



Social Justice and Social Security Committee
Thursday 12 March 2026
9th Meeting, 2026 (Session 6)

Adult Disability Payment

The Committee will hear from:

- Craig Smith, Public Affairs and Policy Manager, SAMH
- Keith Park, Senior Policy, Public Affairs and Campaigns Manager (Scotland), MS Society
- Erica Young, Senior Policy Officer (Social Justice), Citizens Advice Scotland
- Frank McKillop, Director of Governance and Policy, Enable

Introduction

The Scottish Government has [published its response](#) to the independent review of Adult Disability Payment (ADP). Today's witnesses were members of the advisory board for the independent review. This paper summarises the Scottish Government response and suggests themes for discussion. Written submissions were received from Edel Harris and the MS Society.

Background

Independent Review

The Scottish Government appointed Edel Harris in February 2024 to undertake an independent review of ADP. She [published her report in July 2025](#) making 58 recommendations under four broad themes.

The recommendations are provided in full in the Annex to this paper along with a note of where they are discussed in the Scottish Government's response.

The review considered people's experiences of ADP, processes in applications and decision-making as well as the eligibility criteria. It also took account of the Scottish Government's 2023 [consultation on the mobility component](#). The remit did not extend to considering adequacy of payments, supporting information, duration of awards, reviews or alternative forms of mobility support. Nor did it consider alternatives to delivery by Social Security Scotland.

Scottish Government response

The Scottish Government published its response on 19 February. The response did not refer to any recommendations by number, so it is not always clear exactly which recommendations are being discussed. SPICe analysis, summarised in table 1

below, suggests that 23 recommendations are to be progressed over the next three months, 9 are being ‘considered further’, 7 were rejected and 16 are deferred to the next Scottish Government.

The Annex to this paper sets out the recommendations in full, together with a summary of the Scottish Government’s response to each.

Table 1: Summary of recommendations and response.

Theme	Three months	Considering further	Reject	Defer	Unclear	total
A people’s service	7	1	1	0	0	9
Processes that work	11	8	3	0	3	25
A learning system	2	0	3	0	0	5
A better future	3	0	0	16	0	19
Total	23	9	7	16	3	58

Source: SPICe analysis of Scottish Government response. NB: the response does not refer to recommendation numbers. There are a few recommendations where it is difficult to ascertain the response.

Recommendations being progressed in next three months

The actions being progressed before the election include work that Social Security Scotland is already engaged in. For example:

- Recommendation 1 was to re-instate an expert by experience group to guide the next stage of the evolution of ADP. The response stated that: “The client panels team will ensure that lived experience remains central to the future of ADP.” (para 12)
- Recommendation 2 was to ‘further develop strategies to effectively engage with seldom heard voices and individuals who may be eligible but do not apply...’. The response described ongoing research to better understand the experiences of seldom heard audiences (para 12).
- Recommendation 11 was to ‘continue to do all possible to improve decision-making times and call wait times.’ The response stated that: “Social Security Scotland is committed to consolidating progress, reducing both decision waiting times and the time people wait to get through by phone” (para 21).

Clearly identifiable new work starting in the next three months is:

- **Updating Decision Makers’ Guidance** Paras 22-23 of the response referred to four recommendations which relate specifically to Decision Making Guidance, on which work will start in the next three months. Recommendations 16, 20, 22 and 23 all refer to decision making guidance.
 - Recommendation 16: review guidance to ensure “undue weight is not given to how a person manages pain or whether they have access to clinical support or therapy.”

- Recommendation 20: make clear that inability to complete one activity reliably may be relevant to whether or not a client can complete other activities and should be proactively considered by case managers.
- Recommendation 22: Ensure the outcomes of caselaw decisions are reflected in guidance and training.
- Recommendation 23: Review training and guidance “to ensure no bias in the system when considering mental health problems...”.
- **Introducing a new ADP determination letter** in spring 2026 (response para 49). Recommendation 34 was to review determination letters to assess how effective or otherwise the communication is in relation to the award duration. Recommendation 29 was for the determination letter to give more prominence to information about appeals and re-determinations.
- **Reviewing the ‘28-day rule’** which means that disability benefits stop after 28 days in hospital (response para 28-30). Recommendation 32 was “to revisit the eligibility rules in respect of cessation of ADP if 28 or more days are spent in hospital.”

Recommendations being considered further

Nine recommendations are being ‘considered further’. In some cases this means active work to progress the recommendation which is accepted in principle, in others the Scottish Government needs to do further research before deciding whether action is needed. Recommendations agreed to include:

- **Reviewing the ADP application form** Recommendation 10 was to review the application form, “including its length and reconsider the way the questions are framed to maximise the opportunity for a client to articulate how their disability or condition impacts on their daily life and to reduce the anxiety and stress associated with the task of applying.” Recommendation 19 was to explain the reliability criteria more clearly in promotion materials and throughout the application process.

In their response, the Scottish Government agreed that the application form should be reviewed, noting that: “This work will require significant time and resources, and Social Security Scotland will consider how it can be delivered within existing programmes.” (para 38).

Other recommendations that are being considered further tended to put more emphasis on the work required before a decision to go ahead could be made.

