



An Official Statistics publication for Scotland

Social Security Scotland Statistics

Adult Disability Payment: high level statistics to 31 January 2024

Key figures

- From 21 March 2022 to 31 January 2024, there were 184,860 part 1 applications registered for Adult Disability Payment. During that period, 154,040 part 2 applications were received.
- In total, there were 151,435 applications processed with a decision made by 31 January 2024. Of these 57% were authorised, 38% were denied and 5% were withdrawn.
- The median average processing time for "normal rules" applications awarded decisions has decreased from 83 days in October 2023 to 59 days in January 2024.
- As of 31 January 2024, 192,575 people were in receipt of Adult Disability Payment. Of those, 83,190 (43%) were new applicants and 109,385 (57%) had their award transferred from the Department for Work and Pensions.
- Between 21 March 2022 and 31 January 2024, the total value of Adult Disability Payments issued was £733.5 million.

Frequency of publications

The next publication, covering up to the 30 April 2024, will be released on 18 June 2024.

Under the Code of Practice for Official Statistics¹ we publish a timetable of statistical releases for the twelve months ahead².

¹ The Code of Practice for Statistics is available on the <u>UK Statistics Authority website</u>.

² The forthcoming publication timetable is available on the <u>Scottish Government website</u>.

Introduction

Adult Disability Payment is the replacement for Personal Independence Payment and Disability Living Allowance for adults in Scotland, which are delivered by the Department for Work and Pensions. It is the second application-based disability benefit to be introduced by the Scottish Government and is administered by Social Security Scotland. It provides money to help with the extra daily living and mobility costs that a person living with a disability might have.

From 21 March 2022, new applications were taken for Adult Disability Payment for people who lived in the pilot areas of Dundee City, Na h-Eileanan Siar and Perth and Kinross. The pilot expanded to include Angus, North Lanarkshire and South Lanarkshire on 20 June 2022 and further expanded to include Fife, City of Aberdeen, Aberdeenshire, Moray, North Ayrshire, East Ayrshire and South Ayrshire on 25 July 2022 before launching nationally to all remaining local authorities on 29 August 2022. This publication provides statistics up to 31 January 2024, covering a period of approximately seventeen months after the national launch of Adult Disability Payment.

The application for Adult Disability Payment is in two parts. Once an applicant has filled out part 1 they have eight weeks to complete part 2 (see the <u>Application and</u> <u>decision making process section</u> of the Background note).

This publication provides information on applications and payments for Adult Disability Payment from 21 March 2022 to 31 January 2024 (see the <u>How the data is collected</u> <u>section</u>).

The <u>Background</u> note has further detail about the payment and its application process.

All tables referred to within this publication are available in an Excel workbook on the <u>Social Security Scotland statistics website</u>.

These statistics are official statistics in development. Official statistics in development may be new or existing statistics, and will be tested with users, in line with the standards of trustworthiness, quality and value in the <u>Code of Practice for Statistics</u>.

Main findings

New applicants

Applications by month

- As of 31 January 2024, 184,860 part 1 applications for Adult Disability Payment had been registered. Additionally, 154,040 part 2 applications had been received **[Table 1]**.
- In the most recent quarter, from November 2023 to January 2024, 28,470 part 1 applications were registered and 21,240 part 2 applications were received. The number of part 1 applications registered in the previous quarter, from August 2023 to October 2023, was 30,690. There were 25,820 part 2 applications received during that same period. This is an increase of 2,545 compared with when this data was first published and has been revised upwards. See <u>About the data</u> for more information about our revisions policy **[Table 1]**.

Application outcome

- Improvements have been made to the way the date of the initial decision is determined. This has led to a downwards revision in the number of decisions and authorised applications in the months from August to October 2023 and generally an upwards revision in months prior to that. For more information on this change see <u>About the data.</u>
- In total, there were 151,435 applications processed with a decision made by 31 January 2024, with 39,260 having been processed in the last quarter, representing 26% of all applications processed so far. Of all the applications processed 57% were authorised, 38% were denied and 5% were withdrawn **[Table 1]**.
- The authorisation rate has fallen in the latest quarter from 57% in October 2023, at which it had been stable since June 2023, to 46% in January 2024. However, authorised rates for the most recent months do not include the outcomes of applications which have ongoing redeterminations, and so may be revised upwards in subsequent publications for example, October 2023 had an authorised rate of 53% when first published, but has been revised to 57% in this publication **[Table 1]**.

Initial award type

• Of the applications authorised, 57% were given an initial award comprising of both Daily Living and Mobility components, whilst 35% were for Daily Living only and 8% were for Mobility only. The proportion of cases awarded both components has fallen since the national launch of Adult Disability Payment, with 72% of awards in September 2022 being for both components. This compares to 51% of awards in January 2024 **[Table 2]**.

• There are two levels which can be awarded for each component, enhanced and standard (see <u>Payments section</u> of the Background note). The table below presents proportions by level of initial Daily Living and Mobility awards.

	Enhanced rate (%)	Standard rate (%)
Initial daily living award	46%	54%
Initial mobility award	50%	50%

Excerpt of Tables 3 and 4: Initial Daily Living and Mobility awards by level (%)

• The proportion of cases receiving the enhanced rates of both the Daily Living and Mobility components have fallen since September 2022. The Daily Living component is down from 72% of awards in September 2022 being at the enhanced rate, to 38% in January 2024, and the Mobility component has gone from 68% to 43% over the same period **[Tables 3 and 4]**.

