Generic Overview of End to End IB(IS) Reassessment

Introduction

1. The purpose of this guidance is to support both operational managers and staff in delivering the IB (IS) Reassessment process. It provides an overview of both the user and claimant journey for IB(IS) Reassessment.

2. This guidance does not replace existing Employment and Support Allowance (ESA) guidance.

3. For the purpose of this document the term ‘incapacity benefits’ refers to Incapacity Benefit (IB), Severe Disablement Allowance (SDA) and Income Support (IS) paid to people on the grounds of an illness or disability. It does not refer to Disability Living Allowance (DLA). Personal Independence Payment (PIP), Armed Forces Independence Payment (AFIP) or Attendance Allowance (AA).

4. IB (IS) Reassessment will deliver a number of key objectives:

• Claimants in receipt of incapacity benefits will move to a more active benefit, with back to work support available to all

• Applying the Work Capability Assessment (WCA) to everyone on incapacity benefits will deliver consistent outcomes and ensure that the right people are on the right benefit

• People with health conditions are treated equally over time and receive fair levels of financial support

• The most severely disabled people and those with the most severe health conditions for whom work may not be a realistic aspiration will receive a higher rate of benefit and will not be expected to look for work unless they wish to

• No one moving from incapacity benefits to ESA will see a reduction in the level of their benefit entitlement at the point of change

5. A great deal of consultation and claimant insight work has been undertaken to ensure that we ‘get it right’ for our claimants. More information about IB (IS) Reassessment can be found on the IB (IS) Reassessment Homepage

6. Jobcentre Plus will reassess approximately 1.5 million claimants currently on incapacity benefits between 2010 and 2014 to see if they qualify for ESA. As part of this process all claimants will undertake the WCA.

7. The reassessment of claimants who live abroad will be arranged by the International Pension Centre (IPC) (link is external).

8. IB (IS) Reassessment started on 28 February 2011.

9. Cases will be selected for reassessment by the Pension Strategy Computer System (PSCS) using the Personal Capability Assessment (PCA) prompt. Once this matures it will be regarded as the prompt for WCA action.

10. When the PCA/WCA prompt matures an initial notification letter will be sent to the claimant informing them that their benefit is to be reassessed with a view to seeing if they qualify for ESA and advising them of the next steps.

11. An automated Claimant Account Management (CAM) task will be created to notify Contact Centre Directorate (CCD) to make the Initial Outbound Call to the claimant.

12. An automatic Assessment referral is created via the MSRS in order to start the WCA process.

Retention of documentation and remote store action

13. In cases that have been allowed, the Reassessment case documents should be retained until the ESA claim becomes dormant. The case should then be given a retention date in accordance with the Benefit Specific section of the Records Management Policy (link is external) for ESA.

14. In cases where ESA has not been allowed, the RS Web Team should be notified and a retention date be given in accordance with the Benefit Specific section of the Records Management Policy for IB.

Retention of Mortgage Sub-File

15. All IS Mortgage sub-files in allowed cases, should be re-branded as an ESA Mortgage sub-file and kept with the ESA claim. This will ensure that the sub-file is given a retention date in accordance with the Records Management Policy for ESA once the ESA claim becomes dormant.

16. In October 2008 ESA replaced incapacity benefits for new claimants. More details about ESA can be found here (link is external).

17. All claimants undertaking the IB (IS) Reassessment process, will be required to undertake a WCA, which examines not only how limited their capability for work is, but also their capability to undertake some work-related activity.

18. Many claimants will be moving from a benefit that has required little or no interaction with Jobcentre Plus. Most will have had no previous requirement to undertake work-related activity and will be moving to a much more work-focused benefit. IB (IS) Reassessment claimants will be subject to an initial mandatory WFI. Some claimants may be required to attend a second WFI depending on the timescale of their reassessment.

19. Following the results of the WCA, if the claimant is found to have Limited Capability for Work (LCW) or Limited Capability for Work Related Activity (LCWRA), they will receive a telephone call from BCD to gather any missing information data and then the claimant’s ESA entitlement will be calculated. The claimant will then receive another telephone call to advise them of their ESA entitlement and the next steps, followed by their ESA award notification letter.

20. Claimants who are found not to have LCW/LCWRA will also be contacted by telephone. They will be advised of the WCA outcome and provided with information, including the options available to them. If they wish to claim JSA, there will be a warm handover to CCD where a new claim can be taken as necessary. Claimants in receipt of Income Support (IS) on the grounds of disability may be able to remain on IS if they have another condition of entitlement.

21. Currently, ESA claimants who are placed in the WRAG are subject to a WFI. IB (IS) Reassessment claimants in the WRAG will also be expected to participate in WFIs.

22. It is important that all staff in Jobcentre Plus are aware of and keep up to date with key points and lines to take (link is external), as during IB(IS) Reassessment there could be intense media interest around the process.

23. Claimants may make enquiries at any time, resulting in an increase of claimant contact to any of the Jobcentre Plus delivery arms. Details of key points can be viewed in the overview of Key points (link is external) on the IB (IS) Reassessment Project Homepage.

Claimant Journey

24. To ensure the claimant understands what is happening and what is required of them at every stage in the reassessment process, a number of key 'touchpoints' have been built into the claimant journey. If the claimant is Non-English speaking the existing guidance should be followed to assist the claimant.

25. For claimants who live in Wales and who choose to deal with their business in Welsh, refer to the IB (IS) Reassessment Welsh Language guidance.

Touchpoint	Step in Claimant Journey – Up to Limited Capability for Work determination
1	Claimant may become aware about the forthcoming changes to benefit
2	Claimant receives an initial notification letter from Benefit Centre Directorate (BCD) informing them that changes are about to commence and advising them on the next steps
3	Claimant receives a telephone call from CCD to give them further information and advice and to find out if they need extra help with the process. CCD will also ask claimants who are in receipt of Child Dependency Allowance (CDA) if they agree to a claim being submitted to Child Tax Credits (CTC).If the claimant agrees a CTC claim will be made on their behalf. If the claimant refuses they will be issued a clerical Consequences Notification Letter.
4	Claimant receives ESA50 (link is external) Limited Capability for Work Questionnaire to complete and return to the Health Assessment Advisory Service
5	Claimant is contacted by the Health Assessment Advisory Service to arrange a Work Capability Assessment (WCA) if required. The appointment will be

	confirmed in writing
6	Claimant attends the WCA.
Touchpoint	Step in Claimant Journey – Limited Capability for work Met under WCA
7	Claimant may be contacted by BCD to gather missing information if required data has not successfully transferred to JSAPS from Income Support Computer System (ISCS) or Pension Strategy Computer System(PSCS)
8	Claimant receives a telephone call from a Claimant Service Officer (CSO) in BCD advising them of decision on ESA entitlement and next steps
9	Claimant receives ESA award notification letter detailing allocation into either the Support Group (SG) or the Work Related Activity Group (WRAG) and amount of transitional addition (TA) (where appropriate). Touchpoints 10–11 applies to claimant in WRAG. For SG claimants the journey ends here, however touchpoints 10-11 will apply at the claimant's request.
10	Claimants placed in the WRAG are contacted by the Diary Admin Support Officer (DASO) in Jobcentre Directorate (JD) to arrange a Work-focused Interview (WFI)
11	Claimant attends/fails to attend the WFI
Touchpoint	Step in Claimant Journey – Limited Capability for Work Not met under WCA
12	Claimant receives a Decision assurance/Disallowance telephone call from a Decision Maker (DM) in BCD to inform them of the possible entitlement decision and to advise them of their options. The claimant will be given the opportunity to submit further evidence to support their claim. If the claimant has nothing further to add, then the disallowance decision is explained to them so that they can request a reconsideration of the decision. If the claimant satisfies another condition of entitlement for IS they may stay on that benefit. If the claimant wishes to claim Jobseekers Allowance (JSA), a warm hand over to CCD will be completed to take their claim details.

13	Claimant receives a letter informing them of the termination of their award of incapacity benefits and the decision on ESA entitlement
Touchpoint	Claimant submits a valid Appeal against Limited Capability for Work determination
14	Claimant returns leaflet GL24 or sends letter of appeal
15	The DASO in JD is notified of WCA appeals received and appeals outcomes via a JP Process report or a Work Available Report (WAR)
16	The DM will call the claimant and confirm that they have had a reconsideration of their case and asked if there is any further information the claimant would like to tell us to support the appeal
17	The claimant will receive ESA assessment phase rate until the appeal outcome is known

FROM 28 OCTOBER 2013

26. If a claimant wishes to dispute a decision that has been notified on or after 28 October 2013, they cannot make an appeal straight away. They must first have a mandatory reconsideration (MR).

27. Once they have received notification of the outcome of the MR, the claimant can then lodge an appeal with Her Majesty's Courts and Tribunal Service (HMCTS). A claimant cannot lodge an appeal with the Department.

Touchpoint	Claimant requests a Mandatory Reconsideration of the Limited Capability for Work determination
14	Claimant requests MR.
15	If claimant has not already received a Decision assurance/Disallowance telephone call, an Outbound Reconsideration Call must be made to explain the decision and ask if there is any further information/evidence.

16	If the decision cannot be revised, two copies of the Mandatory Reconsideration Notice (MRN) are sent to the claimant, this includes information about appealing to HMCTS.
Touchpoint	Claimant submits a valid Appeal against Limited Capability for Work determination
17	Claimant submits appeal to HMCTS.
18	Appeal response request received from HMCTS notifying the Department that an appeal has been submitted.
19	The DASO in JD is notified of WCA appeals received and appeals outcomes via a JP Process report or a Work Available Report (WAR)
20	The claimant will receive ESA assessment phase rate until the appeal outcome is known

Claimant requests the start date of their IB (IS) Reassessment

28. Where the claimant contacts a Benefit Centre to ask for the date their IB (IS) Reassessment will commence, they should be told that it will be prior to April 2014.

29. To ensure all cases are handled effectively and efficiently for claimants between now and 2014 start dates for reassessment may have to be adjusted. This smoothing means that, whilst the Personal Capability Assessment (PCA) date can be used as a guide for when a claimant may start reassessment, in some cases it may be before or after this date.

30. The PCA date should be given if the claimant requests the specific date their reassessment will commence. It should be emphasised that this date may change.

31. If the claimant calls the Contact Centre to ask the date their reassessment will start, the Claimant Service Agent will tell the claimant that it will be prior to April 2014.

32. However if the claimant then requests the specific date their reassessment will commence, a handover template will be completed and the claimant will need to be contacted.

33. If the claimant asks at the Jobcentre the date their reassessment will start Jobcentre staff will tell the claimant that it will be prior to April 2014.

34. However if the claimant then requests the specific date their reassessment will commence they will be advised to use the warm phone unless they are vulnerable or unable to use the phone. A member of staff from the Jobcentre will contact the Benefit Centre on behalf of the claimant and when giving the PCA date it should be emphasised that the date may change.

User Journey

35. Below is an overview of the user journey for IB(IS) Reassessment. Full details and guidance can be found in the Directorate specific chapters of this guidance.

User Journey – Up to Limited Capability for Work determination

Step	Action
1	PSCS issues initial notification letter
2	An automated CAM task is created for CCD to make the initial Outbound Call
3	Initial Outbound Call made to claimant
4	JSAPS Gateway triggers referral to the Health Assessment Advisory Service via MSRS
5	The health Assessment Advisory Service returns the Assessment report through MSRS and a CAM task is created
6	Consider all evidence provided by the claimant and the Health Assessment and Advisory Service in order to determine if claimant has LCW

User Journey – Claimant has Limited Capability for Work

Step	Action
1	Claimant may be contacted by BCD to gather missing information if required data has not successfully transferred to JSAPS from ISCS/PSCS
2	JSAPS will calculate the effective date and award benefit
3	Claimant receives a telephone call from a Claimant Service Officer (CSO) in BCD advising them of their decision on ESA entitlement and next steps
4	Claimant receives ESA award notification letter and allocation into the appropriate group. Touchpoints 5-6 applies to claimants in the WRAG. For SG claimants the

	journey ends here, however touchpoints 5-6 will apply if the claimant requests
5	Notification is sent to DASO in JD via a JP Process report or a WAR to arrange a WFI for claimants placed in the WRAG
6	Claimant attends/fails to attend the WFI

User Journey – Claimant does not have Limited Capability for Work

Step	Action
1	View ISCS to check if the claimant has another condition of entitlement to IS for example; carer or lone parent
2	DM in BCD contacts claimant by telephone to explain the decision and options available
3	BCD staff offer claimant a reconsideration
4	If claimant states intention to appeal against WCA decision, issue leaflet GL24. FROM 28 OCTOBER 2013 If claimant states intention to appeal against WCA decision, advise them that they must first request a MR of the decision. They may appeal directly to HMCTS following receipt of the MRN. .
5	BCD issues a letter informing them of the termination of their award of incapacity benefits

User Journey – Claimant does not have Limited Capability for Work – Appeals

Step	Action
1	Appeal received – check for IS or JSA claim

2	Check that claimant has current medical evidence covering from the date of disallowance.
3	If claimant has medical evidence and the appeal is valid, the user puts ESA into payment at the assessment rate. If not, medical evidence is requested
4	DM carries out a reconsideration of the decision
5	If Reconsideration unsuccessful case is sent to ESA owning office for Appeal and all further actions. Appeal papers are constructed
6	Appeal is sent to the Tribunals Service
7	Appeal decision received
8	Appeal outcome unsuccessful – terminate payment
9	Appeal outcome successful - claimant receives an allowance letter and allocation into the appropriate group, based on the Tribunal's findings
10	Claimant will receive payment of full ESA rate including any Transitional Addition (TA) and arrears if appropriate
11	Notification is sent to DASO in JD via a Work Available Report (WAR) to advise appeal outcome

User Journey FROM 28 OCTOBER 2013 – Claimant does not have Limited Capability for Work – Mandatory Reconsiderations and Appeals

Step	Action

1	Claimant requests MR.
2	If claimant has not already received a Decision assurance/Disallowance telephone call, an Outbound Reconsideration Call must be made to explain the decision and ask if there is any further information/evidence.
3	If the decision cannot be revised, two copies of the Mandatory Reconsideration Notice (MRN) are sent to the claimant, this includes information about appealing to HMCTS.
4	If claimant still unhappy with decision - submits appeal to HMCTS.
5	Appeal response request received from HMCTS notifying the Department that an appeal has been submitted.
6	Appeal received – check for IS or JSA claim.
7	Check that claimant has current medical evidence covering from the date of disallowance.
8	If claimant has medical evidence and the appeal is valid, the user puts ESA into payment at the assessment rate. If not, medical evidence is requested.
9	Appeal papers are constructed and sent to HMCTS.
10	Appeal decision received
11	Appeal outcome unsuccessful – terminate payment
12	Appeal outcome successful - claimant receives an allowance letter and allocation into the appropriate group, based on the Tribunal’s findings
13	Claimant will receive payment of full ESA rate including any Transitional Addition (TA) and arrears if appropriate

14	Notification is sent to DASO in JD via a Work Available Report (WAR) to advise appeal outcome

36. MI covering the claimant journey has been developed and will be delivered from CAM and JSAPS, as well as MSRS for the WCA process.

Introduction to National Reassessment for Benefit Centre Directorate

Introduction

1. The purpose of this guidance is to provide a high level overview of National Reassessment for managers and staff in Benefit Centre Directorate (BCD).

2. This guidance is in addition to existing Employment and Support Allowance (ESA) guidance.

Overview of National Reassessment

3. National Reassessment will commence on 23 May 2011. From this date customers currently in receipt of Incapacity Benefit (IB), IB Credits only cases where Income Support is in payment, Severe Disablement Allowance (SDA) and Income Support (IS) on the grounds of incapacity will be selected for reassessment dependent on their Personal Capability Assessment (PCA) maturity date. If they are found to have Limited Capability for Work (LCW), they will be moved to ESA.

4. A customer who is entitled to IB /SDA, but who does not receive any payment because of the level of their occupational pension, will follow the normal reassessment process.

5. National Reassessment will be delivered from 14 Benefit Centres, 4 Contact Centres and all Jobcentres.

6. The existing Personal Capability Assessment (PCA) prompts will be re-sequenced by Pension Strategy Computer System (PSCS) into WCA prompts.

7. 14 days prior to the WCA prompt maturing, customers will receive an automated initial notification letter followed by a telephone call from CCD within 9 days of the issue of the letter. This will inform customers that the reassessment process has started

8. A number of additional key ‘touchpoints’ have been built into the Customer Journey. This is to ensure that the customer understands what is happening and what is required of them at every step.

9. The introduction of the Reassessment process and these additional touchpoints are likely to cause a significant increase in enquiries to all Operational Directorates.

