others as much as possible and any social situation causes my mind to go blank, such that I cannot understand anything that is being said. I need someone with me all the time when I'm in the company of other people, so that any communication with me can be explained to me again later.

Because of this need for help, which was detailed in my claim pack, I believe I should have been awarded 4 points for this activity.

### **Reading and understanding**

I was awarded no points for reading and understanding written information.

Because of my difficulties with concentration and focus, I am not able to understand complex written information and I need a lot of prompting and further explanation to understand things like benefits letters or bills.

For this reason, I believe I should have been awarded 2 points for the reading activity.

### **Engaging with other people**

I was given no points for engaging with other people face to face.

I am unable to leave my home at all without being accompanied by my support worker or my brother. I cannot cope with other people as I become very self-conscious, anxious and ultimately more depressed. I am aware that others view me as distant, removed and odd, which affects my poor self-esteem, causing me to feel that life is not worth living. I cannot go out into public places without support, as this causes deterioration in my condition and makes me feel suicidal. My lack of social engagement was made very clear in my claim pack.

I believe I should have been awarded 4 points for this activity.

### **Making budgeting decisions**

I was given no points for the activity relating to making budgeting decisions. I am unable to make decisions about my money and finances because I cannot focus or concentrate to do so. I spend the same amount of money every week on my groceries, which I have delivered. My brother orders for me online, using the same shopping list each time. If I need any extra items, he goes to the shop and collects them for me. I cannot make decisions about new clothes or products that I might need. I become panicky and indecisive if I need to think about more complex monetary decisions; my brother has to make those decisions for me, to avoid causing me distress and anxiety.

I believe I should have been awarded 2 points for this activity.

### **Planning and following journeys**

No points were awarded to me for either of the mobility activities.

I believe that 1.f "cannot follow the route of a familiar journey without another person..." applies to me. My CMHN has clearly stated in his letter that I am unable to leave my house at all without either him or my brother accompanying me, otherwise I become overwhelmingly anxious and distressed. When I tried to go to the corner shop alone about 3 months ago, I lost all sense of reality, causing

me to lose control and break down in the street. Following this last attempt to go out alone, I tried to commit suicide and was hospitalised, as detailed in my claim pack.

I believe I should be awarded 12 points on the mobility activity “planning and following journeys”.

## **5 Any general points about the evidence**

The person who carried out my medical was with me for only 40 minutes. They are a generalist nurse with no specialist knowledge of mental health problems. My GP and my CMHN, who both support my claim, have known me for at the past 2 years and are more knowledgeable about my condition and the effects on my functional ability.

The contents of the medical report are very sparse and incomplete; the HP has failed to include the details of my hospital admissions, which I feel are relevant. I have weekly support from my CMHN, as well as more frequent phone contact with the “out of hours” mental health support team. None of this has been recorded in the report that was sent to the decision maker.

The HP has also reported that I manage social engagement, on the basis that my brother comes to visit me. I am only able to deal with him because he is close family. He provides me with vital support and is my unofficial carer. Without his help and support, I would lead a very isolated life and would become very ill.

My CMHN has explained this in his letter and I believe this should be considered more valid evidence than what has been recorded by the HP in her report.

## **6 Conclusion**

I believe that I should have been awarded an additional 21 points (as well as the 4 awarded for preparing food) and that I should therefore be entitled to PIP daily living component at the enhanced rate due to the difficulties I have because of my mental health condition.

I request that the tribunal considers my eligibility for the mobility component of PIP at the enhanced rate, as I believe that I should have been awarded 12 points for this activity.

## Example 3 Schizophrenia

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name:

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision I am appealing:

### PIP Appeal submission

#### 1 Introduction

*What you are appealing against and how many points you scored.*

Following a medical assessment, I have not been given any award of PIP and I am now appealing against that decision. I wasn't awarded any points and I believe this is because no account has been taken of the difficulties I have regarding my mental health condition.

#### 2 Potted history – optional

I have had mental health problems since I was a teenager and I have been sectioned under the mental health act four times in the past 15 years. I have been diagnosed with paranoid schizophrenia, which is managed with medication, however this is not always effective. When my medication has been changed in the past I have experienced psychotic episodes that are dangerous to my personal safety and the safety of others.