- **Providing additional information to clients.** Several recommendations proposed additional information should be provided to clients. For example: Recommendation 6 was to ‘actively promote and give due prominence to independent advice services’. Recommendation 17 was to ensure each letter was ‘stand-alone’ and to put the date on each page. Recommendation 21 was to make explicit reference to the reliability criteria in decision correspondence.

In response, the Scottish Government emphasised that simplicity is paramount: “clients want clear, concise information that is easy to understand without unnecessary detail.” Extensive user research and development work “will be applied to these recommendations before any commitment to implementation is made” (response para 18).

- **Automatic entitlement to ADP.** Recommendation 33 proposed that “consideration be given to granting automatic entitlement to ADP when satisfying certain conditions or being in receipt of other forms of assistance without having to satisfy the qualifying period.”

The Scottish Government notes that this would be a “significant departure from the current process” and that “Research would be needed to identify suitable criteria and assess implications for clients who still need to apply. This work must be completed before the Scottish Government can decide whether to proceed.” (response paras 39-43).

- **Exploring options on client updates.** Recommendation 12 was to “provide an estimated processing time when an application is submitted and proactively provide regular updates on wait time for processing.” Recommendation 13 was to develop and deliver a Track Your Application online portal.

The Scottish Government stated that they are ‘currently unable to commit to implementing’ these but will ‘continue to explore options’ (response para 32).

Recommendations not being implemented

Seven recommendations are rejected (8, 27, 28, 30, 35, 37, 38).

- **Booking appointments:** Recommendation 8 was to introduce a dedicated route to book appointments with the ‘Local Delivery service’. The response argues that the current approach (of going through the main helpline) ‘ensures that the date of entitlement is accurately recorded and protected.’ (Response para 19)
- **Redetermination of the whole award.** At redetermination, Social Security Scotland re-make the whole decision – they don’t just focus on the issue being challenged. This means any part of the award could be increased, decreased or removed. Recommendation 27 was to allow case managers to only focus on the areas in dispute. The Scottish Government disagreed, saying: “While concerns about reductions are understandable, the Scottish Government’s commitment to robust, accurate decision-making is best achieved by maintaining the current process.” (response para 45)
- **Redetermination timescales.** Recommendation 28 was to improve redetermination timescales. The Scottish Government said that current performance was strong, with 95% of redeterminations being completed within statutory timescales. Reducing it ‘could compromise accuracy.’ (response para 47).

- **Short Term Assistance.** Recommendation 30 was to make STA ‘opt-out’ rather than ‘opt-in’. (When a client is challenging the reduction or removal of an ADP award, [STA](#) is paid during redetermination and appeal). The Scottish Government argued that the current system ‘supports flexibility and choice’ and work will continue to raise awareness of the payment. (response para 48).
- **Accessible communications** Recommendation 35 was that all guidance should be in an accessible format. The Scottish Government said that ‘organisations prefer to produce their own tailored materials’ but the issue ‘would be kept under review’ (response para 52). Recommendation 38 was to promote the option for letters to be translated into alternative languages. The Scottish Government rejected this, saying current demand for this service suggests there is already good awareness. (response para 53)
- **Single Point of Contact** Recommendation 37, proposing a ‘single point of contact’ through a client’s ‘ADP journey’ was rejected on the grounds that, as a lifelong benefit, ‘clients interact with Social Security Scotland at many points over time’ and that different teams have different expertise. The response also noted that staff handling re-determinations should be different from those handling the initial application. (response para 54).

Decisions deferred

Decisions on most of the recommendations made under the fourth theme ‘A better future’ are deferred. The Scottish Government response acknowledges that “This theme contains the report’s most significant recommendations” but “it will be for the next Scottish Government to respond following the election to the Scottish Parliament in May 2026” (response para 55).

Suggested themes for discussion

The following suggests discussing witnesses’ overall response to the Scottish Government’s response before considering issues in more detail under each of the report’s main headings: a people’s service, processes that work, a learning system and a better future.

Overall response

The Committee discussed the report with Edel Harris on [11 September \(in the context of pre-budget consideration\)](#) and more broadly on the report as a whole [on 27 November](#). In November she emphasised the level of expectation amongst disabled people, saying there are:

“high expectations of the review among disabled people in Scotland. Probably the most important point to make is that they expect some things to change as a result.” ([SJSS Committee Official Report, 27 November 2025, col 3](#))

She further explained:

“This is a real “moment in time” opportunity in Scotland. It will be for others to decide whether some or all of my review’s recommendations should be implemented, but there is an expectation among many disabled people that if, as a country, we are committed to the principle of ADP being an investment in the people of Scotland and, as the charter and the legislation state, we are committed to establishing a world leading disability payment system that is based on social security being a human right, my question is why we would not want to take this opportunity. Why would we just accept the PIP framework and continue making the experience better for clients but not fundamentally change how we make decisions?” ([SJSS Committee Official Report, 27 November 2025, col 11](#))

Ms Harris provided a written submission giving her views on the Scottish Government’s response. She welcomed some measures, such as the commitment to review the ‘28 day rule’ but expressed her disappointment that the response on changes to eligibility has been deferred to after the election. She concluded:

“I welcome the commitment shown by the Scottish Government, but there is still more that can be done to deliver a truly human-rights based approach to the awarding of disability payments in Scotland.”

