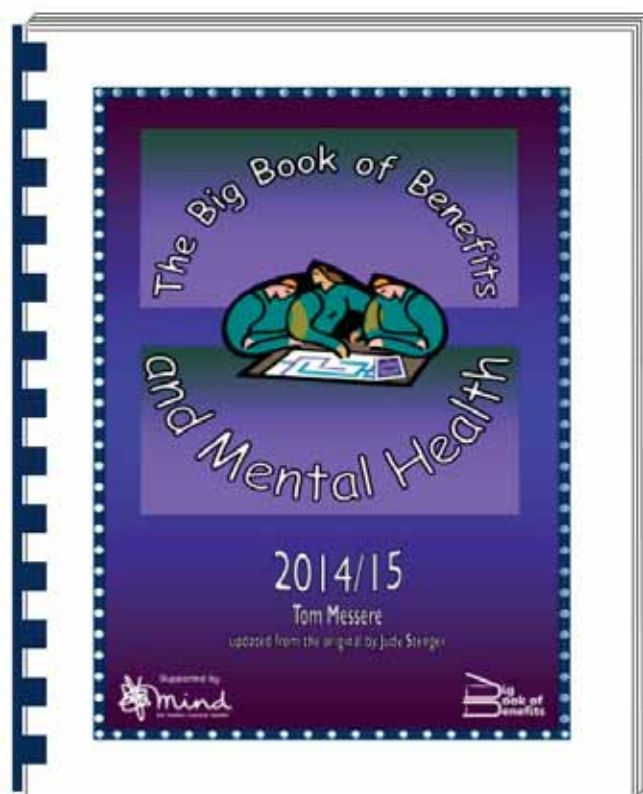


Excerpts from:



The Big Book of Benefits and Mental Health 2014 / 2015

Available from www.cpag.org.uk/bookshop/bbm

For more details of the book and training please:

- ♦ visit www.bigbookofbenefits.com
- ♦ see us on [facebook](#)
- ♦ e-mail: tommessere@gmail.com



Welcome to the Big Book of Benefits and Mental Health

Welcome to this fourteenth edition of *The Big Book of Benefits and Mental Health*. It's big changes to the benefits system and the **Big Book**, not least because once again, it's not Jude in her rightful place penning this introduction.

Big Book changes

Last year's Book was a hard one to write with the loss of Judy so fresh and the scale of changes so big. The book was so much Judy's that I was unsure to continue unaided, but the need and demand was out there for an unique practical toolkit in a changing benefits world.

This year we have moved home, with Mind's blessing, to Child Poverty Action Group (CPAG) as our main distributors. We are honoured to be on their lists and love the idea that distribution profits go to a good cause, but remain equally proud to continue our links with Mind and carry their logo on the cover.

Adding in full chapters on the new benefits while keeping the old - during years when it will increasingly feel like two benefits systems running in parallel - stretched our binding to its limits. Our apologies for growing again this year - such is the complexity of benefits "simplification"

But please let us know what you think: what could be left out or included, any errors spotted or bits that don't make sense. See the feedback sheet on page 363.

Changes to the book this year include:

- An enlarged the contents over two pages so it's easier to see the shape and structure of the book.
- A renewed emphasis on our Three Steps to Benefits Heaven approach to help you navigate the benefits system and access your full entitlement.
- With work conditions and sanctions being increasingly important, we have brought together an updated/enlarged information in a new Benefits, Conditionality and Work chapter. There you'll find information on ESA work related activity, the Work Programme, surviving as a Jobseeker and the all in one conditionality and sanctions for Universal Credit.
- Updated and revisions to the main chapters on Personal Independence Payment and Universal Credit.
- More practical help on DLA forms (as the DWP are still issuing them in many parts of the country) and of course AA ones which will continue.
- A new Paying for Housing chapter brings together the latest on Housing Benefit, the "bedroom tax" etc.,
- Updated and separated Mental health diagnoses and disability benefits, a closer look at bi-polar disorder

Cuts and Welfare Reform

All chapters have been revised and updated, such is the relentless pace of change. As Jude wrote in 2012/3

"Has there ever been a more difficult time to be a claimant? I think not, this side of Beveridge. 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."

Some cuts affect current benefits e.g. tax credits and Housing Benefit. A new stealth cut for all affects your annual uprating, with many hit by a 1% limit. But there are also three big changes - "two migrations and an offer you can't refuse". - affecting people with mental health issues

- The first migration over from Incapacity Benefit / Income Support to **Employment and Support Allowance (ESA)**. was due to be completed by April 2014, but still continues while new claims are taking well over 13 weeks to be assessed. Official reviews of the WCA have felt the test was fine, but the implementation less so, especially in mental health. New case law suggests judges agree - the WCA has been ruled discriminatory and reports from physios of little value. Meanwhile new sanctions are tripling with the proportion with mental health issues up from 42% to 58% while the Work Programme is troubled.

