

Some ideas of phrases that may help you to complete a PIP form.

Not all phrases will apply to you / your young person, and there may be things that we haven't included below.

Q3	LEARNING BARRIERS
PREPARING FOOD	 ***** does not have the focus nor understanding to prepare and cook himself a meal using fresh ingredients.
	He is unable to read a recipe, understand or follow the instructions. He would not understand cooking terminology.
	 He generally has difficulties with organisation, independence and living skills.
	 ***** needs close supervision, step-by-step instructions and assistance to cook even the simplest of foods (eg, put a pizza in the oven).
	 The most ***** can prepare for himself is a bowl of cereal or toast (for example) but all items have to be accessible.
	He generally doesn't understand how appliances work and, even when shown, will forget.
	He struggles to find things in the kitchen.
	 ***** needs assistance to ensure the oven is set to the right temperature as he would struggle to do this independently.
	Needs support to measure and weigh ingredients.
	 He is clumsy, has poor attention and is easily distracted. An example of poor attention is that ***** will forget what he is doing, walk away and leave the oven-on (for example).



- **** requires constant reminders to be safe in the kitchen, especially with sharp utensils (eg, and remembering to use oven glove etc).
- He has a poor concept of time so would not be able to monitor cooking times without support.
- He would also be unable to judge if something is properly cooked or not, defrosted thoroughly etc.
 He would not check best before dates or understand how to store food safely and appropriately.
- He often gives up easily when things aren't going well.

- Does not have the confidence, independence nor inclination to go to the shop to purchase the ingredients due to his severe anxiety.
- He gets overwhelmed by the choice in shops, even with a list.
- Lacks confidence in his abilities, so will not even try.

- Due to *****'s hearing impairment the person helping him needs to be close by so he can hear them, and face-to-face as much as possible so he can read their lips.
- Physical difficulties make lifting and carrying things impossible. For example, he cannot lift a saucepan off the hob and cannot open the oven door or put a baking tray into or take out of the oven.
- He does not have the strength/co-ordination to chop ingredients, (for example).
- He has no strength in his wrists to carry things, open tins, packets etc, even with adapted



equipment (ie, a ring-pull opener). Light-weight pans when full are still too heavy for him to lift. He is unsteady on his feet and prone to falls which is a hazard in the kitchen. Could have a seizure at any time which is a hazard in the kitchen. Gets out of breath doing the simplest of task. • Visually, he struggles with depth perception so can misjudge distances (eg, when putting a plate on a work surface). ***** has to prepare food from a sitting position. He experiences sensory overload in shops due to the noise, lights, people etc, so avoids them. Q4 **LEARNING BARRIERS EATING &** When hungry ***** is not motivated to get himself something to eat. More often he will wait for food **DRINKING/TAKING** to be prepared for him. **NUTRITION** He has to be pre-warned before anything and needs repeated reminders to leave his room to eat at mealtimes. Even with these repeated reminders, he will often miss meals. Generally, he has a poor appetite, limited diet, and he will not try new foods. He has to be encouraged to eat and prompted when it is mealtimes. His poor sleep pattern affects when he eats, and he needs encouragement to eat at regular intervals. He needs reminding to make good food choices and to eat at good times during the day (eg, not before meals or during the night). He is encouraged to take multi-vitamins due to his poor diet.



 ***** needs reminding to drink enough fluids during the day.

EMOTIONAL BARRIERS (IE, ANXIETY, CONFIDENCE ETC)

- Due to anxieties, he will only eat at home.
- He stops eating during periods of severe anxiety/depression.
- He will not eat in front of people.
- Has a fear of vomiting (for example).

- Due to *****'s hearing impairment the person helping him needs to be close by so he can hear them, and face-to-face as much as possible so he can read their lips.
- He has to be physically fed by another person.
- Is Peg fed.
- Has physical difficulties which make it difficult for him to chew and swallow.
- His diet is monitored and he is under a dietician because he is underweight/overweight. A food diary is kept.
- Has no strength in his wrists to open packets etc.
- Due to fine motor difficulties he cannot use a knife and fork together effectively to eat, butter bread etc.
- He cannot hold a knife steady enough to cut his food effectively so he still needs support with this.
- Prefers to eat with his fingers/eat finger food, so has to be encouraged to use cutlery when appropriate.



