

Supporting Information, including the statement of support

This chapter describes the role of supporting information in Pension Age Disability Payment:

- applications
- scheduled and unscheduled reviews

It also sets out the general principles case managers must follow when

- determining whether (more) supporting information is required
- gathering supporting information, if needed.

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.”

In this chapter, the term ‘individual’ can refer to both the individual who is the recipient of the benefit and the person who is assisting with, or legally managing, an individual’s Pension Age Disability Payment application or award (e.g., their third-party representative or appointee). Where the guidance refers to contacting the individual, this could be their third-party representative or appointee. You should use the information provided on the application or review form to decide who would be the appropriate contact on a case-by-case basis.

This guidance uses the updated terms for the two types of supporting information. These are:

- confirmation from a professional (previously known as the one piece of supporting information from a professional)
- additional supporting information (previously known as supporting information from the client’s wider support network and additional supporting information from a professional)

These terms are explored in more detail in this chapter. When this guidance uses the term ‘supporting information,’ it is referring to both the confirmation from a professional and additional supporting information. Where you see the term ‘supporting information’ you should assume the guidance is referring to both types of supporting information unless otherwise stated. The statement of support, which is part of the PADP application form, can be either confirmation from a professional or additional supporting information. This depends on who has provided the statement.

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Our approach to information about an individual's needs

The approach you take when:

- understanding
- interpreting
- and gathering, where necessary

information about an individual's needs to establish their entitlement must align with the principles of dignity, fairness, and respect.

These principles are outlined in our Social Security Charter. You must apply our decision-making principles when making a decision on an individual's entitlement, based on the information you have available. These are set out in the Principles of Decision-Making chapter.

You must approach information with understanding and consideration of the following concepts:

- trust-based approach
- balance of probabilities.

These are set out in the Principles of Decision-Making chapter

Related reading

- [our charter](#)
- the role of supporting information in the decision-making process
- supporting information operational guidance
- Equal consideration

Can I make a robust decision with the information available? (includes the Decision Tree)

We ask all PADP applicants to provide confirmation from a professional. However, a number of PADP applications will be submitted without confirmation from a professional. In those cases, it will not always be necessary for you to either:

- request confirmation from a professional from the individual
- gather confirmation from a professional on behalf of the individual

In many cases you will be able to establish good cause and make a robust entitlement determination without confirmation from a professional. You can read more about the meaning of good cause in the context of PADP in this chapter's section on Good Cause.

This is because confirmation from a professional is less likely to be available to people applying for PADP, for example, because they have had their condition for a long time without any input from professionals. Good cause can therefore be established in a greater number of scenarios, allowing you to make a determination without requesting confirmation from a professional in every case.

This is possible if:

- you're able to broadly establish a holistic picture of the client's circumstances based on the information you have AND
- there are no significant inconsistencies

However, some applications will require a confirmation from a professional. You should request a confirmation from a professional where the following are met:

- the individual applies without a confirmation from a professional OR the confirmation from a professional is not relevant
- there are significant inconsistencies that prevent you from being able to get a broad sense of the person's circumstances and making a robust decision

A significant inconsistency refers to care needs that would not reasonably be expected or explained for an individual:

- with that condition
- of that age
- receiving the treatment detailed in the application form, for example the medication, physio or other therapies

The above points can also interact, and you should consider this when determining if something is expected or not. For example, an individual may:

- list care needs that are typically not associated with a condition but, due to their age, their needs could be reasonably expected

- list care needs that are sometimes associated with a condition, but the level of medication they take suggests their needs would be expected to be significantly less
- under report their needs, but the level of medication they take suggests their needs are higher

Significant inconsistencies can relate to needs that are both more or less than are expected.

There does not need to be a set number of inconsistencies and they do not need to be a certain 'size' to be significant.

When determining if an application contains significant inconsistencies, you should consider the following:

- whether you are familiar with the condition and the care needs associated with that condition
- consulting medical guidance to help you gain a better understanding of what the expected symptoms and care needs are likely to be for that condition
- the age of the individual and whether this will impact how they experience the condition
- whether, on the balance of probabilities, it is more likely than not that the individual has the care needs reported
- the relationship between symptoms reported and the care needs indicated. This includes determining whether the symptoms reported can reasonably be expected to result in the care needs indicated.

You are not expected to require the input of a practitioner in every case where you think there is a significant inconsistency. This guidance is to support you to determine whether a confirmation from a professional is required without additional input.

However, in cases where you are unsure if what you have identified is a significant inconsistency, you should request a case discussion with a practitioner. This will help you determine if a confirmation from a professional is required. For example, you may be unfamiliar with the condition, or an individual may apply with multiple conditions, and you are unsure how they interact.

To establish whether confirmation from a professional is needed to make a robust determination, you should use the decision tree below and read the signposted guidance sections.

When requesting a confirmation from a professional, you should make efforts to also gather information that would help you resolve the inconsistency. For example, when sending out a supporting information request, you should ask questions relating to the significant inconsistency in addition to request a confirmation to broadly confirm their disability, condition, or needs.

Example: An individual applies with no confirmation from a professional and the case manager establishes good cause

Harriet is aged 73 and has Stage 3 Heart Failure. On her application, she explains that she

- frequently experiences breathlessness, particularly after carrying out an activity such as moving around her home
- experiences extreme fatigue and can find moving around her home exhausting
- is often lightheaded
- has swollen ankles and legs.

Her application also indicates the following care needs:

- Assistance getting in and out of bed as she finds it difficult to get comfortable
- Must sleep with pillow propped as she becomes breathless when lying flat
- Spends most nights sleeping on a recliner chair which adds to her fatigue
- Requires help getting in and out of the bath (she does not have a separate shower) due to increased effort and how this impacts breathlessness
- Requires help washing and drying her bottom half due to worsening of breathlessness if doing this activity without support
- Spends most of the day sitting down and only gets up to use the toilet, which results in breathlessness and her needing rest afterwards due to the exertion

Harriet explains that she lives with her husband who provides most of the support when she gets experiences breathlessness or gets dizzy during the day and night.

She also lists the medications she takes for condition. These are:

- Ramipril 10mg
- Furosemide 40mg

However, Harriet has not provided a confirmation from a professional with her application. The case manager moves on to establishing good cause by first reviewing the application for any significant inconsistencies that would prevent them from making a robust decision.

The case manager consults medical guidance to get a better understanding of the expected symptoms and needs associated with heart failure. By accessing the guidance, the case manager is able to establish that individuals with heart failure will experience breathlessness and extreme fatigue and will be prescribed medication similar to those listed by Harriet. The case manager concludes that what Harriet has indicated on her application form is broadly consistent with what would be expected for Stage 3 Heart Failure.