See both the chapters on *ESA and Benefits, Conditionality and Work* for details, updates tips, tactics and *ESA50 forms*

- The second migration may feel out of sight, out of mind. Existing ESA claimants will not have to switch to **Universal Credit** until after October 2017, but new claims will start long before then. As well as the new challenges of claiming online, managing your money monthly including your rent, there is a huge gap where vital disability elements should be. New claimants and existing ones switching to UC could be significantly worse off and even those able to get limited transitional protection will have benefits frozen for many years.

See the *Universal Credit Chapter*

- The October 2013 big bang for **Personal Independence Payment** was partial so you may still have a DLA form to fill in See the *AA and DLA chapter for improved support with AA and DLA forms*. The pace of processing independent claims is snail like - the DWP say expect it to take 21 to 26 weeks, so its too early to say if the new medicals will do any better than ESA

See the *PIP chapter for the story so far and top tips as well as updated sample PIP2 forms*.

I hope then that this Big Book will be of benefit - for you and the people you support - in these "interesting times".

Good luck and best wishes

Tom Messere - April 2014



Contents

Barriers to Benefits	5
Steps to Maximum Entitlement - what you can claim	13
Welfare Reform and Summary of the Changes	27
 Step 1 ; Earnings replacement benefits and Statutory Payments	
<i>The basic non-means tested benefit when you are not working and statutory payments from an employer. You claim in your own right and usually can only get one at a time, but it can be worth claiming others. Often a Step 2 benefit offers a top up or an alternative if you can't qualify.</i>	
Sickness Route to Benefits -	39
Sick from work and Statutory Sick Pay, Employment and Support Allowance, Surviving the Migration form Incapacity Benefit/Income Support and SDA, how to fill in ESA50s and prepare for a medical, sample forms and supporting letters.	
Benefits for Carers	97
Carers Allowance, Carers Credit and Premiums and the impact of welfare reform on carers	
 Step 2 Means tested Benefits	
<i>Some help with low income - paid on top of - or instead of Step 1 benefits to or to help top up earnings from paid work. Others help with specific bills - rent, council tax - or one off spending see under Social Fund</i>	
Income Maintenance Benefits in Working Age	103
Income Support, Income related ESA, Income based JSA and surviving as a jobseeker, Housing Benefit and Council Tax Support	
Pension Credit	127
Child Tax Credit and Working Tax Credit	135
Paying for Housing Costs	151
Housing Benefit (including Local Housing Allowance and the bedroom tax), Council Tax Support and help with mortgage interest	
The changing Social Fund	169
What stays and what goes and where, local schemes, the Scottish Welfare Fund and the Discretionary Assistance Fund in Wales	
Universal Credit	177
Latest news on rollout and migration, how it works when it gets here, how to work out Universal Credit, the "disability elements" gap	

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 Step 2 or enabling carers to claim under Step 1*

Disability Benefits 1 - Attendance Allowance & DLA Introduction, Disability Living Allowance & Attendance Allowance , common difficulties, filling in the forms and sample AA form	199
Disability Benefits 2 - Personal Independence Payment The new Personal Independence Payment. new claims processes, the story so far, how to fill in PIP 2 forms, sample forms, switching from PIP to DLA case study: bi-polar conditions	249
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	305
Other Benefit Issues <i>An overview of growing work conditionality, making work pay and sanctions. .</i>	
Benefits, Work & Conditionality: ESA Work related activity, the Work Programme and Surviving as a jobseeker, In Work Benefits, Universal Credit and work conditionality	317
Benefits and Hospital What happens to your benefits if you are admitted	343
How to challenging benefit decisions Don't take no for answer! The new Mandatory Reconsiderations and independent appeals . See also under ESA, DLA and PIP	349
Training courses & Feedback - <i>make Your Big Book of Benefits yours!</i>	361
Benefit Rates Chart 2014/ 2015	365

NB: each chapter has its own detailed contents first page

Barriers to Benefits

*"The more likely you are to need help,
the less likely you are to receive it"*

Swansea GP

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.

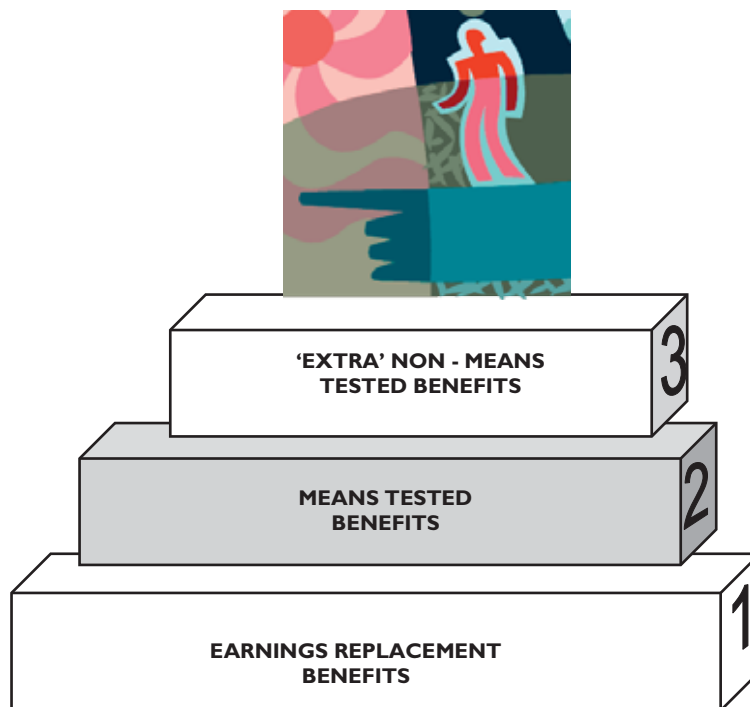
And just when we think we've got the hang of the layout, changes in the system throw new barriers in our path - the replacing of the sickness route benefits we were familiar with, by Employment and Support Allowance is proving to be a particularly difficult hurdle for many to negotiate and the move from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