In their submission, the MS Society commented that there were a number of positive steps, but: “the response does not go far enough.” In particular they say it is “deeply disappointing” that “recommendations that challenge current policies have yet to receive a definite commitment.”

Members may wish to discuss:

- 1. What are witnesses’ general reflections on the Scottish Government’s response to the independent review of Adult Disability Payment?**

A people’s service

Out of nine recommendations in this section, the Scottish Government rejected one (recommendation 8) and agreed to implement seven within three months (recommendations 1, 2, 3, 4, 5, 7, 9). Recommendation 6 will be considered further.

It is not clear the extent to which new work is being undertaken in response to the recommendations under this theme.

The seven recommendations to be implemented within three months largely reflect work that Social Security Scotland is already doing. For example, the response refers to; client panels as central to the approach, ongoing research on seldom heard groups, developing estimates of ADP eligibility, embedding a trauma-informed approach, promoting Local Delivery and Advocacy, and training Local Delivery staff.

In response to recommendations on providing additional information, the Scottish Government emphasised the need for clear communications:

“Several recommendations under this theme relate to the information provided to clients, including in decision letters and other communications about entitlement. Following publication of the Independent Review’s Interim Report, extensive user research and development work was undertaken to ensure that written materials from Social Security Scotland meet the needs of their intended audience. The key finding from this work is that simplicity is paramount. Clients want clear, concise information that is easy to understand, without unnecessary detail. For this reason, the same rigorous process will be applied to these recommendations before any commitment to implementation is made.” (Response, para 18)

Recommendation 8 was to introduce a dedicated route to book appointments with the ‘Local Delivery service’. The Scottish Government rejected this and argued that the current approach of going through the main helpline ‘ensures that the date of entitlement is accurately recorded and protected.’ (Response para 19).

The MS Society: “welcome the Scottish Government’s positive response to the majority of recommendations relating to this theme.” Although they understand the explanation for not agreeing to create a direct booking system, it “should be explored for future implementation as it will improve the experience of people claiming ADP.”

Members may wish to discuss:

2. **To what extent do witnesses think the Scottish Government’s responses on the theme of ‘A People’s Service’ create new work for Social Security Scotland?**
3. **The review suggested various additions to client communications, but the response emphasised clarity and simplicity. Do witnesses think Social Security Scotland currently get the right balance between clarity and the amount of information provided?**

Theme 2: Processes that work

Of the 25 recommendations in this section, eleven are being implemented within three months, eight are being considered further and three were rejected. For three recommendations it is not clear how the response addresses them.

Implement within three months

Recommendations to be implemented within three months related to:

- improving processing and call waiting times (recommendation 11)
- training and guidance (16, 20, 22, 23, 24)
- ensuring choice about having a consultation and its format (25, 26)
- changes to the ADP decision letter (29, 34)
- reviewing the 28 day rule (32)

Considering further

Eight recommendations are to be considered further (10, 12, 13, 17, 19, 21, 31, 33)

The Scottish Government will review the ADP application form, which is relevant to recommendations 10 and 19.

The Scottish Government will introduce a new ADP determination letter this spring, giving more prominence to information about appeals and re-determinations (recommendation 29). However, they will 'consider further' the recommendations to put the date on every page (recommendation 17) and to make explicit reference to the reliability criteria (recommendation 21).

Recommendations 12 and 13 are to provide an estimate of processing times and introduce a 'Track Your Application' portal. The Scottish Government "is currently unable to commit to implementing this" but will consider further. An online portal has been a common request for several years. (For example see [Client Survey Report 2022-23 p. 81](#))

Recommendation 31 was to provide more information on what constitutes a 'change of circumstances'. In response, the Scottish Government said that: "clients already receive this information at a level intended to ensure understanding without overload" (response para 35).

Recommendation 33 was to consider automatic entitlement to ADP for those with certain conditions or with entitlement to certain other services. The ADP report explains further:

"Automatic entitlement to Adult Disability Payment could potentially be introduced for people who have already been assessed for and awarded other forms of support such as for example, a social care package, Independent Living Fund and Blue Badge for mobility." (ADP Review, p.75).

The Scottish Government considers that this would: "be a significant departure from current processes" and would require extensive research. (response para 39-41).

Not implementing

Recommendations 27, 28 and 30 were rejected.

- **Redetermination of the whole award.** At redetermination, Social Security Scotland re-make the whole decision – they don't just focus on the issue being challenged. This means any part of the award could be increased, decreased or removed. Recommendation 27 was to allow case managers to only focus on the areas in dispute. The Scottish Government disagreed saying: "While concerns about reductions are understandable, the Scottish Government's commitment to robust, accurate decision-making is best achieved by maintaining the current process." (response para 45)
- **Redetermination timescales.** Recommendation 28 was to improve redetermination timescales. The Scottish Government said that current

performance was strong, with 95% of redeterminations being completed within statutory timescales. Reducing it ‘could compromise accuracy.’ (response para 47).