The case manager establishes good cause for why Harriet does not have a confirmation from a professional and moves on to establishing her care needs and entitlement.

Using the information Harriet has supplied in her application, and what they have learnt from medical guidance, the case manager establishes that:

- Harriet has a long-term health condition that although treated with medications, cannot be cured
- As her condition is Stage 3, her symptoms of breathlessness and fatigue are unlikely to improve
- Her breathlessness and fatigue make it difficult for her to be comfortable completing tasks that involve even minor activity, and that activity is likely to worsen her symptoms
- These symptoms consistently impact her daytime care needs with washing and dressing and mobilising around the home
- These symptoms also mean she has nighttime care needs relating to preparing for bed and quality of rest as she struggles to get comfortable as a result of breathlessness.
- Her husband checks on her frequently during the night to assist her to the toilet due to her light-headedness and previous falls.

The case manager makes a decision that Harriet is entitled to the higher rate of PADP as she has care needs during both the day and night that require significant support of another to manage.

Example: An individual applies without a confirmation from a professional and the case manager requires support from a practitioner to establish good cause

Tommy is 69 and applies for PADP with obesity. He applies without a confirmation from professional but provides the following details on his application form:

- That he has a BMI of 54
- His symptoms include breathiness after activity or at rest, feeling tired the majority of the time (made worse when moving around the home), joint pain, sleep apnoea, and incontinence
- His daughter lives with him to provide support
- That he is prescribed Orlistat 120mg to take 3 time a day

Tommy explains that he has the following care needs:

- Requires assistance getting in and out of bed due to increased breathlessness and joint pain
- Has a CPAP machine to aid with breathing through the night. That he has to be assisted back into the mask when it disconnects, which happens 2-3 times per night
- He sleeps with pillows propped as he is breathless when lying flat
- Requires assistance getting washed and dressed. He has a shower over the bath that he needs help getting in and out of due to joint pain and breathlessness. Due to these symptoms, he also cannot dry or dress his bottom half without help.
- Relies on furniture to walk around the home due to his breathlessness and joint pain.

As Tommy has applied without a confirmation from a professional, the case manager needs to decide whether they can establish good cause.

Although the case manager is familiar with obesity as a condition, they are unfamiliar with what care needs would reasonably be expected of someone with a BMI of 54. They consult medical guidance, but this provides them with a variety of symptoms associated with obesity and they feel uncertain whether the level of BMI impacts what symptoms and needs and individual has. The case manager is unsure whether what Tommy reports are his needs are what would expected be expected of someone with a BMI of 54. As the case manager is unable to say whether the application is more likely than not to be consistent with someone of Tommy's circumstances, they request a case discussion from a practitioner.

This also means that they have not yet applied good cause to Tommy's application.

In the response to the case discussion, the practitioner provides the following information:

- The Body Mass Index (BMI) serves as a measure to determine whether someone falls within a healthy weight range. A BMI of 40 or higher indicates severe obesity.
- Common symptoms associated with severe obesity include breathlessness, increased sweating, snoring, difficulty with physical activities tiredness, and joint and back pain.
- In the case of the client, their BMI of 54 aligns with the severely obese range.
- Additionally, they report experiencing challenges with dressing, washing, and mobilising around the home due to joint pain and breathlessness, which is consistent with the indicated condition.

With the outcome of the case discussion, the case manager is now satisfied that the needs Tommy detailed in his application form are consistent with those of someone with his condition and of his age. The case manager establishes good cause and moves on to establishing Tommy's needs and entitlement.

They establish that Tommy has the following needs:

- Requires help morning and night to get in and out of bed
- Needs frequent monitoring during the night due to treatment for his condition
- Has aids to help him move around his home
- Needs help getting washed and dressed

The case manager determines that Tommy is entitled to the higher rate of PADP as he has care needs that satisfy both the daytime and night-time condition.

Example: An individual applies without a confirmation from a professional and determines that there are significant inconsistencies that require a confirmation

Marcel is 75 and has long covid. He does not provide a confirmation form a professional with his application, but he does explain in his application that he is experiencing the following symptoms:

- Breathlessness after activity, like moving around the home, and during rest
- Fatigue for a lot of the time and finding moving around the home tiring
- Joint pain in their knees

- Dizziness
- Brain fog
- Collapses and loses consciousness 4-5 times per week with no explanation

As a result of these symptoms, Marcel reports the following care needs on his application:

- Requires assistance getting in and out of bed, as he finds it difficult due to breathlessness and joint pain
- Sleeps with pillows propped to alleviate breathlessness
- Needs help to get in and out of bath (has shower over bath)
- Requires help drying and dressing his bottom half as bending causes breathlessness and light-headedness
- Relies on furniture to walk around the home due to difficult walking with breathlessness and joint pain
- Need supervision at all times due to sudden loss of consciousness and dizziness.

He explains he lives with his wife who provides support where needed.

The case manager is aware of the symptoms associated with long covid but knows that this is a new condition and that the needs can vary from person to person, as well as the period of time for which they are impacted. Whilst the case manager determines that most of what Marcel reports in regard to his needs are consistent with what would be expected of someone with long covid, requiring supervision due to loss of consciousness is not typically associated with long covid and is a significant inconsistency

The case manager does not establish good cause and decides to collect a confirmation from a professional that can also resolve the identified inconsistencies in Marcel's application.

As Marcel did not provide contact details for a professional the case manager contacts Marcel for the supporting information. Marcel agrees to submit an outpatients letter from a hospital visit with his consultant from last month.

The letter provides a summary of the visit, in which it confirms that:

- Marcel is receiving treatment and further testing in relation long covid (further blood test, checking blood pressure and heart rate, chest x-ray, ECG)
- They are also carrying out further cardiac and neurological investigations in relation to his loss of consciousness to rule out any physical cause
- The letter concludes that they have had initial discussions with Marcel about preparing him for the possibility that loss of consciousness is a rare side effect of long covid, potentially with no cure.
- Marcel has been referred to the long covid service for support while awaiting further investigations.

Using the information provided by Marcel, the case manager is able to confirm his diagnosis of long covid and resolve the inconsistency relating to Marcel's loss of consciousness. The case manager moves to establishing his needs and entitlement.

The case manager determines that Marcel is entitled to the higher rate of PADP as he has both daytime and nighttime care needs. These are in relation to needing help getting washed and dressed, preparing for bed, and needing constant supervision in case of loss of consciousness and dizziness.

What is supporting information?

Supporting information is information from:

- professionals
- the individual's wider support network

It's added to the information provided by the individual in their application or review form. Additionally, it can be provided in the form of the statement of support, which is part of the PADP application form.

