

Don't Panic!

for **Benefits**
Better
Mental
Health

Oxfordshire Mind Guide to Benefits

Your Guide to Benefits and claiming

**We provide the advice
but the decision is ALWAYS yours.**



**For better
mental health**

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The Small Print

All the information is correct at the time of issue. Benefits levels change each April and this guide quotes figures from April 2008. All figures quoted are sourced from the DWP.

This Guide is intended to be a general overview of the types of benefits available in the UK. The Guide is not definitive nor is it intended to cover every aspect of the benefits mentioned. Please check with Benefits for Better Mental Health to ensure that you get advice tailored to your specific circumstances.

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If you require further information and help, please contact Benefits for Better Mental Health or the agency as mentioned.

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What are benefits for?

People who suffer from mental health problems and who have a long-term disability will have extra needs. It is also likely that you will have suffered a loss of income and so you may be able to claim benefits.

Every benefit is different and each person's entitlement is different. There are benefits for people before they are born, throughout their lives and after they have stopped working. Each person's entitlement to benefits is different and depends upon their individual circumstances. This makes benefits especially important to people who experience mental health issues, or care for people who have mental health problems.

This is a general guide to benefits and there are many more not covered here, so, if your question is not answered here then make sure that you call us.

I Don't Want to Be on Benefits! Why are benefits so important?

Taking control of your finances is the first step on the road to recovery, so no matter what your situation, it is important to ensure that you get the benefits that you are entitled to. Benefits are not for scroungers; the benefits that you get are the result of the money that you and your family and friends have already paid. We pay our taxes to ensure that when we need some help, help is available.

If you are working, you may still be able to claim benefits and by not claiming benefits you may find it difficult to survive. If you are not working, it is essential that you claim your entitlement to ensure that you have the money you need to live on. Equally important is the fact that whilst claiming benefits you will receive credits towards your National Insurance Contributions – so that you won't lose out on your State Pension when you come to retire.

What should I do?

First - Don't Panic!

For many, coming to terms with mental health problems and dealing with the benefit system can be daunting and overwhelming. Getting the benefits you are entitled to can be difficult. It can take forever to get through over the phone and the forms can seem like a nightmare.

Second – Get Help

The most important thing to remember is not to panic. Get Help. At Oxfordshire Mind we are committed to helping people like yourselves who have mental health problems get through the maze of benefits and regain control over your finances.

Third – Don't Delay – Act Now

Contact us to arrange a free Benefits Health Check. Don't worry, call and we'll be able to explain (often over the phone so that you can start claiming right away).

Why are there different benefits?

To better understand what benefits you'll be entitled to you need to understand that while each benefit is treated separately, some benefits can link you to others, some won't. It all starts with what you were doing before you make your claim.

Many people who experience mental health problems have difficulty accessing and understanding why they get one benefit over another. Friends and family may tell you that you'll be entitled to this or that, but it is only when you get the right advice and help that you'll really be able to understand how much you are entitled to. At this point you will be able to get a grip on your money and start to gain control over your life.

I'm not able to work – will the government force me to get a job?

If you are unable to work then the government is not going to force you back into a job that you can't do. As with all benefits, when you make a claim you are agreeing to a contract with the government that they will pay you a benefit and you have to abide by the rules for that benefit. So, as long as you keep your side of the bargain, you'll be fine. A new benefit is being introduced in October 2008 which is designed to identify what people can do rather than what they can't do. It is hoped that this new benefit (Employment Support Allowance) will encourage more people to find work as soon as they can. If you cannot work (and sustain that work) then you will not be forced to take any job.

All this publicity makes me feel guilty – but I just can't work

Almost every month we hear stories in the press about the need to get people off Incapacity Benefit and that the government wants to get a million people back to work. This is a laudable target, but for those with mental health problems, recovery and remaining stable is essential. Only when you are ready to be able to keep a job will you be able to come off benefits, before then your health is your first priority. So don't feel guilty. Concentrate upon your recovery and where you have doubts or worries speak to us and we will be able to tell you where you stand. Ignore the publicity and focus upon what you need to do to get back to work as soon as you are ready.

I have been working and now I'm signed off sick - what about me?

If you have been working in the last two years before you are signed off sick, then you'll have been paying National Insurance Contributions. These are used to calculate whether the benefit is paid under income-based or contributions-based rules. This means that the benefits you can claim are all contributions-based – so that no matter what your household or personal income, your entitlement to benefits stays the same.

I haven't been working, what about me?

If you have not been working or have not paid enough National Insurance Contributions before you make your claim, then you will be classed as eligible for income-based benefits. This is when all the income for you and your partner is added together to decide if you will be paid any money. Almost all

money will be taken into account. If your income is higher than the amount allowed you will only be given credits towards your pension and you will not be paid any money. This type of benefit is means-tested.

Why will I be means-tested? - it sounds really intrusive

Only the National Insurance Contributions you have paid in the last two years count towards assessing your benefit. Means-tested benefits are the way that the benefits agency decided how much you are entitled to and so they will need to see proof of all your incomes. It may seem to be intrusive, but don't worry. You can still have savings and they won't try and take them away from you.

What about National Insurance Payments?

As soon as you start claiming benefits, your National Insurance Contributions will be credited so that you won't lose out on your pension.

I've heard that benefits are taxable – will I have to pay tax as well?

Almost all benefits are taxable – but the limits are set below your personal tax threshold so you won't have to worry that you'll get taxed. Once you are on benefits, you will get a P45 every April, which shows how much you have been paid. When you start back to work, this is what you need to give your new employer.

Attendance Allowance

This is a disability benefit for anyone over 65 with no upper age limit. Attendance Allowance is intended to help people over 65 who have constant care needs. Unfortunately for those over 65, it is expected that you will have difficulty moving and that this may get worse – so they don't give you any help for moving around, only care.

To qualify for any of the disability awards you need to meet a different set of criteria from being signed off sick from work, so you will need to prove that you need supervision and guidance and/or help “with your bodily functions”.

People over 65 who have mental health problems can have a great many care needs and it is important that you are not shy about explaining these when making a claim. Describing these can be embarrassing, but the more detail you can provide the better chances of qualifying.

If you are over 65, then you will need to show what help you need with your care. You don't need to have help or care, just show that if you had the care and help, then you would be able to live your life as you did before you became ill.

You need to have had your disability for more than three months and expect to have it for another six months and the forms are available on 0800 882200.

I don't need care and help all the time. It's not for me?

Having mental health problems doesn't mean that you have to be ill all day every day. Some days you will feel better than others and be able to do more than at other times. Attendance Allowance is designed to help you during the times that you are unwell and can't do much. So when we fill in the forms we will only be looking at the bad days. Days when you are skipping up and down the street full of the joys of life won't count. You will need to take a hard look at how you are when you are at your worst and where help would mean an improvement in the quality of your life.

Attendance Allowance is only for people with physical problems.

We all start to have physical problems as we get older and these are taken into account, however, Attendance Allowance also takes into account mental health problems and the way that they can disable your life. So don't worry, whether your problems are only mental health or physical ones – you may still qualify. Remember, your physical problems don't take a holiday when your mental health problems are bad – some days its everything that goes wrong and it is those days we will look at.

What do you mean by Supervision and Guidance. What's the difference?

Mental health problems often take away your motivation and energy; they stop you from being able to manage getting up, eating etc. Indeed, as you know on a bad day you may even get confused or so lethargic that you are unable to do anything. In these situations, you may need supervision so that

you can get the motivation and encouragement to do the things that you need to do. On particularly bad days, you may find that you become lethargic and even disorientated. It is on these days that you may need guidance – say to make sure that you can recognise danger and be safe.

Help with my bodily functions? *Urgh!* Is that what I think it is?

Yes. However, there are two sorts of bodily functions, the physical ones such as eating and using the toilet or managing your personal hygiene and those that allow you to live your life in a timely and reasonable fashion.

Anyone who experiences mental health problems knows that sometimes you can't separate the two. This means that when we are looking at Attendance Allowance, we take everything into consideration. There are days when you simply don't want to eat and unless you have the motivation and encouragement from some one else, you simply won't eat. On these days we would look at the supervision needed. Equally there are days when you are so bad that you are physically unable to trust yourself to bathe or cook and these are the days when we need to see what guidance is required.

I'm still not sure if I qualify. What else would help me qualify?

