Introduction

As an Almoner, it is useful to have a basic understanding of various State Benefits and NHS Services so you can signpost Lodge members to the State support they may be eligible for.

Please bear in mind that applicants may not be eligible for certain types of support from the Masonic Charitable Foundation (MCF) unless they are claiming the relevant State benefits they are entitled to in the first instance.

You can see if an Applicant is missing out on State help using ‘Entitled to’s’ online benefits calculator – [www.entitledto.co.uk](http://www.entitledto.co.uk)

*This short Guide is intended for Lodge Almoners only and should not replace professional advice.*

Advice and Support Team

State benefits and care options can be confusing. The Advice and Support Team at MCF can offer expert guidance on all the options available and you can call 0800 035 60 90 to arrange to speak to the team. A member of the team will arrange a visit with the Applicant to support them to access the help they need.

Content

The purpose of this Guide is to present Lodge Almoners with further information on the types of State benefits and NHS Services which the MCF asks members to be in receipt of before making an Application for support. These include:

- Benefits Cap
- Council Tax Reduction
- Housing Benefit
- Personal Independence Payment
- Universal Credit
- Attendance Allowance
- Occupational Therapy
- Convalescent Care
- Carers’ Assessment
State Benefits

Benefits Cap

Introduction

From April 2013 a cap was introduced on the total amount of benefit to which working-age claimants can be entitled. This means that households on out of work benefits will no longer receive more in benefit than the average weekly wage, after Tax and National Insurance. It applies to the combined entitlement to the main out-of-work benefits, plus Housing Benefit, Child Benefit and Child Tax Credit. The cap is set at:

- £500 p/wk for couples and lone parents
- £350 p/wk for single adults

If the total amount of your benefit exceeds the cap level your Housing Benefit will go down. This is to make sure that the total amount of your benefit is not more than the cap level. You may have to use money from your other benefits to pay towards the rent for your home.

Benefits that count towards the cap

There will be a cap on combined income from the following benefits:

- Bereavement Allowance
- Carer’s Allowance
- Child Benefit
- Child Tax Credit
- Employment and Support Allowance (except where the support component has been awarded)
- Guardian’s Allowance
- Housing Benefit whether paid direct to you or to your landlord (but not including Housing Benefit paid for Supported Exempt Accommodation*)
- Incapacity Benefit
- Income Support
- Jobseeker’s Allowance
- Maternity Allowance
- Severe Disablement Allowance
- Widowed Parent’s Allowance
- Widowed Mother’s Allowance
- Widow's Pension, including the Age-Related component

**Exemptions**

The cap won’t apply if anyone in your household (you, your partner and any children you are responsible for when working out your Housing Benefit) are:

**Entitled to:**

- Working Tax Credit
- In receipt of:
  - Disability Living Allowance
  - Personal Independence Payment
  - Attendance Allowance
  - The support component of ESA
  - Industrial Injuries Benefits (and equivalent war disablement pensions and payments under the Armed Forces Compensation Scheme)
  - War Widows and War Widowers pension

If you or your partner have been in employment for 50 out of the previous 52 weeks prior to claiming benefit you may be exempt from the cap for a grace period of up to 39 weeks.

Please note that any adult children living in your household, and receiving a benefit in their own right, would not normally count as part of your household for the purposes of the benefit cap.

*Supported Exempt Accommodation is either a resettlement place or accommodation provided by a county council, housing association, registered charity or voluntary organisation that provides you with care, support or supervision. This accommodation can include supported housing such as group homes, hostels, refuges, sheltered housing, supported living complexes and adapted housing for the disabled.*

**Effect of the benefits cap**

It is estimated that the cap affects 67,000 households in 2013/14 and 75,000 in 2014/15. By far the worst affected are those living in Greater London. A breakdown of those affected suggests:

- 54% of affected households are in Greater London
- 9% of affected households are in the South East
- 6% of affected households are in the North West
5% of affected households are in Scotland

3% of affected households are in Wales

The average benefit reduction is £83 a week per household

- 17,000 households will be subject to both the local housing allowance cap from Jan 2012 and this cap from April 2013
- 44% of households affected by the cap are in the social rented sector
- 56% of households affected by the cap are in the private rented sector
- 69% of households affected by the cap have 3 or more children
- 27% of households affected by the cap have 5 or more children
- 52% of households affected are lone parents
- 39% of households affected receive jobseeker's allowance
- 22% of households are in receipt of ESA
- 38% of households are in receipt of income support

Where can I get more help or information?

