

Boosting your income

A guide to benefits and financial help
April 2015-April 2016



**Marie
Curie**

Care and support
through terminal illness

Introduction

The benefits system can seem like a maze. There are many different types of benefit, paid for all sorts of reasons.

This booklet aims to help you understand the main benefits that may be available to you and those close to you. If you're already claiming benefits or entitlements, it's worth reviewing these regularly because you may be able to get more benefits if your circumstances change or if the rules change.

It's a good idea to speak to a benefits adviser who will be able to help you understand your options. The rules are complex and may differ depending on where you live. You can find a benefits adviser by contacting one of the organisations on pages 110-120.

The benefit rates in this booklet apply from April 2015 to April 2016.



We have more information about benefits and entitlements on our website at mariecurie.org.uk/money or call the Marie Curie Support Line on **0800 090 2309***.

* Calls from landlines are free, but there may be a charge if you're calling from a mobile. Check with your mobile provider for details. Calls from any type of phone will be free from 1 July 2015.

Contents

Section one: about the benefits system and social care 7

How the benefits system works	8
National Insurance contributions and credits	10
Getting help from a benefits adviser	12
Welfare reform and changes to benefits	13
Universal Credit	18
Social care and support	21

Section two: benefits and support for people who are ill or disabled 25

Attendance Allowance	26
Disability Living Allowance	30
Personal Independence Payment	36
Employment and Support Allowance	44
Claiming a benefit under the special rules	51
Sick pay if you're in work	54
NHS continuing healthcare	56

Section three: benefits and support for carers 65

Carer's Allowance	66
Carer's Credit	72
Carer Premium	73
Carer's assessment	75

Section four: help with housing and transport costs 79

Housing Benefit	80
Council Tax Support and Rate Relief	84
Discretionary Housing Payments	86
Help with transport costs	88

Section five: other types of support 91

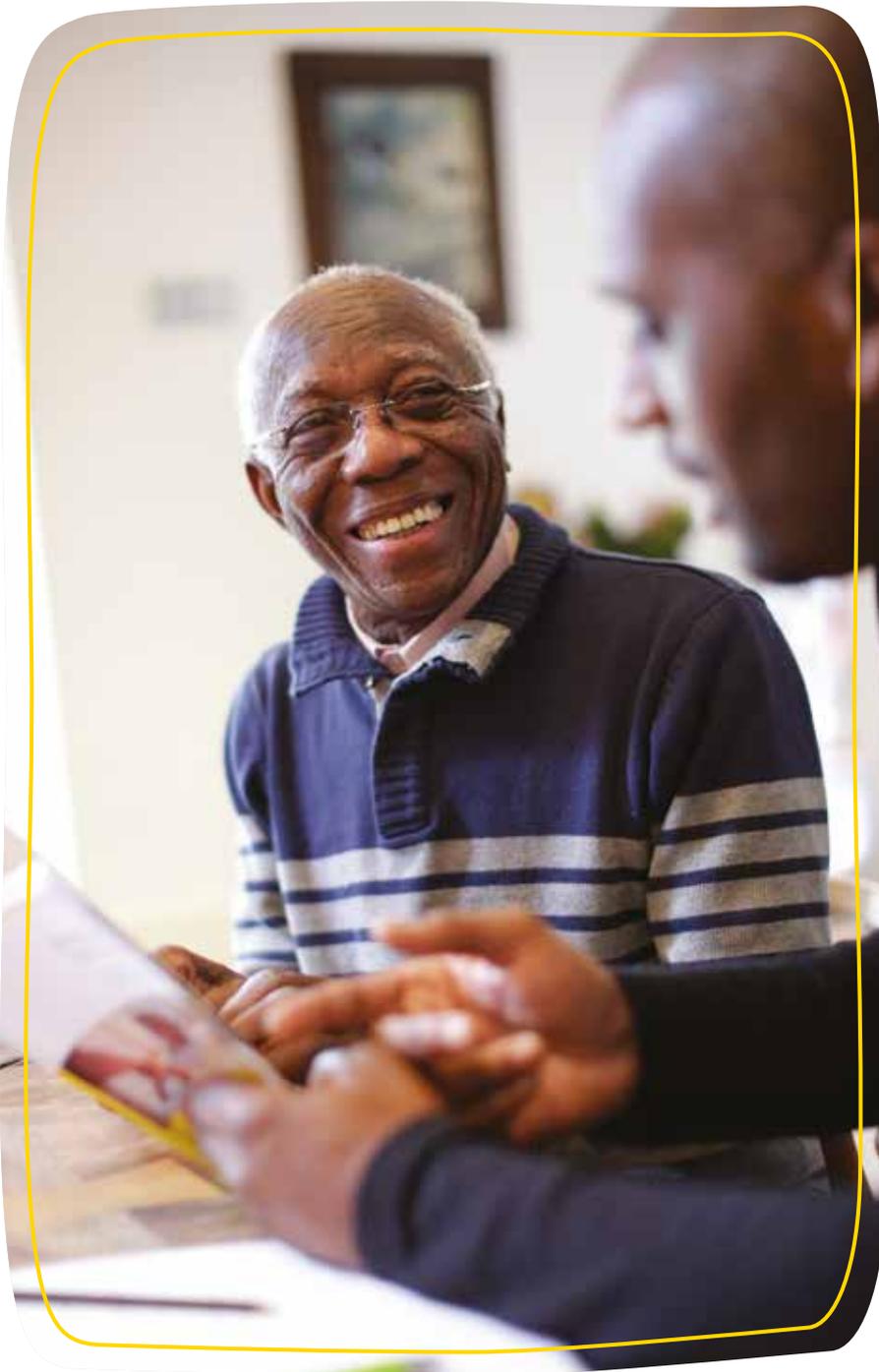
Other benefits and financial support	92
Bereavement benefits for families	94
Equipment and adaptations	98
Grants	100

Section six: appeals and stopping benefits after someone has died 103

Appealing a benefits decision	104
What happens to benefits after a death?	107

Section seven: directory and further information 109

How we can help	110
Useful organisations	112
Further information	120



Layton Thompson/Marie Curie

Section one: about the benefits system and social care

How the benefits system works	8
National Insurance contributions and credits	10
Getting help from a benefits adviser	12
Welfare reform and changes to benefits	13
Universal Credit	18
Social care and support	21

How the benefits system works

The basic idea of the welfare state is that most of us, for most of our lives, will work to earn a living. While we're working, we pay contributions so that if we can't work or retire, we receive benefits that we've paid for. These are **National Insurance benefits** and **State Pension**.

Sometimes the National Insurance benefits you can get aren't enough to live on, or you weren't able to pay enough contributions. That's why there's also a safety net of **means-tested benefits**, which measure how much money you have to live on compared to what you need. These are the benefits that top up your income.

There's also an important group of benefits for people who are ill or disabled and their carers that aren't based on how little money you have or your National Insurance contributions. They include:

- Attendance Allowance
- Disability Living Allowance
- Personal Independence Payment
- Carer's Allowance

If you're ill, disabled or a carer you may be able to get benefits in any or all of the above groups. Sometimes, being on one benefit qualifies you for another, for example, being on a means-tested benefit can help you get free NHS prescriptions if you live in England.



We have more information about free or discounted health services, like NHS prescriptions, at mariecurie.org.uk/ **services** or call the Marie Curie Support Line on **0800 090 2309***.

Benefits in England, Scotland and Wales

The Department for Work and Pensions (DWP) deals with most benefits through a number of different centres and services. These include:

Disability and Carers Service

This service deals with most benefits for people who are ill or disabled, and their carers, including Attendance Allowance, Disability Living Allowance, Personal Independence Payment and Carer's Allowance. It does this through regional Disability Benefits Centres and the Carer's Allowance Unit.

Jobcentre Plus

Jobcentre Plus deals with many of the benefits for people of working age including Employment and Support Allowance, Income Support, Jobseeker's Allowance and Universal Credit.

Pension Service

The Pension Service handles benefits for people of pension age, including State Pension, Pension Credit and Winter Fuel Payments. It's mainly a phone-based service and is supported by local services that can provide face-to-face appointments through libraries, community centres and home visits.

HM Revenue & Customs

HM Revenue & Customs (HMRC), the government department that deals with tax and VAT, also deals with tax credits and Child Benefit.

Local councils

Local councils deal with social care needs, Housing Benefit (help with rent), Council Tax Support and Discretionary Housing Payments.

Benefits in Northern Ireland

Benefits are dealt with differently in Northern Ireland and the nation has its own laws. While the structure and organisation of the system are different from that of Great Britain, the rates of benefits and their qualifying conditions are similar.

The Department for Social Development is responsible for social security matters, and benefits are administered by the **Social Security Agency (SSA)**.

Tax Credits are dealt with by HMRC as the rest of the UK.



See pages 112-120 for contact details of these organisations or call the Marie Curie Support Line on **0800 090 2309***.

National Insurance contributions and credits

National Insurance is the system of collecting contributions from people in work to help pay for benefits when they're out of work or retired.

Most people who are employed or self-employed have to pay National Insurance contributions. Many people who aren't working and on benefits can get National Insurance credits. Both contributions and credits can help you qualify for a State Pension and other benefits that are based on National Insurance contributions.

Benefits that depend on National Insurance contributions

The main ones are: State Pension, contribution-based Jobseeker's Allowance and contributory Employment and Support Allowance.

Benefits that don't depend on National Insurance contributions

There are some benefits that aren't based on National Insurance contributions or how little other money you have. The most important of these benefits for people who are ill or disabled are:

- Attendance Allowance
- Disability Living Allowance
- Personal Independence Payment
- Carer's Allowance

National Insurance credits

You may be entitled to National Insurance credits which, when added to your contributions, fill in any gaps in your contribution record. This means you can still get benefits that are based on National Insurance contributions. The main times when you can get National Insurance credits are if you:

- have been unemployed or off work due to health reasons, for example while you're getting Employment and Support Allowance
- are getting Carer's Allowance or Child Benefit
- are caring for someone even if you're not getting Carer's Allowance

Getting help from a benefits adviser

You may be able to get free help from a benefits adviser. It's a good idea to seek advice when you:

- are trying to find out what you're entitled to claim
- are claiming a benefit for the first time
- want to challenge a benefit decision you disagree with

How to get independent advice

If you have a specific health condition or disability there may be a charity with a dedicated benefits advice service. See pages 112-120 for a list of organisations that give free benefits advice.

There are websites where you can get free information, but beware of information that's out of date and be careful before paying for any information services.

Benefit calculators are also a quick, easy and private way to figure out what you're entitled to. You may want to try the:

- Entitledto benefits calculator at entitledto.co.uk/benefits-calculator
- Turn2us benefits calculator at benefits-calculator.turn2us.org.uk

Welfare reform and changes to benefits

The UK benefits system is currently going through its largest overhaul in 50 years. There will be a long crossover period (lasting several years) as the government phases in new benefits to replace the old ones. This means that, for a few years, the rules for claiming benefits and what you're entitled to will differ depending on where you live, what you need and when you start to claim.

At the time of writing, welfare reform plans in Northern Ireland, which are similar to the plans in Great Britain, have been delayed and it's unknown when they will be passed by the Northern Ireland Assembly.

The changes in England, Scotland and Wales include the introduction of:

- **Personal Independence Payment** to replace Disability Living Allowance for people between the ages of 16 and 64.
- **Universal Credit** to replace six current benefits (Income Support, Housing Benefit, income-related Employment and Support Allowance, income-based Jobseeker's Allowance, Child Tax Credit and Working Tax Credit).
- **The benefit cap**, which limits the total amount of benefit you can claim but doesn't apply if you're terminally ill (based on the definition used by the DWP and SSA – see pages 51-54 for more).
- **The bedroom tax**, which is the popular name for a restriction on the amount of help that some people can get with their rent.
- **Local welfare assistance**, which covers help for some types of emergencies or if you need help setting up a home or staying in your home.
- **Council Tax Support (or Council Tax Reduction)** which helps people on low incomes to pay their council tax bill.

The benefit cap

This is the total amount that you (and your partner and/or children) are allowed to get from the main out-of-work benefits and children's benefits. If the benefits add up to more than your cap level, your Housing Benefit will be reduced. If you're on Universal Credit a similar cap applies. The benefit cap is:

- **£500 a week** for couples (with or without children) and single parents
- **£350 a week** for single people

This is a complex area because not all benefits are taken into account and the benefit cap also doesn't apply to everyone.

You may be able to get Discretionary Housing Payments if your Housing Benefit is restricted due to the benefit cap. See pages 86–87 for more information.

Who is exempt from the benefit cap?

The benefit cap doesn't apply if you:

- are or have recently been in work
- have a terminal illness (as defined by the DWP and SSA)
- have reached Pension Credit age, unless you or your partner are continuing to claim Income Support, income-related Employment and Support Allowance or income-based Jobseeker's Allowance

The benefit cap will also not be applied during a 'grace period' if you were previously working for 50 weeks out of the last 52 weeks, weren't claiming Income Support, Employment and Support Allowance or Jobseeker's Allowance while you were working, and you lost your job through no fault of your own. The grace period lasts for 39 weeks.

Housing Benefit in certain types of supported accommodation also doesn't count towards the benefit cap. Speak to a benefits adviser for more details.

The cap also won't apply if you (or your partner and/or children) get one of the following benefits or would get one of these benefits if you weren't in hospital:

- Personal Independence Payment.
- Disability Living Allowance.
- Attendance Allowance.
- Employment and Support Allowance (Support Group).
- Armed Forces Independence Payment.
- Industrial Injuries Disablement Benefit.
- War Pension.
- Bereavement Allowance (formerly Widow's Pension).
- Working Tax Credit.

More on the benefit cap

For more information, visit [gov.uk/benefit-cap](https://www.gov.uk/benefit-cap) or contact a benefits adviser at one of the organisations listed on pages 112–120.

Bedroom tax

This is the popular name for restrictions on Housing Benefit for people who rent from a council or housing association. People under Pension Credit age who are considered to have spare bedrooms and claim Housing Benefit or Universal Credit (see pages 18–21) will have a deduction made from the help they get with their rent. The deductions apply to almost everyone of working age, even if they're disabled. If you're affected you may be able to get a Discretionary Housing Payment.

Local welfare assistance

The government is making some assistance available through local councils instead of nationally through the DWP. This covers help for some types of emergencies or if you need help setting up a home or staying in your home. The assistance available is different in England, Wales, Scotland and Northern Ireland. They all have a limited budget.

- **England:** You may be able to get help from your local council. If you live in a shire county, this help comes from the county council, not the district or borough council. The assistance schemes have different names in different areas.
- **Wales:** The scheme is called the Discretionary Assistance Fund.
- **Northern Ireland:** The scheme is called the Discretionary Support scheme.
- **Scotland:** The scheme is called the Scottish Welfare Fund.



Layton Thompson/Marie Curie

Council Tax Support (or Council Tax Reduction)

This helps people on low incomes to pay their council tax bill. This, again, is one of the welfare reforms designed to make assistance available at a more local level. The reform means that the amount of help you get varies in different areas because the rules are made by local councils. See pages 84–86 for more.

Changes to defined contribution pension rules

New government rules now make it easier to draw an income or lump sum from your pension pot. However, if you're claiming an income-related benefit, the amount you're entitled to claim might be affected depending on how much you draw out of your pension. Income-related benefits include: Employment and Support Allowance (income based), Housing Benefit, Income Support, Jobseeker's Allowance (income based), Pension Credit and Universal Credit.

If you've reached the age at which you could qualify for Pension Credit (see page 93), you may be treated as if you have some pension income, even if you haven't started to draw out your savings.

It's your responsibility to tell the DWP or SSA if you're taking money from your pension pot, as this may affect the amount you're entitled to claim.

For more information about the rules, contact a benefits adviser from one of the organisations listed on pages 112–120.

Will these changes affect me?

We have tried to make it clear which benefits will be affected by these changes throughout this booklet. However, as the timings for these changes differ across the UK, we cannot be specific about what changes will affect you as an individual and when.

