Excerpts from the Big Book of Benefits and Mental Health 2015/6

Now in its 15th edition - and even bigger again - 390 plus pages of user-friendly information, tips, tactics, sample forms etc. aimed at people with mental health problems and those who help with benefits applications.

Revised by: Tom Messere - former joint author, freelance benefits trainer and welfare rights adviser since before Income Support was the new universal benefit, updating and building on the work of the late Judy Stenger, its original author, whose warmth, wit and wisdom still pervades pages old and new.

NEW / UPDATED FOR 2015/16:

Welfare Reform: update and benefits after the Election
Personal Independence Payment - PIP renewals, latest stats, updated guidance and page by page tips / examples for PIP2s, supporting letters and PIP appeal submission
Universal Credit - latest plans, surviving a UC claim, pension and disabled worker gaps, surplus earnings
ESA - caselaw update and now physical and mental health page by page tips and examples for the ESA/UC50

Plus other chapter revised and updated throughout:
Contents, Barriers to Benefit, Steps to Maximum Entitlement, The Sickness Route to Benefits (including example ESA50 form, page by page with the descriptors and guidance/support letters, medicals), Benefits for Carers, Means Tested Benefits in working age, Pension Credit, Working Tax Credit and Child Tax Credit, Social Fund and its successors, Attendance Allowance and DLA, Mental Health Diagnoses and disability benefits, From DLA to PIP: bi-polar a case study, Benefits in Hospital, Challenging Decisions, Big Book training courses, 2015/16 Benefits Rates Charts

FEEDBACK FROM PREVIOUS EDITIONS:

“An essential piece of kit for all community mental health teams, community psychiatric nurses, approved social workers and voluntary groups as well as general benefit advisers... If you have a mental health problem and are trying to cope with the benefit system or if you’re a professional wanting to give good solid advice there’s no better guide that you can buy...” Community Care magazine

“Your book has brought positive results to so many of my clients and it has always been a joy to work from. Its humour, readability and understandability makes it the best of ways of finding accurate information and gives hope to people... wading through the treacle of the Benefit system.” service user

“The book puts into words my own experiences, feelings and thoughts...” support worker

“Your work has been massively important for service users” support worker

“This substantial but tremendously accessible handbook could well be one of the most useful guides around...” Health and Care.com

“The DLA form took half the time and was more detailed than it would have been” social worker

“The forms practically write themselves” housing support worker

“Made me re-assess how I approached the form - I was awarded a higher rate of DLA...” service user

“There really is everything you need here... As a tactical handbook that is not frightened to give its opinion on the current direction of social security it is unrivalled” Advisor magazine

“Absolutely superb - extremely impressive” Director - Local Mind Association

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“I have recently acquired the book which is actually an amazing document. I cannot praise it enough...” service user and advocate

“Judy’s work made more of an impact on the quality of life of our service users than any pills, potions, therapy or support we were able to offer” mental health team leader

£23.00 plus p&p

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Welcome to the Big Book of Benefits and Mental Health.

Less big new changes to announce this year, more developing practical toolkit response as we learn more and share experiences.

Big Book changes
Last year, we moved - with Mind’s blessing and ongoing support - to our new main distributors at Child Poverty Action Group (CPAG), where we join their list of benefits publications, honoured by their company but sufficiently distinctly different to still stand out.

With old and new systems likely to run alongside each other for several years to come we face the challenges that stretch our binding to its limits. Our apologies for growing again this year - such is the complexity of benefits “simplification”

The “new” benefits aren’t so new, anymore, but as well as updates and timetable changes, this Edition sees an expansion of tips, tools and resources as we get to know them better. Changes to the Book this year include:

• full updating and revising in every chapter, with the latest rates, implementation plans and changes.
• welfare reform tables updated and a look ahead to what the “new Government may bring
• PIP - updates with the latest guidance and timetable news. And new example supporting letters and appeal submissions—see the PIP chapter
• ESA - updates to case law and the new Maximus assessor, tweaks to latest ESA50 (also under different stickers as UC50s) and our popular page by page guidance and sample form now covers the physical and sensory descriptors too - see sickness route benefits
• Universal Credit - still a slow starter but extended to offer practical tips through common problems in the pathway areas, the latest roll out news and gateway conditions, and more worked examples to highlight the disability, pension and disabled worker gaps in UC

Election impacts
Well after all the excitement there’s a new majority Government after all. But the fact that the devil we know is back at the helm at the DWP, does not necessarily mean less changes, but possibly more than a different result.

We take a look at why within the Welfare Reform summary The key new unknown is the new deliberate policy choice to cut £12 billion in the next 2 years, now that the Conservatives have broken free of their carers. All that they have said as to how is that there will be another round of stealth cuts at annual uprating times making life that little bit harder for everyone.

All is set to be revealed in “emergency” budget on July 8th.

For what we do know see under the Welfare Reform Chapter. And I will post a July update on the website at www.bigbookofbenefits.com.

Devolution differences
It was all talk of compassionate, one nation conservatism and mutual respect across the nations on May 8th. The Prime Minister may have been right to recognise the link, but his party is straining at the leash. The danger is that letting rip with benefit cuts may not only mark the Tories as the “nasty party” but also as the biggest threat to the Union.

Both Scotland and Wales have taken different choices on the Social Fund and council tax, and N. Ireland will follow as it comes late to the welfare reform party.

Scotland is also about to get significant devolved powers over disability benefits and discretion top ups across the system. This means that cuts may well bite less in Scotland and almost as important the isolation and stigma may feel a whole lot less too.

We highlight current or likely differences around the UK throughout

Back in the Pipeline
It’s not all just big unknowns. Changes long since announced are staggering down the pipeline and will make themselves felt:

• ESA migration is almost over, but still not complete, while new claimants face stress and delays as the assessment system slowly picks up from the Atos collapse. See the “sickness route benefits chapter”
• UC migration is slowly limping across the UK—it still about December 2013 in UC land :-) Not an immediate issue as the focus is on jobseekers for now, but if you become ill on UC or claim with a UC jobseeker you will be one of the first people with “limited capability” on UC. See the UC chapter for more details
• PIP is less migration and more an offer you can’t refuse. (well you can but your DLA would stop)). The offer begins for existing DLA claimants from October. The worry is that there will be a repeat of the ESA pre-match moving of goalposts. See more under PIP.

Good luck
The outlook then is not encouraging. As Jude wrote: “Certainly for those reliant on benefits paid on grounds of ill health or disability, anxiety is rapidly becoming a way of life rather than a diagnosis.”

I hope though that this Book can help keep a candle of hope burning, and help you feel a little less confused and a little more confident in avoiding the pitfalls and surviving the changes.

