If you call or write to us, please use this reference:

Department for Work & Pensions

Personal Independence Payment 1
Mail Handling Site A
Wolverhampton
WV98 1AA
**www.gov.uk**

Telephone: 0345 850 3322

Textphone: 0345 601 6677

5 July 2016

# Personal Independence Payment
## Making sure your award is right

Dear

We award Personal Independence Payment (PIP) for a set time. This is so we can check for any changes to your health condition or disability and make sure you're still getting the right amount of PIP. To do this we need you to complete the attached Award Review - How your disability affects you form.

We know people's lives can change making it easier or harder for people with a health condition or disability to do everyday things.

For example, your needs may have changed, you may have had your home adapted, your medication or treatment may have changed or you may have worked out different ways to do things.

**What you need to do**

- tear off this letter and the example sheet from the front page of the form. You don't need to send them back to us
- read and sign the consent and Declaration
- answer all the questions on the Award Review - How your disability affects you form
- return the form to us with any copies of supporting information by **5 August 2016**

Sending us supporting information with your completed form will help us understand your needs better. More details are given on the form.

Please return the completed form by **5 August 2016**.

If you don't return the form on time we may have to stop your PIP.



001042/000045/000131
05020-00131-001-001-1

If you think you'll have difficulty sending the form back to us by **5 August 2016**, please call us on the number on the front page of this letter. A textphone is available for people who don't speak or hear clearly.

**Your PIP will stop if you don't return the form on time or you don't contact us by 5 August 2016.**

You can ask a friend, relative or representative to help you fill in the form, or contact a local support organisation who can provide independent help and support. You can find their details online, at your local library or in the telephone directory.

On the last page of the form is the address to return it to. Place the completed form and copies of any supporting information in the envelope provided so that the address shows through the window. It doesn't need a stamp.

For more information about PIP go to **www.gov.uk/pip**

**What happens next**

We will look at your form and any information you've sent us to check your PIP award.

We will write to you when we've made our decision on your claim.

We may call you if we've any questions or need more information. Our number may show on your phone as a withheld number.

We will write to you if we need you to attend a face-to-face consultation with a health professional.

You don't need to contact us unless you've other changes that you need to tell us about.

Yours sincerely

Office Manager

## Please tell us about any changes

If your condition or circumstances change, please let us know.

Call us straightaway, using the phone number on the front page of this letter. Someone else can call for you, but you'll need to be with them when they call.

A textphone is also available for people who don't speak or hear clearly. You can also write to the address shown on the front page of this letter.

## If your condition changes

Please tell us straightaway if:

- you need more or less help with daily living or mobility
- your health professional tells you your condition will last for a longer or shorter time than you've already told us

These changes can affect the amount of PIP you get. Depending on the change your PIP could go up, go down, stay the same or stop.

## Other changes you must tell us about

Please tell us straightaway if you:

- go into a hospital, hospice or a care home
- go into a residential school or college
- go into foster care, or the care of a local authority or health and social care trust
- leave or intend to leave the country for more than 4 weeks, even if it's for a holiday
- go into prison or are held in legal custody

If we overpay you because you haven't told us about a change, you may have to pay the money back.

If you don't tell us about changes straightaway, you risk being prosecuted or having to face a financial penalty.

Please also tell us straightaway if you:

- change your name, address or landline or mobile phone number
- change the account that we pay your benefit into
- have someone acting for you and that person changes

## Equality and Diversity

We are committed to treating people fairly, regardless of their disability, ethnicity, gender, sexual orientation, transgender status, marital or civil partnership status, age, religion or beliefs. Please contact us if you've any concerns.

## Getting help and support

If you need us to, we can provide the information in this letter in a different format which you find easier to access. For example, you can ask us to provide information in braille, large print, audio or email. Please contact us to discuss your requirements regarding format.

## Call charges

Calls to 0345 numbers cost no more than a standard geographic call, and count towards any free or inclusive minutes in your landline or mobile phone contract.

# Example sheet
# How to fill in your Award Review form

These examples show how the questions in the Award Review form might be answered.

If you answer **easier** or **harder** to a question, please give us more details. Tell us:

- what has happened
- when it happened
- how things are easier or harder for you

If you answer **no change** you can move on to the next question. You don't need to give us more information.

When filling in the form remember:

- there is no right or wrong way of answering the questions
- it doesn't matter if things are spelt wrong
- you don't have to fill all of the space provided

But if you need more space please use a separate sheet. Remember to write your name and National Insurance number on each sheet and tell us which questions your comments refer to.