If you're getting one of the benefits that's being phased out, you don't need to do anything until the DWP or SSA in Northern Ireland contacts you and lets you know what you need to do.

For information on when these changes may affect you, there's a helpful timetable on the Money Advice Service website at [moneyadviceservice.org.uk](https://www.moneyadviceservice.org.uk)

Universal Credit

Universal Credit is a new means-tested benefit that is being phased in over several years to replace a range of existing benefits and tax credits.

Universal Credit hasn't been introduced in Northern Ireland.

About Universal Credit

Universal Credit is a new means-tested benefit that will eventually replace the following benefits:

- Child Tax Credit.
- Housing Benefit.

- Income-related Employment and Support Allowance.
- Income-based Jobseeker's Allowance.
- Income Support.
- Working Tax Credit.

The term **means-tested** means that the amount you get varies according to how much or how little other money you have coming in. Other benefits such as Disability Living Allowance and Personal Independence Payment will remain largely unchanged by the introduction of Universal Credit.

Who is Universal Credit for?

To claim Universal Credit you must:

- be of working age, which is normally from age 18 (16 or 17 in some cases) up to the qualifying age for Pension Credit (visit **GOV.uk** for more on Pension Credit age)
- pass the UK residence and presence tests, which means you must be habitually resident (intend to settle), have a right to reside and not be subject to immigration control (these complex restrictions on migrants are not covered here – seek advice if they apply to you)
- not be in education (except where you're in education and claiming Disability Living Allowance or Personal Independence Payment with a limited capability for work)
- have accepted a claimant commitment (see page 20)
- have capital or savings under £16,000.01
- have earnings or income that aren't too high for any Universal Credit to be paid

How much could you get?

The amount you're paid depends on your circumstances. It's worked out by comparing what you need to live on with any money you have coming in. The amount you need to live on includes amounts for

children, for having a disability or health condition, and for housing costs if you pay rent or have a mortgage.

The total amount the law says you need to live on is your Universal Credit, unless you have earnings or other income. As with other means-tested benefits, some earnings and some income is taken into account in full, some in part and some is ignored. For example, any income you may be getting from Disability Living Allowance, Attendance Allowance or Personal Independence Payment is ignored.

As your earnings or other income go up, the amount of Universal Credit is gradually reduced until there's none left.

If you're on any of the existing means-tested benefits and are moved onto Universal Credit, you'll normally keep the same level of benefit as long as your circumstances remain the same. This is called transitional protection.

Your claimant commitment

To qualify, you may need to do certain things like look for a job. This is called your claimant commitment. You're likely to have your Universal Credit reduced if you fail to comply. If this happens, you may be able to get a hardship payment. However, the work-related requirements won't apply to you if you're living with a terminal illness within the definition used by the DWP and SSA. The requirements are also less demanding for carers and disabled people than for most other people.

Extra Universal Credit for having a disability, health condition or caring for someone

The only way to get extra Universal Credit for having a disability or health condition is if the DWP decides that you have limited capability for work or limited capability for work-related activity.

The tests for these are the same as those for the work capability assessment for Employment and Support Allowance (see page 47).

You may also be able to get extra Universal Credit if you're a carer.

How to claim

Almost all claims must be made online at [gov.uk/apply-universal-credit](https://www.gov.uk/apply-universal-credit) There may be alternative ways of claiming if you cannot claim online. These include by phone or, in exceptional circumstances, with the support of an organisation like your local council.

If you qualify

Normally, your Universal Credit will be paid in arrears as a single payment each month into your bank or building society account.

If your claim is rejected

If you're refused Universal Credit or you disagree with the written decision, you have one month to ask for the decision to be reconsidered. If you're not happy with the outcome, you have another month to appeal the decision (see pages 104-106).

Social care and support

Social care and support is available from your local council (local health and social care trust in Northern Ireland) if you have care needs and can't meet the costs. Social care is for people with a disability, who are over 18, and need of support with everyday tasks like:

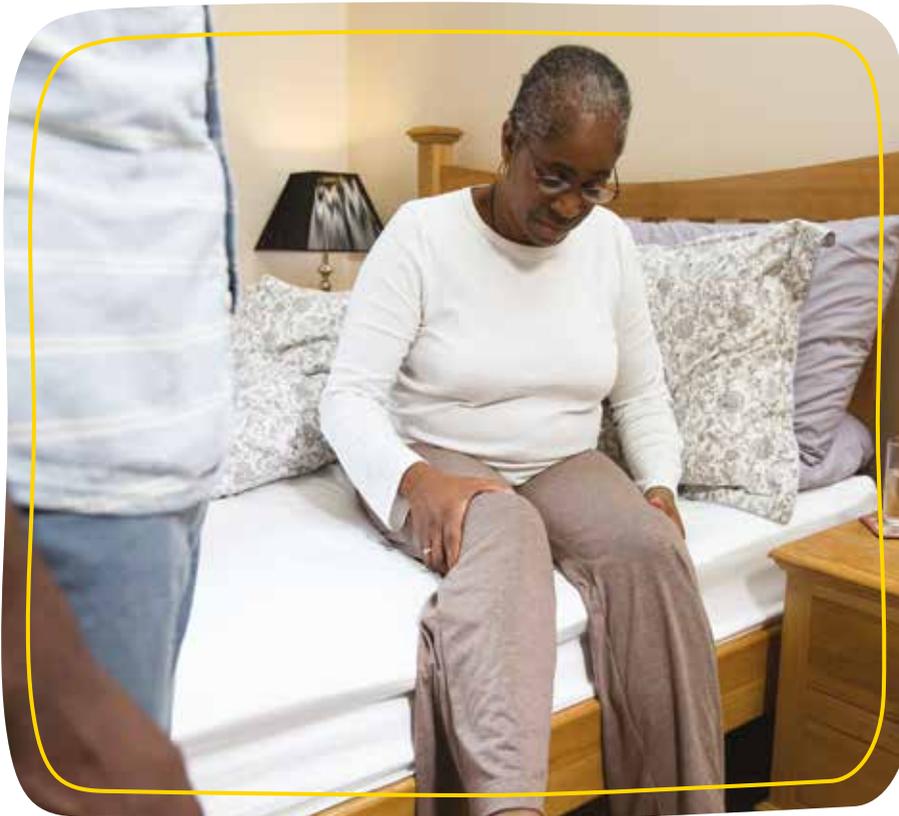
- getting out of bed
- getting dressed
- cooking and eating
- seeing friends and family
- caring for others (eg, toileting and showering)

Social care is also available for children, but it's provided slightly differently.

The way social care is handled is changing in England and Wales. These changes might affect you if you're ill, disabled or a carer. We've outlined some of these on the next page.

England

You can find out what help you can get by asking your local council's social services department for a **care and support needs assessment** or a **carer's assessment** for your carer (see pages 75-78 for more on carer's assessments).



Chris Renton/Marie Curie

Changes in England

From April 2015 there will be changes to the way social care services are delivered in England. This will include stronger rights to support carers. They also mean that councils must, by law, provide information on:

- what care and support services are available
- how people can access them
- how to get financial advice about care and support
- how to raise concerns about the wellbeing of anyone with care and support needs

These changes are happening under the Care Act 2014, which only covers England and social care for adults. The Children and Families Act 2014, which only applies in England, covers young carers and parents caring for children under 18.



You can read more about these changes at mariecurie.org.uk/money or call the Marie Curie Support Line on **0800 090 2309***.

Wales

You can find out what help you can get by asking your local council's social services department for a **care and support needs assessment** or a **carer's assessment** for your carer (see pages 75-78 for more on carer's assessments).

Changes in Wales

The Social Services and Well-being (Wales) Act 2014 aims to improve the wellbeing of people who need care and support, and carers who need support, in Wales. It also aims to improve access to information and focus on prevention and early intervention. You can find out more about this on the Welsh Government website at gov.wales

Northern Ireland

Getting help and support in Northern Ireland usually begins by asking for an **assessment of need** from your local health and social care trust. This should lead to a care plan to get you the services and support you need, or to direct payments so that you can choose and buy the services yourself. Visit **nidirect.gov.uk** for more information.

Scotland

In Scotland social care services departments are known as social work departments. Asking for an **assessment of need** and getting a care plan to provide a range of services and/or direct payments is similar to that in the rest of the UK. However, there are two important differences in Scotland:

- There are other options as to how social care is delivered, such as self-directed support.
- If you're 65 or over and get personal care or personal support care at home, you should get this free of charge.

Paying for social care services

Councils can charge for care services. Some local authorities only charge for some services, for example, meals on wheels or home helps.

If you live in Scotland, are 65 or over, and get personal care or personal support care at home, you should get this for free.



We have more information about getting support from your local council at **mariecurie.org.uk/socialcare** or contact the Marie Curie Support Line on **0800 090 2309***.

Section two: benefits and support for people who are ill or disabled

Attendance Allowance	26
Disability Living Allowance	30
Personal Independence Payment	36
Employment and Support Allowance	44
Claiming a benefit under the special rules	51
Sick pay if you're in work	54
NHS continuing healthcare	56

Attendance Allowance

Attendance Allowance is a benefit for people aged 65 or over who have a physical or mental disability and need help with personal care or supervision to remain safe. It's usually paid on top of any earnings, social security benefits or other income you may have. It's not means tested, so getting it doesn't depend on how much money you have to live. It's also not based on whether you have paid National Insurance contributions.

You can claim this benefit whether you're in or out of work. It can also help you to get other benefits. You don't need to have a carer, or someone helping you, to qualify. What matters is the help you need. You may spend it on anything you like.

If you're aged between 16 and 64 and live in England, Wales or Scotland, you may be able to claim Personal Independent Payment instead. If you live in Northern Ireland, or you're under 16, you may be able to claim Disability Living Allowance (see pages 30-36).

People living with a terminal illness

If you're terminally ill and your death can reasonably be expected within the next six months, you can claim under the special rules (see pages 51-54). This means your claim will be fast-tracked and if you qualify, you'll get the benefit at the highest rate. This timeframe is set by the DWP and SSA.

People who aren't terminally ill

Attendance Allowance is paid because of the effect your illness or disability has on your everyday life, and how much care you need because of this. To get the benefit, you must need care, help or support with things like getting in and out of bed, bathing, toileting,

dressing, eating or dealing with medication **or** need supervision to prevent danger to yourself or others. You can get Attendance Allowance once you've had daily living needs or mobility problems for at least six months.

If you have a terminal illness, but your death **can't** reasonably be expected within the next six months, you'll have to claim in this way.

How much could you get?

There are two rates, which depend on the help or care you need and the amount of time you need someone to be with in case of accidents or emergencies:

- Lower rate of **£55.10** a week.
- Higher rate of **£82.30** a week.

The rate works out lower for people who only have daytime needs and higher for people who have both daytime and night time needs.

How to claim

You can start your claim by phoning the Attendance Allowance Helpline (see page 112) or get the claim form (form AA1A) from **GOV.uk** In Northern Ireland, call the Benefit Enquiry Line (see page 113) or get a claim form from **nidirect.gov.uk**

Generally it's better to phone the helpline, rather than use the online form, because your claim can be backdated to the date of your call. A claim form issued by the DWP or SSA will be date stamped and will come with a postage-paid envelope addressed to the Disability Benefits Centre that will be handling the initial claim.

If you return the completed claim form within six weeks, the date you phoned and asked for the form counts as the date of claim. If you

take longer than six weeks to return the completed form, explain why on the form. If the delay is reasonable, the time limit can be extended. If not, the date of claim is the day the completed claim form reaches the Disability Benefits Centre.

If you download a form from one of the websites, the date of claim is the day the completed form reaches the Disability Benefits Centre. You can't backdate a claim for Attendance Allowance to an earlier date.

If you're claiming under the special rules (see pages 51-54) you'll be asked to send a factual statement (called a DS 1500 report) from your doctor or consultant to the DWP or SSA when you make the claim. Your doctor should have copies of these forms.

Claiming on someone else's behalf

You don't have to make the claim or be present when the claim is made or know the claim is being made. Another person, including your doctor, can claim the benefit on your behalf.

If you qualify as terminally ill

If the DWP or SSA decide that you have a terminal illness under their definition, you'll be awarded Attendance Allowance at the higher rate from your claim date. Awards are usually made for three years, so they can be looked at again after this time.

If the DWP or SSA decide that you don't satisfy their terminal illness test, they'll go on to consider your claim under the ordinary assessment for the benefit.

The assessment process if you don't qualify as terminally ill

You must set out how you need care in your claim form. This can include things like help or support with getting in and out of bed **or** needing supervision to prevent danger to yourself or others. You may have a visit from a doctor or healthcare professional approved by the DWP or SSA to report on your needs. This process can take several months.

If your claim is accepted

Attendance Allowance is normally paid direct into your bank account every four weeks in arrears. It can be paid weekly in advance if you're terminally ill. You can spend it as you wish – you don't have to spend it on disability-related needs. Payment normally stops if you go into hospital or a care home for 28 days or longer.

If your claim is rejected

If your claim is refused or you disagree with the SSA or DWP's written decision, you have one month to ask for the decision to be reconsidered. This is called mandatory reconsideration. Mandatory reconsideration isn't currently available in Northern Ireland so you will go through the appeals process instead. See pages 104-106 for more information.

If you're already getting Attendance Allowance and become terminally ill, see pages 51-54 for claiming under the special rules.

Disability Living Allowance

This is a benefit for people who have a physical or mental disability and need help with personal care or supervision to remain safe or need help with getting around. It's similar to Personal Independence Payment and Attendance Allowance.

You can no longer make a new claim for Disability Living Allowance unless you live in Northern Ireland or you're under 16 years old. This is because it's being replaced by Personal Independence Payment in England, Scotland and Wales (see pages 36-43 for more information).

This chapter explains what will happen if you're already getting Disability Living Allowance and changing to the Personal Independence Payment. It also has information about how to apply for Disability Living Allowance if you live in Northern Ireland.

People already getting Disability Living Allowance

Everyone on Disability Living Allowance will be moved to Personal Independence Payment over a period that's expected to last to 2017. The date this happens for you will depend on where you live and why your claim has to change. Your claim needs to change:

- when you renew it (on the expiry of your existing **fixed term** award)
- if you need to amend your claim because of a change of circumstances, for example, because your health is worse or your illness has become terminal

Do you live in a Personal Independence Payment area?

The PIP checker at gov.uk/pip-checker will tell you if you live in an area where the benefit has been introduced for **existing** claimants.

- If you live in a Personal Independence Payment area and your claim has to change, you'll be invited to claim Personal Independence Payment instead of renewing your Disability Living Allowance. You won't have a choice about this.
- If you don't live in a Personal Independence Payment area and your claim has to change, you can renew your Disability Living Allowance.

Personal Independence Payment will eventually be introduced for all **existing** Disability Living Allowance claimants throughout the UK. People with an existing **indefinite** (not fixed term) award of Disability Living Allowance and no change in circumstances won't be moved to Personal Independence Payment until October 2015 at the earliest.

If you're already getting Disability Living Allowance and become terminally ill

If you're getting Disability Living Allowance, but not at the highest rate, and your illness becomes terminal, it counts as a change in circumstances.

If you **don't** live in an area in which Personal Independence Payment has been introduced for **existing** Disability Living Allowance claimants, ask for your award to be upgraded on the basis that you're now terminally ill. See pages 51-54 for more details see about claiming benefits under the special rules.

If you **do** live in an area in which Personal Independence Payment has been introduced for **existing** Disability Living Allowance

claimants you should claim the benefit under the special rules. You may miss out on the backdating described above because new claims for Personal Independence Payment can't be backdated.

Claiming Personal Independence Payment if you're an existing Disability Living Allowance claimant

Being invited to claim PIP

The DWP will send you a letter telling you to start claiming Personal Independence Payment. You have four weeks to respond. You won't be able to stay on Disability Living Allowance, but as long as you claim Personal Independence Payment by the date given on the letter, your benefit payment continues while you're assessed for the new benefit. You may be able to get more time for claiming, so if you do need more time, contact the DWP and explain why.