The statement of support can be completed by either a professional or the individual's wider support network and is considered supporting information. It can be used as a confirmation from a professional or additional supporting information, dependent on the information it provides and criteria it meets as explored in this chapter.

The application or review form should always be the main source of information that you use to determine entitlement to disability assistance.

There are two types of supporting information:

- confirmation from a professional
- additional supporting information

A confirmation from a professional can only come from a professional. The key role of this type of supporting information is to broadly confirm the individual's conditions, disabilities, or needs. It is likely that confirmation from a professional will provide little to no detail on how the individual is impacted by their condition or disability in their life and what their needs are.

Additional supporting information can come from the client's wider support network or a professional. Its purpose is to help you establish the individual's level of need and entitlement. It adds detail to the application or review form by describing the individual's needs on a day-to-day basis.

Additional supporting information is just one decision-making tool available to you to help understand a case and make a determination. If you do need more information to make a decision, you should consider which tool would best provide this information. Additional supporting information will not always be the best tool to establish an individual's entitlement.

For example, a follow-up call to the individual or a case discussion may be the easiest way to get further clarification rather than asking a professional or their wider support network.

For example, supporting information may provide details on:

- a diagnosis

- a treatment being received, such as medication or physiotherapy
- how an individual's condition or disability impacts their life
- steps taken 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 work, in a club they attend, carrying out their interests/hobbies, or when attending social events, although this information is more likely to be found in additional supporting information.

The role of supporting information in the decision-making process

Supporting information, where available, should be used to support an individual's application or review. It should not be used to "evidence" or "prove" every detail of what the individual has described.

Where an individual has not provided supporting information with their application, we will not automatically request it. Here, it is your responsibility to decide whether supporting information is needed for that particular determination.

However, where an individual provides supporting information with their application, it should always be considered in your decision-making process.

You are legally obligated to consider all relevant information in your decision-making process.

This applies to both the supporting information used as the confirmation from a professional or additional supporting information.

If supporting information has been provided, you will have to consider it. This is also the case if you already have enough detail to establish the individual's needs, for example from their application form.

Possible formats

Supporting information can be:

- documentary
- written
- verbal
- photographic or video

Documentary

Documentary supporting information is from professional sources. It consists of official documents that were not necessarily produced to support the individual's application or review.

For example, a:

- report from a specialist doctor based on their interaction with the individual and medical records
- prescription list of the individual's medications

Written

Written supporting information is a statement written for the purpose of supporting the individual's PADP application, rather than a pre-existing official document.

For example, a statement from a relative of the individual about the impact of their disability on their day-to-day life. Another example is the statement of support in the PADP application form, filled in by someone who knows them, which can include professionals.

We can provide supporting information request forms to professionals and members of the individual's wider support network, should you conclude that more supporting information is needed to make a robust determination. These have questions to help them give us necessary information.

Verbal

Verbal supporting information is taken directly from relevant sources.

For example, information provided over the phone by the individual's wider support network about the impact of the individual's condition.

Photographic or video

Pictures that have been taken by a medical professional as part of treatment or diagnosis, such as X-ray pictures, can be accepted as supporting information.

Individuals might also submit photographs or videos of their conditions. For example, a photograph of themselves in a wheelchair.

However, individuals are encouraged not to submit images or videos in support of an application.

Likewise, a case manager must not ask the individual or the person acting on behalf of the applicant to submit personal photographs or videos.

However, if submitted, personal photographs or videos should not be discounted as the individual has clearly felt it important to share.

For more information on how photos/videos should be considered in the decision-making process, see the understanding and interpreting chapter.

Related reading

- Confirmation from a professional
- Additional supporting information
- Decision-Making Tools
- Supporting information request forms
- how to contact the individual's wider support network by phone
- how to consider photographic supporting information
- Rates and Criteria Chapter

Confirmation from a professional

The confirmation from a professional should broadly confirm the individual's conditions, disabilities, or needs. It can only come from professionals.

For example, the confirmation may provide details on:

- a diagnosis, where an individual has been diagnosed
- a treatment being received, such as medication or physiotherapy
- steps taken to find out about the individual's condition and make a diagnosis
- aids and equipment that an individual uses to manage daily life
- an individual's needs where they do not have a diagnosis

The application process encourages every individual who applies for PADP to provide a confirmation from a professional.

If confirmation from a professional has not been provided with the application, you must decide whether either

- good cause can be established
- a confirmation from a professional should be requested.

Refer to the decision tree to guide your next steps.

Refer to the Good cause section to read about what qualifies as good cause in the context of PADP.

The role of a confirmation from a professional

The confirmation from a professional only needs to broadly confirm the individual's conditions, disabilities, or needs.

It is not necessary for this piece of supporting information to confirm:

- every detail the individual has outlined in their form
- every condition or disability they might have
- the severity of the disability or condition, or their level of needs
- the individual's formal diagnosis

The confirmation might also provide additional details on the impact the condition or disability has on the individual's day-to-day life. You should not expect this. This level of detail would be expected from additional supporting information.

If the confirmation from a professional that is available contains additional details, you must not disregard these but should consider them separately when establishing the individual's entitlement and needs.

Lack of confirmation from a professional and good cause

Individuals are encouraged to provide confirmation from a professional when they apply.

If confirmation from a professional has not been provided with the application, you must decide whether either

- good cause can be established
- confirmation from a professional should be requested. Despite not initially establishing good cause, the following sections explain how it can be established after going out for a confirmation from a professional.

Refer to the decision tree to guide your next steps.

There are many reasons an individual may not be able to provide confirmation from a professional.

Good cause

Establishing 'good cause' allows you to make a positive determination despite not having confirmation from a professional. It refers to there being a reasonable explanation as to why the individual has not provided this supporting information.

In the PADP context, 'good cause' can be established at two points.

1. Good cause for not having a confirmation from a professional at the application stage. If confirmation from a professional is not provided with the application, you have to establish whether confirmation from a professional is required for you to make a robust determination. Use the decision tree for this decision. If confirmation is not needed, you can establish good cause and move on to making a determination.
2. Good cause for not having a confirmation from a professional when requested. If you have established that good cause does not apply at point 1 above and confirmation is needed, it might turn out that confirmation from a professional is unavailable or delayed. You can establish this either before going out for a request (i.e. the individual informs you of the reasonable explanation) or after your request has gone out (i.e., you or the individual has been unable to gather it). If there is a reasonable explanation for why it is unavailable or delayed, you can establish good cause and move on to making a determination without confirmation from a professional.

Good cause for not having a confirmation from a professional at the application stage

We are encouraging everyone applying for PADP to provide confirmation from a professional.

However, it can be assumed that there is an explanation for why the confirmation from a professional might be available less frequently for PADP applicants.