I have listed some of the questions you might like to ask yourself to see if you might qualify. Ask yourself if you need help and motivation with any of the following: Getting washed and dressed, doing up buttons and laces. Do you need help to eat or cook and prepare a meal? Can you manage to take your medication and remember to take it in the right dose and at the right time? Can you speak to others, use the phone to call for help or fill in forms and write?

Do you need help because of your mental health problems to deal with fits and anxiety attacks, can you manage your behaviour in public or private. Would help prevent you from attempting suicide or self-harming. Does your obsessive behaviour prevent you from being able to live your life and manage in time? If any you fall into any of these areas then you may well qualify.

How long does it take to get a decision?

Decisions normally take up to three months.

Why does it take so long to get a decision?

The first thing that happens when you send your form back, is that a report is requested from your GP. You don't need to talk to your GP about this, although it is highly advisable to keep in regular touch with your doctor so that they know exactly how you feel.

What award could I get?

Middle Rate

When frequent attention is needed throughout the day you get £44.85 weekly.

High Rate

When frequent attention during both day and night is required you get £67.00.

Disability Living Allowance

Disability Living Allowance (DLA) is for people under 65 years old. It is intended to help people who have a long-term disability and need to have help to live and look after themselves and to walk around. To qualify for DLA you must have had your disability for three months and expect to have it for more than six months.

Disability Living Allowance comes in two parts, care and mobility; each with different levels of award. The criteria for DLA is different from that for Incapacity Benefit, so being signed off as being unable to work does not automatically qualify you for DLA. DLA can be awarded for any period over six months to an indefinite award. It can be awarded in any combination of the care and mobility parts.

How is it divided up?

The care component has three parts; low, middle and high rates and the mobility divided into either high or low mobility.

How do I qualify for any of these?

To qualify for the Low rate care component you need to show either that you cannot prepare and cook a main meal for yourself and/or that you need frequent attention with your bodily functions. This means that you need help to manage the basics such as washing and dressing, eating and using the toilet. People with mental health problems often find that they can physically perform these tasks on a good day, but not a bad day. On a bad day you may need supervision and guidance from someone to help you perform these tasks in a timely and reasonable manner. You may be able to prepare and cook a main meal but are likely to forget when you put it on and so burn it.

Middle and High rate care are determined by the fact that you need frequent and/or continual attention throughout the day and night with your bodily functions as well as prolonged and repeated supervision and guidance to ensure your safety and of others. So you may need help to take your medication safely and to cope with any side effects they may produce. You may need to have help changing the sheets or even getting to bed at night or you may need to have someone to ensure that you can manage your behaviour. You will need to show your needs are such that throughout the night you need help at least twice for at least twenty minutes each time. You will need to have the need for care right through the day.

What about the mobility component?

The low rate of mobility demands that you cannot walk familiar routes or walk outdoors without guidance and supervision from someone else as you may suffer from panic attacks or become confused and not be able to follow clear directions. To qualify for the higher rate of mobility, you need to show that you are virtually unable to walk at all.

I don't have any care or help, so can I still qualify?

It does not matter that you do not have the care, but you do need to show the needs that you have and how having help would allow you to perform the tasks you need to do in a timely and appropriate manner.

Mental health problems don't seem to be covered by these terms.

The impact of mental health problems can certainly be as great as physical ones on the quality of life and DLA is as much for those with mental health as physical problems. Mental health problems can have a dramatic affect on the way that we approach our day-to-day activities and can transform our ability to perform even the simplest of tasks. Some mental health problems only surface at certain times, but these will also allow you to qualify, provided they are so serious as to severely restrict or limit your ability to do what you would normally do.

These forms are really hard to fill in; can I use my last application?

The important thing to remember is that there are no right or wrong answers, only yours. There are some words that you should avoid, such as "I try" and "sometimes", but don't go overboard. The person looking at your claim will have a very good idea what impact your disability will have on your life, so be honest and let your condition do the talking.

Filling in a DLA form can take up to two hours. Some people believe that you should just copy and update the last form you sent in, especially if it was successful. I would always advise against this, as each claim should be based upon a true assessment of how your disability affects you now.

I'm only 10% disabled, will I qualify?

Some people have been medically assessed for other benefits (such as Industrial Injuries Disablement Benefit) and are told they are disabled by a certain percentage. For Disability Living Allowance, it is not how much you are classified as being disabled, rather, how your disability affects you on a functional level.

How can I claim?

To claim call free on 0800 882200. Your claim will take three months to process, but will be backdated to the day you requested the form.

What would I get if I get any of the awards?

DLA is usually paid every 28 days (13 times a year). If you are awarded DLA you can get any combination of the following awards;

Care: Low Rate £17.75, Middle Rate £44.85 and High Rate £67.00.

Mobility: Low Rate £17.75, High Rate £46.75.

Having DLA has increased my income – do I lose other benefits?

No. DLA does not count as income and is disregarded for most purposes, but is taxable. If you get any part of the care component you may also get extra premiums added to your other benefits and possibly Carer's Allowance.

Can I get a Mobility Car?

If you are awarded high rate mobility, then you can choose to have a motor mobility car rather than receive the money.

Carer's Allowance

Carer's Allowance is the benefit for people who regularly care for another who has a disability and who gets DLA at the middle or higher care rate or Attendance Allowance. To be eligible to claim Carer's Allowance you must regularly care for that person for at least 35 hours a week.

Even if you cannot get any money from Carer's Allowance it is always advisable to make the claim, as there are benefits to having an underlying entitlement.

I care for someone and work, am I eligible?

To be able to claim Carer's Allowance, you cannot have an earned income of more than £95 per week and care for them for 35 hours or more. This means that you can only work part time whilst caring for another. However, even if you do not get any money yourself, you will have an underlying entitlement. This can add a Carer's Premium to your Income Support and the Christmas Bonus. There is only one drawback to claiming Carer's Allowance and that is that the person whom you are caring for will lose their entitlement to sever disability premium.

I look after my parents; can I claim for both of them?

You can only claim Carer's Allowance for one person at a time.

My partner and I are both disabled, can we claim for each other?

Yes, so long as you are both receiving DLA and/or Attendance Allowance at the middle or higher rate, then you will both be able to care for each other without this adversely affecting your benefits.

I don't work; can I get Carer's Allowance as well as my Income Support?

If you are not working and not claiming benefits, claiming Carer's Allowance will pay you and also provide you with National Insurance credits. In this case only, the credits are at the higher rate to allow you to have an improved State Pension as well as being able to qualify for contributions-based benefits should you need to claim them. Please be aware that if you are on some benefits, such as Job Seekers you will not be eligible.

If you are already getting Income Support you are eligible for a Carer's Premium (rather than the allowance) to be added to your income.

How do I claim?

To claim call 0800 882200 and ask for Carer's Allowance forms to be sent through. If you have been caring for someone, but not claiming, you can ask for your claim to be backdated up to three months.

How much will I get?

When awarded, £50.55, or with a Carer's Premium added to Income Support of £27.75. There are other amounts for dependent children, which can be added.

Pension Credit

This is for men and women over the age of 60. Pension Credit is for people on low incomes and is made up of two parts. The main part is the credit guarantee, which is a top-up you get when your total weekly income is less than the amount the government says you can live on. The other part is for those over 65 years of age who have managed to save a little towards their retirement, this is called Pension Savings Credit and a small amount may be added to your income.

I have just turned 60, but my partner is younger – can I claim?

Yes, so long as one person is over 60, then you will be eligible to make a claim and provided that your combined incoming is less than the minimum limit.

I don't want to go onto Pension Credit – I'll lose my other benefits.

Pension Credit is very similar to Income Support. As soon as you qualify for Pension Credit you will automatically be eligible for full Housing and Council Tax Benefit. You will also become eligible for free health care such as dental care. So no-one will lose out if they go onto Pension Credit; in fact most people are better off.

What about my DLA and Attendance Allowance?

Neither DLA or Attendance Allowance is counted for income purposes so Pension Credit will have no impact upon these benefits. Equally, you can be on Pension Credit and make an application for either DLA or Attendance Allowance.

I don't want to go onto Pension Credit – do I have to?

No, Pension Credit is not compulsory. If you are already claiming benefits you will only have to go onto Pension Credit if you are over retirement age and under 65 (women only) or make a new claim for benefits.

How can I claim?

To make a claim call free on 0800 991 234. You can make a claim over the phone, have a form sent out to you or have someone visit you at your home (please always have another person with you to ensure your safety).