**Example 1** - someone who is finding eating **harder**

| **2. Eating and drinking** | **Easier** ☐ | **Harder** ☑ | **No change** ☐ |
|---|---|---|---|
| **What has happened?** | **From:** Nov 2014 | | **To:** Present |
| My arthritis has got worse. | | | |
| | | | |
| | | | |
| **How has this made things easier or harder in your life?**<br>Tell us if your needs change from day to day or throughout the day. | | | |
| My grip has got worse. I used to be able to eat fine, but it has | | | |
| made eating harder and now I use special cutlery to cut up food. | | | |
| | | | |

**Example 2** - someone who is finding it **easier** to mix with other people

| **9. Mixing with other people** | **Easier** ✓ | **Harder** ☐ | **No change** ☐ |
|---|---|---|---|
| **What has happened?** | **From:** Jan 2015 | **To:** Present | |
| My medication and treatment has changed. I have started going to counselling. | | | |
| | | | |
| | | | |
| **How has this made things easier or harder in your life?** Tell us if your needs change from day to day or throughout the day. | | | |
| Before I could not mix with people. Now I can talk to | | | |
| people by myself and I go to a book group once a week. | | | |
| | | | |

You don't need to send this example sheet back with your form.

# Personal Independence Payment Award Review

How your disability affects you

Department for Work & Pensions

**Full name**

**National Insurance number**

We know people's lives can change making it easier or harder for people with a health condition or disability to do everyday things, so Personal Independence Payment (PIP) is awarded for a set time. This means we need to check to see if anything has changed.

For example, your needs may have changed, you may have had your home adapted, your medication or treatment may have changed or you may have worked out different ways to do things.

We need to ask about any changes in how your health condition or disability affects you since we last looked at your PIP claim.

This form is the easy way to tell us about any changes and help us get your PIP award right.

Please read this form, answer all the questions, and send it back to us.

**Your PIP may stop if we don't get your form back or you don't contact us by 5 August 2016.**

**What to do next**

| | |
|---|---|
| **Step 1** | Read and sign the **Declaration**. |
| **Step 2** | Answer all the questions on this form. |
| **Step 3** | Return this form and copies of any **supporting information** in the envelope provided. Make sure the address shows through the window. |

## Step 1 Read the statement of consent and sign the Declaration

### Giving us your consent to obtain further information

We're looking again at your PIP award. We may want to contact your GP, other people or organisations for information about your health condition or disability and how it affects you.

You don't have to agree to us contacting these people or organisations but if you don't, we may not have all the information we need when we make a decision about your PIP.

Do you agree that:

- we, or someone working on our behalf, may ask your GP, or other people or organisations, for this information and
- your GP, or other people or organisations, can give us, or someone working on our behalf, this information?

Yes ☐ No ☐

You can withdraw your consent at any time by calling us on 0345 850 3322.

### Declaration

**I agree that** the information I give on this form is complete and correct.

**I understand** if I give wrong or incomplete information, my benefit may be stopped and I may be prosecuted or may have to pay a penalty.

**I understand** I must promptly tell the office that pays my Personal Independence Payment of anything that may affect my entitlement to, or the amount of, that benefit.

**Signature**

**Date**

**Print your name here**

## Step 2 Please tell us what has changed for you

**Changes to how your disability affects you**

**Helping us check we've got your PIP award right**

**Your PIP may stop if we don't get your form back or you don't contact us by 5 August 2016.**

Think back to when your current PIP award began.

Please answer **all** the questions.

Has it got easier or harder to do the things you need to do every day in your life? Or have things stayed the same? Tick the box that applies to you.

If you answer **easier** or **harder** to a question, please give us more details. Tell us:

- what has happened
- when it happened
- how things are easier or harder for you

If you answer **no change** you can move on to the next question. You don't need to give us more information.

