Department for Work & Pensions

Website: www.dwp.gov.uk

Your Reference:

Our Ref: Fol IR69

Date: 10/4/15

Dear Mr Stevens.

I am writing in response to your review request received on 5 February 2015, my apologies for the delay. An internal review has been carried out by someone of a senior grade to the person who dealt with your original request. I am now in a position to respond to you. In your review request you said:

'I would like to request an internal review of the response attached. I apologise for taking up your time with this but good knowledge of these core visit procedures throughout the advice sector is important in safeguarding claimants.

I am very pleased to hear that the Core Visit provisions will be unchanged in Universal Credit.

I have checked the information I received on the subject in October and I was only able to find the JCP Core Visit Referral Guidance and other attachments in that email of 20/10/14. That guidance only includes a passing reference to core visits relevant only to pathfinder jobcentres.

I was asking for the <u>equivalent in UC quidance of the current ESA</u>
<u>quidance</u> which goes into detail about the process (I have attached the ESA guidance I'm referring to so that you can see what I mean – in this version of the document I am referring to paras 92-117).

If I have misunderstood and the ESA guidance above is the guidance which in use for Universal Credit then just let me know. You may like to check that it is included in the links for advice for UC decision makers — I wasn't able to find it when I looked, I'd appreciate a link if it is there. I looked in chapters K1, K2, and V7 here: https://www.gov.uk/government/publications/advice-for-decision-making-staff-guide

If the guidance for UC is yet to be written then that's fine – just let me know.

I have reviewed the current position and the attached guidance is what is currently made available to UC staff as a guide. This guidance is reviewed on

a regular basis in line with Universal Credit's Test and Learn approach. As such at the time of your original request this was not available to share with you. If you have any queries about this letter please contact me quoting the reference number above.

Yours sincerely,

M Hewlett (MCIPS) Universal Credit Senior Commercial Lead

Your right to complain under the Freedom of Information Act

If you are not content with the outcome of the internal review you may apply directly to the Information Commissioner's Office for a decision. Generally the Commissioner cannot make a decision unless you have exhausted our own complaints procedure. The Information Commissioner can be contacted at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow Cheshire SK9 5AF www.ico.gov.uk

Annex 1

Universal Credit guidance for agents

This guidance below is specifically concerned with visiting and there are links for the agent to the Department for Work and Pensions (DWP) Core visit guidance:

Contact with the claimant is unsuccessful

If contact with the claimant is unsuccessful the Account Developer (AD) makes a referral to a visiting officer. See Operational guidance >> Core Visit Referral Guide >> Para 60 Making a Referral and completes form MF37 (referral for visit form).

If the claimant is unable to deal with calls or notifications from DWP, the agent completes an MF37 and refers to **DWP Visits**

If a claimant does not attend or take part in a Work Related Interview (WRI), or fails to complete a Work Related Activity (WRA) the agent must consider if a safeguarding visit is appropriate before starting any sanction action. The agent should consider the claimant's circumstances to establish if the claimant has complex needs and/or requires additional support.

DWP Visiting is intended to help give claimants the chance to comply with work-related requirements or to provide evidence of good reason why they didn't meet their requirements.

The agent can check all available systems for any indication that the claimant has complex needs and/or requires additional support,

If there is evidence the claimant has complex needs and/or requires additional support a referral to the DWP Visiting Service for that claimant will be appropriate.

Refer to **DWP Visiting Service** using form MF37. The reason for the visit and the action required is made clear on the MF37.

If the DWP Visiting Service considers that the claimant's circumstances are such that the WRI is not needed, they should contact the agent in the Universal Credit Outlet immediately for agreement. For more information see the **Core Visit Referral Guide**.



Owen Stevens owen.Stevens@royalgreenwich.gov.uk

Date: 13 May 2015

Fol ref No: 1613

Dear Mr Owen,

Thank you for your Freedom of Information (FoI) request received on 23 April. You asked:

Please see the following section taken from ESA Operational Guidance for Benefit Delivery Centres (Customers with additional needs).

" 20. Where the claimant has a known background of mental illness there are minimum requirements that Jobcentre Plus should be adopting to ensure that we are not found to be neglectful in our duty of care towards these claimants. The minimum requirements are:

- Where the claimant has been attending a Psychiatric Unit, a liaison officer should be appointed to maintain good communications between Jobcentre Plus and the Patients Affairs Officer.
 - Where it is known that the claimant has a social worker designated to them we should liaise closely with Social Services Department.
- All cases, where there is a known history of mental illness, should be referred to a manager before a decision is made to withdraw benefit. The definition of a manager is Band C or above."

These minimum requirements are part of the safeguards introduced following the death of a claimant in 2000. Lord Freud has committed that the safeguards will be carried over in full from ESA to Universal Credit.

I would like to request a copy of Universal Credit Operational Guidance which includes these minimum requirements.

Please find enclosed copies of the Operational guidance you have asked for which includes the minimum requirements of someone claiming Universal Credit who has a mental illness.





I am also enclosing a link to the Universal Credit webpage if you have any further questions relating to this topic:

http://about.universalcredit.service.gov.uk/kms/SitePages/category-GUID=77c097ba-b419-4bf2-913d-314319d79a31Level=2.htm

If you have any queries about this letter please contact me quoting the reference number above.

Yours sincerely,

T Lee Disability Directorate

Your right to complain under the Freedom of Information Act

If you are not happy with this response you may request an internal review by e-mailing <u>freedom-of-information-request@dwp.gsi.gov.uk</u> or by writing to DWP, Central Fol Team, Caxton House, Tothill Street, SW1H 9NA. Any review request should be submitted within two months of the date of this letter.

If you are not content with the outcome of the internal review you may apply directly to the Information Commissioner's Office for a decision. Generally the Commissioner cannot make a decision unless you have exhausted our own complaints procedure. The Information Commissioner can be contacted at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow Cheshire SK9 5AF www.ico.org.uk/Global/contact_us or telephone 0303 123 1113 or 01625 545745

The guidance below is specifically concerned with the Universal Credit Operational Guidance around safeguarding claimant's with mental health conditions

I have included the relevant content from 6 pieces of Knowledge Management guidance which provide a background into the Universal Credit guidance for operations.

These 6 pieces provide information in relation to Work Related Activity/Work Capability Assessment and the safeguards in place for vulnerable customers with complex needs.

HEALTH CONDITIONS THAT EXEMPT YOU FROM WORK RELATED ACTIVITY explains certain health conditions affect a claimant's Universal Credit and exempt them from work related activity.

TREATED AS HAVING LIMITED CAPABILITY FOR WORK explains how If you are claiming Universal Credit and start having certain treatments or health conditions, you may receive the Limited Capability for Work (LCW) element without needing to have a Work Capability Assessment (WCA).

REFERRING A CLAIMANT TO A WORK CAPABILITY ASSESSMENT – guidance refers to ops guidance when a claimant has a limited capability to work.

FAIL TO ATTEND WORK COACH ACTIONS - refers to safeguards in place when a claimant has failed to attend (FTA) and refers to the Operational Guidance on Vulnerability.

FAIL TO ATTEND ACCOUNT DEVELOPER ACTIONS FOR CLAIMANTS WITH COMPLEX NEEDS explains how to consider the complex needs requirements for a claimant who has failed to attend an appointment in order to establish the reason for non-attendance and to re-arrange as appropriate.

GOOD REASON PROCESS FOR WORK CAPABILITY ASSESSMENT provides guidance for when a claimant has failed to return their UC50 questionnaire or failed to attend or participate fully in their Work Capability Assessment (WCA), the decision maker (DM) considers whether there is good reason for the failure before making a decision.

Health conditions that exempt you from work-related activity

Description

How certain health conditions affect your Universal Credit

Content

If you are claiming Universal Credit and develop certain health conditions, you may receive the Limited Capability for Work and Work-Related Activity (LCWRA) element without needing to have a Work Capability Assessment.

How the LCWRA element is paid

If you are eligible for the LCWRA element, this is the date from which it will be paid to you:

- new claims: from the date your Universal Credit started
- existing claims: from the start of the assessment period in which you reported your health condition

Treated as having Limited Capability for Work

Description

How having certain treatments and health conditions affects Universal Credit

Content

If you are claiming Universal Credit and start having certain treatments or health conditions, you may receive the Limited Capability for Work (LCW) element without needing to have a Work Capability Assessment (WCA).

These treatments and health conditions are:

Treatments

 having medical or other treatment as an in-patient in a hospital or similar institution, after a health care professional has advised that you need to stay in hospital overnight or for longer

Risk to self or others

If you have an illness, disease or disablement that could cause a substantial risk to your physical or mental health or that of someone else.

But this does not apply if the risk could be reduced significantly by:

- reasonable adjustments being made in your workplace
- you taking prescribed medication to manage your condition

What you will need to do

Your adviser will tell you to ask your GP or specialist to provide a completed DS1500 form giving details about your treatment or health condition. This will be part of the information Universal Credit use when deciding whether or not you have Limited Capability for Work.

Referring a claimant to a work capability assessment

A WCA referral is required, this is because either:

- an account developer (AD) has received a
 CAMLite task when a claimant needs to be
 referred to a Work Capability Assessment (WCA)
 on the 28th day of sickness. The task will contain
 the following information:
 - Task Type Health Condition
 - Sub-type WCA Referral
 - Task Notes Sickness 28 days sick, consider WCA Referral
- an immediate referral is required because the claimant can be treated as LCW or LCWRA

 a re-referral is required because the claimant is within 2 months of the end of their prognosis or because they have previously failed to attend a WCA.

The AD then determines the reason for the WCA referral and takes the appropriate action to complete the UC55 Medical Services Jacket. A blank form can be found in Supporting document(s) for sick and disabled claimants.

