

Advocacy

Replacement of Disability Living Allowance with Personal Independence Payment

The government's plans to abolish Disability Living Allowance (DLA) and replace it with a new benefit – Personal Independence Payment (PIP) – continue to be vigorously opposed by many patient and other grassroots organisations, as well as some high profile public figures – notably Boris Johnson, conservative mayor of London.

Like DLA, PIP will be payable at two rates for mobility. These will be termed 'enhanced' and 'standard'. There will also be these same two categories in respect of 'daily living', as opposed to the existing three levels of DLA care component. The assessment criteria will be radically changed, with the introduction of descriptors against which people will be assessed, as is the case with Incapacity Benefit and Employment and Support Allowance. The government estimate that, by 2015/16, there will be around half a million fewer people receiving PIP than would have been receiving DLA.

Disability Rights UK analysis indicates that the abolition of working age DLA will lead to higher NHS and social care costs – <http://www.disabilityrightsuk.org/dlaimpactassessment.htm>

Many of you may have heard of the 'Responsible Reform' report, commonly referred to as the 'Spartacus' report. Released on the 9th of January 2012, this report was entirely written, researched, and funded by sick and disabled people, their friends and carers. It makes a cogent case undermining the government's arguments for replacement of DLA with PIP, and presents a detailed investigation into the submissions made to the government's 2011 consultation and how the government subsequently misrepresented these by failing to duly acknowledge the overwhelming lack of support for the proposals.

This would include the submission from the 25% ME Group & Stonebird on behalf of people with severe M.E., (<http://www.25megroup.org/whatsNew.html> - see '17th March 2011 - DLA/PIP Consultation').

The 'Responsible Reform' report is available at:

http://www.ekklesia.co.uk/files/response_to_proposed_dla_reforms.pdf The Benefits and Work website news section provides excellent coverage, including the feedback on how the report was received. See <http://www.benefitsandwork.co.uk/news/latest-news> and look to the first half of January.

Greg and Linda Crowhurst at Stonebird were successful in having a video contribution by Linda, speaking up to keep DLA, posted on the Guardian following the paper's coverage on the Responsible Report in January. <http://www.guardian.co.uk/society/2012/jan/17/dla-video-stories-disability-benefits>

Following the DWP's admission that, unlike those behind the Responsible reform (or 'Spartacus') report, they did *not* carry out a statistical analysis of the responses to the PIP consultation, the Select Committee on Work and Pensions announced their own inquiry. In a report published 19th February (*Government support towards the additional living costs of working-age disabled people*) the Select Committee make a number of recommendations. For example:

The PIP assessment process needs to be empathetic, and avoid the mechanistic, tick-box approach adopted in the WCA in 2008. Private companies administering the assessment should be contractually obliged to adopt this more empathetic approach and to allocate sufficient time to allow for this in each assessment.

Reassessment of existing DLA claimants should only proceed once DWP is confident that the assessment process is accurate and working properly for new claims.

Tighter monitoring and regulation of private companies undertaking benefits assessment on behalf of DWP is required.

The PIP assessment contracts should stipulate that companies will only be paid for assessment reports that are "right first time" in the majority of cases.

Much of the media coverage of DLA reform has been negative and has often conflated DLA with out-of-work benefits such as ESA. This helps to fuel negative perceptions of disabled people. While the Government cannot control the editorial line taken in the media, it should exercise extreme care in the way it engages with the media on disability benefits and take further steps to explain the reasons for the reform to the media and the public. In particular, a more responsible approach to explaining and providing context is required when the Government releases statistics about disability benefit claimants.

The Select Committee report also calls on the government to assess the impact of the reforms on those people who lose their DLA and do not qualify for PIP, and the knock on consequences in terms of increased demand on other public services, such as social care and the NHS.

