****

**Personal Independence Payment Activities and Descriptors**

**Some (PIP) rules and meanings that relate to the Activities and Descriptors**

**TWO IMPORTANT TERMS**

1. **Completing an activity *Reliably***

A claimant must be able to complete an activity ‘reliably’, which in PIP involves four conditions:

1. *To an acceptable standard* (this has no more specific definition) This term is not defined in legislation so should be interpreted as within a range from “what is not perfect but is sufficient, to an extremely high standard at the top end. In order for it to be acceptable, the standard which a claimant achieves must fall within this range”.

2. *Repeatedly* – ‘As often as is reasonable to require’ – Some individuals may need to complete an activity more frequently as a result of their physical or mental health condition. For some individuals, completion of the activity once may hinder further completion for a reasonable period of time. This means that they cannot be considered to be completing the activity repeatedly. Notably this can apply if there is a period in a day where a claimant is precluded from carrying out an activity, as long as the impact is more than trivial. Consideration should be given to whether there are portions of a day where a claimant is more grossly impacted.

*“34. (…) It seems to me it makes no sense to say a person is able to perform an activity as often as reasonably required if they cannot do so for a part of the day in which they would otherwise reasonably wish or need to do so“* – Judge Hemmingway - CPIP/2287/2015

3. *In a reasonable time scale* – A claimant shouldn’t take more than twice as long to complete an activity than you would expect someone without an impairment.

4. *Safely* – Means unlikely to cause harm to the claimant or another person either during or after completion. A recent Upper Tribunal panel established that the harm does not have to be likely to occur on a majority of days, but that an assessment of likelihood versus severity should be undertaken to “*consider whether there is a real possibility that cannot be ignored of harm occurring*” - [2017] UKUT 105 (AAC), Para 56

Every activity should be thought of with these conditions in mind, so for example:

*1a. Can prepare and cook a simple meal unaided,* should be read as: *On a majority of days can prepare and cook a simple meal unaided safely, in a reasonable timescale, to an acceptable standard, and as often as is reasonable to require.*

If a claimant cannot satisfy all of these caveats they cannot reliably complete the activity and a different descriptor must be selected.

1. **Types of *assistance*:**

In practical terms, throughout the form there are four main types of support PIP assesses the need for. Several descriptors have additional, more specific definitions (for example whether someone needs “social support” in the ‘Engaging with other People’ activity), but as a working rule of thumb if a claimant cannot reliably manage an activity unaided consider whether they are likely to require the following types of support:

* Prompting – “reminding, encouraging or explaining by another person”
* An Aid or Appliance – Which tends to be more widely applicable in cases with physical health problems, but could include, for example, the need to use a dossette box to manage medication, or an alarm to remind someone to eat or drink.
* Supervision – “the continuous presence of another person for the purpose of ensuring the claimant’s safety”
* Assistance – “physical intervention by another person and does not include speech”

It should be stated if a claimant would be unable to reliably complete an activity even with the above types of support. For example, a claimant with severe OCD who always takes an hour to shower, regardless of assistance, cannot be said to be able to wash in a reasonable timescale and so cannot ‘reliably’ manage to wash at all.

**THE ACTIVITIES AND DESCRIPTORS**

**DAILY LIVING ACTIVITIES**

1. Preparing food

*Descriptors*

1. Can prepare and cook a simple meal unaided. (Points=0)
2. Needs to use an aid or appliance to be able to either prepare or cook a simple meal (Points=2)
3. Cannot cook a simple meal using a conventional cooker but is able to do so using a microwave. (Points=2)
4. Needs prompting to be able to either prepare or cook a simple meal. (Points=2)
5. Needs supervision or assistance to either prepare or cook a simple meal. (Points=4)
6. Cannot prepare and cook food. (Points=8)

This means the ability to both prepare *and* cook a simple meal, defined as “a cooked one-course meal for one using fresh ingredients”. *Cook* is also defined as “heat food at or above waist height”, so requires the ability to reliably use a hob (not the main oven) in addition to chopping and preparing the fresh ingredients. *Unaided* means with the use of an aid or appliance or without supervision, prompting or assistance. Carrying items around the kitchen or carrying food to where it will be eaten is not included in this activity.

