

Memo for CabinetRevision of the Third Schedule of
the National Assistance Act, 1956

In accordance with the National Assistance Act 1956 (Act No. VIII of 1956), sickness assistance at the rate of 12/- per week is payable to the head of a household where a member is proved to be suffering from one of the diseases and conditions listed in the Third Schedule to the Act. A copy of that Schedule is in Appendix I to this Memo.

2. It is proposed to amend items 5 and 6 of the Schedule to read as follows:

- "5. Serious complications from acute infectious or constitutional diseases, and from trauma.
6. Threat of serious complications arising from diabetes."

The underlined words constitute the amendments.

3. The objects of the proposed amendments are generally to widen the scope of this form of assistance and to enable afflicted persons to undertake treatment, and particularly in the case of diabetics, to observe an appropriate diet before irreparable harm is caused by the disease. An extract from a letter dated 11th November, 1962, in which Prof. J. Debono C.B.E., M.D., F.R.C.P. expressed his views on this subject to the Chief Government Medical Officer, is attached as Appendix II to this Memo.

/4. ...

4. The Department of Social Services is not in a position to estimate the increase in expenditure on this form of assistance which would ensue as a result of the proposed amendment. Failing that, some guidance may be obtained from the increase in expenditure which has occurred since the 9th June 1965, when the number of diseases and conditions in the same Schedule was increased from six to eleven.

5. The average monthly expenditure during the five months ending May was as follows:

<u>1965</u>	<u>1966</u>
£1,912	£7,337

Average increase per month £5,425.

In May 1966 sickness assistance was paid to 3,196 households, as against 984 households in May 1965.

6. The amendment to item 5 of the Schedule to the Act is not expected to cause any marked rise in the expenditure on sickness assistance. But the amendment to item 6 is expected to enlarge the category of diabetics who would qualify for sickness assistance.

7. In the draft Estimates for the Current Year the provision of £615,000 for all payments under the National Assistance Act (Vote 38 B item 38) represents an increase of £25,000 on last year's provision. This increase is being asked for merely on the basis of trends revealed by last year's expenditure. An increase in expenditure on Sickness Assistance is therefore likely to cause an excess on this year's provision.

8. Honourable Ministers are requested to agree to the amendment of the Third Schedule to the National Assistance Act as proposed in paragraph 2 above.

8th June, 1966.

Third Schedule to the National
Assistance Act, 1956

Diseases and Conditions in Respect of which Sickness
Assistance is Payable.

1. Chronic renal impairment and the Nephrotic syndrome.
2. Gastric and Duodenal ulcer.
3. Malignant diseases.
4. Cirrhosis of the liver.
5. Serious complications from acute infectious diseases.
6. Serious complications arising from diabetes.
7. Congestive heart failure.
8. Rheumatoid arthritis and collagen diseases.
9. Progressive muscular atrophy.
10. Mental deficiency.
11. Pregnancy - the last twelve weeks preceding childbirth.

Appendix II

Extract from a letter from Prof. J. Debono C.B.E., M.D.,
F.R.C.P. dated 11th November, 1962.

Diabetes

This is a controversial subject and when it was mentioned to the representatives of the Labour Office, they were dead set against it. And yet Diabetes is really the only disease when a radical departure from the ordinary diet is essential. As we have seen the ordinary diet consists mostly of carbohydrates. From 75 to 80% of the total calories are of carbohydrate origin. Although to-day the tendency is to allow more carbohydrate nobody would think of giving a diet in which more than 50% of the calories are derived from starch or sugars. Covering excess carbohydrates by insulin, leads to poor control and aggravation of the disease. The old schedule provides for Assistance in the case of Diabetics threatened by Pulmonary Tuberculosis and/or by blindness. In the case of Tuberculosis all diabetics, especially young diabetics are potential victims of Tuberculosis. In the case of blindness - this is a late and incurable complication and trying to give a special diet when the eyes are affected is very much like locking the stable door when the horse has escaped. The only objection I can see is that even when given Sickness Assistance the diabetic will not diet. This can be prevented by requiring frequent progress reports showing that the patient is co-operating. The question of diet in Diabetes is so important, that unless I am mistaken, Diabetes was the only disease for which extra fat rations were given during the War in England. Any anticipated drain on financial means would be offset by less expenditure on insulin, less absenteeism from work, less hospitalization and a longer expectancy of the working life.