Application outcome by Primary Disability Condition

- People with a Primary Disability Condition within the category 'Neoplasms (C00-D48) were the most likely to have their application authorised, at 87% approvals, and people with a Primary Disability Condition within the category 'Diseases of the Digestive System (K00-K93) were the least likely to have their application authorised at 49% **[Table 5]**.
- Applications may not have a primary disability condition recorded if they are withdrawn or denied prior to the stage in processing where the Primary Disability Condition is recorded. This could happen for a variety of reasons, including failure to pass the identification and verification checks, or withdrawal of the application [Table 5].

Application channel

- Application channel refers to the method of application used to complete the part 1 application.
- Of applications received by 31 January 2024, 68% were made online, 24% were made via phone and 8% were made through a paper form. The proportion of applications received by paper form has increased since January 2023, with between 8% and 16% of applications arriving via paper form in each of the last twelve months, compared with prior months where no more than 4% of applications were through that channel. Only a small proportion of applications were made through other channels (see the <u>Application and decision making process section</u>) **[Table 6]**.

Applications by age of applicant

• The chart below presents the proportions of part 1 applications registered by age of applicant. The most common age group for applicants was 55 to 64,

representing 25% of applications registered. A small number of applications for children under 16 were registered and have been included for completeness **[Table 7]**.

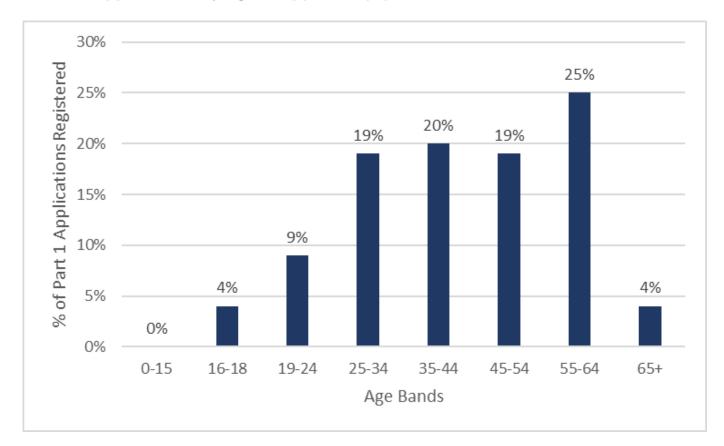


Chart 1: Applications by age of applicant (%)

Note: Age is based on the age of the person when part 1 of the application was registered.

Applications by local authority

- Of the applications registered, 14% came from Glasgow City, followed by 9% of applications coming from North Lanarkshire and 8% from Fife **[Table 8]**.
- Authorisation rates do not vary substantially by local authority with most remaining between 52% and 63%. The only area outwith this range is Other, with an approval rate of 15%. It should be noted that Other includes applications from addresses outside of Scotland and has a withdrawal rate of 46%, which is significantly higher than other areas which have withdrawal rates not exceeding 6% **[Table 8]**.

Processing Times

• Processing times for any application received under the normal rules³ are calculated between the received date of the part 2 application (where available)

³ Normal Rules applications are where the special rules for terminal illness do not apply.

and the date that a decision was made regarding the application. Further information on the calculation can be found in the <u>Methodology and definitions</u> <u>section</u> of the Background note.

- We have improved the way that we derive the date of the initial decision in this publication. Previously we had one date for the decision, which could change as a result of a redetermination or appeal. We are now able to identify the initial decision, prior to redetermination, which means that we are able to include applications that are flagged as having a redetermination request in our processing times table. This change has had a negligible impact on the processing times, with no monthly median changing by more than one since the previous publication and no effect on the overall median.
- The median⁴ average processing time for applications since the launch of the Adult Disability Payment pilot on 21 March 2022 was 82 working days. In the latest quarter, the median average processing time has decreased from 83 days in October 2023 to 59 days in January 2024. This is the lowest the median processing time has been since November 2022 and represents a decrease in processing times of 24 in the latest quarter **[Table 9a]**.
- The proportion of cases processed in 141 or more days has remained stable at around 7% to 8% in the latest published quarter from October 2023 to January 2024. **[Table 9b]**.
- Table 9b shows the proportion of decisions which have been completed within each time band. This table shows that of all applications that had received a decision by 31 January 2024, 49% had been processed within 80 working days (4 months) and 8% of applications had taken 141 or more working days to process (7 months) [Table 9b].
- It also shows that the proportion of applications processed within 2, 3 and 4 months increased substantially each month over the latest published quarter when compared with the preceding months. More than 51% of applications processed in January 2024 were processed within 3 months compared with 19% in October 2023 [Table 9b].
- Applications made under the special rules require the submission of the Special Rules for Terminal Illness application form, which is a one-part form, and a BASRiS⁵ form. Processing times for these applications are calculated as the time between the receipt of the Special Rules for Terminal Illness application form and the time of the decision being made. Some applications for people who are eligible under the Special Rules for Terminal Illness are made through the normal application process. Processing times for these applications are calculated between the received date of the part 2 of the application, where there is one, and the date that a decision was made. Social Security Scotland aims to process

⁴ The median average is the middle value of an ordered dataset, or the point at which half of the values are higher and half of the values are lower.

⁵ Benefits Assessment for Special Rules in Scotland (BASRiS)

cases identified as being eligible under the Special Rules for Terminal Illness within 7 working days of receiving a completed application form and a BASRIS form. Further information on the calculation can be found in the <u>Methodology and</u> <u>definitions section</u> of About the data.

- We have improved the way that we identify cases as having been processed under the Special Rules for Terminal Illness. For more information see the <u>Updates section</u> of About the Data
- The median average processing times for applications made for clients eligible under the special rules since the launch of the Adult Disability Payment pilot in March 2022 is 3 working days **[Table 10]**.
- Of the cases eligible under the special rules, 1,250 (31%) were received with a Special Rules for Terminal Illness application form or a part 1 form only, and 2,750 (69%) were received with both a part 1 and part 2 form **[Table 10]**.
- Further information on the limitations of this data can be found in the <u>Methodology</u> and <u>definitions section</u> of the Background note.