Further information and an online calculator are available at www.gov.uk/benefit-cap-calculator

The calculator can give you an estimate of how much lower your benefit might be if you get more than the cap levels. A helpline is also available for you to call. The number is 0845 605 7064 or textphone 0845 608 8551 for people with hearing or speech impairments. The helpline is open Monday to Friday 8am to 6pm.

How can you stop the benefit cap from applying to you?

Your benefit will not be capped if someone in your household (you, your partner or any children you are responsible for when working out your Housing Benefit):

- Obtains work and becomes entitled to Working Tax Credit;
- Receives one of the benefits that exempt people from the cap.

You could also move to cheaper accommodation or negotiate a rent reduction to one which is more affordable. This could mean that the cap wouldn't apply to you or that the amount you have to pay from your other benefits to make up the shortfall in your rent may be less.

Finding work could mean that the cap wouldn't apply to you as qualifying for Working Tax Credit will mean these new rules do not apply.
If you are not already seeing a Jobcentre Plus adviser, or a Work Programme or Work Choice provider, you can get support from Jobcentre Plus to help you get the skills you may need to find a job. To arrange this you will need to ring Jobcentre Plus on 0845 604 3719.

Council Tax Reduction

Introduction
Since April 2013 Council Tax Reduction has replaced Council Tax Benefit; councils are in full charge of setting the Council Tax rates, collecting payments and providing financial support to pay Council Tax using a new form of discount.

Why has it changed?
The Government believes this new system will:

- simplify the complex system of criteria and allowances
- establish stronger incentives for councils to get people back into work
- save the taxpayer up to £480 million a year.

Applying for support
Apply to your local council for Council Tax Reduction (sometimes called Council Tax Support). You’ll get a discount on your bill if you’re eligible. You could be eligible if you’re on a low income or claim benefits. Your bill could be reduced by up to 100%.

You can apply if you own your home, rent, are unemployed or working. What you get depends on:

- where you live - each council runs its own scheme
- your circumstances (e.g. income, number of children, benefits, residency status)
- your household income - this includes savings, pensions and your partner’s income
- if your children live with you
- if other adults live with you

Housing Benefit
On 1 April 2013 a size limit rule was introduced to Housing Benefit for working age people renting from a local authority, a registered housing association or other registered social
landlord. By working age we mean anyone under state pension credit age. The new rules restrict the size of accommodation you can receive Housing Benefit for, based on the number of people in your household.

The rules allow one bedroom for:

- every adult couple (married or unmarried)
- any other adult aged 16 or over
- any two children of the same sex aged under 16
- any two children aged under 10
- any other child, (other than a foster child or child whose main home is elsewhere)
- a carer (or team of carers) who do not live with you but provide you or your partner with overnight care.

Single people under the age of 35 are entitled to claim the rate for a room in shared accommodation. There are exemptions to this rule for severely disabled, those leaving rehab hostels and those under the supervision of Multi-Agency Public Protection Arrangements (MAPPA).

There is an overall maximum entitlement of 4 bedrooms regardless of family size.

**How does this affect an individual?**

If it is decided that an applicant has more bedrooms than are necessary for the household then Housing Benefit will be reduced by:

- 14% if there is 1 extra bedroom
- 25% if there are 2 or more extra bedrooms

**How much will Housing Benefit be?**

This applies according to the local authority but there was a nationwide cap on LHA from April 2011. The current figures for this cap are:

- £250pw for a one bedroom property
- £290pw for a two bedroom property
- £340pw for a three bedroom property
- £400pw for a four bedroom property

All payments were frozen from April 2012 and future increases will be linked to either the Consumer Prices Index or the 30th percentile of local rents, whichever is lower.
Personal Independence Payment

Personal Independence Payment (PIP) was introduced in April 2013, replacing disability living allowance (DLA) for working-age people (aged 16-64). The basic provisions to implement the new benefit are set out in the Welfare Reform Act 2012 (‘the Act’), and more detail has been provided in draft regulations and briefing notes.

