

KEEPING YOU UP TO DATE WITH WELFARE AND DISABILITY RIGHTS

UPDATES

Keeping up with new legislation is costly and time-consuming. Our bi-monthly Updates keep you informed throughout the year with the latest welfare and disability rights news.

OUR OBJECTIVES

- To mobilise disabled people's leadership and control – in our own lives, our organisations and society;
- To achieve independent living in practice;
- To break the link between disability and poverty;
- To put disability equality and human rights into practice across society.

OUR PUBLICATIONS

Our publications and web-based resources are written for disabled people and trusted by professional advisers, MPs, journalists and policy workers.

FURTHER INFO

For further information about Disability Rights UK membership, publications and activities and campaigns visit www.disabilityalliance.org

STOP PRESS

Disability Rights UK is arranging a meeting with the DWP to discuss its plans for the implementation of the Personal Independence Payment. If your organisation would like to attend, contact neil.coyle@disabilityrightsuk.org

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An important announcement

DISABILITY ALLIANCE IS NOW PART OF DISABILITY RIGHTS UK

Disability Rights UK was formed on 1 January 2012, through a merger of Disability Alliance, Radar and the National Centre for Independent Living.

We are creating the largest national pan-disability organisation led by disabled people. Our vision is a society where everyone with lived experience of disability or health conditions can participate equally as full citizens.

For more information see the article by our CEO Liz Sayce on page 11

Disability Rights UK



Benefits, policy and campaign updates

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ESA wrongly refused to people with visual/hearing impairments

In this issue our lead story concerns the contents of new DWP guidance uncovered by Disability Rights UK member The Royal National Association of Blind People (RNIB). Alban Hawksworth of RNIB's Legal Rights Service highlights that the guidance means that potentially all employment and support allowance (ESA) Work Capability Assessments (WCA) carried out from April 2011 in relation to those with hearing loss or sight loss may have been wrongly determined.

On 23 November 2011 the DWP and ATOS published updated guidance for Health Care Professionals (HCPs) who carry out ESA medical assessments, advising them about the scope of activity 7, 'understanding communication' in the Limited Capability for Work test (LCW). Activity 7 of the WCA Limited capability for work assessment – physical functions, test provides:

Understanding communication by both verbal means (such as hearing or lip reading) and non-verbal means (such as reading 16-point print) using any aid it is reasonable to expect them to use, unaided by another person.	Activity 7
A Cannot understand a simple message due to sensory impairment, such as the location of a fire escape	5 points
B Has significant difficulty understanding a simple message from a stranger due to sensory impairment	15 points
C Has some difficulty understanding a simple message from a stranger due to sensory impairment	6 points
D None of the above apply	0 points

The guidance also suggests which descriptors might be appropriate for claimants with various degrees of sight loss or hearing loss. The guidance [Update to Standard 43/2011](#) is available @ www.disabilityalliance.org

What is immediately striking about this guidance is that it is a complete reversal of the official interpretation of this activity within the LCW. The revised guidance confirms that it is possible to score points under this activity if a person has sight loss but good hearing, or hearing loss with no sight loss.

The updated guidance clearly admits that this is a U-turn and that previous guidance was incorrect:

'Previously guidance indicated that if a person could understand a message through either the written or spoken word, they were unlikely to be awarded a scoring descriptor in this activity ... Thus overall, you must make an assessment of a person's ability in both sensory modalities. Where a restriction is identified in one area, it is likely they will be awarded a scoring descriptor'

It is important to emphasise that activity 7 within the LCW test did not change in November 2011, merely the official interpretation of it.

What does this mean for people with sight loss or hearing loss who were assessed for ESA before November 2011?

It is very likely that they have been wrongly assessed under activity 7. They may even have failed the LCW assessment and been told they are no longer entitled to ESA (or failed to be successfully converted onto ESA from Incapacity Benefit) as a result of guidance that DWP and ATOS now admit was incorrect. How did this situation come about?

The background to the revised LCW

ESA was introduced in October 2008, and the LCW test at that time included separate assessments of the level of a claimant’s sight loss, hearing loss and speaking difficulties. It was possible to score up to 15 points in any one of three sensory activities: Speech, Hearing and Vision. So a person with a severe impairment in any of these areas would be likely to be eligible for ESA.

However, almost immediately after the introduction of ESA the DWP began an internal review of the effectiveness of the WCA assessment. This review decided in October 2009, that ‘on the whole the [ESA] assessment accurately identifies individuals for the most appropriate benefit’, but that ‘the descriptors could be amended to better account for adaptation’ and that:

‘The activities Speech, Hearing and Vision, are overly focused on an individual’s impairment, rather than the disability engendered by it

In focusing activities on the disability rather than the impairment, the descriptors will be able to distinguish between those individuals who have adapted to their condition, and therefore reduced their level of disability, and those that have not, remaining significantly limited by their impairment’

[Work Capability Assessment, Internal Review](#) is available @dwp.gov.uk

The internal review recommended a radical re-shaping of the WCA that resulted in the three sensory activities being removed from the test.

Three new activities were proposed to cover the difficulties experienced by people with sensory loss – ‘making self understood’, ‘understanding communication’ and ‘navigation and maintaining safety’.

The DWP recognised that these proposals were not welcomed by sight loss organisations, and in an [addendum to the internal review](#) said:

‘The Department is aware of the challenges associated with assessing the degree of adaptation associated with visual impairment. It is our intention to continue to work with experts and specialist disability organisations to refine the descriptors related to sight loss.’

Unfortunately this did not happen, and the internal review proposals were incorporated into a new WCA test, used from around April 2011.

Interpretation of the new activities

Although it was the intention of the DWP that these new activities and descriptors would not be ‘impairment specific’, in practice the new activities were seen as direct replacements for the old, merely slightly more restrictive. This mistake was reinforced by poorly re-written guidance.

The ‘making self understood’ activity replaced the ‘speech’ activity, but with an added consideration of whether the claimant could communicate by written notes.

The ‘navigation’ activity was seen as a replacement for ‘vision’, so accordingly the guidance for HCPs on this activity concentrates on assessment of sight loss. In RNIB’s experience people with sight loss are routinely assessed under this activity, although we have had registered blind people score 0, 9 or 15 points, depending on the HCP or decision maker’s view on their ability to get around independently. Crucially, HCPs and decision makers accept that this activity relates to people with sight loss.

However, the ‘understanding communication’ activity was incorrectly presented in guidance as solely a replacement for ‘hearing’. The previous guidance (still on DWP website) treated this activity as a test primarily of hearing, and only when it had been established that the claimant had hearing loss should their ability to read a message then be assessed.

There was no acknowledgment in the guidance that a visually impaired person with no hearing loss should even be assessed for this activity.

This is borne out by RNIB's experience of appeals from visually impaired clients against ESA refusals under the revised LCW. We have seen roughly 16-20 DWP appeal bundles, including ESA85 medical assessment reports and decision makers' explanations of decisions – in none of these submissions has the 'understanding communication' activity even been considered. This leads us to conclude that there has been a systematic failure to properly address the requirements of the LCW activities.