Initial referrals

The AD locates and prints all the information relating to the claimant's sickness from the Document Repository System (DRS). Supporting documents may include:

- the Statement of Fitness for Work (SoFFW)/Return to Work Plan (RtWP)
- further medical evidence received since the first day of sickness
- DS1500
- MATB1
- BF223 relating to the current period of sickness
- any information regarding reconsiderations or appeals for the current period of sickness (recorded on a UC6 and or tribunal documents)
- UC50 if available

Fail to attend (FTA) Work coach actions

When a work coach (WC) opens the next 'FTA appointments' task within the 'Task list' on the Work Services Platform (WSP), the WC opens the 'Claimant Record' and selects 'Personal' from the navigation panel and checks for complex needs.

Claimants who use Universal Credit outlets as a correspondence address are considered to have complex needs.

The WC checks those complex needs against the appointment type for which the claimant has failed to attend (FTA).

Claimant has complex needs

The WC establishes if this is a consecutive failure (this is a failure of one or more appointments / interventions of any appointment type immediately preceding this failed appointment).

The WC attempts to contact the claimant by telephone (a minimum of 3 attempts must be made and each attempt should be at least 1 hour since the previous call). Contact details for the claimant are held on WSP.

Contact with the claimant is successful

If the WC can contact the claimant by telephone and their identity can be confirmed, the WC tells the claimant that they had an interview they didn't attend. After explaining the consequences of failing to attend, the WC asks their reasons why.

When the claimant gives their reasons, the WC should be aware of all current guidance relating to claimants with complex needs and refer to the DWP Vulnerability Hub Home>Directories>Change & Products>Social Justice>Vulnerable Customers

The WC needs to establish if the 'Special needs' tick box at the top of the appointment screen has been 'ticked'. This is because the WC needs to consider if the default appointment duration time needs amending, and if so, overrides the default time.

Consecutive failure

The WC makes a referral to a visiting officer, see Operational guidance >> Core Visit Referral Guide >> Para 55. The WC completes form MF37 (referral for visit form) and creates a WSP task with the following details:

Fail to attend (FTA) account developer actions for claimants with complex needs
Summary

How to consider the complex needs requirements for a claimant who has failed to attend an appointment in order to establish the reason for non-attendance and to re-arrange as appropriate

Claimant has complex needs

If the claimant has complex needs, the AD decides if this is a consecutive failure. A consecutive failure is one or more failures of any appointment type immediately preceding the present failed appointment.

If this is a consecutive failure, the WC must raise a doubt. This is because the claimant has had 2 consecutive FTAs and they have already been made aware of the consequences of this. If this isn't a consecutive failure, the AD attempts to contact the claimant by telephone

If the FTA is:

- an 'initial' failure to attend with complex needs the AD accesses the UC212 letter located in Supporting documents(s) for the Decision Making and Appeals process
- a failure to attend a 'work-related interview' with complex needs – the AD accesses the UC114 letter located in Supporting document(s) for the Decision Making and Appeals process

The AD populates the appropriate letter with the date of the FTA, sends one copy to the claimant and uploads a further copy to the Document Repository System (DRS).

If this is a consecutive failure the AD refers to the decision maker (DM) for a consideration of the doubt.

The AD then attempts to contact the claimant by telephone (a minimum of 3 attempts must be made to contact the claimant and each attempt should be at least 1 hour since the previous call). Contact details for the claimant are held on WSP.

Contact with the claimant is unsuccessful

If contact with the claimant is unsuccessful the AD makes a referral to a visiting officer. See Operational guidance >> Core Visit Referral Guide >> Para 60 Making a Referral and completes form MF37 (referral for visit form).

Contact with the claimant is successful

If contact with the claimant is successful and their identity can be confirmed, the AD informs the claimant that they had an interview which they did not attend. They explain the consequences of this and ask the claimant for their reasons for failing to attend the interview.

When the claimant gives their reasons, the AD should be aware of all current guidance relating to claimants with complex needs and refer to the Vulnerable Customer Hub. See Home>>Directorates>>Change & Products>>Social Justice>>Vulnerable Customer

Good reason process for Work Capability Assessment Summary

How to decide if a claimant has good reason for failing to return the UC50 medical questionnaire or failing to attend or participate fully in their Work Capability Assessment

Content

When a claimant has failed to return their UC50 questionnaire or failed to attend or participate fully in their Work Capability Assessment (WCA), the decision maker (DM) considers whether there is good reason for the failure before making a decision.

To establish whether good reason has been shown, the DM gathers all the relevant information from the claimant's records

The DM looks for any evidence relating to the claimant's health condition and the reasons why they failed to return the questionnaire, failed to attend or failed to participate fully with the WCA process.

Evidence to consider

When considering whether the claimant has shown good reason, the DM ensures that they fully explain how they made their determination by recording:

- findings about the claimant's state of health at the time and the nature of their disability
- what evidence was considered
- · what findings were made on the evidence
- what steps they took to contact the claimant
- · whether the claimant is vulnerable

- whether there were previous failures and whether good reason was accepted
- · the reasons for determining good reason

Claimant's state of health

The claimant may state that they were unable to attend a face—to—face assessment due to the state of their health on the date of the appointment and may have difficulty producing further medical evidence to support their statement as GPs are not obliged to provide this. Failure to provide such evidence is not in itself a reason for refusing to accept that good reason was shown.

The DM should consider whether the stated health problem prevented the claimant from contacting the assessment provider to re–arrange the appointment.

The DM should also consider the nature of the claimant's health condition and whether it could reasonably have lead to the claimant being, for example, incapacitated, forgetful, confused, unmotivated or too anxious to comply with the process because of their health condition.

Example 1

Luke has an appointment for an examination on 5.8.13. He contacts the assessment provider to say that he can't attend as he has flu and arranges another appointment for 19.9.13. Luke fails to attend the new appointment. He returns the BF223 form explaining that the reason he did not attend was because he still had flu. Luke's recent fit note shows low back pain as the reason for Limited Capability for Work (LCW). The DM determines that good reason was not shown. Flu is incapacitating but usually only lasts for a week where there are no complications. It was unlikely that he still had flu since the previous appointment, and in any event it should not have prevented him from contacting the assessment provider.

Example 2

Katie has an appointment for an examination on 2.10.13 but fails to attend. She states on the BF223 form that she woke up on the day of the appointment with severe dental pain and had to wait in the dentist's surgery for an emergency appointment. She required root canal treatment, and was prescribed a 5 day course of antibiotics for an infected wisdom tooth. As a result she was unable to attend the appointment. The DM accepts that good reason was shown for the failure to attend.

Nature of the claimant's health condition

Decision makers are reminded that the nature of the claimant's disability is a factor that must be taken into account when considering whether good reason has been shown.

The DM should make every effort to ensure that all sources of evidence are considered before making a determination on good reason. Evidence about the claimant's health may be obtained from:

- form BF223 (good reason enquiry form)
- any fit notes supplied
- MDGT (Manual Data Gather Tool)
- UC50 questionnaire where one is available
- any evidence previously submitted that is relevant
- UC85 report where one is available.

This may be particularly relevant in cases where the claimant has:

- mental health conditions affecting memory or concentration
- a learning difficulty, for example where this affects comprehension
- · medication which affects memory or concentration
- a sensory impairment such as being registered blind

Example 1

Jack is in receipt of Universal Credit and becomes unfit for work. His fit note states that he has problems with his feet. Jack fails to return form UC50 and did not give any reasons for this failure. The WCA process was terminated. Jack's social worker then returned the form which had been completed for him, explained that Jack had significant difficulties understanding correspondence and often delayed seeking help as he panicked. Good reason is accepted and the WCA process is reinstated.

Jack then fails to attend an examination on 24.9.13 and doesn't reply when the BF223 form is issued. The evidence in the questionnaire is that Jack has severe learning difficulties, limited literacy skills and lives alone. The DM accepts that Jack had good reason for failure to attend the examination because due to the nature of his disability he is unable to comply with the process. The DM determines that Jack is likely to need ongoing support for his Universal Credit claim and refers for consideration of Personal Acting Body/Corporate Acting Body. They also request that the assessment provider arranges a home visit.

Example 2

Tamara is required to attend for an examination on 13.9.13. She rings the examination centre and says that she is due to attend an out—patient clinic at the same time. She is offered and accepts a further appointment for 24.9.13 which she fails to attend.

Tamara doesn't return form BF223 or respond to attempts to phone her. There is no evidence in the claim form, fit note or UC50 which indicates that her health condition is likely to impact her ability to attend the appointment. The DM determines that Tamara did not have good reason for the failure to attend, and treats her as not having LCW.

Example 3

Alex is in receipt of Universal Credit and becomes unfit for work stating that he suffers from agoraphobia, anxiety and depression. He doesn't return the questionnaire. Alex contacts the assessment provider to ask for a home visit after being asked to attend the examination centre. The appointment is rearranged and he is advised to get a supporting letter from his GP. Alex fails to attend an examination 15.8.13. In the BF223 form he states that his GP had told him he would fax a letter to the examination centre requesting a home visit. He had no copy of the letter and was struggling to keep organised. There is no information on the assessment provider's computer system about a request for home visits but the DM has no reason to doubt Alex's explanation. The DM accepts that Alex had good reason for his failure to attend. The DM also asks the assessment provider to arrange a home visit.

Previous Work Capability Assessment attended

The fact that the claimant has previously attended the WCA and been found to have LCW/LCWRA is not sufficient reason that good reason hasn't been shown for a subsequent failure to attend. The DM should consider each case on its merits.

Example

Lorraine, who has mental health problems, is awarded LCW following previous application of the WCA. She is referred for a further WCA 18 months later and doesn't return the questionnaire. She also fails to attend for examination.