- **Short Term Assistance.** Recommendation 30 was to make STA ‘opt-out’ rather than ‘opt-in’. (When a client is challenging the reduction or removal of an ADP award, [STA](#) temporarily tops up the ADP payment so that a client doesn’t get any less money during redetermination or appeal). The Scottish Government argued that the current system ‘supports flexibility and choice’ and work will continue to raise awareness of the payment. (response para 48).

The MS Society welcome the response on this theme, but note that: “without changes to the eligibility criteria these proposed process improvements will have minimal impact.”

Members may wish to discuss:

- 4. The Scottish Government is ‘unable to commit’ to an online portal to track the progress of applications. Is an online portal a priority for the people you support?**
- 5. The Scottish Government has agreed to review the ADP application form. The response points out that the current form is the result of years of engagement with stakeholders. What are the lessons from that previous work that can inform this next review?**
- 6. The Scottish Government intends to keep the current practice that a redetermination re-makes the whole decision. What are witnesses views on how this approach affects clients?**
- 7. The Scottish Government rejected the recommendation that Short Term Assistance should be ‘opt out’ rather than ‘opt in’. (Recommendation 30). The response says the current approach supports flexibility and client choice. Do you agree? Why/why not?**

Theme 3: A learning system

There were five recommendations under this theme, two of which will be implemented. These are on reviewing inclusive communications (recommendation 36) and building capacity for training on stigma (recommendation 39).

The Scottish Government rejected recommendation 35 (to ensure the full suite of guidance is available in Braille, BSL, easy read, commonly used languages and other accessible formats). It also rejected recommendation 38, to promote the option to request written translations.

Recommendation 37, which proposed a ‘single point of contact’ through a client’s ‘ADP journey,’ was rejected on the grounds that, as a lifelong benefit, ‘clients interact with Social Security Scotland at many points over time’ and that different teams have

different expertise. The response also noted that staff handling re-determinations should be different from those handling the initial application. (response para 54).

The MS Society states that: “while it is disappointing that three of the recommendations in this section will not be implemented, we acknowledge the explanations for this and welcome the fact that they will remain under review.”

Members may wish to discuss:

- 8. The Scottish Government rejected the recommendation to provide a single point of contact for ADP clients. (Recommendation 37) What difference would it make to clients to have a single point of contact?**
- 9. The Scottish Government rejected two recommendations on inclusive communications. (Recommendations 35 and 38). How would witnesses assess Social Security Scotland’s current ability to support inclusive communication?**

Theme 4: A better future

Decisions on the recommendations under this theme have been deferred to the next Scottish Government.

When Edel Harris attended Committee on 11 September, she highlighted the recommendations in this fourth section of the report as being more radical and important:

“If I were forced to make a choice about what would be most effective, as it were, I would point to recommendations 41, 42, 55 and 56, one of which is about having a comprehensive review of the eligibility criteria to make sure that they reflect modern life and people’s real experiences of living with a disability or long-term health condition. On replacing the 50 per cent rule, there was a huge amount of evidence, storytelling and conversation about how the current eligibility criteria do not work for people who live with fluctuating conditions. Recommendation 55 is to do with planning and following journeys, and 56 is on the mobility component.” ([SJSS Committee Official Report, 11 September 2025, col 24](#)).

When Edel Harris attended the Committee meeting on 27 November 2025 she suggested a more holistic approach to considering costs and value for money:

“As far as I understand it, all the research and focus at the moment is on the potential additional cost of making changes and on the additional costs that are already in the system because Scotland has chosen to do things differently. I have not yet seen anyone do a piece of work on the potential economic benefits of investing in disabled people in Scotland or on the difference that that investment could make in reducing poverty, for example, or in people being more economically active and independent.” ([SJSS Committee, Official Report, 27 November 2025, col 13](#))

She did not consider that her recommendations would necessarily result in higher costs:

“I do not think that reviewing the eligibility criteria to meet all the purposes that I outlined earlier would necessarily mean that more people would be eligible and that there would therefore be a bigger cost. It would just mean that we would have a system that was based on human rights and on the social model of disability.” ([SJSS Committee, Official Report, 27 November 2025, col 14](#))

In contrast, the [Scottish Government's response](#) emphasises the scale of the challenge:

“The wholesale modernisation of ADP, as recommended in the Report, will require extensive policy development, consultation, user research, and legislative reform. In many cases changes will require significant ongoing expenditure.”

[...]

“These are not reasons to avoid the challenge, but transparency is essential about the scale of public investment required.” (response para 60).

The Scottish Government has estimated that the annual cost of changing the following four rules would be £1 billion in 2029-30. The four rules included were:

- Removing the 28-day hospital rule (See recommendation 32, the Scottish Government agreed to review the rule – see para 28 to 30 of their response).
- Introduce certain automatic entitlements (See recommendation 33, which the Scottish Government agreed to consider further – see paras 39 to 43 of their response).
- Create a new entitlement category based on substantial risk (See recommendation 45. Decision deferred to next Scottish Government).
- Widen eligibility for the mobility component. This would take two thirds of the cost. (See recommendations 55, 56 and 58. Decision deferred to next Scottish Government).

In her written submission, Edel Harris challenged the view that her recommendations would widen eligibility:

“I struggle to see how a decision-making framework based on outcomes and a person's real-life experience, rather than the ability to walk a fixed distance, necessarily results in more people being eligible and more people receiving the higher mobility award.”

