

Response to “Shaping Future Support”: The Health and Disability Green Paper

October 2021

Introduction

Scotland’s Citizens Advice Network empowers people in every corner of Scotland through our local bureaux (CAB) and national services by providing free, confidential, and independent advice. We use people’s real-life experiences to influence policy and drive positive change. We are on the side of people in Scotland who need help, and we change lives for the better.

Citizens Advice Scotland is pleased to respond to this Green Paper consultation on the future of disability support. Last year, the Citizens Advice network in Scotland gave out over 168,500 pieces of advice on disability benefits, making it our biggest area of advice.

The experience of clients coming to the Citizens Advice network in Scotland for advice shows that Department for Work and Pensions (DWP) disability benefits are often inadequate, difficult and complex to access, and can feature distressing and undignified medical assessments - all while being too restrictive in their eligibility criteria. Throughout this response, we draw on case examples from across Scotland and suggest solutions which would profoundly improve clients’ experiences.

We welcome this Green Paper as the beginning of a discussion to improve the benefits and support available to people with disabilities, but caution that this should not be seen as a cost-saving exercise and should seek to maximise options and supports rather than limit them. As we will go into in more depth in the course of this paper, some of the proposals made in the Green Paper could lead to a better experience for many people, but more detail is required. Importantly, independent advice and advocacy should always be available for all who wish to access it.

Key Points

- Although powers over Personal Independent Payment (PIP), Disability Living Allowance (DLA), and Attendance Allowance (AA) have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. This is why CAS are responding to this consultation.

- It is important to offer people a choice in how they interact with the DWP and in how assessments are carried out, as well as ensuring third party support is possible across all communication and assessment channels.
- More can be done to ensure reasonable adjustments, including effective communications, are available in all DWP and assessment venues.
- Improvements should be made to the assessment process: unnecessary assessments should be minimised where possible, people should have a choice over the format of their assessment, and assessments should be carried out promptly (delays are particularly an issue for people living in remote and rural areas of Scotland). Additionally, assessment descriptors and criteria urgently need to be reviewed and in particular, the 50% rule and 20 metre rule should be scrapped.
- There should be greater emphasis on providing proactive direct referrals and warm handovers, rather than relying solely on signposting.
- Proposals to strengthen the role of advocacy is welcome, however more detail is needed on these plans and it must be ensured that any advocacy service is independent from the DWP.
- Employment support before a Work Capability Assessment (WCA) should be carefully considered, no obligation or conditionality should be imposed, and uptake of this should not prejudice the outcome of a WCA.
- CAS strongly oppose the proposal to create a new benefit by merging Universal Credit with PIP. This is because we believe that “extra costs” disability assistance must not be conflated with means-tested social security support, such as Universal Credit, to ensure that all people with disabilities receive the support necessary to compensate for the societal barriers they face.

Response to questions

Chapter 1: Providing the right support

15. What more could we do to improve reasonable adjustments to make sure that our services are accessible to disabled people?

There is evidence from CAB that some disabled people have faced difficulties in interacting with the DWP or accessing services. These include issues with:

- Physical accessibility (e.g. within Jobcentres and assessment locations). Even before any assessment has taken place it is important to trust applicants when they explain their needs and make appropriate adjustments.

- Inclusive communications (e.g. ensuring BSL and other interpreters and large text are always available) and options for third party support.
- Not having appropriate channel choice for information, application, assessment, and communication – people should be able to choose what best suits them and their needs and should be able to change this over time. For some people, digital services and remote communication and assessments are most appropriate. For others, face-to-face support and assessments will be most appropriate. However, this may change over time as conditions worsen or improve or people' access to technology and internet access changes. This means channel choice should remain flexible to a person's needs throughout their claim.

CAS recommends:

- ensuring reasonable adjustments are made in all DWP and assessment venues
- minimising unnecessary assessments
- ensuring effective communication is possible through provision of interpreters and appropriate materials
- offering people a choice in how they interact with the DWP and in how assessments are carried out
- ensuring third party support is possible across all communication and assessment channels

16. What more information, advice or signposting is needed and how should this be provided?

CAS sees evidence from CAB that some people have difficulty understanding information from DWP and assessment providers. Information should be clear, accessible, and in a format that best suits the person needing the information. In this light, the work on providing Easy Read information is welcome.

DWP can also use new and additional routes to reach claimants or those who have entitlement, including other public services (e.g. in schools, via the NHS, or GP services), and other local and community support organisations.

Advice should be provided by independent holistic advice providers who can support people with a range of issues. Relying less on "remote" signposting and more on direct referrals and warm handovers would stop people slipping through the cracks. Where face-to-face support is available, making use of co-location and working in partnership with local organisations to refer directly should be the norm, rather than a list of phone numbers or websites. Where face to

face is not available, support should still be person-centred and local, using platforms such as “NearMe”.

If a claimant’s circumstances mean that they need additional support from other agencies or organisations, more proactive support will be more effective than expecting a claimant to take in and act on information alone. While this may be more resource intensive in some instances, it will pay dividends in terms of the preventative benefit.

CAS recommends:

- providing information clearly and in a format or way that is accessible for the person
- exploring more routes to reach claimants and those with entitlement, including via other public services, as well as local third sector and/or community organisations
- supporting holistic advice provision through a range of channels, including face-to-face
- making more proactive direct referrals and warm handovers, rather than relying solely on signposting, particularly when it has been identified that someone needs additional support or has a chaotic lifestyle

17. Do you agree with the principles we have set out for advocacy support?

- Strongly agree**
- Agree**
- Neither agree nor disagree**
- Disagree**
- Disagree Strongly disagree**

Increased support for many people would be welcome, but it is not clear from the principles exactly what is being proposed.

We welcome the recognition that the role of an advocate could be much wider than helping people access and use the social security system, but CAS would expect advocacy to be independent from the DWP. The principles do not make clear what the DWP views as the difference between advocacy and existing DWP services, or services provided by other organisations. Further, insisting on advocacy being limited to achieving certain outcomes does not necessarily allow for advocates to work on a holistic basis.

CAS recommends:

- providing more detail and clarity on the proposals for advocacy
- ensuring any advocacy service is independent from DWP
- consulting on more detailed proposals

18. How might we identify people who would benefit from advocacy?

In the first instance, people should be able to refer themselves for advocacy support, but referrals could also be taken from health and third sector organisations. The DWP could also provide training which would allow DWP staff to identify where someone could benefit from advocacy.

CAS recommends:

- establishing a range of channels for people to access advocacy

19. What kinds of support do you think people would want and expect from advocacy?

Existing advocacy services provide a range of support. Some are limited to specific events or occasions. Others provide services over a much longer period or indefinitely. Some advocates only offer instructed advocacy, others offer non-instructed advocacy. Some services maintain clear distinctions between advocacy and advice, whereas others will help people reach decisions about their needs by providing information and advice. The form of advocacy required will depend on the person's needs and any advocacy service should recognise this and be flexible and responsive to the person's needs, including the way in which they access any advocacy.