We already know that the guidance provided to HCPs (and indirectly to JCP decision makers) was incorrect. We also suspect that the same flawed logic – not applying the activity to people with sight loss, only allowing points under the activity if a person has both hearing and sight loss – is embedded in the Lima computer programme that guides HCPs through the medical assessment.

Potentially every ESA medical carried out from April 2011 to December 2011 for a claimant with hearing loss or sight loss has been incorrect.

RNIB is writing to the DWP to ask that it:

- 1 Undertakes to re-examine those WCA medicals for people with difficulties in understanding verbal and non-verbal communication that were carried out under the incorrect guidance.
- 2 Amends the new guidance, in respect of the advice about a person's ability to read braille being taken into account when assessing whether they can understand a written message from a stranger.
- 3 Provides an assurance that the Lima computer programme used by Atos HCPs does not require that a claimant has both hearing and sight loss in order to recommend that the HCP considers descriptors from the activity.

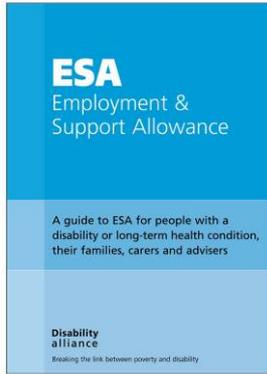
Disability Rights UK is supporting RNIB in its call that the DWP take proper corrective action as a result of its new guidance to ensure that someone with a hearing or sight loss is not wrongly denied their proper entitlement to ESA.

However, those with a hearing or sight impairment who believe that they may have been wrongly refused ESA since April 2011 can consider making a late appeal against the decision. The time limit for making a late appeal is 13 months from the date of the decision being appealed against.

If you feel you may have been wrongly assessed for ESA you should seek advice from an advice agency as to whether you have grounds to appeal and how to do this.

We produce a factsheet on [Finding a local advice centre](#) available @ www.disabilityalliance.org

People with a visual impairment seeking who wish further information about this issue can contact the [RNIB national Helpline](#) on 0303 9999 1234 or helpline@rnib.org.uk



A guide to
Employment
& Support
Allowance

A guide to ESA for people with a disability or long-term health condition, their families, carers and advisers

Disability alliance
Breaking the link between poverty and disability

2nd edition

Stay informed – know your rights

This guide covers all aspects of employment and support allowance (ESA) including the latest work capability assessment rules. Our 2nd edition explains:

- The migration process for existing incapacity benefits claimants
- The claim process for new claimants
- Eligibility rules and the conditions that must be met to continue to claim
- The impact ESA has on other benefits and details of financial help if your claim is unsuccessful
- How decisions are made and how to challenge a decision

Disability
alliance

58 pages

£10.00 post free per copy

£5.50 for people on benefits

Government reverse Welfare Reform Bill improvements secured in House of Lords



Neil Coyle, Disability Rights UK's Director of Policy, outlines how parliamentary 'ping pong' has disappointingly seen improvements to the Welfare Reform Bill

secured by the Lords reversed by the Government.

Lords amend Bill

The Government suffered a series of defeats in the House of Lords on its Welfare Reform Bill plans. Amendments accepted by Peers included:

- doubling the proposed time limit for contributions-based Employment and Support Allowance (ESA) to a minimum of two years for people in the Work-Related Activity Group;
- protecting access to youth ESA;
- excluding child benefit from the £26,000 per year benefit cap; and
- minimising cuts to disabled children's support.

The [full list of amendments](#) can be viewed as part of online Bill documents @ www.publications.parliament.uk

PIP concessions and 500,000 disabled people to lose DLA eligibility

Whilst no major Personal Independence Payment amendments were made (despite narrow votes), the Government made concessions to proposals to stave off Peers' pressure. DWP revealed just before PIP plans were discussed in the House of Lords that Government proposals would mean half a million less disabled people able to access PIP by 2015/16. The DWP [PIP: assessment thresholds and consultation](#) is available @ www.dwp.gov.uk

Peers raised concerns about the Government's timetable to deliver such significant changes to eligibility for support, with the 2.2 million disabled people (aged 16-64) eligible for DLA by 2015/16 being reduced to 1.7million through the ending of low rate care DLA payments and tougher eligibility criteria across the new criteria for PIP. When Government DLA plans were initially announced (June 2010), the initial target was to cut 360,000 people from support.

Disability Alliance analysis suggested about 750,000 disabled people would need to lose help to meet the £1.3billion a year savings target (see: www.disabilityalliance.org/r68.doc).

In order to meet the cuts target, the new assessment consultation reveals the Government will move about 110,000 disabled people out of the very highest levels of payments (ie instead of 640,000 people receiving the high rate care and high rate mobility levels of support in DLA projections, PIP will see 530,000). This means disabled people with the very highest levels of need will lose some support and could mean disabled people and their families are made more reliant on the NHS and council care services, or are unable to maintain current Motability payments or stay in work for example.

Former Disability Alliance President, Lord Low, working with Baroness Wilkins, Baroness Tanni-Grey Thompson and others, looked set to win votes on ensuring a better trialling of plans was implemented before PIP was rolled out nationally for people currently receiving DLA.

Peers cited the problematic – and costly – Work Capability Assessment introduction to demonstrate the need to ensure the new PIP assessment is effective. DWP pay Atos Healthcare £100million per year to run the WCA and contributes over £20million per year to the Tribunals Service for appeals to WCA decisions.

The [Hansard record of the Lords debate](#) is available @ www.publications.parliament.uk with particularly powerful contributions focused on the consequences of the cut which DWP is ignoring. For example, Baroness Tanni-Grey Thompson said she believed: *"Disabled people will suffer first and then their families, followed quickly by the NHS and councils"*.



Lord Low

Baroness Wilkins

Tanni-Grey Thompson

Spartacus report undermines support for Bill claimed by Government

Peers also raised concerns with DWP’s suggestion that ‘disabled people are at the heart of DLA reform’ by highlighting the *Spartacus* report findings. The *Spartacus* report, available @ www.ekklesia.co.uk demonstrates that just 7% of organisations’ responses were fully supportive of PIP proposals in February 2011.

Ministers have also suggested some disabled people and organisations support PIP proposals when the consultation responses reveal no significant support for PIP overall, with most organisations highlighting the potential damage cutting 20% of the DLA budget could have by the 2015/16 target date.

