

The Timms Review – Response to Call for Evidence

May 2026

Introduction

1. JUSTICE is a law reform and human rights organisation working to create a fair justice system within everyone's reach.
2. In 2021, JUSTICE and the Administrative Justice Council published a joint report, *Reforming Benefits Decision-making*, based on evidence from a working party of experts and those with direct experience of the benefits system, which made recommendations to improve the administrative and procedural elements of the benefits system (from initial decision to appeal).¹
3. This consultation response will address issues raised in Theme 2 (eligibility, fairness and equity in the award of PIP) and Theme 3 (experience of claiming PIP).

Getting more decisions right first time

4. Simplifying the application process, and making sure more individuals get the correct decision earlier, will improve trust in the PIP process overall. Far too many cases currently go all the way to the Tribunal to get the correct award which is time-consuming and stressful for applicants. The PIP overturn rate is currently 64% in the Social Security and Child Security Tribunal ('the Tribunal')²; this is considerably higher than for other DWP benefits and shows that much more can be done by the DWP to improve initial PIP decision-making.

The assessment process

5. The DWP conducted research on the impact of applying for PIP and ESA on claimant's mental and physical health. The research found that claimants felt the PIP assessment was degrading, there was a sense of distrust in the DWP and a lack of confidence in the medical expertise of the assessors.³ This is not conducive to good quality initial decision-making and reform is needed.

Improved early evidence gathering

6. Better decision-making relies on better information earlier about the claimant and their condition. Ultimately, the best source of information about a claimant's condition and how it

¹ JUSTICE, '[Reforming Benefits Decision-making](#)' (July 2021)

² Ministry of Justice, '[Tribunal Statistics Quarterly: October to December 2025](#)' (15 May 2026)

³ DWP, '[Claimant views on ways to improve PIP and ESA questionnaires](#)' (20 July 2021)

impacts their ability to carry out activities is the evidence of the claimant themselves. Evidence suggests that PIP decisions are often overturned by the Tribunal on substantially the same facts.⁴ We welcome the Health Transformation Programme's research on how a diary can evidence fluctuating health conditions⁵, but note that this should not be overly burdensome.

7. Claimants struggle to collect the right evidence to support their claim, especially when there is difficulty accessing legal advice and advocacy support. There is too much of a burden on claimants to provide evidence, when the DWP also has a positive legal obligation to ensure they have sufficient evidence to make their decision.
8. Assessor and decision-maker guidance and training should be updated to:
 - (a) Make clear that Health Care Professionals (HCPs) and decision-makers must request additional evidence where this information is reasonably required to make an assessment. This should explicitly recognise that evidence may not have been provided because claimants may not have copies of it – rather than because it is not important or does not exist.
 - (b) Explicitly state that HCPs and decision-makers must request further evidence when this is required as a reasonable adjustment for claimants with mental health conditions.
9. In addition, the application forms and guidance should explicitly state that, if claimants do not have copies of medical information easily available, this will be requested directly from their healthcare professionals by the assessment providers where this is required for the assessment.
10. It is important that all forms of evidence, including that provided by friends/ relatives, are treated properly. Assessment reports and decision letters should:
 - (a) Respond to all the evidence provided by the claimant or obtained by the HCP/decision-maker. This should include explaining why certain evidence is being given less weight or not being relied upon.
 - (b) Where a claimant's own account of their impairment is rejected, there should be a strong evidential basis for doing so which should be fully explained.
 - (c) Explicitly address conflicts between evidence.

NHS data sharing

11. It is encouraging that the DWP are looking at better data sharing with the NHS, to reduce the administrative burden on PIP claimants and speed up the processing of claims. We agree

⁴ The Tony Blair Institute, '[Governing in the age of AI: Reimagining the UK Department for Work and Pensions](#)' (9 July 2024)

⁵ DWP, '[Health Transformation Programme evaluation strategy](#)' (1 April 2026)

that much more can be done to share information about an individual's medical condition. Application forms and guidance should explicitly state that, if claimants do not have medical information easily available, this should be requested by assessors themselves.

12. Supporting medical evidence can be particularly important for those with mental ill health, neurodivergent conditions, or fluctuating conditions who may have difficulty self-reporting how their disability affects them. The NHS should be providing the required medical evidence directly to the DWP (subject to the required consent and data protection policies). This would provide greater clarity as to who is responsible for providing evidence and reduce the burden on claimants. Improved digital services in both the DWP and NHS should help facilitate this.
13. Having said this, we have heard anecdotally that the Adult Disability Payment reforms in Scotland have caused delays in evidence-gathering, which has meant individuals in practice are often still contacting their GP to obtain the evidence they require.

