



## Safeguarding in the benefits system

### About Mind

We're Mind, the leading mental health charity for England and Wales. We believe no one should have to face a mental health problem alone. We provide advice and support to empower anyone experiencing a mental health problem. We campaign to improve services, raise awareness and promote understanding.

### About this briefing

We often hear from people with mental health problems who have found themselves put at risk as a result of problems engaging with the Department for Work and Pensions. Often by the time people have contacted us they are distressed, at risk of harm and in need of urgent help. These experiences highlight clear gaps in the processes within the benefits system which are intended keep people safe.

This briefing sets out the evidence we have heard from people with mental health problems, with a focus on safeguarding and the Work Capability Assessment. We also set out recommendations which, if implemented, would go some way towards creating a safer benefits system.

### Problems engaging with the benefits system

People with mental health problems are at a particular risk of having their benefits stopped because of the ways in which having a mental health problem can make it harder to engage with the Department for Work and Pensions. Research conducted by the Money and Mental Health Policy Institute in 2019 found that four in ten people with mental health problems (45%) reported experiencing symptoms consistent with severe or extreme anxiety when dealing with benefits agencies. This is reflected in what we hear directly from people with mental health problems:

- *“For a week before each appointment I struggled to sleep and eat, I had panic attacks- sometimes several a day. I just could not face the thought of the DWP because of the power they had over my life. This stress led to me considering self-harm and suicide, which I had previously attempted and been hospitalised for. Universal Credit claimant.*
- *“For fear of being punished, I could not articulate to the assessor that I have visions that were tormenting me during the assessment interview and that, to appease my visions, in order to survive the moment, I must self-harm. I recall*

*making excuses to use the toilet where I self-harmed and then returned to complete the assessment.”*

The difficulties people face can include:

- Fear of engaging with the DWP
- Fear of opening official letters
- Problems understanding the content of letters
- Problems managing communications by phone
- Problems travelling to face-to-face appointments
- Problems disclosing or articulating the impact of a mental health problem
- Problems with challenging or querying decisions

In some cases the combined impact of these problems mean that people are simply unable to keep their benefit claims open when they are very unwell:

- *“Several clients do not understand the terminology, what they have to do next or what the letters mean. They may read them but do not act within the timeframe unless they share the letters with us, which most of the time they do not. They only come to us once the benefits have been completely stopped or they are in financial crisis.” Local Mind adviser.*
- *“It's not understanding the letters, it's actually opening them. Just the sight of a "brown envelope" sends me in to a huge panic and I can often put off opening a letter in a brown envelope. If I were to use words and phrases such as 'catastrophic thinking' and 'panic attacks' you may get a fair idea of the way and route that this affects me.” ESA claimant.*

## **Safeguards within the benefits system**

Currently there are safeguard within the benefits system which are intended to avoid people in vulnerable circumstances seeing their benefits stopped in error. However these are often ineffective because:

- **Safeguards do not require staff to make decisions based on all of the information available to them.** Even the strongest safeguards within the benefits system only require staff to attempt to carry out specific activities such as visits or phone calls. Staff are not required to contact support services and family members in order to reach a considered judgement about whether someone is at risk.
- **The safeguards are not consistent across different circumstances or different types of benefits.** The safeguards for missing a Work Capability Assessment are different to those for missing a Jobcentre appointment or failing to search for work. This means that whether someone is protected will often depend on what part of the system they are in rather than on their actual circumstances.

- **The DWP do not ask for the kind of information which would help them to identify who may be at risk.** They also do not routinely ask for emergency points of contact that would help them apply safeguarding procedures.
- **The DWP does not yet have effective ways to systematically learn from past failures,** to involve families in investigations and to publish their recommendations in a way which allows for expert review and scrutiny.

## **Case study: Safeguarding and Work Capability Assessments**

We often hear from people with mental health problems who have had their benefits stopped after missing a Work Capability Assessment appointment. Their experiences help illustrate wider gaps in the DWP's approach to safeguarding.