#### 3 Undisputed scores

*Any points awarded that you think are correct*

None awarded

#### 4 Each disputed activity in detail

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity using the following steps:*

*4a Descriptor you think is incorrect.*

*4b What you think the correct descriptor is*

*4c What error the HP or DM has made*

*4d What evidence is in the papers to support you*

*4e Any further evidence you want to add*

*Repeat 4 a-e for any other activities you want to dispute.*

#### Communicating verbally

I was not given any points for problems with communicating with people verbally, which I believe applies to me. I find it impossible to talk meaningfully to anyone other than my mental health support worker.

When I have tried to express myself to others without his support, I have become so paranoid and aggressive that I have been threatened with police arrest.

People are unable to understand that I have significant mental health problems and they misjudge me.

I believe I should have been awarded 8 points for this activity.

### **Engaging with other people**

I have not been awarded any points for Engaging with other people face to face.

However, I believe that I should have been awarded the maximum number of points on this descriptor.

I cannot deal with other people at all, unless they are involved in my health care in a professional capacity.

The only person I have any contact with is my mental health support worker, who visits me once a week and phones me twice a week to ensure I am safe and that I am complying with my medication. I cannot engage with others at all without experiencing significant distress, anxiety and paranoia. When I have been expected to see other people (such as attending the medical assessment) my mental health has deteriorated and I have become destructive within my home due to the distress it causes me.

I believe I should have been awarded 8 points on this activity.

The assessor has not made any record of these difficulties in her report, even though I told her about them, so I believe the decision maker has not had all the relevant evidence available to them to make an accurate decision.

I enclose a copy of my most recent review with my psychiatrist, which gives much more information about my mental health, and therefore should be given more weight as evidence than the report from the assessor.

### **5 Any general points about the evidence**

Throughout the medical assessment, I was so anxious and distressed I could not concentrate. The assessor has noted that I “coped well” with the interview, but at the time all I could think about was getting through the questions so that I could leave as quickly as possible. The assessment took only 23 minutes, which I believe indicates that it was not carried out thoroughly or accurately.

She made no record in the report that I was accompanied by my MH support worker and that he had to prompt me to respond to the questions at all.

### **6 Conclusion**

I believe that I should have been awarded 16 points for my difficulties with verbal communication and engaging with other people activities and be awarded PIP at the enhanced rate for daily living.

## Example 4 Mobility

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name:

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision I am appealing:

### 1 Introduction

*What you are appealing against and how many points you scored.*

Following a medical assessment, I have not been awarded any rate of PIP and I am now appealing against that decision.

### 2 Potted history – optional

I worked all my adult life until I had an accident 3 years ago, which shattered my hip joint and pelvis. Since then, I have been unable to work at all and I have been in and out of hospital for operations. Unfortunately, these have been of limited benefit in improving my mobility. Until last year, I was using a wheelchair to get around, as I was unable to bear my weight at all. Through rehabilitation following an operation in September, I have become more able to get around independently on crutches, but my mobility is still extremely limited. Since my accident, I have not had single day without pain, which can vary in intensity, but never goes away, despite taking strong painkillers. I don't believe that the report from the assessor has given an accurate reflection of the problems I still have.

### 3 Undisputed scores

*Any points awarded that you think are correct*

I have not been awarded any points for moving around, which I fail to understand.

### 4 Each disputed activity in detail

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity using the following steps:*

*4a Descriptor you think is incorrect.*

*4b What you think the correct descriptor is*

*4c What error the HP or DM has made*

*4d What evidence is in the papers to support you*

*4e Any further evidence you want to add*

*Repeat 4 a-e for any other activities you want to dispute.*

### Mobility activities – moving around

I was awarded 0 points for moving around. I believe that the correct descriptor is:

2.e) Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided. 12 points.

The assessor has noted that I “walked 5 metres to the interview room, using crutches” and has then

decided that this means I could walk more than 200 metres. I dispute this, as she did not ask me about the level of pain I was in.