New applicants and people being transferred

Payments and clients paid

- Between 21 March 2022 and 31 January 2024, the total value of Adult Disability Payments issued was £733.5 million. Of this, £442.6 million was to new applicants and £290.8 million was to people who had their award transferred from the Department for Work and Pensions **[Table 11]**.
- Daily Living awards accounted for 70% of payments by value, with a value of £516.9 million issued, whilst Mobility award payments issued accounted for 30% and had a value of £216.6 million, including payments of £20.7 million under the Accessible Vehicles and Equipment scheme **[Table 11]**.
- The monthly value of payments issued has increased month on month since the benefit launched, rising from £12,390 in April 2022 to a peak of £97.8 million in December 2023 before falling to £88.0 million in January 2024 **[Table 11]**.
- Payments have been issued to clients living in all 32 local authority areas in Scotland. The highest total value of payments was made to clients in Glasgow City at £101.2 million followed by North Lanarkshire at £66.0 million [Table 12].
- The number of clients who have been paid money for Adult Disability Payment since the pilot launched was 181,225 clients **[Table 13]**.

Caseload

- As of 31 January 2024, a total of 192,575 people were in receipt of Adult Disability Payment. The caseload is currently higher than the number of clients paid since launch because the caseload includes cases where responsibility has transferred from the Department for Work and Pensions but a first payment has not yet been made **[Table 14]**.
- Of the people in receipt of Adult Disability Payment as of 31 January 2024, 83,190 (43%) were new applicants and 109,385 (57%) were people who had their award transferred from the Department for Work and Pensions. Of those receiving a Mobility award 14,475 (11%) were in receipt of Accessible Vehicles and Equipment payments. This differed between new applicants and case transfers, with 7% of new applicants in receipt of a Mobility award receiving Accessible Vehicles and Equipment payment payments compared with 14% of case transfers [Table 14]. Further information on the case transfer process can be found in the <u>Case Transfer section</u> of the Background note.

Excerpt from Table 14: Proportion of caseload by award and client type in January 2024

Client type	Both Daily Living and Mobility	Daily Living only	Mobility only
All	62%	33%	6%
New applicants	57%	35%	8%
Case transfers	65%	31%	4%

- Of the new applicants, there were 29,455 (35%) in receipt of a Daily Living award only, 6,430 (8%) in receipt of a Mobility award only and 47,270 (57%) in receipt of both a Daily Living and a Mobility award as of 31 January 2024. Of those receiving a Mobility award, 3,670 were in receipt of Accessible Vehicles and Equipment payments **[Table 14]**.
- Of people who had their award transferred, there were 33,730 (31%) in receipt of a Daily Living award only, 4,200 (4%) in receipt of a Mobility award only and 71,450 (65%) in receipt of both a Daily Living and Mobility award as of 31 January 2024. Of those receiving a Mobility award, 10,800 were in receipt of Accessible Vehicles and Equipment payments [Table 14].
- This shows that overall new applicants were more likely to be receiving only a single component of Adult Disability Payment (43%), compared with people who had their award transferred (35%).

Caseload by award level

Excerpt from Table 15: Proportion of caseload by Daily Living award level and client type in January 2024

Client type	Enhanced Daily Living award	Standard Daily Living award	Transitional Daily Living award	Not awarded Daily Living
All	42%	52%	0%	6%
New applicants	42%	50%	0%	8%
Case transfers	42%	54%	0%	4%

- Of those in receipt of Adult Disability Payment in January 2024, there were 42% who received the Enhanced Daily Living award, 52% received the Standard Daily Living award, and less than 1% received the transitional Daily Living award. The remaining 6% of caseload were not awarded Daily Living (i.e. they received Mobility only awards) [Table 15].
- New applicants had a lower proportion of Standard Daily Living awards, with 50% compared to 54% for clients who have had their award transferred **[Table 15]**.

Excerpt from Table 16: Proportion of caseload by Mobility award level and client type in January 2024

Client type	Enhanced Mobility award	Standard Mobility award	Not awarded Mobility
Total	35%	32%	33%
New applicants	31%	33%	35%
Case transfers	37%	32%	31%

- Of the people in receipt of Adult Disability Payment in January 2024, 35% received the Enhanced Mobility award, 32% received the Standard Mobility award and 33% were not awarded (i.e. received Daily Living only awards) **[Table 16]**.
- For more detailed information on the combinations of award levels for clients on the caseload see **[Table 17]**.

Caseload by Age

People aged 55 to 64 were the largest age group, making up just under a third (31%) of the caseload as of 31 January 2024. The second largest age group included people aged 45 to 54, who made up around a fifth (20%) of the caseload. People aged 16 to 24 made up the smallest proportion of the caseload, at around 7% [Table 18].

Caseload by Primary Disability Condition

• The most common category of primary disabling conditions for people in receipt of Adult Disability Payment as at 31 January 2024 was Mental and Behavioural disorders, which accounted for 39% of the caseload. This was followed by Diseases of the Musculoskeletal System and Connective Tissue which accounted for 24% of the caseload, and Diseases of the Nervous System which accounted for 6% of the caseload **[Table 19]**. Further information on the disability condition categories can be found in the <u>Disability Conditions section</u> of About the data.

Caseload by Special Rules for Terminal Illness Status

• Of the people in receipt of Adult Disability Payment, 4,850 (3%) were eligible under the Special Rules for Terminal Illness **[Table 20]**.

