



The Scottish Parliament
Pàrlamaid na h-Alba

WELFARE REFORM COMMITTEE

AGENDA

13th Meeting, 2015 (Session 4)

Tuesday 23 June 2015

The Committee will meet at 10.30 am in the Sir Alexander Fleming Room (CR3).

1. **Atos Healthcare and Salus evidence session:** The Committee will take evidence from—

David Haley, Client Executive, PIP, and Dr Barrie McKillop, Clinical Director, Atos Healthcare;

Mark Kennedy, General Manager Salus, and Kenneth Small, Director of Human Resources, NHS Lanarkshire.

2. **Women and Social Security (in private):** The Committee will consider a draft report.

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The papers for this meeting are as follows—

Agenda Item 1

Written submission - Atos Healthcare

WR/S4/15/13/1

SPICe Briefing - PIP update 2015

WR/S4/15/13/2

Scottish Parliament Welfare Reform Committee: Atos Healthcare (PIP)

June 17, 2015

Who we are

Atos Healthcare undertakes independent assessments of people with health conditions or disabilities against the criteria set by The Department for Work and Pensions (DWP) within Personal Independence Payment (PIP) legislation. We employ qualified Health Professionals (HPs) trained in disability analysis in over 200 locations throughout Scotland and the North and South of England.

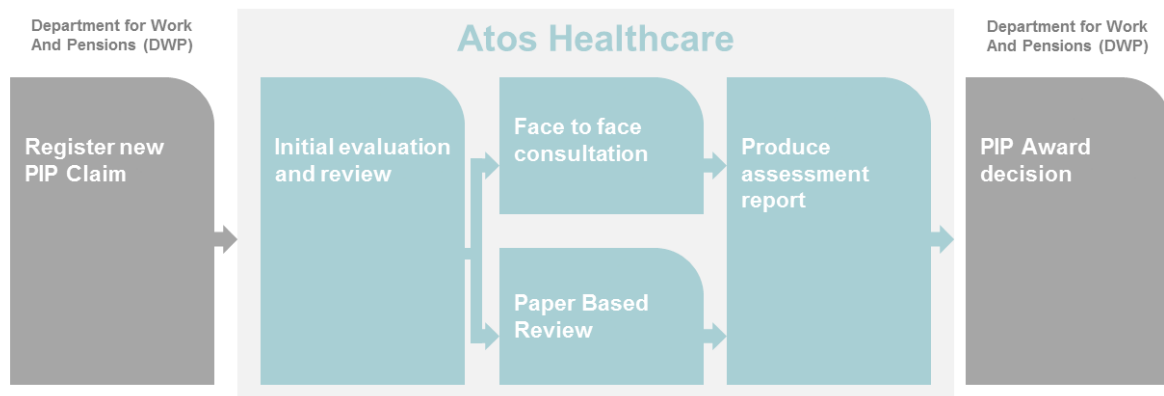
Assessing people for PIP commenced in Scotland in July 2013 for people who were making a new claim. Phased roll out for claimants whose Disability Living Allowance benefit had come to an end (natural reassessment) started in southern Scotland in January 2014. DWP has reported that natural reassessment has been implemented in all postcodes in Scotland with the exception of HS, KW and ZE for which we are due to start receiving referrals in September 2015.

To date, we have delivered 92,901 assessments for people living in Scotland.

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What we do

Atos Healthcare is responsible for the parts of the PIP process during the assessment phase. This includes receiving referrals from DWP, managing each case through the different stages, communicating with claimants and arranging appointments. We're also responsible for obtaining additional supporting information where appropriate, as well as recruitment and training of HPs assigned to review the referrals and conduct assessments with those claimants who need them.



Claimants in Scotland are currently taking approximately four weeks to go through the assessment process (which includes the initial review, assessment and report submission). This compares to approximately 14 weeks to go through the assessment process in Scotland this time last year.

