

Principles of Decision Making

This chapter describes the approach to making determinations on Pension Age Disability Payment:

- applications
- reviews
- re-determinations

This guidance is for case managers working for Social Security Scotland. In this chapter, the case manager will be referred to as 'you'. Social Security Scotland will be referred to as 'us' or 'we'.

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Following our principles

Access to social security is a human right in Scotland and essential to the realisation of other human rights. Our social security system is built on our core principles of:

- dignity
- fairness
- respect

Treating people in this way:

- transforms how we talk and think about disabled people and social security
affects how we make decisions about disability benefits

Social Security Scotland decision makers must always:

- treat people with dignity, fairness and respect
- treat people as the authority on their own lived experience
- start from a position of trust in what the individual has told us
- use the balance of probabilities

Social Model of Disability

You should consider the individual's needs based on what they tell us about the barriers they face. This is following the social model of disability.

The social model of disability is the idea that barriers for disabled people are created by society. The disability is not something that 'exists' in the person's body or mind. It is a condition and an experience created by the barriers in an inaccessible society.

The medical model:

- centres on what someone can not do
- places the burden of responsibility for dealing with barriers on the individual
- disempowers disabled people by focusing on what is wrong with them

The social model:

- centres on a person's needs
- makes society responsible for removing barriers
- empowers disabled people by recognising barriers are the issue, not the person

As society has historically followed the medical model when you make decisions, you must think carefully and challenge your own subconscious:

- attitudes
- beliefs
- assumptions

to ensure you are making decision based on the social model.

Trust-based approach

You should start from the assumption that the account the individual has provided in their application or review form, and any supporting information accompanying it, is an accurate reflection of their circumstances.

We call this a trust-based approach.

You must approach information from the individual from a position of trust to build a positive and supportive relationship.

If individuals think we do not trust them, our relationship becomes confrontational, suspicious and institutional. That means we:

- are less able to meet their needs
- risk becoming a source of stress and anxiety rather than support

Although you assume trust, sometimes you may be given information that contradicts what the individual tells us. We use the balance of probabilities to:

- establish the value of information
- examine any relevant gaps or inconsistencies, including exploring contradictory information

For more information on how to establish value and explore gaps and inconsistencies, refer to the Understanding and interpreting Decision Making Guidance.

Person-centred decision making

Taking a person-centred approach to decision-making involves:

- considering how the individual's condition affects them
- understanding that the same condition affects people in different ways
- taking into account all of their circumstances

- listening to the individual
- treating them as an individual
- recognising that the individual understands their own life best
- considering the individual's support network, caring responsibilities and work responsibilities
- making sound judgments about the impact that an individual's condition has on them
- approaching decisions from a position of trust, considering all relevant information
- only seeking one source of supporting information from a professional where possible.
- acknowledge you own bias, and taking steps to counteract it

Needs-based approach

We the individual's needs first. We call this a needs-based approach.

An award is not specific to a medical condition, but is based on an individual's needs and the range of help and support they need.

Taking this approach helps us to:

- understand the individual's level of need
- break down stigma
- build trust with applicants
- set a precedent for a better social security system

Putting our principles into action

In your role you will put these values into action. You play an important part in ensuring that disabled people are able to access all of the support they're entitled to.

By following our principles, you'll help Scotland become a country where disabled people:

- are treated fairly
- are trusted to know what's best for them
- can reach their full potential

Rather than:	You should:
Trying to 'catch people out' by asking probing or unnecessary questions	Ask open questions, listen, and approach from a position of trust
Asking for unnecessary supporting information	Use decision making tools and the balance of probabilities to establish the client's level of need
Automatically applying 'a pinch of salt' to information from the client's wider support network	Treat information from all sources with equal consideration
Allowing our own bias to get in the way of establishing a person's needs	Be aware of our bias, and try to counteract it
Ignoring what a person says if other information contradicts it	Consider all available information to arrive at a balanced decision
Asking for 'evidence' or 'proof' of what a person tells us	Ask for confirmation from a professional to support what the client says
Trying to 'compare and contrast' information to find fault with it	Understand clients have complex lives, and gaps or inconsistencies are likely

Enabling people to access assistance

Your role is to award assistance to those you determine meet the eligibility criteria, using the information and decision-making tools available to you. We have a statutory duty to ensure people receive the assistance they are entitled to¹, and you play an important role in fulfilling that responsibility.

1 Social Security (Scotland) Act 2018, section 24.

Decision-making should follow the Right First Time principles, which ensure fairness and can reduce the occurrence of errors at the earliest opportunity.

There may be times when you encounter information that appears counterfeit, inconsistent, contradictory or inherently improbable.

Such information should never be disregarded.

- If you are considering a first application and the individual is not already entitled to assistance, you should resolve any relevant inconsistencies in the course of making a determination. This may mean seeking further information or support from your Line Manager or team Fraud Champion.
- If the individual is already receiving assistance, and you have information that suggests potential fraud, you should consider contacting the Fraud and Error Risk Analysis and Control team who can support you through making a referral into the fraud investigation team

Related reading

- eligibility criteria chapter
- [Right First Time: A practical guide for public authorities in Scotland to decision-making and the law](#)
- [Fraud advice for decision makers](#)
- [Social model of disability | Disability charity Scope UK](#)
- [Social Security Scotland: our charter - gov.scot \(www.gov.scot\)](#)
- [Social Security principles and a rights based approach - gov.scot \(www.gov.scot\)](#)

Types of decisions

You use your skills and expertise to make different types of decisions when processing applications or award reviews.

