



Department
for Work &
Pensions

Minister for Work and Pensions (Lords) **0207 340 4000**

4th Floor, Caxton

www.gov.uk/dwp

House

Tothill Street

ministers@dwp.gov.uk

LONDON

SW1H 9DA

House of Lords
London
SW1A 0PW

02 April 2025

My Lords,

I refer to the debate regarding the **Pneumoconiosis etc. (Workers' Compensation) (Payment of Claims) (Amendment) Regulations 2025**, and the **Mesothelioma Lump Sum Payments (Conditions and Amounts) (Amendment) Regulations 2025** which took place on Monday 3 March 2025.

I would like to thank all colleagues for their helpful contributions to this debate. I hope that I responded to most of the questions during the debate. However, I would like to take this opportunity to provide further information which I committed to gathering during my closing remarks.

Firstly, Baroness Stedman-Scott asked how these compensation schemes can continue to meet the needs of those with asbestos-related diseases, and for commitments to increase the value of payments under these schemes. I can reassure colleagues that the Government recognises the importance of these schemes. That is why, despite there being no statutory requirement to uprate the value of payments made under these schemes, we are maintaining the position taken by previous Governments and increasing the value of the lump-sum awards in line with the September 2024 Consumer Price Index (1.7%). Making the annual review of these rates a statutory requirement would require further legislative changes, and it is our view that these debates continue to provide a valuable opportunity to debate these lump-sum compensation schemes and more broadly the support available for people with these diseases.

Baroness Stedman-Scott also asked whether the 1.7% increase adequately meets the ongoing needs of individuals. We are committed to providing

appropriate financial support for affected families. The Department also offers a range of other financial support to people with the diseases covered by these schemes. Industrial Injuries Disablement Benefit (IIDB) provides specific weekly support for those who have had an industrial accident or develop diseases that are known to be related to specific types of work. People who have additional costs as a result of their disability may be entitled to benefits such as Personal Independence Payment or Attendance Allowance. Other state benefits are also available to cover income-replacement needs.

Baroness Stedman-Scott also asked a question on the new rates applying only where conditions of entitlement are first met on or after 1 April 2025, and whether there is a risk that individuals currently in the middle of their claim process may miss out on the increase. In the most general terms, under the 1979 Act scheme, a person who is disabled by one of the relevant diseases must have been assessed as having one of the diseases covered by the 1979 Act scheme for IIDB purposes. The rates payable to people with the relevant disease(s) under the 1979 Act scheme are calculated according to:

- the age of the person at the date the Department determined they had the disease for IIDB purposes; and
- the person's assessed level of disablement in respect of their disease.

The uprated rates for 2025/26 will apply only in relation to any case in which a person first fulfils the conditions of entitlement for a payment under the 1979 Act scheme on or after 1 April 2025. For claims made under the 1979 Act scheme, the Department applies the lump-sum compensation rates that were in force at the date of the IIDB determination. Therefore, a person who is disabled by one of the relevant diseases who makes a claim under the 1979 Act scheme on or after 1 April 2025, but who was assessed as being disabled by the relevant disease for IIDB purposes in February 2025, would receive a payment based on the 2024/25 award rates.

For the 2008 Act scheme, payments to people with diffuse mesothelioma are generally based on their age at the date they were diagnosed with diffuse mesothelioma. For people with diffuse mesothelioma, uprated rates for 2025/26 will apply only where they were first diagnosed with diffuse mesothelioma on or after 1 April 2025. A person with diffuse mesothelioma who makes a claim to the 2008 Act scheme after 1 April 2025, who was first diagnosed with diffuse mesothelioma in February 2025, would receive a payment based on the 2024/25 award rates.

Both situations outlined above are in line with the long-standing procedures used to process claims under these two lump-sum schemes.

Lord Jones asked for the numbers of deaths caused by asbestos. The most recent published data from the Health and Safety Executive (HSE) reported that there are over 5,000 asbestos-related deaths per year currently, including mesothelioma, lung cancer and asbestosis.¹ It is not possible to break down the annual estimated number of deaths by industry.

In relation to the incidence of mesothelioma more generally, HSE publishes comprehensive information regarding asbestos-related diseases, including mortality, and occupational data for mesothelioma. I promised to provide a link to this information, which can be found below:

For mesothelioma statistics:

<https://www.hse.gov.uk/statistics/assets/docs/mesothelioma.pdf>

For mesothelioma mortality by occupation:

<https://www.hse.gov.uk/statistics/assets/docs/mesothelioma-mortality-by-occupation.pdf>

Lord Jones also asked for the number of deaths related to pneumoconiosis, particularly in relation to coal mining and quarrying. During the debate, I set out that annual deaths from coal workers' pneumoconiosis since the start of the coronavirus pandemic have been lower than seen previously. There were 54 deaths due to coal workers' pneumoconiosis in 2023 and 50 in 2022. This compares with an average of around 130 deaths per year over the 10 years to 2019, although it is uncertain whether and to what extent these death statistics were affected by disruption to certification processes and increased mortality in older age groups².

Baroness Janke asked about the age profile of those who receive awards, and how many dependants receive payments. In 2023/24 1,620 awards were made under the 1979 Act scheme, 1,480 of which were to people who are disabled by one of the relevant diseases and the rest to dependants. 320 awards were made under the 2008 Act scheme, 310 of which were to people with diffuse mesothelioma and the rest to dependants.

The Department publishes data on the age of those claiming under the lump-sum schemes – for claims made by people with the relevant disease(s), this captures the age of the person with the disease. For dependant claims, this reflects the age of the person who had the disease themselves. In 2023/24

¹ <https://www.hse.gov.uk/statistics/assets/docs/asbestos-related-disease.pdf>

² <https://www.hse.gov.uk/statistics/assets/docs/pneumoconiosis-and-silicosis.pdf>

95% of 1979 Act awards were made where the person with the relevant disease was of pension age, and 86% of 2008 Act awards were made where the person with diffuse mesothelioma was of pension age.³

Regarding Baroness Janke's question on life expectancy, for adults diagnosed with mesothelioma in England between 2016 and 2020, one-year survival was below 50%⁴. This highlights the importance of timely financial support for people with diffuse mesothelioma.

I trust that you will find this additional information helpful. I will place a copy of this letter in the House of Lords Library for reference.

A handwritten signature in dark ink, appearing to be 'MSL' followed by a stylized flourish.

The Baroness Sherlock OBE
Minister of State

³ <https://stat-xplore.dwp.gov.uk/webapi/jsf/dataCatalogueExplorer.xhtml>.

⁴ <https://digital.nhs.uk/data-and-information/publications/statistical/cancer-survival-in-england/cancers-diagnosed-2016-to-2020-followed-up-to-2021>