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# Early process evaluation of new claims for Personal Independence Payment

By Roy Sainsbury and Anne Corden

## Background

Personal Independence Payment (PIP) is a new benefit, replacing Disability Living Allowance (DLA) for eligible working age people nationally from June 2013. Similarly to DLA, PIP is a non-means-tested benefit intended to contribute to meeting the extra costs of disability.

This study was commissioned by the Department for Work and Pensions (DWP) as an early process evaluation of PIP for new claimants. Its main aims were to understand what was working well and what was not working well in the claiming process for PIP and to identify potential areas for improving delivery.

## Scope of the research

The study comprised individual qualitative interviews with 36 claimants (including people whose claims were awarded, people whose claims were not awarded and people who withdrew their claim, and those who supported them) who received a decision on their PIP claim between September-October 2013. Twelve group discussions with DWP staff who are responsible for administering PIP's processes were also conducted. The fieldwork generated findings relevant to each stage of the claiming process: thinking about claiming, making a claim, completing a PIP2 form, attending a face-to-face assessment and receiving a decision, from the perspective of claimants and staff. The research also examined: the mandatory reconsideration

stage, in which claimants may ask for a decision to be considered; the Special Rules claiming procedures for people with terminal health conditions; and the effect of the claiming process and the decision on claimants. Since the research was a small-scale qualitative study, the results are not necessarily representative of PIP processes in general.

The fieldwork for this research was carried out between November 2013 and January 2014. Therefore, this research provides findings and suggested improvements on the PIP process based on a snapshot at that point in time during the early implementation of PIP. It is recognised that all new administrative arrangements go through a period of settling in before a 'steady state' delivery can be achieved. Nevertheless, it was considered appropriate to undertake an early study in order to identify as quickly as possible what was working well and what was not working so well so that improvements based on sound evidence could be made as soon as practicable.

## Key findings

### Thinking about claiming

Potential claimants got information about PIP from a wide range of sources. Some were well informed before they claimed but others appeared to know very little about the eligibility criteria. Many claimants wanted not only information but **advice** on the likelihood of them

making a successful claim. Some got assistance from DWP or health-related sources, some found help from family, friends or professional support workers and others made claims without any assistance. Some claimants seemed to make claims that had little chance of success, or later withdrew their claims, because they did not understand the eligibility conditions. The main reasons given for initiating a claim were: financial; believing that a health condition entitled them to claim; and an existing entitlement to DLA coming to an end.

### **Making a claim – the initial telephony stage**

In general most claimants interviewed experienced this stage of the claiming process as unproblematic. DWP call centre staff said many claimants had minimal understanding of the new benefit or the status of their initial call and that many did not have available all the information required to start a claim. Validating identities of claimants created a large volume of work. Call centre staff also suggested that some claimants found certain questions intrusive or distressing.

### **Completing the PIP2 form**

The *How your disability affects you* form (known as PIP2) worked well for most claimants. They felt that they could complete it without difficulty and that it allowed them to explain their health and its effect on their lives. In contrast others found some questions difficult to respond to. They felt they were not able to explain adequately how their condition affected them. Some people found particular questions stressful, intrusive or embarrassing to answer. There was evidence that some claimants did not understand that PIP could be awarded to people in work as well as out of work.

The Information booklet worked well for most of those who knew about it and used it. Claimants were generally positive in their comments about the PIP website. Most people understood the importance of supplying additional information

with their PIP2 form and sent supporting documents.

Having access to help from professionals and third party organisations was much valued by those able to do so.

### **The assessment by a health professional**

For most claimants in this study the assessment by a health professional employed by an assessment provider was largely unproblematic. Most people found the conduct of the assessor satisfactory (or better) and said they were able to describe their situations in full. However, some people had complaints about the way they were spoken to, and about being asked to do things that caused them pain. Some people with mental health problems found engaging with the process difficult, which may have led to them not explaining fully how their condition affected their lives.

There was some evidence that claimants did not have full knowledge of the assessment phase, in particular the possibility of having a home visit and of claiming reimbursement for their travel expenses.

### **The decision**

DWP case managers said that the assessment report compiled by assessment providers was the principal determinant of their decision. They felt that the quality of these reports varied and that it was often not easy to base judgements on them. They also believed that having to ask for clarification or correction led to considerable delays in processing claims. Staff, however, saw evidence that Special Rules claims were being prioritised by assessors. Claimants expressed frustration at not being able to get information from DWP about when they might expect a decision.