If an individual has not provided confirmation from a professional with their application, it might therefore be appropriate for you to establish good cause based on that explanation, rather than for you to – potentially unsuccessfully – automatically request confirmation from a professional in every case where it has not been provided with the application.

At this stage, you do not need to determine a specific reason for establishing good cause. The general explanation above can be used to establish good cause for most applications that are submitted without a confirmation from a professional. You may be able to determine a specific reason, for example one of the reasons listed in the next section, but it is not required at this stage in order to establish good cause. The key reason you would not establish good cause here would be if the information provided had a significant inconsistency that needed resolving.

Where there is a lack of a confirmation from a professional, you should always consider if there is good cause before requesting or gathering a confirmation from a professional.

For reviews, it is not a requirement for the individual to provide supporting information, including a confirmation from a professional, when reporting a change of circumstances. You should only request it, when, following the guidance set out in the reviews chapter, you determine that supporting information is needed. The guidance in this chapter regarding good cause for not having a confirmation from a professional when requested also applies to reviews.

When it is appropriate to establish good cause for not having a confirmation from a professional at the application stage

If confirmation from a professional is not provided with the application, you should refer to the section *Can I make a robust determination with the information available?* to establish whether it is required for the decision. If you decide that it is not required, you can establish good cause and establish the individual's entitlement.

You can still establish good cause if a confirmation has not been provided but, using the decision tree, you establish that it is required to make a robust decision. The section 'Good cause for not having a confirmation from a professional when requested' will help you when you do not get the necessary confirmation from a professional when requested.

Good cause for not having a confirmation from a professional when requested

If confirmation has not been provided but you have established that it is required to make a robust decision, you might still not be successful in gathering it or requesting it from the individual.

The following guidance in this section also applies to being unsuccessful when gathering confirmation from a professional, where needed, at review stage.

You should then establish whether the individual might have a reasonable explanation for:

- a delay in providing information
- not providing information
- disengaging from the supporting information gathering process

These reasonable explanations will be the foundation for establishing good cause where a confirmation from a professional has been requested but it has not been provided. At this stage, the individual will need a specific explanation as to why you have been unable to gather a confirmation from a professional. Examples of these reasons are below. You cannot retrospectively apply the broad explanation for good cause that is described in earlier sections because you determined a confirmation from a professional was needed.

Reasonable explanations might relate to:

- lack of access to or contact with professionals
- their health or disabilities
- a hospital stay
- being placed in local authority care or legal detention
- lack of support needed from an advocate or support worker, including in relation to providing support to fill out the application or review form
- dealing with an unexpected life event, like a death in the family
- having difficult lives due to their disabilities or conditions
- how their condition/s are managed i.e. when older people are in receipt of services, they may be more likely to receive input from multiple care providers

and there can be a lack of any one professional who has the oversight necessary to provide the confirmation from a professional

- the level of input by professionals i.e., their condition is managed by their family and wider support network with minimal professional input. This has historically been the case with learning difficulties and disabilities, and mental health conditions.
- Unresponsiveness to, or lack of engagement with, supporting information requests.

This list is not exhaustive.

Good cause due to unsuccessful supporting information requests

Good cause for supporting information being unavailable does not just apply to the individual's personal circumstances. It also applies where the response from a professional to your, or the individual's, supporting information request does not deliver the outcome you were hoping for.

Where a professional:

- is unresponsive to a supporting information request
- responds declining to answer your questions
- provides a response that is of low value
- does not provide information relevant to the individual or the application (e.g. sending a leaflet on a condition, rather than confirming that the individual has the condition or how they are impacted by the condition).

you can establish good cause for why you did not receive the confirmation from a professional you requested.

This guidance also applies to reviews.

Lack of confirmation from a professional when it is requested and no good cause

This scenario is where you:

- determined that a confirmation from a professional was needed to make a robust determination
- were unsuccessful in gathering the confirmation from a professional
- could not establish a reasonable explanation as to why a confirmation from a professional was not available.

Where this is likely the case, before you establish whether or not there is good cause, you should ensure that the individual understands

- what confirmation from a professional is
- how to find and submit it
- that we can gather it on their behalf.

If confirmation from a professional still doesn't become available after this engagement, you should go on to make a negative determination.

Refer to the decision tree for an overview of the steps outlined in this section.

After you have established good cause

If you have established good cause, you should move on to establishing the individual's level of need and their entitlement. You should use the information you have available to you to do so, such as the information provided by the individual in the application form.

Lack of supporting information where the individual is unlikely to meet the PADP eligibility criteria

The information an individual provides on their application or review form can suggest they're unlikely to meet the eligibility criteria, for example, because it is unlikely that their needs are significant enough to qualify for the benefit.

If the individual has asked you to gather supporting information on their behalf, you should take the steps necessary to do so.

If the individual has both:

- not provided supporting information
- not asked Social Security Scotland to gather it on their behalf

you must request a case discussion to understand whether it is more likely than not that supporting information would change the outcome of the application from a likely deny to a likely award. This includes both the confirmation from a professional and additional supporting information. As case managers are not health and social care professionals, you are not able to determine whether supporting information could potentially provide crucial details that might lead to an award.

This is because individuals with certain conditions are likely to under-report their needs. In order to ensure we are making fair and balanced decisions; you should make every effort to understand the individual's condition to ensure they can access the support they are entitled to.

If the outcome of the case discussion helps you to conclude that supporting information would change the outcome of the application from a likely deny to a likely

award, you should refer to earlier guidance on good cause as the issue of no confirmation from professional remains.

If the outcome of the case discussion helps you to conclude that supporting information would not change the outcome of the application from a likely deny to a likely award, you should refer to the guidance in this chapter on denials.

Related reading

- case discussions
- client-led route
- Agency led route
- follow-up calls with the client
- good cause
- local delivery
- Denials

Requirements of the professional

The following information applies to both:

- professionals providing the confirmation from a professional and
- professionals who provide additional supporting information.

To provide supporting information, the professional or organisation providing the information should fall into one of the following categories:

- have been involved in the individual's care, treatment, or everyday life for a period that would allow them to be familiar with their needs
- have carried out an assessment of the individual's condition, disability or needs
- have the professional knowledge and access to records to provide an informed opinion on the individual's condition, disability, or needs

Professionals from the same organisation can provide supporting information, even if they have not been directly involved in that individual's treatment or care.

They must have both:

- access to records on the individual
- the professional knowledge needed to understand these records

You do not need to obtain additional permission from the individual where the named contact at an organisation is not who will respond to the supporting information request.

For example, the GP who normally sees the individual and has been named on their application or review form might not be available. In this case it's acceptable for a different GP from the same surgery to fill in the supporting information request form. This is because they have access to the individual's medical record. It would not be acceptable for a member of staff who does not have medical training, such as a receptionist, to fill in the form.

