



Guide 3b

Disability benefits: Disability Living Allowance and Personal Independence Payment

Disability Living Allowance is a non means-tested benefit for people who have long-term physical or mental health problems.

Personal Independence Payment has replaced Disability Living Allowance from 2013 for people who are aged under 65 making a new claim.

Our free advice service offers expert independent advice on social care, welfare benefits, and befriending schemes. Call **0800 319 6789** to arrange an appointment to speak to one of our advisers or email **advice@independentage.org** All our free guides and factsheets can be ordered by phone or email (as above) or downloaded from **www.independentage.org**





Contents

Introduction to Disability Living Allowance and Personal Independence Payment	Page 3
Disability Living Allowance	Page 4
What is Disability Living Allowance?	
How much is Disability Living Allowance?	
How long will I keep my Disability Living Allowance for?	Page 5
Personal Independence Allowance	Page 6
Who can claim PIP?	Page 7
How much can you receive?	Page 8
How do you claim?	Page 9
Filling in the form for Personal Independence Payment	Page 10
Getting help to fill in the form	Page 12
If you have a terminal illness	Page 13
If you are turned down for Personal Independence Payment	Page 14
Getting support with your appeal	
Examples of who can receive Disability Living Allowance or Personal Independence Payment	Page 15
Motability	Page 16
How disability benefits affect your other benefits	Page 17
Benefits for carers	
If your situation changes	Page 18
Getting your benefit looked at again	Page 19
If you go into hospital	Page 20
If you go into a care home	Page 21
If you go abroad	Page 22
Useful contacts	Page 23

1. Introduction

Disability Living Allowance (DLA) is a benefit for people who claimed when they were under 65 and who need regular care or supervision. It also covers those who have mobility problems.

Personal Independence Payment (PIP) was introduced in April 2013 for new claimants aged under 65, and will eventually replace Disability Living Allowance.

These disability benefits are non means-tested, which means they can be claimed regardless of your income and savings. They are tax-free, and not based on National Insurance contributions. They are paid by the Department for Work and Pensions (DWP).

If you claim Disability Living Allowance or Personal Independence Payment, you can spend the money on whatever you need; it does not have to be spent on your care needs. You do not need to have care workers, relatives or neighbours visiting you - you can claim even if you live by yourself and receive no outside help.

2. Disability Living Allowance

What is Disability Living Allowance?

Disability Living Allowance (DLA) is a benefit paid to people who claimed before the age of 65. There are two components to Disability Living Allowance: the Care component and the Mobility component.

The care component was awarded to people who needed regular help with personal care or needed supervision. The mobility component was available to people who had difficulty walking or needed someone with them to walk outside in unfamiliar places.

You cannot make a new claim for Disability Living Allowance (except for children aged 16 or under). If you are currently under 65 and have health problems, you must claim Personal Independence Payment (PIP) instead (see chapter 3 of this guide).

If you are over 65, you should claim Attendance Allowance (see guide 3a).

How much is Disability Living Allowance?

Care component

There are three weekly rates for the care component. The Lower rate is paid at $\pounds 21.55$ per week, Middle at $\pounds 54.45$ and Higher at $\pounds 81.30$.

Mobility component

There are two weekly rates for the mobility component. The Lower rate is £21.55 per week and the Higher rate is £56.75.

How long will I keep my Disability Living Allowance for?

Generally DLA is paid either for a fixed period or an indefinite award.

Indefinite awards

If you were age 65 or over on 8 April 2013, you will continue to receive DLA for as long as you remain entitled.

If you were under 65 on 8 April 2013 and receive DLA, you will eventually be reassessed for Personal Independence Payment (see chapter 3).

Fixed period awards

If you are being paid DLA for a fixed period and were over 65 on 8 April 2013, you must renew your claim within a year to continue to receive DLA. Otherwise you may have to claim Attendance Allowance instead.

If your fixed period comes to an end before you reach 65, you will be reassessed for Personal Independence Payment.

3. Personal Independence Payment (PIP)

What is Personal Independence Payment?

Disability Living Allowance (DLA) is now being replaced with a new benefit called the Personal Independence Payment (PIP). Everyone who is under 65 and claiming for the first time will now claim PIP rather than DLA.

If you already receive DLA, and you are under 65, you will be reassessed to see whether you are entitled to PIP instead. This will happen sometime before March 2016. If you are found to be eligible, you will then receive PIP right away rather than DLA. If you are not found to be eligible for PIP, your DLA will stop and will not be replaced.

People aged 65 or over on 8 April 2013 who are already receiving DLA are not affected by this change, and will not be reassessed for PIP.