This is a means-tested benefit, which means that all your income and savings over £6,000 are taken into account (except Disability Living Allowance or Attendance Allowance).

How much will I get?

The minimum guarantee for a single person is £124.05 and for a couple £189.35 per week. To work out how much your savings guarantee will be please see us to give you a calculation.

Job Seekers Allowance

Job Seekers Allowance is a benefit paid to those who are able to work whilst they are looking for work. To qualify for Job Seekers you must be willing and able to work. Being able to work means that you are capable of taking a job and working more than sixteen hours per week. You need to be actively seeking work and will have to show what you are doing to find work. As soon as you find that you are unemployed, make a claim. Don't delay as this can lead to you losing benefit.

Job Seekers Allowance comes in two types: contributions-based and income-based. If you have been working regularly and paying National Insurance Contributions then you will qualify for contributions-based Job Seekers Allowance. If you have not been working prior to claiming Job Seekers, then you will qualify for income-based Job Seekers Allowance.

What's the difference?

Contributions-based Job Seekers is paid when you have paid National Insurance Contributions for at least the last two years and is paid at a flat rate, it is not means-tested. It is payable for six months and is unfortunately taxable. Income-based Job Seekers is means-tested and all your household income is taken into consideration. If you have savings of over £16,000 you will not be eligible for any money, but will have an underlying entitlement where you get your National Insurance Contributions credited.

How much will I get?

The basic rate for a single person is £60.50 for those over twenty-five, £47.95 for those between eighteen and twenty-four.

Can couples claim?

Couples who can claim contributions-based Job Seekers can claim separately, although there are exceptions depending upon how many hours either one of the couple can work and if there are dependent children. If a couple makes a joint claim and can only get income-based Job Seekers, then the claim is treated as if it is an Income Support claim. So a couple on contributions-based Job Seekers would each get £60.50, a couple claiming income-based Job Seekers would only get £94.95 between them.

How do I claim?

To claim Job Seekers, you must call 08000 556688. Some people with mental health issues will find it difficult to make a claim over the phone and in these circumstances a form should be available from your nearest Job Centre. However, it is possible to make a claim with an advisor who will handle the call for you.

The call lasts about forty minutes and you need to have the following details at hand.

Your full name and address; date of birth and National Insurance number, as well as details of any family and partner, plus your recent employment/education history as well as details of your savings, and housing. You will also need to ensure that you get the right benefit and so that if need be you can also get Housing and Council Tax Benefit.

All this information will then be sent to you to check and return with all the proof you need to show (passport/birth certificate, bank statements etc if need be as well as your P45). All the things that they want to see can be either posted or taken to the Job Centre and copied. You will also be given a time for a work focused interview at your nearest Job Centre

What is a “Work Focused Interview”?

At the interview you’ll be questioned about your ability to work and what type of work you are able and prepared to do. At this point you will also be asked to show how you intend to search for work and what conditions you need to meet (i.e. how often you have to sign on and if you do this by phone or person). They will also work with you to see what help you might need (such as basic literacy skills or CV writing). This is all part of the Jobseekers Agreement that you will be asked to sign.

What if I change my mind about the Jobseekers Agreement?

It is no problem if you wish to change your agreement; all you have to do is agree a new one with your personal advisor at the Job Centre. Don’t forget though, you need to be constantly looking for and be able to work to keep getting Job Seekers Allowance.

What if I don’t feel capable of working?

Many people who have mental health problems cannot work or at least work full time. If this is the case for you, then you need to work with the advisor at the Job Centre who will either direct you to claim Incapacity Benefit or will advise you on the options covered by Working Tax Credits if you want to work more than sixteen hours per week, but less than full time. Claiming Job Seekers is not always the best option for those with mental health problems and it is always advisable to talk to your doctor before making a claim.

Can I get any other benefits whilst on Job Seekers?

As soon as you make a claim for Job Seekers Allowance, you will be entitled to make a claim for Housing and Council Tax Benefit. Depending upon your circumstances, you will not get full benefit, but will usually only have to make a small contribution. If you have an interest only mortgage, you can also apply for Mortgage Interest Relief – which pays a proportion of the interest on the mortgage you have at the time of making the claim.

If you are aged over sixty and under sixty-five, you may also be eligible for a “pensioners premium”. Similarly, if you receive parts of the care component of Disability Living Allowance, then you may be entitled to premiums to help deal with your disability.

Working and Child Tax Credits

Working and Child Tax Credits are means-tested benefits, which are paid by Inland Revenue. They were introduced to help people on low incomes work and still be able to afford to live and pay your bills. Tax credits work by topping up your pay and other household income. With these benefits you can start working with the knowledge that you have the safety net of regular payments over and above your salary.

Tax credits are means-tested on your previous year's income. To qualify for Working Tax Credits, you must either be over twenty-five and be working more than thirty hours a week or over sixteen and have a dependent child or have a physical or mental health problem which inhibits your ability to work full time. There are separate rules for those over fifty. You need to be on a low income but there is no upper limit to your entitlement.

To qualify for Child Tax Credits you need to have at least one dependent child and be in work or getting a state benefit.

Are these the people that keep getting it wrong?

The Inland Revenue manages tax credits and they have only been used to taking your money off you; and yes, they have been making overpayments and have got it wrong in the past. But don't let that put you off applying. Tax credits are such a good way to manage the transition back to work and every day thousands of people stay in work because of them.

Getting back to work with the knowledge that your income is sufficient to live on can make all the difference to the quality of your life and how you feel about yourself.

I don't want to get stung for a massive overpayment – Help!

Just because you apply doesn't mean that you will end up with an overpayment. Most people get the right award and if you are worried about an overpayment it is always advisable to check and ask for help. They really do want to help. The important thing to remember is that you need to keep your information and circumstances up-to-date. Let them know of any changes as soon as you can. You can phone, write or even update your records on the internet. Keeping on top of your information will keep the chances of an overpayment down.

What is the disability element?

There are disability elements for working and Child Tax Credits. For Working Tax Credits you need to be on the right benefit and must be either physically or mentally disabled so that it affects your ability to get a job. You need to have been getting Income Support, Incapacity Benefit or any part of DLA in the six months before you claim. This can make a big difference to the award you get, so if you are unsure then make sure you ask and get advice to check if you qualify.

To get the disability element of Child Tax Credits your child needs to get DLA. As well as this you will also be entitled to the family element and possibly the child element as well as help with childcare costs.

What is the over fifty element?

Getting back to work, especially if you have had mental health problems can be particularly difficult for those over fifty. To help and encourage over fifties to get back to work, tax credits include extra money onto your claim. You will get this element for a year and again you need to have been receiving benefits and/or be working for at least a year.

Do I have to pay these back?

Tax credits do not have to be paid back.

Will my DLA be affected?

DLA is not counted as income, so your or any DLA award is safe and will not be affected.

What about my savings – are they taken into account?

The income from your savings is taken into account when your entitlement is worked out, but there is no upper limit to the amount of savings you can have before qualifying for tax credits.

I am on benefits; can I get benefits and Child Tax Credits?

Absolutely. Eventually all payments for your children will be paid through tax credits. Working Tax Credits can also be paid when you are on benefits depending on your circumstances and income. Check and make sure if you will qualify.

How can I claim?

To claim you need to call 0845 300 3900. The claim form is very simple but if you are at all unsure then seek advice. You will have to show who you are and also provide evidence of your earnings.

How much will I get?

Your award depends upon your circumstances, year on year and you need to let tax credits know as soon as anything changes.

To help avoid overpayments tax credits now use a “buffer of £25,000” to calculate any entitlement, so that your income can change by up to £25,000 year on year without normally affecting your award, but you need to check.

You can get an estimate from tax credits, and you can do this without using your name – but you will need to provide them with real dates of birth and income details. Alternatively, we are happy to provide an estimate and work out how much better off you will be going back to work with tax credits.

Incapacity Benefit

Incapacity Benefit is paid to those who are unable to work because of their illness or disability, be that physical, mental or a combination of both. There are two types of Incapacity Benefit, either contributions-based or income-based. You must be over twenty years old and under retirement age. All claims for Incapacity Benefit must be supported by a doctor's sick note. From October 2008, a new benefit called Employment Support Allowance will replace Incapacity Benefit for all new claims.

What counts as being incapable of work?

