



Mr Martin Williams

2<sup>nd</sup> Floor, Roycraft House  
15 Linton Road  
Barking  
IG11 8HE

Reference: LBBD/72087  
Date: 19 June 2013

Dear Williams

Thank you for your e-mail received on 19 June 2013 requesting information regarding guidance and instructions issued to LB Barking and Dagenham staff or agents concerning the operation of the scheme in your Borough to replace crisis loans and community care grants.

We will respond to your request no later than 17 July 2013.

Whilst it is the Council's policy to provide information wherever possible, I need to advise you that there are a number of exemptions under the Freedom of Information Act 2000. These may prevent me from releasing all or some of the information you have asked for. You will, however be informed if this is the case and why.

Yours sincerely

The Corporate Complaint & FOI Team

Phone: 020 8227 5788  
Email: [foi@lbbd.gov.uk](mailto:foi@lbbd.gov.uk)  
Fax: 020 8227 2471

## LOCAL EMERGENCY SUPPORT SERVICE (LESS)

### What is this service?

Less is a new service funded by Barking and Dagenham Council which aims to help low income residents of Barking and Dagenham in times of extreme hardship and need.

From 1 April 2013 the Department of Work and Pensions will stop paying Social fund crisis loan and community care grants.

#### **LESS HAS TWO SERVICES:**

- (i) Financial Help. This is provided by and decided by LESS
- (ii) Support and Advice. This is provided by BD Citizens Advice Bureau

### **(i) Financial Help—provided by and decided by LESS**

#### **Criteria and Eligibility**

LESS operates an local fund which helps low income residents of Barking and Dagenham in times of extreme hardship and need.

The fund seeks to help you:

##### Crisis Payments

- To prevent serious risk to the health and/or safety of you, your family or someone who lives with you
- to ease severe financial pressure you are under in certain situations
- to assist with travel costs in an emergency

##### Community Care Support Payments

- to establish yourself in the community after a period of institutional care or to remain in the community
- if eligible for community care support we may be able to help with rent in advance
- 

To be eligible to receive help from the fund you must:-

Be 18 or over

Be on a low income or receiving any one of the following benefits:

- Job Seekers Allowance (income based)
- Income Support
- Employment Support Allowance (income based) or Incapacity Benefit (income based)
- Pension Credit Guarantee
- Housing benefit
- Council tax reduction assistance

## Free Short Term Financial Support (or may be this says what can I get?)

- If you are eligible for the fund, you can only receive one off financial support in any 12 month period for the same reason
- The fund will only consider a further application in any 12 month period if it is for a different reason than before.
- So you can only get a maximum of two financial payments from LESS in any 12 month period

### How do I make an Application?

**Pick up a form** from BD Citizens Advice Bureau (BD CAB) at:

- Barking CAB 55 Ripple Road, Barking IG11 7NT (open Mon & Tues 9.00-18.00, Weds 10.00-20.00, Thurs & Fri 10.00-17.00 and 2<sup>nd</sup> & 4<sup>th</sup> Saturday 9.00-12.00)
- Or
- Dagenham CAB 339 Heathway, Dagenham RM9 5AF (open Mon-Fri 9.30-17.00)

**Drop off all completed forms** back into BD CAB with the following supporting evidence:  
**See Next Page for details on supporting evidence.**

**If you need help to fill in this form then you can call BD CAB on 020 8517 0996**

LESS will reject any application that has not been fully completed with supporting evidence attached.

### What happens next?

If the form has not been completed or the supporting evidence is missing BD CAB will contact you and offer you help to complete the form.

BD CAB will send all completed application forms and supporting evidence to LESS.

### LESS decision making and appeals

The fund is discretionary. When LESS receive your application from BD CAB they will make a decision and will contact you directly.

LESS can make a decision the same day or within 24 hours if your application is urgent. If it is not urgent a decision will be made within four days

If LESS reject your application then you have a right of appeal and LESS will inform you of how to appeal.