In response to the BF223 form, Lorraine's CPN says that due to the strength of the medication taken for several years for paranoid schizophrenia, Lorraine often forgets to carry out daily tasks or attend appointments. The fact that Lorraine had previously managed to attend for examination despite her memory problems is not of itself sufficient to show that there was no good reason for the current failure.

Repeated failures

Where a claimant repeatedly fails to attend an examination, and good reason is accepted, the DM should consider the previous reasons given critically.

It may be appropriate to obtain further evidence to support any explanation for the subsequent failure. Wherever possible the DM should contact the claimant to discuss the importance of attendance. However, the fact that good reason was previously accepted is not a reason for concluding that the claimant should be aware of the requirement to attend a subsequent appointment.

The same reasons for the failure may continue to demonstrate that good reason is shown, for example a claimant who has a long term mental health problem who can only intermittently comply with the processes necessary to manage their Universal Credit claim due to effects of their condition and its treatment.

Example

Viktor failed to attend for an examination. He didn't respond to the BF223 form and the WCA process was ended. He subsequently provided evidence that on the day of the appointment that he had a panic attack on his way to the assessment centre. He was taken to hospital and discharged later in the day. The DM accepts that good reason was shown and the WCA process is reinstated.

Viktor fails to attend the subsequent appointment. He replies on the BF223 form saying that he had a panic attack and felt unable to leave the house on the day of the appointment and was too anxious to explain this at the time. The DM accepts that good reason was shown and asks the assessment provider to consider a home visit.

The DM may wish to consider whether it would be possible to ensure that the claimant doesn't fail to attend future appointments where the nature of the claimant's health condition is the reason for good reason being accepted, and the health condition is likely to be long term. For example, if the evidence shows that the claimant isn't capable of arranging their own affairs, is Personal Acting Body/Corporate Acting Body action appropriate? Should a home visit be recommended?

The guidance below is specifically concerned with the Universal Credit Operational Guidance around safeguarding claimants with mental health conditions.

I have included the relevant content from 6 pieces of Knowledge Management guidance which provide a background into the Universal Credit guidance for operations regarding complex health conditions including mental health.

These 6 pieces provide some background information in relation to the Universal Credit guidance on claimant's with mental health needs:

HEALTH OVERVIEW provides guidance relating to how your health condition or disability affects your Universal Credit

LONG TERM HEALTH CONDITION OR DISABILILITY explains how if you report a long-term health condition or disability which is likely to last more than 28 days you may be referred to have a Work Capability Assessment (WCA). This applies whether you are in or out of work. You may need to complete a written questionnaire (UC50) to give details of your health condition and how it affects your everyday life. This will help to decide whether you need to, attend a WCA.

DIAGNOSIS OF CLAIMANT CAPABILITY AND CIRCUMSTANCES provides guidance on how to determine the things that affect the work a claimant is expected to look for and accept if offered. During work search interviews, the work coach (WC) identifies issues that affect the work a claimant is expected to look for and accept if offered.

RECORDING COMPLEX NEEDS explains how details of claimants with complex needs are recorded so they can access DWP services. The guidance states and refers the DWP employee to further information which can be found at the DWP Vulnerability hub in relation to vulnerable Customers

CLAIMANT WITH COMPLEX NEEDS ATTENDS AN AJCS INTERVIEW provides guidance for when an Accessing Jobcentre Services (AJCS) appointment for a complex needs, any urgent documents provided by the claimant are sent immediately to the Service Centre.

SETTING WORK RELATED REQUIREMENTS contains guidance on how to set work related requirements for a claimant during interview and in what circumstances the work related requirements can be switched off.

Health Overview Description

The information you must provide about your health condition or disability and how this may affect your Universal Credit

Overview

At this stage you will not be able to make an initial claim to Universal Credit if you have a health condition or disability. If you have already claimed Universal Credit and you or your partner develop a health condition or disability you will need to provide medical evidence to support this.

You must also give contact details for your GP or healthcare specialist who may be asked for further information about your health condition or disability. These details can be found on fit notes and letters from your GP or healthcare specialist.

What you should do if you become sick

If you and/or your partner become sick and are unable to work or look for work, you must report this by contacting Universal Credit. You must provide a:

- self-certificate to cover your initial period of sickness (a self-certificate can cover a period of 7 days or fewer)
- · fit note if your sickness lasts more than 7 days

You can self-certificate by contacting Universal Credit or by sending a letter. This must give the reason and the period of your sickness.

If you are sick for more than 28 days

If you are sick for more than 28 days, or your health condition or disability is already long term, you may be referred for a Work Capability Assessment.

Reporting a change in your circumstances

You must report any changes to your health condition or disability, or any other change in your circumstances, to Universal Credit as soon as possible.

Why we ask it?

To decide if you are entitled to any of the Limited Capability for Work Elements of Universal Credit

Long-term health condition or disability Description

How you may get extra Universal Credit if you have a long-term health condition or disability

Content

If you report a long-term health condition or disability which is likely to last more than 28 days you may be referred to have a Work Capability Assessment (WCA). This applies whether you are in or out of work.

You may need to complete a written questionnaire (UC50) to give details of your health condition and how it affects your everyday life. This will help to decide whether you need to, attend a WCA.

Eligibility for the Limited Capability for Work element

Following the WCA, Universal Credit will decide which of the following applies to you:

- you are fit for work
- you have limited capability for work (LCW)
- you have limited capability for work and work-related activity (LCWRA)

If you have LCW or LCWRA you will be eligible to get an extra amount of Universal Credit:

- where you have LCW you will get the lower rate the Limited Capability for Work element
- where you have LCWRA you will get the higher rate the Limited Capability for Work and Work-Related Activity element

If you have a partner and both of you both qualify for the LCW or LCWRA element, only one will be awarded, whichever is the higher.

For information about how the LCW or LCWRA element affects the Carer element see 'Carers with LCW'.

When the LCW and LCWRA elements are paid

In most cases, the LCW and LCWRA elements are paid 3 months after the first day on which you provide medical evidence if you are out of work. If you are in work, please contact your adviser to find out when these elements would be paid to you.

Diagnosis of claimant capability and circumstances Summary

How to determine the things that affect the work a claimant is expected to look for and accept if offered

Diagnosing work related requirements

During work search interviews, the work coach (WC) identifies issues that affect the work a claimant is expected to look for and accept if offered.

Claimant's particular personal circumstances will determine the actual requirements set.

A full diagnosis of the claimant's circumstances and capacity for work will help the WC determine:

- · a realistic job requirement
- · availability requirements
- · travel to work time
- work search requirements including mandatory job applications
- work preparation requirements including Mandatory Work Activity
- any other work related requirements

These should be reviewed and updated throughout the claim.

Carers who have regular caring responsibilities for a person(s) who has a physical or mental impairment

Carers who have regular caring responsibilities for a person(s) who has a physical or mental impairment are required to be available for paid work for as many hours as their caring responsibilities allow. They may have their hours of availability adjusted at the WC's discretion taking into account the claimant's caring responsibilities. The claimant must have reasonable prospects of finding paid work, more work or better paid work.

Exercising discretion

In exercising discretion, the WC should consider:

- that a claimant is expected to do all that is reasonably possible to fit their caring responsibilities with the local labour market
- other care arrangements which may be available (including childcare)
- the impact of their caring responsibilities on the hours that they are able to work
- the care requirements of the individual being cared for

Health conditions

Where a claimant has a physical or mental impairment which substantially affects their ability to carry out paid work, they are required to be available for paid work for as many hours as their health condition allow.

They may have their work related requirements adjusted at the WC's discretion taking into account the:

- · claimant's health condition
- regular treatment regime related to the claimant's health condition
- · hours their health condition allows them to work
- type of employment their health condition allows them to do
- environmental conditions their health allows them to work in for example lighting, background noise, dust
- impact of their health condition on their ability to travel

Where the WC adjusts the claimant's work related requirements because of their health condition the claimant does not have to have reasonable prospects of getting paid work. However, the adjustments must be reasonable and connected with their health.

Recording complex needs Summary

Recording details of claimants with complex needs so they can access DWP services

Content

When a claimant with complex needs contacts the Department for Work and Pensions (DWP), their customer journey must be comparable in quality and outcome to those who are non-complex.

Further information can be found at the DWP Vulnerability Hub Home>Directories>Change & Products>Social Justice>Vulnerable Customers

For DWP purposes the description of vulnerability is 'An individual who is identified as having complex needs and/or requires additional support to enable them to access and use DWP services'.

Universal Credit claimants are classified as having complex needs if their circumstances increase the likelihood that they will have difficulty:

- · accessing Universal Credit
- · proving eligibility to Universal Credit
- maintaining conditionality
- · maintaining their Universal Credit account
- maintaining their finances

A consequence of this is that the claimant may experience difficulties with:

- understanding information
- interpreting situations
- making decisions
- giving consent
- · communicating information or their views
- requesting specialist or additional help and support

The following are examples of life events, personal circumstances and health issues/disability that could impact the claimant's ability to access DWP benefits and/or use our services. Some

individuals may not require additional support even though they are experiencing some or all of the examples given below (this is not a complete list):

- Adoption children
- Age older person
- Age older person financial abuse (pensions)
- Age Young Person 16 & 17 year olds
- · Bereavement, Death recently bereaved
- Caring responsibilities
- · Children child care
- · Children who leave care/over 18 care leavers
- Crime Victim of crime
- Cultural Barriers, Language barriers English not their first language
- Debt/indebted
- · Divorce/termination of Civil Partnerships
- Domestic Violence and abuse
- Drug and alcohol dependency
- Gender recognition/transgender
- Homeless (person without accommodation, in temporary accommodation, frequent change of address)
- Just Left hospital
- Leaving the Armed Forces, Ex-armed forces personnel and their spouses/partners
- Lone Parent
- MAPPA individuals (Multi Agency Public Protection Arrangements)
- Offender/ex Offender/ Prisoners/Detainees
- Race Immigration status/refugee/asylum seeker/people arriving from abroad
- Redundancy
- Retirement
- Rural Isolation
- Suicide and/or Self Harm Declaration
- Supported by Troubled Families programme

Recording claimant's complex needs on WSP

If the AD/TA/DM has identified the claimant has complex needs, they must establish if the complex need falls into one of the WSP category/categories and record this, these are:

- offender status
- carers marker
- ex HM forces
- · partner of (Ex) HM Forces member,
- people who have claimed benefit for 22 out of the last 24 months
- NEET (Not in Education, Employment or Training)
 (NEET only applies to 18 year olds)
- homeless
- · claimed incapacity benefit within the last 6 months
- care leaver
- refugee status
- has special arrangements (if the Yes radio button is populated this will display active special arrangements)
- health barriers to work (if the Yes radio button is populated this will display the active health barriers to work)

If the complex need falls into one or more of the categories above, the AD/TA/DM should select all the relevant categories.

