

Macmillan Welfare Reform Bill Briefing

Purpose: **To further brief MPs in advance of the Welfare Reform Bill Commons debate on the Lords amendments on 1 February**

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Summary

This briefing provides a further update on Macmillan's position on the Welfare Reform Bill in advance of the Commons debate on Wednesday 1 February. MPs are being asked to consider the various amendments passed in the House of Lords.

The Government's proposals on Employment and Support Allowance (ESA) would have seen sick and disabled people, including 7,000 cancer patients, lose their benefits after one year irrespective of whether they were fit enough to return to work. This threatened to leave thousands of the most vulnerable people without critical financial support at a time when they need it most.

The Lords scrutinised the Government's proposals carefully and found them to be unfair. Peers decided that cancer patients did not need a time-limit and other disabled people should have two years instead of one before their benefits are cut. **Macmillan strongly believes the Lords amendments on Employment and Support Allowance are votes for compassion, common sense and compromise and we hope all MPs will support them on Wednesday.**

1. Extending the amount of time sick and disabled people receive Employment Support Allowance (ESA) before their benefits are cut

We are asking MPs to support Lords amendments on ESA time-limiting to give sick and disabled people a minimum of two years in which to be ready to return to work before their benefits are cut and to allow vulnerable cancer patients avoid a time-limit altogether.

ESA is a benefit for people who are out of work because of illness or disability. Following an assessment, if eligible for ESA, people are either placed in the Support Group or the Work Related Activity Group (WRAG). Currently, sick and disabled people, who have worked before becoming ill, can continue to receive ESA in the WRAG for as long as they are unable to work due to their condition. However, it needs to be stressed that a person in the WRAG has been rigorously assessed as being unfit to work. It would be wrong to suggest the Support Group is for people who are sick and the WRAG is for people who can work.

Macmillan welcomes recent comments by the Prime Minister during PMQs on 18 January indicating that cancer patients should be placed in the Support Group. However, while cancer patients are typically placed in the Support Group during their treatment phase they can be moved into the WRAG once their treatment ends but before they have recovered from that treatment.

This is important because, before it was amended by Peers, the Bill introduced a limit of 12 months to the amount of time an individual can claim ESA in the WRAG. This time-limit will apply regardless of whether they are fit to go back to work or how

long they have paid into the system before becoming ill. After 12 months people would be subject to a means-test. **The means-test is so severe that a cancer patient would lose all their support if their partner earns as little as £150 per week or £7,500 per year.**

Professor Jane Maher, Macmillan's Chief Medical Officer: *"In my experience one year is simply not long enough for many people to recover from cancer. The serious physical and psychological side effects of cancer can last for many months even years after treatment has finished. It is crucial that patients are not forced to return to work before they are ready."*

Macmillan believes 12 months is simply not enough time for many cancer patients to return to work following their treatment. It is plain wrong to put cancer patients – going through the toughest fight of their lives – under even greater financial and emotional burden simply because they haven't recovered quickly enough. During debates in both Houses, Ministers presented no evidence to demonstrate that this measure reflected the amount of time sick and disabled people need to be able to return to work. In fact, the Government's own evidence shows that **94% of people in the WRAG will need support for longer than 12 months.**

It is unacceptable for the Government to take away vital support from people simply because they have not recovered quickly enough. **Macmillan estimates that 7,000 vulnerable cancer patients will lose up to £94 per week.** Our estimate has been independently checked and double-checked. The time-limit would also apply retrospectively meaning many cancer patients would lose their benefit when the provisions came into force in April.

Stephen Townend started claiming ESA in March 2011. His partner earns roughly £160 per week. Under the Bill he will lose his ESA in April 2012: *"I can't believe the Government is planning to take away all my ESA after just 12 months because my wife works more than 24 hours a week. I had renal cancer and have had a kidney removed. I'm still in a lot of pain, I need a stick to walk and get awful pins and needles down my legs. Without my ESA we would find it really difficult to get by. We have used up virtually all our savings already. I have worked all my life and paid into the system but this doesn't seem to mean anything."*

In December 2011, an informal coalition of 89 Peers, cancer charity chief executives, oncologists, benefits advisers, patients and others wrote to Iain Duncan Smith to say none of the cancer community's concerns with the Welfare Reform Bill raised during Second Reading in March had been addressed.

A YouGov poll this week shows that the Coalition Government's proposals do not even have the backing of its own supporters. **64% of those who voted Conservative and 77% of those who voted Liberal Democrat in the last General Election believe there should not be a limit on the amount of time someone suffering from cancer or the side-effects can receive benefits.**

This is in addition to an overwhelming vote by party members during the Liberal Democrat's Party Conference in September calling for a rethink on the ESA proposals and a more evidence-based approach.

Peers supported two compromise amendments during the Welfare Reform Bill Report Stage in the Lords in January that would see a means-test for ESA claimants after no less than two years and no means-test at all for cancer patients. Macmillan was very pleased that **over half of Lib Dem Peers did not support the Government's position on cancer patients.**

Both amendments would give more sick and disabled people the time they need to get back to work while also helping to meet the Government's hugely important aim of bringing down the national debt. Neither amendment prevents people who have recovered more quickly from returning to work which, of course, they will want to do.

We strongly believe the Lords amendments were votes for compassion, common sense and compromise and we hope MPs will support them in the vote on Wednesday.

2. Improving the access to ESA for cancer patients undergoing treatment

Macmillan would also like to update MPs on our second concern regarding the process cancer patients have to go through in order to get into the Support Group in the first place. This is called the Work Capability Assessment (WCA).

In June 2011 Macmillan made recommendations to Professor Harrington's Independent Review of the WCA that would ensure more cancer patients undergoing particularly debilitating treatments are spared the stress of an assessment for ESA when they have to leave work. Currently, only non-oral chemotherapy patients are exempt from an assessment. However, oral chemotherapy and radiotherapy can be just as debilitating.

We were disappointed with the Government's initial proposals in November 2011 which would mean all cancer patients, no matter how sick, would have to undergo an assessment, including those who are currently exempt. Following further discussions with the DWP over the past fortnight we are now more optimistic that Ministers are listening to our principal concern that cancer patients should not face unnecessary or burdensome assessments to get into the ESA Support Group.

While we will have to await the outcome of the DWP consultation on this issue, we are hopeful that Ministers will agree that patients undergoing oral or intravenous chemotherapy and the most serious forms of radiotherapy, would simply need to provide confirmation from a health professional of their forthcoming treatment and that it was likely to impact on their ability to work. This could be done by the health professional filling out a tick box form. Once this confirmation was received, the cancer patient would be placed into the Support Group. Where the cancer patient's health professional was not able to provide confirmation the patient would be expected to go through the usual WCA process.

It is vitally important that MPs recognise that while there is the possibility of agreement between the Government and the cancer community around the process by which more cancer patients get into the ESA Support Group, the cancer community is still completely opposed to proposals to cut the benefits of cancer patients and other disabled people after 12 months.

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