CAS recommends:

- establishing advocacy that is flexible and responsive to individual client need

20. Are we meeting disabled people's mobility needs? Please tell us why/why not.

- Yes**
 No
 Partially

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. As a result, CAS is sharing information on issues that on the surface are soon to be dealt with by the Scottish Government but could be affected by UK Government decisions.

CAB advisers identify three areas of mobility support that cause issues for clients:

- the 20m rule for the enhanced rate under PIP;
- the 50% rule for mobility descriptors; and
- the lack of mobility support for people over state pension age.

As CAS noted when the original proposals for PIP were made, the decision to reduce the qualifying distance from 50 metres to 20 metres had very little justification. Evidence from the MS Society among others has also demonstrated that changes to the distance required has negatively affected the health, finances, and independence of disabled people and that the total knock-on costs to the UK Government outweigh the savings by reducing PIP support through the 20 metre rule.¹

As part of our 'Empowering Scotland' consultation with CAB clients and advisers in August 2015, one of the priorities for changes to PIP was identified as changing the mobility descriptors. CAB clients and advisers thought restricting eligibility for the enhanced mobility component to those who could walk less than 20 metres was resulting in significant hardship for many disabled people. Most wanted to see the distance increased to at least 50 metres (as was the case under DLA).

CAS has also seen a number of cases where people who were in receipt of the higher mobility rate under DLA do not qualify for the enhanced rate under PIP. This is particularly detrimental as people can lose their entitlement to the Motability Scheme. In our 2016 consultation events with CAB advisers, a number of advisers from rural bureaux raised the point that a Motability vehicle was important for people in remote and rural areas due to the absence of convenient and suitable public transport.

In a recent survey, carried out over February 2021, the majority of CAB advisers agreed that the 20m rule should be increased to 50m to qualify for enhanced mobility. When asked about the 20m rule, CAB advisers noted:

"The 20 metre rule is hard to satisfy and anyone who cannot repeatedly mobilise 50 metres should definitely get the higher rate."

"So many people lost their independence by losing their Motability Scheme car when migrating from DLA to PIP. People became housebound or lost their job as they couldn't afford a vehicle. It was a reduction of almost £40 per week. It would be so much better to give people back the ability to be more independent either by enabling them access to"

¹ MS Society, [PIP: A step too far](#), June 2018.

a car leasing scheme or having extra money to get taxis to go shopping etc. and become more integrated members of their communities.”

“If someone cannot walk further than 50 metres without experiencing breathlessness, pain or other discomfort I think enhanced mobility is a reasonable award. The 20 metre rule is too harsh on clients.”

“20 metres is, in most cases, an unpractical or non-useful distance to use as an arbitrary assessment since most claimants are unable to access useful amenities within their community at a 20 metre distance, e.g. for some claimants, it is more than 20 metres to get beyond the perimeter of their property and this limits the useful, practical notion of mobility as a means to access services such as a local shop, GP surgery, etc.”

Another issue is the 50% rule, which requires an individual to meet each descriptor on half of the days in a month for it to count towards their award. For people with fluctuating mobility conditions, for example, moving around unaided or at all would be unthinkable on their “bad” days, but they are denied entitlement to mobility support due to the “50% rule.”

It is raised consistently by CAB clients and advisers that the PIP descriptors and points system are not as suitable for people with fluctuating conditions and mental health conditions. The 50% rule contributes to this, as it can be difficult to accurately gauge and assess whether a person’s condition affects them on 50% of days. Additionally it is problematic for fluctuating conditions where a person is occasionally but intensely affected by their condition when it occurs (e.g. some people with epilepsy or Multiple Sclerosis).

In these circumstances, the need for daily living and mobility support is necessary due to the barriers people face on their “worst days”, but this support is not currently provided because of the 50% rule. CAS would recommend this rule is reconsidered to ensure it does not create a barrier to people with fluctuating conditions or mental health conditions from qualifying for support.

A CAB adviser responding to a 2019 survey carried out by CAS noted:

“I think PIP’s successor should take into account fluctuating conditions which may not cause problems 50% of the time but enough of the time to have an impact on applicant’s life.”

Finally, Attendance Allowance has no mobility component, unlike DLA and PIP, meaning people over state pension age with mobility needs do not receive mobility support and cannot access the Motability scheme. As with the other issues above (the 20m and 50% rule), this is

particularly detrimental to those who live in rural and remote areas, where public transport may be sparse, inaccessible, and essential services may be far away from where people live. CAB clients and advisers have told us they find the lack of mobility component in Attendance Allowance unfair for recipients.

Citizens Alert: *A North of Scotland CAB reports of a couple who are not entitled to the Motability scheme due to becoming disabled only after reaching pension age. This has had a significant impact on their ability to maintain their independence.*

Citizens Alert: *A North of Scotland CAB reports of a client was in receipt of the Daily Living component of PIP before reaching pension age. As she has got older, her mobility has decreased with the onset of arthritis. Now that she is over the pension age, she cannot claim a new PIP award to include the mobility component, meaning the client has incurred extra expense in getting out of the house to allow her to continue having a social life.*

CAS recommends:

- the criteria for entitlement to the enhanced mobility component should be changed so that the relevant distance is increased from 20 metres to at least 50 metres
- allowing access to the Motability scheme for people who receive the standard mobility rate of PIP
- changes are made to the 50% rule to take into account the ongoing impact of fluctuating conditions experienced by disabled people
- mobility support is provided for people over state pension age with mobility needs through Attendance Allowance

Chapter 2 Questions: Improving Employment Support

21. What more could we do to further support employers to improve work opportunities for disabled people through Access to Work and Disability Confident?

N/A

22. How can we support people who have fallen out of work to identify and consider suitable alternative work before their Work Capability Assessment?

The long wait for Work Capability Assessments (WCAs) is a common issue reported by CAB advisers, and CAS is concerned that assumptions of work capability could be made before a WCA takes place. Ensuring claimants have access to a WCA early in their claim so that tailored

support can be provided appears more appropriate than attempting to manage the current long wait period by introducing expectations or providing support that may not be right for the claimant.

Citizens Alert: *An East of Scotland CAB reports of a client who has been handing in sick notes for over 4 months and has not been invited for a work capability assessment. If she received a WCA sooner she may be granted a Work Allowance or additional premium. Since the client is on SSP even granting a Work Allowance would leave the client better off financially.*

If a claimant wants to work and is seeking support with this, that support should be offered. However, the suggestion to offer earlier and more comprehensive support to people who have fallen out of work due to ill-health or disability which implies in any way that a claimant should or must work before a WCA is worrying. At an absolute minimum, no conditionality or obligations or pressures to find or carry out work, or work-related activity, should be in place before a WCA has been concluded. In addition, any activity undertaken or support given before a WCA takes place should not prejudice the outcome or be considered as part of the WCA.