10. A number of change initiatives are impacting on benefit delivery and awards including the introduction of benefit cap from April 2013. In addition, Incapacity Benefit (IB) and SDA claimants continue to go through the IB re-assessment process.

11. There is no exemption for IB cases from the benefit cap; however where a claimant qualifies for ESA Support Group (ESA SG) the household will become exempt from the benefit cap.

12. The Department wants claimants in receipt of, or with underlying entitlement to,

• Incapacity Benefit (IB);

• Incapacity Benefit -Income Support (IB/IS); or

• Severe Disablement Allowance (SDA); and

• who have been identified as residing in a benefit cap household to be reassessed for ESA at the earliest opportunity? The definition of a household for the purpose of applying the benefit cap is -

- a single adult; or
- a couple; and

any child or qualifying young person for whom that adult or couple are treated as responsible for when working out their Housing Benefit.

NB: This does not include non-dependants

13. By early identification of ESA SG cases the Department will provide a better service to vulnerable claimants.

14. A bespoke IBR Smoothing Scan has been requested to:

- identify claimants potentially affected by benefit cap;
- accelerate these claimants through the IB re-assessment process;
- determine whether the claimant has limited capacity for work and is placed in ESA SG or ESA (WRAG).

15. Claimants re-assessed and placed in the ESA SG will not have their benefit capped.

Process

16. The bespoke IBR Smoothing Scan will be run on 19-20 May 2013 and will:

- automatically set a marker/note in RP801 for all cases potentially affected by benefit cap stating '291-DO NOT DELETE - IBR benefit scan 05/13';
- those accounts found to have the marker will be prioritised and their reassessment accelerated;
- amend the background system Personal Capability Assessment (PCA) date to 01/01/1900. This will be the earliest date held on the system and therefore accelerating the IBR process;

Note: It will not amend the date shown on the system.

- The IBR case Work Capability Assessment (WCA) auto push trigger will operate as normal.

17. The revised IBR Smoothing Scan will automatically ignore certain cases as they should not be triggered for the WCA process. These are:

- the PSCS account already shows the customer has commenced the IB re-assessment journey;
- PSCS holds a date of death
- PSCS has a benefit status of:
- Death;
- Death notified; or
- Claim closed;
- be a pure credits only;
- a non-beneficiary account;

- be in a state of transfer;
- within 182 days before their state pension; and
- Payday and Periodicity cases.

Impact on users

18. Users will continue to have view, amend and delete functionality in RP801. Under no circumstances must the marker/note “291-DO NOT DELETE - IBR benefit scan 05/13“ be inserted manually, amended, deleted or transferred to any other departmental system i.e. Jobseekers Allowance Payment System (JSAPS).

19. All cases identified as having the marker/note will be brought to the top of the IBR Smoothing Scan and the IB re-assessment will be accelerated.

20. The referral volumes to the Health Assessment Advisory Service will remain unchanged.

21. The enhanced IBR Smoothing Scan has been designed to fully automate the process so removing the requirement for user intervention.

Benefit Centre Directorate Responsibilities

22. BCD will be central to the National Reassessment activity. They will manage the relationship with the Health Assessment Advisory Service, which is crucial in enabling reassessment to succeed. BCD will be responsible for a case from WCA referral through to notification of the decision on entitlement, (the ‘conversion decision’).

23. BCD will be central to supporting the customer through the National Reassessment process, with accountability for making outbound data gather, disallowance and entitlement calls. They will also support the Contact Centre Directorate (CCD) and Jobcentre Directorate (JD) in providing answers to complex customer enquiries.

Reassessment Customer Service Team Leader

24. Team Leaders will be responsible for ensuring that reassessment activity is undertaken smoothly within their Teams. They will be responsible for allocating/reallocating reassessment tasks where required. In addition to their normal Job Roles, Team Leaders will be accountable for:

line managing the Reassessment Team

managing and controlling the tracking and allocation of work

managing the reassessment inbox for emails

resolving complaints in a timely and efficient manner

Reassessment Decision Maker

25. The Decision Makers will have detailed knowledge of the reassessment policies and procedures. They will be the first point of escalation for complex decisions, including making all disallowance calls and decisions. In addition to their normal Job Roles Reassessment Decision Makers will be accountable for:

phone calls to customers informing them of a disallowance decision, providing details of options and next steps available to them.

completing customer disallowance notifications.

contacting the customer if they appeal, in order to gather any other additional information which can be used to carry out reconsideration.

contacting the customer with the result of the reconsideration

providing advice and escalation route for Changes of Circumstance;

implementing complex Changes of Circumstance (where an off-line decision is required)

resolving complaints in a timely and efficient manner

Reassessment Customer Service Officer

26. The Customer Service Officer will undertake the majority of the processing for reassessment cases. They will be responsible for progressing the case through to the Assess and Award stage. In addition to their normal Job Roles the Customer Service Officer will be accountable for:

building reassessment cases from clerical

undertaking data gather, where appropriate, for those customers whose awards qualify for conversion to ESA, or who appeal against a conversion decision which is made on the basis that they do not have LCW.

checking, confirming, and amending the Transitional Addition amount, payable amount, and deductions

calling customers who have LCW to advise on ESA entitlement and next steps in the ESA regime

completing customer allowance notifications on clerical cases

closing cases on PSCS/ISCS

resolving customer enquiries through an outbound call

resolving complaints in a timely and efficient manner.

27. Customers who satisfy the contribution conditions for IB are considered to have satisfied the contribution conditions for ESA if they have Limited Capability for Work (LCW).

28. Customers in receipt of SDA are considered to have satisfied the contribution conditions for ESA if they have Limited Capability for Work (LCW).

29. The Effective Date is the date on which the “conversion decision” (being the decision as to whether or not a customer’s existing award qualifies for conversion to ESA) takes effect..

30. Jobseekers Allowance Payment System (JSAPS) will calculate the effective date automatically at the Assess Award stage.

31. For clerically maintained cases, the effective date will have to be calculated manually.

32. No customer whose award qualifies for conversion to ESA will see a reduction in the level of their benefit entitlement at the point of change.

33. Customers will receive a Transitional Addition (TA) to top up their ESA entitlement to their current IB/IS rate if the ESA award is less than the IB/IS currently in payment.

34. The TA will never increase

35. The TA will be eroded as a result of an increase in the ESA rate due to annual uprating and for some, but not all, relevant change of circumstances.

36. For cases held on JSAPS the system will calculate the customer’s TA.

37. For clerically maintained cases, any entitlement to TA will be calculated manually

38. The TA will end when the ESA (C) exhausts after 365 days, or ESA ceases, unless it is reinstated on appeal or there is a linking claim within 12 weeks.

39. Customer Service Agents (CSA) will try whenever possible, to answer all case specific enquiries using Customer Account Management (CAM) system, Contact History, Case Status and Tasks,

40. If the CS Agent is unable to answer the enquiries, they will hand over to BCD in the normal way via an e-mail handover

41. Where a change of circumstances is reported to the CSA the details of the change will be captured on the e-mail template and handed over to BCD in the normal way.

Handover Process

42. From 24 October 2011, the Inbound Call Logger, Outbound Call Logger and JC email templates were replaced with a single system – the Handover and Outbound Telephony Tool (HOTT). ENQUIRE roll out tasks send the majority of handovers from the CC to the BC – however HOTT is used for handovers previously sent by email between the CC, BC, and JC. HOTT offers a number of improvements to the handover process, including the facility to determine the correct office from a postcode database (which removes the need to consult

FIND). Where the IB (IS) Reassessment process requires the completion of a specific email template, this may be sent via HOTT as an attachment.

43. During the initial outbound call, customers in receipt of Child Dependency Addition (CDA) will be asked if they agree to BCD staff making a claim for Child Tax Credits (CTC) on their behalf.

44. If the customer cannot be contacted by phone, CTC will be claimed by BCD on their behalf, as these customers will be classed as 'Deemed'.

45. If the customer is 'deemed' or agrees to the CTC claim being made on their behalf, BCD will complete the Child Tax Credit Claim form TC600 and send it to HM Revenue and Customs (HMRC) for CTC to be assessed.

46. If the customer does not agree to BCD making the CTC claim on their behalf, they will be sent a consequences letter explaining that we will stop paying additions for their children from the effective date of the conversion decision. The letter advises the customer to contact BCD as soon as possible if they wish to be assessed for Child Tax Credits.

47. If the customer does not answer the phone call, CTC will be claimed by BCD on their behalf, as these customers will be classed as 'Deemed'.

Request received for security questions from Contact Centre Directorate

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff of the process to follow when Contact Centre Directorate (CCD) staff are unable to generate security questions in Customer Account Management (CAM) system for the initial outbound call.

2. The initial outbound call will be timed to take place 9 days after the issue of the initial notification letter to the customer and before the issue of the ESA50 questionnaire by the Health Assessment Advisory Service at the beginning of the Work Capability Assessment (WCA) process.

3. If there is insufficient information available in CAM to generate security questions for the initial outbound call, CCD will request the information by updating the Handover and Outbound Telephony Tool (HOTT) (link is external) to handover to the appropriate IB (IS) Reassessment Benefit Centre (BC).

4. On receipt of the handover from CCD, an initial e-mail template (link is external) must be completed to include all the customer details CCD require to conduct the initial outbound call.

5. All available systems must be checked to provide five security questions and their answers on the initial e-mail template.

6. The initial e-mail template free text box must be noted that there are insufficient security questions held in CAM and must be marked as ‘Restricted’.

7. Check ISCS Dialogue IS503 to see whether a Child Dependency Addition (CDA) is in payment. Where it is, note on the initial e-mail template that the customer is in receipt of a CDA.

8. Forward the initial e-mail template as an attachment to the HOTT to CCD.

Completing initial e-mail template

9. Take the following action when completing initial e-mail template.

Step	Action
1.	Note the template with the date the notification letter was issued and the name of owning BC in relevant column. (This information will be available in CAM within the ‘Contact History Record’ applet)

2.	Note the template with the WCA prompt date. This date can be found by accessing PSCS RP001 in the ‘BAMS Control’ field
3.	Note the customer’s title, full name and NINO on template
4.	Note the template with the customer’s address and postcode. This information can be found by accessing PSCS RP001, RP003 or ISCS IS500 Enquiry/Evidence by inputting a (Y) at the relevant option box and selecting ENTER.
5.	Note BC secure e-mail address on template
6.	Note security questions on template for CCD. This information can be found by accessing PSCS RP001 or ISCS IS500 Enquiry/Evidence by inputting a (Y) at relevant option box and selecting ENTER key. The 5 security questions must be from the strong list in the first instance and then from the weak list if there is insufficient information available. Strong list: Other Benefits PAB/COP Name Home Telephone Number Benefit Amount - Note if the answer is within a £1 the question should be classed as passed Partner/Dependant name. Weak list: Address Postcode Mobile telephone Number. NOTE: PAB/COP name is a mandatory security question if identified and at least one security question from the strong list must be provided. Questions must also be randomly chosen form the above list to ensure the same questions are not asked on every occasion
7.	If the CDA flag is set in CAM, check ISCS Dialogue IS503 to see if CDA is in payment. If it is, note on the template in the free text box that the customer is in receipt of CDA

8.	Email the completed initial template to CCD. The mailbox name is JCP CCD IB REASSESSMENT. The subject matter box must be noted with customers surname and marked ‘RESTRICTED’
9.	Create a 3 day CAM task to await reply from CCD notifying that the initial outbound call has been successful or unsuccessful

Reply received from CCD

10. Take the following action when the reply is received from CCD after the initial outbound call:

Step	Action
1.	On receipt of the initial e-mail template (as an attachment to the HOTT) from CCD close the CAM task that was created for the CCD reply
2.	If notified on the template that the customer did not receive the original initial notification, issue a duplicate.
	If a duplicate notification is issued, update CAM Contact History
3.	Action any change of circumstance, complex enquiry or additional needs that have been noted on the initial e-mail template by CCD
4.	If the template has been completed showing that the customer has additional needs, update CAM ‘Additional Needs’ applet
5.	Update CDA Task in CAM if the customer is a CDA to CTC case and does not wish to be transferred to CTC

Understanding Claimants who need help in using our services and other Claimant Groups

Introduction

1. The purpose of this guidance is to aid understanding and recognition of certain Claimant Group, including Mental Health customers. It will assist with handling claimants who need help in using our services and will help identify situations where it would be more appropriate to see claimants face-to-face.

2. National Reassessment claimants will have had little or no interaction with Jobcentre Plus. This could cause the claimant to feel unsure and as a result they are more likely to be vulnerable.

3. The number of contacts from customers is likely to increase as a result of the National Reassessment process.

4. There are no changes to guidance about handling claimants who need help in using our services but this product gives you links to existing guidance if you need to refresh your knowledge.

5. See Vulnerability instructions for further guidance.

Claimants who need help in using our services

6. Claimants may have additional needs and require extra support. Claimants may wish to get the help of Third Party representatives (link is external) in dealing with the Department and we are committed to supporting their right to do so.

7. There are no changes to current guidance (link is external), however staff should be aware that there may be an increase in contact from these customers.

Understanding Claimant Groups

8. There are certain other Claimant Groups that may require extra support and help at any stage of the Reassessment process. It is important that all staff are aware of these groups as the number of contacts are likely to increase as a result of the Reassessment process.

9. Detailed below is a list of some examples of Claimant Groups who are more likely to need help and extra support but there will be claimants in this group who are not on this list:

Carers

Asylum Seekers and Refugees

Customers with debt problems

Drug/Alcohol misuse

Disabled customers

Bereaved person

Ethnic Minority Groups

Travelers

Homeless person

Transsexual and Gender Recognition.

10. Customers with mental health conditions may require additional support.

11. The guidance has not changed but it is essential that it is reviewed as there may be an increase in contact from this Customer Group.

12. Staff should ensure that they are familiar with existing guidance on how to recognise and handle these customers.

Child Dependency Addition (CDA) – Child Tax Credit (CTC)

Introduction

1. The purpose of this guidance is to advise staff in the Benefit Centre Directorate (BCD) the process to follow for IB (IS) National Reassessment customers who are in receipt of Child Dependency Addition (CDA) in their Income Support (IS) awarded on the grounds of Incapacity.

2. This guidance supports IB (IS) National Reassessment and is in addition to existing Employment and Support Allowance (ESA) guidance.

Overview of Child Dependency Addition (CDA) – Child Tax Credit (CTC) Process

3. Incapacity Benefit (IB) customers claiming Income Support (IS) on the grounds of incapacity and in receipt of CDA will have the support for their children transferred to Her Majesty's Revenue & Customs (HMRC) who will assess them for Child Tax Credits (CTC) and calculate the amount payable.

4. This action will take place prior to their reassessment to ESA if they agree to a claim to CTC being made on their behalf. If the customer cannot be contacted this process will also apply.

5. The customer's Work Capability Assessment (WCA) by the Health Assessment Advisory Service is not affected in anyway by the award or non-award of CTC and the WCA Assessment referral must not be delayed or withdrawn pending completion of the TC600.

6. The claims must be sent to a special unit at HMRC on a daily basis, where they will be fast-tracked. Do not stockpile.

7. It is estimated that this process will involve up to 45,000 customers who receive IS on incapacity grounds and are in receipt of CDA.

8. Fully completed TC600 and proforma should be sent by polylope using the correct address and process as shown below:

If fewer than 50 claims the standard non tracked courier service must be used (purple polylopes) – see The Dedicated Network Standard Service (Purple Polylopes) (link is external) for further details. The following courier address should be used:-

Preston Tax Credit Office

Marked FAO IB/IS Reassessment, Team 7, Group 5, Floor 10, Guild Centre, Preston.

9. If there are more than 50 claims or if there is sensitive supporting documentation enclosed then staff should use the fully tracked documented courier service (orange polylopes) see - Fully Tracked Documented Service (Orange Polylopes) (link is external) for further details. It should be marked for the attention of Florence Evans and the following full TNT Courier Service address should be used-

IB (IS) Reassessment, Team 7, Group 5, Floor 10, Guild Centre, Preston, PR1 1RA.

10. Customers in receipt of a Child Dependency Increase (CDI) as part of the Incapacity Benefit (IB) award will not follow this process.

11. Further information on Child Tax Credits (link is external)can be viewed here.

12. The form TC600 is used to claim CTC and the CTC proforma (link is external) is used to fast track these claims. These two forms must be attached when sending onto HMRC.

13. Staff completing the TC600 on the customer's behalf should follow existing HMRC guidance on TC600 completion (link is external).

14. An agreement has been made with HMRC that the Ethnicity Questionnaire' on the back of the TC600 does not require completion in these cases.

15. For customers with a Welsh postcode and who have expressed their wish for Welsh correspondence all letters must be sent in Welsh.

16. National Reassessment will be split into 2 phases. The first phase will commence on 28 February 2011 and will include limited IT functionality. The second phase will commence on 23 May 2011 when full IT functionality will be available.