Best wishes in difficult times
Tom Messere - May 2015
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Universal Credit

Key features, latest timings, local and devolved differences, migration and protection, claims and assessments, top tips to survive a UC claim, monthly assessments and payments, overpayments, calculating UC - elements, income and work allowances - and worked examples, the “disability” and “pensioner gaps” , from sickness into work with UC, the new “surplus earnings” rules

**Step 3: Extra non-means tested benefits**

Help with the extra costs of children and living with a long term illness or disability. Paid on top of other benefits and often increasing entitlement in benefits under Step 2 or enabling carers to claim under Step 1

Introduction and Part 1: Attendance Allowance & DLA

Introduction to AA, DLA and PIP, Disability Living Allowance & Attendance Allowance, claims and assessment process, the criteria, some examples of common difficulties, filling in the forms and signposts to extra free Big Book resources

Disability Benefits 2 - Personal Independence Payment

Personal Independence Payment. And timetables, PIP claims and assessments, the story so far and top tips from claim to appeal, the switch to PIP and PIP renewals page by pages tips and examples to fill in PIP 2 forms, supporting letters for PIP claims, challenging PIP decisions, example PIP appeal submission

Mental Health diagnoses and disability benefits

A brief guide to common mental health diagnoses and issues for DLA and PIP. Case study: bi-polar disorder, DLA and PIP

**Other Benefit Issues**

An overview of growing work conditionality, making work pay and sanctions.

Benefits, Work & Conditionality:

ESA work related activity, the Work Programme and Surviving as a jobseeker, In Work benefit options, Universal Credit and work conditionality

Benefits and Hospital

What happens to your benefits if you are admitted

How to challenging benefit decisions

Don’t take no for answer! Revisions, supersessions and appeals, Mandatory Reconsiderations and independent appeals, issues for ESA and PIP, appeal papers, evidence and hearings. See also under individual benefits

Training courses & Feedback

You’ve read the book, now see it live! A wide range of training courses linked to the Big Book from beginners to experts. And let us know what you think of the Book and how we could make it better

Benefit Rates Chart 2015 / 2016

**NB: each chapter has its own detailed contents first page**
The Benefits Maze

The Social Security System is often likened to a maze - a maze with many entrances which any of us who live to be pensioners are likely to have to traverse at some point in our lifetimes.

Maps for the maze are not easy to find or to read, and for every successful turn you take, you can be sure there’s a fresh twist just around the corner.

Some parts are easier to get through than others - for example the path that leads to Child Benefit is wide and well trodden (toddled?) - if soon to become narrower. The one that lead to the discretionary Social Fund on the other hand is narrow and long with only small reward at the end. It has now largely disappeared, replaced by a hotchpotch of variable local schemes (if any! depending where you live).

We cannot choose the route we need to take: people of all age groups and for a huge variety of reasons find themselves, at one time or other, in the maze. Redundancy, bereavement, old age or ill health can all pick us suddenly from the world of financial independence and drop us in the realms of Social Security.

For each of us the barriers to entitlement will be different, and more or less easy to overcome. Getting through the maze when you’re an articulate, healthy young person is hugely easier than if you’re also coping with ill health, or childcare responsibilities, or have no transport, or are scared of using the telephone.

Some of us muddle our way through alone. Others of us never achieve full entitlement without a helping hand or two, and some of us will find our health suffering as a result.

And just when we think we’ve got the hang of the layout, changes in the system throw new barriers in our path - the replacing of the sickness route benefits we were familiar with, by Employment and Support Allowance is proving to be a particularly difficult hurdle for many to negotiate and the move from DLA to PIP, changes to means tested benefits and the new Universal Credit will add to the uncertainty.

For the majority of us, the most useful helping hand we can be offered through the maze is clear information and the feeling that we’re not utterly alone in the face of the ‘system’.

Hopefully this book will go some way towards providing that information - and in so doing help to counter poverty, protect good health and promote choices in independent living.
Although we all probably know about some benefits, feeling confident that we’ve applied for all the benefits we’re entitled to when the system is such a maze is a very different matter. What’s more, the DWP doesn’t have a duty to help us identify benefits we may be missing out on, so accessing full benefit entitlement often depends on knowing the right questions to ask.

But by breaking the benefits system down into ‘steps’ and then working our way from step one through to three, (and sometimes back to two - and one - but more of that later!) it is possible to feel sure that we’ve considered all the options. And what’s more, we don’t have to sing tunes from the ‘Sound of Music’ whilst doing it...

What follows is an explanation of these three steps in greater detail, each step being followed by a brief description of the benefits it covers. There are also some example situations in which various benefits might apply.

Many of the benefits most likely to be of relevance to people with mental health problems are also covered in far greater detail later on in this book.

These include:

- Employment and Support Allowance - both Contributory and Income-related varieties
- Carer’s Allowance
- Other means tested help: Pension Credit, Income-based JSA, Income Support, Housing Benefit and the new Council Tax Reduction schemes
- Child Tax Credit and Working Tax Credit
- In time, the new Universal Credit that is slowly coming in.
- Social Fund help and its replacements
- Disability Living Allowance, Personal Independence Payment and Attendance Allowance

Government plans to start to combine all ‘work-related’ means tested benefits into one ‘Universal Credit’ from 2013 will of course make identifying which means tested benefit you might be entitled to easier. However, it seems that the rules governing that single benefit are many and complex. It’s a bit like putting a big box over some separate benefits and labelling them something else, as they did when ESA replaced Incapacity Benefit and Income Support, importing all the complications of the old benefit and adding a few new ones...
## Benefit changes across all “working age” benefits

*see also other changes under individual benefit over the next few pages and in the relevant chapters in the rest of the Book*