Caseload by Duration on Caseload

• For clients who were on the caseload in January 2024 the majority had been on the caseload for 6 months or less (52%). The remaining caseload have been on the caseload for 6 months up to 1 year (69,745, 36%), with only 22,595 (12%) having been on the caseload for more than 1 year **[Table 21].**

Caseload by Local Authority

• The largest proportion of people in receipt of Adult Disability Payment as of 31 January 2024 lived in Glasgow City (15%), followed by people who lived in North Lanarkshire (8%) and Fife and South Lanarkshire (both 7%) **[Table 22]**.

Re-determinations and appeals

- There were 16,455 re-determinations received by 31 January 2024. Of these, 15,405 were requested by new applicants, while 1,050 were by people who had their award transferred from the Department for Work and Pensions **[Table 23]**.
- Of the redeterminations requested, 5,530 were requested in the latest quarter, representing a 12% increase from the previous quarter **[Table 23]**.
- The re-determination requests from new applicants represent around 10.2% of the total number of decisions made for new applicants by 31 January 2024. The number of redetermination requests as a proportion of decisions made has remained at a similar level in the latest quarter when compared with the previous quarter, with rates varying between 10% and 15% within each of the last six months **[Table 23]**.
- Due to the improvement made to the way that the date of the initial decision is identified, the redeterminations as a percentage of all decisions processed, and redeterminations which are allowed or partially allowed as a percentage of all decisions processed, have been revised. For more information on the change to decision dates see <u>About the Data</u>.
- By 31 January 2024, 11,880 re-determinations had been completed. Of these, 54% were allowed or partially allowed, 40% were disallowed and 5% were invalid. There were also 205 redeterminations (2%) which went to appeal after exceeding the 56 day deadline **[Table 23]**.

- The number of redeterminations allowed as a proportion of the total number of decisions made is 4.1% since the benefit was launched. In the latest quarter it rose from 5.6% in October 2023 to 6.2% in January 2024 **[Table 23]**.
- Overall, 76% of re-determinations with a decision date by 31 January 2024 were completed within 56 days. The percentage completed within 56 days has fallen in the latest quarter from 65% in October 2023 to 47% in January 2024 [Table 23].
- There were 1,810 appeals received by 31 January 2024. Of those, 365 have had an appeal hearing take place, with 56% being upheld and 44% not being upheld **[Table 24]**.
- There were 125 cases that have received Short Term Assistance by 31 January 2024. Due to the small number of cases it is not currently possible to provide more detail. Further Information of Short Term Assistance can be found in the redeterminations and appeals section of the background note.

Background to Adult Disability Payment

The Scotland Act 2016⁶ devolved new powers to the Scottish Parliament in relation to social security, including responsibility for disabled benefits which had been administered in Scotland by the Department for Work and Pensions. On 1 April 2020, executive competence for Disability Living Allowance and Personal Independence Payment was transferred to Scottish Government.

The Department for Work and Pensions started to replace Disability Living Allowance for working age people with Personal Independence Payment for new applications in April 2013. However from October 2015, working age recipients have been invited to apply for Personal Independence Payment. The Department for Work and Pensions stopped proactively sending these invites to Disability Living Allowance working age recipients who live in Scotland since April 2020 due to the scheduled transfer of these benefits.

Social Security Scotland is the executive agency of Scottish Government which is responsible for delivering social security benefits for Scotland. It will gradually deliver three different types of disability assistance. These are:

- Child Disability Payment, to replace Disability Living Allowance for children
- Adult Disability Payment, to replace Personal Independence Payment and Disability Living Allowance for adults
- Pension Age Disability Payment, to replace Attendance Allowance

There is a transitional period to allow administration of these benefits to be transferred, during which the Department for Work and Pensions will continue to administer Disability Living Allowance for children, Personal Independence Payment, Disability Living Allowance for adults and Attendance Allowance on Social Security Scotland's behalf. Those people already in receipt of the Department for Work and Pensions benefits will not need to apply and their awards will be transferred to Social Security Scotland in phases.

Adult Disability Payment is the second of the application-based disability benefits to be introduced by the Scottish Government. It provides money to help with the extra daily living and mobility costs that a person living with a disability or long term health condition might have. The pilot launched on the 21 March 2022 for new applicants living in the local authorities of Dundee City, Na h-Eileanan Siar and Perth and Kinross. The pilot expanded to include Angus, North Lanarkshire and South Lanarkshire on 20 June 2022, and further expanded to include Fife, City of Aberdeen, Aberdeenshire, Moray, North Ayrshire, East Ayrshire and South Ayrshire on 25 October 2022, before launching nationally to all remaining local authorities on 29

⁶ Information is provided on <u>the Scotland Act 2016 webpage</u>.

August 2022. Further details about the benefit can be found on the <u>mygov.scot</u> website.

Case Transfers

From 13 June 2022, people who get Personal Independence Payment, and from 29 August 2022 some people who get Disability Living Allowance for adults, from the Department for Work and Pensions started to have their award transferred to Adult Disability Payment in phases. Social Security Scotland aims to have the transfer process completed for everyone in receipt of Personal Independence Payment and Disability Living Allowance for adults by the end of 2025.

A case transfer begins when Department for Work and Pensions first sends over a person's case data to Social Security Scotland. This usually occurs approximately one to four months before a person's Personal Independence Payment or Disability Living Allowance for adults entitlement ends, so that their Adult Disability Payment award can be prepared in advance and ready for a transfer between payments of the old and new benefit. During this transitional period, the Department for Work and Pensions will continue to make payments to these individuals. A transfer is complete once entitlement to Adult Disability Payment has started.