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In addition to having our own HPs and consultation centres, we work with Supply Chain Partner (SCP) organisations, which use their own HPs and premises to carry out some of the face-to-face assessments. We also work closely with DWP to ensure that how we carry out PIP assessments reflects how DWP designed them and to implement any policy changes that are made.

As an assessment provider, it is our role to provide an assessment report to DWP for any PIP referrals that they send to us. Each assessment report is produced by one of our HPs. The information used to write the report comes from a variety of sources including the PIP “How your disability affects you” form, further relevant evidence sent by the claimant or sourced by us or a face-to-face assessment.

All this information is brought together so that an HP can provide a report to the DWP Decision Maker that explains what it all means in relation to the PIP criteria (also known as the descriptors).

The Assessment Provider does not make the decision on an individual’s entitlement to benefit or the level of their award. This is the role of the Decision Maker in DWP.

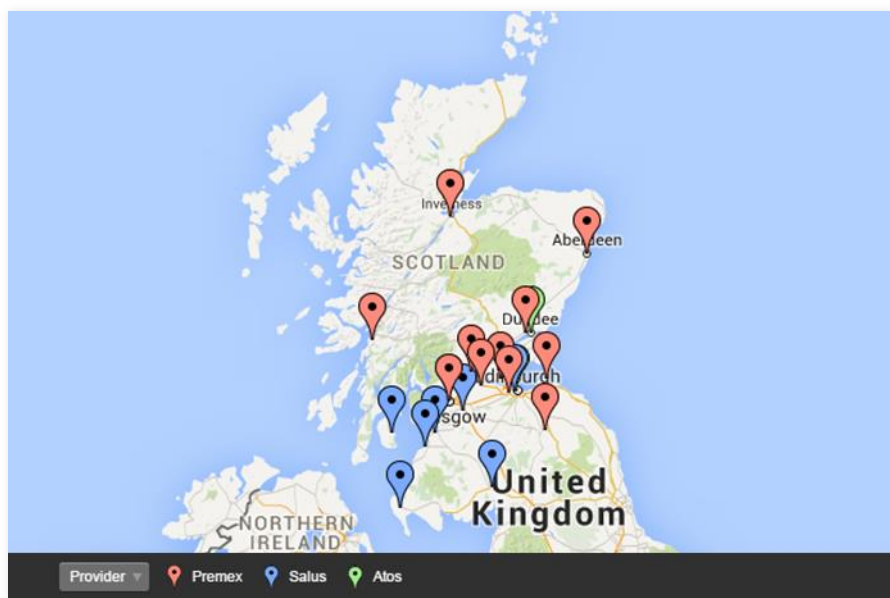
If an individual lodges an appeal, this is against the decision made by DWP, not the assessment report provided by the Assessment Provider.

Delivery Model in Scotland

Atos Healthcare delivers PIP in Scotland through a mix of SCPs and its own employees and centres. Salus, as the Occupational Health arm of NHS Lanarkshire, currently provides a significant number of assessments for people living in central and southern Scotland who apply for PIP. We have also partnered with private organisation, Premex, to deliver PIP assessments in the remaining parts of central and northern Scotland.

We currently have a total of 76 assessment rooms in Scotland spread across 20 centres.

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Our Supply Chain Partners are currently delivering approximately 44% of assessments (face-to-face) in Scotland, with Atos delivering approximately 36% through our centres and home consultation (HC). The remaining 20% are delivered through Paper Based Review (cases where we have sufficient information to complete a report without the need to see the claimant in person).

Our centres are located in all the main conurbations within reach of the majority of claimants. For those in more rural locations we provide home consultations and we have shared rooms with local support organisations such as Citizens Advice Bureau to complement this service. Given Scotland's unique geographic challenge, we identified early that in rural and island communities, our approach would focus very much on HCs.



Currently, HCs account for 14% of the assessments, the remainder being face-to-face or Paper Based Review.

Atos has invested significantly in Scotland in our back office PIP operation (in Linwood and central Glasgow) to support our HPs, planners, customer service and administration teams based throughout the UK. These locations were chosen specifically because of the quality and experience of local HPs

and our own experience in delivering disability assessments in Scotland. We currently have 176 PIP employees working in our Linwood office – a mix of management, HPs, administration and customer service team. Additionally, there are 44 employees based in our Glasgow city centre office.