The decisions that you make can be described as either:

- process decisions
- determinations of entitlement

Process decisions

A process decision is a decision about whether the process of either

- applying for benefits, or
- challenging determinations by way of re-determinations

as set out in the Social Security (Scotland) Act 2018 has been followed properly.

When Social Security Scotland makes a process decision and the individual disagrees with the decision, they can appeal to the First Tier Tribunal. There are three process decisions which you might make:

- to reject an application for assistance which is not made in the format that we require¹.
- To reject a request for a re-determination which is not made in the format we require².
- To reject the reason an individual has given for not making a re-determination in the time period required³.

1 Social Security (Scotland) Act, s38

2 Social Security (Scotland) Act, s41(3)

3 Social Security (Scotland) Act, s42

When you can reject an application

You can only reject an application without making a determination if the applicant has any of these¹:

- not made the application in the form we require
- not met criteria in part 1 of the application, such as the residence and presence requirements
- an entitlement to an existing disability benefit, such as Attendance Allowance

Rejecting an application is different from denying an application. Denying an application is one possible outcome of making a determination of entitlement.

If a person does not meet the eligibility criteria for Pension Age Disability Payment you should deny their application once the full application has been received.

The requirements an application must meet are set out in the Applying for Pension Age Disability Payment DMG chapter.

1 Social Security (Scotland) Act, s38

Determinations of entitlement

A determination of entitlement is the decision about a person's entitlement to disability benefits.

It is the outcome of one of the following¹:

- an application
- a determination without an application, such as a review
- a re-determination

1 SS Act 2018, s50 (Decisions comprising determination)

People have challenge rights if they are unhappy with the determination we make. These rights include:

- Requesting a re-determination
- Appealing to the tribunal.

Making determinations

You must make a determination on applications and when carrying out reviews and re-determinations.

The determination always includes a decision about:

- whether the individual meets the eligibility criteria for Pension Age Disability Payment (PADP)

If they do, a determination also includes a decision about:

- what rate of PADP the individual is entitled to
- when their entitlement begins
- whether there will be a scheduled review in the future, and when this will be

You must make determinations:

- in a timely manner
- based on relevant information and decision-making principles

- without including irrelevant information, such as informal observations, in your decision-making
- without gathering more information than is necessary to make a determination

Related reading

- Applying for PADP chapter
- PADP - Eligibility - Rates and criteria chapter
- Choosing an Appropriate review period chapter
- Residence and presence chapter
- Re-determinations chapter
- First-tier Tribunal chapter
- Upper Tribunal chapter

Findings of fact and conclusions of law

The decision-making process for determining entitlement to PADP involves making a series of smaller decisions. These allow you to make a decision on an individual's entitlement.

These smaller decisions are either:

- a finding of fact
- a conclusion of law

A finding of fact means deciding that a detail relevant to an individual's application, such as how their disability affects them, is accurate. This is done based on the information you have available. You may need to use decision-making tools to help you do this if there is not enough information or where you are identify a relevant inconsistency.

A conclusion of law means applying the eligibility criteria for PADP to the facts you have established. This is done to determine the appropriate level of entitlement.

Getting determinations right

All our decisions should follow the principles set out in the Scottish Government guidance “Right First Time – A practical guidance for public authorities in Scotland to decision-making and the law”.

Additionally, all our decisions have to meet the standards required of administrative decision making. Tribunals are unlikely to overturn decisions that are in line with these standards.

All our decisions should also reflect the principles set out in the Social Security Scotland Charter and the Social Security (Scotland) Act 2018¹.

1 SS (Scotland) Act 2018, s1.

The standards of a good decision

Decisions must be:

- lawful
- reasonable and rational
- made following a fair procedure
- without influence of conscious or unconscious bias
- compatible with the individual’s existing rights.

Lawful decisions

You must make sure that you fully understand the PADP rules and know how to interpret and apply them. These rules, as well as their correct interpretation, are set out in the decision-making guidance.

If you are unsure how to follow a rule, you should always use the decision-making guidance, speak to your team leader, or request a case query with the Decision Support Team.

How the rules are interpreted and applied might change due to case law. This can happen when an individual appeals a determination we have made to the Tribunal.

The decision-making guidance will be updated to reflect any changes brought about by case law. If you do not follow this updated guidance, the determinations you make will be unlawful.

Reasonable and rational decisions

Decisions must

- be based on *all* relevant information and
- not be based on information that is irrelevant.

Any information that relates to the case at hand is potentially relevant. Therefore, you should never pre-judge the relevance of a piece of information, for instance, based on its source alone. For example, you shouldn't disregard a piece of additional supporting information just because it has been produced by a member of the individual's wider support network, rather than by a professional.

In order to ascertain whether the information at hand is relevant, you should always review the information provided and refer to the guidance to establish the value of the piece of supporting information.

An example of a decision that is based on irrelevant information would be a case manager making a conclusion on the individual's ability to dress themselves based on facts that relate to how well the individual communicates.