New PIP timetable: Summer 2013 for national rollout

However, despite the debate and Peers’ concerns the largest concession was simply to delay rollout of the PIP plans. The Government will still introduce PIP for new claimants from April 2013, with people currently receiving DLA being transferred to PIP (or losing support) from ‘Summer’ 2013. Summer has not been defined more clearly officially yet but DWP indicate June. This announced short trial as a concession from Government meant support for amendments focused on the assessment process were lost by just 16 votes. Our [PIP factsheet](#) has been updated to take account of the Government’s concessions and is available @ www.disabilityalliance.org

Government rejects amendments in Commons

The Government overturned all Lords amendments to the Welfare Reform Bill when the legislation received it’s Commons ‘ping-pong’ debate (ie the session to analyse differences in the Bill after completing Commons and Lords stages) on 1 February 2012. Ironically, because the PIP concession was made at Despatch Box (and confirmed by DWP quickly afterwards) the delay to PIP rollout is secured. Had a vote been lost by Government on this issue it now seems likely it would have been overturned too.

The [full list of MPs who voted to reject Lords amendments](#) is available @ www.publications.parliament.uk

We urge you – and your members – to write to your MP outlining how the Bill could affect you.

Or email Neil Coyle at ncoyle@disabilityrightsuk.org and we will ensure your concerns reach your MP with our briefing on the Bill. Sadly, we believe MPs will be surprised when they realise who is affected by Bill provisions, what the impact will be and what the costs are involved (for disabled people and for other services when direct financial support is lost).

Next steps: Bill back to Lords for Valentine’s Day

The Bill now returns to the House of Lords – with a further twist: the Government has declared the Bill has ‘financial privilege’ which means the Parliament Act could be invoked to ensure it completes its remaining stages in the form the Government would like. This is apparently due to the level of savings the Government is seeking to take from welfare cuts - with more than £2 billion per year being cut from ESA and DLA alone. Lords will be debating Commons changes on Tuesday 14 February and Peers are indicating they will still be seeking to secure further concessions from the Government.

We support the continued seeking of improvements to the Welfare Reform Bill. It has significant implications for millions of disabled people, their families, broader public services – and especially the NHS and council care services – and has been woefully under-analysed by DWP.

We will continue to try and influence DWP plans and welcome members’ involvement. We are arranging a meeting with DWP on PIP implementation and if you would like to attend please contact ncoyle@disabilityrightsuk.org to reserve a place. The date is not yet set but the meeting will be in London at the Disability Rights UK office.

As a last resort, we are also working with other organisations to examine potential legal challenges to the Bill provisions when they are implemented. We will keep you informed of our plans – please do join Disability Rights UK and stay involved.



Our fully up-to-date [PIP factsheet](#) is available @ www.disabilityalliance.org

DWP consult on WCA test for cancer patients

The DWP has launched a consultation to gather evidence and views about proposed changes to the way the Work Capability Assessment (WCA) considers those who are receiving treatment for cancer.

Following evidence supplied by Macmillan Cancer Support as part of Professor Harrington’s review of the WCA the DWP had hoped to introduce its proposed reforms in April 2012. However, following detailed discussions with Macmillan, the DWP has been unable to secure its support to its proposals. As a result, the Department says it now intends to seek a wider range of views through this consultation before reaching a final decision.

The DWP says that the available evidence demonstrates that it is not reasonable to differentiate between the debilitating effects of different types of chemotherapy, radiotherapy to certain sites of the body and combined chemo-irradiation.

Therefore it proposes to change and expand current provisions to include individuals awaiting, receiving or recovering from:

- treatment by way of oral chemotherapy, except when the therapy is continuous for a period of more than six months;
- combined chemo-irradiation; or
- radiotherapy in the treatment of cancer in the following sites: Head and neck; Brain; Lung; Gastro-intestinal; Pelvic.

However, the DWP maintain that the evidence supplied by Macmillan shows that the current provision of automatic entitlement to the ESA support group for non-oral chemotherapy treatment is no longer valid and instead:

“The presumption would be that an individual undergoing the above cancer treatments should be in the Support Group. Each individual would be assessed on a paper basis and the vast majority would be placed straight into the Support Group. ... In a small number of cases, where the evidence indicated that the debilitating effects might be limited, individuals could be invited to a face to face assessment, and those who may be capable of work in the future would receive support through the work-related activity group.”

Macmillan Cancer Support has strongly criticised the proposed WCA changes highlighting the unambiguous recommendations from cancer experts and 30 cancer charities who have clearly stated that patients going through debilitating cancer treatment – and who have to leave work – should be automatically eligible for ESA.

Until now, cancer patients receiving non-oral chemotherapy have been exempt from work-focused interviews and medical assessments to determine whether they may be fit for work, while oral chemotherapy or radiotherapy patients have not been given this protection. Cancer charities had asked the DWP to end this discrepancy as the side-effects of oral chemotherapy and radiotherapy can be just as physically debilitating as non oral chemotherapy. However, instead of extending exemptions to particularly vulnerable cancer patients, the DWP is proposing to remove these from all.

Ciarán Devane, Chief Executive of Macmillan Cancer Support, says:



“Cancer patients in the middle of treatment are, in many cases, fighting for their lives. Yet the Government is proposing to change the rules so all cancer patients will have to

undergo a stressful assessment to prove they are unable to work. This shows a clear disregard and misunderstanding of what it’s like to undergo punishing treatment. Patients who previously had peace of mind would face the stress and practical difficulties of getting assessed for work they are too poorly to do.”

The consultation, which closes on 9 March 2012, [WCA: An informal consultation on accounting for the effects of cancer treatments](#) is available @ www.dwp.gov.uk

News in brief

Welfare rights, social care and disability-related updates

The level of accuracy of work capability (WCA) reports is ‘worryingly low’ even where employment and support allowance (ESA) is awarded, according to a new research report by Citizens Advice.

Right first time? stresses that it is crucial that WCA reports provide an accurate account as not only does the assessment impact directly on awards for ESA, it is also increasingly used to determine entitlement to DLA.

In addition, the content of the assessment report, and the awarding of ESA, is set to become ever more significant. This is because it is proposed that the award of ESA will become the main route to disability-related support within Universal Credit and could also play a role in deciding entitlement to the Personal Independent Payment.

The new Citizens Advice research is based on a detailed analysis of the 37 WCA reports collected from CAB clients applying for ESA across the country. 16 of these reports reveal a serious level of inaccuracy, 10 a medium level of inaccuracy – enough to have a detrimental effect on an award of DLA – and only 11 had a low (or no) level of inaccuracy.

As a result, Citizens Advice makes a series of recommendations, designed to increase the accuracy of assessments, including that:

- the DWP conducts regular, independent, assessments of the accuracy of WCA reports prepared by ATOS health care professionals;

- DWP decision makers must be trained to examine the internal consistency of WCA reports from Atos, and more readily reject reports that do not justify the recommendations made;
- the DWP should consider imposing financial penalties on Atos for every inaccurate report that they produce; and
- WCAs must not be used for other purposes – such as deciding a DLA award – until the accuracy of the reports has been independently verified or the claimant has had an opportunity to correct errors.

In addition, Citizens Advice says that while medical evidence must be requested in all cases from the professional nominated by the claimant as knowing them best this should not be the responsibility of the claimant. This is because this will otherwise lead to a two-tier system whereby the poorest and most vulnerable claimants, who cannot afford to pay for the evidence, could receive a less reliable decision.