Second invitation to claim

If you don't claim Personal Independence Payment by the date given on the letter, your Disability Living Allowance will be suspended. The DWP must write to tell you this and give you another four weeks to claim Personal Independence Payment. As long as you claim Personal Independence Payment by the date given, your Disability Living Allowance payments will start again. If you don't claim Personal Independence Payment during this period, your Disability Living Allowance entitlement ends. You can still make a claim for Personal Independence Payment after this, but you won't be paid Disability Living Allowance in the meantime.

Getting the decision

When you get a decision about your claim for Personal Independence Payment, entitlement to Disability Living Allowance ends four weeks after the next pay day and the Personal Independence Payment award will begin. Even if your Personal

Independence Payment claim has been turned down, Disability Living Allowance entitlement runs on for four weeks.

If your claim is rejected

If you're refused Personal Independence Payment or you disagree with the DWP's written decision, you have one month to ask for the decision to be reconsidered, this is called mandatory reconsideration. Mandatory reconsideration isn't currently available in Northern Ireland so you will go through the appeals process instead. See pages 104-106 for more information on appealing a benefits decision.



Simon Rawles/Marie Curie

Claiming Disability Living Allowance if you live in Northern Ireland

Special rules for people living with a terminal illness

If your death can reasonably be expected within the next six months, you can get Disability Living Allowance under the special rules in the same way as Personal Independence Payment and Attendance Allowance – see pages 51–54. This means your claim will be fast-tracked and you'll get the benefit at the highest rate.

The assessment process

You can start your claim by phoning the Benefit Enquiry Line (see page 113) or download a claim form from nidirect.gov.uk. It's usually better to phone the helpline, rather than use the online form, because your claim can be backdated to the date of your call.

The SSA will issue a date-stamped claim form, which will come with a postage-paid envelope addressed to the Disability Benefits Centre that will be handling the initial claim. If you return the completed claim form within six weeks, the date you phoned and asked for the form counts as the date of claim. If you take longer than six weeks to return the completed form, explain why on the form. If the delay is reasonable, the time limit can be extended. If not, the date of claim is the day the completed claim form reaches the Disability Benefits Centre.

If you download a claim form, the date of claim is the day the completed form reaches the Disability Benefits Centre. There is no possibility of backdating a claim to an earlier date.

If you're claiming under the special rules, you'll be asked to send a factual statement (called a DS 1500 report) from your doctor or consultant to the SSA when you make the claim. Your doctor should have copies of the DS 1500 form.

Claiming on someone else's behalf

Someone else can make the first phone call to claim on your behalf, for example a family member or a support worker, but you need to be with them when they do so unless they're making a claim for you under the special rules.

If you're terminally ill (as defined by the SSA) you don't have to make the claim or be present when the claim is made or know the claim is being made. Another person, including your doctor, can claim the benefit on your behalf.

If you qualify as terminally ill

You'll be awarded the benefit at the higher rate and it will be backdated from your date of claim. Awards are usually made for three years so they can be looked at again if you live longer than originally expected.

If the SSA decides that you don't satisfy its terminal illness test, it will consider your claim under the ordinary assessment for the benefit.

The assessment process if you don't qualify as terminally ill

In your claim form you must set out how you need care, help or support with things like getting in and out of bed, bathing, toileting, dressing, eating or dealing with medication or need supervision to prevent danger to yourself or others. You must also give details about how your disability or condition causes you any difficulty getting around outdoors – for which you can be awarded the mobility component. You may have a visit from a doctor or healthcare professional approved by the SSA to report on your needs. The process can take weeks or months.

How much could you get?

The rates are the same as they are for Personal Independence Payment (see page 38), except it's possible to get a further lower rate of care component than you do within the Personal Independence Payment rates and rules.

If your claim is accepted

The benefit is normally paid direct into your bank account every four weeks in arrears. It can be paid weekly in advance if you're terminally ill. You can spend it as you wish: you don't have to spend it on disability-related needs. Payment normally stops if you go into hospital or a care home for 28 days or longer.

If your claim is rejected

If you're refused the benefit or you disagree with the SSA's written decision, you have one month within which to ask for the decision to be reconsidered. If you're not happy with the outcome of the reconsideration, you have a further month to appeal. See pages 104-106 for more information on appealing a benefits decision.

Personal Independence Payment

Personal Independence Payment is a tax-free benefit that helps with the extra costs of having a disability or health condition. You may also qualify if you need help with personal care or getting around. It's a new benefit that's gradually replacing Disability Living Allowance for people of working age.

It's not means-tested, so getting it doesn't depend on how much money you or your partner have coming in. It's not based on whether you have paid National Insurance contributions either.

You can claim the benefit whether you're in or out of work. It's almost always paid on top of any earnings or social security benefits or other income you may have, and isn't affected by savings or capital you own. You don't need to have a carer, or someone helping you, to qualify for Personal Independence Payment. What matters is the help you need. You may spend it on anything you like. The benefit can also help you to get other benefits.

If you live in Northern Ireland, read our information about Disability Living Allowance on pages 34-36 because Personal Independence Payment hasn't been introduced there yet.

Who is Personal Independence Payment for?

You may be able to claim Personal Independence Payment to help with the extra costs you have because of your disability-related needs or your health condition if you're of working age. Working age means over 16 and under 65.

If you're 65 or over you may be able to claim Attendance Allowance (see pages 26-29), and if you're under 16 you may be able to claim Disability Living Allowance (see pages 30-36). If you're already getting Disability Living Allowance you may be able to stay on the benefit or you may have to move on to Personal Independence Payment.

People living with a terminal illness

If you're living with a terminal illness you can claim Personal Independence Payment in a different way to other people. If your death can reasonably be expected within the next six months, you may be able to have your claim fast-tracked and get the benefit at the highest rate. This process is known as claiming under the special rules – see pages 51-54 for more information.

People who don't meet the special rules

Personal Independence Payment is paid because of the effect of a disability on your everyday life, and the care you need because of this. This part of the benefit is called **daily living needs**. If you have difficulty in getting around, this is referred to as your **mobility needs**.

You can be awarded Personal Independence Payment once you have had daily living needs or mobility needs for at least three months, and if you expect to continue having these needs for at least another nine months. If you have a terminal illness but your death can't reasonably be expected within the next six months, you'll have to claim in this way.

How much could you get?

The benefit has two components:

- **daily living component** for help participating in everyday life
- **mobility component** for help with getting around

Each component has two rates: a standard rate and an enhanced rate.

Daily living component

- Standard rate of **£55.10 a week**.
- Enhanced rate of **£82.30 a week**.

Mobility component

- Standard rate of **£21.80 a week**.
- Enhanced rate of **£57.45 a week**.

The rate that you're paid depends on your ability to carry out everyday activities, or whether your mobility is **limited or severely**

limited. This is tested under an assessment, except if you're living with a terminal illness under the definition used by the DWP and claim under the special rules. In this case the assessment process only applies to mobility, and you should get the daily living component at the enhanced rate without an assessment.

How to claim

You can start your claim by phoning the free claim line (see page 114). This call should last about 15 minutes and you'll be asked for some basic information, including questions relating to the special rules if they're relevant. The date of your claim will be the date of this phone call, as long as you provide the information required. There's no possibility of backdating a claim for Personal Independence Payment to an earlier date.

You can ask for a paper claim form if you're unable to start the claim by phone. You can't apply online at the moment.

Please note that Personal Independence Payment hasn't been introduced to Northern Ireland yet.

Forms to complete

If you're not claiming under the special rules you should be sent a form to complete called *How your disability affects you*. The form is designed to help you describe how your condition affects your daily life. You have one month to return the form.

If you're claiming under the special rules, you'll be asked to send a factual statement (called a DS 1500 report) from your doctor or consultant to the DWP when you make the claim. Your doctor should have copies of DS 1500 forms.

Claiming on someone else's behalf

Someone else can make the first phone call to claim on your behalf, for example a family member or a support worker, but you need to be with them when they do so unless they're making a claim for you under the special rules.

If you're living with a terminal illness within the definition used by the DWP you don't have to make the claim or be present when it's made. You don't even need to know it's being made. Another person, including your doctor, can claim the benefit on your behalf.

If you qualify

If you've claimed the benefit under the special rules, the DWP decides if you satisfy the test of terminal illness. This decision will be based on information provided by the healthcare professional assigned to your case and by your doctor or consultant in the DS1500 report.

If the DWP decides that you meet the terminal illness conditions, you'll be awarded the daily living component at the enhanced rate. Awards are usually made for three years, so they can be looked at again after that time.

If the DWP thinks that you don't satisfy the terminal illness test, it will go on to consider your claim under the ordinary assessment for the benefit.

The assessment process

If you're not claiming due to a terminal illness within the definition used by the DWP, you're tested under the ordinary assessment process. The assessment is points-related and is based on your ability to perform 12 activities. These activities relate to your daily living needs and your mobility needs.

The 10 daily living activities are:

1. Preparing food.
2. Taking nutrition.
3. Managing therapy or monitoring a health condition.
4. Washing and bathing.
5. Managing toilet needs or incontinence.
6. Dressing and undressing.
7. Communicating verbally.
8. Reading and understanding signs, symbols and words.
9. Engaging with other people face to face.
10. Making budgeting decisions.

The two mobility activities are:

1. Planning and following journeys.
2. Moving around.

Within each of these activities is a range of tasks of varying degrees of difficulty. You score points when you're not able to complete a task described. The number of points you score will determine whether or not you're entitled to either component of the benefit and, if you are, at what rate.

There's a full description of how many points can be scored in the assessment, and how many you need to get an award, on the Disability Rights UK website (see page 116).

If your claim is accepted

Personal Independence Payment is normally paid into your bank account every four weeks in arrears. This may be paid weekly in advance if you're living with a terminal illness. You can spend it as you wish: you don't have to spend it on disability-related needs. Payment normally stops if you go into hospital or a care home for 28 days or longer.

If your claim is rejected

If you're refused Personal Independence Payment or you disagree with the DWP's written decision, you have one month within which to ask for the decision to be reconsidered. See pages 104-106 for more on reconsiderations and appeals.

If you're already getting Disability Living Allowance

Everyone who's on Disability Living Allowance will eventually be moved on to Personal Independence Payment. This will happen if you live in an area that is included in the move to Personal Independence Payment and:

- either you need to renew your claim (on the expiry of your existing award)
- or you need to amend your claim because of a change of circumstances (this could be because your health had got worse or you've become terminally ill).

You can check to see if your area is included in the move at [gov.uk/pip-checker](https://www.gov.uk/pip-checker)

If the DWP puts you through the move from Disability Living Allowance to Personal Independence Payment and your claim for Personal Independence Payment is refused, or you disagree with the DWP written decision, you have one month to ask for the decision to be reconsidered. If you're not happy with the outcome, you have a further month to appeal.

If you're already getting Personal Independence Payment and become terminally ill

If you're already getting Personal Independence Payment but not at the enhanced rate, and become terminally ill, you don't have to make a separate claim under the special rules. Instead, contact the

helpline (see page 112) or write to the address on your award letter and ask for the award to be upgraded.

If you're successful, the new higher rate of the benefit can be backdated to the date you first became terminally ill. You'll need to tell the DWP within one month of this date to get the claim backdated. If it has been longer than one month, the higher rate can still be fully backdated if special circumstances caused the delay. If this is the case, contact the DWP and explain why it has taken you longer, for example because you were too ill or distressed to cope.



Layton Thompson/Marie Curie

Employment and Support Allowance

Employment and Support Allowance is the main social security benefit for people whose ability to work is limited by ill health or disability. It's a complicated benefit, so it's a good idea to get help from a benefits adviser before you apply.

There are two types: **contributory Employment and Support Allowance** and **income-related Employment and Support Allowance**.

Contributory Employment and Support Allowance is linked to your National Insurance contributions. You must have paid contributions over a certain number of years to be entitled. Most awards of contributory Employment and Support Allowance are limited to 12 months, apart from in Northern Ireland.

Income-related Employment and Support Allowance is the means-tested element of the benefit. Means-tested benefits are the ones that vary depending on how much or how little money you have coming in. This element provides for your basic living expenses (and those of your partner, if you have one). It can be paid on its own or as a top-up to contributory Employment and Support Allowance. It can also help with getting other benefits.

If you have a terminal illness, your claim could be dealt with more quickly under the special rules (see pages 51-54).

Who can apply?

You can apply if you're aged between 16 and State Pension age, which is gradually changing. Visit **GOV.uk** to find out your State Pension age.

Most people on Employment and Support Allowance are out of work but you could be in a job and on long-term sick leave. You could also be employed or self-employed and doing permitted work. In some cases being a student can qualify.

You can't claim if you're receiving Jobseeker's Allowance, Statutory Sick Pay or Universal Credit, which is replacing income-related Employment and Support Allowance.

How much could you get?

The amount you get will depend on two things: whether you can get contributory and/or income-related Employment and Support Allowance, and the outcome of the work capability assessment.

When you claim, the DWP or SSA will check if you've paid enough National Insurance contributions recently to be entitled to contributory Employment and Support Allowance. Then it will work out if you can get any income-related Employment and Support Allowance instead or as well.

From the date of your claim up to when you're tested under the work capability assessment, you'll get the benefit at a basic rate of at least **£57.35 a week** for a single person with no other money coming in.

After you're assessed, three things can happen. You may be:

- refused the benefit, which means you may have to sign on for Jobseeker's Allowance (see page 92)
- placed in the **work-related activity group**, which gives an additional **£28.75 a week**
- placed in the **support group**, which gives an additional **£35.75 a week**

As well as increasing the amount of benefit you get, the group you're placed in also affects the responsibilities you must meet to stay on the benefit, and whether your benefit award may be time-limited.

If you have limited ability to work because you're ill or disabled, you're placed in the work-related activity group. If you cannot work at all, you're placed in the support group.

If you have a terminal illness (using the DWP/SSA definition) and are claiming Employment and Support Allowance for that reason:

- you should be placed in the support group immediately
- the support component can be paid from the beginning of your benefit award
- you can be paid from your date of claim (without having to go unpaid during the first seven days, known as waiting days)

How to claim

You can download an application form from **GOV.uk** or if you live in Northern Ireland, from **nidirect.gov.uk** or contact one of the helplines listed on pages 110-120.

With a terminal illness, your claim can be dealt with under the special rules and fast-tracked. Once you've made the claim, the DWP or SSA will normally contact your GP, consultant or specialist nurse to confirm that you're terminally ill. Once it receives confirmation, you'll be put in the support group and won't have to take the work capability assessment.

If you don't have a terminal illness under the DWP and SSA's definition, you may want to get help from an advice centre when completing the claim form and the self-assessment that follows it. See pages 110-120 for details of advice centres that can help.

Backdating

Whether or not you're claiming due to terminal illness, your Employment and Support Allowance award can be backdated for up to three months before you made your claim. You'll need to ask for backdating and meet all the conditions during that time. You'll need a fit note (medical certificate) from your doctor to confirm that you weren't fit for work during this period.

The work capability assessment process

If you have a terminal illness the work capability assessment doesn't apply and you're treated as having a limited capability for work. You can also be treated as having a limited capability for work in other situations, including if you're:

- a hospital inpatient
- receiving treatment for cancer (or are likely to receive it within six months) with chemotherapy or radiotherapy, or you're recovering from that treatment

Otherwise you must take a work capability assessment to decide whether you have limited capability for work and/or limited capability for work-related activity.

There's usually a self-assessment questionnaire that you need to fill in followed by a face-to-face medical assessment. This takes place at an examination centre and is carried out by a healthcare professional.

The assessment

The assessment looks at a range of activities with scores ranging from zero to 15 points. They describe tasks of varying degrees of difficulty. You score points when you're not able to perform a task described. If you score 15 points, you're assessed as having a limited

capability for work. These points can be scored in just one activity or from any of the activities in either the physical or the mental parts of the assessment added together.

For more information about the activities, visit mariecurie.org.uk/esa or contact the Marie Curie Support Line on **0800 090 2309***.

Limited capability for work-related activity

The work capability assessment is also used to decide if you have limited capability for work-related activity and should be placed in the support group.