Another example would be a case manager making a conclusion based on facts that come from an outdated medical report relating to a time when the individual's care needs were different.

Determining if a piece of information is relevant is different to identifying a relevant inconsistency. You should refer to the Understanding and Interpreting Information Decision Making Guidance chapter for more information on identifying relevant inconsistencies and next steps.

Related reading

- How to choose the right decision-making tool
- How to make a robust determination of entitlement
- Social Security Scotland Charter

Decisions that are made following a fair procedure

Decisions must be made following a fair process. Following the decision making guidance and operational guidance every time ensures that all individuals are treated in the same way and that our decisions are consistent. You can only decide two cases differently if there is a rational justification for this outcome.

However, this does not mean that all individuals with the same condition should be given the same award. We take a person-centred and needs-based approach.

Decisions must also be taken impartially, meaning that you should not be biased in your decision-making. Even if there is no actual bias, decisions should not have an appearance of bias as it would undermine the credibility of Social Security Scotland.

Bias can play into a determination in different ways. For example:

- you might know the individual whose application you process personally, which is a conflict of interest because it could appear that you cannot make an objective decision – regardless of whether you think you can or not.

- you might have unconscious bias towards the individual, based on, e.g. their disability, the fact they have children, their perceived sexual orientation, etc.

You must make it known if you encounter a case where there is a conflict of interest. If there is a conflict, you cannot be involved in processing the case.

Decisions made without unconscious bias

Everyone has unconscious biases. These are judgments or assumptions we make about people or situations without realising we're doing so.

Disabled people are frequently affected by non-disabled people's biases, and the assumptions they can lead them to make.

In your interactions with disabled people applying for, or receiving, our benefits, you must do your best to identify and counter these biases and assumptions.

Your own unconscious bias might lead you away from taking a trust-based approach and making accurate and informed decisions. You might not be immediately aware you're doing this.

Inaccurate assumptions might arise from:

- prejudice against disabled people or people applying for benefits
- stereotypes about people with particular characteristics
- thinking you understand a disability because you know someone with the same condition
- the fact an individual isn't at home when you phone to speak to them
- the way an individual communicates

You must always do your best to:

- recognise when you might be making assumptions
- actively challenge your own biases, and the biases that exist in society in general

Related reading

- [Unconscious bias: Imperial College London](#) (resource)
- Series of modules under the '[Civil Service Expectations](#)': series of modules on the Civil Service Learning Platform to counteract unconscious bias in your beliefs and actions.

Decisions that are compatible with individual's existing rights

Individuals have certain legal rights which existed before the law on entitlement to PADP was created. For example, the rights provided by the European Convention on Human Rights.

This decision-making guidance, and the law on PADP has been designed to respect these existing legal rights. To make sure that you protect an individual's legal rights you must follow the decision-making guidance, the operational guidance and the guidance on processing personal information in accordance with the UK GDPR.

Unreasonable and irrational decisions

Even if you consider both:

- all the relevant information
- no irrelevant information

decisions can still be unreasonable and irrational.

This is the case if the decision you have made is one that no-one acting reasonably could make based on the circumstances of that case. You have to justify all your decisions with reasons which clearly and logically explain how you reached that decision.

Sometimes this reasoning can show a misunderstanding of the relevant rules. In this case, the decision would not be reasonable. This is true even if someone could apply the rules correctly and reach the same outcome.

Since the reasoning would not be clear and logical, the decision is out of step with the principles of decision-making.

For example, a case manager decides that an individual is entitled to the higher rate of PADP as they satisfy both the daytime and night-time condition. In the notice of determination they state that their decision about the individual meeting the daytime condition is based on the fact that the individual needs assistance with bodily functions, such as bathing and eating, during the day. They further explain that the individual satisfies the night-time condition because they need repeated attention every night for a few hours after going to bed in order to settle and fall asleep. Once they are asleep, their partner gets ready for bed as part of their ordinary domestic routine. The decision would not be reasonable because the case manager has wrongly applied the rules. The fact that the individual requires repeated attention to settle at night should have been considered as part of their daytime needs. This is because the household shuts down after they have fallen asleep.

The reasoning you set out in the decision report for the individual should give them confidence that you have:

- applied the correct rules to the facts of the case
- taken all relevant factors into account
- not taken any irrelevant factors into account.

Why are good decisions important?

We are aiming to get all our decisions right first time.

Making appropriate and correct decisions means that:

- disabled people receive the right support from first decision, without having to challenge our decision
- we don't have to review decisions through the re-determinations and appeals process, which saves time and resources for both disabled people and Social Security Scotland
- disabled people's trust in our core principles – dignity, fairness, and respect – will grow stronger over time
- we can reach some of the most vulnerable people in Scotland and reduce stigma.

Making a robust determination of entitlement

This section covers the cognitive aspect of the decision-making process. The process of making a determination consists of:

- finding of facts
- making conclusions of law

A robust determination of entitlement means that you have enough relevant information to, on the balance of probabilities, establish the facts of the case at hand and make a conclusion of law.

This information can come from:

- the application or review form
- any supporting information available
- any decision-making tools you used

It also means that you have made the determination based on the standards for good decisions set out in this chapter.

