

Questions

Question 1

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

Lack of Access and Adaptations

Peoples attitudes to disability

Lack of money to "go out"

Question 2

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

- The Mobility Car is a godsend ... Roadtax, service, insurance etc all taken care of is a RGW help.
- My daughter has been granted DLA indefinitely but I feel still needs a review as sadly her needs will increase as she gets older.

~~How Reviews~~

The timing of the reviews should depend on the level of disability - profound + multiple handicap 2-3 yearly. - bad back - bi-monthly?

Question 3

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

- The Biggest need and expense is a carer to make sure that they are safe, physically and mentally - someone who can help them reach their full potential & lead a happy, worthwhile life.
- my daughter needs 3-4 changes of clothes per day "also at night" - she is very poor and cheap clothes are often a false economy

Question 4

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

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

- I understand that the "old" benefit has 2 parts & 2 amounts per part - How will the new one differ?
- If the benefit is paid to the right person - i.e. a specific disability then 2 amounts will be ok.

YOU MUST NOT MAKE IT TOO DIFFICULT TO ALLOCATE THE RIGHT AMOUNT TO THE RIGHT CANDIDATE.

- KEEP AWAY THE CHEATS.

Question 5

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

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

- YES - AFTER AN INITIAL ASSESSMENT
Some people, albeit a very small minority,
have such profound disabilities that it is
obvious that their needs are great & are
not likely to change much.
- Another group will/should need to prove
that they still need the benefit - the cheats?

Question 6

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

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

1. Is it possible for certain, profound, disabilities
could be "flagged up" on NHS records - so
G.P., nurse or consultant could suggest the
patient applies?
2. Need for carer, equipment, access -
enough money, regular health checks.
An advocate could "keep an eye" on
day to day living to make sure all ok.

Question 7

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

- This is an essential benefit for the client and a very expensive one for the government. Maybe each beneficiary should be allocated a "case manager" / "advocate" who, depending on the severity of the disability, interviews the client on a regular basis -- not annually -- 5 years.
- If client's needs change he/she contact case manager.
- If person has a social services case manager the annual review could be used to prove current status.

Question 8

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

2 What aids and adaptations should we take into account?

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

- Aids and adaptations are very costly - and something which "healthier" people don't need, so yes they should be taken into ac; and anything that can, reasonably, make life easier or more fulfilling should be considered.
- Most People with a severe disability will not improve as they get older. Their future needs have to be considered.
- A lot of people on Benefits are so poor that they haven't tried to find aids & adaptations that will make their life easier. They need help to find & fund equipment.

All aids are expensive - even plates, cups, & cutlery. - Bibs £7.99 each!

Question 9

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

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

1. This was the most difficult form I had to fill in.
 2. Is it possible to have certain key words or phrases used by GPs/Hospitals, S.W.s. that would "flag up" when a person may be eligible for DLA.
- Use more "education" during the transition stage at school. - 14yrs +.

Question 10

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

1. What information will we need to make it clear what the person can and cannot do?
2. Carers' Parents, Care Managers, Doctor, Advocate..
eg. local Mencap (someone with knowledge but also who realises the importance of not cheating).
3. Initially a full assessment... medical and psychological (if necessary)
Day to day routines: - where do I go/would like to go, how do I/could I get there, what I could do if I had the right help.

Question 11

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

What good things and bad things may this bring?

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

1. I think an interview is a very important part of a claim

A good result would be the right benefit to the needy person.

A bad result would/could be the "stress" caused, so must be dealt with sympathetically - have an advocate present. This person could be a friend, carer, social worker, parent, Mencap, Help the Aged. etc.

My daughter cannot speak - she'd HAVE to have someone there to help!

2. No - everyone should be "spoken" to as part of each assessment. This is a "big" benefit - NO CHEATS WELCOME.

Question 12

1. What should we use to decide how often we should look at a claim again and check it?
2. Should the way we look at a claim again depend on the needs of the person and their health condition or disability?

1. The level of disability and medical advice as to how it may change & when. -
Remember bad backs.!

2. YES.

Question 13

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

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

1. Is this a promise? !

1.a. Regular Reviews, depending on Medical History - again Remember "Stress" & "Bad Backs."

2. Make sure penalties for failure are imposed - and advertise them - maybe at the front of the leaflet or form - no-one reads the back page!

Question 14

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

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

Most people on higher rate DLA have difficulty reading, writing, speaking so they will need an advocate to help them,
If you had a "list" of experts it would help - & help stop cheating.

Question 15

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

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

1. Charities, Parents, Social Services, Health Auth^{PCT}
However last 2 are cutting back dramatically
2. A one off cost should be an "extra" payment - one to supplement the day to day living costs.

Question 16

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

children will be in school, so daytime activities will be taken care of - term time anyway - though - kids, holiday activities need funding

Adults may need "help to work" to supplement their benefits (to a certain extent.)

those who can't work need to occupy their time as best they can... and that needs funding.

Question 17

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

2. What can we do to make things better?

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

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

1. It is very important, not very easy

2. with it it should be easier to co-ordinate/tie up with other benefits.

3. my daughter got her blue badge & mobility car - both excellent, but what is Warm Front?

4. Their ability to go out would stop - the forms we have to fill in are huge - and none would make it more worrying - this is all very stressful and a huge worry that they have

20 all she is entitled to.

Question 18

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

Properly encrypted, medical, hospital
school & social services records could be
shared to ensure that those entitled
to benefit will get it.

Maybe an Advocate allocated on a
"permanent" basis, or a Case Manager;
someone with the right knowledge &
understanding could help the "client".

Question 19

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

Sexual orientation

This is about whether a person is

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

It should have no affect
either way - a disability
can affect anyone.

Question 20

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

PLEASE TRY TO MAKE SURE THAT MONIES
PAID BY GOVERNMENT TO LOCAL AUTHORITIES
IS RING FENCED FOR THOSE WITH DISABILITIES