I cannot walk as far as 20 metres without experiencing stabbing pains in my hips, which cause me to have to stop and rest before I can continue. On the day of the assessment I took double the amount of my painkillers, just to make it there and home again. For the remainder of that day and the whole of the following day, I was in so much pain I couldn't move around my home comfortably at all.

The HP has based their assessment of my walking ability on an extremely brief observation and has taken no account of whether I can carry out the activity reliably, in a timely fashion, repeatedly and safely.

I explained the difficulties I have with walking in the claim pack and in my reconsideration request, which make it clear that I can only walk a maximum of 20 metres once without stopping and that I am in severe pain all the time when I walk. I cannot then walk as far as this again for more than half an hour, and even then, I would need to stop at least once to relieve the pain in order to get as far as 20 metres.

Following any exertion like this, I have to rest as comfortably as I can for 20 to 30 minutes before I can carry out any other activity at all.

I enclose letters from my consultant and my physiotherapist, which show the extent of the damage to my hip and pelvis, and indicate that I experience significant pain when walking.

#### **5 Any general points about the evidence**

The assessor has clearly failed to record vital and pertinent information in relation to my health problems and has clearly by omission, misled the decision maker, who has made a decision on the basis of the report.

I request that the evidence I have given, supported by the letters from my consultant and physiotherapist, is given more weight when considering my entitlement to PIP.

#### **6 Conclusion**

I believe that I should have been awarded 12 points on the Moving around activity 2.e and that I should have been awarded the enhanced Mobility component of PIP.



## Example 5 Fibromyalgia

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name:

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision I am appealing:

### 1 Introduction

*What you are appealing against and how many points you scored.*

I have recently been assessed for Personal Independence Payment. My decision notice states that I have been “successful” in my claim. However, I have been awarded only standard rates of PIP for Daily Living and Mobility activities.

I wish to appeal against that decision as I believe I should have been awarded the Enhanced rate for each component.

### 2 Potted history – optional

I am 42 years old. I suffer from Fibromyalgia and for the past 8 years, my health and ability have become increasingly more difficult to manage. I had worked all my adult life until I lost the strength in my spine and legs to continue with my job and I was released on medical grounds 6 years ago. Over the past 8 years I have undergone numerous tests and physiotherapy programmes, but as Fibromyalgia is very difficult to treat, there is little that can be done to improve my condition.

I have been provided with very little information about how the decision was reached regarding my award of PIP, so it is impossible for me to agree with or dispute specifically any evidence that was made available to the Decision Maker.

I was not required to undergo a face to face medical assessment, so I fail to understand how a decision can be reached that I have the ability to engage in a variety of daily living and mobility activities without having seen first-hand how my condition affects me.

As I am under a specialist neurology consultant, I expected that the most relevant, pertinent and up to date medical information regarding my (declining) functional ability would have been requested from her by the DWP. Her contact details have been provided on my PIP form.

### 3 Undisputed scores

*Any points awarded that you think are correct*

#### Taking Nutrition

I have been awarded 2 points on the activity Taking Nutrition. I agree that (b) is the correct descriptor within this activity, as I need to use easy-grip cutlery to eat and, when I am in a lot of pain or I'm especially fatigued, I need assistance to cut up my food ready to eat.

#### Dressing & Undressing

I have also been awarded 2 points on the Dressing activity. I agree that this score is correct, as I need

to wear “easy” clothing that I can usually manage to put on and take off myself. When shopping for clothes, I take into account the need for easy fastenings and looseness of fit. When I am especially tired I won’t get dressed at all, however this is currently not for the majority of the time.

### **5 Each disputed activity in detail**

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity using the following steps:*

*5a Descriptor you think is incorrect.*

*5b What you think the correct descriptor is*

*5c What error the HP or DM has made*

*5d What evidence is in the papers to support you*

*5e Any further evidence you want to add*

*Repeat 5 a-e for any other activities you want to dispute.*

### **Preparing Food**

I was awarded 2 points for the Preparing food activity, as it has been noted that I need to use adapted kitchen utensils. I dispute that I have been awarded only this number of points, as I believe I should have been awarded 4 points under (e) on this activity. I need assistance with preparing and cooking even simple meals. I cannot grip well enough most of the time, due to the pain, weakness and muscle fatigue in my hands, so need assistance to prepare food well enough to cook. As I also have difficulty lifting and moving pans, I need assistance with this part of the activity, otherwise I risk dropping or spilling hot liquids and causing injury to myself.

