ource: UK House of Commons
Date: June 5, 2025
URL:
https://questions-statements.parliament.uk/written-questions/detail/2025-05-30/55860

https://questions-statements.parliament.uk/written-questions/detail/2025-05-30/55861

https://questions-statements.parliament.uk/written-questions/detail/2025-05-30/55862
Ref: http://www.me-net.combidom.com/meweb/web1.4.htm#westminster

[Written Answers]

Chronic Fatigue Syndrome: Health Services
Chronic Fatigue Syndrome: Research

Alison Hume

To ask the Secretary of State for Health and Social Care, when he will publish the Myalgic Encephalomyelitis (ME) Delivery Plan.

To ask the Secretary of State for Health and Social Care, what recent discussions he has had with the Chancellor of the Exchequer on funding for research into Myalgic Encephalomyelitis.

To ask the Secretary of State for Health and Social Care, what steps is he taking to help ensure that the National Institute for Health and Care Excellence guidelines for Myalgic Encephalomyelitis are followed by NHS staff.

Ashley Dalton

[This is a holding answer. It may be superseded/updated at a future date.]

The Department of Health and Social Care has indicated that it will not be possible to answer this question within the usual time period. An answer is being prepared and will be provided as soon as it is available.

Source: UK House of Commons
Date: June 19, 2025
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https://questions-statements.parliament.uk/written-questions/detail/2025-06-11/59250
Ref: http://www.me-net.combidom.com/meweb/web1.4.htm#westminster

[Written Answers]

Personal Independence Payment

Charlie Dewhirst

To ask the Secretary of State for Work and Pensions, what assessment her Department has made of the potential impact of proposed changes to Personal Independence Payment (PIP) eligibility criteria on (a) disabled people and (b) people with (i) autism spectrum disorder, (ii) ADHD, (iii) mental health conditions, (iv) chronic fatigue syndrome and other non-visible disabilities.

Sir Stephen Timms

No assessment has been made.

Information on the impacts of the Pathways to Work Green Paper has been published here 'Pathways to Work: Reforming Benefits and Support to Get Britain Working Green Paper'(opens in a new tab).

Impacts of the proposed changes depend on many factors including how the mix of conditions among claimants evolves over time, and behavioural responses. These impacts are uncertain at an overall England and Wales level, and it would not be possible to make an informed assessment at such a granular level as individual primary medical conditions.

After taking account of behavioural changes, the OBR predicts that 9 in 10 of those on PIP daily living at the point any changes come in will still be receiving PIP by the end of the decade.

No one will lose access to PIP immediately - and most people will not lose access at all. Our intention is that changes will start to come into effect from November 2026 for PIP, subject to parliamentary approval. After that date, no one will lose PIP without first being reassessed by a trained assessor or healthcare professional, who assesses individual needs and circumstance. Reassessments happen on average every 3 years.

We are consulting on how best to support those who are affected by the new eligibility changes, including ensuring health and care needs are met.

We have also announced a wider review of the PIP assessment to make it fair and fit for purpose, which I am leading. We are bringing together a range of experts, stakeholders and people with lived experience to consider how best to do this. We will provide further details as plans progress.

Even with these reforms, the overall number of people on PIP and DLA is expected to rise by 750,000 by the end of this parliament and spending will rise from 23bn pounds in 24/25 to 31bn pounds in 29/30.

Source: UK House of Commons
Date: June 23, 2025
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https://questions-statements.parliament.uk/written-questions/detail/2025-06-

13/59887

https://questions-statements.parliament.uk/written-questions/detail/2025-06-13/59888
Ref: http://www.me-net.combidom.com/meweb/web1.4.htm#westminster

[Written Answers]

Chronic Fatigue Syndrome: Wiltshire

Sarah Gibson

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to improve the diagnosis of myalgic encephalomyelitis in primary care settings in Wiltshire.

To ask the Secretary of State for Health and Social Care, with reference to the NICE document entitled Myalgic encephalomyelitis (or encephalopathy)/chronic fatigue syndrome: diagnosis and management, published on 29 October 2021, what progress has been made on implementing the guidelines in NHS trusts serving Wiltshire; and what monitoring is in place.

Ashley Dalton

Integrated care boards (ICBs) are responsible for commissioning specialist myalgic encephalomyelitis, also known as chronic fatigue syndrome (ME/CFS), services that meet the needs of their population, subject to local prioritisation and funding. The process of commissioning services should take into account best practice guidance such as the National Institute for Health and Care Excellence's (NICE) guidance on ME/CFS diagnosis and management, published in October 2021.

The NICE's guidelines provide recommendations on principles of care for people with severe ME/CFS, including hospital care and adopting a multidisciplinary approach involving access to various health and social care professionals based on needs, including diet and nutrition. NICE guidelines are not mandatory, but the Government does expect healthcare commissioners to take the guidelines fully into account when designing services to meet the needs of their local population, and to work towards their implementation over time.

We are developing a final delivery plan for ME/CFS, which we aim to publish soon. The plan will focus on boosting research, improving attitudes and education, and bettering the lives of people with this debilitating disease throughout England, including in Wiltshire.

Linked to the delivery plan, the Department has also been working with NHS England to develop an e-learning course on ME/CFS for healthcare professionals, with the aim of supporting staff to be able to provide better care and improve patient outcomes, including improving diagnosis.

Source: UK House of Commons
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https://questions-statements.parliament.uk/written-questions/detail/2025-06-19/61330
Ref: http://www.me-net.combidom.com/meweb/web1.4.htm#westminster

[Written Answers]

Personal Independence Payment: Chronic Fatigue Syndrome

Adam Dance

To ask the Secretary of State for Work and Pensions, what steps she is taking to support people with Myalgic Encephalomyelitis/Chronic Fatigue Syndrome impacted by changes to Personal Independence Payments.

Sir Stephen Timms

We have committed in the Universal Credit and Personal Independence

Payment Bill to introduce a new requirement that claimants must score a minimum of four points in at least one daily living activity to be eligible for the daily living component of PIP. This will target PIP at people who have a higher level of functional need in at least one area. Our intention is that the changes will apply to new claims and award reviews from November 2026, subject to parliamentary approval.

We are mindful of the impact this change to PIP eligibility could have on people. That is why we have committed that existing claimants who lose eligibility as a result of these changes will continue to receive PIP and its associated benefits and entitlements for 13 weeks following their award review. This protection is non-negotiable and is included on the face of the Bill. This transitional cover is one of the most generous ever and more than three times the length of protection provided for the transition from DLA to PIP.

Meanwhile, in the Green Paper we are consulting on what else is needed to support those who lose entitlement due to the reforms, including how to make sure that health and eligible care needs are met.