[Right first time?](#) is available @ www.citizensadvice.org.uk



Abolition of DLA – Responsible Reform?

A new report written by disabled people, their friends and carers argues that the government has given a ‘highly misleading’ account of the true extent of opposition to its plans to abolish DLA and replace it with the Personal Independence Payment (PIP).

The report, *Responsible Reform* – since dubbed the ‘Spartacus report’ - is based on an analysis of 523 group responses to the Government’s 2010 PIP consultation, obtained following Freedom of Information Act requests.

In its summary of responses received, published in April 2011, the DWP said ‘it was clear from the responses received that some reform of DLA was welcomed.’ However, *Responsible Reform* says this presents a highly misleading view of the responses it received as overall:

- 74% of respondents were against the proposals for PIP;
- 19% had mixed views; and
- only 7% supported it fully.

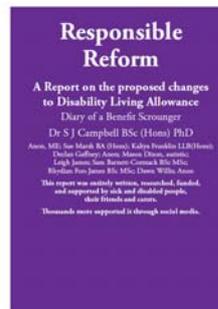
Other key findings include:

- 98% of respondents object to the qualifying period for benefits being raised from three months to six months;
- 99% of respondents object to disability living allowance no longer being used as a qualification for other benefits; and
- 92% oppose removing the lowest rate of care component support for disabled people.

In addition, the new study highlights that:

- the consultation process itself did not meet the Government's own Code of Practice as it was two weeks shorter than recommended and took place over the Christmas holidays;
- the Welfare Reform Bill was also presented to Parliament two days before the consultation ended, meaning that responses could not be taken into account when drafting legislation for PIP; and

- the evidence does not support a 30% rise in DLA claims – used to 'justify' to the need for PIP as claimed by the Government throughout their consultation – but that the figure is actually 13%.



[Responsible Reform](#) is available @ www.ekkleisia.co.uk

Current system for disabled and older people's social care unfair, confusing and unsustainable

The current system for disabled and older people's social care is unfair, confusing and unsustainable, according to a new report by Age UK.

Care in Crisis 2012 shows that this year spending on older people's social care in England has fallen half a billion pounds short of even maintaining the inadequate levels of provision in place when the coalition Government came to power.

In order to maintain the same levels of service as in 2010, the report's projections show that the Government ought to be spending £7.8 billion this year. In fact councils have only budgeted £7.3 billion in the face of substantial reductions in central government funding.

In addition, its analysis shows that the combined impact of growing demand for services and a £341 million reduction in older people's social care budgets this financial year – equivalent to a 4.5% cut – has created a £500 million shortfall.

Among other key findings of *Care in Crisis* are that:

- charges for care provision are increasing so that every person using local authority care services is now being charged £360 per year more in real terms than in 2008/2009; and

- in 2005, around half of councils provided support to disabled and older people assessed as having 'moderate' care needs but by 2011 the figure had fallen to 18%.

Based on these figures, Age UK projects that, by 2012/2013 the Government will need to spend £1 billion more than this year just to stop things getting any worse.

With the launch of its new report, Age UK has launched a *Care in Crisis* petition calling on the Government to reform the care system for disabled and older people. It aims to collect 100,000 signatures and will deliver them to the Government ahead of the planned White Paper on the future of long-term care.



You can sign up to [Age UK's Care in Crisis petition](#) calling for urgent care reform @ www.ageuk.org.uk

The report [Care in Crisis 2012](#) is also available @ www.ageuk.org.uk

Members' section

Welcome to Disability Rights UK



On 1 January 2012 Disability Alliance (DA) merged with the National Centre for Independent Living and Radar to form Disability Rights UK. All current DA members are also members of Disability Rights UK until April 2012. Disability Rights UK CEO Liz Sayce OBE outlines the new unified organisation's vision and objectives.

We are really excited to be creating the largest national, pan-disability organisation led by disabled people. And hugely grateful to DA members and members of the former Skill, for all your involvement and ideas that helped create our first Strategic Plan.

It has never been more important to have a strong organisation that stands up for disabled people's rights and supports disabled people's organisations (DPOs). DA's campaigning has kept disabled people's poverty high on the agenda – in the media, in parliament, in policy. We will offer members all the services DA offered – and more – as well as campaigning, for instance to achieve independent living in practice and to break the link between disability and poverty.

Before looking forward, I want to pay tribute to everyone who has made a difference with and in DA. In my work at the Disability Rights Commission, and then Radar, I know DA's great history and achievements. Without DA and its members we would not have a strong national voice on disabled people's poverty, nor would we have outstanding products like the *Disability Rights Handbook* and factsheets on different benefits used by tens of thousands of people.

It is impossible to honour everyone who has been part of this amazing history – starting with pioneers in the anti-poverty movement, like Peter Townsend, as well as disabled activists. But I would like to celebrate the achievements of every DA member, every trustee, every volunteer, every staff member ever involved in DA. Change could not have happened without all those people – the campaigners, the protestors, the innovators, the policy makers who understood, the journalists who covered the issues.

And so to the future – Disability Rights UK

Our new vision is a society where everyone with lived experience of disability or health conditions can participate equally as full citizens.

Across all three organisations, 92% of members supported (or supported strongly) that vision and 93% supported the objectives, which are:

- To mobilise disabled people's leadership and control – in our own lives, our organisations and society;
- To achieve independent living in practice;
- To break the link between disability and poverty;
- To put disability equality and human rights into practice across society.

The first objective underpins the other three: as more disabled people are able to influence changes, it becomes more likely that we can make progress on independent living, poverty reduction and equality.

We live in very challenging times of service cuts and stigmatising statements about supposedly 'undeserving' disabled benefit recipients. We need a strong and sustainable organisation led by disabled people to push positive change – and to speak out when equality and independent living are jeopardised.

We are in the great position of being able to build on the work of National Centre for Independent Living, Disability Alliance, Radar – and also Skill (the former Bureau of Students with Disabilities). Some of their achievements include:

National Centre for Independent Living produces great guides on independent living in practice, for instance how to manage your personal assistant (PA); and supports disabled people's organisations locally

Radar has worked in Parliament and supported the All-party Parliamentary Group on Disability, working with Jane Campbell and others to secure important policy changes (like concessions on the welfare reform bill). Radar has also supported over 450 disabled people through leadership programmes run by and for disabled people.

By coming together we will be able to campaign on vital issues such as disabled people's poverty – drawing on our joint knowledge of benefits issues and also employment, apprenticeships and career opportunities. And on independent living – linking work on social care, transport and more. We won't be able to do everything at once – but we can make the links, to make the campaigns more compelling.

We will have greater reach than any one of our organisations could alone: we expect to have 750 organisational members, 1500 individual members, and a website attracting half a million visits a year.

We plan to strengthen our offer to our members and our capacity to work collaboratively with members on campaigns, local innovation and more. We are developing a protocol for how we work with the national Scottish, Welsh and Northern Ireland organisations, so we support each other and join forces where this will increase impact.