When completing the notes in the claimant's record, bear in mind that the claimant may fall into more than one category. The notes made by the AD/TA/DM must be factual and for DWP business use only. They should ensure they meet the requirements of the Data Protection Act and that the information is relevant to the contact, accurate and current. The note must not include any more information than is necessary.

Claimant is aged 16/17

If claimant is 16/17 years old they are automatically considered to have complex needs.

Claimant with complex needs attends an AJCS interview Summary

Sending urgent documents to the Service Centre when a claimant is identified as having complex needs attends an AJCS interview

Content

When an Accessing Jobcentre Services (AJCS) appointment for a complex needs claimant is booked by the Service Centre, the PASA at the Universal Credit outlet ensures that any urgent documents provided by the claimant are sent immediately to the Service Centre.

Claimants with complex needs are identified by the Service Centre and their records are noted accordingly, but they may also be identified when they attend the AJCS interview if their behaviour suggests they are vulnerable.

Setting work related requirements Summary

How to set work related requirements for a claimant during interview

Content

During every work search interview, the work coach (WC) identifies the things that affect the type of work a claimant is expected to look for and accept if offered. The WC establishes the type, location, hours and pattern of work a claimant is expected to look for and be available for. Claimants are normally expected to look for any work that they are capable of doing that pays the national minimum wage(or above) and that is within 90 minutes travelling distance from their home. Claimants are normally expected to look for full time work.

Claimant's particular personal circumstances will determine the actual requirements set.

Temporarily switching off requirements

There will be some circumstances, where WC's will identify claimant circumstances that mean work search and availability requirements will be temporarily switched off.

Regulations give a list of the particular circumstances where this is appropriate. This applies to claimants:

- with a self certificate/medical evidence of illness of up to 14 days
- receiving medical treatment outside of Great Britain (for up to 6 months)
- participating in structured recovery orientated course of alcohol or drugs dependency treatment (for up to 6 months
- who have arrangements made by a protection provider for up to 3 months. (This can be extended in exceptional circumstances)

WC's can, at their discretion also temporarily switch off work search and work availability requirements where it would be unreasonable to require the claimant to comply with a work search or work availability requirement:

- if the claimant is carrying out work preparation or voluntary work preparation
- if the claimant has a fit note beyond the first 14 days of sickness. Nevertheless, the WC may decide that the claimant should be subject to other work related requirements, such as work preparation and/or work focused interview requirements

If the claimant is not available for work or work search activity

This is used in cases such as a condition that affects the claimant meaning they are temporarily not available for any work, work preparation or work search activities. For example, a claimant participating in a recognised drugs rehabilitation treatment programme, or incapable of work due to a mental or physical condition.

DWP Central Freedom of Information Team

e-mail: freedom-of-information-request@dwp.gsi.gov.uk

Our Ref: Fol3209

DATE: 19 August 2015

Dear Mr Stevens

Thank you for your Freedom of Information request of 31 July 2015. You asked:

'I would like to ask for the release of complete chapters in universal credit operational procedures which refer to any of the following:

- 1) Safeguarding visit (possibly also referred to as core visit)
- 2) Vulnerability (defined as people with mental health conditions or learning disabilities, or conditions affecting communication/cognition)
- 3) 'Minimum requirements' which DWP must comply with when dealing with the cases of people with a history of mental ill health

Please identify the name of each chapter when responding.

I have made a similar request in the past but I would expect that there have been updates to UC guidance since then. In addition, the previous response only released extracts from unnamed chapters (rather than full chapters).'

It may be helpful to know that "The Freedom of Information Act 2000" provides people with a right of access to recorded information held by public authorities such as DWP. The Act does not extend to requests for views, comments or questions about a particular matter. Your request can be in the form of a question, but DWP does not have to answer if this would mean creating information that is not already held in a recorded form. Public authorities are not required by the Act to provide an interpretation of data.

Please find enclosed the following 5 chapters of Universal Credit Operational guidance:

Chapter 1 - Recording Complex Needs

Chapter 2 - Identifying and recording complex needs/requirement for additional support on Work Services Platform

Chapter 3 - Fail to attend (FTA) account developer actions for claimants with complex needs

Chapter 4 - Handling sanction referrals and notifications

Chapter 5 - Considering a claimant's complex needs and requirement for additional support before taking sanction action.

If you have any querie above.	es about this letter pleas	se contact me quoting	the reference numbe	r
Yours sincerely,				

DWP Strategy Fol Team

Your right to complain under the Freedom of Information Act

If you are not happy with this response you may request an internal review by e-mailing <u>freedom-of-information-request@dwp.gsi.gov.uk</u> or by writing to DWP, Central Fol Team, Caxton House, Tothill Street, SW1H 9NA. Any review request should be submitted within two months of the date of this letter.

If you are not content with the outcome of the internal review you may apply directly to the Information Commissioner's Office for a decision. Generally the Commissioner cannot make a decision unless you have exhausted our own complaints procedure. The Information Commissioner can be contacted at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow Cheshire SK9 5AF www.ico.gov.uk

Chapter 1

Recording complex needs

Recording details of claimants with complex needs so they can access DWP services

KM Content

When a claimant with complex needs contacts the Department for Work and Pensions (DWP), their customer journey must be comparable in quality and outcome to those who are non complex.

Further information can be found at the DWP Vulnerability hub.

For DWP purposes the description of vulnerability is 'An individual who is identified as having complex needs and/or requires additional support to enable them to access and use DWP services'.

Universal Credit claimants are classified as having complex needs if their circumstances increase the likelihood that they will have difficulty:

- · accessing Universal Credit
- · proving eligibility to Universal Credit
- · maintaining conditionality
- · maintaining their Universal Credit account
- maintaining their finances

A consequence of this is that the claimant may experience difficulties with:

- · understanding information
- · interpreting situations
- making decisions
- giving consent
- communicating information or their views
- requesting specialist or additional help and support

The following are examples of life events, personal circumstances and health issues/disability that could impact the claimant's ability to access DWP benefits and/or use our services. Some

individuals may not require additional support even though they are experiencing some or all of the examples given below (this is not a complete list):

- Adoption children
- Age older person
- Age older person financial abuse (pensions)
- Age Young Person 16 & 17 year olds
- Bereavement, Death recently bereaved
- Caring responsibilities
- Children child care
- Children who leave care/over 18 care leavers
- Crime Victim of crime
- Cultural Barriers, Language barriers English not their first language
- Debt/indebted
- Divorce/termination of Civil Partnerships
- Domestic Violence and abuse
- Drug and alcohol dependency
- Gender recognition/transgender
- Homeless (person without accommodation, in temporary accommodation, frequent change of address)
- Just Left hospital
- Leaving the Armed Forces, Ex-armed forces personnel and their spouses/partners
- Lone Parent
- MAPPA individuals (Multi Agency Public Protection Arrangements)
- Offender/ex Offender/ Prisoners/Detainees
- Race Immigration status/refugee/asylum seeker/people arriving from abroad
- Redundancy
- Retirement
- Rural Isolation
- Suicide and/or Self Harm Declaration
- Supported by Troubled Families programme

Establishing whether a complex need has already been recorded

When a claimant who has complex needs has been identified, the Account Developer/Telephony Agent/Decision Maker (AD/TA/DM) selects the 'personal' screen within the Work Services Platform (WSP) to establish whether the complex need has been recorded.

The AD/TA/DM then views 'notes' from the navigation menu in WSP to view any information regarding complex needs that are not in the 'personal' screen.

Recording claimant's complex needs on Work Services Platform (WSP)

If the AD/TA/DM has identified the claimant has complex needs, they must establish if the complex need falls into one of the WSP category/categories and record this, these are:

- offender status
- carers marker
- ex HM forces
- partner of (Ex) HM Forces member,
- people who have claimed benefit for 22 out of the last 24 months
- NEET (Not in Education, Employment or Training) (NEET only applies to 18 year olds)
- homeless
- claimed incapacity benefit within the last 6 months
- care leaver
- refugee status
- has special arrangements (if the Yes radio button is populated this will display active special arrangements)
- health barriers to work (if the Yes radio button is populated this will display the active health barriers to work)

If the complex need falls into one or more of the categories above, the AD/TA/DM should select all the relevant categories.

If there is a complex need that does not fall into one of the WSP categories, the AD/TA/DM will record the complex need in notes on the claimant record by:

- 1. Selecting 'notes'.
- 2. Selecting hyperlink, 'add new note'.
- 3. Recording the complex need(s).
- Selecting anywhere outside of the notes box (to save the note).

When completing the notes in the claimant's record, bear in mind that the claimant may fall into more than one category. The notes made by the AD/TA/DM must be factual and for DWP business use only. They should ensure they meet the requirements of the Data Protection Act and that the information is relevant to the contact, accurate and current. The note must not include any more information than is necessary.