The current safeguarding policy states that If someone fails to attend a Work Capability Assessment, they'll be sent a form asking them to explain why they could not attend and provide 'good cause'. If they do not return this, the DWP will attempt to make contact by telephone. If there is no response to these phone calls, and there is a mental health flag on a person's claim, then the decision-maker should consider attempting home visits as a safeguarding measure. If these visits are ineffective, the decision-maker will proceed to decide whether the person had 'good cause' and whether or not to withdraw their ESA.

We are concerned this policy leads to too many people falling through the gaps. The reasons for this include:

1. The policy prescribes a narrow range of actions decision-makers should take (phone calls and safeguarding visits). There is no requirement for the decision-maker to come to an overall assessment of whether the individual is likely to be at risk, based on all of the information available to them.
2. The policy relies heavily on people being able to provide good reason for their failure to attend a WCA. The same people who are unable to make it to their appointments are likely to struggle to gather the evidence they need to make this case. The DWP should anticipate that in many cases they will need to make enquires and gather evidence in order to come to an informed decision.
3. The policy does not require DWP staff to actively make contact with local support services, healthcare professionals or family members before taking the decision to close the claim of someone who is potentially vulnerable or at risk.
4. It is unclear to us whether DWP staff are required to take into account all of the historical information the Department holds on an individual before making their final decision. It's also unclear whether staff have access to that information when it relates to a different benefit such as PIP.

## The impact of safeguarding failures

Research published by the DWP in 2016 found that every year 114,000 people with mental health problems see their ESA claim closed before reaching assessment. This amounts to a third (32%) of claims made by with mental health problems who make a claim. There are several reasons why someone might find themselves in this category. It is likely to include people who are not eligible for ESA because of their savings or income. However the same research found that two years after their ESA claim, 62,000 people with mental health problems were neither working, nor receiving benefits. We are not aware of any further work by the DWP to understand the circumstances of this group of people.

We often hear from people who have suffered deteriorations in their mental health after decisions to withdraw their benefits, often in circumstances where their entitlement for the benefit had not changed.

- *"I stopped spending money on food and heating to save for an uncertain future and relapsed terribly with anorexia. I had to give up my voluntary work and go into hospital as I was physically and mentally very unwell: the admission lasted a year - costing hundreds of thousands of pounds which I feel terribly guilty about. But if I had felt more supported to take recovery at my own pace, and not feared financial repercussions and sanctioning, then I do not think (nor do my medical team) that I would have relapsed at that point." ESA claimant.*
- *"Many of our clients have missed Jobcentre appointments because they cannot remember the date of their appointments. Their benefits have been stopped and we have had to advocate for getting them back. They become destitute while they are waiting for a decision which is terrible." Local Mind adviser.*

## Creating a safer benefits system

There are clear steps which the DWP could take to make sure that people who are very unwell can be protected from seeing their benefits stopped inappropriately.

### ***When someone has not attended their WCA and the DWP have not been able to make contact:***

- The DWP should not make a decision until they have obtained information about that person's current circumstances and health.
- The DWP should require its staff to actively contact local services who may have been in touch with the claimant. It should also routinely ask people claiming benefits to provide emergency contacts (for example family members or mental health professionals) who can be reached when it has not been

possible to reach the person making the claim.

- The DWP should change its processes so that it can keep a claim in payment while staff make further investigations in response to a possible safeguarding risk.
- The DWP should require staff to use past information from a person's previous benefit claims in order to make safeguarding decisions. It should make sure that all staff involved in those decisions have access to the information and the systems that would make this possible.

***The DWP should also strengthen its wider safeguarding processes:***

- It should create safeguards which apply consistently for different benefits and at every stage of the application process.
- It should require staff to produce a detailed written decision prior to withdrawing the benefits of anyone who is identified as potentially vulnerable. The decision summary should set out the evidence staff asked for and considered. It should explain how the DWP have decided that the person is not likely to be at risk.
- The DWP should allow for transparency and external scrutiny around its safeguarding processes including the serious case panel, and the IPR process.

The DWP must also reduce the level of risk people with mental health problems face when attempting to claim benefits system by addressing broader policies and practices. These include the use of frequent face-to-face reassessments for people with long-term health conditions, and the application of conditionality to disabled people and people with long-term health conditions.