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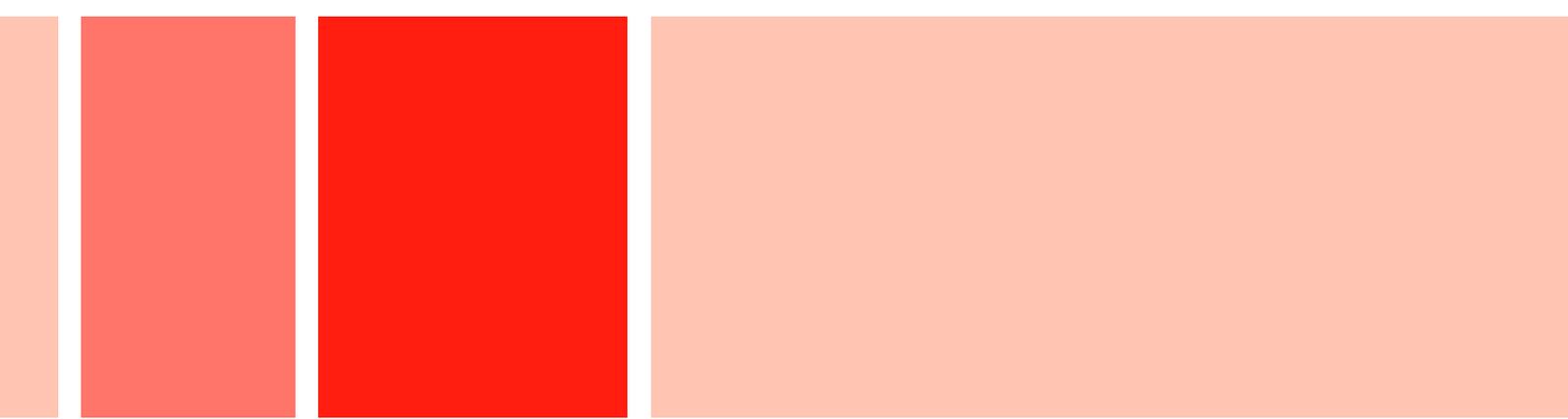
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Evaluation of the Disability Living Allowance Take-up Campaign for Children in Wales



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KPMG

Views expressed in this report are those of the researcher and not necessarily those of the Welsh Government

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Glossary

BABH	Better Advice Better Health
CAB / CABx	Citizens Advice Bureau / Citizens Advice Bureaux
DLA	Disability Living Allowance
DCMW	Disabled Children Matters Wales
DWP	Department for Work and Pensions
ENR	Entitled non-recipient
ESA	Employment and Support Allowance
ESF	European Social Fund
HMRC	Her Majesty's Revenue and Customs
IPC	Institute of Public Care
IS	Income Support
JSA	Jobseekers Allowance
KPI	key performance indicator
LA	Local Authority
LoO	Letter of Offer
NI	Northern Ireland
ONS	Office for National Statistics
SSA	Social Security Agency
TOR	Terms of Reference
VFM	Value for Money
WG	Welsh Government
WHS	Welsh Health Survey
WTE	Whole Time Equivalent

I. Executive Summary

I.1. Introduction

The Welsh Government committed funding of £500,000 for the period 2009-2011 in order to support Citizens Advice Cymru to deliver a pilot Disability Living Allowance (DLA) Take-up Campaign for Children in Wales (DLA Campaign).

KPMG was commissioned to evaluate the effectiveness of the Campaign. The aims of this evaluation were to estimate the impact that the Campaign had in generating additional benefit take-up to date, gauge the likely future impact of the Campaign and evaluate the implementation of the Campaign.

The assignment was undertaken in five main phases:

- Phase A – Project Initiation
- Phase B – Desktop review of a range of literature on benefit take-up and Citizens Advice progress reports as well as analysis of official benefit caseload statistics released by the Department for Work and Pensions (DWP).
- Phase C – Consultation with representatives from Citizens Advice Cymru and local Bureaux, associated stakeholders, and representatives from the Welsh Government. It also included qualitative and quantitative research with families.
- Phase D – Analysis and reporting of all findings.

I.2. Evidence Review

There are a wide range of well-documented barriers to benefit take-up known to impact on take-up rates. These include a lack of knowledge of availability of or eligibility for benefits, stigma associated with claiming means-tested benefits, reluctance to disclose personal information, difficulties in completing official forms, and concerns over the outcome of claims.

The literature highlights various means to increase take-up, including targeting people at life changing events and using trusted intermediaries such as GPs. However, the

literature also recognises that there is a need for more research and information, both on non take-up levels as well as on evidence of what works best and for whom. Finally, an additional difficulty exists in assessing the impact of take-up activities and disentangling their impact from other events or activities.

This means there are particular challenges when designing targeted activities and in monitoring impact, while such activities may not realise the anticipated results and may lack an underlying, justifying evidence base.

A review of available reports on other take-up schemes suggests that performance, measured as VFM, varied across the schemes. However, these schemes also differed in their approach, targeted client group and welfare benefit focus which makes it difficult to robustly conclude if schemes which focused on one specific benefit were more or less successful in increasing take-up compared to those which covered a suite of benefits. What is clear is that a full benefits check approach is a key determining factor in maximising income.

I.3. Review of DLA Take-up Campaign

Citizens Advice Cymru was awarded £500,000 for two years for a pilot DLA Take-up Scheme. In terms of performance, the Campaign was successful in meeting its benefits KPI of £3 million but narrowly missed its clients KPI, assisting 2,818 clients against a target of 3,000. However, it is highlighted that performance reflects confirmed gains only and so is likely to reflect an under reporting of actual gains.

A reliance on clients confirming benefits combined with a lack of clarity on the precise focus of the Campaign and composite reporting of benefits means that it is not possible to determine the overall effectiveness of the DLA Take-up Campaign, to measure its impact on DLA take-up and to accurately assess all additional benefit attributable to the Campaign. Nevertheless, based on its funding input, performance represents a value for money ratio of 1:6 for every pound spent which is reasonable, when compared to schemes elsewhere and given that this was a pilot.

However, performance varied substantially across Bureaux and it was clear that some Bureaux faced challenges in implementing the Campaign which was demonstrated in their low outputs. However, others had low levels of referral despite local networking and promotion which could suggest low levels of demand for DLA advice services for children with a disability and their families in these areas.

Consultation with Citizens Advice and the Welsh Government highlighted that the administration and implementation cost of the Campaign was small and proportionate to the funding. However, more robust management from both the Welsh Government and from Citizens Advice could have increased the impact of the Campaign.

I.4. Quantifying DLA Take-up

In Wales, there had been a steady increase in DLA caseload for those aged 0-18 years before falling back in November 2010. Over a four-year period, caseload for those aged 0-18 years increased at a greater rate than total DLA caseload for Wales. Interestingly however, the increase in caseload for those aged 0-18 years during the Campaign (i.e. between August 2009 and November 2010 (1.2%)) was not as sharp as in the two years before the Campaign started (7.3%). This could suggest that the Campaign has not had a substantial impact on DLA take-up.

The general trend over the last four years for DLA, Carers Allowance and JSA has been one of an increase in caseload. However, the percentage increase in DLA caseload was substantially lower than that of JSA and does not suggest a strong link between DLA take-up and the impact of the recession.

The TOR for this assignment recognised that estimating the total population eligible for claiming DLA in Wales would be very difficult for a range of factors and this has proven to be the case. While there is a range of data sources on the possible number of children with health needs, there are substantial limitations associated with each source including self-reporting issues, age band aggregation and dated data. More substantially, all the disability definitions used may not necessarily match the DLA

'functional' health criteria (i.e. care / mobility needs is not a strict 'medical' test) meaning that not all those reported as having illness and poor health would have care and mobility needs that would qualify them for DLA if they applied.

Therefore, the scope to comment on take-up rates in any meaningful way has been limited and it is not feasible to comment accurately or robustly on the size of the eligible population and hence the number of ENRs.

I.5. Consultation with Citizens Advice

Consultation with representatives from local Bureaux suggested that all were involved in a range of awareness raising and networking activities, receiving referrals from a range of organisations. However, it was clear there was an ongoing need to promote the service and highlight eligibility among families with a child with a disability.

Bureaux highlighted a range of barriers to increasing take-up. Specifically, in relation to families with a child with a disability, Bureaux highlighted that some families preferred to not consider their child had a disability, because either they wished to focus on what the child could do well, or there was a reluctance to accept the disability, or its extent or impact on their child.

Bureaux considered that the Campaign had increased their knowledge of welfare benefit services related to children with a disability and this knowledge had been cascaded to other Bureaux staff, thereby increasing capacity locally. This is an additional outcome and should be sustainable beyond this Campaign.

All Bureaux offered a full benefits check for families, reflecting that many families were in receipt of DLA but often were unaware of other related benefits. Bureaux considered the Campaign was administered well and overall was a success in terms of actual gains for families, highlighting that a holistic assessment approach ensured the Campaign had the maximum impact for families.

Bureaux considered there was a need for the Campaign to be continued to ensure that ENRs applied and were successful, and to ensure that families were in receipt of the correct premium. It was highlighted that any reduction in funding would result in Bureaux supporting fewer clients and potentially in longer waiting times for those being assisted.

I.6. Consultation with Key Stakeholders

Organisations that engaged with Citizens Advice to refer clients for specific advice and support were positive in their views on the services provided. They highlighted that they generally lacked the time, resources and expertise to provide comprehensive support with disability-related benefits advice and support and acknowledged Citizens Advice's expertise and knowledge of the benefits system.

In contrast, representatives from national stakeholder organisations were more critical of the approach adopted by Citizens Advice, which in part reflected their continuing disappointment at the Welsh Assembly's decision to direct funds via Citizens Advice. However, it in part reflected their disappointment at Citizens Advice's performance, which reinforced their views that they would have been better placed to deliver an effective take-up campaign, given their knowledge of disability related issues for children.

I.7. Consultation with Citizens Advice's Clients

A total of 178 respondents responded to a postal survey. A notable percentage of respondents had two or more children with disabilities and over half had an annual income substantially less than the average salary in Wales.

On average, families obtained an additional £93.66 per week in benefits, suggesting that a notable proportion of families were able to increase their annual income by a substantial percentage. The majority of respondents indicated that the additional money was used for everyday living with few respondents saving it. This would suggest that the Campaign is targeting / supporting those most at need.

The majority of respondents applied for benefits through Citizens Advice as they had become aware of their entitlement and most were not aware of any other organisations providing advice. Word of mouth was the most common way that respondents became aware of the DLA Campaign/support offered by Citizens Advice while advertising was the least common means which could suggest that advertising is less effective in comparison to word of mouth and other more personal contacts. Very few applied after becoming unemployed, suggesting a limited recessionary impact on the take-up of disability-related benefits.

Overall, respondents were overwhelmingly positive regarding the support provided by Citizens Advice with few suggesting improvements.

I.8. Conclusions and Recommendations

Impact of the Campaign

Performance

An assessment of Citizens Advice's performance indicates that the Campaign was successful in meeting its benefits target but missed its client target.

DLA caseload statistics for 0-18 years increased over the duration of the Campaign but the lack of specific DLA performance data associated with the Campaign means that it is not possible to comment on the percentage increase which could be attributed to the Campaign. However, available evidence suggests a limited recessionary impact on the take-up of disability-related benefits. Similarly, a lack of robust data on the possible number of children with health needs means it is not feasible to comment accurately or robustly on the size of the eligible population and hence the number of ENRs.

Implementation of the Campaign

The Welsh Government released funding to Citizens Advice Cymru to pilot the DLA Take-up Campaign. This facilitated a speedy allocation of funding across all LAs and

enabled Citizens Advice to leverage off its BABH initiative but it is not clear whether a public procurement would have yielded better outcomes ultimately.

The administration and implementation cost of the Campaign was small and proportionate to the funding. However, more robust management could have increased the impact of the Campaign.

However, greater oversight and critical challenge from Welsh Government combined with a firmer management approach from Citizens Advice towards some Bureaux may have helped improve outcomes and impact.

However, overall, performance represents a reasonable VFM ratio of 1:6, when compared to broadly comparable schemes elsewhere and taking account that this was a pilot. In addition, very strong performance across specific Bureaux suggests that it is possible for generalist advice providers to be as successful, if not more successful, than specialist providers in delivering a dedicated advice service to a specific interest group.

What Works

Bureaux were involved in a range of activities which included publicising the Campaign, developing a wide range of contacts and referral networks and in providing outreach, home visits and casework.

A number of key themes are clear:

- The findings suggest that ongoing and proactive networking with relevant organisations was successful in highlighting awareness of the Campaign.
- Targeting specific client groups with a clear referral route.

Recommendations

<i>Focus of the Campaign</i>	<p>The Welsh Government clarifies the specific aim and hence focus of the DLA Campaign i.e. DLA take-up versus income maximisation.</p> <p>This means that, if income maximisation is the specific aim then it is recommended that the Welsh Government procures a multiple benefit take-up scheme.</p>
<i>Full Benefits Check</i>	<p>Any future Campaign should adopt a full benefits check approach, irrespective of whether the focus of such a Campaign is on one or more specific benefits, thereby maximising family income and maximising the overall impact of the Campaign.</p>
<i>Procurement</i>	<p>A future Campaign should be procured through a public procurement process to help ensure transparency, greater competition and innovation in approach and improve value for money.</p>
<i>Action Plans</i>	<p>Successful provider(s) should produce clear action plans, drawing on evidence from the literature of what works and should report on inputs and outcomes across their plans.</p>
<i>Management, Monitoring, Reporting and Evaluation</i>	<p>Put in place clear reporting arrangements including clarity on performance data to be collated and reported on, bearing in mind the need for proportionate effort. Reporting arrangements should be effectively monitored across the life of the Campaign and these and performance data should facilitate an evaluation of the Campaign's impact.</p>

1 Introduction

1.1 Background

In July 2009, the Welsh Government provided funding of £500,000 for the period 2009-2011 in order to support Citizens Advice Cymru to deliver a pilot scheme to look at the best ways to increase the household incomes of families with disabled children. Citizen's Advice Cymru delivered this Disability Living Allowance (DLA) Take-up Campaign for Children in Wales (DLA Campaign, Campaign) to increase benefit uptake as part of their existing Wales wide Better Advice Better Health (BABH) initiative.

KPMG was commissioned to evaluate the effectiveness of the DLA Campaign with the specific aims of:

- Estimating the impact the campaign has had in generating additional benefit take-up to date.
- Evaluating the implementation of the Campaign, in terms of whether it was administered effectively and what it costs the Welsh Government and Citizens Advice to do so, weighed against the additional benefit take-up it has generated.
- Drawing conclusions on which local campaigns have had the most success and why and to highlight what lessons can be learnt from these approaches and to what extent these can be applied more widely.
- Making recommendations for the future implementation of the DLA Take-up Campaign and provide advice on the feasibility of a universal or multiple benefit take-up scheme.

1.2 The Need for an Evaluation

This evaluation was prompted by a number of factors, including:

- The Welsh Government recognises that encouraging the take-up of social security benefits, as a means of maximising income, is fundamental both in working towards the 2020 child poverty objective and in delivering the "One Wales" objectives to do with social justice, inequality and financial inclusion.
- Unemployment rose drastically since the start of the recession in 2008 and resulted in a greater reliance on the welfare system throughout Wales. The implications of

this economic downturn highlight the importance of policies that aim to maximise individual and household income and it is important that schemes such as these work effectively.

- The Welsh Government's commitment to identify any improvements to government-funded schemes, to ensure maximum impact for people on low incomes and those most in need and to ensure efficient administration of government-funded schemes. In addition, it must be ensured that the Campaign provides Value for Money (VFM).
- It was estimated that a substantial proportion of those eligible for DLA were not claiming it.

1.3 Terms of Reference

The specific deliverables within the terms of reference for the Evaluation of the DLA Take-up Campaign for Children in Wales were as follows:

In relation to the impact of the Campaign:

- Analyse the trends in benefit take-up prior to and since the implementation of the Campaign, with a view to establishing if:
 - a. any significant changes took place following its commencement; and
 - b. the magnitude of these changes is proportionate to the resources invested in the Campaign.
- Compare the observed trends in Wales with suitable comparator areas to establish:
 - a. how trends in Wales compare with other areas where similar campaigns have been implemented; and
 - b. how trends in Wales differ from areas where campaigns have not been implemented and policies for increasing take-up have been formulated at a local level.
- Compare take-up for families with children in Wales to take-up for DLA in general in Wales since 2007 to give further evidence of the effect of the Campaign.
- Estimate the potential unmet benefit take-up, as a means of gauging the potential for the future of the Campaign.

- Establish the extent to which the Campaign is a significant influence on people's decisions to take up benefits (or not).
- Provide evidence as to whether the recession and subsequent economic instability has had any effect on the claimant rates and numbers (i.e. if financial pressure on families of disabled children and young people has prompted a change in claimant rates).
- Using the literature, and where possible actual data, compare take-up campaigns which focus on one specific benefit to those which cover a suite of benefits to establish whether there are any differences in their success in increasing take-up.

In relation to the Scheme's implementation:

- Formulate an estimate of the administration/implementation cost of the Campaign to the Welsh Government and Citizens Advice Cymru and provide an assessment of value for money.
- Weigh this against the additional benefit take-up attributable to the Campaign.
- Gather detailed information on how the Campaign is implemented across Local Authority areas (LAs) and identify from it what elements of the processes could be improved and how this would contribute to furthering the objective of increasing take-up.
- Identify examples of successful and less successful approaches and provide suggestions for a way forward.

1.4 Methodology

The assignment was undertaken in four main phases:

- Phase A – Project Initiation

The purpose of Phase A was to initiate the project. A Project Steering Group meeting was held at the outset of the assignment to discuss the scope and key issues associated with the evaluation.

- Phase B – Desktop Review

This involved a review and analysis of the following:

- Relevant literature on benefit culture and barriers to benefit take-up was undertaken drawing on a range of reports as documented in Appendix 1. In addition, a review was undertaken of available reports on evaluations of other take-up schemes to compare campaigns which aim to increase the uptake of individual benefits to campaigns which cover a package of benefits.
- Key documentation relating to the Campaign. This included a review of all available Citizens Advice project updates and associated progress reports on activities and performance.
- DLA caseload prior to and since the implementation of the Campaign, drawing on statistics released by the DPW as well as caseloads for a range of means tested benefits. In addition, comparison was made with Great Britain (GB) the North East of England.
- Available health data in order to attempt to estimate the number of entitled non-recipients (ENRs) in order to establish a take-up rate and to gauge the proportional impact of the scheme.

- Phase C – Fieldwork

- A series of semi-structured interviews was undertaken with Citizens Advice's DLA Project Manager as well as local Bureaux managers and DLA Advisers involved in the management and operation of the Campaign. A follow-up focus group was held with a group of Bureaux Advisers to probe a number of issues in more detail.
- A postal survey, distributed via local Bureaux, was undertaken with approximately half of successful applicants. These responses were supplemented by a series of in-depth qualitative interviews with 10 families.
- In addition, consultation was undertaken with representatives from a number of key stakeholder organisations to explore their views on the Campaign to date. This included:

- Representatives from the Welsh Government
 - Representatives from national stakeholder organisations
 - Representatives from local stakeholder organisations identified by Bureaux.
- Phase D – Analysis and Reporting
 - The findings of all the above research have been consolidated into this report.

The following should be considered in relation to the findings contained in this report:

- Percentages may not sum to 100 due to rounding.
- Percentages of less than 0.5% are usually recorded as 0%.
- Percentages will sum to more than 100 for multiple response questions.
- Where the base cell is less than 100, the reader is asked to treat the results with caution.
- It must be stressed that consultation findings are the comments and the subjective views of consultees and their factual accuracy cannot be verified.

1.5 Report Structure

Section	Content
Section 2	Evidence Review
Section 3	Review of the DLA Take-up Campaign
Section 4	Quantifying DLA Take-up
Section 5	Consultation with Citizens Advice
Section 6	Consultation with Key Stakeholders
Section 7	Consultation with Citizens Advice Clients
Section 8	Conclusions and Recommendations

1.6 Acknowledgements

KPMG would like to thank those who contributed to this evaluation report, particularly representatives from the Welsh Government, Citizens Advice Cymru and Bureaux, and other interested stakeholders. This includes representatives from national stakeholder

organisations as well as Citizens Advice's clients who responded to our survey and those who participated in in-depth interviews.

2 Evidence Review

2.1 Introduction

This Chapter sets out the strategic context surrounding the DLA Take-up Campaign and draws on reports from disability groups which highlight the additional financial costs associated with raising a child with a disability.

It then looks at available literature on benefit culture and barriers to benefit take-up and reports, highlighting lessons to be learned from reports and campaigns elsewhere or in the past. Specifically, it looks at available evaluations of comparable or related campaigns elsewhere in the UK, and looks to compare campaigns which aim to increase the uptake of individual benefits to campaigns which cover a package of benefits to determine whether there are any differences in their success in increasing take-up.

2.2 Policy Rationale

The Welsh Government has recognised for some time that encouraging the take-up of social security benefits, as a means of maximising income, is fundamental both in working towards the 2020 child poverty objective and in delivering the “One Wales” objectives to do with social justice, inequality and financial inclusion.

The policy rationale for the DLA Take-up Campaign is clearly established in a range of strategies including:

- The Child Poverty Strategy for Wales that sets out the Welsh Government’s strategy for improving the health, education and economic outcomes for children in low-income families between 2011-2014.
- The Financial Inclusion Strategy for Wales which includes income maximisation as a stand-alone theme in the Strategy because of the specialist nature of the advice and support required and the amount of time needed to ensure benefits are received by those entitled to them. It highlights carers as a key group that are less likely to claim their benefit entitlement.

In addition, research indicates that families with a child with a disability face financial difficulties and are more likely to be living in poverty than other families. For example, a report by Contact a Family¹ highlighted the extra costs of raising a disabled child and the effects of the current recession on families. In addition, the report highlighted that families with disabled children overwhelmingly find the benefits system complex and difficult to navigate. Contact a Family recommended that the UK Government should ensure families are getting their benefits entitlements and called on the Government to act quickly to simplify the benefits systems.

2.3 Barriers

It is acknowledged that benefit take-up is a complex and multi-faceted issue and there is a high degree of consensus that there are a number of common barriers to take-up that impact on take-up rates and the success or otherwise of associated take-up campaigns.

This is demonstrated by the findings from a large body of literature relating to benefit take-up in both Great Britain and Northern Ireland. There has also been extensive scrutiny of government's efforts to increase take-up, highlighting the importance of benefit take-up in tackling poverty and contributing to social inclusion and well-being.

A review of research into the barriers to benefit take-up indicates that the main barriers include attitudinal perceptions among potential claimants regarding eligibility, stigma and fear of refusal or mistakes occurring, and systems or administrative barriers such as complex form filling or lack of knowledge and information.

Much of the research has also identified or made suggestions to overcome barriers and thereby to increase take-up, and consultation with benefit recipients has identified specific triggers to claiming and examples of improvements which would encourage more people to claim their eligible entitlement. Appendix 1 sets out details on the reports reviewed.