Where a person is interested in work, volunteering, training, or education and appropriate information and support is available, it can be offered, so long as any activity does not prejudice the outcome of the WCA.

CAS recommends:

- avoiding any obligation or conditionality around pre-WCA support
- ensuring pre-WCA support does not prejudice the outcome of a WCA
- reducing delays in accessing WCAs so that appropriate tailored support can be given once the claimant's needs and circumstances are fully understood

23. What further support or information would help work coaches to have more effective conversations with disabled people and people with health conditions? Please provide your response in the text box below

As before, disability benefits are the biggest area of social security advice given out by CAB, with over 168,500 pieces of advice given every year. The volume of advice sought on these issues suggests that many people find the system challenging to understand or navigate on their own.

We hear from CAB that some people feel Work Coaches do not understand their condition and how it affects them, particularly the difference fluctuating conditions and mental health

conditions can have on work. We also hear that some people feel nervous about undertaking activities that might be construed as a step towards work in case they lose their entitlement, even if these activities may be beneficial to the client and their mental or physical health.²

CAS would welcome better understanding of how some kinds of volunteering, social activities, hobbies, education, or training may be experienced very differently by disabled people, compared to work that may superficially appear similar. Some adjustments, obligations, and expectations can be more flexible in the former than in the latter and this can make a big difference to whether the activity is possible for a claimant.

The steps taken to allow Work Coaches to provide more tailored support and the suggested voluntary steps for claimants could be positive, as is the increased flexibility around how much time a Work Coach can spend with a client. Due to these changes being introduced just before the pandemic, further monitoring of how these approaches are working as the economy opens up will be useful.

The Health Model Offices also appear to be a positive step, but again, as Jobcentres have only been able to open up more recently and only 11 Jobcentres had taken up this model pre-pandemic, further evaluation would be welcome.

CAS recommends:

- Work Coaches are appropriately qualified, trained, and recognised for any additional responsibilities they have, especially if they are expected to have conversations with those with serious mental and physical health conditions.
- rather than the generalist approach in which Work Coaches are expected to deal with a mixed case load of people, with specialist knowledge being only available as second tier support for Work Coaches, there should be specialisms that Work Coaches can develop alongside their generalist role.
- in-work progression support should be appropriate to an individual claimant's circumstances. Support should aim to help claimants find a job that is better suited to their skills, experience, ambitions, and individual requirements. It should not merely consist of setting targets to apply for a particular number of jobs each week, without regard to suitability or quality.
- "Work and Health Conversations" are framed as "work and participation" conversations which recognise the health outcomes of a number of activities, both paid and non-paid.

² Citizens Advice Scotland, [Response to Improving Lives: The Work, Health and Disability Green Paper](#), February 2017.

- improving the quality of initial decisions regarding someone’s eligibility for ESA, which will improve trust in DWP. If an individual receives an accurate decision at the initial claim stage and is clear about what financial support they are entitled to, they will be in a much better position to have conversations with health professionals, employers, and Work Coaches about taking steps towards returning to work.
- recognising that people will require financial support to be able to take part in work-related activity, visit the Jobcentre, and pay for essential living costs such as food and heating, together with any additional costs arising from their disabilities and health conditions.
- employment-related support is voluntary, flexible, not based on the benefit someone is receiving, and offers a menu of choices to create a personalised route to work.
- the UK Government should work closely with the Scottish Government as the devolved employability programmes are developed.

24. What has been your experience of receiving employment support? What was good about the support? Are there further improvements that could be made?

Benefits is consistently the Citizens Advice network’s most sought after area of advice, with 47% of advice given in 2020/21 being on this topic. Within this, Universal Credit advice accounts for 32% of queries and advice on Employment and Support Allowance (ESA) accounts for just over 6%. This suggests that a disproportionate amount of people still find it challenging to navigate the system without support.

We’re concerned that the example given in the Green Paper of a successful outcome of employment support is a temporary contract in a low paid industry. This kind of work is insecure and can cause uncertainty and stress for workers.

We are also concerned by the mention in the Green Paper of intensive periods of support for people with complex needs to help them get into work. Much more detail is required on this proposal. Any intensive support must be at the request of the claimant and not be obligatory. People with complex needs can and do participate meaningfully in the labour market, but it should never be the case that their entitlement to social security rests on their willingness to take up support into employment.

It is unclear how employment support schemes are currently evaluated. This must be robustly done to ensure these schemes are person-centred and meeting people’s needs, rather than a way of placing people in inappropriate employment.

CAS recommends:

- ensuring that employment support is meaningful and does not pressure people to take up temporary, low-paid work
- providing more clarity on plans for intensive support for people with complex needs
- robust evaluation of employment support schemes

25. How can we make the most of the knowledge and expertise of local organisations to support disabled people and people with health conditions into employment?

CABs are well-placed in their local communities and are able to signpost clients to appropriate employability schemes, as part of the holistic approach they offer.

26. What more could we do to work with other organisations and services, local authorities, health systems and the devolved administrations to provide employment support in health settings and join up local support?

It is well documented that significant proportions of patients present to healthcare services and specifically GPs with non-medical issues, and that these issues tend to align with the most commonly advised advice categories provided by advice agencies. Furthermore positive outcomes are reported if patients are signposted to an advice service such as a CAB or if these advice services are integrated into the health setting. Positive outcomes can include a reduced patient waiting time; a reduction in prescriptions for anti-anxiety/depression medications for patients that were signposted to CAB; and increased use of CAB services. In 2014, a Fraser of Allander Institute report³ stated that the advice provision by CAB services in Scotland on issues of benefits, debt, employment, housing and relationships is estimated to have reduced the health costs related to these areas by £22.5 million, therefore such an approach contributes to an overall early intervention and prevention approach.

Many CAB in Scotland provide advice in healthcare settings, across a range of different formats and different types of services. Many bureaux have well established relationships with healthcare providers and often provided an outreach service in a variety of healthcare settings. Others form agreements with local healthcare providers to ensure that patients are signposted to their local CAB. Of all referrals to CAB in 2019/20, 6% of these were referrals from the health sector. Advice sought by those referred to CAB via the health sector differs somewhat from clients overall, with a greater proportion seeking advice on benefits; finance/charitable support; and travel/transport.

