



**South
Worcestershire**

Disability Benefits Final Project Report

October 2025





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Background

There are now 4.2 million working-age individuals in the United Kingdom (10.2% of the working-age population) receiving at least one health-related benefit. This has grown from 3.2 million in 2019 (7.9%). The rise is driven by rapid increases in the number of people starting a new benefit claim. Prior to the pandemic, both incapacity and disability benefits saw about 20,000 new claims each month. By November 2022, there were 51,000 new claims for incapacity benefits and 43,000 new claims for disability benefits each month.

Similarly, the number of children receiving a disability benefit (DLA) has doubled between 2014 and 2024, the vast majority of these being children with a learning difficulty, behavioural disorder or attention deficit hyperactivity disorder (ADHD): in 2023, four-fifths of all Child DLA awards were for children whose main condition was one of these three (reference 1).

The rise in the number of claims has been attributed to two main factors:

- There are more claims relating to mental health, neurodiversity or behavioural difficulties for children and adults. 13-15% of the working population reported long term mental health issues in recent data up from 8-10% in the mid 2010s (reference 2).
- The rise in claims is also due to the increasing pressure upon budgets. Disabled people have struggled in particular during the cost-of-living crisis. 12% of disabled people reported that they were not able to pay their bills in 2023-24, compared with 5% of non-disabled people. The proportion of disabled people who could not reliably afford adequate healthy food rose from 11% in 2021-22 to 16% in 2023-24. For non-disabled people, these figures rose from 3% to 6% (reference 3).

The 2023/24 Family Resources Survey found that one in four people reported as being disabled (reference 4). In Wychavon, the 2021 census reported 16% of the population as being disabled, of whom 6.1% were limited a lot by their disability (reference 5). Of our clients, however, 59% in quarter 2 of 2025/2026 have disability or health issues and this is increasing each quarter. Helping people to claim incapacity and disability benefits forms a significant part of our work.



Pilot Study

A pilot study in the Summer of 2024 looked at clients who had contacted Wychavon Citizens Advice at some point in the application process for disability benefits or for another matter. This revealed a number of worrying factors:

- Clients came to Citizens Advice at various stages of the application process.
- Those who had not received help from Citizens Advice were generally unsuccessful in their application but most did not pursue this through the Mandatory Reconsideration and Appeal process
- At least two clients who had gone to Mandatory Reconsideration were waiting to hear up to 5 months after their submission.
- Very few clients who had been helped by Citizens Advice with the initial application returned to tell us of the outcome. This included applicants who had been unsuccessful and had elected not to request mandatory reconsideration.

Following this pilot project, it was decided that advisers in Wychavon would be proactive in following through with clients once they had made an application, or helped with Mandatory Reconsideration or Appeal, to check on the outcome and offer further support. This would apply to all types of benefits concerning health and disability - Disability Living Allowance (for children), Personal Independence Payment (for working age adults) and Attendance Allowance (for pension age adults) as well as UC 50 assessments (to gauge whether people were too ill or disabled to undertake work).





Aims of the project

The aims of the project were:

1. To provide an effective service to clients needing support in applying benefits
2. To identify internally what makes a successful application and insights on type of disability or health conditions
3. To provide evidence if there are flaws in the benefit applications system
4. To provide evidence for further resources for dedicated teams on this topic.



Methods

Data was collected from clients for whom advisers had either completed a disability benefits form, or completed a Mandatory Reconsideration or Appeal. The data was from cases in Wychavon Citizens Advice which were still unresolved in September 2024 (some of these claims had been started in 2023) to August 2025. Advisers who were helping the clients were asked to telephone them some weeks after the form had been completed and to continue to telephone until the claim had been awarded or a decision not to award had been made. If the client went onto Mandatory Reconsideration or Appeal this process continued. Advisers then recorded the outcomes and in some cases wrote evidence forms highlighting cases which demonstrated particular issues.