*Prompting* = reminding or encouraging or explaining by another person

*Supervision* = the continuous presence of another person for the purpose of ensuring the claimants safety.

*Assistance* = physical intervention by another person and does not include speech.

PIP assesses whether a claimant would need prompting, an aid or appliance (e.g. a perching stool/lightweight saucepans), supervision or assistance, or whether the claimant would be able to prepare the food but could only cook it in a microwave. Claimants who can prepare food but cannot cook it would not satisfy the descriptor.

The meaning of ‘safely’ is frequently relevant here: claimants who might harm themselves with knives or by burning themselves on the hob (either deliberately or accidentally), or who might forget they are cooking and leave something on the hob which may risk a fire could score additional points for needing supervision, even if the harm itself isn’t likely to occur on a majority of days.

2. Taking nutrition

*Descriptors*

1. Can take nutrition unaided. (Points=0)
2. Needs (Points=2) -
3. to use an aid or appliance to be able to take nutrition; or
4. supervision to be able to take nutrition; or
5. assistance to be able to cut up food.
6. Needs a therapeutic source to be able to take nutrition. (Points=2)
7. Needs prompting to be able to take nutrition. (Points=4)
8. Needs assistance to be able to manage a therapeutic source to take nutrition. (Points=6)
9. Cannot convey food and drink to their mouth and needs another person to do so. (Points=10)

*“The defined term ‘taking nutrition’ refers solely to the act of eating and drinking and so the quality of what is being consumed is irrelevant for the purposes of daily living activity 2.” (PIP Assessment Guide, Page 86, November 17).*

*Unaided* = same as in activity 1.

*Take nutrition* = a. cut food into pieces, convey food and drink to one’s mouth and chew or swallow food and drink or b. take nutrition using a therapeutic source.

These descriptors therefore do not assess whether someone is eating their five-a-day, but whether they are actually able to simply consume food and drink reliably. Caselaw has previously indicated that difficulty managing a specialist (e.g. a person with diabetes) diet would come under Descriptor 3, managing therapy (CPIP/721/2016).

*Therapeutic source* = parenteral or enternal tube feeding, using a rate limiting device such as a delivery system or feed pump.

In addition to assessing the need for an aid or appliance (e.g. adapted cutlery) or assistance with a therapeutic food source, the mental health side of this activity revolves around the need for prompting. This is easier to demonstrate when there is a diagnosed eating disorder, but other conditions like severe depression can be taken into account.

Cases where there are problems with overeating can also potentially be scored as needing prompting. The PIP Assessment guide states: *“In cases where obesity is a factor and where there is no impaired cognition which would suggest a lack of choice or control then this descriptor [needing prompting to take nutrition] would not apply.” –* PIP Assessment Guide, Pg. 87, Nov 2017

The reverse of this indicates that where there is an impairment that affects the claimant’s control over their appetite it can be scored. In such cases a clear link between the underlying mental health condition and problems with overeating should be drawn.

The meaning of “safety” here can refer to the risk of choking on food.

3. Managing therapy or monitoring a health condition

*Descriptors:*

1. Either (Points=0) –

i. Does not receive medication or therapy or need to monitor a health condition; or

ii. Can manage medication or therapy or monitor a health condition unaided.

1. Needs any one or more of the following (Points=1) –

i. to use an aid or appliance to be able to manage medication;

ii. supervision, prompting or assistance to be able to manage medication

iii. supervision, prompting or assistance to be able to monitor a health condition.

1. Needs supervision, prompting or assistance to be able to manage therapy that takes no more than 3.5 hours a week. (Points=2)
2. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 3.5 but no more than 7 hours a week. (Points=4)
3. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 7 but no more than 14 hours a week. (Points=6)
4. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 14 hours a week. (Points=10)

This assesses whether someone needs supervision, prompting, assistance, or an aid and appliance (e.g. a dossette box/alarm) to manage their medication. It also considers someone is needed to monitor the claimant’s condition, which means detect changes in the claimant’s condition and take action recommended by a health professional to prevent deterioration.