17. If customers are found to have Limited Capability for Work (LCW), they will be paid ESA clerically until 23 May 2011 when full IT functionality becomes available.

18. Staff should be aware that Customer Account Management system (CAM) functions will differ between both phases as there will be an introduction of different releases of the IT functionality, and will impact on CDA – CTC cases.

Process for Initial contact with customer regarding Child Dependency Addition – Child Tax Credit

Initial notification letter

19. The Pensions Strategy Computer System (PSCS) will issue the relevant

Initial Notification letter to the customer as listed below:

IBM259F (link is external) – This is issued when the customer's telephone number is held

IBM259G (link is external) – This is issued when the customer's telephone number is not held

IBM259H (link is external) – This is issued when there is an Appointee/PAB and a telephone number is held

IBM259I (link is external) – This is issued when there is an Appointee/PAB and a telephone number is not held

20. This letter advises the customer that their IB (IS) Reassessment journey is about to start. The notification will also advise customers that they will be contacted to have the next steps of the process explained to them. A brief outline of what will happen if the customer currently receives IS with a CDA will be included.

21. Customers are advised to contact us using the number supplied on the initial notification letter if we do not hold any contact telephone numbers for them.

Initial IB (IS) Reassessment outbound call

22. The Contact Centre Directorate (CCD) user will receive a task from CAM to attempt the initial IB (IS) Reassessment outbound telephone call. The purpose of the call is to advise the customer about the Reassessment journey.

23. The SmartScript used to carry out the Initial IB (IS) Reassessment outbound call will be launched with additional page(s) which will only be shown for an IS customer with CDA. During the call the customer will be asked if they agree to a CTC claim being made on their behalf.

24. If a customer agrees to a claim to CTC being made on their behalf, an automatic task is created, 'Agreement CTC'. Change the sub-status of this task to either 'TC600 sent' or 'Agreement letter & TC600 sent' when they have completed the TC600 and sent it to HMRC.

25. Staff must ensure that once the Initial Outbound Call is complete or if half way through the call customer is unable to continue they click the "Finish" button on the SmartScript. This will ensure the CDA-CTC task is available to BCD if necessary.

26. If the customer cannot be contacted due to no telephone number or the failure of 3 call attempts, these customers will be referred to as 'classed as deemed' and a claim to CTC will be made on their behalf. The closure reason of the initial outbound call task will trigger CAM to create a task, 'Failed CDA to CTC contact' to inform the IB (IS) Reassessment team that the customer has not been contacted. Change the sub-status of this task to either 'Only TC600 Sent' or 'Failed Contact Letter/TC600 Sent' when the TC600 is completed and sent to HMRC. CAM will set the flag in the case informing that CDA is in payment.

27. If the customer agrees to CTC being claimed on their behalf CAM will automatically trigger the task to inform the IB (IS) Reassessment team of this outcome and will set the flag in the case informing that CDA is in payment.

28. The process in the table below will outline the customer's journey from CDA to CTC for those who agree to the claim to CTC being made on their behalf, or those unable to be contacted after 3 attempts and are therefore 'classed as deemed'.

Step	Action
1.	The customer agrees to a CTC claim being made on their behalf, or a CTC claim is 'classed as deemed' on behalf of the customer due to no contact

2.	CAM automatically triggers the task from the answers given to the questions in the SmartScript to inform that the customer has agreed to have the CTC claim made on their behalf. CAM will also automatically trigger a task to inform the IB (IS) Reassessment team that the customer has not been contacted. The relevant tasks are detailed below:- Agreement CTC Failed CDA-CTC Contact For cases that begin their journey after the 23 May 2011 CAM sets a flag on the case that CDA is in payment. This flag does not apply to customers who begin their IBR journey prior to 23/05/11
3.	Check the task in CAM to confirm if customer has agreed to be deemed or has not been contacted
4.	Access Income Support Computer System (ISCS) screens to view the information in order to complete form TC600 and CTC proforma (link is external) on the customer’s behalf
5.	Check the Special Conditions section on the CTC proforma. If this does apply the relevant box must be ticked to help HMRC identify this as a shared care case
6.	If there is insufficient information to complete the TC600 contact the customer to obtain the missing information using form IBM290D (link is external). If the customer has been identified as Welsh Speaking follow Welsh language guidance
7.	Record the contact in CAM Contact History, CAM Notepad and dialogue IS110 Notepad
8.	Create a CAM task (evidence verification-awaiting documentation) to set a BF if the customer has been requested to provide additional information either by phone or in writing
9.	If there is sufficient information to complete theTC600, complete on the customer’s behalf
10.	Calculate the CDA end date and enter in ISCS dialogue IS110 Notepad. The period of calculation agreed with HMRC is 4 weeks. The period of calculation will commence

	from the next full benefit week after completion of the TC600 (CDA end date must be a benefit week ending (BWE) date) Example: TC600 completed on 07.06.11 Customer is BWE Wednesday 4 week period 09.06.11 – 06.07.11 CDA end date 06.07.11 Calculate the CTC start date and enter in dialogue IS110 Notepad. The CTC start date will be the day after the CDA end date as above
11.	Send fully completed form TC600 and CTC proforma (link is external) to HMRC as detailed below: CTC proforma to include the CDA end date in the 'CDA END DATE' box as calculated at step 10 above. CTC proforma to include the CTC start date in the 'CTC START DATE' box as calculated at step 10 above.
12.	The TC600 and the CTC proforma must be completed in full, requesting Weekly payments for all customers at para 6.1 on the TC600.
13.	Where the customer agreed to a claim being made on their behalf and when the TC600 has been sent, update the CAM task 'Agreement CTC' with a sub-status of: 'Only TC600 sent' or 'Agreement Letter & TC600 sent' When the CAM task has been updated, a new contact history record is created automatically. Close the CAM task.
14.	Where the customer was unable to be contacted, the claim to CTC has been 'deemed' and the TC600 has been sent, update the CAM task 'Failed CDA-CTC Contact' with a sub-status of: 'Only TC600 sent' or 'Failed Contact Letter & TC600 sent' When the CAM task has been updated, a new contact history record is created

	automatically. Close the CAM task.
15.	Update CAM Notepad and IS110 Notepad Send the completed form via courier to HMRC at the full address shown at Overview of Child Dependency Addition (CDA)-Child Tax Credit (CTC) process
16.	Set CAM task to check CTC has been awarded from the day after the four week period calculated at step 10 of this table. This information can be viewed in ISCS dialogue IS500 Enquiry/Evidence Should it be necessary to contact HMRC the single point of contact is via the GSI mailbox
17.	If the customer agreed to a claim to CTC being made on their behalf, update the sub-status of CAM task, ‘Agreement CTC’ to either ‘TC600 sent’ or ‘Agreement letter & TC600 sent’
18.	If the claim to CTC has been ‘Deemed’, update the sub-status of CAM task ‘Failed CDA to CTC contact’ to either ‘Only TC600 Sent’ or ‘Failed Contact Letter/TC600 Sent’
19	Issue clerical CTC notification letter to the customer advising them that a claim for Child Tax Credits has been made on their behalf. The customer is also notified that the claim has been sent to HMRC and advised that HMRC will inform the customer of their CTC award within 3 – 4 weeks of the application being received. Update CAM Contact History, CAM Notepad and IS110 Notepad. Note: 2 types of letter can be issued to the customer. A IBM290A (link is external) /IBM290AW (link is external) clerical notification letter to advise customer a CTC claim has been made on their behalf or a IBM290B (link is external)/IBM290BW (link is external) clerical notification letter to indicate they haven’t been contacted by telephone but the CTC claim has been made on their behalf
20.	HMRC award CTC from the future effective 4 week date i.e. the day following the CDA end date Note: If exceptionally, the CTC award cannot be actioned by HMRC by week 3, HMRC will notify IB (IS) Reassessment team so that CDA and any related premiums can continue to be paid. If this happens follow steps 15 and 16 otherwise continue from step 17

21.	Recalculate a new CTC future award date and inform HMRC by issuing a revised CTC proforma
22.	Update IS110 Notepad with the revised CTC start date, and set a CAM task to confirm CTC has been put into payment from the date agreed with HMRC. This information can be viewed in ISCS dialogue IS500 Enquiry/Evidence
23.	HMRC issue CTC award notification to customer
24.	CTC interface downloads CTC award to ISCS
25.	The IS user actions the WAR as per existing process in order to remove CDA from the future CTC award date.
26.	ISCS produces revised Income Support (IS) Award notification to the customer
27.	Case will move forward to WCA Outcome.

29. In order to submit a claim to CTC, BCD will complete form TC600 and attach CTC Proforma (link is external) before submitting to HMRC on the customer’s behalf.

30. The IB (IS) Reassessment team will view the appropriate screens in ISCS prior to completion. In conjunction with the TC600 they must also forward the CTC Proforma (link is external) to HMRC. The TC600 must be fully completed before it is referred to HMRC.

31. When completing this form on behalf of the customer the Disability Section questions showing on page 2 for 1.11 and 1.12 must be completed as not applicable (N/A)if one of the following applies:

If customer does not satisfy the criteria

If customer is not in receipt of a qualifying benefit.

32. Step 2.6 must be completed to reflect whether or not the child is in full time non advanced education. This information should be held in IS510: Notepad following action on limited case checks.

33. Where the information regarding education is not held three attempts should be made to contact the customer by telephone to confirm that payment for the child is still appropriate and the date the young person is due to leave education. Where it is not possible to contact the claimant write to the claimant to obtain the relevant information.

34. Failure to complete step 2.6 will result in the TC600 being rejected.

35. Ensure that Carers Allowance is entered at step 5.2 of the TC600 if appropriate.

36. As previously mentioned, the ‘Ethnicity Questionnaire’ on the back of the TC600 does not require completing on these cases.

37. When the TC600 has been sent, update the CAM task ‘Agreement CTC’ with a sub-status of:

‘Only TC600 sent’ or

‘Agreement Letter & TC600 sent’

38. Update the CAM task ‘Failed CDA-CTC Contact’ with a sub-status of:

‘Only TC600 sent’ or

‘Failed Contact Letter & TC600 sent’

39. When the CAM task has been updated, a new contact history record is created automatically. Close the CAM task.

40. Staff should be aware that CTC is paid ‘Weekly’ and ‘Four Weekly. For these cases the default payment frequency is always ‘Weekly’. If there is further information needed to complete the TC600 the IB (IS) Reassessment team will need to contact customer to obtain the missing information.

41. Customers who do not agree to CTC being claimed on their behalf will be referred to as ‘Non Deemed ‘. The process in the table below will outline the customer’s journey if they do not agree to the claim to CTC being made on their behalf.

Step	Action
1.	The customer does not agree to the claim to CTC being made on their behalf
2.	CAM automatically triggers the task from the answers given to the questions in the SmartScript to inform the IB (IS) Reassessment team that the customer has refused to have a claim to CTC made on their behalf. The task will be as detailed below:- Disagreement CTC

3.	Check the task in CAM to confirm if customer has agreed to be deemed or has not been contacted
4.	Issue IBM290C (link is external)/IBM290CW (link is external) clerical notification letter to the customer outlining the consequences of not submitting a claim to CTC. This notification will also include a BCD telephone number for the customer to contact if they reconsider their decision not to claim CTC
5	Complete CTC Proforma to say customer has not claimed CTC. If the reason is known enter this in the notes box. Once completed, the proforma should be passed to a designated Single Point of Contact (SPOC) who will send the total number of cases received during the month on the last working day of each month via an e-mail to the SPOC within HMRC. The proformas are classed as ephemeral post and should be destroyed after one month of notifying HMRC in line with existing procedures within the Records Management Policy (link is external). This will ensure that HMRC will have suitable opportunity to request specific details if required.
6.	Record refusal and the issuing of the CTC Proforma in CAM Contact History , CAM Notepad and IS110 Notepad
7.	Record issue of IBM290C clerical notification letter on CAM Contact History, CAM Notepad and IS110 Notepad
8.	The customer may call in response to the letter explaining their CDA will cease and advises they wish to claim CTC. In this instance the CCD user updates CAM Contact History and CAM Notepad with the customer's revised decision before informing the IB(IS) Reassessment team via Handover and Outbound Telephony Tool (HOTT) to make the CTC claim on the customer's behalf. The IB(IS) Reassessment user should go to process for Deemed Customers and continue from Step 4
9.	If the customer does not contact to change their mind then no further CDA action is required and the case will continue from WCA Outcome for non CDA cases.
10.	Once the outcome of the WCA is known the decision is just made as normal.

42. HMRC will award CTC from the day after the CDA end date. When the future CTC award date is reached it will be downloaded via the CTC interface to ISCS.

43. CDA will automatically cease once the download has been processed. This interface is currently used.

44. The owning office user will receive the Daily New Tax Credit Transaction Report number RIS40331 and action from para’s 48-60 of BAU process.

45. The following process covers the WCA outcome for both deemed and non-deemed customers:

Step	Action
1.	CAM task received advising that the WCA outcome is available
2.	Check the WCA outcome on MSRS to confirm if customer has got LCW or not
3.	Check the CAM IB Reassessment Case Summary View to confirm whether the ‘CDA to be checked’ field has been set or not. This flag will be set for all CDA cases for both deemed and non-deemed customers
4.	If the flag has not been set and IS case is not clerical then the case is not a CDA case and no further action is required and the case will continue from WCA Outcome for non CDA cases
5.	If the CDA flag has been set (or it has been confirmed the case has a CDA – CTC interest prior to 23 May 2011), confirm if the case is deemed or non-deemed. To do this check the CAM tasks to confirm which task was set following the initial outbound call. If the non-deemed task was set, also check CAM Notepad for notes confirming if the customer has since changed their mind and is now deemed
6.	For non-deemed cases no further action is required and the case will continue from WCA Outcome for non CDA cases.
7.	For deemed cases check ISCS dialogue IS500 Enquiry/Evidence to confirm if CTC is in payment
8.	If CTC is in payment and the customer has Limited Capability for Work (LCW) the case will proceed to Data Extract Stage

9.	If CTC is in payment and the customer has no LCW the case will proceed to Disallowance
10.	If CTC is not in payment and the customer has LCW, the Data Extract Stage is deferred until CTC award date reached
11.	If CTC is not in payment and the customer does not have LCW the Disallowance action will be deferred until CTC award date reached.

46. Special Customer Records will be handled in one IB(IS) Reassessment BDC and a dedicated team of IB (IS) Reassessment Users will deal with the process from start to finish.

47. IB (IS) Reassessment Users will use the initial email template to notify CCD Nominated Users that the initial outbound call is required. This will be sent from a secure email box ‘JCP CCD SCR IB Reassessment’ with restricted named access and will be used for all communications between IB (IS) Reassessment BDC and CCD to enable the initial outbound call to take place with the customer.

48. Upon receipt of the initial email template follow Clerical Process.

49. Clerical cases will commence the Reassessment journey from 28.02.11 onwards. The Wholly Clerical Guidance product covers the wholly clerical process.

50. There are three scenarios below to cover the clerical processes for customers who are in receipt of more than one benefit. These cover customers who agree to be deemed, are deemed on customer’s behalf or refuse to be deemed.

PSCS & ISCS Both Clerical

PSCS Clerical - ISCS System

PSCS System – ISCS Wholly Clerical.