Regardless of whether a claimant visits a SCP centre, an Atos Healthcare centre or is seen in their home, PIP claimants will experience the same high level of professionalism and care to make their face-to-face assessment as comfortable as possible.

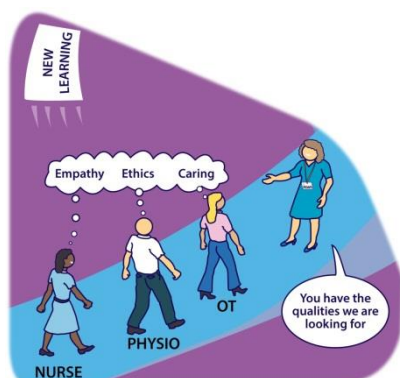
The Clinical Aspects

HPs who carry out the face-to-face assessments are nurses, physiotherapists, occupational therapists and paramedics. They must have at least two years post qualification, practical experience and be fully registered by their respective clinical body.

Before being able to carry out PIP assessments, Atos and SCP HPs are trained in disability analysis.

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The work of the disability analyst is extremely important in making sure those who apply for PIP are accurately and sensitively assessed.



Compassion, sensitivity and commitment to delivering the best possible service to claimants is critical. The role of the HP is not to diagnose an individual's condition or conditions. It is to understand how the person manages the conditions that they have and how it affects them on a day-to-day basis. This information forms the basis of the report that the HP provides to the DWP.

It's critical that we collect feedback from claimants to enable us to continuously improve the service we deliver.

Claimant communications and Innovation

We always consider how we can do things differently and have been implementing innovative improvements to the service we deliver to PIP claimants. With the claimant in mind, we're currently trialling a number of innovative initiatives to make their journey through the PIP process as positive as possible.

Claimant letters and online: Our current website and claimant letters provide information for claimants and those who support them on the assessment process in a variety of formats. We're currently redesigning the letters we send to claimants and our website to make our communications clearer and more accessible.

PIP Engagement Group: Atos Healthcare actively works with disability representative groups to gather feedback and improve the level of understanding of the process and our role in it among front line support workers.



We host quarterly forums with disability representative groups where progress, feedback and ideas are shared and discussed. DWP also attend these forums.

Video assessment: We are currently trialling the use of video technology which has the potential to help people in more remote parts of Scotland by allowing them to be assessed via secure video link.

Taxi service: We are piloting a taxi service where fares are paid centrally and if successful, we will consider rolling out nationally.

Pre-assessment support: Our HPs are carrying out a trial which involves calling claimants before their assessment. During this call, HPs begin to gather basic information about their conditions. Because we're engaging with claimants in advance of their assessment during this trial, we have been seeing a reduction in some of the anxiety around the assessment process.



Welfare Reform Committee

Personal Independence Payment – 2015 update

Introduction

1. This briefing provides some background information on Personal Independence Payment (PIP) for the Committee's evidence session with Salus and Atos on 23 June 2015. It includes background on PIP, problems identified with the assessment and waiting times, statistics, the High Court ruling on PIP delays, information on assessment providers including the two previous evidence sessions with Salus. The Annexe provides some background on the implementation of PIP.
2. The introduction of PIP has been controversial across Great Britain because of the intention to reduce the caseload and costs by 20%. The Scottish Government¹ and a number of third sector organisations² have called for a halt in the roll-out of PIP in Scotland, given that disability benefits have been proposed for devolution by the Smith Commission.

About PIP

3. PIP is replacing DLA for people aged between 16 and 64 (working-age). As with DLA, PIP is a non-means tested benefit to help people with the extra costs of living with a disability. It is payable regardless of employment status, and like DLA has a mobility and care component.

