

Legal Notice No. of 2021

ST HELENA



SOCIAL SECURITY ORDINANCE, 2010

SOCIAL SECURITY (AMENDMENT) REGULATIONS, 2021

In exercise of the powers conferred by section 17 of the Social Security Ordinance, 2010, the Governor in Council makes the following Regulations:

Citation and interpretation

1. (1) These Regulations may be cited as the Social Security (Amendment) Regulations, 2021.

(2) In these Regulations, “the principal Regulations” means the Social Security Regulations, 2011.

Amendment of regulation 2 - interpretation

2. The principal Regulations are amended in regulation 2 by revoking the word “child” and the meaning of this word.

Amendment of regulation 5 - application for Income Related Benefit

3. The principal Regulations are amended in regulation 5 as follows—

(a) by revoking the word “household” wherever this word appears and substituting the word “family”; and

(b) by inserting after sub-regulation (2) the following sub-regulation—

“(3) All bank statements and statements of stocks and shares from St Helena and overseas, for three months preceding the application must be submitted with the Application Form as evidence of income and cash assets.

Amendment of regulation 6 - determination of benefit

4. The principal Regulations are amended in regulation 6 by revoking regulation 6 and substituting the following regulation—

“Determination of benefit

6. (1) The amount of a family’s entitlement to an income related benefit must be calculated as the amount (if any) by which the family rate determined under regulation 7(1) exceeds the family income level as determined under regulation 7(2).

(2) If a person who is a member of a family is at any time in residential care where all living costs are met by the care provider, for a continuous period of more than 30 days, the benefit must—

- (a) be stopped for the member in residential care; and
- (b) a new application be submitted by a member of the family.”.

Revocation and substitution of regulation 7 - household poverty line

5. The principal Regulations are amended by revoking regulation 7 and substituting the following regulations—

“Family rate

7. (1) The rate in respect of every family is to be determined with reference to—

- (a) the number of adults in the family;
- (b) the number of children in the family;
- (c) the value of the rent or the interest on the loan repayment payable in respect of the dwelling where the family resides; and
- (d) the amount calculated in accordance with regulation 7A.

(2) The basic adult rate for purposes of determining the family payments is £73.00 per week.

(3) Subject to regulation 7A, the rate of a family is to be calculated as the total of the following amounts—

- (a) for each adult in the family – the amount determined in accordance with regulation 6(2), which for additional non-family adults in shared accommodation will take into account the amount calculated in accordance with regulation 7A;
- (b) for each of the first 3 children in the family - 40% of the basic adult rate per child; for each additional child - 30% of the basic adult rate per additional child;
- (c) if the dwelling where the family resides constitutes Government Landlord Housing - the full amount of the rental amounts for the relevant week;
- (d) if the dwelling where the family resides is rented but does not constitute Government Landlord Housing - so much of such rental amounts for the relevant week as does not exceed £33.36; and
- (e) if a loan has been incurred for purposes of purchasing the dwelling where the family resides - the total amount of the interest on the loan which is payable during such week.

Shared household deduction

7A. (1) A shared household deduction (for shared household goods and services) as a percentage of the Minimum Income Standard will be applied to each adult IRB rate in shared accommodation.

(2) The shared household deduction under sub-regulation (1) will be apportioned pro-rata between all adults: the calculation is applied to non-IRB persons in the shared accommodation, as it is assumed that these persons are sharing costs, and the IRB rate for IRB claimants is set as a share of all adults.

(3) The rate for the shared household deduction is—

- (a)* 100% of the shared household deduction (i.e. no deduction) for one adult in shared accommodation;
- (b)* one half of the shared household deduction for two adults in shared accommodation;
- (c)* a third of the shared household deduction for three adults in shared accommodation;
- (d)* a fourth of the shared household deduction for four adults in shared accommodation, and
- (e)* a fifth of the shared household deduction for five adults in shared accommodation.”.