Three Steps To Maximum Benefits



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 for all “working age” benefits

April 2011	Change in uprating for all benefits Increases will be set by the <i>Consumer Price Index</i> (which produces consistently lower increases) instead of the <i>Retail Price Index</i> or the Rossi index. CUT of £5,840 MILLION pa by 2014/15	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%
October 2012	Civil Penalties will be introduced for claimant error in claims for Benefit	Local Authorities and the DWP have discretion to enforce a civil penalty of £50 to claims which contained an error made by the claimant
April 2013	1% limit uprating limit Many benefits restricted to 1% for next 3 years PC Savings Credit – cuts in max SC and increased thresholds	Real cuts of 4% over next 3 years for many, an extra 200,000 children in poverty. DWP claims e.g. carers, disabled and ESA Support Component will be protected – but basic allowances for those claimants still be hit
April 2013	Benefits Cap Household Benefits cap 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. To be phased in across UK by September 2013. CUT of £270 million pa	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
April 2014	Overall Benefits Cap Total benefits spending - excluding Pensions and JSA - capped at current levels £119.5 billion	More gesture politics than practical effect. Other individual and general cuts listed here will impact most on claimants in or out of work.

Housing Benefit

April 2011	Local Housing Allowance 1. Local Housing Allowance maximum caps for 1 bed (£250), 2 bed (£290), 3 bed (£340) and 4 bed (£400). Separate rate for 5 bedrooms (at any amount) scrapped 2. Rates will be set at the 30 th percentile of local private rent prices, not the 50 th 3. Additional room in LHA if need for a carer to and now if a disabled child needs own room	1. Reducing the amount going to low-income households to help pay their rent, especially those who need a larger home 2. Only 1/3 (instead of 1/2) of available private rented housing locally affordable to HB claimants 3. Supports caring, but still ignores other needs (e.g. partners needing separate rooms, because of disability)
April 2011	Non-dependant deductions - large increases over next 3 years to make up ground since last increase 10 years ago.	Affects tenants with non-dependant adults (e.g. parents, grown up children, living in house). Non-dependants may not always be willing - or be asked - to make up the shortfall
January 2012	LHA Single room rent restriction for single people (not lone parents) under 25 extended to people aged under 35 . Rent only covers room in shared house not a 1 bed flat	Further extends restriction for people in private sector tenancies, increasing marginalisation and ghettoization. Exempt groups remain
April 2012 and April 2013	LHA rates frozen in April 2012 LHA up-rated in line with the <i>consumer price index</i> not average market rents.	Less variation from month to month – harder to find properties within LHA if rents increase substantially
April 2013	The “bedroom tax” . HB restricted to the number of rooms “needed” in social housing Rent eligible for HB reduced by 14 % if have one spare room and 25% if 2 or more spare rooms	No account taken of bedrooms for: shared care/ children due back from local authority care, separate rooms for disability (except some children after Court ruling) Affects 660,000 households (410,000 with disabilities)

Limited Capability for Work Related Activity

- i.e. eligibility for the Support Component - from 28th January 2013

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

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.

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

11) Initiating personal actions

- Cannot, due to cognitive function, at least to initiate actions

12) Coping with cognitive disorder

- Cannot cope with cognitive disorder, cannot be

13) Coping with engagement

- Engagement in social contact is always precluded due to difficulty relating to others or significant distress experienced by the

- c. above head height as if to reach for something (6)

4) Picking up and moving / transferring by use of upper body and arms -

Cannot:

- a. Pick up and move a 0.5 litre carton of liquid (15)
- b. Pick up and move a 1 litre carton of liquid (9)
- c. Transfer light but bulky object - e.g. an empty cardboard box (6)

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.

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

16) Chewing or swallowing

As 15 b) above, but involving the acts of

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

c. as b) but some difficulty (6)

8) 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 (15)
- b. Safely complete a potentially hazardous task such as crossing a road (15)
- c. Navigate around unfamiliar surroundings (9)

9) Absence or loss of control leading to extensive evacuation of the bowel or bladder - other than

while wearing/ normally or that

(* if weekly, experiences: n of the ladder; or from efficient to f & change of (15)

majority of h a toilet (6)

during

of lost/ sitting in significantly disrupted awareness or concentration:

- a. At least once a week (15)
- b. At least once a month (6)

Easy single page listings of the latest Work Capability Assessment descriptors for ESA

(NB these are overlapping reduced sizes pages for illustration)

Work Capability 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'

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.