There was variation in how helpful claimants found decision letters. Some appreciated the scoring against the descriptors and explanatory text. A small number reported problems understanding their letter, or paid little attention

to it beyond what the decision on their claim was. Claimants who remembered a follow-up call after a disallowance letter had generally found this a useful experience, and the call had helped some to understand better how they might ask for a mandatory reconsideration.

## Effect on claimants

Some of the claimants interviewed spoke about the positive effect of being dealt with by polite and friendly staff. The costs of claiming PIP included the time involved, financial costs such as the expense of telephone calls and in seeking information required. Some had had to meet travel expenses involved in going for assessments, as they were not aware these could be reclaimed. The costs of claiming also included emotional effects of the procedure and for some people this meant embarrassment, frustration and the negative effect of being asked intrusive or insensitive questions.

Claimants who received awards said they spent the money on food, transport, heating, clothing, household bills and their families. PIP awards, particularly lump-sum back-payments, had been useful to some people in paying off debts, and some used the money in ways aimed at improving their chances of working.

The effect of a disallowance on claimants was generally described as having to go on managing on a low income, with the additional expenses for some of living with disability or ill-health. There were strong negative emotional reactions for some of those disallowed, who were angry and upset that they did not qualify for the benefit.

## Administrative issues

DWP staff were critical of the 'task-based' system used for administering PIP, which they felt was inflexible and difficult to use. Some staff maintained more personal responsibility for different components of individual claims and believed this was efficient, speeded up processing and reduced claimant frustration.

Staff reported frequent failures of both the computer and telephone systems and criticised the scanning system and process with unreadable documents having to be re-scanned.

DWP case workers and case managers voiced concerns about training and the formal guidance documents they had received. Business Champions and Quality Assurance Managers could be helpful for case workers but all staff said they would prefer adequate formal guidance and good training to ad hoc or informal solutions. Telephony staff found it difficult talking to terminally ill people and sometimes experienced emotional distress. They felt that additional training would help with this.

## Ideas for improvement

Ideas for improving the PIP claiming process were made by claimants and by DWP staff – these could be grouped under four themes:

- suggestions aimed at having better informed claimants;
- suggestions for improving effectiveness and efficiency;
- suggestions for improving internal DWP processes;
- suggestions for improving the claimant experience.

It was beyond the scope of this project to attempt to evaluate the desirability or feasibility of these suggestions.

## Wider issues with possible policy implications

Findings of the use of advice sources provide an argument for policy interest in promoting a **well informed advice sector**, and more widely, a well informed population of potential claimants and their families. There could be potential administrative gains such as reducing the number of claims from ineligible people and improving the quality of PIP2s.

It is possible from this study to identify several places in the PIP claim journey where **delays** can be generated. Delays were unpopular with claimants, though there were only rare accounts of any major hardship or difficulty caused. DWP staff were concerned that they were offering poor customer service. Addressing delays can, therefore, be undertaken on a number of fronts, rather than focusing on any particular stage of the process only.

The **computer driven 'task-based' PIP process** was a new approach in administering disability benefits. Findings suggest that continuous adjustment and refinement of the PIP system will be needed for some time before DWP has achieved a system which processes this new benefit in an efficient and speedy manner.

Findings have shown that some people claiming PIP find it hard to engage with the claiming process. It is useful to reflect, therefore, on how well the **PIP process fits the claiming population**. Any benefit delivery process is likely to work best, and to be equitable, if there is good fit between the requirements and components of the process and the characteristics and circumstances of the target population.

Differences in morale, and in contrast, reported stress levels, between DWP staff in call centres and those who work in the Disability Benefits Centres are reported. An issue for DWP policy makers and managers is, therefore, how **workplace well-being** can be strengthened and maintained among delivery staff while improvements in the overall delivery process are being made.

This study was undertaken soon after the phased implementation of PIP. It is acknowledged that DWP has been monitoring the implementation of PIP and that some progress will already have been made in addressing some of the issues highlighted in the report, since the fieldwork for this study was carried out in late 2013.

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The full report of these research findings is published by the Department for Work and Pensions (ISBN 978 1 909532 21 8. Research Report 867. July 2014).

You can download the full report free from: <http://research.dwp.gov.uk/asd/asd5/rrs-index.asp>

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