Specialist assessors

14. Whilst HCP's receive training, assessors do not have specialist expertise in the condition which they are assessing. A lack of knowledge about complex conditions limits the ability of an assessor to properly understand the claimant's evidence and puts undue focus on the claimants' abilities on the day of the assessment.
15. Several disability charities and activists have called for assessments to be performed by professionals with expertise in the disabilities in question.⁶ Others have argued that the solution is to have groups of 'experts' with different types of expertise.⁷ A number of other countries adopt some form of multidisciplinary approach to health and disability assessments, including Denmark⁸, Sweden⁹, Australia¹⁰, Finland¹¹, Iceland¹² and France.¹³
16. The DWP should build on the previous Government's announcement of testing specialist assessors.¹⁴ DWP research has found that participants feel greater trust for the assessor,

⁶ Work and Pensions Committee, Employment Support Allowance and Work Capability Assessments, First Report of Session 2014-15 (HC 302, 2014), para 61

⁷ B. Geiger et al. (2018) Assessing work disability for social security benefits: international models for the direct assessment of work capacity, *Disability and Rehabilitation*, 40:24, 2962-2970, p. 2966.

⁸ Ibid.

⁹ Ibid.

¹⁰ J. Sengers et al. (2020) Work capacity assessments and efforts to achieve a job match for claimants in a social security setting: an international inventory, *Disability and Rehabilitation*, p.3.

¹¹ Ibid, p.4

¹² Ibid, p.5

¹³ L. Bertrand et al. (2014) Situating disability. The recognition of "disabled workers" in France 8(4) *Disability and Employability* 296-281, p.270.

¹⁴ DWP, 'Transforming Support: The Health and Disability White Paper' (16 March 2023)

more at ease and *'more confident and satisfied in the assessment outcome'* if the assessor had specialism in their condition.¹⁵ We would however reiterate our concern about whether specialism can be obtained through DWP-provided training.

17. We understand that it would not necessarily be practicable for all claimants to be assessed by someone with specialist knowledge of their condition. However, given the ongoing issues with assessment of claimants with mental ill health, neurodivergence or co-morbid, complex, fluctuating or rare conditions, we recommend that these claimants should be assessed by HCPs with specialist knowledge of their conditions.

Informal observations

18. A particular area of concern is how the PIP process uses informal observations, which are particularly problematic for those with fluctuating and/or mental health conditions. Such observations can include how an individual walks into the room, how long they can sit and their general mood in the assessment. Such observations often do not reflect the realities of many conditions; for example, if an assessor concludes an individual does not have a mental health condition because they smile or do not "appear" to be stressed.¹⁶
19. If assessors intend to continue to rely on informal observations, guidance should make clear that claimants should be informed and given an opportunity to explain why these may not necessarily be an accurate reflection of their condition. This is procedurally fair and would ensure that explanations for the informal observations are considered at a much earlier stage.

Assessment channel

20. Whilst we note the DWP's preference for face-to-face assessments, our view is that it should be up to the claimant to choose which mode of assessment they would prefer. Telephone or video assessments may be preferable for those who find it difficult to travel, but a face-to-face assessment may be preferable for someone whose first language is not English or if they have a condition where informal observations are likely to be made. Individuals should be offered the choice of assessment (telephone, video or face-to-face), set out in simple language in DWP correspondence.
21. DWP internal research found that nine out of ten claimants would like a choice as to their assessment channel and that this *'would help them to best manage the emotional impact of the assessment'*, giving them *'a sense of control and empowerment over the process'*.¹⁷ Pressurising individuals to have a face-to-face assessment is unlikely to be effective and is potentially in breach of the DWP's duty under the Equality Act to provide reasonable adjustments. DWP research has shown how many prefer online or telephone assessments

¹⁵ DWP, ['Specialism in the Health Assessment: Initial Exploratory Research'](#) (7 October 2024)

¹⁶ Work and Pensions Select Committee, ['PIP and ESA Assessments: claimant experiences'](#) (1 February 2018)

¹⁷ DWP, ['Health Assessment Channels Research'](#) (7 October 2024)

including blind applicants and those with mental health conditions.¹⁸ The DWP should produce and publish comparative case outcomes for those who have a telephone, paper-based and video assessments, including the protected characteristics of claimants.