<table>
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<th>Date</th>
<th>Event</th>
<th>Description</th>
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<td>April 2011</td>
<td><strong>Change in uprating for all benefits</strong></td>
<td>Increases will be set by the <em>Consumer Price Index</em> (which produces <em>consistently lower increases</em>) instead of the <em>Retail Price Index</em> or the <em>Rossi index</em>. <em>CUT of £5,840 MILLION pa by 2014/15</em></td>
</tr>
<tr>
<td></td>
<td><strong>April 2011</strong></td>
<td>Those receiving any benefit will see its value decrease over time, lessening their ability to pay for essentials. Will be the biggest cut of all by 2015 e.g. April 2013 increase 2.2% not 2.6%</td>
</tr>
<tr>
<td>October 2012</td>
<td>Civil Penalties will be introduced for claimant error in claims for Benefit</td>
<td>Local Authorities and the DWP have discretion to enforce a civil penalty of £50 to claims which contained an error made by the claimant</td>
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<td>April 2013</td>
<td><strong>1% limit uprating limit</strong></td>
<td>Many benefits restricted to 1% for next 3 years PC Savings Credit – cuts in max SC and increased thresholds</td>
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<td>April 2013</td>
<td><strong>Benefits Cap</strong></td>
<td><strong>Household Benefits cap</strong> on total benefits income for “working age” claimants (unless on DLA/PIP or Working Tax Credit) at “median income” (c £350 for single adult, £500 for couples), applied initially by cuts in HB, but in future all UC. Phased in across UK by September 2013. <strong>CUT of £270 million pa</strong></td>
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<td>April 2013</td>
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<td>Main impact in high rent areas – where people have same low disposable benefits income than other areas, but large rent bills, due to failure of the housing market/policy. to provide sufficient affordable housing. Risks of homelessness, migration and ghettoization. Also affects larger households in all areas of UK. Main purpose would appear to be to incite envy and resentment against the poor and powerless, among the struggling not so, and divert attention from arrangements for the rich and powerful. And so soften opinion up for real cuts,</td>
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<td>April 2014</td>
<td><strong>Overall Benefits Cap</strong></td>
<td>Total benefits spending - excluding Pensions and JSA - capped at current levels £119.5 billion</td>
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<td>March 2015</td>
<td><strong>Deaths under Sanction:</strong></td>
<td>Dispatches programme reveals DWP are looking over 49 deaths - 40of which were suicides among those under sanctions. Parliamentary Select Committee causes for pause and review.</td>
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<td>April 2015</td>
<td><strong>The Election:</strong></td>
<td>Conservatives confirm October announcement of a further £12 billion cuts in “working age” benefits, but are criticized for only spelling out 10% of them</td>
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| May 2015  | **A new Employment and Welfare bill to:**                          | - freeze benefit increases - except some protected elements - for two years  
- benefits cap - couple limit down to 23,000  
- removal of HB for jobseekers under 21 |
| July 2015 | **An “emergency budget”**                                         | - because the last lot left finances in such difficulties? - will outline where the remaining £10.8 billion of cuts will come from |
|          |                                                                   | The IFS have criticized the lack of accountability and rational policy making in a policy announced in October 2014 with so little detail since. Options will require dramatic changes, which may strain both “one nation” Toryism and the UK. |
**Physical health:**
- Treated *as in support component*
  - Has a progressive disease from which death can reasonably be expected within 6 months
  - Receiving / recovering from chemotherapy or radiotherapy or is likely to receive it in the next six months - and DWP are satisfied should be treated as LCWRA
  - There would be a substantial risk to anyone’s physical or mental health if found not to have limited capacity for work related activity
  - Is pregnant and there is serious risk to the health of mother or unborn child if she does not refrain from work-related activity

**Support Component descriptors:**

1) Mobilising - unaided by another - on level ground - using a walking stick, manual wheelchair or other aid that can be reasonably used
   - a) Cannot mobilise more than 50m on level ground without stopping to avoid significant discomfort or exhaustion; or
   - b) cannot repeatedly mobilise 50m within a reasonable timescale because of significant discomfort or exhaustion.

2) Transferring between seats
   - Cannot move from one seated position to another alongside without physical help

3) Reaching
   - Cannot raise either arm as if to put something in top pocket of jacket

4) Picking up/ moving with hands and upper body
   - Cannot pick up and move 0.5 litre carton full of liquid

5) Manual Dexterity
   - Cannot, with either hand, either:
     - a) press a button such as a telephone keypad, or
     - b) Turn the pages of a book

6) Making self understood unaided by another - through speaking, writing, typing or other means which could be reasonably used
   - Cannot convey a simple message such as the presence of a hazard.

7) Understanding communication (verbally by hearing, lip reading non verbally - by reading 16 point print, Braille) using any aid that could reasonably be used
   - Cannot understand simple message such as the location of fire escape

8) Continence
   - At least once a week experiences:
     - a) loss of control leading to extensive evacuation of the bowels/ voiding of the bladder or
     - b) substantial leaking of the contents of a collecting device sufficient to have to clean themselves and change clothing.

9) Chewing or swallowing
   - As 15 a) , but involving the acts of chewing or swallowing rather than breathing, repeated stopping, experiencing breathlessness or severe discomfort or regular prompting by another present or
   - As 15 b) above, but involving the acts of chewing or swallowing rather than conveying food or drink to mouth
   - As 15 b) above, but involving the acts of chewing or swallowing rather than conveying food or drink to mouth

10) Awareness of hazard
    - Due to cognitive impairment or mental disorder, reduced awareness of everyday hazards leads to a significant risk of
    - a) Injury to self or others or
    - b) Damage to property or possessions such that they require supervision for the majority of the time.

11) Initiating personal actions
    - Cannot, i.e. function, at least to actions

12) Copying
    - Cannot copy to cognitively, cannot b...

13) Copying engagement
    - As 15 b) above, but involving the acts of chewing or swallowing rather than conveying food or drink to mouth

14) Appropriateness of behaviour with others
    - Has, on a daily basis, uncontrollable episodes of aggressive or disinhibited behaviour that would be significantly disruptive or unusual.

15) Conveying food or drink to mouth
    - a) Cannot convey food or drink to own mouth without physical help, repeatedly stopping, experiencing breathlessness or severe discomfort or regular prompting by another present or
    - b) Fails to do the above due to impaired mental disorder, to the extent that daily life cannot reasonably be carried on level ground

16) Chewing or swallowing
    - As 15 a) , but involving the acts of chewing or swallowing rather than breathing, repeated stopping, experiencing breathlessness or severe discomfort or regular prompting by another present or

17) Understanding communication (verbally by hearing, lip reading non verbally - by reading 16 point print, Braille) using any aid that could reasonably be used
    - Cannot understand simple message such as the location of fire escape

18) Navigation and maintaining safety, using a guide dog or other aid normally, or that could be reasonably used
    - Cannot - due to sensory impairment - without being accompanied by another:
      - a. Navigate around familiar surroundings
      - b. Safely complete a potentially hazardous task such as crossing a road
      - c. Navigate around unfamiliar surroundings

19) Absence or loss of control leading to extensive evacuation of the bowel or bladder
    - Other than site wearing/ urination or that

**Mental health:**
- There would be a substantial risk to anyone’s physical or mental health if found not to have limited capacity for work related activity; or

**9) Learning tasks:**
- Due to cognitive impairment or mental disorder cannot learn how to complete a simple task such as setting an alarm clock

**10) Awareness of hazard**
- Due to cognitive impairment or mental disorder, reduced awareness of everyday hazards leads to a significant risk of
  - a) Injury to self or others or
  - b) Damage to property or possessions such that they require supervision for the majority of the time.

| Easy single page listings of the latest Work Capability Assessment descriptors for ESA |
| (NB these are overlapping reduced sizes pages for illustration) |

| Physical Disabilities Assessment |
| ‘Physical Disabilities’ |
| from 28th January 2013 |

* also acts as a Support Component descriptor

(italics = changes from previous test in 1,2,5,7,8 and 9)

NB: all only apply if have a physical health condition
17. Behaving appropriately with other people

The Medical Guidance says (excerpts):

‘Episodic relapsing conditions such as some types of psychotic illness, as well as conditions resulting in consistently abnormal behaviour.