To be incapable of work effectively means that you have been signed off sick by your doctor. A doctor's sick note says that you cannot perform your normal job and will suffice to get your claim started. However, for long-term claims you need to pass a series of tests that are designed to evaluate how incapable you are of working. To show this you will have to first fill in an Incapacity Benefit form and later pass a medical called your PCA (Personal Capability Assessment).

What is contributions-based Incapacity Benefit?

Contributions-based Incapacity Benefit is where you have been working and making National Insurance Contributions for at least two years before you make your claim. If this is the case you will qualify for the benefit automatically for the duration of your sickness and you will not be excluded because of savings or other income.

So what is income-based Incapacity Benefit?

If you have not paid enough National Insurance Contributions, then you will qualify for income-based Incapacity Benefit. This is a means-tested benefit (effectively Income Support). This means that you will not qualify if you have over £16,000 in savings or capital.

How do I qualify for Incapacity Benefit?

To qualify for Incapacity Benefit you must be unable to work through illness or disability. If you have paid enough National Insurance Contributions, then you will be entitled to claim contributions-based Incapacity Benefit. If you have not paid enough contributions you will still qualify for Incapacity Benefit; where you are deemed to have an underlying entitlement. This means that you will receive credits against your National Insurance Contributions, but will not get paid any money. Instead your total household income is means-tested and your claim becomes an Income Support claim. This is automatic.

I am still employed, can I claim?

Yes. Once you're Statutory Sick Pay has run out you then become eligible for Incapacity Benefit. You will remain entitled to this for as long you are unable to return to work and keep providing medical certificates, even though you are still employed.

What counts as short-term and long-term?

Short-term lower rate Incapacity Benefit is available for the first six months and then you will automatically be moved onto the short-term higher rate for the next six months. After a year you will then become eligible for the long-term rate.

I'm under 20 - don't I count?

You definitely count, but the rules for those under twenty (and for some under twenty-five) are different. You will generally not get any money for the first six months and only have an underlying entitlement and so will get discretionary Income Support.

What happens when I reach retirement age?

If you have made a claim for Incapacity Benefit before you turned sixty, then you will continue to receive this until you either return to work or reach retirement age. You will then qualify for Pension Credit. If you make a claim for Incapacity Benefit after you have reached sixty, you have the choice of claiming this or Pension Credit. To know which would be the greater level of income, you need to determine if you would be eligible for contributions or income-based Incapacity Benefit or would be better off under the means-tested Pension Credit.

I retired early and get some pension, can I still claim?

Provided that you are under retirement age (for women, this now depends on when you were born) and are incapable of work due to illness then you will be able to make a claim for Incapacity Benefit.

Can my partner and I both claim Incapacity Benefit?

Yes, provided that you are both entitled to contributions-based Incapacity Benefit, and then both can make independent claims. If however, either one of you qualified for income-based benefit, and then only the one can claim. If neither of you qualify for contributions-based benefit, your claim will roll over to a joint Income Support claim.

Why do I have to fill in another form? Nothing's changed.

After a year on Incapacity Benefit and for some conditions six months, you will be sent an Incapacity Benefit questionnaire (an IB50). This is standard procedure and you have not been singled out. This is to determine if your circumstances have changed and for the benefit agency to decide how long it would reasonably take you to recover. You will often at this point be asked to provide a Med 4. This is a long term sick note from your doctor so it is important to keep your doctor apprised of your condition so that the report he provides on you is accurate.

What is a PCA?

Everyone on long-term and some on short-term Incapacity Benefit must attend a medical (for most people this will be annually). This medical is mandatory and you can only defer this appointment (or have a home visit if you cannot attend) and your benefits will be stopped if you fail to appear. This medical is also called a PCA (Personal Capability Assessment).

At this assessment a doctor will ask you a variety of questions (each doctor will have their own method) to determine the severity of your condition and how many points you have gained. Essentially you need to reach at least fifteen points for physical and ten for mental health problems.

The points are decided upon whether you can perform a series of basic tasks (getting up in the morning, concentrating, memory etc). For a list of what gets you what points please contact us and we will go over the scoring system. Normally you are asked to describe a typical day (and many people fail because they try to make them seem more capable than they really are, so try to be honest and accurate, but remember what your bad days are like).

How can I claim?

To claim Incapacity Benefit, you need to call 08000 556688. If you have mental health issues you may find it difficult to make a claim over the phone and in these circumstances a form can be obtained from the local Job Centre. However, it is possible to make a claim with an advisor who will handle the call for you.

As with Job Seekers and Income Support, the call lasts about forty minutes. You need to give your full name and address; date of birth and National Insurance number, plus your recent employment/education history for contributions-based Incapacity Benefit and details of any family and partner for income-based Incapacity Benefit, also details of your savings, and housing will be needed to ensure that you get the right benefit, and so that if need be you can also get Housing and Council Tax Benefit.

All this information will then be sent to you to check and return with all the proof you need to show (passport/birth certificate, bank statements etc if need be as well as your P45). All the things that they want to see can be either posted or taken to the Job Centre and copied. After about 6-8 weeks you will also be given a time for a work focused interview at your nearest Job Centre.

How much will I be entitled to?

As Incapacity Benefit is dependent upon your age and the length of your illness, your entitlement will change over time. Extra payments are made if you have any dependent children. Short-term lower rate is £60.50, the short-term higher rate is £75.40 per week. On the long-term rate you will get paid £84.50. As well as this you can expect to get an age addition on the long-term rate of £17.50 if you are under thirty-five, or £8.90 if you are between thirty-five and forty-four.

What other benefits will I be entitled to?

When you make a claim for Incapacity Benefit, the claim process will flag whether you need and can make a claim for Council Tax and Housing Benefit. You will normally be entitled to these benefits, but you will not get the full rate and will have to make a small contribution to top up your rent and council tax. You do not automatically qualify for free prescriptions or dental and eye care,

but can make a claim for these using an HC1 (which can be ordered from 0845 8501166).

What will happen when the new benefit starts?

If you are already on Incapacity Benefit, then nothing will immediately change for you so long as you continue to satisfy the conditions and attend the medical examination (your Personal Capability Assessment – PCA). Currently, the plan is that from 2009, everyone will begin to be assessed under the new “Work Capability Assessment”. Instead of looking at what you cannot do, this test looks at what you can do. This process is likely to take several years, so don’t worry.

For people with mental health problems the new assessment will offer broader scope to qualify and with the new benefit there will be greater help available to those who are capable of some work and also those who need to have more help from psychological services.

***If you are so ill that you cannot do any form of work,
then you will not be forced to work.***

Statutory Sick Pay

Statutory Sick Pay is a minimum amount that your employer has to pay you whilst you remain in their employ, but are signed off sick. Statutory Sick Pay (SSP) is not a benefit paid by the government. If your employer refuses to pay any SSP, then you will normally be able to claim Incapacity Benefit.

To qualify for SSP you must have had a period of illness where you were unable to work for more than 4 days in a row (those days would always be your normal working days) and during the first seven days you will have to provide your employer with self-certification of your inability to work – always talk to your employer about this. You do not need to get a doctors certificate for the first seven days of any period of illness, however, if you think that you may need some time off sick then it is always advisable to see a doctor as soon as you can. This is especially important for those who have mental health issues, as you may need more time before you are capable of returning to work. No matter what is wrong, keep your employer informed.

After seven days, you will need to have a doctors' sick note to be eligible to claim SSP. SSP can be claimed from the start of your sick note but your employer is only obliged to pay this for twenty-eight weeks (six months). Some employers pay different levels and some for more than six months, but employers are not obliged to do so. Your employer may also have an internal policy that places limitations on how much you may be entitled to over the basic minimum, depending upon how often you have been off sick during your time with them.

Many people who suffer from mental health problems will face repeated periods of absence from work. In situations like this, you need to talk to your employer and make them aware of your problems, so that they can help and identify if changing your working patterns may help or if your illness will prevent you from returning to work at all. If they cannot or will not help, then we may be able to point you in the right direction for help and advice.

How much is SSP?

Statutory Sick Pay is a minimum of £75.40 per week. Whilst you are receiving SSP you may also be entitled to Housing and Council Tax Benefit and Child Tax Credits. There is no help with mortgage repayments whilst on SSP.

I have another job; can I still do that and get SSP?

Provided that your other job does not require you to use the same skills as why you are signed off then you can still get SSP and keep working elsewhere.

What happens after six months?