Eligibility

You must be aged 16 to 64 and have a health condition or disability where you:

- have had difficulties with daily living or getting around (or both) for 3 months
- expect these difficulties to continue for at least 9 months (unless you’re terminally ill with less than 6 months to live)

You must have lived in England, Scotland or Wales for at least 2 of the last 3 years, and be in one of these countries when you apply. If you’ve recently returned from living in another EEA country, you might be able to get PIP sooner.

You can get PIP whether you’re working or not. The amount you get depends on how your condition affects you, not the condition itself.

There are additional rules if you live abroad or if you’re not a British citizen.

Living abroad

You might still be able to get PIP if you:

- live in another EU or EEA country or Switzerland - you can only get help with daily living needs
- are a member or family member of the Armed Forces

If you’re not a British citizen

You must:

- normally live in or show that you intend to settle in the UK, the Republic of Ireland, Isle of Man or the Channel Islands
- not be subject to immigration control (unless you’re a sponsored immigrant)

You might still be able to get PIP if you are a refugee or have humanitarian protection status.

How you’re assessed

You’ll be assessed by an independent healthcare professional to help DWP work out the level of help you need.
What are the disability conditions for personal independence payments?

PIP is divided into two components – the daily living component and the mobility component. It is possible for a person to qualify for both if they meet the entitlement conditions for both.

Each component will be payable at two rates, a standard rate and an enhanced rate:

- to qualify for the standard rate, the claimant’s ability to undertake daily living or mobility activities must be ‘limited’ by her/his physical or mental condition; or
- to qualify for the enhanced rate, the claimant’s ability to undertake daily living or mobility activities must be ‘severely limited’ by her/his physical or mental condition.

For both components, a ‘required period’ condition must also be satisfied, which means that claimants must have had the appropriate level of need for three months to qualify, and be expected to have those needs for a further nine months.

The only exception to these rules is if the claimant makes a claim because s/he has a terminal illness (which means that the claimant has a progressive disease and death from that disease can reasonably be expected from that disease within six months).

Terminally ill claimants will not have to satisfy a required period condition; and will automatically receive the enhanced rate of the daily living component.

The daily living and mobility activities are set out in regulations from parliament – and listed below:

**Daily living activities**

You may get the daily living part of PIP if you need help more than half of the time with things like:

- preparing or eating food
- washing, bathing and using the toilet
- dressing and undressing
- reading and communicating
- managing your medicines or treatments
- making decisions about money
- engaging with other people

**Mobility activities**

- Planning and following journeys
• Moving around

Each activity contains a list of statements describing different difficulties with the activities, called ‘descriptors’. Each descriptor scores a certain number of points.

The claimant will be awarded points for one descriptor in each activity, and the scores will be added together to give a total for daily living activities and a total for mobility activities. There will be a ‘threshold’ score to become entitled to a component.

The thresholds are:
• 8 points for the standard rate of a component; and
• 12 points for the enhanced rate of a component.

As some conditions fluctuate over time, the regulations set out how to score points if the claimant’s needs vary from day to day. The intention is that a claimant who should score points for one or other of the descriptors in an activity on over half the days in the one year ‘required period’ will be given some points in the assessment.

How to claim?

You can make a new Personal Independence Payment (PIP) claim by calling the Department for Work and Pensions (DWP).

Someone else can call on your behalf, but you’ll need to be with them when they call. There are also other ways to claim if you find it difficult to use a telephone.

Before you call, you’ll need:
• your contact details, for example telephone number
• your date of birth
• your National Insurance number - this is on letters about tax, pensions and benefits
• your bank or building society account number and sort code
• your doctor or health worker’s name, address and telephone number
• dates and addresses for any time you’ve spent abroad, in a care home or hospital

For information you can visit www.gov.uk/pip/how-to-claim

DWP - PIP claims
Telephone: 0800 917 2222
Textphone: 0800 917 7777
Calling from abroad: +44 191 218 7766
Monday to Friday, 8am to 6pm
Find out about call charges - www.gov.uk/call-charges

Payments
Payments are usually made every 4 weeks and paid directly into a claimant’s bank account. Payments are tax free and you can get it whether you’re in or out of work. PIP is made up of 2 parts as outlined below. Whether you get one or both of these and how much you’ll get depends on how severely your condition affects you.

