

Martin Harvey

From: Neil Bateman [neil@GRO-C]
Sent: 07 August 2008 17:46
To: Martin Harvey; Mark Winter
Cc: GRO-A
Subject: Re: DWP-PDF

Martin

A few thoughts:

On a political level I think it's very important for organisations to be lobbying now to point out the various shortcomings about ESA. DWP/Gov't is locked into a fixed view that loads of people on IB could work if only their over-sympathetic GPs would stop signing them off. Of course they also ignore the reality of the labour market - 2/3 of those on IB lack basic skills and IB recipients are concentrated in areas with the least employment prospects. This gov't mindset makes it difficult to achieve any change.

There are numerous other problems withy ESA, not the least of which are the lower rates payable to most recipients and the consequent implications for their health and well-being and the obsession (despite the DWP's own research evidence) that receipt of benefits must be underpinned by sanctions for non-compliance.

Many of us are also very concerned at the dreadful level of service already provided by DWP to customers and how their staff already often display a remarkable lack of understanding and even sympathy towards people with long term health problems. I am not at all confident at DWP's ability to manage the new system in a realistic and empathetic way.

I think there is a historical political dimension for government - the problems associated with contaminated blood products resulted in a commitment by successive governments to compensate those affected by various means, including passporting those with AIDS related conditions through the current IB assessment. This government has broken that consensus and many people will view that as a breach of trust. I don't think current DWP ministers have been adequately briefed about the history of the MFT and the scale of the damage caused ultimately by government funded use of contaminated blood. The government is very quick to respond when it is perceived as being harsh on the poor and vulnerable, and may respond to some high profile lobbying and publicity on this.

I also think that registrants would welcome lobbying by MFT on this - the ones I have dealt with have all have bad experiences with DWP and I think it is important for MFT to be seen to be protecting their interests.

So in a nutshell, I don't think there will be any change from lobbying for social treatment for registrants within the policy terms of ESA and the statistically biased view that work is the best cure for illness. But one might be able to embarrass the government into some minor changes. It will also improve the MFT's good standing with registrants.

A practical approach could be to press for sight of draft guidance on how registrants (and others with HIV/AIDS) will be assessed by DWP's contractors, decision makers and doctors and for an assurance that representations will be taken into account. Also watch out that they then don't use the consultation exercise to a) ignore what you say and b) claim that MFT approved the draft guidance - we have already had several such examples of this with ESA.

----- Original Message -----

From: Martin Harvey
To: Neil Bateman ; Mark Winter
Cc: GRO-A
Sent: Thursday, August 07, 2008 3:00 PM
Subject: FW: DWP-PDF

08/08/2008

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Both

Please see the attached from the DWP in respect of my ongoing representations about the ESA.

I should like to take up the opportunity of meeting with officials to further our case; can you please let me have your respective views.

Neil, Mark Winter is a Consultant Haematologist and the Trust's Medical Trustee.

Mark, Neil is our specialist benefits advisor.

I have copied this to GRO-A at the THT for information and input.

Martin

Martin Harvey
Chief Executive
Direct Dial: GRO-C
e-mail: martion@GRO-C

From: Shane Baker
Sent: 07 August 2008 15:52
To: Martin Harvey
Subject: DWP-PDF

As requested.



Shane Baker
Office Administrator
Direct Line: GRO-C
Email: shane@GRO-C



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08/08/2008

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