

Moving people with cancer on to Universal Credit

What is Universal Credit?

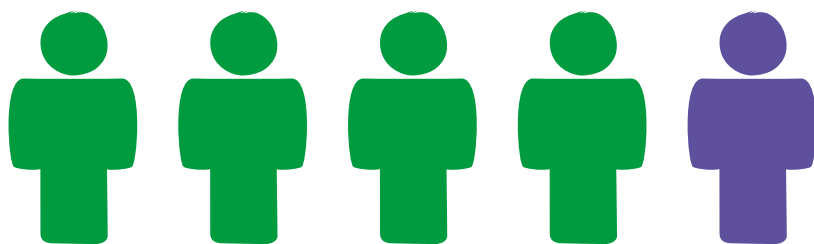
Universal Credit is the Government's flagship welfare reform. It replaces six benefits for people of working age, now known as legacy benefits, with one system. Universal Credit includes income-related Employment Support Allowance (ESA), which provides financial support to people who are unable to work due to illness or disability.

Universal Credit has been rolled out in phases since 2013, and is due to be available in every JobCentre Plus area by the end of 2018. From next year, the Government will begin moving claimants of legacy benefits on to Universal Credit. This process will be called managed migration, and will see 2 million claimants move onto the new system, including 745,000 people who claim ESA.¹

Why does Universal Credit matter for people with cancer?

For many people, a cancer diagnosis can have a significant financial impact. Four in five people with cancer are on average £570 a month worse off as a result of their diagnosis.² Lots of people have to cut down or stop work completely, and many face additional costs such as travelling to appointments and increased heating bills.

The benefits system provides a vital safety net for people with cancer when they need it most. People with cancer who are out of work due to their illness will often claim ESA. Increasingly, these people will need to claim Universal Credit.



Four in five people with cancer are worse off as a result of their diagnosis – on average by **£570** per month.

Is Universal Credit working for people with cancer?

Macmillan's Benefits Advisers help people with cancer to claim benefits every day. They are seeing first-hand that, too often, Universal Credit is not working for people with cancer. Recent changes have made some improvements to Universal Credit, but much more needs to be done to address the problems people with cancer are facing.



Access

Applying for and managing a Universal Credit claim online can be difficult for people with cancer, particularly if they are very unwell or hospitalised without access to the internet. They can also experience problems when required to attend Job Centre Plus appointments – either to verify their identity or to sign a contract to complete their application. For people with cancer this can be very distressing and could put them at risk of infection.

'I don't have a computer, I don't even know how to use one. I go to the Job Centre office after my radiotherapy, and they go on the computer for me to dig out stuff.'

Person with cancer on managing their Universal Credit claim

Alternative routes to application and adjustments such as home visits should be easily accessible for people who struggle to apply for Universal Credit. Macmillan's advisers report that this is not currently happening; support is provided inconsistently and often only if a claimant is aware of what is available and requests it.

'Clients are sometimes told by the helpline that there is no option of a home visit at all.'

Macmillan Benefits Adviser

We are concerned that these problems will continue as large numbers of people move to Universal Credit under managed migration, and people risk losing their benefits if they're not able to get the support they need to make a claim. The Government should guarantee a telephone claim or home visit to anyone who finds it difficult to apply online or attend a JobCentre Plus, including those who are undergoing cancer treatment or have a terminal diagnosis.



New-Style ESA

Universal Credit replaces benefits that are paid to people on low incomes or who are unable to work. People with health conditions and disabilities who do not qualify for these income related benefits – for example because they have savings – can apply for contributory ESA. In Universal Credit areas, this is now called New-Style ESA.

New-Style ESA is integrated into the Universal Credit telephone service, but many people seeking to apply for this benefit are being given incorrect information or signposted to apply for Universal Credit, even when they may not be eligible.

'When I phone the numbers that they give me, they say they can't deal with it. I've phoned them three times. This is causing me more stress than the cancer.'

Person with cancer on trying to claim New-Style ESA

Getting the wrong information or applying for the wrong benefit can be stressful and confusing for people with cancer. It can also lead to significant delays in people getting their payments, and some people give up on their claims altogether because the process is so long and stressful.



Explicit consent

The problems people with cancer are experiencing are compounded by the restrictions placed on services like Macmillan’s Benefits Advisers within Universal Credit. Under legacy benefits, third parties – such as family members, friends or benefits advisers – had ‘implied consent’ which made it very easy to support people with their claims. This has been removed from Universal Credit. Claimants are now required to provide verbal or written explicit consent each time a third party accesses their account or acts on their behalf to solve a problem with their application. Many people with cancer will have multiple issues with their claim, and it can be very difficult for them to provide this level of consent – particularly if they are hospitalised, undergoing treatment, or close to the end of life.

‘Without implicit consent our ability to help is so much more limited’

Benefits Adviser, Macmillan Support Line

Many people who are moved from legacy benefits to Universal Credit will have relied on support from advice services to make their ESA application, and should not be denied this support because they are being moved on to the new system. The Government should reinstate implied consent to ensure that those who struggle with their application can access support as quickly and easily as possible.



Waiting times

Universal Credit is paid monthly in arrears, which means that there is a 5-week wait from the point of application to first payment. The Government has announced a legacy benefit ‘run-on’ for people who move on to Universal Credit through managed migration. This will provide them with one additional payment to help bridge the gap between benefits. But this will not apply to people who make new claims to Universal Credit outside of managed migration, so people will continue to experience problems with the 5-week wait in

the future. This includes people with a terminal illness, who may have 6 months or less to live.