³ Fraser of Allander Institute, [The continuing financial benefits of advice provision to the common good: the example of the Citizens Advice Service in Scotland](#), 2014

Linkages to the DWP are crucial in this regard and if CAB are co-located or integrated into healthcare settings this contributes to a holistic advice offer and the concept of social prescribing. As such there is a need for greater collaboration and join up between government agencies such as the DWP, local authorities and health systems as well as devolved governments to help ensure an early intervention and prevention approach is adopted which can in turn assist people with employment support.

Likewise this will also provide a more seamless advice and support journey for clients, if for example a CAB advisor is located in a GP surgery and requires medical information to help assist with a client's benefits or employment query, there can be easier and quicker sharing of information (with consent) which will help resolve people's issues quicker. CAS would also argue that funding opportunities for advice provision should be operated as additional funding, to ensure that CAB can maintain current service levels as well as maintaining quality of advice within healthcare settings.

CAS recommends:

- The DWP builds on existing examples of co-location with advice providers in health settings to improve the local offer of holistic advice.

27. What can we offer that would encourage people in the Support Group or LCWRA to take up our employment support?

Nervousness about losing benefit entitlement still exists for many CAB clients. Rather than being directly focused on employment, non-conditional support for identifying and undertaking activities that would be beneficial for people's confidence or physical and mental health would be more welcome for people in these groups. Social activities, hobbies, volunteering, and/or learning opportunities are worth considering as voluntary options for people in these groups.

As above, support that promotes and recognises the importance of "participation" in different areas of society, rather than purely paid employment, would be welcome.

CAS recommends:

- introducing non-conditional support for participation in activities that would benefit people's confidence or physical and mental health

28. Would you be happy to access employment support digitally? Please tell us why/why not.

- **Yes**
- × **No**
- **Please tell us why/why not**

Digital employment support will work and be appropriate for some people, however, it will not work for a significant proportion of people who are digitally excluded or who have low digital skills and confidence. Previous research commissioned by CAS has found digital exclusion to be a real problem for people on UC.⁴ Of the 601 UC clients surveyed:

- 26% reported problems with completing the application itself;
- 10% of all clients had difficulties setting up an account to make their claim;
- 5% of all clients reported problems with internet access; and
- People with a disability were more likely to report at least one difficulty in making their claim for UC (43% vs. 32%).

Those who reported difficulties were then asked what the single biggest difficulty was that they encountered in making their claim for UC:

- 11% said they struggled with the online nature of the application;
- 5% said they had no access to a computer, printer, or the internet; and
- 5% encountered technical issues setting up an account.

This amounts to over a fifth (21%) of those who encountered some form of difficulty identifying UC's digital design as the single biggest difficulty they faced.

In our in-depth interviews with survey participants, digital exclusion was a common feature:

"It was very confusing. I'm registered disabled and I can't do things like that, online and form filling."

"It's far too complicated and they expect you to be computer literate and have access to a computer."

"They expect everybody to have a computer and I don't have one."

The above statistics and client stories therefore show problems for moving employment support online. While some people with existing digital literacy skills may benefit from online access to

⁴ Citizens Advice Scotland, ["It's a bit frightening seeing things slip away so fast after you've worked so hard.": Citizens Advice Scotland Research into Applying for Universal Credit during the Pandemic](#), 30 July 2021, Section 3.

support, a great number of people will struggle to even access the internet, never mind making effective use of employment support.

In line with our wider calls around the accessibility of the social security system, CAS believes that non-digital support must always be available for people who need it and that offering choice to people in how they access support is the most effective way to help people.

CAS recommends:

- offering a choice to people in how they access employment support, both digital and non-digital
- being cognisant of the impact of digital exclusion

29. What should we consider when developing a digital support offer for disabled people and people with health conditions?

We want to consider how employment support could be offered as part of a mixed offer combining digital and face-to-face options.

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. As a result, CAS is sharing information on issues that are soon ostensibly to be dealt with by the Scottish Government but could be affected by UK Government decisions.

The most important thing to consider when developing a digital support offer for disabled people and people with health conditions is maintaining choice for people. The development of digital UC50 and PIP2 forms is welcome but must not replace the availability of paper forms for people who are digitally excluded.

People should be able to choose what best suits them and their needs and should be able to change this over time. For some people, digital services and remote communication and assessments are most appropriate. For others, face-to-face support and assessments will be most appropriate. However, this may change over time as conditions worsen or improve, or people' access to technology and internet access changes.

As a result, it will be necessary to maintain offline options for disabled people and people with health conditions alongside any digital support offer.

CAS recommends:

- maintaining a choice of digital and non-digital support options, with the flexibility to move between these as a person's access to technology and the internet changes

30. How can we better support young disabled people who are moving out of education to find appropriate work?

N/A

Chapter 3 Questions: Improving our Current Services

31. During the coronavirus pandemic we introduced assessments by telephone and video call as a temporary measure. In your view, in future, what mixture of methods should we use to conduct assessments?

It's not clear whether this question refers to assessments for DLA/PIP/AA or for WCA. Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. As a result, CAS is sharing information on issues that are soon ostensibly to be dealt with by the Scottish Government but could be affected by UK Government decisions.

When it comes to benefits designed to account for the extra costs face by disabled people, CAS has previously called for a substantial reduction in the proportion of people who have to undergo a face-to-face assessment.

As in previous answers, people should be able to choose what best suits them and their needs and should be able to change this over time. For some people, digital services and remote communication and assessments are most appropriate. For others, face to face support and assessments will be most appropriate. However, this may change over time as conditions worsen or improve, or as a person's access to technology and internet access changes.

In addition, CAB advisers have told us that it has been harder to support people with video and telephone assessments due to delays and difficulties in setting up three-way calls and longer call slots (instead of specific appointment times) preventing advisers from being available at the right time.



Citizens Alert: *A South of Scotland CAB reports of a client who had a telephone appointment for PIP. The client stated did not go well, due to problems with the*

microphone on the handset not working and the handset having to be passed between her and her son, and client states she did not feel she was given sufficient opportunity to speak for her son or ask questions of the assessor.

CAS recommends:

- reducing the proportion of people who need to undergo a face-to-face assessment
- a choice for claimants about the format of the assessment, in order to best meet their needs
- reintroducing specific appointment times, rather than call slots, to allow for effective advocacy and support

32. How could we improve telephone and video assessments, making sure they are as accurate as possible?

Although powers over PIP, DLA and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to assessments for both DLA/PIP/AA and for WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

It's not clear to advisers or clients why some people are offered one kind of assessment whereas others are offered a different kind. More transparency in this would be welcome, as would a more person-centred approach, which allowed a claimant to have an assessment in the format that best suits them. CAB advisers have reported of clients who have suffered anxiety and hardship as a result of confusion over assessment methods.