She noted that the strongest themes raised with her were not addressed by the Scottish Government:

“Alongside changes to the mobility criteria, the 50% rule and living with fluctuating conditions were the strongest recurring themes coming from the disabled people I engaged with during the course of the Review.”

[...]

“I know that many of the Disabled People's Organisations and charities who engaged with the Review will be disappointed that the Government has not addressed the most substantive, system changing, recommendations from the Review.”

The [50% rule](#) is a requirement that a person must be impacted by their condition, to the extent set out in the assessment descriptors, on at least half (50%) of the days in a given period (normally a year). The 20m rule is that, to qualify for the higher mobility rate, a person must not be able to walk more than 20m.

The MS Society acknowledges the fiscal context, but states that: “Using this reasoning for delaying any decision to changes to the eligibility criteria sits contrary to the Scottish Government’s belief that social security is an investment in society.”

Members may wish to discuss:

- 10. The Scottish Government has not provided a response to most of the recommendations on changing eligibility. Do witnesses wish to comment on this?**
- 11. Some of the issues on which decisions have been deferred have been discussed for many years - particularly the criteria to qualify for the mobility component and the impact of the ‘50% rule’. Do witnesses consider the debate has developed or moved forward during that time?**
- 12. What are witnesses’ views on the affordability of changing eligibility for ADP?**
- 13. What advice do you have for the next Scottish Government about how to take forward the recommendations from the independent review of ADP?**

Camilla Kidner, Senior Researcher, SPICe

Date: 5 March 2026

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.

The Scottish Parliament, Edinburgh, EH99 1SP www.parliament.scot

Annex: ADP review recommendations and SPICe analysis of Scottish Government response.

Table 1 ‘A people’s service’

Recommendation	Summary of Scottish Government response	
The client voice		
Recommendation 1: The reinstatement of an expert by experience group to guide the next stage of the evolution of Adult Disability Payment following the publication of this report.	<u>Para 12.</u> <u>Implement within 3 months</u>	“client panels team will ensure that lived experience remains central to the future of ADP”
Recommendation 2: To further develop strategies to effectively engage with seldom-heard voices and individuals who may be eligible but do not apply due to stigma, to address the societal and sometimes cultural stigma associated with disability benefits to ensure broader and fairer access	<u>Para 12, 13.</u> <u>Implement within three months.</u>	Research with seldom heard groups will feed into benefits take-up strategy.
Recommendation 3: Social Security Scotland should consider how effective its understanding is of take-up amongst seldom-heard groups and consider ways to maximise its reach.	Para 14. Implement within three months	Estimating ADP eligibility is not straightforward. Update on progress by mid-2026
Trauma informed approach		
Recommendation 4: In addition to the pilot underway within Social Security Scotland, ensure a trauma-informed approach is embedded in all aspects of its work, by producing a framework where trauma-informed principles are reflected in the practice of Social Security Scotland	<u>Para 16.</u> <u>Implement within three months.</u>	“work is ongoing to ensure this approach is consistently embedded across the organisation.”
Recommendation 5: For Social Security Scotland to strengthen its Local Delivery service partnerships to ensure that appropriate links are made to signpost or refer clients seeking assistance in connection with Adult Disability Payment to local services (with the client’s consent) so they can ensure they get access to the help and support they may need. This should include identifying areas of best practice in partnership working to continue to enhance the service for Adult Disability Payment clients.	<u>Para 15.</u> <u>Implement within three months</u>	“work is on-going to ensure explore safe and secure sharing of client data with relevant organisations.”
Accessing pre-application advice and support		

Recommendation 6: Social Security Scotland should ensure that it actively promotes and gives due prominence to independent advice services to both potential and current clients, including in materials that clients receive from Social Security Scotland.	Para 18. <u>Consider further</u>	“simplicity is paramount. Clients want clear, concise information that is easy to understand, without unnecessary detail.”
Recommendation 7: Social Security Scotland to increase and improve the promotion of the Local Delivery service and the Independent Advocacy Service.	Para 15. <u>Implement within three months</u>	Continue to strengthen promotion of these.
Recommendation 8: Introduce a dedicated route to speak to Social Security Scotland about Local Delivery and to book appointments.	Para 19. Reject.	Booking via helpline ensures date of entitlement is accurately recorded.
Recommendation 9: Improve Local Delivery staff training to address a lack of awareness of certain conditions and the impacts they have on daily living.	Para 17. <u>Implement within three months.</u>	“continue to deliver awareness raising through regular training sessions.”