	Standard weekly rate	Enhanced weekly rate
Daily living component	£55.10	£82.30
Mobility component	£21.80	£57.45

Reduction in numbers and costs

4. The UK Government first announced the introduction of an 'objective medical assessment' for all DLA claimants in the June 2010 budget, to ensure payments are only made for as long as a claimant needs them.³
5. In 2011, the UK Government outlined the need for reform of DLA⁴:

¹ Scottish Government (February 2015) [Call for early progress on welfare powers](#)

² For example: [Statement to the Joint Ministerial Working Group on Welfare: Women, further devolution and social security, February 2015](#) and [CAS calls for a halt to introduction of PIP until new Scottish system introduced](#) (January 2015)

³ HM Treasury (2010) [Budget 2010](#)

⁴ DWP (2011) [Disability Living Allowance reform](#)

- “Caseload and expenditure is increasing at a rate never envisaged”
 - “The current system is too complex and the benefit is not understood”
 - “There is no system to check that awards remain correct”
 - “The benefit can act as a barrier to work”
6. The aim of the change is to “create a benefit that is simpler to administer and easier to understand, is fair, and supports disabled people face the greatest challenges to remaining independent and leading full, active lives.”⁵
7. In terms of caseload the UK Government said that “in just eight years, the number of people claiming DLA has risen from 2.5 million to 3.2 million – an increase of around 30 per cent”⁶. The DWP expects that there will be 600,000 fewer people receiving PIP by May 2018 compared with the expected trend for DLA⁷.
8. The intention was to reduce projected working-age expenditure by 20% in 2015/16⁸. The NAO reported that in the absence of reform the DWP expects that annual spending on DLA could rise to £16.9bn in 2018-19, a 23% increase from 2012-13 in real terms. By introducing PIP the DWP expects to save £3bn annually from 2018-19⁹.

Impact of the change from DLA to PIP

9. The Scottish Government conducted analysis on the [Financial Impacts of Welfare Reform on Disabled People in Scotland](#) (2014). Adjusting for the Scottish caseload, it was estimated that out of the existing 190,000 working age DLA claimants:
- 105,000, 55%, will see a reduction in their award, or receive no award
 - 56,000, 30%, will see an increase in their award
 - 29,000, 15%, will see no change in their award
10. Of the 105,000 estimated to see a reduction or receive no award, it was estimated they would lose at least £1,120 per year.
11. More recently, the Welfare Reform Committee, commissioned research from Sheffield Hallam University on [the Cumulative Impact of Welfare Reform on Households in Scotland](#) (2015), which estimated that 120,000 people would lose money as a result of the change from DLA to PIP. The annual loss per individual was estimated to be £2,600.

⁵ DWP (2011) [Government’s response to the consultation on Disability Living Allowance reform](#)

⁶ DWP (2011) [Government’s response to the consultation on Disability Living Allowance reform](#)

⁷ National Audit Office (2014) [Personal Independence Payment: early progress](#)

⁸ DWP (2012) [Government’s response to the consultation on Disability Living Allowance reform](#)

⁹ National Audit Office (2014) [Personal Independence Payment: early progress](#)

Problems identified with the assessment process

12. A previous SPICe note for the Welfare Reform Committee's meeting on 13 May 2014 ([WR/S4/14/8/2](#)) referred to the delays and backlogs during the initial roll-out of PIP. In summary:

- The National Audit Office reported on 27 February 2014¹⁰ that backlogs developed in mid-2013, soon after the roll-out began in April 2013. Claimants were facing delays and the DWP were not able to tell people how long they would have to wait, potentially causing distress and financial difficulties.
- The Work and Pensions Committee published a report¹¹ on the performance of the DWP on 12 March 2014. It included a section on PIP which responded to many of the concerns raised by the NAO. The Committee recommended that penalty clauses in the DWP contracts with assessment providers should be invoked where necessary, and that the backlogs of PIP claims are cleared.
- The Public Accounts Committee published a report¹² on 20 June 2014. In a press release, the Committee's Chair, Margaret Hodge, said that the implementation of PIP had been "nothing short of a fiasco" and that the DWP had "let down some of the most vulnerable people in our society, many of whom have had to wait more than 6 months for their claims to be decided."

