

# Gathering Supporting Information

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## Introduction

1. This chapter describes the approach to gathering information to support both:
  - an application
  - subsequent scheduled and unscheduled reviews of awards of Adult Disability Payment (ADP).
2. In most cases one piece of supporting information from a professional is required. The case manager can make a determination without it if the individual has a good reason as to why this is not available.
3. The approach should align with the principles of dignity, fairness and respect found in our Social Security Charter .
4. This guidance sets out the general principles the case manager should follow when gathering supporting information.
5. Social Security Scotland is required to publish the requirements for supporting information<sup>1</sup>. The requirements can be found in the application form, on the MyGov.scot website, and in both the Decision-Making Guidance and Operational Guidance.

*1 Social Security (Scotland) Act s38(2)*
6. The only supporting information required for an individual who is terminally ill is either:
  - a Benefits Assessment under Special Rules in Scotland (BASRiS) form completed by a registered medical practitioner or a registered nurse
  - a DS1500 form completed by a registered medical practitioner or a registered nurse. This is the equivalent to the details held on a BASRiS form.

- A letter or phone call from a registered medical practitioner or registered nurse detailing the diagnosis for the individual.

7. See the Special Rules for Terminal Illness chapter for more information.. Care should be taken when information collected includes information that is potentially harmful to the individual or their parents or carers. See the Special Rules for Terminal Illness guidance for more information.

### **Supporting information**

8. There are two types of supporting information:

- supporting information from an individual's wider network who can give insight into the impact the condition or disability has on the individual.
- supporting information from a professional involved in the individual's treatment or care.

9. Supporting information that is not provided from a professional can be from an individual's wider support network like family members, friends or unpaid carers. This could include statements about the impact of the individual's disability on their daily life. These sources of information are useful for:

- considering the information on the application form
- looking at the supporting information that has been supplied with the application.

10. Supporting information is likely to supplement the application form by describing the individual's care and mobility needs. Health and social care professionals may be able to confirm a diagnosis. However, they are less likely to be able to observe an individual's daily routine or an individual's mobility. Some allied health professionals like physiotherapists and occupational therapists can offer observations on this. However, not every individual will have had this type of assessment. Therefore people closely connected with a disabled person can be useful sources of information about the impact a disability has on an individual.

### **Supporting information from a professional**

11. When applying for ADP, individuals must make their application in the form that is required by Social Security Scotland<sup>1</sup>. They must also provide information that Social Security Scotland requires to make a decision on the application<sup>2</sup>. Every individual applying is therefore asked to provide one piece of supporting information from a professional to support their application, where possible.

*1 Social Security (Scotland) Act s38(1)*

*2 Social Security (Scotland) Act s38(1)*

12. Professionals with insight into an individual's disability or health condition can provide these sources of supporting information.

13. Professionals who can provide supporting information include:

- social workers
- psychologists
- health professionals. This includes nurse practitioners, GPs, consultants and health visitors.
- allied health professionals. This includes physiotherapists, occupational therapists, speech and language therapists.
- educational professionals for young people still in school. This includes teachers, support teachers, head teachers and school nurses
- local authority staff who have access to a Child's plan (under Getting it Right for Every Child, GIRFEC) or an Additional Needs Assessment, for example paid support workers who can confirm the level of care an individual receives
- third sector organisations who provide support workers to the individual.

This list is not exhaustive.

14. Supporting information from a professional can confirm either or both:

- a diagnosis of a condition causing a disability
- the impact of a disability on the individual's daily life.

15. Examples include:

- treatment plans
- diagnosis
- a list of medications prescribed to the individual
- care assessments
- physical supports put in place by a local authority. Examples are things like a stair lift, ramp or accessible shower.
- child's plan/additional support needs plan
- social work report
- medical specialist report.

This list is not exhaustive.

16. Supporting Information from a professional needs to be consistent with the daily living and mobility needs detailed on the application.

17. Registered medical practitioners or registered nurses might decide that the supporting information they submit to Social Security Scotland could be harmful to the individual or the individual's parents or carers. They might see information as harmful where both:

- the individual is not fully aware of their disability or health condition
- the full knowledge would cause the individual serious mental or physical harm.

18. Case managers must not disclose this information to the individual or their parents or carers<sup>1</sup>. For more information on this please see Operational Guidance.

