

Written evidence from Anonymous (HAB0135)

Suitability of assessments

1. How could DWP improve the quality of assessments for health-related benefits?

BY NOT IGNORING FULL PIP ASSESSMENTS AND ALL MEDICAL DATA THE DWP HAVE ALREADY OBTAINED. IF THERE IS ENOUGH EVIDENCE TO NOT EVEN NEED A FULL PIP ASSESSMENT 0 WHEN PIP COVERS ALL ELEMENTS OF DAILY LIVING (WORKING IS ONE PART OF DAILY LIVING NOT ANY MORE OR GREATER IN SIGNIFICANCE)

FOR BLUE BADGES AUTHORITYS CANNOT USE UNKNOWN THIRD PARTIES WITHOUT HISTORY OR KNOWLEDGE OF THE HIDDEN DISABILITIES OF THE PERSON NEEDING THE BADGE.

WHY WOULD ANYONE THIRD PARTY (MAXIMUS/CHDAUK) KNOW ANY BETTER THAN SENIOR CLINICIANS?

IF DWP DON'T WANT TO BELIEVE DRs AND SPECIALISTS THEN WHY SHOULD WE BELIEVE AND TRUST THEM FOR OUR MEDICAL TREATMENT?

IT IS WASTING MONEY PAYING MAXIMUS

MAXIMUS DO NOT HAVE ANYONE WITH THE QUALIFICATIONS NEEDED TO ASSESS NEURODIVERSE CONDITIONS.

I HAVE HAD 5 FAILED ATTEMPTS OF ASSESSMENTS WHERE NO REASONABLE ADJUSTMENTS HAVE BEEN MADE

DWP REFUSE TO ATTEND MY HOME AND CONDUCT ASSESSMENT HERE

DWP REFUSE TO LET ME HAVE COPY OF ANT DATA FROM THE ASSESSMENTS

DWP LIE AND SUBMITTED FRAUD TO TRIBUNAL SAYING I WAS "TOO ILL TO ATTEND" ON Jan 19th – but my audio recording clearly shows otherwise and they were suppose to do altenrtaive route but failed – now 5 months later still not LCAWA!!!! Putting me into debt and making me spend my pip on my rent so have no quality life cant study cant improve or ever get out working again as at rock bottom undable to see hope for future as dwp prefer to lie and send fraud than be hoenst and treat with dignity and respect and with no regards to facts at all.

- a. Have you seen any specific improvements in the process since the Committee last reported on PIP and ESA assessments, in 2018?

NO ON SIGNIFANT DECREASE IN DELIVERY NOW RESORTING TO ABUSE OF POWER – INCLUDING UNLAWFULLY APPOINTING THEMSELVES (dwp) AS MY APPOINTEEE!!!! THIS IS ILLEGAL, IMMORAL AND SELF SERVING. THIS IS LENGTHS DWP GO TO TO PRVENT HELP SUPPORT AND ANY ACCESIBLE WELFAR FOR CLAIMAINATS

2. Are there any international examples of good practice that the Department could draw on to improve the application and assessment processes for health-related benefits?

NO AND ITS NO GOOD TO COMPARE APPLES AND ORANGES OR PUSH SQUARE PEGS INTO ROUND HOELS. THE PROBLEMS HERE HAVE BEEN CREATED BY DWP AND THEY ARE THE ONES WHO NEED TO FIX THIS MESS AND ILLEGAL ACTIVITY INFRINGING HUMAN RIGTHS AND FAILING TO GET ANYTHING RIGHT FIRST TIME – EVER.

IT would be better for a judge to decide claims as that would save time and money all throught he process as its creating triple work and funds being sent to Maximus who are fialing people like me, and as I saw in November, Judge set aside Terese Coffeys false allegations saying I was not a carer but I won at tribunal because they see sense

and facts. DWP DON'T WANT TO AND WILL NEVER BE INTEREST IN BEING FAIR AND TREATING PEOPLE WITH DIGNITY AND RESPECT.