Findings

Disability Living Allowance (DLA)

DLA is a benefit for children under 16 who need extra help with their personal care, supervision or watching over because of a disability and /or for children with walking difficulties. During the project we helped 5 clients with DLA forms - all the children were neurodiverse. All the applications were successful and generally dealt with in about two months by the Department of Work and Pensions (DWP). A key barrier identified by applicants was the difficulty in securing a formal assessment and diagnosis for their children prior to submitting a DLA application. This process frequently takes over two years to complete

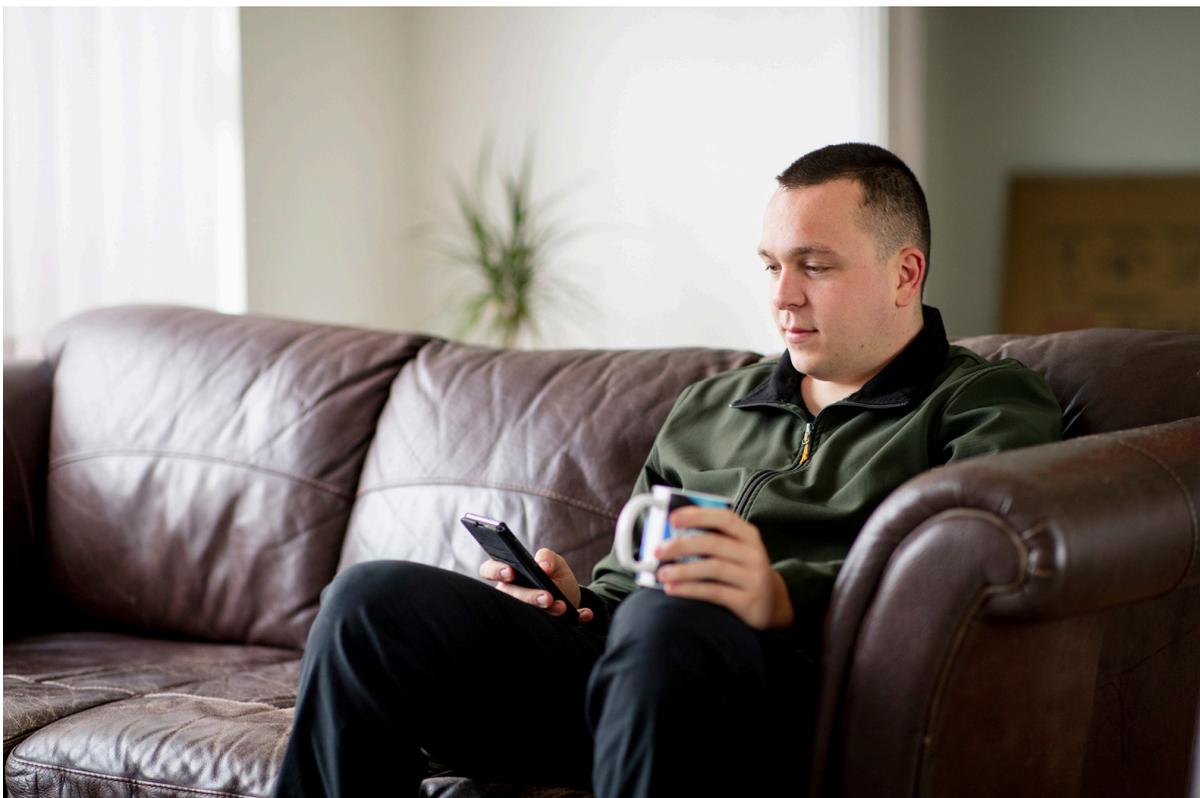
A successful application can significantly improve the family's overall income, particularly if they receive Universal Credit as in addition to the income from DLA, they will receive £158.76 a month if the child gets the lower or mid rate of the care element and £495.87 a month if the child gets the highest rate. If one parent is the child's carer, they may also receive £201.68 a month from the Carer element. Furthermore, if they were previously subject to the Benefit Cap, this would no longer apply.