PSCS & ISCS Both Clerical

Step	Action

1.	Owning office clerical processor sends WCA prompt template to IB(IS) Reassessment team
2.	IB (IS) Reassessment team issue the clerical notification letter to the customer, advising that their reassessment journey is about to commence. The notification also includes brief information on what will happen if the customer currently receives IS on the grounds of Incapacity with a CDA
3.	There will not be a case on CAM for these cases. Therefore there will not be a CAM task to set a CDA flag to alert user that there is a CDA interest, however this should be identified on the WCA prompt template
4.	IB (IS) Reassessment team sends initial email template to CCD with CDA-CTC boxes ticked to enable initial outbound call to take place
5.	CCD user asks appropriate CDA-CTC questions with the use of a clerical aide memoir (link is external)
6.	CCD user returns the completed initial email template by email to IB (IS) Reassessment team with the results of the customers decision. If customer agrees to deem or if they have not been contacted after three attempts continue from step 10 If the customer refuses to deem continue from step 7
7.	If refusal issue IBM290C (link is external) clerical notification letter to the customer outlining the consequences of not submitting a claim to CTC. This notification will also include a telephone number for the customer to contact CCD if they reconsider their decision not to claim CTC. Update A22
8.	The customer may call in response to the letter explaining their CDA will cease and advises they wish to claim CTC. In this instance the CCD user informs the IB (IS) Reassessment team via an email handover to make the CTC claim on the customer’s behalf. Continue from step 10. If the customer then telephones in response to the clerical notification and now chooses to have a claim to CTC submitted on their behalf CCD user sends email to IB (IS) Reassessment team to advise that the customer now wishes to claim CTC and

	continue from Step 10.
9.	If the customer does not contact to change their mind then no further CDA action is required and the case will continue from Wholly Clerical Process
10.	Contact the owning office clerical team to obtain information in order to complete the TC600 on the customers behalf
11.	If there is insufficient information to complete the TC600 the IB(IS)Reassessment team will need to contact customer to obtain the missing information and record the issue of the form and any BF on form A22 If the customer has been identified as Welsh Speaking follow Welsh language guidance
12.	If there is sufficient information to complete theTC600, complete on the customer’s behalf
13.	Calculate the CDA end date by determining the customers payday and commencing calculation of the 4 week effective date. The period of calculation will commence from the next full benefit week after completion of the TC600 (CDA end date must be a benefit week ending (BWE) date) Example: TC600 completed on 07.06.11 Customer is BWE Wednesday 4 week period 09.06.11 – 06.07.11 CDA end date 06.07.11 Calculate the CTC start date. The CTC start date will be the day after the CDA end date as above. Update the A22 with the dates
14.	Email owning office clerical team to reassess the IS award and remove CDA and the associated premiums from the day after the end of the 4 week effective date(CTC Start Date). Owning office set a clerical BF for 1 week before. BF matures owning office contact HMRC to confirm CTC awarded. Owning office remove CDA the day before the CTC award. If CTC cannot be awarded at the 4 week future award date owning office arrange an extension and control clerically

15.	Issue IBM290A (link is external)/IBM290AW (link is external) clerical CTC Deemed notification letter to the customer to advise a CTC claim has been made on their behalf or a IBM290B (link is external)/IBM290BW (link is external) clerical CTC Deemed notification letter to indicate they haven't been contacted by telephone but the CTC claim has been made on their behalf. Update A22. The customer is also notified that the claim has been sent to HMRC and advised that HMRC will inform the customer of their CTC award within 3 – 4 weeks of the application being received
16.	If in exceptional circumstances CTC is not awarded CDA remains in payment and is controlled by owning office until it is awarded and CDA is then removed from the appropriate date
17.	Owning office send clerically produced revised IS award notification to the customer once CDA is removed
18.	BCD RT User receives WCA outcome for PSCS Clerical case and checks if customer is in receipt of IS and is a CTC case (i.e. being deemed). This can be checked by looking at CIS, original WCA prompt template and A22
19.	If case is not a CDA case proceed to Wholly Clerical Process Receipt of Health Assessment Advisory Service Assessment report
20.	If CTC is in payment (check with Owning Office) and the customer has Limited Capability for Work (LCW) the case will proceed to) Wholly Clerical Process Action to take following the LCW determination
21.	If CTC is in payment (check with Owning Office) and the customer has no LCW the case will proceed to Wholly Clerical Process Action to take following the LCW determination
22.	If CTC not in payment (check with Owning Office) and the customer has LCW, the Wholly Clerical Process Action to take following the LCW determination is deferred until CTC award date reached
23.	If CTC not in payment (check with Owning Office) and the customer does not have LCW the Wholly Clerical Process Action to take following the LCW determination is

	deferred until CTC award date reached.

PSCS Clerical-ISCS System

Step	Action
1.	Owning office clerical processor sends WCA prompt template to IB (IS) Reassessment team
2.	Issue the clerical notification letter to the customer, advising that their reassessment journey is about to commence. The notification also includes brief information on what will happen if the customer currently receives IS on the grounds of Incapacity with a CDA
3.	There will not be a case on CAM for these cases. Therefore there will not be a CAM task to set a CDA flag to alert user that there is a CDA interest, however this should be identified on the WCA prompt template
4.	Send initial email template to CCD with CDA-CTC boxes ticked to enable initial outbound call to take place
5.	CCD user asks appropriate CDA-CTC questions with the use of a clerical aide memoir (link is external)
6.	CCD user returns the completed initial email template by email to IB (IS) Reassessment team with the results of the customers decision. If customer agrees to deem or if they have not been contacted after three attempts continue from step10 below If the customer refuses to deem continue from step 8 below.
7.	If refusal put decision of Customer in IS110 Notepad and issue IBM290C (link is external) clerical notification letter to the customer outlining the consequences of not submitting a claim to CTC. This notification will also include a telephone number for the customer to contact CCD if they reconsider their decision not to claim CTC

8.	The customer may call in response to the letter explaining their CDA will cease and advises they wish to claim CTC. In this instance the CCD user informs the IB (IS) Reassessment team via an email handover to make the CTC claim on the customer's behalf. Continue from step 9. If the customer then telephones in response to the clerical notification and now chooses to have a claim to CTC submitted on their behalf CCD user sends email to IB (IS) Reassessment team to advise that the customer now wishes to claim CTC and continue from Step 10
9.	If the customer does not contact to change their mind then no further CDA action is required and the case will continue from Wholly Clerical Process
10.	Access Income Support Computer System (ISCS) screens to view the information in order to complete form TC600 and CTC proforma (link is external) on the customer's behalf
11.	If there is insufficient information to complete the TC600 contact the customer to obtain the missing information and record the issue of the form and any BF on form A22 and IS110 Notepad. If the customer has been identified as Welsh Speaking follow Welsh language guidance.
12.	If there is sufficient information to complete the TC600 and CTC Proforma (link is external) on the customers behalf
13.	Calculate the CDA end date by determining the customers payday and commencing calculation of the 4 week effective date. The period of calculation will commence from the next full benefit week after completion of the TC600 (CDA end date must be a benefit week ending (BWE) date) Example: TC600 completed on 07.06.11 Customer is BWE Wednesday 4 week period 09.06.11 – 06.07.11 CDA end date 06.07.11 Calculate the CTC start date. The CTC start date will be the day after the CDA end date as above.

	Note the dates in dialogue IS110 Notepad and on the A22
14.	Send fully completed form TC600 and CTC proforma (link is external) to HMRC as detailed below: CTC proforma to include the CDA end date in the ‘CDA END DATE’ box as calculated at step 13 above. CTC proforma to include the CTC start date in the ‘CTC START DATE’ box as calculated at step 13 above. Update CAM Contact History and CAM Notepad The TC600 and the CTC proforma must be completed in full. The completed form will then be couriered to HMRC at the full address shown at Overview of Child Dependency Addition (CDA)-Child Tax Credit (CTC) process. Update A22 and IS110 Notepad
15.	Issue IBM290A (link is external)/IBM290AW (link is external) clerical CTC Deemed notification letter to the customer to advise a CTC claim has been made on their behalf or a IBM290B (link is external)/IBM290BW (link is external) clerical CTC Deemed notification letter to indicate they haven’t been contacted by telephone but the CTC claim has been made on their behalf. Update A22 and IS110 Notepad
16.	CTC interface downloads CTC start date to ISCS
17.	ISCS user actions Work Available Report (WAR) and revises Income Support award in CDA to ensure all CDA removed from IS award at the future 4 week effective date when CDA is removed
18.	ISCS produces revised Income Support (IS) Award notification to the customer
19.	HMRC issue CTC award notification to customer
20.	BCD RT User receives WCA outcome for PSCS Clerical case and checks if customer is in receipt of IS and is a CDA case (i.e. being deemed). This can be checked by looking at CIS, original WCA prompt template and A22

21.	If case is not a CDA case proceed to Wholly Clerical Process Receipt of Health Assessment Advisory Service Assessment report
22.	If CTC is in payment (Check on ISCS) and the customer has Limited Capability for Work (LCW) the case will proceed to Wholly Clerical Process Action to take following the LCW determination
23.	If CTC is in payment (Check on ISCS) and the customer has no LCW the case will proceed to Wholly Clerical Process Action to take following the LCW determination
24.	If CTC not in payment (Check on ISCS) and the customer has LCW, Wholly Clerical Process Action to take following the LCW determination is deferred until CTC award date reached
25.	If CTC not in payment (Check on ISCS) and the customer does not have LCW the Wholly Clerical Process Action to take following the LCW determination action will be deferred until CTC award date reached.

PSCS System-ISCS Clerical

51. This case will arrive at initial outbound call stage but there will be no CDA to CTC SmartScript pages launched within the initial outbound call so the first time the IB (IS) Reassessment team will identify CDA will be when they check CIS which must be actioned for all Allowed/Disallowed cases.

52. This case will follow the automated national process route until a CAM task matures informing the IB (IS) Reassessment team that WCA Outcome decision is available in MSRS. It is at this point that the IB (IS) Reassessment user will be trying to identify if CDA is in payment. The process is as follows.

Step	Action
1.	CAM task received advising that the WCA outcome is available
2.	Check the WCA outcome on MSRS

3.	Check CIS to confirm if there is IS clerical interest
4.	If no IS clerical interest is held proceed to WCA Outcome for non CDA cases.
5.	If IS clerical interest is held confirm if it is a CDA case by checking with the owning office
6.	If it is not a CDA case no further action is required and the case will continue from WCA Outcome for non CDA cases
7.	If it is a CDA case contact customer using clerical aide memoir (link is external) to ask if they agree to their CTC claim being deemed on their behalf. If customer agrees to deem or if they have not been contacted after three attempts continue from step 12 If the customer refuses to deem continue from step 8 Update CAM Notepad and Contact History stating whether CTC is deemed or non-deemed.
8.	If refusal issue IBM290C (link is external) clerical notification letter to the customer outlining the consequences of not submitting a claim to CTC. This notification will also include a telephone number for the customer to contact CCD if they reconsider their decision not to claim CTC.
9.	Record issue of IBM290C (link is external) clerical notification letter on CAM Contact History and CAM Notepad
10.	The customer may call in response to the letter explaining their CDA will cease and advises they wish to claim CTC. In this instance the CCD user updates CAM Contact History and CAM Notepad with the customer’s revised decision before informing the IB (IS) Reassessment team via an email handover to make the CTC claim on the customer’s behalf
11.	If the customer does not contact to change their mind then no further CDA action is required and the case will continue from WCA Outcome for non CDA cases
12.	Delay the LCW Decision and contact owning office to obtain information to complete

	form TC600 and CTC proforma (link is external) on the customer’s behalf
13.	If there is insufficient information to complete the TC600 contact the customer to obtain the missing information. If the customer has been identified as Welsh Speaking follow Welsh language guidance
14.	Record the contact in CAM Contact History and CAM Notepad
15.	Create a CAM task (evidence verification-awaiting documentation) to set a BF if the customer has been requested to provide additional information either by phone or in writing
16.	If there is sufficient information to complete theTC600, complete on the customer’s behalf
17.	Calculate the CDA end date and enter in CAM Notepad. The period of calculation agreed with HMRC is 4 weeks. The period of calculation will commence from the next full benefit week after completion of the TC600 (CDA end date must be a benefit week ending (BWE) date) Example: TC600 completed on 07.06.11 Customer is BWE Wednesday 4 week period 09.06.11 – 06.07.11 CDA end date 06.07.11 Calculate the CTC start date and enter in CAM Notepad. The CTC start date will be the day after the CDA end date as above
18.	Send fully completed form TC600 and CTC proforma (link is external) to HMRC as detailed below: CTC proforma to include the CDA end date in the ‘CDA END DATE’ box as calculated at step 17 above. CTC proforma to include the CTC start date in the ‘CTC START DATE’ box as calculated at step 17 above. Update CAM Contact History and CAM Notepad. The TC600 and the CTC proforma must be completed in full. The completed form will

	then be couriered to HMRC at the full address shown at Overview of Child Dependency Addition (CDA)-Child Tax Credit (CTC) process
19.	Issue IBM290A (link is external)/IBM290AW (link is external) clerical CTC Deemed notification letter to the customer to advise a CTC claim has been made on their behalf or a IBM290B (link is external)/IBM290BW (link is external) clerical CTC Deemed notification letter to indicate they haven't been contacted by telephone but the CTC claim has been made on their behalf. The customer is also notified that the claim has been sent to HMRC and advised that HMRC will inform the customer of their CTC award within 3 – 4 weeks of the application being received. Update CAM Contact History and CAM Notepad
20.	Email owning office to reassess the IS award and remove CDA and the associated premiums from the (CTC Start Date).
21.	Owning office team set a BF to contact HMRC 1 week before the CTC Start Date to ensure CTC has been awarded before removing the CDA
22.	If in exceptional circumstances CTC is not awarded CDA remains in payment. The owning office team agree a revised CTC Start Date with HMRC and control the claim clerically until CTC is awarded from the revised CTC Start Date, when they will remove the CDA
23.	Owning office send clerically produced revised IS award notification to the customer once CDA is removed
24.	Determine if the customer has LCW and if CTC is in payment (by checking with owning office)
25.	If CTC is in payment and the customer has Limited Capability for Work (LCW) the case will proceed to Data Extract Stage
26.	If CTC is in payment and the customer has no LCW the case will proceed to Disallowance
27.	If CTC not in payment and the customer has LCW, the Data Extract Stage is deferred until CTC award date reached

28.	If CTC not in payment and the customer does not have LCW the Disallowance action will be deferred until CTC award date reached.

Work Capability Assessment

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to deal with the Work Capability Assessment (WCA) process during National Reassessment.

2. The WCA assesses whether the customer has Limited Capability for Work (LCW) (link is external) and, if so, whether they also have Limited Capability for Work Related Activity (LCWRA) (link is external).

3. For information on creating and managing referrals this guidance should be read in conjunction with the MSRS National Reassessment Guidance

4. For customers who live in Wales and who choose to deal with their business in Welsh refer to the Welsh language process. This guidance does not cover the process for dealing with Special Customer Records.

5. The existing Personal Capability Assessment (PCA) prompts will be re-sequenced by Pension Strategy Computer System (PSCS) into WCA prompts. Two weeks before the WCA prompt matures PSCS will issue the initial notification letter to the customer.

6. If the letter is returned as a Dead Letter Office (DLO) investigate systems to confirm an up to date address.

7. A Customer Account Management (CAM) task will automatically be created for the Contact Centre Directorate (CCD) to make the initial outbound call, during which the customer will be advised that the reassessment process has started.

8. The initial outbound call must take place before the WCA prompt matures.

9. If CCD is unable to generate the CAM SmartScript due to a lack of security questions, they will request the information via Handover and Outbound Telephony Tool (HOTT) (link is external) to the appropriate reassessment team. CCD will create a CAM task, ‘Issue Insuff. Sec. Q Template’ and update the sub-status to ‘Template Issued’. A new contact history record will be created.

10. On receipt from CCD, update the CAM task sub-status to ‘Template Received’. Check all available systems to provide five security questions and return via the HOTT to CCD on the initial e-mail template (link is external) (as an attachment). Do not update the contact history.

11. When the WCA prompt matures an automatic referral will be registered on MSRS and the WCA process will start.

12. The majority of cases will be referred to MSRS automatically via a new electronic interface. If the automatic referral fails, a task will be generated in CAM to investigate the reasons for failure and manually refer case to the Health Assessment Advisory Service.

13. Do not register interest on CAM until the WCA outcome has been received and the conversion decision made. This process is covered in Gathering Information guidance.

14. The Health Assessment Advisory Service is responsible for gathering the information required to support the assessment and will use their existing procedures to action the WCA process.

15. Following the assessment, outcome reports will be available to view in ‘browse new response list’ in MSRS

16. CAM will set a task notifying that the outcome report is available to view.

17. One of the basic conditions of entitlement to Employment and Support Allowance (ESA) is that the customer has Limited Capability for Work (LCW).

18. If customer has LCW another consideration is whether the customer has Limited Capability for Work Related Activity (LCWRA).

19. The Health Assessment Advisory Service will issue the customer with an ESA50 form to be completed and returned. This form gives the customer the opportunity to describe how their condition affects their ability to perform everyday tasks.

20. A Braille version of the ESA50 is available on request.

21. The ESA50 form will be used by a Health Care Professional, and by the Decision Maker (DM) in their benefit determination.

22. The Health Assessment Advisory Service will scrutinise the paperwork to:

advise whether the customer has LCW/LCWRA without a face to face assessment

determine whether to call the customer to arrange a face to face assessment

determine whether the customer needs a domiciliary visit.

23. Throughout the Health Assessment process the Health Assessment Advisory Service will record all of their actions and customer contacts on MSRS. These are available to view by Benefit Centre (BC) staff.

24. The Health Assessment Advisory Service Assessments reports available to view on MSRS for manual and automatic Assessment referrals. Reports will not be available to view on MSRS for cases that have been referred clerically (without using MSRS).