On the 18th of May the government responded to the Select Committee Report:

<http://www.publications.parliament.uk/pa/cm201213/cmselect/cmworpen/105/10502.htm>

In response to the Select Committee's point about the need for an empathetic assessment process, the government say:

The face-to-face consultation.. is fully intended to be a two-way conversation between the claimant and the health professional, allowing a detailed exploration of how the claimant's health condition or disabilities affect their day-to-day lives. The discussion at the consultations should not be mechanistic... The Department is not placing targets on the time required for face-to-face consultations and is making clear to potential providers that consultations will need to be as long as necessary to reach evidence-based conclusions on individual cases.

Regarding duration of awards and frequency of reviews, the government say:

In some cases awards may be fixed for a short period of time such as one or two years. In others, longer term awards of five or 10 years may be more appropriate. It is anticipated that ongoing awards would be used in cases where changes in need, either positive or negative, are unlikely. This approach will help to ensure that claimants are not required to go through unnecessary or inappropriate assessments.

The frequency and format of reviews will vary depending on the individual's circumstances and the likelihood of the impact of their health condition or impairment changing.

The government response also includes some details about the introduction of the new system. They say that:

- *'Snapshot' assessment is not intended: assessors will consider the impact of impairments over a year-long period.*
- *Full consideration will also be given to information provided by claimants themselves and from professionals, including specialists, who have been involved in supporting them.*
- *Claimants will be encouraged to provide evidence they think helpful and to tell the Department which professionals are best placed to offer advice.*
- *In some cases, where sufficient evidence already exists on which to carry out the assessment, face-to-face consultations will not be necessary.*
- *There will be provision for home visits where claimants are not able to attend other locations on the grounds of their health condition or disability.*
- *the enhanced rate of the mobility component of Personal Independence Payment will act as the gateway to the Motability scheme in the future.*

Timescale for Introduction of PIP

Claims for Personal Independence Payment will begin to be processed at Bootle Benefit Centre from April 2013. This will apply to people making *new* claims only, who are resident in areas including Merseyside, North West England, Cumbria, Cheshire and North East England. National 'roll out' for new claimants will begin in June 2013.

Reassessment of existing DLA claimants under the PIP system is due to start in autumn 2013, and will apply to those claimants who report a change in their condition or whose DLA award is due for renewal.

Meanwhile, a second round of consultation has been held, specifically seeking views on the latest draft of the PIP assessment criteria, including the proposed descriptor weightings and entitlement thresholds. This closed on 30th April, and we produced further joint input on which Stonebird took the lead. You can find this at: <http://carersfight.blogspot.co.uk/search?q=PIP>

A further consultation was launched on the 26th of March, and runs until 30th June and concerns "*the proposed rules intended to underpin the new benefit*".

The outcome, including finalising the criteria which will be used to assess eligibility, won't be known until later in the year. Rates of PIP will be announced in the government's autumn statement.

An '**Impact Assessment**', required by law in respect of all new legislation, was published by the government in May. This includes consideration of the impact of the introduction of PIP on **carers**, and on people on low incomes who currently receive a **disability premium** as part of their benefits.

Impact on Carers

The daily living component of PIP will be a gateway for receipt of Carer's Allowance. This applies to all awards of PIP that include the daily living component, regardless of whether this is at the enhanced or standard rate.

Carer's Allowance: Figures presented in the PIP Impact Assessment indicate that many carers who are in fact eligible for Carer's Allowance are not claiming their entitlement. Citing a Work and Pensions longitudinal study from May 2011, 56% of entitled carers were receiving Carer's Allowance, while a very substantial minority of entitled carers – 44% - were not in receipt of Carer's Allowance. Where the cared for person was in receipt of DLA the uptake among carers was somewhat higher, at 73%. ***However this still means that over a quarter of people who are entitled to claim Carer's Allowance because they are caring for a person who has been awarded the middle or high rate of DLA care component have not claimed this benefit.***

Disability Premium

PIP legislation will not affect payments of a Disability Premium to some claimants in view of low income. However the imminent introduction of Universal Credit as a 'wrapper' for working age benefits will bring about change in this regard.

Universal Credit is not a new benefit, rather it imposes an overarching structure on the various working age benefits, alongside provisions relating to people moving from benefits into work aimed at ensuring that 'work always pays'. The Universal Credit System will be introduced next year (2013).

