

## **Written evidence from MIND [SWP0060]**

### **Introduction**

1. We're Mind, the mental health charity for England and Wales. We believe no one should have to face a mental health problem alone. We provide advice and support to empower anyone experiencing a mental health problem. We campaign to improve services, raise awareness and promote understanding.
2. This submission is based on early information and insight gathered through our network of independent local Minds as well as from people with mental health problems who have contacted us directly. It also raises concerns about how the coronavirus outbreak is likely to affect people with mental health problems navigating the benefits system, based on our existing evidence about the barriers people face when claiming benefits. We are continuing to gather evidence on these issues and hope to be able to provide more insight in due course.

### **The WCA and PIP assessments**

3. We welcomed the Government's announcement that award reviews will be suspended for people currently receiving sickness and disability benefits. This is an important protection for people who are already in receipt of these benefits. Many of the people we hear from struggle to travel independently and are facing difficulties accessing food and essentials, or facing disruption to their mental health support and social care. As a result of these pressures people are facing higher costs, including costs associated with food deliveries and changes to their normal arrangements for grocery shopping. People in these circumstances would be particularly hard hit if they faced shocks to their income in the middle of this crisis.
4. The suspension of award reviews has created some uncertainty or confusion among people in different circumstances. For example we have heard from people who received renewal forms prior to the announcement, but whose awards for PIP or ESA were due to expire later in the year, after the current three month suspension period has expired. The Department for Work and Pensions has been responding to queries from us and from other organisations at a national level, and has produced some broad guidance for members of the public. The current system is inevitably complex and it would be helpful to have more detailed guidance covering very specific scenarios for people who are worried or confused about what these changes mean for them.
5. We are very concerned that many people with mental health problems making new claims for sickness and disability benefits will struggle to navigate the process without access to advice or other kinds of face-to-face support from friends and family. For example we know that staffing shortages in mental health services mean that some people are being discharged from hospital sooner than they would otherwise be and potentially at a very fragile point in their recovery.

"I had a call yesterday from someone who has been discharged back to his GP - Personality Disorder, lives alone, no support network. He received a WCA form that needs to be sent in by the 14th April. He has been trying to access support and advice, but all local services are either shut to the public or as from today completely inaccessible. Also he has underlying health conditions which means he should self-isolate - he was suicidal and worried that his ESA would stop and that he would be evicted from his home. These are real fears for people. Normally we would have helped him fill in the form and help him gather relevant evidence to support claims etc but this is impossible in this instance. I would imagine all health professionals in this current situation have other things to be spending their time on than providing supporting letters etc! Also it may seem obvious to us to contact the DWP and state that you are self-isolating or unable to complete it but many of our service users are unable to take this step." *Local Mind adviser*

6. In his evidence to the committee, Peter Schofield set out the approach the Department will be taking to new claims for PIP and ESA:

"The key thing is to make sure that the initial application for PIP and the PIP 2 form have as much evidence as possible, based on the evidence that hopefully should be available in terms of things that have already been done for the claimant as part of any medical support they had been having in the past, and so drawing it all together as far as we possibly can. Often the face to face assessment with a health assessor is to test the evidence that the claimant has put in their form. We will be testing it to some extent over the phone, but we will not be doing it in the same challenging way through face to face assessments because we want to progress people through the system. My encouragement to people applying is to make sure, as ever, that we have all of the evidence that they have available. Where we feel that we have gaps, we will use outbound telephony to try to get evidence from the individual to fill in those gaps, to make sure that we can make the best judgment we can, but we are not putting people through the challenge bit of the process."

7. However we are concerned that for many people the process of gathering medical evidence and getting across how their condition affects them in a phone call won't be possible. Research conducted by the Money and Mental Health Policy Institute has found that over half (54%) of people with mental health problems say they find communication over the phone difficult or impossible. The same proportion say they always or often need help from others when talking to benefits agencies over the phone.

*"We have a number of people using our service who are unable to use the phone - we support some people through email or face to face only as they have a phobia about using or speaking on the phone."* *Local Mind adviser*

8. In the same research 82% of people with mental health problems said they struggle to locate and gather the evidence they need for medical assessments. These problems are being compounded by a lack of access to other forms of help and support:

*"Many people rely on others to help them complete applications, etc. There is no contact now with other households, i.e. potential support networks, and all relevant support agencies are shutdown – i.e. CAB, local Disability services – or they are concentrating on emergency support." Local Mind adviser*

*"Service users are giving up as not having face to face support, as we are currently not doing face to face support many of our service will not reply to letters or phone calls due to anxiety and paranoia." Local Mind adviser*

9. To help counterbalance the significant disadvantage many people claiming benefits will face during this period, we believe that the Government must introduce emergency provisions in the regulations for the WCA and PIP which require decision-makers to award an interim payment to someone who'd face a risk of destitution, homelessness, or a significant deterioration in their health as a result of a negative award.
10. We also believe the Department should extend the time limits for returning WCA and PIP forms in order to make it easier for people to gather evidence where possible.