¹ Counting the Costs Survey 2010, The financial reality for families with disabled children (<http://www.cafamily.org.uk/pdfs/CountingtheCosts2010.pdf>)

2.4 Reasons for Not Claiming

The literature highlighted a wide range of reasons for ENRs not claiming. These included:

- Lack of awareness or knowledge of availability of specific benefits.
- Lack of awareness of eligibility for specific benefits.
- A misunderstanding about the way benefits work and the complexity of the system.
- Stigma and negative associations related to claiming benefits, particularly means tested benefits.
- Concerns over the outcome of claims, a fear either of refusal or of how the outcome may affect other benefits or of making a mistake and any subsequent impacts.
- Difficulties in completing official forms including difficulties understanding instructions and explanatory notes.
- Disinclination to complete forms / deal with bureaucratic processes.
- Reluctance to disclose personal information and a desire to safeguard privacy.
- Challenges in accessing benefit offices and associated waiting times involved.
- Perception that the amount awarded is not worth the effort required to apply.

2.5 Increasing Take-up

The literature highlighted a broad range of ways to increase take-up which included the following:

- A proactive approach could be more successful than general publicity. Home visits were highlighted as a means to increase take-up, especially for older people.
- A key theme is the idea of personal contact, often by a trusted intermediary who could be a friend or professional contact. This would suggest a proactive approach from organisations engaged in benefit take-up activities.
- Changes in personal circumstances often act as a trigger to encouraging people to enquire about eligibility which would suggest targeting people at specific life

changing moments such as a birth or death, reaching pensionable age or becoming unemployed.

- Many people are unaware of their eligibility and it is necessary to raise awareness.
- Large household bills can act as a trigger, especially if someone is finding it difficult to manage on their current income.
- The theme of partnership working was common and there was recognition that, while government could do more to encourage take-up, it could not overcome all barriers on its own. Partnership working ranged from informal partnerships to working with trusted intermediaries such as GPs. Some evidence suggested that long term established partnerships were more effective than new partnerships in funded initiatives.
- It was recognised that targeting at local levels could be improved by bringing together data sources and by data sharing (where legitimately allowed).

2.6 Evaluations of Other Take-up Schemes

KPMG undertook a desk-based exercise in order to compare schemes which focused on one specific benefit to those which covered a suite of benefits to establish whether there were any differences in their success in increasing take-up.

There were a number of key challenges associated with this activity which affect its usefulness and conclusions drawn:

- A literature review and consultation with a range of relevant stakeholders indicated there were a limited number of reports on formal evaluations of take-up schemes available.
- Of these evaluations, some focused on a specific benefit or benefits, while others focused on benefit maximisation take-up i.e. covered all benefits and grants that were applicable. However, even those schemes with a focus on a specific benefit often reported on composite gains across a range of benefits. Furthermore, the type of performance data reported, differences in how data were recorded and the

robustness of reported data make it difficult to draw definitive conclusions on the more successful approach.

- In addition, the range of differences across schemes means that differences in success could be attributed to other factors (such as target groups or type of take-up activities) as well as or irrespective of whether the scheme focused on one specific benefit or covered a suite of benefits.
- Finally, the level of detail varied considerable across available reports that limited the interpretation of results.

Table 1 sets out a summary of available reports and key performance outcomes for a range of take-up schemes.

Table 1: Summary of Take-up Schemes Elsewhere

Scheme and Relevant Issues and Performance
<p>Council Tax Benefit (CTB) and Housing Benefit (HB) Take-up Scheme in Wales</p> <p>The Welsh Government provided £4.5 million for benefit take-up activity over four years, focusing on Council Tax and Housing Benefit.</p> <p><i>Considerations</i></p> <p>In the main, performance was reported by LAs as overall changes in HB and CTB caseloads and expenditure, and not all of this could be attributed to the Take-up Scheme.</p> <p>A small number of LAs tracked all benefit recipients back to source/reason for their claim so they could accurately attribute to the HB and CTB take-up activities, but most did not.</p> <p>Some LAs worked in partnership with other organisations such as Citizens Advice which reported separately on take-up success. However, in these cases, confirmed gains covered a range of benefits and grants.</p> <p><i>Performance</i></p> <p>It is difficult to comment on the Scheme's overall performance, however individual LAs reported the following:</p> <ul style="list-style-type: none">- Anglesey achieved over £235,000 of benefits for local residents, suggesting a VFM of 1:10.- Bridgend realised £694,500 in HB and CTB in a two-year period, suggesting a VFM of 1:8- Wrexham invested £12,000 in an adviser and realised £77,000, suggesting a VFM of 1:6

- Rhondda Taf CAB received funding of £25,000 from Rhondda Cynon Taf LA to support its Scheme. Feedback from Rhondda Taf CAB highlighted that this investment resulted in a return of £506,000 across a range of benefits suggesting a VFM of 1:20.

Mencap Welfare Benefits Service, Wales

Mencap in Wales provides a dedicated welfare benefits advice service for people with a learning disability and their family/carers in Carmarthenshire and a Wales wide telephone helpline – both on a part-time basis.

Considerations

The Carmarthenshire service is a targeted and proactive service while the telephone service is a reactive helpline and does not provide the same level of support as the Carmarthenshire service.

Performance

Consultation with Mencap indicated the following performance:

Direct service:

- £110k
- VFM ratio = 1:7

Telephone service:

- £76k
- VFM ratio = 1:4.

Social Security Agency (SSA), Northern Ireland (NI)

SSA funded a three year Benefit Uptake Programme which was delivered in partnership with Citizens Advice in Northern Ireland focusing on a range of targeted client groups and a range of different benefits.

Considerations

The Programme enabled the Agency to trial a series of approaches, methodologies, target groups and benefits, including targeting those on DLA and targeting families with a child with a disability. All people targeted were already in receipt of at least one state benefit. Clients were contacted by SSA and encouraged to contact their local Citizens Advice Bureau.

Interestingly, the specific initiative for targeting families with a child with a disability was the least successful in comparison with initiatives targeting older pensioners (over 75 years), those under 60 years in receipt of income support etc. While it led to high response rates, this did not

correspond with a high successfully claims rates. This was because most targeted families were already in receipt of all eligible benefits.

A key finding from the Programme was that identification of an appropriate customer group segment and use of additional appropriate low-income filters were more successful than more general targeting.

Performance

An independent evaluation indicated the following performance over a 3 year period:

- 12,075 clients supported
- £14.1 million in benefit gains (this represents validated benefit gains by the SSA i.e. fully accurate outcomes)
- VFM ratio = 1:13.

Macmillan/Belfast Citizens Advice Cancer Welfare Benefits Advice

Macmillan Cancer provided funds for Citizens Advice to provide a dedicated Welfare Benefits Advice Service to cancer patients, their families and carers within the three main Belfast hospitals.

Considerations

The service provided holistic welfare advice services to cancer patients in a hospital setting and included a full benefits check. Reported gains included all welfare benefits as well as grants such as Macmillan grant.

Performance

An independent evaluation indicated the following performance over a 2.9 year period:

- 3,412 clients supported
- £4.8 million in benefit gains
- VFM ratio = 1:7.

Macmillan/Oxford Citizens Advice Benefits Advice Project

The Macmillan/Oxford Citizens Advice Benefits Advice Project was established to provide benefits advice, as an outpatient service, for people affected by cancer. In its first year, it was run by one full-time benefits adviser.

Performance

A project report indicated the following performance over its first year:

- 261 clients supported
- £308k in benefit gains

VFM ratio = not reported.

Macmillan / South Cumbria Citizens Advice Project

This was a partnership between Macmillan and Citizens Advice with funding provided by Cumbria Primary Care Trust. The number of staff increased from four to seven part-time caseworkers.

Performance

A project report indicated the following performance over a three year period:

- 731 clients supported
- £2.8 million in benefit gains

VFM ratio = not reported.

One indicator of success is the VFM associated with a scheme i.e. the amount of benefits gained as a ratio of funding. Table 1 demonstrates that performance varied across different schemes, with the VFM ranging from £4 in a Mencap project to £20 in a Citizens Advice project for every pound spent. However, it is clear that these schemes differed in approach, targeted client group and welfare benefit focus. This makes it difficult to conclude robustly if schemes that focused on one specific benefit were more or less successful in increasing take-up compared to those that covered a suite of benefits.

A key question for any take-up activity is whether the focus is on increasing take-up of a specific benefit (for example, if the number of ENRs is known to be high, or eligibility rules change thereby increasing the number of potential recipients). Or, alternatively, whether the focus is on maximising household income, which would be irrespective of welfare benefit or grant (for example, as part of an anti-poverty initiative).

The review of schemes suggests that the client group targeted and specific take-up activities may be a key determining factor in increasing take-up, while a full benefits check approach is a key determining factor in maximising income.

2.7 Summary

There are a wide range of well-documented barriers to benefit take-up known to impact on take-up rates. These include a lack of knowledge of availability of or eligibility for benefits, stigma associated with claiming means-tested benefits, reluctance to disclose personal information, difficulties in completing official forms, and concerns over the outcome of claims.

The literature highlights various means to increase take-up, including targeting people at life changing events and using trusted intermediaries such as GPs. However, the literature also recognises that there is a need for more research and information, both on non take-up levels as well as on evidence of what works best and for whom. Finally, an additional difficulty exists in assessing the impact of take-up activities and disentangling their impact from other events or activities.

This means there are particular challenges when designing targeted activities and in monitoring impact, while such activities may not realise the anticipated results and may lack an underlying, justifying evidence base.

A review of available reports on other take-up schemes suggests that performance, measured as VFM, varied across the schemes. However, these schemes also differed in their approach, targeted client group and welfare benefit focus which makes it difficult to robustly conclude if schemes which focused on one specific benefit were more or less successful in increasing take-up compared to those which covered a suite of benefits. What is clear is that a full benefits check approach is a key determining factor in maximising income.

3 Review of the DLA Take-up Campaign

3.1 Introduction

This Chapter provides an overview of the DLA Take-up Campaign, its delivery model and performance data from commencement to March 2011.

It also provides background information on DLA and demonstrates how receipt of DLA may act as a passport to other benefits.

3.2 Background / Overview of the Campaign

The Welsh Government released funding of £250,000 per annum for the period 2009-2011 to Citizens Advice Cymru to pilot a scheme to increase the household incomes of families with disabled children.

As referenced in Chapter 2, research and reports provided by Contact a Family demonstrated that families with disabled children are much more likely to be in poverty because of the higher costs involved in bringing up a child with a disability and the loss of income associated with either being a lone parent or in two parent families the need in many cases for one of the parents to give up work. It was also acknowledged that a substantial number of families with disabled children in Wales may not be claiming the DLA they are eligible to receive.

The DLA Take-up Campaign was implemented as part of the BABH initiative involving Citizens Advice Bureaux (CABx) delivering coordinated generalist and welfare advice through GP surgeries and health settings across Wales.

In part, this was to ensure the speedy allocation of funding across all LAs without the delays which would be associated with a formal tendering process. The Welsh Government recognised that Citizens Advice has substantial experience in providing advice on social security benefits and has significant knowledge of the benefits system. In addition, it considered that Citizens Advice would be able to leverage off its BABH

initiative and take full advantage of the expertise, links and relationships gained, thereby maximising the impact of the funding associated with the DLA Take-up Campaign.

A review of Citizens Advice's progress reports indicates that the Campaign was publicised in GP surgeries and health centres, leveraging off the BABH initiative. In addition, Bureaux developed a wide range of contacts and referral networks, across statutory and third sector organisations.

3.2.1 Issue

It is worth noting that the Terms of Reference (TOR) for this assignment explicitly reference an evaluation of the DLA Take-up Campaign for Children in Wales. However, the Letters of Offer (LoOs) to Citizens Advice for the funding referenced a Disability Benefits Take-up Initiative and similar sentiments were contained in other promotional material including ministerial announcements on the Campaign, for example, "Disabled children benefit uptake scheme to tackle child poverty".

This meant that Citizens Advice's focus for the Campaign was not solely or always on increasing DLA take-up but rather was on maximising income for the whole family by taking account of available grants (both disability and non-disability related), tax credits and grants from non-government sources. In a related issue, confirmed gains were reported on a composite basis rather than reported by benefit type.

3.3 Disability Living Allowance

Disability Living Allowance is a tax-free benefit for disabled children and adults to help with extra costs arising due to a disability. It is available to those with a physical or mental disability and whose disability is severe enough to need help or supervision in caring for themselves.

DLA is a non-means tested benefit and is usually not affected by any savings or income i.e. it can be paid regardless of income, savings or National Insurance contributions

record. It is tax-free and there are no restrictions on how it can be spent. Someone can get DLA even if they are working or studying.

DLA has two parts called 'components':

- A care component - if help is required for someone to look after themselves or someone needs supervision to keep safe.
- A mobility component - if someone cannot walk or needs help getting around. Some people will be entitled to get just one component; others may get both.

In addition, the care component and mobility component are paid at different rates depending on how the disability affects one.

3.3.1 Passport to other Benefits

Receipt of DLA may act as a passport to other benefits i.e. if someone receives DLA, then that person may be entitled to various other types of help. Sometimes the entitlement will be dependent on being in receipt of a particular component of DLA or a particular rate of DLA.

The means tested benefits and Tax Credits affected are:

- Income Support
- Income-related Employment and Support Allowance
- Pension Credit
- Housing Benefit
- Council Tax Benefit
- Income-based Jobseeker's Allowance
- Child Tax Credit
- Working Tax Credit.

Other potential benefits may be:

- Energy Efficiency Grants - a grant to help with home insulation and other heating improvements.
- Motability Scheme - receipt of the higher rate of DLA mobility component may be a passport to the Motability Scheme. (Through this scheme, someone can use their mobility component to lease or buy a car, wheelchair or scooter).
- Exemption from road tax (vehicle excise duty) - the higher rate of DLA mobility component may lead to exemption from road tax.
- Blue Badge – the higher rate of DLA mobility component will give entitlement to a Blue Badge which gives parking concessions. (Someone may still qualify if they do not receive the higher rate of DLA mobility component, if they meet certain conditions).
- Public Transport Concessions – recipients of DLA may be able to purchase a Disabled Person's Railcard which will give them, and a person travelling with them, concessions on many rail journeys.

Finally, if a person gets DLA then the person caring for them may be able to claim Carer's Allowance. Indeed, carers who are disabled or ill can also claim DLA in their own right, even if they already get, or qualify for, Carer's Allowance.

Thus, DLA is an important benefit in its own right and, in addition, it acts as a passport benefit. Therefore, its impact on families with a disabled child can be considerable.

3.4 Allocation of Funding

Citizens Advice Cymru allocated £30,000 (12%) per annum for project management and associated running costs including a contribution to salary costs associated with a part-time Project Manager and part-time Project Co-ordinator. Project management costs were reasonable when compared with management costs for other funded initiatives e.g. European Social Fund (ESF) projects. This approach ensured there was one central conduit between the Welsh Government and Citizens Advice, both for

general liaison as well as drawdown of funding and reporting of outcomes. It also allowed Citizens Advice to coordinate training across the Bureaux network and facilitate quarterly information days for DLA advisers. This approach also benefited Citizens Advice, enabling it to collate relevant information for social policy research and to lobby for change where required.

The remaining £220,000 was allocated across the local Bureaux network to ensure an equal distribution on an LA basis, irrespective of LA population/size. This approach ensured that, as per the Letter of Offer (LoO), there was one Adviser at a Bureau in each of the 22 LA areas. This meant that each LA area had a minimum of 0.2 Whole Time Equivalent (WTE), i.e. approximately seven hours per week, providing a dedicated advice and support service to disabled children, young people and their families. This approach was taken as being the most practical and equitable approach, given that funding of less than £10,000 per LA area would mean that it was not feasible for a local Bureau to provide any substantial form of service. Table 2 illustrates the distribution of funding across the local Bureaux network and LA area.

Table 2: Allocation of Funding

Bureaux	Local Authority Area	Funding
Ammanford	Carmarthenshire	£10k
Bridgend	Bridgend	£10k
Caerphilly	Blaenau Gwent, Caerphilly, and Monmouthshire	£30k
Cardiff	Cardiff	£10k
Ceredigion	Ceredigion	£10k
Conwy	Conwy	£10k
Cynon Valley	Rhondda Cynon Taff	£5k
Denbighshire	Denbighshire	£10k
Gwynedd	Gwynedd	£10k
Merthyr Tydfil	Merthyr Tydfil	£10k

Bureaux	Local Authority Area	Funding
Neath Port Talbot	Neath Port Talbot	£10k
Newport	Newport	£10k
Pembrokeshire	Pembrokeshire	£10k
Powys	Powys	£10k
Rhondda Taff	Rhondda Cynon Taff	£5k
Swansea	Swansea	£10k
Torfaen	Torfaen	£10k
Vale of Glamorgan	Vale of Glamorgan	£10k
Wrexham	Wrexham, and Flintshire	£20k
Ynys Mon	Ynys Mon	£10k
Total		£220k

Source: Citizens Advice

As shown in Table 2, resources were pooled across a small number of LA areas. Three Bureaux (Blaenau Gwent, Caerphilly and Monmouthshire) decided to combine their resources across two part-time DLA Advisers and Wrexham CAB provided a service across Wrexham and Flintshire LAs. Funding for Rhondda Cynon Taff was equally distributed to Cynon Valley and Rhondda Taff Bureaux.

3.5 Performance against Key Performance Indicators

The LoOs from the Welsh Government set out the following agreed key performance indicators (KPIs):

- 1,500 clients to be seen across Wales per annum.
- Generate confirmed benefits of £1.5 million per annum.
- Ensure appropriate information was provided in all 254 CABx outlets in Wales.

Therefore, Citizens Advice Cymru set Bureaux the following performance targets per LA area:

- 70 clients assisted per annum.

- £70,000 per annum in benefits.

Table 3 outlines overall performance against the LoO KPIs. This indicates 2,818 clients were assisted, with confirmed gains of £3 million, suggesting an average of £1,065 per client. Thus, the Campaign met its benefits target although missed its client target of 3,000 over two years. Based on the funding input, performance represents a VFM ratio of 1:6.

Table 3: Performance against Targets

	LoO Targets	Outturn total	% Achieved
Clients	3,000	2,818	94%
Benefits	£3 million	£3 million	100%

Source: Citizens Advice

Table 4 shows the confirmed gains from the Bureaux network across each LA from June 2009-June 2011. This demonstrates that, although the Campaign met its overall LoO benefits target, the number of clients assisted and confirmed gains varied fairly substantially across local Bureaux.

Table 4: Clients and Confirmed Gains, June 2009 – June 2011²

Authority	Delivered by	Number of Clients assisted	Confirmed gains
Blaenau Gwent	Caerphilly CAB	74	£75,000
Bridgend	Bridgend CAB	77	£31,127
Caerphilly	Caerphilly CAB	389	£222,520
Cardiff	Cardiff CAB	84	£51,773
Carmarthenshire	Rhydaman CAB	121	£111,578
Ceredigion	Cardigan CAB	142	£106,794
Conwy	Conwy and District CAB	52	£30,216
Denbighshire	Denbighshire and District CAB	95	£411,110

² Legend:

Most successful	Least successful
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Authority	Delivered by	Number of Clients assisted	Confirmed gains
Flintshire	Wrexham CAB	121	£151,324
Gwynedd	Gwynedd CAB	156	£67,368
Merthyr Tydfil	Merthyr Tydfil CAB	58	£46,247
Monmouthshire	Caerphilly CAB	56	£27,269
Neath/Port Talbot	Neath CAB	194	£200,664
Newport	Newport CAB	212	£405,472
Pembrokeshire	Pembroke District CAB	100	£138,418
Powys	Powys CAB	110	£185,257
Rhondda Cynon Taff	Cynon Valley & Rhondda Taff CABx	297	£172,795
Swansea	Swansea CAB	117	£155,282
Torfaen	Torfaen	10	£11,604
Vale of Glamorgan	Vale of Glamorgan CAB	65	£35,134
Wrexham	Wrexham CAB	194	£204,467
Ynys Mon	Ynys Mon CAB	94	£159,717
Total		2,818	£3,001,136

Source: Citizens Advice

Key observations:

- The number of clients assisted ranged from 10 in Torfaen to 389 in Caerphilly.
- Confirmed gains varied from £11,600 in Torfaen to £411,110 in Denbighshire.
- The client target (70 per annum) was not achieved in the majority of LA areas (n=15) and the benefits target (£70,000 per annum) was not achieved in over half of LA areas (n=12).

While variation in performance may be attributable in part to the population size of the LA area³, it is unlikely to be the sole reason given that Ceredigion (one of the smallest LAs) met its client target while Cardiff (the largest LA) did not.

Some Bureaux faced a number of issues and challenges that adversely affected their outputs. For example, performance in Conwy and Torfaen Bureaux was affected by

³ Population size does not correlate to the number of potential eligible families, but it stands to reason that larger LAs would have potentially a greater number of eligible families than smaller LAs.

long-term staff sickness. Cardiff CAB encountered operational challenges which impacted on the Campaign and this was reflected in its very low outputs. Subsequently, local arrangements were put in place to ensure that these Bureaux allocated sufficient resource to the Campaign to ensure that they met their local targets but, as demonstrated by performance data, these were not successful.

Other reasons for variation in performance included differences in the level of leverage from the BABH initiative. Some Bureaux BABH projects had focused on adult mental health provision which meant these Bureaux had to develop links with organisations providing services to children with a disability which have taken time to result in referrals to Citizens Advice services. Such examples included Blaenau Gwent and Monmouthshire, where referral levels remained low despite networking and promotion. This suggested a low level of need in these LAs. However, as noted, Blaenau Gwent and Monmouthshire pooled resources with Caerphilly which meant all three LAs benefited from a critical mass of experienced advisers while allowing these Bureaux to redirect resources according to client needs.

3.6 Interpretation and Analysis

It is necessary to highlight a number of salient points regarding interpretation and analysis of this performance data:

- A confirmed gain refers to benefits recorded by local Bureaux and includes a range of financial benefits including DLA and other welfare benefits such as Carers Allowance, Employment Support Allowance etc. Consultation with CAB confirmed that not all Bureaux were retrospectively able to provide a breakdown of gains by benefit type for the purposes of this evaluation⁴.
- This means that it is not possible to report on actual DLA gains over the period of the Campaign to date and so makes it difficult to comment conclusively on the effectiveness of the Campaign on solely DLA take-up.

⁴ Some Bureaux maintained manual records equating to £1,504,097 of benefits. Of this figure, 56% (£842,294) was for DLA.

It also means that the performance data for this DLA Campaign does not facilitate comparison with take-up campaigns which focus on one specific benefit to those which cover a suite of benefits to establish whether there are any differences in their success in increasing take-up.

- In most instances, local Bureaux are dependent on following up on clients or clients returning to them to confirm if a specific benefit claim and/or appeal has been successful. This does not happen in every instance, not least because Bureaux have limited administrative support and resources are prioritised on supporting clients and undertaking casework. Therefore, it is likely that confirmed benefits represent an under reporting of actual benefits, but it is not possible to assess or quantify the level of under reporting.

This presents a challenge in determining the effectiveness of the DLA Take-up Campaign, and in accurately assessing all additional benefit attributable to the Campaign.

