

About the questions

On the next few pages there are questions that we would like you to give us your answers to.

This consultation starts on 6 December 2010 and will end on 14 February 2011.

Send your replies to

Ref 361

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London
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Or you can email your reply to
consultation.dlareform@dwp.gsi.gov.uk



And finally, thank you

Thank you for taking the time to look at this booklet and taking part in the consultation.

Questions

Question 1

What things stop disabled people joining in with other people and living full, active and independent lives?

FITNESS, CAPABILITIES, MOBILITY PROBLEMS,
DISCRIMINATION, VERY GENERAL QUESTION
- OBSTACLES DEPEND ON EACH INDIVIDUAL
AND THEIR NEEDS.

Question 2

What parts of Disability Living Allowance do you think we should keep?

BOTH THE COMPONENTS - MOBILITY AND CARE.
BUS PASS AS IT GIVES INDEPENDENCE.

Question 3

What extra things do disabled people need to spend money on?

SUPPORT TO GO ON HOLIDAYS/RESPIRE, PAYING FOR CARBLES' FOOD/TICKETS ETC. ON SOCIAL TRIPS, MORE NEED FOR TAXIS/DIAL-A-BUS ETC. FOR MANY, CHARGING POLICY (PAYING TOWARDS YOUR CARE), ADAPTATIONS IN YOUR HOME,
Question 4 MEDICINES.

The new benefit will have 2 amounts for each of the 2 parts of the benefit. Do you think this will make the benefit easier to understand and also easier for us to run?

Do you think just having the 2 amounts for each part will cause any problems?

PEOPLE ARE USED TO THE WAY IT IS NOW SO IT MIGHT CAUSE CONFUSION. IT WILL PROBABLY BE EASIER FOR YOU TO RUN THROUGH.

DWP About changing Disability Living Allowance

Question 5

Do you think some health conditions or disabilities should allow people to get an amount of the benefit automatically?

Or do you think that all claims should be based on the needs of the person asking for the benefit?

CLAIMS SHOULD BE BASED ON THE
NEEDS OF THE INDIVIDUAL.

Question 6

How can we make sure that disabled people who most need the new benefit can get it?

What activities or actions are the most important to live an independent life?

MORE INFORMATION, MORE HELP TO FILL
IN FORMS (ADVOCATES ETC.). LESS QUESTIONS.

BEING HEALTHY & FIT, MEETING PEOPLE
AND FRIENDS, BEING ABLE TO TRAVEL
EASILY, BEING ACTIVE IN YOUR
COMMUNITY.

Question 7

How can we make sure that the new benefit takes into account the way a person's health condition can change?

ASKING PEOPLE TO GIVE ^{REGULAR} UPDATES - BUT ONLY IN CASES WHERE THERE IS LIKELY TO BE CHANGES, I.E. NOT LIFE-LONG CONDITIONS LIKE LEARNING DISABILITIES.

Question 8

When a person makes a claim to the new benefit, should we take account of any aids or adaptations that they use?

What aids and adaptations should we take into account?

Should we only take aids and adaptations into account if the person already uses them? Or should we take aids and adaptations into account that a person could use and get hold of easily?

NO, THEY SHOULDN'T BE TAKEN INTO ACCOUNT,

Question 9

How could we make the way a person asks for benefit better.
For example

- How could we make the claim form easier to fill in?
- How could we tell people about the new benefit so that they know what the benefit is for and who is likely to get the benefit?

MORE UNDERSTANDABLE, LESS ~~WORDS~~ JARGON,

LESS QUESTIONS, FEWER PAGES, PICTURES.

MORE DESCRIPTION OF WHAT YOU ARE ASKING.

MAKE A DVD, EASY-READ LEAFLET, TELEVISION

ADVERTS, PLACE POSTERS IN DOCTORS & HOSPITAL WAITING ROOMS, DAY CENTRES,

Who are the best people to tell us about the needs of the person asking for benefit?

What information will we need to make it clear what the person can and cannot do?

THE INDIVIDUAL, PARENTS/FAMILY, CAREERS,

SOCIAL WORKERS, GPs/SPECIALISTS,

ADVOCATES.

DOCTORS MEDICAL LETTER, OT ASSESSMENT,

MEDICAL ASSESSMENT. MOST IMPORTANT -

Question 11

An important part of the new benefit may be talking face to face with an independent person about how well you can do the things you need to do to take part in everyday life.

What good things and bad things may this bring?