We are able to make some efficiencies by coming together – one chief executive instead of three, one building instead of three, and so forth. This merger should make us more sustainable.

Over the coming months we will be working on the specifics of building a single organisation – from a new website to common policy positions and more.

I very much hope that you who have been involved with DA will want to be involved with us. I look forward to working with members, partners and supporters to make a significant difference to disabled people's rights in practice. Do let us know if you would like to discuss any aspect of the merger or the plans for Disability Rights UK.

We are holding events in every region and an Extraordinary General Meeting on 21 March – so there will be lots of opportunities to get involved and help shape the new organisation. I look forward to that.

Disability Rights UK – Join us now

Disability Rights UK's vision is of a society where everyone with lived experience of disability or health conditions can participate equally as full citizens.

By being part of Disability Rights UK you will be helping realise this vision.

Membership of Disability Rights UK is open to organisations and individuals.

- We will encourage Members to be involved.;
- We need your views, as well as information about your experiences;
- We will ask you about these in surveys to give us evidence for our policy, research, media and campaigning work

- We will share information and good practice through our newsletters and at Disability Rights UK events and conferences;
- We will keep you up to date on Government plans for welfare and social care reform and involve you in work to influence and improve its agenda;
- We will also be undertaking our own research on people's aspirations for welfare and support - join now to help lead the debate.

Disability Rights UK



Information on the benefits and costs of membership is available @ www.disabilityrightsuk.org

Skill at Disability Rights UK – an update

Information and Advice services

During the last three months the Helpline and email advice service received a wide range of enquiries, broadly as follows:

Undergraduate study	51%
Further Education (FE) and Adult Education	23%
Postgraduate study	13%

The remaining enquiries related to apprenticeships, other types of training and employment.

Most of the FE enquiries related to funding and fees. There are an increasing number of enquiries about transition issues that Connexions advisers would formerly have taken a lead on, such as basic information about options, finding and choosing courses, and liaising with providers about support.

Situations where we have been able to help providers include:

- the key messages that persuade students to disclose their disability;
- guidance on provider legal duties to support disabled students;
- competence standards and permissible adjustments when studying towards qualifications in youth and community work;
- the fitness regulations in relation to careers in health-related professions such as nursing;
- providing materials for provider open days and careers events;
- questions relating to fee remission changes and eligibility; and
- support to challenge local authority decision on transport to college for students with a section 139A Education and Skills Act 2008 age 19-25.

Into Higher Education 2012

Published at the beginning of November last year, this is a full-colour 48 page guide for disabled people planning to study at college or university. [Into Higher Education 2012](http://www.disabilityalliance.org) can be downloaded free as a PDF from www.disabilityalliance.org

Influencing decision-makers

We are now a member of the newly-formed Post-16 group of the Special Education Consortium, which had its first meeting in January 2012 and is a link with the Department for Education (DfE) Strategic Partnership work the Council for Disabled Children provides for the implementation of the Green Paper on SEND.

We look forward to the Government response to the Green Paper consultation and the next steps.

We remain concerned that the majority of disabled young people are not necessarily included in the remit of the Single Plan – the group who in the current arrangements would not have a Statement.

Meeting with John Hayes, Minister of State for Further Education, Skills and Lifelong Learning

The Chief Executive of Disability Rights UK, Unification Project Manager and Disability Rights UK Policy Adviser met with Minister John Hayes and BIS officials in December to update the Minister on the unification of the three charities to form Disability Rights UK and discuss ways of supporting BIS to implement FE and careers guidance reforms.

Low Review into Personal Mobility in State-funded Residential Care

We encouraged members and disabled students to respond to the Lord Low call for evidence regarding the proposals to remove DLA/PIP mobility allowance for those in residential education settings (age 16+).

We are delighted the government listened to respondents to the Low Review and welcomes the decision to allow those in residential settings, including those at residential college for example, to retain the mobility allowance because it is a valued and essential contribution to the additional costs disabled people often incur.

Thank you for taking part – you made a real impact that changed a government decision.

DfE, BIS and stakeholder advisory groups

We continue to attend the Dept for Education LLDD Advisory Group to support the department on the implementation of the Green Paper proposals. This forum has given us and partner organisations the opportunity to comment and influence the revised Guidance on section 139A assessments and the Draft statutory Guidance for schools on careers guidance.

We welcome the recent invitation to participate in the newly convened National Council for Careers and the Apprenticeship Review Group.

On-line discussion groups

We continue to build the three online discussion groups for members and partners in FE, HE and disabled students. To date, these include teaching

staff, curriculum managers, careers guidance professionals, disability advisers, local authority managers as well as disability organisations. Your views are critical to ensure that we understand the practical impact of policy changes and practices in both HE and FE/post-16 provision. To get involved and influence support for disabled students please contact Natalie.Salmon@disabilityrightsuk.org

In addition, we continue to work with a group of disabled students and jobseekers – online, by phone and face to face to ensure our work reflects their experiences, needs and views. We want to increase the number of young people involved, so if you can help run focus groups, or encourage your students to contact us, please contact

Tony.Stevens@disabilityrightsuk.org or Natalie.Salmon@disabilityrightsuk.org

Skill at Disability Rights UK

We provide support and information for disabled students, through our agreement with the Department for Business, Innovation and Skills following the closure of Skill: National Bureau for Students with Disabilities.

Online information

Information and factsheets for disabled students, families and professionals and advisers:

www.disabilityalliance.org/skill.htm

Information booklets

We have continued to update a key number of former Skill information booklets. See:

www.disabilityalliance.org/skillpublications.htm

Helpline

Our telephone and email advice service can provide advice on education, training and employment:

Telephone freephone 0800 328 5050

Tues 11.30am-1.30pm and Thurs 1.30pm-3.30pm

Or email:

skill4disabledstudents@disabilityrightsuk.org

The Skill team

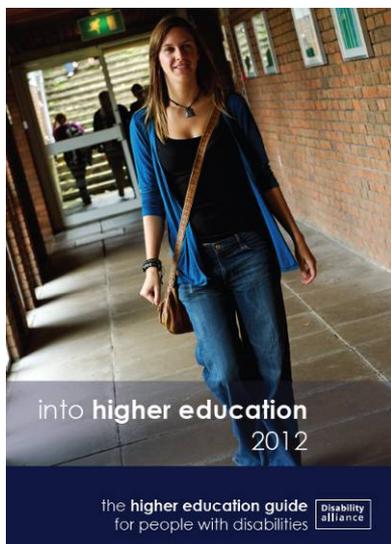
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Into Higher Education 2012

Disability Alliance is delighted to announce the publication of **Into Higher Education 2012** which is a guide for disabled students thinking about studying in higher education.

It deals with common questions such as:

- will the college or university be accessible?
- how do I choose a course?
- what support will be available?

Crucially, the 2012 edition covers the new student finance system and has up-to-date information on tuition fees, repayment methods and the support that will be in place for 2012 entry.