### **What impact has the outbreak had on people who were waiting for a Mandatory Reconsideration of a decision, or who were going through the appeals process?**

11. People who are currently going through the mandatory reconsideration and appeals process are facing a very uncertain time, with little clarity about whether and how their challenges can proceed effectively. For people who are challenging a recent drop in income, this uncertainty is likely to exacerbate what is already a very distressing time:

*"I was contacted by someone over the weekend who is waiting for a PIP appeal and who is now suicidal because as well as losing their DLA (they were moving over to PIP) they have also lost their Severe Disability Premium as they no longer qualify for it without receiving DLA/PIP. Their only income is now £128 per week of ESA and they have no money for groceries after paying for household bills." Local Mind adviser*

12. The Senior President of Tribunals has issued practice directions, encouraging judges to make paper-based decisions wherever possible and to undertake hearings remotely where a paper decision isn't possible. This guidance also allows judges to change the composition of tribunal panels so that fewer people need to be involved in remote hearings. These panels usually would need to include a member with medical expertise, and in the case of PIP a member with expertise around disability. When combined with the difficulties people are likely to experience in getting access

to advice or medical evidence, these changes may make it harder for people with mental health problems to put their case across and secure a fair outcome.

13. We have also heard from some advisers that there are inconsistent approaches to remote hearings where the client would usually be represented by an adviser or advocate. Some advisers have told us they have been told that constraints with the conferencing software available to their local courts have effectively meant they have been unable to represent their client during a remote hearing. This is a real concern particularly as we know many people with mental health problems struggle to get across the detail of how their condition affects them, particularly in pressurised situations or to people in positions of authority.
14. To make sure people don't go without the money they need, we believe the Government should provide interim payments for anyone currently in the process of appealing a decision on entitlement to sickness and disability benefits. Awarding payments of this kind should be a particular priority where there is evidence that a person is likely to be in vulnerable circumstances.

### **How well is the Universal Credit system working for the unprecedented numbers of new claimants?**

15. While we don't yet have the full picture of people with mental health problems' experiences of claiming Universal Credit in recent weeks, we are concerned about what support will be available for people who do not have access to IT in their homes or who are unable to use IT. This is a particular worry in the context of the pressures on DWP telephone lines and staff. Usual DWP practice would be to encourage people to use a computer of a friend or family member or to get help to establish a claim. We would urge the Department to make sure that instead people who cannot manage an online claim are given the clear option of having their claim managed over the phone instead. Otherwise we are concerned that people will fall through the gaps.

*"Libraries and places where people can easily access IT are closed - not all of the people who we support have IT access at home" local Mind adviser*

16. We believe a similar flexibility needs to apply to conditionality within Universal Credit and the requirement to sign a claimant commitment in order to receive payment. We hear from many people with mental health problems who see their claims closed and their income stopped because of difficulties in meeting those conditions, including people who struggle to use their online journal and failed to agree a claimant commitment as a result. Given that the Department has suspended work search requirements and outlined its clear priority as getting claims in payment, we would expect to see a flexible approach to people who cannot sign a claimant commitment.

### **Are there groups of people who need support but aren't able to access it through the benefits system? What should DWP be doing to support those people?**

17. There are many people with mental health problems who struggle to travel independently to shop for food and essentials, and who are facing disruption to the care that they receive and to their local support networks. Unless they have other underlying conditions, people in this situation will not generally meet the Government's definition of clinically 'extremely vulnerable' to coronavirus, and so will not be included in the current efforts to provide food, medicine and social contact for people who would otherwise be isolated.
  
18. We believe there is an urgent need to identify people in this situation and to put arrangements in place to support people through the crisis. This requires a co-ordinated local effort including local authorities and local mental health services. However both the DWP and local welfare safety nets should have a role to play both in identifying people who are likely to need help and in making sure people can keep claims in payment and receive support to cope with any additional costs they are facing as a result of this crisis.

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