Management information as at end February 2024 shows that there had been 180,120 clients from the Department of Work and Pensions who had been selected for transfer to Adult Disability Payment and had their case data sent to Social Security Scotland as part of this case transfer process. Of those, 177,880 were clients who were in receipt of Personal Independence Payment and 2,240 were clients in receipt of Disability Living Allowance for adults. This means that 54% of the Personal Independence Payment clients in Scotland have started the case transfer process to Social Security Scotland.

Social Security Scotland has now completed the case transfer process for around a third of people who were in receipt of Personal Independence Payment. As of 31 January 2024, 111,135 people had their award transferred to Adult Disability Payment caseload, of which 109,525 were transferred from Personal Independence Payment and 1,610 were transferred from Disability Living Allowance for adults. The current caseload at January 2024 is lower than this as clients with transferred awards are beginning to leave the caseload.

Social Security Scotland will only publish official statistics on case transfers from the time that they are fully responsible for the administration of that case, including making the payments. The Department for Work and Pensions will publish official statistics on the cases that are still being paid by them.

Eligibility

This benefit is for people who have a disability and/or health condition that results in additional needs for at least three months, and who can expect to continue to have this disability and/or health condition for at least six months. There is an exception to

this if a person is terminally ill, whereby no qualifying period is required (see the <u>Terminal illness section</u>).

Social Security Scotland have extended the eligibility for Child Disability Payment from 16 to 18 years old, where the individual has already been in receipt of assistance before they were 16. This means that persons aged 16-18 are eligible for either Child Disability Payment or Adult Disability Payment, and could be in receipt of either, but never both.

Until the national launch of Adult Disability Payment on 29 August 2022 by Social Security Scotland, new applicants who were 16 or above needed to apply for Personal Independence Payment or Adult Disability Payment depending on whether they were in a pilot area. Applicants who applied for Personal Independence Payment in Scotland prior to the launch of Adult Disability Payment are being transferred to Adult Disability Payment.

Application and decision making process

The application stage involves a two part application process. The part 1 form gathers key personal details of the individual applying. The impact of the individual's disability is detailed in part 2 of the application form. The exception to this is for applicants applying under the Special Rules for Terminal Illness, where there is only one part to the application, to make the process simpler and quicker.

Part 1 of the application is generally made online or by phone. Where part 1 of an application is started online, part 2 will usually be completed online. Where part 1 is completed by phone, the applicant will be sent a paper form to complete part 2 of the application. In some instances the applicant might request to complete both parts of the form by paper. It is also possible for a valid application for Adult Disability Payment to be made with an alternative form. For example, a Scottish individual may complete a Personal Independence Payment form and send it to the Department for Work and Pensions, who will then re-direct it to Social Security Scotland.

Applicants have 8 weeks to complete part 2 of the form following the submission of part 1.

Social Security Scotland processes each application received and makes a decision whether to approve or deny the application. Applicants can withdraw their application at any point before a decision is made. This may be after part 1 of the application has been submitted or after both part 1 and part 2 have been submitted.

Re-determinations and appeals

If an applicant does not agree with the decision about their Adult Disability Payment application, they can ask Social Security Scotland to look at it again. This is called asking for a re-determination. A request for a re-determination should be made within 42 calendar days of being notified of the determination. Social Security Scotland then has 56 calendar days to make a re-determination. Adult Disability Payment applicants also have the right to appeal to a Tribunal if they do not agree with Social Security Scotland's re-determination, or if Social Security Scotland is not able to make a re-determination within the required timescales.

Short Term Assistance will also be available as part of Adult Disability Payment. An individual can apply for Short Term Assistance during a re-determination or appeal of a determination that reduced or removed their entitlement to Adult Disability Payment. The intention is to ensure an individual is not discouraged from challenging a Social Security Scotland decision or from accessing administrative justice, by having to manage for a period with a reduced income. Where a person is eligible for Short Term Assistance, this will be the difference between the level of payment prior to the reduction and the new level of payment.

Payments

Adult Disability Payment is made up of two components: a Daily Living component and a Mobility component. Qualifying people will be entitled to a payment to help with their daily living needs.

Daily Living component rate	Weekly rates 2022-23	Weekly rates 2023-2024
Transitional (see below)	£24.45	£26.90
Standard	£61.85	£68.10
Enhanced	£92.40	£101.75

Mobility component rate	Weekly rates 2022-23	Weekly rates 2023-2024
Standard	£24.45	£26.90
Enhanced	£64.50	£71.00

Additionally, clients whose awards transfer from Disability Living Allowance for adults who were in receipt of the lowest rate of the Care component will continue to receive payments for the Daily Living component at the same rate as the legacy payment (the "transitional rate") until their Adult Disability Payment award is reviewed.

Payments are made every 4 weeks, in arrears, with the start date of the application being the application date of the part 1 form. However, where the award is for terminally ill people, payments are paid weekly in advance.

Payment can be suspended without the termination of eligibility under certain circumstances.

1. If the client fails to supply information to the case manager within a specified time limit during an ongoing review.

2. If another person was receiving the benefit on behalf of the eligible individual and either they are unable to continue receiving the payment on behalf of the eligible individual or the arrangement is deemed to be putting the eligible individual at risk of financial abuse

When a suspension is ended, the individual will immediately receive the payments which were previously not paid to them because of the suspension. They must have met the conditions of entitlement throughout the period of the suspension.

Accessible vehicle leases and equipment

People who get the enhanced rate of the Mobility component of Adult Disability Payment are able to use either the whole or part of the money they get for the Mobility component to access the Accessible Vehicles and Equipment scheme. This new Scottish scheme provides a service similar to the Motability scheme, with leases available for a range of cars, wheelchair accessible vehicles, scooters and powered wheelchairs. People who have an existing Motability lease are able to retain their vehicle until the end of that lease.

Terminal illness

For the purposes of accessing disability assistance in Scotland, terminal illness is defined as a progressive disease which can reasonably be expected to cause an individual's death⁷.