13. The UK Government responded¹³ to the Work and Pension Committee report on 20 June 2014, the same day that the Public Accounts Committee published its report on PIP. More detail can be found in a briefing by the House of Commons Library¹⁴, but to summarise:

- The UK Government stated that the DWP was "working collaboratively" with the assessment providers to improve performance and reduce backlogs
- In response to the Committee's recommendation that the DWP invoke penalty clauses in assessment providers' contracts where necessary, the Government said that the Department was managing the contracts "robustly"
- Regarding information for claimants on the progress of their claims and how long they would take, the Government said that the DWP had:
 - Updated the online "[PIP Toolkit](#)" to provide better information for support organisations, including "realistic" estimates of how long claims might take, and information on what claimants could do to speed up the process; and
 - From 28 April, began sending text messages to keep claimants informed about the progress of their claim at "key points of the journey."

¹⁰ National Audit Office (2014) [Personal Independence Payment: early progress](#)

¹¹ Work and Pensions Committee (2014) [Monitoring the Performance of the Department for Work and Pensions in 2012-13](#)

¹² Public Accounts Committee (2014) [Personal Independence Payment](#)

¹³ UK Government (2014) [Monitoring the Performance of the Department for Work and Pensions in 2012-13: Government Response to the Committee's Third Report of Session 2013-14](#)

¹⁴ House of Commons Library (2015) [Introduction of Personal Independence Payment](#)

14. The PIP Toolkit also states that:

“By the end of 2014, we expect no one should be waiting longer than 16 weeks for an assessment from the date we receive their ‘[How your Disability Affects You](#)’ form”.

15. It should be noted that the 16 week target is not an end-to-end target, i.e. from the start of a claim to receiving a decision. The 16 week target begins from when the claimant returns their PIP form, through to having an assessment, and the assessment provider submitting the report to the DWP. It is difficult to set a target for how long an individual might take to return a form. On how long it might take the DWP to make a final decision on a claim, Mark Harper, the former Minister for Disabled People said:

“I do not think we have set out publicly what that should be, and in terms of what it is actually taking, the same answer is going to apply as what I said to you at the beginning about not giving you unvalidated management information”¹⁵.

16. On 13 March 2015, Citizens Advice Scotland published a report¹⁶ detailing the problems experienced by PIP claimants in Scotland.

17. The main problem identified has been the delays in the assessment process, as discussed above. Additional issues include, travelling long distances for an assessment and the short timescale (one month) that clients are given to return the ‘How your Disability Affects You form’.

18. In reference to the UK Government’s target of 16 weeks for the clearance of new PIP claims, CAS says:

“This reduced to 14 weeks for cases returned between 1 January and 25 January 2015. However, the DWP statistics take the median time as the average, which may not fully reflect those people who are waiting much longer times. The data itself shows that, on 25 January 2015, 110,100 claims (20 per cent) that had been referred to the assessment providers remained outstanding. Nine per cent of these claims were outstanding over 16 weeks”.

The PIP Assessment review

19. The Welfare Reform Act 2012, and associated regulations, made provision for two independent reviews of the operation of the PIP assessment; the first to take place within two years of when the first regulations came in to force, and the second review within four years - by April 2017.

20. Paul Gray was appointed to carry out the first independent review, as well as an independent scrutiny group which included experts from the healthcare professions, disability groups and academia. The [independent review](#) was published on 17 December 2014. It made recommendations to improve the claimant experience; obtaining sufficient further evidence for assessments; and, review the effectiveness of the PIP assessment. Paul Gray gave evidence to the Welfare Reform Committee on the [24 March 2015](#).