Citizens Alert: *A West of Scotland CAB reports of a client requiring an assessment for ESA. The client and her daughter were phoned on the morning of the appointment to check they were still available and to remind them of the appointment time. The client indicated that no one else called that day so they phoned the assessor team towards the end of the day. They were told not to worry, and a further appointment would be arranged. The client then got a letter from DWP indicating that as they had not attended the assessment their ESA would be ending.*



Citizens Alert: *A West of Scotland CAB reports of a client who has been invited to a face-to-face assessment for PIP. He phoned them to ask for a telephone assessment instead and said he couldn't cope with a 1-hour appointment because of his chronic physical health and problems with sitting. His request was refused, and he said the person he spoke with did not listen to him and was rude. The adviser then phoned on his behalf and spoke with the same person who was not helpful at all and refused to consider offering him a telephone assessment. Client has decided to go to the face-to-face appointment because he just wants it done now. The situation has caused him undue distress and he feels angry at the cruel system.*

As noted above, longer time slots for calls (rather than appointments) also makes it much more challenging for advisers to be able to support clients. Returning to specific call times will make it easier to offer support to those who need it.

CAS recommends:

- offering people a choice of assessment type
- ensuring that it is possible for advisers or other support to be available for the assessment
- gathering as much evidence as possible (including directly from medical professionals and from people who know the claimant best) before any assessment

33. What more could we do to reduce repeat assessments, where the impact of a person's health condition is unlikely to change significantly?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. This question refers to assessments for both DLA/PIP/AA and for WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

In the new Scottish social security system, CAS has advocated for indefinite/lifetime awards for people with conditions unlikely to change and would like to see the same approach taken by the UK Government. For lifelong conditions where a person's needs will not change, lifelong awards should be made, with assessments available on request by the claimant if their condition has worsened and they are not yet on the highest rate of award.

CAS recommends:

- indefinite/lifetime awards for people with conditions which are unlikely to change

- assessments available on request by the claimant if their condition has deteriorated

34. Decisions can be changed after an appeal has been lodged but before a tribunal hearing takes place. How can we improve the way we communicate a new decision in this situation?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to assessments for both DLA/PIP/AA and for WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

CAB evidence shows that many people do not understand why decisions have been made or changed. First and foremost, improving the accuracy of decision making first time would avoid the need for as much additional communication about appeals and/or changes to decisions.

In all instances, clear information must be given to claimants about any decision, in a format that is most accessible for them. A written record of decisions should always be provided but additional communication formats including telephone, text, email, or a face-to-face appointment should be provided where appropriate. Written decisions should include more Easy Read information.

In particular, more specific feedback (for example from WCAs) on where applicants “failed” certain descriptors or did not score highly enough would be welcome. CAB advisers tell us that clients often receive template decision communications with no information about why the specific decision was reached for the specific client.

This makes it difficult for clients to understand whether the decision reached is fair or accurate and if they should ask for a Mandatory Reconsideration or an appeal.

CAS recommends:

- improving the accuracy of decision making first time
- provision of clear information about any decision, in a format that is most accessible for claimants
- provision of more specific feedback on how decisions were reached for individual claimants

35. What other changes could we make to improve decision making?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to assessments for both DLA/PIP/AA and for WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

Gathering as much information at the initial stage of application as possible, and where necessary reaching out to health professionals and other people who know a claimant best for any additional evidence would improve the accuracy of decision-making and reduce the need for assessments, which clients have told us they often find stressful and dehumanising.

Where assessments are necessary, claimants should be offered a choice over format so that they are best able to communicate their circumstances and needs.

CAS recommends:

- gathering as much information as possible at the initial stage of application to improve the accuracy of decision-making and reducing the need for assessments
- a choice for claimants over the assessment format

36. How could we improve the experience when people claiming Child DLA are invited to apply for PIP?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. As a result, CAS is sharing information on issues that are soon ostensibly to be dealt with by the Scottish Government but could be affected by UK Government decisions.

As part of the Scottish Campaign on Rights to Social Security (SCoRSS) coalition, CAS has called for reconsideration of the current system of age-related social security payments due to a number of practical problems and anomalies in its operation, such as:

- When individuals are transitioning from disability social security for children to adult social security, people can lose entitlement to social security support entirely due to

discrepancies between child DLA and PIP. This transition also requires claims to be reviewed and reassessed at the age of transition (proposed to be 18 in the Scottish system).

- The fact that most individuals who claim assistance when they are over 65 are unable to receive assistance with their mobility, due to there being no mobility component for Attendance Allowance, unlike payments for people below that age.
- Different rules and processes for different ages. For instance, rules relating to stoppages and resumption if a person is admitted to hospital are different in each form of disability assistance.⁵

Creating a single disability entitlement across all age groups may help reduce the complexity and inconsistency of the social security system and improve take-up overall. However, changing to a single system of disability assistance could also present several challenges, including uneven rollout and drops in entitlement. Any such reforms must be done in full consultation with people with disabilities, with built-in protections for present entitlement should the new system be less generous.

CAS recommends:

- reconsideration of the current system of age-related social security payments, particularly in regard to the transition period between child and adult social security, the mobility component for Attendance Allowance, and the impact of hospital stays
- consultation with disabled people to ensure any changes do not detrimentally impact people's entitlement

Chapter 4 Questions: Re-thinking Assessments to Support Better Outcomes

37. Is there anything about the current PIP activities and descriptors that should be changed?

- × **Yes**
- **No**
- **Don't know**

If yes, please state here what changes to the PIP activities and descriptors should we consider?

Although powers over PIP, DLA and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English

⁵ SCoRSS, [Beyond a Safe and Secure Transition—A Long Term Vision for Disability Assistance in Scotland](#), August 2020, page 28.

systems. As a result, CAS is sharing information on issues that are soon ostensibly to be dealt with by the Scottish Government but could be affected by UK Government decisions.

CAS co-authored the SCoRSS report, *Beyond a Safe and Secure Transition*, and recommended a new system of eligibility and descriptors in line with this report, more closely focused on a human rights-based and social model of disability than the current system.

The existing eligibility criteria descriptors for the three disability entitlements are more closely associated with the medical model of disability. For instance, descriptors that refer to people who “cannot cook a simple meal using a conventional cooker but are able to do so using a microwave” or who “[need] assistance to be able to wash either their hair or body below the waist” are not consistent with a social model approach. The *Beyond a Safe and Secure Transition* report includes an example of the difference viewing disability through a social model can make when framing questions.⁶

Any changes to the eligibility criteria should balance the improvements they will bring to the system with the potential issues that such changes may cause.

Changes to entitlement conditions could mean a large number of claimants may need to be reassessed. This would create logistical issues and mean that some claimants receive higher awards and some claimants receive lower awards. When considering changes to entitlement careful analysis should be done to understand which claimants this will affect and how.

If claimants are not automatically reassessed once eligibility criteria are changed, some individuals may have to make a difficult decision about whether to request reassessment under the revised criteria.