PIP has many similarities with DLA, for example:

- It has two components: a daily living component and a mobility component.
- It is paid to you whether you are working or not.
- You are free to spend the money in the way that suits you best.
- You are not able to claim PIP once you are 65 years old (you can then apply for Attendance Allowance, see guide 3a), but you will be able to stay on PIP if you claimed or received it before you reached the age of 65.

6

Who can claim?

To qualify for PIP, you must meet the following criteria:

- be aged between 16-64
- satisfy the daily living and/or mobility activities test (see list below) for three months prior to claiming and be likely to continue to satisfy this test for a period of at least nine months after claiming. If you claim PIP as soon as you start needing help, this means that you may have to wait up to three months before getting a payment.
- have lived in the UK for at least two of the last three years, and you must not be subject to immigration control.

If you have a terminal illness, your claim will be fast-tracked to enable you to receive this benefit as soon as possible (see chapter 5).

Daily living activities test

There are 10 daily living activities. To qualify for PIP, you are given a score for each activity depending on how much help you need with it. Your scores are added up and if you get enough points you are awarded PIP.

- preparing food and drink
- eating and drinking
- managing therapy or monitoring a health condition
- bathing and grooming
- managing toilet needs or incontinence
- dressing and undressing
- communicating verbally
- reading and understanding signs, symbols and words
- engaging socially (meeting people face to face)

- making financial decisions.

Mobility activities test

The two mobility activities that are assessed are:

- planning and following a journey
- moving around (inside and outside)

How much can you receive?

1. Daily Living Component

The daily living component of PIP has two weekly rates:

- Standard rate £54.45. The standard rate is paid if you have a limited ability to carry out daily living activities
- Enhanced rate £81.30. The enhanced rate is paid if you have a severely limited ability to carry out daily living activities.

2. Mobility Component

Similarly, the mobility component of PIP has two weekly rates:

- Standard rate £21.55. The standard rate is paid if you have limited mobility.
- Enhanced rate £56.75. The enhanced rate is paid if you have severely limited mobility. (You are entitled to the Motability scheme - see chapter 8, and tax exemption).

8

How do you claim PIP?

There are usually three steps to claiming Personal Independence Payment:

1. Complete the Personal Independence claim form (PIP1) over the phone

This is your initial claim which you make over the phone by calling 0800 917 2222. If someone makes the call on your behalf, you need to be present to confirm your identity, though if someone holds power of attorney they can make the claim on your behalf. You are asked to supply your name, address, contact details, payment details, nationality etc and whether you are in hospital or residential care or if are terminally ill.

2. Fill in the form 'How your disability affects you' (PIP1003)

This consists of questions about the activities tests. You are sent a paper claim form to complete, providing details about your medical condition or disability.

3. Most people then have to attend a face-to-face assessment

You will be asked to attend an assessment, or a doctor will visit you to obtain more details from you about your situation. They may also write to your GP.

Following this, you will be informed in writing if you have been awarded PIP, and the rate that you are eligible for. This should take place within one to two months of your claim.

4. Filling in the form for Personal Independence Payment

The 'How your disability affects you' form

It's important to give as much detail about your difficulties as possible in your claim form, including the time it takes you to do certain activities and how much you need help even if there is no one to help you. This will give the person assessing your claim a clear picture of your problems. Try to provide additional information about your difficulties in the white box at the end of each question that applies to you.

If you have difficulties with any of the following activities you may be able to claim the daily living component of PIP, and these should be described in detail on the claim form:

- getting dressed or undressed
- getting into or out of the bath
- washing, shaving or brushing your teeth
- going to or using the toilet
- dealing with incontinence
- taking medication or receiving medical treatment
- walking, standing or using stairs
- sitting down or getting out of a chair
- getting in or out of bed, or turning over in bed
- preparing a hot meal

OR

- you are unsteady on your feet
- you have falls
- you cannot see or hear very well
- you get confused or suffer from anxiety

- you are prone to seizures or dizzy spells
- you find it difficult to control your behaviour
- you forget to take your medication or take too much
- you cannot be left alone
- you forget to turn off appliances, lock doors etc.

If you have a visual or hearing impairment, it could also cover needing help to read post, answer the telephone or communicate with others.