¹⁵ [HC 644 2014-15](#); see in particular QQ17-26

¹⁶ CAS (2015) [Voices from the Frontline: Halt the roll-out of PIP](#)

21. The UK Government [responded](#) to the review on 27 February 2015. However, it opted to focus on the short-term recommendations in the first instance, and said it would respond to the longer-term recommendations after the General Election in May 2015. Most of the short-term recommendations were accepted, with a summary of actions detailing how these would be fulfilled.
22. It said that the DWP had already made significant progress on improving delivery of PIP and the experience for claimants. Action has been taken to address the delays - the numbers of assessors have been increased fourfold, and the numbers of decisions per month were quadrupled in 2014.
23. The response also recognises the challenges that might come about as a result of the Smith Commission recommendation to devolve disability benefits in Scotland, and the implications this might have on some of the review's recommendations.

High Court ruling on PIP delays

24. On 5 June the High Court ruled that the delays in determining two PIP claims were unacceptable and unlawful¹⁷. The first claimant, Ms C, who has ME, severe depression and other health problems, waited from September 2013 to October 2014 to have her eligibility assessed. The second claimant, Mr W, was a carpenter until he contracted ulcerative colitis in 2013 and had his colon removed, waited from February to December 2014 for a PIP decision¹⁸.

Mrs Justice Patterson held that the claimant's human rights had not been breached.

25. Commenting on the High Court ruling, Justin Tomlinson, the Minister for Disabled People said¹⁹:

"The suggestion by lawyers representing the 2 disabled people was that their human rights had been breached. This was dismissed by the judge, and their claims for damages were unsuccessful.

Their case failed to recognise the massive improvements delivered and the performance of the system today, both of which were highlighted by the judge.

Despite this, whatever the rights and wrongs of this particular case, it was a stark reminder of past failure.

It is true that some people have faced unacceptable delays waiting for PIP assessments. It is something the government has acknowledged many times, and something the judge confirmed in her ruling. And getting support to those in need as quickly as possible is really important".

¹⁷ [R \(on the application of\) \(1\) MS C and \(2\) MR W -v- Secretary of State for Work and Pensions and Others; \[2015\] EWHC 1607 \(Admin\)](#)

¹⁸ BBC news (5 June 2015) [PIPs disability benefit delay unlawful, says High Court](#)

¹⁹ DWP (9 June 2015) [Justin Tomlinson, Minister for Disabled People, writes about the recent Personal Independence Payment \(PIP\) ruling](#)

Statistics

Caseload

26. The latest quarterly PIP statistics at GB level ²⁰ (18 March 2015) show that on 31 January 2015, 343,000 people had a PIP claim in payment, an increase of 135,000 (65%) on the previous reported quarterly figure (October 2014).

Between 8 April 2013 and 31 January 2015:

- 692,400 PIP new claims had been registered, of which 28,900 were claims made under Special Rules for Terminally Ill people.
- 102,400 DLA reassessments had been registered for PIP, of which 1,200 were claims made under Special Rules for Terminally Ill people.
- 536,600 new claims had been cleared, of which 33,800 were for claims made under Special Rules for Terminally Ill people.
- 71,100 reassessments had been cleared, of which 1,500 were for claims made under Special Rules for Terminally Ill people.

27. Of all new-claim decisions, 54% lead to PIP being awarded:

- For claims made under Special Rules for Terminally Ill people, the proportion leading to an award was 99%.
- For claims not made under Special Rules for Terminally Ill people, the proportion leading to an award was 51%.

28. For reassessment decisions, 79% resulted in a PIP award:

- For claims made under Special Rules for Terminally Ill people, the proportion leading to an award was 100%.
- For claims not made under Special Rules for Terminally Ill people, the proportion leading to an award was 78%.

Waiting times

29. The latest data on PIP from the DWP²¹ shows the median time taken to complete an end-to-end claimant journey, from initial registration to a DWP decision, as well as the median time taken between referral to a medical assessment provider to a DWP decision.

New claims - Registration to DWP decision peaked at 41 weeks, for claims cleared in July 2014, and has fallen to 15 weeks for claims cleared in March 2015.

Reassessments - Registration to DWP decision peaked at 32 weeks, for claims cleared in August and September 2014, and has fallen to 11 weeks for claims cleared in March 2015.