‘There is likely to be evidence of reduced insight... Rapport may be poor and communication difficult.

‘The descriptors relate to behaviour that would be considered in an average workplace such as a call centre. It is likely that the behaviour would extend beyond verbal aggression for the descriptors to apply.

‘Consider any activity involving interaction with others... such as previous occupational history, shopping, childcare, parents nights at school, relationships with neighbours, ability to cope at appointments: GP/ Hospital etc., ability to cope with bills and on the phone, dealing with finances and bills at the post office, appointments with official persons such as the Bank Manager/ Social Worker/ Benefits Personnel’

Jude’s observations:

This descriptor is half of one of the ‘old’ ones - now happily at least a bit easier to understand. Again the list of likely conditions in the medical guidance is artificially limited.

If you lose it - either verbally or physically - with other people, here’s the place to say so. If you feel able to describe times when it’s happened then it’ll give a clearer picture. If you’ve ever been arrested because of behaviour linked to your mental health or sectioned, then it may be relevant to say so here.

The guidance says ‘it’s likely the behaviour would extend beyond verbal aggression’ for the descriptors to apply. I think it’s on very thin ice with this and that a decent Caselaw decision will emerge to confirm this. Don’t leave out verbal aggression alone just because that guidance says – it is not the law and as so far (to our knowledge at time of writing) not been confirmed by caselaw; so any uncontrolled aggressive behaviour could meet the descriptor.

The descriptor is also though to do with ‘disinhibited’ behaviour - not just aggression. If when you’re unwell people might describe your behaviour this way, try to explain how it impacts on them - and on you.

Part 2 - Mental, cognitive and intellectual functions continued

17. Behaving appropriately with other people

This section looks at whether your behaviour upsets other people

How often do you behave in a way which upsets other people?

Please tick this box if your behaviour does not upset other people.

☐ Occasional

☐ Everyday

☐ Often

☐ Occasionally

Now go to question 18

When I get frightened I don’t want to run away - I feel like I’m backed into a corner and get really, really angry - I want to scream at people and have actually hit out at people a couple of times. I’ve also trashed my place - and my parents’ place when I was living with them quite a few times. I know people get frightened and upset by the way I am but it’s not something I can control when it happens.

I had a work placement when I first left school but they told me not to come in after the third day because I had a go at some of them - I felt they were watching me and making fun of me. I broke the door.
Surviving a UC claim:
Top Tips from the UC Pathfinder areas: Helping you to help them to help you 😊

1. Is UC ready for safe landings?
After £700 million has been spent on the project, just 35,000 claimants, 2,700 UC Centre staff and close on 2 years of “test and learn”, the UC claims and payments process - as described earlier - should now be running smoothly and seamlessly in the pathfinder areas. As resources are readied for the national rollout, now should be one of the best times to be a UC claimant, ahead of claimant numbers and admin pressures soaring. But “Oh, dear…” 😞.

Here then are some top tips based on the problems and solutions people have been finding in UC pathfinder areas over the last couple of years.

2. Making a claim for UC

- **Tip 1: Allow plenty of time, quiet space and good connection to claim UC:** Assemble all the information you might need and allow up to an hour. If you time out, the connection/UC connection goes down you cannot save your work as a go. Be politely assertive if you need to claim by telephone and prepared to deal with a “can’t claim online v. won’t claim online” conversation.

- **Tip 2: Time your claim if you can:** Old claims for Housing Benefit, Child Tax Credit or Income-related ESA will stop straightaway, so where possible time your UC claim just after a recent payment of any previous benefit.

- **Tip 3: Keep a diary of what happens when** – when you claimed, sent in further evidence or had it scanned at the local Jobcentre Plus. This “timeline” will help you - or an adviser—talk the Service Centre through the case and help them spot and clear the blockage. Evidence that is apparently missing or not visible on first look, can then be spotted tucked away in the recesses.

- **Tip 4 Getting through “voice recognition”:** UC uses a “voice recognition” system that can send you round in the seven circles of UC hell :-) After 3 goes it will allow menu options, but “Check status of my claim” seems a good way through.

3. At your First Claim Interview

- **Tip 5: Take evidence of ID and tenancy agreements to your claim interview:** You will be asked to produce evidence which UC don’t tell you to bring beforehand.

  Taking it along on the day will mean it will be recorded as seen within that interview, will save a repeat trip to the Job Centre and speed up the claim:
  - **Tenancy agreements:** if you have them but alternatively a letter from your landlord or copies of bank statements showing rent being paid. UC regulations do not require a tenancy agreement in the last 12 months nor that you be the formal tenant, but that tends to be UC’s default request.
  - **Proof of ID:** either a Passport/ID card/asylum letter/UK border agency residence permit. Or if you don’t have one of those then any two from: bank / credit card, cheque book, bank/building society passbook, utility bill, driving license, birth/marriage/civil partnership certificate, travel card photo id, membership card of a known association
  - **Other evidence:** The first two apply to all claims. As UC develop you may need more evidence: children, a new partner’s savings, sick notes etc. A new partner will have to attend their own Claimant Commitment interview so worth them taking any relevant evidence to theirs.

- **Tip 6: Don’t be misled on Claimant Commitment.** These can seem a bit intimidating – lots of warning of sanctions and a big pressure to agree and sign, as your UC claim cannot proceed until you do. Work out which of the four “work requirement” levels apply in your case (see under Work Conditionality). If it is the “full work requirement” , there is significant scope for adjustments for particular circumstances. However, there seems a strong default setting to treat all claimants as full on, full time fully fit jobseekers. You could get stuck with an unlawful or unreasonable commitment.

  It is proving rather hard to get this living flexible document changed. Get advice if you get stuck.

Waiting for that first payment

- **Tip 7: How will you manage until first payment?** It could be 6 to 8 weeks before you get a first payment, rather than the 5 weeks promised. And from July that first payment will not include anything for the first week. Could you manage until then? If not apply for an **Advance Payment** within 21 days of your claim.

- **Tip 8. Don’t wait to ask:** There was shocking evidence from undercover filming by Channel 4’s Dispatches programme (9/03/15) of a policy of not disclosing the existence of:
  - **Advance Payments** -
  - **The Flexible Support Fund** (for one off grants to help take up a job) and
  - **Hardship Payments** (when sanctioned).