25. Terminally Ill (TI) referrals will not normally form part of the IB (IS) National Reassessment process. On the rare occasion where a customer is identified as being terminally ill during referral process, take the following action immediately:

Establish whether a DS1500 has been issued recently by the customer's Healthcare Professional

Where one has been issued, request that it is sent in immediately

Where a DS1500 has been previously issued in support of a claim for DLA/PIP, make sure the Health Assessment Advisory Service is made aware by noting the (advice referral) MSRS free text box. Do not request a duplicate.

Inform the customer that if they have already received an ESA50 or receive one within the next few days they do not need to complete it

Withdraw any live referral made automatically through MSRS

Create a new advice referral on MSRS using code CN and enter specific referral details in the free text box.

If a DS1500 (or other supporting evidence) is available, set the Supporting Case File indicators on MSRS

Send any supporting case file documents in an ESA55 or by secure fax link to the Health Assessment Advisory Service

Telephone the Health Assessment Advisory Service to make them aware of the new advice referral.

26. On receipt, the Health Assessment Advisory Service will follow standard TI processes and provide advice for a decision maker through MSRS.

27. The cases referred automatically to MSRS, will be flagged as IB Migration cases.

28. The following cases are not suitable for the automated referral process:

other payees are held on source system

Person Without Address (PWA) status held

Dead Letter Office status held

National insurance number without a suffix held

payment suspension flag is set to Y (except credits only cases)

special customer records

treated as LCW

corporate payees are held on source system

potentially violent (link is external) (PV) customers.

29. Cases not suitable for the automated referral process will be notified through a CAM task or on an exception report (JA72712 Gateway Control Report).

30. The majority of cases not suitable for automatic referral will have to be referred manually to MSRS and the office identification (ID) must be changed to show the reassessment office ID.

31. Special customer records, rework referrals and severely disabled military personnel have to be referred clerically and not through MSRS.

Corporate other Payee and Personal Acting Body held on ISCS or PSCS

32. If a Personal Acting Body (PAB)/Corporate Other Payee (COP) are held on PSCS, then an automatic referral to MSRS will not occur and a CAM task will be created to manually refer the case via MSRS.

33. Obtain the relevant data for PAB/COP (link is external) from Customer Information System (CIS)/PSCS/Income Support Computer System (ISCS), CAM should also be checked as this may hold the most recent information.

34. Make a manual referral and enter the missing information on MSRS by search/creating a client account and creating a case on MSRS.

Person without address status held

35. If a Person without an Address (PWA) is held on PSCS, then an automatic Assessment referral to MSRS will not occur and a CAM task will be created to manually refer the case via MSRS.

36. PWAs are customers who are actually homeless not No Fixed Abode (NFA) customers with an unsafe address or frequently changed addresses.

37. Check all systems, CIS, PSCS or ISCS and where a new address is held take action on MSRS (link is external) to create Client, create case and make a Q referral and update the relevant system. These customers are no longer PWA.

38. If no address is held, but a telephone number is held in PSCS or ISCS ring the customer to enquire if they have an up to date address. If the customer states they have a new address take the information over the phone and take action on MSRS to create Client, create case and make a Q referral.

39. If the customer states they do not have an address available, tell them that they must obtain and complete an ESA50 to continue with their claim. Advise the customer to call in at any Jobcentre and obtain an ESA50 to complete.

40. If the customer needs help completing the questionnaire they can either:

Ring the Benefit Centre Telephony teams for advice, or

Request a face to face appointment at a Jobcentre.

41. Create a CAM task for 4 weeks to await the return of form ESA50.

42. When the completed ESA50 has been returned by the PWA, register a PWA case and complete the following action:

Step	Action
1.	Retrieve the existing customer record, where there is one, or create a new one
2.	Access ‘View Client’ screen. Select ‘Client Actions’ dropdown list and select ’Update Client Details’
3.	In the ‘Client Address’ field input the Benefit Centre address
4.	Input the customer’s phone number, where one has been provided. If no phone number available, leave the field blank.
5.	Select the ‘Availability Constraint’ field. From the drop down list select ‘Yes’. In the availability Constraint details field input ‘PWA’
6.	Create or update the case
7.	Create an ‘S’ referral. Insert a tick in the ‘Supporting Case File’ checkbox
8.	Enclose the returned ESA50 in an ESA55 case file and send to the Health Assessment Advisory Service. Complete the following fields on the ‘Return of Support Clerical Documents’ on the ESA55 file:

	Benefit Type The customer’s details section in full The JCP office details (DO number)
9.	Create a CAM task for 6 weeks to await the return of the MSRS referral.

Dead Letter Office status held

43. If a Dead letter Office status is held on PSCS, then an automatic Assessment referral to MSRS will not occur and there will be no CAM task created.

44. An exception report (JA72712 Gateway Control Report) will be produced to identify cases that hold DLO status.

45. Check all systems to confirm if an up to date address is available and that the initial outbound call has taken place.

46. Suspend payment on the source system if outbound call has not taken place.

47. Write to the customer at a known DLO address asking them to contact the Reassessment office.

48. The customer must be given one further month to make contact. If no contact is received the benefit should be terminated on the source system from the date the suspension began.

49. If an address is notified, then the user must create a CAM case, and carry out a manual MSRS referral.

50. The notification letter must not be re-issued to the customer when the address is updated.

NINOs without a suffix

51. If a case containing a NINO without a suffix is held on PSCS, then an automatic referral to MSRS will not occur and there will be no CAM task created.

52. An exception report (JA72712 Gateway Control Report) will be produced to identify cases without a suffix. The CAM task will not be created as a CAM case will not be created.

53. Access CIS to obtain the suffix, create a CAM case and manually refer to the Health Assessment Advisory Service via MSRS.

Case has payment suspension

54. If a case with a payment suspension is held on PSCS, then an automatic referral to MSRS will not occur and a CAM task will be created to manually refer the case via MSRS

55. Investigate the case to establish if the suspension is still appropriate and that the claim to benefit is still applicable. Take the relevant steps to close the case or lift the suspension and create a manual referral to MS where appropriate.

Treated as having Limited Capability for Work

56. If a case is held on PSCS that is treated as having LCW, then an automatic referral to MSRS will not occur and a CAM task will be created to manually refer the case via MSRS.

57. In the majority of cases the PSCS system will be unable to identify whether or not a customer can be treated as having LCW. Therefore the volume of these cases will be minimal.

58. Manually refer the case to identify whether the customer has LCWRA and is in the Work Related Activity Group (WRAG) or Support Group (SG).

UCB Cases (Previously known as Potentially Violent (PV) cases)

59. If the claimant has an Unacceptable Claimant BEHAVIOUR (UCB) indicator you must ensure that the:

PV code is entered and

Cases with an Unacceptable Claimant BEHAVIOUR (UCB) marker will not auto push and must be a manual referral. In future when you make this referral you must include screen prints relating to that claimant from the Staff Protection List/ UCB database. You will have been informed who is the allowed person within your office with the relevant ability to print them.

These should be placed in an ESA55 and sent to the relevant Health Assessment Advisory Service center. You should mark MSRS accordingly i.e. set the PV flag and mark the availability constraints flag that UCB info has been sent via Track and Trace TNT courier.

This will remain a Q referral not an S referral.

This informs the Health Assessment Advisory Service to make any arrangements for the claimant’s attendance at their assessment appointment at the Assessment Centre. (Formerly Medical Examination Centre)

Where no evidence is held to support the UCB marking, JCP must consider reviewing the marker before the referral is made on MSRS.

This informs the Health Assessment Advisory Service to make any arrangements for the claimant’s attendance at their assessment appointment at the Assessment Centre. Where no evidence is held to support the UCB marking, JCP must consider reviewing the marker before the referral is made on MSRS.

UCB status allocated during Assessment referral

60. As client details can be updated during an ongoing WCA referral the UCB status can also be changed.

61. The PV Code and the PV reason text fields must be completed

62. If the referral has already reached the scheduling stage, the case will be automatically withdrawn and returned to JCP.

63. JCP staff must contact the claimant to cancel the scheduled WCA appointment. The Health Assessment Advisory Service will also send out an automatic appointment cancellation letter but JCP staff cannot assume the letter will be received in time.

64. A new screen ‘View Appointment Cancellations’ has been provided to prompt JCP staff to contact claimants where appointments have been cancelled within short notice.

65. Although it is not a requirement JCP staff can confirm the claimant has been contacted by selecting the relevant claimant record and clicking ‘Confirm Notification’. If this action is not taken the View Appointment Cancellation record will automatically disappear when the appointment date is reached.

Special customer records

66. If a special customer records case is held on PSCS then an automatic referral to MSRS will not occur. These cases are dealt with clerically and no CAM case should be created.

67. If the automatic MSRS referral fails, a task will be generated in CAM for the user to consider a manual referral.

68. CAM will only list the first rejection found. As there may be more than one rejection reason the user must investigate and correct the reasons for failure before referring to MSRS, or the manual referral will also fail.

69. The set of rejection types that will be received are as follows:

01 = client mismatch – need to investigate before making manual referral

02 = current open Referral Held

03 = MSRS Client is PV

04 = current Migration case already exists

05 = owning Authority Mismatch

06 = Date of Birth out of range

07 = office not known to MSRS

08 = postcode district not known

09 = invalid data.

70. A rejection type 09 will be received where PSCS has passed data but MSRS has no matching data entries and the system cannot determine what the correct entry should be.

71. Manual referral may not be required for rejection type 02 and 04. The referral may already be with MS. Investigate the status of the referral and take any action required.

72. Where a CAM case should have been created for the customer but has not, a manual creation of the CAM case will be required.

73. As PSCS will have sent the initial notification to the customer, the user must manually create the relevant contact history record to indicate that the initial notification letter has been issued.

74. CAM will not create any tasks at this stage in the reassessment journey. The clerical process should be followed when moving to the next stage of the process and when notifying CCD to complete initial outbound call.

75. A manual referral to MSRS will be required, when the initial outbound call action has been undertaken and the rejection reason has been investigated.

76. Take the following action where a CAM case is required to be created:

Step	Action
1.	Log into CAM and take the following action to create the CAM case: select the customer tab enter customer search details (e.g. NINO), and select Go

	customers details are displayed to the agent select the IB Migration case tab select create IB Migration case. A CAM case will now be available
2.	Take the following action to manually record the issue of the initial notification letter: select the contact history tab select new enter the customers/PAB name in caller name field select “Letter” in the channel field select ‘Outbound-External’ in the In/Out field select the icon in the case number field, in the pop-up window select the customers IB Migration case and select OK select ‘IB Migration Initial Notif’ in the correspondence type field. CAM will now display that the initial notification has been issued to customer
3.	Complete and issue initial e-mail template (link is external) to CCD for the initial outbound call to be made. The e-mail template should be completed 9 working days after the initial notification letter has been sent.
4.	Note on the template the secure e-mail address for your office. Do not include your personal e-mail address
5.	Note the template with the date the notification letter was issued. This date can be found in PSCS Dialogue RP001.
6.	Using the information from PSCS Dialogue RP001, note on the template the date the PCA is due
7.	Note the customer’s NINO, full name and title. Where the customer is Welsh speaking and living in Wales, this must be noted on the template, as the initial outbound call must be made in Welsh

8.	Note the customer’s address and postcode. This information can be found in PSCS Dialogue RP001
9.	Include security information to enable CCD to ask security questions when establishing the customer’s identity when they make the initial outbound call. This information can be found in PSCS Dialogue RP001
10.	The 5 security questions must be from the strong list in the first instance and then from the weak list if there is insufficient information available. Strong list: Other Benefits PAB/COP name Home telephone number Benefit Amount Partner/dependant name Weak list: Address Postcode Mobile telephone number Where there is a PAB/COP this must always be included, as this is a mandatory security question when CCD make the call.
11.	Where appropriate, note that the customer is in receipt of a Child Dependency Addition (CDA) from IS. This information can be found on ISCS Dialogue IS503
12.	If it is known that the customer has additional communication needs, such as living in Wales and Welsh speaking, or needs to use the textphone service, then these needs must be included on the initial e-mail template
13.	Send the completed template to CCD as an attachment to the Handover and Outbound Telephony Tool (HOTT) (link is external) and mark it ‘Restricted’

77. CAM will follow the standard reassessment process once the WCA outcome is received.

78. If a change of circumstance has been received MSRS records must be updated. BCD must immediately notify the Health Assessment Advisory Service of change of circumstance.

79. If a change is received advising the marker has been set from non-PV to PV, where there is an open referral, it must be withdrawn at the following stages:

Assessment Centre appointment

inbound client contact

assessment

offline Domiciliary Visit (DV) allocation

DV examination.

80. The user must advise the Health Assessment Advisory Service by telephone immediately when a PV marker has been set. Please note that there is no option to abandon/undo the change at this point.

Assessment Referral withdrawn

81. An Assessment referral can be withdrawn at any time by both the Health Assessment Advisory Service and BCD staff automatically via MSRS. It is the responsibility of the department withdrawing the referral to notify the customer that their appointment has been cancelled.

82. The process for receiving outcome Assessment reports has not changed except that a CAM task will notify the user of the following WCA outcomes:

transaction rejection - the reason for the rejection will be included in brackets, e.g. Transaction rejection (DOB out of range)

MSRS user rejection

withdrawal by user

did not attend

did not attend (Mental health)

ESA50 non return

ESA50 returned late

WCA outcome available.

83. The CAM task Record and Review WCA Outcome' will notify the user when the Assessment report is available and can be viewed on MSRS.

84. The ‘Record and Review WCA Outcome’ task is created automatically when the Assessment report has been received from MSRS, but can be created manually – however this should only be done when instructed to do so, for instance when the prompt from MSRS indicating that the WCA Outcome is available fails to reach CAM.

85. Do not update this task. This will be updated during the ‘Decision Assurance’ call.

86. This task should be used to track the progress of the WCA using the combination of Status/Sub-status :

Status Not Started/In Progress/Open Closed

Sub-status Not Started/In Progress/Awaiting Case Papers/

Re-Referred (Not Fit)/IB Terminated/

LCW WRAG/ LCW Support/No LCW.

87. This task has an automatic 40 day BF date to allow for the fact that some of the processes may take a while to complete.

88. Users must not wait until the BF date is reached and the Task becomes overdue to progress to the next stage. Every effort must be made to progress the case to the next stage before the BF date is reached. To do this, Users/Team Leaders can track the progress of all their outstanding cases by running the appropriate Task Query eg ‘WCA Outcome Tasks (All)’/’WCA Outcome Available’ at regular, short intervals before the BF date is reached.

89. If the BF date is reached without progress on the case, the Task will become overdue and the case must be progressed as a matter of urgency.

Child Dependency Addition to Child Tax Credit flag

90. CAM will identify a Child Dependency Addition (CDA) case. This is displayed as a read only field ‘CDA to be checked’ in the case summary screen when the WCA outcome is received from MSRS. There will be either a ‘Yes’ or ‘No’ populated in this field.

91. Check the WCA outcome first then check for the CDA case indicator.

92. Where a TC600 has been submitted to HMRC on behalf of a customer, a new contact history record is automatically created. This is created when the ‘Agreement CTC’ CAM task has had the sub-status value updated to ‘Only TC600 Sent’ or ‘Agreement Letter & TC600 Sent’.

93. A new contact history record is also created when the ‘Failed CDA to CTC Contact’ task has had the sub-status value updated to ‘Only TC600 Sent’ or ‘Failed Contact Letter/TC600 Sent’.

94. If a TC600 has been submitted to HMRC and the CDA case indicator has been set to ‘Yes’, access ISCS dialogue IS503 to confirm that Child Tax Credit (CTC) has been awarded and the CDA payments have ceased.

95. Where CDA is still in payment in the award of IS, the DM must not make the determination. For action to take go to ‘CDA to CTC’ process.

Actioning WCA outcomes in MSRS

96. Reassessment cases can be viewed by generating a worklist in the ‘Browse New Response’ list.

97. When the customer fails to comply with the WCA process MSRS will produces an electronic outcome and CAM will create a task to notify the user to action accordingly.

98. The ESA55 containing all the relevant information and documentation will be returned, if appropriate, to the Benefit Centre when the report is complete.

99. The MSRS ‘Browse New Response’ list will indicate if there is a supporting case file being returned to BCD.

100. The Assessment report must be checked that it is ‘fit for purpose’ (link is external). If it is not, update the task ‘Record and Review WCA Outcome’ with the sub-status ‘Re-Referral Req (Not Fit)’.

101. Refer the case clerically to MS for rework, using existing guidance (link is external). Update the task ‘Record and Review WCA Outcome’ with the sub-status ‘Re-Referred (Not Fit)’.

102. View the outcome on MSRS. Where MSRS indicates that there is associated paperwork, do not action the electronic Assessment report until you receive the paperwork. Consider creating a CAM task to mature in 5 days as a reminder. Follow existing guidance if Supporting Case File (SCF) not received in 5 days (link is external) except where this relates to JSAPS dialogues.