## Supporting Documentary Evidence

LESS

At least one from each category should be provided with the application form

Category	Type of Evidence	For Office Use only
Borough Resident	Council Tax Bill or	
	Service Charge Bill or	
	Other Official document sent to your home address	
Age	Birth Certificate or	
	Passport or	
	Other official document stating age	
Income	Latest mini/full bank statement or	
	Latest Pay Slip	
Qualifying Circumstances	Official document showing immigration status or	
	Official letter from the Benefit Office or	
	Passport or travel document	
Claim	Any evidence of the nature and need of your claim or	
	E.g.: Prison discharge letter or need for emergency travel	
Qualifying Benefit	Job Seekers Allowance (income based) or	
	Income Support or	
	Employment Support Allowance (income based) or	
	Pension Credit Guarantee or	
	Incapacity Benefit (income based) or	
	Housing Benefit or	
	Council Tax Reduction Scheme Assistance or	
Repeat Applications	No Social Fund award or LESS in the past 6 months	
	Not have received a DWP fund award or LESS for the same reason in the past 12 months.	

## ii) Support and Advice -

This is provided by BD Citizens Advice Bureau

BD CAB do not make decisions on your LESS application.

BD CAB receive LESS applications and send on all completed applications to LESS

BD CAB provide the following support:

- help local residents complete applications over the telephone
- offer money management advice & information
- help identify other sources of financial support for you
- general help with appeals

**If you need help to fill in this form then you can call BD CAB on 020 8517 0996**

BD CAB provides independent general help and advice to local residents on employment, housing, welfare benefits, money and finances, immigration & asylum, family law and many other topics. If you need advice on any of these subjects please visit:

Barking CAB 55 Ripple Road, Barking IG11 7NT (open Mon & Tues 9.00-18.00, Weds 10.00-20.00, Thurs & Fri 10.00-17.00 and 2<sup>nd</sup> & 4<sup>th</sup> Saturday 9.00-12.00)

Dagenham CAB 339 Heathway, Dagenham RM9 5AF (open Mon-Fri 9.30-17.00)

### Qualifying benefit

An applicant must be receiving or be about to receive: (award letter from the DWP or the local authority)

- Job Seekers Allowance (income based)
- Income Support
- Employment Support Allowance (income based)
- Pension Credit Guarantee
- Incapacity Benefit (income based)
- Housing Benefit
- Council Tax Reduction Scheme assistance

### Repeat applications

- The applicant must not have received a DWP Social Fund award or Local Emergency Support Service in the borough within the past 6 months
- The applicant must not have received a DWP Social Fund award or Local Emergency Support Service **for the same reason** in the past 12 months

### Exceptional circumstances

In rare circumstances where a person is seeking help in a situation of extreme difficulty and where the risk of harm to themselves or the family is immediate and significant, then consideration may be given to a discretionary payment. In these very limited circumstances, there may be a requirement to repay.

# Local Emergency Support Service L.E.S.S Application Form

## Part 1 About you

### Name and Address

Title	<input type="text"/>
Forename	<input type="text"/>
Other	<input type="text"/>
Surname	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Postcode	<input type="text"/>

Date of Birth:  Age:

N.I No.

Contact details: (at least one must be provided)

Home No.

Mobile No.

Email Add:

Preferred method of con-

Reason for Application of the loan

Please answer **ALL** the questions below before moving to **PART 2**

1) Do you have a partner? Yes / No

If yes, what is their full name?

Date of Birth: ...../...../.....

N.I No.

2) Do You have recourse to public funds?

YES / NO

3) Have you received a Emergency Loan for the same reason/purpose in the last 6 months?

YES / NO

4) Have you received a Emergency loan for any reason/ purpose in the past 12 months?

YES / NO

5) Are you currently paying off an existing loan?

YES / NO

6) Are you being sanctioned from your benefit at the moment?

YES / NO

7) Have you been placed in the borough by another borough?

YES / NO

If yes please give details of the borough

8) Have you lived in the borough for less than six weeks?

YES / NO

If yes please give your previous address.

Address

Postcode

Please give the date you moved in ..../...../.....

## Part 2 Household Details

Please give details below of any **person (s)** living with you in your household

Please tell us about any **children** who live with you ?

First Name	Other Name(s)	Surname	Date of Birth

Do you have any other **family members** that live with you?

First Name	Surname	Date of Birth	Relationship to you

Do you have any **non –related** person living with you?

First Name	Surname	Date of Birth	Relationship to you



### Part 3: About where you live

Please inform us of your housing status?