Recording the claimant's special arrangements on WSP

When the claimant is accessing DWP services it may be necessary to provide special arrangements, on WSP this is known as 'special needs'.

If the AD/TA/DM has identified a claimant who has special arrangements, they select:

- 1. 'Yes' radio button ('has special needs').
- 'Special needs' (this becomes available when the 'yes' radio button is selected).
- 3. 'Add new special need' from the ribbon.
- 4. 'Appropriate special need' type from the look up record (Private Room, Remote management, Room fitted with an audio loop, Text phone for hearing, Text phone for speech, The claimant requires an interpreter to be provided, The claimant will bring their own interpreter, Trusted intermediaries, Wheel chair access).
- 5. 'Ok'.

The AD/TA/DM books a specific Work Related Interview (WRI) and will check whether there is an outstanding interview for the claimant with their Work Coach. Where there is no appointment on WSP the AD/TA/DM should book a specific WRI with the owning Work Coach to ensure the claimant is receiving the support required for their complex needs.

The AD/TA/DM decides whether the claimant needs additional time to complete any potential interview, this will be set in the schedule variants, not in the special arrangements box, see Booking appointments.

Claimant is aged 16/17

If claimant is 16/17 years old they are automatically considered to have complex needs. The age of the claimant can be viewed in the claimant screen within WSP.

Chapter 2

Identifying and recording complex needs/requirement for additional support on Work Services Platform

How to identify and record any complex needs/requirement for additional support on the Work Services Platform. This item does not include information on how to support a claimant with complex needs/requirement for additional support. Further information will be produced

Agents must record any complex needs/requirement for additional support on Work Services Platform (WSP).

The meaning of complex needs/requirement for additional support

Complex needs/requirement for additional support refer to the needs of claimants who may have problems following the standard Universal Credit journey or meeting their responsibilities. This could be a temporary or recurring state of need and could mean there are barriers which prevent the claimant from finding work.

A claimant may have complex needs/requirement for additional support if they have problems with any of the following:

- accessing Universal Credit
- proving their eligibility
- maintaining their conditionality
- · maintaining their online account
- managing their finances

Universal Credit aims to:

- support claimants with complex needs/requirement for additional support whilst they have a need
- encourage them to move onto the standard
 Universal Credit journey when their need is met

 provide extra support where appropriate to help claimants along the journey

Agents will identify if a claimant has complex needs/requirement for additional support and record the reasons for this on the Work Services Platform (WSP).

System checks for complex needs/requirement for additional support

The agent checks to confirm if any existing complex needs/requirement for additional support are registered on the WSP.

The agent selects 'Personal' on the 'Claimant' screen and views the claimant's personal information for example:

- Carers marker
- Ex-HM forces
- Homeless
- Claimed Incapacity Benefit Within Past 6 Months
- Refugee Status
- Has Special Needs
- Offender Status

The agent should also select 'Notes' from the Claimant screen to check for any other relevant information.

Deciding if a claimant has complex needs/requirement for additional support

If there are no existing complex needs/requirement for additional support the agent obtains all relevant information from the claimant. This could either be during a diagnostic interview or by an agent supporting a claimant with complex needs/requirement for additional support in making a claim to Universal Credit. The following indicators may suggest that the claimant has complex needs/requirement for additional support:

- mental health conditions
- · memory loss caused by medication
- · learning difficulties
- · reading and writing difficulties
- visual impairment
- drug or alcohol dependency
- domestic violence

- English isn't the claimant's first language
- internet use is restricted (for example, due to criminal conviction)

This list is not exhaustive.

The agent makes a decision on whether the claimant has any complex needs/requirement for additional support without making any assumptions.

Deciding the correct category for complex needs/requirement for additional support

If it is decided that a claimant has complex needs/requirement for additional support agents will consider which of the following support categories is appropriate:

- accessibility and communication
- domestic violence
- prisoners
- armed forces and other UK exception groups (for example, working abroad)
- homeless
- drug or alcohol dependent
- 16/17 year olds

Registering complex needs/requirement for additional support

The agent registers the claimant's complex needs/requirement for additional support as follows:

Accessibility and communication

- On the WSP Claimant screen the agent selects 'Personal'.
- 2. Updates 'Has Special Needs' radio button to 'Yes'. Be aware that if special arrangements are already noted this doesn't always mean that there will be complex needs/requirement for additional support. For example the claimant may be a wheelchair user but they

- can still be a standard Universal Credit claimant.
- 3. Selects 'Active Special Needs' (this becomes available when 'Yes' has been selected).
- Selects 'Add New Special Need' from the toolbar menu to open the 'Special Needs' screen.
- 5. Selects look up from the 'Special Need Type' field, for example Wheelchair access.
- 6. Enter 'Extra Information' as appropriate.
- 7. Select 'Save & Close'.

Domestic violence

- On the WSP Claimant screen the agent selects 'Notes'.
- 2. At the top of the 'Notes' field selects the hyperlink 'Add A New Note'.
- Records all information about the domestic violence. All data must be factual and for Department for Work and Pensions (DWP) business use only so that the requirements of the Data Protection Act are met. The information must be relevant, accurate and up to date. Don't record more information than is necessary.
- 4. Selects 'Save'.

Prisoners

- 1. On the WSP Claimant screen the agent selects 'Personal'.
- 2. Selects 'Offender Status' and choose the relevant option from the drop-down list:
- Currently in prison
- Ex-Offender
- Released from custody within 13 weeks of claim

Once the option has been selected the 'Offender status' field will be populated.

Armed forces and other exception groups

- On the WSP Claimant screen the agent selects 'Personal'.
- 2. Selects the 'Ex-HM Forces' check box.

Homeless

- 1. On the WSP Claimant screen the agent selects 'Personal'.
- 2. Selects the 'Homeless' check box.

Drug or alcohol dependent

- On the WSP Claimant screen the agent selects 'Notes'.
- 2. At the top of the 'Notes' field select the hyperlink 'Add a new note'.
- 3. Records the relevant information regarding drug or alcohol dependency. All data must be factual and for DWP business use only so that the requirements of the Data Protection Act are met. Information must be relevant, accurate and up to date. Don't record more information than is necessary.
- 4. Selects 'Save'.

Refugees

- On the WSP Claimant screen the agent selects 'Personal'.
- 2. Selects the 'Refugee Status' drop down list.
- 3. Selects the appropriate value.
- 4. Selects 'Save'

Chapter 3

Fail to attend (FTA) account developer actions for claimants with complex needs

How to consider the complex needs requirements for a claimant who has failed to attend an appointment in order to establish the reason for non-attendance and to re-arrange as appropriate

If an account developer (AD) receives the following CAMLite task:

Task type: Generic clerical

Sub type: Action required

Notes: FTA: action required

SLA: Immediate

They check all systems to ensure that information which would explain why the claimant has failed to attend (FTA) their appointment isn't already held, for example the claimant is sick, or a child has joined the household etc. See Fail to attend (FTA) system checks to establish fail to attend action, suspension action or termination action.

In the claimant record of the Work Services Platform (WSP) the AD selects 'Personal' from the navigation pane and checks for any complex needs. See Identifying and recording complex needs/requirement for additional support on Work Services Platform.

The AD checks any complex needs against the appointment type for which the claimant has FTA.

Claimants who use Universal Credit outlets as a correspondence address are considered to have complex needs.

Homelessness is not an automatic indication of complex needs. If a homeless claimant is able to access Universal Credit services whilst using a correspondence address (other than a Universal Credit outlet) the AD may decide, taking everything into consideration, that the claimant doesn't have complex needs.

Claimant doesn't have complex needs

If the claimant has no complex needs and has FTA a work-related interview, see Fail To Attend (FTA) notifying a claimant of a potential sanctionable failure.

The AD updates WSP notes confirming their actions, including details of any conversation with the claimant and any letters issued.

Claimant has complex needs

If the claimant has complex needs, the AD decides if this is a consecutive failure. A consecutive failure is one or more failures of any appointment type immediately preceding the present failed appointment.

If this is a consecutive failure, the WC must raise a doubt. This is because the claimant has had 2 consecutive FTAs and they have already been made aware of the consequences of this. See Handling sanction referrals and notifications.

If this isn't a consecutive failure, the AD attempts to contact the claimant by telephone (a minimum of 3 attempts must be made to contact the claimant and each attempt should be at least 1 hour since the previous call). Contact details for the claimant are held on WSP.

If the AD is unable to contact the claimant by telephone, or having contacted the claimant they have failed to confirm their identity using three to five questions from DWP Bogus Caller Guidance, they must terminate the call and determine what type of appointment the claimant has failed to attend. See DWP Home Page >> DWP A-Z >> S - Security >> DWP Security Portal Home >> Security Guidance >> Bogus Caller Main Guidance and Fail to attend (FTA) system checks to establish fail to attend action, suspension action or termination Action.

If the FTA is:

- an 'initial' failure to attend with complex needs –
 the AD accesses the UC212 letter located in
 Supporting documents(s) for the Decision Making
 and Appeals process
- a failure to attend a 'work-related interview' with complex needs – the AD accesses the UC114 letter located in Supporting document(s) for the Decision Making and Appeals process

The AD populates the appropriate letter with the date of the FTA, sends one copy to the claimant and uploads a further copy to the Document Repository System (DRS).

The AD then creates a generic clerical CAMLite task with the following details:

- Task type: Generic clerical
- Sub type: Action required
- Notes: 'Complex needs FTA'. (include if the
 claimant is homeless and if they use a Universal
 Credit outlet as a correspondence address);
 'Check for contact, letter issued (enter date). If no
 claimant contact refer to DWP visits' (include if
 the claimant is using a Universal Credit outlet as
 a correspondence address, do not refer to DWP
 visits)

SLA: 5 working days

The AD updates WSP notes confirming their actions, including details of any conversation with the claimant and any letters issued and then saves and closes the original WSP task.

