



Consultation about changing Disability Living Allowance to a new benefit

Tell us what you think

December 2010



Easy Read

DWP Department for
Work and Pensions

Questions

Question 1

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

WHEEL CHAIR BOARD

IGNORANCE, INACCESSABILITY OF FACILITIES/RESOURCES.
WRONG LABELLING OF DISABLED PERSON

Question 2

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

BOTH MOBILITY AND CARE COMPONENTS

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Question 3

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

REPLACEMENT OF CLOTHING - CONSTANTLY
RIPPED. WASHING / ^{DRYING} MACHINE

Question 4

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?

~~THIS~~ WHAT ARE THE 2 AMOUNTS?

LIFE IS NOT ABOUT BLACK AND WHITE. THERE
ARE OTHER SHADES IN BETWEEN.

OFCOURSE IT WILL CAUSE PROBLEMS AS IT ^{COULD} IMPINGE
ON INDIVIDUAL HUMAN RIGHTS, IF IT AFFECTS
CLAIMANT QUALITY OF LIFE ADVERSLY.

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?

YES, ANNUAL OR BIENNIAL ASSESSMENT
WILL BE NECESSARY AS SOME CONDITION DETERIORATE
FAST. DEPENDING ON CONDITION @ FREQUENT ASSESSMENT
MAY BE NECESSARY TO INCREASE OR DECREASE BENEFITS.

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?

~~BY~~ ASSESSMENT ~~BY~~ PERSONS WHO KNOWS
THE DISABLED PERSON AS WELL AS BY PROFESSIONAL.
EVERY CASE IS DIFFERENT, THEREFORE ALL
ACTIVITIES AND ACTIONS TAILORED TO THE INDIVIDUAL
NEED FOR INDEPENDENT LIFE.

Question 7

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

ASSESSMENTS

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?

HOLISTIC APPROACH, NOT ON ADAPTATIONS
AND AIDS ONLY, BUT HOW IT LIMITS
THE CLAIMANT / EFFECT ON FAMILY AND
CAREER

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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?

DIRECT, CLEAR & SIMPLE QUESTIONS-

Question 10

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?

FAMILY/CARER, GPs, TEACHERS, SOCIAL WORKERS-

HOW THE DISABLED PERSON ACHIEVES
EVERY ALL AREAS OF DAILY LIVING

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?

SOME OF THESE INTERVIEWS MAY
REQUIRE ADVOCACY OR ^{AN} INTERPRETER.
THE PRESENCE OF ANY COULD BE LIMITING
HOWEVER OFFER APPOINTMENTS WHERE IT IS
CONVENIENT, UNINTIMIDATING, ENVIRONMENT
IN THE PRESENCE OF WHO EVER THE
DISABLED PERSON WANTS. CLAIMANTS
SHOULD HAVE A COPY OF ASSESSMENTS.

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?

ANY CHANGE IN CONDITION - WHEN EVER REPORTED.

HOLISTIC APPROACH

Question 13

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?

PEOPLE NEED TO SEE THE PROFORMA OF THE NEW FORM TO MAKE A DECISION WHETHER IS EASY OR COMPLEX.

THE INDIVIDUAL CAN ~~RE~~ CONTACT YOU.

BT CAN COMMUNICATE YOU RE: PROGRESS OR FAILING HEALTH.

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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?

CENTERS WHERE HELP IS AVAILABLE TO
COMPLETE FORMS.

* BTP'S SURGERY; INDIVIDUAL HOMES - FAMILY
SUPPORT WORKERS, IF WILL HELP IF YOU POINT TO
WHERE HELP IS AVAILABLE (NOT EVERY ONE IS
COMPUTER LITERATE)

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?

⁸⁴¹⁰³
ADAPTATION I SHOULD IMAGINE ARE
EXPENSIVE. ~~SE~~ I DON'T KNOW IF
A ONE-OFF PAYMENT IS POSSIBLE
SINCE YOU HAVE NOT STATED WHAT
THE ALLOWANCE IS BENEFIT.

Question 16

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

CHILDREN ARE GROWING AND IN
SOME CASES NEEDS CAN BECOME
COMPLEX, I SUPPOSE THIS GOES
FOR THE ADULTS AS WELL

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?

USEFUL ESPECIALLY WHEN ONE GETS
THE HIGH COMPONENTS.
PIP SHOULD HAVE LOW, MOD, HIGH.
DISABLED PEOPLE WILL SUFFER IF
SERVICES ARE NOT READILY AVAILABLE

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?

THIS WILL DEPEND ON INDIVIDUAL
CASE. THE DISABLED PERSON CONSENT
MUST BE SOUGHT, WHERE THIS IS DIFFICULT
THE NEXT OF KIN OR APPOINTEE SHOULD HAVE
A SAY IN THOSE DECISIONS.

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

EVERY ONE SHOULD BE LOOKED AT AS
A PERSON WITH DISABILITY, SEXUAL
ORIENTATION, AGE, RACE, GENDER, RELIGION, BELIEF, NOT
WITHSTANDING.

Question 20

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

YOU ARE TOO MUCH IN A HASTE
FOR THIS ~~PEP~~ CHANGE TO PIP.
IT COULD INFRINGE ON PEOPLE'S HUMAN RIGHTS.