Changes to entitlement conditions may affect the way that the DWP currently uses disability social security to calculate additional amounts of reserved social security. This will raise a number of policy challenges that will need to be addressed. This is not to say that radical changes to the system should not be made, but that the impact of any such changes should be carefully considered.

CAS recommends the eligibility and assessment criteria are reviewed to ensure they reflect the social and human rights models of disability and to better realise the rights to equal participation in society and independent living for all. This should be co-produced with disabled people and people living with long term conditions and should consider what aspects of society

⁶ SCoRSS, *Beyond a Safe and Secure Transition—A Long Term Vision for Disability Assistance in Scotland*, August 2020, Appendix A.

disable a person and infringe their human rights, rather than focussing on the medical or functional aspects of a person’s impairment.

Short of a wholesale review, CAS particularly recommends that the 50% rule and 20m rule are removed, as stated in response to Q20, and that questions are better framed to allow people with mental health conditions to express what barriers they face, the impact of these barriers and what support is required. For those with fluctuating conditions, efforts should be made to understand what “bad days” and “good days” look like for individuals and ensure enough support is available for people to still lead a dignified and independent life on “bad days” as well as good, while understanding that even “good days” can still be very difficult and may require support.

CAS recommends:

- a new system of eligibility and descriptors in line more closely focused on a human rights-based and social model of disability, co-produced with disabled people and people living with long term conditions
- careful consideration of the impact of changes to entitlement conditions
- the 50% rule and 20 metre rule are removed, in line with our responses to Q20
- assessment questions are better framed to allow people with mental health conditions to express what barriers they face

38. Is there anything about the current WCA activities and descriptors that should be changed?

- × **Yes**
- **No**
- **Don’t know**

If yes, please state here what changes to the WCA activities and descriptors should we consider?

As above, CAS recommends a system that is based on the human rights and social model of disability.

39. Should we seek evidence from other people, such as other health professionals or support organisations?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to assessments for both DLA/PIP/AA and for WCA, the

latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

CAS recommends seeking and considering evidence from people who know the applicant and their disability or health condition best. This should include health professionals and support organisations who work closely with the applicant, but also friends and family, particularly where they have a caring role or support the applicant in ways directly related to the barriers in society they face.

It is also important to understand that consultants or specialists who may be experts in a particular condition, may not be experts in an applicant's specific circumstances. In some cases, regular interaction between these professionals and the applicants may be rare and limited to an initial diagnosis or treatment prescription, whereas occupational health therapists, care workers and others may have a much better understanding of an applicant's day-to-day circumstances.

CAS recommends:

- ▶ that the DWP seeks and considers evidence from the people who know the applicant and their disability or health condition best, including health professionals and support organisations

40. What type of evidence would be most useful for making WCA and PIP decisions, and should there be a standard way to collect it?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to both DLA/PIP/AA and WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

The best evidence is that which gives the clearest information and most accurate representation of a client's circumstances. As above, this can include medical notes, but also information from people who work with or see an applicant more regularly and may be more familiar with any support they require.

Where the same evidence (e.g., confirming a particular condition) is required for both WCA and PIP and someone has already applied for one of the benefits, it would be helpful if this could be shared internally within DWP to prevent someone having to gather and resend information. Pre-

populating any application with known information from a claimant would also save time and resources for the individual and the department.

CAS recommends:

- better internal information sharing arrangements within the DWP to prevent the need for an applicant having to gather and resend information if they are applying for multiple benefits which require the same evidence
- pre-populating application forms with known information about the claimant

41. How could we make sure the evidence we collect before a WCA or PIP assessment directly relates to a person’s ability to do certain things?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to assessments for both DLA/PIP/AA and for WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

As in earlier questions, trusting information from applicants and gathering information from the people who know them best and understand what barriers they face day to day will help provide a picture of what support or adjustments a person might require and will enable them to lead a full life.

This can include family and friends, as well as medical professionals, and staff, volunteers and members of local clubs, community groups, or support organisations.

CAS recommends:

- trusting information from applicants and gathering information from the people who know them best

42. How could we improve assessments or the specialist support available to assessors and decision-makers to better understand the impact of a person’s condition on their ability to work or live independently?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English

systems. In addition, this question refers to both DLA/PIP/AA and WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

CAS proposes that a tiered system could be helpful in improving assessments and reduce the need for repeat assessments particularly. We recommend that the vast majority of the application should be based on the client's own evidence of their condition, as they are best placed to describe how their condition affects their life, which often differs between individuals.

We reiterate that the system must be built on a foundation of trust and if there is enough evidence to make a decision from the client's application, then nothing further should be required. If more information is needed, this could be gathered from people who know the client and considered in addition to the client's own evidence. Only if it has not been possible to gather enough information to make a decision, or when a claimant requests it, should a face-to-face assessment be arranged.⁷

In terms of specialist support for assessors, as mentioned before, it should be ensured that Work Coaches are appropriately qualified and supported with training, especially if they are expected to have conversations with those with serious mental and physical health conditions.



Citizens Alert: *An East of Scotland CAB reports of a client who had a very bad experience during their PIP assessment. The assessor was described by the client as being very rude and offensive for over an hour. The client was completely taken aback by the line of questioning which seemed unrelated to her ability to carry out day to day tasks. When the call ended the client burst into tears and had a panic attack. The client has experienced these assessments before and never had a problem with them before.*

CAS recommends:

- considering a tiered system when gathering information and evidence for a person's application, placing trust in the person's own account of their conditions, and only gathering further information if completely necessary.
- Work Coaches should have adequate qualifications and training to assess people's health conditions effectively and accurately.

⁷ Citizens Advice Scotland, [Designing a Social Security System for Scotland: Disability and Carers' Benefits](#), December 2015.

43. How can we make it easier for people to inform us if their condition or circumstances have changed so that a review of entitlement can be carried out at the right time?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to both DLA/PIP/AA and WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

As before, making a variety of channels available to contact the DWP through would be useful. At present, the CAB network reports frequently of the difficulty clients and advisers experience when trying to contact the DWP. The network also often reports that clients who have informed the DWP about a worsening or deterioration of their condition are seeing that their entitlement is altered wrongly and often reduced.

Citizens Alert: *A West of Scotland CAB reports of a client who has been in receipt of PIP since 2017. She was awarded the enhanced rate daily living and standard rate mobility components. Her health deteriorated further and in September 2020 she contacted PIP to advise them of her change in health. The client completed the PIP form, had a telephone assessment and has received DWP decision, reducing her award to the standard rate of daily living and mobility. The client does not believe the DWP decision reflects the conversation with assessor and conflicts with her PIP form.*

CAS recommends:

- making it easier for claimants and advisers to contact the DWP, and ensuring there is a variety of channels through which to do this.

