

## Written evidence from Anonymous (HAB0080)

My name is [REDACTED], I am a private individual that recently went through the contribution based ESA process. I am currently awaiting a reconsideration and have lodged an appeal with the tribunal.

The reason I have taken part in this, is because I have been suffering with my mental health for just under 2 years, but have been on long term sick since January 2021. I am under my GP and occupational health, I was under a therapist from the IAPT service, but couldn't continue with a further referral because my mental health deteriorated even more and I could not engage with anybody. I am also awaiting an appointment with a rheumatologist as I have issues with my hands.

I feel that I was treated unfairly and the decision was completely wrong. The report itself was completely different to what was discussed. I felt I had to put my voice out there, as I think the system needs shaking up, I saw about people that have committed suicide following a decision. I can see why and how, you are desperate and struggling, but are flung out to dry.

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

I think it would be more practical for the questionnaires to be online, so they can be saved and gone back to at a later date. As a lot of people like myself struggle to focus on a task for that long.

I also think that more concise information should be given alongside the questionnaire, to ensure people understand what is being asked. I personally left out some information on parts as the way it was worded, I did not think it was relevant to me. After getting advice about an appeal, I was given this information by the advice centre, which by then is too late.

I think further training needs to go in to all staff, simply because you are made to feel that you are a liar. Every staff member or even the agency used, should be suitably trained and specialise in the issues claimants have. I understand this can be difficult with people with various problems, but I found that the questioning techniques were not compassionate or delving enough to gain a true reflection of my mental health.

To add to this, the DWP decision makers, are surface level, and I am not sure who is at fault here, but my report was a lot of fallacy and mistruths. Information I had given was omitted, information included was things that were not discussed or completely different to the answers I gave.

I feel like they don't want people claiming at all and the odds are stacked against you from the beginning.

The process was gruelling, trying to fill the form correctly, worrying about the outcome, then to be told fit for work was like kicking me when I am already down. It has had a detrimental effect to my health and I had to tell the Dr, as I feel like I do not want to wake up in the mornings.

Evidence from other people that give care should also be sought, they ask for permission to contact them and don't. I personally am under my GP and Occupational health, also soon to be rheumatologist.

My Gp was not approached, they dismissed my Occupational health dr report that said I have a severe impairment to my daily living and unfit for all work

I was claiming contribution based ESA as I am on long term sick and on half pay, the DWP did not inform HMRC in a timely manner, and then my tax code was changed, saying I had underpaid, so I am now getting taxed on £220 a week. These processes need to speed up.

Also my telephone assessment, I was asked a question stopped when answering and was told "hold on I have to type that." This is off putting, you are then pushed to the next question even though you may not have finished the last. Just felt very robotic, did not feel compassion or that I could open up properly.

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

I think the main descriptors are fine in themselves, but the subtext with examples should be expanded. It needs to be more user friendly. Or additional paperwork should be supplied with more context. As I said I did not realise at the time I could of filled in other boxes as I didn't think they were relevant to me, until after I had my decision and got advice.

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? AND

9b. 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?

I don't think that it would be a great idea to leave the decision solely to the DWP, the reason being they are not trained and do not have insight in to medical conditions. I do believe they should rely on the claimants own GPs or specialists rather than a third party. As the person own care givers have more of an informed opinion on the situation. Instead of either not seeking that information or dismissing it when it is provided.

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

I believe the DWP are quick to turn down. They do not seek out the claimants history or prognosis with their GP or specialists/carers etc. From my own personal experience I know that the report is not a true and factual reflection of what was discussed on the telephone assessment. In my opinion, cases are won because the medical evidence is shown to the tribunal and they can see that the DWP decision was not of a sufficient standard. Also the DWP do not take in to consideration things that we have sent by our own medical professionals, that have been dealing with us personally for some time.

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

The questionnaire has 2 questions, one relating to the GP and one relating to a specialist or somebody that provides care, about the DWP contacting them for further evidence. So my answer to this question is use them! No point having a question asking for consent if they don't bother to do it. Although, in my case they rang me and questioned why I had put no to telling the GP the outcome, and I felt I had to change it. They used it to tell my GP I was fit for work!

Also find better questioning techniques, I felt that they have this box for mental health and if you don't fit in it, then you are out. Mental health symptoms differs from person to person.

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

Yes everything would be a lot simpler, you could save and come back to finish at a later date.

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?

I think people should be directed to advice places by the DWP. I did not even think about it at the time, but it effected me because I did not complete the form sufficiently, as I didn't think some of it related to me because of the wording. So unfortunately I could of lost out points here, it may also of helped me gain points where I had filled it out but did not put enough detail in. I also thought evidence was obtained by the DWP, so advice would of meant I could of gathered that myself.

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?

Stop treating all conditions the same, mental health differs greatly, symptoms differ, severity differs. Mental health is more than a tick box exercise. Be more empathic and compassionate when dealing with people.

More training, reports more factual than fallacy.

My mental health was bad anyway, but now I have suicidal thoughts, which I addressed with my mum and GP, all because I was made to feel like a fraud with the decision. It really has had a detrimental effect.

It is hard to keep going, answering questions to fit in a box. I don't think the DWP realise how overwhelming this can be. I for one just go with the motions, just to get it done quickly, as it causes me angst.