Table 2 Processes that work

Recommendation	Scottish Government response	
Applications		
Recommendation 10: Taking into account the findings in this report, review the application form, including its length and reconsider the way the questions are framed to maximise the opportunity for a client to articulate how their disability or condition impacts on their daily life and to reduce the anxiety and stress associated with the task of applying	Para 36-38 Consider further	Will review ADP application form. This will take significant time and resources. Will consider how it can be delivered within existing programmes.
Processing times		
Recommendation 11: As indicated in Social Security Scotland's Business Plan 2024- 25, continue to do all possible to improve decision-making times and call wait times.	Para 21 Implement within three months	“committed to consolidating progress” on this.
Recommendation 12: In addition to providing an estimated processing time when an application is submitted, proactively provide regular updates on likely wait time for processing an application, review or a change of circumstances.	Para 32 Consider further	“Currently unable to commit to implementing” this, but “will continue to explore options.”
Recommendation 13: Develop and deliver a 'Track Your Application' online portal making it easier for clients to apply for Adult Disability Payment and to improve communication on the status of a client’s application.	Para 32 Consider further	“Currently unable to commit to implementing” this, but “will continue to explore options.”
Implicit Consent		

<p>Recommendation 14: Improve the service experience for Adult Disability Payment clients and third-party representatives interacting with Social Security Scotland on their behalf by:</p> <ul style="list-style-type: none"> (a) developing an understanding of any differences in the implementation of implicit consent (as used by the DWP) and unavailable consent (as used by Social Security Scotland) to ensure third party representatives can receive equivalent standards of service from both (b) assessing the consistency of the implementation of the current guidance on unavailable consent to ensure it is aligned with the policy intention and updating it where necessary, and (c) using learning from the ‘interacting with third-party representatives’ pilot to consider the merits of a third-party escalation route; to update policy and guidance about how declarations and third-party mandates are obtained and to ensure that the way in which mandates are obtained reflect the published policy and guidance 	<p>Para 33 may refer to this recommendation but text is unclear.</p> <p>Para 23 may refer to rec 14b and 14c.</p>	<p>discusses verification for local authority corporate appointee process, so unclear if a direct response to recommendation 14.</p> <p>Para 23 discussion of training and guidance may be relevant.</p>
<p>Decision making</p>		
<p>Recommendation 15: For Social Security Scotland to continually assess how one can balance the need for fairness and equity with the discretion that is inherent in the determination process</p>	<p>Para 23 may refer to this recommendation but text is unclear.</p>	<p>Social Security Scotland continually updates training and guidance.</p>
<p>Recommendation 16: For the decision-making training and guidance to be reviewed to ensure that undue weight is not given to how a person manages pain or whether they have access to clinical support or therapy.</p>	<p>Para 22 Implement within three months</p>	<p>One of four recs specifically on Decision Making Guidance</p>
<p>Recommendation 17: For each letter from Social Security Scotland to be stand-alone so there is no need to cross reference with other correspondence and put the date of the correspondence on every page when sending letters to clients.</p>	<p>Para 34 Consider further</p>	<p>Could improve clarity, but may also result in repeated information or significantly longer letters. Will be reviewed.</p>
<p>Reliability Criteria</p>		
<p>Recommendation 18: Ensure rigorous application of the reliability criteria to ensure consistency in the decision-making approach</p>	<p>Para 23 may refer to this recommendation but text is unclear.</p>	<p>Social Security Scotland continually updates training and guidance.</p>

<p>Recommendation 19: The reliability criteria should be explained clearly both in promotional materials, at the start and throughout the application process with more examples, so that clients understand its importance and have a clear understanding of how it is applied in making decisions.</p>	<p>Para 36-38 Consider further</p>	<p>ADP application form will be reviewed.</p>
<p>Recommendation 20: Make clear in decision-making guidance and in training that the inability to complete one activity reliably may be relevant to whether or not a client can complete other activities and should be proactively considered by case managers.</p>	<p>Para 22 Implement within three months.</p>	<p>Two of four recs specifically on Decision Making Guidance</p>
<p>Recommendation 21: Social Security Scotland should ensure that explicit reference is made to the reliability criteria in all decision correspondence, so that clients and representatives can understand if, and how, the criteria have been applied</p>	<p>Para 34 Consider further</p>	<p>Could improve clarity, but may also result in repeated information or significantly longer letters. Will be reviewed.</p>
<p>Recommendation 22: To ensure that the outcomes of caselaw decisions are reflected in decision-making guidance and training</p>	<p>Para 22 Implement within three months</p>	<p>Three of four recs specifically on Decision Making Guidance</p>
<p>Case Discussions</p>		
<p>Recommendation 23: To review the training and guidance available in relation to decision-making to ensure there is no bias in the system when considering mental health problems as opposed to physical conditions and to reinforce the point that an individual's condition is just one of many factors that the case manager needs to take into consideration when deciding upon an award.</p>	<p>Para 22 Implement within three months.</p>	<p>Four of four recs specifically on Decision Making Guidance</p>
<p>Recommendation 24: For Social Security Scotland to introduce a plan to clarify the approach they take to engage charities and specialist organisations in providing guidance and training to case managers and practitioners on specific disabilities or conditions</p>	<p>Para 24 Implement within three months</p>	<p>“Will continue to involve stakeholders in strengthening feedback mechanisms through clear engagements plans.”</p>
<p>Consultations</p>		
<p>Recommendation 25: For the initial choice of whether or not to have a consultation to be the client's choice, rather than the case managers.</p>	<p>Para 25, 26 Implement within three months</p>	<p>“further work will ensure [clients] can request a consultation, in a format that suits them.”</p>