In contrast, a take-up scheme in NI established clear links between Citizens Advice NI, which delivered the scheme, and the SSA which funded the scheme and administers welfare benefits in Northern Ireland. This enabled SSA to track every client supported by Citizens Advice NI and to accurately record and confirm all financial gains. In part, this was required as funding for the take-up was based on an output related funding model (ORF), but also represents Citizens Advices' close working relationship and partnership with the SSA.

- It is recommended that Citizens Advice Cymru explore the feasibility and practicalities of tracking and monitoring clients with the Disability and Carers Service⁵ (without contravening Data Protection legislation), and that such discussions are facilitated by the Welsh Government. Going forward, this would enable the effectiveness of the DLA Take-up Campaign to be accurately and robustly assessed, and would accurately assess all additional benefit attributable to the Campaign.

⁵ The Disability and Carers Service (DCS) is part of the Pensions, Disability and Carers Service (PDCS) which is an executive agency of the DWP.

3.7 Administration of the Campaign

Consultation with Citizens Advice and representatives from the Third Sector Unit, in the Welsh Government confirmed that the administration and implementation cost of the Campaign was small and in proportion to the total funding available. No substantial suggestions were made in terms of changes or improvements to the administration.

The oversight of the Campaign from the Welsh Government was described as “light touch”, again reflecting the proportionate effort required, a requirement to allocate funding in a timely manner and that the Campaign was a pilot scheme. This meant that Citizens Advice needed a degree of flexibility and scope to test various approaches and to tailor activities to knowledge, experience and custom in local areas.

However, this “light touch” did mean that there was some lack of clarity around the focus of activities which meant that not all Bureaux focused their activities on DLA take-up, and confirmed gains for DLA take-up specifically were not formally reported. It also resulted in a lack of critical analysis and challenge to Citizens Advice on its approaches and performance.

Similarly, Citizens Advice Cymru’s project management was one of a participatory management style and of working collectively with local Bureaux, especially those which struggled to implement the Campaign effectively. However, in light of the wide variation in performance, and specifically the poor performance in some Bureaux, it may have been more appropriate for a firmer approach with Bureaux and alternative distribution of funding across Bureaux, particularly in the second year. For example, Wrexham CAB provided services successfully across Wrexham and Flintshire and this approach could have been considered in other locations.

3.8 Summary

Citizens Advice Cymru was awarded £500,000 for two years for a pilot DLA Take-up Scheme. In terms of performance, the Campaign was successful in meetings its

benefits KPI of £3 million but narrowly missed its clients KPI, assisting 2,818 clients against a target of 3,000.

A reliance on clients confirming benefits combined with a lack of clarity on the focus of the Campaign and composite reporting of benefits means that it is not possible to determine the overall effectiveness of the DLA Take-up Campaign, to measure its impact on DLA take-up and to accurately assess all additional benefit attributable to the Campaign. Nevertheless, based on its funding input, performance represents a value for money ratio of 1:6 for every pound spent which is reasonable, when compared to schemes elsewhere and given that this was a pilot.

However, performance varied substantially across Bureaux. Indeed, the benefits target was not achieved in over half of LA areas (n=12) and it was clear that some Bureaux faced challenges in implementing the Campaign which was demonstrated in their low outputs. However, others had low levels of referral despite local networking and promotion which could suggest low levels of demand for DLA advice services for children with a disability and their families in these areas.

The administration and implementation cost of the Campaign was small and proportionate to the funding. However, more robust management could have increased the impact of the Campaign.

4 Quantifying DLA Take-up

4.1 Introduction

This Chapter examines the number of young people aged 0-18 years in receipt of DLA in Wales and the number of people overall in receipt of DLA in Wales to provide evidence of the impact of the Campaign.

It also looks at how trends in Wales compare with Great Britain as a whole and specifically with the North East of England.

The North East of England was selected because, of the English regions, it is the most similar to Wales across a range of socio-economic indicators including employment rates, earnings, health outcomes such as limiting long-term illness, welfare recipients and industrial legacy. In addition, the North East has not implemented any specific take-up campaign⁶.

Data from DWP on DLA caseloads have been compared since August 2007 to November 2011 (the most recent release) in order to present trends in take-up prior to and since the implementation of the Campaign⁷. This timeframe was used as August 2009 data represents the closest date following commencement of the Campaign in June 2009, and the Campaign would have been operational by August 2009.

In addition, this Chapter examines caseload for a range of other benefits (Carers Allowance and Jobseekers Allowance (JSA)) to help determine if trends in caseload are similar to DLA caseloads, and thereby provide evidence as to whether the recession

⁶ Consultation with a range of national disability organisations and DWP did not suggest any region where similar campaigns have been implemented.

⁷ The DLA Take-up Campaign for families with children with disabilities in Wales covers children aged 0-18 years. However, official DWP releases for DLA caseload report on those aged 18 years within an 18-24 age band. DWP was contracted to disaggregate the 18-24 age band and provide data for 18 years only. Therefore statistics in this Chapter provided for DLA recipients aged 0-18 are a combination of DWP's official releases for recipients aged 0-17 and information provided directly by DWP for those aged 18.

and subsequent economic instability has had any effect on the claimant rates and numbers for DLA.

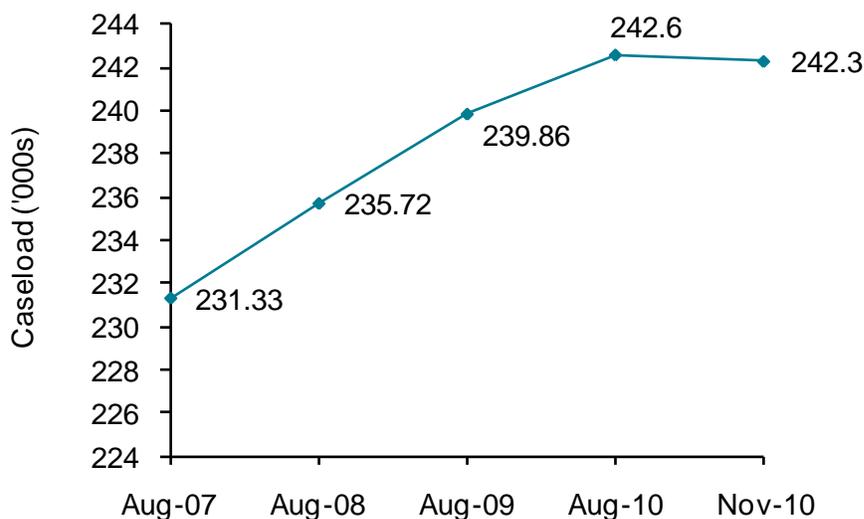
Finally, this Chapter examines the feasibility of estimating the potential unmet benefit take-up, as a means of gauging the potential for the future of the Campaign.

4.2 Analysis of DLA Caseload in Wales

Figure 1 shows the total number of DLA recipients in Wales between August 2007 and November 2010. This demonstrates that there has been a steady increase in the number of DLA recipients between August 2007 and August 2010, increasing by 5.9% from around 231,300 in August 2007 to 242,600 in August 2010. There was then a marginal drop in caseload to around 242,300 in November 2010 (a drop of 0.1%).

Between August 2009 and November 2010, there was an overall increase of 1.1% in the number of DLA recipients in Wales. It is interesting to note that the increase in caseload is not as sharp between August 2009 and November 2010 (the period during which the Campaign was taking place) than for the period August 2007 to August 2009, before the Campaign which saw an increase of 3.7%.

Figure 1: Total DLA Caseload in Wales



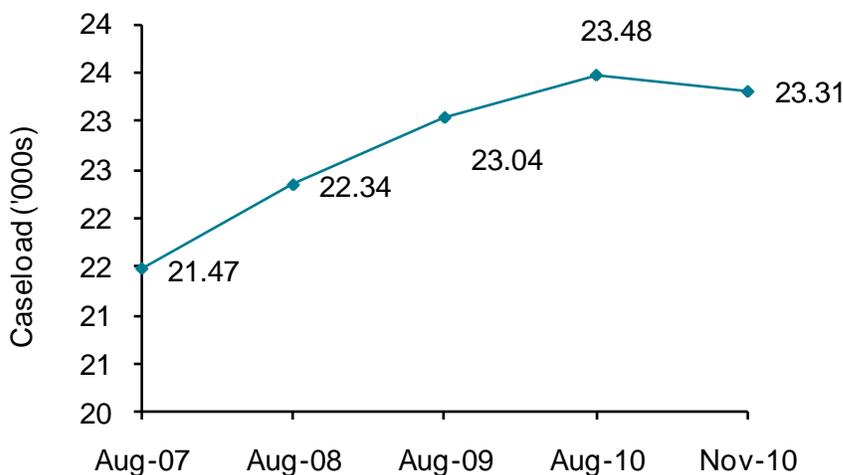
Source: DWP Statistics

With regards to families with children in Wales, Figure 2 shows that there has been a steady increase in the number of DLA recipients, from around 21,470 in August 2007 to 23,480 in August 2010 (an increase of 9.4%), with a marginal decrease of 0.7% to 23,310 in November 2010.

There has also been an increase in the DLA caseload between August 2009 and August 2010, during which time the number of DLA recipients (aged 0-18) has increased by 1.9%, from 23,040 to 23,480 in 2010. This would suggest that the proportion of DLA recipients aged 0-18 has increased at a greater rate than total DLA caseload as a whole in Wales. However, given the absence of DLA performance data associated with the Campaign, it is not possible to comment robustly on the reasons for this or attribute any increase to the impact of the Campaign.

Interestingly, and as with the total DLA caseload in Wales, the increase in caseload between August 2009 and November 2010 (1.2%) was not as sharp as in the two years before the Campaign started (7.3%). This could suggest that the Campaign has not had a substantial impact on DLA take-up.

Figure 2: DLA Caseload in Wales (aged 0-18)



Source: DWP Statistics

Table 5 shows the number of DLA recipients aged 0-18 for each LA between August 2007 and November 2010. Changes in caseload varied substantially across LAs, ranging from a decrease of 4.9% in Ceredigion to an increase of 18.7% in Denbighshire.

The percentage changes in caseload in each LA both before the Campaign (August 2007 to August 2009) and during the Campaign (August 2009 to November 2010) are also displayed. These changes are also reflected in Figure 3.

The data shows that there was a much greater increase in caseload between August 2007 and August 2009 (7.3%) than during the period August 2009 to November 2010 when the Campaign was running (1.2%).

Table 5: DLA Caseload aged 0-18 by LA in Wales

Local Authority	Aug-07	Aug-08	Aug-09	Aug-10	Nov-10	Difference Aug-07-Nov-10	Difference Aug-07-Aug-09	Difference Aug-09-Nov-10
Blaenau Gwent	0.49	0.47	0.51	0.52	0.5	2.0%	4.1%	-2.0%
Bridgend	1.05	1.12	1.17	1.21	1.19	13.3%	11.4%	1.7%
Caerphilly	1.45	1.50	1.53	1.52	1.5	3.5%	5.5%	-2.0%
Cardiff	2.24	2.33	2.38	2.43	2.4	7.1%	6.2%	0.8%
Carmarthenshire	1.25	1.38	1.42	1.42	1.43	14.4%	13.6%	0.7%
Ceredigion	0.41	0.41	0.39	0.40	0.39	-4.9%	-4.9%	0%
Conwy	0.75	0.80	0.82	0.83	0.84	12.0%	9.3%	2.4%
Denbighshire	0.75	0.82	0.86	0.89	0.89	18.7%	14.7%	3.5%
Flintshire	1.01	1.04	1.09	1.08	1.09	7.9%	7.9%	0%
Gwynedd	0.60	0.63	0.66	0.68	0.68	13.3%	10.0%	3.0%
Merthyr Tydfil	0.45	0.49	0.52	0.50	0.5	11.1%	15.6%	-3.8%
Monmouthshire	0.46	0.48	0.51	0.52	0.52	13.0%	10.9%	2.0%
Neath Port Talbot	1.28	1.31	1.34	1.39	1.4	9.4%	4.7%	4.5%
Newport	1.12	1.14	1.18	1.19	1.2	7.1%	5.4%	1.7%
Pembrokeshire	0.86	0.91	0.91	0.95	0.93	8.1%	5.8%	2.2%
Powys	0.77	0.79	0.83	0.83	0.79	2.6%	7.8%	-4.8%
Rhondda Cynon Taff	1.91	1.97	2.06	2.11	2.08	8.9%	7.9%	1%
Swansea	1.62	1.70	1.76	1.85	1.83	13%	8.6%	4%
Torfaen	0.74	0.76	0.75	0.75	0.73	-1.4%	1.4%	-2.7%
Vale of Glamorgan	0.85	0.85	0.85	0.86	0.85	0%	0%	0%
Wrexham	1.01	1.04	1.10	1.13	1.14	12.9%	8.9%	3.6%
Ynys Mon	0.40	0.40	0.40	0.42	0.43	7.5%	0%	7.5%

Local Authority	Aug-07	Aug-08	Aug-09	Aug-10	Nov-10	Difference Aug-07- Nov-10	Difference Aug-07- Aug-09	Difference Aug-09- Nov-10
Total	21.47	22.34	23.04	23.48	23.31	8.6%	7.3%	1.2%

Source: DWP Statistics

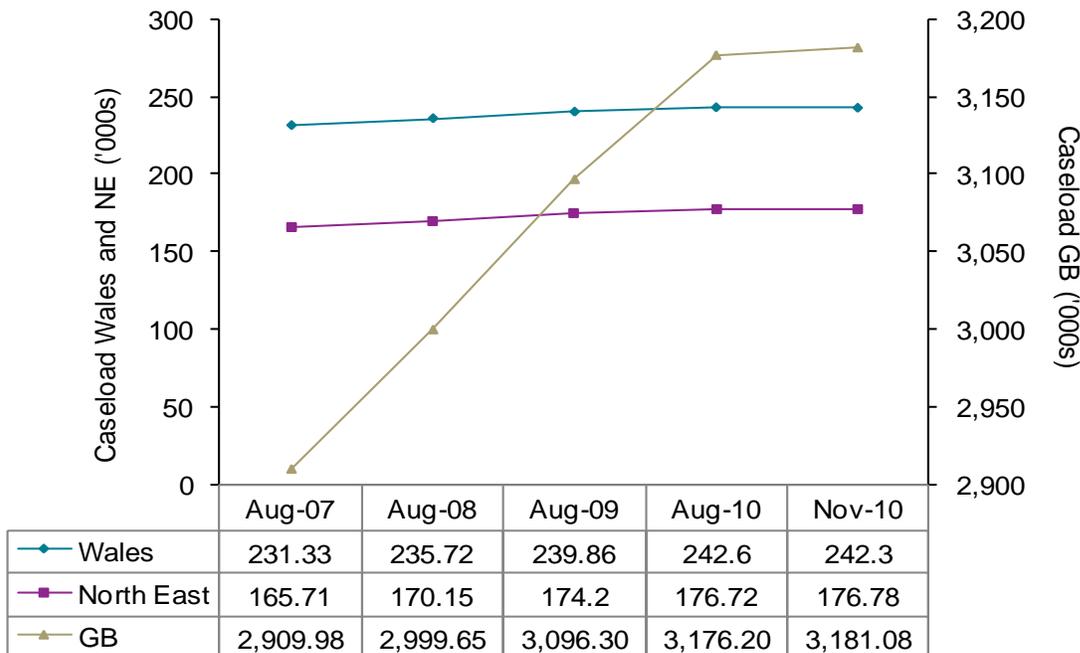
4.3 Analysis of DLA Caseload in Great Britain and the North East of England

DLA caseload also increased across Great Britain (GB) as a whole and the North East of England, as demonstrated in Figure 3.

In Great Britain, the total number of DLA recipients of all ages increased by 9.32% between August 2007 and November 2010, from 2.91 million to 3.18 million. Similar to the trend in Wales, the increase in the period after August 2009 (2.74%) was less pronounced than the increase from August 2007 to August 2009 (6.4%).

The trend in DLA caseload in the North East of England was similar to Wales and to GB overall, although the percentage increase was marginally higher here than in Wales. The total number of DLA recipients increased by 6.68% between August 2007 and November 2010. This was in comparison to a 5.9% increase in Wales during the same period. Between August 2009 and November 2010, there was a small increase in DLA caseload of 1.48%, which was slightly higher than the increase in Wales of 1.14%.

Figure 3: Total DLA Caseload in Wales, North East of England & Great Britain



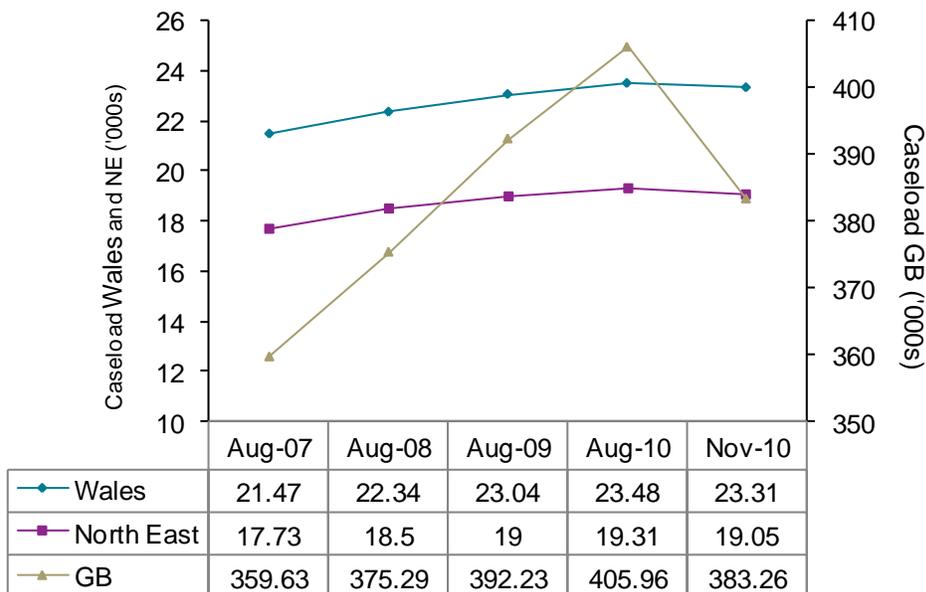
Source: DWP Statistics

Between August 2007 and November 2010, DLA caseload among those aged 0-18 increased overall by 6.57% in GB.

Interestingly, between August 2009 and November 2010, DLA caseload among those aged 0-18 actually decreased by 2.29% in GB, in comparison to a 1.2% increase in Wales during the same period.

In the North East of England, the total caseload among those aged 0-18 increased from 17,730 in August 2007 to 19,050 in November 2010 (an increase of 7.45%). Between August 2009 and August 2010, the number of DLA recipients increased by 0.26%, which was a much lower increase than in Wales (1.2%).

Figure 4: DLA Caseload aged 0-18 in Wales, North East of England & Great Britain

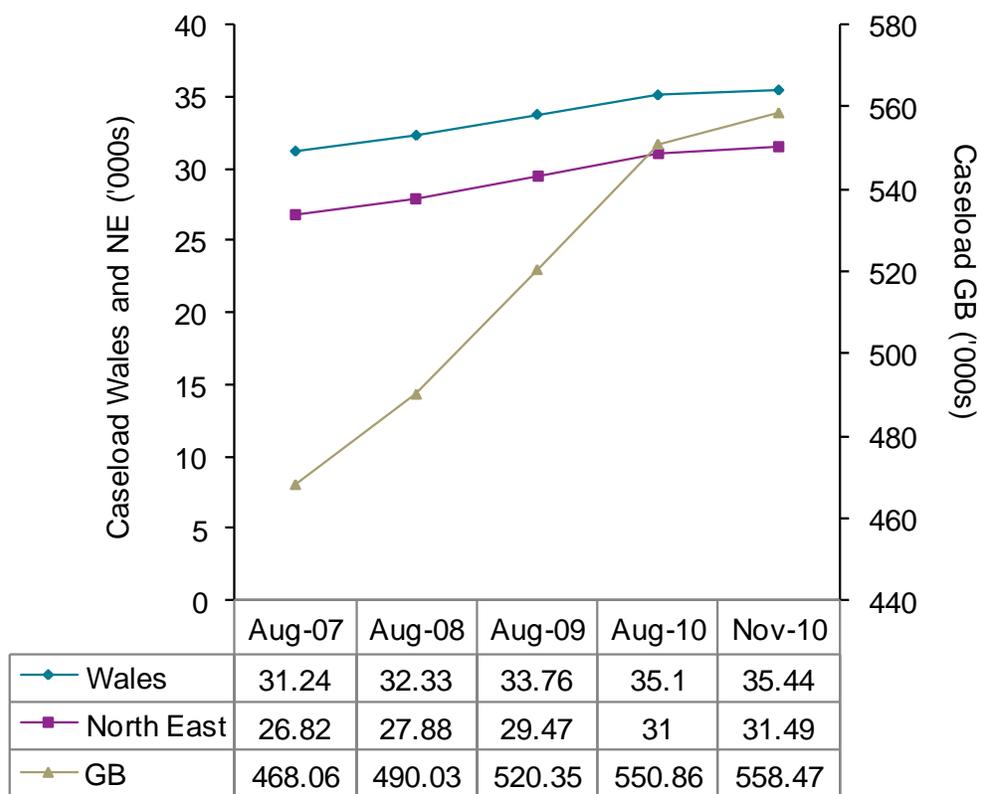


Source: DWP Statistics

4.4 Carer's Allowance

Figure 5 shows the number of people claiming Carer's Allowance in Wales, North East of England and GB as a whole.

Figure 5: Carer’s Allowance in Wales, North East of England & Great Britain



Source: DWP Statistics

Between August 2007 and November 2010, the number of recipients of Carer’s Allowance in GB increased by 19.32%, while the increase between August 2009 and November 2010 was 7.33%. The increase in caseload was more pronounced in GB as a whole in comparison to either Wales or the North East of England.

The number of people receiving Carer’s Allowance increased by 13.44% in Wales between August 2007 and November 2010, in comparison to 17.41% in the North East of England. The increase between August 2009 and November 2010 was also higher in the North East of England (6.85%) in comparison to Wales (4.98%).

4.5 Jobseekers Allowance

Jobseekers Allowance (JSA) caseloads were analysed as these statistics directly reflect economic conditions.

Table 6 shows that there was a substantial increase in JSA in Wales during the period 2007-2010, most notably between August 2007 and August 2009, where the number of JSA claimants increased by 37,980 (an increase of 98%). This number actually dropped by 12.9% between August 2009 and November 2010.

