

in that situation;
 how long could you stand for – if the work required this?
 how much can you lift or carry, if work required this?
 how long could you sit for – if the work required this, and in what sort of chair?
 can you normally answer the telephone? how long can you speak on the telephone? can you make further calls if you have a long enough rest? how long would the rest need to be?
 can you use a computer? how long for? can you use the computer further if you have a long enough rest? how long would the rest be?
 do you have problems being around others because of lowered immunity, so you pick up infections very easily?
 do you need to avoid stressful situations, because they lead to a worsening of symptoms?

It is important to explain to the examining health professional, or any DWP personal advisors, about the variability and degree of unpredictability of your symptoms. You should be able to talk about how you usually are, your “baseline” of functional capability, but this is not a guarantee of constant performance!

It might be useful to list your usual symptoms, to help explain the difficulty you face with work activities.

The common symptoms affecting physical and mental health include but are not limited to:

un-refreshing rest, un-refreshing sleep and often insomnia, physical and mental fatigue, joint or muscle pain, cognitive impairment (memory, language, concentration all affected), malaise following exertion (often like having the flu), sensitivity to light and sound, recurrent sore throats, problems of balance, headaches, digestive disturbance, low grade fevers and generally lowered immunity to virus, digestive disturbance, and more.

All people of working age with ME/CFS want to get back to work, and other responsibilities, but be careful not to under-report the difficulties you have—it could lead you to a relapse due to over-commitment.

Checklists, and booklets from: Morecambe Bay ME Group - 01524 65842
or: http://www.bayme.org/rights_for_me_docs.htm

General guide to Employment and Support Allowance.

Rights for ME, Morecambe Bay ME Group and Lancaster CAB

This guide explains the procedures for claiming Employment and Support Allowance (ESA), lists the functional criteria used to assess the first stage of eligibility, and lists the questions to be asked about attitude to work. It also provides guidance about the information that ME claimants should produce to increase the effectiveness of their benefit claims.

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 page 4-5: flow chart of ESA claiming procedure
 page 6: collecting relevant information
 page 7-8: questions to be raised at ‘approach to work’ examination

The Employment and Support Allowance (ESA) is a new benefit to replace Incapacity Benefit and Income Support (paid on the basis of illness). The ESA was introduced at the end of October 2008. The government proposes that all people claiming Incapacity Benefit and Income Support on the basis of illness will be transferred to ESA by 2013. It is not clear how soon this will happen. Claimants receiving these previous incapacity benefits are likely to continue to receive them, but will be required to undertake some parts of the new ESA benefit process before that date.

There are 2 categories of ESA benefit for successful applicants—those placed in Support Group, and those in Work-Related Activity Group. The Support Group will include claimants who are too ill to go through the activities concerning work.

The Work Related Activity Group will have to attend several interviews at the Job Centre, and go through a medical assessment about their ‘approach to work’. See page 7-8 for the questions.

NB: the DWP suggest that the medical examinations will take up to 90 minutes. If you know that you could not manage an appointment of this length, including travel time and effort to get to and from the examination centre, make this clear at the beginning of the benefit claim.

Employment and Support Allowance (ESA) criteria

ESA is the new incapacity benefit for people who are not well enough to work. The claimant has to go through the process of a Work Capability Assessment. The first stage of an application will include an eligibility assessment based on the functional criteria below. This assessment is to establish the degree of difficulty with one or more of these functions.

PHYSICAL FUNCTION

1. Walking on level ground with a walking stick or other aid if such aid is normally used, and going up / down 2 steps
2. Standing and sitting and rising from a chair
3. Bending and kneeling
4. Reaching with arms
5. Lifting and moving
6. Manual dexterity
7. Speech
8. Hearing with a hearing aid or other aid if normally worn
9. Vision in normal daylight or bright electric light with glasses or other aid to vision is such aid is normally worn
10. Bowel or bladder incontinence
11. Episodes of lost or altered consciousness

MENTAL, COGNITIVE AND INTELLECTUAL FUNCTION

12. Learning tasks
13. Awareness of hazard
14. Problems with memory and concentration
15. Completing tasks
16. Starting and sustaining personal action
17. Coping with changes in routine
18. Ability to travel to familiar places alone
19. Fear or anxiety in new places / social contact
20. Strong reactions to others
21. Unaware of effect of behaviour on others

Work Focused Health Related Assessment ('approach to work')
Questions to be asked by health professional at medical examination.

How do you see your future, from a health and work point of view?

What activities do you currently enjoy, thinking particularly about what may help your health and work prospects?

What activities would you like to do in the future, thinking particularly about what may help your health and work prospects?

What do you feel would help you to achieve your future plans in relation to work?

What impact do you feel your health has on your daily life?

Do you receive any help or support from other people with regard to your daily life?

What sort of caring responsibilities do you have, e.g. children or older relatives?

What impact do you feel your overall treatment has on your daily life?

What impact do you feel your medication has on your daily life?

Are you trying other ways to help yourself get better or move towards work?

Can you tell me about any other help that you have had in the past or are currently awaiting that would help you get back to work?

Include investigations undertaken and pending, appointments awaited, any management plan from GP or specialist, support and aids.