The clinical judgement as to whether a person should be considered terminally ill, according to the Scottish definition, is made by a registered medical practitioner (RMP) or registered nurse (RN) on a case by case basis, in accordance with <u>guidance</u> <u>prepared by the Chief Medical Officer</u>. An individual's eligibility for meeting the Scottish terminal illness definition may be based on having a single illness or a combination of diseases with conditions.

If an individual is diagnosed with, or is currently living with, a terminal illness under the Scottish definition, their application for disability assistance can be processed under special rules. These special rules mean that:

- The process of applying for disability assistance is more straightforward with a 'one part' application form.
- Applications from people with a terminal illness are fast-tracked so that they are processed as quickly as possible.

⁷ This differs from the Department for Work and Pensions definition of terminal illness, which is 'a progressive disease where death as a consequence of that disease can reasonably be expected within 12 months'. The Department for Work and Pensions changed this definition from 6 months to 12 months on 3 April 2023.

- Individuals who are terminally ill automatically receive the highest rates of assistance they are entitled to and there are no award reviews.
- Awards made under the Special Rules for Terminal Illness can be backdated to the date of diagnosis of terminal illness up to a maximum of 26 weeks before the date of application.
- There is no qualifying period. An individual is not required to have the condition for any length of time before they are eligible.

Applications eligible under the special rules will be identified by the submission of a Benefits Assessment for Special Rules in Scotland (BASRiS) form, which provides confirmation that an individual meets the Scottish definition of terminal illness. If a Department for Work and Pensions DS1500 form or SR1 form has been completed instead it will also be accepted. Social Security Scotland aims to make decisions within seven working days of receiving a completed application form and BASRiS form (or equivalent) for cases eligible under the Special Rules for Terminal Illness.

Social Security Scotland has a duty to identify potential terminal illness cases at all stages of the application process. In cases where the person may meet the eligibility criteria for the special rules to be applied but no BASRiS form is submitted, a case manager must alert the relevant practitioner to determine whether the special rules apply. A Registered Medical Practitioner or Registered Nurse then confirms if the individual is terminally ill. If the client is terminally ill then they can either:

- return a BASRiS form to Social Security Scotland or,
- provide a clinical letter confirming the individual is terminally ill or,
- confirm the individual is terminally ill over the phone with the practitioner and return a BASRiS form to Social Security Scotland within 28 days.

For an application made under the normal rules it may not be possible to identify that a case is eligible under the Special Rules for Terminal Illness unless Social Security Scotland is advised, or until information about the terminal illness, or a clinical judgement, is received.

About the data

How the data is collected

The data in this publication is sourced from Social Security Scotland's case management system. The system holds information on all applications received, decisions and payments. Data about the applicant is collected through the online application form or is entered by client advisors during telephone applications or processing of paper applications. Information about the application outcome and payments is created in the case management system as an application is processed. The information is held across multiple tables within the system. Extracts of administrative data are taken from this system every day for internal reporting purposes. Data cuts combine information from the different tables in the system into one daily extract which includes details of all Adult Disability Payment applications made since 21 March 2022. A payments extract which contains information on the financial aspects of applications is used for calculations in this publication.

To take into account backdating and delays between applications being authorised and payments being made, a data cut to 14 February 2024 has been used to produce statistics on applications received and decisions and payments made up to 11.59 pm on 31 January 2024 (see <u>Updates</u> section). Later data cuts may include retrospective changes to application details, including corrections to details in the case management system, and changes that have resulted from re-determinations and appeals.

Detailed re-determinations and appeals information is collected by the Client Experience team at Social Security Scotland and a challenges administrative extract is used to produce statistics on the number of re-determination requests received and decided, and of appeals received, up to 23:59 on 31 January 2024.

Quality assurance

The data used to produce official statistics is the same as the data extracted from the case management system on a daily basis that is used for internal reporting within Social Security Scotland. As such, the data is checked daily for consistency with previous extracts (i.e. checking applications, decisions and payments figures increase as expected over time, and they are in proportion to each other) and compared to other sources of information.

Additional quality assurance and cleaning has been carried out on the variables used in the official statistics to:

- Check for duplicate and missing application references
- Check for duplicate and missing applicant identification numbers
- Check application dates are within the expected ranges
- Check that payment date is present where a payment value is present
- Check postcode lengths are within the expected ranges and check postcodes that do not match to local authorities – see <u>Geography section</u>
- Remove a small number of test applications which were used to test the case management system

Once the data is aggregated and copied into the publication and supporting Excel tables, the final statistics are quality assured by a different member of the statistics team. The final documents are checked by the lead statistician.

Updates

Each updated publication of Adult Disability Payment statistics may include revisions going back to March 2022. This is because each time figures are published they will be based from a new data cut from the case management system, which can include retrospective changes to data going back to March 2022, as described in the <u>How the data is collected section</u>. More recent months tend to be subject to a greater degree of revision than more distant ones.

In this publication we have improved the methodology used to determine the decision date in our published tables. Previously, only one decision date was available for each application. This decision date would change to reflect successful redeterminations in cases where the application was previously denied or withdrawn. After making improvements to the Adult Disability Payment data extract we now have separate information on the date of Approval, Denial and Withdrawal decisions and as such are able to include only information on the date of the first decision in tables which use the decision date. This has impacted tables 1-5, 7-10 and 23. The impact of this is that decisions on applications with an associated redetermination are moved to earlier months, changing from the month of the redetermination decision to the month of the initial decision. This improvement also means that applications which have had a redetermination no longer need to be removed from the processing times tables as the decision date in those cases will now reflect the initial decision. As such those cases have been included. As a result of these changes the previous published months of August, September and October were revised downwards and all months prior to that, except March and April 2022, were revised upwards.