Revocation and substitution of regulation 8 - household income level

6. The principal Regulations are amended by revoking regulation 8 and substituting the following regulations—

“Family income level

8. The income level of a family is to be calculated as the total of the following amounts as reflected in the second column—

Income	Taken into account in the calculation
1. Carer’s allowances, better life allowances and occupational therapy allowances.	Disregarded in full.
2. Earnings (full or part time, casual, regular or self-employed),	The first £10 for each person with earnings shall be disregarded and the remainder taken into account.
3. Pension, any type of pension benefit, including basic island pension, United Kingdom state pension, St Helena Government pension, other employer pension or any personal pension	Taken into account in full – no disregard
4. Any other income, however received, including regular payments from children, children paying for services including electricity, telephone or other services.	Taken into account in full - no disregard

Assets	
<p>5. All assets including bank accounts, stocks and shares, cash, held either on St Helena or abroad.</p>	<p>A family with assets of twice the annual minimum wage (37.5 hour week) is not eligible for IRB.</p> <p>Family assets totalling between £3,000 and up to twice the annual minimum wage will be treated as if it gives a family a weekly income of £1 for each £250, or part of £250, regardless of whether it does or not. So if a family has £4,300 in assets, £3,000 of it will be ignored and the other £1,300 will be treated as giving weekly income of £6.00.</p> <p>This will be reviewed annually and adjustments to payments made accordingly.</p> <p>There is full disregard for families with total assets of less than £3,000</p>

Reporting to the Benefits Office and Careers Access St Helena

8A. (1) A category 1 claimant is required to report to the Benefits Office every two weeks to report on progress in seeking work with respect to sub-regulation (4) which states under which conditions income related benefit may be withdrawn from a claimant in category 1 of job readiness.

(2) A category 2 claimant who is being supported into work will be placed in appropriate training or work to become job ready and the category 2 claimant is required to report on progress to the Benefits Office every two weeks.

(3) The Benefits Office and Careers Access St Helena will review the progress of each category 1 claimant in seeking work and category 2 claimant undertaking appropriate training or a work placement on a fortnightly basis.

(4) Income related benefit will be withdrawn from a claimant in category 1 of job readiness in the event of:

- (a) failing to demonstrate availability for, and actively seeking work;
- (b) failing to carry out a direction from Careers Access St Helena;
- (c) failing to attend a two weekly progress meeting with the Benefits Office, compulsory training or employment scheme;
- (d) failing to accept work that is offered;
- (e) leaving work voluntarily (except in the case of voluntary redundancy); or
- (f) losing work due to misconduct.

(5) Sub-regulation (4) also applies to persons in category 2 of Job Readiness when they have been medically assessed as job ready and move into Category 1.”

Amendment of regulation 9 - payment of benefits

7. The principal Regulations are amended in regulation 9 by revoking sub-regulation(2).

Insertion of regulation 9A - payment of transport allowance

8. The principal Regulations are amended by inserting after regulation 9 the following regulation—

“Payment of transport allowance

9A. A person claiming an income related benefit is entitled to be reimbursed upon arrival to, and receipt of a bus journey to, an arranged appointment with the Health Directorate or the Benefits Office.”.

Amendment of Schedule

9. The principal Regulations are amended in the Schedule by revoking Form B and substituting the following—

**“FORM B
APPLICATION FOR INCOME RELATED BENEFIT
(Regulation 5(1))**

<i>For office use only</i>	
<i>Social Security no:</i>	
<i>Date received at:</i>	
<i>Initials:</i>	
DETAILS OF APPLICANT *Form to be completed in blue or black ink and in block letters	
Name of applicant:	
Date of birth:	
Address:	
Telephone number:	
Fax:	
E-mail:	
DETAILS OF HOUSING LOAN/ RENTED ACCOMMODATION	

Are you or anyone else in the family repaying a housing loan for the house in which you live?	Yes/No
If yes, please state name of the person repaying the loan and the weekly repayments	Name _____ Weekly repayments _____ Capital £ _____ Interest £ _____
Details of rented accommodation:	Is the family living in rented accommodation? Yes/No If yes, who in the family is paying the rent? Name: What is the total rent paid weekly for the accommodation? £ _____ Is the accommodation: Private/Government