Table 6: JSA Caseload in Wales

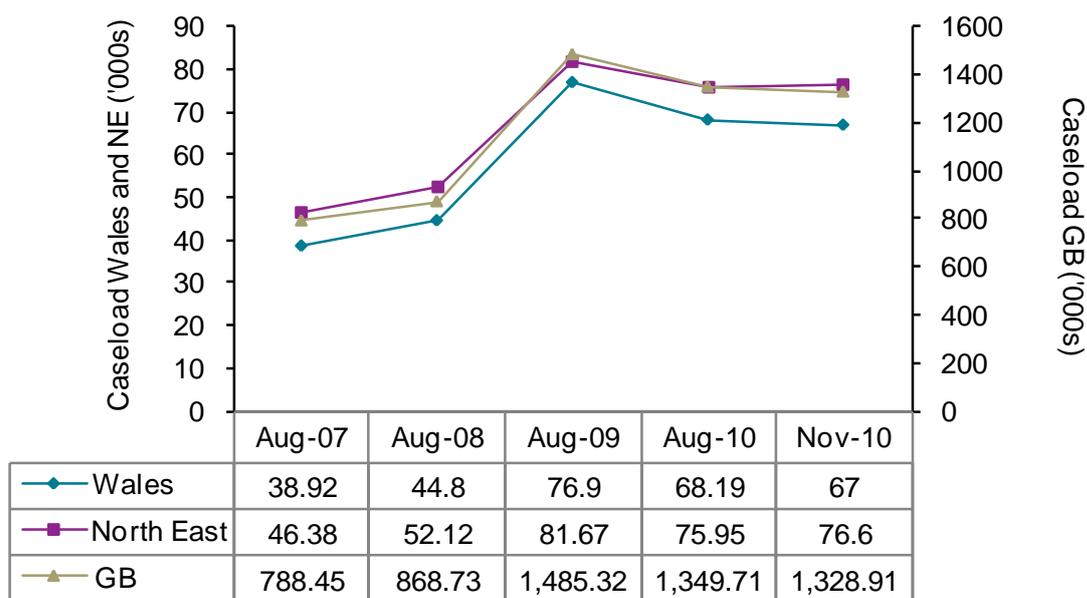
	Aug-07	Aug-08	Aug-09	Aug-10	Nov-10	Difference Aug-07 to Nov-10	Difference Aug-09 to Nov-10	Difference Aug-07 to Aug-09
Blaenau Gwent	1.81	2.13	3.23	2.79	2.71	49.72%	-16.10%	78.45%
Bridgend	1.77	1.95	3.81	3.12	3.06	72.88%	-19.69%	115.25%
Caerphilly	2.76	3.4	5.82	5.11	4.96	79.71%	-14.78%	110.87%
Cardiff	4.48	5.44	9.28	9.06	8.98	100.45%	-3.23%	107.14%
Carmarthenshire	2.07	2.19	3.45	3.28	3.06	47.83%	-11.30%	66.67%
Ceredigion	0.64	0.58	0.85	0.78	0.93	45.31%	9.41%	32.81%
Conwy	1.36	1.59	2.56	2.21	2.27	66.91%	-11.33%	88.24%
Denbighshire	1.28	1.45	2.24	2	2.13	66.41%	-4.91%	75.00%
Flintshire	1.6	1.79	3.47	2.96	2.82	76.25%	-18.73%	116.88%
Gwynedd	1.45	1.49	2.02	1.9	2.21	52.41%	9.41%	39.31%
Merthyr Tydfil	1.15	1.37	2.41	1.99	1.9	65.22%	-21.16%	109.57%
Monmouthshire	0.62	0.74	1.52	1.29	1.21	95.16%	-20.39%	145.16%
Neath Port Talbot	1.98	2.12	3.71	2.97	2.54	28.28%	-31.54%	87.37%
Newport	2.21	2.58	4.68	4.04	4.06	83.71%	-13.25%	111.76%
Pembrokeshire	0.91	1.04	2.15	2.22	2.3	152.75%	6.98%	136.26%
Powys	1.1	1.18	1.98	1.61	1.65	50.00%	-16.67%	80.00%
Rhondda Cynon Taff	3.2	4.01	7.08	6.05	6.02	88.13%	-14.97%	121.25%
Swansea	3.13	3.39	5.72	5	4.5	43.77%	-21.33%	82.75%
Torfaen	1.35	1.55	2.76	2.34	2.34	73.33%	-15.22%	104.44%
Vale of Glamorgan	1.39	1.8	3.13	2.78	2.77	99.28%	-11.50%	125.18%
Wrexham	1.59	1.88	3.42	2.98	2.93	84.28%	-14.33%	115.09%
Ynys Mon	1.07	1.13	1.61	1.71	1.65	54.21%	2.48%	50.47%

	Aug-07	Aug-08	Aug-09	Aug-10	Nov-10	Difference Aug-07 to Nov-10	Difference Aug-09 to Nov-10	Difference Aug-07 to Aug-09
Total	38.92	44.8	76.9	68.19	67	72.15%	-12.87%	97.58%

Source: DWP Statistics

Figure 6 shows the number of people claiming JSA increased by 72.15% in Wales between August 2007 and November 2010, in comparison to 65.16% in the North East of England. The increase in GB as a whole was 68.55% between August 2007 and November 2010, which was less pronounced than the increase in Wales.

Figure 6: Jobseekers Allowance in Wales, the North East of England and GB



Source: DWP Statistics

4.6 Relationship between DLA and Recession

Unemployment more than doubled in Wales between the peak of the boom and the depths of the recession leaving the country worse affected than any other UK nation.

JSA statistics clearly demonstrate a recessionary effect and the impact of the economic climate, and this impact has been greater in Wales than in the North East of England and in GB overall, as demonstrated by the greater increase in JSA caseload in Wales.

DLA caseload in Wales has increased year-on-year, until falling back marginally in November 2011, and similar trends were observed in the North East of England and

in GB overall. Similarly, Carers Allowance has seen an increase year-on-year across all three areas.

Therefore, the trend over the last four years has been one of an increase in caseload across all three benefits. However, the percentage increase in DLA caseload in all areas was substantially lower than that of JSA, and the increase in DLA caseload in Wales has been marginally lower than in GB overall, although higher than in the North East of England. In addition, unlike JSA, there has been a consistent rise in DLA take-up for a considerable number of years prior to 2007.

Therefore, the evidence does not suggest a strong link between DLA take-up and the impact of the recession.

4.7 Estimates of Unmet Take-up

The Terms of Reference (TOR) for this assignment requested an estimation of the potential unmet benefit take-up, as a means of gauging the potential for the future of the Campaign. Ideally, this would mean estimating the number of ENRs in order to establish a take-up rate.

The DWP reports on take-up of means tested benefits⁸ only and there are no official estimates of non-means tested benefits such as DLA. This is due to the complexity and difficulties in robustly estimating the total population eligible for claiming DLA (and other non-means tested benefits).

Indeed, DWP commissioned a feasibility study on the take-up rate of DLA and Attendance Allowance⁹. This study highlighted that the accurate identification of the eligible is difficult in the case of DLA for a number of reasons:

⁸ Income Related Benefits Estimates of Take-Up in 2008-09' presents estimates for Income Support, Pension Credit, Housing Benefit, Council Tax Benefit and Jobseeker's Allowance.

⁹ The take-up rate of Disability Living Allowance and Attendance Allowance: Feasibility study; by Diana Kasparova, Alan Marsh and David Wilkinson.

- DLA is non-means-tested and so it is impossible to use existing administrative data on incomes to determine the eligible population.
- The eligibility criteria are based on a person’s mobility and care needs which may be difficult to identify, not least because these needs change over time.
- The impact of disability on needs is self-reported and therefore dependent on being accurately assessed and reported.
- Since health conditions are difficult to quantify, especially where the problems are multiple, the information on which DLA decisions are based is more open to interpretation than is the case for other benefits. This genuine uncertainty implies that the decision on DLA may also bear a subjective element on the part of a decision maker.

The report highlighted that such complexities explain why the “truly” eligible population is difficult to define¹⁰, and indicated that estimating the size of the eligible population and the take-up rate is a difficult, if not impossible, task. While the report put forward a series of recommendations and next steps to estimate DLA take-up, it is notable that the DWP has made little progress in this.

4.8 Health Data

Despite these challenges and acknowledged difficulties, consideration was given to estimating the number of ENRs by examining a range of available data sources on disabled people in Wales, despite acknowledgement of the lack of proxy social indicators for identifying households with children with a disability.

A number of potential health data sources were identified, as follows:

- Local Authority Registers of People with Disabilities, 2010
- Welsh Health Survey, 2010
- 2001 Census
- Daffodil v1.0.

¹⁰ Indeed, the DWP determined that the results from a survey undertaken in 1998 with the purpose of estimating the DLA/AA take-up rate were not robust.

4.8.1 Local Authority Registers of People with Disabilities

The Local Authority Registers of People with Disabilities is issued by the Statistical Directorate in the Welsh Government. This National Statistics Release summarises information on people with disabilities registered with LAs in Wales.

The most recent release indicated that, as at 31 March 2010, 89,599 people were registered, of whom approximately 5,000 were children aged 0-18 years¹¹.

Table 7: LA Registers

	Aged under 16	Aged 16+	Total
Learning disabilities	3,193	11,578	14,771
	Aged under 18	Aged 18+	Total
Physical disability	476	45,993	46,469
Sensory disability	743	27,616	28,359

Source: LA Registers of People with Disabilities, March 2010

However, there are limitations associated with these data, in addition to the generic issues identified previously:

- Registration is voluntary and therefore it does not capture everyone who has a disability. It is not known what percentage of children with a disability is not registered.
- It cannot be assumed that all those registered have care and mobility needs that would qualify for DLA, although some will qualify.
- Data are aggregated by aged under 16 years for learning disabilities and under 18 years for physical and sensory disabilities, which does allow analysis of those on the Registers aged 0-18 years.

It is known from DWP DLA data that there were 23,300 children on DLA caseload at November 2010. This suggests that the LA Registers do not present a reliable or robust proxy social indicator for identifying households with disabled children.

¹¹ The Statistical Directorate confirmed information regarding age was collected only in these age groups and a more detailed breakdown of age could not be provided.

4.8.2 Daffodil

Daffodil is a web-based system developed by the Institute of Public Care (IPC) for the Welsh Government which pulls together in one place information needed to plan what care services might be required in the future.

This takes data from a range of sources and prevalence rates are applied to population projections to give estimated numbers predicted over a range of years.

Table 8: Health Statistics

Data ¹²	2011
Mental health (aged 5-15) (Figures are taken from the table Prevalence of psychiatric disorders by sex and age, 1999, in the report <i>The Mental Health of Children and Adolescents in Great Britain</i> , 1999, Office for National Statistics (ONS) Survey)	36,029
Limiting long term illness aged 0-15 (Living in Wales Survey, 2008)	18,231
A disability according to Disability Discrimination Act aged 0-17 (<i>Prevalence of childhood disability and the characteristics and circumstances of disabled children in the UK</i> , Blackburn et al, BMC Paediatrics, 2010)	45,473
Severe disability aged 0-17 (<i>The health of children and young people, Chapter 10: Disability</i> , ONS, 2004)	623

However, there are limitations associated with these data, in addition to the generic issues identified previously:

- Data are taken from a range of sources, so there is likely to be some level of duplication of records.
- It cannot be assumed that all those recorded have care and mobility needs that would qualify for DLA, although some will qualify.
- Some data are out of date.
- Some data are based on self-reporting.

These data suggest there may be a notable larger number of children with a disability in Wales than in receipt of DLA. However, the limitations associated with

¹² <http://www.daffodilcymru.org.uk>

this range of data suggest that it does not present a reliable or robust proxy social indicator for identifying households with disabled children.

4.8.3 *2001 Census*

The 2001 Census collected the following information regarding health in Wales:

- 36,435 young people aged 0-19 years had a limiting long-term illness.
- 10,704 young people aged 0-19 years stated that their health was 'not good'.
- 585 of those aged 16-18 did not work as they were permanently sick or disabled.

However, again, there are limitations associated with this data, in addition to the generic issues identified previously:

- 2001 Census data are now 10 years out-of-date and there is a lack of additional information to extrapolate trends as a number of the 2001 Census questions of interest were not asked in 1991.
- Data are aggregated by 0-19 years which means direct comparison cannot be made with DLA caseload 0-18 years, although broad conclusions can be drawn.
- Not all those reporting illness and poor health would have care and mobility needs that would qualify them for DLA if they applied, but some will.

These data suggest there are a notable number of children aged 0-19 years with a limiting long-term illness in Wales (36,435) which is greater than the number of children 0-18 years in receipt of DLA (23,400). Even allowing for the additional year, this suggests there may be some children eligible for DLA but not claiming it, but the size of the total eligible population and hence the number of ENRs cannot be robustly or reliably determined based on the limitations associated with 2001 Census data.

4.8.4 *Welsh Health Survey, 2010*

The Welsh Health Survey (WHS) is a source of information about the health of people in Wales, the way they use health services, and the things that can affect people's health. The findings are based on a survey on a sample of the general population living in private households in Wales.

The key finding in relation to children is:

- 20% of children were reported as having a long-standing illness, including 6% with a limiting long-standing illness.

However, there are limitations associated with these data, in addition to the generic issues identified in 5.5:

- As the Welsh Health Survey relies on self-completion questionnaires, the results reflect parents' own understanding of their children's health rather than a clinical assessment of their medical condition.

These data suggest that approximately 30,000 children aged 0-18 years have a limiting long-term illness in Wales, which is greater than the number of children 0-18 years in receipt of DLA (23,400). Similar to Census data, this suggests there may be some children eligible for DLA but not claiming it, but again the size of the total eligible population and hence number of ENRs cannot be robustly or reliably determined based on the limitations associated with the WHS.

4.8.5 *Summary on Estimates*

The challenges associated with measuring DLA take-up, the absence of proxy social indicators for identifying households with disabled people, and the limitations associated with available health data mean that it is difficult to comment on take-up rates in any meaningful way, and to estimate the number of ENRs in a robust and reliable way.

Interestingly, the SSA in Northern Ireland recognised that it would be beneficial to have take-up estimates for a range of (non-means-tested) benefits, and by geography in order to provide more robust data relating to the extent of poverty and disadvantage. However, it recognised the considerable methodological and practical limitations as well as considerable cost implications of doing so and did not take this concept further.

4.9 Summary

In Wales, there had been a steady increase in DLA caseload for those aged 0-18 years before falling back in November 2010. Over a four-year period, caseload for those aged 0-18 years increased at a greater rate than total DLA caseload for Wales. Interestingly however, the increase in caseload for those aged 0-18 years during the Campaign (i.e. between August 2009 and November 2010 (1.2%)) was not as sharp as in the two years before the Campaign started (7.3%). This could suggest that the Campaign has not had a substantial impact on DLA take-up.

The general trend over the last four years for DLA, Carers Allowance and JSA has been one of an increase in caseload. However, the percentage increase in DLA caseload was substantially lower than that of JSA and does not suggest a strong link between DLA take-up and the impact of the recession.

The TOR for this assignment recognised that estimating the total population eligible for claiming DLA in Wales would be very difficult for a range of factors and this has proven to be the case. While there is a range of data sources on the possible number of children with health needs, there are substantial limitations associated with each source including self-reporting issues, age band aggregation and dated data. More substantially, all the disability definitions used may not necessarily match the DLA 'functional' health criteria (i.e. care / mobility needs is not a strict 'medical' test) meaning that not all those reported as having illness and poor health would have care and mobility needs that would qualify them for DLA if they applied.

Therefore, the scope to comment on take-up rates in any meaningful way has been limited and it is not feasible to comment accurately or robustly on the size of the eligible population and hence the number of ENRs.

5 Consultation with Citizens Advice

5.1 Introduction

Consultation was undertaken with representatives from Bureaux which were involved in the delivery of the Campaign across the 22 LAs in Wales. The interviews covered a range of topics, including:

- Activities undertaken
- Rationale for their approach
- Outcomes
- Additional benefits
- What worked effectively and what worked less effectively
- Impact on different groups
- Best practice and lessons learned
- Administration of the Campaign
- Alternatives to the Campaign.

A focus group was held subsequently and attended by 12 Advisers from across the local Bureaux network. In addition, consultation was undertaken with the Project Manager in Citizens Advice Cymru.

The following sections highlight the key findings from these consultations.

5.2 Overview of Activities

Through consultation with representatives from the Bureaux Network and analysis of Citizens Advice's progress reports, it was clear that the majority of local Bureaux initially undertook activities to raise awareness of the Campaign and families' potential entitlement to disability-related benefits. Most Bureaux continued to undertake regular promotional and networking activities during the course of the Campaign. These activities included:

- Contacting a wide range of stakeholder organisations from across the health, educational, social services and third sector. This included local special needs schools, health centres, hospitals and social service teams informing them of the

DLA Campaign and CAB's services and support. It also included contact with a range of generalist and specific interest group organisations such as SureStart, Homestart, Mencap and ABCD Cymru.

Contact ranged from formal presentations to attendance at local staff team meetings to regular keep in touch (KIT) phone calls

- Putting posters up in locations such as local health centres and hospitals
- Advertising in local newspapers and radio, producing press releases and distributing information packs.

Most Bureaux used the funding to fund one dedicated Adviser post working around seven hours per week and usually on specified days/times per week. A small number of Bureaux assimilated the funds within core staff funds thereby having a number of Advisers to work with families with a disabled child as required.

Most Bureaux operated a combination of referral and direct appointments focusing on children of all ages and disability type. The main exception to this approach was Newport CAB.

Newport CAB

Newport CAB worked with its local Social Services' Transitional Planning Team. This Team works with families and children aged 16-19 years who are making the transition from children's services to adult provision. Newport CAB received direct referrals from the Transitional Planning Team and would then undertake a full benefit check to help maximise the family income. In many cases, the child would be in receipt of DLA already, and so the focus of the assessment was in determining if it would be more advantageous for the family to surrender Child Benefit and any Child Tax Credits and for the child to receive Employment and Support Allowance (ESA).

The success of Newport CAB is undoubtedly a very positive outcome for the DLA Campaign in terms of income maximisation for families. However, it has made only a small contribution to increasing awareness and take-up of DLA, a specific aim of the

DLA Campaign. At the same time, performance results indicate that Newport was one of the most successful Bureau, both in terms of clients assisted and confirmed benefits, with a VFM ratio of 1:20.

This raises a wider question for the Welsh Assembly: should the key outcome for any future DLA Take-up Campaign be on increasing take-up of DLA or of maximising household income?

Where feasible, Bureaux have provided services in local Bureau offices, at outreach venues and have undertaken home visits, although the extent of home visits has been constrained by available resources.

In many cases, Advisers have adopted a casework approach, providing assistance with benefit application forms, contacting relevant organisations where necessary and supporting with any appeals where feasible. Many Advisers stated that casework took up a substantial amount of their time on the Campaign and not all were able to support all their clients through lengthy appeals processes due to resource constraints; in these cases, many clients would be directed to and supported by other Bureau Advisers.

5.3 Rationale for Approach

Most Bureaux identified that they had previous experience of implementing and delivering welfare advice projects for Citizens Advice and used their knowledge and experience of this work to determine the most effective approach for the DLA Take-up Campaign. A number of Bureaux explicitly referenced their experience of the BABH initiative, leveraging off the partnerships formed on this.

Almost all Bureaux highlighted that their initial activities focused on raising awareness of the Campaign and of people's entitlement to DLA and other associated / related benefits. Most did this by making contact with relevant organisations such as disability specific organisations and other health care organisations such as

health care practices (targeting, for example, GPs and health visitors) and a range of other community based organisations such as mother and toddler groups.

Interestingly, a number of Bureaux indicated that from this initial contact, it was clear that many people were aware of and often claiming DLA, but they were unaware of other related benefits and so were not accessing these. This had an influence on the specific focus and activities undertaken by these Bureaux. For example, many then became involved in casework to help families obtain all available benefits.

5.4 Outcomes

Most Bureaux considered that the amount of benefit take-up greatly exceeded Campaign expenditure. However, a small number of Bureaux indicated that the Campaign got off to a slow start in some areas and thus take-up to date had been less than anticipated.

It was noted by a number of Bureaux that confirmed gains reported do not accurately quantify the gains achieved for clients. Some Bureaux highlighted that, due to resource constraints, they do not chase up all cases where clients do not get back to them about the outcome of their claim/appeal. As such, some gains go unreported and so unrecorded. Therefore, actual confirmed gains reported may be substantially lower than actual gains achieved for clients because of support from Citizens Advice. In addition, one Bureau highlighted that the Campaign would have produced an indirect financial outcome by raising awareness of eligibility for DLA which would have led some families to apply directly or to access support via an alternative support agency.

All Bureaux reported that they provided full benefit calculation checks to help families maximise their entitlement and increase their family income, with a focus on the entire family's needs and maximising income. This means that reported gains included not only DLA benefit but also a range of other welfare benefits such as Carers Allowance and Tax Credits. In addition, Bureau Advisers had attended an information day with representative from a range of disability related organisations

and so were aware of and had helped families access, for example, grants from the Family Fund. As part of Citizens Advice's holistic approach to support, families were also provided with support on a range of social issues such as housing, utility services and debt where relevant.

Most Bureaux were not aware of and did not consider that the recession had an impact on the take-up of DLA, based on their contact with families.

Partnership working was a key theme across all Bureaux. Many Bureaux became involved in partnership working with government agencies and local third sector organisations. In particular, many Bureaux developed links with local social services departments, health centres and health professionals, as well as local schools.

5.5 Impact on Different Families

In most cases, Bureaux have supported all types of families and all types of disabilities. This has ranged from those on limited financial means to those on higher incomes (and who initially assumed they would not be eligible for financial support). Parents of children have been supported, as have other carers such as grandparents and foster parents.

Some Bureaux indicated that the Campaign had a greater impact on families and children who acquired a disability, or where the disability was not formally diagnosed, or in cases of developmental disorders such as Autism or Attention Deficit Hyperactivity Disorder (ADHD), than for families where a child was born with a diagnosed disability. This was because these families were often unaware of DLA and/or their eligibility for disability related benefits compared to families where a child was born with a disability or where the disability was very evident and hospital staff had advised parents of DLA.

Finally, some Bureaux suggested there was anecdotal evidence that the Campaign had been successful in targeting lone parents who have a child(ren) with a disability.

This may be because lone parents may access Citizens Advice for advice on other matters such as general welfare advice, debt and housing.

5.6 What Worked Well and Less Well

All Bureaux indicated that, in the main, the range and type of activities undertaken had worked effectively.

Across all Bureaux, partnership working was a common theme. In particular, the majority of Bureaux stated that contact and joint working with a range of statutory organisations and professionals had proven useful in achieving take-up. This included social services departments, health visitors, special schools and school nurses.

For example, Bridgend made positive contact with its local social services department and targeted pre-school nurseries. Ceredigion highlighted that contact with its local social services department and health visitors had been successful in increasing take-up.

Some Bureaux achieved success through a more targeted approach by making contact with specialist schools who deal specifically with children with disabilities. For example, Cardiff developed a positive working relationship with the special needs unit at its local hospital while Pembrokeshire highlighted positive working relationships with school nurses resulted in a large number of referrals. Similarly, Pembrokeshire targeted mother and toddler groups with some success, finding that families with toddlers were not always aware of the benefits system and so many were unaware of their potential entitlement to disability benefits.

However, not all Bureaux reported the same levels of success with the same organisations or contacts. Indeed some Bureaux highlighted a lack of success from contacts which had been successful for Breaux elsewhere. Further consultation with Bureaux on this matter highlighted that it was necessary to continually network and keep in touch with a wide range of contacts, hence building on relationships to help

ensure a regular number of referrals. For example, Ynys Mon followed up on its initial contact with health visitors by attending their quarterly meetings to remind them about and update them on the DLA Campaign and this approach was successful.