Jude's observations:

Part 2 - Mental, cognitive and intellectual functions continued

17. Behaving appropriately with other people

This section looks at whether your behaviour upsets other people

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

☐

Now go to **question 18**

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

☐

Every day

☐

Often

☒

Occasionally

For example this might be because you are aggressive or act in an unusual way

☐

Actual descriptor for 17:

Appropriateness of behaviour with other people due to cognitive impairment or mental disorder

Has uncontrollable episodes of aggressive or disinhibited behaviour that would be unreasonable in any workplace:

- Daily *(15)
- Frequently (15)
- Occasionally (9)

Use this space to tell us why your behaviour upsets people and how often this happens. Explain your problems and give examples if you can. If it varies tell us how

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.

Universal Credit and disability

...protecting the most vulnerable?

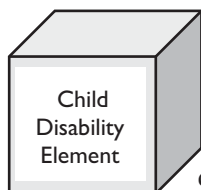
So how does UC deal with disability? And what are the implications for new and existing claimants?

The starting point was an objective of simplifying the sometimes complex and confusing range of disability support: disability, enhanced disability and severe disability premiums in IS/JSA and ESA, the ESA support components and the two tier disability elements within tax credits.

The UC model was to build on the tax credit two tier approach and for added tidiness align the rates to limited capability ones. This is exemplified in arrangements for children and pensioners below

Additions for child disability

Technically these are an addition to the child element, but just as easy to think of it as a separate element..



UC picks up the two tiers of the equivalent element in Child Tax Credit, the big change coming from the aim to align rates to adult limited capability elements, whether to make a quick cut or administrative tidiness

- ☞ The lower rate - as with CTC - applies to children getting any rate of DLA (or dependant young people on any rate of PIP). It is though paid at the weekly equivalent of £28.75 which is less than half the £59.50 in Child Tax Credit.
- ☞ The higher rate - again as with CTC - applies to children or QYPs getting the top rates of on DLA Care or PIP Daily Living. Here the Government departs from aligning to limited capability elements in order to target resources on the most vulnerable - at £83.50, equivalent to the CTC rate of £83.58.

Pensioner with disabilities

In future, couples where one partner is above Pension Credit age but the other is below, will have to claim Universal Credit rather than Pension Credit.

However, if the older partner gets a disability benefit, they will be “treated as” passing the tests for limited capability, as follows:

- ☞ limited capability for work element applies where the older partner receives any rate of DLA or PIP
- ☞ limited capability for work related activity will apply if that partner gets either of the top rates of PIP Daily Living or DLA Care or either rate of Attendance Allowance.

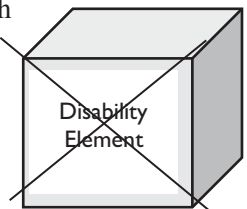
This gives some recognition though such a couple will still be considerably worse off than under Pension Credit. Protecting the most vulnerable?

Adult Disability Elements

However, no such arrangements apply for other adults. It as if the Government have forgotten the difference between “sickness benefits” (support with basic necessities while unable to earn) and “disability benefits” (extra help with care and mobility needs). Suddenly the talk became of the need for a “common gateway” via the Work Capability Assessment of limited capability. “Alignment” gave way to abolition

Many people with disabilities may be unable to work and so come under the WCA. Others though will have disabilities, but be working, looking for work or caring for children or people with disabilities.

With no “treated as” provision such claimants will have to undergo an extra test, despite having recently undergone the new robust PIP disability assessment. At best this seems an a waste of resources, adding a further burden to a WCA process which is already under severe pressure.



It is not just double testing waste—the two tests measure very different things. Someone forced to try their luck under WCA may - for once quite correctly be turned down. Their disability may not be one that limits their work capability. They, alongside those who do pass but only at the lower level will be denied access to the residual help for disability merged into the higher limited capability element.

Workers with disabilities

Things move from sublime to the ridiculous when it comes to people with disabilities in work. Working Tax Credit disability elements provide vital additional help for those on lower earnings.

No provision has been made for disabled workers, bar amending the rules to permit them to undergo the WCA and show limited capability for even work related activity on their way to their full time job!

The result

From sublime to ridiculous as the DWP argued that disability premiums were never intended to help with disability costs! The clue may be in the name and the policy rationale around their introduction .

The end result is that means tested disability support has been effectively abolished for adults - apart from those able to benefit from a higher “support component” - while being significantly cut for pensioners and children with disabilities.

See the next page examples . Helping make work pay for the disabled? Protecting the most vulnerable?

Disability: winners and losers under Universal Credit...

Overall, the DWP estimates that there will be 3.1 million winners and 2.7 million losers when comparing old with new systems, with an average extra £16 a month. This may well be right overall, but it seems for people with disabilities or long term illnesses the losers may outweigh the winners. With apologies to JK Rowling :-)

NB: Universal Credit is *always* calculated monthly. We use the UC weekly equivalents to aid comparison.