DETAILS OF CURRENT MEMBERS OF THE FAMILY

Please give details of current members of the family:

Applicant Member 1	Full name								
	Date of birth								
	Employment status								
	Weekly income								
	Child maintenance								
	Pensions (include source and weekly amounts)								
	Bank details (accompanied by bank statements for all accounts, St Helena and overseas, for three months preceding the application) Address and amount								
	Assets (properties, shares, land and trust funds)								
	Other income								
	Category of Job Readiness. Please tick as appropriate								
	<table border="1"> <thead> <tr> <th></th> <th>Description</th> <th>Tick</th> <th>Conditions</th> </tr> </thead> <tbody> <tr> <td>Category 1</td> <td>Job ready. No significant barriers to work exist. Claimant is capable of taking a job immediately.</td> <td></td> <td>Claimant must actively seek work</td> </tr> </tbody> </table>		Description	Tick	Conditions	Category 1	Job ready. No significant barriers to work exist. Claimant is capable of taking a job immediately.		Claimant must actively seek work
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	Category 2	Not job ready. Some barriers to work exist (e.g. health issues) that need addressing before a claimant is 100% job ready.		Claimant must be undertaking appropriate activity in order to become job ready.								
	Category 3	Claimant is permanently unable to work:		No conditions attached.								
		• In receipt of BLA										
		• In receipt of OT										
		• In receipt of CA.										
		• Carer of one or more children under 5 years or a disabled child										
		• Aged 65+										
	Category 4	Full-time employment		Claimant must provide evidence of all earnings for the previous 90 days every 90 days for re-assessment								
		Part-time employment										
	Member 2	<p>Full name</p> <p>Date of birth</p> <p>Employment status</p> <p>Weekly income</p> <p>Child maintenance</p> <p>Pensions (include source and weekly amounts)</p> <p>Bank details (accompanied by bank statements for all accounts, St Helena and overseas, for three months preceding the application) Address and amount</p> <p>Assets (properties, shares, land and trust funds)</p> <p>Other income</p> <p>Category of Job Readiness. Please tick as appropriate</p> <table border="1"> <thead> <tr> <th></th> <th>Description</th> <th>Tick</th> <th>Conditions</th> </tr> </thead> <tbody> <tr> <td>Category 1</td> <td>Job ready. No significant barriers to work exist. Claimant is capable of taking a job immediately.</td> <td></td> <td>Claimant must actively seek work</td> </tr> </tbody> </table>					Description	Tick	Conditions	Category 1	Job ready. No significant barriers to work exist. Claimant is capable of taking a job immediately.	
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		• Aged 65+		
Category 4	Full-time employment		Claimant must provide evidence of all earnings for the previous 90 days every 90 days for re-assessment	
	Part-time employment			

Please tick this box if you are submitting extra sheets for additional members of the family.

PAYMENT AND DECLARATION

Please pay my income related benefit into my bank account no.

OR

I would like to be paid by cash

APPLICATION:

I _____

of _____

hereby apply for income related benefit.

DECLARATION:

(please read this declaration carefully before you sign and date it)

- I hereby certify the foregoing information given by me to be full and correct.
- I agree to report all changes of circumstances as and when they happen.
- I understand that failing to report a change of circumstances could result in an over payment which I may have to pay back.
- I understand that it is a criminal offence to give incomplete or inaccurate information for the purpose of obtaining an income related benefit and is liable to prosecution

Signature:

Date:

Signed:

Adjudication Officer

Made by the Governor in Council this day of 2021.

Connie Johnson
Clerk of Councils

EXPLANATORY NOTE

(This note is not part of the Regulations)

The Social Security (Amendment) Regulations, 2021, would revise the Social Security Regulations, 2011 by replacing the use of the word “household” with the use of the word “family” and by making amendments consequential thereto and by replacing application Form B.