While most Bureaux have been successful in making contact with health visitors and other professionals working in local health centres, several Bureaux highlighted the challenges involved in targeting GPs and the difficulties in getting their message across to this constituent group. This was of concern to Bureaux as it was considered that GPs would have direct contact with a potentially large number of children with a disability who were missing out on expert advice on their entitlement to DLA and other benefits.

Most Bureaux highlighted that they would like to undertake more awareness raising and support more families but that they were constrained by their funding.

5.7 Barriers to Take-up

Bureaux highlighted a number of barriers to increasing take-up of DLA and other welfare benefits

The four main barriers identified were:

- Knowledge of disability related benefits and awareness of eligibility

Some families remained unaware of DLA and other welfare benefits, particularly where parents were in work and so outside the “benefits system”.

Equally, it was suggested that, while some people were aware of the existence of DLA benefit, many did not consider they would be eligible, considering that it was a means-tested benefit and/or not available to families where one or both parents were working, and/or would adversely impact on other benefits.

Similarly, it was suggested that many families were aware of DLA and often already be in receipt of this benefit, but that they were not aware of other benefits to which they may be entitled e.g. Carer’s Allowance and Child Tax Credits.

Many Bureaux recognised that there was a need to continually raise both awareness of and possible eligibility for welfare benefits. However, some Bureaux indicated that there were substantial challenges in ensuring relevant information was reaching key stakeholders including families and health professionals. It was acknowledged that the current level of funding associated with the DLA Campaign restricted marketing activities. This led some Bureaux to suggest a need for a wider advertising campaign instigated by the Assembly.

- Stigma

It was highlighted that some families considered that there was a stigma and negatively associated with the use of the term “disability” and some families were reluctant for their child(ren) to be stigmatised. Some Bureaux suggested there was a need to replace the expression “disability” with “additional needs” or similar expression.

A related barrier was reluctance for parents/carers to consider their child as having a disability. This could either be because they wished to adopt a positive approach and focus on what their child could do (as opposed to the challenges faced) or it could be because the parent was reluctant to face reality for whatever reason.

- The application process

It was suggested that families find the application process itself to be a barrier, either because they are intimidated by the forms, or reluctance to provide the range of personal and sensitive information required. In some cases, families have been initially unsuccessful but are unaware that there is an appeals mechanism, or lack the means to appeal, whether that is the emotive cost, time, knowledge and/or ability.

Bureaux have tried to overcome this by providing as much assistance as possible, however they indicated that this is not always possible with the resources available.

A number of Bureaux remarked that the application process is relatively slow, particularly when applications go to appeal. As such, advisers cannot always go through the whole process with their clients and must pass them on to other departments in their Bureau.

- Parental responsibilities

Several Bureaux highlighted that parents were often reluctant to apply for DLA as they considered that they should be looking after their own child unaided, and were wary of being labelled as “scroungers”.

5.8 Key learning

Bureaux highlighted that their work on the Campaign provided a number of useful lessons which have benefited their local Bureaux work. For example, many Bureaux stated that their work on the Campaign had given them a greater understanding and awareness of the benefits system regarding children with a disability.

Furthermore, the Advisers in the local Bureaux have transferred this knowledge to other Advisers and Bureaux volunteers, thereby skilling them up and helping to maximise the impact of the DLA Campaign funds.

5.9 Additional impacts

The most common additional impact in relation to the Campaign was increased partnership working with other organisations. In particular, many Bureaux stated that they had developed very close working relationships with social services departments, health centres and health visitors with most stating that these links have resulted in a large number of client referrals.

Many Bureaux also reported that they have been successful in developing stronger links with local third sector organisations working with children with disabilities. Through these links, local agencies and organisations have also become aware of

other services provided by Citizens Advice, which resulted in increased referrals for issues other than DLA take-up, such as debt and housing advice.

Some Bureaux highlighted that involvement in the DLA Campaign resulted in increased knowledge, skills and competences of CAB advisers. Some Bureaux suggested that the quarterly forums for advisers enabled them to share experiences, lessons learned and areas of best practice, and that this had been of benefit to the wider Bureaux network.

5.10 Administration

Most Bureaux considered that the Campaign complemented the BABH project and from an administrative perspective had worked well. The quarterly reporting was described as “simple but effective” and some Bureaux highlighted that the quarterly forum meetings and ongoing contact with other Bureaux were useful mechanisms for discussing cases and sharing best practice. One Bureau highlighted the specialist support available from Citizens Advice Cymru.

Some Bureaux highlighted the challenges associated with undertaking promotion versus client facing work and suggested that Citizens Advice Cymru could have played a greater role in developing publicity materials on a Wales wide basis.

5.11 Alternatives to the Campaign and Absence of the Scheme

All Bureaux considered that, in the absence of the Campaign, a substantial number of clients would be substantially disadvantaged. This included families who would not be aware of their eligibility for DLA and so would not apply, or if aware, may be put off by the complexity of the application form or the overall bureaucracy of the process. This would mean that families would not get the benefits to which they may be entitled, or would not be in receipt of the correct premium.

Most did not see a viable alternative to the Campaign. While many Bureaux highlighted that they were involved already in take-up activity and in assisting clients,

they were not involved in a targeted approach or in targeting this specific client group.

Although most Bureaux acknowledged that they would continue to support clients, it was highlighted that any reduction in funding would directly affect their capacity to do so. This would result in Bureaux supporting fewer clients and potentially in longer waiting times for those being assisted.

For these reasons, all Bureaux considered that there was an ongoing need for this Campaign to be continued. Many highlighted that the Campaign has gained momentum over the two years and it beginning to have a substantial impact but there was still more work to be done in terms of targeting relevant families and supporting them in maximising the family's income.

5.12 Summary

Consultation with representatives from local Bureaux suggested that all were involved in a range of awareness raising and networking activities, receiving referrals from a range of organisations. However, it was clear there was an ongoing need to promote the service and highlight eligibility among families with a child with a disability.

Bureaux highlighted a range of barriers to increasing take-up. Specifically, in relation to families with a child with a disability, Bureaux highlighted that some families preferred to not consider their child had a disability, because either they wished to focus on what the child could do well, or there was a reluctance to accept the disability, or its extent or impact on their child.

Bureaux considered that the Campaign had increased their knowledge of welfare benefit services related to children with a disability and this knowledge had been cascaded to other Bureaux staff, thereby increasing capacity locally. This is an additional outcome and should be sustainable beyond this Campaign.

All Bureaux offered a full benefits check for families, reflecting that many families were in receipt of DLA but often were unaware of other related benefits. Bureaux considered the Campaign was administered well and overall was a success in terms of actual gains for families, highlighting that a holistic assessment approach ensured the Campaign had the maximum impact for families.

Bureaux considered there was a need for the Campaign to be continued to ensure that ENRs applied and were successful, and to ensure that families were in receipt of the correct premium. It was highlighted that any reduction in funding would result in Bureaux supporting fewer clients and potentially in longer waiting times for those being assisted.

6 Consultation with Key Stakeholders

6.1 Introduction

Representatives from a range of organisations who had worked in partnership with Citizens Advice as part of the Campaign were consulted. These consultations sought their views on the Campaign, what worked well, what worked less well, the delivery of the Campaign by Citizens Advice Bureaux and alternatives to the Campaign. In addition, consultation was undertaken with representatives from national stakeholder organisations. This included the following organisations: Contact a Family, Mencap, Cerebra, Family Fund and Barnardo's. This Chapter reports on the key themes and comments from these stakeholders.

6.2 National Stakeholder Organisations

It is important to highlight that representatives from national stakeholder organisations had lobbied initially for a dedicated campaign to support families with disabled children. Specifically, Disabled Children Matters Wales¹³ (DCMW) had produced a taskforce paper outlining that families with a disabled child(ren) were significantly more likely to be living in poverty than those without a disabled child, facing increased living costs combined with markedly reduced income. Furthermore, DCMW had provided ideas to the Welsh Government for such a campaign based on specialist advisers,¹⁴ and with casework and home visit provision.

As noted in Chapter 3, the Welsh Government distributed funding for a dedicated Campaign via Citizens Advice. Representatives from national stakeholder organisations were disappointed at this approach, given their role in lobbying for funds and campaign ideas. Specifically, they considered that some of their organisations would have been better placed to deliver an effective take-up

¹³ DCMW is led by 10 organisations working with disabled children and young people and campaigns to make sure that the Welsh Government makes disabled children and young people a priority.

¹⁴ By specialist, DCMW mean advisers who understand the needs of disabled children with a disability and their families and who are able to give benefits advice.

campaign, given their knowledge of disability related issues for children. This is reflected in their consultation comments.

It is also worth highlighting that representatives from national stakeholder organisations did not consider this Campaign to be a DLA Take-up Campaign, but, similar to Citizens Advice, viewed it as a benefit take-up scheme for children with a disability.

6.2.1 *Approach*

Representatives were in the main more critical than positive in their views on the approach adopted by Citizens Advice. These criticisms were based on their initial contact with Citizens Advice and local Bureaux and anecdotal feedback from a small number of families and so do not necessarily reflect current service delivery.

They considered that:

- Citizens Advice Advisers lacked specialism/understanding about all funds and grants available to children with a disability or the needs of children with a disability and their families.
- Some Bureaux indicated capacity issues and availability of staff resources.
- There were accessibility issues, primarily in the initial year, although this was alleviated somewhat by the introduction of a Wales wide advice line number; however, a lack of home visits and limited opening hours in some Bureaux caused local access difficulties.

However, on the positive side, representatives recognised Citizens Advice's expertise on a range of other advice matters such as debt and non-disability related grants and benefits such as working tax credits.

6.2.2 *Performance of the Campaign*

Representatives indicated that they had limited information on the performance of the DLA Take-up Campaign over its duration and suggested a lack of feedback and communication from Citizens Advice. This may be unwarranted criticism as the

accepted protocol would be for communication to come via the Welsh Government and indeed the Welsh Government confirmed that progress reports were provided to the Task Group Rights into Action for Disabled Children and Young People¹⁵, of which these representatives were key members.

However, overall, they expressed disappointment with Citizens Advice's performance¹⁶ noting that performance was not as would be expected in specific Bureaux given their catchment population. By way of contrast, representatives highlighted Mencap's advice services in Carmarthenshire, suggesting that it represented a greater return on investment than that achieved by many Citizens Advice Bureaux¹⁷.

Overall, representatives considered that that there was an opportunity to combine the skills of Citizens Advice and their disability organisations through improved co-operation and co-ordination at a senior level in order to maximise the impact of the Campaign.

6.2.3 *Challenges/Barriers to Take-Up*

Representatives considered that that the term "disability" acts as a barrier to take-up as some parents do not classify their children as being disabled, or they may find it difficult to accept that their child has a disability.

Accessibility was also identified as a barrier to take-up. Representatives considered that some parents found it difficult to access Citizens Advice offices and considered that increased home visit provision would help in overcoming this issue.

¹⁵ This is a Task Group established by the Minister for Children, Education, Lifelong Learning and Skills and made up of DCMW campaign members and senior Welsh Assembly Government officials.

¹⁶ At the time of the consultation, this was based on performance data to March 2011 – 2,044 clients assisted and £1.962 million confirmed gains.

¹⁷ Comparison with Citizens Advice's performance indicates that Mencap's service performed better than half of Bureaux, but equally, the remaining half of Bureaux achieved a greater return on investment than that achieved by Mencap.

6.3 Local Partner Organisations

A number of organisations who had interacted with the Campaign at a local level were consulted to gain their views of the impact and work of the Campaign locally.

6.3.1 Awareness

All organisations were aware of Citizens Advice prior to the Campaign. All organisations were contacted by local Bureaux to inform them of the additional services provided.

6.3.2 Performance

Respondents were generally very positive about the Campaign and the services provided by local Bureaux. They acknowledged that the support from Bureaux helped their organisations as they generally lacked the time, resources and expertise to provide comprehensive support with disability-related benefits advice and support. Many indicated that they automatically referred clients to Citizens Advice for them to undertake a full benefits check.

Respondents stated that they had a good working relationship with local Citizens Advice Bureaux and this helped them to improve their partnership working.

When asked about what worked well about Citizens Advice's activities, respondents noted that the holistic support provided meant that the whole family received support, not just the specific child, which was of great benefit in maximising income. In addition, respondents suggested that Citizens Advice's targeted approach, focussing on local schools, social services and medical centres to promoting the Campaign, was effective in helping to identify those eligible for benefits.

6.3.3 Challenges to Take-Up

Respondents highlighted a number of challenges to take-up, including:

- A stigma associated with being on benefits.

- Parents being unwilling to accept that their child has a disability or perhaps feeling that the disability was not severe enough for them to be eligible for or to warrant being on benefits.
- Untrained people filling in forms, meaning that information was not recorded correctly or appropriately when applying for benefits.

6.3.4 *Alternatives to the Campaign*

Respondents indicated that, while some organisations provided basic benefits checks, none provided this service specifically for children with a disability. It was also noted that no other organisation could match Citizens Advice in terms of knowledge of the benefits system.

6.4 **Summary**

Organisations which engaged with Citizens Advice to refer clients for specific advice and support were positive in their views on the services provided. They highlighted that they generally lacked the time, resources and expertise to provide comprehensive support with disability-related benefits advice and support and acknowledged Citizens Advice's expertise and knowledge of the benefits system. In contrast, representatives from national stakeholder organisations were more critical of the approach adopted by Citizens Advice, which in part reflected their continuing disappointment at the then Welsh Assembly Government's decision to direct funds via Citizens Advice. However, it in part reflected their disappointment at Citizens Advice's initial performance, which reinforced their views that they would have been better placed to deliver an effective take-up campaign, given their knowledge of disability related issues for children.

7 Consultation with Citizens Advice Clients

7.1 Introduction

This Chapter sets out the findings from consultation with families who have been supported by Citizens Advice.

KPMG conducted a postal survey with a sample of clients who had received support under the DLA Take-up Campaign. Bureaux were asked to distribute a survey¹⁸ to a random sample of approximately 50% of clients. A total of 1,000 surveys were distributed in this way and 178 respondents returned completed questionnaires giving a response rate of 18%¹⁹.

In addition, in order to explore the impact of the Campaign on families in more detail, a series of in depth qualitative interviews was undertaken with 10 families. Some details from these interviews are used to illustrate findings from the qualitative postal survey and full details of the 10 case studies can be found in Appendix 2.

For both the postal and qualitative interviews, all clients were asked a series of profile questions and then asked about the following:

- What had prompted them to apply for benefits and specifically if this related to changes in their circumstances.
- How they had become aware of the DLA Take-up Campaign.
- The impact of receiving additional benefits and how they used this additional income.
- Their views and attitudes towards the support provided by Citizens Advice.
- Improvements.
- Any other comments.

¹⁸ Due to data protection reasons, surveys were distributed by Bureaux in Wales.

¹⁹ It is noted that not all respondents answered all questions relevant to them. Therefore, the base number varies across all questions and is highlighted in all relevant charts and tables in this Chapter. All qualitative data is sourced from the survey and qualitative findings from the case studies.

7.2 Profile of Respondents

7.2.1 Gender and Age

Respondents were asked to provide details of their children who had been awarded additional benefits. Of the 164 respondents who answered this question, 146 had one child receiving additional benefits, 15 had two children and three families had three children.

Of the 185 children identified by respondents, 71% were male and 29% were female. The children ranged from one year to 20 years²⁰, and the average age of children receiving additional benefits was around 10.8 years.

7.2.2 Current Circumstances

Respondents were asked to describe the current situation of the main income earner in their family. The majority of respondents (n= 96; 60%) stated that the main income earner was employed. This was either in a full-time job (n=63; 38%), or in a part-time job (n=20; 12%), or in self-employment (n=13; 8%). Almost one fifth (n=39; 23%) stated that the main income earner was a full-time carer.

A further 10% (n=16) indicated that the main income earner was long-term sick/disabled. If these results are representative of all clients supported by CAB, this suggests that a notable percentage of people who are long-term sick/disabled are also looking after a disabled child.

Table 9: Economic Status of Main Income Earner

Situation	Number	Percentage
Employee in full-time job (30 hours or more per week)	63	38%
Full-time carer	39	23%
Employee in part-time job (less than 30 hours per week)	20	12%
Long term sick/disabled	16	10%
Self employed (full or part-time)	13	8%

²⁰ This reflects the age of the child now and not necessarily at the time of the support provided by CAB.

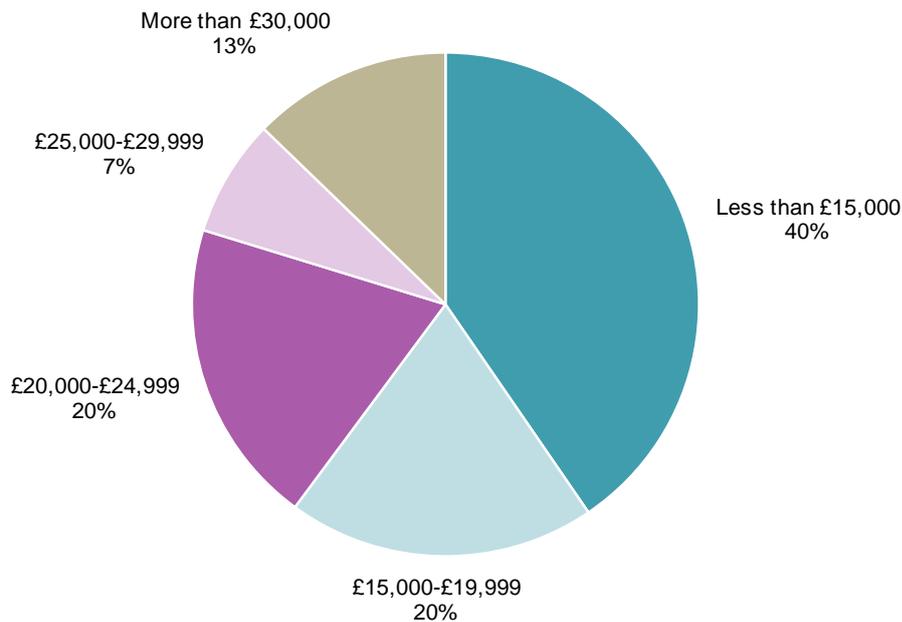
Situation	Number	Percentage
Registered unemployed	8	5%
Other	4	2%
Full-time in education	3	2%
Not registered unemployed but seeking work	2	1%
At home/not seeking work	2	1%

Base: 170 Respondents

7.2.3 Income

Figure 7 shows the total annual reported income of families, including earnings and welfare benefits. This demonstrates that over half of families had an annual income of less than £20,000 (60%, n=104), while one fifth had between £20,000 and £24,999 (205; n=34).

Figure 7: Annual Income



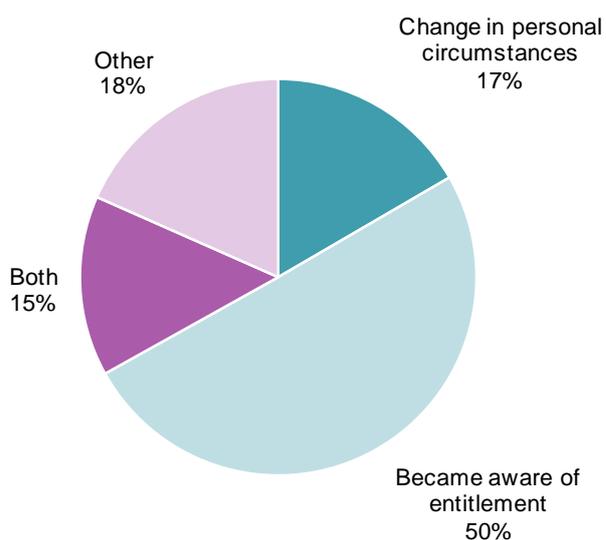
Base: 173 Respondents

It is known that the average salary in Wales in 2010 was £26,832²¹ and survey results indicate that the majority of respondents had less than this amount and indeed a notable percentage had substantially less than this.

7.3 Reasons for Applying

Respondents were asked to explain their reasons for applying for benefits through Citizens Advice i.e. whether a change in their personal circumstances prompted them to apply or if they simply became aware of their entitlement to certain benefits. Responses are demonstrated in Figure 8.

Figure 8: Reason for Applying



Base: 169 Respondents

Almost half (48%; n=15) of those respondents who provided another reason for applying via Citizens Advice (18%; n=31) stated that they had sought support in filling in the forms (as they found them difficult to complete or they had been turned down for benefits previously) or they required support to appeal a recent benefit decision.

²¹ Based on average weekly gross earnings in Wales of £516 (Annual Survey of Hours and Earnings, 2010), <http://www.statswales.wales.gov.uk>

7.3.1 Change in circumstances

A total of 53 respondents stated that they had applied for benefits via Citizens Advice due to a change in circumstances or because of both a change in circumstances and becoming aware of entitlement and 50 respondents provided details on this change of circumstances.

Of these 50 respondents, over half (58%, n=29) stated that their child was identified as having additional care and/or mobility needs or that an existing condition had deteriorated thereby making the family eligible for additional benefits. Just over one third indicated that they had become the main carer for a child with additional care or mobility needs (34%, n=17).

Interestingly, only 10% (n=5) applied after becoming unemployed. If these results are representative of all clients supported by Citizens Advice, this suggests a limited recessionary impact on the take-up of disability-related benefits.

Table 10: Change in Circumstances

Change in circumstances	Number	%
Child(ren) identified as having additional care and/or mobility needs or a deterioration in an existing condition	29	58%
Became main carer for a child(ren) with additional care and/or mobility needs	17	34%
Other	6	12%
Becoming unemployed	5	10%
Significant reduction in income	5	10%
Reduction in working hours	3	6%

Base: 50 Respondents

The following case study illustrates the type of change of circumstances that results in a family applying for disability related benefits.

Case Study

A 12-year-old boy was seriously ill in 2010. Although his health is now improving, he has been left with very poor eyesight and requires one to one support at school.

The boy's family receive the middle rate of DLA and his mother now receives Carers Allowance, meaning she no longer has to work and can be more flexible and responsive to her son's needs.

7.4 Awareness

Word of mouth was the most common way that respondents became aware of the DLA Campaign/support offered by Citizens Advice (38%; n=65), closely followed by talking directly with Citizens Advice (36%; n=62)²². Referral to Citizens Advice was the third most common means of becoming aware (31%; n=53), and most respondents were referred by a social worker or other health professional including GPs.

Table 11: Awareness of Entitlement

Source of information	Number	%
Word of mouth e.g. family/friends	65	38%
Talked to Citizens Advice who informed me of my entitlement	62	36%
Referred to Citizens Advice	53	31%
Other	15	9%
Advertisement/Poster	13	8%

Base: 171 Respondents

In most cases, respondents did not provide an explanation for other. In the two cases where this was elaborated on, both respondents found out about entitlement from a support worker.

Interestingly, the least common response was becoming aware through an advertisement / poster (8%; n=13). This could suggest that advertising is less effective in comparison to word of mouth and other more personal contacts.

²² It is not clear from survey results why respondents were talking directly with Citizens Advice Bureau i.e. if they had approached them on a specific DLA matter or because they had seen a DLA Campaign poster, or approached them on other matters.