We have also made a change to the way that we identify cases as having been processed under the Special Rules for Terminal Illness. We previously used a flag on cases to identify those eligible under the special rules. This flag is applied to a case when it is identified as being a special rules case. We now have information on when the case is flagged as a special rules case. We are therefore able to exclude cases from our special rules processing times table where the flag was added after the date of the initial decision and add them to the normal rules processing times table. As a result there are now 375 fewer SRTI cases to the end of October 2023 in the special rules processing times table when compared with the previous publication.

Data Extraction Issues

Processed applications missing a part two received date

As described in the <u>How the data is collected section</u>, the data in this publication is sourced from Social Security Scotland's case management system. The information is held across multiple tables within the system. Data cuts combine information from the different tables into daily extracts which provide information on applications received, decisions made and financial aspects of applications.

A number of applications that have been processed with a decision do not have a part 2 received date appearing in the extract. The number of applications processed which

are missing a part 2 received date is 19,870 to end January 2024. However, withdrawn and denied applications may not require a completed part 2 of the applications form and as such many of these are not missing any information. As of January 2024, 570 (less than 1%) approved normal rules applications lack a part 2 application received date.

Methodology and definitions

Decision Date

The data extract includes information on the date when decisions have been made on an application, including when an application has been approved, denied or withdrawn. These dates are stored separately. When multiple decisions have been made on a case we use the earliest available date as the date of the first or initial decision. For example, if an application had been denied and then subsequently approved after a redetermination we would use the earlier denied date as the date of the initial decision in our application tables.

Denials

Denials include:

- applications that were denied at the Identification and Verification stage which is based on information in part 1 of the application,
- applications where the client failed to submit the complete part 2 of the application
- cases that are denied due to the client not meeting the eligibility criteria.

Processing times

Processing times for an application received under the normal rules, as opposed to under Special Rules for Terminal Illness, is the number of days from part 2 of the application being received to a decision being made or the application being withdrawn. It includes time spent waiting to receive further information from applicants and other organisations (for example, General Practitioners (GPs) and local authorities), if required, but does not include time to make payments. It is calculated in working days. Weekends and public holidays are excluded from calculations, even if applications were processed by staff working overtime on these days. The time of day that an application was received or processed is not taken into account.

Applications that had a decision but did not possess a part 2 application date were excluded from this analysis, as a processing time could not be calculated. This issue is under review (see above in <u>Data Extraction Issues</u>). The number of applications in the processing times table is therefore lower than the number of applications shown as processed or decided in other tables.

Processing times are only calculated for applications that were decided within the period being reported on.

Processing times for applications which are eligible for Special Rules for Terminal Illness are excluded from the normal rules processing times because they use a different methodology. Applications made under the special rules only require the submission of a Special Rules for Terminal Illness application form and a BASRiS form. Processing times for these applications are calculated as the time between the receipt of either the Special Rules for Terminal Illness application form, or part 1 of the normal application form if no part 2 application form is received, and the time of the decision being made. However, applications which are received via the normal route may also be identified as eligible under the Special Rules for Terminal Illness. These applications may have returned a part 2 form. For those applications, processing times are calculated between the received date of the part 2 of the application form and the date that a decision was made regarding the application.

Due to the ongoing data issue, with some applications still having a missing part 2 received date, it is possible that some applications identified in the Special Rules for Terminal Illness processing times table as 'SRTI Application form or Part 1 only' may have been received under the normal rules and returned a part 2 application form, and should have been calculated based on a part 2 received date. Processing times for the Special Rules for Terminal Illness should therefore be treated with caution. Quality assurance work will continue in this area.

Caseload (new applicants and people being transferred)

The methodology used for this publication uses a data extract which makes it possible to identify all cases who are in receipt of, or have been approved for, a payment in the caseload period, even if they have not been paid yet.

Payments are made every four weeks, in arrears, with the entitlement start date being the date that the applicant registered their part 1 form. The methodology uses a pointin-time measure of the number of people in receipt of Adult Disability Payment on the final day of any given month. It counts people from the point that they are approved for a payment until the point that their application is closed. Therefore, if a client's eligibility ended on the last day of a month, they would be counted in that month's caseload, but not in subsequent months. However, if the client's eligibility ended before the last day of the month then they would not be included in that month's caseload.

A data cut from 15 February 2024 has been used to produce statistics on all cases who are in receipt of, or have been approved for, a payment in the caseload period, even if they have not been paid yet, up to 11.59 pm on 31 January 2024.

Caseload by award type methodology

In order to identify caseload numbers by award type (i.e. awarded both Daily Living and Mobility, Daily Living only or Mobility only) and award level (e.g. enhanced, standard, transitional), the caseload extract was linked to an award level extract, which contains information on a client's award and any changes to their award type and award level over time. The award level extract had to undergo cleaning in order for it to be used alongside the caseload extract. This process involved the loss of 2% of the award level data set due to anomalies within the extract. As a result of this, when the award level extract was linked to the caseload extract, 2% of cases did not link to any award type or level information. In these instances the initial award type and level information from the applications extract have been used. However, where there were any award changes to accessible vehicle leases, these have been used to update the mobility awards. Therefore in a small number of cases there will be a limited indication of award changes that have happened since the client applied. This methodology is experimental and is likely to change over time.

Disability Condition

The Disability Condition data included in this publication in based on the Primary Disability Condition which is recorded in the application information data extracts. This Primary Disability condition is recorded by the Case Manager during the processing of the application and is determined based on the supporting information that has been provided.

