

WRITTEN SUBMISSION

Mrs Jones

National Insurance Number YS 456789C

Tribunal Reference Number: SC

This submission has been prepared based on the evidence and instructions provided by Mrs Jones in respect of her Personal Independence Allowance Appeal.

Facts of the case:

The Appellant was previously awarded higher rate mobility and middle rate care of DLA until this changeover to PIP. The Secretary of State has failed to include details of the points she was allocated in the previous award to allow critical analysis by the panel, despite requests following the most recent case law See CPIP/1042/2016. She is contesting the mobility component only.

The Appellant suffers from the symptoms of Idiopathic Cranial Hypertension at the time of the decision and has since been diagnosed officially.

She is looked after by her partner and spends much of the time resting in between working hours because of the chronic fatigue she suffers with daily.

She is currently under the care of a Neurologist and her GP. She also has an amended letter from her GP to clarify that she is having Motor Seizures more often than originally reported in the Capita report. See evidence submitted recently by claimant. She also reports to be having Generalized Non-Motor Seizures (Absence) most days which affect her ability to self-care and memory.

It is submitted that she disagrees with the following descriptors:

Preparing food: 2 points awarded disputed. She is a danger in the kitchen around hot food and has had incidents where she narrowly escaped injury with hot water/flames.

Taking nutrition: After a fit she is extremely groggy and weak and needs assistance and prompting for a few hours 2 to 4 times a week at least.

Managing medication/therapy: She has difficulties managing therapy due to poor memory and fatigue during or after a fit and in danger of overdosing.

Washing and bathing: Because of the fatigue and her poor mental health following a fit, she has difficulty motivating herself to wash and bath and often needs assistance or prompting to do so and getting in and out of the bath, washing her hair and washing her lower half.

Some days she will be bedridden and unable to do any of the descriptors reliably and repeatedly and to a reasonable standard and requires assistance to get up dressed and washed each day in order to work. She spends much of her time outside work in bed or resting and is confused and disorientated for hours after a fit.

Managing Toilet Needs: During a fit she loses control of her bladder and often her bowels, she needs assistance therefore cleaning herself up during these times.

Dressing and undressing: as above particularly with lower half and she needs assistance to wash her body following a fit where she loses control of her bladder.

Communicating verbally: During a fit of any kind Miss Bradshaw cannot communicate and requires full assistance.

Mobilising:

Planning a journey: She has difficulty planning and executing a journey to an unfamiliar place and needs someone with her. She has a lift to her place of work and back each day and otherwise her partner will be with her if she has to go to specialist or GP appointments.

Moving around:

It is submitted that the claimant cannot walk more than 50-100 metres reliably and repeatedly because of fatigue and risk of fitting, we believe she should qualify for the standard rate for mobilising as she would often be fatigued which in turn affects her ability to reliably mobilise any distance. She never travels alone due to the risk of a fit, see GP letter (10) She has fallen and injured herself at times when she has an unexpected fit and requires supervision to keep her safe all the time.

Evidence:

Letter from GP on page 10 stating she is having 2 to 4 fits a week (Grand Mal) and will often need the following day off work due to residual weakness and lethargy.

Conclusion:

The Appellant submits that most of the evidence considered by the decision maker was conducted on paper, there was no face to face assessment allowed and she was given no opportunity to state how the condition affects her ability to do neither tasks, nor reliability. Her GP amended the report that she is having between 2 and 4 fits a week.

Digitally signed by Mrs Jones