3. Do the descriptors for PIP accurately assess functional impairment? If not, how should they be changed?

NO THEY DO NOT. PSYCHOLOGICAL OVERWHELMINGLY WITH MELTDOWNS, PANIC ATTACKS A SIGNIFIANT ANXIETY WITH HEART PALPATIONS AND COLLAPSING IS VERY SERIOUS AND THIS AND SHOULD BE THE AUTOMATIC ENTITLEMENT TO BLUE BADGEAT THE HIGH END. NOT AS 1E OR F EWHATEVER THAT WAS. IT IS WRONG TO PUT THAT AS THE SECOND TO HIGHEST BRACKET AND MACKING IT HARDER FOR COUNCILS TO IDENTIFY PEOPLES AUTHOMTIC ENTITLEMENTS BASED ON THEIR PROVATE AND OCNFIDENTIAL MEDICAL HISTORY WHICH AUHTORITIES MAKE PEOPLE LIKE ME KEEP REPEATING.

IT also makes council end up divulging information wrongly to mobility assessors who are not independent assessors and this entire process is causing data breaches and wrongful alignment based on severity and needs that are signifant and chronic and is being messed around with those who hiave no idea.

4. Do the descriptors for ESA accurately assess claimants' ability to work? If not, how should they be changed?

WOULD KNOW AS THEY REFUSED TO CONDUCT WCA AS PART OF MY ESA. REFUSED ESA SAYING I HAVE NO NATIONAL INSURANCE CREDITS DESPITE BEING MUMS CARER SINCE 2011 AND THEY HAVE MESSED THAT UP TOO AND REFUSED TO REMEDY SINCE JANUARY WHEN HMRC TOLD ME WHAT THEY HAVE DONE AT DWP – WHICH IS NOTHING AND LEFT GAPS IN MY INSURANCE AND MADE ME NOT ELGNLE FOR ESA ON PURPOSE.

5. DLA (for children under the age of 16) and Attendance Allowance usually use paper-based rather than face-to-face assessments. How well is this working?

TO READ THAT IS VERY CONCERNING WHY DWP ARE DISCMIRNATING ON BASIS OF AGE. WHY SOULD PEOPLE 16-65 NOT HAVE SUCH ACCESS BASED ON THEIR INDIVIDUAL NEEDS?

- a. Before PIP replaced DLA for adults, DLA was also assessed using a paper-based system. What were the benefits and drawbacks of this approach?

IT WILL USE MEDICAL DATA WITHOUT INTERFERENCE BY THOSE NOT MEDICALLY TRAINED AT DWP WHO HAVE NO IDEA ABOUT REALITY OF CONDITIONS AND HOW IT IMPACTS EVERYTHING.

HOWEVER, IF THEY CHOOSE TO IGNORE HARD EVIDENCE AND AS I HAVE SEEN ALSO REFUSE TO COME TO MINE AND ASSESS AFTER ASKING DOZENS OF TIMES ALL FULLY DOCUMENTED – STILL NOT DONE BY THEM – I HAVE NEVER FELT SO DESPERATE AND UPSET IN MY WHOLE LIFE FROM HOW DWP TREAT ME BUT ITS THAT THEY ALREADY REFUSE TO CALL “BECAUSE YOUR NOT DYSLEXIC” AND THAT “ITS ALL ONLINE ONLY” WHICH DOESN'T HELP OR ASSIST ANYONE THAT NEEDS HELP AND WITH SENSORY SENSITIVITIES AND INTERPERSONAL SKILLS, CANNOT BE ASSESSED THROUGH PAPER BUT CAN BE IF DWP BOTHERED TO READ PEOPLES MEDICAL EVIDENCE FULLY.

6. How practical would it be for DWP's decision makers to rely on clinician input, without a separate assessment, to make decisions on benefit entitlement? What are the benefits and the drawbacks of such an approach?

EXTREMELY PRACTICAL AS STOPS PAYING MAXIMUS FOR NOTHING. STOPS DESTROYING LIVES LIKE MINE STILL WAITING SINCE June last year!!!! 5 failed assessments and fraud by dwp because they are a disgrace to me – even as my appointee are not acting in my best interest at all which is why I have had to file legal against dwp for failing me for year non stop when im at most vulnerable been homeless, abused, forced entry into my home, diagnosis its all to much and dwp support to be welfare, but they don't care.