²⁰ DWP (2015) [Personal Independence Payment: Official Statistics](#)

²¹ DWP (2015) [Personal Independence Payment: Data to March 2015](#)

Contracts with assessment providers

30. Atos and Capita are paid by the DWP to provide PIP assessments across GB. Capita covers Wales and the Midlands, accounting for 23% of assessments, and Atos covers the rest of GB. Both operate in different ways. Capita directly employs health professionals and aims to assess 60% of claimants at home, but they have an option to visit an assessment centre. Atos subcontracts to 14 smaller organisations, including Salus, who conduct assessments at specified centres using health professionals. Atos remains responsible for administration and quality assurance within its service.
31. The NAO stated that despite improvements in the DWP's commercial approach, Atos and Capita had not achieved the planned levels of performance. From April – October 2013, both Atos and Capita did not achieve agreed performance levels. As a result, Atos had accrued service credits (financial penalties) of £0.8m and Capita £0.2m. Reference was made to the backlog relating to ESA and the Work Capability Assessments carried out by Atos. Since 2011 the DWP suspended the service credits regime three times and revised how it monitored contractual performance. As at 25 October 2013, there was a backlog of 780,000 ESA claims awaiting assessment. In July 2013, the DWP announced that additional providers would be brought in from summer 2014. On 27 March 2014 Atos announced it was withdrawing its contract to deliver WCAs²².

Salus

32. Salus has previously given evidence to the Welfare Reform Committee on [22 January 2013](#) and on [13 May 2014](#) (Kenny Small from NHS Lanarkshire and Mark Kennedy from Salus). In January 2013, Kenny Small described Salus as a fully:

“integral part of the mainstream NHS Lanarkshire service. Its core purpose is to provide occupational health and safety services to the staff of NHS Lanarkshire and to NHS Lanarkshire itself. Historically, over a number of years, because of its expertise Salus has developed what could be defined as a commercial interest. In other words, Salus sells services and bids for contracts to provide occupational health and safety services and other services to other aspects of the public service and to the private sector. Any additional income that is gained as a consequence of that activity is fully reinvested within NHS Lanarkshire. I can confirm that clearly”. (col 487)

33. Salus submitted written evidence to the Committee for its meeting on 13 May 2014 which included the following information:
- To date approximately 10,700 appointments have been offered, with over 6,800 individual consultations completed.
 - To date 5 complaints have been received (rate = 0.0007% - none upheld).
 - No penalty credits have been sanctioned.
 - Staff are completing an average of 4 consultations a day
 - Salus hope to provide over 31,000 appointments by December 2014
 - “Atos Healthcare and DWP have informally stated that Salus are among the best service providers relating to the quality of reports submitted”

²² HC Deb 27 March 2014 [c57WMS](#)

- Currently 25.5 WTE health professionals are in place; this will rise to 37 WTE by August, assuming all posts are filled.

34. In evidence on 13 May 2014 Salus said that it had conducted 7,000 PIP assessments, and that 30,000 or 31,000 consultations could be offered by the end of 2015. Mark Kennedy said that they would be on track to achieve this, dependent on Atos and DWP:

“The way it works is that we provide appointment slots a month in advance to Atos, which fills them on our behalf. We say to Atos that we will provide it with 3,000 slots a month, which is the maximum we can do, and we are now just about at our maximum capacity.

As far as overall performance is concerned, I think that there is still a bit of catching up to do—and not, I have to say, by Salus. The need to catch up flows from the figures that Atos and the DWP have put together”. (col 1486).

35. Other issues discussed on 13 May 2014:

- Average assessment time with Salus is 90-110 minutes
- To date, no penalty credits have been issued
- Salus does not receive any formal report back from DWP and is therefore not aware of the outcome of the assessments it undertakes:

“At the moment, there is a contractual arrangement between Atos and the DWP for reporting—there is no direct mechanism between the DWP and Salus for that. However, I hope that the DWP will soon be reporting early findings on PIP in the public arena, which we could perhaps drill into, as our work will represent a percentage of that”. (col 1492)

- Consults claimants about their experiences of being assessed by Salus
- According to Salus, it covers 55% or 56% of the Atos contract in Scotland (col 1496)
- Salus implied that PIP waiting times might not have doubled had they been in charge of the process end-to-end (col 1499).