Examples of who could provide this

This could include:

- social workers
- psychologists
- health professionals, such as nurses, GPs, or consultants
- allied health professionals, such as physiotherapists, speech and language therapists, or occupational therapists

- local authority staff, an assessment of need, or an individual's care plan (such as homecare staff)
- health boards, such as Fife Health Board or Lothian Health Board
- paid support workers who can confirm the level of care an individual receives
- third sector, private and other organisations or individuals who provide professional support to the individual

This list is applicable to professionals who work in both the public and private sector. For example, a private physio or a health care professional working for the NHS. As long as they are familiar with the individual, their condition, disability or needs in a professional capacity, professionals from the private sector can provide supporting information.

The same rules apply to professionals from the private sector as they do for professionals in the public sector in relation to who from that organisation can provide the supporting information. I.e. Another professional from the same organisation can provide supporting information provided they have the expertise to understand the individual's condition and records. For example, another doctor at the same practice but not the receptionist.

Practitioners are not considered a professional for supporting information purposes. They cannot provide either the confirmation from a professional or additional supporting information from a professional.

Examples of supporting information from a professional

This could include:

- occupational health report
- treatment plans
- diagnosis
- appointment or referral letter
- social work report
- a list of medications prescribed to the individual
- care assessments or a care plan
- medical specialist report
- the statement of support provided in the application form when completed by a professional
- information documenting the physical supports put in place by a local authority, such as a stair lift, ramp, or accessible shower
- supporting information request form

Deciding whether a source is from a professional

The following guidance in this section is only applicable to the confirmation from a professional.

Deciding whether a source is a professional is important when deciding whether a document can be counted as a confirmation from a professional.

To help make a decision on this, you should use the information presented in this section as well as the pages on:

- Confirmation from a professional
- Additional supporting information

If the definitions already provided are not enough to make a decision, you should consider if the provider of the source:

- is being paid to provide a service to the individual
- is qualified or trained to provide their role to the individual
- has a personal relationship with the individual beyond their organisational role
- is acting within a formal capacity
- has specific skills or training to be able to provide support the individual
- has provided clear professional documentation, for example is it on letter-headed paper
- can be found by their details or credentials on official registers or systems, such as the Scottish Social Services Council, the General Medical Council, the Nursing and Midwifery Council or another professional regulatory body
- is still working in their field, for example they're currently practising, not retired

This list is not exhaustive.

You should consider the answer to these questions and make a decision on a case-by-case basis. You should also consider the examples below.

If you conclude that it is more likely than not that a piece of supporting information is not from a professional, you should consider both:

- if you need to collect an alternative source as the confirmation from a professional, including how you work with the individual to source this information if needed. See the decision tree for guidance on how to establish whether confirmation is needed
- if the information can be used as additional supporting information

You may conclude that a source is not a professional but does contain information regarding the individual's disability, condition or needs relevant to the application.

You should still consider this information as part of your decision-making. The information would count as additional supporting information. It would still count as

this type of supporting information regardless of if it was from a professional or the client's wider support network.

If you want advice on how to classify a source of the confirmation from a professional, you can:

- speak to your line manager
- request a case discussion

Example: A volunteer who regularly supports the individual but is not considered a professional

A volunteer who runs a social club in the local church on Sunday afternoons and regularly supports an individual belongs to the individual's wider support network. Information they provide would be considered additional supporting information

Example: A volunteer who regularly supports the individual and is a retired professional, but is not considered a professional for the confirmation from a professional purpose

A volunteer runs a social club in their local community centre and is a retired social worker. They recognise the individual's difficulties in most social interactions and have practised strategies with them that help the individual to avoid becoming overwhelmed easily.

However, this volunteer would not be considered a professional.

This is because the capacity in which they would be considered a professional would be through their status as a retired social worker. However, as they are retired, they no longer have the credentials to act in this capacity and are not active in their field.

Their testimony is still an important source of additional supporting information from the individual's wider support network, but case managers should seek an alternative document as confirmation from a professional, if it is needed to make a robust determination.

Related reading:

- decision tree
- Additional supporting information
- collaborative information gathering
- if no supporting information from a professional is available
- Lack of confirmation from a professional

- understanding and interpreting supporting information
- Principles of decision-making
- how to use supporting information from a professional which contains harmful information

Confirmation from a professional that has gaps and inconsistencies

In their confirmation, professionals may provide information that is (partially) inconsistent with what the individual has told us on their application form. These inconsistencies can relate to:

- the broad confirmation of the conditions, disability, or needs
- the severity of the needs the individual has told us about.

Inconsistencies relating to the confirmation of conditions, disability, or needs

The confirmation from a professional might, for example:

- not mention one or multiple conditions the individual has told us about.
- Explicitly state that the individual does not have the condition they have told us about

The confirmation does not mention all conditions, disabilities, or needs

Confirmation from a professional, where needed:

- does not have to confirm all conditions, disabilities and needs the individual has told us about. However, sometimes this can be an inconsistency that is relevant and needs exploring.
- should confirm a condition that is related to the individual's needs, and these must be relevant to the Pension Age Disability Payment eligibility criteria.

Relevant considerations when a confirmation does not mention all conditions, disabilities or needs might be as follows:

- Whether it is reasonable to assume that, on the balance of probabilities, it is more likely than not that the professional should have known about all the individual's conditions
- You should consider whether the confirmation from a professional is a pre-existing document, such as a referral letter. Here, it would be reasonable to expect that it will not mention all of the client's conditions. In order to find out whether an additional confirmation from a professional might still be required, read the next section.

In some cases, however, it would be reasonable to expect that the confirmation from a professional mention all conditions the individual has detailed in their application form. For example, if one of the individual's conditions is a known condition which is highly likely to coexist with the other condition the individual has told us about and the professional treating the individual only confirms one of the conditions, this would be a relevant inconsistency. This inconsistency would need to be explored,

irrespective of whether the document confirms a significant portion of the needs mentioned in the application form. You should consider consulting medical guidance or utilising a case discussion to help you establish known conditions that are likely to coexist.

This list is not exhaustive.

If you decide that an inconsistency is relevant and needs to be explored, you should follow the existing guidance on gaps and inconsistencies, including potentially needing further supporting information.

When an additional confirmation from a professional may be required

The confirmation from a professional does not always have to cover the individual's main condition. For example, where an individual has two conditions and provides a confirmation on one condition which causes a significant number, but not most, of their needs relevant to qualifying for PADP, you should accept this.