- He has a tendency to overfill his mouth which is a choking risk, so he needs reminding to chew and swallow his food before putting more food into his mouth.
- He is clumsy drinking from cups and is prone to spilling drinks.
- He cannot yet drink from an open cup.
- Encouragement to eat at the table/sit appropriately.
- Sensory issues around eating/drinking cause further challenges (eg, he is very sensitive to smells, textures, the way food is presented etc).
- He doesn't seem to feel hunger and thirst.
- He needs support to avoid certain foods due to allergies etc.
- Suffers from reflux and needs encouragement to drink milk (for example).

Q5

MANAGING AND MONITORING TREATMENTS

- ***** has no awareness of when to take his medication nor how much to take, therefore he has to be reminded each day, otherwise he would not remember to take it.
- He can be reluctant to take medication in general, needing further encouragement and supervision to ensure that he does not spit it out (for example).
- **** would not be able to read, understand or follow the instructions on the label of medication.
- If he has a headache, for example, he wouldn't think to take paracetamol and would ask 'what should I do?'.



- **** needs someone to monitor his condition(s) as he is unable to do so himself.
- He would not remember his regular review appointments and could not attend them without support.
- At appointments, ***** needs someone to explain things to him in the simplest of terms to help him understand, and to help him hear what's being said to him.
- At appointments, **** needs someone to help him hear what's being said to him.
- He needs help to make good decisions around his health.
- With regard to therapies, ***** needs to build a good relationship with the therapist before he engages.

- He can be reluctant to take his medication, needing further encouragement, and supervision to ensure that he does. These repeated reminders can cause ***** to become frustrated and agitated.
- He is worried about the side effects of taking medication so needs reassurance around this.
- Some appointments (eg, immunisations, blood tests etc) are still very traumatic for ***** and he requires a lot of encouragement and reassurance to attend these.
- He needs to be prepared in advance for health appointments.
- All potentially harmful items (eg, tablets etc) still have to be locked away at all times.



	 Due to *****'s hearing impairment the person helping him needs to be close by so he can hear them, and face-to-face as much as possible so he can read their lips. At appointments, ***** needs someone to help him hear what's being said to him. Needs encouraging and reminding how important doing his daily physio/exercises/therapy. Without this support, encouragement and reminding, he is unlikely to do them at all.
	 Sensory issues around attending appointments cause further challenges (eg, size of the building, noise, crowds etc).
Q6	LEARNING BARRIERS
WASHING & BATHING	 ***** needs repeated prompts to undertake all of his self-care and personal hygiene needs, otherwise he is unlikely to do them.
	 He has low self-esteem and doesn't look after himself or care about his appearance.
	 He does not recognise when he needs to wash etc and would remain dirty if left to his own devices.
	On bad days, he may refuse outright to wash etc.
	 He needs some encouragement to get into the bath or shower as he is reluctant to do so, and also needs support to stay on task as he is easily distracted.
	 All appropriate products have to be accessible otherwise he is unlikely to use them, or he will use them inappropriately.
	He is easily distracted so needs support to stay on task.
	 He is encouraged to use an alarm to ensure he doesn't spend too long in the shower. He has no concept of time.



- He will do the bare minimum and is forgetful, so needs to be checked afterwards to ensure he has washed himself effectively rinsed shampoo out of his hair etc.
- He often lies and says he has done something when he hasn't.
- He needs additional reminders and guidance (eg to use a mirror to shave himself), and checked to ensure he has undertaken tasks (eg shaving) effectively.
- He also has to be prompted to clean his teeth properly as he doesn't brush them for long enough.
- He still needs help with his appearance (eg, brushing his hair, shaving, encouragement to trim eyebrows etc).
- He needs prompting to dry himself otherwise he will put on his clothes whilst he is still wet.
- Needs to be accompanied to hairdressers etc as he won't go alone.

- Due to OCD traits, he needs to be discouraged from over washing his hands.
- Has a fear of water.
- Lacks confidence in his abilities, so will not even try.