If you are still unable to return to work after six months, and your employer has told you that they will no longer pay SSP, then you will be entitled to claim Incapacity Benefit for the period whilst you are ill. It is essential that you make your claim as soon as possible so that your benefit is in place and you are not left without money (your claim can only start on the next working day after you

have ceased to be employed). Once you start to claim Incapacity Benefit you will remain eligible so long as your doctor signs you off and fulfil the benefits conditions. By claiming Incapacity Benefit (or after October 2008, Employment Support Allowance) you will remain eligible for some, but not full Housing and Council Tax Benefit.

I don't think that I can ever go back to work, should I resign?

No. No. No. Never. No one is to blame for you being sick and whilst you may feel that you cannot return to work, most people who have a mental health problem are able to do so, perhaps in another role – this is something you need to talk to your employer about. During the time that you are unable to work, you may feel guilty about being off and think that by resigning, you will be doing yourself and their employers a favour. This is rarely the case. By resigning you may also jeopardise your future eligibility to benefits. If your illness was caused by or made worse by your job, then your employer may feel that the best way to deal with your situation is to medically retire you. If this happens you may well find that it is to your benefit.

What happens to my job whilst I am off sick?

You cannot be sacked for being off ill; however, your employer can make you redundant. If you experience such a situation, then it is advisable to seek legal advice so that you know where you stand so contact your local Citizens Advice Bureau for help and advice.

Income Support

Income Support is a means-tested benefit which is paid to people who are either not eligible for Incapacity Benefit or who, according to their circumstances are not required to be available for work. You need to be over sixteen and under sixty, live in the UK and have savings of less than £16,000.

There are many reasons why you might be ineligible to claim Income Support so it is always advisable to check which benefit you will be entitled to. We are always happy to advise.

Income Support can be paid on its own or can be used as a top-up for those on very low incomes (see Permitted Work). As Income Support is means-tested, all household income is taken into account. Income Support is a gateway benefit which leads onto other benefits and premiums, so being on Income Support may allow you to get a higher level of income especially if you are disabled.

From October 2008 Income Support will be replaced for all new claims by a new benefit, Employment Support Allowance. If you are already claiming Income Support, your benefit will not immediately change.

I didn't think that I could get Income Support, as I am only seventeen?

Generally those under twenty do not qualify for Income Support, as your parents are expected to claim Child Benefit and Child Tax Credits, but if you are living alone or under some other circumstances, you will be able to claim Income Support in your own right. This type of Income Support is paid at the discretion of the benefits agency.

I'm over 60 - can I still claim Income Support?

Pension Credit replaces Income Support for those over sixty. As you approach your sixtieth birthday you will be sent details of your Pension Credit entitlement.

I'm in education - can I still get it?

If you get any part of the care component of DLA or are still in full-time education you still qualify for Income Support. However, provided that your course is either therapeutic, part time, or you do not receive a grant towards either tuition or expenses, then you can take up further education courses without putting your Income Support at risk.

I'm a carer, can I claim Income Support?

Yes, provided that the person you care for gets DLA (middle or higher care rates) or AA, and then you will be eligible to claim both Carer's Allowance and Income Support – although the Carer's Allowance will be deducted from your Income Support you can still receive a Carers Premium.

Can I work and claim Income Support?

When you claim Income Support you are limited in the amount of hours you can work as well as the amount of money that you can earn and keep. See

the Permitted Work rules, however, if you are severely disabled or have dependent children, then there are some exceptions. Please seek advice if you think that you may be entitled to more.

I'm pregnant, can I claim Income Support?

Provided that you do not get Maternity Benefits and are not employed, then you will qualify for Income Support from eleven weeks before your due date to fifteen weeks after the birth. If you have a partner who works you may not qualify if they make too much money – and you will only have your National Insurance Contributions paid. If you claim Income Support you will normally also be entitled to Sure Start maternity grant of £500. There are some exceptions to this, so please check.

What other benefits can I claim?

As soon as you claim Income Support, you are then eligible for full Council Tax and Housing Benefit (to the maximum rent payable). This claim is normally made at the same time as your Income Support claim. If you are disabled or have dependent children then you will also be eligible to claim certain premiums.

How can I claim?

To claim Income Support, you need to call 08000 556688. If you have mental health issues you may find it difficult to make a claim over the phone and we are happy to help you make these calls.

As with Job Seekers and Incapacity Benefit, the call lasts about forty minutes. You need to give your full name and address; date of birth and National Insurance number, plus details of any recent employment or education as well as details of all your savings or capital.

All this information will then be sent to you to check and return with all the proof you need to show (passport/birth certificate, bank statements etc if need be as well as your P45). All the things that they want to see can be either posted or taken to the Job Centre and copied. After about 6-8 weeks you will also be given a time for a work focused interview at your nearest Job Centre

How much will I be entitled to?

Income Support is paid according to personal allowances, these are:

Single	Under 25	£47.95	Couples	£94.95
	Over 25	£60.50		

Certain combinations of age and income, employment status attract different levels of Income Support.

Disability Premiums range from £25.85 to £100.70 depending on your age and the level of your disability award. Always check to ensure that you are getting the right level of award.

Permitted Work

Permitted Work is a great way to develop your potential as well as making some money for yourself. Going out to work can have a really positive effect upon your mental health and increases your confidence and abilities. Getting back to work using the Permitted Work rules is a sensible option for anyone who has been off work for a long time or where you wish to change direction. Anyone on health related benefits is entitled to start working part time, under the Permitted Work rules. Permitted Work replaces the old Therapeutic Work.

Permitted Work rules apply to most benefits and most premiums, so no matter what benefit you receive, you are likely to be eligible, so long as the work that you do does not conflict with the reason that you are claiming benefit. So some one signed off sick with back problems who receives Incapacity Benefit cannot do Permitted Work which involves bending and lifting.

The Permitted Work rules are:

- You can work up to 16 hours per week
- You must not earn more than £88.50 per week
- You must only work for one year at a time
- You must inform all benefit agencies

There are three types of Permitted Work; the lower and higher limit and Supported Permitted Work. The lower limit is where your hours are less than 16 hours and earn less than £20 per week. Reasonable expenses incurred (for travel/childminders etc) are not counted as income and have no impact upon your benefits, but may count towards income for tax purposes. This type of work is ideal for those who feel more confident about their abilities and who will not earn much.

The higher limit is classed as work where you are earning more that £20 per week and as with the lower limit rules, the only the first £20 is disregarded. (*See "What is the Disregard"*)

Supported Permitted Work rules are exactly the same, however, this type of work is where you have regular contact with a third party to supervise and monitor your performance. This can be especially useful if you are unsure about how you will cope with going back to work. There are agencies such as Restore/Oxfordshire Employment Services who can help to arrange either the work or the support. Under this rule you can earn up to £88.50 per week.

It is essential that your weekly hours do not go over 16 hours. If your work requires you to be flexible, then you need to work out an average number of hours worked, and keep this within the 16 hours. Normally you would work on the basis of an average over 1 month.

These are the general guidelines, but there are some exceptions, particularly if you are disabled, whereby you may be able to work longer hours.

I want to do Permitted Work, but not Supported.

That's OK. You can choose which type of Permitted Work that you do.

How does the £88.50 maximum income work with the Minimum Wage?

As the national Minimum Wage for those over 21 is £5.52 per hour, working 16 hours at this rate would give you £88.32. So it is under the Permitted Work earnings rule.

Can I still get Carer's Allowance and do Permitted Work?

So long as you continue to provide 35 hours or more care for the person you look after, then you can continue to get Carer's Allowance. There are no limits on the number of hours you can work, and the earnings limit for Permitted Work (£88.50) is set below the level for Carers Allowance (£95).

Can my Permitted Work be self-employed?

Yes. If your Permitted Work is done independently, for example as a time limited project, then you are still able to claim benefits under the rules on Permitted Work. It is important to remember that you keep your hours and earnings within the rules (as at least an average). You will not be liable for National Insurance Payments, but will have to make provision for tax.

What is the Disregard?

If you are on Disability Living Allowance (DLA), then the first £20 of earnings from Permitted Work is disregarded for other benefits. For example, your Housing Benefit and Council Tax benefit will not change if you earn £20 or less. But, if you are not on DLA then as a single person your Disregard will only be £5 per week or if you have children, £15.

I receive Incapacity Benefit – Do I get to keep what I earn?

Yes. Provided that your hours are under 16, you can keep all of the money, but as you need to declare it, your Housing and Council Tax Benefits will be affected (so after the disregard Housing Benefit will take 65% of what is left and Council Tax will take 20%).