However, where both

- The needs the individual has as a result of the confirmed condition would not meet the PADP eligibility criteria
- the needs the individual has as a result of the unconfirmed condition/s would make them eligible for PADP

it would generally be reasonable for you to expect the individual to provide a confirmation of the condition that would qualify them for PADP.

If you conclude that the confirmed condition/s or need/s are

- not relevant to the PADP eligibility criteria

you should follow the guidance in the lack of a confirmation from a professional section of this chapter. Although you have concluded that another confirmation from a professional is needed to confirm the qualifying condition, the guidance regarding good cause still applies. You may determine that another confirmation from a professional is needed and still establish good cause. You should also use the decision tree to help you establish if another confirmation from a professional is needed.

Establishing when

- an existing confirmation from a professional is not relevant and
- another confirmation from a professional is needed

will differ from application to application. You should use your judgment to make this decision. If you struggle to understand whether an existing confirmation from a professional is acceptable, request a case discussion.

To establish whether you'll need additional confirmation from a professional, you should:

- consider whether out with the confirmation they have already provided, they would have a reasonable explanation for not providing another confirmation and you can establish good cause.
- consider whether what condition/s or need/s have been confirmed can reasonably be expected to cause any needs relevant to the application
- use the balance of probabilities in your thinking to consider whether it is more likely than not that the confirmed condition would result in needs relevant to the PADP eligibility criteria
- consider involving a health and social care practitioner to understand the needs associated with a given disability or condition

The confirmation explicitly denies what the individual has told us about their conditions, disability, or needs

In some instances, the professional you reached out to for confirmation of the individual's conditions, disability or needs might directly deny that the individual has a certain condition, disability or need. This is different from instances where the confirmation from a professional simply does not mention one or multiple conditions or needs the individual told us about.

Taking a trust-based approach, you should establish whether this inconsistency needs to be explored or whether there is a reasonable explanation for it. For example, the professional might wrongly assume that the individual does not have a condition, because they have not seen the individual since that new condition developed.

Additionally, where individuals are applying with conditions that have not been diagnosed, the professional may give an accurate response stating the individual does not have the reported condition despite being aware of their needs. In this case, even though the professional has denied the existence of the condition, this does not necessarily constitute a denial of these needs or symptoms. You should remember that an individual does not always need a diagnosis in order to be eligible for our benefits, it is their level of needs that is being considered.

You should not automatically assume that the individual is dishonest and does not have that stated condition or need – it might be reasonable to assume that the professional was unaware of all of the individual's conditions and/or needs.

If you establish that the inconsistency needs exploring, you should proceed to do so as you would with any other piece of supporting information, including applying equal consideration to the confirmation and the application form and requesting a case discussion, if needed.

If you can resolve the inconsistency (i.e. there is a reasonable explanation for why the confirmation does not broadly confirm what the individual told us in their application form), you should move on to establishing the individual's needs and entitlement.

You may be unable to resolve the inconsistency (i.e. there is not a reasonable explanation for why the confirmation does not broadly confirm what the individual told us in their application form).

You should discuss the case with your line manager. If they agree with your assessment that the inconsistency cannot be resolved, you should make a negative determination.

Inconsistencies relating to the severity of needs

The confirmation from a professional might:

- state that the individual's needs are higher or lower than
- of a different nature from

needs described elsewhere in the individual's application.

Consider whether this inconsistency is worth exploring. In order to determine this, you should, for example, consider whether the inconsistency would impact on the individual's level of entitlement. For example, if

- the individual has reported a severe level of daytime needs but
- a professional describes the needs to be much lighter than that, but still significant enough for the individual to meet the criteria for the lower level of PADP,

this inconsistency would not impact on their level of entitlement and would not need to be explored further.

If you establish that the inconsistency needs exploring, you should proceed to do so as you would with any other piece of supporting information.

Additional supporting information

To supplement the other sources of information, including the application form and the confirmation from a professional, additional supporting information can be used. This supporting information helps you to establish the individual's level of need and their entitlement.

This can come from either a professional or from their wider support network, but it is not a requirement in order for you to make a determination.

Additional supporting information from the client's wider support network should never be used as the confirmation from a professional.

The individual's wider support network might include:

- family members
- partners
- friends or neighbours
- unpaid carers
- volunteers leading groups or activities the individual attends

It can help to inform you of the impact the individual's condition, disability or needs has on their everyday life.

Individuals may provide this information with their application or review form, including through the statement of support. If this is the case, you should always consider this information in your decision-making process. This also applies if the individual themselves has provided enough detail on their needs for you to establish their entitlement.

If you need more information on the individual's needs and they have not provided any additional supporting information, you should consider all of the following:

- what decision-making tool would be most appropriate to gather the information you need
- if contacting the individual themselves or the person acting on their behalf would provide the information you need, and if this would be appropriate i.e. if you know the individual has a hearing impairment or dementia, this may be an appropriate decision-making tool. You should always consider calling the individual first before requesting additional supporting information.
- if requesting additional supporting information is the best tool
- who would be the best source of additional supporting information, if you have established that additional supporting information is the most appropriate decision-making tool

Additional supporting information is just one decision-making tool that can be used to resolve relevant gaps and inconsistencies. It should not be used as the default tool where you need more information on the individual's needs.

The role of additional supporting information

Additional supporting information is just one of many decision-making tools you can use to determine an individual's entitlement. You should refer to the Principles of Decision-Making chapter to determine which tool is the most appropriate on a case-by-case basis.

Its purpose is to add detail to the application or review form by describing the individual's needs on a day-to-day basis. It should give insight into the impact the condition or disability has on the individual's life.

It should not be used as an alternative way to 'evidence' or 'prove' what the individual has told us in their application or review form.

Reasons for gathering additional supporting information that are not appropriate include:

- where you have concluded that you do not need a confirmation from a professional, but you want someone other than the individual to give information about their disability or condition
- where you have a suitable confirmation from a professional, but that confirmation does not confirm every detail in the application form.

The reason for gathering additional supporting information that is appropriate is where:

- the individual hasn't provided the level of detail needed in the application AND
- you think that gathering additional supporting information is the best decision-making tool to resolve questions, gaps, or relevant inconsistencies

If you establish that additional supporting information is the appropriate tool to gather this information, you need to consider who would be the best source for this information.

For example, health care professionals are less likely to be able to observe the individual's nighttime care needs. Some allied health professionals like physiotherapists and occupational therapists can offer observations on this, but not every individual will have contact with this type of professional.

Therefore, people closely connected with a disabled person can be useful sources of information about the impact a disability or condition has on an individual, such as

social care professionals and friends and family. This is why information from the individual's wider support network is particularly valuable.