Top tips when filling in the form

- Keep in mind that a medical diagnosis alone will not entitle you to a disability benefit. If you have a medical condition or diagnosis, you should give its medical name (if you know it), but most importantly you should explain how this affects your day to day life and what tasks you experience difficulties with. Do not assume that the decision-maker knows about your condition – you know your situation best.
- Ask for help from people that know you well, such as, family, friends or carers, to help you fill in the application form. Some people find that as they have lived so long with their health problem, or that their difficulties have increased over a prolonged period of time, it is easy for them to overlook or underestimate their problems. It can be useful to have someone else's view
- It may be helpful to keep a diary of what problems you face with tasks over the course of a week. It may be that you forget about difficulties with tasks, such as cutting your toe nails, which you may not do every day.
- Remember that the Department for Work and Pensions is interested in what you can't do, not what you can do. If you struggle to do things, find them painful or it takes you a long time, you should emphasise this on the form.

If there are things you avoid doing because it is difficult for you, for example, you avoid wearing shoes with laces because you cannot bend down to do up the laces, put this on the form.

- Some days you may be able to do more for yourself than other days, but it is important not to fill in the form as if it was one of your best days. Complete the form with details of the help you need on your bad days and say how often this happens.
- Explain what happens when you don't receive the care you need – especially if this has left you at risk or struggling to manage in the past. This information will help the DWP to understand your needs better.
- You should answer as many questions as possible and put down as much detail as you can, even about things that you find embarrassing or seem trivial. Give examples of your difficulties, such as when you have fallen or hurt yourself trying to do tasks. It can be useful to include supporting letters from your GP or your consultant
- It is important to provide your GP's contact details and permission to contact them or it may delay your claim
- Don't mention the help you need with household tasks such as cleaning the house, shopping or gardening – these tasks will not be considered and may distract from the personal care needs you have that need to be taken into account.

Once you have filled in the claim form, you should send it back to the address given on the form.

You can ask Age UK (0800 169 6565, ageuk.org.uk) or your local Age Concern for help in completing the form.

5. If you have a terminal illness

There are special rules to speed up applications for people who have a terminal illness (where their life expectancy is not expected to be more than six months). Claims under the special rules are not subject to the usual qualifying rules for PIP, and should be dealt with within 15 days without the need for a medical examination.

You should ask your doctor or consultant to complete a DS1500 form, which provides the necessary information about your condition to be able to process your application under the special rules. Once you have a completed DS1500 form, you do not have to fill in the whole of the PIP claim form, but you do need to tick the box that says you are claiming under the special rules. You will automatically be awarded the higher rate of the daily living component of PIP. If you want to claim the mobility component of the claim form.

If you are caring for someone who is terminally ill but who does not know how seriously ill they are, you can claim on their behalf. The benefit will still be paid directly to the person who is ill but there will be no indication on their award letter of their prognosis.

6. If you are turned down for Personal Independence Payment

Step one: find out why

If your claim for Personal Independence Payment is refused and you haven't been told why, you can ask for a written or spoken explanation of the reasons for the decision. You must do this within 14 days of the decision being made.

Step two: mandatory reconsideration

If you do not agree with the decision, you must ask for it to be reconsidered. You must do this within a month from the date the decision was taken. This deadline can be extended if there are special reasons for your delay in responding, for example, if you have been ill or you are still waiting for a written explanation of the reasons why your claim was refused.

You can make your request for a reconsideration over the phone, but it is best to put it in writing and keep a copy for yourself as proof of your request. Make sure you explain why you think the decision was wrong, and include any evidence you have to support what you are saying (such as a supporting statement from your doctor).

Once the decision has been reconsidered, you will be sent two copies of the 'mandatory reconsideration notification'. This is to tell you whether or not the decision has been changed. You will need to use one of these copies if you decide to appeal the decision.

Important: You cannot appeal a decision about Personal Independence Payment unless you have first asked for it to be reconsidered. This is why it is called a 'madatory reconsideration'.

Step three: appeal

If the reconsideration does not bring the result you think it should, you can lodge an appeal against the decision using a SSCS1 form from HM Courts and Tribunals Service (0300 123 1142). This service is independent from the Department for Work and Pensions (DWP), which administers Personal Independence Payment. You have one month from the date that you received the mandatory reconsideration notice to make an appeal.

When filling in the form, you might want to get support from an advice organisation, such as your local Age UK (0800 169 6565, ageuk.org.uk) or your local Age Concern. They may be able to help you to explain why you disagree with the decision.

There will be a hearing to decide on your appeal. In the appeal form, you will need to say whether you (or a representative for you) would like to attend this hearing. If you prefer, you can ask for your appeal to be decided upon based on what you write in the form and any other evidence you send.

You will get an acknowledgement letter once you have sent your appeal form. A decision should be made about your appeal within two months.

If your appeal or request for reconsideration is successful, the DWP will backdate any award to the date of the original decision.