- He needs repeated reminders to take his Hearing Aids out to prevent them from getting wet, otherwise he is likely to forget.
- Due to *****'s hearing impairment the person helping him needs to be close by so he can hear



	them, and face-to-face as much as possible so he can read their lips.		
	 Due to physical difficulties, is unable to wash himself. 		
	 He has a grab rail to support him whilst he lowers himself onto a shower/bath seat. Someone has to be close by at all times in case he slips or falls. 		
	 He has no strength in his wrists so he uses an electric toothbrush and shaver which requires less effort. 		
	 He misses bits of his face when shaving due to his physical difficulties/vision problems so still needs some support with this. 		
	His nails still have to be cut for him.		
	 ***** has issues with his heart/blood pressure and will pass out if he stands up too quickly. This could present a danger in the bathroom. 		
	 Could have a seizure at any time which is a hazard in the bathroom. 		
	Gets out of breath doing the simplest of tasks.		
	Still needs accompanying to hairdressers etc.		
Q7	LEARNING BARRIERS		
MANAGING TOILET NEEDS	 When in the toilet ***** needs reminding to close the toilet door and flush the toilet. 		
	 Afterwards he needs reminding to wash and dry his hands and, on occasion, to re-dress appropriately. 		
	 ***** needs prompting throughout the day to use the toilet as has a tendency to hold himself until its urgent, and he doesn't recognise when he needs to go. 		



 She needs support to manage her periods (eg, reminders to change her pads regularly/dispose of pads appropriately).

EMOTIONAL BARRIERS (IE, ANXIETY, CONFIDENCE ETC)

- Due to OCD traits, he needs to be discouraged from over washing his hands.
- Reluctant to use public toilets and will hold himself until he gets home.

PHYSICAL BARRIERS (INC. SENSORY)

- Is doubly incontinent.
- He supports himself onto and off the toilet by holding onto rails. Someone has to be close by at all times in case he slips or falls.
- Has to be physically wiped.
- Physical difficulties means he has no strength in his wrists so he uses wet wipes to wipe himself which requires less effort.
- ***** suffers from pain, discomfort, anxiety relating to constipation. He is given reassurance around this and is encouraged to relax etc.
- Could have a seizure at any time which is a hazard in the bathroom.
- Gets out of breath doing the simplest of tasks.

Q8

LEARNING BARRIERS

DRESSING & UNDRESSING

- His clothes have to be accessible and laid out for him in advance/in the right order of sequence;
- ***** has a poor concept of time and no sense of urgency so needs repeated prompting to keep on time when dressing.



- He is easily distracted so needs support to stay on task.
- ***** requires reminders to change his clothes otherwise he would remain in the same clothes for days at a time, and even when they are obviously dirty. Does he change too often?
- He needs prompting to change for bed (eg, on occasion he has gone to bed fully clothed).
- He needs guidance on what to wear for what occasion and weathers (eg, ***** would assume that it is hot if it is sunny, even in winter).
- He would need to be encouraged to wear a coat when it's cold.
- ***** still needs help with fastenings (eg, buttons, zips, shoe laces, ties etc).
- He always has to be told which shoe goes on which foot.
- He has to be supported to correct mistakes when dressing.
- ***** will not say if he is too hot or too cold, so needs prompting to take clothes off/put clothes on.
- He is also unaware when clothes/shoes have become too small for him.
- His clothes are washed for him as he is unable to use the washing machine;
- His clothes are ironed for him as he is likely to burn himself on the iron or forget and leave it switched on.

 Lacks confidence in his abilities, so will not even try.



 Very particular about what he will wear/perfectionist.

PHYSICAL BARRIERS (INC. SENSORY)

- Due to *****'s hearing impairment the person helping him needs to be close by so he can hear them, and face-to-face as much as possible so he can read their lips.
- Has to be physically dressed.
- Due to his physical difficulties, he struggles to move certain parts of his body to effectively dress himself so needs some physical intervention from others.
- Dressing/undressing can cause him to lose his balance so someone has to be close by at all times in case he falls.
- Sensory issues around clothes cause further challenges when dressing/undressing (eg, labels have to be removed from clothes in advance of him wearing them, and he will only wear very specific items/materials).
- Could have a seizure at any time which is a hazard when getting dressed/undressed.
- Gets out of breath doing the simplest of tasks.

Q9

COMMUNICATING/TALKING LISTENING AND UNDERSTANDING

- Has significant speech & language delay/is nonverbal.
- It is difficult for others to understand him.
- He has a stutter/stammer/tourettes.
- ***** has difficulties understanding spoken language, and may not understand or react to warnings (for example).