<p>Recommendation 26: For the initial choice of format for the consultation to be the client’s choice to ensure the client understands fully the options available and clients do not feel in any way compelled to default to the telephone route.</p>	<p>Para 26 Implement within three months</p>	<p>“further work will ensure [clients] can request a consultation, in a format that suits them.”</p>
<p>Redeterminations and appeals</p>		
<p>Recommendation 27: To consider how to mitigate the risk of removing an award, for example, by empowering case managers only to focus on the areas in dispute raised by the client if a new decision is likely to be disadvantageous and adopting the previous rationale for making a decision in those areas not in dispute.</p>	<p>Para 45 reject</p>	<p>Changing this could result in clients not receiving everything they are entitled to. Letters are clear that, at redetermination, an award may increase, stay the same or decrease.</p>
<p>Recommendation 28: For Social Security Scotland to improve re-determination timescales.</p>	<p>Para 46 Reject</p>	<p>95% of decisions are completed within statutory timescale. Reducing timescales could compromise accuracy.</p>
<p>Recommendation 29: For information about appeals, and re-determinations to be given more prominence on the front page of the determination letter</p>	<p>Para 27 Implement within three months</p>	<p>new ADP determination letter introduced by spring</p>
<p>Short Term Assistance</p>		
<p>Recommendation 30: To consider introducing automatic awarding of short-term assistance with an opt-out clause to acknowledge a client’s right to choose.</p>	<p>Para 48 Reject</p>	<p>Current approach supports flexibility and client choice. Will continue to raise awareness of STA.</p>
<p>Recommendation 31: Provide more detailed guidance on what qualifies as a change of circumstance; the reasons why reporting a change of circumstance is important and provide examples to illustrate the types of situations when it might be necessary.</p>	<p>Para 35 Consider further</p>	<p>“Clients already receive this information at a level intended to ensure understanding without overload.”</p>
<p>Effect of time in hospitals or care homes</p>		
<p>Recommendation 32: To re-visit the eligibility rules in respect of cessation of Adult Disability Payment if 28 or more days are spent in hospital.</p>	<p>Paras 28-30 Implement within three months.</p>	<p>Will revisit this policy across all disability assistance.</p>
<p>Automatic entitlement</p>		
<p>Recommendation 33: For consideration to be given to granting automatic entitlement to Adult Disability Payment when satisfying certain conditions or</p>	<p>Paras 39 – 41</p>	<p>Would be a significant departure from current process. Research</p>

being in receipt of other forms of assistance without having to satisfy the qualifying period.

Consider further

needed before deciding whether to proceed. Clients may be misunderstanding the qualifying period.

Award periods and Reviews

Recommendation 34: As part of Social Security Scotland’s quality assurance process, review a selection of determination letters to assess how effective or otherwise the communication is in relation to the award duration and/or consider using the client survey to gather feedback on decision making and communication in this regard.

Para 27
Implement within
three months

new ADP determination letter to be introduced by spring 2026

Table 3: A Learning System

Recommendation Communication	Scottish Government Response	
Recommendation 35: Social Security Scotland to consider updating the suite of guidance available to clients to ensure information is always available in Braille, BSL, Easy Read, other commonly used languages and other accessible formats.	Para 52 Reject	Organisations prefer to produce their own tailored materials when needed. Keep under review.
Recommendation 36: Social Security Scotland to review its inclusive communication practices with a view to ensuring there are no barriers to people with communication needs applying for Adult Disability Payment.	Para 49 Implement within three months.	Will soon launch an ‘inclusive communication pack’
Recommendation 37: To consider providing a point of contact to improve trust and ensure a more personalised and accessible route to two-way communication throughout the application and re-determination process.	Para 54 Reject	As ADP is a lifelong benefit, clients interact with Social Security Scotland at many points over time, involving different tasks carried out by different teams.
Recommendation 38: For Social Security Scotland to set out whether it intends to highlight and make more prominent the option to request written translations of determination and redeterminations letters to ensure the needs of minority communities are better met.	Para 53 Reject	Current demand suggests good awareness but will keep under review.

Recommendation 39: For Scottish Government and Social Security Scotland to build capacity for policy makers and front-line staff to undertake training on stigma particularly as it relates to for example, poverty, inequality, race, and gender identity	Para 50 Implement within three months.	implemented as part of Disability Equality Plan 2025 to improve disability competence across the organisation.
---	---	--

Table 4: A Better Future

Most recommendations in this section are deferred with a general explanation given in para 55, rather than each recommendation being addressed individually.

Recommendation	Response
Alternatives to a points-based system	
Recommendation 40: As recommended in the interim report, confirm if Social Security Scotland intends to consider how to make the activities and descriptors and associated points more prominent and accessible for applicants.	Para 55. Defer.
Recommendation 41: Taking on board the findings from this Review, undertake a thorough review of the eligibility and decision-making criteria to: (a) move from a deficit-based system based on assessing what people are unable to do to a system that acknowledges a human rights based social model of disability, places the emphasis on impact and outcome and supports equal participation in society (b) ensure the activities and descriptors reflect modern life (c) adopt a more individualised decision-making approach providing an opportunity for a person to describe their whole life and describe in a less restrictive format the ways in which their disability or impairment impacts on their daily life (d) address the anomalies in the points being awarded per activity and consider the use of weighting to ensure activities are not assessed in isolation.	Para 55. Defer
Fluctuating needs and the 50% rule	
Recommendation 42: Replace the 50% rule with improved application of the reliability criteria and a more person-centred process that allows people to define how they manage on their worst days and the resulting impact on other days.	Para 55. Defer
Recommendation 43: Improve the questions asked of applicants within the application process to account for variability, triggers and actions taken to manage conditions.	Para 55. Defer
Recommendation 44: Case managers and practitioner training and associated training materials should be regularly refreshed with a focus on ensuring consistency in the decisions being made and further understanding of the impact of the fluctuating condition on the life and wellbeing of the client	Para 22 Implement within three months.
Substantial risk	

