Motor neurone disease (MND) is a fatal, rapidly progressing disease that results in degeneration of the motor neurones, or nerves, in the brain and spinal cord. Over time, this leads to weakness and wasting of muscles causing increasing loss of mobility in the limbs, and difficulties with speech, swallowing and breathing.

People with MND may apply for disability or other benefits. Some applications specifically require medical evidence from a health and social care professional whilst other applications are strengthened if that evidence is provided.

This information sheet provides guidance to GPs, neurologists and the wider health and social care team, who may be asked to provide medical evidence to support a claim. It also explains how, when a diagnosis of MND has been confirmed, the ‘Special Rules for terminal illness’ can be used to fast-track claims, for the following benefits:

- Attendance Allowance
- Personal Independence Payment (PIP – the benefit that has replaced Disability Living Allowance for new and existing claimants born after 8 April 1948)
- Disability Living Allowance (DLA – only available via reassessment for claimants aged 65 or over on 8 April 2013, or aged 0-15)
- Employment and Support Allowance (ESA)
- Universal Credit (if claimed on basis of having only a limited capacity for work).

Information to share

Information sheet 10A - Benefits and entitlements
Download at www.mndassociation.org/publications or contact MND Connect. Call 0808 802 6262 or email mndconnect@mndassociation.org

MND Association Benefits Advice Service

This service provides advice for people living with MND by phone and email in England, Wales and Northern Ireland.

England and Wales: Call 0808 801 0620 or email mnd@cacv.org.uk
Northern Ireland: Call 0808 802 0020 or email welfarechanges@adviceni.net

The disability/employment benefits system is complex. Whatever the award being applied for, you can help to reduce stress for people with MND when called upon to provide medical evidence to support a benefit application.
The importance of medical evidence

Detailed and accurate medical evidence can make a big difference to a claim. It can:

• speed up the process of the claim, helping to ensure it is dealt with quickly and with a greater chance of success
• increase the rate at which certain benefits can be paid
• reduce the potential stress of claiming benefits for the person with MND
• potentially avoid the person having to attend a face-to-face medical assessment, which may be conducted by an assessor with no specialist knowledge of MND.

How health and social care professionals can help

1 Provide detailed, up-to-date evidence
Benefit claims made by people with MND are often refused or awarded a lower rate than would normally be expected because insufficient or conflicting medical evidence has been provided. It is critical that the medical evidence adequately reflects the person’s current situation and is descriptive and explicit about the impact MND has on:

• daily living and other care needs
• mobility
• ability to work or seek employment, confirming the progressive nature of their symptoms.

It should take account of the unpredictable progression of MND, fatigue, time taken to complete an action and the after effects of carrying out the task.

Medical evidence must focus on how MND affects that individual, and not simply be a general description of what MND symptoms include.

2 Consider your wording
The wording used on a claim form is crucial to whether a benefit is awarded. The following examples illustrate the degree of detail we recommend:

Example with not enough detail: Mr X has lower limb weakness and needs help with walking.
Replace with: Mr X has lower limb weakness and can only walk 20 yards, with assistance. His ability to walk is further limited by extreme fatigue and he needs to stop and rest for ten minutes afterwards, as he finds it very painful and tiring.

Example with not enough detail: Mrs Y has upper limb weakness and needs help with dressing.
Replace with: Mrs Y is unable to dress without assistance. Even with help it takes an hour to dress. Mrs Y needs to stop for rests continually, as it is very tiring for her and causes significant pain in her arms and shoulders.

3 Provide the best contact details
With an application for Personal Independence Payment, Attendance Allowance or for a reassessment of Disability Living Allowance, the person with MND will be asked for the contact details of a person who can provide additional evidence.

We would advise you to encourage the person with MND to provide the name of the care centre coordinator at their MND care centre, if relevant, or the name of their specialist nurse or consultant at their neurological clinic.

4 Use the Special Rules for terminal illness and DS1500 certificate
If someone is applying for Attendance Allowance, Personal Independence Payment, Employment and Support Allowance, Universal Credit or a reassessment of Disability Living Allowance, the claim will be fast-tracked and considered for benefits under the ‘Special Rules for terminal illness’ provisions if a DS1500 is signed.
This means the claim will be processed in days rather than months and the lengthy claim forms for PIP/AA/ESA does not need to be completed.

Additionally, the claimant will not have to attend a face-to-face medical assessment, as entitlement to the highest rates of these benefits is automatic with a DS1500. A claim made under the normal rules can be switched to a Special Rules claim at any time during the claim process. GPs, neurologists and specialist nurses can help by completing form DS1500 to show the person with MND is eligible for these rules.

The person with MND may have their application fast-tracked under the Special Rules during the initial phone call they make to enquire about Personal Independence Payment. They should tell the call handler at this stage that they want this to be considered as a Special Rules case. They will be asked whether they already have or are going to get a DS1500 form, and will be asked to send it in. The claim will then be completed.