If the source of this additional supporting information is a professional, it is possible that it can also act as a confirmation from a professional. Where the information can act as both types of supporting information, you should be careful not to use the additional detail as a tool to 'evidence' or confirm every need. This is in keeping with a trust-based approach where you do not use, or gather, information for the purpose of 'proving' what an individual has told us.

Once you have established the confirmation, this additional detail should only be used to inform your understanding of their needs.

When a confirmation from a professional is also additional supporting information

It is possible that one piece of information from a professional can act as both:

- confirmation from a professional
- additional supporting information at once.

You should not disregard this information just because:

- you have used the same document as the confirmation from a professional
- the application form provides enough detail for you to establish the individual's entitlement.

You should ensure that you are using any additional detail as additional supporting information.

However, you should be mindful that any additional detail provided in a confirmation from a professional is not used as a means to 'evidence' what the individual has told us in their application form. It should be used to inform your understanding of their needs.

For example, an individual may submit an outpatient's summary written by a consultant alongside their application. In this summary, the consultant broadly confirms the condition of the individual. This is the confirmation from a professional. The summary continues to detail the symptoms of the individual and what the next steps in treatment are. This information is additional supporting information as it can be used to understand the individual's level of needs and to establish their entitlement.

Related Reading

- contacting the individual with follow up questions
- supporting information see: determining the best source
- requesting information through the client-led route
- requesting information from the wider support network

Gathering supporting information

This guidance only applies where you have determined that gathering supporting information would be essential to your decision making. For example:

- it is the best tool to fill in any gaps and resolve inconsistencies
- you have determined that you do need a confirmation from a professional
- you do not have enough information to make a determination and gathering supporting information is the only way to get the information you need.

For PADP, we will not automatically reach out to the individual before their application reaches case managers, where that application has been received without confirmation from a professional. Rather, you as the case manager will have to establish whether confirmation from a professional is needed to make a robust determination. Refer to the decision tree in this chapter for guidance.

To gather supporting information, you can:

- use sources provided by the individual
- contact the individual to ask for additional or alternative sources

Collaborative information gathering

The individual is responsible for providing both the confirmation from a professional and additional supporting information where this is needed to make a determination.¹

However, individuals may require help to:

- gather supporting information
- identify if they have any relevant supporting information already – this could be a confirmation or documents that provide additional detail on their needs
- identify who an appropriate source of information would be

You must:

- make every effort to help an individual gather supporting information, including offering the service where they are unable to provide the necessary supporting information
- ensure that the supporting information gathering process treats everyone with dignity, fairness, and respect
- give people every opportunity to provide supporting information if it is not supplied with their application or review form (if needed)
- consider each individual's ability to provide supporting information and the challenges they may face
- decide when a supporting information request is appropriate

¹ Social Security (Scotland) Act 2018 s. 54

- consider whether you're able to make a determination based on the balance of probabilities with the information available, taking into account good cause and our trust-based approach

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

How we help gather information

You can:

- offer advice on how to contact specific roles or professionals
- consider if there are other ways to get the information, like a follow-up call
- advise on other formats for supporting information
- decide if good cause exists for lack of a confirmation from a professional
- involve local delivery teams (especially if the individual is considered vulnerable)

If an individual is unclear about what information may be available, and you are unsure who would be an appropriate source of supporting information, a case discussion might be useful to identify a source you would expect to be able to provide relevant information.

The role of local delivery teams

Local Delivery staff can offer support to individuals making an initial application who:

- need support to gather supporting information
- have no support networks

You should only refer an individual to Local Delivery:

- before part 2 of an application is started
- after part 2 of an application is received (but only if Local Delivery have already been involved in the case)

Before making a referral, you should consider if:

- an application is not detailed enough
- local delivery has not been involved
- other decision-making tools have been used first

Agency-led route

Individuals:

- can ask us to gather both the confirmation from the professional and additional supporting information

- must give their permission

We can gather supporting information directly from both:

- most types of professionals
- the client's wider support network

You may need supporting information, but the individual has not asked you to gather it on their behalf. There are processes in place to gather information on behalf of an individual if they are both:

- unreachable
- identified as vulnerable.

To gather information directly, we have agreements with:

- NHS Scotland
- GPs
- local authorities
- third sector organisations

The following individuals and organisations are required to give us information directly²:

- health Boards
- registered medical professionals, such as GPs and specialists
- local authorities

Other agencies and organisations may also be suitable sources of information and may or may not be covered by similar information-sharing agreements.

No response may be received when you request supporting information on the individual's behalf during a review. You should not automatically suspend assistance. Every effort must be made to help the individual to gather supporting information or establish good cause.

Determining the best source

You should consider who the best source to approach is where:

- the individual needs help to gather information
- you are using additional supporting information as a tool to gather additional detail needed to make a decision on their entitlement

² The Social Security Information-sharing (Scotland) Regulations 2021, regs. 3 and 4

To determine the best source, you should first establish:

- what information is needed and/or required
- using the balance of probabilities, who is more likely than not going to know the answer

You may also need to work with the individual to establish who is involved in their treatment or care. This could be professionals or their wider support network.

You should not use professionals as your default contact for additional supporting information. Whilst they may be a good source of information, they often do not see the individual as regularly as their wider support network.

For example, if you need to ask detailed questions to understand their daily routine and life at home, a GP is unlikely to know the answer.

Someone from that individual's wider support network is more likely to have information about the individual's needs if they:

- live with them
- visit them frequently

You may decide a professional would be the best source for the additional supporting information you need to establish the individual's entitlement. In this instance, you should consider which professional would be best placed to know this information. For example, GPs may not be best placed to provide information on an individual's daily routine. The individual's paid carer, who sees them twice a week, would be better placed to provide additional supporting information in this case.

You should also try to approach someone who is likely to respond to a supporting information request quickly. This point should be carefully balanced against the value of information they're likely to provide. This could mean that you will have to wait longer for information deemed important to the decision-making process.

The role of case discussions

You should consider going to case discussion if you are unsure:

- whether the needs described are consistent with an individual of that age, with that condition, and individuals receiving any named treatment, particularly in scenarios where you do not have a confirmation from a professional
- what sources of information may exist
- what source or type of supporting information would be most helpful

This list is not exhaustive.

Client-led route

In certain situations, only the individual will be able to get information from a professional or someone in their wider support network involved in their treatment or care. This is called the client-led route. You should do your best to support the individual to get this information.

The individual must gather the supporting information themselves if they meet at least one of the following:

- they have not given us permission to gather information on their behalf
- their source works in the private sector

Related Reading

- if no supporting information is available
- understanding the value of supporting information
- how to request supporting information
- vulnerable individuals

Requesting more supporting information

In some cases, you may not have enough information to understand the individual's circumstances and entitlement based on:

- the application or review form
- available additional supporting information
- the balance of probabilities

This might be due to

- gaps
- inconsistencies

in the information you do have available.