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 £20.45**

Income-related ESA Applicable Amount		Universal Credit Maximum Amount	
Personal Allowance	72.40	Standard Amount	72.40
Support Component	35.75	Limited Capability for Work Related	
Enhanced Disability Premium	15.55	Activity Element	71.75
	<u>£123.70</u>		<u>£ 144.15</u>

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 £39.65**

Income-related ESA Applicable Amount		Universal Credit Maximum Amount	
Personal Allowance	72.40	Standard amount	72.40
Support Component	35.75	Limited Capability for Work Related	
Enhanced Disability Premium	15.55	Activity Element	71.75
Severe Disability Premium	60.10		
	<u>£183.80</u>		<u>£ 144.15</u>

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 £60.10**

Income-related ESA Applicable Amount		Universal Credit Maximum Amount	
Personal Allowance	72.40	Standard amount	72.40
Work Related Activity Component	28.75	Limited Capability for Work	
Severe Disability Premium	60.10	Element	28.75
	<u>£161.25</u>		<u>£ 101.15</u>

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 expelliarms" from lost disability premiums, no benefit from the new LCWRA element, cuts in child disability and the mistreatment of carers with disabilities. He **loses £120.68** a week

Income-related ESA Applicable Amount		Universal Credit Maximum Amount	
Personal Allowance	72.40	Standard amount	72.40
Work Related Activity Component	28.75	No LCW element as he gets more in Carers	
Carer's Premium	34.20	Carers Element	34.20
Severe Disability Premium	61.10		
<u>Child Tax Credit :</u>			
Family Element	10.50	Child Element - first child	63.20
Individual Element	52.78	Child Disability element	28.75
Child Disability Element	59.50		
	<u>£319.23</u>		<u>£198.55</u>

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. 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 2014-15)

1) CHECK CAPITAL *Upper Limit: £16,000 .*

Ignore any capital under £6,000 . Tariff income applies to capital in between. Some capital may be disregarded..

2) MAXIMUM UC

A. Standard amount:

Single *per month*

aged 16 to 24 £249.28

aged 25 and over £314.67

Couples:

if one or both aged 16 to 24 £391.29

both aged 25 or over £493.95

Children / qualifying young people

First/oldest child/QYP £274.58

Each subsequent child/QYP £229.17

B. Other Elements:

Carer's - *per qualifyi*
Limited Capability f
Limited Capability f
Work Related Activ

Addition for child di
Lower Rate (*any rate*
Higher Rate (*HighstC*

C. Child Care

Actual Childcare C

• £532.29 pcm fo

• £912.50 pcm fr

Take 70%

equals UC childcare element

D. Housing Costs- if any

- Mortgage interest: (3 month waiting period)
- Interest on certain other secured loans
- Eligible Rent/ Local Housing Allowance
- Service charges / Ground Rent

less any ineligible service charges

*less any Housing Costs Contribution
rent only - £68.68 pcm per non-dep. but not if:*

- tenant on PIP Daily Livi, DLA Middle/Higher Care, AA
- non Dep: u21, resp. for child u5, on PC, DLA Middle/ Higher Care, PIP Daily Liv., AA or Carer's Allowance

equals Net Housing Costs

equals Maximum Amount

*less Total Income (from
step 3)*

Universal Credit *due*

before any deductions e.g. arrears, sanctions, advances

3) INCOME

£

p

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) per calendar month

less Work Allowance

Category	If HC*	No HC
Single no children	£111	£111
Single with children	£263	£734
Single with LCW/LCWRA	£192	£647

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

x 0.65

*All other benefits (inc. AA, DLA, PIP, Child Ben-
efit) are ignored.*

C. Tariff income from capital:
£4.35 per £250 between £6,000 and
£16,000

D. Other income:

*Ignore all payments: in kind, fostering, s17 &
s24, loan protection, all voluntary./ charitable payments*

Ignore all child maintenance

Occupational or works pension

Spousal maintenance

Student grants or loans

Any other taxable income:

equals Total Income

Personal Independence Payment descriptors (2013 Regulations)

Daily Living Component

1. Preparing food

- b. Needs to use aid or appliance to prepare or cook a simple meal 2
- c. Cannot cook a simple meal using a cooker but can using a microwave .. 2
- d. Needs prompting to either prepare or cook a simple meal..... 2
- e. Needs supervision or assistance to prepare or cook a simple meal 4
- f. Cannot prepare and cook food 8

2. Taking nutrition

- b. Needs:
 - i. to use an aid or appliance to... ; *or*
 - ii. supervision to take nutrition; *or*
 - iii. assistance to cut up food 2
- c. Needs a therapeutic source to..... 2
- d. Needs prompting to take nutrition... 4
- e. Needs assistance to manage a therapeutic source to take nutrition 6

f. Cannot move more than 10m unaided 0

3. Moving Around

- a. Either:
 - i. dc
 - or
 - ii. or
- b. Need:
 - i. to m
 - ii. su
 - as
 - or

Needs st

assistant

c. up to

d. betw

e. betw

f. at least 14 hours a week 8

4. Washing and bathing

- b. Needs to use an aid or appliance to wash or bathe 2
- c. Needs supervision or prompting to be able to wash or bathe..... 2
- d. Needs assistance to be able to wash either hair or body below waist..... 2
- e. Needs assistance to get in or out of bath or shower..... 3
- f. 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 aid/appliance to dress/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
 - f. Cannot dress or undress at all 8