### **Managing Therapy**

I have been awarded 2 points for Managing Therapy, as the decision maker has noted that I need help to carry out my recommended physiotherapy exercises each day. I dispute, however, that I need this assistance for less than 3.5 hours per week. I have to carry out exercises for 45-60 minutes every day and need help throughout that time to ensure I stretch my limbs correctly. Over the course of a week, this equates to at least 5 hours, so I believe I should have been awarded 4 points under descriptor (d) for this activity.

### **Washing and bathing**

The decision maker has awarded me 2 points for washing and bathing, for the reason that I use an adapted walk-in shower, with a fitted seat. What the decision maker seems to have failed to take into account is the assistance I need to get into the shower and to sit comfortably before I am able to wash myself effectively. I am not safe to get into the shower without support and assistance, as I have fallen several times in the past when I have tried. I need my partner to help me, to make sure I am safe getting in and out, and that I am sitting centrally and safely on the seat. I therefore believe I should have been awarded 3 points on this activity.

### **Managing Incontinence**

I have made it clear on my PIP form that I experience regular and debilitating incontinence, which is not only socially embarrassing, but also physically extremely difficult, cumbersome and time-consuming to manage. Despite the use of suitable aids (pads), I experience leakage on a daily basis, requiring a full strip, shower, wash and change of clothes. I was awarded no points on the Managing Incontinence activity, which I believe is incorrect. I should have been awarded 2 points for the need I have to use suitable aids to help me manage my incontinence.

### **Mobility**

The decision maker has awarded me 8 points on the Mobility activity 2.c, assuming that I am able to walk as far as 50 metres. Most of the time I am unable to walk more than 10-20 metres in one go. As

soon as I try to walk further than this, I become so fatigued and experience such high levels of pain and aches in my muscles that I am unable to walk even around the house without significant difficulty. I fail to understand how the decision to award only 8 points has been reached, when nobody from the DWP or Atos has seen or accurately assessed how difficult it is for me to get around on a daily basis. I believe I should have been awarded 12 points on the activity under descriptor 2.e, as I am unable to reliably walk as far as 50 metres almost all of the time.

## **6 Conclusion**

Because of my fatigue, I found it very difficult to fill out the claim form and did not give as much detail as I have in this submission. The boxes on the form are quite small and it was not clear that such a large amount of information would be needed. I have spent many days writing this with the help of my partner. In addition, I thought that I would have a medical assessment before my claim was decided and would have a chance to talk to someone about my condition.

I enclose a letter of evidence provided by my GP, Dr Khan, which gives more detail about my difficulties and therefore supports my appeal.

On the basis that I satisfy the descriptors within activities 1, 2, 3, 4, 5 and 6 under Daily Living activities and activity 2 under Mobility activities, I wish to appeal against the decision to award me standard rates of Personal Independence Payment for the daily living and mobility components. I believe I satisfy the conditions of entitlement to the enhanced rates of PIP under each component.

## Example 6 Anxiety disorder, depression & agoraphobia

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name:

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision I am appealing:

### PIP Appeal submission

#### 1 Introduction

*What you are appealing against and how many points you scored.*

Following a medical assessment, it has been decided that I qualify for the enhanced rate of the daily living component of Personal Independence Payment. However, I do not qualify for any rate for getting around.

#### 2 Potted history – optional

I am 35 years old. I suffer from an Anxiety disorder, depression and agoraphobia. I had a series of part-time jobs, with the last one ending 2 years ago after a breakdown in my health, but have not been able to stay in work long due to the effect that social interaction has on my anxiety and ability to look after myself.