If you are terminally ill you’ll get the higher daily living part if your not expected to live more than 6 months. The rate of your mobility part depends on your needs.

Daily living component
The weekly rate for the daily living part of PIP is either £55.65 or £83.10.

Mobility component
The weekly rate for the mobility part of PIP is either £22 or £58.

Other help
You or your carer might also qualify for other financial help, for example Carer’s Allowance, or help with housing or transport costs. You can check by visiting here - www.gov.uk/financial-help-disabled

What will happen if you are in hospital, care or prison?
Personal Independence Payment will not normally be paid to people who are in hospital, residential care or prison. There will be two exceptions to this rule:

- the mobility component will still be paid to claimants in residential care; and
- payment will continue as normal for the first 28 days in hospital, prison or care.

How long will awards be made for?
The Act says that an award must be made for a fixed time unless it is very unlikely that there will be no change your condition. The decision make looks at the likelihood of the health condition or disability changing, and this decides how long the PIP will be awarded for.

- Shorter term awards – last up to two years. The DWP makes these awards where they expect a change

- Longer term awards – could last up to five or ten years. The DWP makes these awards where they consider changes in your condition unlikely but still possible.
Universal Credit

Universal Credit was introduced in October 2013, replacing certain means-tested benefits and tax credits for working-age people up to pension credit age. The basic provisions to implement Universal Credit are set out in the Welfare Reform Act 2012, and more detail has been provided in draft regulations issued in June 2012.

Eligibility
You can currently claim Universal Credit if you’re either:

- a single person anywhere in England, Wales and Scotland
- a couple or family living in certain areas

You can check by visiting here [www.gov.uk/guidance/jobcentres-where-you-can-claim-universal-credit](http://www.gov.uk/guidance/jobcentres-where-you-can-claim-universal-credit)

To get Universal Credit you must:

- be 18 or over
- be under State Pension age
- not be in full time education or training
- not have savings over £16,000

You’ll get less Universal Credit if you have savings over £6,000 or earn enough money to cover basic living costs.

If you live with your partner you’ll need to make a joint claim as a couple. Your partner’s income and savings will be taken into account, even if they aren’t eligible for Universal Credit.

If you want to claim a benefit without your savings, your partner’s savings or their income being taken into account, then you can apply for either:

- ‘new style’ Jobseeker’s Allowance (JSA) - [www.gov.uk/jobseekers-allowance/what-type-you-get](http://www.gov.uk/jobseekers-allowance/what-type-you-get)

A person can apply for these if they’re entitled to apply for Universal Credit.

If you have children
You can make a new Universal Credit claim if you either:
• have 2 children or fewer and you live in a Universal Credit area. You can check this here - [www.gov.uk/guidance/jobcentres-where-you-can-claim-universal-credit](http://www.gov.uk/guidance/jobcentres-where-you-can-claim-universal-credit)

• received Universal Credit in the previous 6 months and payments have stopped - it doesn't matter how many children you have

If you have 3 or more children and you haven't claimed Universal Credit before, you can apply for Child Tax Credit - [www.gov.uk/child-tax-credit](http://www.gov.uk/child-tax-credit)

**If you have a disability or illness that affects your work**

You may need to have a work capability assessment to see how your disability or health condition affects your ability to work. If you need an assessment you'll get a letter telling you where to go and what to do.

Depending on the outcome of the assessment you could be eligible for an extra payment on top of your standard allowance. You can check here - [www.gov.uk/universal-credit/what-youll-get](http://www.gov.uk/universal-credit/what-youll-get)

**How much will universal credit be?**

The amount of Universal Credit you can get depends on your circumstances, including your income and how many children you have. Your Universal Credit payment is made up of a basic ‘standard allowance’ and any extra amounts that apply to you.