*Manage medication or therapy* = take medication or undertake therapy, where a failure to do so is likely to result in a deterioration in the claimant’s health.

*Monitor Health* = a) detect significant changes in the claimant’s health condition which are likely to lead to a deterioration in health and b) take action advised by a registered doctor, registered nurse or health professional who is regulated by the Health and Care Professionals Council, without which the claimant’s heath is likely to deteriorate.

This activity also considers whether someone needs prompting or assistance to ‘manage therapy’*,* which in PIP means therapy that is undertaken *at home* and is recommended by a health professional.

*Medication* = medication to be taken at home which is prescribed or recommended by a registered doctor, pharmacist or nurse.

*Therapy* = therapy to be taken at home which is prescribed or recommended by a registered doctor, pharmacist, nurse or health professional regulated by the Health and Care Professionals Council.

Although the therapy must take place at home there is nothing in law that states the prompting/assistance must be too. For example, someone set DBT ‘homework’ but who sees their therapist at the mental health team to review it may still theoretically come under this descriptor.

Safety in this context relates to the risk of accidental or intentional overdose, forgetting to take or taking too little medication and forgetting to carry out therapy.

*Note: There is overlap between the ‘monitoring’ and ‘therapy’ descriptors and at the time of writing the legal meaning of what constitutes ‘therapy’ is awaiting a test case.*

4. Washing and bathing

*Descriptors*

1. Can wash and bathe unaided. (Points=0)
2. Needs to use an aid or appliance to be able to wash or bathe. (Points=2)
3. Needs supervision or prompting to be able to wash or bathe. (Points=2)
4. Needs assistance to be able to wash either their hair, or body below the waist. (Points=2)
5. Needs assistance to be able to get in or out of a bath or shower. (Points=3)
6. Needs assistance to be able to wash their body between the shoulders and waist. (Points=4)
7. Cannot wash and bathe at all and needs another person to wash their entire body. (Points=8)

Washing and bathing assesses both the ability to perform the act of washing itself and the ability to get in or out of both an unadapted bath or shower. *Bathe* includes getting into or out of an unadapted bath or shower. *Washing* includes cleaning the whole body including removing dirt and sweat. But does not include shaving or the ability to dry oneself.

Safety considerations include the risk of falling or slipping.

5. Managing toilet needs or incontinence

*Descriptors*

1. Can manage toilet needs or incontinence unaided. (Points=0)
2. Needs to use an aid or appliance to be able to manage toilet needs or incontinence. (Points=2)
3. Needs supervision or prompting to be able to manage toilet needs. (Points=2)
4. Needs assistance to be able to manage toilet needs. (Points=4)
5. Needs assistance to be able to manage incontinence of either bladder or bowel. (Points=6)
6. Needs assistance to be able to manage incontinence of both bladder and bowel. (Points=8)

Managing toileting or incontinence needs looks at a claimant’s ability to get on and off an unadapted toilet, evacuate the bowels or bladder and clean themselves afterwards. Aids or appliances might include hand rails or incontinence pads.

*Safety* concerns include slipping or falling, a lack of hygiene

6. Dressing and undressing

*Descriptors:*

1. Can dress and undress unaided. (Points=0)
2. Needs to use an aid or appliance to be able to dress or undress. (Points=2)
3. Needs either (Points=2) -
4. prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed; or
5. prompting or assistance to be able to select appropriate clothing.
6. Needs assistance to be able to dress or undress their lower body. (Points=2)
7. Needs assistance to be able to dress or undress their upper body. (Points=4)
8. Cannot dress or undress at all. (Points=8)

*Dress and Undress* includes put on and take off socks and shoes

Dressing and undressing looks at whether a claimant needs prompting to get dressed or undressed or put on clean or appropriate clothes, or physically whether they would need an aid or appliance (e.g. long-handled shoe horn) or assistance from another person.