<sup>1</sup> SS(S)A 2018, s. 62A (1)

## **Consideration of supporting information**

19. Supporting information can be useful when the level of detail on the application form is insufficient to make a determination.

20. Individuals will have different types of supporting information depending on their disability. Case managers should not expect:

- to be able to get the same type of supporting information from every individual
- that the quality of that information will be the same in every case.

21. When considering:

- the supporting information that they have
- whether more information is needed

the case manager should take into account:

- Who is it from? – Is the information from a relevant source? Is the source someone who knows the individual? Do they have the opportunity to see them in daily life or to understand the impact of their health condition or disability? Is supporting information from a professional on headed notepaper? Can you check the credentials of the professional on a register?
- How current is the information – What date was the information produced? Is the information from a time period relevant to the application? Does it support the relevant period? Is the information outdated? Case managers should remember some conditions can be lifelong and older information can still be valid.
- What does it say? What information does the source give you? Is the information relevant to what you need?
- How does it say it? Is the information a report of what the individual has been told or something the individual has observed themselves?

22. In general, medical information should be treated in the same way as any other supporting information. Case managers can consult practitioners employed by Social Security Scotland if they need any clarification.

## **Inconsistencies in supporting information**

23. All supporting information must be given equal consideration by the case manager. However, where there is any inconsistency, the case manager will need to:

- consider if one piece of supporting information is more reliable and give clear and logical reasoning for this
- potentially gather other supporting information.

24. In some cases, it may be reasonable to accept the facts in the supporting information from a professional over the facts in other supporting information. For example:

- the supporting information from a professional supports the account of the individual's disability given in the application form
- other supporting information is inconsistent with both sources as well as with the diagnosis.

25. In other cases, it may be reasonable to accept the facts in other supporting information over the supporting information provided by a professional. An example of this is when the only available supporting information from a professional is not up-to-date.

26. The case manager must provide clear and logical reasoning for accepting the facts in one source of supporting information over another. This applies both supporting information from a professional and any other supporting information.

27. There may be cases where one source of information from a professional is inconsistent with other information. The case manager has to decide on the balance of probabilities which item of supporting information is more likely to be correct.

28. For details on the balance of probabilities see Principles of Decision Making.

29. All supporting information should be taken into consideration. The view of the individual's own health professional is not always conclusive.

30. Case managers can seek further supporting information if they think that there may be another source who is better able to confirm the impact of the individual's condition on their daily life, with the individual's consent.

31. Involving a practitioner is recommended when any supporting information appears to be contradictory or highly improbable.

**Example: Inconsistent earlier information**

Emma makes an application for ADP as she has experienced an intermittent visual disability for the past 15 months.

She sends in a letter from her GP, dated in June, which describes her condition as both:

- temporary
- likely to respond to the treatment prescribed.

A second letter, dated in August, from a student support worker at her college explains that she has had support at college for the last 8 months.

In the application, made in November, a close family member explains both that:

- her vision has not improved significantly
- the GP has told Emma that it may be a permanent condition.

The GP has referred Emma to an ophthalmologist and other specialists as her condition may be a symptom of multiple sclerosis.

The case manager cannot reasonably dismiss the report from the student support worker nor the GP's letter. These sources are inconsistent as it is clear in the teacher's letter that the condition has not improved.

In discussion with Emma, the case manager requests more information from the GP to support the application. This information both:

- confirms that the GP has referred Emma to specialists
- explains there are symptoms in addition to the vision impairment that require attention.

The case manager:

- makes a determination that Emma is entitled to the standard rate of daily living.
- sets the review period to two years as it is unclear how Emma's needs will develop.

32. The individual's own information may include statements that conflict with each other. The case manager should resolve this by clarifying with the individual directly where possible.

### **Example: Inconsistent information in the application**

Dougal has anxiety and depression and is under the care of a mental health practitioner whom he sees every 2 weeks. He has a letter from the mental health practitioner that outlines he occasionally suffers from periods of a lack of motivation and self-neglect.

The practitioner states that this does not usually effect Dougal in his daily activities and is able to dress himself without prompting.

Dougal's application for ADP is written by his mother as she is his appointee. She describes:

- the need to encourage Dougal to change his clothes
- that he cannot be bothered to change his clothes.