22. We also note that, under the previous Government, it was said that telephone and video assessments meant that the DWP could explore utilising specialist assessors.¹⁹

Outsourcing

23. We have recommended the end to outsourced benefit assessments because of the lack of trust in the quality of such assessments over many years. However, since new contracts have been awarded, we welcome at least the decision to overhaul the assessment contracts under the Functional Assessment Service and that the DWP will become more active in overseeing training materials. Much greater and more pro-active oversight of these contracts is needed. Under the previous contracts, contractors did not meet quality data despite the bar being very low (PIP reports were still considered 'acceptable' where they contained 'clinically improbable advice').²⁰
24. Our 2024 report 'Beyond the Blame Game' made the case for a more rights-based approach to government procurement. Contractual terms should specifically protect individual rights – including, for assessment contracts, clear and specific standards for the assessment, provision for independent audits, clear standards on medical qualifications and requirements for when a public authority should return an inadequate assessment. Benefit assessment contracts should be identified as a medium or high-risk contract for individual rights requiring independent audits of data and the annual publication of KPIs and performance data.²¹

Importance of early legal advice

25. The removal of welfare benefits advice and assistance from the scope of legal aid led to a huge decline in non-profit legal advice centres and a drastic reduction in the number of people granted public funding in welfare benefits cases.
26. There is an acute need for benefits advice for many claimants. Claimants may require advice and assistance to complete applications and understand the evidence they must provide with their application. This need for support is particularly acute for those with certain health conditions and disabilities which may make understanding and completing forms challenging.

¹⁸ DWP, '[Specialism in the Health Assessment: Initial Exploratory Research](#)' (7 October 2024)

¹⁹ Justin Tomlinson MP, '[Work and Pensions Committee Oral evidence: Disability employment gap, HC 189](#)', May 2021, Q 274

²⁰ JUSTICE, '[Reforming Benefits Decision-making](#)' (July 2021), p35

²¹ JUSTICE, '[Beyond the Blame Game: A responsible and rights-centred approach to government procurement](#)' (June 2024)

27. Research has demonstrated a link between early legal advice and people having their issues resolved sooner, compared to those who did not receive early advice.²² The provision of early legal advice through legal aid would therefore help reduce the number of Tribunal appeals. Early advice would also likely significantly enhance the service for claimants, leading to less delays, a less overwhelming process, and lower risks of any ill-health being created or exacerbated due to the stress of the application process. It is therefore recommended that legal aid funding be reinstated for early benefits advice, which would significantly help PIP applicants navigate the complex and stressful process.

The appeal process

28. As set out above, 64% of PIP decisions made by the DWP are being overturned in the Tribunal. This is far too high and considerably higher than for other benefit appeals (for example, UC overturn rates are 48% and ESA overturn rates are 42%) and has been so consistently for many years. 60% of all Tribunal disposals are PIP appeals and this causes considerable delays for PIP claimants to get the correct result, with cases taking approximately 37 weeks.²³

Analysis of Tribunal decisions

29. The DWP could do much more to properly analyse why so many PIP decisions are being overturned. Unlike in other areas, a benefit appeals involve a full re-consideration of the appellant's case and their evidence, not just a review of the DWP decision. The panel of judges includes a medically qualified panel member. It closely mirrors the assessment process in this respect.
30. The Tribunal provide a decision notice with the appeal outcome and a brief summary of the reasons. If properly analysed and collated, this would be a rich source of feedback and opportunities for learning. The DWP should urgently analyse tribunal decision notices and collect data on the reason(s) for all successful appeals to identify recurring issues in decision-making. This analysis should then be used to make improvements in problematic areas, for example how the assessment is conducted (see above). Technology and Artificial Intelligence (with the appropriate safeguards in place) should assist with this.

Mandatory reconsideration reform

31. The current mandatory reconsideration system is unnecessarily confusing and causes 'claimant fatigue', where claimants are discouraged after two negative decisions. We recommend that a claimant should be able to appeal a benefits decision directly to the Tribunal without first having to go through mandatory reconsideration. The assessment report should be served automatically with the PIP decision, allowing claimants to fully

²² Monidipa Fouzder, '[Legal aid cuts shown up as false economy – new research](#)' (Law Society Gazette, 27 November 2017)

²³ Ministry of Justice, '[Tribunal Statistics Quarterly: October to December 2025](#)' (15 May 2026)

understand the basis on which their entitlement was decided and what further evidence would be required. This also means they can flag errors at an earlier stage than at present.