If you qualify

If you qualify for contributory Employment and Support Allowance, and are placed in the work-related activity group, your benefit award is limited to 12 months. This time limit doesn't apply to people in Northern Ireland or anyone in the support group.

If your contributory Employment and Support Allowance runs out you may be:

- entitled to income-related Employment and Support Allowance instead – Jobcentre Plus should tell you how to be assessed for this when it contacts you to tell you that your contributory Employment and Support Allowance is ending
- able to claim it again in the future if your condition gets worse (so that you can be placed in the support group), but you must have continuously had a limited capability for work since your contributory Employment and Support Allowance stopped

For more details about this, see the Disability Rights UK website (see page 116).

If your claim is rejected

If you disagree with a decision related to your claim, you must first ask the DWP or SSA to reconsider it. You can do this over the phone, but you should confirm your request in writing and keep a copy of the letter.

If the DWP or SSA has refused your claim, you won't be able to get the benefit while they reconsider their decision, unless your request for reconsideration is about the work capability assessment. If you've been claiming Jobseeker's Allowance in the meantime, you'll need to ask the DWP or SSA to re-instate your Employment and Support Allowance. If your request for reconsideration isn't related to the work capability assessment, you may wish to claim Jobseeker's Allowance while you wait for a decision.

If you're unhappy with the DWP or SSA's decision, you can make an appeal – see pages 104-106 for details.

What else do I need to know?

How Employment Support Allowance helps you get other benefits

If you're awarded income-related Employment and Support Allowance, you may be entitled to:

- full help with your rent (Housing Benefit)
- help with mortgage interest payments and certain other housing costs
- help from your local council towards your council tax

If you're only entitled to contributory Employment and Support Allowance, you'll need to satisfy a means test to qualify for help with rent and council tax.

If you're awarded income-related Employment and Support Allowance, you qualify for automatic assistance with NHS costs like prescriptions, vouchers for glasses and hospital travel fares. If you're only entitled to contributory Employment and Support Allowance, you can apply for help with NHS charges under the low-income scheme, but this is means tested.

Income-related Employment and Support Allowance may also entitle you to Funeral Payments, Winter Fuel Payments and Maternity Grants.

Permitted work

If you're claiming Employment and Support Allowance, the general rule is if you do any work, you're treated as capable of work for that week. However, you're allowed to do certain types of permitted work, without it affecting your Employment and Support Allowance. You're allowed to earn up to:

- £20 a week on average for an unlimited period
- £104 a week for a maximum of 52 weeks, unless you've been placed in the support group in which case you can do it for an unlimited period

You don't need the support of your doctor to do permitted work, but it's a good idea to tell Jobcentre Plus (Jobs and Benefits office in Northern Ireland) before you start, to ensure that the work is permitted.

The benefit cap

The benefit cap will affect you if you're placed in the work-related activity group, but won't affect you if you're placed in the support group category. See page 14 for more information.

Claiming a benefit under the special rules

If you're living with a terminal illness and applying for disability benefits, you may be able to get your claim fast-tracked by applying under the special rules. The following benefits are covered by the special rules:

- Personal Independence Payment.
- Disability Living Allowance.
- Attendance Allowance.
- Employment and Support Allowance.
- Incapacity Benefit.

These benefits can't be backdated so you might want to claim as soon as you're able.

About the special rules

The DWP and SSA in Northern Ireland use a specific definition of what it means to be living with a terminal illness and claiming under the special rules. These agencies say that you're living with a terminal illness when your death **'can reasonably be expected' within the next six months.**

If this definition applies to you, it means you don't have to serve the three-month qualifying period to get Disability Living Allowance, Personal Independence Payment or Attendance Allowance. Your claim is given high priority and the DWP or SSA will try to give you a decision within eight working days.

Depending on which benefit you claim, you'll automatically qualify for the:

- highest rate of the Disability Living Allowance care component

- enhanced rate of the Personal Independence Payment daily living component
- higher rate of Attendance Allowance

In each case this is **£82.30** a week.

If you have a terminal illness but your death **can't** reasonably be expected within the next six months, you won't qualify under the special rules.

The mobility component

Both Personal Independence Payment and Disability Living Allowance include a mobility component. You won't automatically get this under the special rules. The normal rules of assessment still apply to you, but not the three-month qualifying period.

If you're claiming Personal Independence Payment under the special rules, you'll be asked questions about your mobility when you start the claim. This should speed up the decision on the mobility component and ensure you don't have to complete another claim form.

It's no longer possible to claim Disability Living Allowance as an adult in England, Scotland and Wales for the first time. You can still claim Disability Living Allowance in Northern Ireland.

What if you live longer?

The special rules don't put an upper limit on how long you live. You can carry on qualifying under the special rules if you live longer than is reasonably expected. If you're told that your death could reasonably be expected at any time in the next five to ten months, you can claim under the special rules. If you live longer than was

reasonably expected, you just carry on claiming under the special rules – always assuming that your death can reasonably be expected within six months.

If you don't qualify under the special rules

If you don't meet the official definition above your claim won't be fast-tracked.

How to claim under the special rules

The claim procedure is outlined in the separate chapters in this booklet. If you're claiming under the special rules you're usually asked to send a factual statement (called a DS 1500 report) from your doctor or consultant to the DWP or SSA when you make the claim. Your doctor should have copies of these forms.

How long does it take to process a claim?

The DWP and SSA normally process Disability Living Allowance and Attendance Allowance claims under the special rules within eight working days. Personal Independence Payment claims under the special rules currently take two to three weeks to process.

If you're already getting a disability benefit and become terminally ill

Personal Independence Payment and Attendance Allowance

If you're already getting one of these benefits and your illness becomes terminal, you don't have to make another claim under the special rules.

Contact the department that deals with that benefit (see the individual benefit sections for more details) or write to the address on your award letter and ask for the award to be upgraded because of a terminal illness.

If you're successful, the new top rate of benefit can be backdated to the date you became terminally ill. You'll need to tell the DWP or SSA within one month to have your claim backdated. If it has been longer than one month, the top rate can still be fully backdated if you had good reason for the delay.

Disability Living Allowance The process for Disability Living Allowance is different. If you're already getting this benefit and become terminally ill, it counts as a change in circumstances. This can mean one of two things depending on where you live:

- If you don't live in an area where Personal Independence Payment has been introduced for existing Disability Living Allowance claimants, ask for your award to be upgraded on the basis that you're now terminally ill.
- If you do live in an area where Personal Independence Payment has been introduced for existing Disability Living Allowance claimants you must make a new Personal Independence Payment claim under the special rules. You may miss out on backdated payments because new claims for Personal Independence Payment can never be backdated.

Sick pay if you're in work

If you work for an employer and you're too ill to work, you may be able to get sick pay. This could be either occupational sick pay, Statutory Sick Pay, or both. If your employer doesn't provide occupational sick pay, they must as a minimum pay you Statutory Sick Pay, if you qualify.

Statutory Sick Pay

Statutory Sick Pay is paid by your employer if you're too ill to work. It's for anyone who:

- is classed as an employee (including agency workers and part-time workers)
- earns £111 a week or more
- has been ill for four days in a row

People without an employer, such as the unemployed and self-employed, aren't covered and may be able to claim Employment and Support Allowance instead.

Statutory Sick Pay is currently **£88.45** a week. There are no additions for your partner or children. You won't be paid for the first three days that you're off sick and it runs out after 28 weeks. After that you may be able to claim Employment and Support Allowance.

You cannot get Statutory Sick Pay on top of your occupational sick pay. So if your employer provides occupational sick pay, the Statutory Sick Pay you get will count towards your occupational sick pay entitlement for any day that you're off sick.

Occupational sick pay

Whether you get occupational sick pay depends on what your employment contract says. A typical example of a good occupational sick pay scheme is one that gives you full pay while you're off sick for up to a limit of around six months and then half pay for up to a limit of around six months, after which it ends. You would need to check your contract or contact your manager or human resources department to find out if you're covered.

How to claim sick pay

If you've told your employer that you're off sick or going to be off sick, your occupational sick pay and Statutory Sick Pay should be paid automatically to you in the same way as your normal wages.

NHS continuing healthcare

NHS continuing healthcare is health and social care that you may be able to get free of charge. It's for people who aren't in hospital but have complex ongoing care needs. It's sometimes called fully-funded care.

If your needs are urgent, you may be given continuing healthcare on a fast track. This means you don't have to do any of the assessments. Your needs are considered urgent when your life could be in danger if you don't get help quickly. The NHS medical team will prioritise your care above others with less immediate needs.

There is currently no guiding framework for continuing healthcare in Northern Ireland, which makes getting a continuing healthcare assessment there more challenging. It's unlikely to be offered or mentioned by your local health and social care team, but it's definitely available – so be sure to ask for it if you think you're eligible. You can find your local health and social care trust online or contact Age NI (see page 115) for more information.

What does it cover?

It covers care home fees, including:

- accommodation costs
- healthcare costs
- personal care costs

If you need care at home, it covers:

- personal costs
- healthcare costs

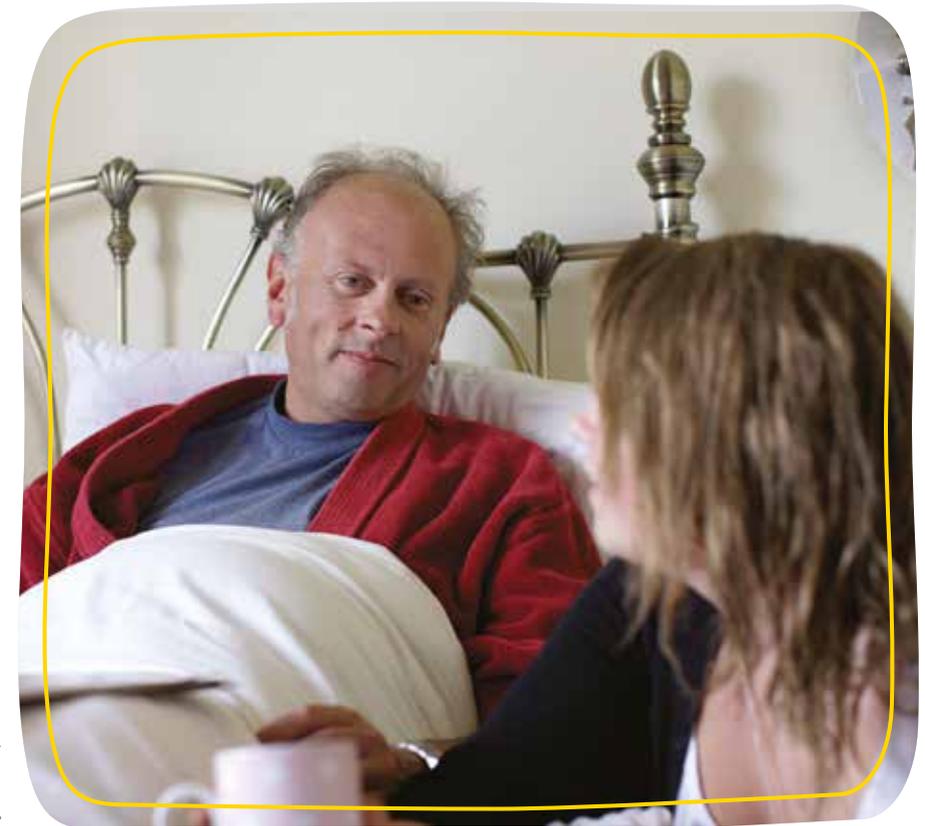
It might also cover the cost of healthcare assistants.

Personal care means anything relating to hygiene, food, emotional wellbeing, mobility or simple treatments like applying lotions or eye drops. Healthcare is any care that needs to be provided by a healthcare professional like a nurse or doctor.

Who is eligible?

It's for anyone who mainly has a healthcare need. This means that the care you need is more about medical care than social care. These needs can either be at home, in a hospice or in a care home. You can apply for continuing healthcare if you:

- have a complex medical condition
- need substantial and ongoing care



Layton Thompson/Marie Curie

Who isn't eligible?

People who don't have primary healthcare needs won't qualify. If you have social care needs there are several health-related benefits you can apply for instead. These include a care and support needs assessment, Personal Independence Payment, Disability Living Allowance and Attendance Allowance. But unlike continuing healthcare, they may not cover the full cost of your care.

The difference between healthcare needs and social care needs isn't that clearly defined and there is some overlap between the two. It's always worth asking different health and social care professionals if you're unsure about your eligibility.

What isn't covered?

The following costs aren't covered:

- Food.
- Rent and mortgage payments.
- Some general household support, if your local council is already providing care.

How to apply

The rules for continuing healthcare are complicated – even doctors and nurses don't always understand them. It's always worth applying if you meet the criteria, and questioning the final decision if you don't agree with it. It's also a good idea to get support from someone who understands how the system currently works, as the rules change often.

Contact your local Citizens Advice or one of the organisations listed on pages 110-120 if you need any help with the process.

Step one: arranging an initial assessment

If you think you have primary healthcare needs, you'll need to arrange an initial assessment through:

- your district nurse, doctor or another healthcare professional
- your local council
- a hospital social worker
- your Marie Curie Nurse or hospice staff

You can ask your carer or another person you trust to be with you. First you'll be asked some questions to decide whether you should have a full assessment or not. This is sometimes called an initial screening.

Step two: initial assessment

This will usually be done by a nurse, doctor, social worker or another qualified healthcare professional. When they visit, they'll ask you questions about:

- **Behaviour:** do you ever do things that put you or the people who care for you at risk?
- **Cognition (understanding):** do you have any problems with your memory or understanding?
- **Communication:** are you able to ask people for what you need and tell them when you need help?
- **Psychological and emotional needs:** do you ever get feelings of anxiety or low mood?
- **Mobility:** do you need help to move around your home? Are you at risk of falling?
- **Nutrition (food and drink):** do you need help to feed yourself? Do you find it hard to maintain your weight?
- **Contenance:** do you have any difficulty going to the toilet?
- **Skin (including wounds and ulcers):** do you have any wounds that need regular care or are at risk of infection?

- **Breathing:** do you ever have breathing difficulties that need assistance from a health professional?
- **Symptom control through drug therapies:** do you have any difficulty managing symptoms due to medication? Do any of your medications need to be given by a nurse?

They might also talk to other members of your healthcare team. They'll fill in the checklist, putting the answers to the questions above into one of the following three categories:

1. No or low needs.
2. Moderate needs.
3. High needs.

If you have at least two responses in the high needs category, or five or more in the moderate needs category, you'll probably qualify for a full assessment. You'll get a letter about this. You can also ask for a copy of the checklist for your records.

If you're refused a full assessment

Decisions about how to spend NHS money are made by local clinical commissioning groups (England) or health boards (Wales and Scotland). If you're refused healthcare based on your initial screening, you have a right to ask your local clinical commissioning group or health board (see step three below) for a full assessment. These groups will decide whether or not you qualify.

Step three: full assessment

If you qualify for the full assessment, you'll be visited by a health worker and possibly a social worker or another member of the assessment team. They may visit more than once, at your home or somewhere else that's convenient.

After getting your consent (permission), they will talk to other people involved in your care and look at your medical records and notes. It's a good idea to put all your medical notes and documents in one place, so you can find them quickly during the assessment. They will ask you some more questions about your needs, and put these in a form called the decision support tool.

Depending on where you live, the decision support tool may be filled out at a meeting with several health and social care professionals. You (and/or your carer, if you have one) will be invited to this. There might also be a social services assessment carried out at the same time.

The health worker will tell you what they've written in the form based on what they've seen and heard. If you disagree, they'll add your comments to the form. You can also ask them any questions.

Step four: making a decision

The health worker will take the decision support tool to your local clinical commissioning group or health board. These groups decide how NHS money is spent in your area. The group members will review all the information and make a decision about whether to provide you with continuing healthcare support within 28 days.

If your application is approved

You'll be given someone to work with you to create a care plan. This person is called a care manager, case manager or community nurse.

A care plan is a detailed package of care that should meet all your health and social care needs. It's different to any plan that your nurse or doctor might have made, but should include that

information. Your needs will be reviewed every three months to check you should still be getting continuing healthcare.