44. What could be included in a discussion to develop a more personalised employment and health support plan?

N/A

45. What skills and experience should the person undertaking an employment and health discussion have?

As before, a person undertaking this discussion should be appropriately trained and qualified and adopt a flexible approach.

Chapter 5 Questions: Exploring Ways to Improve the Design of the Benefit System

46. How could we simplify the system for people applying for multiple health and disability benefits?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to both DLA/PIP/AA and WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

As already noted in response to Q36, CAS has previously called for an exploration of a single, non-age-based social security system in order to reduce complexity and improve take-up. However, any change to a single system of disability assistance must be done in full consultation with people with disabilities, with built-in protections for present entitlement should the new system be less generous.

In particular, “extra costs” disability assistance must not be conflated with means-tested social security support, such as Universal Credit, to ensure that all people with disabilities receive the support necessary to compensate for the societal barriers they face.⁸ For that reason, CAS would strongly oppose the suggestion in paragraphs 300–303 of the Disability Green Paper to investigate merging PIP with Universal Credit.

CAS would also support exploring automation of passported benefits to maximise take-up. Any such automation must, however, be reliable and secure for the person receiving social security support, and in particular must not risk creating accidental overpayments or other difficulties that can lead to a reduction in people’s incomes long-term.

As a first step, the UK Government should improve its data recording of social security entitlements, including equalities data, to enable a better understanding of gaps and barriers to take-up and help improve application processes as a result.⁹

CAS recommends:

- not merging PIP with Universal Credit

⁸ SCoRSS, [Beyond a Safe and Secure Transition—A Long Term Vision for Disability Assistance in Scotland](#), August 2020, page 30.

⁹ See further SCoRSS, [Submission to the Social Security Committee inquiry on the role of Scottish social security in Covid-19 recovery](#), October 2020, page 6.

- exploring automation of passported benefits to maximise take-up
- improving data records to better understand barriers to benefit take-up

47. Universal Credit (UC) has many features, such as the work allowance and taper, that aim to make it easier for people to move into work. How can we ensure that disabled people and people with health conditions are aware of these features, and encourage people to try out work on UC?

Previous research commissioned by CAS identified problems in the accessibility and clarity of publicly available information on UC. Our research found that, before contacting CAB for advice, of the 601 UC CAB clients surveyed:

- Nearly 3 in 10 (29%) found it difficult to get information on applying for UC.
- 28% said they found the information they needed to apply for UC was incomplete.
- Almost one in ten (8%) said there was information they were unable to get hold of about applying for UC, with 17% of these clients identifying missing information on their entitlement to UC, 7% unable to find information on the impact of education or training course on UC entitlement, and 5% reporting incomplete information on the impact of work on UC.
- Almost 1 in 4 (24%) reported that the information they found on applying for UC was unhelpful.¹⁰

These difficulties for more pronounced for clients with disabilities. 35% of clients with a disability said they were unable to find the complete information they needed to be able to fully understand and claim for UC before they sought advice from a CAB, compared to 25% of clients without a disability. 9% of clients with a disability said there was information about UC that they were unable to access at all, compared to 7% of clients without a disability. These statistics point to general difficulties with the intelligibility of the UC system, as well as the exclusionary impact these have for people with disabilities in particular.

One way to overcome these difficulties would be to restore the Work Allowance to everyone on UC, reducing the need for people with disabilities to specifically understand their entitlement to a Work Allowance as a result of their Limited Capability for Work. A second action would be to improve UK Government messaging around UC, to better acknowledge its role as an in-work benefit for almost two in five (38%) people on UC in Scotland.¹¹

¹⁰ Citizens Advice Scotland, ["It's a bit frightening seeing things slip away so fast after you've worked so hard.": Citizens Advice Scotland Research into Applying for Universal Credit during the Pandemic](#), 30 July 2021, Section 2.

¹¹ Figures taken from DWP Stat-Xplore, July 2021.

CAS recommends:

- restoring the Work Allowance to everyone on UC
- the UK Government improves its messaging around UC, promoting it as an in-work benefit

48. How could the current structure of benefits be changed to overcome people's financial concerns about moving towards employment?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to both DLA/PIP/AA and WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

It is important to first acknowledge that work will not be suitable or available for all people with disabilities, and their standard of living must not be made contingent on them being able to find work. A social security system that forces people to choose between poverty and work is not effective or compliant with human rights.

With the above in mind, two key actions would help support more people with disabilities into work. The first would be an uprating of both UC's basic allowance and the additional support offered to disabled people by PIP and other legacy disability benefits.

Previous research commissioned by CAS has shown the impact low rates of UC have for people looking for work. Of the 601 UC CAB clients surveyed for the research:

- 67% of people surveyed said the UC payment they received was inadequate for their needs, with more than half of these people (55%) describing UC as 'very inadequate'.
- Almost two in three (64%) had to cut down on at least one basic necessity during their UC claim, with 50% of all those surveyed cutting down on non-essential travel, nearly half cutting down on heating (47%) and electricity or gas (45%) and one in five (20%) cutting down on food.
- Over one in four (27%) had to borrow money in order to pay for essentials, trapping them in a cycle of debt in order to make ends meet.
- 74% of all those surveyed said they would be unable to cope with the £20 a week cut to UC that was implemented in October 2021, with 26% saying the biggest impact of the

cut would be in their ability to pay for essentials and 14% saying they would be unable to buy food.¹²

People cannot be expected to effectively look for work if they are cold, hungry, and unable to afford transport costs to and from work. UC's low rate of pay discourages people from finding work rather than supporting them into secure and well-paying jobs.

This problem is compounded for people with disabilities due to the insufficient financial support they receive to compensate for the obstacles society creates for them. Research from Scope indicates that on average the additional cost of having a disability is about £583 per month for a disabled adult and £581 per month for families with disabled children.¹³

This means that disabled people are doubly disadvantaged by low levels of social security support. As an illustrative example from our own survey, clients with a disability were almost twice as likely to say that there are things they have had to go without altogether since making their claim for UC (for example, going entirely without heating, electricity or gas, internet, and social activities), compared to clients without a disability (21% vs. 13%).¹⁴ Uprating both UC and targeted disability benefits like PIP and relevant legacy benefits is a vital first step for allowing people with disabilities to safely access the labour market.

The second step would be to lower the taper rate for all UC claimants, to better encourage work. While the taper rate was lowered from 65% to 63% in 2017, people on UC with Limited Capability for Work can still easily exhaust their Work Allowance while in low income and insecure employment. Lowering the taper rate would not only allow people to keep more of their income while remaining supported by UC but will also help sustain their entitlement to passported benefits like the Scottish Child Payment.¹⁵ For any disabled person entering work, expanding the use of run-ons and tapers when someone's entitlement drops will also ensure people are not dissuaded from taking on extra work due to the potential for income drops.