I get Income Support – can I keep the £88.50 that I earn?

No. Only the disregard of between £5 and £20 is ignored. The rest of your income is deducted penny for penny directly from your Income Support

But I don't get Housing Benefit – What happens?

If you don't get Housing Benefit, the 65% equivalent will be taken off your Income Support penny for penny.

Can I extend the one year the period?

The rules state that you can only do Permitted Work for one year at a time. However, you may find that you wish to extend this period – which can be easily done with a letter of support from your employer, mental health contact or disability advisor at your local Job Centre Plus.

The Social Fund

The Social Fund is a pool of monies, which is available to help those experiencing exceptional problems and to avoid immediate hardship. The Social Fund can also help with maternity and funeral payments. To qualify for any part of the Social Fund (except Crisis Loan) you must be in receipt of a means-tested benefit such as Income Support, Pension Credit or income-based Job Seekers Allowance.

Sure Start Maternity Grant

This fund is available to parents up to eleven weeks before and three months after the birth of your child. You can get the grant after the birth of each child and you do not have to pay this grant back. You will receive a one off payment of £500. This is intended to cover the extra expenses you will incur when you have a new baby.

Funeral Payments

After the loss of a loved one, family members are expected to pay for the funeral costs. If however, you cannot afford to cover funeral expenses, and are in receipt of an income-based benefit, you will be able to claim up to £2,000 to pay for the funeral. This one off payment is non-taxable and does not have to be paid back. £2,000 may seem a lot of money, but this actually only covers a very basic funeral (either cremation or burial).

Crisis Loans

Crisis Loans are available to anyone (working or on benefits) to meet their immediate expenses to prevent hardship. These are loans and need to be paid back, but do not charge interest. Due to the long delays in getting new claims paid many people have to take out repeated loans. There is a limit for both couples and single people and you cannot normally get a crisis loan more than once every two weeks. Crisis Loans are only covers certain immediate needs (essentially food and heating, but not rent).

Budgeting Loans

You need to have been on an income-based benefit for at least six months before you can apply for a budgeting loan. You will have to pay this back at normally no more than £9 or so each week. This is intended to help spread the costs of unforeseen items and costs such as a new washing machine or essential repairs to a car or your house.

Community Care Grants

These grants are intended to allow people to avoid exceptional hardship and remain in a community after a stay in hospital or prison. They can also help with travel costs (to funerals or visit sick relatives). You do not have to pay these back and can only make one application every six months, but the demand for these is very high and the fund is limited.

As you can only make limited applications always seek advice as to which grant will be the best one for you.

Housing and Council Tax Benefit *and* Local Housing Allowance

Housing and Council Tax Benefits are managed by your local council and are intended to help those on low incomes pay their rent and Council Tax bills. To qualify for either benefits you need to be on a low income or be in receipt of benefits. Not all benefits are equal and only income-based benefits allow you to get a maximum award. With all other benefits and for those on low incomes you will be expected to make some contribution to your rent and council tax.

Housing and Council Tax Benefits are means-tested which means that all your household income is taken into account when you apply. You will need to inform the local council of all those who share your accommodation if they are family members, and their income.

You need to have savings of no more than £16,000 to be eligible for Housing and Council Tax Benefits. The first £6,000 of savings is ignored and anything over that amount is taken into account at a rate of £1 income for every £250 of savings over the lower limit.

From the 1st of April 2008, anyone making a new claim for Housing Benefit and who are renting from a private landlord would have to make a claim for Local Housing Allowance. This is a new benefit which is intended to replace Housing Benefit for all claims, but for now only applies to new claims made after April 2008 for those in private accommodation.

Housing Benefit doesn't cover all my rent – what can I do?

Many people with mental health problems suffer the loss of jobs and a reduction in their household income. When this happens you may find that you are unable to pay your rent and that Housing Benefit won't cover all the costs. This is usually because the local council thinks that you are paying too much for your accommodation. When this happens and you have checked that you are getting your full entitlement your only option is to ask for Discretionary Housing Benefit. There is no equivalent for council tax.

Discretionary Housing Benefit is as it sounds, at the discretion of the council decision makers. To get this to top up your benefit, you will have to show good cause and persuade the council that your circumstances are different from other people in your situation. It is normally only awarded for up to a year (although those under twenty-five often have to re-apply every six months).

Your local council in conjunction with the rents service determines what an acceptable level of rent can be paid for accommodation in every area. Housing Benefit will only cover up to that limit.

If I don't pay, can they put me in prison?

Paying your Council Tax must always be a priority as local councils have considerable powers to get their money. It is unlikely that you will end up in prison unless you are deliberately refusing to pay. Even when you cannot pay

the full amount always try and pay something towards your bill as this shows willing and this is taken into account when working out repayment schedules. This is also the case with paying your rent.

I am on benefits so why do I have to pay?

Provided that you qualify for benefit and that your rent does not exceed the local limit set by the council you will normally get full benefit. However, people on contributions-based benefits are always expected to make some contribution towards your rent and Council Tax. So whilst you can get all your rent paid if you are on Income Support you will have to pay something when you get Incapacity Benefit.

I have a mortgage, can these benefits help?

Housing Benefit only covers payments towards rent and not mortgage repayments. No matter what your situation whether on a low income or on benefits you may be entitled to Mortgage Interest Relief, which is paid through Income Support. Anyone can make a claim (see Income Support to find out how to claim), but this help is only available to those with interest only mortgages and not repayment ones.

I'm going back to work – what happens?

Going back to work doesn't mean that you will automatically lose all entitlement to Housing and Council Tax Benefits. If you are going back to work either part time or will have a low income, then you will still be able to get help. Even if you think that you might not be entitled, it is still worthwhile making a claim (this is especially true if you are disabled by your mental health problem).

If you are going back to work full time and have too high an income to qualify, you will usually be eligible for the Extended Payment Protection. This is available to those who have been claiming either Housing or Council Tax Benefit for more than six months and will be working full time for more than three months. Extended Payment Protection pays your rent and Council Tax for four weeks after your entitlement has stopped and gives you the chance to get back to work safe in the knowledge that you don't have to build up debt before your first salary payment comes in.

I have to pay Service Charges, are these covered?

Council Tax and Housing Benefit does not cover Service Charges such as paying for extra support or payments to a facilities management company if you live in a block of flats. You will have to cover these costs yourself.

I want to move but don't know if I can afford to.

If you need to move but don't know if you will be able to afford the rent then you can find out how much you will be entitled to by asking for a Rent Pre-Determination form. This will tell you what the rent level is for the type of property you want to rent in any given area. Councils normally turn these around in two days and you can ask for this service as often as you need.

How do I claim?

To make a claim, simply pick up a form from your local council office or ask to have one posted to you. The forms may seem daunting and if so please seek advice and help.

How much will I get?

The amount of your award depends upon your income and personal circumstances so every award is different. Seek advice if you have problems and would like to work out how much you will be entitled to.

Local Housing Allowance

So will I get taken off Housing Benefit and put onto this?

At the moment, only claims made after April 2008 for those with a private landlord will have to claim Local Housing Allowance, everyone else will still claim Housing Benefit. So if you are already receiving Housing Benefit, nothing will change for you unless you move and have to make a new claim.

What's the difference?

Local Housing Allowance is a simplified version of Housing Benefit. It allows you to work out in advance what the maximum amount of benefit you will be entitled to before you commit to renting. It helps you to plan your budget and to know how much you will have to contribute to your rent. Local Housing Allowance does not affect Council Tax Benefit, which stays the same.

How is it simpler?

Local Housing Allowance is simpler because it uses a standard formula that you can use to determine what you will be entitled to depending upon your circumstance. So you will know that as a single person you will be entitled to a maximum amount for a one bedroom property, and that if you are a lone parent with two children (depending upon their ages) you will be able to claim a maximum amount for a two or three bedroom property.

To find out the maximum amount you can claim, all you have to do is work out how many bedrooms you need and what the maximum rent is for that sized property is and you will know the maximum amount you will be able to claim for. There are exceptions, say for example if you are on high rate care, are under 25 or have to have extra rooms because of your disability. Check with us and we'll be able to advise you.

So how much is the Local Housing Allowance?

The amount that each council will pay varies from month to month and from council to council (but they all publish their rates – so just ask), and they work it out according to the rents charges in your area, so it will generally be a fair reflection of the cost of accommodation.