If you're refused continuing healthcare

You'll still be entitled to free healthcare from the NHS or local health and social care trust. If you need to pay nursing home fees, there may still be a contribution to these based on the nursing assessment section of the decision support tool.

If you're refused continuing healthcare and you think the decision is unfair, you have a right to appeal. The clinical commissioning group or health board will look at the information again to make sure they're considering all the evidence. If you're still refused, you might want to consider making a complaint. See our information about making a complaint at mariecurie.org.uk/making-a-complaint or call the Marie Curie Support Line on **0800 090 2309***.

Sometimes the NHS might refuse continuing healthcare but agree that it will split the cost of your care with social services at the local council (in England, Scotland and Wales). This is called joint funding. In Northern Ireland health and social care services are provided together.

If the clinical commissioning group or health board refuse to make any contribution, the local council will assess your care needs. If you're eligible for any social care services, the council will look at your finances to see how much you would need to pay towards your care. This is based on how much you can afford and is called means-testing.

Step five: getting the money

Continuing healthcare should cover all your health and social care needs, not just healthcare. If you're already getting help with your social care needs from social services, your social care package will

be moved into your continuing healthcare package. There are two main ways of getting the money:

A personal health budget: This is when the NHS tells you how much is available for your care needs and you work together to decide how it's spent. This is called self-directed support in Scotland. This can be done in three ways:

1. The NHS looks after the money and you tell them how you want to spend it.
2. The NHS tells you how much money is available but an organisation (like a charity or support group) looks after the money for you. It helps you decide how to spend it.
3. Direct payments – you look after the money and plan how to spend it on your health and social care.

Decisions are made by the clinical commissioning group or health board: The clinical commissioning group or health board will decide how to spend the money based on your assessment. This could be by providing services at home or in a nursing or care home.

If you would like to stay at a nursing or care home which is more expensive, but your needs could be met in a cheaper residential home, the group might suggest this.

Historical assessment and refunds

If you're already paying care home fees, but you haven't received continuing healthcare funding, you can ask for these costs to be taken into account. This is called a historical (retrospective) assessment. You can ask your local health board or clinical commissioning group to review its decision if you think they should have included previous costs in their assessment. In England, some of your care home fees could be refunded.

If the clinical commissioning group or health board takes longer than 28 days to make a decision, you can claim back any care costs between the 29th day and the date of its decision.

Will my benefits be affected?

If you're already getting help with your social care needs from social services, your social care package will be moved into your continuing healthcare package.

If you're living at home, your benefits will stay the same. If you're living in a care home, Attendance Allowance, Disability Living Allowance and Personal Independence Payment will normally stop after 28 days. You'll also stop receiving these benefits if:

- the care home provides care from medically-trained staff
- you could be described as receiving similar care to an inpatient at a hospital

They won't stop, however, if you're:

- terminally ill and residing in a hospice (not an NHS hospital)
- paying your own care home fees (called a self-funder), which means you don't get any funding from the local council
- are only getting social care funding on an interim basis and will be paying it back in full – this is also called being a retrospective self-funder

If you've been approved for continuing healthcare in a care home and are already getting Attendance Allowance, Disability Living Allowance or Personal Independence Payment, call one of the helplines listed on page 112 to find out how you'll be affected.

Section three: benefits and support for carers

Carer's Allowance	66
Carer's Credit	72
Carer Premium	73
Carer's assessment	75

Carer's Allowance

Carer's Allowance is a benefit for people who regularly spend at least 35 hours a week caring for someone with substantial caring needs.

It's not means tested, so it's not affected by the amount of savings you have or by how much money you have coming in. It doesn't depend on National Insurance contributions either. It's taxable and counts as income for tax credits and other means tested benefits.

If you're entitled to it, you may be able to get Carer Premium (see pages 73-75) with other benefits.

How much could you get?

The amount is currently **£62.10** a week.

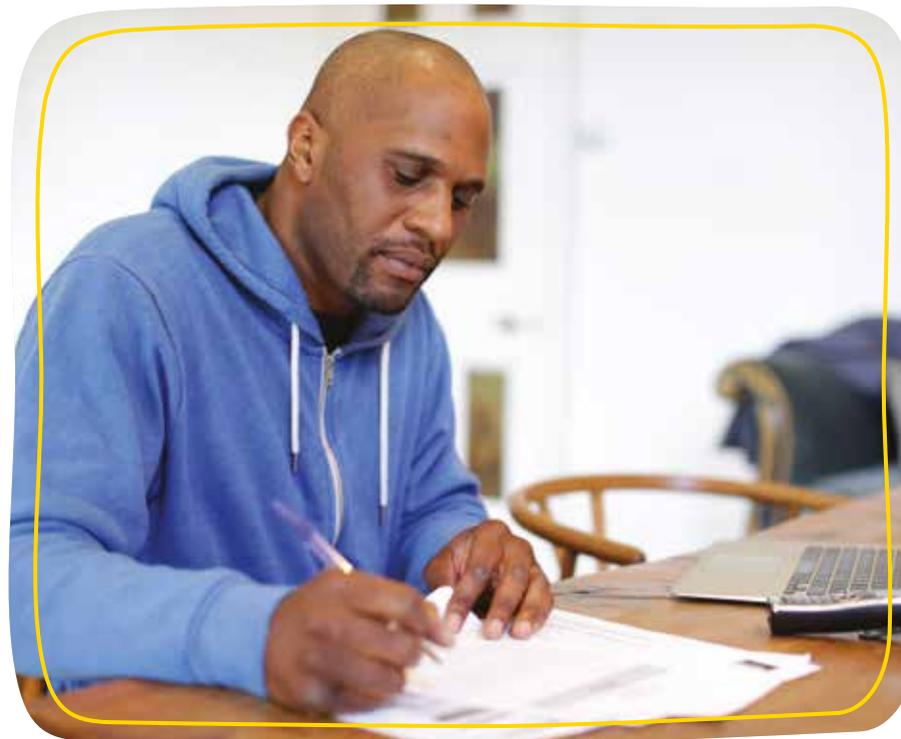
Who is it for?

For you to qualify, the person you care for must be claiming one or more of these benefits:

- Middle or highest rate of Disability Living Allowance care component.
- Personal Independence Payment daily living component.
- Attendance Allowance.
- Armed Forces Independence Payment.

You don't have to be related to, or live with, the person. You can get Carer's Allowance even if you've never worked or if you're disabled yourself and need care.

If the person you look after gets the severe disability premium included in their means tested benefit, this may stop if you claim Carer's Allowance.



Layton Thompson/Marie Curie

Other rules about who it's for

- If you work, you can't earn more than £110 a week – see page 68.
- You must be aged 16 or over.
- You must not be in full-time education (21 hours a week or more).
- You must not be subject to immigration control and must pass the UK residence presence tests.

Meeting the care requirements

If you're looking after someone you live with, the rule about caring for 35 hours a week is usually easy to meet and straightforward. However, there are some things to watch out for:

- If someone else gets Carer's Allowance to look after the same person you look after, you cannot also get it to look after them. You and the other carer need to decide who should claim.

- If you're caring for more than one person, you can't add together the time you spend caring for each of them. You have to show that for at least 35 hours each week you're caring for one person.
- There are more rules, which are helpful but quite complex, about how you can sometimes get Carer's Allowance during time off from caring or breaks in care. See below.

How do earnings affect Carer's Allowance?

You cannot get Carer's Allowance if your net earnings are more than £110 a week. This is the earnings limit and it usually goes up every October. Your partner's earnings don't affect your basic benefit, but your earnings or theirs may reduce any means tested benefit you also receive.

In working out how much of your earnings (or net profit if you're self-employed) are taken into account, the main deductions to be made from gross earnings are:

- income tax
- National Insurance contributions
- half of any contribution you make to an occupational or personal pension

If earnings paid in one week are over the limit, Carer's Allowance is normally lost for the following week except if your earnings vary. If this is the case, ask the DWP or SSA to average them out so you stay under the limit.

How to claim

You can make a claim using form DS700, or DS700 (SP) if you get State Pension. The claim form has to be signed by the person you're looking after.

England, Wales and Scotland

Contact Jobcentre Plus or the Carer's Allowance Unit – see page 112 for contact details. You can also claim online at **GOV.uk**

Northern Ireland

Contact the Disability and Carers Service, Benefit Enquiry Line, or Jobs and Benefits/Social Security office – see page 113 for contact details. You can also download the claim forms from **nidirect.gov.uk**

Backdating

If you were entitled to Carer's Allowance before the date you claimed it, you can ask for it to be backdated for up to three months. If you've been waiting for the person you're caring for to be awarded a qualifying benefit and you claim Carer's Allowance within three months of the date that they're awarded this benefit, then your claim can be backdated to the date when the benefit began.

If entitlement to Carer's Allowance means you can start getting a benefit such as Income Support because of the award of Carer Premium you should claim the benefit at the same time that you claim Carer's Allowance. This will ensure it's also backdated.

The assessment process

The assessment process is very straightforward as there are only a few rules you need to satisfy. Once you claim Carer's Allowance you may be offered the option of attending a voluntary work focused interview to discuss work prospects.

If you qualify

Once you qualify, you'll be sent a written decision about your claim. If you're entitled to the benefit, you may be able to get Carer Premium with other benefits.

You must report any changes in your caring role in writing to the Carer's Allowance Unit as soon as possible to avoid having to repay overpaid benefit. This includes changes in the way you provide the 35 hours a week of care, or taking time off from caring. See our information about time off from caring and breaks in care on page 72.

If your claim is rejected

If you're refused Carer's Allowance, or you disagree with the DWP or SSA's written decision, you have a month to ask for it to be reconsidered. If you're not happy with the outcome, you have another month to appeal.

If you qualify but can't be paid Carer's Allowance

This can happen with the overlapping benefits rule. It says that you cannot be paid Carer's Allowance while you're getting the same amount or more from certain other benefits, including:

- State Pension
- Maternity Allowance
- Incapacity Benefit
- Contributory Employment and Support Allowance
- Contribution-Based Jobseeker's Allowance
- Widows' Benefits
- Bereavement benefits

So, if for example you get State Pension that is **more** than what your Carer's Allowance is worth, you only get the State Pension. If you get State Pension that is **less** than what your Carer's Allowance is worth, you get the State Pension and a top-up of Carer's Allowance to the amount you'd get from it alone.

However, it may still be worth claiming Carer's Allowance even if you can't get paid it. This is because you may still be able to get Carer Premium with other means tested benefits.

If the person you look after gets the severe disability premium included in the calculation of a means tested benefit, this will stop once you get paid Carer's Allowance. If you can't be paid Carer's Allowance because of the overlapping benefit rules, the person you care for won't lose the severe disability premium, even if you get a Carer Premium.

Carer's Allowance and other benefits

Disability benefits

You **can** get Carer's Allowance at the same time as Disability Living Allowance, Attendance Allowance or Personal Independence Payment if you're disabled yourself.

Income Support

You may be entitled to both Carer's Allowance and Income Support, but the Income Support is reduced by the amount of Carer's Allowance you get. The advantage of claiming Carer's Allowance in this situation is that you may be able to get a Carer Premium to increase your Income Support.

Universal Credit

Universal Credit is starting to replace means-tested benefits for people of working age in some parts of the UK. If you claim Universal Credit, your award will be reduced by the amount of Carer's Allowance you get. However, you'll receive an extra amount, known as a carer element in your Universal Credit in the same way as you may be able to get a Carer Premium with other means-tested benefits.

Carer's Credit

If you're entitled to Carer's Allowance, even if it can't be paid because of other benefits, you might also get National Insurance credits – see pages 72–73 for more details.

Time off from caring and breaks in care

Sometimes Carer's Allowance can be paid during breaks in care. There are different rules depending on how long the break is and how long you've been getting the benefit. Visit mariecurie.org.uk/carers-allowance or call the Marie Curie Support Line on **0800 090 2309***.

Carer's Allowance after someone dies

Your Carer's Allowance can continue for up to eight weeks after the person you look after dies. You must continue to satisfy all the rules apart from the one about caring for someone.

Carer's Credit

Some carers can't pay National Insurance contributions because they're not working or aren't earning enough. If you're in this situation, you can protect your State Pension by gathering Carer's Credit in place of the National Insurance contributions, which you'd be paying if you were working and earning enough to be paying them.

Who can get Carer's Credit automatically?

You don't need to apply for Carer's Credit if you get:

- Carer's Allowance
- Child Benefit for a child under the age of 12

In either case you'll automatically get Carer's Credit.

Who can get Carer's Credit if they apply?

If you're a carer who doesn't get Carer's Allowance you won't automatically get Carer's Credit but you can still qualify if:

- you spend at least 20 hours a week looking after someone who gets Attendance Allowance, Disability Living Allowance at the middle or highest rate or the daily living component of Personal Independence Payment
- the level of care you provide has been certified as appropriate by a GP or nurse

Applying for Carer's Credit

To claim, use the online claim form at gov.uk/carers-credit/how-to-claim or contact the Carer's Allowance Unit (see page 112).

In Northern Ireland, visit nidirect.gov.uk/carers-credit or contact the Benefit Enquiry Line (see page 113).

Carer Premium

If you're entitled to Carer's Allowance you may be able to get an addition to various means-tested benefits as well. Means-tested benefits are the ones that vary according to how much or how little other money you have coming in. The addition is generally called Carer Premium.

Who is it for?

You can get Carer Premium (or an equivalent similar payment) as an addition to any of the following benefits that you may be claiming already:

- Income-related Employment and Support Allowance.
- Income Support.
- Income-based Jobseeker's Allowance.
- Housing Benefit.

- Pension Credit (when it's known as the Additional Amount for Carers).
- Universal Credit (when it's known as the Carer Element).

How much could you get?

It's worth **£34.60** a week for each person who qualifies.

How to claim

You must claim or already be getting Carer's Allowance. The reason you should still claim Carer's Allowance even if you can't be paid it is because you can still get the underlying entitlement to Carer's Allowance – and this is how you may be able to get a Carer Premium.

You then need to contact the DWP office that deals with the benefit that you're already getting or want to claim. Or, in Northern Ireland, contact the SSA. If you're claiming Housing Benefit, contact your local council or the Northern Ireland Housing Executive (see page 113) if you live in Northern Ireland.

If you already get the means-tested benefit that you want the Carer Premium added to, it should be added on and you'll be better off.

If you **don't** already get the benefit that you want the Carer Premium added to, you must make a new claim. For example, if you have a low income but it's just £4.60 a week too high for Income Support, when you qualify for a Carer Premium of £34.60 a week, you could make a new claim for Income Support and be £30 a week better off.

If the person you look after gets the severe disability premium included in their means tested benefit, this may stop if you claim Carer's Allowance. Ask a benefits adviser for more details.

If you're claiming means tested benefits like Income Support you may have to attend Jobcentre Plus (Jobs and Benefits office in Northern Ireland) for a work focused interview as a condition of receiving it.

Carer's assessment

If you're taking care of someone who is ill or disabled, you may need practical support to look after them. This could include getting someone to be with them while you're out – sometimes called respite care. Or it could be assistive technology that can help reassure you that they remain safe at home when you're not there. It might even include details of a local carers' support group.

You can start finding out what help you can get by contacting your local social services department. You should ask for a **carer's assessment**, which will look at the help that you provide as a carer and whether you need support.

See pages 21–24 for more information about social care throughout the UK.

Getting a carer's assessment

You should ask for a carer's assessment if you provide regular and substantial care for someone who is ill or disabled. This could be for a partner, friend or relative. They don't have to be getting specific benefits for their illness or disability.

The word substantial doesn't have a specific meaning so, if you feel that your caring role is having a regular and repeated impact on your life, work or family, you should get a carer's assessment. You can

have a carer's assessment whether or not the person you look after has already had their own care and support needs assessment or whether they want one for themselves.

Even though your social services department should tell you about your right to a carer's assessment, you'll still need to ask it to carry one out for you. The exception to this is in England.