Related reading

- The balance of probabilities
- Finding of fact and conclusions of law
- Decision-making tools
- Getting determinations right
- Making robust decisions – example section

What to consider when making a determination of entitlement

You must consider all of the relevant information on the individual's circumstances that is available to you in order to establish facts.

This could include:

- the application or review form
- any supporting information, if available, including confirmation from a professional and the statement of support
- information gathered through using decision-making tools, where necessary.

Decision-making tools include:

- any information recorded from follow-up phone calls with the individual
- additional supporting information from a professional and/ or the individual's wider support network
- decision-making and medical guidance
- advice received through a case discussion

Related reading

- Decision-making tools
- Establishing if information is relevant
- Types of information not to consider
- Supporting Information chapter

Applications without relevant confirmation from a professional

For applications that have been submitted without any, or without relevant, confirmation from a professional (including the statement of support completed by a professional) you will have to establish whether you're able to broadly establish a holistic picture of the client's circumstances based on the information you have and can make a robust decision on the balance of probabilities.

Refer to the decision tree in the Supporting Information to understand what steps to take.

You should only request, or gather, confirmation from a professional if there are significant inconsistencies that prevent you from being able to make a robust determination.

If you are unsure whether you can make a robust decision, you should

- Use decision-making tools
- Refer to the Making robust decisions – example section in this chapter

Once you have either

- Established good cause for the confirmation from a professional not being available
- Received confirmation from a professional

you should move on to establishing the individual's entitlement.

Establishing if information is relevant

During case familiarisation you might conclude that some information is not relevant. You should not use the irrelevant information to establish the facts of that case.

Information might not be relevant if, for example:

- it describes the prognosis, symptoms or impact of a condition in relation to people in general when you've already established the individual experiences the condition differently
- it covers a period of time that is not relevant to the individual's application or review
- it was provided by a person, or organisation, who is unlikely to be familiar with the individual, their conditions, disability or needs
- you've found inconsistencies in the information provided and established that it's more likely than not that one or more pieces of information is inaccurate or untrue.

For example, the individual's description could differ from the GP's account of their symptoms. The individual could state that their symptoms have got worse recently. As their GP last saw them 6 months ago, you establish that it is more likely than not the GP is describing the individual's symptoms before the recent change.

Read more about establishing relevance and quality of supporting information.

The balance of probabilities

All determinations are made on the balance of probabilities. This means that if something is more likely than not, it's considered a fact for the purposes of decision-making.

We're not looking to be satisfied that any information is true 'beyond reasonable doubt' – that is a higher degree of certainty used in criminal justice decision making.

When considering any information, we start from a position of trust. Where information conflicts, and this inconsistency is relevant, you should consider the value of each piece of information and decide which is more likely to be accurate.

Making decisions on the balance of probabilities

You must establish the facts of a case on the balance of probabilities for:

- every decision that forms part of a determination of entitlement
- the determination of entitlement

You must consider all the relevant information you have when making decisions on the balance of probabilities.

If you have to consider contradictory information, you must decide which account is more likely than not to be accurate.

We always start from a position of trust. Trust in what the individual has told us should be the baseline assumption during the decision-making process. However, this trust is not absolute. If there are details which suggest that information is more likely than not to be untrue, you should explore these inconsistencies and may decide that the information is not an accurate reflection of the facts. There could also be information from the individual which is so inaccurate it suggests it may be intentionally misleading. See 'enabling people to access assistance' for what to do in these circumstances.

Similarly, the balance of probabilities does not mean that the individual must be given the benefit of the doubt if there is not enough information to establish the facts of the case. In this case, you would need more information.

Decisions which are straightforward

In some cases making decisions on the balance of probabilities will feel easy. This could be because:

- there is a lot of available information
- the pieces of information are consistent with one another
- the individual's circumstances are very straightforward

For example, you could have a case where an individual:

- has severe depression that impacts on their care needs throughout the day
- sets out in their application that they require frequent prompting at every mealtime to eat and get help to wash and dress due to struggling with their energy levels
- details that their symptoms impact their ability to communicate independently, meaning they require frequent support, including through someone speaking on their behalf and encouraging/prompting them to speak
- is taking medication that has known side effects that can impact appetite and energy levels
- sets out that they do not have any night-time needs

As the information provided is more closely related to attention with bodily functions rather than continual supervision, and the individual does not have night-time needs, you would be able to answer the question 'is it more likely than not that this individual requires frequent attention throughout the day in connection with their bodily functions' easily in order to make a determination in alignment with the decision making guidance that the individual is entitled to the lower rate of PADP through satisfying the daytime condition.

Decisions which are complex

In some cases making entitlement decisions on the balance of probabilities will be more difficult. This could be because:

- some information is missing
- there are inconsistencies
- the individual's circumstances are very complex

If this is the case, you'll need to establish on the balance of probabilities which information is more likely to be true in order to:

- resolve relevant inconsistencies
- close existing gaps that are relevant to establishing the individual's entitlement

To do this, you'll need to:

- carefully establish value between the information available
- use your judgement

If more information is needed

In some cases, you may need more information to make a decision on the balance of probabilities. This could be because:

- there are relevant gaps in the information
- there are relevant inconsistencies in the information
- the individual's circumstances are very complex

By relevant we mean that if the information that is the source of the inconsistency was taken as fact, it would impact the individual's entitlement. For example, exploring the gap or inconsistency would enable a decision as to whether the individual satisfies the

- daytime condition, or whether their needs are not significant enough to be entitled to PADP (i.e. entitlement to lower rate PADP v no entitlement)
- daytime condition, where you have already established that they satisfy the night-time condition (i.e. entitlement to higher rate PADP v entitlement to lower rate PADP)
- night-time condition, where you have already established that they satisfy the daytime condition (i.e. entitlement to higher rate PADP v entitlement to lower rate PADP).