It would then also show that dwp do actually trust nhs specialist and medical professionals which at the moment is in contrast because they actively diminish the credibility of doctors and specialist who have spent years studying – all to be ignored by people at DWP who have no idea. It is repetitive and driving me absolutely insane

Why is it that ofcom have rules about how providers should never make vulnerable people with disabilities keep repeating the, selves,

yet dwp are allows to do it repeatedly to the most vulnerable and without any merit, truth or substance to their motives – except deceit, lies and fraud. THIS IS FULLY BACKED UP WITH HARD EVIDENCE AND LOTS OF IT.

7. Appeals data shows that, for some health-related benefits, up to 76% of tribunals find in favour of the claimant. Why is that?

BECAUSE DWP DO NOT HAVE A CLUE AND ARE COSTING TAXPAYERS MORE BY PURPOSELY REFUSING TO GET IT RIGHT FIRST TIME, REFUSING TO ENGAGE AND HAVE ANY 2 WAY DIALOGUE WITH CLAIMANTS AT THE TIME OF ANY DECISIONS AND ACTIVELY AVOIDING DECISION LETTERS, DRAGGING THEM ON AND ON AND REFUSING TO LOOK AT HARD EVIDENCE, IN FAVOUR OF THEIR TEAMS IN THE OFFICE TALKING TO THEMSELVES AND BEING MADE TO FOLLOW THE TARGETS OF HOW MANY PEOPLE THEY GET INTO WORK, NOT HOW MANY PEOPLE THEY HELP. IT IS SHORT SIGHTED AND THE LONGER THEY TREAT PEOPLE THIS WAY, THE MORE THEY STIFLE INNOVATION AND PEOPLES FUTURES BECAUSE THE SOONER THEY HELP, AND FULLY WITH ALL ENTITLEMENTS, THE SOONER PEOPLE CAN MOVE FORWARDS AND FOCUS ON IMPROVING THEIR LIFE RATHER THAN BEING STUCK ON REPEAT WATCHING LIFE FALL APART AT THEIR HANDS – INTENTIONALLY. NOT ONLY WILL THE DWP NOT HAVE ANY QUICK WINS FROM HOW THEY CURRENTLY OPERATE – THERE WILL BE NO LONG TERM ONES EITHER.

IT requires a desperate overhaul that truly understands the individual and makes sure human rights are attainable at every step of the way. To be in job centre and be refused to speak to a manager or calling up and doing the same and being refused and told to wait until I see my payment amount stay the same at the next date of payment is a disgrace and dwp exist for people like me but refuse to help and serve people like me – they are only serving these coffees and themselves. Not claimants.

My pip they got wrong 3 times. I filed with tribunal. After winning my carers element they then withdrew for pip and awarded. Why does it need that for them to get it right and why are they incapable of getting it right first time?

It is not the claimants or the process, it is DWP refusing to give any benefit of doubt and refusing to read HARD evidence.

- a. What could DWP change earlier in the process to ensure that fewer cases go to appeal?

LISTEN AND READ MEDICAL EVIDENCE AND TO ALWAYS UPHOLD THEIR WORD WHEN THEY TELL CLAIMANTS SOMETHING IN WRITING AND ON PHONE, THEY MUST FOLLOW THROUGH NOT PICK AND CHOOSE AND CHANGE THEIR MINFS. THEY TOLD ME 2 BEDROOM RATE 4 TIMES £1585, SO I PAY DESPOIT AND MOVE IN FOR THEM TO REFUSE 2 BEDROOM RATE – PUTTING ME INTO SERIOUS DEBT AND FINANCIAL HARDSHIP MAKING MY LIFE NOT WORTH LIVING. THIS IS WHAT DWP DO – LIE, DECIEVE AND COMMMIT FRAUD AND SITRUST AND ABUSE THE MOST VULENRABLE.

THE MOST VULBERABLE IUN SOCIETY ARE CURREENTLY PAYING FOR THE GOVERNMENT POLICTICAL DECISIONS THAT WE HAVE NOT VOTED FOR NOR HAVE WE HAD ANY SAY NOR ANY HELP AT ALL.NONE AT ALL!! 90% OF MY CURRENT DAILY PROBLEMS THAT MAKE ME WANT TO GIVE UP LIVING IS ALL BECAUSE OF DWP AND HOW THEY LIE AND TREAT PEOPLE LIKE ME WITH MY CONDITIONS

8. Is there a case for combining the assessment processes for different benefits? If not, how else could the Department streamline the application processes for people claiming more than one benefit (eg. PIP and ESA)?