If you need more space use a separate sheet of paper. Remember to write your name and National Insurance number on each sheet and tell us which questions your comments refer to.

| **1. Preparing food** | **Easier** | **Harder** | **No change** |
|---|---|---|---|
| | ☐ | ✔ | ☐ |
| **What has happened?** | **From:** July 2016 | **To:** Nov 2016 | |
| My Partner still prepares all my meals for me as I struggle to lift or move any items due to the pain/pins needles and throbbing in my arms & hands. My muscles are weak in my arms & I get pins and needles in the tips of my fingers, tingling and numbness causing me to drop things however my memory has deteriorated, my partner recently asked for me to put the oven onto warm up and he got called away and I left it for most of the day and all night. I didn't even remember putting the oven on in the first place. | | | |
| **How has this made things easier or harder in your life?** Tell us if your needs change from day to day or throughout the day. | | | |
| I forget when evening trying to complete the simplest of tasks like putting the oven onto warm up so my partner can prepare and cook a meal for me, putting myself and others at risk or harm due to confusion, memory fog and fatigue. | | | |

| 2. Eating and drinking | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☐ | ☑ |

| What has happened? | From: | To: Nov 2016 |
|---|---|---|

There has been no change, I still need prompting and encouraging to eat, I still have no appetite and my partner still has to prompt me to eat daily. I suffer from lack of appetite due to depression, fatigue and pain. I still miss meals on a regular basis and I still require the use of adapted cutlery and a lidded beaker.

**How has this made things easier or harder in your life?**
Tell us if your needs change from day to day or throughout the day.

There has been no change from my previous form, I still require the daily prompting and require encouragement from my partner.

| 3. Managing treatments or monitoring your health condition | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☑ | ☐ |

| What has happened? | From: July 2016 | To: Nov 2016 |
|---|---|---|

Managing my medication has become harder due to my Discalculio means I struggle with numbers and dosage and my short term memory has also deteriorated meaning that I have started to forget to take medication or over medicate as I cannot recall as to whether or not I have taken my medication.
My partner now has to ensure that he monitors and gives me all of my medication at the appropriate times.

**How has this made things easier or harder in your life?**
Tell us if your needs change from day to day or throughout the day.

Managing my medication has become harder due to my memory loss and Discalculio meaning I have to rely completely on my partner to ensure I take all medication and the correct dosage.

**3a. About your treatments, therapy or operations**

Tell us about any private or NHS funded treatments or therapy you've had, you're currently having or that are planned for the future, for example:

- name of treatment, therapy or operation
- when you had or are having the treatment, therapy or operation
- how often you have the treatment or therapy

Since my last assessment I have been to a number of appointments with my Psychologist for my anxiety, but I didn't believe it was helping me and made me feel more anxious so I no longer attend these appointments.

I am currently on a waiting list to see my consultant regarding the deterioration of my short term memory and are awaiting an appointment.
I am now taking some additional medication, I know take Thyroxine, once daily 100mg, Zolmitriptan, 2.5mg, taken for migraines so taken as and when required and Diazepam has increased to once daily 4mg.

**3b. About your medication**

Tell us about your current medication, including:

- medication name
- how often you take it and how much you take
- any side effects from the medication
- when you started taking the medication

ie paracetamol 500mg twice daily cause drowsiness

| 4. Washing and bathing | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☐ | ✔ |

| What has happened? | From: | To: |
|---|---|---|
| There has been no change, my husband still supervises and assists me when I take a shower. I suffer from Crohn's disease, Osteoarthritis, Depression and Chronic Fatigue and need supervision and assistance to have a shower as I am unable to get in or out alone. I am physically unable to get in or out of the shower without assistance. I am often too fatigued to shower and will have to strip wash. | | |

| How has this made things easier or harder in your life?<br>Tell us if your needs change from day to day or throughout the day. |
|---|
| Most days I have no energy to wash and bathe. I need prompting to have a wash or shower as I forget due to short term memory loss. I am unable to get in and out of the shower without help because of the pain and stiffness in my knees and am unable to lift myself due to the pain, restricted mobility, dizziness. Due to my various disabilities washing and bathing leaves me exhausted and wiped out for the rest of the day |

| 5. Managing toilet needs or incontinence | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ✔ | ☐ |

| What has happened? | From: J | To: |
|---|---|---|
| Managing my toilet needs has become harder, I know suffer from Fistula and I am unable to control my bowel at all, I can have an accident around 12 times a day. I have to wear incontinence pads and I have to be cleaned and re-dressed on numerous occasions throughout the day. I still suffer from an overactive bladder. | | |

| How has this made things easier or harder in your life?<br>Tell us if your needs change from day to day or throughout the day. |
|---|
| My bowel urgency has worsened due to the Fistula and often have to remain at home. When I have a toilet accident it is incredibly difficult to clean myself and my husband will have to help because of pain and restricted movement. It is more difficult due to pain,fatigue and bowel issues. I have a commode. I often spend the day upstairs in my bedroom so that I am near to the toilet. I require physical support to go to the toilet and also assistance with cleaning me and wiping me etc when I have been. |

| 6. Dressing and undressing | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☐ | ☑ |

| What has happened? | From: | To: |
|---|---|---|
| There has been no change, I still require the help of my partner to get dressed due to the pain from Osteoarthritis and Crohns disease and fatigue. Getting dressed leaves me exhausted for the rest of the day due to chronic fatigue as I use up all my energy reserves very quickly. I still will often give up and don't get fully dressed. I still often spend most of the day in my nightwear. My partner still prompts and encourages me to dress. | | |