All other gaps and small inconsistencies are unlikely to be relevant and do not need to be explored. For example, you have established the facts that an individual requires assistance to wash and dress themselves, as well as support with toileting and eating. The individual requires support with most areas of their daily needs due to their disability, including support to sit upright in the bath, dressing their lower half and with getting to and from the toilet. They often need additional bathing and change of clothing due to having accidents. The individual also receives support with cutting their food and regular prompting to eat at every mealtime.

There is some indication in the information they have provided that they might need assistance with communicating with others, but this is too vague for you to understand whether that's indeed the case. This gap is not relevant, as the individual needing or not needing assistance to communicate would not change their level of entitlement. This is because they already satisfy the daytime condition due to their needs regarding washing and dressing.

If the existing gaps and inconsistencies are relevant, you must explore them by using one or more decision-making tools. This could include contacting the individual, where appropriate, or their representative with follow-up questions.

If the information needed cannot be gathered, you must use whatever information is available to make a decision based on the balance of probabilities whether the individual meets the eligibility criteria for the care component. If there is not enough information to conclude that the individual has any needs that relate to the criteria, you should make the decision that they don't meet the relevant criterion.

If you are unsure whether you have enough information to make that decision, you should request a case discussion or speak to your team leader.

Related reading

- Decision-making tools
- Making robust decisions – example section
- Supporting Information chapter
- Understanding and Interpreting Information

Types of information not to consider

There are some types of information which should never be considered. This is to ensure that we make fair and robust decisions in line with our principles.

These types of information include:

- informal observations
- assumptions about individuals, their credibility and needs based on biases

Informal observations

The UK Government's disability benefits system uses 'informal observations' during the decision making process. These can be gathered at Personal Independence Payment assessments in addition to the information gathered from

- the individual's answers to the assessment questions
- how the individual carries out the functional parts of the assessment.

Informal observations made during Personal Independence Payment assessments could include the assessors opinion on:

- how well or unwell the individual appears
- the individual's weight
- how the individual makes their way into the assessment room

In our Scottish disability benefits system, informal observations must never be part of:

- establishing the facts of a case
- making decisions that form part of a determination of entitlement

This is because informal observations rely on uninformed and untested assumptions that do not comply with our core principles of treating people with:

- dignity
- fairness
- respect

You must never use informal observations, for example:

- noting how an individual is able to sit down, stand up or perform movements that require co-ordination, such as lifting a cup to their mouth to drink, during a home visit from local delivery staff to fill in an application form for PADP
- noting how an individual speaks on the phone, such as how energetic or positive they sound, and allow that to influence your trust in the individual's account of their mental health condition

- noting that an individual who told us that they rarely leave the house due to severe anxiety appears to be or is out when answering your phone call
- seeing how well an application form has been filled in by an individual who is dyslexic
- assuming that an individual is less deserving of receiving disability assistance, or does not need it, based on how reliable or responsive they appear to be when you are trying to reach out to them for more information.

Instead, you should use relevant information, such as

- the application/ review form
- any supporting information, if available
- any relevant information from decision-making tools (e.g. guidance, case discussions)

to establish an individual's entitlement. Refer to the Making a robust determination of entitlement section for more information.

Decision-making tools

Decision-making tools can help you reach a fair and robust determination of entitlement.

Before deciding

- whether decision-making tool(s) are needed to help you make the correct determination
- which decision-making tool(s) is the most likely to provide you with the information you need

you need to familiarise yourself with the case at hand.

Case familiarisation

Case familiarisation is mandatory and should be completed at the beginning of each decision-making process.

It helps you to identify and understand relevant information that has been provided, such as:

- the application or review form
- available supporting information, including the 'statement from someone that knows you' in the application form, which counts as supporting information
- information from previous determinations made in relation to the individual's entitlement, where applicable

Case familiarisation also helps you to understand if you need more information about the individual's needs. Note that where it has not been provided you will only need to gather or request confirmation from a professional in some cases. Refer to the Supporting Information chapter and the Relevant Considerations chapter for guidance.

To gather all the relevant facts and make the correct determination, you may have to:

- use several decision-making tools
- return to a tool that you have used earlier in the process

Additional supporting information should only be requested from the individual if it would not be possible to make a determination without it.

The decision-making tools available to you are:

- Decision-Making Guidance
- contacting the individual or their representative with follow-up questions

- case discussion
- medical guidance
- colleague support
- supporting information

There is no hierarchy in importance between decision-making tools. You need to determine on a case-by-case basis which one or several of these tools is best. To make this decision, you need to consider the following:

- which tool is most likely to provide you with the information you need to make a determination of entitlement
- is the tool in question appropriate? For example, if the individual has told us they do not want to receive phone calls, you should not phone them with follow-up questions.
- Will the use of the tool significantly delay the decision-making process? For example, requesting additional supporting information might add another few weeks to the time it takes to process someone's application.