- d. Cannot make any budgeting decisions at all 6

11. Planning and following journeys

- b. Needs prompting to undertake any journey to avoid overwhelming psychological distress to self..... 4

Mobility Component

- 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

12. Moving Around

- a. Cannot move more than 10m unaided 0
- b. Cannot move more than 50m. 0m. either aided 4
- c. Cannot move *unaided* less than 50m.. 8
- d. Cannot move *using an aid* more than 20m but no 10
- e. Cannot move more than 20m, either 12
- f. Cannot move more than 1 metre 12

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

- e. Cannot read or understand signs, symbols or words at all..... 8

9. Engaging with others face to face

- b. Needs prompting to engage with other people 2
- c. Needs social support to engage 4
- d. Cannot engage with others as causes:
 - i. overwhelming psychological distress to the claimant; *or*
 - ii. to exhibit behaviour which would result in a substantial risk of harm to themselves or another person... 8

10. Making budgeting decisions

- b. Needs prompting or assistance to make *complex* budgeting decisions. 2
- c. Needs prompting or assistance to make *simple* budgeting decisions.... 4

- a. can manage [activity] unaided..... 0

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

Standard Rate = 8 to 11 points
Enhanced Rate = 12 + points
within each component

...and activity by activity...

Guidance and comment:

Daily Living Component

I. Preparing food

DWP Guidance

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** 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”
- **A simple meal** is 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”

Factor	DWP “reliability” examples
Safely	<ul style="list-style-type: none"> • Fire resulting from not understanding how to use an electrical appliance or gas hob correctly • Increased risk of cutting oneself or another person • Burning or scalding oneself, e.g. if an individual is likely to drop a saucepan or spill contents
To an acceptable standard	<ul style="list-style-type: none"> • Achieve a simple cooked meal for one prepared from fresh ingredients which is edible and properly cooked • Not cooking ability so issues such as presentation don’t count • nutrition and variety don’t count as this ability to prepare and cook not plan diet
Repeated	<ul style="list-style-type: none"> • Can prepare a meal, but the exhaustion from doing so means can only do it once a day so cannot do it repeatedly
In a reasonable time	<ul style="list-style-type: none"> • Physically capable of preparing a meal, but need for formalised ritual means it takes all morning to prepare breakfast



Descriptors and specific guidance

- Can prepare and cook a simple meal unaided.0
- Needs to use aid or appliance to either prepare or cook a simple meal 2
- Cannot cook simple meal using a cooker but can using a microwave 2
might apply to those “who cannot safely use pots or pans”
- 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”
- 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”
- Cannot prepare and cook food at all 8

Comment

This echoes the cooking test for DLA Lowest, but is unlikely to get you enough points on its own. But there may be points in other activities that add up to the 8 points needed for the standard rate of PIP.

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.

Examples of difficulties:

- ◇ 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 go 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

i 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.

Yes ☐

No ☒

Sometimes ☐

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.

Yes ☒

No ☐

Sometimes ☐

It is better to tick 'yes' than 'sometimes', even though you can sometimes manage without help, experience from ESA shows 'sometimes' will be dis-counted—use the box to explain any variations or fluctuations in your needs.

Q3 Extra information - Preparing Food

Tell us more information about the difficulties or help you need to prepare and cook food. For example, tell us things like:

- If you cannot do this safely, to an acceptable standard, as often as you need to and in a reasonable time.
- If you need help from another person, tell us what kind (for example whether they need to remind or motivate you to cook, plan the task for you, supervise you while you are doing it, physically help you or prepare all your food for you).
- If you use aids and appliances, tell us what type they are and how you use them.
- If you can only cook using a microwave.
- If your ability to do it varies, tell us in what way and how often - for example, telling us about good and bad days or how it varies throughout the day.
- If you can do it but it takes you a long time.
- If you have side effects from carrying out the activity - either during or after the activity - like pain, breathlessness or tiredness.

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. I'll eat it straight from the plastic
When I have tried to cook on the hob I end up burning things or myself—because my concentration goes.
Psychosis: My concentration is poor and I can also get distracted by the voices or thoughts 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 and often get a bad stomach. When this happens my tablets don't work as well and I have less control.



TRAINING



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" courses from as little as £30 per person. Please see over for details of the Big Book of Benefits and Mental Health.

Introductory courses: for beginners and non-specialists - e.g. support workers, CMHTs, LMAs

Benefits and Mental Health

The original course of the book! A 2 day course - extensively revised and updated - looking in depth at income maximisation tactics and strategies. Assumes no prior benefits knowledge. Includes: ESA, Personal Independence Payment, Carer's Allowance, current means tested entitlement and the Universal Credit to come

Welfare Benefits Overview

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 Older People - 1 or 2 day option

A one day look at income maximisation and entitlement in older age - including Pension Credit calculations and Attendance Allowance claims from both a mental and physical health perspective. Particularly popular with Housing Associations/ supported accommodation providers. No prior benefits knowledge assumed. A 2 day option brings in ESA and DLA for in the run up to retirement.