Getting an assessment in England

The Care Act 2014 means that any carer who appears to have a need for support should be offered an assessment by social services, instead of having to ask for one. As a carer you're entitled to an assessment no matter what your level of need, the amount of care you provide or your financial means. You can have an assessment whether or not the person you care for has had an assessment or if they've been considered not to be eligible for support.

Following an assessment, the Care Act also gives adult carers of adults the right to receive services where their needs meet a certain level. The Children and Families Act 2014 includes assessment rights for parents of disabled children and young carers.

The assessment process

The assessment will look at how caring affects your life, including health issues and whether you're able or willing to carry on caring. It'll also look at other important physical, mental and emotional needs you have to help you achieve things important to you like your work, education, relationships and social activities.

Following the assessment, social services will decide if you're eligible for services for you as the carer, or for the person you care for, to reduce the impact of caring on you. The decision about whether

social services pay for services to support you will depend on your financial situation (if services are provided to you) or on the financial situation of the person you care for (if services are provided to them as a result of your assessment).

If your social services department decides that you have eligible needs then it will discuss your care and support plan with you, including your personal budget and whether you want to receive your support as a direct payment to arrange your own support.

At a minimum, social services must provide all carers, including those not eligible for support, with information and advice on local services to prevent their needs from increasing.



For more information about carer's assessments, including how care is paid for, visit mariecurie.org.uk/carers-assessment or call the Marie Curie Support Line on **0800 090 2309***.



Chris Renton/Marie Curie

Section four: help with housing and transport costs

Housing Benefit	80
Council Tax Support and Rate Relief	84
Discretionary Housing Payments	86
Help with transport costs	88

Housing Benefit

Housing Benefit can help you pay your rent if you have a low income. The amount you get depends on your income and how much rent you're paying.

It covers you whether you live in council, housing association or private rented property. It's also means-tested, so the amount you get depends on how much money you have coming in. This means you may be able to get all of your rent paid or just part of it. You can be in or out of work and you don't have to be getting other benefits to claim it.

This benefit is slowly being replaced by Universal Credit (see pages 18-21).

Who is Housing Benefit for?

You can get this to help pay your rent if you and your partner (if you have one) are on a low income and have savings or capital below £16,000.01.

You don't need to have worked in the past or be getting other benefits to get Housing Benefit, and there are no age limits. You should note that you can't usually get it if you live in a close relative's household or if you're a full-time student. There are also immigration or residence tests that apply to people coming to the UK, which may exclude you from getting the benefit.

How much could you get?

The amount you can get depends on two things: the means test and whether all the rent that you pay is covered by the Housing Benefit rules.

Housing Benefit means test

How much Housing Benefit you could you get depends on whether you have savings or capital below £16,000.01 and on your money coming in. The lower your income is, the more Housing Benefit you can get. If your income goes up, your Housing Benefit goes down until there's none left.

As with other means tested benefits, some income is taken into account in full, some in part and some is ignored. While these rules are complex, a common rule is that your benefit can go up if you (or your partner or child) have a disability or are a carer.

If you're claiming another means tested benefit, such as income-related Employment and Support Allowance, income-based Jobseeker's Allowance, Income Support or Pension Credit, you may get Housing Benefit in full. This means without any reduction due to income. Whether it covers all the rent that you pay depends on the rules outlined in the next section.

How much of your rent is covered?

This benefit can be restricted to less than you pay depending on whether you live in council, housing association or private rented property. Other rules, like the bedroom tax and the benefit cap (see pages 14-15) have to be considered too.

If you live in private-rented accommodation

Your Housing Benefit depends on the local housing rules, which normally restrict it based on:

- a level of rent that is below the local average
- the size of the accommodation that the rules say you need rather than what you live in

You can look up your Local Housing Allowance at **lha-direct.voa.gov.uk** to find out the size of the accommodation that the rules say that you and your family need, and the standard amount that applies in your area.

If you're single and aged under 35

There are special rules if you're single, under 35 and in private-rented accommodation. These rules generally mean you get less because you're only covered for the cost of a single bedroom in shared accommodation.

If your rent includes service charges

If your rent includes service charges, water rates or other items that aren't covered by Housing Benefit, these charges must first be deducted in the calculation of your benefit entitlement.

Bedroom tax if you rent from a council or housing association

The amount you can claim may be reduced if you're of working age and are considered to have one or more spare bedrooms. This is what people are calling the bedroom tax.

Visit **gov.uk/housing-benefit** for an explanation of what counts as a spare room and what this would mean in terms of the amount of money you can claim. You may be able to get Discretionary Housing Payments (see page 86) if your Housing Benefit is restricted due to the bedroom tax.

The benefit cap

There is a cap on the total amount you can receive from the main out-of-work benefits and children's benefits. If they add up to more than your cap level, your Housing Benefit will be reduced. This is a complex area because not all benefits are taken into account and some people are exempt so the cap doesn't apply to them.

If you have other adults living with you

If you have any other adults living with you, like an adult son or daughter, they're known as non-dependants and you may get a reduced amount of Housing Benefit. This is because they're expected to pay towards the cost of living under your roof, instead of the taxpayer.

How to claim

If you're claiming means-tested benefits such as income-related Employment and Support Allowance, income-based Jobseeker's Allowance, Income Support or Pension Credit, you'll normally be able to claim Housing Benefit at the same time. Otherwise, you can download a claim form at **gov.uk/housing-benefit** or contact Jobcentre Plus.

If you live in Northern Ireland, you'll need to claim through the Northern Ireland Housing Executive (see page 113).

If you qualify

If you rent from a council your Housing Benefit will be paid into your rent account. If you rent from a housing association, the rent will usually be paid directly to it. If you rent privately, the money will be paid to your bank or building society account.

If your claim is rejected

If you're refused or you disagree with the council's written decision, you have one month to appeal.

Council Tax Support and Rate Relief

If you have to pay council tax (rates in Northern Ireland) and are on a low income, you may be able to get help with paying these bills.

Council Tax Support

Council Tax Support, also known as Council Tax Reduction, is the way that local councils help you pay your council tax if you're on a low income. It's means-tested, so the amount you get changes depending on how much money you have coming in. Local schemes, which vary from one area to another, replaced the nationwide Council Tax Benefit scheme in 2013.

Who is Council Tax Support for?

It's for people who pay council tax, are on a low income and have savings below £16,000.01. People who fail certain immigration or residence tests that apply to people coming into the UK may not qualify for Council Tax Support.

How much could you get?

There are different arrangements in England, Scotland and Wales, but the main principle is the same: the lower your income is, the more help you can get, and if your income goes up, the amount of Council Tax Support goes down.

In England and Wales, each council has its own scheme. You should contact your local council, Citizens Advice Bureau (see page 117) or other advice agency for details of the scheme in your area. More generous rules apply if you have reached Pension Credit age.

In England, most councils require council tax payers who are under Pension Credit age to pay part of their council tax, even if they are

on another means-tested benefit. There are more generous rules for people who are disabled.

The Welsh and Scottish governments have given local councils extra money for Council Tax Support. This means councils in these nations may be able to help people on means-tested benefits have their council tax paid in full.

How to claim

Councils must accept claims in writing, by electronic methods or by phone. Contact your local council for more information.

Rate Relief in Northern Ireland

Council tax and Council Tax Support apply in England, Scotland and Wales. Northern Ireland has a system of housing rates instead of council tax, and of Rate Relief instead of Council Tax Support. Rate Relief is also means-tested.

If you're eligible for Rate Relief, Land and Property Services (see page 113) will credit your rates account if you own your home or rent privately. If you're a Northern Ireland Housing Executive tenant, it will pay into your account for you. You can find out more about rates at nidirect.gov.uk

If your claim is rejected

If you're unhappy with a decision related to a Council Tax Support application, you can ask your council to review it. If you're not satisfied with the outcome of the review, depending on which nation you're in, you can appeal. In England, you can appeal to the Valuation Tribunal for England (**0300 123 2035**) or in Wales, to the Valuation Tribunal for Wales (valuation-tribunals-wales.org.uk). In Scotland you can ask for a further review by an independent Council Tax Reduction Review Panel (**0141 242 0223**).

To challenge a decision on your Rate Relief in Northern Ireland, start by contacting Land and Property Services (see page 113) with your appeal. If you're not satisfied with the outcome, you can appeal to the Northern Ireland Valuation Tribunal **(028 9072 4887)**.

Discretionary Housing Payments

A Discretionary Housing Payment is similar to a benefit but more like a grant. These payments are given out by local councils in England, Wales and Scotland, and the Northern Ireland Housing Executive in Northern Ireland. Being discretionary means that no one has a right to one and there is no set amount or set period that it must be granted for.

Who are the payments for?

You may be able to get a Discretionary Housing Payment if you qualify for at least some Housing Benefit and if you appear to need extra money to pay your rent.

How much could you get?

The government gives each local council and the Housing Executive in Northern Ireland a limited amount of money each year to pay out as Discretionary Housing Payments. This means that there's no guarantee you'll get one or, if you do, how long it will be paid for. If you do get payments over a long period, it's your duty to report changes in your circumstances that could affect them.

Asking for a payment

Most councils and the Housing Executive have a form that you need to complete to request a Discretionary Housing Payment. If your

council doesn't, write a letter instead. Explain your circumstances fully. For example, if you get a benefit like Personal Independence Payment, you should explain your disability needs, otherwise the council or Housing Executive could take the benefit payment into account and expect you to spend it on your rent (even if the Housing Benefit rules would normally not take it into account).

If your application is rejected

The Housing Benefit appeals system doesn't apply to Discretionary Housing Payments, but you have the right to ask the council or Housing Executive to look again at its decision if you're not happy.



Help with transport costs

You may be able to get help with transport costs if you're ill or disabled. You won't automatically qualify if you're living with a terminal illness, or are caring for someone who is, because qualifying depends on your disability.

What could you get?

You may be able to get help with transport costs, such as a:

- bus pass and other concessions on public transport
- Blue Badge to allow you to park your car in restricted zones
- Motability car
- Vehicle Tax Exemption (sometimes called road tax exemption)
- refund from the hospital for transport costs when proof of entitlement and receipts are shown

Concessions on public transport

There isn't a simple definition of who counts as disabled for these concessions. Living with a terminal illness is not in itself one of the ways to qualify, but you'll usually qualify if you:

- have severe walking difficulties
- are registered partially sighted
- are profoundly or severely deaf

England and Wales

In England, people of Pension Credit age and disabled people are entitled to free off-peak travel on all local buses anywhere in England. In Wales, there's a similar concession for any time of day. You can get an application form from your local council.

Scotland

In Scotland, older and disabled people are entitled to free Scotland-wide bus travel on most services. You need to apply for a National Entitlement Card. You can get an application form from your local council or SPT Travel Centre (spt.co.uk).

Northern Ireland

For travel concessions in Northern Ireland, contact Translink bus and rail stations. Disability Action also has a transport service. See page 119 for contact details.

UK-wide rail travel

A Disabled Person's Railcard entitles you to a third off the cost of most UK train journeys. Concessions are available on some ferry routes and the Eurotunnel, if you are disabled and travelling with a car. For more information, contact Disabled Motoring UK (see page 120).

Blue Badge

If you have mobility problems, like problems walking, you may be able to get a Blue Badge so that you can park your car nearer to where you want to visit.

Who is it for?

You'll automatically qualify for a Blue Badge if you receive one of the following benefits:

- the mobility component of Personal Independence Payment for the 'moving around' activity
- the higher rate mobility component of Disability Living Allowance

It's also possible to qualify for a badge if you can show you have a permanent and substantial disability that causes great difficulty in walking.

How to apply for a Blue Badge

If you live in England or Wales, contact your local council or apply at [gov.uk/apply-blue-badge](https://www.gov.uk/apply-blue-badge) In Scotland, visit [bluebadge.direct](https://www.bluebadge.direct). [gov.uk](https://www.gov.uk) In Northern Ireland, visit [nidirect.gov.uk/the-blue-badge-parking-scheme](https://www.nidirect.gov.uk/the-blue-badge-parking-scheme) or contact the Blue Badge Unit on **0300 200 7818**.

Vehicle Tax Exemption

You don't have to pay vehicle tax if you're getting:

- the enhanced rate of the mobility component of Personal Independence Payment
- the higher rate mobility component of Disability Living Allowance

If you receive the **standard** rate of the mobility component of Personal Independence Payment you get 50% off your vehicle tax.

How do you apply?

When you're awarded the qualifying benefit, you should automatically receive a certificate of entitlement. Contact the Disability Benefits Centre if you don't receive one. If you live in Northern Ireland, visit [nidirect.gov.uk](https://www.nidirect.gov.uk)

Motability

Motability is a charity that helps people with disabilities to buy or hire a car (including adapted vehicles), powered wheelchair or mobility scooter. To qualify you need to get one of the following benefits:

- the enhanced rate mobility component of Personal Independence Payment
- the higher rate mobility component of Disability Living Allowance

To use the Motability scheme, your qualifying benefit must usually have at least 12 months still to run. See page 120 for contact details.

Section five: other types of support

Other benefits and financial support	92
Bereavement benefits for families	94
Equipment and adaptations	98
Grants	100

Other benefits and financial support

Tax credits

Tax credits are extra money paid by HM Revenue & Customs (HMRC) to people who are on a low income. This may be because their pay is low or because they have dependant children or young people, or both. They include Child Tax Credit and Working Tax Credit.

Call the HMRC Tax Credit helpline (see page 116) for more information and to get a claim form.

Jobseeker's Allowance

Jobseeker's Allowance is the main benefit for people who are unemployed (or working less than 16 hours a week) and looking for work. To get it you must be:

- unemployed (or working less than 16 hours a week)
- capable of and available to work
- actively seeking work
- not in full time education
- aged at least 16 and under State Pension age

Child Benefit

Child Benefit is a tax-free benefit for people who are responsible for a child or young person. You can get Child Benefit if you're responsible for and have care (or contribute to the maintenance) of a child or young person. It doesn't depend on whether you've paid National Insurance contributions or on how much money you have coming in, unless you or your partner have an individual income of more than £50,000 a year.

Income Support for carers and others

Income Support is a benefit for certain groups of people who may not have enough money to live on. These can include carers and some single parents. The reason why it's only for some groups of people is because there are other benefits for people who are out of work and don't have enough money. These include Jobseeker's Allowance and Employment and Support Allowance.

If you're already getting Income Support because of sickness or disability, you'll be reassessed at some point to see if you qualify for Employment and Support Allowance.

Pension Credit

Pension Credit is a benefit for people on a low income. It can be used to top up any State Pension that you're getting.

There are two parts to the benefit:

- Guarantee Credit – this tops up a low income.
- Savings Credit – this is intended to provide extra money if you have modest savings and are aged 65 or over.



We have more information about these benefits and how to claim them at mariecurie.org.uk/money or call the Marie Curie Support Line on **0800 090 2309***.

Bereavement benefits for families

Bereavement Allowance

Bereavement Allowance is for anyone whose husband, wife or civil partner has died. It's a weekly benefit that used to be called Widow's Pension.

If you were living with another person as part of a couple at the time of their death, but weren't married or in a civil partnership, you won't qualify. You must also be aged 45 or over when your partner dies.

You can't get Bereavement Allowance if you're over State Pension age. This is currently 65 years old for men and, for women it's gradually changing from 62 to 65. Visit [gov.uk/calculate-state-pension](https://www.gov.uk/calculate-state-pension) to work out your State Pension age.

How much could you get?

The amount you're paid is related to your age when your partner died and the National Insurance contributions that your husband, wife or civil partner paid when they were working. For example, if their National Insurance record was incomplete, the amount you get may be reduced.

The amount ranges from **£33.77 a week if you were 45 to £112.55 if you were 55 or over**. You can get up to 52 weekly payments in total, from the date your partner died.

You can't get Bereavement Allowance at the same time as Widowed Parent's Allowance (see page 97), but if your Widowed Parent's Allowance ends within 52 weeks of your husband, wife or civil partner's death, you can claim Bereavement Allowance for however much time remains of the 52 week period.

How to claim

There is no time limit for claiming Bereavement Allowance and claims can normally be backdated for up to three months.