Do you feel that you have the right support that you need to help you find work? For example, equipment or transport.

Is there anything that you think would help you to move towards work, or work related activity?

Is there anything that you think would help you to return to your most recent employment?

To prepare for this part of the medical examination you could think about the following matters (your response to these should reflect what you can do over several weeks, not as one-off activities):

what can you manage in terms of travelling to and from possible places of work – such as the town centre?

how long could you manage to spend travel to and from a place?

how many times a week could you make this journey?

how long could you stay at place of work? Take into consideration likely noise and light levels, and the stimulation of other people and machines

Continued from page 3 [You could not] go through this the following days, because the effort involved in cooking meant that you did not have a shower, and stayed in your dressing gown all day.

It is important to establish this information. The ESA50 application form asks for information about variability in effects of symptoms, when describing difficulties with some or most of the functional activities.

Tactics for establishing level of functional difficulties (because this can be difficult for people with ME/CFS):

- produce a simple diary to record the range of difficulty with the relevant activities, and establish how you usually are
- imagine you live alone and then imagine what you would manage in terms of care and mobility each day / each week
- consider what have you actually managed to do in the last week / 2 weeks relative to these activities
- listen to the observation of somebody who knows you well, about what you can and cannot do, and how you do things
- compile a list of symptoms

After the above actions, you should:

Complete the benefit application form, based on the information collected about how you usually are.

Complete an ESA checklist and hand a copy to relevant health professionals. The checklist can be obtained from Morecambe Bay ME Group—see p8 for contact details.

Make sure your GP is aware of your day to day difficulties.*

Collect a statement from somebody who knows you well.

* It is very important to make sure that your GP is aware of the need to make a new (or renewal) benefit claim. It is best to have an appointment and take along a completed checklist. Go through the checklist with your GP, and make sure a copy is put on your files. It can be useful to take a family member or a friend into the appointment with you, for moral support and to help you in case you forget things.

Guidance for assessment of function

The benefit assessment is based on **the effect of physical health, mental health or a combination** of these on specific functions. If carrying out particular functions takes a **long time**, and/or it will result in **severe discomfort or fatigue**, or you **cannot do it at all because of discomfort or fatigue**, or you have difficulty in **motivating yourself to start or complete the activity**, then these factors should be part of your reflected in the record of what you can and cannot do, and how you are. **Claimants with ME/CFS, should not consider any of these specified activities (functions) in isolation.** In short you need to establish a baseline of weekly capacity for doing things.

Advice to claimants making benefit applications

It is important to establish how you are *most of the time* in terms of the functional criteria for the incapacity or disability benefits. This can be difficult for people with ME/CFS. When applying for benefits, you need to describe your day-to-day life, based on what you actually do and how you manage.

To repeat: for claimants with ME/CFS, these activities (functions) should not be considered in isolation. Think about which activities you can manage over the course of a week.

This process is crucial to a successful benefit application. The claim will be decided on the basis of how you are most of the time, not just on your worse days if they occur once or twice a week on average.

It is important to work out how you are on bad days, and how you are on better days. You then need to work out how frequently good and bad days occur in a typical week. For example you may be able to record that you can walk outside for about 100 metres twice a week, but cannot leave the house for the rest of the time, as you will be resting, and possibly recovering from flu-like malaise, from aching and more than usually painful joints. Or it may be that you have tried to cook a meal, taking several rests between stages of preparing ingredients, getting pans and pots ready, and more. It took a lot of time because you needed to have physical and mental rest. You could not

Continued on page 6

The process and stages of claiming ESA.

1

After registering for this benefit (and providing sick note, if you have had to stop work), claimants will have to complete the application form, called the ESA1. Ask for paper claim if long telephone calls are difficult. If the sick note indicates very serious illness, then claimant should be placed in "support group".

2

Work Capability Assessment (WCA): DWP will assess eligibility on basis of claim form* and/or require claimants to undergo a medical examination, undertaken by health professional (doctor, nurse, physiotherapist...). The first test is to establish whether claimant has:

week 1 to week 13



Assessment Phase

Benefit paid at "assessment rate"

limited capability for work

3

No - apply for Job Seekers Allowance. Income Support will no longer be paid because of being "incapable of work".

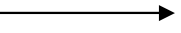
Yes— then either placed in **support group** or in the **limited capability for work related activity group**

WORK RELATED ACTIVITY GROUP
claimant will be required to attend the first **work-focused interview**, with a **Personal Advisor**, around 8th week of claim.
Work focused health-related assessment — made at the same time as medical examination from which a **capability report** will be produced — this to set out activities to help claimant move closer to employment, and what work activity they could manage.

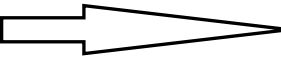
SUPPORT GROUP
assessment has shown that the claimant is too ill to work, and too ill to undertake "work-related activity".
* The government has stated that it intends, "as far as possible" to ensure that assessment for those in Support Group will be paper based, therefore not requiring claimants to undergo a medical. Sufficient information on a GP sick note can place claimant in Support Group.

5 further **work-focused interviews** after initial 13 week assessment stage

All interviews are compulsory—however the Personal Advisor has some discretion to defer, and re-arrange interviews.



week 14 on



Benefit paid at different rates