Decision-making guidance

The decision-making guidance (DMG) interprets and explains our policy. It is our single source of truth when it comes to policy and its interpretation. It sets out the principles you should follow to make decisions. Reviewing relevant chapters of the Decision-Making Guidance is essential during the decision-making process.

You can see an overview of the different Decision-Making Guidance chapters for PADP on IKM.

The decision-making guidance is a living document which is updated regularly. You therefore should use IKM to access this guidance. You can save IKM pages in your Favourites in your browser.

You should never save versions of the decision-making guidance locally or create your own guidance. This is because over time local versions would diverge from the most up-to-date version of the decision-making guidance and could lead to wrong decisions.

If you discover gaps, inconsistencies, or errors in the decision-making guidance, you can use the feedback function on IKM to make sure these issues are being addressed. You can find the feedback form on the right-hand side on the landing page for the PADP Decision-Making Guidance. Alternatively, you find the feedback function by scrolling to the bottom of the individual chapter pages.

Contacting the individual or their representative with follow-up questions

The information provided in the following might be unclear or insufficient to make a determination:

- supporting information
- the application or review form

In this instance, you can contact the individual or their representative by telephone to ask follow-up questions on the information they have provided.

When speaking to the individual to ask follow-up questions, you must make sure that your conversation does not become, or feel to the individual like, a consultation. Consultations are only available for Adult Disability Payment.

You should be aware that supporting information is not written by the individual, but either by:

- a professional
- someone from their wider support network

The individual might not be able to provide answers on supporting information, particularly if we've gathered it on their behalf. In these instances, it might be best for you to contact the information provider with follow-up questions, if possible.

Case discussion

You can request clinical-based advice during a case discussion with a practitioner if you're:

- unsure of how to progress a case
- unable to make a determination

You can request a 'case query', which is a case discussion with our Decision Support Team. If necessary, they will liaise with Scottish Government policy or legal colleagues for advice.

Medical guidance

You can use medical guidance to help you understand:

- the impact a health condition or disability might have on the individual's needs
- typical symptoms or prognosis of a health condition
- the impact treatment might have on the individual's needs

We use the following sources of medical guidance:

[A to Z list of common illnesses and conditions | NHS inform](#) ;

[Health A to Z - NHS \(www.nhs.uk\)](#) ; [Scottish health information you can trust | NHS inform](#)

The operational guidance provides more information on when and how you can seek:

- medical guidance
- advice from practitioners

Colleague support

Colleague support can come from your line manager or other team leaders. You should use this tool to discuss and share knowledge around processes and systems.

For example, you could use it to find out whether, in general, supporting information provided by professionals based outside Scotland is accepted by us.

Colleague support is an informal decision-making tool. You cannot use it to justify a determination or decision.

For example, you could not use it to ask a decision team leader for their view on information provided by the individual. This applies to all information in an application or review form and supporting information.

Additional supporting information

Additional supporting information can come from a professional or the individual's wider support network.

Requesting additional supporting information should not be used as the default decision-making tool. Rather, it should only be used if you've established that it is the most appropriate tool in the scenario at hand.

If the individual has provided additional supporting information with their application (for example by having someone fill in the 'statement from someone that knows you' section) or review form, you must consider it during the decision-making process, even if the application or review form provides enough detail to make a determination.

Making robust decisions – example section

Example: A case manager can make a robust decision without confirmation from a professional

Esther is 79 years old and lives alone. She has always been in good health and active for her age but over the last two years she has experienced a decline in her independence.

Esther's daughter supports her with her care needs around her work schedule. Esther's neighbours check in on her on a regular basis and help her with small chores around the house. Her neighbour suggests that she should apply for PADP.

In her application form, Esther explains that she contracted Covid about 2 years ago and has not managed to fully regain her fitness and strength since. Esther can become breathless very easily from minimal activity and needs attention from another person in relation to her bodily functions.

Esther needs help to bathe and dress herself. This is because doing so can leave her breathless. When this happens, it can take between 5 to 10 minutes to recover. Esther would be unable to bathe or dress herself without this attention because she would have to take multiple breaks to recover from her breathlessness. Esther similarly requires support getting to and from the toilet and requires attention with managing cleanliness. She also used to change incontinence pads independently, but she now requires support with this task.

Due to Esther's exhaustion and lack of strength, she is unable to eat independently. She isn't able to grip cutlery effectively and struggles with getting food to her mouth. Esther requires someone else to help her with taking nutrition, and also needs prompting to encourage her as she often becomes upset and frustrated when trying to eat.

Esther also reports that she has had a number falls over the past two years. Most of these have occurred at home. Once she slipped in the bath and hurt her right wrist when trying to stop her fall. Whilst she did not break the wrist, it has felt painful and stiff ever since. Esther has had handrails installed in her bathroom to prevent further falls, which she now uses for additional stability when her daughter assists with washing and bathing. The case manager considers this to be a reasonable aid to reduce the need for supervision with falls, but not practicable in relation to Esther's need for attention when washing and bathing due to her breathlessness and exhaustion.