103. Where the customer has been treated as having Limited Capability for Work (LCW) and the outcome is available, a CAM task is created notifying that the outcome is available.

104. If it is a complex decision, assign the case on CAM and pass the ESA55 if appropriate to the DM to determine if the customer has LCW and if so, whether they also have LCWRA. For non-complex decisions follow the existing process.

105. The DM will make the determination whether the customer has LCW or not based on all the evidence from the customer and the Health Assessment Advisory Service and any other information contained in the ESA55, for example further medical evidence.

106. If DM has determined that the customer has no LCW, the customer must receive the Decision assurance call before the decision is made.

107. If customer has LCW, the DM will also determine whether the customer has LCWRA and therefore which customer group they will be allocated to.

108. If the DM determines that the customer has LCW and LCWRA the customer will be placed in the Support Group (link is external).

109. If the DM determines that the customer has LCW but does not have LCWRA the customer will be placed in the Work Related Activity Group (link is external).

110. The following action should be taken when paperwork is returned from the DM:

where the customer does not have LCW, disallow the award of Incapacity Benefit, Severe Disablement Allowance and Income support if no other condition of entitlement held.

If the customer has LCW the Customer Service Officer (CSO) should gather the relevant information (if appropriate) and award benefit.

When the customer fails to comply with the WCA process MSRS will produces an electronic outcome and CAM will create a task to notify the user to action accordingly.

111. There is no change to the existing process for the Work Capability Assessment (WCA) Outcomes except where this relates to

Good Cause guidance

Work Focused Health Related Assessment (WFHRA) stage (this has been suspended from 19 July 2010 for 2 years)

Work Focused Interview (WFI) regime.

112. Staff must follow normal process to advise Jobcentres of the WCA outcome result. See Reporting WCA outcomes to AS or Provider (link is external)

New condition disclosed on ESA55

113. If the customer declares a new health condition and this is recorded on the ESA55 this information must be captured on both PSCS notepad and CAM notepad.

Deleting case from Browse New Response list

114. Action to take to remove case from ‘Browse new response’ list

Step	Action
1.	After looking in the ‘Browse new Response’ list, receiving the ESA55 and actioning the CAM task, the case can be deleted from the ‘Browse new Response’ list
2.	Input the NINO in the ‘Search for Client’ page (this is not case sensitive)
3.	In the bottom half of the ‘View Case’ screen the referral displays
4.	In the ‘Referral Status’ field, select the hyperlink on ‘Customer Action’
5.	Once selected, this opens the ‘Clear Response’ screen
6.	Select ‘Confirm’. This clears the referral from the list.

115. If the customer provides good cause, and since they have not yet completed the WCA process, their IB/IS entitlement will continue.

116. The customer should start the reassessment process from the point it ended and should be manually referred to MSRS.

Gathering Information

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff of the gathering information process to reassess Incapacity Benefit (IB), Severe Disablement Allowance (SDA) and Income Support (IS) customers on the grounds of incapacity onto Employment and Support Allowance (ESA) once the Limited Capability for Work (LCW) has been met.

2. This guidance details the process to be taken to fill any data gaps or reconcile conflicts in the information required to complete National Reassessment after data extract completion.

3. Only contact the customer when all gaps/conflicts have been identified.

4. Special Customer Records are not covered in this guidance as the cases will not be on Customer Account Management (CAM)

5. It is vital that the customer is given the option to claim ESA(IR) even though they may not choose to do so. In IBR cases where the customer is placed in the support group they should be given the opportunity to claim ESA(IR), as this component entitles them to the Enhanced Disability Premium.

6. This guidance is in addition to existing ESA guidance.

7. The following actions should be taken to progress the National Reassessment process when the Work Capability Assessment (WCA) outcome has been decided and LCW has been met or a valid appeal is received before the Effective Date:

access the customer’s case on Customer Account Management (CAM) system

transfer account through CAM if required

if transfer fails because of outstanding Job Seekers Allowance (JSA) actions use the current process to contact the JSA section to complete the actions

register interest on CAM by selecting the ‘Register Interest’ button

8. There is a time delay of up to 5 days between registering interest and the data being transferred to JSAPS.

CAM sub-type

9. For most cases CAM will determine and populate the correct sub type. The sub type cannot be amended.

10. If CAM cannot determine the correct sub type, an error message will be produced and at this point the sub type can be amended.

11. CAM may display an error message Error 'E3625 - Error:Open IS interest found. Use appropriate subtype with IR included', if, when the case is being registered as ESA(C), there is an open IS clerical interest in CIS, but no open IS award on CIS.

12. If this error message is received, the user must investigate the IS claim to establish what the correct sub-type should be. Check CIS which should record if the customer is a partner on an IS case, before contacting the owning office to check whether or not a live IS clerical case exists for the customer. Obtain the clerical case from the owning office if appropriate.

13. If there is no open IS claim and no payment being made on ISCS the User must raise an incident for CIS FLS to end the CIS IS system interest.

14. If the customer is a partner on the IS claim and wishes to remain so, arrange to pay case clerically, then BFC onto the system (a non-Appeal case can be BFC straight away).

15. If there is an open IS award and IS is in payment (possible clerical interest), CAM will allow the sub-type to be updated to 'C&IR'.

16. Where there is an IB Reassessment case registered with no sub-type and an IB or SDA case is open on CIS, but there is no open IS clerical or system interest on CIS, CAM will allow the interest to be registered and will automatically set the IB Reassessment case sub-type to ‘Contributions Only’.

17. Register interest again (there should now be no error message).

18. CAM will give the following error message if it cannot find an IB or SDA award:

No open Incapacity Benefit record or Severe Disablement Allowance is held for the customer.

19. Check whether reassessment is still appropriate and if so, select the correct Case Sub Type.

Case archived by JSAPS after CAM has retrieved it

20. If, in the short period between CAM retrieving and saving the Customer Record Location (CRL) information and the point when interest has to be registered, the customer record has reached the 4-year end date, it will be archived by JSAPS.

21. The information on the CRL will no longer be accessible. JSAPS will therefore no longer hold the ESJ code and will require it to be sent.

22. To prompt this action, the user will receive Error Message:

‘E9834 JOBCENTRE plus office number must be entered on the case more info view’

23. On receipt of this Error Message the user should:

Contact Live Support to raise an incident

The CRL will be deleted allowing you to continue with the case

24. When the data is received on JSAPS from Pension Strategy Computer System (PSCS) and Income Support Computer System (ISCS), any gaps and conflicts will be identified by JSAPS.

25. CAM tasks will be created to inform you that the data has been transferred.

26. Outcomes of the data transfer from PSCS/ISCS can be:

all data transferred - case clean

all data transferred - errors or gaps reported

data transfer failed or rejected - no data loaded

PSCS data transferred - ISCS data missing.

27. All tasks relevant to gathering Information must be cleared before JA200 Assess Award (link is external) is accessed.

Outstanding BFs and Case Controls

28. Consider transferring from ISCS or PSCS to JA530, any BFs or case controls which are relevant to the case.

All data transferred – case clean

29. CAM will display ‘To do – Ready for Assessment’.

30. Although the ESA automated validation has passed the case as clean there could still be tasks requiring intervention.

31. Further CAM tasks will alert you to access the case in ESA Legasuite Update System (ELUS). Data transfer failures will be identified and shown as Gap tasks in CAM. One or more of the following may display:

External Org Not Found

PSCS Negative Adjustments

PSCS Positive Adjustments

Check Child Premium Adjustment

ISCS Deductions (3rd Party)

ISCS Deductions (Social Fund)

ISCS Deductions (Overpayments)

Failed ISCS Deduct (Out Of Hrs)

Failed ISCS Deduct (Recov Pymt)

Failed ISCS Deduct (POA)

Failed ISCS Exceptional Condition

IB Paid Four Weekly

Missing SFCS Deductions

Payment suspension held.

32. To action gaps:

check PSCS/ISCS/Customer Information System (CIS)/clerical papers to complete/resolve as many of the data issues as possible

use JA660 (link is external) to input all missing data into ELUS

some PSCS negative adjustments relate to overlapping benefits and will need to be added on the ‘Other Benefits’ screen in JA660

complete JSAPS JA230 Maintain IB&IS Awards (link is external)

partial updates to a screen will not be saved. All errors on a screen must be cleared at the same time for the data to be saved.

33. A CAM task will be produced for all PSCS and some ISCS cases with deductions. This information cannot be recorded until after the Assessment process and is covered in deductions guidance.

34. If there are still gaps in the information required to assess the ESA award contact the customer.

All data transferred – errors or gaps reported

35. A CAM task will alert you to access the case in ESA Legasuite Update System (ELUS). Data transfer failures will be identified and shown as gap tasks in CAM. One or more of the following may display:

External Org Not Found

PSCS Negative Adjustments

PSCS Positive Adjustments

Check Child Premium Adjustment

ISCS Deductions (3rd Party)

ISCS Deductions (Social Fund)

ISCS Deductions (Overpayments)

Failed ISCS Deduct (Out Of Hrs)

Failed ISCS Deduct (Recov Pymt)

Failed ISCS Deduct (POA)

Failed ISCS Exceptional Condition

IB Paid Four Weekly

Missing SFCS Deductions

Action Outstanding on PSCS

Action Outstanding on ISCS

Claim closed on ISCS

Payment suspension held

Offset, abatement or recovery

Two separate bank accounts.

36. To identify data transfer failures:

check CAM tasks for cases failing data load

check JSAPS report JA72699 for the reasons case has failed data load.

37. A CAM ‘To do – Data Cleansing Required’ task will also display when there are data errors identified by ESA automated validation.

38. To identify errors:

check ELUS JA660

the data will be automatically validated and errors or gaps will be listed in ELUS screen JA668

check JSAPS JA72701 report for PSCS cases with negative award adjustments.

39. To action errors and gaps:

check PSCS/ISCS/Customer Information System (CIS)/clerical papers to complete/resolve as many of the data issues as possible

use JA660 to input all missing data into ELUS

some PSCS negative adjustments relate to overlapping benefits and will need to be added on the ‘Other Benefits’ screen in JA660 complete JSAPS JA230 Maintain IB&IS Awards (link is external).

partial updates to a screen will not be saved. All errors on a screen must be cleared at the same time for the data to be saved.

40. If ESA automated validation fails, a CAM task will be automatically created to indicate that the source system data has been transferred but not validated. Access ELUS dialogue JA660 to check the data.

41. The effective date and current effective date displayed in JA660667, Picklist, may not be the correct date, as JSAPS will only calculate the true effective date in JA200, Award and Decision.

42. Following assessment in JA200 the ESA effective date will be corrected by JSAPS.

43. Where partner data transfer has failed, JA660 will show the error on the About Partner screen. The partner details will need to be transferred manually. Request the Nominated User to transfer case in ELUS using the desk top icon.

44. For customers on IS with a partner with an LR interest code 0, an error will be produced ‘E4029 Error: Must be 1, 2, 3’. The CSA new rules flag on ELUS should be set to ‘Y’, NRP Partner flag set to ‘Y’ and the partner’s LR flag should be set to 1.

45. Where the customer or partner has another benefit type ‘61’ and sub type of ‘PLT’ on ISCS, an error message will display. The sub type must be amended to ‘LT’.

46. Where a customer or partner has other benefit code 08 or 61 and the received amount field is blank, check ISCS dialogue IS500 to confirm that the customer or partner has underlying entitlement to Carer’s Allowance (code 08) or IB credits only (code 61). Input the received amount as 0.00.

47. Where the customer or partner is in receipt of IB with a sub type of ‘PSL, PSH and PST’ an error message will display. The sub type must be amended to :

PSL amended to STL

PSH amended to STH

PST amended to LT.

48. A CAM task will be produced for all PSCS and some ISCS cases with deductions. This information cannot be recorded until after the assessment process and is covered in deductions guidance.

49. If the customer is claiming for housing costs and their partner has reached pension age, an error message may display ‘E6416 Error: Entry not appropriate-clmt/ptnr has reached qualifying age’. Access the home loan screen and remove the mortgage qualifying date to clear the error.

50. For all cases where payments are being made for housing costs, and the customer has a non-dependent who is in employment, the customer will need to be contacted to confirm the

amount of the non-dependent’s earnings. Check that the earnings fall within the IS income band. If the earnings have changed follow change of circumstances guidance.

51. All cases with an occupational pension will require manual input.

52. Cases with Permitted Work may require manual input.

53. ISCS cases where the customer or partner has current work will require manual input.

54. ISCS cases where the customer or partner has been in hospital for more than 28 days may need manual input.

55. If there are still gaps in the information required to assess the ESA award contact the customer.

56. If an IB only claim has an Adult Dependency Increase or Child Dependency Increase, the partner or dependent screens cannot and should not be completed.

Data transfer failed – no data loaded

57. A CAM task will alert you to access the case in ELUS. Data transfer failures will be identified and shown as tasks in CAM. The following task will display:

PSCS Extract Failed

Nothing Loaded from PSCS

58. The following tasks may also display:

PSCS Negative Adjustments

IB Paid Four Weekly.

59. ESA automated validation will not have been run as no data has loaded.

60. To identify missing data:

check CAM tasks for cases failing data load

check JSAPS report JA72699 for the reasons case has failed data load.

To action data gaps:

check PSCS/ISCS/CIS/clerical papers to complete/resolve as many of the data issues as possible

use JA660 to input all missing data into ELUS

some PSCS negative adjustments relate to overlapping benefits and will need to be added on the ‘Other Benefits’ screen in JA660

complete JSAPS JA230 Maintain IB&IS Awards.

61. The effective date and current effective date displayed in JA660667, Picklist, may not be the correct date, as JSAPS will only calculate the true effective date in JA200, Award and Decision.

62. Following assessment in JA200 the ESA effective date will be corrected by JSAPS.

63. A CAM task will be produced for all PSCS and some ISCS cases with deductions. This information cannot be recorded until after the Assessment process and is covered in deductions guidance.

64. When data transfer has failed JSAPS will need a linking record.

65. For IB claims enter on ELUS linking dialogue JA660 type ‘03’ linking:

the first day of sickness from PSCS. This is the Period of Incapacity for Work (PIW) date

66. The end date of the IB claim will need to be input. This information cannot be recorded until after the Effective date has been calculated in Assess Award.

67. For IS claims enter on JSAPS dialogue JA660 type ‘07’ linking:

the start date of the IS claim.

68. For all cases where payments are being made for housing costs, and the customer has a non-dependent who is in employment, the customer will need to be contacted to confirm the amount of the non-dependent’s earnings. Check that the earnings fall within the IS income band. If the earnings have changed follow change of circumstances guidance.

69. For customers on IS with a partner with an LR interest code 0, an error will be produced ‘E4029 Error: Must be 1, 2, 3’. The CSA new rules flag on ELUS should be set to ‘Y’, NRP Partner flag set to ‘Y’ and the partner’s LR flag should be set to 1.

70. Where the customer or partner has another benefit type ‘61’ and sub type of ‘PLT’ on ISCS, an error message will display. The sub type must be amended to ‘LT’.

71. Where the customer or partner is in receipt of IB with a sub type of ‘PSL, PSH and PST’ an error message will display. The sub type must be amended to :

PSL amended to STL

PSH amended to STH

PST amended to LT.

72. All cases with an occupational pension will require manual input.

73. Cases with Permitted Work may require manual input.

74. ISCS cases where the customer or partner has current work will require manual input.

75. Dependents added before the claim start date will not be visible on the dependents screen until the effective date of the claim has been reached.

76. ISCS cases where the customer or partner has been in hospital for more than 28 days may need manual input.

77. If there are still gaps in the information required to assess the ESA award contact the customer.

CAM Task PSCS Extract Failed – IB Credits only case

78. There may be instances where the PSCS extract fails due to ISCS being closed down but the IS reference number has not been removed from PSCS.

79. If the CAM task ‘PSCS Extract Failed’ is present check CIS and ISCS to see if the IS claim has been closed. If the IS claim has been closed **after** the reassessment process has started and the case is now IB Credits only the process detailed in Change of Circumstances guidance should have been followed.

80. If the IS claim has been closed **before** the Initial Notification letter was issued by PSCS, and the case is now IB Credits only these cases should not have been selected for reassessment by the system. There are no regulations yet in place to reassess IB Credits only cases.

81. Take the following action where this occurs:

Close the CAM case using option ‘IB Terminated’

Any claim registered on JSAPS must be transferred to clerical

Close the IB Credits only case on PSCS and build a clerical IB Credits only case.

Send form IBM296B (link is external) to the customer

Set a B/F date of 01/05/2012. This date will be used to review whether the legislation is now in place to enable a IB credits only case to be reassessed

Forward the IB clerical case and all paperwork to the IB owning office. This case must be maintained clerically until reassessment.