Personal Independent Payment (PIP)

PIP is a benefit for the working age population which is non-taxable and which is an assessment of the help the applicant needs for their daily life and/or for mobility. Overall there are 12 main criteria of which 10 are for daily life and 2 for mobility. For each criterion points between 0 and 12 are awarded. In order to get the standard level in either the daily life or the mobility category, the applicant must score 8 points. To receive the enhanced level, they must score more than 12.

Similar to DLA, the receipt of the daily living component of PIP can entitle a claimant's carer to additional support. If the carer is receiving Universal Credit, this can give them an additional £201.68 (carer element) . If they claim Carers Allowance, they may be eligible for £83.30 a week - but this is deducted from their Universal Credit if they are also claiming that.



PIP is often not awarded at the first attempt and many clients come to Citizens Advice to ask for help with the Mandatory Reconsideration (when a decision maker in DWP looks again at the case) or with an Appeal (which goes to an independent Tribunal). The process can take a long time - we found that typically it was 3 months between sending the form and receiving a decision, around 3 months before the client received a decision on Mandatory Reconsideration and anything between 6 months and a year to go to appeal. In looking at the official statistics, the attrition rate for people not following through on the whole process is extremely high - of the 3.3 million applications between October 2019 and September 2024, 1.8 million were awarded PIP at the first stage; 680,000 went on to Mandatory Reconsideration of which 530,000 had no change in the decision; of these only 130,000 went on to an appeal tribunal where 90,000 had the decision changed (reference 6).

We helped 51 clients with their PIP applications and 22 clients with PIP reassessments (i.e. they had been receiving PIP and were being reassessed after a number of years). In most cases, if the client received help from Citizens Advice, they were eventually successful. In some cases the results were spectacular - one client who received 4 points daily living activities and 0 points for mobility received 9 and 10 respectively at appeal (an increase from £0 to £103.10 a week); another client who received 0 points for daily living activities and 8 points for mobility received more than 12 points for each at appeal (an increase from £29.20 a week to £187.45). When an appeal is won, the benefit is backdated to the date when the application was made - this can result in backdated awards of many thousands of pounds.



Attendance Allowance (AA)

AA is a tax free benefit awarded to people over pension age who need help with their personal care or supervision to remain safe. It has two levels of payment per week - £73.90 when day or night care is needed and £110.40 if day and night care is needed. As with DLA and PIP, the carer may also be able to claim additional support, but any pensioner receiving more than £83.30 a week in their state pension is unlikely to qualify due to 'overlapping benefit rules'.

We completed forms for 17 clients but in 5 of those cases, the client decided not to send the form. It is often difficult for elderly people to accept that they need additional help or money to pay for that help and in a number of cases, they are confused by the title of the benefit, thinking it is for the 'attendant' (i.e. the carer). Of the 12 forms which were sent to DWP, only one was unsuccessful. The process usually takes about 2 months and does not entail an assessment (unlike PIP and UC50 claims).



Limited Capability for Work (LCWRA)

This is an element of UC for working age people (or for a pension age claimant who is part of a mixed age joint UC claim) who are assessed as being unable to work due to their health/disability or whose health condition/disability severely affects their ability to work. Unlike the other benefits discussed above, UC is means tested. If an applicant is deemed as not having the capacity to work on a long term basis they can receive an additional £423.27 per month in Universal Credit, although for new claimants from April 2026, this amount will be reduced to £217.26 if they are not either terminally ill or a severe conditions claimant. The criteria includes many aspects which would make work difficult if not impossible such as the range of physical movement (standing, sitting, reaching, picking things up and manual dexterity), incontinence, problems with communication, problems with getting around safely, staying conscious when awake, learning and awareness of hazards, problems with starting and finishing tasks and coping with changes. We helped six people with application forms for LCWRA but were able to recontact only two of the clients, both of whom had been successful in their claim.