- He struggles to verbally express and explain himself which can lead to frustration and a meltdown. He struggles to regulate his emotions and needs support with this.
- He needs additional time to process information and may need things repeated to him and/or additional explanations.
- Instructions have to be broken down and language kept simple.
- He needs support to be able to express or understand complex verbal information.
- His perception of what's being said to him may differ as he easily misinterprets things.
- ***** rarely instigates conversation (especially with unfamiliar people but with familiar people too).
- He struggles with social communication, interaction and the 'rules' of two-way conversation (eg, he interrupts as he finds it difficult to wait his turn).
- His answers and approach could sometimes be perceived as off-hand or rather impolite to people who do now know him or understand his needs.
- Usually answers in one word answers and doesn't elaborate/offer more information.
- He lacks empathy.
- In conversation he doesn't always respond appropriately and will go off-topic and make random, irrelevant comments with no basis.
- He wants to talk about subjects that interest him and can become very impatient when he can't say what he wants, when he wants.



- He also finds it difficult to get to the point and find the right words, and will often go 'round the houses'.
- Easily loses his thread when speaking.
- He is quiet/shy with unfamiliar people.
- He has some difficulties understanding facial expressions, body language and social cues.
- He doesn't recognise if someone is being mean or unkind to him.
- He has a tendency to speak too loudly so has to be encouraged to lower his voice.
- He does not understand jokes or sarcasm and is very literal.
- He is extremely reluctant to ask for help and wants others to ask or speak on his behalf.
- He assumes others always understand him, his needs etc.
- He would not ask for help if required.
- He won't ask questions to clarify points for himself, or if he needs more information.
- He doesn't like people talking about him however, and can get very upset if he doesn't get the response he expects.
- *****'s attention often has to be gained first and eye contact is fleeting and on his terms. He is more likely to look over someone's head.
- He has no filter and can come across rude.
- Does not greet others on meeting.
- Inappropriate language has to be discouraged.



- When anxious, ***** will repeatedly ask 'Why?' questions to reassure himself.
- Severe anxiety prevents him from speaking/communicating at all.

PHYSICAL BARRIERS (INC. SENSORY)

- Due to *****'s hearing impairment the person helping him needs to be close by so he can hear them, and face-to-face as much as possible so he can read their lips.
- Requires communication aids/another person to be able to communicate effectively.

Q10

READING

- He is completely unable to read.
- ***** struggles to read and has suspected Dyslexia.
- Whilst ***** can read very simple text, his comprehension is poor and he doesn't always understand what he has read. Therefore he needs support and explanations to help him understand basic written information.
- He would not be able to read or understand recipes, instructions, medication labels etc.
- He would also not be able to interpret/understand the meaning of signs and symbols unless they were very familiar to him, even if they were warning signs.
- He struggles to retain and process information and may forget what he has read. **** has to have information repeated to him for it to sink in.
- He won't/can't read text if it is too small.



• +	le is	a verv	/ slow	reader.
-----	-------	--------	--------	---------

 ***** rushes and doesn't read things properly and will miss large amount of information. He is also easily distracted when reading

EMOTIONAL BARRIERS (IE, ANXIETY, CONFIDENCE ETC)

- Too much information on a page of text can overwhelm him, so he needs help from someone to break it down for him.
- Lacks confidence in his abilities, so will not even try.

PHYSICAL BARRIERS (INC. SENSORY)

- He is a slow reader and due to his vision problems.
- Uses reading aids (eg, braille).
- Requires fonts to be enlarged.

Q11

MIXING WITH OTHER PEOPLE

- Often ignores others when spoken to.
- Prefers to be at home and not mix with others.
- Usually declines invitations/needs encouragement to join in social activities.
- ***** is a sociable young man but struggles with social rules, cues and boundaries, and finds social interaction difficult and confusing.
- He struggles with social rules, cues and boundaries, and finds social interaction difficult and confusing.
- He often misreads social situations which leads to misunderstandings, and he needs help from others to make sense of it all.



- He has a few friends but generally struggles to make friends/sustain friendships. He hasn't extended his friendship group in a long time.
- He wouldn't instigate a conversation with someone, especially unfamiliar people.
- Generally doesn't know how to engage with others.
- He invades other's personal space.
- When ***** feels wronged by someone, he will hold a grudge for a very long time. He has a very strong sense of right and wrong.
- ***** is immature for his age and prefers the company of people that are younger than him.
 People of his own age struggle to relate to *****.
- He wants to please which makes ***** very vulnerable as he can be easily led.
- He needs guidance on how to be appropriate in social situations.