In the case studies, disabled students write about their own experiences, providing a valuable insight into what it is like being a disabled student in higher education.

The guide also contains a useful resources section listing websites, publications and organisations that can provide further information and help.

The 2012 edition of Into Higher Education is free to disabled people and their parents or carers. Printed copies are available on request, by contacting the Disability Rights UK Student helpline.

A PDF can be downloaded for free @ www.disabilityalliance.org

New edition of Into Higher Education – available now. Free to disabled people and their parents or carers.

**Disability
alliance**

Member Organisations' Advice Service: 'Ask Ken'

Ken Butler highlights some recent advisers' queries

SDA and state pension

? My client is aged 62 and lives alone. Her only income is her £70 weekly severe disablement allowance (SDA) that she has been receiving for over 10 years.

When she was approaching her 60th birthday she called the Pension Service to ask about claiming her state pension. She was told that as she hadn't paid much national insurance that she would be better off staying on SDA.

She was never told anything about pension credit and has been living on her SDA paying her rent of £440pm and all other expenses out of her savings.

We are helping her make a claim for Pension Credit but I was also wondering if she could claim DLA as well.

Once you reach 65 you continue to get SDA even if you are no longer incapable of work or 80% disabled, provided you were entitled to SDA immediately before your 65th birthday.

SDA 'overlaps' with state retirement pension so it is not possible to receive both at the same time.

However, if you don't qualify for state pension, or it is lower than SDA, your state pension is topped up to your full SDA entitlement, including any age-related addition.

On the other hand, you can put off claiming state pension and keep your tax-free SDA.

State pension, but not SDA, counts as qualifying income for the savings credit element of pension credit.

Unfortunately, pension credit can be backdated only up to 3 months if you met the qualifying conditions throughout that period but there is unfortunately no provision for backdating due to 'good cause' for longer than this.

However, DLA can be paid on top of SDA so there is no barrier to the client claiming this.

There is a severe disability premium within pension credit for those who are entitled to the middle or higher care rate of DLA.

Voluntary work and ESA

? My client has been placed in the work-related activity group for employment and support allowance (ESA). I think that this means he cannot be required to apply for jobs but could he be required to undertake voluntary work?

If you are not placed in the ESA support group but the work related activity group you have to adhere to strict work related conditions in order to continue receiving benefit in full.

This often involves attending work-focused interviews. These interviews will normally take place each month and at them the personal adviser will try to help you back into work. The adviser will draw up an 'action plan', which will outline the activities that you could undertake to help you move into work.



Members Organisations' Advice Service: 'Ask Ken'

Tax credits and benefits questions?

Our member organisations' tax credits and benefits advice service is hosted by Ken Butler. Ken helps members with complex queries and handles a range of different issues.

Support service for members now available five days a week

Ken is now able to take your calls on the members' helpline: 020 7247 9342 Monday to Friday 10am-12noon and 2-4pm. Or email Ken at: ken.butler@disabilityrightsuk.org

Unfortunately, Disability Alliance is not resourced to answer queries from individuals. To find a local advice centre visit: www.disabilityalliance.org/f15.htm

However, regulation 3(4) of the *Employment and Support Allowance (Work-Related Activity) Regulations 2011* provides that any requirement to take part in a work related activity must be reasonable having regard to your circumstances and cannot require you to:

- apply for a job or undertake work, whether as an employee or otherwise; or
- undergo medical treatment.

As a result, this means that your client cannot be compelled to undertake either paid employment or voluntary employment.

Valuation of a fixed term bond

? My client has claimed Pension Credit. She has invested most of her savings in a fixed term bond that does not mature for 5 years. However, the DWP has told her that it will take into account the original amount invested in the bond despite the fact that its current surrender value is very low. Is this correct?

A fixed term bond does count as capital (savings) for means tested benefits purposes. However, regulation 19 of the State Pension Credit Regulations 2002 provides that the calculation of capital should be at its current market or surrender value less:

- where there would be expenses attributable to the sale, 10%; and
- the amount of any encumbrance secured on it.

The relevant section in the DWP's Decision Maker's Guide on this is Volume 14 Chapter 84 paragraphs 84701 to 84719.

So the DWP are wrong and should be using any surrender value the bond has. Your client will need to provide written evidence of the surrender value – hopefully this can be straightforwardly obtained from the financial institution concerned.

Welfare Benefits Training 2012 Programme

Affordable • Practical • High quality

Disability Rights UK training programme will be announced shortly with a range of courses that will include DLA, the Work Capability Assessment, benefits appeals and the new Personal Independence Payment.

To join the mailing list, enquire about in-house training or suggest future courses email: keith.venables@disabilityrightsuk.org

London Leadership Programme



Valuable coaching and training

Are you living with ill health, injury or a disability? Are you someone who wants to become a leader in your community, but feels like they need more support?

Then this is for you!

London Leadership Development Day

Insightful presentations, helpful workshops followed by a series of one-to-one coaching worth hundreds of pounds!

Friday 30th March 2012

Scope, Market Road, Islington, N7 9PW

For an application pack please:

Email: Abdi.Gas@disabilityrightsuk.org or

Telephone: Carina Schmoltdt on 0207 566 0114

Disability Rights UK



Disability Rights UK Tribunal Support Unit (TSU)

The TSU offers training and specialist support for first-tier advice organisations. It supports advisers assisting claimants who are appealing to the First Tier Tribunal or the Upper Tribunal and can provide free advice, information and practical support through all stages of the decision-making and appeals systems.

TSU advice line

The telephone advice line is open Mondays, Wednesdays and Fridays from 10am-12pm and 2-4pm on 0207 1010 397. Or email

keith.venables@disabilityrightsuk.org providing as much detail as possible about your case. We can also meet with London-based advisors to discuss difficult cases in detail.

Disability Rights Handbook updates

Changes to benefits and services – page by page amendments



Ian Greaves, Handbook Editor, updates the 36th edition of the Disability Rights Handbook based on information available up to January 2011.

Contributory employment and support allowance

National insurance contribution conditions

From 1 January 2012, if the claimant is the spouse or civil partner of a member of HM forces, they will satisfy the first contribution condition for contributory employment and support allowance with sufficient national insurance contributions paid in *any* complete tax year if they were entitled to an national insurance credit to cover a period of assignment outside the UK for at least one week in the last complete tax year before the start of the relevant benefit year (Statutory Instrument 2011/2862).

UPDATES SECTION D Chapter 11(6) p62 under 'Exceptions'

Jobseeker's allowance

National insurance contribution conditions

From 1 January 2012, if the claimant is the spouse or civil partner of a member of HM forces, they will satisfy the first contribution condition for contribution-based jobseeker's allowance with sufficient national insurance contributions paid in *any* complete tax year if they were entitled to an national insurance credit to cover a period of assignment outside the UK for at least one week in the last complete tax year before the start of the relevant benefit year (Statutory Instrument 2011/2862).