  You now know, so ask when needed.
1. **Harry** gets ESA with Support Component and DLA Middle Rate Care/Lower Mobility. He lives with his aunt and uncle so cannot get the Severe Disability Premium. He benefits from the higher LCWRA element **gaining £20.65**

<table>
<thead>
<tr>
<th>Income-related ESA Applicable Amount</th>
<th>Universal Credit Maximum Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Allowance</td>
<td>73.10</td>
</tr>
<tr>
<td>Support Component</td>
<td>36.20</td>
</tr>
<tr>
<td>Enhanced Disability Premium</td>
<td>15.75</td>
</tr>
<tr>
<td></td>
<td>£125.05</td>
</tr>
</tbody>
</table>

2. **Hermione** was on the same benefits as Harry. Having wisely looked at Big Book before her PIP assessment, she continues as before but now with PIP standard Daily Living/standard Mobility. She lives in her own place. She **loses £41.20 a week.**

<table>
<thead>
<tr>
<th>Income-related ESA Applicable Amount</th>
<th>Universal Credit Maximum Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Allowance</td>
<td>73.10</td>
</tr>
<tr>
<td>Support Component</td>
<td>36.20</td>
</tr>
<tr>
<td>Enhanced Disability Premium</td>
<td>15.75</td>
</tr>
<tr>
<td>Severe Disability Premium</td>
<td>61.85</td>
</tr>
<tr>
<td></td>
<td>£186.90</td>
</tr>
</tbody>
</table>

3. **Hagrid** also has PIP standard Daily Living/standard Mobility but, like most ESA claimants, is on the Work Related Activity Component. He loses more, as the new higher LCWRA rate does not help. He **loses £61.85**

<table>
<thead>
<tr>
<th>Income-related ESA Applicable Amount</th>
<th>Universal Credit Maximum Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Allowance</td>
<td>73.10</td>
</tr>
<tr>
<td>Work Related Activity Component</td>
<td>29.05</td>
</tr>
<tr>
<td>Severe Disability Premium</td>
<td>61.85</td>
</tr>
<tr>
<td></td>
<td>£164.00</td>
</tr>
</tbody>
</table>

Hagrid is philosophical and has heard that UC will at least make work pay, so looks at an opportunity in a local school. We will revisit him after exploring the full UC sums, but the news is not good/clear for workers with health issues.

4. **Ron** also has PIP standard Daily Living/Mobility. He is main carer for his son, Hewhomustnotbenamedyet who gets Middle Rate DLA Care claims because of numerous physical difficulties and extensive supervision needs to prevent danger to others. Ron gets a “quadruple expelliarmus” from: lost disability premiums, no benefit from the new LCWRA element, cuts in child disability and the mistreatment of carers with disabilities. He **loses £121.84 a week**

<table>
<thead>
<tr>
<th>Income-related ESA Applicable Amount</th>
<th>Universal Credit Maximum Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Allowance</td>
<td>73.10</td>
</tr>
<tr>
<td>Work Related Activity Component</td>
<td>29.05</td>
</tr>
<tr>
<td>Carer’s Premium</td>
<td>34.60</td>
</tr>
<tr>
<td>Severe Disability Premium</td>
<td>61.85</td>
</tr>
<tr>
<td></td>
<td>£322.29</td>
</tr>
</tbody>
</table>

Ron is sceptical when his MP explains that welfare reform will protect the vulnerable and not increase child poverty.

N.B. Existing claimants will get transitional protection - but only if they switch to UC under “managed migration” and do not lose it. A “natural migration means no protection. The protection though does mean benefit will be frozen until ordinary UC catches up, which may be many years, while each month everything gets that little bit harder...
### Universal Credit (April 2015-16)

#### 1) CHECK CAPITAL

**Upper Limit:** £16,000. Ignore any capital under £6,000. Tariff income applies to capital in between. Some capital is ignored.

#### 2) MAXIMUM UC

<table>
<thead>
<tr>
<th>Category</th>
<th>Single</th>
<th>Joint</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Standard amount:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>per month</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>aged 16 to 24</td>
<td>£251.77</td>
<td>£251.77</td>
</tr>
<tr>
<td>aged 25 and over</td>
<td>£317.82</td>
<td>£317.82</td>
</tr>
</tbody>
</table>

**Joint claims:**
- if one or both aged 16 to 24: £498.89
- if both aged 25 or over: £498.89

#### 3) INCOME

**Net:** convert all amounts to calendar monthly; multiply by 52, 26, 13 or 4 as appropriate, then divide by 12

**A. Earned Income**
- Gross earnings less work expenses, income tax, National Insurance and any pension contributions
- claimant’s monthly earnings
- partner’s monthly earnings
- statutory payments (SSP, SMP, SAP, SPP, SSPP)

<table>
<thead>
<tr>
<th>Category</th>
<th>If HC*</th>
<th>No HC</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single:</strong> no children</td>
<td>£111</td>
<td>£111</td>
</tr>
<tr>
<td>with children</td>
<td>£263</td>
<td>£734</td>
</tr>
<tr>
<td>with &quot;limited capability&quot;</td>
<td>£193</td>
<td>£447</td>
</tr>
</tbody>
</table>

**B. Other UC Elements**
- Children / qualifying young people
- first/oldest child/QYP
- each subsequent child/QYP
- addition for child disability:
  - first/oldest child/QYP
  - additional for child disability:
    - each subsequent child/QYP

**B.1 Tariff income from capital**
- £4.35 per £250 between £6,000 and £16,000

**B.2 Tariff income from capital**
- £367.92
- £231.67
- £277.08
- £498.89
- £395.20
- £317.82

**B.3 Other income:**
- Ignore all payments: in kind, fostering, s17 & s24, loan protection, all voluntary/charitable payments
- Ignore all child maintenance
- **Count in full:**
  - occupational or works pension
  - spousal maintenance
  - student grants or loans
  - any other taxable income:

<table>
<thead>
<tr>
<th><strong>B. Unearned Income</strong></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Income**
- A + B

---

**An easy to use calculation sheet with all the information to hand when working out Universal Credit entitlement**

<table>
<thead>
<tr>
<th><strong>Universal Credit due</strong></th>
<th>before any transitional additions OR deductions for e.g. arrears, sanctions, advances</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Income</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Daily Living Component

1. **Preparing food**
   - b. Needs an aid or appliance to manage toilet needs or incontinence ... 2  
   - c. Needs supervision or prompting to be able to manage toilet needs ... 2  
   - d. Needs assistance to manage toilet needs ........................................ 4  
   - e. Needs assistance to be able to manage incontinence of bladder or bowel ... 6  
   - f. Needs assistance to manage incontinence of bladder and bowel ... 8  