7. Examples of who can receive Disability Living Allowance or Personal Independence Payment

- Miss Robinson is 63. She is unsteady on her feet and has experienced several falls. Since her most recent fall when she broke her arm, she has lost her confidence in going out of the house on her own and now tends to use her furniture to lean on as she moves around her home to try and keep her balance. She finds going upstairs particularly difficult and it takes her a long time. She has just starting claiming Personal Independence Payment.
- Mr Philby is 64 and has arthritis in his hips, knees and feet. He has always been very independent but now finds that it takes him so much longer to undertake his daily tasks. One example of this is that when he walks to his local shop to buy groceries, he has to stop regularly to rest. The shop is only about 180 metres away but Mr Philby needs to rest two or three times, using the seat at the bus stop and sitting on garden walls. He has been claiming Disability Living Allowance for 2 years, but as he is still under 65, he will be moved onto Personal Independence Payment sometime before March 2016.
- Mr Hamilton needs regular renal dialysis at home. He needs help and supervision from his wife each time he has this treatment. He is 70 and has been receiving Disability Living Allowance (DLA) for 7 years. He will continue to get DLA rather than being transferred onto Personal Independence Payment, as he was over 65 on 8 April 2013 when PIP was introduced.

8. Motability

If you receive the higher rate mobility component of DLA, or the enhanced rate of mobility of the Personal Independence Payment, you may be able to exchange it (in full or part of it) to lease or hire purchase a Motability care, electric scooter or powered wheelchair.

To find your nearest provider, contact the Motability scheme (0300 4564566; motability.co.uk) .

You or the person who drives you around are also exempt from paying road tax and should receive an exemption certificate.

9. How disability benefits affect your other benefits

Disability benefits are not included in the calculation for Pension Credit, Housing Benefit or Council Tax Support. In many cases, being awarded DLA/PIP can mean you are entitled to a higher rate of these other benefits, or you suddenly become eligible to receive these benefits especially if you live alone or with someone who also receives a disability benefit. This is because receiving this benefit can increase your 'Appropriate Amount' - the amount of money the government says you are entitled to receive a week.

If you are awarded DLA/PIP and you are already receiving Pension Guarantee Credit, Housing Benefit or Council Tax Benefit, you should inform the Pension Credit centre and your Local Authority housing and council tax benefit office straight away.

Benefits for carers

If you have a carer and you are awarded DLA/PIP, your carer may then be entitled to claim Carer's Allowance. But please note, if your carer claims Carer's Allowance it can have an effect on both their benefits and yours, so it is advisable to seek advice before making a claim. For further information about Carer's Allowance and to obtain a claim form (DS700), please contact the Carer's Allowance Unit on 0345 608 4321. You may also want to see our guide: Carers: What support is available? (Guide 10).

10. If your situation changes

If you currently receive the lower/ medium rate of Disability Living Allowance or Personal Independence Payment but your care needs have changed, you may be entitled to a higher rate. You should contact the Disability Benefits Centre dealing with your benefit and ask for your claim to be looked at again. You will probably be asked to complete a form giving details of how your needs have changed.

You need to meet the criteria for the higher rate for three months before it will be paid.

If you are over 65 and receiving Disability Living Allowance

If you were aged 65 or over on 8rd April 2013 (when Personal Independence Payment was introduced) and receive Disability Living Allowance, you will continue to receive Disability Living Allowance instead of being transferred onto PIP.

If you receive the lower or middle rate of the care component and your care needs increase, you can ask for your benefit to be looked at again and it is possible you may be awarded a higher rate.

If you were awarded a mobility component of DLA before the age of 65 you can keep it, but you cannot become entitled after the age of 65, or be considered for a higher rate. This applies unless you can prove that you met the qualifying conditions before the age of 65.

If you are under 65 and receiving Disability Living Allowance

If you are under 65 and receive Disability Living Allowance you will eventually be moved over to PIP. If your needs change before this, and you ask for your DLA to be looked at again, you will be invited to claim for PIP (see chapter 3). You should seek advice if this applies to you.

Getting your benefit looked at again

It is important to note that if you apply for your disability benefit to be looked at again, the decision maker will look at your whole award, not just the part that you want them to look at again and could decide to maintain your existing rate, reduce your rate to a lower level or stop your award completely. For this reason you may wish to ask for advice before asking the DWP to look at your award again. You can contact your local Age UK (0800 169 6565, ageuk.org.uk), Age Concern or Citizens Advice Bureau (citizensadvice.org.uk).

If you go into hospital

You should let the Disability Benefits Centre know if you have been in hospital for 28 days, as your DLA or PIP will be stopped after 28 days if you are admitted to an NHS hospital, or similar (for example, a care home where you are fully funded by the NHS.