- On bad days, he will completely withdraw and stay in his room needing encouragement to come out.
- Currently, the only social interactions **** he has is with ...
- ***** dislikes being in large groups of people and can't cope with noise/loud voice/multiple voices.

PHYSICAL BARRIERS (INC. SENSORY)

• Due to *****'s hearing impairment the person helping him needs to be close by so he can hear them, and face-to-face as much as possible so he can read their lips.



•	***** struggles to hear in groups when multiple
	people are talking, especially when there's
	additional noise, which can lead to isolation.
	Therefore he needs help to follow conversation.

- His attention has to be gained first as he doesn't always hear when he is being spoken to.
- Sensory issues around mixing with other people cause further challenges (eg, crowds, noise etc).

Q12

MAKING DECISIONS ABOUT MONEY

- I am currently *****'s Appointee to help him manage his money as he does not have the mental capacity to do so for himself.
- Whilst ***** has a very basic understanding of money, he still needs support and reminders about how to manage money safely and appropriately.
- He doesn't recognise coins.
- He is unable to budget and save money, and he sometimes makes impulsive purchases.
- He is unable to budget or pay bills, and needs bills explained to him.
- He doesn't know the difference between a debit and credit card, and wouldn't associate a bank card with actual money.
- He needs help to back purchases/with use of Bank card.
- He has to be reminded to set money aside to pay his phone bill etc.
- Whilst he also has a basic understanding of the value of money, ***** struggles to count coins and notes and would not know if he has been shortchanged.



- ***** does not check his bank account before making purchases or withdrawing money and therefore does not know whether he has enough money to pay for his purchases.
- He does not also appreciate the worth of money or know what he can afford (eg, he does not know that £1k is a lot of money).
- ***** is too trusting and therefore very vulnerable and would think nothing of giving his money away if he were asked for it.
- Needs frequent reminders about keeping his PIN number safe etc.

 Lacks confidence in his abilities, so will not even try.

PHYSICAL BARRIERS (INC. SENSORY)

• Needs visual aids.

Q13

GOINT OUT/PLANNING AND FOLLOWING A JOURNEY

- His needs are so great and he is so vulnerable that he cannot go anywhere alone.
- Needs someone to take him to College, and he won't go anywhere alone.
- He has no sense of direction and gets lost easily (even in familiar places, like College).
- ***** had to be shown and accompanied on new routes/journeys many times before he felt confident to do them alone.
- Only goes to a few very familiar places independently.



- ***** received support from the Travel Training Team.
- He is extremely reluctant to ask for help and wants others to ask or speak on his behalf therefore, if lost, he would not ask for help and would not be able to understand or follow directions.
- He would not be able to read or understand bus/train timetables.

- On bad days, he will completely withdraw and stay in his room needing a great deal of encouragement to come out.
- His anxieties are so great that he will not go anywhere alone.
- He will not use public transport due to fears for his safety or due to lack of confidence.
- He would also get very anxious and would struggle
 if there were unexpected changes to his journey,
 including delays. He is likely to panic and would be
 unable to 'think on his feet' and adjust his plans
 accordingly.
- Lacks confidence in his abilities, so will not even try.
- Needs a lot of planning and preparation ahead of every trip out.

- Due to vision/hearing problems, he does not have the confidence to use public transport.
- He struggles with depth perception so finds it very difficult to judge the distance from the kerb to the vehicle.



	 Sensory issues around going out cause further challenges (eg, crowds, noise, weather etc). Could have a seizure at any time which is a hazard when going out.
	Gets out of breath doing the simplest of tasks.
Q14 MOVING AROUND	He is unable to walk and uses a wheelchair.
	 He can just about manage the short walk from the house to the car, but would then have to sit and rest to recover before continuing.
	Once he has sat down, he will need physical help from someone else to get up again.
	 His physical difficulties and health conditions (ie, heart problems) cause him pain and discomfort, and to tire very easily.
	 His physical difficulties makes him unsteady and prone to falls.
	 If ***** falls he is not able to consistently put his arms/hands out to save himself, and he will need support from someone else to get up.
	 Outside the home, ***** is completely wheelchair- bound and is reliant on help from other people to provide him with the accessibility he needs including ramps, Evac support etc.
	 He needs support from other people due to his vision problems when moving around.