UPDATES SECTION E Chapter 15(12) p84 under 'The first condition – paid contributions'

Doing Careers Differently
How to make a success of your career while living with a disability or health condition

Packed with useful information, this guide includes stories from disabled people who have built satisfying careers, from part-time flexible work to a first-time management role and beyond.

Available from Radar's online shop
www.radar-shop.org.uk

Doing Transport Differently
How to access public transport – a guide for everyone with lived experience of disability or health conditions

Shows how far access to public transport has improved and contains information and real life stories to inspire people with lived experience of disability or health conditions to use all types of public transport.

Available from Radar's online shop
www.radar-shop.org.uk

Case law digest

Highlighting key decisions and judgments

Disability Rights UK's benefits and tax credits advisor Ken Butler DA's and our Tribunal Support Worker Keith Venables provide you with a summary of recent case law including Upper Tribunal decisions and Court judgments.

Below is a selection of decisions issued since our last Update. [Fuller summaries and other decisions](#) are also available @ www.disabilityalliance.org

Whether care home was a "hospital or similar institution"

[Secretary of State for Work and Pensions v Slavin \[2011\]](#)

In this case the Court of Appeal dismisses the Secretary of State's appeal against the decision in [CDLA/3638/2010](#).

In doing so it importantly affirms that, in certain circumstances, while claimants might be living in a care home wholly funded by the NHS they may still be entitled to the care component or mobility component of Disability Living Allowance (DLA).

The claimant, Mr Slavin, was diagnosed as having a severe learning disability, Fragile X Syndrome (autistic traits and epilepsy). He lived at home until his behaviour eventually became too challenging for his parents. In November 2007 he moved into a privately owned and run care home – The Lodge. The fees for his accommodation and care there were paid by the Health Authority i.e. in effect by the National Health Service. However, while The Lodge was staffed by appropriately experienced and skilled care staff, it did not have any staff with medical or nursing qualifications

Mr Slavin was in receipt of the higher rate of the mobility component and the highest rate of the care component of DLA while living at home. However, in February 2008 a decision was made that neither component of DLA was payable on the ground that he was: *"being maintained free of charge while undergoing medical or other treatment as an in-patient ... in a hospital or similar institution under the [National Health Service Act 2006]"*

... within regulations 8 (care component) and 12A (mobility component) of the Social Security (Disability Living Allowance) Regulations 1991 ("the 1991 Regulations")."

Mr Slavin appealed against the decision, contending that the fact that The Lodge did not have qualified nursing staff meant the claimant was not in a "hospital or similar institution" and therefore that neither regulation. 8 or regulation 12A applied.

In [CDLA/3638/2010](#) an Upper Tribunal judge upheld the claimant's appeal "hospital or similar institution" holding that:

- a claimant is not in receipt of "medical or other treatment as an in-patient in a hospital or similar institution" merely because his accommodation and care in a care home without medical or nursing staff is funded by the NHS by way of NHS Continuing Healthcare, and he is cared for there by appropriately skilled care staff;
- the fact that, in addition, the claimant receives what is undoubtedly medical treatment or nursing elsewhere than at the care home makes no difference (save possibly in exceptional situations where there is some strong link between the care home and the institution where the treatment does take place);
- it may be sufficient if (i) the claimant receives a significant level of treatment from a doctor, nurse or other healthcare professional on the premises of the care home, notwithstanding that the relevant professionals are not employed or engaged by the home and/or (ii) the care staff at the home can be said to be acting to a sufficient extent under the supervision of doctors or other healthcare professionals (e.g. in giving medication, applying restraint procedures etc).

In explaining the Court of Appeal's dismissal of the Secretary of State's appeal. Lord Justice Davis states that:

"In my view it is legitimate to stand back and ask oneself, on the facts as found or as are required to be assumed, whether one would expect the answer "yes" to the question: "Is the respondent undergoing medical or other treatment as an in-patient in a hospital or similar institution?" I do not think one would expect such an answer.

...On the wording of the Regulations and consistently with the authorities, for there to be medical or other treatment provided to the respondent, an element – which must be not insignificant – of care provided by, or under the supervision of, professionally qualified doctors or nurses at The Lodge is required. There is no doubt that the respondent suffers from a mental disorder or disability. Quite possibly, in times gone by, he would have been placed in a mental hospital. There is no doubt that he needs, and is being provided at The Lodge with, skilled and specialist care. But that is not enough.

... Since, as is my view, the respondent is not “undergoing medical or other treatment” it also really follows that he is not “an in-patient...in a hospital or similar institution”. In truth, it is very strained to describe the respondent as an “in-patient”. Further, The Lodge plainly is not a hospital; and by reason of the complete lack of treatment being provided by or under the supervision of professionally qualified doctors or nurses at The Lodge, in my view it is not a “similar institution” either. But all this really underlines the need to consider the wording of Regulations 8 and 12A as a whole and not to break it down into separate or prioritised parts.”

While this case was largely concerned with the mobility component and whether The Lodge counted as a hospital. However, the Court of Appeal also highlights the fact that the definition of care home in Regulation 9 of the DLA Regulations excludes “services provided pursuant to the National Health Service Act 2006”, and accordingly the claimant would be entitled to the care component as well, despite being in a care home.

This is an important judgment that makes clear that DLA should not automatically stop if care home funding is provided by the NHS but that the relevant issue is the nature of the care provided.

Anyone who feels that they have wrongly had their DLA withdrawn should seek advice.

We produce a factsheet on [Finding a local advice centre](#) available @ www.disabilityalliance.org

Need for tribunal to consider if attention is "frequent" / help needed due to diabetic regime
[CDLA/1052/2011 \[2011\] UKUT 464 AAC](#)

In a short decision, Upper Tribunal Judge Rowland highlights the significance of a First-tier Tribunal finding that “the appellant did not require attention throughout the day” and not demonstrating that it had considered the correct test of whether she required “frequent attention throughout the day”:

“The word “frequent” is important and is to be distinguished from “continual”, which is used in section 72(1)(b)(ii) [of the Social Security and Benefits Act 1992] in relation to supervision. The use of the word “frequent” is presumably intended to ensure that benefit is awarded only if the attention is required sufficiently often that the person providing the assistance must for most practical purposes be continually present, or at least in the vicinity, even though the attention is actually provided at intervals.

Although it may be the case that the First-tier Tribunal had that well in mind, the fact that it did not set out the correct test raises the possibility that it may not have done so. That is of significance because it is not unlikely that, in this particular case, a different conclusion could have been reached had it asked itself the right question. This is particularly so, having regard to its findings that the claimant, who suffered from depression, required prompting and encouragement to go out alone and with other functions.”

In remitting the appeal to be heard by a new tribunal Judge Rowland adds that the tribunal:

“... appears not to have taken account of help the claimant might have required to ensure she followed a diabetic regime, which not only includes the taking of medication and physical exercise but also regularly checking blood glucose levels and adhering to a healthy and somewhat limited diet.”

