Dear Grahame,

I am writing in relation to the recent discussions regarding my response to PQ 156404 regarding how insulin pumps are considered when assessing a claimant’s needs under Activity 3 in PIP, and the subsequent dialogue with Independent Assessment Services (IAS) around the response.

Following discussions between my officials and IAS, I understand that there was a misunderstanding by a member of the Parliamentary Liaison Team in IAS as to the policy and how it is implemented. This resulted in confusion around the accuracy of my PQ response. I would however like to confirm that the original response provided was correct and IAS have now confirmed that they agree with this position. I have set out our policy regarding aids and appliances within Activity 3 below, for completeness.

Under Activity 3 we have a range of different descriptors, some of which relate to people who need support with ‘managing therapy’ and ‘monitoring a health condition’ while others relate to people who need support with ‘managing medication’. For the purpose of the PIP assessment, there is no descriptor that covers the use of aids and appliances for monitoring a health condition. Aids and appliances are however considered in relation to managing medication.

When considering what would qualify as an aid or appliance for managing medication, the specific circumstances of the claimant must be considered on a case by case basis. An insulin pump is generally considered to be a device for delivering medication and in the majority of
cases, an adult with diabetes will be able to manage the pump themselves.

We recognise that everyone is unique and their individual circumstances are given careful consideration when assessing their case. For example, for people who use an insulin pump the underlying reason for the use of the pump needs to be considered and where there is evidence that an aid, appliance or assistance would otherwise have been needed in the absence of the pump, the person should score accordingly.

My officials have spoken to the Clinical Director at IAS who has provided reassurance to the Department that the policy as outlined above is being implemented by their Health Professionals and that each claimant is assessed on an individual basis, in line with the policy intent. IAS have also now confirmed that they agree with the original response provided to the PQ.

In relation to your constituent’s specific case, I can also confirm that the original advice has since been reviewed by a senior clinician in IAS and a DWP Quality Assurance Manager who are both content that the advice provided around Activity 3 was correct. I also understand that the case has been heard at appeal and the decision by the Department has been upheld by the First Tier Tribunal.

I would like to take this opportunity to stress that the Department works very closely with both of our Assessment Providers to make sure that the official guidance is implemented fairly and consistently, to ensure the policy intent and legislation are applied correctly.

I hope this clarifies the situation and do apologise again for any confusion caused. Going forward, my officials will be discussing the handling of this matter urgently with IAS to ensure this does not occur again. If I can be of any further help please let me know.

A copy of this letter will be placed in the House Library.

Yours sincerely,

[Signature]

Sarah Newton MP
Minister for Disabled People, Health & Work