The frequency of the occurrence of Dougal's periods of lack of motivation and self-neglect are unclear. The case manager:

- needs to understand the frequency of the care and prompting by Dougal's mother before making a determination
- phones his mother to clarify the extent of prompting Dougal requires to get dressed on a day.

Following the call, the case manager:

- is satisfied that Dougal needs prompting from her to perform this activity to an acceptable standard
- is able to make a determination based on this clarification that Dougal would satisfy daily living component activity 6 descriptor C because he needs encouragement by another person to dress and undress.

### **Lack of supporting information**

33. The case manager can make a determination without supporting information from a professional information if either:

- the individual does not have any supporting information from a professional
- it is not readily available.

34. If the individual has provided supporting information from their general support network, such as family, the case manager should use this to make a determination. In cases where there is no supporting information from any source available, the case manager should use their discretion to make a determination.

### **Example: No supporting information from a professional available**

Harrison lost their vision a year ago.  
This has caused:

- significant anxiety especially around people they don't know
- the loss of ability to read body language
- Harrison to be unable to engage with anyone unless their partner is with them

Harrison has appointment letters with their GP and a mental health specialist.. The GP and specialists have not responded to Social Security Scotland's request for a report on how their loss of vision has affected their anxiety and ability to deal with other people.

The couple live in a remote area of Scotland. They have been exploring Harrison's difficulties for the last year. However, they have not been able to attend an appointment with a specialist because of transport issues.

The case manager considers it reasonable that no supporting information from a professional is available. The case manager considers the:

- description of Harrison's condition in the application form
- the letters showing that Harrison is due to meet specialists in connection with the conditions described in the application form.

The case manager asks if another source of information is available. Harrison's partner asks a close friend who helps support them to provide information. This information confirms the impact of Harrison's loss of vision on their anxiety as described in the application form.

The case manager decides, on the balance of probabilities, to accept the facts about Harrison's condition that are stated in the application form. The case manager:

- applies the law to those facts
- determines that Harrison would satisfy daily living component activity 9 descriptor C because of the support required from a specific person to complete this activity to an acceptable standard.

### **Supporting information and the application process**

35. The application form is the main source of information a case manager uses to determine eligibility for disability assistance.

36. Case managers should base their decision on trust. This assumes that the individual has accurately described the impact their disability has on their life.

37. Case managers can both:

- clarify this information with the individual
- ask the individual to give more information to support the answers they gave in the application

if there is not enough detail to make a determination.

38. One piece of supporting information from a professional should accompany the application. The individual can provide it at the time of applying or the case manager can request it during the decision making process. However, the case manager will have the discretion to make a determination if the individual does not have a source of supporting information from a professional. The individual must not be treated less favourably for not having supporting information from a professional.

39. For details on scenarios where no supporting information is available, please see section **lack of supporting information** above.

40. Supporting information regardless of which source it is supplied from is anything presented to support an individual's application that gives an understanding of:

- a diagnosis, if available
- a treatment being received
- a picture of how an individual's disability impacts on their life
- a process to find out about the individual's condition and make a diagnosis
- aids and equipment that an individual uses to manage daily life
- support that the individual needs at school or in a club they attend.

41. Case managers should consider each piece of supporting information on its own merits, whether it is from a professional or from any other source..



42. Case managers use supporting information to help them make determinations of an individual's entitlement to ADP.

43. They establish the facts of the case by:

- considering the information on the application form
- looking at the supporting information supplied with the application
- gathering further supporting information if the facts are still unclear.

**Example: a case manager uses supporting information to make a determination**

Louis has recently been in an accident at work and lost his vision. His application form has been written by his girlfriend. She explains that whenever she takes him anywhere, at the first sign that someone is going to engage with him he "has a meltdown". He starts shaking and crying and ends up on the floor in a heap and he can't do anything until he is back home and his girlfriend tries to calm him down.

He has a letter from the occupational therapist at work that shows that he can't continue working as a builder because he has lost his vision and so has been medically retired. He also has a letter from a psychologist which shows that because of the sudden loss of vision he now suffers with panic attacks when engaging with other people because he can't see where they are coming from or what they want.