CAS recommends:

- an uprating of both UC's basic allowance and the additional support offered to disabled people by PIP and other legacy disability benefits
- lowering the taper rate for UC claimants

¹² Citizens Advice Scotland, ["I am constantly penny pinching." Research into Living on Universal Credit during the Pandemic](#), 6 September 2021.

¹³ SCOPE, [The Disability Price Tag – 2019](#), February 2019.

¹⁴ Citizens Advice Scotland, ["I am constantly penny pinching." Research into Living on Universal Credit during the Pandemic](#), 6 September 2021, page 24.

¹⁵ CAS have previously outlined the impact of lowering UC entitlement on devolved benefits in SCoRSS, [MP Briefing: Cancel the £20 cut to Universal Credit and Tax Credits](#), 9 September 2021.

49. How could the current structure of benefits be improved so people can better manage changes in benefit entitlement?

Although powers over PIP, DLA, and AA have been devolved and are in the process of being delivered by the Scottish Government, changes made by the UK Government may affect the overall financial settlement and divergence between the Scottish and Welsh and English systems. In addition, this question refers to both DLA/PIP/AA and WCA, the latter of which will remain reserved. As such, CAS is sharing information on some issues that could soon be dealt with by the Scottish Government but could be affected by UK Government decisions.

It was mentioned within the Green Paper that in response to DWP consultations on its development that “some people felt worried about being left without income between benefit payments”. As in Q48, we support increasing and expanding the use of run-ons and tapers when someone’s entitlement drops, in order to avoid income shocks.

As already noted in response to Q36, CAS has previously called for an exploration of a single, non-age-based social security system in order to reduce complexity and improve take-up. In particular, this would remove the risk of cliff-edge ends to entitlement, such as the current lack of mobility support for older people in receipt of Attendance Allowance.

Accidental overpayments as a result of changes in circumstances can also be a significant and sustained burden on people’s incomes. This has been a particular issue during the pandemic, where various aspects of ID verification were turned off to allow people to claim for support. Recent DWP statistics has reported that 11% of all retrospective verifications identified some kind of problem with the UC application,¹⁶ and 4% of all benefit expenditure in 2020–21 was an overpayment of some kind.¹⁷

Because the DWP does not implement an affordability check when making deductions from a person’s UC, people can lose up to a quarter of their income for many months as a result of these overpayments. Introducing a revised system based on a robust holistic affordability check that better reflects people’s ability to pay, such as the Standard Financial Statement, would help cushion the blow of any deductions and better reflect people’s individual circumstances.¹⁸ A sensitive approach to ID re-verification, ensuring people are not penalised for honest errors in

¹⁶ Rightsnet, [Retrospective verification of 900,000 ‘at risk’ universal credit claims made during Covid-19 pandemic finds 11 per cent ‘had something wrong’](#), 10 September 2021.

¹⁷ DWP, [Fraud and error in the benefit system for financial year ending 2021](#), 13 May 2021.

¹⁸ See further Citizens Advice Scotland, [“I am constantly penny pinching.” Research into Living on Universal Credit during the Pandemic](#), 6 September 2021, Section 4.

their application for UC during the pandemic, will also ensure people are not placed into hardship by changes in their circumstances and entitlement.¹⁹

CAS recommends:

- increasing and expanding the use of run-ons and tapers when someone's entitlement drops
- adopting a sensitive approach to ID re-verification, ensuring people are not penalised for honest errors in their application for UC during the pandemic
- introducing affordability checks before making deductions from people's awards

50. While continuing to focus financial support on people who need it most, how could we more effectively support disabled people with their extra costs and to live independently?

As part of the SCoRSS coalition, CAS has previously called for disabled people to actively and effectively participate in the design of the social security system as well as support in navigating it.²⁰ Designing social security in partnership with the people who use the system will lead to a better understanding of the extra costs of having a disability, ensuring the system offers the right level of support. As such, the UK Government should ensure not only that people with disabilities are consulted at every stage of the implementation of the Disability Green Paper but must also offer adequate funding and support to ensure this consultation is effective, accessible, and human rights-led. This includes a requirement for comprehensive Equalities Impact Assessments (EQIAs) and Human Rights Impact Assessments (HRIAs) at every stage of policy design.

CAS is also keen to ensure that support for disabled people remains an entitlement to cash. CAB client focus groups have previously told us of issues arising from giving goods in kind without a choice. These included concerns about a loss of dignity; causing stigma; risks of paying for services causing the social security budget being conflated with the budgets for the provision of local services and depriving individuals of income that could have been used for whatever the individual most needed. Flexibility allows for choice, but also allows claimants to live an independent life. Therefore, while it is important to have goods and services available,

¹⁹ See further Citizens Advice Scotland, ["It's a bit frightening seeing things slip away so fast after you've worked so hard.": Citizens Advice Scotland Research into Applying for Universal Credit during the Pandemic](#), 30 July 2021, Section 3.

²⁰ SCoRSS, [Beyond a Safe and Secure Transition—A Long Term Vision for Disability Assistance in Scotland](#), August 2020, pages 22–23.

cash entitlement remains the most secure and independent way for a disabled person to meet their own specific needs.²¹

CAS recommends:

- the UK Government should ensure not only that people with disabilities are consulted at every stage of the implementation of the Disability Green Paper but must also offer adequate funding and support to ensure this consultation is effective, accessible, and human rights-led.
- comprehensive Equalities Impact Assessments (EQIAs) and Human Rights Impact Assessments (HRIAs) at every stage of policy design.
- support for disabled people remains an entitlement to cash.

51. Should we explore options to make it easier for disabled people to access practical support such as aids, appliances or services, and why?

Same as our response above, we believe any practical support should always be available as a cash entitlement.

52. What particular types of practical support should we help disabled people access?

Same as our response above, we believe any practical support should always be available as a cash entitlement.

Additional comments

We are concerned that in previous consultations related to the disability benefits devolved to the Scottish Government, document that 'if the changes we made increased entitlement to Adult Disability Payment, the DWP would need to agree that it would continue to provide automatic access to passported benefits and premiums.' This suggests that eligibility criteria for devolved Adult Disability must be the same as reserved PIP. This could severely restrict the Scottish Government's ability to improve weaknesses in the current rules to enhance the rights of disabled people in Scotland. CAS would welcome clarification from the Scottish Government and DWP as to what extent policy variation is possible within these parameters.

For more information, please contact: Aoife Deery, Senior Social Justice Policy Officer, Aoife.deery@cas.org.uk

²¹ See further Citizens Advice Scotland, [Response to the Social Security \(Scotland\) Bill – Social Security Committee](#), August 2017, page 12.