82. If an IB only claim has an Adult Dependency Increase or Child Dependency Increase, the partner or dependent screens cannot and should not be completed.

PSCS data transferred – ISCS data missing

83. A CAM task will alert you to access the case in ESA Legasuite Update System (ELUS). Data transfer failures will be identified and shown as tasks in CAM. One or more of the following may display:

ISCS Extract Failed

PSCS Negative Adjustments

PSCS Positive Adjustments

IB Paid Four Weekly

Action Outstanding on PSCS

Missing SFCS Deductions

Claim closed on ISCS

Payment suspension held

Offset, abatement or recovery

Two separate bank accounts.

84. To identify data transfer failures:

check CAM tasks for cases failing data load

check JSAPS report JA72699 for the reasons case has failed data load.

85. A CAM task will display ‘Big Gap – ISCS Extract Failed’ if details of an IS claim was expected but not transferred. This could be because:

the transfer failed

the claim is now maintained clerically

the claim is not found at the expected office

the IS claim has closed.

86. The IS data will not have been automatically validated.

87. To action errors and gaps:

check ISCS using IS500 to identify populated screens

check clerical papers if the IS claim has been maintained clerically

check PSCS/ISCS/CIS to complete/resolve as many of the data issues as possible

use JA660 (link is external) to input all missing data in ELUS.

88. A CAM task will be produced for all PSCS and some ISCS cases with deductions. This information cannot be recorded until after the Assessment process and is covered in deductions guidance.

89. For all cases where payments are being made for housing costs, and the customer has a non-dependent who is in employment, the customer will need to be contacted to confirm the amount of the non-dependent's earnings. Check that the earnings fall within the IS income band. If the earnings have changed follow change of circumstances guidance.

90. For customers on IS with a partner with an LR interest code 0, an error will be produced 'E4029 Error: Must be 1, 2, 3'. The CSA new rules flag on ELUS should be set to 'Y', NRP Partner flag set to 'Y' and the partner's LR flag should be set to 1.

91. Where the customer or partner has another benefit type '61' and sub type of 'PLT' on ISCS, an error message will display. The sub type must be amended to 'LT'.

92. Where the customer or partner is in receipt of IB with a sub type of 'PSL, PSH and PST' an error message will display. The sub type must be amended to :

PSL amended to STL

PSH amended to STH

PST amended to LT.

93. All cases with an occupational pension will require manual input.

94. Cases with Permitted Work may require manual input.

95. ISCS cases where the customer or partner has current work will require manual input.

96. ISCS cases where the customer or partner has been in hospital for more than 28 days may need manual input.

97. If there are still gaps in the information required to assess the ESA award contact the customer.

98. There could be errors or gaps in the PSCS information that has transferred. To action this follow guidance in the section All data transferred – errors or gaps reported.

99. Manual data transfer will be required where:

IB is being paid clerically

The ESA case has been transferred to clerical

an appeal is received 2 days or less before the Effective Date or once the Effective Date has been reached.

100. Before manual data transfer, it is essential to gather all the necessary information to complete the ESA award. The Gathering Information template (link is external) will assist with this process.

How to complete the Gathering Information Template

101. Complete the template (link is external) as far as possible using the clerical papers and/or PSCS/ISCS/CIS. The Assessment report may give more up to date information than PSCS and should be used if appropriate. You will also need to record the LCW outcome from Decision Making and Appeals Case Recorder (DMACR).

102. PSCS dialogues have been shown on the template.

103. ISCS enquiry pick list will allow users to access all screens that have been populated with information.

104. Complete only the relevant sections. For example, partner details will only be required if the customer is claiming for a partner.

105. Check notepad on PSCS and ISCS for any relevant information.

106. For all cases where payments are being made for housing costs, and the customer has a nondependent who is in employment, the customer will need to be contacted to confirm the amount of the non-dependent's earnings. Check that the earnings fall within the IS income band. If the earnings have changed follow change of circumstances guidance.

107. If the customer was claiming IB only check CIS and take the following action in ELUS dialogue JA660 'Where You Live':

"Local Authority Separate Interest" indicator on CIS has start date but no end date

record that HB has been claimed by inputting 'Y' 'Y'

"Local Authority Separate Interest" indicator on CIS has start date and end date

record that HB has not been claimed by inputting 'N' 'N'

No "Local Authority Separate Interest" in CIS

record that HB has not been claimed by inputting 'N' 'N'

No "Local Authority Separate Interest", but there are open "Housing

Benefit" interest held on CIS

as this will be historical data, record that HB has not been claimed by inputting 'N' 'N'

108. When the template has been completed check for any gaps or conflicts in the data. If there are gaps or conflicts that cannot be sourced from clerical papers or systems required to assess the ESA award contact the customer.

Manually transfer the data

109. Once all information has been gathered to assess the ESA award the nominated user must take the following actions to manually input the data using the ELUS desk top icon.

110. Calculate the Effective Date.

111. Transfer account if required through JA030 (link is external).

112. Register interest in PD350 (link is external).

113. Register the claim through ELUS JA060 (link is external) using today's date in 'Date of Claim' field and using the event sub type 13 (ESA C) or 14 (ESA C and IR)

114. Input data manually in ELUS JA610 Claim Maintenance Details (link is external) using the Effective Date in the 'Eff Date' field. the 'Recd Date' field will be pre-populated from the 'Date of Claim' field on JA060 and cannot be changed.

115. For IB claims enter in ELUS JA610 type '03' linking:

the first day of sickness from PSCS. This is the Period of Incapacity for Work (PIW) date

the end date of the IB claim.

116. For IS claims enter in ELUS JA610 type '07' linking:

the start date of the IS claim

the end date of the IS claim

117. Waiting days served will display as zero, do not take any action.

118. For customers on IS with a partner with an LR interest code 0, set the CSA new rules flag on ELUS 'Y', NRP Partner flag to 'Y' and the partner's LR flag to 1.

119. Complete ELUS JA230 Maintain IB&IS Awards.

120. ELUS JA610 Tax Details should be completed to show the customer has not supplied a P45. This will cause JSAPS to send the appropriate transaction to HMRC two weeks after reassessment to obtain the customer's tax details.

121. Once all information has been input the case can progress to Assessment if the effective date has been reached. Set a B/F to progress the case to Assessment if the Effective Date has not yet been reached.

122. Check the pension details uploaded in ELUS dialogue JA660 Occupational/Personal Pension Details.

123. For PSCS cases only, check notepad to populate Pension Provider and net pension details.

124. PSCS only has one payment frequency for occupational pensions, weekly.

125. ISCS enables the user to input one of 8 payment frequencies.

126. In cases where occupational pension details are held on both PSCS and ISCS, during data upload:

the gross amount of the occupational pension is taken from PSCS

the net amount of the occupational pension is taken from ISCS

the payment frequency is taken from ISCS

the start (and end) date is taken from ISCS

the reference number is taken from ISCS.

127. As the gross amount is taken from PSCS and the payment frequency is taken from ISCS, this may result in an incorrect amount being taken into account.

128. Using both PSCS and ISCS, each occupational pension uploaded must be input with the correct gross and net amounts, with the correct payment frequency.

129. Where the customer has more than one occupational pension the details will only upload from ISCS. Check ISCS and PSCS to identify correct details for all pensions. When details of each pension have been established complete the fields. Check any disregards the customer may be entitled to because of Transitional Protection.

130. Set the next review date using information held on PSCS/ISCS.

131. The customer should be contacted for any information that cannot be gathered from clerical papers or systems.

132. When an IB/IS case has permitted work higher limit subsequent (PWHLS) on PSCS that is more than 52 weeks after the previous period of permitted work higher limit (PWHL), an error message will display. The error must be cleared to progress the case as follows:

Overtype ‘type 4’ with ‘type 3’ in the permitted work screen to remove the error

JSAPS automatically allows 52 weeks of permitted work from the date type 3 is input. This is incorrect

Calculate the actual amount of days of permitted work remaining using the original start date on PSCS

Enter the calculated end date of permitted work in the permitted work screen

Make a note in ELUS JA110 Notepad (link is external) ‘Customer not legally due another 52 week period of permitted work, end date is 00/00/00’ This date must be the calculated date entered in the permitted work screen.

Employer Details

133. Full employer details may not be held on ISCS. ELUS will not allow the case to progress without the fields in the current work screen being populated.

134. Where the employer’s name and/or address is not known and only if there is no need to contact the customer for any other missing information set the fields as follows:

Employers name

Employer

Employers Address

Address

Employers post code

Use the customers post code

135. Ensure the review type in ELUS JA610 Current Work screen is set to contact the customer by using the review type 2.

136. Note in ELUS JA110 that employer details should be completed at the next review.

Current Work Review Type

137. The Review Type field in the Current Work screen is defaulted to spaces when transferred and will cause the following error: ‘Error E7413: Incorrect Entry: must be numeric in range 1 – 3’.

138. Input the correct review type as follows:

[1] Employer

[2] Customer

[3] Work Available Report.

Customer/Partner entitled to Disability Living Allowance

139. Where a customer or partner is in receipt of Disability Living Allowance (DLA) highest rate Care Component or Personal Independent Payment (PIP) Daily Living enhanced rate and has

been in hospital for more than 28 days, an error message will display. This is because ISCS will accept zero amounts in the ‘Total Rec’d’ and ‘Account Amount’ fields but JSAPS will not. The data will not transfer.

140. To clear the error take the following action:

Delete the DLA/PIP from ‘Other Benefits’ screen

input Exceptional Condition 07: Hospital Admission/Discharge. This will remove the personal allowance

enter a note in JA110 Notepad explaining why a clerical component is required (this will be input at assessment stage)

Partner entitled to Attendance Allowance

141. Where a partner is in receipt of Attendance Allowance (AA) higher rate and has been in hospital more than 28 days, an error message will display. This is because ISCS will accept zero amounts in the ‘Total Rec’d’ and ‘Account Amount’ fields but JSAPS will not. The data will not transfer.

142. To clear the error take the following action:

Delete the AA from ‘Other Benefits’ screen

input Exceptional Condition 07: Hospital Admission/Discharge. This will remove the personal allowance

enter a note in JA110 Notepad explaining why a clerical component is required (this will be input at assessment stage)

Telephony

143. If the data gather is still incomplete contact the customer to complete the data gather.

144. It is imperative that users run the Wrap Up Call SmartScript each time they manually create a Contact History Record so that Contact History details are included in the Management Information Reports.

145. Before contacting the customer check the following details and take any necessary action:

customer contact details

customer personal details

customer needs

appointee/representative

potentially violent person marking.

for customers living in Wales, the language preference must be established and the customer contacted in their preferred language.

146. If the customer is contactable by telephone:

access CAM to make the outbound call

manually create the CAM ‘Contact History’ with the following values:

caller name – input customer’s full name

Populate the following fields while on the phone to the customer:

channel – telephone

in/out – outbound external

do this for every call, even if it is not the first time the customer has been contacted. If this is not done at this stage for every contact, CAM will not update the Contact History correctly.

select the ‘Sufficient Security Questions Test Button’ in CAM

147. If there is insufficient security information on CAM, you should access PSCS/ISCS systems to ask security questions (link is external), using CAM notepad to record the questions and answers.

Call successful

148. Launch security questions SmartScript. When this is completed ‘Reason for Contact’ will be populated.

149. Use the CAM ‘IB Migration’ SmartScript to conduct the call.

150. Launch the IB Migration SmartScript. When this SmartScript is completed, the ‘Call Outcome’ field is populated.

151. Access ELUS JA660, or JA610 if doing a manual data transfer, to input previously identified missing or conflicting information.

152. If the customer asks the outcome of the WCA during the call, inform them that they will receive a further call as soon as a decision has been made on the ESA award and that this will be followed up in writing. You must not tell the customer the WCA outcome decision at this stage.

153. If during the call the customer requires time to obtain the necessary information, arrange a suitable time to call them back.

154. If the customer is unable to engage in the telephone call, request the information in writing on form IBM164. Create a CAM task, ‘Issue IBM164’. A 14 day B/F date is automatically set when the task is created.

155. When the IBM164 is issued, update the CAM task sub-status to ‘IBM164 issued’. The action of updating the task sub-status causes the automatic creation of a new contact history record.

156. When the IBM164 is received back from the customer, update the task sub-status to ‘IBM164 received’, update the contact history and close the task.

157. Send a reminder if the customer does not reply within 14 days and update the B/F date on the CAM task for 14 days. Note comments field reminder issued.

158. Where a customer living in Wales has expressed a preference for communication with the department in Welsh, ensure the notification is issued in Welsh.

159. End the call using the CAM Call Wrap Up SmartScript. When this is completed, ‘Case type’ and Case Number are populated and the Contact History Record will be included in Contact History Reports.

Call unsuccessful

160. If the call is unsuccessful because the customer fails the security questions, advise them that we will send them a letter explaining the reasons for the call. The call must then be terminated using the Wrap Up Call SmartScript.

161. If the user fails to make contact with the customer, the user should

create a new Contact History Record

Channel = Telephone

In/Out = Outbound-External

Launch and close the Call Wrap Up SmartScript which will ensure that the ‘Reason for Contact’, ‘Call Outcome’, ‘Case Type’ and ‘Case Number’ fields are populated appropriately.

162. When the call is ended, the Contact History Record will be sufficiently populated.

163. If the first call is not successful try to contact the customer again at 4 hourly intervals. A total of 3 attempts should be made to contact the customer over 2 days.

164. If a telephone number for the customer is not held or the outbound call is unsuccessful after 3 attempts, request the information from the customer in writing on form IBM164. Create a CAM task, ‘Issue IBM164’. A 14 day B/F date is automatically set when the task is created.

165. When the IBM164 is issued, update the CAM task sub-status to ‘IBM164 issued’. The action of updating the task sub-status causes the automatic creation of a new contact history record.

166. When the IBM164 is received back from the customer, update the task sub-status to ‘IBM164 received’, update the contact history and close the task.

167. Send a reminder if the customer does not reply within 14 days and update the B/F date on the CAM task for 14 days. Note comments field reminder issued.

168. Where a customer living in Wales has expressed a preference for communication with the department in Welsh, ensure the notification is issued in Welsh.

Completion of the data gather

169. When the customer provides the information take the following action:

access ELUS JA660, or JA610 if doing a manual data transfer

input the information provided by the customer

check data is complete by accessing ELUS JA220 (link is external).

170. There should be no need to verify data. However if the customer reports a change of circumstances during the data gather call take action as detailed in Change of Circumstances guidance.

171. Check that all tasks in CAM that have been completed are closed.

The case can now progress to Assessment.

Customer fails to supply necessary information

172. If the customer fails to supply the necessary information within the given time, refer the case to the Reassessment Decision Maker

CAM DISPLAYS		CLEARANCE ACTION
To Do	Register Interest	See guidance

To Do	IB Terminated During Migration	See Change of Circs guidance
To Do	IS Terminated During Migration	See Change of Circs guidance
To Do	Ready For Assessment	See guidance
Data Load Validation	Data Cleansing Required	See guidance
Data Load Validation	Manual Validation Required	See guidance
Big Gap	PSCS Extract Failed	See guidance or See printed output guide
Big Gap	Nothing Loaded from PSCS	Nothing Loaded from PSCS
Big Gap	External Org Not Found	External Org Not Found
Big Gap	PSCS Negative Adjustments	PSCS Negative Adjustments – Relevant to Data Gather - do not clear this CAM task until all Negative Adjustments, for this customer, have been actioned
Big Gap	Check Child Premium Adjustment	Check Child Premium Adjustment
Big Gap	ISCS Deductions (3rd Party)	ISCS Deductions (3rd Party)

Big Gap	ISCS Deductions (Social Fund)	ISCS Deductions (Social Fund)
Big Gap	ISCS Deductions (Overpayments)	ISCS Deductions (Overpayments)
Big Gap	Failed ISCS Deduct (Out Of Hrs)	Failed ISCS Deduct (Out Of Hrs)
Big Gap	Failed ISCS Deduct (Recov Pymt)	Failed ISCS Deduct (Recov Pymt)
Big Gap	Failed ISCS Deduct (POA)	Failed ISCS Deduct (POA)
Big Gap	Failed ISCS Exceptional Condition	Failed ISCS Exceptional Condition
Big Gap	IB paid Four Weekly	IB paid Four Weekly
Big Gap	Missing SFCS Deductions	Missing SFCS Deductions
Big Gap	Action Outstanding on PSCS	Action Outstanding on PSCS
Big Gap	Action Outstanding on ISCS	Action Outstanding on ISCS
Big Gap	ISCS Extract Failed	ISCS Extract Failed
Big Gap	PSCS Positive Adjustments	PSCS Positive Adjustments

Big Gap	Claim Closed on ISCS	Claim Closed on ISCS
Big Gap	Payment Suspension Held	Payment Suspension Held
Big Gap	Offset Abatement or Recovery	Offset Abatement or Recovery
Big Gap	Two Separate Bank Accounts	Two Separate Bank Accounts

Nothing Loaded from PSCS

Possible failure reasons	Action to take
Registering Interest has been instigated when IB is being paid clerically	Follow the process for Data Transfer Failed – No Data Loaded

External Org Not Found

Possible failure reasons	Action to take
The external organisation on PSCS/ISCS is not recognised by JSAPS	No action at this point See Deductions Guidance

PSCS Negative Adjustments – Relevant to Data Gather

Negative Adjustment type in PSCS	Action to take
Pension Income	Do not clear this CAM task until all Negative Adjustments, for this customer, on the report have been actioned

Overlapping Benefits	Do not clear this CAM task until all Negative Adjustments, for this customer, on the report have been actioned
SMP Payable	Do not clear this CAM task until all Negative Adjustments, for this customer, on the report have been actioned

PSCS Positive Adjustments

Once the appropriate action below has been taken, access dialogue JA530 to delete the S369 case control. Certain action within JA230 may have already deleted this case control.