The facts of this case are:

- Louis has lost his vision and has been medically retired. This causes him to become significantly distressed when people engage with him.
- A psychologist confirms that he suffers from severe panic attacks when people engage with him due to the loss of vision

The facts are separate to the conclusions that may be drawn from those facts. The case manager might conclude:

- Louis cannot engage with people in a social environment without significant emotional distress

The next step is that the case manager applies the law to those facts and make a determination. They determine that Louis has such a significant emotional reaction when engaging with people that he cannot perform this activity reliably. Therefore would satisfy daily living component activity 9 descriptor D because his symptoms would be classified as overwhelming psychological distress caused by his current loss of vision.

44. See the chapter Principles of Decision Making for more information on how to make good decisions.

## **Responsibility for collecting supporting information**

45. The individual is responsible for providing the supporting information which helps the case manager to make their determination<sup>1</sup>. However, case managers must work in collaboration with individuals to gather supporting information.

*1 Social Security (Scotland) Act 2018 s. 54*

46. Case managers:

- gather information from appropriate sources, if the individual requests it. These are suggested by the individual or by their representative on their behalf.
- offer support to obtain information not held in the public sector. Examples are information held by private physiotherapists or support organisations.

47. In line with our values of fairness, dignity and respect, a case manager should:

- do as much as possible to ensure that the individual has every opportunity to provide all relevant information
- take the necessary steps to assist in gathering this information when the individual requests support.

48. This may involve local delivery teams, particularly where an individual is considered to be vulnerable.

## **Collaborative process for gathering supporting information**

49. There will be cases where either the:

- supporting information
- award review form

will not be enough for the case manager to make a determination.

50. The case manager then:

- asks the individual for additional supporting information
- ensures information gathering is a collaborative process with the individual.

This ensures that the process is respectful and supportive.

51. Firstly, the case manager should determine what additional supporting information they need before contacting the individual. They should only gather what is necessary to make a determination.

52. The case manager should contact the individual by their preferred communication method to explore:

- what types of supporting information they may hold themselves
- whether they need support to gather further information.

53. The case manager should check the application form to see who the individual has indicated could tell us more about their disability.

54. Operational guidance sets out in more detail how to gather supporting information.

### **Example: Collaborative process of gathering supporting information from a professional**

Alex has been experiencing severe joint pain in his knees for a year. He is frequently unable to go to work because of this pain. When he does go to work he tries to not move from his desk all day unless he has to go to the toilet, because he experiences pain when he walks.

Alex applies for ADP. He has included as supporting information a letter from a colleague at work who has known him for 5 years. In the letter, the colleague explains Alex's absences from work and the pain he has seen Alex experience in the last year. This corresponds with the description of Alex's pain in the application form.

From this information, it looks like Alex may be eligible for the standard rate of the mobility component. However, there is no supporting information from a professional. The case manager asks him for a source of supporting information from a professional. They agree that the case manager can ask Alex's GP to provide this. The GP replies, stating that:

- there is no diagnosis currently
- there is no information of treatment on his file

The case manager thinks it may be unreasonable to dismiss the supporting information just because it does not directly support the facts described in the application form.

The case manager:

- decides to seek further supporting information from a professional
- finds out that Alex's workplace are providing adjustments for him, from a discussion with him.

Alex asks his workplace Occupational Health professional to provide a report about the impact his condition has on him. The report describes that Alex has been provided with an adapted chair to elevate his legs and a separate footrest. His desk was moved closer to the entrance to the office and the toilet because it was previously a long way for him to walk (over 50 metres) which he could not do in a reasonable time period. This report satisfies the case manager because they have supporting information from a professional which is consistent with the application and the other source. The case manager makes a determination to award Alex the standard rate of the mobility component.

## Gathering supporting information on behalf of an individual

55. The individual:
- can ask Social Security Scotland for help gathering supporting information
  - must give permission to Social Security Scotland to gather supporting information for them if they prefer not to gather supporting information themselves.
56. The case manager can both:
- use information sources mentioned on the application form
  - contact the individual to ask for additional sources.
57. Social Security Scotland can require any of the following bodies and persons to supply supporting information<sup>1</sup>:
- Suppliers of vehicles under the Accessible Vehicles and Equipment (AVE) scheme
  - Health Boards
  - Registered medical professionals, such as GPs and specialists
  - The Public Guardian
  - Local Authorities
  - Integration joint boards
  - Registrar General for Scotland
  - The Keeper of the Records of Scotland
  - The Scottish Courts and Tribunals Service
- 1 The Social Security Information-sharing (Scotland) Regulations 2021, s. 3 & s. 4*
58. For more information on the AVE scheme please refer to the ADP Mobility Component Introduction chapter [LINK].
59. Social Security Scotland has agreements with NHS Scotland, GPs and local authorities to ensure that it can gather information directly with the individual's consent.
60. Social Security Scotland can also gather information from organisations who do not fit into these categories. Operational guidance sets out how to gather information.
61. If an individual is both:
- unreachable
  - identified as vulnerable
- there are processes in place to gather information for them.
62. Supporting information can be:

- Documentary. This is from professional sources based on or consisting of official documents. An example is a report from the individual's specialist doctor based on their interaction with the individual and medical records.
- Written. This is from a source which is not based on official documents. An example is a written statement from a relative of the individual about the impact of the individual's disability on their day to day life. Social Security Scotland can provide templates which show how to make a supporting statement. For more information on this, including a link to the templates, please see the Operational Guidance.
- Oral. This is taken verbally and directly from the individual or relevant sources. An example is a statement given by the individual over the phone about the impact of their condition. For more information on how to take an oral statement, please refer to the Operational Guidance .

63. Sometimes, the individual may not give permission for us to contact a specific source. In that case, the case manager should discuss with them what other sources of information may be useful.

64. The case manager should consider requesting peer / colleague support or support from a practitioner employed by Social Security Scotland if both:

- the case manager is not sure about the sources of information that may exist for an individual
- the individual is unclear about what information may be available.

65. To find out how to request peer / colleague support or a case discussion, please refer to the Operational Guidance. For more information on what a case discussion is, please see the chapter on Case Discussions .

### **Requesting supporting information when an individual is uncooperative**

66. In cases where an individual is uncooperative in providing supporting information, the case manager:

- should use discretion to make a person-centred decision based on the individual's situation
- take into account exceptional circumstances ("good cause") which explain why the information has not been provided. This is known as "good cause".

67. The individual might have good cause for a delay in providing information if there are exceptional circumstances relating to:

- the individual's health
- the individual's disability
- a hospital stay
- not getting the support needed from an advocate/support worker
- having to deal with an unexpected life event, like a death in the family.

68. This list is not exhaustive. For more information on good cause please see the Operational Guidance [LINK]. The chapter Principles of Decision Making gives guidance on using discretion and considering exceptional circumstances.

69. Local delivery staff should be involved in offering support to the individual in cases where the individual both:

- needs support to gather information
- has no support networks .

70. The case manager should:

- take into account that the individual cannot provide adequate supporting information from a professional because it does not exist
- consider consulting a medical practitioner within Social Security Scotland when this is the case.

71. However, the case manager may need to set a deadline for responding to a request for information when either or both:

72.

- every effort to contact the individual to gather further supporting information has been exhausted and the individual has not responded
- the individual has been uncooperative.

73. Social Security Scotland can request the individual to provide supporting information within a specific timeframe where both:

- A case manager is making a determination regarding the individual's case
- Additional supporting information is needed to determine an individual's eligibility to a devolved type of assistance<sup>1</sup>.

*1 Social Security (Scotland) Act 2018 s. 54 (1)*

74. If the individual fails to provide the supporting information, the case manager may make a determination that the application does not satisfy the eligibility criteria for the benefit<sup>1</sup>. The case manager can make this determination without further consideration.

*1 Social Security (Scotland) Act 2018 s. 54 (2)*

## **Reviews and unscheduled reviews**

75. The individual may report a change in their circumstances. This could be during a scheduled review, for example. The case manager must consider whether they need supporting information in addition to what the individual has reported. The same principles apply to gathering supporting information for reviews as they apply to the determination of applications.

76. The case manager can use a variety of information to make a new determination for unscheduled reviews

These include:

- information used in the most recent determination for the award
- relevant information used in earlier determinations
- information that has prompted the unscheduled review
- further information that the case manager asked for as a result of the individual informing Social Security Scotland of a change
- information that Social Security Scotland gathered on behalf of the individual
- other relevant information that is provided to Social Security Scotland.

77. Details on scheduled and unscheduled reviews can be found in the Scheduled Reviews chapter, the Unscheduled Reviews chapter, and the Operational Guidance .

78. The case manager can ask for supporting information within a timescale they consider to be reasonable when the individual both:

- has a scheduled review
- reports a change in circumstances.

79. If the individual is uncooperative the same principles apply as are described above .