The data is recorded using codes which were developed based on the International Statistical Classification of Diseases and Related Health Problems 10 (ICD10)⁸ standard, published by the World Health Organisation. The codes recorded are a subset of the broader ICD10 groupings. These are then aggregated into the ICD10 'chapters' for publication purposes. This publication has also broken down some of the 'chapters' into lower level groupings to provide more detail. We welcome feedback on this table.

As a part of the development process the newly developed condition codes were matched with the condition codes from both Personal Independence Payment and Disability Living Allowance to allow for case transfers to be moved to the new system.

Duration on caseload

The duration on caseload table uses the same methodology as other caseload tables in this publication, in that it counts people from the point that they are approved for a payment until the point that their application is closed. For cases transferred from the Department for Work and Pensions, only the time spent on the Adult Disability Payment is considered.

Rounding and disclosure control

Application and outcome figures have been rounded to the nearest five for disclosure control. The number of payments have been rounded to the nearest five and the value to the nearest ten pounds for disclosure control. Data has been suppressed where it would disclose fewer than five applications.

⁸ International Statistical Classification of Diseases and Related Health Problems 10 (ICD10)

Incorrect application dates

Quality assurance checks highlighted that a small number of cases had an application decision date on or prior to the benefit opening for applications on 21 March 2022. These cases were identified as test data and were removed from the data set.

Missing and duplicate applications

The data comes from a 100% data cut of the case management system. Individuals may make repeated applications for the same payment, for example if their first application is denied. This means that there can be several applications in the data cut from the same person. For this publication we have retained all these applications, but this represents a small proportion of applications.

Application channel

Application channel represents the channel used to complete part 1 of an application only. Application channel is automatically entered into the case management system for online applications, and manually entered for applications taken by phone or paper. If an application channel has been manually entered incorrectly, the application channel will be classed as 'unknown'. In some instances a valid application for the Adult Disability Payment may arrive in a non-standard format. For example, a Scottish applicant may mistakenly complete a Personal Independence Payment form and send it to the Department for Work and Pensions, who will then re-direct it to Social Security Scotland. The channel for these applications is classed as 'alternative'.

There are three main ways that applications are completed:

- 1. Online for both part 1 and 2 of the application
- 2. By phoning up and completing part 1 of an application and requesting a paper part 2 form to complete
- 3. Requesting via telephony a paper form for both part 1 and 2

The third option is unlikely to include many applications as it will only occur if an applicant specifically requests this. Where the initial contact is made by phone, the majority will complete part 1 over the telephone then proceed to part 2. A request can also be made by the applicant to receive help filling out part 2 of the application from a local delivery team member. This can occur via a video call or in person.

In the current publication, the category 'Paper applications' channel includes both 'paper' and 'combined' applications. Combined applications represent where a part 1 and part 2 application are provided at the same time via paper.

The category of 'Other channel' includes applications received through local delivery as well as any that have a recorded channel of 'In Person' and 'Transferred from DWP'.

Age of applicant

The age that is used for the applicant is taken from the date of birth that is entered during the completion of the part 1 application and some small errors may exist. Different measures of age are used in this publication. In Table 7, which details number of applications received and processed, age is based on the age of the person when part 1 of the application was registered. In Table 18, which details the age of people that are in the caseload, age is based on the age that the person was on the last day of the caseload period in question. Ages that are out with the expected range are treated as "unknowns" and may be the result of a date of birth being incorrectly entered.

Geography

Applications and caseload are assigned to local authority by postcode using a Scottish Government lookup file. For some applications, the postcode will not match to the lookup file. This can be because the postcode is not in a Scottish local authority, or because the postcode has been introduced too recently to appear on the lookup file, for example if a property is in a new development.

Postcodes are linked to individual profiles and data extracts are automatically updated in the case of an individual changing address. As a result, postcodes reflect the latest address of individuals and may not be the same as the address at the time of application. Therefore a small number of addresses may not reflect the correct local authority at the time of application, decision or payment.

Payments

The payments extract, which contains information on the financial aspects of applications, is used for calculations in this publication. This was linked to the applications extract, allowing for a breakdown of payments to Daily Living and Mobility component rates. The total number of payments presented counts of each component of an Adult Disability Payment (e.g. Daily Living and Mobility) as individual payments. It also counts multiple payments made to a person in the same month as separate payments. This could happen for an individual where payments are being backdated to the start of their entitlement period (e.g. one Daily Living payment for current entitled month, and one Daily Living payment backdated to entitlement start date).

Future Developments

If you have any feedback on any element of the publication and tables, please contact us at <u>MI@socialsecurity.gov.scot</u>.

The next publication on 18 June will include information on clients moving from Child Disability Payment to Adult Disability Payment.

We are working towards including data covering Adult Disability Payment reviews in upcoming publications.

Related Social Security Scotland Publications

Updated statistics for Personal Independence Payment, Disability Living Allowance, Attendance Allowance and Severe Disablement Allowance claimants in Scotland will be available through the <u>Social Security Scotland 'Publications' webpage</u>.

An Official Statistics publication for Scotland

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Correspondence and enquiries

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How to access background or source data

The data collected for this statistical bulletin:

□ are available in more detail through <u>statistics.gov.scot</u>

I are available via an alternative route. Summary tables are available at:

https://www.socialsecurity.gov.scot/publications/statistics

☐ may be made available on request, subject to consideration of legal and ethical factors. Please contact <u>MI@socialsecurity.gov.scot</u> for further information.

□ cannot be made available by Scottish Government for further analysis as Scottish Government is not the data controller.

Complaints and suggestions

If you are not satisfied with our service or have any comments or suggestions, please write to the Chief Statistician, 3WR, St Andrews House, Edinburgh, EH1 3DG, Telephone: (0131) 244 0302, e-mail <u>statistics.enquiries@scotland.gsi.gov.uk</u>.

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