Esther doesn't report any night-time needs.

Esther does not take any medication and has not been to see her GP since her covid infection. She does not provide confirmation from a professional and the statement of support section has been left blank.

The case manager reviews Esther's application.

From the information provided, they establish that Esther has symptoms of Long Covid and in combination with frailty, as commonly associated with someone of Esther's age, requires assistance with a number of bodily functions, such as:

- moving around indoors
- eating, drinking and taking nutrition
- washing, bathing and personal hygiene
- continence and use of toilet

There are no significant inconsistencies in Esther's application. The case manager therefore establishes good cause and proceeds to making a determination without requiring confirmation from a professional.

They establish that Esther has satisfied the daytime condition and is entitled to the lower rate of PADP as she requires frequent attention with her bodily functions throughout the day. As Esther is more likely than not to experience increased symptoms as she ages, her care needs are highly unlikely to decrease. However, it is reasonably likely that she will develop night-time needs as well in the future. Therefore, the case manager thinks that an indefinite award is not appropriate for Esther. They set a review period of 5 years.

Example: An individual doesn't provide enough detail to make a determination

Sandy (aged 68) applies for Pension Age Disability Payment due to a mental health condition. They do not provide any supporting information with their application, including their statement of support having been left blank. Sandy doesn't name a particular condition but states they have mental health problems, that regularly cause them to struggle with motivation and low energy. The application form doesn't provide a lot of detail on Sandy's needs, other than Sandy explaining that they regularly don't manage to prepare food or get dressed and end up missing meals and wear the same clothes for days and nights on end. They also provide the name of their medications on their application form, which includes Duloxetine, an anti-depressant but do not mention the dosage they've been prescribed.

The case manager establishes that being prescribed this medication for depression is consistent with Sandy's account of their mental health. They therefore apply good cause and go directly on to establishing the Sandy's level of needs.

Sandy describes having difficulty with taking care of themselves and experiencing fluctuations in how they are impacted by their condition. However, the application, including the information on Sandy's medication, is lacking in details about how significant this impact is, and whether these needs are limited to the day, or also occur throughout the night. The case manager needs further information before they can make a determination on Sandy's entitlement. The case manager decides to contact Sandy with follow-up questions.

On the phone, Sandy seems hesitant to talk about their needs and whether or not these also include night-time needs. They tell the case manager that they are mostly fine and only struggle sometimes when they are not in a good place.

The case manager concludes that the phone call has not provided the answers they need to establish Sandy's level of need. Furthermore, the information that Sandy did provide was inconsistent with the level of needs suggested by their application form and medication. The case manager is aware that individuals can struggle to talk about their conditions and needs. They also take into consideration that Sandy might currently be experiencing a period of depression and might therefore not be able to engage with them about their application. Therefore, they conclude that it is more likely than not that there is a reasonable explanation for this inconsistency. However, they still require more detail to make a determination. They decide that additional supporting information would be the best decision-making tool to fill the gaps in Sandy's application.

The case manager asks whether Sandy might have someone from their wider support network who could provide additional supporting information. Sandy confirms that their brother keeps an eye on them and that they see him every day. Sandy is happy to give their brother's contact details so he can provide additional supporting information.

The case manager sends a supporting information request to Sandy's brother. In his response, the brother explains that Sandy generally struggles a lot with depression and a mood disorder. Their mood can be very changeable and when feeling positive they tend to stop taking their medication and refuse support but these times are infrequent and short lived. He generally sees Sandy every day and visits in the morning and evening to provide reminders and encouragement with routine tasks such as attending to personal hygiene, taking medication and encouragement to eat. Sandy's brother regularly spends more than an hour each time he visits supporting Sandy with their needs, as he is aware that Sandy will not carry out such tasks without his support. Sandy also experiences insomnia at times but manages this independently and does not have any related care needs. When the brother is not able to provide support to Sandy, he explains that they tend to 'let things slide' and need additional support to get back into a routine again. This cycle has been going on for a long time.

With this additional supporting information the case manager is able to draw conclusions about Sandy's level of need. Although Sandy said that they are mostly fine and only struggle sometimes, the support provided by their brother suggests they experience the difficulties they describe more frequently. Their changeable mood and tendency to stop taking their medication or engage with the support available to them, suggests they may lack some insight into their condition. Their brother, who sees them regularly, is well placed to provide additional information.

The case manager now has the information they require to make a robust decision on Sandy's entitlement. They award Sandy the lower rate of Pension Age Disability Payment as they have satisfied the daytime condition through requiring frequent attention throughout the day in relation to their bodily functions.

Example: A decision is possible but difficult due to lack of information

In his application for Pension Age Disability Payment, Imran describes having poorly controlled asthma which causes him to become very out of breath. He explains that he uses an inhaler, a reliever, as medication to control his symptoms.

Imran provides a description of how his breathlessness affects him. He requires assistance with washing and dressing himself, as he experiences shortness of breath wheezing due to the mild exertion. Due to his shortness of breath, Imran becomes dizzy when washing and requires support to wash his hair and to get in and out of the bath. This has led to injuries in the past. Imran requires someone to watch him closely because of this. Due to his symptoms, Imran now has toileting accidents as he is unable to get to the toilet in time. This means his wife has to support him when he needs to move around the house and with his hygiene by supporting him with additional washing and bathing.