2. **Taking nutrition**
   - Needs:  
     - i. to use an aid or appliance to prepare or cook a simple meal ....... 2  
     - ii. supervision to take nutrition; or  
     - iii. assistance to cut up food .......... 2  
   - Needs a therapeutic source to ....... 2  
   - Needs prompting to take nutrition... 4  
   - Needs assistance to manage a therapeutic source to take nutrition 6  
   - f. Cannot prepare and cook food ...... 8  

3. **Man mor**
   - Either:  
     - i. to use an aid or appliance to wash or bathe at all .......... 10  
     - ii. to use an aid or appliance to wash or bathe; not at all ........ 8  
   - b. Needs a therapeutic source to wash or bathe. ........ 2  
   - Needs assistance to be able to wash either hair or body below waist ......... 2  
   - Needs assistance to get in or out of bath or shower......................... 3  
   - Needs assistance to be able to wash body between shoulders and waist .................. 4  
   - f. Cannot wash or bathe at all ........... 8  

4. **Washing and bathing**
   - b. Needs an aid or appliance to wash or bathe at all ... 8  
   - Needs to use an aid or appliance to wash or bathe. ........ 2  
   - Needs supervision or prompting to be able to wash or bathe................. 2  
   - Needs assistance to be able to wash either hair or body below waist ......... 2  
   - Needs assistance to get in or out of bath or shower......................... 3  
   - Needs assistance to be able to wash body between shoulders and waist .................. 4  
   - g. Cannot wash or bathe at all ........... 8  

5. **Managing toilet needs or incontinence**
   - b. Needs an aid or appliance to manage toilet needs or incontinence ... 2  
   - c. Needs supervision or prompting to be able to manage toilet needs ... 2  
   - d. Needs assistance to manage toilet needs ........................................ 4  
   - e. Needs assistance to be able to manage incontinence of bladder or bowel ... 6  
   - f. Needs assistance to manage incontinence of bladder and bowel ... 8  

### 6. Dressing and undressing
   - b. Needs assistance to dress or undress. 2  
   - c. Needs either –  
     - i. prompting to dress, undress or determine appropriate circs. to remain clothed; or  
     - ii. prompting or assistance to be able to select appropriate clothing...... 2  
   - Needs assistance to dress or undress:  
     - d. lower body .............................. 2  
     - e. upper body.............................. 4  
     - .................................................................................. 8

### 7. **Planning and following journeys**
   - b. Needs prompting to undertake any journey to avoid overwhelming psychological distress to self ... 4  
   - c. Cannot plan the route of a journey.. 8  
   - d. Cannot follow route of an unfamiliar journey without another person, assistance dog or orientation aid... 10  
   - e. Cannot undertake any journey because it would cause overwhelming distress to self.......................... 10  
   - f. Cannot follow the route of a familiar journey without another person, assistance dog or orientation aid... 12

### 8. **Making budgeting decisions**
   - b. Needs prompting or assistance to make complex budgeting decisions. 2  
   - Needs prompting or assistance to make simple budgeting decisions .... 4  
   - d. Cannot make any budgeting decisions at all ........................................ 6

### Easy single page listing of the activities and descriptors for the Personal Independence Payment

#### Personal Independence Payment descriptors (2013 Regulations)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Standard Rate (8 to 11 points)</th>
<th>Enhanced Rate (12 + points)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Preparing food</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
<tr>
<td>2. Taking nutrition</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
<tr>
<td>3. Man mor</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
<tr>
<td>4. Washing and bathing</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
<tr>
<td>5. Managing toilet needs or incontinence</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
<tr>
<td>6. Dressing and undressing</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
<tr>
<td>7. Planning and following journeys</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
<tr>
<td>8. Making budgeting decisions</td>
<td>2, 4, 2</td>
<td>2, 4, 6, 8</td>
</tr>
</tbody>
</table>

**Notes:**
- Always read descriptors in context of general guidance (e.g. reliability, variability and safety) or guidance relating to that activity or descriptor.

**Enhanced Rate = 12 + points within each component**
...and activity by activity...
Guidance, comment & PIP2 examples:

Daily Living Component

1. Preparing food

DWP definitions

A test of the claimants ability to make a simple meal. "Not a test of their cooking skills but instead a consideration of impairments to perform the tasks required [such as] open packaging, serve food, peel and chop, use a microwave or cooker hob"

- **Preparing food** is legally defined as means “activities to make food ready for cooking and eating (e.g. peeling and chopping)”
- **Cooking food** means “at above waist height using a microwave or hob, not bending to an oven” (legal definition)
- **A simple meal** is legally defined as a “cooked one-course meal for one from fresh ingredients”
- **Packaging** includes tins and use of a tin opener
- **Aids and appliances** here could include “perching stools, lightweight pans, easy grip handles, single lever taps”

<table>
<thead>
<tr>
<th>Factor</th>
<th>DWP “reliability” examples</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Safely</strong></td>
<td>• Fire resulting from not understanding how to use an electrical appliance or gas hob correctly</td>
</tr>
<tr>
<td></td>
<td>• Increased risk of cutting oneself or another person</td>
</tr>
<tr>
<td></td>
<td>• Burning or scalding oneself, e.g. if an individual is likely to drop a saucepan or spill contents</td>
</tr>
<tr>
<td></td>
<td>• An 'actively' suicidal person may require supervision, or be unable to do safely at all, due to the risk of self harm posed by access to knives, naked flames, hot implements and food - if applies is likely to have a care plan</td>
</tr>
<tr>
<td><strong>To an acceptable standard</strong></td>
<td>• Achieve a simple cooked meal for one prepared from fresh ingredients which is edible and properly cooked</td>
</tr>
<tr>
<td></td>
<td>• Not cooking ability so issues such as presentation don’t count</td>
</tr>
<tr>
<td></td>
<td>• If never needed to cook - consider physical and cognitive ability if had to</td>
</tr>
<tr>
<td></td>
<td>• Nutrition and variety don’t count - is ability to prepare and cook not plan diet</td>
</tr>
<tr>
<td><strong>Repeated</strong></td>
<td>• Can prepare a meal, but the exhaustion from doing so means can only do it once a day so cannot do it repeatedly</td>
</tr>
<tr>
<td><strong>In a reasonable time</strong></td>
<td>• Physically capable of preparing a meal, but need for formalized ritual means it takes all morning to prepare breakfast</td>
</tr>
</tbody>
</table>

Descriptors and specific guidance

a. Can prepare and cook a simple meal unaided. 0
b. Needs to use aid or appliance to either prepare or cook a simple meal. 2

c. Cannot cook simple meal using a cooker but can using a microwave 2

might apply to those “who cannot safely use pots or pans”
d. Needs prompting to be able to either prepare or cook a simple meal 2

might apply to those who “lack motivation, who need to be reminded to prepare and cook food or who are unable to ascertain if food is within date”

e. Needs supervision or assistance to prepare or cook a simple meal 4

might apply to those who “need supervision to prepare and cannot safely use a microwave oven; or to claimants who cannot prepare or safely heat food” and captures “significant risk of self harm or suicide intent”

f. Cannot prepare and cook food at all 8

Comment

This echoes the cooking test for DLA Lowest Care but is unlikely to get you enough points on its own. But there may be points in other activities that can add to any here to get you the 8 for standard rate.