Conclusions

Issues with benefit claims

The report commissioned by Citizens Advice in 2024 found 10 key insights from helping people access disability benefits:

1. Disability benefits are crucial in protecting people from falling into debt or further debt
2. Accessing support is vital for people with both mental and physical health conditions
3. The claims process is lengthy and can involve an endless cycle of reassessment
4. Disabled people have to navigate a complex system
5. Poor decision-making adds to the fight for support
6. The system is built around rigid processes rather than a whole-person approach
7. For people who have no ability to work or limited capacity to work, their experience is often poor
8. The reasons people find it difficult to start work are varied and complex
9. People who can and want to work aren't getting the support they need
10. Navigating the system leaves applicants feeling defeated

We found similar issues which can be illustrated by these case studies:



Case Study 1

Client aged 33 male. Client applied for PIP - he was diagnosed recently with ADHD and he has mixed anxiety depression disorder. As a child he moved around because his family were from the traveller community and he was only diagnosed as dyslexic at college. He said that he experiences feelings of anxiety, is insular, has panic attacks and finds it difficult to verbalise his thoughts. He did not include any medical evidence when filling in the form himself. He was more upset that he scored 0 points on every section rather than not getting the award. He said that he finds appointments difficult and becomes anxious before and during them.



Case Study 2

Client aged 72, female. She came to Citizens Advice to have an AA form completed in February 2025. This was done online and a printed copy was sent to her to be signed and sent to DWP. This case was followed up in April and June when she said she had not heard anything from DWP. In July we phoned her again and she said that DWP had told her that as she does not receive PIP she cannot get AA - we asked her to bring in the letter she said she had been promised. In August we followed up again and she told us that DWP had told her she could not get AA as her son is working. Neither of the reasons she had given made any sense, so we concluded that the client was confused about this benefit and that the original form had either not been posted, or had gone missing. We sent another form and asked her to make sure she signed it before sending it to DWP. She came to the office two weeks later and an appointment was made. When she came to the appointment in September she brought the second copy of the completed form - we helped her to sign it and on a follow up call she said she had sent the form to DWP.





Case Study 3

A male client in their late forties with complex mental and physical health needs, including a past severe head injury, personality disorder, and substance dependence, had previously received the enhanced rate of the Personal Independence Payment (PIP) daily living component. They also experience mobility-related difficulties, including vision loss in one eye and nerve damage.

Believing their condition had deteriorated, the client requested a review of their PIP award with support from a housing worker. After reassessment, their score reduced significantly and their PIP entitlement was withdrawn.

Support was provided to challenge the decision through mandatory reconsideration, with additional medical evidence submitted. The original decision was upheld. An appeal was then lodged online, and following a tribunal hearing the client was awarded the enhanced rate of both the daily living and mobility components. This resulted in a substantial backdated payment, and weekly payments resumed at the enhanced rate.

Within several months of receiving the backdated lump sum, the client reported that they had spent the funds on alcohol and drugs, accrued debts and a fine, and felt their situation had deteriorated.



Case Study 4

Client aged 59, female. She had a head injury in 2009 and has diagnosed complex Post Traumatic Stress Disorder as the result of this accident. She has poor memory and depression. She is receiving UC with LCWRA, PIP standard level mobility and standard level daily living activity.

The PIP form was completed July 2022 and a review was due in 2024.

- August 2024 - notified the review had been received
- November 2024 notified that it was progressing but she may need an assessment
- February 2025 told the review not yet complete but that the award was extended to March 2026
- May 2025 - notified it was progressing
- July 2025 telephone assessment arranged but then cancelled

She has had problems with budgeting and did not realise until we told her that PIP was paid 4-weekly. She said she has just started looking at her finances and thought that DWP were arbitrarily changing the dates. This, and her inability to manage money, has put her in arrears with her mortgage and other direct debits. She has turned to Citizens Advice for debt advice but never followed through with this process. She did not attend the review meeting which may result in her PIP being stopped in March 2026. Her house has now been repossessed by the Building Society and she is proposing to live in a van when she is evicted.