Recommendation 45: Consider the introduction of a substantial risk provision for people who fail to score points to qualify for an award of the daily living or mobility component of Adult Disability Payment if not making an award would pose a substantial risk to the physical or mental health of the person	Para 55. Defer
Daily Living Component	
Recommendation 46: For the ‘preparing and cooking a simple meal’ activity to be reviewed: (a) so that it adequately captures that quick simple meal preparation is not always the best approach for people with specific dietary needs, food insensitivities, eating disorders and those experiencing resulting pain or fatigue (b) so that the ability to shop for food is included.	Para 55. Defer
Recommendation 47: For the taking nutrition activity to be reviewed to consider the nutritional content of the food being consumed, being sensitive to the fact that ‘nutritional value’ needs to be appropriate to an individual’s situation and help them to better manage their health.	Para 55. Defer
Recommendation 48: To consider the particular needs of people living with eating disorders especially in relation to the ‘preparing food’ and ‘taking nutrition’ activities.	Para 55. Defer
Recommendation 49: For the ‘managing a therapy or monitoring a health condition’ activity to be reviewed so that: (a) reinforcement of consideration being given to the need for therapy (rather than whether it is in fact provided) being the determining factor, whether inside or outside of the home environment (b) consideration is given to the inequality of access to diagnosis and forms of therapy (c) therapy, whether obtained through public (such as the NHS or local authority) or private means (including private healthcare, therapy or community resources), qualify for the purposes of this activity as ‘therapy’.	Para 55. Defer
Recommendation 50: For the ‘washing and bathing’ activity to be reviewed so that (a) the outcome of not being able to maintain personal hygiene is the determining factor and not the ability to undertake a particular activity (b) the particular issues related to having an eating disorder are considered (c) ‘managing intimate hygiene’ is included in the activity descriptor and considered when making an award.	Para 55. Defer
Recommendation 51: For the ‘dressing and undressing’ activity to be reviewed so that consideration is given to: (a) the outcome and/or impact of not being able to dress or undress rather than solely the functional tasks involved (b) the potential psychological constraints of dressing and undressing (c) removing the distinction between dressing the lower and upper body.	Para 55. Defer
Recommendation 52: Revisit the current narrow definition of ‘overwhelming psychological distress’ to seek clarity on the extent to which anxiety means, for example, that a client cannot follow a route safely or to an acceptable standard; or how the stress of interacting with other people results in social isolation.	Para 55. Defer

<p>Recommendation 53: For the Decision-Making Guidance on ‘engaging with other people face to face’ activity to be amended to take into account the mental health impacts that engaging with others involves for people who are clinically vulnerable to infection.</p>	<p>Para 22 Implement within three months</p>
<p>Recommendation 54: For clients who have an appointed financial guardian to receive automatic entitlement to the maximum number of points in the ‘making budgeting decisions’ activity</p>	<p>Para 55. Defer</p>
<p>Mobility Component</p>	
<p>Recommendation 55: To review the ‘planning and following journeys’ part of the mobility component to: (a) clarify the language used (b) clarify the definition of orientation aids (c) provide more clarity to clients and case managers on the definition of ‘overwhelming psychological distress’, which respondents found to be limiting, subjective and unclear (d) ensure the criteria does not remain overly focused on physical ability and takes into account mental health problems and delayed impact (e.g. pain, fatigue, cognition) (e) better include the impact of variable or fluctuating conditions (f) consider environmental factors, public transport routes and difficulties that might arise during a journey (g) take into account the frequency and routine of how often people leave their home (h) better understand clinical risk management (i) account for the impacts of bowel and bladder conditions that may cause incontinence</p>	<p>Para 55. Defer</p>
<p>Recommendation 56: Review the eligibility criteria for the mobility component to remove reference to a fixed distance and replace it with: (a) the real-life experience of the client (b) their living environment inside and outside of the home (c) availability and accessibility of public transport (d) whether or not they use aids to assist them in moving around (e) the impact of moving around and exertion (e.g. fatigue, post-exertional malaise, breathlessness and pain).</p>	<p>Para 55. Defer</p>
<p>Recommendation 57: Review the guidance and training for case managers and practitioners to ensure improved understanding and accommodation of issues such as delayed impact, exhaustion, pain and anxiety</p>	<p>Para 22 Implement within three months</p>
<p>Recommendation 58: To consider any learning and/or good practice from the Blue Badge scheme in relation to establishing a person’s mobility needs.</p>	<p>Para 55. Defer</p>