**How has this made things easier or harder in your life?**
Tell us if your needs change from day to day or throughout the day.

There is no variation with my pain and fatigue so when I have to get dressed I need assistance hence taking me much longer. If I have to get dressed I wear "easy" clothes such as jogging bottoms, t shirts and slip on shoes which don't require fastening. I am unable to manage buttons or zips and cannot fasten my bra. I will often go without wearing a bra due to the exertion.

| 7. Speaking to people, hearing and understanding what they say and being understood by others | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☑ | ☐ |

| What has happened? | From: | To: |
|---|---|---|
| Communication has become harder I still feel I am a recluse and stay in most of the time unless I have to go out. I still suffer from anxiety and have now had my Thyroid removed, however I can still loose my voice for up to 3 months at a time which makes it difficult for me to mix with other people and therefore communication is difficult. However My short term memory has become worse and now I am unable to follow tasks and hold a full conversation with someone. I am awaiting a referral from my GP | | |

**How has this made things easier or harder in your life?**
Tell us if your needs change from day to day or throughout the day.

Due to the deterioration in my short term memory loss I often lose concentration when I am in conversation with another person, I can't follow simple tasks and can forget what I am doing from walking one room to another. I will forget what was talking about and have to be reminded what I was saying. My short term memory is poor because of my illness and my medication can mean that I get my words muddled up and I have difficulty recalling a word that I need to use in a sentence as I forget words easily.

| 8.Reading and understanding signs, symbols and written words | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ✔ | ☐ |
| **What has happened?** | **From:** | **To:** | |
| Reading has become harder as I now suffer from Migraines and have to take medication for this. The migraines effect my vision to the extent that I see blanks on a page and the page looks like a jigsaw with bits missing and all jumbled up making reading very difficult for me. | | | |
| **How has this made things easier or harder in your life?** Tell us if your needs change from day to day or throughout the day. | | | |
| Since suffering from the Migraines I try avoid reading if possible and my partner will deal with all my paperwork and bills for me. If I am unable to read my partner will read things to me. | | | |

| 9. Mixing with other people | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☐ | ✔ |
| **What has happened?** | **From:** | **To:** | |
| There has been no change I still suffer from anxiety which makes it difficult for me to mix with other people. I am still suffering from palpitations when under stress and if I have to meet new people. I still avoid mixing with other people, my husband or daughter accompanies me in social situations for mental support. | | | |
| **How has this made things easier or harder in your life?** Tell us if your needs change from day to day or throughout the day. | | | |
| I become anxious in new situations and I become stressed when I have to meet people who I do not know. I avoid going out wherever possible and I avoid whenever possible going out unaccompanied due to my disabilities meaning that I am at risk of falling when I am outside which makes me anxious and stressed. I lose focus and become disorientated and drift off for a couple of minutes. I do not go to places I am not familiar with as I find it too stressful. I keep to my "safe" places. | | | |

| 10. Making decisions about money | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☐ | ☑ |

| What has happened? | From: | To: |
|---|---|---|

There has been no change my husband still deals with all my bills due to my Discalculio and Mental Health problems and poor memory recall. I struggle to manage if I had to cope with several bills. My poor memory and concentration levels mean I feel vulnerable when I am handling money. My partner still does all of the household shopping and budgeting.

**How has this made things easier or harder in your life?**
Tell us if your needs change from day to day or throughout the day.

There has been no change my partner still deals with all of the household finances due to me suffering from Discalculio which means I am unable to calculate or understand numbers. I struggle to know and understand if I have sufficient money or how much change I should receive.

| 11. Planning and following a journey | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☑ | ☐ |

| What has happened? | From: | To: |
|---|---|---|

This has become harder, my short term memory has deteriorated, I get confused and disorientated more often and I forget what I am doing in the middle of a task. I get lost very easily even in familiar places.