England, Scotland and Wales: Contact the DWP Bereavement Service – see page 112.

Northern Ireland: Contact the Social Security Agency Bereavement Service – see page 113.

Bereavement Payment

Bereavement Payment is for a husband, wife or civil partner whose partner has died. If you were living with another person as part of a couple at the time of your partner's death, but weren't married or in a civil partnership, you won't qualify.

You must normally have been under State Pension age when they died. This is currently 65 years old for men. For women, it's gradually changing from 62 to 65 years old. Visit [gov.uk/calculate-state-pension](https://www.gov.uk/calculate-state-pension) to work out your State Pension age.

Bereavement Payment also depends on the National Insurance contributions that your late husband, wife or civil partner paid when they were working. The rules for this are complicated so ask your local Citizens Advice for information, or contact the DWP Bereavement Service or SSA Bereavement Service – see pages 112-113 for contact details.

How much could you get?

Bereavement Payment is a tax-free, one-off payment of **£2,000**. It's paid all at once, as a lump sum.

How to claim

The time limit for claiming a Bereavement Payment is normally 12 months from the date of death.

England, Scotland and Wales: Contact the DWP Bereavement Service – see page 112.

Northern Ireland: Contact the Social Security Agency Bereavement Service – see page 113.



Layton Thompson/Marie Curie

Widowed Parent's Allowance

You may be able to get this benefit if you have at least one dependent child when your husband, wife or civil partner dies. The child must be yours and theirs, or one of you must have been getting Child Benefit for the child when your partner died. A child here means a dependent young person who is under 20 years old.

If you were living with another person as part of a couple at the time of your partner's death, but weren't married or in a civil partnership, you won't qualify.

How much could you get?

The maximum amount for Widowed Parent's Allowance is **£112.55 a week**. The amount depends on the National Insurance contributions that your late husband, wife or civil partner paid when they were working. For example, if their National Insurance contribution record was incomplete, the amount you get may be reduced. The only exception is if their death was caused by an industrial injury or an industrial disease. In this case, it doesn't matter if enough National Insurance contributions had been paid.

If you need more information about the contribution conditions for Widowed Parent's Allowance, contact your local Citizens Advice, the DWP Bereavement Service or the SSA Bereavement Service.

You can get Widowed Parent's Allowance until you stop being entitled to Child Benefit for the child you're looking after. It also stops if you're over State Pension age. This is currently 65 years old for men. For women, it's gradually changing from 62 to 65. Visit [gov.uk/calculate-state-pension](https://www.gov.uk/calculate-state-pension) to work out your State Pension age.

How to claim

There's no time limit for claiming Widowed Parent's Allowance and claims can normally be backdated for up to three months.

England, Scotland and Wales: Call the DWP Bereavement Service – see page 112.

Northern Ireland: In Northern Ireland, contact the SSA Bereavement Service – see page 113.

Equipment and adaptations

Adapting your home or getting specialist living equipment can make life much easier. These can usually be provided fairly quickly and you may be able to get help with paying for them or get them on loan.

Adaptations

Adaptations range from getting devices installed or fitted, such as an intercom, to having parts of your home modified to make you more comfortable. For example, if you're using a wheelchair, you may need to get doors widened or the bath adjusted. You may not always need to get adaptations made – certain pieces of equipment could make all the difference.

Equipment

Common pieces of equipment include:

- hot water bottle or wheat bag
- bath lift
- foam cushion (pressure relieving cushion)
- raised toilet seat
- alternating pressure mattress

- overbed table
- wheelchair
- crutches
- hospital style bed

Many of these can be bought from a household shop rather than through a specialist supplier. Some bigger pieces of equipment can be supplied through your GP or occupational therapist.

Financial help

You may be able to get free equipment from your local social services department or on a long-term loan from the NHS. Social services may also give financial support for equipment and minor adaptations under £1,000 (£1,500 in Scotland), but what you get often depends on where you live.

You could also be entitled to financial help for larger and more expensive items, known as major adaptations. This is called a Disabled Facilities Grant.

Contact your local social services department, which will arrange an assessment. A social worker, sometimes accompanied by an occupational therapist, will visit your home and assess your requirements. If you qualify for assistance then the social services department will help organise the adaptations to your home.



We have more information about equipment and adaptations at mariecurie.org.uk/adaptations or call the Marie Curie Support Line on **0800 090 2309***.

Grants

There are many grants available for people affected by terminal illness. A grant, unlike a loan, doesn't have to be repaid. They can help with anything from everyday household costs to making essential changes around the home. Some can even be used to take a holiday.

Grants from charities

The places below are a good place to start:

- Turn2us (see page 118) has a useful free search feature on its website that you can use to track down grants available in your area.
- Disability Grants (disability-grants.org) is handy source of local and national grants. It also lets you search by specific medical condition.
- *The Guide to Grants for Individuals in Need* book is updated each year and has details for hundreds of grant giving trusts and charities around the UK. Your local library may be able to help you find a copy.
- Macmillan Cancer Support offers a one-off grant for people living with cancer. It can cover heating bills, clothing, adaptations, respite care or breaks and more. Contact Macmillan for more details (see page 117).
- Elizabeth Finn Care helps professionals going through financial hardship for many reasons, including terminal illness. Grants can cover household items, disability equipment and care costs. For a full list of eligible professions, contact Elizabeth Finn Care (see page 116).

Your district nurse, doctor, social worker or other healthcare workers may also be able to help with finding grants and could even apply for you in some situations.

Warm Homes Discount Scheme

This is a credit given on your electricity bill by your energy company for heating costs. The scheme is supported by many large energy companies, although they each have different ways of deciding who qualifies. You can find out more at **GOV.uk** in England, Scotland and Wales or visit **nidirect.gov.uk** for information on energy grants in Northern Ireland.

Affordable Warmth Scheme (Northern Ireland)

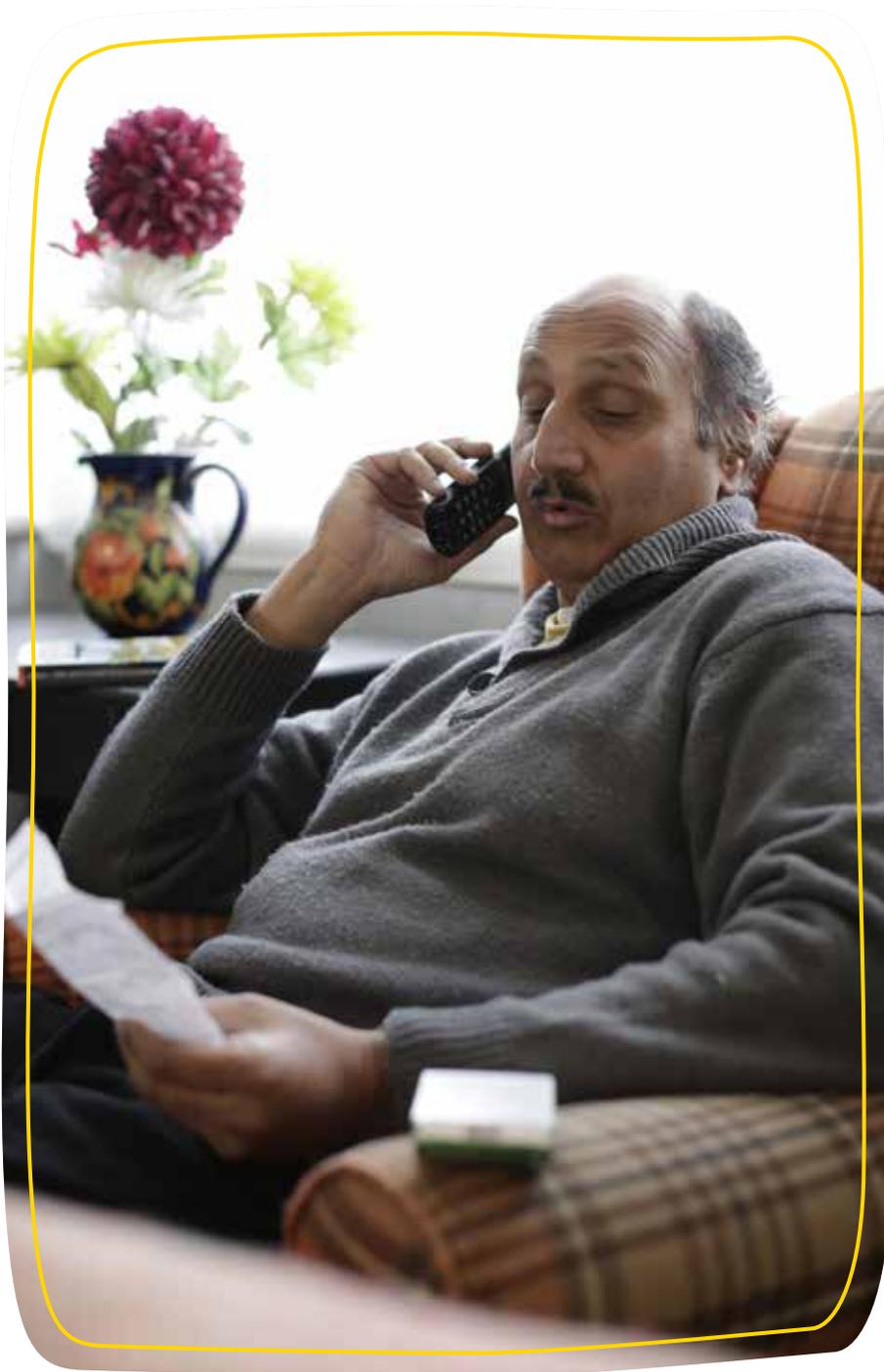
If you live in Northern Ireland and you need help to paying for energy efficiency improvements you may be eligible for the government's Affordable Warmth Scheme. Visit **nidirect.gov.uk/affordable-warmth-grant-scheme** or call **0300 200 7874**.

Other financial help

If you'd like more general financial information, contact your local Citizens Advice Bureau, the Money Advice Service, Money Advice Scotland or Debt Action NI. See pages 110-120 for contact details.



We have more information about grants on our website at **mariecurie.org.uk/grants** or call the Marie Curie Support Line on **0800 090 2309***.



Layton Thompson/Marie Curie

Section six: appeals and stopping benefits after someone has died

Appealing a benefits decision	104
What happens to benefits after a death?	107

Appealing a benefits decision

You have the right to challenge a benefits decision that you disagree with. If you want to challenge a decision you usually have to ask for a **mandatory reconsideration** and then, if you want to take it further, make an **appeal**.

The information on these pages applies to benefits administered by the DWP in England, Wales and Scotland, and includes:

- Income Support
- Jobseeker's Allowance
- Employment and Support Allowance
- Attendance Allowance
- Disability Living Allowance
- Personal Independence Payment
- Universal Credit

There are different processes for benefits and tax credits that aren't administered by the DWP, and social care, which is administered by local councils and health and social care trusts. These include:

- tax credits and Child Benefit, which are dealt with by HMRC
- NHS continuing healthcare, which is administered by local clinical commissioning groups and health boards
- carer's assessment and social care from local councils or health and social care trusts
- Housing Benefit and Council Tax Support, which are dealt with by local councils
- benefits in Northern Ireland, which are administered by the SSA

Getting a decision changed

The main ways that the DWP changes decisions is by revising them or superseding (replacing) them. When it revises a decision, it replaces it with a new decision that takes effect from the date it was originally made. It's as if the original decision had never existed.

However, when it supersedes a decision, it replaces it with a new decision that takes effect from that moment onwards. The DWP uses the term **reconsideration** to refer to revisions and supersessions together.

Mandatory reconsideration before appeal

You can't appeal against a decision on a benefit from the DWP until you've asked it to reconsider its decision, in other words, to look at it again. This is called mandatory reconsideration.

Appeals

If you disagree with the DWP reconsideration (for example, if the DWP simply upholds its first decision) you can appeal and take your case to an independent tribunal, called a First-tier Tribunal. It will look at the decision and replace it if it thinks it's wrong.

The tribunal is part of Her Majesty's Courts and Tribunals Service. The tribunal also hears appeals about Housing Benefit and tax credits. If you lose your appeal, you may be able to appeal to the Upper Tribunal and would need specialist advice about this.

Appealing a decision in Northern Ireland

The procedure is similar in Northern Ireland although it's overseen by the SSA not the DWP.

Northern Ireland doesn't have mandatory reconsideration, but this is likely to be one of the changes introduced if the Welfare Reform Bill is made law. Currently, it's possible to ask the SSA to appeal or reconsider its decision, but it doesn't have to. You have one month to do this from when you're first told about the decision.

You can download an appeal form from **nidirect.gov.uk**

If you still don't agree with what they say after you've appealed, you can appeal to an independent tribunal. To do this, you'll need to complete an enquiry form and send it to the Appeals Service (see page 114). You have one month to do this from receiving the second decision letter from the SSA, although in special circumstances you might be given more time. If it's not possible to appeal a decision the letter will say so.

If the Welfare Reform Bill becomes law, people will be able to appeal directly to The Appeals Service rather than going through the SSA first. But mandatory reconsideration will make it less necessary to appeal to an independent tribunal in the first place, as disputes should be resolved at an earlier stage.

Getting independent advice

It's a good idea to seek advice when challenging decisions. See page 12 for more information about finding a benefits adviser.

What happens to benefits after a death?

Following the death of someone close to you there can be many practical issues to deal with, including changes to social security benefits.

Some benefits may be affected by the death of someone you were caring for. You may also be able to claim bereavement benefits if your husband, wife or civil partner dies.

You may need to tell various organisations about the death. This process, combined with the emotional effects of bereavement, can be difficult to cope with. You can read more about how to tell organisations about a death at **mariecurie.org.uk/telling-organisations** or call the Marie Curie Support Line on **0800 090 2309***.

If you were getting benefits as a carer

If you're getting Carer's Allowance or Income Support, your benefit payments can continue for up to eight weeks following the death of the person you were caring for. The Carer Premium in other means-tested benefits may also continue for up to eight weeks.

Other benefits that are affected or that you can claim

Social Fund Funeral Expenses Payment

You may be able to get a payment from the Social Fund for funeral expenses if you get one of the following means-tested benefits:

- Income-related Employment and Support Allowance.
- Income Support.

Boosting your income

- Income-based Jobseeker's Allowance.
- Housing Benefit.
- Pension Credit.
- Working Tax Credit (if it includes either disability element).
- Child Tax Credit (at any rate greater than the family element).
- Universal Credit.

For more information, contact the DWP Bereavement Service. In Northern Ireland, contact the SSA Bereavement Service. See pages 112-113 for contact details.

Tax credits

If the person who died was getting tax credits, or if you were getting them together as a couple, the payments will need to be stopped. The tax credits office should stop payments when it's told about the death.

It's important that payments are stopped, otherwise you may have to pay back some of the money. For more information about tax credits visit **GOV.uk** or contact the Tax Credit Helpline (see page 116).

Bereavement support

It can be a very upsetting time when a relative or friend dies, so emotional support for you and those around you is important. Your nursing team, including your Marie Curie Nurse if you have one, can help. They can also arrange further bereavement support, so that family and friends don't have to cope with their feelings alone.

We have a free booklet about practical and emotional support during bereavement. Call the Marie Curie Support Line on **0800 090 2309*** to order it or to find bereavement services near you.

Section seven: directory and further information

How we can help	110
Useful organisations	112
Further information	120

How we can help

We help everyone affected by a terminal illness get the information and support they need, whether you have an illness yourself or you're a family member or friend.

Marie Curie Support Line

0800 090 2309*

Ask questions and find support. Open 9am to 5pm Monday to Friday. (Your call may be recorded for training and monitoring purposes.)

* Calls from landlines are free, but there may be a charge if you're calling from a mobile. Check with your mobile provider for details. Calls from any type of phone will be free from 1 July 2015.

Marie Curie Community

community.mariecurie.org.uk

For anyone affected by terminal illness to share experiences and support each other. Available 24 hours a day.