<table>
<thead>
<tr>
<th>Your circumstances</th>
<th>Monthly standard allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single and under 25</td>
<td>£251.77</td>
</tr>
<tr>
<td>Single and 25 or over</td>
<td>£317.82</td>
</tr>
<tr>
<td>In a couple and you’re both under 25</td>
<td>£395.20</td>
</tr>
<tr>
<td>In a couple and either of you are 25 or over</td>
<td>£498.89</td>
</tr>
</tbody>
</table>

**Extra amounts**

You may get more money on top of your standard allowance if you’re eligible.
### How much you’ll get

<table>
<thead>
<tr>
<th>How much you’ll get</th>
<th>Extra monthly amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>For your first child</td>
<td>£277.08 (born before 6 April 2017)</td>
</tr>
<tr>
<td></td>
<td>£231.67 (born on or after 6 April 2017)</td>
</tr>
<tr>
<td>For your second child</td>
<td>£231.67 per child</td>
</tr>
<tr>
<td>If you need help with childcare costs</td>
<td>85% of your costs (up to £646.35 for one child and £1,108.04 for 2 or more children)</td>
</tr>
<tr>
<td>If you have a disabled or severely disabled child</td>
<td>£357.78 to £649.38</td>
</tr>
<tr>
<td>If you’re disabled or have a health condition that stops you from working</td>
<td>£318.76</td>
</tr>
<tr>
<td>If you care for a disabled person</td>
<td>£151.89</td>
</tr>
</tbody>
</table>

### If you have children

You only get an extra amount of £231.67 for more than 2 children if:

- you were already claiming for more than 2 children before 6 April 2017
- you’re renewing a claim for more than 2 children that stopped within the past 6 months

Other exceptions apply which can be checked here - [www.gov.uk/guidance/universal-credit-and-families-with-more-than-2-children-information-for-claimants](https://www.gov.uk/guidance/universal-credit-and-families-with-more-than-2-children-information-for-claimants)

You might get the extra amount if you start caring for another child, depending on when they were born and how many children you have.
Use a benefits calculator to get an estimate of how much you could get -
www.gov.uk/benefits-calculators

**Work allowance**

Your Universal Credit payment will reduce gradually as you earn more. For every £1 you earn your Universal Credit payment will be reduced by 63p.

You can earn a certain amount before your Universal Credit is reduced if you or your partner either:

- are responsible for a child or young person
- have a disability or health condition that affects your ability to work -
  www.gov.uk/government/publications/universal-credit-if-you-have-a-disability-or-health-condition-quick-guide

This is called a ‘work allowance’. Your work allowance will be lower if you get help with housing costs.

<table>
<thead>
<tr>
<th>Your circumstances</th>
<th>Monthly work allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td>You get help with housing costs</td>
<td>£192</td>
</tr>
<tr>
<td>You don’t get help with housing costs</td>
<td>£397</td>
</tr>
</tbody>
</table>

**How will you claim?**

You can claim Universal Credit here - www.gov.uk/apply-universal-credit

Contact the Universal Credit helpline if:

- you have any questions
- your circumstances change and you’re already getting Universal Credit

**Universal Credit helpline**

Telephone: 0345 600 0723

Welsh language (make a claim): 0800 012 1888
Welsh language (report changes): 0345 600 3018
Textphone: 0345 600 0743
Monday to Friday, 8am to 6pm
Find out about call charges

**Alternative formats**

Call the Universal Credit helpline to ask for alternative formats, such as braille, large print or audio CD.

**Your Universal Credit interview**

If your application is successful, you'll be told to arrange an interview at your local Jobcentre Plus. You won't get Universal Credit if you don't go to the interview!

**Your Claimant Commitment**

You'll have to accept a ‘Claimant Commitment’ if you want to get Universal Credit.

This is an agreement that you'll complete certain tasks in order to claim Universal Credit.

What you agree to do will depend on things such as your health, your responsibilities at home and how much help you need to get work or increase your income.

Your Universal Credit payments will be stopped if you don’t keep to your Claimant Commitment. Further information can be found here - [www.gov.uk/universal-credit/if-your-payment-is-stopped-or-reduced](http://www.gov.uk/universal-credit/if-your-payment-is-stopped-or-reduced)

**Your first payment**

You'll get a statement and your first monthly payment around 6 weeks after you've finished applying for Universal Credit. Your statement will tell you:

- when you'll normally get paid
- how much you'll be paid
- which bank account it'll be paid into

If you won't have enough money to live on while you wait for your first payment, call the helpline to ask for an advance payment. You'll repay it through your regular Universal Credit payments - they'll be lower until you pay it back.