TO EVEN ASK THAT IS WHY PEOPLE LIKE ME ARE AT THE TOTAL END OF EVEN WANTING TO LIVE ANYMORE. IT SHOULD BE AS EASY AS POSSIBLE TO GET THE ACCURATE MEDICAL INFORMATION NEEDED TO GIVE THE HELP. NOT A WAR AND DAILY BATTLE ON VULNERABLE PEOPLE LIKE THEY HAVE DONE ME IT IS DESTORYED ALL MY LIFE AND HOPES FOR FUTURE NO WUALITY LIFE LEFT WITH NOTHING BUT DEBTS EVERY MONTH EBCAUSE OF THEM LYING AND REFUSING TO HELP OR USE FACTS AND GARD EVIDENCE. THEY DO NOT KNOW BETTER THAN SENIOR HONARYA CLINICIANS AT MENTAL HEALTH TRUSTS NOR DO DWP KNOW ANY BETTER THAN THE DIRECTORS OF THE TRUST BOARDS WHER EMY CASE HEARD AS COMPLEX CASE AND ALL DWP HAVE DONWE IS abuse and torment me I cannot cope any longer with what they do

9. What are your views on the Department's "Health Transformation Programme"? What changes would you like to see under the programme?

A TOTAL JOKE AND ALIE

“DWP AS THE DEPARTMENT FOR WONDERFUL EPOPLE” AS THERESE COFFEY RWRITES ON THERE. IT IS ALIE AND COUNNING AND DEICEBTFUL. MORE LIKE DSIMCIRNATION AND WRECKING PEOPLE- dwp.

SAYING THEIR MISSION IS “TO IMPROVE PEOPLES QUALITY OF LIFE AND THE THINGS THAT REALLY MATTER”

SO WHILE WAITING FOR MY MEDICAL TREATMENT AT MAUDSLEY OSYCHIATRIC HOSPITAKL AND THEY ALREADY LOST MY REFERRAL!!! DWP EXPECT ME TO KNOW ALL THE ANSWERRS BEFORE I HAVE MY TREATMENT AND LONG TERM PLANS FOR AUTISM. THAT’S ON TOP OF MY SEVERE OCMBINATION ADHD, PTSD, ANXIETY AND PANIC ATTACKS. THEY HAVE ABSOLTUELY NO IDEA HWO TO HELP PEOPLE OR BE THERE WHEN WE NEED THEM. A while year of suffering and I cannot cope any mre under this DWP and Therese coffey failing repeatedly to read hard evidence and constantly lying and sending fraud to tribunal easily disoute with my hard evdiecne that they actively choose to ignore nor get right or put right as they waste more time and money of courts willingly without any regard to people behind the claims. Even calling abusers rather than calling the claimaints directly as they did with my mother, it has to stop!!! I have never felt so desperate and as if deathn would be easier than this – this is what dWP do to people and make us lose all hope and faitn in the government and this department all together. Welfare does not exists at the moment under this DWP and the current leadersip and civil servants They choose to fail people, not helep.

a. (For people claiming) Would you like to be able to manage your benefit claim online?

Yes tohave that option but email is just as good – the PIP altentive format email has been very helpful – when dwp can bother to reply. UC journal is not good because they refuse to seak with you and they just TALK AT YOU rather than WITH YOU. They cannot ake these same mistakes again. It must be oimni platform letting claiminat decsde what method is best for them at that moment and based on what is needed. This top down approach forcing people to do everything that suits DWP without any reasonable adjtments or willingness to help must be stamoed out forevr.

b. What would be the benefits and drawbacks of DWP bringing assessments “in house”, rather than contracting them to external organisations (Capita, Atos and Maximus)? In particular, would this help to increase trust in the process?The impact of the pandemic

SAVING MONEY

NO ABILITY TO PASS THE BUCK AND BLAME MAXIMUS FOR DWP OWN MISTAKES

ACTAULLY HELPING PEOPLE GET THE SUPPORT THEY NEED WITHOUT SENDING PEPOLE ROUND THE HOSUES AND REPEATEING THEMSELVES FOR MONTHS ON END

NOT LOSING THE REQUESTS OR DELAYING PROCESS JUST BECAUSE ITS ADVANTAGEOUS TO DWP RATHER THAN THE CLAIMAINT IN DESP NEED FOR HELP

IT IS SENSELSSSS TO HAVE ANY OF THESE ROVODERS ESPECXIALY ATOS A IT COMPANY AS COMOANIES HOUSE SIC CODE STATES, WHY IS AN IT COMPANY DEALING WITH PEOPLES MOST OROVATE AFAIRS?!