Heating up a prepared ready meal in the microwave is not using a microwave to cook a simple meal from fresh - explain if this the limit of your motivation.

Descriptor F, the 8 point descriptor, does not include the ability to prepare and cook a simple meal from fresh ingredients - it is any food at all, e.g. a microwave burger.

Note that prompting scores 2 but assistance/supervision score 4; if there are elements of risk involved then it’s definitely worth stressing this.

Pre-chopped vegetables are not considered an aid/appliance in the guidance, but reliance on them could show a need for aids or assistance.

What people often say:

○ I feel so low I just can’t make myself do it
○ I can’t think what to eat, let alone cook
○ My anorexia makes it a real struggle being around food just to eat it, let alone during all the preparation
○ I just do ‘convenience’ things, not fresh food
○ My concentration is bad - I can’t co-ordinate things or follow instructions
○ I don’t make sure that things are properly cooked
○ I forget I’ve put food on and wander off
○ I let things burn/ there have been fires/ I burn myself
○ I try cooking in the middle of the night and end up leaving things on
Tell us in Questions 3 to 15 how your health conditions or disabilities affect your day-to-day activities.

Q3

Preparing Food

Use page 6 of the Information Booklet

Please tell us about your ability to prepare a simple one course meal for one from fresh ingredients. This includes things like:

- food preparation such as peeling, chopping or opening a can, and
- safely cooking or heating food on a cooker hob or in a microwave oven.

We want to know if you can do this safely, to an acceptable standard, as often as you need to and in a reasonable time.

Tick the boxes that apply to you then provide more information in the Extra Information box.

Q3a Do you use an aid or appliance to prepare or cook a simple meal?

Aids and appliances include:

- perching stools, lightweight pots and pans, easy grip handles on utensils,
- single lever arm taps and liquid level indicators.

Q3b Do you need help from another person to prepare or cook a simple meal?

Help includes someone:

- physically assisting you to prepare to cook food,
- cooking your food for you,
- supervising you to make sure you are safe, and
- prompting, encouraging or reminding you to cook food or how to do so.

This includes help you have and help you need but don’t get.

If you put something in the box below you don’t have to fill all of the box.

Anxiety/Depression & Self Harm

My motivation is so low and my concentration is so poor that even if I can push myself to start, I often cannot finish making a meal for myself. When I do it tends to be something quick you can just stick in the microwave, but I won’t do that reliably and don’t prepare it, just heating up a ready meal, not cooking. (Desc 1c & d)

When I have tried to cook on the hob I end up burning things or myself because my concentration goes. (Desc 1e)

Psychosis:

My concentration is poor and I can also get distressed by the voices or thoughts of others when I am trying to do things. When I have tried to cook, I end up burning things – or myself – because my concentration just goes. Other times I undercook things – or myself – because my concentration is so poor. (Descriptors 1c & e)

It is better to tick ‘yes’, ‘sometimes’, or ‘no’ than ‘sometimes’ even though you can sometimes.

If you don’t want to tick any option to prepare or cook a simple meal.

Q3 Extra Information - Preparing Food

Tell us in Questions 3 to 15 how your health conditions or disabilities affect your day-to-day activities.
### Income Support, Income-based JSA, Income-related ESA & Housing Benefit

#### PERSONAL ALLOWANCES:

- **Single Person** (no children)
  - aged 16 to 25: £57.90 / £73.10
  - aged 25 plus: £73.10
  - HB over PC age: £151.20
  - HB over 65: £166.05

- **Dependant children / QYP**
  - 87.50 if both under 18 or 114.85 if only 1 partner is under 18.
  - HB over 65: £300
  - PB over PC age: £157.00

- **Aged 18 plus**
  - HB aged 16 to 25: £114.85
  - Single Person THRESHOLD: £70

#### THRESHOLD:

- £6,420 taper 41p per £1

### PREMIUMS/ COMPONENTS

**Any / all of**

- Carer’s: £36.60
- Severe Disability: £61.85
- Enhanced Disability: £15.75
- Not with pensioner premium

**Plus only the highest of**

- Disability: £32.25
- Single: £45.95
- Not £45.95

#### TARIFF INCOME:

- £1 for every £250 or part £250 over £6,000. HB over PC age/65+: £1 per £500 over £10,000

#### HOUSING COSTS:

- **Waiting time:** Claims made after 04/01/09 (unless linking rules apply):
  - Weeks 0-13 nil, 100% thereafter
  - Limits: £200,000 ceiling. Limited to 104 weeks for JSA

#### INCOME DISREGARDS:

- **Earnings**:
  - single: £5.00
  - couple: £10.00

- **Other**:
  - Child Tax Credit
  - Child Dependence Allowance
  - Child Tax Credit

### HANDY DOUBLE PAGE RATES CHART

#### CHILD TAX CREDIT

- **CAPITAL LIMIT:** none

- **MAXIMUM CTC**:
  - annual weekly family element: £545 (10.43)
  - individual element: £2,780 (53.20)
  - plus disability: £3,140 (60.06)
  - plus severe disability: £1,275 (24.43)

- **NB CTC** is calculated annually with daily elements circumstances change. Weekly amounts reflect actual payments

- **INCOME DISREGARDS**:
  - as for Working Tax Credit

- **THRESHOLD**:
  - for CTC only: £6,105 to £308.02
  - use WTC threshold of £6,420 if claiming both WTC and CTC taper: £41 per £1

#### PENSION CREDIT

- **CAPITAL LIMIT:** none

- **TARIFF INCOME**:
  - £1 income assumed for every £50 or part of £50 over £10,000

- **GUARANTEE CREDIT**:
  - Standard minimum Guarantee: single: £151.20, couple: £230.85

- **Additions**:
  - severe disability: £61.85
  - carers: £34.60

- **SAVINGS CREDIT**:
  - Threshold: single: £126.50, couple: £201.80

#### WORKING TAX CREDIT

- **CAPITAL LIMIT:** none

- **TARIFF INCOME**:
  - £16,000

- **STANDARD ALLOWANCES**:
  - monthly: £43.50
  - weekly: £210.58

- **INCOME DISREGARDS**:
  - as previous tax year:
    - basic element: £627.82, couple: £731.82
    - taper: £498.89
    - 10.43