The in-depth qualitative interviews with families reinforce the fact that many families sought support from Citizens Advice due to increased awareness. It is interesting to note that many of the families interviewed indicated that their child(ren) had a disability for a number of years before they applied for DLA/other benefits. This suggests that they may have missed out on eligible benefits for, in some cases, a substantial number of years. Some examples from the case studies illustrate this point.

Case Study

Mrs H has two children (a daughter aged 17 years and a son aged 14 years). Both children have suffered from epilepsy since birth.

Mrs H had assumed that DLA was a means tested benefit and did not think that her children's disabilities were severe enough for them to be entitled. She was made aware of her potential entitlement when she saw a leaflet about the Campaign at the local hospital. The children now receive the middle rate DLA.

Mrs H stated that the family struggled financially when the children were much younger and they would have benefited from the extra income that DLA would have brought at that time had they known about it.

Case Study

Mr and Mrs F look after a disabled young man aged 18 years. They had never claimed any benefits so were not aware of the benefits system or of the support that CAB could provide.

Social services informed them that the young man should be entitled to the higher rate DLA and suggested they contacted CAB. CAB also informed them about and applied successfully for Working Tax Credit, and Carers Allowance for them as well as a reduction in their water bill.

7.5 Impact of DLA Benefit

7.5.1 Additional Income

On average, families obtained an additional £93.66 per week in benefits after receiving support from Citizens Advice. These figures ranged from receiving no additional income to £400 extra per week²³. A breakdown of the additional income received is shown in Figure 9.

Figure 9: Additional Weekly Income



Base: 124 Respondents

A total of 71 of the 104 families with an annual income of less than £19,999 provided information on their additional income after receiving advice from Citizens Advice. This suggests an additional £92.09 per week in benefits, which would result in around £4,789 per year in additional benefits. This suggests that a notable proportion of families were able to increase their annual income by a substantial percentage as a direct result of support from Citizens Advice.

Respondents also highlighted additional support and financial help received as a result of Citizens Advice's holistic assessment approach.

²³ This figure was verified and confirmed by the relevant Citizens Advice Bureau. The case in question regarded a family with two children with severe disabilities. The family had an award of DLA when CAB first had contact with them. However, the family was not aware of additional disability benefits such as the disability element of tax credits. In addition, Citizens Advice helped the mother to claim Carers Allowance, to get the carer premium and helped to get the DLA awards increased to the highest rate care.

A small number of respondents (n=8) stated that they received the Blue Badge after receiving support from Citizens Advice. Some respondents stated that Citizens Advice had helped them to get money for specific items. Examples included:

- Family fund grants/support (n=6)
- Grant for household furniture and/or electric goods and/or computer (n=9).

7.5.2 Use of additional money

Respondents were asked how they have used the additional money their family has received through the support from Citizens Advice. A breakdown of responses is provided in Table 11. The most common response was everyday living (66%, n=112), followed by additional care (34%; n=58) and leisure (30%; n=50).

Interestingly, savings was the least frequent use given. These findings would suggest that the additional money is going towards those most in need.

Table 12: Use of Additional Income

Use	Number	%
Everyday living	112	66%
Additional care for the child(ren) with a disability	58	34%
Leisure e.g. family outings	50	30%
Transport	34	20%
Other	26	15%
Holiday	24	14%
Heating	19	11%
Savings	12	7%
Respite costs	3	2%

Base: 169 Respondents

Case Study

Mrs A is a foster carer. She has fostered John since he was six weeks old. He is now 15 months old and it has become apparent that he has both mental and physical disabilities.

Mrs A commented that she was having difficulties using the pushchair she had for John and a member of staff suggested that she might be able to claim DLA for him. She was nervous about filling in the forms and CAB helped her complete these forms. The application was successful and DLA was paid at the middle rate.

As a result of this additional income (£47 per week), Mrs A has been able to buy John a more suitable pushchair that better meets his needs. Mrs A was also able to purchase a dehumidifier for his bedroom to alleviate John's chest infections. In addition, the extra funding was used to purchase a trampoline to develop John's muscle tone.

Case Study

Ms E has a 5-year old son who has autism who needs help with toilet training and suffers from severe episodes where he cannot control his actions.

She contacted CAB after being turned down for DLA and now receives DLA at the highest rate after receiving support from CAB. Her son also qualified for Mobility Allowance.

Ms E was able to get a special pram for her son to enable improved mobility as well as bed monitors, improving the door to his room for easier access in a hurry and turned his room into a "mini sensory centre".

Case Study

Mrs D has a 10-year-old son who has problems with his balance, meaning he is frequently falling over.

After receiving support from CAB, she was successful in receiving support at the middle rate and was able to receive Carers Allowance.

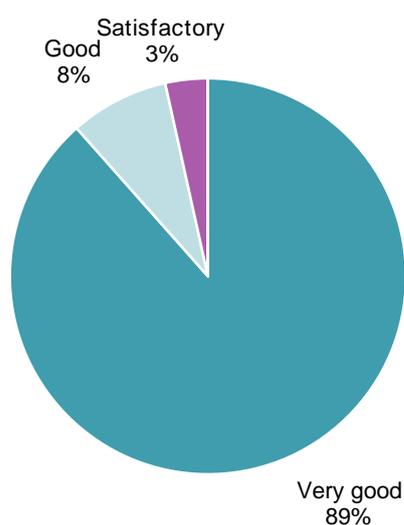
As a result of this extra income, she has been able to afford to take her son on a holiday and buy him a new trampoline, which she could not have done before. She has also been able to afford for him to attend football club activities.

7.6 Views on the Support Provided by Citizens Advice

Respondents were asked to rate the support provided by Citizens Advice. Respondents were overwhelmingly positive, with 89% (n=154) of respondents

describing the service as 'very good' and 8% (n=14) as 'good'. Only 3% (n=6) considered the service to be satisfactory. No respondents described the service as poor.

Figure 10: Rating of Service



Base: 174

7.6.1 Improvements

Respondents were asked to provide suggestions for improvements in the future. Seven respondents took the opportunity to comment positively on the services provided by Citizens Advice.

Of those who made suggestions for improvement (n=22), six respondents suggested improvements or comments relating to DWP. These were:

- Simplification of the application forms (n=3)
- To extend the timeframe for appeals (n=1)
- To improve the time take to process a claim (n=1)
- Begrudging approach from DWP (n=1).

The most common themes and suggestions for improvements relating to Citizens Advice among the remaining 16 respondents were:

- Increase in service provision and/or staffing (n=7). This included home visits, greater provision locally and follow-up support.
- Accessibility (n=5). This included getting through on the telephone and opening times.
- Larger premises (n=1)
- Listening skills (n=1).

Comments included:

“It would be helpful if home visits were more readily available.”

“I would like to see more availability of services provided in the local area.”

“Convenient opening times for parents/carers who work. Direct phone number to nearest CAB.”

Two respondents commented on when advice was provided, with one suggesting it was better to have advice available at the time their child was diagnosed (in hospital) and the other respondent suggesting it was better to get advice from Citizens Advice some 10-12 months after diagnosis as at the time of diagnosis they were more concerned for their child and less able to take on board all advice.

7.7 Duplication of Services

Respondents were asked if they were aware of any other organisations that provide advice and support regarding entitlement to benefits. Less than one fifth (n=27; 19%) of respondents were aware of any other organisations. Responses included²⁴:

- Statutory services and agencies (n=14). This included Social Services, school, Job Centres; LA Welfare Rights Services as well as www.direct.gov.uk.²⁵

²⁴ One respondent noted more than one type of organisation.

²⁵ Directgov is the UK government's digital service for people in England and Wales. It delivers information and practical advice about public services, bringing them all together in one place.

- Voluntary organisations (n=9). This included Barnardo's; Age Cymru; Contact a Family; National Autistic Society; Welsh Refugee Council.
- Family Fund (n=3).
- Other (n=2). This included reference to a workshop.

7.8 Increasing Awareness

Respondents were asked about the best way to inform people about their entitlements. A large number of respondents took the opportunity to comment and/or make suggestions (n=142).

The main themes that arose from these responses were:

- Contacting people directly to inform them of their potential entitlement by telephone and/or post.
- General advertising in newspapers, public notice boards, posters and leaflets in place such as schools and GP surgeries.

This is interesting to note, as only 12% of respondents stated that they had become aware of the Campaign through advertising. This suggests that while advertising to date has not been as effective as other means, respondents still consider it an effective mechanism.

- Use of information booklets distributed via schools, hospitals etc.
- Professionals working with children with a disability should inform families. This included, for example, GPs, social workers, paediatricians, health visitors, staff in schools.
- Visiting a Citizens Advice Bureaux
- Utility companies should advertise discounts available to families with a child with a disability.

7.9 Additional Comments

Respondents had the opportunity to provide any other comments regarding the service provided by Citizens Advice. Over one quarter of respondents chose to

comment (27%; n=49) and the consistent theme was that respondents were very appreciative of the support they had received from Citizens Advice. Comments included:

“Citizens Advice has been a godsend to me. I would not have managed without them – forms are too daunting and I would have given up and would not be awarded the benefits I am entitled to.”

“If it was not for Citizens Advice, I would not know of any benefits I could claim.”

“I cannot thank-you enough for the help and encouragement given to me by your staff, amazing!”

“By providing me with DLA for my daughter, it has allowed me to cut down my working hours, making me less tired and more able to cope with her needs.”

“The only comment I would like to make is that Citizens Advice is very important to people like myself and others to stay open. They help and support us in information and take their time finding things out and filling in forms. They do a great job.”

7.10 Summary

A total of 178 respondents responded to a postal survey. A notable percentage of respondents had two or more children with disabilities and over half had an annual income substantially less than the average salary in Wales.

On average, families obtained an additional £93.66 per week in benefits, suggesting that a notable proportion of families were able to increase their annual income by a substantial percentage. The majority of respondents indicated that the additional money was used for everyday living with few respondents saving it. This would suggest that the Campaign is targeting / supporting those most at need.

The majority of respondents applied for benefits through Citizens Advice as they had become aware of their entitlement and most were not aware of any other organisations providing advice. Word of mouth was the most common way that respondents became aware of the DLA Campaign/support offered by Citizens Advice while advertising was the least common means which could suggest that advertising is less effective in comparison to word of mouth and other more personal contacts. Very few applied after becoming unemployed, suggesting a limited recessionary impact on the take-up of disability-related benefits.

Overall, respondents were overwhelmingly positive regarding the support provided by Citizens Advice with few suggesting improvements.

8 Conclusions and Recommendations

8.1 Introduction

This Chapter draws together findings from all stages of the evaluation.

It draws a series of conclusions on the impact the Campaign had in generating additional benefit take-up to date, drawing on performance data from Citizens Advice as well as analysing trends in benefit take-up up prior to and since the implementation of the Campaign. It then comments on potential unmet benefit take-up, in an attempt to measure the impact the Campaign has had in generating additional benefit take-up and as a means of gauging the potential for the future of the campaign.

It then comments on the implementation of the Campaign and provides an assessment of value for money in terms of the return on investment i.e. comparing funding against the additional benefit take-up attributable to the campaign.

It examines which local activities have had the most success and why and what lessons can be learnt from these approaches; and to what extent can they be more widely applied.

Finally, it makes a series of recommendations for the future implementation of the DLA take-up scheme.

8.2 Impact of the Campaign

8.2.1 *Performance*

An assessment of Citizens Advice's performance indicates that the Campaign was successful in meeting its benefits target but narrowly missed its client target, as demonstrated in Table 13.

Table 13: Performance against Targets

	LoO Targets	Outturn total	% Achieved
Clients	3, 000	2,818	94%
Benefits	£3 million	£3 million	100%

Source: Citizens Advice

However, it is noteworthy that performance varied fairly substantially across local Bureaux. Indeed, the client target was not achieved in the majority of LA areas (n=15) and the benefits target was not achieved in over half of LA areas (n=12). This could suggest that targets were too challenging in specific LAs and not sufficiently challenging in other LAs. However, the distribution of Bureaux that met targets and those that did not would suggest that other factors played a greater part in many cases, including levels of need and the time taken to develop successful partnerships and for these to have an impact.

An analysis of DWP DLA caseload statistics for 0-18 years would suggest that the proportion of DLA recipients aged 0-18 has increased, and has done so at a greater rate than total DLA caseload as a whole in Wales. However, the lack of specific DLA performance data associated with the Campaign means that it is not possible to comment on the percentage increase which could be attributed to the Campaign.

Interestingly, the increase in DLA caseload over the duration of the Campaign (1.2%) was not as sharp as in the two years before the Campaign started (1.2% compared with 7.3%). This could suggest that the Campaign has not had a substantial impact on DLA take-up. This may be the case, but not necessarily be a negative reflection of the Campaign overall, given that many Bureaux reported that many clients were already in receipt of DLA but a full benefits check identified other welfare benefits and grants.

This reinforces the need to identify very clear KPIs at the outset and to put in place robust systems for collecting the necessary evidence of performance.

8.2.2 *Recessionary Impact*

The general trend over the last four years for a range of welfare benefits such as DLA, Carers Allowance and JSA has been one of an increase in caseload. However, the percentage increase in DLA caseload has been substantially lower than that of JSA and does not suggest a strong link between DLA take-up and the impact of the recession. This was supported by consultation findings from Bureaux representatives who, based on their contact with families, did not consider that the recession had any notable impact on the take-up of DLA.

Furthermore, results from a survey of Citizens Advice's clients indicated that the most likely change in their circumstances which led them to claim benefits related to their child's disability with very few applying because they had become unemployed. This suggested a limited recessionary impact on the take-up of disability-related benefits.

8.2.3 *Unmet Benefit Take-Up*

One means of assessing the impact of the Campaign, and gauging its future need, is to estimate the potential unmet benefit take-up. However, DWP does not produce official estimates of non-means tested benefits such as DLA, due to the complexity and difficulties in robustly estimating the total population eligible for claiming this benefit.

A review of alternative data sources on the possible number of children with health needs highlighted substantial limitations associated with each source, most notably, that the range of disability definitions used would not necessarily match the DLA 'functional' health criteria meaning that not all those reported as having illness and poor health would have care and mobility needs that would qualify them for DLA if they applied. This means that the scope to comment on take-up rates in any meaningful way has been limited and it is not feasible to comment accurately or robustly on the size of the eligible population and hence the number of ENRs.

8.3 Implementation of the Campaign

The Welsh Government released funding to Citizens Advice Cymru to pilot the DLA Take-up Campaign as part of Citizens Advice's BABH initiative. This helped ensure the speedy allocation of funding across all LAs without delays associated with a formal tendering process. It took account of Citizens Advice's substantial experience in providing benefit advice and considered that Citizens Advice would be able to leverage off its BABH initiative.

While the reasons behind this approach are acknowledged, what is less clear is whether a public procurement would have yielded better outcomes. In theory, public procurement is seen to introduce transparency, help improve quality and increase completion thereby maximising the VFM. For example, research on debt advice indicates that, in the UK, most free government funded debt advice provision is procured by public tender which has helped increase quality of provision and helped maximise value for money²⁶. In this instance, it is difficult to comment if public procurement would have provided greater VFM.

It is noted that the chosen approach was greeted with disappointment by members of national stakeholder organisations, who considered that they would have been better placed to deliver an effective take-up campaign, given their specialism and knowledge of disability related issues for children. Their views were reinforced by their own assessment of Citizens Advice's performance and comparison with similar services provided by specific interest (disability) groups which they considered suggested that Citizens Advice could have been more successful.

Consultation with Citizens Advice and the Welsh Government highlighted that the administration and implementation cost of the Campaign was small and proportionate to the funding. However, a "light touch" oversight approach from the Welsh Government meant that there was some lack of clarity that the focus of the

²⁶ National Audit Office – Business, Innovation and Skills (BIS) – Helping over-indebtedness consumers (February 2010)

Campaign was on increasing DLA take-up and it is possible that a more critical challenge on performance at an earlier stage may have resulted in some improvements in poorly performing Bureaux. Similarly, a firmer management approach from Citizens Advice in some cases may have been more effective in addressing poor performance across some Bureaux.

Based on the funding input, performance represents a VFM ratio of 1:6 overall. This was reasonable, although a little lower than broadly comparable schemes elsewhere such as Mencap's welfare advice services in Carmarthenshire, and Macmillan/Belfast Citizens Advice Cancer Welfare Benefits Advice. This possibly supports the case that a public procurement exercise could have yielded better outcomes and maximised the VFM. Equally, however, very strong performance across specific Bureaux suggests that it is possible for generalist advice providers to be as successful, if not more successful, than specialist providers in delivering a dedicated advice service to a specific interest group.

In conclusion, this suggests there is scope to improve on the administration of a Campaign going forward, although it is stressed that it is important that administration and management is proportionate to overall funds. Nevertheless, the variation in performance, which cannot be attributed solely to population size and thus potential eligible clients, suggests there is a need to ensure more effective performance across Bureaux through more robust reporting, critical challenge and firmer management.

8.4 What Works

Bureaux were involved in a range of activities which included publicising the Campaign in GP surgeries, health centres and other venues, in developing a wide range of contacts and referral networks and in providing outreach, home visits and casework. However, the diversity and nature of these activities and the overall level of Campaign reporting means that it is difficult to conclude robustly on which local

activities have had the most success and why and what lessons can be learnt from these approaches.

Nevertheless, a number of key themes are clear:

- The findings suggest that ongoing and proactive networking with relevant organisations was successful in highlighting awareness of the Campaign.

Developing links with a wide range of networks and partner organisations was important in increasing awareness among health and other professionals about their clients' potential eligibility for disability related benefits and specifically of the support offered by local CABx. Organisations ranged from health organisations to special schools to disability groups which were likely to engage with children with a disability and their family.

In addition, it was important to maintain some form of regular contact with these links to remind them about the Campaign and provide updates on its success. This undoubtedly had some impact on Bureaux' ability to focus resources on client contact time. Equally, it was necessary to ensure a flow of referrals. Some Bureaux were innovative in their update approaches, such as distributing a brief news bulletin or taking a slot at quarterly staff team meetings in key network organisations.

- Targeting specific client groups with a clear referral route.

Newport was one of the most successful Bureaux in terms of clients assisted and confirmed benefits, with a VFM ratio of 1:20. Newport was unique in that its approach was wholly focused on targeting children at the transition stage between children's and adult social services, taking direct referrals from social services.

Indeed, Newport's approach reflects a number of key themes from the literature on measures to increase take-up, reflecting a proactive partnership approach between social services and Newport CAB, personal contact by a trusted intermediary i.e. a social worker referring a client to Newport CAB, and a change in personal circumstances i.e. progressing from children's to adult services.

However, Newport's approach was not targeted on increasing take-up of DLA per se.

This raises a wider question for the Welsh Government: should the key outcome for a Take-up Campaign be on increasing take-up of specific benefits or of maximising household income. Given that the primary rationale for the Campaign was to maximise household income, this suggests that Newport's approach was valid. However, whilst it is appropriate for a pilot scheme to investigate different delivery models, it is recommended that any future Campaigns would require greater clarity on the Campaign focus and overriding aim.

8.5 Recommendations for the Future Implementation

The findings from this DLA Campaign suggest a positive return on investment and value for money is reasonable when compared to schemes elsewhere and given this was a pilot initiative. Results from specific Bureaux such as Newport, Denbighshire and Caerphilly are extremely positive.

The following recommendations are made:

- Recommendation 1 – the Welsh Government clarifies the specific aim and hence focus of any future DLA Campaign i.e. increasing DLA take-up versus income maximisation.

A review of schemes elsewhere suggests that the client group targeted and specific take-up activities may be a key determining factor in increasing take-up, while a full benefits check approach is a key determining factor in maximising income. This means that, if income maximisation is the specific aim then it is recommended that the Welsh Government procures a multiple benefit take-up scheme.

- Recommendation 2 – any future Campaign should adopt a full benefits check approach, irrespective of whether the focus of such a Campaign is on one or

more specific benefits. This would ensure that maximising family income was a core component and would maximise the overall impact of the Campaign.

- Recommendation 3 – the Welsh Government should consider procuring any future Campaign through a public procurement process to help ensure transparency, greater competition and innovation in approach and improve value for money.
- Recommendation 4 – Successful provider(s) should clearly set out how such a Campaign would be promoted, providing a clear, central communication and marketing strategy deliverable at the local level.
- Recommendation 5 – Successful provider(s) should produce clear action plans, drawing on evidence from the literature of what works and should report on inputs and outcomes across their plans. This should help to ensure an equitable level and standard of service across Wales for clients (proportionate to resources), to help monitor performance and to ensure maximum outcomes are achieved across Wales.
- Recommendation 6 – Related to recommendation 5 above, successful provider(s) should detail how they will ensure services are accessible within the available resources. This should include identifying locations and opening hours, provision of outreach and home visits as well as maximising the use of technology through telephone and web-based services.
- Recommendation 7 – Partnership working was seen as being crucial to the success of the current Campaign. Successful provider(s) should detail how they will ensure successful partnership working at strategic, national and local levels to ensure successful engagement with all key stakeholders and ensure the development of formal networks which facilitate referrals as well as successful communication.

- Recommendation 8 – the Welsh Government should clarify reporting arrangements and specifically the type of performance data to be collated and reported on, bearing in mind the need for proportionate effort. At the same time, there is a need for sufficient information to demonstrate what works well. This means developing a suitable and practical monitoring and reporting system which records information on why claimants claim and how they become aware of the availability of and/or their eligibility for disability benefits. It is important that reporting arrangements are effectively monitored across the life of the Campaign in order to ensure maximum outcomes are achieved. Additionally, reporting arrangements and performance data should facilitate a subsequent evaluation of the impact of a Campaign.

A more general point, for any pilot initiative, is the need for a more structured approach to trials, the monitoring of these and robust information relating to specific activities in order to draw robust conclusions on what works well. It is recommended that the Welsh Government gives greater consideration to how it will actually measure the impact of a new initiative and ensure that the requisite data is collected to facilitate a robust evaluation.