On mental health grounds the need for prompting is where claimants are typically likely to score points in the self-care activities. The need of an aid or appliance, physical assistance or supervision to perform them is also assessed.

7. Communicating verbally

*Descriptors*

1. Can express and understand verbal information unaided. (Points=0)
2. Needs to use an aid or appliance to be able to speak or hear. (Points=2)
3. Needs communication support to be able to express or understand complex verbal information. (Points=4)
4. Needs communication support to be able to express or understand basic verbal information. (Points=8)
5. Cannot express or understand verbal information at all even with communication support. (Points=12)

These descriptors (and Reading and understanding signs, symbols and words -below) have a relatively low cut off bar and assess a claimant’s native language skills. These will tend to apply where there is an underlying speech and language condition (e.g. learning disability, ASD, deafness).

Communicating verbally looks at a claimant’s ability to express or understand verbal information “in a simple sentence” (basic verbal information) or in “either more than one sentence or one more complicated sentence” (complex verbal information). Difficulty communicating with people due to anxiety is assessed under the “engaging with other people” descriptor.

*Communication support* means support from a person trained or experienced in communicating with people with specific communication needs, including interpreting verbal information into a non-verbal form and vice versa.

*Complex verbal information* means information in the claimant’s native language conveyed verbally in either more than one sentence or one complicated sentence. *Basic verbal information* means information in the claimant’s native language conveyed verbally in a simple sentence.

8. Reading and understanding signs, symbols and words

*Descriptors*

1. Can read and understand basic and complex written information either unaided or using spectacles or contact lenses. (Points=0)
2. Needs to use an aid or appliance, other than spectacles or contact lenses, to be able to read or understand either basic or complex written information. (Points=2)
3. Needs prompting to be able to read or understand complex written information. (Points=2)
4. Needs prompting to be able to read or understand basic written information. (Points=4)
5. Cannot read or understand signs, symbols or words at all. (Points=8)

Reading involves the ability to understand “signs, symbols and dates written or printed in standard size text” (basic verbal information) or “more than one sentence of written or printed standard size text” (complex written information).

A claimant’s inability to read must be linked to an underlying health condition, so someone who cannot read purely because they were never taught in childhood would not score. The ability to remember and retain information is not within the scope of activity covered in this descriptor.

9. Engaging with other people face-to-face

*Descriptors*

1. Can engage with other people unaided. (Points=0)
2. Needs prompting to be able to engage with other people. (Points=2)
3. Needs social support to be able to engage with other people. (Points=4)
4. Cannot engage with other people due to such engagement causing either (Points=8) –
5. overwhelming psychological distress to the claimant; or
6. the claimant to exhibit behaviour which would result in a substantial risk of harm to the claimant or another person.

*“Engage socially* means:

(a) interact with others in a contextually and socially appropriate manner;

(b) understand body language; and

(c) establish relationships.

The descriptor assesses whether a claimant needs prompting or ‘social support’ to engage with others reliably, or whether they cannot reliably engage at all, either due to the claimant exhibiting “overwhelming psychological distress” or “behaviour which would result in a substantial risk of harm to the claimant or another person”. An inability to engage face to face must be due to the individual’s impairment and not just due to their personal preference.

It is worth bearing in mind Judge Ovey’s comments in CPIP/3656/2016 that: “*it is necessary to consider the ability to engage in a wider range of situations than simply situations involving family, established friends and professionals with clearly defined roles.”*

*Social support* means support from a person trained or experienced in assisting people to engage in social situations*,* and can include family members or close friends as well as professionals. Case law has stated that the social support doesn’t necessarily need to be at the time of interaction (CPIP/1984/2015 para 31), but there must be a clear reason why the higher level of support provided by a professional or a specific person is necessary, as opposed to simply being what is likely available.

*Psychological distress* means distress related to an enduring mental health condition or an intellectual or cognitive impairment which results in a severe anxiety state in which the symptoms are so severe that the person is unable to function.