Intermediate courses: as above but a little more in depth - gentle updates and a little more in depth

Welfare Reform and Benefits Update

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

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. No prior benefits knowledge assumed.

For detailed course outlines, costs, availability etc.
please contact:
tommessere@gmail.com

Or visit www.bigbookofbenefits.com or
see us on [facebook](https://www.facebook.com/bigbookofbenefits)

New benefits courses - Both PIP and UC can be adapted to the needs of either non-specialist support workers or advisers

Personal Independence Payment

A day course covering PIP in depth and exploring the challenges and opportunities it poses for advisers and support workers. Including PIP structure, timings and "invitation process", non-disability criteria - age limits, residence requirements, qualifying periods etc. disability criteria - activities and descriptors, the claims and assessment process, impact on other benefits, and what happens to existing DLA claimants - likely winners, losers and implications.

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.

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. 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, a down to earth approach and sense of humour.

Mental health - working with people claiming sickness and disability benefits

A one-day course looking at how common mental health diagnoses relate to PIP, DLA, AA and ESA claims, the barriers people face when accessing both benefits and advice and tactical approaches to income maximisation across the diagnostic spectrum.

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 the concept of ESA.

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.

"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"



INCOME SUPPORT, Income-based JSA & Income-related ESA

PERSONAL ALLOWANCES:

Single Person (no children)
aged 16 to 25 57.35/ 72.40¹
aged 25 plus 72.40
¹ applies if in main phase of ESA or if lone parents 18+ on JSA/ESA/IS

Lone Parent

aged 16 or 17: 57.35
aged 18 plus 72.40

Couples

either/ both under 18 varies*
both over 18 113.70
* varies from 57.35 to 113.70



Dependant children

In almost all cases now covered by Child Tax Credit/ Child Benefit.

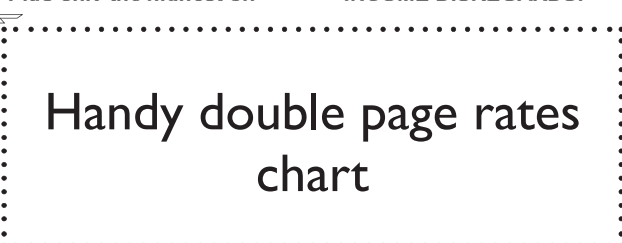
Any remaining awards in IS/JSA should transfer to CTC with changes in circs or switch with CTC to UC.

PREMIUMS/ COMPONENTS

Any / all of:

Carer's 34.20
Severe Disability 61.10
Enhanced Disability-
not with pensioner premium
single 15.55
couple 22.35

Plus only the highest of:



is paid with ESA component, but this is taken off the premium.

ESA Components:

work related activity 28.75
support 35.75
no couple rates. Even if both partners are ill, only one component payable.

CAPITAL LIMIT: £16,000

TARIFF INCOME: £1 income assumed for every £250 or part of £250 over £6,000

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:

War Pensions 10

Others:

child maintenance all
vol./ charitable payments all
student loans 10.00
student covenanted income 5.00
boarder's rent £20+50% rest
sub tenant's rent 20.00
income from savings all

BENEFITS RATES
APRIL 2014-15
Means Tested

Abbreviations:

AA	Attendance Allowance
ADA	Adult Dependant Addition
CAA	Constant Attendance Allowance
CB	Child Benefit
CDA	Child Dependant Addition
CTR	Council Tax Reduction
CTC	Child Tax Credit
DLA	Disability Living Allowance
ESA	Employment and Support Allowance
ESDA	Exceptionally Severe Disablement Allowance
GA	Guardians Allowance
HB	Housing Benefit
IBJSA	Income based Jobseeker's Allowance
IB	Incapacity Benefit
IIDB	Industrial injuries Disablement Benefit
IS	Income Support
JSA	Jobseekers Allowance
MA	Maternity Allowance
PC	Pension Credit
RP	Retirement Pension
SAP	Statutory Adoption Pay
SDA	Severe Disablement Allowance
SFTA	Sorry for the Abbreviations
SMP	Statutory Maternity Pay
SPP	Statutory Paternity Pay
SSP	Statutory Sick Pay
WTC	Working Tax Credit

CHILD TAX CREDIT



CAPITAL LIMIT: none

MAXIMUM CTC: annual weekly
family element 545 .. 10.50
individual element 2,750 .. 52.78
plus disability 3,100 .. 59.50
plus sev disability 1,255 .. 24.08

INCOME DISREGARDS:

as WTC

THRESHOLD:

for CTC only ... 16,010 ... 307.09
use WTC threshold of 6,430 if claiming both WTC and CTC
taper 41p/ £1

PENSION CREDIT

CAPITAL LIMIT: none

TARIFF INCOME: £1 income assumed for every £500 or part of £500 over £10,000

Guarantee Credit:

APPROPRIATE AMOUNT:

single 148.35
couple 226.50

plus additions for:

severe disability 61.10
carers 34.20

Savings Credit:

Threshold:

single 120.35
couple 192.00

Max Savings Credit:

single 16.80
couple: 20.70

INCOME DISREGARDS:

As IS, JSA and ESA plus:

Benefits: Bereavement Payment, SSP, SMP, SPP, SAP, War widow/ers pension (pre- 1973), PC Savings Credit (for Guarantee Credit), non-dep increases for non-family members

Other: Cash in lieu of coal, Student grants/ loans

for Savings Credit qual. income also ignore:

WTC, IB, Contribution based JSA
SDA, Maternity Allowance, maintenance from a former spouse

WORKING TAX CREDIT

CAPITAL LIMIT: none

MAXIMUM WTC: annual weekly

basic element 1,940 ... 37.24
30 hours + 800 ... 15.40
lone parent / second adult 1,990 .. 38.22
disabled worker ... 2,935 .. 56.35
severe disability ... 1,255 .. 24.08

Childcare element:

70% of cost up to:

for 1 child, £175
for 2 or more £300

THRESHOLD: 6,420 123.13
taper 41p per £1

INCOME DISREGARDS:

From previous tax year:

- first £5,000 of any increase
- first £2,500 of any decrease

Earnings: ignore pension contributions, non taxable expenses, payments in kind

Benefits: generally ignore all non-taxable benefits and SMP - if in doubt check it out

Other: all child maintenance / most student grants / loans, first £300 of (investment/ pension/ property/ foreign income), any non taxable income



UNIVERSAL CREDIT

CAPITAL LIMIT: £16,000

TARIFF INCOME: £4.35 monthly income assumed for every £250 or part of £250 over £6,000

STANDARD ALLOWANCES:

monthly weekly
single - u 25 249.28 .. 57.35
- 25+ 314.67 .. 72.40
couple: both u25 391.29 .. 90.10
- one or both 25+ 493.95 .. 113.70

ELEMENTS

carers 148.61 .. 34.20
child - 1st/only 274.58 .. 63.20
other children 229.17 .. 52.75
disabled child 124.86 .. 28.75
higher rate 362.92 .. 83.50
lim cap for work 124.86 28.75
limited capability for work-related activity 311.86 71.75

Childcare costs:

max for 1 child 532.29 .. 122.84
max for 2 or more 912.50 .. 210.58

BENEFITS CAP

earnings threshold 430.00 99.23
max benefits single 1,517
couple/lone parent 2,167

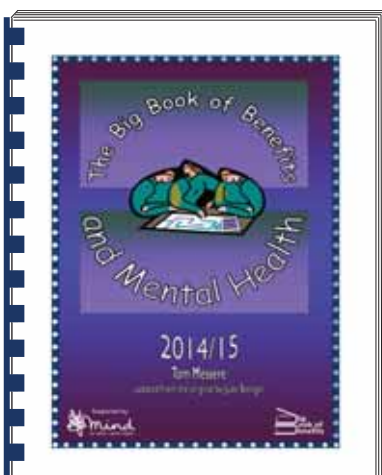
EARNINGS DISREGARD (monthly)

HC=housing costs no HCs If HCs
single 111.00 ... 111.00
with children 734.00 ... 263.00
limited capability 647.00 ... 192.00

couple 111.00 ... 111.00
With children 536.00 ... 222.00
limited capability 647.00 ... 192.00

OTHER INCOME DISREGARDS

As IS, ESA, JSA except:
SSPSMP, SPP, SAP counted as earnings, boarders and sub tenants ignored but also for bedroom limits.



“An essential piece of kit...”

Community Care Magazine

Now in its 14th edition - and even bigger again - 360 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.

Written by: Tom Messere - former joint author, freelance benefits trainer and welfare rights adviser from back when Income Support was all shiny new, updating and building on the work of the late Judy Stenger, whose warmth, wit and wisdom still pervades pages old and new.

NEW/ UPDATED FOR 2014/15:

Personal Independence Payment - the story so far, ten top tips and example PIP 2 forms

ESA mental health caselaw update and impacts of Mandatory Reconsideration

Universal Credit - what's occurring, pensioners and UC and update

AA and DLA update and tips, tactics and sample pages

Benefits, Work and Conditionality chapter - brings together and expands content on ESA work requirements, the Work Programme, sanctions - both for ESA/JSA and under Universal Credit

Paying for Housing - bringing together and expanding content on rent restrictions, Housing Benefit changes, the bedroom tax, help with mortgage interest, council tax support now and under Universal Credit

Mental Health Diagnoses and disability benefits - extended for PIP and in depth on bi-polar disorder

Plus other chapter revised and updated: *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, Benefits in Hospital, Challenging Decisions, 2014/5 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.” support worker

“The book puts into words my own experiences, feelings and thoughts...” service user

“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

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

“These books have been a goldmine for my Community Support Team and Housing Support Staff” team leader

“I have been a benefits adviser for almost 15 years & bought this book with some doubt, concerned that I might be paying for 'rehashed information'. I just wanted to say how delighted I am, I never thought I would take a benefits book to bed... but I could not put it down. You explained dry legislation and complex rules in a personal and engaging manner, there were even a few laugh out loud moments! Your explanations are clear and lucid, your examples very appropriate & your diagrams summarise information in an approachable and accessible way...” benefits adviser

“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

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