He also becomes breathless when moving around the house and has to pace himself or rest frequently. Imran also explains that he struggles with eating and drinking, as his condition can cause Imran to be unable to use cutlery at mealtimes due to the exhaustion from being out of breath. Imran generally needs support using cutlery at each mealtime.

His symptoms are frequently worse at night and early in the morning, when he often struggles to breathe, coughs a lot and also experiences tightness in his chest area. This can make it impossible for him to sleep through the night. Imran can also feel dizzy and drowsy in these moments.

Imran's wife has to ensure that he is propped up in bed, as he cannot breathe reasonably well when lying flat. If Imran slides down the bed, he can become more breathless. His wife also has to administer Imran's inhaler as he often becomes panicked at night. She then has to help Imran settle back to sleep due to how unsettled he can become. Imran sets out in his application form that this happens most nights of the week and takes at least half an hour for his wife to help him from the onset of symptoms.

Imran experiences acute asthma exacerbation regularly and describes that these attacks tend to come on suddenly. During these asthma attacks, his symptoms become worse and he struggles to breathe.

Imran does not provide confirmation from a professional with his application but provides his GP's contact details, who he has regular check-ups with.

Based on existing knowledge of Imran's condition, and medical guidance, the case manager identifies a significant inconsistency between the impact Imran has described on the one hand and the medication he takes and the fact that his condition is not being managed by a specialist on the other hand. With the information available, the case manager is unable to make a robust determination. Based on the balance of probabilities, the case manager concludes that it is more likely than not that Imran's needs are not consistent with someone who does not receive specialist input

They think that this inconsistency is significant, as

- there is conflicting information about the severity of Imran's needs. Individuals with poorly controlled asthma will typically use more effective medication and will have been referred to a specialist. As Imran is seen regularly for his condition, it is more likely than not that his GP would have prescribed medication that is appropriate for his symptoms and would have referred him.

The case manager therefore decides that confirmation from a professional is required. They send a supporting information request to Imran's GP.

The GP provides a short statement that confirms Imran's condition and lists his prescriptions. The GP explains that

- Imran's symptoms have only recently deteriorated
- He has recently been referred to a specialist but most likely is still waiting for his first appointment letter
- His medication is currently under review.

The confirmation did not include a detailed account on Imran's care needs. This is fine, as the role of confirmation from a professional is to broadly confirm the individual's disability, condition, or needs. As this piece of supporting information has resolved the inconsistency between severity of symptoms, medication, and clinical support, and Imran's condition and needs are straightforward, the case manager now has enough information to go ahead and

- establish the facts of the case
- make a conclusion of law

They determine that Imran is entitled to the higher rate of PADP, as he satisfies both the daytime and the night-time condition. Imran requires frequent attention throughout the day with his bodily functions, and prolonged attention in connection with his bodily functions at night. His new award rate will start being paid once he has met the backwards test. They set a review date of 18 months because they expect Imran to see a significant improvement in his symptoms once his condition is better controlled.

Example: A case manager establishes whether confirmation from a professional is needed and an inconsistency needs to be explored

James (aged 69) applies for PADP due to back pain which he has had since a bad cycling accident four years ago. He does not provide any confirmation from a professional or additional supporting information.

Although the hairline fracture caused to one of his vertebrae healed as expected, the pain in his back has only slightly improved in the years since. James also states that he has mechanical back pain and is prescribed co-codamol as required for pain. James was offered a referral to the pain management service two years ago but declined.

James describes that he needs assistance with a number of bodily functions during the day, including washing himself, dressing and undressing as well as managing his toilet needs and moving around indoors due to pain and stiffness in his back. He also states that his accident is having an impact on his mental health. James is often in pain and the impact the accident has had on his independence has left him with low self-esteem. James states he has felt depressed at times since his accident and that his partner needs to prompt him in relation to eating, drinking and communicating with others.

After case familiarisation, the case manager establishes there is an inconsistency in James' application: Based on the information provided, it is unclear what causes James' need for prompting and how significant the inconsistency is.

The case manager therefore goes on to establish whether or not this inconsistency is significant enough to prevent them from making a robust decision. They consult the Decision-Making Guidance chapters on supporting information and principles of decision-making. They determine that the inconsistency is not significant enough to prevent them from making a robust decision. This is because some of the needs James is describing clearly stem from his accident. Whilst not being a direct symptom of the accident, such as the pain in his back would be, it is reasonable to conclude that individuals experiencing sudden health and lifestyle changes may also experience mental health difficulties. The case manager determines that James' need for prompting is more likely than not to be related to his accident. They establish good cause and move on to establishing James' entitlement.

The case manager considers whether the existing inconsistencies in James' application are relevant, i.e. whether they would prevent them from establishing James' level of needs and therefore would have to be explored.

They establish that James requires assistance with several bodily functions during the day, caused by his accident. He therefore satisfies the daytime condition for PADP as he requires frequent attention throughout the day. His need for prompting would not impact on James' entitlement. Therefore the case manager decides that this inconsistency is not relevant and does not need to be explored further.

They award James the lower rate of PADP and set a review period of three years.