*Safety* in this content refers to the risk of becoming violent and causing harm to oneself or others.

10. Making budgeting decisions

*Descriptors*

1. Can manage complex budgeting decisions unaided. (Points=0)
2. Needs prompting or assistance to be able to make complex budgeting decisions. (Points=2)
3. Needs prompting or assistance to be able to make simple budgeting decisions. (Points=4)
4. Cannot make any budgeting decisions at all. (Points=6)

This assesses whether a claimant needs help with “simple” or “complex” budgeting decisions. *Complex budgeting decisions* looks at a claimant’s ability to generally manage household finances, specifically: “(a) calculating household and personal budgets; b) managing and paying bills; and (c) planning future purchases.”

“Simple budgeting decisions” means decisions involving a) calculating the costs of goods” and b) calculating change required after purchase.

The descriptor for needing prompting with complex budgeting decisions is more likely to apply in claimants with mental health conditions and claimants’ difficulties with organisation, motivation to check post and deal with bills or risks of impulsive spending should be described.

**MOBILITY ACTIVITIES**

1. Planning and following journeys

*Descriptors:*

1. Can plan and follow the route of a journey unaided. (Points=0)
2. Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant. (Points=4)
3. Cannot plan the route of a journey. (Points=8)
4. Cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid. (Points=10)
5. Cannot undertake any journey because it would cause overwhelming psychological distress to the claimant. (Points=10)
6. Cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid. (Points=12)

This activity is designed for limitations on mobility deriving from mental health, cognitive and sensory impairments. Cognitive impairment includes orientation (understanding of where, when and who the person is), attention, concentration and memory. The meaning of “follow the route of a journey” in this activity has been legally debated since PIP’s inception, but is now confirmed to be not limited purely to the act of navigation but that to:

*“31. (…) “follow a route” can connote making one’s way along a route or, (…)“to go along a route” which involves more than just navigation.”* - [2016] UKUT 0531 (AAC)

 As such, any mental health symptom (for example anxiety) that requires a person to need accompaniment to make a journey can be taken into account. The consideration of a claimant’s mobility needs can now be broken down into the following areas:

1. Does the claimant need someone to encourage them to go out, or are they unable to go out at all most days because of overwhelming psychological distress?

2. Does the claimant’s condition mean they cannot reliably plan a journey?

3. When out, does the claimant need someone to accompany them in order for them to reliably complete either unfamiliar or familiar journeys?

*Unaided* means without a) the use of an aid or appliance; or b) supervision, prompting or assistance.

*Prompting* means reminding, encouraging or explaining by another person.

*Psychological distress* means distress related to an enduring mental health condition or an intellectual or cognitive impairment. [extend to include full meaning]

*Assistance dog* means a dog trained to guide or assist a person with a sensory impairment.

*Orientation aid* means a specialist aid designed to assist disabled people to follow a route safely.

*Safety* relates to injury from obstacles as a result of an individual’s condition or impairment.

2. Moving around

*Descriptors:*

1. Can stand and then move more than 200 metres, either aided or unaided. (Points=0)
2. Can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided. (Points=4)
3. Can stand and then move unaided more than 20 metres but no more than 50 metres (Points=8)
4. Can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres (Points=10)
5. Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided (Points=12)
6. Cannot, either aided or unaided (Points=12) –
7. stand; or
8. move more than 1 metre.

This assesses a claimant’s ability to physically mobilise *“without severe*

*discomfort, such as breathlessness, pain or fatigue”*. (…)*This activity should be judged in relation to a type of surface normally expected out of doors, such as pavements on the flat and includes the consideration of kerbs*.” (PIP Assessment Guide, Pg. 114, Nov 17).

*Stand* means stand upright with at least one biological foot on the ground

*Aided* means with a) the use of an aid or appliance; or b) supervision, prompting or assistance.

*Aid or Appliance* a) means any device which improves, provides or replaces the claimant’s impaired physical or mental function; and b) includes a prothesis.

*Safety*  relates to a risk of falling.