I am a? (please tick one)

Council Tenant?

☐

Social Services?

☐

Housing Association tenant?

☐

Hostel resident?

☐

Owner-occupier?

☐

Boarder?

☐

Private tenant?

☐

Homeless?

☐

Other please specify?

☐

Family/Friends

☐

.....

Please Note: If you are a private tenant, please provide the following details:

Landlords name

Landlords address and  
postcode

Please confirm was property rented:

Unfurnished

☐

Partly Furnished

☐

Fully Furnished

☐

Can we contact the landlord if we need more information?

YES / NO

When did you move to this address? ...../...../.....

### Part 4: About leaving care/prison

Have you recently left state care? YES / NO if no go to Part 5

By care we mean a prison, hospital, care home or similar place

Name and address of the prison, hospital, care home, or similar place

What address did you live at before going into care?

What date did you go into care? ...../...../.....

Date of leaving the care? ...../...../.....

Please give us your prison number if known?

## Part 5 Financial Details

Please give us details of your finance below.

Please tell us about any **children** who live with you ?

Name of the person receiving the benefit	Type of benefit received	Amount Paid	How often (weekly/monthly)	When is your next payment due?

Do you or your partner have any other income? **YES / NO** (if yes please give details below)

Name of person receiving the income	Name of the other income	Amount Paid	How often (weekly/monthly)	When are you due your next payment

## Part 6 About bank accounts, saving and investments

Please provide us details of all accounts you hold

Name of the account holder	Account number	Sort Code	Amount in account

## Part 6 About back accounts, saving and investments-

Please provide details in the box below of any shares, bonds or investments you hold ( this include any property, apart From where you live)

If yes please give details below

Can you obtain money in any other way?  
(For example could be cash, credit card, loan or overdraft)

YES /NO

If yes please give details below

Can you or your partner get help from anywhere else?  
(This could be a relative or friend)

YES /NO

## Part 7 What do you need-

Please list the items you require (such as furniture, food, utility payments etc) and please state the reason it is required.

Goods/Items required	Why is it required

Please use a separate sheet if you need more space.

## Part 8 Health

Do you, your partner or a member of your household have any serious health problems? **YES ? NO**  
(if yes please give details below)

Person

Health Problems

## Part 9 Any other information

Please use this box below to tell us about any other information you wish for us to consider

## Part 10 Form filled in by someone other than the claimant

Are you requesting a loan on behalf of someone else **YES ? NO**

### Your details :

Title

Forename

Other names

Surname

### Address:

What is your relationship to the person.

Please tell us why you have filled out the form for the claimant?

Please confirm if you have any of the following

**Power of attorney** ☐

**Appointed Secretary of State to act on their behalf** ☐

If you have ticked any of the above two boxes, you can sign the declaration in Part 11, you may be requested to provide proof; otherwise the person named in Part 1 has to sign the declaration.

## Part 11 Declaration

**I declare** that the information I have given on this form is correct and complete as far as I know and believe

**I understand** that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.

**I understand** that I will have to pay back any loan that I may get.

**I also understand** that if this loan is approved, money may be taken from my benefit or my partner's benefit to pay it back.

**This is my application for a payment from the Local Emergency Support Service.**

Signature

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Date

/  /
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## Part 12 Additional Information

### Do you have any of the following?

Credit cards	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	if yes how many?.....
Loans	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	if yes how many?.....
Door step loan money	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Pawnbroker loan money	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Payday loan money	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Catalogue purchases	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
In Overdraft	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Store cards	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	

### In total from the above how much do you think you owe?

Under 5000	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Between 5000 and 15000	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Over 15000	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

### Of the things below, what would you want to know more about? (please tick all/any that apply).

- ☐ Managing on the money that you've got coming in?
- ☐ Know that you've got all the state benefits you are entitled too?
- ☐ Knowing which bills to pay first?
- ☐ Paying back debts?
- ☐ Finding the best deals for loans, insurance, consumer goods?
- ☐ Saving up for big purchases or for the future?
- ☐ Choosing, opening or making best use of your bank account?
- ☐ A space to talk about money in a way which starts to solve worries

What else?.....

**BD Citizens Advice Bureau will contact you separately to offer further advice & support with the above**