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Dear Sir/Madam,

There are a number of areas where we feel that the DWP has not properly recognised the impact of sight loss with regards to the introduction of the new disability benefit, PIP.

The DWP says it wants the assessment for PIP to consider social participation and other barriers to independent living, but across a wide range of activities it envisages blind and partially sighted people scoring zero points. Sight loss is a serious disability but in key areas the PIP assessment fails to recognise this at present.

RNIB would like to respond to the following questions:

Q1 – What are your views on the latest draft Daily Living activities (activities 1-9)? Are the three new activities – *Communicating*, *Engaging socially* and *Making financial decisions* – an improvement? Do we need to make any further changes?

ANS: The activity of "communication" has been drafted in such a way that it excludes visually impaired people that use spectacles or contact lenses to access written information. Again, this betrays a lack of understanding about the aids and appliances many blind and partially sighted people use and their fundamental role in enabling independent living.

By definition an "aid" is there to assist, but this does not mean that the barriers to communicating no longer exist. It simply means that a person has to pay

extra for such aids, requires help to learn how to use them and has to spend much longer doing so. If they need assistance from another person to read it, they only get 4 points. This flies in the face of promoting personal independence.

For example, if a blind person receives an appointment letter, they need assistance to access such written information. If they use an aid to read it, they only get 2 points. This does not, however, take into account that the letter may prompt further action like signing their signature, responding to the letter or making a phone-call, for which they will most likely need help from another person in order to achieve this. This descriptor does not take this form of communication into account.

The activity of "engaging socially" doesn't take into account that a person may need physical support to engage socially because without being physically collected, guided or supervised by someone else, they may cause 'substantial risk of harm' to themselves. Instead, this descriptor only awards 4 points for "social support".

The activity "managing financial decisions" awards a maximum of 6 points only. This descriptor varies in a way that does not apply to blind and partially sighted people. For example, a person may be able to decide that they want to put money into savings, i.e. "make complex financial decisions", but on the other hand, they cannot operate a key pad ATM, see what amount is on paper notes or check whether a sales-assistant has given them the correct change.

Q2 – How well do the proposed weightings and entitlement thresholds in the Daily Living activities (activities 1-9) work to distinguish between differing levels of ability in each activity and to prioritise individuals on the basis of their overall need? Do we need to make any changes to weightings or thresholds?

ANS: A blind person may be currently getting high rate care DLA. However under the new PIP descriptors, they may only be eligible for the standard rate of daily living (8 points).

This is because the descriptors noted do not include criteria relating to blind and partially sighted people. For example, a blind or partially sighted may be able to take nutrition unaided but they cannot buy, cook or prepare the food without guidance and assistance from another person. They may not be able to read menus to order their own food therefore cannot order and eat a meal independently. They may also spill hot food or drinks on their own person and could injure themselves. This cannot be considered being personally independent. Under the descriptor "taking nutrition", a blind or partially sighted person would receive 0 points.

The use of aids and appliances is taken into account in some activities, but not others. People who use aids or appliances to manage medication or a health condition score no points under the proposed scheme - why?

Q3 – What are your views on the latest draft Mobility activities (activities 10-11)? Do we need to make any further changes?

ANS: The face-to-face assessment will consider claimants' individual circumstances across eleven activities, ranging from preparing food, bathing and grooming, communicating and moving around.

Case study 11 in the DWP consultation (Bob) has recently lost his sight and will get the enhanced rate for both daily living and mobility. However, the DWP implies people like Bob will be re-assessed at some point and be put onto standard rate mobility. This is where case study 10 (Sarah) has ended up, although she is a Braille user and her sight may be similar to Bob's. Is it best not to learn Braille under PIP?

Sarah's ability to travel independently to familiar places has also counted against her in terms of access to the enhanced mobility rate. This is despite the fact that there is no such thing as a "familiar journey" as this can change at any time due to travel disruption or street works.

The 'Moving around' activity has been designed so it relates to an individual's physical ability to move around (despite cross-party recognition of the impact of sight loss in this activity just two years ago).

Q4 – How well do the proposed weightings and entitlement thresholds in the Mobility activities (activities 10-11) work to distinguish between differing levels of ability in each activity and to prioritise individuals on the basis of their overall need? Do we need to make any changes to weightings or thresholds?

ANS: These proposals appear to exclude many people with a severe visual impairment from the enhanced mobility rate of PIP. Is this a conscious decision by DWP to wipe out that hard-won extension to the higher rate of DLA? It puts the clock back to 1992 - you are guaranteed the enhanced rate if you are wheelchair user, you don't get it if you are blind.

The case studies with visual impairments have been chosen to focus on adaptation and change, both in the condition and in how the person deals with it over time. Writers of those case studies are expecting high-ish initial awards, but that most people will 'adapt' - or get equipment or reasonable adjustments - so can be deemed to need less support when reassessed.

In reality, regardless of the length of time a person has lived with sight loss, the difficulties and barriers remain. The impact of sight loss does not diminish over time and our experience is often that adaptation actually equates to

restriction of people's previous activities. Our fear is routine reductions at renewal.

In conclusion, Personal Independence Payment threatens to turn back the clock to 1992. You are guaranteed the enhanced rate of the mobility component if you are a wheelchair user, you don't get it indefinitely if you are blind. Regardless of the length of time a person has lived with sight loss, the difficulties and barriers remain. The impact of sight loss does not diminish over time. Our fear is routine reductions in PIP awards at periodic reviews.

Sight loss is a serious disability but in key areas the Personal Independence Payment assessment fails to recognise this at present. As with many other disabilities, sight loss is a permanent disability that usually deteriorates over time. A blind or partially sighted person continually has to re-assess and challenge their own personal limitations in order to retain some independence but this is in no way recognised in PIP. The longer you are considered blind or partially sighted, the less right you appear to have to receive PIP despite the serious, on-going and daily obstacles you face with moving around, getting about and your daily living needs.

Yours sincerely,

Laura Irwin

(Benefits Adviser, RNIB NI)