

Royal College of Psychiatrists' briefing

Mental health and the benefits assessment process | 22nd January 2019



New research¹ soon to be published by the Royal College of Psychiatrists British Journal of Psychiatry found that **mental health claimants were 2.4 times more likely to lose their benefit following a PIP eligibility assessment than those with a physical health condition.**

The Royal College of Psychiatrists believe it is essential that clinicians know how to support their patients in applying for the benefits they are entitled to. The College has published written guidance for clinicians² to help support mental health professionals writing reports for PIP claims.

The Royal College of Psychiatrists has also produced guidance for mental health clinicians providing clinical evidence for the Work Capability Assessment (WCA).³

The Royal College of Psychiatrists has continuing concerns about the impact of the Welfare Reform Act (2013) on people with mental health conditions and those with learning disabilities, as they are amongst the most vulnerable members of society. The College wishes to see a fair benefits system that does not disadvantage people with mental health problems. Our welfare system must protect and support people particularly when they are at their most vulnerable. It should also empower them to lead the lives they wish to lead.

Prevalence data

Recent data from the Department of Work and Pensions shows the main disabling condition for people in receipt of PIP is 'Psychiatric Disorder', with 711,00 recorded cases accounting for 36% of PIP awards.⁴ The second most disabling condition was 'Musculoskeletal disease' with 411,000 recorded cases, accounting for 21% of PIP awards.

Employment and Support Allowance data⁵ shows in England there are 934,470 claimants, where the reason given is mental and behavioural disorders. The North West has the highest amount of claimants with 163,480.

Barriers to accessing benefits and the role of welfare advice

The benefits system often does not work for people with mental health disorders. Some claimants are left feeling 'fearful, demoralised, and further away from achieving their work-related goals.⁶ This is exacerbated by the fact that many benefits assessors do not have prior training or experience in mental health⁷. As of November 2017, just 16.6 of ATOS PIP assessors had a clinical mental health background.⁸

People with severe mental illness are at a high risk of experiencing welfare benefit or financial problems, for example they are four times more likely than the general population to experience problem debt. In addition, people with these problems are at high risk of experiencing a deterioration in their mental health. These interactions between welfare benefit/financial problems and mental illness may lead to the familiar picture of a downward spiral into crisis.

It follows that providing advice on welfare problems to people with mental health problems can be beneficial to people and can prevent further deterioration in a person's condition and life situation.

The report from the Centre for Mental Health: "Welfare advice for people who use mental health services: Developing the Business Case" suggests providing specialist welfare advice for people using secondary mental health services can be good value for money and can cut the cost of health care.

Employment and Support Allowance

Work capability assessment

When a person applies for Employment Support Allowance (ESA) or is reassessed for ESA, they go through an assessment process to decide whether they qualify for this benefit. This process, the Work Capability Assessment (WCA) assesses whether they have limited capability for work.

Increasingly, the DWP do not ask clinicians directly to provide written evidence (although they do sometimes send an ESA113 form to complete) and the onus is on the claimant to ask a clinician (GP or specialist) to provide this.

It is important that clinicians provide good quality, clear and accurate evidence that is appropriate for the purposes of assessing their capacity for work. To help with this **the Royal College of Psychiatrists has published some guidance that clinicians may find helpful in compiling their reports.**⁹

Sanctions

Reports show that there has been a formidable rise in the number of people on ESA who have been sanctioned. The number of people receiving a sanction each month rose from 600 in January 2012 to over 4,700 in December 2013.

Official figures show that people with mental health problems are disproportionately sanctioned – 50% of people in the Work Related Activity Group have a mental health problem, but they received 60% of the sanctions. A key problem is that the system of conditionality assumes that the threat of reduction or withdrawal of benefits will encourage people to engage in activities.

The Royal College of Psychiatrists believe this assumption is misplaced – many people with mental health problems want to work but are prevented from doing so by the impact of their condition, systemic barriers and a lack of effective employment support. The use of sanctions is not only ineffective but has a detrimental effect on peoples' mental health.

Personal Independence Payments

The assessment for Personal Independence Payment (PIP) is usually carried out as a face-to-face assessment by a health professional. As with Employment and Support Allowance (ESA) assessments people often find these processes distressing and the assessments carried out may not be accurate resulting in claimants not being given the benefits for which they are eligible

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To ensure that assessors have the best possible information on people's mental health the Royal College of Psychiatrists has published some guidance that clinicians may find helpful in compiling reports for patients claiming PIP.

Questions for the Minister

1. What steps are the government taking to reduce the disparity between psychiatric and non-psychiatric claimants moving from DLA to PIP?
2. Does the Minister agree that more PIP assessors should have a clinical mental health background and what steps are the government taking to ensure this happens?

¹ Pybus et. al 'Discrediting experiences: Outcomes of eligibility assessments for claimants with psychiatric compared to non-psychiatric conditions transferring to Personal Independence Payments in England'.

² <https://www.rcpsych.ac.uk/mental-health/work-and-mental-health/social-inclusion>

³ https://www.rcpsych.ac.uk/docs/default-source/mental-health/work-and-mental-health-library/guidance-for-mental-health-clinicians-wca.pdf?sfvrsn=5980989d_2

⁴ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/763108/pip-official-statistics-to-october-2018.pdf

⁵ <https://data.london.gov.uk/dataset/incapacity-benefit-recipients-due-mental-illness>

⁶ Hale C. Fulfilling Potential? ESA and the Fate of the Work-Related Activity Group. Mind, 2014

⁷ Health Assessment Advisory Service. Assessments/Frequently Asked Questions. Health Assessment Advisory Service, 2017. Available at <https://www.chdauk.co.uk/frequently-asked-questions> (accessed 25 December 2017)

⁸ Written evidence from ATOS Independent Assessment Services in House of Commons Work and Pensions Committee, 2018. PIP and ESA assessments: claimant experiences. Fourth Report of Session 2017-19.

<http://data.parliament.uk/WrittenEvidence/CommitteeEvidence.svc/EvidenceDocument/Work%20and%20Pensions/PIP%20and%20ESA%20assessments/written/74067.html>

⁹ https://www.rcpsych.ac.uk/docs/default-source/mental-health/work-and-mental-health-library/guidance-for-mental-health-clinicians-wca.pdf?sfvrsn=5980989d_2