IT ALSO MAKES SURE DATA TRAIL IS SLIM AND DOESN'T RISK DATA BREACHES AND SENDING PEOPLES MOST PERSONAL INFORMATION ALL THE WAY TO VIRGINIA WHERE THE SIGNIFIANT CONTROLLER OF MAXIMUS IS. IT'S A DSIGRACE THAT WE INVESNTED THE INTERNET YET CANT EVEN CONDUIT A WELFAR SYSTEM IN HOUSE.

10. What lessons should the Department learn from the way that it handled claims for health-related benefit claims during the pandemic: for example, relying to a greater extent on paper-based assessments, or using remote/telephone assessments?

THAT WHGEN I WAS ON THE EDGE OF WANTING TO BE EUTHANISED, MY LIFE WAS AND IS WORHT MUCH MORE BUT IT IS THEM TAKING ALL QUALITYM HIPE AND WISHES TO BE ALIVE BECAUSE THEY MAKE IT A DAILY BATTLE AND WAR AND AT HARDEST POINT IN LIVES HENCE NEED WELFAR SUPPORT THEY REFUSE TO GIVE IT AND PREFER TO FIGHT THE MOST VULNERBALE WHO CANNOT TAKE IT ANY MORE.

TIMES FOR DECISION MUST BE SET IN LAW THEY CANNOT BE GIVEN ANY LENGTH OF TIME INDEFINITELY FOR MANY IS DIFFERENCE OF LIFE AND DEATH AND THEY ARE TOYING WITH PEOPLES LIVES.

HOW CAN THEY BE ALLOWED TO DRAG A CLAIM ON FOR AS LONG AS THEY WISH, TELL MPEOPLE THEY WORK IN DATE ORDER WHILE SOME GET THEIRS DONE WELL BEFORE THOSE WHO HAVE WAITED MONTHS ON END AND DWP STILL

IGNORE MEDICAL EVIDENCE AND ONLY TIRBUNAL GET IT RIGHT.

HOW CAN THIS SYSTEM BE RELIANT ON THE TIRBUNAL TO DO THE BASIC ADMINSTRATION OF CLAIMS FOR THE MOST VULNERABLE?????

EVEN WHEN I HAVENT HAD TO WORK SEARCH OR DO ANY ACTIVITIES AND DON'T EVEN HAVE A WORK COACH THEY STILL HAVENT GIVEN ME LCWRA AND I ONLY HAVE BASIC £324 A MONTH UC. THAT'S IT. NOT EVEN MY FULL RENT 1585 AS THEY TOLD ME IN WRITING AND LIED AFTERWARDS AND KEEP LYING AND REFUSE TO PUT RIGHT.

THEY HAVE NO CLUE WHAT THEY ARE DOING TO PEOPLE AND THERE WILL BE NOBODY LEFT WITH ANY ABILITY TO EVER WORK OR GET OFF BENEFITS IF THEY KEEP DESTROYING LIVES. IT IS NOT A LONG TERM FIX BY MAKING PEOPLE FALL APART FAR MORE THAN THEY WOULD IF THEY JUST TREATED PEOPLE WTH DIGNITY AND RESPECT BUT THEY DON'T EVER MY JOURNAL IS FULL OF DISMCIRNATION, LIES, FRAUD AND DECIT.

a. Is there a case for making some of the changes permanent?

MUST PERMANTY BELIEV MEDICAL EXPERTS WITHOUT DOUBT. AND STOP TORMENTING AND ABUSING THE VULNERABLE WHO ALREADY STRGGLING ENOUGH EVEYR SECOND MINTUE HOUR OF THE DAY. IT HAS TO STOP.

11. *Most assessments for Industrial Injuries Disablement Benefit were suspended during the pandemic. What has been the impact on people trying to claim IIDB?*

a. *Some IIDB claimants will receive a lower award than they might have, due to the suspension of assessments, because IIDB awards are linked to age. Should the Department compensate these claimants? How?*

b. *What lessons could the Department learn for how it deals with these claims in future, in the event of further disruption to normal services?*

12. DWP believes that applications for some benefits dropped sharply at the start of the pandemic because claimants weren't able to access support (for example, from third sector organisations) to complete their applications. What are the implications of this for how the Department ensures people are able to access health-related benefits consistently?