If in any doubt about how to apply or what you will be entitled to then ask us or at your local council and check before you move.

Disagreeing with a Decision

Every time that you apply for a benefit or have a decision from any benefit agency that you disagree with, you have an automatic right of appeal. Your right to appeal does not mean that the decision will change and on these occasions it is important that you get advice as soon as possible because your ability to appeal is time limited.

If you get a decision that you don't agree with then don't panic and always seek advice on the best way to challenge a decision that you disagree with, as you need to find the most appropriate way to appeal given your circumstances.

I hate all this, it's so complicated. Help!

Mental health and benefits do not always sit well together, staff in Job Centres or the call centres don't always seem to be able to understand the impact your illness has and how it affects you. That doesn't mean that they don't care or that they are deliberately picking on you. If they can help you they will and they are professionals who always try to do the best they can. With a little help and patience most problems can be resolved. However, when you have no money and bills piling up that is no consolation. So seek help, don't shout and get angry, get help and get it sorted out.

I want to appeal against the decision – is that right?

The letters that you get stating your decision will always state that you can appeal. However, an appeal should always be the last resort as it is essentially the last chance you will have to challenge the decision.

What should I do first then?

If you have already sought advice, then you have already made the right move. All advice providers will, except in exceptional circumstances, advise you to contact the benefits agency concerned and find out how and why they have made their decision. In these situations it may be that the decision can be reversed or the matter cleared up. Very often it is because they don't have the right information or you may not qualify for the benefit you asked for. Alternatively, you may, because of your circumstances, have an underlying entitlement, where you get no money but will either be eligible for another benefit or just to have your National Insurance Contributions credited.

Calling hasn't helped, what's next? – I'm getting angry!

Provided that you are satisfied that you can get no further by calling and once you know what the problem is (or even if you don't), then the next stage is to get another Decision Maker (DM) to look at your case. If you want to use this stage, then another DM will look at your claim. At this point, having usually worked out why your claim has not been awarded, you have the opportunity to submit supporting evidence to help the next DM look at your claim. They will always do so in a professional manner and will try to give you their decision as soon as possible.

I'm still not satisfied – I am now going to appeal.

Wherever you get advice you should expect that advice to be impartial and honest. If you take advice from me, then I will give you an honest assessment as to whether you are likely to be successful. However, no matter what I recommend it is always your decision and you can expect me to support your appeal. As with everything I can only advise and help, but you are always in control and can decide what you want to do.

What is an appeal?

Once you are satisfied that all other avenues are exhausted the last option is to appeal. An independent tribunal who ensure that you fit the legal criteria to qualify for a benefit carries out an appeal. An appeal will normally take up to three months before you have a decision.

It sounds a bit scary – can I be represented?

The appeals process can be scary and daunting. But don't be put off as you can always get representation from myself or any of the other advice agencies.

What happens at an appeal?

When we lodge an appeal, we are given all the paperwork that has been used to make a decision on your case. From this we can determine if we need to provide additional supporting evidence (which we usually do) so that the tribunal can make an informed decision.

We supply all the evidence we can to support your case and then appear before the tribunal.

Who makes the decision?

The tribunal panel is made up of three people. The chair person is usually a lawyer, to ensure that the decision fits in with the legal requirements, there is always a Doctor who has specialist knowledge of your condition and someone else who has experience of the care needs and help you may require.

What can they ask me?

A tribunal has the right to ask any question that relates to your disability and the way that it impacts upon your life. It is not a physical examination, but they can and will ask any question, in as many different ways as they need to be satisfied that they have the information they need. This can be a very daunting experience, so it is always advisable to have someone with you that you trust to represent you.

The tribunal is there to help and to ensure that you are treated fairly.

Do I get a decision on the day?

You will normally get a decision, yes or no on the day. Unfortunately, there are few ways to challenge their decision.

Fraud

Anyone who either knowingly or unwittingly receives benefits when they are not entitled to them is deemed to be committing fraud.

If you have or think that you have committed fraud then please seek advice as soon as possible.

Each benefit agency handles fraud cases in slightly different ways, however, as a general rule, you will always be better off if you admit to the offence before the agency catches up with you.

What exactly is fraud?

Fraud is where you have deliberately withheld information about a change in your circumstances, which would have disqualified you from a benefit you have been receiving. Alternatively where you have provided false information in order to qualify for a benefit to which you had no real entitlement.

I think that I have committed fraud – what should I do?

Before you do anything stop and find out whether you have been claiming fraudulently. If you are not sure then seek confidential advice before admitting to anything.

What happens when I admit it?

As soon as you contact the relevant agency, they will call you in for a formal interview. This will be under caution and can be used in evidence if you end up going to court. You are always entitled to have a solicitor or advocate present when attending an interview such as this as you may be charged with a criminal offence. It is especially important for those who experience mental health problems that they have someone with them that they trust, as this can be a frightening experience.

What should I do at the interview?

Take a friend along and make sure that you have all your paperwork with you to show what you were doing and why. Make sure that you have a list of your actions and times and dates as necessary. Seek advice if you are unsure.

Do I have to attend?

Yes. Failing to attend means that the benefits agency can suspend your benefits. If you cannot attend for whatever reason, tell them and explain why.

What can they do?

If you have admitted to the offence, then you are unlikely to go to court. Explaining any mitigating circumstances will help them understand the position you were in and why you were unable to do anything. Often fraud can be a case of mistaken identity or a genuine misunderstanding. If this is the case, this will be sorted out at the interview and you won't have anything to worry about.

The actions that they take will depend upon the amount of money involved, the timescales as well as how you respond to the charges. Some offences, especially those involving more than £5000 are automatically pursued; legally they have to act. Other offences with sums less than £3000 can often be treated differently and usually do not result in a court appearance.

If however you were unable to persuade them that you were not responsible, then they have four options in any combination available to them.

- You can be taken to court and given a sentence which can be custodial
- You may be given a formal caution
- You can be forced to pay the amount back plus a surcharge of 30%
- You can be forced to pay the full amount back

In some instances it is possible for them to impose sanctions upon the other benefits you receive and in this situation your benefits might be stopped altogether and you would be unable to claim even hardship payments.

I've been accused of fraud – I'm innocent

Even if you have done nothing improper you may be called for an interview. This could be as a result of someone reporting you to the fraud section or it could be that there is confusion over the information that they have. In circumstances such as these, you will find that the matter can often be resolved there and then.

I've been cautioned – does that mean I have a criminal record?

No. A formal caution is just that. You have not been arrested and will not have a criminal record as a result. You have to be cautioned so that the officers at the interview follow standard legal procedure – this is for your benefit and ensures that there can be no confusion over who said what to whom.

Employment Support Allowance

From the 27th October 2008, anyone who is unable to work due to illness will have to claim Employment Support Allowance. After this date anyone who makes a claim for benefit will not be able to claim Incapacity Benefit or Income Support.

What's is Employment Support Allowance?

Employment Support Allowance (ESA) has many similarities with the benefits it replaces (Incapacity Benefit and Income Support). Like them it is designed to provide you with a basic income whilst you are unable to work. However, ESA is different in that it asks more of you than Incapacity Benefit and is what is called a Conditional Benefit. So you have to satisfy certain conditions before you are eligible for the full benefit.

ESA is part of the Governments Pathways To Work plan, to help people who have health problems make the transition back to work. It is designed to provide you with more help and to plan an effective and sustainable way to eventually return to full-time employment. If you are unable to work then you will not be forced into a job before you are ready.

So what happens on ESA?

As soon as you make a claim you will automatically be entitled to the basic rate for the benefit and will be able to claim Local Housing Allowance/Housing and Council Tax Benefit. You will still need to have a valid sick note from your GP and be unable to work due to ill health.

Like Incapacity Benefit which it replaces, EAS has two parts, so if you have paid enough National Insurance you will be eligible for the contributions stream or if not your claim will be assessed on the basis of your income. Each household's income is taken into account.

Once you have made your claim, you will be expected to attend a Work Focused Interview (WFI) at your local job centre within 8 weeks. You must attend this or your benefit will not be paid. Following that, it is intended that within 13 weeks of making your claim you will be assessed at a Work Capability Assessment (WCA). This is similar to the Personal Capability Assessment (PCA) that you have to undergo every year on Incapacity Benefit, but the criteria for those with mental health problems has been expanded.