Appendix 1 Literature Review

Document	Summary
<p>Department of Social Security: Overcoming Barriers: Older People and Income Support (1999)</p>	<p>This report set out the results of a research study carried out by the then Department of Social Security relating to the most important barriers to the take-up of Income Support amongst people aged 60 and over. It also sought to identify ways in which take-up amongst entitled non-recipients could be increased.</p> <p>Two main components to barriers to claiming Income Support were identified:</p> <ul style="list-style-type: none"> • Attitudinal component, also described as the ‘stigma’ dimension; and • ‘Process dimension’ which consists of objections to, or negative perceptions of various aspects of the claim process. <p>This report set out a list of barriers to claiming income support which included, among others, a fear of negative stigma and associations for claiming income support. The report also highlighted triggers to claiming income support such as being encouraged to do so by a professional contact or finding it difficult to manage on current income and therefore deciding to claim for income support.</p> <p><i>Relevance to Wales</i></p> <p><i>This report highlights a range of barriers affecting benefit take-up which would suggest that a multi-faceted approach is required to overcome them or to minimise their impact. It is also clear that the barriers to benefit take-up have been documented for over a decade indicating they are long standing and so suggesting they are difficult to overcome. It suggests a more proactive approach is likely to be more successful than general publicity with an</i></p>

Document	Summary
	<p><i>expectation from older people that government should make an initial approach, although changes in personal circumstances would encourage people to explore their entitlement.</i></p> <p><i>This suggests that organisations involved in benefit take-up and maximising income in Wales would be more successful in encouraging benefit take-up by adopting a proactive and multi-faceted approach that specifically targets people through a trusted intermediary and offers them dedicated support, or targets them at specific life events such as, for example, becoming bereaved or moving from work to pension age etc or by including information on potential entitlement with housing and council tax bills.</i></p>
<p>National Audit Office: Tackling Pensioner Poverty: Encouraging take-up of entitlements (2002)</p>	<p>This report examined the action taken by the DWP, both on its own and with a range of other organisations, to tackle barriers to take-up of entitlements by pensioners.</p> <p>The report commented that the creation then of The Pension Service offered opportunities for a proactive approach to service provision for pensioners but that The Pension Service could not tackle pensioner poverty on its own. Indeed, the report commented on the wealth of experience existing elsewhere, and suggested it would not be cost or effective or appropriate for The Pension Service to try to do so. It suggested that it was crucial for The Pension Service to develop strategies to work in partnership with other agencies.</p> <p>The report also commented that many take-up activities were inexpensive and appeared to have significant effects but recognised that limited evidence was available on their overall effectiveness, and better data was needed to allow The Pension Service and other agencies to decide where to concentrate their efforts to encourage take-up.</p> <p>The report highlighted more than 20 significant barriers to take-up amongst pensioners that are known to deter or delay claims, and these relate to the benefits system, the way it is administered and the attitudes of customers.</p>

Document	Summary
	<p>These barriers are as follows:</p> <p>System</p> <ul style="list-style-type: none"> 1 Poor co-operation between administrations 2 The verification process 3 Complexity of the system overall 4 Dislike of means-tested benefits <p>Administration</p> <ul style="list-style-type: none"> 5 Too many forms to fill in about eligibility 6 Long and complex claim forms 7 Lack of information and confusion 8 Problem of physical access to Benefits Agency office 9 Expect to be informed of entitlement (i.e. leaving the initiative to the pensioner) <p>Customer-level</p> <ul style="list-style-type: none"> 10 Difficulty with completing claim forms 11 Failure to reapply when rules change or circumstances change 12 Difficulty understanding information 13 Lack of basic knowledge about benefits and rules <p>Customer-level continued</p> <ul style="list-style-type: none"> 14 Reluctance to disclose personal information (financial and health related) 15 Aversion to visiting Benefits Agency offices 16 Do not want to receive charity because do not view benefits as being an entitlement / Stigma associated with receipt of benefit 17 Fear of refusal 18 Fear of debt (e.g. If benefit overpayments have to be repaid) 19 Fear that mistakes would be seen as dishonest or fraudulent 20 Fear of losing independence 21 Do not like to deal with bureaucracy/ anxiety about dealing with officials 22 Too much bother / not worth the effort for the amount of benefit.

Document	Summary
	<p>The report focused on the 10 main barriers and made the following recommendations in order to increase take-up:</p> <ul style="list-style-type: none"> • The Pension Service should set realistic and stretching national targets for take-up of Pension Credit. • To set realistic targets, assess the effectiveness of take-up initiatives and measure trends over time the Department must have better data on estimated non-take-up, which is currently reported in very broad bands; • The Department should do more to simplify the process of claiming benefits. • The Department should continue their research to understand the barriers to take-up amongst particular sub-groups, including ethnic minorities, pensioners living in rural areas, and those with sensory impairment. • The Pension Service should make optimum use of pensioners' existing contacts with trusted agencies such as health professionals. • Decisions about where to concentrate resources on take-up should be evidence based which in turn requires further research into what works, for whom does it work, and in what circumstances. • The Pension Service cannot overcome barriers to take-up on its own and so needs to work with many other organisations, the voluntary sector and LAs that have both the experience and contacts to help encourage pensioners to take-up their entitlement. <p><i>Relevance to Wales</i></p> <p><i>This suggests that organisations involved in benefit take-up and maximising income in Wales should set targets for take-up and measure progress over time. This would require investing some time and resource in assessing the impact of their activities but this would help them to adopt increasingly evidence-based approaches and so help maximise the impact of subsequent schemes. It would also suggest that organisations involved in benefit take-up</i></p>

Document	Summary
	<i>and maximising income should adopt a partnership approach with relevant local agencies and organisations as well as through trusted intermediaries.</i>
House of Commons Committee of Public Accounts Tackling Pensioner Poverty – Encouraging Take-Up of Entitlements (2003)	<p>Following the 2002 NAO report, the House of Commons Committee of Public Accounts examined action undertaken by DWP and The Pension Service on its own and in partnership with others to tackle the barriers to take-up by pensioners.</p> <p>The Committee drew a number of conclusions:</p> <ul style="list-style-type: none"> • There was a new focus and approach being adopted to take-up but its success was dependent on having stretching targets and improving the quality of information on take-up levels. • Confusion and complexity remained major barriers to take-up. • A partnership approach offered an opportunity to consolidate the efforts of other agencies and organisations and while there were examples of good practice, there was limited published data on what worked. • There was scope to simplify processes, use information more effectively and reduce duplication. <p>The Committee made a series of recommendations including:</p> <ul style="list-style-type: none"> • Setting targets, which became progressively more stretching. • Simplifying processes and reducing duplication. • Communicating effectively with pensioners through literature and a range of media. Suggestions were made regarding being creative in getting messages across to the public such as a story line in a popular television series. • Working with others in cost-effective ways such as contact with GP surgeries, registered social landlords and

Document	Summary
	<p>post offices – trusted intermediaries.</p> <p>Of note, the Committee highlighted that current information on non-take-up was inadequate and this made it difficult for DWP to assess where to focus its resources. Suggestions were made about developing the Family Resource Survey approach.</p> <p><i>Relevance to Wales</i></p> <p><i>This suggests that organisations involved in benefit take-up and maximising income need to set challenging targets and measure their progress although the lack of reliable information on non take-up presents challenges in determining where to focus resources. It also suggests there is scope to reduce complexity and duplication which could include regularly reviewing and revising claim forms. It also suggests that organisations involved in benefit take-up and maximising income should adopt creative means in their publicity in order to get their benefit take-up message across and they could achieve greater cost effectiveness by working with trusted intermediaries.</i></p>
<p>Northern Ireland Audit Office: Encouraging Take-up of Benefits by Pensioners</p>	<p>This report examined what the Department for Social Development in Northern Ireland had done to tackle the problem of pensioner poverty by increasing the take-up of benefits. Some key findings showed that:</p> <ul style="list-style-type: none"> • There was a lack of sufficient and reliable information on the take-up of benefits. The report recommended that data should be collected on estimated non-take-up in order to allow analysis of the problem and to set realistic targets and assess the effectiveness of take-up initiatives. • There was an ongoing need to address form design issues and to devise cost-effective simplification options in relation to application forms.

Document	Summary
(2003)	<ul style="list-style-type: none"> • The Department should monitor the ongoing effectiveness of using the telephone as the main means of providing information and advice about benefits rather than by face-to-face contact. • The Department should focus on a range of benefits in its take-up initiatives. • In order to persuade reluctant pensioners to claim what is rightfully theirs, there needed to be greater coordination between the Department and those voluntary organisations that have built up contacts with pensioners on a local basis. • There was scope for the Department to work more intensively with the voluntary sector in order to engage more directly with pensioners in their own communities by seeking opportunities to provide benefits advice in GP surgeries and health centres. <p><i>Relevance to Wales</i></p> <p><i>This report recognises the challenges associated with the lack of sufficient and reliable information on the take-up of benefits but would suggest that there remains scope for organisations involved in benefit take-up and maximising income to address some of the administrative barriers associated with take-up and to work in partnership with the voluntary sector and through trusted intermediaries.</i></p>
DWP Housing Support Division: Council Tax	This guide, produced by DWP's Housing Support Division, provides reasons why some people do not claim the Council Tax Benefit (CTB) they are entitled to and gives examples of recent initiatives undertaken by Local Authorities (LAs) to help maximise CTB take-up.

Document	Summary
Benefit Take-up: A Best Practice Guide (2004)	<p>Some barriers to claiming CTB referenced in the publication included:</p> <ul style="list-style-type: none"> • Lack of knowledge about CTB. • Uncoordinated activity by authorities. • Stigma associated with claiming benefits. • Bad experiences in the past when dealing with benefits claims. • Unsuitability of telephone based claiming for certain vulnerable groups. • Complicated claims process. • Lack of personal contact during claims procedure. <p>Suggestions were also provided on how to overcome these barriers. Examples of LA best practice included:</p> <ul style="list-style-type: none"> • Benefits road shows in the area. • Provision of pocket sized “ready reckoners” so customers can see the income limits for CTB. • Online benefits calculator. • A benefit bus to reach existing and potential claimants with online computers so staff can process claims. • Joint working with voluntary groups to target areas with low benefit take-up. <p>Finally, the report provided an LA checklist of seven actions which represented essential areas of take-up activity. These ranged from the display of promotional material to staff awareness to utilisation of all LA contacts and to working with self-help groups.</p> <p>DWP’s website contains information and leaflets to support with a CTB Take-up campaign.</p>

Document	Summary
	<p><i>Relevance to Wales</i></p> <p><i>This guide provides a range of practical suggestions and offers a checklist against which organisations involved in benefit take-up and maximising income could assess or audit their take-up activities.</i></p>
<p>Macmillan Cancer Relief – Better Deal: Access Denied, May 2005</p>	<p>This report presented the findings of a study exploring the experiences of cancer patients when claiming DLA and Attendance Allowance (AA). The findings from the report showed that cancer patients face a range of barriers to accessing entitlements such as lack information and advice on disability benefits, and misunderstanding of the criteria for assessment and the claims process. In addition, health professionals can be confused about the purpose of the benefits and the tests used to assess eligibility, which may deter them from providing information to support their claims. For example, cancer patients can find it difficult to predict their future care and mobility needs, while doctors cannot give accurate information about a patient’s future care needs. The report made a number of recommendations including:</p> <ul style="list-style-type: none"> • Provision of specialist benefit advice for cancer patients. However, thought needs to be given to how such a specialist advice service should be provided, who should give it, and how it should be funded. • Providing GPs and consultants with better information, support and resources to help improve their understanding of the DLA claims system and make more consistent assessments of their patients’ eligibility for DLA and AA.

Document	Summary
	<p><i>Relevance to Wales</i></p> <p><i>This report suggests that consideration needs to be given to how specialist benefit advice should be provided for cancer patients, reflecting the additional barriers faced by those who cannot predict their future care and/or mobility needs.</i></p>
<p>National Audit Office: Progress in Tackling Pensioner Poverty: Encouraging take-up of entitlements (2006)</p>	<p>In 2006, the National Audit Office (NAO) published a report assessing the progress the DWP had made in helping pensioners secure their entitlements. The report found that The Pension Service had made real and substantial progress. However there were still some improvements to be made, including:</p> <ul style="list-style-type: none"> • Targets set for The Pension Service by the Department should reflect the need to promote work to tackle pensioner poverty more widely than simply encouraging take-up of Pension Credit. • The Department should improve further the data on who is not claiming especially on Housing Benefit (HB) and Council Tax Benefit (CTB). • Targeting of local work should be improved by bringing together data sources and encouraging local autonomy; • The Department should develop its monitoring of cost-effectiveness to inform future strategy and the targeting of local resources. • A clear policy is needed on The Pension Service's wider role as a gateway to other services. <p>The report noted that there had been a fall in take-up of HB and CTB and suggested that take-up of these two benefits was as important for reducing pensioner poverty as take-up of Pension Credit.</p>

Document	Summary
	<p><i>Relevance to Wales</i></p> <p><i>This report provides a clear rationale for organisations involved in benefit take-up and maximising income to focus on HB and CTB and suggests there is scope for and merit in working with DWP to determine estimated non-take-up.</i></p>
<p>Department for Work and Pensions: Understanding the relationship between the barriers and triggers to claiming Pension Credit (2006)</p>	<p>This report documented the findings from a large-scale qualitative research project designed to provide insight into the barriers that exist to claiming Pension Credit and the ways in which they can be overcome. The most common barrier identified was a perceived ineligibility regarding Pension Credit. Other secondary barriers surrounded the nature of the claims process including an unwillingness to disclose financial information, fear of submitting documents and fear of making mistakes in an application.</p> <p>The most common trigger to take-up was a personal visit from the DWP/Pension Service. In some cases, a letter from The Pension Service was a trigger to a claim being made, while others received advice or encouragement from third parties or relatives.</p> <p>The report concluded that a confidential helpline to establish eligibility would help to encourage take-up. It emphasised the importance of marketing this to families, letting them know that they can use it to establish a relative's eligibility without having to identify them.</p> <p><i>Relevance to Wales</i></p> <p><i>This report suggests there is a need to raise awareness of eligibility among council residents and that a proactive approach is more successful in encouraging people to apply. It also highlights that helping people to establish</i></p>

Document	Summary
	<p><i>eligibility in a confidential manner is a successful approach. While a telephone hotline may be too cost prohibitive for many small organisations involved in benefit take-up and maximising income alternative suggestions could be a ready reckoner or web based benefits tool. The DWP currently provides a Benefits Enquiry Line for information about social security benefits. There is also an online benefits advice service on the Directgov website which allows potential claimants to find out information on benefits and tax credits that they may be entitled to, which would possibly negate the need for helplines for individual authorities.</i></p>
<p>Department for Work and Pensions: Helping older people engage with benefits and services: an evaluation of the Partnership Fund (2007)</p>	<p>This report evaluated The Pension Service Partnership Fund, examining the implementation, delivery and outcomes of the Fund and contributing to a better understanding of good practice in providing services for older people. The Partnership Fund aimed to develop cohesive networks of services for older people by encouraging joint working between partners and financed a diverse range of local and national organisations to undertake individual projects to improve the take-up of benefits, particularly among those who are harder to reach.</p> <p>The report highlighted that the barriers found were similar to those found in previous research, namely a lack of understanding of the benefits system, a lack of clarity around eligibility, the perceived complexity of making benefit applications and the stigma of benefit receipt.</p> <p>The study found that projects used six broad methods of targeting older people:</p> <ul style="list-style-type: none"> • Using existing databases to make contact with older people. • Distributing printed materials e.g. leaflets or posters. • Engaging the local and specialist media. • Transmitting details of the service through word of mouth.

Document	Summary
	<ul style="list-style-type: none"> • Undertaking community outreach. • Using the telephone to introduce the project and explain what it could offer. <p>An evaluation of the Partnership Fund was undertaken in 2007. It found that the overall benefit awarded through the Pension Fund were estimated at £61m per year. However, it was reported that there were a number of important challenges to assessing the impact of the Partnership Fund on customers of projects, as it was difficult to disentangle outcomes that were attributable to Partnership Fund activity solely and outcomes that might result from usual contact older people had with The Pension Service. Also of note, the report commented that partnership working was evident across more than three-quarters of the projects surveyed and projects that reported partnership working mentioned a wide variety of partner organisations. However, initiatives which did not exist prior to the Partnership Fund and did not have partners tended to experience bedding in periods.</p> <p><i>Relevance to Wales</i></p> <p><i>This evaluation report suggests there is a need to organisations involved in benefit take-up and maximising income to adopt a range of measures to engage with potential benefit recipients and established partnerships may work better than establishing new partnerships. It would also suggest that consideration needs to be given to how to measure the impact of activities and determine the influence of these activities over and above the influence of the recession.</i></p>
House of Commons	The Committee's predecessor had made recommendations to the Department for Work and Pensions to tackle pensioner poverty by encouraging pensioners to take up the benefits to which they were entitled. That Committee

Document	Summary
<p>Committee of Public Accounts Department for Work and Pensions: Progress in tackling pensioner poverty – encouraging take-up of entitlements (2007)</p>	<p>had recommended setting targets; communicating effectively with pensioners; working in partnership; and simplifying and reducing duplication of processes. The Government had set a target to pay Pension Credit to 3 million households by 2006 and 3.2 million by 2008. However, DWP did not meet the 2006 target and was not expected to meet the 2008 target.</p> <p>This report drew the following conclusions:</p> <ul style="list-style-type: none"> • DWP had increased the number of people claiming Pension Credit although noted DWP's PSA target did not address its wider aim of providing pensioners with a holistic approach to benefit take-up to which they were entitled. • The Pension Service did not coordinate its approach sufficiently with primary health and housing organisations, despite a common objective to increase older people's well-being. • Data matching and data sharing had improved but DWP did not have sufficient information on pensioners' individual circumstances to identify all their benefit entitlements, and only had information on people within the benefits system. • Take-up of HB and CTB had declined in recent years despite The Pension Service providing pensioners with a full benefit entitlement check. The report suggested that the performance of LAs in managing the benefits and in providing advice was a likely cause of local variability in take-up. • Another issue was the difficulties of measuring take-up rates due to the complexity of the eligibility assessment for disability benefits. The DWP have commissioned research into the feasibility of measuring Attendance Allowance take-up and exploring the reasons for non-take up. It was suggested that the findings from this are

Document	Summary
	<p>used to set up a target take-up level, as the DWP has no targets for take-up.</p> <ul style="list-style-type: none"> • Despite the fact that it has become simpler to claim pensioner benefits, there are still a number of stages which requires the customers to understand complex links between disability and income-related benefits. It was suggested that The DWP should allow customers to claim linked benefits through one, single transaction. • The report highlighted that older pensioners, pensioners from ethnic minorities and from areas that are more affluent are less likely to claim Pension Credit, as are pensioners in rural areas. Although there are a number of different approaches to encouraging take-up, there is limited awareness of what works best. Through the sharing of best practice and encouraging innovative practices, take-up can be increased, especially in areas with lower take-up. <p><i>Relevance to Wales</i></p> <p><i>This committee report suggests there is a need for organisations involved in benefit take-up and maximising income to adopt a holistic and partnership based approach and there remains scope for organisations involved in benefit take-up and maximising income to improve on some of the administrative barriers. It also suggests there may be merit in such organisations targeting specific categories of people such as older pensioners, pensioners from ethnic minorities and from areas that are more affluent and pensioners in rural areas who are less likely to claim additional benefits. Finally, it is important that organisations involved in benefit take-up and maximising income in Wales share best practice and encourage innovative practice in order to maximise take-up.</i></p>
Social and	This report, commissioned by Access to Benefits (A2B) aimed to provide a better understanding of the spectrum of

Document	Summary
<p>Market Research: Research on Access to Benefits (2007)</p>	<p>older peoples' attitudes to claiming benefits and to identify alternative ways of reaching older people. Focus groups were held with older people across a range of geographical locations in Northern Ireland as well as consultation with representatives from the Northern Ireland Housing Executive, the Rates Collection Agency and local hospital trusts and a local council. The barriers identified from this research included:</p> <ul style="list-style-type: none"> • Lack of awareness of benefits. • Assumed ineligibility. • Perceived complex/intrusive nature of the application process. • Fear of losing benefits. • Poor communication of benefits entitlement. • Stigma associated with claiming benefits. • Pride. • Fear that applying for a benefit may cease their other benefit entitlements. • Poor computer literacy. <p>Suggestions to increase benefit take-up included:</p> <ul style="list-style-type: none"> • Personal visits from advisers. • Letters which gave a strong indication that they may be eligible. • Assistance or encouragement from third party organisations. • A confidential helpline to establish eligibility. • Pre-populated application forms.

Document	Summary										
	<p><i>Relevance to Wales</i></p> <p><i>This report suggests there is a need to organisations involved in benefit take-up and maximising income to adopt a proactive approach, improve the administrative process and work through trusted intermediaries.</i></p>										
<p>Welsh Assembly Government: Council Tax Benefit and Housing Benefit – Barriers to Take-up in Wales (2008)</p>	<p>In addition to providing funding for benefit take-up, the Welsh Assembly Government set up a working group to research the barriers to CTB take-up in Wales and to highlight and promote best practice, based on the experience of the LAs that had successfully increased CTB take-up.</p> <p>The findings from this independent research highlighted the following barriers and recommendations:</p> <table border="0" data-bbox="515 686 2128 1197"> <thead> <tr> <th data-bbox="515 686 1254 734">Barriers</th> <th data-bbox="1254 686 2128 734">Recommendation</th> </tr> </thead> <tbody> <tr> <td data-bbox="515 734 1254 877">Application form and required documentation including the volume and variety of information required.</td> <td data-bbox="1254 734 2128 877">– Regular review of forms to ensure they are fit for purpose.</td> </tr> <tr> <td data-bbox="515 877 1254 973">Timescale for dispatch of application forms.</td> <td data-bbox="1254 877 2128 973">– Review of application systems so that requested application forms were issued immediately.</td> </tr> <tr> <td data-bbox="515 973 1254 1069">Literacy, language and communication barriers.</td> <td data-bbox="1254 973 2128 1069">– Review websites to make sure that they are easily navigable, user-friendly and up-to-date.</td> </tr> <tr> <td data-bbox="515 1069 1254 1197">Overall customer experience and lack of personal contact with customers.</td> <td data-bbox="1254 1069 2128 1197">– Ensure that trained staff are always available throughout the claim process.</td> </tr> </tbody> </table> <p>The research also identified a range of barriers to benefit take-up and made a series of suggestions to help overcome these, but recognised that not all would be appropriate for all LAs. These included:</p>	Barriers	Recommendation	Application form and required documentation including the volume and variety of information required.	– Regular review of forms to ensure they are fit for purpose.	Timescale for dispatch of application forms.	– Review of application systems so that requested application forms were issued immediately.	Literacy, language and communication barriers.	– Review websites to make sure that they are easily navigable, user-friendly and up-to-date.	Overall customer experience and lack of personal contact with customers.	– Ensure that trained staff are always available throughout the claim process.
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Overall customer experience and lack of personal contact with customers.	– Ensure that trained staff are always available throughout the claim process.										

Document	Summary
	<ul style="list-style-type: none"> • Savings threshold – requires strategic response. • Stigma associated with claiming benefits. Suggestions included promotion of “entitlement” rather than “benefit”. • Language, literacy and communication barriers. Suggestions included promotion of face-to-face services, marketing, use of ready reckoners etc. • Fear of losing current benefits and previous negative experience. Suggestions included using press releases, highlighting case studies of successful claimants. • Unfamiliarity with the language of decision makers. Suggestions included LAs to review and clarify confusing terms. • Inability to share information with other government departments - requires strategic response • Access e.g. for housebound people, those working full-time etc. Suggestions included home visits and out of hours services. • Fear of links being made with other agencies e.g. sharing information with social services. Suggestions included partnership with trusted intermediaries e.g. Age Concern. • Possible cost of supplying supporting information e.g. copies of bank statements. <p>The working group also identified several key factors that were felt to be essential to the successful implementation of LAs’ benefit take-up action plans. These were:</p> <ul style="list-style-type: none"> • Importance of support and buy-in from local authority Cabinet Members and Senior Management Teams. • Staff attitude and commitment. • Joining forces with others, both internally and externally, to achieve goals, e.g. with Communities First

Document	Summary
	<p>partnerships within the LA, neighbouring authorities or working with partner organisations like The Pension Service.</p> <ul style="list-style-type: none"> • Working in partnership with the voluntary sector. <p><i>Relevance to Wales</i></p> <p><i>This report suggests there is a need for organisations involved in benefit take-up and maximising income to improve their administrative processes and communication/marketing materials, adopt a proactive personal approach, work in partnership with others and through trusted intermediaries as well as ensuring senior management support and staff commitment through, for example, training and awareness raising.</i></p>
<p>Access to Benefits for Older People: Summary of findings of workshops (2008)</p>	<p>Access to Benefits (A2B) ran a series of themed workshops with older people and community development workers in Northern Ireland with the purpose of making contact with older people and the people who work with them and to learn more about how barriers to benefit entitlement can be addressed. The findings included:</p> <ul style="list-style-type: none"> • All groups of respondents were able to identify Pension Credit and Smartpass as benefits available to people over 60. The majority identified Disability Living Allowance, Housing Benefit, Winter Fuel Payment and the free TV Licence. • With respect to barriers to using computers, issues identified included the cost of computer equipment, broadband and courses, access to computers, health and technological barriers. • Many groups believed that the process made it too complicated to claim benefits. Others did not wish to complete forms which they considered to be intrusive or undignified, while some groups mentioned that they did not have anyone to help with the forms.