It will restart as soon as you return home, but you will need to let the Disability Benefits Centre know the date you are discharged from hospital. If you do not tell them, you may be overpaid and have to pay back the money you owe.

If you are receiving the Severe Disability Premium you should let the Pension Service and your Local Authority Housing and Council Tax Benefit office know when your disability benefit stops. If someone receives Carer's Allowance for looking after you, their benefits will also be affected, so they should let the relevant offices know, such as the Carer's Allowance Unit, Pension Service or Jobcentre Plus and Local Authority.

If you go back into hospital after being at home for less than 29 days, the two (or more) hospital stays are added together and your disability benefit will stop after a combined total of 28 days. You will still be paid for the days spent at home in between the hospital stays.

If you were not already receiving DLA or PIP before going into hospital, you can claim whilst you are in hospital but you will not receive a payment until you return home.

If you move into a care home

If you get help from the council to pay for your care

If you live receive help towards the care home fees from your local council (permanently or under the 12 week disregard), the care component of DLA or PIP will stop after 28 days. The mobility component of is not affected, so you should continue to receive this.

If you have entered into a deferred payments arrangement to cover the period whilst your property is being sold, you are still entitled to receive DLA/PIP and Pension Guarantee Credit.

If you have entered into a deferred payments arrangement but do not have your property on the market, you are still entitled to receive the disability benefit but not Pension Guarantee Credit.

If you are paying your own care home fees

You are still entitled to receive DLA or PIP. If you were not already claiming, it is important to put in a claim for Personal Independence Payment, or Attendance Allowance if you are over 65 (see guide 3a).

You should get the higher rate of the care component if you have 24-hour care and/or supervision needs, but you may get the lower rate if you only have needs during the day or night, but not both.

If the NHS pays your care home fees

This is called NHS Continuing Healthcare. You will lose your entitlement to your disability benefit after 28 days.

If you go abroad

It is sometimes possible to continue to receive disability benefits when you go abroad, but this is a complicated area and you should seek advice from the Disability Living Allowance helpline (0345 712 3456) or the PIP helpline (0345 850 3322) if you want clarification on your circumstances.

Generally speaking, you can keep claiming your disability benefit if you're going abroad for up to 13 weeks.

If you go abroad for medical treatment, you may be able to receive DLA/PIP for up to 26 weeks. You should talk to the Department for Work and Pensions in advance to discuss your situation.

Moving abroad

You may be able to continue receiving the care component of DLA/PIP if you move to another country in the European Economic Area (EEA) or Switzerland. You must have sufficient National Insurance contributions and be eligible for either State Pension, contribution-based Employment and Support Allowance, Bereavement Benefits or long-term Incapacity Benefit. You will need to contact the Department for Work and Pensions to check whether you qualify.

If you go abroad permanently to a non-EEA country, your disability benefit will stop.

For more information about benefits abroad, see our guide: Moving to and returning from abroad: benefits and services (Guide 5).

11. Useful contacts

For Disability Living Allowance (DLA)

Contact the Disability Living Allowance helpline (0345 712 3456, Textphone 0345 722 4433). The helpline is open Monday to Friday, 8am to 6pm.

Or you can write to:

Disability benefits centre

Warbreck House

Warbreck Hill

Blackpool

Lancashire FY2 0YE

For more information about Disability Living Allowance, visit gov.uk/dla-disability-living-allowance-benefit

For Personal Independence Payment claims

Contact the PIP claims line (0800 917 2222, Textphone 0800 917 7777). The claims line is open Monday to Friday, 8am to 6pm.

Or you can write to:

Personal Independence Payment New Claims

Post Handling Site B

Wolverhampton WV99 1AH

For more information about Personal Independence Payment, visit gov.uk/pip

This guide is not a full explanation of the law and is aimed at people aged over 60.

If you need any of this information in another format (such as large-print or Braille), please contact our Information Manager on 020 7605 4294 or email comms@independentage.org

If you have found our advice useful, please consider supporting us by raising money, volunteering or making a donation. We receive no state funding and rely on support from individuals, trusts and other sources to continue providing our services to hundreds of thousands of people in need.

For further information on how to support us, please see our website independentage.org or call 020 7605 4288.

© Independent Age



Independent Age 6 Avonmore Road London W14 8RL T 020 7605 4200 E charity@independentage.org www.independentage.org Advice line 0800 319 6789

Independent Age is the operating name of the Royal United Kingdom Beneficent Association Registered charity number 210729

View our page on Facebook Follow us on Twitter @IndependentAge charity number 210729