Information provided by the individual or their source might not contain enough detail to make a determination if the information is:

- of low value i.e. generic information about a condition, rather than about a person's needs
- not up to date i.e. information from a time when their needs were significantly different
- not provide the level of detail needed to understand an individual's needs, particularly where the case is complex

You can ask for more information if:

- there's not enough information to make a determination on the balance of probabilities
- you've considered other decision-making tools, such as medical guidance and case discussions, and it is more likely than not that these tools will not help you move to making a determination.

You can contact an individual only where necessary to:

- clarify information already provided
- update or confirm details on a form
- ask for another source of information
- get more information to support what the individual told us

This means that you must not request more additional supporting information because you:

- would find it interesting to find out more about the case in question
- would find it helpful, but not strictly necessary, to learn more
- do not feel confident enough to make a determination as you are new to the role

- need more general information on the individual's condition when this information is also available in medical guidance or upon request through a case discussion with a practitioner
- need to have confirmation from a professional where you have concluded they do not need one. For example, where an individual has good cause for not having this.

Individuals can request help to gather supporting information at any time.

When requesting supporting information, you should limit the number of questions asked. You should also keep the questions general enough for the provider to give information on the individual's condition and needs.

Who to ask for more additional supporting information

Depending on the details you need to make a determination, you should decide whether you should request this supporting information from:

- a professional
- the individual's wider support network

Before asking for more information, you should consider whether information about a condition or disability can be gathered by using other decision-making tools, such as

- medical guidance
- a case discussion

As with all supporting information, anything additional should be:

- given equal consideration
- used to broadly support the information provided in an individual's application or review form

You must never ask an individual to 'prove' or 'disprove' anything they have told us about any aspect of their:

- conditions
- disabilities
- needs

If no additional supporting information is available

Other decision-making tools may be necessary to establish the facts of a case in cases where all of the following apply:

- you do not need to gather a confirmation from a professional. It may have already been provided OR you have established good cause OR you have concluded that it is not needed
- the application form does not contain enough detail for you to conclude whether it is more likely than not what their needs are
- there is no additional supporting information from any other source

One of those tools includes requesting more additional supporting information. You should ensure that this is the best tool for gathering the missing details before using this tool.

Other tools may be more appropriate, or produce results quicker, than gathering more additional supporting information. These include a follow-up call with the individual and case discussions.

Before requesting further additional supporting information, you should always attempt a follow-up call and/or a case discussion, if it is appropriate to do so.

Where you have utilised the available decision-making tools and you have still been unable to gather all the information you need, you should:

- continue to make a determination based on the facts they have been able to establish
- continue to use the balance of probabilities, as always, to establish what needs they are more likely than not to have
- recognise that this might lead to a lower award than the individual might have expected, or to no award.

Denying an application due to lack of supporting information

We're required to make a determination on every application we receive. In instances where there is either

- no confirmation from a professional and no good cause when you have determined that a confirmation from a professional is required
- not enough information to determine entitlement after using the relevant decision-making tools,

you can make a determination that the individual is not entitled to assistance.

An individual's application can be denied due to lack of confirmation from a professional if all of the following are met:

- you have determined that in order to make a robust decision, the application does require a confirmation from a professional
- you try, unsuccessfully, to gather the confirmation from a professional
- there is no good cause for why there was no confirmation from a professional

A lack of confirmation from a professional or good cause is not the only basis for denying an application on grounds of supporting information.

Alternatively, an individual's application can be denied if you are unable to determine the individual's entitlement based on the information available. To deny an application on this basis, all of the following must be met:

- they have a confirmation from a professional or you have established good cause, or you have determined that they do not require a confirmation from a professional
- the information provided in their application form does not provide enough detail for you to establish their entitlement
- you have used other decision-making tools to resolve these gaps or inconsistencies, but you are still unable to establish entitlement
- you tried to gather more additional supporting information and did not receive the detail you needed
- due to inconsistencies or lack of detail, you were unable to establish their entitlement based on the balance of probabilities
- you have made every effort to support the individual to provide more additional supporting information, including offering to gather it on their behalf

Disengagement

You must use discretion and judgment where an individual:

- is uncooperative about providing supporting information
- has not responded to us

If the individual has disengaged, you should use discretion to make a person-centred decision based on the individual's situation, and consider:

- good cause
- the balance of probabilities
- a case discussion

Every effort must be made to:

- contact the individual to explain that a lack of information may cause delays and impact their determination
- understand or explain gaps or inconsistencies using decision-making tools

When carrying out a review, the individual might fail to supply requested supporting information. You must use judgement and discretion to consider whether their assistance should be suspended.

Deadlines

You should set a deadline for the individual to respond to a request for information only if:

- you've made every effort to contact the individual by other means
- more additional supporting information is strictly necessary to determine an individual's eligibility to PADP

Suspensions

You may need to suspend an individual's entitlement to Pension Age Disability Payment.

Suspensions can happen as part of any determination where:

- the individual has ongoing entitlement (the individual is a client, and you are carrying out a review)
- a decision must be made without an application or review form (known as an 'unscheduled review')
- the individual has failed to provide requested information by the end of the period you set

Before suspending an individual's award, you should

- consult and follow the guidance on suspensions.

In suspending payment of Pension Age Disability Payment, you should make a further request for the information. The request should note that, if the individual fails to supply the information by the new deadline, you may then determine that the individual is no longer entitled to Pension Age Disability Payment.

Where an individual has an existing entitlement to Pension Age Disability Payment, you may need to make a nil award as a result of the individual failing to supply the necessary supporting information.

Related Reading

- local delivery
- principles of decision-making
- suspension of assistance
- how to send a supporting information request
- good cause
- balance of probabilities
- establish the value of a piece of supporting information
- helping the individual to gather supporting information
- equal consideration
- Gaps and inconsistencies

Supporting Information when Carrying out a Review

Supporting information, including confirmation from a professional, is only needed in some specific reviews scenarios. These are set out in the Relevant considerations when making a determination for an award review chapter.

The same approach applies to using supporting information for reviews as apply to the determination of new applications. This includes:

- trust and person-centred approach
- using the balance of probabilities throughout
- establishing good cause where appropriate

Related Reading

- Relevant considerations when making a determination for an award review
- Scheduled reviews
- Unscheduled reviews

Supporting information and Special Rules for Terminal Illness

For individuals who are terminally ill, the only supporting information we need is a BASRiS form. However, you can also accept the SR1 form or DS1500 form used by the Department for Work and Pensions (DWP) to confirm a terminal illness diagnosis. For more information, read the chapter on applications under the Special Rules for Terminal Illness.