More information and further support

We also have an extensive range of information materials available to view online or in print. Visit **mariecurie.org.uk/help** where you can also find film guides, information about our services, and links to further support.

Marie Curie Nurses

Marie Curie Nurses work night and day, in people's homes across the UK, providing hands-on care and vital emotional support. If you're living with a terminal illness, they can help you stay surrounded by the people you care about most, in the place where you're most comfortable.

mariecurie.org.uk/nurses

Marie Curie Hospices

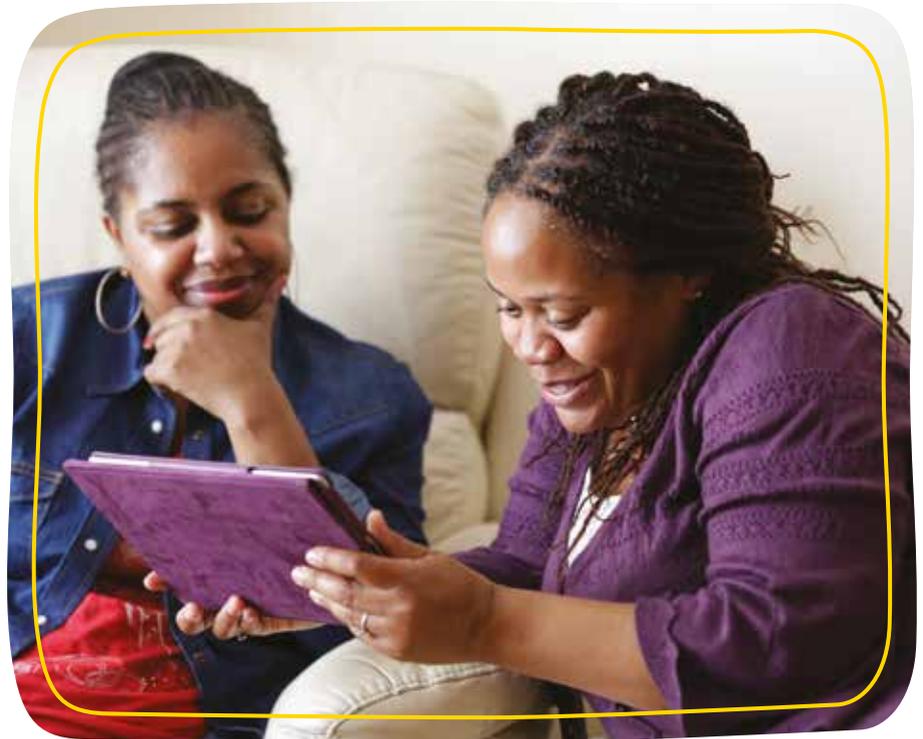
Our hospices offer the reassurance of specialist care and support, in a friendly, welcoming environment, for people living with a terminal illness and their loved ones – whether you're staying in the hospice, or just coming in for the day.

mariecurie.org.uk/hospices

Marie Curie Helper

We know the little things can make a big difference when you're living with a terminal illness. That's where our trained Helper volunteers come in. They can visit you regularly to have a chat over a cup of tea, help you get to an appointment or just listen when you need a friendly ear.

mariecurie.org.uk/helper



Layton Thompson/Marie Curie

Useful organisations

Benefits in England, Wales and Scotland

Department for Work and Pensions

The DWP deals with most benefits through a number of different centres and services. For help and to apply for specific benefits, use the contact numbers below or visit **GOV.uk**

Attendance Allowance

0345 605 6055 (textphone 0345 604 5312)

Bereavement Service

0345 606 0265 (textphone 0345 606 0285) or
(Welsh language line 0345 606 0275)

Carer's Allowance

0345 608 4321 (textphone 0345 604 5312)

Disability Living Allowance

0345 712 3456 (textphone 0345 722 4433)

Employment and Support Allowance

0800 055 6688 (textphone 0800 023 4888) or
(Welsh language line 0800 012 1888)

Jobcentre Plus

0800 055 6688 (textphone 0800 023 4888)

Pension Credit

0800 99 1234 (textphone 0800 169 0133)

Personal Independence Payment

0345 850 3322 (textphone 0345 601 6677)

Benefits in Northern Ireland

Benefits Adviser Line

0800 232 1271

Contact the advice line for information about benefits in Northern Ireland.

Benefit Enquiry Line

0800 220 674 (textphone 028 9031 1092)

A confidential freephone service that has information about Attendance Allowance, Disability Living Allowance, Carer's Allowance and Carer's Credit. It can help you fill out a claim form.

Land and Property Services

0300 200 7802

dfpni.gov.uk/lps

Contact for information about Housing Benefit and Rate Relief.

nidirect.gov.uk

The Northern Ireland government portal includes online information about all aspects of money, tax and benefits. You can also download most application forms and guides from here.

Northern Ireland Housing Executive

03448 920 902

nihe.gov.uk

The Housing Executive provides help and advice with adapting your home and housing benefits in Northern Ireland.

Social Security Agency

The SSA deals with most benefits in Northern Ireland. For help and to apply for specific benefits, use the contact numbers on the next page.

Bereavement Service

0800 085 2463

Disability and Carers Service

Disability Living Allowance: 028 9090 6182

Attendance Allowance: 028 9090 6178

Carer's Allowance and Carer's Credit: 028 9090 6186

Textphone: 028 9031 1092

Social Security and Jobs and Benefits OfficesVisit [nidirect.gov.uk](https://www.nidirect.gov.uk) for contact details of your local office.**Appeals Service**

028 9054 4000 (Belfast)

028 8224 9595 (Omagh)

[nidirect.gov.uk](https://www.nidirect.gov.uk)

Contact the service to appeal decisions made by the SSA, Northern Ireland Housing Executive and the Rates Collection Agency.

Financial and legal information and support

Advice NI

0800 998 2377

[adviceni.net](https://www.adviceni.net)

Get free help and advice about tax and benefits issues in Northern Ireland.

Age UK

0800 169 6565

[ageuk.org.uk](https://www.ageuk.org.uk)

It has a network of local branches that aim to help older people make the most out of life. The website includes information about

what financial and legal help may be available. The network includes national branches:

Age Scotland

0800 4 70 80 90 (Silver Line)

[ageuk.org.uk/scotland](https://www.ageuk.org.uk/scotland)**Age Cymru (Wales)**

08000 223 444

[ageuk.org.uk/cymru](https://www.ageuk.org.uk/cymru)**Age NI**

0808 808 7575

[ageuk.org.uk/northern-ireland](https://www.ageuk.org.uk/northern-ireland)**British Gas Energy Trust**

01733 421060

[britishgasenergytrust.org.uk](https://www.britishgasenergytrust.org.uk)

A charity that helps people in poverty, suffering or other distress who are struggling to pay their gas and/or electricity debts. The grants can also be used to cover funeral expenses.

Carers UK

0808 808 7777 (England, Wales and Scotland)

028 9043 9843 (Northern Ireland)

[carersuk.org](https://www.carersuk.org)

Provides information and support to carers, including benefits advice. There are links to its national services from the website homepage.

Citizens Advice

03454 04 05 06

03454 04 05 05 (Welsh)

adviceguide.org.uk

The Adviceguide website provides information on your rights, including benefits, housing and employment, and on debt, consumer and legal issues. Search the site for your nearest bureau in England, Wales, Scotland and Northern Ireland.

Debt Action NI

0800 917 4607

debtaction-ni.net

Helps people in Northern Ireland who are facing financial difficulties by offering free, confidential debt and money advice.

Disability Rights UK

disabilityrightsuk.org

Has detailed fact sheets about the different benefits on its website.

Elizabeth Finn Care

020 8834 9200

elizabethfinncare.org.uk

Help individuals and families overcome by their financial difficulties by giving direct grants.

HM Revenue & Customs (HMRC)

hmrc.gov.uk

For information about tax credits and Child Benefit.

Child Benefit Office

0300 200 3100 (textphone 0300 200 3103)

Tax Credit helpline

0345 300 3900 (textphone 0345 300 3909)

Law Society (England and Wales)

020 7320 5650

lawsociety.org.uk

Find a solicitor in England and Wales.

Law Society of Northern Ireland

028 9023 1614

lawsoc-ni.org

Find a solicitor in Northern Ireland.

Law Society of Scotland

0131 226 7411

lawscot.org.uk

Find a solicitor in Scotland.

Macmillan Cancer Support

0808 808 00 00

macmillan.org.uk

Provides practical, medical and financial support for people affected by cancer. It gives out one-off grants and has trained benefits advisers and financial guides on its helpline.

Money Advice Scotland

0141 572 0237

moneyadvicescotland.org.uk

Free money and debt advice for people living in Scotland.

Money Advice Service

0300 500 5000

moneyadviceservice.org.uk

Free and impartial money advice set up by government. Includes budgeting tools and planners, debt advice, and guidelines on paying for funerals and care.

Turn2us

0808 802 2000

turn2us.org.uk

A free service that helps people in financial need to access benefits, charitable grants and other financial help.

Tell Us Once

0800 085 7308 (Department for Work and Pensions)

gov.uk

A free service that lets you report a death to most government organisations in one go. You can do this online or by calling the number above. It's not available in Northern Ireland.

Equipment and adaptations

British Red Cross

redcross.org.uk

0844 871 11 11

Loans wheelchairs and other types of equipment to people around the UK.

Centre for Independent Living NI

cilbelfast.org

028 9064 8546 (textphone 028 9064 0598)

The website has lots of useful fact sheets to help people live independently.

Capability Scotland

capability-scotland.org.uk

0131 337 9876 (textphone 0131 346 2529)

Works with disabled people and their carers. It can give you advice on where to find equipment.

Disability Equipment Register

disabreg.pwp.blueyonder.co.uk

A website that lists second-hand mobility equipment available to buy throughout the UK.

Disabled Living Foundation

0300 999 0004

dlf.org.uk

A charity in England and Wales providing impartial advice, information and training on independent living. Its website has a lot of useful tips for buying equipment and products and it has a self-help guide called AskSARA at [asksara.dlf.org.uk](https://www.asksara.dlf.org.uk)

Shopmobility

0844 41 41 850

shopmobilityuk.org

A scheme that lends or hires out manual and powered wheelchairs and powered scooters.

Transport

Translink

028 90 66 6630

translink.co.uk

Contact Translink for information about travel concessions in Northern Ireland.

Disability Action

028 9029 7880 (textphone 028 9029 7882)

disabilityaction.org

Offers advice on all aspects of personal mobility in Northern Ireland.

Disabled Motoring UK

01508 489 449

disabledmotoring.org

A mobility information service for the public.

Motability

0300 456 4566 (textphone 0300 037 0100)

motability.co.uk

Helps people use their government funded mobility allowance to lease a new car, scooter or powered wheelchair.

Did you find this information useful?

If you have any feedback about the information in this booklet, please email us at review@mariecurie.org.uk or call the Marie Curie Support Line on **0800 090 2309***.

Further information

This booklet was produced by Marie Curie's Information and Support team. It has been reviewed by benefits advisers, social care professionals and people affected by terminal illness.

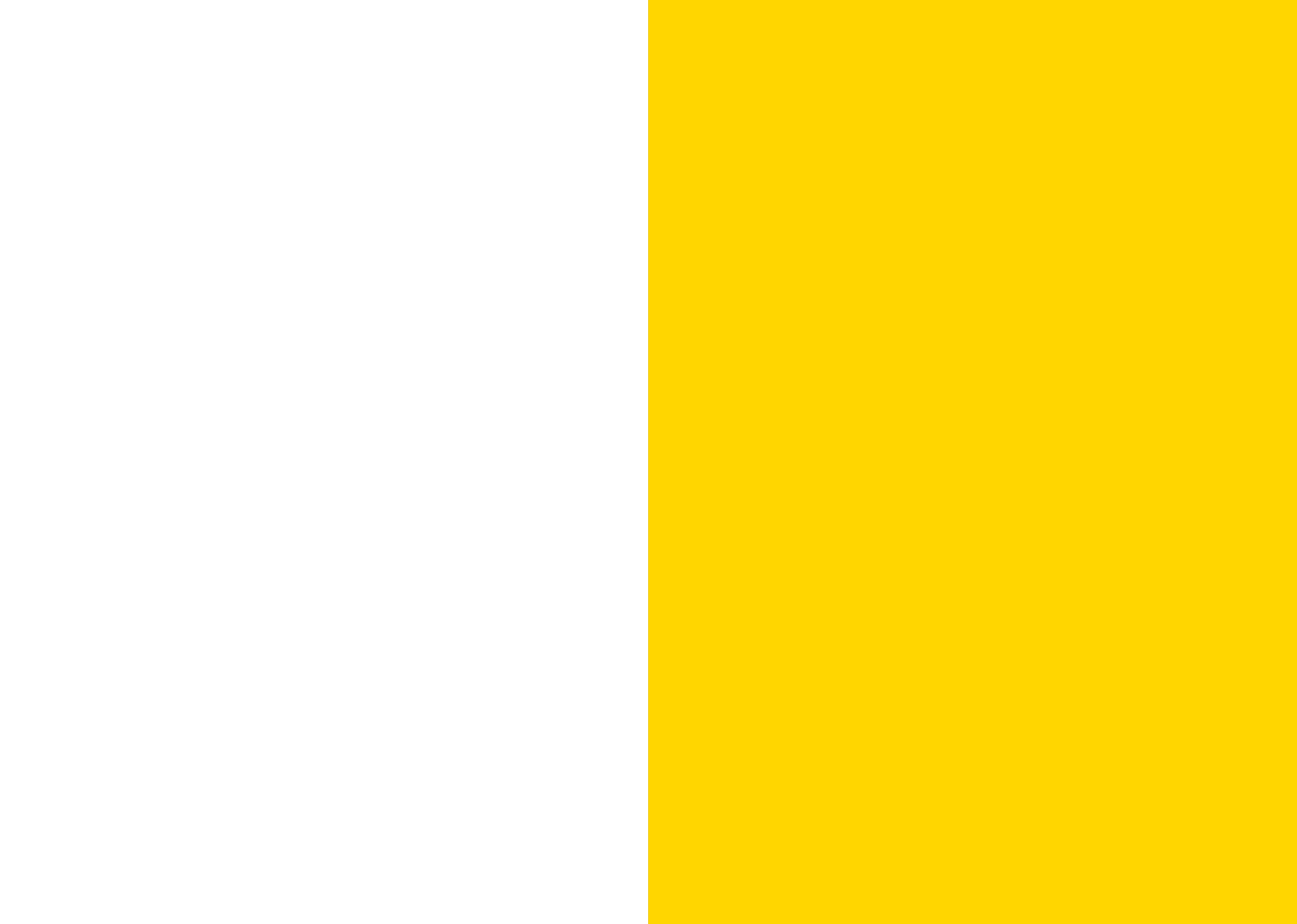
If you'd like the list of sources used to create this information, please email review@mariecurie.org.uk or call the Marie Curie Support Line on **0800 090 2309***.

Notice

The information in this publication is provided for the benefit and personal use of people with a terminal illness, their families and carers.

This information is provided as general guidance for information purposes only. It should not be considered as medical or clinical advice, or used as a substitute for personalised or specific advice from a qualified medical practitioner. In respect of legal, financial or other matters covered by this information, you should consider seeking specific professional advice about your personal circumstances from a qualified and regulated practitioner; Marie Curie does not provide legal, financial or investment advice or services.

While we try to ensure that this information is accurate, we do not accept any liability arising from its use. Please refer to our website for our full terms and conditions.



Marie Curie – what we're here for

We're here for people living with any terminal illness, and their families. We offer expert care, guidance and support to help them get the most from the time they have left.

Marie Curie Support Line

0800 090 2309*

Ask questions and find support. Open 9am to 5pm Monday to Friday. (Your call may be recorded for training and monitoring purposes.)

mariecurie.org.uk/help

You can also visit **community.mariecurie.org.uk** to share experiences and find support by talking to people in a similar situation.

* Calls from landlines are free, but there may be a charge if you're calling from a mobile. Check with your mobile provider for details. Calls from any type of phone will be free from 1 July 2015.



**Care and support
through terminal illness**