

Timm's Review Response:

1. Please provide your response here

From our experience supporting people affected by cancer, we would encourage the Review to consider whether the current PIP assessment process fully captures the cumulative, fluctuating, and often non-visible impact of cancer and cancer treatment.

Many people undergoing or recovering from treatment do not necessarily experience one singular, severe impairment that is easily reflected within a points-based system. Instead, they often experience multiple lower-level but persistent difficulties across several domains simultaneously. These can include severe fatigue, pain, nausea, cognitive impairment ("brain fog"), disrupted sleep, reduced stamina, mobility limitations, anxiety, and difficulties managing everyday tasks consistently and reliably.

While these difficulties may appear moderate when viewed individually, the combined effect can significantly impact a person's independence, daily functioning, ability to work, social participation, and overall quality of life. For many people affected by cancer, the challenge is not always whether an activity can be completed once, but whether it can be completed safely, repeatedly, reliably, and sustainably over time.

This can be particularly difficult to capture within assessment models that rely heavily on fixed descriptors or snapshot assessments, especially where conditions fluctuate depending on treatment cycles, recovery periods, medication side effects, infection risk, or cumulative exhaustion over time.

We would therefore encourage the Review to consider:

- whether the current descriptors and points system adequately reflect cumulative and fluctuating conditions;
- the extent to which non-visible symptoms, such as fatigue and cognitive impairment, are recognised within decision-making;
- whether additional clinical evidence and supporting professional insight could play a stronger role alongside the functional assessment;
- and whether the process itself is sufficiently accessible for people who are seriously unwell or undergoing intensive treatment.

From discussions with frontline support teams, concerns were also raised around the length and complexity of the application and review process. For some people affected by cancer, particularly those undergoing intensive treatment, the process can feel overwhelming at a time when physical and emotional capacity is already significantly reduced.

Concerns were also raised regarding inconsistencies within the review process, including different review forms being issued to claimants, as well as variations in assessors' understanding of certain health conditions. This can sometimes lead to assumptions being made about an individual's abilities based on limited understanding of how particular conditions or treatments affect day-to-day functioning.

Overall, we would encourage a system that is better able to reflect the realities of living with fluctuating, cumulative, and complex long-term health conditions, while reducing unnecessary stress and administrative burden for those already managing significant health challenges.

2. Is there anything else you would like to tell us?

We would strongly emphasise that the existing SR1 fast-tracking process for people nearing the end of life must not be compromised as part of any future reforms. Fast and straightforward access to financial support is critically important for people with terminal illness and their families and should remain protected.