Issues raised by the project

The cases we have followed have raised a number of issues, firstly with the benefits themselves, and secondly with the process we may follow in future.

1. The claims process is complex and many clients find it difficult to navigate. Completing the forms requires a level of knowledge and ability which some clients do not possess. If this is done poorly it can result in a loss of benefit and a long process to have the benefit reinstated.
2. The claims process is lengthy and can lead to additional stress for clients, exacerbating their mental health problems as well as depriving them of the resources they need for day to day living. In some cases this puts additional strain on the voluntary sector and services such as food banks.
3. Backdated payments can lead to further problems. If working age clients have more than £6000 in savings this can affect other means tested benefits although the back payment is disregarded for the first year. Clients with addictions (be it alcohol, drugs, gambling or other addictions) can fall into additional dependency.
4. The Mandatory Reconsideration process rarely leads to a change in the decision. On occasions, DWP looks again at the decision just prior to an appeal going to Tribunal and makes an offer at this stage. This raises the question as to whether they could have looked more carefully at a much earlier stage. It is widely thought that this process was introduced to delay the process of appeal and indeed to discourage applicants from going to appeal (reference 7).
5. Clients can become demoralised and despairing when applying for benefits. Some clients feel they are not being heard while others feel it is not right to expect the state to support them. This appears to be particularly the case with elderly clients who are applying for AA.
6. Clients can find it difficult to get evidence to support their claim. GP surgeries have different approaches to providing evidence - some do this free of charge, others insist on payments of more than £40. Some GPs incorrectly tell their patients that DWP will contact their surgeries directly, so they do not need a letter.



Recommendations for Local Citizens Advice Offices

1. A checklist should be provided to all advisers who complete forms for disabilities.
2. Clients should be given an information sheet relevant to the benefit on what to expect next. This should have the phone number and email address for them to inform Citizens Advice when they receive a response from DWP
3. Advisers to follow up with clients if they do not hear back - on current evidence this is 2 months after the form filling appointment for DLA and AA and 4 months after PIP or UC50 forms.
4. Advisers should record outcomes including the financial gain.
5. A standard letter for GP surgeries should be produced for clients to present if they are having difficulties with getting medical evidence.
6. Wychavon Citizens Advice to compile a list of useful resources for advisers





Reflections

Considerations regarding the process

In August 2025 a meeting was held with some of the advisers who regularly complete forms for disability benefits. The meeting was to get feedback on the advisers' experience of following through on cases and to make recommendations for our internal processes in the future. It was agreed that the project had been beneficial for Wychavon Citizens Advice and for clients in the following respects:

1. Advisers found that the follow up could be frustrating especially when clients could not be reached but agreed that it was a valuable process nevertheless.
2. Many clients had been supported through Mandatory Reconsideration and Appeal who may well not have persevered without being re-contacted. In the case of Client 4, she would never have found out that her form had not been received had we not asked her for the outcome.
3. We were also able to follow up on issues not directly related to the application such as debt and housing.
4. Wychavon CA recorded more financial outcomes by implementing this project and the follow up process - this helps to show the value of our work which is the basis for future funding.
5. The project showed a number of inconsistencies with the approach taken by advisers. Some advisers make a thorough check of the surrounding circumstances of the client, some upload all the relevant documents while others simply complete the form. It was felt that a checklist for advisers would help to make the process more consistent.

It is acknowledged that this is a small study, over a defined time period, with a limited number of cases isolated to one small area of the West Midlands. The process followed in this project is replicable in other areas, but this may be restricted due to resources and knowledge within other Citizens Advice teams. Non the less, for Wychavon it has been a meaningful exercise with a number of key take home messages and actions which better prepare teams when undertaking tasks and work involving disability benefits, helps shape and inform future services, highlights areas for growth and ultimately improves our clients experience when they turn to us for support.



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