Consideration of mental health descriptors where no specific mental illness

[CE/2323/2010 \[2011\] UKUT 454 \(AAC\)](#)

This case concerned an ESA claimant who had ME. As a result of her ME she had difficulty concentrating, poor short term memory and difficulty making decisions. The tribunal did not award any points under the mental functions part of the WCA because her difficulties did not arise from a specific mental illness or disablement.

In finding that the tribunal was in error of law, Judge Ward followed [CE/1222/2010](#) in holding that there need not be a specific mental illness and observed that there were “*sound practical reasons for considering the functional difficulties experienced by a claimant, rather than having to explore elusive questions as to whether the source of that limitation is mental or physical in origin*”.

However, although the tribunal had been wrong not to consider the mental descriptors, Judge Ward held that on the evidence the claimant could have scored no more than 6 points, and accordingly could not have succeeded in her appeal. The Judge therefore declined to set aside the tribunal decision, making the point that “*the purpose of an appeal on a point of law is not to provide a second opportunity for giving evidence that could have been given the first time round*”.

Substantial risk to the mental or physical health if the claimant were found not to have limited capability for work

[CE/343/2011 \[2011\] UKUT 416 \(AAC\)](#)

This decision applies related existing incapacity benefit case law to the ESA scheme.

The claimant was 17 and suffered from a serious renal condition and had a learning disability. He had few qualifications and little or no experience of work. As a result, he was only likely to be able to obtain manual work. It was clear from both the claimant and the doctors treating him that working was likely to increase the frequency of episodes of severe pain.

However, the tribunal noted that his mental attitude was positive and concluded that because of this there was no substantial risk to his health if he were found not to have limited capability for work.

Upper Tribunal Judge Poynter applies the judgements in [Charlton v Secretary of State for Work and Pensions](#) [2009] EWCA Civ 42 and [CIB/360/2007](#) (both incapacity benefit cases) and finds that the tribunal had erred as it should:

- have made findings as to the range or types of work for which the claimant was suited as a matter of training or aptitude and which his disabilities did not render him incapable of performing; and

- then decided whether, within that range, there was work that he could do without a substantial risk to his health.

Judge Poynter therefore sets aside the tribunal’s decision and remits the claimant’s appeal for rehearing.

Need for a tribunal to give adequate reasons for its decision

[CI/747/2011 \[2011\] UKUT 465 AAC](#)

While a First Tier Tribunal accepted that the claimant had pain in her neck and her left arm it took the view that it was more likely that the pain was entirely due to constitutional degenerative disease of her spine unrelated to her industrial accident.

However, in remitting her appeal to be heard again, Upper Tribunal Judge Rowland holds that the tribunal had given inadequate reasons for its conclusion, explaining that:

“In my judgment, the First-tier Tribunal should have explained why the fact that the claimant had developed pain in other parts of her body some considerable time after the accident - and, it would appear, from a different or unknown cause except as regards her knee - was regarded as more significant than the timing of the onset of symptoms.”

Judge Rowland concludes by highlighting the importance of a tribunal explaining its decision adequately:

“The amount of reasoning required from a tribunal depends very much on the facts of the individual case and, in particular, the arguments advanced before it. It is a good rule of thumb that the principal arguments advanced by the losing party should expressly be addressed in the statement of reasons. This is required as a matter of fairness because it is only by giving reasons that the tribunal can demonstrate that it has in fact given proper consideration to the arguments.”

Future changes

A timetable of forthcoming benefit and tax credit changes

Note: This timetable may be subject to change due to the change in Government. You should regularly check our [Forthcoming changes](http://www.disabilityalliance.org) page at www.disabilityalliance.org for updates.

April 2012	Contributory ESA Contributory employment and support allowance for those in the work related activity group will be time limited to one year.
April 2012	Youth ESA Abolition of youth ESA for new claimants. Existing claimants at that date will be able to continue claiming, but entitlement will be limited to 12 months. Time spent on youth ESA prior to April 2012 will count towards the time limit.
April 2012	Discretionary housing payments The Government contribution to discretionary housing payments will be increased by £40 million in each year from 2012-13.
April 2012	Tax credits backdating The period for which a tax credit claim and certain changes of circumstances can be backdated will be reduced from three months to one month.
April 2012	Tax credits and couples Couples with children must work 24 hours a week between them, with one partner working at least 16 hours a week in order to qualify for the WTC.
April 2012	Tax credits in year falls in income A disregard of £2,500 will be introduced in the tax credits system for in-year falls in income.
April 2012	50 plus element The 50 plus element will be removed from the working tax credit.
April 2012	Simplified PAYE Deduction Scheme closure stage 1 From 6th April 2012 the Simplified PAYE Deduction Scheme (SPDS) which provides an alternative to standard PAYE for non – business employers, such as those employing carers, will be closed to new employers.
From 2013	Child benefit Child benefit withdrawn from households paying tax at the higher rate.
April 2013	Benefits cap Total weekly benefits (jobseekers allowance, income support, employment support allowance, housing benefit, child benefit, carers allowance and later the new universal credit) will be limited to £500 a week for lone-parents/couples or £350 per week for single claimants. This benefits cap does not apply to households where someone is claiming working tax credits or getting disability living allowance.
April 2013	Introduction of personal independence payment Working age disability living allowance (DLA) to be replaced by a new personal independence payment. This will be piloted in April and apply to all new claimants from summer 2013.
April 2013	Universal credit pilot Launch of universal credit pathfinder to demonstrate how the new scheme will work.
April 2013	Tax credits in-year rises The level of in-year rises of income that will be disregarded from calculations of tax credit entitlement will decrease from £10,000 to £5,000.

April 2013	Housing Benefit Local housing allowance rates will be updated in line with consumer price index. Housing entitlements for working age people in the social sector will reflect family size. Housing benefit awards will be reduced to 90% of the initial award after 12 months for claimants receiving jobseekers allowance.
April 2013	Simplified PAYE Deduction Scheme closure stage 2 From 5 April 2012 the Simplified PAYE Deduction Scheme (SPDS) will close.
October 2013	Universal credit roll out Between October 2013 and April 2014 those making a new claim will receive universal credit in place of jobseekers allowance, employment support allowance, housing benefit, working tax credit or child tax credit. Existing claimants will also be moved onto UC if they are already receiving one of these benefits and their circumstances change significantly.
March 2014	Migration from IB to ESA Migration of existing incapacity benefits claimants (incapacity benefit, severe disablement allowance and income support on disability grounds) onto employment and support allowance should be completed by the end of March.
April 2015	Post office card account Post Office card account (POCA) to be reviewed.
from end of 2015	Universal credit Between the end of 2015 and the end of 2017 those who have not been moved onto universal credit already will be moved during this time.
October 2020	State pension age increases State pension age for both men and women increases to 66.
April 2026	State pension age increases again The Government will start to raise the State Pension age to 67 in stages from this date.
April 2028	State pension age State pension age will be 67.