No help from councils no help from any welfare support officers, and people cannot know the unknown and I still don't and still have no help. It

is paint byu numbers with DWP fighting you every step of the way making it impossible to apply for things you entitled to vecause they don't tell you you entitled or look for the signals to make sure you are. I should have had all this years ago and they didn't because they protect themelevs not people in seirous need of help.

Case managers say work coaches know more, work coaches say case managers know more and they send you from pillar to post between them all for months on end and still no help or information or support. Only damages and life in tatters with no ability to improve my life because they ave left it in ruins every last bit of my dignity been stripped from me

a. How can the Department best help the third sector to support claimants in their applications?

The impact of assessment/application on claimants

It should be for Mointry of justice to make sure that claimiants are given legal advice on their legal entitlements. Sadly they don't and legal aid is a fallcy. DWP cannot be trsuted to help people as they wont help people when it means they have to provide the monetary support people rely on which they refuse to give nor in any fair or resinable amount of time. All prieposely orchsrated cos they rather spend 8billion on fraud than to help people like me desperate to improve my life before its game ove. I could be on route to thriving. All DWP have donw is make my dreams disappear and hpe to be business owner one day go forever. Despite having concept Macys bloomingdales asked to whitelabel and a unilver brand offered me signedetter intent for, nobody helped, nobody helped me access funds or startup loans, the NEA programme is a joke the man failed to turn up to my 1:1 and they don't see opportunities that people like me can deliver when people in US do. DWP and this fovemenrt are stifling the economy without any longe term visions or supporting those who can see the future in many different ways but never belived because that's that they do, think they know everything, but instead, failing at everything and taking away peoples entire existence form thm

13. DWP recently published research on the impact of applying for PIP or ESA on claimants' mental and physical health. What would be the best way of addressing this?

SOUL DESTORYING ON THE EDGE OF SUICIDE BUT IM TOO MUCH A WIMP TO HURT MYSELF. THAT'S WHY I EXPLORED EUTHANISA AS A WAY OUT BECAUSE I CANNOT COPE UNDER DWP AND THEIR TORUEOUS APPROACH ANYMROE AND I WORRY MORE FOR THOSE LESS ABLE TO COMMUNICATE THAN I CAN WITH MY DISORDERS

ESPECIALLY PEOPLE NON VERBAL OR HAVE CARERS WHO DON'T UNDERSTAND ESPECIALLY IF DWP IGNORING THEIR SPECIALIST EVIDENCE ALL TO BENEFIT DWP ABOVE THE CLAIMANT. IT HAS TO STOP URGENTLY.

Waits for assessments

Unreasonable and no legitimate BASIS FOR DELAYING VULNERABLE PEOPLE.

14. What could the Department do to shorten waits for health-related benefit assessments—especially for ESA/UC?

READ HARD EVIDENCE, USE IT AND STOP MAKING CLAIMANTS GO ROUND IN CIRCLES SO DWP REFUSE THE CLAIM AND TAKE THEIR MONEY WHICH IS FOR THE CLAIMANT BUT THEY CAN'T ASSESS IT. IT IS DEEPLY UNJUST, UNLAWFUL AND IS ABUSE OF THEIR POWERS.

- a. How effectively does the “assessment rate” for ESA cover disabled people's living costs while they wait for an assessment? Is there a case for introducing an assessment rate for other health-related benefits?

WOULD KNOW AS DWP MANIPULATING EVERYTHING TO MAKE SURE EI DON'T HAVE ANYTHING

Health assessments in the devolved administrations

15. The Scottish Government intends to introduce its own assessment process for the Adult Disability Payment, which will replace PIP in Scotland from 2022. What could DWP learn from the approach of the Scottish Government?

- a. PIP started rolling out in Northern Ireland in 2016. Is there evidence that the Department learned from the experience of rolling out PIP in the rest of the UK?

Policy development

16. How effectively does DWP work with stakeholders—including disabled people—to develop policy and monitor operational concerns about health-related benefits?

- a. What steps could the Department take to improve its engagement with stakeholders?