

## Scottish Government Debate: Improving Disability Assistance in Scotland

### SAMH Briefing

Around since 1923, SAMH is Scotland's national mental health charity.

SAMH has represented the voice of people most affected by mental health problems in Scotland for more than 90 years.

Today, in over 60 communities we work with adults and young people providing mental health social care support, services in primary care, schools and further education, among others. These services together with our national programme work in See Me, respectme, suicide prevention and active living; inform our policy and campaign work to influence positive social change.

### Introduction

The devolution of powers over non income-related disability benefits to Scotland represents a unique opportunity to improve the experience of people with mental health problems when accessing support from the social security system. People with psychiatric disorders are the largest group of people currently in receipt of Personal Independence Payment (PIP), which Disability Assistance will replace. As of July 2019 92,354 people in Scotland with psychiatric disorders were in receipt of PIP: 39.2% of the total Scottish PIP caseload.<sup>1</sup> It is crucial that Disability Assistance works for people with mental health problems.

SAMH has taken an active role in the development of the Scottish Social Security system, including supporting the drafting of successful amendments to the Social Security (Scotland) Act 2008 on Suitably Qualified Assessors. We are also members of the Disability and Carers Benefits Expert Advisory Group (DACBEAG).

We broadly welcome the approach taken by the Scottish Government in developing the Scottish Social Security System, including its plans for Disability Assistance. Our briefing focuses on the key areas of Disability Assistance most relevant to people with mental health problems, including assessors; redeterminations and descriptors.

### Case Managers & Specialist Advisors

The current assessment and decision making process for PIP is not working for people with mental health problems. The assessment process, particularly the face to face medical assessment, is contributing to peoples' distress and does not adequately assess the impact of mental health problems or other fluctuating conditions.<sup>2</sup> One of the most significant issues contributing to the problems of the current PIP system is assessors' lack of understanding of or expertise in mental health.<sup>3</sup> Mind, SAMH's sister charity in England, surveyed 800 people with mental health problems on their experience of PIP. Only 8% felt that their assessor understood the impact their mental health problem had on them.<sup>4</sup>

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<sup>1</sup> Stat Xplore [PIP Claims in Payment](#) [accessed October 2019]

<sup>2</sup> SAMH [Personal independence Payment: What's the Problem?](#) 2016

<sup>3</sup> Mind and SAMH [Mind and SAMH submission to the Work and Pensions Committee inquiry on PIP and ESA assessments](#) 2017

<sup>4</sup> MIND [Written evidence from Mind \(PIP0016\) to Work and Pensions Committee inquiry on Personal Independence Payment](#) 2017

We broadly welcome proposals from the Scottish Government on Disability Assistance assessments outlined in the Government's Disability Assistance Assessments position paper.<sup>5</sup> These include a commitment to reduce the number of face to face assessments and the provision of a proportion of Specialist Advisors with additional training in mental health. Despite this there are a number of issues which require action from the Scottish Government. These include clarity on how people with mental health problems will be routed to the most appropriate Case Manager and Specialist Advisor.

**SAMH calls for:**

- **All Case Managers and Specialist Advisors to receive suicide prevention training.**
- **The ability for people to declare their primary health condition/disability, allowing them to be routed to the most appropriate Case Manager and Specialist Advisor.**
- **Specialist Advisors, with specialist training, experience and professional experience in mental health to be used for all applicants where their main condition relates to their mental health and where there is a need for a face to face assessment.**
- **Scottish Government to provide details on how it will ensure adequate numbers of assessors with specialist training, experience and professional experience in mental health.**

**Redetermination Timescales**

SAMH believes the proposals regarding redetermination timescales set out in the Scottish Government's consultation on Disability Assistance are inadequate. The Government propose that people have 31 days to request a redetermination, and the Agency has between 40 to 60 working days to carry out a redetermination.<sup>6</sup>

Some people, particularly people with mental health problems or other vulnerabilities, may require significant support and advice when considering whether to request a redetermination. We feel that 31 days is not sufficient to ensure access to advice and advocacy support. We also believe 40 to 60 working days is too long a period for the Agency to consider a redetermination. Two months is an excessive period for someone to be left without certainty over their award level or eligibility. We recommend a maximum period to undertake a reconsideration of 28 days.

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<sup>5</sup> Scottish Government [Disability Assistance: Assessments](#) 2019

<sup>6</sup> Scottish Government [Disability assistance in Scotland: consultation](#) 2019

**SAMH calls for:**

- **The period people can request a redetermination to be extended to a minimum of six weeks.**
- **A maximum period of 28 days for the Agency to undertake a reconsideration**
- **The “Good Reason” provision allowing late requests for reconsiderations, and associated guidance, to be drafted in partnership with people with lived experience of disability. The provision should be generous and include the impact of mental health problems as a qualifying good reason.**

### **Disability Assistance Descriptors & Points Based System**

SAMH has significant concerns about the retention of PIP descriptors for determining eligibility of Disability Assistance. One of the biggest problems with PIP is the assessment's inaccurate application of the persons experience and evidence against the descriptors, resulting in incorrect scoring.<sup>7</sup> It is clear from the high number of successful appeals against PIP decisions (73% of PIP appeals October –December 2018<sup>8</sup>) that the system as currently constituted is not working effectively.

SAMH recognises and agrees with the Government that the safe and secure transfer of people currently receiving PIP is the key priority in the short term. We recognise that this limits immediate radical change to Disability Assistance, including replacing the points based system for determining eligibility in the short term. But we believe that the descriptors should be rewritten to allow equal opportunity for the impact of mental and physical health to be accurately reported.

The descriptors as currently used in PIP are primarily focused on physical functionality. Where mental health and cognitive function more broadly is assessed, the focus is generally on whether the person requires 'prompting' or 'supervision' when undertaking a daily activity. In our view this narrows the impact of someone's mental health problem to one of the person's motivation. We believe that the descriptors should be amended to better account for psychological distress. For example we believe daily activity descriptors such as “taking nutrition” and “managing therapy or monitoring a health condition” should include a psychological distress component as these activities are likely to cause psychological distress to some people with mental health problems. For example people living with an eating disorder will likely find preparing meals and taking nutrition highly distressing, which goes beyond a need for prompting.

SAMH believes that the 50% rule should be abolished for all descriptors including those for daily living. Mental health conditions often fluctuate. This and practical problems with memory and recall can make it difficult for people with mental health problems to accurately determine what proportion of time they are unable to complete an activity outlined in a descriptor.

<sup>7</sup> Mind and SAMH [submission to the Work and Pensions Committee inquiry on PIP and ESA assessments](#) 2017

<sup>8</sup> Ministry of Justice [Tribunals and Gender Recognition Statistics Quarterly, October to December 2018 \(Provisional\)](#) 2019

**SAMH calls for:**

- **Descriptors to be amended to better reflect the effect of mental health problems including the impact of psychological distress.**
- **The 50% rule for gaining points against descriptors to be abolished for all descriptors including those for daily living.**
- **The Scottish Government to replace the points based system in the medium to long term**

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