32. The filing of an appeal should automatically trigger an internal review of the decision by the DWP. Crucially, if this review does not result in the claimant being awarded the benefits they thought they were entitled to, the appeal would then proceed without the claimant having to make another application.
33. This would reduce the resource demand on the DWP, particularly in PIP appeals given their quantity, as lodging an appeal triggers a further internal review by the DWP despite mandatory reconsideration having occurred. This should reduce the number of unnecessary PIP appeal hearings by having a single, better-quality review by the DWP. If the review outcome was not in the appellant's favour, it would proceed to appeal without further action needing to be taken. This new system would improve efficiency, reduce the unnecessary stress for claimants and improve initial PIP decision-making.

Accountability and transparency

Transparency

34. To improve trust, we would highlight the importance of the DWP being transparent and properly listening to the views and experiences of claimants. The DWP does not publish a clear and measurable set of performance standards. The DWP should establish and implement suitable performance measures, which are publicly available and accompanied by clear targets to ensure transparency and accountability. The DWP should commission an independent evaluation of its current monitoring and quality assurance systems and processes.
35. We welcome the commitment to look at recording assessments as standard and would encourage the DWP to do this on an 'opt out' basis. Whilst the DWP would need to ensure compliance with data protection, we note that the department already holds a lot of sensitive personal data as part of the application process. Recording assessments as standard would build greater trust and transparency in assessment quality and provide opportunities for assessment providers to learn and improve. We would urge swift progress on this issue.

Independent welfare inspectorate

36. The DWP have acknowledged, in the context of the Public Authorities (Fraud, Error and Debt) Act, the need for independent oversight of its powers. This principle applies more widely. A new independent welfare inspectorate is the most efficient way to do this; it would help improve standards and rebuild trust in the DWP amongst those who use its services and wider civil society.

37. The DWP have previously acknowledged that individuals find it difficult to interact with the department and there is a '*lack of trust*' with disabled people.²⁴ A new independent inspectorate would be a clear sign to the sector that the DWP is looking to ensure improved oversight of its services, particularly the treatment of vulnerable claimants, and crucially not marking its own homework. The DWP is one of the largest government departments without such an independent reviewer; the Home Office, for example, has the Independent Chief Inspector of Borders and Immigration which works effectively and we think should be the model (with statutory authority). Such an independent inspectorate would help the DWP identify potential issues, and identify solutions, with the PIP application process before they became serious, systemic issues.

Automation

38. We recommend that the DWP should publish information on how and when automation is used in the benefits decision-making processes and how it feeds into the final decision made by the decision-maker. The DWP should disclose the data inputs and parameters of the system, and where possible, the algorithms themselves, but at a minimum the criteria or indicators used by the system. The DWP should also be clear about the constraints of automated systems and what is, and is not, technologically possible. The DWP should work with civil society organisations to establish the most useful way to publish and present this information

Reasonable adjustments

39. It is crucial that DWP staff are given appropriate training to understand their legal obligations, policy and guidance and administrative processes. Our report raised concerns that, at every stage of the decision-making process, assessors, decision-makers and work coaches were not considering, or acting upon, their duties under the Equality Act to make reasonable adjustments. Consultees stated that there was a lack of awareness amongst DWP staff and contractors about what reasonable adjustments may be offered or available. The NAO has previously stated that work coaches lack confidence making reasonable adjustments.²⁵
40. We recommend specific training for DWP employees on reasonable adjustments, as well as clear policy on how to identify where a reasonable adjustment may be required and which are available. Claimants should be given specific information on the reasonable adjustments that are available at each stage of the process.

²⁴ DWP, 'How DWP involves disabled people when developing or evaluating programmes that affect them: constitutional paper 25' (1 March 2021)

²⁵ JUSTICE, 'Reforming Benefits Decision-making' (July 2021), p65

Conclusion

41. This review is an important opportunity to put the individual applicant at the heart of the PIP decision-making process. A clear focus on improving initial decisions, learning from Tribunal decisions and increasing accountability would improve the trust of disabled people in the DWP and help reduce the number of appeals to the Tribunal. We urge the Timms Review to seize this opportunity and take up the evidence-based recommendations set out above, which we would be happy to further engage on.

For more information, please contact:

Philip Armitage, JUSTICE – parmitage@justice.org.uk

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