For the first 13 weeks you will receive only the basic amount of benefit, but after you have passed the assessment you will then be put into one of two groups and you may then be eligible for extra premiums on top of your basic benefit.

Groups? What groups?

At your assessment (WCA) you will be put into either the Support Group or the Work Related Activity Group. The group that you go into will determine what you have to do to get the top rate of the benefit and what your responsibilities are.

The Supported Group

People who are placed in the Supported Group will automatically qualify for the higher rates of benefits available on ESA. They will not be expected to attend work focused interviews or medical assessments.

The Work Related Activity Group

If you are put into this group, you will be expected to attend all the work focused interviews and medical assessments in order to qualify for the higher rates of benefits. In total, you will have to attend a further five WFI's and failure to attend without good cause can mean that your benefit can be reduced or sanctioned. You will not lose the basic allowance, but can lose the top-up that you get after thirteen weeks.

Eventually it is expected that those in this category will also have to take part in some form of work related activity. Everyone will have to have a medical assessment at least every two years and may have to attend six work focused interviews each year.

This new benefit places new conditions on claimants and because of this it is advisable to take advice as soon as possible to make sure that you understand what you need to do and what happens if you cannot meet the conditions.

I'm already on IB/IS - will I have to change

Right now, there are no immediate plans to change the benefit you are on. The DWP has stated that it hopes to migrate and reassess everyone currently on Incapacity Benefit and Income Support to the new benefit starting sometime in 2009. But for the moment you will not see any change.

Can I go back onto Incapacity Benefit or Income Support.

If you come off either Incapacity Benefit or Income Support and then reapply within eight weeks, you can make a rapid reclaim and go back onto this benefit. However, after eight weeks, you will have to claim the new benefit.

What about housing costs? Do I still get help with these?

Housing Benefit, Local Housing Allowance as well as help with mortgage payments will all continue under the new benefit, so you should not see any change.

Will I be better off?

The amount of benefit paid under ESA is the same as for Income Support and Job Seekers Allowance. For the first thirteen weeks everyone will get paid £60.50 for a single person and after that you will receive a further £24 or £29 per week depending upon which group you are placed into. There are different amounts for those under 25 and for those over 60, Pension Credit remains the sensible benefit to go onto. There is no basic disability premium, however, severe and enhanced disability premiums will be added to your basic allowance.

Are there new rules?

Absolutely. Employment Support Allowance is designed to help those people who are capable of at least some work get the support and help to do something. Rather than feel that you cannot do anything and find that you are trapped by the benefits system making it impossible for you to find work, this benefit, it is hoped, will allow people with mental health problems to pace their way back to work.

The downside is that the new rules put more responsibility on you to turn up for assessments and interviews, which may be impossible given the variable nature of your illness. If you fail to show "good cause" as to why you cannot attend or fail to attend, your benefit will be at risk. The new rules are strict and you need to be aware of your responsibilities right from the start.

What are the new changes to the Medical Assessment?

Under ESA you will now have to score fifteen points (rather than 10 under Incapacity Benefit) if you have mental health problems. This sounds worse than it actually is, as they have totally revamped the criteria under which you score points, so in fact some people (especially those with enduring and long term mental health problems) may in fact find it easier to pass than before.

What if I fail the Assessment?

Don't worry. If you do not reach the fifteen points that you can always appeal the decision and we are happy to help you with the entire process, from deciding what to do right the way through to appearing before an Independent Tribunal and everything in between. Please make sure that you contact us immediately you have a decision so that we can get the process started. And no, you won't be left without any money during this period.

I'm scared they'll make me go back to work

Whilst you are unwell and unable to work at all, you will not be forced to go back to work, but to remain on ESA, you do need to satisfy their conditions. As long as you do this, you will continue to receive your benefits.

Will my DLA be affected?

No. Your DLA is separate from all other benefits and is judged by different criteria and will not be affected by ESA. No other benefits are affected (Carers Allowance/Attendance Allowance etc). There are no plans to change these benefits.

Why are they doing this?

The government wants to encourage more and more people to return to work and to provide them with more help (which is what the extra WFI's are for. Sadly, those most likely to be affected are those with mental health problems and it is strongly recommended that you seek advice and help as soon as you think that you might need to claim benefits.

Work Focused Interviews? Is that all the help I get?

No. There is more help available to help people return to work than ever before (Working Tax Credits/Return to Work Credits etc), and the more help

you can get the better chance you have of making a smooth and speedy return to work which can dramatically improve your mental health. But, it is essential that in returning to work you ensure that it is sustainable and realistic, difficult tasks which you can get help with from various organisations.

This all sounds too much for me. I won't bother claiming.

So long as you understand what you need to do, then this benefit is manageable and in the long run can help you return to work, so provided you seek the help then you'll be fine. In order to survive and move forward it is essential that you claim your entitlement. If you are at all worried by claiming then please talk to us.

Can I still do permitted work on ESA?

Yes, the rules for Permitted Work remain the same under Employment Support Allowance as under Incapacity Benefit and Income Support.

Returning to Full Time Work

For most people with mental health problems, returning to work is one of the most important goals. Work can provide you with the stimulation, social contact and routines which can help to stabilise and cement your long term recovery.

However, for many with a mental health problem, getting back to work presents new challenges, both emotionally and financially. You have to overcome the stigma of others and perhaps have to come to terms with your new place in the workplace. You may wish to change jobs entirely, work less hours or re-train to improve your skills.

Will I be worse off going back to work?

Finding your new place in the work force can be difficult. If you have not worked for some time, you may find that practices and technology have moved on. You may well not be able to command the same earning power as you did before your illness. You may also be caught in what some call the benefits trap, where you cannot earn enough money to pay all your bills and be able to live as you did on benefits.

But, you may well be surprised at the amount of help that is available to help you get back to work and how much you can earn with employment income topped up with certain benefits.

Even though some people may have to face a small drop in income temporarily, the advantages outweigh the short term disadvantages and your ability to earn, save and take control of your finances all improve dramatically when you return to work.

Whenever you are considering and feel ready to return to work (voluntary, part or full time), make sure that you get the help you need to make the transition from benefits long lasting and as easy as possible.

What benefits are available?

For those who have been on health related benefits (Incapacity Benefit and Income Support) there are several benefits which you can receive to help ease the transition back to work. Many people who return to work keep some of their Housing and Council Tax Benefit and for most people, Working and Child Tax Credits help to increase their income. Always check to see which benefits you are entitled to.

What other help is available?

Whether it is dealing with CV's, learning to make calls to employers or just getting some independent advice on what areas you need to look at, there are some really great agencies which can help you get on track. One of our partners Restore, helps people rebuild their confidence, learn new skills, brush up on old ones and can do everything but attend the interview for you. Their help doesn't stop when you get the job, but can continue with support and advice once you have started your new job.

Other agencies offer help, and don't forget the Job Centre, who will operate even more later this year. So whether its help with something new, or help with rusty skills, there is some great help you can tap into to make getting a job a bit easier.

Working Tax Credits

Working and Child Tax Credits are an invaluable benefit that you get on top of your earnings and as they don't have to be paid back, allow you to bridge the gap between benefits and work. With help from the tax credits (which can be as much as £90 per week for some single people, and more for those with families), it is often possible to stagger your return to full time work, by starting at 16 hours or more and gradually increasing them, until you feel confident that you can manage full time work. Make sure that you read the chapter on Tax Credits and ask us to work out what your entitlement will be so that you can make an informed decision before you start work.

Return to Work Credit

The Return to Work Credit is not the same as a Working Tax Credit. This is a benefit paid weekly for a year, with no catches at £40 per week – on top of everything else. All you have to do is work more than 16 hours per week, earn less than £15,000 per year and have been on a qualifying benefit (Incapacity Benefit is the main one) as well as have the job for more than 5 weeks. Are you entitled to an extra £40 per week? Find out. Ask.

Job Grant

When you start work and come off Incapacity Benefit and Income Support you may well be entitled to a one off payment of a Job Grant. If you are single, this could be £100, or £250 if you have a family. Normally paid a couple of weeks after your final benefit payment, the job grant can help you manage until your first pay cheque come through.

Extended Payment Period

You may also be eligible for an Extended Payment Period for your Housing and Council Tax Benefit for up to four weeks from starting your new job. Apply for this from your local council when you inform them that you are starting work and this can prevent you from building up rent and Council Tax arrears. It offers a breathing space where you don't have to worry about paying the rent or Council Tax until you get paid.