Macmillan’s Benefits Advisers are reporting that this is causing increased stress and anxiety for people with cancer, and that many are experiencing financial hardship and falling into debt while waiting for their first payment. On top of this, we know that there are widespread problems with Universal Credit payments being delayed. Macmillan’s Benefits Advisers report that many people with cancer are waiting longer than 5 weeks for their full payments. In some cases, this is because Universal Credit staff are not aware that people who are awaiting, receiving or recovering from certain types of cancer treatment should have their Work Capability Assessment (WCA) more quickly, and should automatically receive a higher rate of benefits.

The National Audit Office recently found that 67% of people with a health condition or disability did not receive their full Universal Credit payment on time.³



We are concerned that the volumes of people making claims for Universal Credit under managed migration will make these delays worse. The Government should publish data on Universal Credit waiting times, broken down by Universal Credit element and medical condition where appropriate, so that the impact of managed migration can be effectively monitored.

We are concerned that if the Government proceeds with managed migration without addressing the issues we are already seeing with the Universal Credit system, up to 26,000 more people with cancer currently claiming ESA will be forced to deal with these problems, and could risk losing their benefits altogether.⁴

What is managed migration?

Many people with cancer have already 'naturally migrated' to Universal Credit, either by making an entirely new claim or moving from an existing benefit through a change of circumstances. Between 2019 and 2023, the Government plans to move everyone claiming legacy benefits on to Universal Credit.

2013

Universal Credit rollout begins

2018

Universal Credit available in every JobCentre Plus nationwide

2019

The Government plans to start managed migration of people on to Universal Credit

2023

All claimants expected to have been moved on to Universal Credit

The Government has published regulations which set out how people will move on to Universal Credit through managed migration. These confirm that people claiming legacy benefits will need to make a claim for Universal Credit, and that most people will have three months to claim before their existing benefits are stopped.

It is welcome that people who are currently claiming ESA will not have to do another medical assessment when they claim Universal Credit, and that legacy benefits will 'run-on' for two weeks after an application has been made. However, there is still a possibility that people with cancer who can't manage the Universal Credit application process could lose their benefits altogether.

What will managed migration mean for people with cancer?

People who are claiming ESA – many of whom will be receiving treatment or have a terminal diagnosis – have already undergone an application and assessment process. We believe it is unacceptable that these people will be required to make another application for Universal Credit to avoid losing their benefits. This will place unnecessary pressure and stress on people with cancer, who may already be struggling physically and emotionally as a result of their condition.

The Government already holds data on people's entitlement to some legacy benefits, including ESA. This should be used to pre-populate claims for Universal Credit, ensuring that people are not forced to navigate the complex and confusing application process to continue to access support.

If people with cancer are forced to apply for Universal Credit, there is a risk that they could see their existing benefit stopped before they have completed their application, leaving them without any income at a time when they need vital financial support. Currently, around 25% of Universal Credit claims made are not completed due to claimants failing to comply with one of the application requirements.⁵ Of those people who are able to complete a claim, 30% found registering online difficult, and 43% felt they needed more support with their claim.⁶ Claimants with a long-term health condition are even more likely to need support registering a claim.

43% felt they needed more support with their claim.

The Government has proposed some measures to support vulnerable claimants through the migration process, including the possibility of extending the deadline where there is a 'good reason' for this. However, these measures rely on the Government quickly and accurately identifying claimants in need of support, and on the interpretation of 'good reason' always encompassing the range of issues faced by people with cancer. We are concerned that this will not be sufficient to prevent people falling out of the system at the point of migration. Legacy benefits should continue to be paid until a new claim to Universal Credit has been successfully completed and paid.

What needs to happen?

People with cancer should not be put at risk of losing their benefits because failings in the Universal Credit process mean they struggle with or are unable to complete a claim. We do not believe the managed migration regulations provide sufficient safeguards to protect people's entitlement to benefits. They also do not address the broader issues people with cancer are facing with Universal Credit.

Macmillan believes the Government should provide concrete guarantees that people will be protected during managed migration before proceeding. This should include:

- ✓ **A clear commitment to pre-populating claims with data already held by the Department for Work and Pensions (DWP).**
- ✓ **The removal of a 'hard-stop' where legacy entitlement ends to ensure people are not at risk of losing their benefits before they complete a Universal Credit application.**
- ✓ **Guaranteed access to alternative application routes and support for people who struggle to claim, such as those with a terminal illness or undergoing cancer treatment.**
- ✓ **Reinstating implied consent so that advice services can offer people support with their claims as quickly and easily as possible.**
- ✓ **Publication of Universal Credit waiting times data to enable effective monitoring of the impact of managed migration on how long people wait for support.**

The Government must also address the wider issues with Universal Credit, to ensure people with cancer receive the financial support they need as quickly and easily as possible.

¹ [Department for Work and Pensions estimations of managed migration volumes](#), Explanatory Memorandum, June 2018. ² Macmillan Cancer Support, [No Small Change](#), 2017. ³ [Rolling out Universal Credit](#), National Audit Office, June 2018, p. 38. ⁴ [ESA caseload figures correct as of February 2018](#). ⁵ [Parliamentary answer](#), Department for Work and Pensions, July 2018. ⁶ [Universal Credit Full Service Survey](#), IFF Research on behalf of the Department for Work and Pensions, June 2018.