Document	Summary
	<ul style="list-style-type: none"> • Using voluntary and community groups seemed to be the most popular way of getting information to older people, including larger organisations as well as local community groups. <p><i>Relevance to Wales</i></p> <p><i>This report suggests there is merit in increasing awareness of availability or and eligibility to HB and CTB, improving the administrative process and having dedicated support available, as well as working through the voluntary sector.</i></p>
<p>Access to Benefits: Take-Up Study: Rate Relief and Disabled Person's Allowance (2008)</p>	<p>This paper examined the issues which impacted on low take-up of Housing Benefit, Rate Relief and Disabled Person's Allowance and made recommendations as to how take-up can be increased.</p> <p>Issues relating to low take-up included:</p> <ul style="list-style-type: none"> • Length and complexity of application forms. • Accessibility issues. • Misconceptions about ineligibility. • Reluctance to give out personal information. • Previous bad experiences when applying for benefits. <p>Recommendations as to how take-up could be increased included:</p> <ul style="list-style-type: none"> • Leaflets should be revised and made clearer. • Set up a free and anonymous helpline. • Publicise and provide more home visits.

Document	Summary
	<ul style="list-style-type: none"> • Use locally based enablers. • Simplify forms. • Automated delivery of benefits. • Pre-populated forms. • Provide information packs to retirees. <p><i>Relevance to Wales</i></p> <p><i>This report suggests there is merit in improving the administrative process and having dedicated support available, as well as working through the voluntary sector and targeting people at specific life events.</i></p>
<p>House of Commons Work and Pensions Committee: Tackling Pensioner Poverty (2009)</p>	<p>The Committee looked at the work being undertaken by DWP and The Pension Service to reduce the level of pensioner poverty. It found that the DWP had put a lot of effort into encouraging pensioners to claim Pension Credit and then directing them towards other benefits but highlighted that it may be more effective to encourage people to claim Housing Benefit and Council Tax Benefit before initiating claims for Pension Credit.</p> <p>The Committee noted that a significant amount of work had gone into encouraging people to claim Pension Credit but that this was now experiencing diminishing returns for its efforts and further progress in improving take-up has been limited.</p> <p>It highlighted that while home-owning pensioners are less likely to live in poverty than non-homeowners, many of those who are entitled do not take-up means-tested benefits.</p>

Document	Summary
	<p>The Committee suggested the Department needed to identify the scale of this problem and understand the reasons for it before they can tackle it effectively.</p> <p>The Committee agreed with the NAO that a focus on focus on improving the take-up of Housing and Council Tax Benefit could have a significant impact on the number of pensioners living in poverty and suggested that LAs needed to do more to increase take-up of Housing and Council Tax Benefit, and could work more closely with the Department's Agencies.</p> <p>Further suggestions made included incentivising LAs to improve Housing and Council Tax Benefit take-up, with the Department setting targets for either the take-up of these benefits, or the number of new applications generated. It also recommended that there should be a single phone line for Pension Credit, Housing and Council Tax Benefit.</p> <p><i>Relevance to Wales</i></p> <p><i>This report suggests there is merit in organisations involved in benefit take-up and maximising income targeting owner-occupiers, setting take-up targets and in working in partnership with DWP and its agencies.</i></p>
<p>Audit Commission Benefit Take-up, March 2010</p>	<p>The Audit Commission undertook a series of pilot benefit inspections across a number of LAs in England. The Commission identified four areas of notable practice. These were:</p> <ul style="list-style-type: none"> • Identifying and targeting potential claimants, highlighting that intelligent use of data sources allowed LAs to identify potential customers more effectively. It noted that Newham was exploring ways to share data between departments. • Marketing and promoting benefit services, suggesting that tailored promotional work designed to suit the profile

Document	Summary
	<p>of the local community can help to increase the success of take-up campaigns. It highlighted the need to measure and understand the impact that take-up campaigns have on the local area to help to improve upon success and minimise costs associated with less effective promotions.</p> <ul style="list-style-type: none"> • Reviewing literature design to ensure ease of use, providing clear advice with examples of guidance and highlighting different contact methods. • Working with partners to improve take-up rates. It suggested that partnership working could help in understanding local needs and to tailor services appropriately. <p>The Commission provided vignettes of benefit take-up activity in a number of LAs, highlighting innovative activities which included working with, for example, Sure Start, with local schools and attending redundancy workshops with affected business. However, the Commission also highlighted examples where plans were underdeveloped, not fully detailed and lacked adequate arrangements to evaluate the impact of actions on improving take-up and where take-up was not highlighted as a priority in local business plans.</p> <p><i>Relevance to Wales</i></p> <p><i>This report suggests there is merit in LAs taking a targeted approach, exploring data sharing options, making publicity tailored to local needs, improving the administrative process and adopting a partnership approach with other relevant organisations. It also suggests Organisations involved in benefit take-up and maximising income need detailed action plans and include measures to assess the impact of their activities and take-up plans need to be supported at a strategic level within council.</i></p>

Document	Summary
<p>Northern Ireland Audit Office 2011, Take-up of Benefits by Pensioners (2011)</p>	<p>This report built on the NIAO 2003 report and examined what key government departments in Northern Ireland had done to tackle the problem of pensioner poverty by increasing the take-up of benefits. The report highlighted that:</p> <ul style="list-style-type: none"> • Progress has been made to improve take-up through various take-up activities. • It is inherently difficult to estimate benefit take-up rates and as such, it is difficult to measure the extent of the problem or the improvement since the 2003 report. However, <i>“if benefit-paying agencies are to improve the level of uptake on benefits, they must continue to consider cost-effective ways of generating relevant information.”</i> • Legislation for data sharing between agencies to improve information and uptake campaigns was welcome. This included using existing information such as Her Majesty’s Revenue and Customs (HMRC) benefit data to identify people in NI with potential unclaimed entitlement to State Pension Credit. <p><i>Relevance to Wales</i></p> <p><i>This report acknowledges the challenges associated with the lack of sufficient and reliable information on estimates of take-up of benefits. Although it suggests agencies should continue to consider ways to generate relevant information, it makes no explicit suggestions on how this could be achieved.</i></p>

Appendix 2 Case Studies

Case Study 1

Mrs A is a foster carer with an LA. She has fostered her son since he was 6 weeks old. He is now 15 months old. As he has grown older, it has become apparent that he has both mental and physical disabilities, and he now attends a pre-school for children with learning disabilities.

At the pre-school, Mrs A commented that she was having difficulties using the pushchair she had for her son. A member of staff at the pre-school suggested that she may be able to claim DLA for him and get a specialist pushchair that was more suitable for his needs. Mrs A was nervous about filling in the forms required for making a DLA application and got the impression from her social worker that she was too busy to help her with it – and anyway the social worker was not very familiar with her son's condition.

At that point, she turned to her local CAB. She accessed their contact information via the Internet, though she was also aware that a representative of her local CAB had visited the pre-school to talk about benefits.

The advisor at her local CAB helped her complete the forms and within two weeks she heard that the application had been accepted and allowance would be paid at the middle rate. No mobility element was applicable due to the child's young age.

Mrs A now receives £47 per week (soon to increase to £49.30 per week) of DLA on behalf of her foster child.

As a result of the extra income Mrs A has been able to buy her son a more suitable pushchair that better meets his needs (the pushchairs provided by Social Services to foster children are, in her words, "well worn" and not suitable due to his disabilities).

Her son suffers frequent chest infections so she has also purchased a dehumidifier for his bedroom to alleviate the problem, which cost over £50 which she would not have been able to afford without DLA. He also receives regular physiotherapy and his physiotherapist suggested that trampolining may help to develop his muscle tone, so the DLA has also been used to buy a garden trampoline for him.

In conversation with her Foster Care Link worker, Mrs A has heard of several foster carers in her area with similar caring situations to hers who have completed application forms themselves and then had their applications turned down. She has asked the Link worker to suggest to these foster carers that they contact CAB to help them apply in future. She has also spoken to the CAB advisor in her area, who is happy to put people in contact with the right CAB advisor.

Mrs A did not think that she would be able to claim, as she was not the child's parent.

She thinks that people may not apply for benefits such as DLA because the forms are difficult to fill in and it is not always clear what information is required. She believes that people are often reluctant to admit their child has a disability.

She had not been aware of what services the CAB provided and had never used their services before, thinking they would not be relevant to her needs. Mrs A's previous misconception of CAB was that it was "not for people like me". Better promotion of the whole breadth of services provided by CAB would therefore be useful in encouraging people to come forward. She found CAB very professional and helpful and would definitely use their services again if she needed them.

Mrs A also felt the DLA application form could be more clearly worded (maybe illustrated by examples) to help people understand the information that is needed.

Case Study 2

Mr and Mrs B have a 6-year-old daughter who has a genetic disorder causing severe seizures. The condition is progressive and life threatening. They also have a teenage son who is not disabled.

Their daughter has had this condition from birth and, since then, has had a team of professionals (nurses, doctors) that provide advice to Mr and Mrs B on the condition and how to plan ahead for her care (e.g. planning for a car-parking space near to their front door in the future). The family have received the care component of benefit for several years.

Mr and Mrs B were aware that, as their daughter got older, they may be entitled to different benefits/support and a friend of the family has advised them to visit CAB.

CAB took the pressure off Mr and Mrs B dealing with all the paperwork, and the advisor raised questions they had not even thought of. As a result, they now receive DLA and the care component at the higher rate as well as Carers Allowance. Before visiting CAB they “didn’t have a clue” they could get any of these benefits.

As a result of receiving the extra income, the whole family’s quality of life has improved. For example, with the money they have been able to buy enhanced video and audio monitors (better quality than those provided on the NHS) that have given them greater peace of mind and allowed the parents to literally be able to sleep at night. The money has also helped to fund the numerous hospital visits and appointments they have to make. It has also made the special needs buggy that her daughter uses more comfortable with the addition of special cushions and pads and they have been able to have more days out/specialised holidays.

The family had adequate means before receiving the benefits but they say “It is a blessing to have it”.

The reason they had not applied before was their lack of awareness of its availability.

Mrs B thinks people feel it is just too complicated to apply. Even though people know that receiving the benefit could help them, when they are dealing day to day with the care of a disabled child the thought of having to do all the paperwork on top of their caring responsibilities is “just too much”. However, CAB helped greatly with the application process which meant it was one less thing to worry about.

Mrs B thinks that to improve benefit take up in the future more could be done to increase awareness of DLA. In addition, she would like to see a change in process: she acknowledged that claims have to be reviewed from time to time but felt that in the cases where it is known the children will not recover from their condition/the condition will deteriorate over time (as in Mrs B’s daughter’s case) that reviews are unnecessary and cause extra frustration and stress.

Case Study 3

Mrs C has a 10-year-old son who has problems with his balance. The problem means he falls over frequently. As a result, he needs new shoes each month and frequently needs new trousers as they are damaged. Her son was diagnosed with his condition when he was 5 years old (5 years ago), but no-one told her at that time that he may be entitled to benefits. She works part-time and so thought that she would not be entitled to claim.

Mrs C heard about the DLA while talking to a friend who already received it. She was advised to visit her local CAB.

The advisor at CAB helped her apply for DLA and she was successful at receiving the Allowance at the middle rate. She already

claimed Carers Allowance to care for her father, but the advisor at CAB helped her get that changed to including caring for her son.

The extra income has enabled her to take her son on a holiday, to buy him a new trampoline and to pay for him to attend football club activities, all of which have contributed to his improved quality of life. She has also been able to more easily afford the shoes and replacement clothes that he regularly needs.

Receipt of the DLA has also improved Mrs C's quality of life as it has "taken a lot of weight off my shoulders". Though their employment status has not changed, Mrs C and her husband had found it difficult to pay the bills and this extra income has been really helpful and reduced their anxiety about being able to afford essentials like shoes.

She is not sure why other people do not claim, but thinks people are simply not aware they can claim.

She is full of praise for the CAB: "they have been absolutely fabulous".

She feels more could be done to raise awareness among the professionals that help disabled children. For example, her son has been attending physiotherapy trampolining lessons for a while and none of the staff that provide that service had mentioned to her that she may be able to claim DLA or other benefits, or suggested visiting CAB for advice.

Case Study 4

Ms D's son (aged 12) took seriously ill about a year ago. He is now improving but has been left with very poor eyesight. He needs one to one support at school and, though he manages day to day, it is difficult for him.

The CAB campaign was mentioned during a hospital visit and Ms D found out more information via the Internet.

CAB helped her complete the form, and though she was advised that her application might be subject to appeal, she received the DLA (at the middle rate for one component and at the lower rate for the other) at first application. She also applied for Carer's Allowance and now receives that.

The receipt of DLA/Carers Allowance has been a great weight off her mind. She was working part time prior to her son's illness but needed to respond to calls from school at short notice, which made working difficult. The allowance has meant she does not now need to work and can be more flexible and responsive to her son's needs.

Apart from compensating for income from her previous employment, she has used the additional income to get extra support and visual aids for her son, such as magnifiers.

She feels people do not know what they are entitled to but she got information via the Internet and CAB.

CAB has been very helpful and her application was successful and she has been happy with all the support she has received from CAB.

She suggested making it easier to get information out to people because not everyone has access to the internet. She feels that the CAB is best placed to provide the information.

Case Study 5

Ms E has a 5 year old son who has Autism. He needs help with toilet training, she has difficulty getting him to eat enough and he suffers from severe “melt-downs” where he cannot control his actions.

Ms E had applied directly for the DLA in the first instance. She sent the numerous documents and reports about her son in support of her application but received a reply saying that she had not provided sufficient information and that she could not be awarded DLA because her child “has tantrums”. She was upset by this reply and, on following up, the DLA department did apologise to her. Ms E contacted CAB after being frustrated and angered by the response she received from the DLA department. CAB helped her reword her application more appropriately and she praised CAB for the support they provided (“I couldn’t fault them”). As a result, her son received DLA at the highest rate and also qualified for Mobility Allowance.

As a result of the extra income from these benefits, Ms E has been able to get a special pram for her son to enable improved mobility. She has purchased side guards for his bed, better monitors, improved the door to his room for easier access in a hurry, and turned his room into a “mini sensory room”.

The extra income has also enabled her to take him horse-riding more often which she could not afford to do before, as well as the occasional trip to a Sensory Centre. She says that her son is now happier more often, and when having a “melt-down” she is able to calm him down more quickly. The horse-riding calms him down and helps with his eating as he is always hungry after a ride. She says it has certainly improved his quality of life.

Ms E feels that people are not always aware that they can qualify for DLA and can lack confidence in coming forward to ask or fill in the forms, which are long and complicated.

She feels the DLA department make it difficult for people to apply. She feels the staff do not put themselves in the shoes of the people that are applying and do not understand the difficulties they have to deal with. To improve the process she feels the staff at the DLA department could improve their understanding of the situation applicants find themselves in: she feels that staff currently give the impression that they give applications a cursory look rather than looking at all the information in detail and suggested that each member of staff could spend a day with a parent to better understand the impact having a disabled child has on their family lives.

Ms E also feels that the DLA department should also improve the consistency and clarity of its advice. By contrast, she feels that CAB explains things to people clearly and in a way that they can understand, they clarify what information is needed and give parents/applicants the confidence to apply.

Case Study 6

Mr and Mrs F look after a disabled young man aged 18 years. Mr F is retired. Social Services thought the young man should be entitled to the higher rate DLA and so suggested Mr F contact CAB.

Mr F has had no need to claim benefits in the past, so was not aware of the system, or that CAB could help him.

The claim for higher rate DLA was made through CAB and Mr F is still awaiting a decision but CAB are handling this on his behalf.

As well as DLA, CAB advised Mr F that he could claim Working Tax Credits as caring for the young man was classed as working. He had been unaware that he would be able to claim this as he had taken early retirement. He also now receives Carers

Allowance and a reduction in his water bill. The Carers Allowance amounts to about £40 per week, as does the Working Tax Credit.

The young man also receives Employment and Support Allowance.

The extra income has meant that Mr F “no longer has to watch the pennies as much”: they had been living off savings since his retirement.

Case Study 7

Ms G has a 3 year old daughter who has severe autism and hyper mobility. She is also mentally impaired and attends a special needs crèche. An advisor from CAB attended the crèche to talk about the DLA campaign, and Ms G also received information about DLA from her paediatrician.

Ms G applied for DLA with the help of CAB. She was awarded DLA at the middle rate and higher rate Mobility Allowance. She has lodged an appeal as she (and her paediatrician) believes her daughter is entitled to the higher rate DLA as she needs 24 hour care.

She is awaiting a decision on the appeal but was told that she has to wait 11 weeks for a decision.

Ms G says the extra income has “made a lot of difference”: her daughter goes to another crèche now (in addition to the original one) and this gives her parents a break from caring responsibilities. Furthermore, the crèche needs to provide one-to-one supervision to her daughter, which is expensive, and she would not have been able to afford this without the extra income that DLA provides. She is planning to arrange swimming lessons for her daughter too (again requiring one-to-one supervision, and has

bought toys and aids to stimulate her daughter.

The family is moving to another house which is more suitable to her daughter's needs so the extra income will also help with equipping that.

She feels the DLA has given her daughter "a better way of life".

Ms G used to work part time. Although she still does work, she has had to reduce her hours by half in order to care for her daughter. She feels working parents may not think they are eligible for benefits because they are in work, that people think benefits are only for those not in work and that people are also proud and prefer not to be seen as a benefit claimant.

Ms G's daughter's condition will not improve. The process of making an application is very stressful. She understands that her application will be reviewed every 2-3 years. As her daughter's condition is not going to improve she feels that this review is an unnecessary burden in an already stressful situation.

The waiting time for an appeal decision (at 11 weeks) feels like a long time. She is able to get an update on the progress of her application if she phones up, but feels 11 weeks is too long to wait.

Case Study 8

Mrs H has two children (a daughter aged 17 and a son 14 years). Both children have suffered from epilepsy since birth.

Mrs H did not realise that her children may be entitled to DLA. She assumed it was a means tested benefit and did not think of her

children as disabled enough to receive benefit.

She first became aware of the take-up campaign when she saw a leaflet at her local hospital. She also spoke to a friend who was claiming DLA for her son who had developed epilepsy following a head injury.

She contacted a CAB advisor who she described as “absolutely marvellous”. The advisor helped her complete the forms for both children. She says that if she had been faced with completing the forms with no help she would not have continued as the paperwork was daunting.

Both children now receive the middle rate DLA. Both parents work and have adequate means and they are not eligible for any other benefits. When the children were younger they did struggle financially and they would have really benefited from the extra income that DLA would have brought at that time had they known about it.

The children have only just started receiving DLA which is quite late into their childhood despite having epilepsy since birth. The money has therefore been directed into savings accounts for them to access when they are older. Mrs H says that the children will not be able to drive, so the extra money will be able to help them with things like additional transport costs.

Mrs H was completely unaware until last year that she could claim DLA for her children. An improvement for her would be for professionals involved with her children such as the local GP, consultant and health visitor (who she saw regularly, especially when they were younger) to have mentioned it to her.

She has been very impressed with the help provided by CAB.

Case Study 9

Ms I has a 13 year old daughter who has a heart defect. She has had several open-heart operations – the most recent being when she was 12 years old. Her daughter suffers frequent night terrors, resulting in bed-wetting.

Ms I had tried to apply for DLA on several occasions in the past few years but had been advised by the Jobcentre that she would not be eligible and applications for DLA were unsuccessful.

Her daughter's consultant and physiotherapist suggested trying CAB for assistance.

Ms H went to her local CAB. Her initial application was refused but CAB suggested she lodge an appeal. The appeal was won and her daughter now receives DLA at the mid band rate.

CAB is currently helping her with an application to receive Carers Allowance.

The extra income from the DLA helps to cover her increased laundry bill from the frequent bedwetting. The family has had an extension built on the house so that the daughter has access to a walk-in shower next to her bedroom to allow her to shower at night. The extra income is helping in a small way contribute to paying back the £12,000 it cost to build and fit out the extension.

Jackie had been refused the benefit so many times that she had effectively given up trying, until she was advised to seek help from CAB. She feels a lot of barriers are put in people's way, citing the jargon used in applications as one of them.

She feels that volunteers at the CAB have limited time and funding to help people like her: she has to wait up to 8 weeks for an

appointment.

The deadline for completing application forms once they have been received is just 2 weeks. This means the time period is often too short to get advice and complete the form before the cut-off date.

Ms I would like to see a) more time being allocated to the CAB for take-up campaign activity in order to reduce their backlog or waiting times for appointments and b) the completion deadline for applications extended to a more realistic timeframe.

Cast Study 10

Ms J has a 6 year old son with hearing loss. He has been hearing impaired since birth.

Ms J heard about the possibility that she could claim DLA by chance when speaking to her son's school secretary, who volunteers for CAB part time.

An advisor at her local CAB had recently received training on benefits for people with hearing loss and was very helpful. She helped Ms J think about all the things, that she as a mother takes for granted, that she has to do extra because of her son's condition (e.g. extra care with help crossing the road). Ms J says she would not have thought to put these things on a form had she not been helped by the CAB advisor. It helped that the advisor was seeing things from a different perspective.

Her son now receives the middle rate DLA. CAB also advised her to apply for Carers Allowance which she now receives.

The extra income they receive includes DLA at £55 per week and Carers Allowance at around £200 per month.

This has been used to top up the family income but is particularly helpful in covering the extra fuel costs required to take her son to regular hospital appointments. It has also enabled the whole family (Ms J also has another child) to have days out that they otherwise would not have been able to do.

The CAB advisor suggested she tell people she knew that may be eligible to contact CAB. This word-of-mouth approach (which Ms J had experienced via the school secretary) was seen as an effective way to 'spread the message' about DLA and Ms J did pass on the message to a friend of hers whose child suffered from Asperger's Syndrome.

She thinks other ways to improve awareness include putting information on school notice boards and better media coverage.

People at the hospital, including her son's speech and language therapist, were unaware of his eligibility for DLA and had never mentioned it to her.

She says that "CAB were fantastic and so helpful. They explained the process and what to expect".