It is proposed that entitlement to Employment and Support Allowance in the Support Group will be the passport to the replacement for Disability Premium, and that this replacement will provide an addition that is "*substantially higher than the current support component in ESA*" [Universal Credit Policy Briefing Note 1, Sept 2011 <http://www.dwp.gov.uk/docs/ucpbn-1-additions.pdf>] Increases will be phased in from 2013 "*as savings from the simplifications are realised*".

However the same cannot be said of new arrangements to replace the disabled and severely disabled child elements of Child Tax Credits. The government notes that child payments have increased at a faster pace than adult payments in recent years, and aims to align payments under Universal Credit.

Transitional protection will apply to the existing entitlements of people presently receiving premiums.

Face to Face Assessments

RECORDING: claimants can now have their face to face assessment recorded, provided that it takes place in an assessment centre. There is no charge for this service. However it is not available in respect of assessments that are conducted in the claimant's home. The reasons given relate to difficulties calibrating equipment in the home environment as opposed to an Atos office. Benefits & Work have more details and a sample letter you can use to [ask for your assessment to be recorded](#).

CANCELLING: If Atos call to cancel it is best to ask for the persons name, their position and return telephone number, and to request this in writing. Appointment cancellation and the reasons for same may not be scrupulously recorded in Atos files, and there is the risk that the DWP may attempt to blame the claimant in the event that an assessment does not take place.

Calls from the decision maker to people who have lodged an appeal

It has come to our attention that the DWP may telephone claimants who lodge an appeal and ask them for more information about their reasons for their appeal and about whether they will be submitting additional evidence.

To date we would simply have counselled against such telephone conversations, and there remain valid reasons why you may prefer *not* to do this.

However, there are reports that this can result in a claimant getting the decision changed without having to go to a tribunal.

This is a factor to bear in mind when deciding whether or not to deal with the DWP over the phone, and the issue of phone conversations does appear to have become a 'double edged sword', with potential for benefit and well as disadvantage.

Work Capability Assessment e-Petition

Those of you with internet access may wish to support this e-petition on Atos 'Work Capability' Assessments:

"We are concerned by reports of a high number of genuinely ill and disabled people, including those who are terminally ill, wrongly being declared fit for work by ATOS medical assessors. These errors cause hardship and distress to some of the most vulnerable members of society and cost the tax payer large sums in appeals. We therefore petition the government to look into the process of these medical assessments and ensure that the necessary changes are made to create a fair system that protects the sick and disabled."

<http://epetitions.direct.gov.uk/petitions/5828>

News, Information, Guidance.....

The End of Payments by Giro – what next?

Those of you who access welfare benefits via Giro will probably be aware that this system is about to come to an end.

While payment into a bank account can be a suitable alternative for relatively mobile people, those who are housebound face obvious drawbacks that need to be overcome, particularly if you are living alone and without trusted friend or family nearby to help.

If you do have a family member or consistent carer that you would wish to nominate as a representative then they can be empowered to legitimately access your bank account with your permission. (Precise arrangements depend on the type of account.)

However, if you have a multiplicity of carers many of whom are relative strangers – which is sadly the norm for many people with severe M.E. who live alone – then it is not feasible to nominate one person, and what's more you may not be comfortable to allow access to your bank account in these circumstances.

The best solution here would appear to be something called 'simple payment'. Under the 'simple payment' system you are provided with a card, much like bank card. You must first call a phone number to activate it, and you will be asked to choose a memorable date, to be cited when the card is used to withdraw funds. *Only* your benefits payments are paid into the account. And *only* money that is actually in the account can be withdrawn - *you can't go into debit*. Any person can take the card to a paypoint for you: these will be in a number of locations, including in some – but not all – post offices. Before the card is swiped at the paypoint the bearer has to show identification, and also identification for the card holder. They will be given a receipt for the amount withdrawn.

If you are still receiving payments by Giro and haven't taken any steps to let the Department of Work and Pensions know which option you wish to use then you can expect a letter about 'simple payment' very shortly.