If this is a consecutive failure the AD refers to the decision maker (DM) for a consideration of the doubt. See Handling sanction referrals and notifications.

The AD then attempts to contact the claimant by telephone (a minimum of 3 attempts must be made to contact the claimant and each attempt should be at least 1 hour since the previous call). Contact details for the claimant are held on WSP.

Contact with the claimant is unsuccessful

If contact with the claimant is unsuccessful the AD makes a referral to a visiting officer. See Operational guidance >> Core Visit Referral Guide >> Para 60 Making a Referral and completes form MF37 (referral for visit form).

The AD then creates the following CAMLite task:

Task type: Generic clerical

· Sub type: Action required

Notes: 'Check DWP visiting result'

SLA: 5 working days

The AD updates WSP notes confirming their actions, including details of any conversation with the claimant and any letters issued.

Contact with the claimant is successful

If contact with the claimant is successful and their identity can be confirmed, the AD informs the claimant that they had an interview which they did not attend. They explain the consequences of this and ask the claimant for their reasons for failing to attend the interview.

When the claimant gives their reasons, the AD should be aware of all current guidance relating to claimants with complex needs and refer to the Vulnerable Customer Hub. See Home>>Directorates>>Change & Products>>Social Justice>>Vulnerable Customers.

The AD must establish which type of interview the claimant has FTA.

Claimant has FTA the Work Search Review interview

In WSP the AD selects 'Intervention regime' and decides if this is to be changed (it is anticipated that it will not be changed).

If the regime is to be changed the AD:

- Selects the required frequency from the dropdown list.
- Chooses a time and date suitable for the claimant by selecting the preferred slot from the displayed times in the 'Look up record' field.
- Selects 'Save' so that the 'Next intervention' field updates and displays the date of the next intervention.
- 4. Informs the claimant of the new time and date.

Claimant has FTA a work-related interview

If the claimant has FTA a work-related interview the appointment must be re-booked. The AD:

- 1. Selects 'Interview history'.
- 2. Selects the hyperlink 'To load interview records click here'.
- Selects the relevant failed to attend interview and re-arranges the interview by selecting the 'Add' tab to search for an interview.
- 4. Selects the 'Interview' calendar icon on the task bar.
- 5. Selects 'Scheduler' under 'Information' on the left side of the screen.
- 6. Selects the drop-down list on the 'Interview type' box.
- Selects the required interview type from the list provided and ask the claimant when they are available. This should always be as soon as reasonably possible.
- 8. Selects the 'Calendar' icon next to the preferred start box.
- 9. Selects the earliest start date from the displayed calendar.

- Selects the time drop-down list on the preferred start box line.
- 11. Selects the earliest start time from the dropdown list displayed.
- 12. Selects the 'Calendar' icon next to the preferred latest box.
- 13. Selects the correct latest start date from the displayed calendar.
- 14. Selects the time drop-down list on the latest start box line.
- Selects the latest start time from the drop down list displayed.

At this point the AD to establishes if the 'Special needs' tick box at the top of the interview screen has been completed. This is because the AD will need to know if the claimant's special arrangements will result in a longer interview so that they can change the duration of the interview.

If the claimant has special needs see Booking appointments. This relates to any interview that may require the interview duration to be either shortened or lengthened, for example work-related interview specific.

The AD then continues with this process in WSP and:

- 1. Selects 'Search'.
- 2. Chooses the 'Select' button of the required interview time on the list.
- 3. Selects 'Book' below the interview time box.

The AD confirms the interview with the claimant and the consequences of non-attendance before ending the call.

If the claimant has FTA the work-related interview the AD updates WSP notes confirming their actions, including the details of any conversation with the claimant and any letters issued. They then save and close the original CAMLite task.

Chapter 4

Handling sanction referrals and notifications

How to determine the next steps when there is reason to believe a claimant has not met a work-related requirement

When there is reason to believe that a claimant has not met a work-related requirement, an agent must invite the claimant to show good reason.

If a doubt has been raised by a provider see Provider doubt referrals and sanctions

There are no specified time constraints in law for a claimant to show good reason for a failure.

Claimants should be given sufficient time to comment and to provide evidence appropriate to the particular circumstances of the failure. This should be flexible to reflect an individual's circumstances.

In most cases the benchmark should be 5 days where the information is to be by post. Reference to days means working days (excluding Saturdays, Sundays and bank holidays). Allowances must be made when a notification is made by post.

Depending on the individuals circumstances the agent can set the date for less than 5 days where:

- the agent contacts the claimant by phone or face to face (and the agent is satisfied that the claimant is clear about what they are being asked to provide, and do not need to collate and provide evidence)
- the claimant has agreed the preferred method of contact is by electronic means such as by text, email or their Universal Credit account – if the claimant agrees to provide evidence face to face, by telephone or electronically, they must be informed of the consequences of not providing good reason by a certain time (some electronic methods won't be available during Pathfinder, for example the claimant's Universal Credit account)

The agent can set the date for longer than 5 days where the claimant

- needs to seek information or evidence from a third party
- has an agent or representative

 has complex needs/requirement for additional support, for example a health condition, life event, personal circumstances that may have prevented them from replying at this time (these may include a pre-existing health condition or existing caring or parental responsibilities that may be relevant)

The agent should be aware that sanction referrals are not appropriate if a second opinion of the Claimant Commitment results in changed requirements, and the claimant fails to do something which on review is no longer relevant.

Recording on the Work Services Platform that a claimant may have failed to meet a work-related requirement

When the agent identifies that the claimant may not have met a requirement, this is recorded on the claimant's record on the Work Services Platform (WSP).

The agent:

- Selects 'Doubt' from the 'Common' list in the claimant's record. A history of previous doubts raised will then be displayed.
- Selects 'Add new doubt'. This opens at the 'Doubt' screen.
- 3. Selects a 'Doubt type' to open a new window.
- 4. Makes a selection from the 'Name' column. The 'AR code' field will automatically be populated once a 'Doubt type' has been selected. A full list of AR codes and descriptions in WSP can be found in the table below.
- 5. Selects the 'From date' and enters the date of failure.
- 6. Selects the 'To date' if this relates to a low or lowest level sanction (for a work-preparation or interview requirement) and the claimant has met the compliance condition. The date should be the day before the claimant meets the compliance condition.

- 7. Records if evidence has been asked for by updating the 'Evidence requested' radio button (this defaults to 'No') and sets to 'Yes' if evidence has been requested. If this is set to 'Yes', the 'Review date' field appears and sets a date 5 working days from today. This can be changed if appropriate. The agent should leave the radio button as 'No' if all the evidence has been received at the point of the doubt being raised on WSP.
- 8. Selects the 'Source' from the look up, the list of options are Case Manager, Work Service Manager, Work Services Adviser, Work Services officer, Provider, New Claim, Initial Work Preparation Interview, Initial Work Focused Interview, Claimant Commitment-Interview to sign the Claimant Commitment.
- 9. Selects 'Notes' and then 'Add new note'.
- 10. Populates 'Notes' with brief detail of the sanctionable doubt, for example claimant failed to give a CV. The agent should record if the claimant is homeless or using a Universal Credit outlet as a correspondence address.
- 11. Selects outside the 'Notes' box to save.
- 12. Selects 'Save' on WSP.

The agent identifies the correct good reason data gather notification letter relevant to the sanction level:

- Higher or Medium UC71 Good reason gather medium/high
- Low UC72 Good reason gather low
- Lowest UC70 Good reason gather lowest level sanctions

The agent copies the work-related requirements from the current Claimant Commitment and any compliance conditions stated for low or lowest sanction, including dates and times if appropriate.

The agent issues the notification to the claimant by hand if they are in the office or by post if not, informing them that Universal Credit isn't satisfied they have met one of their work-related requirements, to give them the opportunity to provide any evidence and the date the form must be returned to the Mail Opening Unit (MOU).

If the agent is in conversation with the claimant they should encourage them to answer the questions on the Good Reason Gather notification, and emphasise the importance and relevance of providing reasons.

The agent should ask the claimant for their reasons for failing to comply with their work-related requirements. If the claimant is able to provide their reasons, the agent records the responses on the Good Reason Gather notification if they have not already done so, and in the 'Notes' box on the relevant doubt in WSP.

The agent should make every effort to gather this information at the point the doubt is raised, but should allow the claimant five working days to provide this information and any supporting documentary evidence if necessary. This will help to speed up the decision making process.

The completed Good Reason Gather notification is uploaded to DRS:

- Jobcentre agents must send this to MOU for uploading to DRS marked 'No CAMLite action required'
- Service Centre agents must upload to DRS as per existing DRS learning

If the claimant has a potential Low or Lowest sanctionable failure, their Universal Credit could be cut for every day until they comply. Low level sanctions are also followed by fixed periods. This must be explained to the claimant and the agent must ensure the claimant understands what they need to do to meet the requirement and stop their potential Low or Lowest sanction period from building. The claimant's work search activity will be reviewed as part of the process if necessary.

The agent records the following in the 'Notes' section of the 'Doubt' screen:

- type of notification issued (see notification list above)
- the date of issue and when it has to be returned by
- method of notification

- for Low and Lowest level sanctions, include the compliance condition and the date of compliance if appropriate
- details of the failure (for example, claimant failed to attend a Work Search Interview)
- · any contact with the claimant since the failure
- any other relevant information

Creates a CAMLite task to include:

Task type: Generic Clerical

Sub-type: Action Required

- Start task by: this will be 7 days after the 'Good reason gather letter was issued
- SLA: 7 days
- Notes Sanctionable failure evidence received?