- **ELEMENTS**
  - carers: £912.50
  - child: £231.67
  - other: £317.82

- **MAX SAVINGS CREDIT**:
  - £2,167 for 1 child, £1,517 for 2 or more

#### UNIVERSAL CREDIT

- **CAPITAL LIMIT:** £1,000

- **TARIFF INCOME**:
  - £43.50 monthly for every £250 or part £250 over £6,000

- **STANDARD ALLOWANCES**:
  - HC/housing costs: £32.29
  - single: £1,124.50
  - couple: £1,782.50

- **BENEFITS CAP**
  - earnings threshold: £430.00
  - max benefits single: £1,517
  - couple: £2,167

- **WORK ALLOWANCES**:
  - £912.50

- **OTHER DISREGARDS**
  - max for 1 child: £674.00
  - max for 2 or more: £1,210.58

#### Abbreviations:

- AA: Attendance Allowance
- ADA: DisabilityLiving Allowance
- CAA: Child Benefit
- CB: Child Dependence Allowance
- ESA: Employment and Support Allowance
- HB: Housing Benefit
- JSA: Jobseeker’s Allowance
- PC: Pension Credit
- PFP: Payment Plus
- SAP: Statutory Sick Pay
- SPP: Statutory Paternity Pay
- WTC: Working Tax Credit
- WTC: Working Tax Credit
- WCA: Work Capability Assessment

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*Income from savings: all*

*Max Credits: Savings Credit: for qualifying income also ignore: WTC, IB, Contribution based JSA, SDA, Maternity Allowance, maintenance from a former spouse*

*Capital disregard for ESA cases counted net of ESA component.*
**TRAINING COURSES**

You’ve read the Book, now see it live…

If you can organise a venue and gather up to 16 people, we have courses; we will travel!

“In house” Big Book training courses from as little as £40 per person. Using the Big Book as resource and practical toolkit to take with you as you make a real difference. Follow up options also available.

**Introductory courses:** for beginners and non-specialists - e.g. support workers, CMHTs, LMs. No prior benefits knowledge is assumed

An introduction to changing benefits

A one day general course for those new to the benefits system who want to gain the knowledge to signpost with confidence and understand income maximisation, with a nod to all the changes

Benefits and Mental Health (2 day)

The original course of the book! Now - extensively revised and updated - looking in depth at income maximisation tactics and strategies. Introductory only in that it assumes no prior benefits knowledge, but takes you beyond by focussing in more detail on core benefits. You will get a practical confidence in tackling ESA and PIP forms, write effective supporting letters, and checking means tested benefit sums. Popular with support workers, CMHTs and Housing Associations.

Benefits and Older People - 1 or 2 day option

In one day, a similar plan as the course above, but focussing on the less complex but still baffling issues for people over pension age - focusing on properly taken up Pension Credit and Attendance Allowance. (From both a mental and physical health perspective. Over two days we can look at ESA and PIP which become increasingly relevant at 50 plus. Popular with Housing Associations/ supported workers.

Intermediate courses: for those with some overview awareness wanting to focus in on specific benefits

Welfare Reform: Sickness and Disability Benefits

Our former Sickness and Disability Benefits day updated - the impacts of migration to Employment and Support Allowance in its latest guise and the switch from DLA to the new Personal Independence Payment. This course - suitable for advisers and non-specialists alike - looks at the background, impacts and practical ways to support clients through the changes

Employment and Support Allowance

A one day course looking at the changing face of sickness route benefits - no prior benefits knowledge assumed - aimed at workers who might help with claim forms, supporting letters etc.

Personal Independence Payment

A one day overview of PIP: PIP structure and timetable, Non-disability criteria (age limits, residence requirements, qualifying periods etc. the disability criteria -points and prizes) and how to tackle those forms and support claims effectively. And how will existing DLA claimants be affected: the “invitation” process, and likely winners and losers!

For detailed course outlines, costs, availability etc. please contact;

enquiries@bigbookofbenefits.com

Or visit: www.bigbookofbenefits.com or see us on Facebook

“Made a frightening subject interesting and clearer - non jargonistic and thought provoking”

“Informal.....full of humour... Delivery of essential information both verbal and through visual aids ”

“The best course I have been on in all the years I’ve been employed by...”

“Informative, lively, very interesting and essential for my work with service users”

“Superb course - very informative and relevant to client group”

Universal Credit - 1 or 2 day option

An in depth look at this ambitious project to simplify the system... including timetables, migration, elements, earnings disregards, calculations, conditionality, payments and appeals. A full overview in 1 day overview or 2 days to cover a wider range of scenarios, sums and the UC related changes already in.

Welfare Reform: An overview

Exactly what it says on the tin. A run through all the recent and forthcoming changes, tailored to highlight changes affecting your particular client group and including more in-depth tactical tips on problem areas - e.g. ESA and a look at PIP and Universal Credit. Assumes some previous awareness. If not see Introduction

From Housing Benefit to UC/PC housing credit

A 1 day catch up on all the changes to Housing Benefit - local housing allowances, bedroom tax, single room rents, benefit caps, payments etc. in HB's last years. And issues for EEA nationals With a look ahead to changes as HB merges into Universal and Pension Credits.

In-depth courses: aimed at those who advise people on benefits entitlement - welfare rights workers benefits advisers, CAB advisers etc. More technical in content but retaining accessibility, practicality and a sense of humour.

Mental health -& sickness and disability benefits

A one-day course for those who may know their PIPs and ESA, but want to look more at how to relate common mental health diagnoses to PIP, DLA, AA and ESA claims, and approaches to ESA/UC50s and PIP2 and AA forms. Also to look at the barriers people with mental health issues face in accessing benefits and

ESA and UC limited capability for Advisers

The nitty-gritty detail of ESA - and recent changes - plus tactical tips for helping people to negotiate assessment and migration. Aimed at those who need to know the ins-and-outs of ESA/ perform better off calculation/ represent at Appeal. Assumes familiarity with ESA basics

Recent & forthcoming changes for advisers

A detailed exploration of recent changes across the benefits system and their implications as well as looking at major changes ahead, including PIP and Universal Credit.

PIP for Advisers / UC for advisers

Two different 1 day courses - separately or together. You may have already got to grips with the basics, so we focus instead on: for PIP

- for PIP - ways through the chaos, issues for specific client groups and challenging PIP decisions

- For UC - sums in detail, conditionality and sanctions, better off issues and challenging decisions..

Other Courses: We get asked for other courses too. We can mix and match or something completely different such as: Benefits for EEA nationals and Children, Young People & Disability