**How has this made things easier or harder in your life?**
Tell us if your needs change from day to day or throughout the day.

I now have to rely on my partner to be able to complete a journey even to familiar surroundings or route, I can forget where I am going or what I am going for. I now feel vulnerable when I am in familiar or unfamiliar surroundings as I am often left feeling confused or disorientated.

| 12. Moving around | Easier | Harder | No change |
|---|---|---|---|
| | ☐ | ☐ | ☑ |

| What has happened? | From: | To: |
|---|---|---|

There has been no change, I still struggle to mobilise when my sciatica is bad. I cannot walk anywhere without pain. I have a delayed reaction to pain which means that walking 5 metres one day means I will be agony the following day. However some days pain can be instant. I struggle with my balance due to pain. Due to my disabilities any exertion leaves me exhausted and wiped out for the rest of the day.

**How has this made things easier or harder in your life?**
Tell us if your needs change from day to day or throughout the day.

There has been no change with regards to pain and fatigue, when I am outside I am at risk of falling which makes me anxious and frightened to go out. I have to stop regularly to take a break for a few minutes

**12a. Tell us how far your can walk, taking into account any aids you use**

To give you an idea of distance, 50 metres is approximately 5 buses parked end to end.

Please tick which box best describes how far you can walk.

| | | | | | |
|---|---|---|---|---|---|
| Less than 20 metres | ☐ | Between 20 and 50 metres | ☐ | Between 50 and 200 metres | ☑ |
| 200 metres or more | ☐ | It varies | ☐ | | |

**13. Is there anything else you think we should know about your health condition or disability?**

For example you may be waiting for adaptations to your home.

I believe that my conditions are worsening and not showing any improvement, My Crohn's Disease, pain in my Joints, fatigue, and Short Term Memory are all showing a deterioration. I also now am suffering from Fistula which means I am unable to control my bowel at all any more and can have up to 12 accidents per day and I am being referred to the district nurse for her organise the Incontinence Pads on a prescription due to the amount I am having to use daily. I now also suffer from severe migraines that I am taking medication to try and control. My short term memory is deteriorating, It is effecting me on a daily basis to the extent I cannot safely or reliably complete every day tasks without putting my self or others at substantial harm.
I have recently undergone two operations, I have had my Thyroid removed however there has been no change with regards to the prevention of me losing my voice and to aid swallowing, this has not been successful. I have also had an operation on my back to help to prevent back spasms however this has also been unsuccessful and they are now looking to refer me for physiotherapy for my upper back.

## Step 3 Supporting information

If you have information that will help us understand how your disability affects your daily activities (daily living or mobility), please send a copy (not originals) to us when you return this form. We will not be able to send these back to you.

Sending us copies of any supporting information you have, may mean you don't need to attend a face-to-face consultation with a health professional.

✓ **Information we want to see:**

- prescription lists
- care plans
- reports or information from people like your doctors, nurses, social workers or counsellors

✘ **Information we don't want to see:**

- appointment letters
- information you've sent us before
- anything more than 2 years old

**How the Department for Work and Pensions collects and uses information**

When we collect information about you we may use it for any of our purposes. These include dealing with:

- social security benefits and allowances
- child support
- employment and training
- financial planning for retirement
- occupational and personal pension schemes

We may get information about you from others for any of our purposes if the law allows us to do so. We may also share information with certain other organisations if the law allows us to. To find out more about how we use information, visit our website **www.gov.uk/dwp/personal-information-charter** or contact any of our offices.

## What happens next

- We will look at your form and any information you've sent us to check your PIP award
- We will write to you when we've made our decision
- We may call you if we've any questions or need more information. Our number may show on your phone as a withheld number
- We will write to you if we need you to attend a face-to-face consultation with a health professional
- You don't need to contact us unless you've other changes you need to tell us about

Please tell us your telephone or mobile number so we can call you if we need to.

My phone number is:

| |
|---|
| |

Home ☐ Mobile ☐ Work ☐

Freepost RTEU-HBEC-RGTG
Personal Independence Payment 1
Mail Handling Site A
Wolverhampton
WV98 1AA

**Please return the completed form to this address.**

Put the completed form in the envelope provided, making sure the address shows through the envelope window. The envelope doesn't need a stamp unless you live outside the United Kingdom.

If you've access to the internet, you can get information about Personal Independence Payment by going to the Personal Independence Payment website: **www.gov.uk/pip**