**You could get your first payment 1 week sooner if you:**

- are claiming Universal Credit as a couple and will now claim by yourself
• are claiming Universal Credit by yourself and will now claim as a couple
• claimed Universal Credit within the last 6 months but left because you earned too much to continue claiming
• are terminally ill
• have been the victim of domestic violence within the last 6 months
• are 16 or 17 years old and have no parental support
• have been in care, are under 22 and this is your first Universal Credit claim
• have left prison in the last month
• were entitled to contribution-based Jobseekers Allowance (JSA) or Employment and Support Allowance (ESA) within the last 3 months
• were entitled to income-based JSA, ESA or Income Support within the last 3 months and stopped claiming to start working
• were entitled to income-based JSA, ESA or Income Support within the last month
• were entitled to Working Tax Credit, Child Tax Credit or Housing Benefit within the last month

**If you’re getting income from self-employment**

You need to report your earnings every month when you get Universal Credit.

You’ll be sent a ‘Statement of Earnings’ form.

Use this to record any income received and expenses paid during your ‘assessment period’ (your Statement of Earnings form will tell you when this starts and ends).

Report your earnings by calling the Universal Credit helpline within 14 days of the end of each assessment period.

**If your payment is stopped or reduced**

If you don’t keep to your Claimant Commitment, your Universal Credit could be stopped or reduced (‘sanctioned’).

If you receive Council Tax Reduction (also called ‘Council Tax Support’) and get a sanction, contact your local council immediately. They’ll tell you what to do to continue getting support.

If you get a sanction you can:

• ask for the decision to be looked at again
• ask for a ‘hardship payment’
Further information on sanctions can be found here - [www.gov.uk/universal-credit/if-your-payment-is-stopped-or-reduced](http://www.gov.uk/universal-credit/if-your-payment-is-stopped-or-reduced)

**Hardship payments**

You may be able to get a hardship payment if you get a sanction. You’ll repay it through your Universal Credit payments - they’ll be lower until you pay it back. A hardship payment is a reduced amount of your Universal Credit.

**Eligibility**

You can get a hardship payment if you can’t pay for rent, heating, food or hygiene needs for you or your household. You must be 18 or over.

Every case is assessed individually. You’ll have to show that you’ve tried to:

- find the money from somewhere else
- only spend money on essentials

**How to claim**

Call the Universal Credit helpline as detailed on pages 15 and 16 of this Guide.

**Is there a right of appeal?**

A decision about the following can be appealed:

- your initial claim
- the amount of an award
- a sanction

Ask for a ‘mandatory reconsideration’ of the decision. You need to do this within 1 month of the decision. More details can be found here - [www.gov.uk/social-security-child-support-tribunal/before-you-appeal](http://www.gov.uk/social-security-child-support-tribunal/before-you-appeal)

You’ll get a letter saying whether the decision’s been changed.

If you don’t agree with what the letter says, you can usually appeal to the Social Security and Child Support Tribunal. More information can be found here - [www.gov.uk/social-security-child-support-tribunal](http://www.gov.uk/social-security-child-support-tribunal)

The letter will say if you can’t do this.
**Attendance Allowance**

Attendance Allowance is money for people aged 65 or over who have care needs. You may have care needs if you need help with activities of daily living such as getting dressed, going to the toilet or having someone to look after you so you do not hurt yourself. It does not cover mobility needs.

**Eligibility**

You can get Attendance Allowance if you’re 65 or over and the following apply:

- you have a physical disability (including sensory disability, for example blindness), a mental disability (including learning difficulties), or both
- your disability is severe enough for you to need help caring for yourself or someone to supervise you, for your own or someone else’s safety

You must also:

- be in Great Britain when you claim - there are some exceptions, such as members and family members of the Armed Forces
- have been in Great Britain for at least 2 of the last 3 years (this doesn’t apply if you’re a refugee or have humanitarian protection status)
- not be subject to immigration control (unless you’re a sponsored immigrant)

**Assessments**

You might get a letter saying you need to attend an assessment to check your eligibility. The letter will explain why and where you must go. At the assessment, you’ll be asked for identification. You can use a passport or any 3 of the following:

- birth certificate
- a full driving licence
- life assurance policy
- bank statements
How to claim

Use form AA1A to apply for Attendance Allowance by post. This can be downloaded here -

The form comes with notes telling you how to fill it in and where to send it.