For PIP, the DS1500 gives automatic access to the higher of the two rates of ‘daily living’ element, whilst the DWP will ask them over the phone about their mobility difficulties.

**How MND qualifies for the Special Rules**

You should complete the form promptly if:

- your patient has a progressive disease **and**
- as a consequence of that disease, you would not be surprised if your patient were to die within six months.

The special rules criteria do not just apply to patients with cancer. MND is a terminal, rapidly progressive disease. As a result, people with MND will pass the diagnosis element of Special Rules on the DS1500 form, as it is a terminal condition. However, the prognosis element can be problematic.

It is important to remember that MND is unpredictable. The DS1500 certificate only asks that it would not be surprising if the person’s prognosis could be six months or less. It does not mean that someone is going to die within six months; only that it is a possibility.

A claimant who successfully applies through Special Rules can usually continue to claim for up to three years before reassessment.

A third of people with MND die within a year of diagnosis and more than half die within two years. The MND Association strongly recommends that a Special Rules application using form DS1500 should be actively considered for all people diagnosed with MND. There may be an exception where MND presents with noticeably slow progression or limited symptoms.

As the six month prognosis is a guideline only, there is no sanction on any health or social care professional who has declared someone terminally ill, should that person live beyond the six month period. Delays mean that someone may be living without any kind of financial support for many months.

**Reference**

1 SEALS Registry (for background information on SEALS see Neuroepidemiology (2007) 29:44-8).

**Acknowledgements**

Thank you to the following people for their valuable contributions to this information sheet:

Sarah Hale, Advice Services Manager, Community Law Service, Northampton and County
Jackie Hankins, Welfare Rights Manager, Neath Port Talbot County Borough Council
Gary Vaux, Head of Money Advice Unit, Adult Care Services, Hertfordshire County Council
How we can support you and your team

MND Connect
Our helpline offers help, information and support, and signposting to people living with MND, carers, family and health and social care professionals.
Email: mndconnect@mnassoc.org
Phone: 0808 802 6262

Information resources
We produce high quality information resources people living with MND, carers, family members and health and social care professionals.
www.mndassociation.org/publications

MND Association website
We have a wide range of information to support health and social care professionals working with people affected by MND.
www.mndassociation.org/professionals

Education
Our education programme is designed to improve standards of care and quality of life for people living with and affected by MND. Opportunities include online modules and face-to-face training.
www.mndassociation.org/education

Support grants and equipment loan
Where statutory provision is not available, we may be able to offer a support grant or loan equipment.
www.mndassociation.org/getting-support

Research into MND
We fund and promote research that leads to new understanding and treatment and brings us closer to a cure.
www.mndassociation.org/research

MND register
The MND Register of England, Wales and Northern Ireland aims to collect information about every person living with MND to help plan the care and discover more about the cause of the disease.
www.mndregister.ac.uk

Regional staff
We have a network of regional staff with specialist knowledge of MND. They work closely with local statutory services and community care providers. Contact MND Connect for further information.
Email: mndconnect@mnassoc.org
Phone: 0808 802 6262

MND care centres and networks
We fund and develop care centres and networks across England, Wales, and Northern Ireland, which offer specialist multidisciplinary care for people with MND.
www.mndassociation.org/care-centres

Branches and groups
We have volunteer-led branches and groups nationwide providing local support and practical help to people with MND and their carers.
www.mndassociation.org/branchesandgroups

Association visitors (AVs)
AVs are trained volunteers who provide one-to-one local support to people affected by MND. They can support people affected by MND in person, by telephone or by email or through support groups.
www.mndassociation.org/associationvisitors

We value your feedback
Your feedback helps improve our information for the benefit of people living with MND and those who care for them. Visit www.smartsurvey.co.uk/s/mndprofessionals or email your comments to infofeedback@mnassoc.org
If you would like to help us by reviewing future versions of our information resources, please email us at infofeedback@mnassoc.org
About MND

• MND is a fatal, rapidly progressing disease that affects the brain and spinal cord.
• It attacks the nerves that control movement so muscles no longer work. MND does not usually affect sight, hearing or sensation.
• It can leave people locked in a failing body, unable to move, talk and eventually breathe.
• It affects people from all communities.
• Some people may experience changes in thinking and behaviour, with some experiencing a rare form of dementia.
• MND kills a third of people within a year and more than half within two years of diagnosis.
• A person’s lifetime risk of developing MND is up to 1 in 300.
• Six people per day are diagnosed with MND in the UK.
• MND kills six people per day in the UK.
• It has no cure.

Would you like to find out more?
Contact our helpline if you have any questions about MND or want more information about anything in this publication.

mndconnect
0808 8026262
mndconnect@mndassociation.org

www.mndassociation.org/professionals