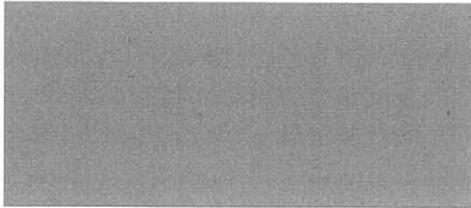


Col 1000



2nd February 2011

To my Member of Parliament

Rec'd
10/2/11

Dear:

With regard to the Government's consultation on the proposal to replace Disability Living Allowance with Personal Independence Payment, I have chosen to respond as follows:

These are my answers to the key questions:

Question 4. The new benefit will have two rates for each component:

- Will having two rates per component make the benefit easier to understand and administer, while ensuring appropriate levels of support?
- What, if any, disadvantages or problems could having two rates per component cause?

Feel that having 2 rates per component will be cut and dried with no room for use of common sense and could mean some disabled people falling through the system and not getting the support they need.

Question 8. Should the assessment of disabled person's ability take into account any aids and adaptations they use?

- What aids and adaptations should be included?

Should the assessment only take into account aids and adaptations where the person already has them or should we consider those that the person might be eligible for and can easily obtain?

Aids and adaptations are not a luxury, they are a very necessary part of "life". Anything to make life more "normal" should not be used in an assessment.

> the assessment should take into account that the majority of people's adaptations are not assessed

Question 11. An important part of the new process is likely to be a face-to-face discussion with a healthcare professional.

- What benefits or difficulties might this bring?
- Are there any circumstances in which it may be inappropriate to require a face-to-face meeting with a healthcare professional – either in an individual's own home or another location?

A benefit in this is that you know you are claiming as deserved although a difficulty could be that if you are seen by someone not as experienced in your type of injury, you may miss out on the proper level of help. Many people will become upset at having to see a stranger with regards something they have already been assessed for. Many people may have to travel some distance as assessment appointments will undoubtedly be in main centres thus perhaps incurring travel costs.

Although society is portrayed as now being disabled friendly there are still many obstacles for disabled people. We are always told to support our local shops but ease of access can be problematic meaning having to travel to shop can incur extra travel costs.

Disabled people face extra costs with regards to travel for some facilities and shopping. Accommodation to get away can be more expensive because of the extra facilities needed ie wet areas etc.

Having to be assessed and reassessed periodically will be very hurtful for many Spinal Injured persons since they know full well that their situation will never improve and it will be like going with the begging bowl and being reminded of the sometimes useless feeling that can at times be experienced by a disabled person. A wheelchair is a necessary item for a Spinal Injured person as it means the difference between feeling you are almost the same as other people or being like a vegetable stuck relying on others entirely.

Most forms for any help are hard to plough through. It is bad enough having to cope with the injury and inability to perform as your mind says you should and used to be able to without having to complete forms of novel proportions. In addition to this many disabled people have to suffer the indignity of having to get someone to fill in the forms for them, leaving no private and personal matters out.

Evidence surely must come from the people with the experience in your disability and knowledge of you and your circumstances.

Face to face discussion is all very well but it has to be with the healthcare professional who has knowledge of you as a person and not a nameless faceless person. People with long term disabilities can feel very uncomfortable having to almost begin at the beginning having to explain their injury, condition and help needed.

There should be different types of review depending on individual conditions. *→ different types of reviews for different people*
Obviously the needs of a Spinal Injured Person or an Amputee would be different from someone with a back injury/pain or leg injury/pain.

It is very difficult to encourage people to notify changes partly because for some the loss of their money and for others they do not know if the changes are going to be permanent and may mean more meetings with healthcare people.

DLA does give disabled people access to other entitlements. These things need to be explained at the beginning of any claims. It may be difficult to qualify for other services if PIP could not be used as a passport.

It certainly feels that disabled people are being used again to save money and many people may be missed out or be unsure of their qualifications.