Reviewing a task when evidence has been requested

When a sanctionable doubt has been raised and evidence has been requested from the claimant, the agent receives a task to review if the evidence has been received.

The agent views the evidence task.

If this process is being undertaken by the Jobcentre the task will be a WSP task. The 'Task tab' for the claimant is displayed and the subject header will read 'Evidence not received' for (claimant's name)'. The task will state this even if the evidence has been received.

If this process is being undertaken by the Service Centre the task will be a CAMLite task this is to review whether the sanctionable failure evidence has been received.

The agent:

- Selects the evidence task, subject 'Evidence not received for (claimant's name' by selecting the subject line from 'My activities' on WSP homepage. The 'Task tab' for the claimant is displayed.
- 2. Selects the doubt type in the 'Regarding' field.

- Selects the 'Notes' link to view any notes recorded in the doubt. This will list any evidence which has been requested and details of the failure.
- 4. Checks if the evidence has been received.
- Navigates to DRS for any related post and locates any responses received from the claimant

If evidence has been received, see Gathering evidence for DM referrals.

Claimant does not have complex needs

The claimant will have been allowed five working days to provide good reason for the work-related failure.

If the claimant doesn't have complex needs, regardless of whether they have provided evidence by the date on the task, the agent should consider Treat as Straightforward or the case should be referred to the decision maker (DM).

The agent marks the WSP task as complete. See Gathering evidence for DM referrals.

Claimant has complex needs and/or requires additional support

If a claimant is identified as having complex needs and/or requires additional support, the agent should consider this and determine whether additional action is required. The WSP Special Needs Indicator may be checked if complex needs have previously been identified. The agent should refer to the Vulnerable Customer Hub.

If the claimant has already been allowed an extension to return the Good Reason Gather letter and/or evidence, the agent completes the relevant task before considering Treat as Straightforward or referring to the DM.

Any previous extension will be recorded in the notes on the relevant doubt in WSP. The process ends here for claimants who have already been allowed an extension to return the Good Reason Gather evidence. See Gathering evidence for DM referrals.

For claimants who have not already had an extension the agent uses their discretion to consider if a Department for Work and Pensions (DWP) visit is required based on their previous knowledge of the claimant and the notes on the claimant record. The agent should refer to the Vulnerable Customer Hub.

If the claimant is unable to deal with calls or notifications from DWP, the agent completes an UCMF37 form and refers to DWP Visits. The agent records the action in the 'Notes' on the relevant doubt in WSP.

To update WSP the agent:

- 1. Selects 'Doubt' from the common menu.
- 2. Selects the relevant doubt.
- 3. Selects 'Notes.' and then 'Add new note'.
- Populates 'Notes' with details of the DWP visit request, the reason for the DWP visit and review of the good reason evidence.
- 5. Selects outside the notes box to save.

A task is required to review the outcome of the visit and to check the evidence received. If this process is being undertaken by the:

- Service Centre a CAMLite task must be set,
 See Agent Tasks Types and Sub types
- Jobcentre a WSP task must be set, see Setting a task on Work Services Platform

The WSP task title is: 'Evidence not received (claimant's name)' If the task is:

- for receipt of evidence the agent enters the date agreed with the claimant
- to review if the visit has been completed the agent enters a date of seven days after the referral was made

The CAMLite task is set with the following details:

Task type: Generic clerical

· Sub-type: Action required

· Start task by: 7 days from todays date

SLA: 7 days

 notes: 'Claimant with Complex needs. Has evidence been received/follow up DWP visit'

See Agent tasks and cases overview.

If the claimant is able to deal with telephone calls and notifications from DWP, the agent obtains their contact details from the 'Contact details' section in WSP and tries to contact the claimant.

Call successful

If the call is successful the agent asks the standard security questions to confirm the claimant's identity before continuing with the call.

The agent explains the purpose of the call, that the claimant has not responded to a written request for good reason for not complying with a work-related requirement. The agent informs the claimant of the importance of providing this information and should use language that the claimant understands, taking into consideration their complex needs.

If the claimant denies receiving the Good Reason Gather notification, the agent locates the original from DRS and reads the sanctionable doubt and the questions to the claimant.

The agent should use their questioning and listening skills to ensure that the claimant understands all the information being given during the conversation, taking into account claimant's circumstances and specifically their complex needs. The claimant's responses and behaviours will help the agent do this.

When talking to the claimant the agent should assess whether they are, for example:

- distressed
- not understanding
- · giving monosyllabic answers
- upset
- frustrated

Gathering evidence

If the claimant is able to understand and provide the evidence by telephone, the agent asks the questions from the original notification and records the claimant's responses word for word in 'Notes' on the specific doubt.

If the claimant is unable to understand, the agent should ask if a member of the household is available to help them provide the evidence required. If help is available the agent gathers this information. Where the claimant has any documentary evidence to support their reasons, the agent advises them to send this with the original letter to the MOU.

The agent then advises the claimant of next steps, which is to refer the evidence provided to the decision maker and ends the call. See Gathering evidence for DM referrals.

To update WSP the agent:

- 1. Selects 'Doubt' from the common menu.
- 2. Selects the relevant doubt.
- 3. Selects 'Notes' and then 'Add new note'.
- 4. Populates 'Notes' with details of the discussion including the evidence gathered.
- 5. Selects outside the notes box to save.

If the claimant fails to understand the need to provide the evidence, the agent should determine if any existing support is available to help provide the requested information.

If support from intermediaries such as the Citizens Advice Bureau, Welfare Rights or Age UK are available, the agent agrees a new return date for the evidence notification and allows the claimant an extension of five working days to provide the evidence. In exceptional circumstances more time can be allowed and a return date can be agreed with the claimant. The agent ends the call.

To update WSP the agent:

- Selects 'Doubt' from the common menu.
- 2. Selects the relevant doubt.
- 3. Selects 'Notes' and then 'Add new note'.
- Populates 'Notes' with details of the discussion including awaiting evidence, intermediary support, extension given and the date the evidence is required by.
- 5. Selects outside the notes box to save.

The agent sets a task to check for evidence received and/or to follow up DWP visits. If this process is being undertaken by the:

- Service Centre a CAMLite task must be set
- Jobcentre a WSP task must be set (see Setting a task on Work Services Platform)

The WSP task is set to mature in 5 working days and is titled: 'Evidence not received (claimant's name)' If the task is:

- for receipt of evidence the agent enters the date agreed with the claimant
- to review if the visit has been completed the agent enters a date of seven days after the referral was made

The CAMLite task is set with the following details:

- Task type: Generic clerical
- Sub-type: Action required
- Start task by: 7 days from todays date
- SLA: 7 days
- Notes: 'Claimant with Complex needs. Has evidence been received'

See Agent tasks and cases overview.

If the claimant is unable to understand and cannot obtain support from an intermediary or a member of their household, the agent completes an UCMF37 to request a DWP visit.

The agent advises the claimant that DWP Visits will be in touch to help them complete the Good Reason Gather evidence and ends the call.

To update WSP the agent:

- 1. Selects 'Doubt' from the common menu.
- 2. Selects the relevant doubt.
- 3. Selects 'Notes' and then 'Add new note'.
- 4. Populates 'Notes' with details of the discussion including a visit requested, awaiting evidence.
- 5. Selects outside the notes box to save.

A task is required to check for evidence received and/or to follow up DWP visits.

If this process is being undertaken by the:

- Service Centre a CAMLite task must be set
- Jobcentre a WSP task must be set (see Setting a task on Work Services Platform)

The WSP task is set to mature in five working days and is titled 'Evidence not received (claimant's name'. If the task is:

- for receipt of evidence the agent enters the date agreed with the claimant
- to review if the visit has been completed the agent enters a date of seven days after the referral was made

The CAMLite task is set with the following details:

- Task type: Generic clerical
- · Sub-type: Action required
- Start task by: 7 days from todays date
- SLA: 7 days
- Notes: Claimant with Complex needs. Has evidence been received /follow up DWP Visit

See Agent tasks and cases overview.

Call unsuccessful

If the call is unsuccessful or the claimant fails the security questions, the agent issues a reminder letter to the claimant to provide good reason evidence.

The agent:

- Locates in Supporting document(s) for the Decision Making and Appeals process:
 - UC38 for high and medium level sanctions
 - UC38a for low level sanctions
 - UC38b for lowest level sanctions
- 2. Populates the notification letter.
- Prints the letter, if this action is being undertaken by the Jobcentre the agent prints two copies.
- 4. Posts the letter to the claimant.

The notification is uploaded to DRS:

- agents in the Service Centre should upload to DRS as per existing DRS learning
- agents in the Jobcentre should send the notification to MOU for upload onto DRS marked 'No CAMLite action required'

To update WSP the agent:

- 1. Selects 'Doubt' from the common menu.
- 2. Selects the relevant doubt.
- 3. Selects 'Notes' and then 'Add new note'.
- Populates 'Notes' with a brief summary of the action taken, including notification posted to the claimant.
- 5. Selects 'Save and Close'.

A task is required to check for evidence received and/or to follow up DWP visits. If this process is being undertaken by the

- Service Centre a CAMLite task must be set,
 See: Agent Tasks Types and Sub types
- Jobcentre a WSP task must be set (see Setting a task on Work Services Platform)

The WSP task is set to mature in five working days and is titled: 'Evidence not received (claimant's name)'. If the task is:

- for receipt of evidence the agent enters the date agreed with the claimant
- to review if a visit has been completed the agent enters a date of seven days after the referral was made

The CAMLite task is set with the following details:

- Task type: Generic clerical
- Sub-type: Action required
- Start task by: 7 days from todays date

- SLA: 7 days
- Notes: 'Claimant with Complex needs. Has evidence been received'

See Agent tasks and cases overview.