Is there any time when it would not be right to say that a person had to meet an independent person face to face, either in the person's own home or somewhere else?

GOOD - THE PERSON MIGHT FIND IT EASIER
TO EXPLAIN THEIR CAPABILITIES IN PERSON.
BAD - COULD AFFECT PERSON'S SELF-CONFIDENCE.
AND INTIMIDATE THEM. ~~THEY~~ MIGHT WONDER
IF THEY WILL BELIEVE YOU. MIGHT BE
NERVOUS. ~~THEY MIGHT BE MISUNDERSTANDING.~~
MIGHT BE MISUNDERSTANDINGS. THEY MIGHT
NOT BE ABLE TO COMMUNICATE VERBALLY.
IN CASES OF TERMINAL ILLNESS OR VERY
ILL PEOPLE.

Question 12

What should we use to decide how often we should look at a claim again and check it?

Should the way we look at a claim again depend on the needs of the person and their health condition or disability?

LIFE-LONG DISABILITIES (SUCH AS HEARING
DISABILITIES) SHOULD BE CHECKED LESS
OFTEN THAN DISABILITIES/ILLNESSES
WHERE THERE IS LIKELY TO BE REGULAR
CHANGES.

Question 13

DEPENDANT ~~IS~~ ON NEED OF INDIVIDUAL

The new benefit will be easier for people to understand, so we will expect people to tell us when things change in their lives.

How can we get people to tell us about the changes in their lives?

DUTY SHOULD BE ON INDIVIDUAL OR
FAMILY / CARERS / APPOINTEE TO
INFORM OF CHANGES.

Question 14

What types of help and advice are people who will ask for the new benefit likely to need?

Would it help if we told people to get help and advice and where to get it from?

HELP TO UNDERSTAND FORM & CHANGES.

HELP TO FILL IN FORM.

Yes, IT WOULD HELP TO KNOW WHOSE
TO GET ADVICE.

Question 15

How do disabled people pay for their aids and adaptations at the moment?

Should disabled people be allowed to use the new benefit to pay for a one-off cost?

SOMETIMES SOCIAL WORK PAY, SOMETIMES
INDIVIDUALS FUND THEM THEMSELVES (FROM BENEFITS)
SOMETIME PEOPLE APPLY FOR GRANTS.

Yes.

Question 16

What are the main differences we should think about when we are dealing with claims for children instead of adults?

THE IMPACT ON THE WHOLE FAMILY,
E.G. A PARENT GIVING UP JOB TO
CARE FOR CHILD, CHILDREN GROWING
& QUICKLY CHANGING CIRCUMSTANCES.

Question 17

How important or useful has Disability Living Allowance been in getting people to use other services or to get other benefits?

What can we do to make things better?

At the moment people who get Disability Living Allowance automatically get help from other benefits and services, like the Blue Badge scheme and the Warm Front scheme.

What would it mean to disabled people if they did not automatically get help from these other benefits or services?

VERY USEFUL. GETTING BETTER SERVICES.
MAKE IT EASIER TO UNDERSTAND. MORE
HELP AND ADVICE.
LESS ~~DEPEND~~ INDIGNEANCE AS MORE
DIFFICULT TO GET AROUND (BLUE BADGE)

Question 18

What information about the disabled person could we share with other services or government departments to stop the disabled person having to tell lots of people the same thing?

GOVERNMENT DEPARTMENTS SHOULD COMMUNICATE
BETTER, ESPECIALLY SOCIAL WORK AND
NHS, SHOULDN'T NEED TO GIVE SAME
INFORMATION LOTS OF TIMES.

Question 19

How would our ideas for the new benefit affect different equality groups? For example, the equality groups looking at disability, age, race, gender, **sexual orientation** and religion and belief.

Sexual orientation

This is about whether a person is

- heterosexual – sexually attracted to people of the other sex.
- lesbian – a woman who is sexually attracted to women.
- gay – a man who is sexually attracted to men.
- bisexual – sexually attracted to men and women.
- asexual – not sexually attracted to men or women

NO DIFFERENCE – EVERYONE SHOULD
BE TREATED AS AN INDIVIDUAL &
EQUALLY.

Question 20

Is there anything else you would like to tell us about our plans?

WE ARE CONCERNED THAT THINGS
ARE ONLY BEING CHANGED TO
SAVE MONEY – THIS WILL MAKE
IT MUCH MORE DIFFICULT FOR
PEOPLE WITH DISABILITIES.