You can also get a copy of the form from the Attendance Allowance helpline using the details below.

Attendance Allowance helpline
Telephone: 0345 605 6055
Textphone: 0345 604 5312
Monday to Friday, 8am to 6pm
Find out about call charges - www.gov.uk/call-charges
NHS Services

Occupational Therapy

Introduction
Occupational therapy provides support to people whose health restricts their mobility and prevents them doing the activities that matter.

An occupational therapist can conduct an assessment to identify difficulties applicants may have in everyday life, such as getting to the shops or using an upstairs bathroom, and they will recommend practical solutions.

Why is an assessment important?
In order to make an application for home adaptation or some mobility aids, applicants must have had an Occupational Therapy Assessment. The assessment will identify what support, if any, can be provided by the Local Authority or local health service.

The assessment must be submitted with every application for a home adaptation and some types of mobility aids.

How to request an assessment?
You can get a referral for free occupational therapy through your GP, local council or local clinical commissioning group (CCQ).

If applicants face a wait of longer than eight weeks for this assessment, the MCF may be able to offer a small grant to pay for an assessment by a private provider.

Further information
The NHS Choices’ website contains further information about accessing occupational therapy: www.nhs.uk/CONDITIONS/OCUPATIONAL-THERAPY/Pages/accessing-occupational-therapy.aspx
Convalescent Care

Introduction
The NHS will provide convalescent care which may be relied upon when a person is discharged from hospital after a serious illness, injury, or surgery. The term "convalescent" is defined as a person recovering from illness.

Accessing convalescent care
The MCF does not provide support for convalescent care. If a potential applicant goes into hospital, they shouldn’t be discharged until:

- They are medically fit (this can only be decided by the consultant or someone the consultant has said can make the decision on their behalf).
- They have had an assessment to look at the support they need to be discharged safely.
- They have been given a written care plan that sets out the support they will receive to meet their assessed needs.
- The support described in their care plan has been put in place and it's safe for them to be discharged.

Hospital discharge assessment and care plan
Each hospital has its own discharge policy which outlines how they assess if an individual is fit to be discharged and the type of care plans that can be put in place. Before leaving hospital, the patient should be able to get a copy of this from the ward manager or the hospital’s Patient Advice and Liaison Service (PALS).

Arrangements for convalescent care should be put in place before the patient is discharged from hospital. If a patient or their family carer is unhappy with the suggested care plan, they should report this immediately to the ward manager or hospital’s Patient Advice and Liaison Service (PALS).

Further information
The NHS Choices’ website contains further information on convalescent care:
Carers’ Assessment

If the carer provides care and support to an adult friend or family member, they may be eligible for support from their local council.

This support could include being offered money to pay for things that make caring easier. Or the local authority might offer practical support, such as arranging for someone to step in when the carer needs a short break. It could also put them in touch with local support groups so they have people to talk to.

The Care Act 2014 makes carer’s assessments more widely available to people in caring roles. For more information, read about the Care Act changes for carers here - www.nhs.uk/Conditions/social-care-and-support-guide/Pages/carers-rights-care-act-2014.aspx

If the carer does need some support, they should get in touch with the council covering the area where the person they are caring for lives. The council will be able to provide information and advice about how the assessment will work.

The assessment is an opportunity to discuss with the local council what support or services they need. The assessment will look at how caring affects their life, including for example, physical, mental and emotional needs, and whether they are able or willing to carry on caring.

Why is an assessment required before making an application?

Individuals applying for a respite care grant from the MCF must have undergone a carers’ assessment before making an application. This is to ascertain what support, if any, can be provided by the Local Authority.

How to request an assessment?

Individuals should be offered an assessment by the local council adult social services department of the person being looked after. If they have not been offered one, the department should be contacted by phone, in writing or on-line, and asked for an assessment.

The contact details for the relevant local council adult social services department can be found by visiting www.gov.uk/apply-needs-assessment-social-services and entering the home address of the person being looked after.