#### 3 Undisputed scores

*Any points awarded that you think are correct*

Daily Living Component- Total points: 25

1 f. Needs assistance to either prepare or cook a simple meal. 8 points

2 d. Needs prompting to be able to take nutrition. 4 points

3 b. (ii) Needs supervision, prompting or assistance to be able to manage medication or monitor a health condition. 1 point

6 c. Needs either - (i) prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed; or (ii) prompting or assistance to be able to select appropriate clothing. 2 points

9 d. Cannot engage with other people due to such engagement causing either - (i) overwhelming psychological distress to the claimant; or (ii) the claimant to exhibit behaviour which would result in a substantial risk of harm to the claimant or another person. 8 points

10 b. Needs prompting or assistance to be able to make complex budgeting decisions. 2 points

I agree with the above points awarded.

#### 4 Each disputed activity in detail

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity using the following steps:*

*4a Descriptor you think is incorrect.*

*4b What you think the correct descriptor is*

*4c What error the HP or DM has made*

*4d What evidence is in the papers to support you*

*4e Any further evidence you want to add*

*Repeat 4 a-e for any other activities you want to dispute.*

## **Mobility**

The HP has suggested that the following descriptor applies:

11 b. Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant. 4 points

Therefore, I have been awarded a total of 4 points for Mobility

The correct descriptor which applies to me is:

11 f. Cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid. 12 points

My Occupational Therapist has clearly stated in her letter sent with the claim form, that I am unable to leave my house at all without either her accompanying me or my partner, otherwise I become overwhelmingly anxious and distressed. I can also get aggressive as I am so afraid of people talking to me. When I tried to go to the Doctor's alone recently as my partner could not attend, I did not sleep for days beforehand and I had a violent outburst just outside the surgery as I am afraid of people stopping me to talk to me in my local village. I did not go out anywhere for weeks after that. I believe I should be awarded 12 points on the mobility activity "planning and following journeys".

## **5 Any general points about the evidence**

I requested a Home Visit for the medical based on my Occupational Therapist's letter. It was carried out at home. The Health Professional has said that I was at ease throughout the consultation and answered all the questions. The HP said that I could go to the Doctors alone. However, it was stated on my form that I have Anxiety and Agoraphobia. I was very nervous but I tried to hide this and I was so exhausted I could not leave the house for three days afterwards for fear of meeting anyone. The HP was a physiotherapist with no experience of mental health conditions and severe anxiety associated with social interaction, so was not able to make those statements with any certainty. Those observations should not be relied upon.

In the case (CE/3883/2012), about Employment and Support Allowance, the Judge held; "where...the disability analyst is a physiotherapist and the problems she is dealing with are mental health problems the opinion of the physiotherapist as to the conclusions to be drawn have no probative value whatsoever. This is because the physiotherapist has no professional expertise in mental health matters."

## **6 Conclusion**

I believe that I should have been awarded 12 points for my problems with getting around and that I qualify for the enhanced rate of the Mobility component. I believe that the scores for daily living are correct and that the Tribunal need not consider this aspect of my appeal.

## Example 7 Osteoarthritis & obesity

### 1 Your details

*It's worth including all the details below at the start of your submission so that you can be sure it gets to the right people. The date of the decision being challenged is useful to include because it helps remind you and the tribunal about the relevant date – if your condition changed after this date that won't be relevant to this appeal.*

Name:

Tribunal Ref No:

NINO:

Hearing: Date, Time and Venue: (if you know these when you send your submission)

Date of decision I am appealing:

### PIP Appeal submission

#### 1 Introduction

*What you are appealing against and how many points you scored.*

I have not been awarded any Personal Independence Payment and the decision relies heavily on the report by the Healthcare Professional who came to my home. I am appealing against this decision.

#### 2 Potted history – optional

I am 59 years old and suffer from Osteoarthritis, in both knees following an accident in 1998 when I was knocked down by a car. I damaged both knees and had to have surgery. I find mobilising extremely difficult and am unable to take regular exercise. I have difficulty with gripping and moving my wrists. I also suffer from Type 2 diabetes and struggle to maintain a healthy weight and my medical records note that I have a BMI (Body Mass Index) of 41. I have not worked for many years. The last job I had was before the accident and I was a part-time cleaner. I rely on my husband and daughter for help with my care needs and to take me out. I was recently awarded a Blue Badge.