Claimant makes contact following a fail to attend

If a claimant receives a notification to provide good reason for their failure to attend (FTA) they may contact Universal Credit by telephone or face to face.

The agent should encourage the claimant to provide the reasons for their FTA whilst in conversation. This will speed up the decision making process.

If the claimant is able to provide reasons, the agent should gather and record the information.

Once the agent has gathered the information they should consider re-compliance. See Claimant has met a compliance condition and the agent can update the sanction.

The agent should then consider Treat as Straightforward or refer to a DM. See Gathering evidence for DM referrals.

Recording a decision for cases of failure to attend a Work-Related Interview or Work Search Review

In cases of failure to attend a Work-Related Interview or Work Search Review cases only – if the claimant provides information or evidence that complies with the list below then there is no need to refer the matter to a DM.

The factors that count as good reason are:

- suffering a temporary period of sickness (for 2 periods of sickness in any 12 months - the 2 periods cannot run consecutively)
- a domestic emergency (life event) -- including serious illness, death, funeral or emergency affecting a relative or close friend or death of someone the claimant is caring for
- claimant was detained in police custody for 96 hours or less, then released
- claimant was required to attend court or tribunal

- claimant has attended a job interview and can provide sufficient evidence, for example, a letter from employer/name of interviewer
- adverse weather conditions consider if the local conditions are such that the claimant could not reasonably be expected to attend
- claimant has accessed the domestic violence conditionality easement within the past 12 months
- the claimant was at work or travelling to work

The agent should be satisfied that the reasons given apply to the above list and can be treated as straight forward without a referral to the DM. However, if the reasons given meet the criteria above but the agent doubts validity, good reason cannot be accepted and the case must be referred to the DM.

To record the decision, with the claimant's WSP record open at the 'Doubt' screen, the agent:

- 1. Selects the relevant 'Doubt'.
- 2. Selects 'Close doubt' from the tool bar.
- 3. Selects look up menu under 'Outcome'.
- 4. Selects 'Good reason' from the list displayed and then 'OK'.
- Selects 'Date calendar' from the 'Decision made on' field and selects the relevant date.
- Selects the 'Decision made by' field and records the name of the agent who made the decision and then 'OK'.
- 7. Selects 'Save and close'.

If the agent is face-to-face with the claimant they inform them that good reason has been accepted and no further action will be taken. If the agent is not face-to-face with the claimant, they attempt to contact the claimant by telephone to inform them of the decision.

If the claimant can't be contacted by phone and the agent is not in face-to-face conversation with them, the agent completes and sends a UC105 Good Reason accepted to the claimant. The agent also sends a copy of the notification to the MOU marked 'No CAMLite action'.

If the evidence provided by the claimant is not accepted as good reason the agent refers the case to a DM.

Referring the case to a Decision Maker

When a case needs referring to a DM, the agent sends details of the failure to the AD to be forwarded to the National Decision Making team.

For further information on the details to include in a referral, see Gathering evidence for DM referrals.

To record the referral on WSP, the agent:

- Selects 'Refer doubt' on the toolbar. A list of AR codes can be found in the table below.
- 2. Enters today's date in the 'Referred on' field.
- 3. Completes the 'Destination' field with 'National Decision Making'.
- 4. Records if evidence has been received by updating the 'Evidence received' radio button, this defaults to 'No' and should be set to 'Yes' if evidence has been received. The agent updates 'Notes' with:
 - a list of any evidence provided by the claimant including the evidence held on DRS and the date it was sent to the MOU
 - any relevant contact with the claimant
 - where the claimant has failed to attend a work-related interview any interviews booked or conducted since the failure was identified
 - any details of compliance, for example, claimant attended with CV
- 5. Selects 'Save and close'.

If the doubt relates to a Failed To Attend (FTA) decision, the AD sets the following CAMLite task for the AD DM team:

Task Type: Failed to attend

· Sub Type: Action Required

Start task by: todays date

SLA: 3 days

Note: 'Claimant FTA <dd/mm/yy>, decision required'

If the doubt relates to any decision other than a Failed To Attend (FTA) decision, the agent creates the following CAMLite task to the decision maker to make a decision on a sanctionable failure:

• Type: Decision Maker Complex

Sub Type: Sanction Decision

· Start task by: todays date

Conditionality

SLA: 3 days

 Notes: 'Data gather letter sent on <dd/mm/yy> and <sanction referral type>'

Work related

See: Agent tasks and cases overview

Name

Work Services Platform AR Codes for sanction referrals

When recording a sanction referral on WSP, the agent selects the relevant category from the table below:

Level

			Group	requirement type and example of failure
UCH/001	Loss of employment through misconduct	High	All work-related requirements group	
UCH/002	Leaving employment voluntarily	High	All work-related requirements group	

Code

UCH/003	Lose pay through misconduct	High	All work-related requirements group	
UCH/004	Lose pay voluntarily	High	All work-related requirements group	
UCH/005	Fail to apply for a job	High	All work-related requirements group	A work availability requirement
UCH/006	Failing to accept a job	High	All work-related requirements group	A work availability requirement
UCH/007	Fail to undertake Mandatory Work Activity	High	All work-related requirements group	A work preparation requirement, e.g. provider told claimant to take work based placement
UCM/008	Fail to undertake all reasonable work search action	Medium	All work-related requirements group	A work search requirement, for example look in newspapers, UJ account etc.
UCM/009	Fail to be available to take up work	Medium	All work-related requirements group	A work search requirement, for example on holiday, caring
UCL/010	Fail to comply with an interview	Low	All work-related	A work related interview requirement, for

	requirement		requirements group	example work search review, WSC interview
UCL/011	Fail to comply with an interview requirement (self employed)	Low	All work-related requirements group	A work-related interview requirement
UCL/012	Fail to attend a skills assessment	Low	All work-related requirements group	A work-preparation requirement, for example Maths and English
UCL/013	Fail to participate in an employment programme	Low	All work-related requirements group	A work-preparation requirement, for example work programme
UCL/014	Fail to undertake work experience or work placement	Low	All work-related requirements group	A work preparation requirement
UCL/015	Fail to develop a business plan	Low	All work-related requirements group	A work preparation requirement, Self employed
UCL/016	Fail to improvement personal presentation	Low	All work-related requirements group	A work preparation requirement, for example dress appropriately for interviews, have a wash, take studs out of

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UCL/017	Fail to participate in training	Low	All work-related requirements group	A work preparation requirement, for example ESOL
UCL/018	Fail to prepare or maintain a CV	Low	All work-related requirements group	A work preparation requirement
UCL/019	Fail to comply with requirement to provide evidence or confirm compliance	Low	All work-related requirements group and work preparation group	For example print off of UJ access, as they are not compelled to give us access but have to show they have an account
UCL/020	Fail to comply with requirement to report specified change in circumstances relevant to work related requirements	Low	All work-related requirements group and work preparation group	For example reduced hours of volunteering but didn't inform of greater availability to job search, caring responsibilities end but they don't inform
UCL/021	Fail to undertake particular specific work search action	Low	All work-related requirements group	All Work Related Requirements Group, didn't upload CV to UJ or set up UJ
UCL/022	Fail to comply with work preparation	Low	Work preparation group, (claimants have LCW but not	Requirements which help keep them motivated by preparing

requirement LCWA) All workthem to return to work related requirements as soon as they are group able to, taking into account their capability, for example attend computer course UCLL/023 Fail to comply with Work-focused Lowest Work coach Worka work focussed interview group, (e.g. focused interview only interview LP's and carers) requirement UCLL/024 Do Not Use UCLL/025

Chapter 5

Do Not Use

Considering a claimant's complex needs and requirement for additional support before taking sanction

Considering vulnerability before sanctioning Universal Credit for claimants

If a claimant does not attend or take part in a Work Related Interview (WRI), or fails to complete a Work Related Activity (WRA) the agent must consider if a safeguarding visit is appropriate before starting any sanction action. The agent should consider the claimant's circumstances to establish if the claimant has complex needs and/or requires additional support.

DWP Visiting is intended to help give claimants the chance to comply with work-related requirements or to provide evidence of good reason why they didn't meet their requirements.

The agent can check all available systems for any indication that the claimant has complex needs and/or requires additional support, for example:

- in the Special Needs section of WSP
- in the Health Barriers section of WSP
- notes on the Agent Portal

If there is evidence the claimant has complex needs and/or requires additional support a referral to the DWP Visiting Service for that claimant will be appropriate.

Refer to DWP Visiting Service using form MF37. The reason for the visit and the action required is made clear on the MF37. Record that this action has been taken in 'General Notes' and set a task to review if the visit has been undertaken.

If the DWP Visiting Service considers that the claimant's circumstances are such that the WRI is not needed, they should contact the agent in the Universal Credit Outlet immediately for agreement. For more information see the Core Visit Referral Guide.

Outcome of Home Visit

There will be two outcomes from the DWP Visiting Service:

- the need for a WRI is considered
- the Sanction process continues

The need for a WRI is considered

WRI is needed

If the claimant still needs a WRI the DWP Visiting Service will contact the Service Centre to book one. In all instances, the Jobcentre decide the next steps based upon the discussion with the DWP Visiting Service

The DWP Visiting Service should confirm the new date and time for the WRI with the Jobcentre and the claimant. The adviser should book the appointment on WSP and issue a formal appointment letter.

WRI not needed

The DWP Visiting Service will contact the Service Centre and advise them a WRI is not needed. The SC should set a task to book a WRI in the future.

The Sanction process

The visiting officer notifies the referring adviser and the sanction process continues where they determine:

 the claimant does not have complex needs or requires additional support

- the claimant is not at home
- the claimant refuses to co-operate and the purpose of the visit cannot be completed