Nicki Georghiou
SPICe Research
16 June 2015

Note: Committee briefing papers are provided by SPICe for the use of Scottish Parliament committees and clerking staff. They provide focused information or respond to specific questions or areas of interest to committees and are not intended to offer comprehensive coverage of a subject area.

Annexe

PIP Implementation

1. A briefing by the House of Commons Library shows how the timetable for PIP implementation has been revised twice²³, as illustrated in the table below.
2. The original plan to introduce PIP for new claims from April 2013, in a controlled area, and extending to the rest of Great Britain from June 2013 has not been affected.
3. It is the reassessment of DLA to PIP that has been revised. There are two stages to reassessment, 'natural reassessment' and 'managed reassessment'. The following DLA claimants would be invited to claim PIP under the first stage of 'natural reassessment'.
 - Children turning 16 (except those awarded DLA under special rules for terminally ill) when their fixed term was coming to an end
 - People experiencing a change in their health condition or disability that would affect their rate of payment
 - Those with a fixed term award about to end
 - 'Self-selectors' – existing DLA claimants wishing to claim PIP
4. All remaining DLA claimants will be invited to claim PIP under 'managed reassessment'.
5. Following a consultation²⁴, the UK Government announced in December 2012 a 'significantly slower migration profile' for reassessing DLA claimants for PIP. This would allow time to 'learn from the early introduction of PIP' in time for the peak period of reassessments to begin, 'around two years later', in October 2015²⁵, i.e. the managed reassessments.
6. In October 2013 a further delay was announced - that a phased start for PIP natural reassessments would be introduced from 28 October 2013²⁶. This would enable the UK Government to test the claimant reassessment journey using a similar approach taken for new claims to PIP, i.e. in controlled areas, and provide an opportunity to consider its first independent review of PIP by the end of 2014 – a commitment made in the Welfare Reform Act 2012. Indeed, the Committee recently heard evidence from Paul Gray who carried out the review (see below).

²³ House of Commons Library (2015) [Introduction of Personal Independence Payment](#)

²⁴ DWP (2012) [Government's response to the consultation on DLA reform and PIP – completing the detailed design](#)

²⁵ DWP (December 2012) [Personal Independence Payment: Reassessment and Impacts](#)

²⁶ HC Deb 21 October 2013 [c8WMS](#)

Introduction of PIP: revised implementation

	Original	First revision – December 2012 ²⁷	Second revision –October 2013 ²⁸
New claims (north west and north east England)	April 2013	April 2013	April 2013
New claims across GB		June 2013	June 2013
Reassessment from DLA to PIP	October 2013	October 2013	October 2013
		'Natural reassessment' of working age DLA claimants	'Natural reassessment' of working age DLA claimants in controlled areas - Wales, East Midlands, West Midlands and East Anglia (where assessments are carried out by Capita).
			January 2014 'Natural reassessment' extended to southern Scotland (postcodes beginning DG, EH, TD, and ML)
			February 2014 'Natural reassessment' extended to parts of northern England
	Spring 2016 All remaining DLA claimants would be invited to claim PIP.	October 2015 'Managed reassessment' All remaining DLA claimants would be invited to claim PIP. To be completed by October 2018	October 2015 'Managed reassessment' All remaining DLA claimants would be invited to claim PIP. The DWP will randomly select claimants in receipt of an indefinite award or fixed term award. By late 2017 – all existing working age claimants will have been invited to claim PIP.

The DWP provides a [timetable](#) for PIP replacing DLA, by area.

²⁷ DWP (December 2012) [Personal Independence Payment: Reassessment and Impacts](#)

²⁸ DWP (October 2013) [Personal Independence Payment rolls out to existing claimants](#)