#### 4 Each disputed activity in detail

*Explain in detail why you think the decision is wrong and what the right decision is for a disputed activity using the following steps:*

*4a Descriptor you think is incorrect.*

*4b What you think the correct activity is*

*4c What error the HP or DM has made*

*4d What evidence is in the papers to support you*

*4e Any further evidence you want to add*

*Repeat 4 a-e for any other activities you want to dispute.*

#### Preparing food

I have been awarded no points for preparing food

I believe I should have been awarded 2 points for this activity as I need to use an aid or appliance to be able to either prepare or cook a simple meal. I struggle to move around the kitchen and told the HP that I sit down to prepare a meal. I have to use a special can opener and I have to use a perching stool if I have to move to the hob. I have asked for an assessment from Social Services as I believe that my hands are getting worse and I may need lever taps and something to help me with tipping the kettle. The HP has said that I can make a meal using fresh ingredients but has not taken into account the aids I need to do this.

### **Washing and bathing**

I was awarded no points for washing and bathing.

I believe I should have been awarded 3 points for this activity as I need assistance to be able to get in or out of a bath or shower. My daughter visits me most evenings and every other evening I ask her to help me to get in and out of the bath. I have asked Social Services to assess my need to have a modern shower cubicle fitted. The reason I need her help is because I am in pain when I need to get into the bath. I find it hard to get in the bath and feel anxious that I may fall as my joints are so stiff and painful. I hold onto her with one arm and the rail on the wall for support with the other. She is there to help me physically and in case I fall. The HP has recorded that I only need help 2-3 times a week with getting into the bath. I need this help 3-4 times a week.

### **Toilet needs**

I was not awarded any points for managing toilet needs/incontinence

I believe I should have been awarded 2 points on this activity as I need to use an aid or appliance to be able to manage toilet needs or incontinence. I wear incontinence pads as I have a frequent need to pass urine. However, I find it so painful to get up out of a chair and get to the toilet that I often leak as I have not reached the toilet in time. The HP has referred to this and states that as I do not have any recorded problems with incontinence or with my bladder, that I do not need to use incontinence pads and that mobilising more around the house would be advisable and should be encouraged. However, I do not wear the pads to avoid going to the toilet, I wear them in case I leak which often happens as my mobility is so slow.

### **Dressing and undressing**

I was not awarded any points for dressing or undressing.

I believe I should have been awarded 2 points for this as I need assistance to be able to dress or undress my lower body. I told the HP that I ask my husband to help me with my socks and shoes. If it is warm, I wear sandals but this is uncommon. I cannot bend to reach my feet and I need his help with this twice a day. The HP says that I do not reasonably require this help and that I could manage it unaided. I am not sure why. My GP is not aware of this problem although he does know that I am in a lot of pain and find it hard to bend. My wrists also hurt, which my GP has recorded.

### **Mobility**

No consideration or points were awarded to me on any of the mobility activities

I believe I should be awarded points for moving around. I should have been awarded 10 points as I can stand and then move, using an aid or appliance, more than 20 metres but no more than 50 metres. When I am outdoors I use a stick for support. Inside the house, I am in lot of pain and use the furniture to hold onto. The HP has said that there is no known reason for my claimed mobility difficulties. I have Osteoarthritis but this does not appear to have been considered. The HP has said that the obesity needs to be controlled by a better diet and more exercise and mobility would be easier. My GP has also stated this, but the Osteoarthritis in my knees causes me pain upon mobilising.

### **5 Any general points about the evidence**

I believe that the HP has not given adequate consideration to the effects of my Osteoarthritis preferring to place the emphasis on my lifestyle, diet and my obesity. My GP has referred me to a

weight management clinic to address these problems. However, the pain I have in my knees following the accident and the onset of Osteoarthritis were present even before I became obese. The HP has ignored that I have significant functional difficulties with my wrists and this can affect my ability to look after myself and support myself when mobilising.

## **6 Conclusion**

I believe that I should have been awarded 9 points for daily living activities and that I should therefore be entitled to the daily living component at the standard rate. I should also be awarded 10 points for my mobility difficulties and an award of the standard rate of the mobility component.