Positive Adjustment Type in PSCS	Action to take
Uploaded to JA230 Maintain IB and IS Awards	No action at this point See Assess Award Guidance

Check Child Premium Adjustment

Positive Adjustment Type in PSCS	Action to take
Missing information required on JSAPS	No action at this point See Deductions Guidance

ISCS Deductions (3rd Party)

Possible failure reasons	Action to take
Missing information required on JSAPS	No action at this point See Deductions Guidance

ISCS Deductions (Social Fund)

Possible failure reasons	Action to take
Missing information required on JSAPS	No action at this point See Deductions Guidance

ISCS Deductions (Overpayments)

Possible failure reasons	Action to take
Missing information required on JSAPS	No action at this point See Deductions Guidance

Failed ISCS Deduct (Out Of Hrs)

Possible failure reasons	Action to take
Missing information required on JSAPS	No action at this point See Deductions Guidance

Failed ISCS Deduct (Recov Pymt)

Possible failure reasons	Action to take
Missing information required on JSAPS	No action at this point See Deductions Guidance

Failed ISCS Deduct (POA)

Possible failure reasons	Action to take

Missing information required on JSAPS	No action at this point See Deductions Guidance

Failed ISCS Exceptional Cond

Possible failure reasons	Action to take
Sanctions and Suspensions are held as Exceptional condition on ISCS. The code will not be recognised by JSAPS as JSAPS hold records Suspensions, Sanctions and Disallowance records in JA210 Maintain Suspension and Decision Details (link is external)	Check ISCS for Exceptional Condition code in IS500 Enquiry/Evidence If Exceptional Condition is for a transferable Sanction see Assess Award Guidance If Exceptional Condition is applicable to ESA, and should have been accepted by JSAPS, contact Live Support

IB Paid Four Weekly

Possible failure reasons	Action to take
Customer has not been converted to 2 weekly payments	No action at this point Discuss with the customer during the allowance telephone call.

Missing SFCS Deductions

Once the appropriate action below has been taken, access dialogue JA530 to delete the S366 case control.

Possible failure reasons	Action to take
Missing information required on JSAPS	No action at this point

	See Deductions Guidance

Action Outstanding on PSCS

Once the appropriate action below has been taken, access dialogue JA530 to delete the S367 case control.

Possible failure reasons	Action to take
Outstanding case control Either CC5487 Manual Uprating Required or CC6008 Outstanding Change of Circumstances should be present	Check action outstanding in RP303 Controls and Reviews Contact the IB section in the owning office to clear the action Take follow up action on JSAPS if required e.g. updating JA230 Clear task when the PSCS Case Controls are cleared
Case Controls 5585 and 5592 for unconfirmed end dates for ADI and CDI on PSCS. The case controls are set up to 23 weeks prior to the end dates	Contact the IB section in the owning office to clear the action Ensure the end date is input in JSAPS

Action Outstanding on ISCS

Once the appropriate action below has been taken, access dialogue JA530 to delete the S367 case control.

Possible failure reasons	Action to take
Outstanding case control	On all cases: Check action outstanding in IS530 Case Controls.

S2 New claim decision outstanding	Contact the IS section in the owning office to action and clear the case control Check ISCS dialogue IS500 Update JSAPS with any new information
S3 Change of circumstances action outstanding	Contact the IS section in the owning office to action and clear the case control Check ISCS dialogue IS500 Update JSAPS with any new information
S9 Mortgage Interest Direct action outstanding	Contact the IS section in the owning office to action and clear the case control Update JSAPS with any new information
S10 Change of circumstances decision outstanding	Contact the IS section in the owning office to action and clear the case control Check ISCS dialogue IS500 Update JSAPS with any new information
S14 Missing Instrument of Payment recorded	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point
S17 Payment suspended	Check why payment is suspended Does the suspension apply to ESA award Link to ESA BAU Contact the IS section in the owning office to action and clear the case control if appropriate
S18 Payment Renewal failure	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point

S25 Case transfer action outstanding	See Change of Circs Guidance
S26/S27/S29/S42/S43 Uprating action outstanding	Contact the IS section in the owning office to action and clear the case control Consider uprating in JA230 See Assess Award
S28 NTC action outstanding	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point
S39 Limited Case Check (LCC) / Limited Case Review (LCR)	Contact the IS section in the owning office to action and clear the case control if the date has passed No action for ESA at this point See Assess Award Guidance
S45 CSR decision outstanding	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point
S70 Direct Payment Recall action outstanding	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point
S73 Social Fund deduction action outstanding	Contact the IS section in the owning office to clear the action No action for ESA at this point See Deductions Guidance
S74 INCAP action outstanding	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point

	See Deductions Guidance
S75 SIR action outstanding	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point See Deductions Guidance
S87 Housing costs arrears action o/s	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point See Deductions Guidance
S99 CSR NRP deduction action outstanding	Contact the IS section in the owning office to action and clear the case control
S109 DLA/PIP action outstanding	Contact the IS section in the owning office to action and clear the case control
S110 DLA/AA/PIP Expiry Date action	Contact the IS section in the owning office to action and clear the case control
S121 Medical Certificate Expired	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point
S122 Lone Parent decision outstanding	Contact the IS section in the owning office to clear the action No action for ESA at this point
S124 P&P Failure	Contact the IS section in the owning office to action and clear the case control Check payday and cycle Refer to live support if required

P14 SIR action pending	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point See Deductions Guidance
P20 Case has been reported to LO1 officer for closing down	Contact the IS section in the owning office to clear the action Check end date for IS Check if ESA(IR) claim to continue See Change of Circs Guidance
P23 Claim ends in the future	Check end date for IS Check if ESA(IR) claim to continue See Change of Circs Guidance
P30 A non-recalled Instrument of Payment has been returned	Contact the IS section in the owning office to action and clear the case control No action for ESA at this point
P93 (data type 2) Date of death broadcast awaiting decision	Contact the IS section in the owning office to action and clear the case control See Change of Circs Guidance

ISCS Extract Failed

Possible failure reasons	Action to take		
Technical failure	Check Report JA72699		
IS claim Maintained Clerically	Request clerical papers from IS office Input missing information in JA660		

IS Claim not found on expected office	Check CIS for current IS claim location Request clerical papers from IS office or access IS500 Input missing information in JA660		

Claim Closed on ISCS

Possible failure reasons	Action to take
IS claim has Terminated	Check reason for termination in IS500 and IS110

Payment Suspension Held

Possible failure reasons	Action to take
Payment is suspended on PSCS	Contact the IB section in the owning office to establish reason for suspension If suspension can be lifted continue data gather if suspension cannot be lifted, for example customer is in custody, the reassessment process will cease and claim must be closed on PSCS update CAM and ISCS notepad if required
Payment is suspended on ISCS	Contact the IS section in the owning office to establish reason for suspension If suspension can be lifted continue data gather if suspension cannot be lifted, for example awaiting evidence validation, case must be retained in BF until the evidence is provided update CAM and ISCS notepad if required

Offset, Abatement or Recovery

Possible failure reasons	Action to take

The arrears payment has been amended to take into account payments already made for the same period	The abatement PSCS award components should only be present on awards for a past closed period which has already been paid and not on an ongoing award. No further action required A recovery may be for an overpayment or Social Fund loan on an ongoing award. Deductions guidance covers this If an overlapping benefit has been recorded for a future period on PSCS using an offset, then that benefit should be input in Other Benefits screen in JA660 so that it can be taken into account in the ESA award.

Two Separate Bank Accounts

Possible failure reasons	Action to take
The customer is being paid into different accounts on PSCS and ISCS	Contact customer to confirm the account ESA is to be paid into.

Details Required	System Dialogues		
	PSCS	ISCS	Legasuite/JSAPS
Partner’s name	RP008 608	IS500	JA660
Partner’s date of birth	X	IS500	JA660
Partner’s NINO	RP001	IS500	JA660
Partner’s address if different due to temporary separation	X	IS500	JA660
Marital or civil partnership status	RP003	X	JA660

Unacceptable customer behaviour indicator	RP001	IS500	JA92
Appointee details	RP003	IS500	JA400 (F4)
Brief details of illness or disability	RP011	X	JA660
Name and address and phone number of doctor/Healthcare Professional	RP303	X	JA660
Registered blind	RP011	IS500	JA660 Ex Con
Partner registered blind	X	IS500	JA660 Ex Con
Permitted work	RP012	X	JA660
Part time earnings for customer and/or partner	X	IS500	JA660
Other benefits for customer and/or partner	X	IS500	JA660
Occupational Pension/Personal Pension/Annuity	RP506 F3	IS500	JA660
Children	RP008	IS500	JA660
Money	X	IS500	JA660
National Savings Certificates	X	IS500	JA660

Other Income	X	IS500	JA660
People who live with you	X	IS500	JA660
Where you live	X	IS500	JA660
Housing Costs	X	IS500/506/510	JA660/JA301
Exceptional Conditions	X	IS500	JA660
3rd Party Deductions	X	IS505	JA300
Overpayment Deductions	RP506	IS505	JA303
Social Fund Deductions	RP506	IS505	JA302
Method of payment	RP002	IS500/502/535	JA400 (F3) – Bank details
Post Office	CP650	CP650	CP650
For miscellaneous information check notepad	RP001, F2 and F7	IS510	JA110

Assess Award

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to assess an Employment and Support Allowance (ESA) award following reassessment from Incapacity Benefit (IB), Severe Disablement Allowance (SDA) or Income Support (IS) paid on the grounds of incapacity, including how the effective date is calculated and the transitional addition (TA).

2. The effective date is the date on which a conversion decision as to whether or not a customer's existing award qualifies for conversion to ESA takes effect.

3. The effective date is defined as:

the first day of the benefit week, following the period covered by the first full fortnightly pay period of the existing award, after the date on which the conversion decision is issued.

the first day of the benefit week immediately following the end of the second complete benefit week after the date on which the conversion decision is issued (where the customer receives payment other than fortnightly intervals for example weekly, quarterly or annually)

4. Entitlement to the existing award ends on the day before the effective date whether or not the award is converted.

5. Customers found not to have Limited Capability for Work (LCW) can choose to:

claim Jobseekers Allowance (JSA)

appeal against the decision not to convert them from IB/IS/SDA to ESA

appeal the decision that they do not have LCW following application of the Work Capability Assessment (WCA) and be paid the assessment phase rate of ESA while the appeal is ongoing

claim or continue to receive IS under another condition of entitlement, if applicable

leave the benefit system altogether.

Calculation of the Effective Date

6. The effective date will be automatically calculated for allowed cases which are auto-converted.

7. The effective date will be calculated clerically for cases that are manually converted.

8. If ESA (C) is awarded and Pension Credit (link is external) is in payment, the Pension Service must be notified and advised of the amount of arrears of ESA (C) that are being held.

9. Premiums are fixed rates of ESA paid in addition to the Personal Allowance to those who satisfy certain conditions.

10. These conditions may be satisfied by:

the claimant; or

the claimant's partner

11. Persons Without Accommodation (PWAs) are not entitled to any premiums.

12. People with No Fixed Address (NFAs) are allowed the same premiums as any other ESA claimant.

13. There are four categories of premium:

Pensioner Premium (PP)

Severe Disability Premium (SDP)

Enhanced Disability Premium (EDP)

Carer Premium (CP)

14. PP is payable to claimants who are in receipt of ESA(IR) and they or their partner are the age they can get Pension Credit or over.

15. It can be paid at one of two rates:

single rate, for single claimants; or

couple rate, where either the claimant or partner satisfies the qualifying conditions.

16. JSAPS will automatically award the appropriate PP where the claimant and/or their partner meet the above qualifying conditions.

17. If the claim is maintained clerically, show the award of the PP on form ESA14 (link is external).

18. SDP is payable at two rates:

lower

higher

19. Pay lower rate SDP if the claimant:

is single or a lone parent and:

they receive middle or higher rate of DLA Care Component or AA, or the enhanced or standard rate of PIP Daily Living component, or AFIP, and

they live alone, and

no-one receives Carer's Allowance (CA) for looking after them

AA, or

the middle or higher rate of DLA Care Component, or

the enhanced or standard rate of PIP Daily Living component,

AFIP, and

CA is in payment for one partner, or one but not all members of a polygamous marriage

There are no non-dependants aged 18 or over who normally reside with the claimant or who the claimant normally resides with.

AA, or

the middle or higher rate of DLA Care Component , or

the enhanced or standard rate of PIP Daily Living component, or

AFIP, and

the other partner is blind, and

they live alone, or

no-one receives CA for looking after them

is a member of a married or unmarried couple, or polygamous marriage and they both, or all members of a polygamous marriage, receive:

is a member of a married or unmarried couple or polygamous marriage and they both or one partner receives:

Note: The person in receipt of AA/ DLA/PIP/AFIP must be the claimant to qualify for SDP.

20. Pay higher rate SDP if the claimant is a member of a married or unmarried couple, or polygamous marriage and they both, or all members of a polygamous marriage, receive:

AA, or

the middle or higher rate of DLA Care Component, or

the enhanced or standard rate of PIP Daily Living component, or

AFIP, and

CA is not in payment for either partner, or any member of a polygamous marriage

21. When deciding whether someone lives alone, disregard:

dependants

anyone aged less than 18

anyone receiving AA, or the middle or higher rate of DLA care component, or the enhanced or standard rate of PIP Daily Living component, or AFIP

boarders, other than a close relative

subtenants, other than a close relative

anyone who shares only a bathroom, toilet, hall or stairway

anyone who is separately liable to make payments to the landlord

certain joint tenants/owner occupiers

certain volunteers from charitable organisations

landlords/landladies and their families, other than a close relative

anyone who is registered blind or who has recently been on the register see DMG 44086 (link is external)

anyone who joined the household to care for the claimant or partner, and immediately before this, the claimant or partner was treated as a severely disabled person. This applies for the first 12 weeks after the person joined the household for the first time.

22. For the full qualifying conditions for the SDP see DMG 44111 etc (link is external).

23. If entitlement or potential entitlement to SDP is identified prior to an ESA(IR) claim being pushed from CAM to JSAPS, see Recording Exceptional Conditions on CAM (link is external) for the action to take.

24. If entitlement to SDP is identified after the Assess Award action has been taken in CAM, JSAPS will not automatically award the appropriate SDP but it will recognize potential entitlement if DLA HRCC/enhanced rate of PIP Daily Living component is recorded in the OTHER BENEFITS screen. All the information to make a decision around the SDP should have been gathered on CAM and should be held on the system.

25. Where all the necessary information is not held on the system an outbound call should be made to the claimant to gather the missing information and this should be recorded on an A6 form.

26. Only where we cannot contact the claimant by telephone should an IS10 be issued via JSAPS by entering the appropriate exceptional condition and recording RV for Required Verification. A case control should then be set in JA110 for 2 weeks. If this is not returned within 2 weeks a further clerical IS10 should be issued and a further case control set.

27. Where no contact is made with the claimant a visit (link is external) should be undertaken.

28. If a SDP award is appropriate, take the following action:

Step	Action
1	Access dialogue JA610: ESA Claim Maintenance (link is external) and use the award date of the SDP as the Effective Date Note: this dialogue will only be accessible at the new claims stage or if a change of circumstances has been registered in dialogue JA060: Register Claim/Event (link is

	external)
2	Access the EXCEPTIONAL CONDITIONS screen, JA627657, and input: the relevant person number in the ‘Person No’ field [03] to award SDP lower rate or [04] to award SDP higher rate in the ‘Reason Code’ field the start date and end date (if known) of the entitlement to SDP if known [V] for verified in the final column
3	Decide on claim by accessing JA200: Award and Decision (link is external) and JA405: Compute Payment (link is external)

29. If the claimant does not qualify for a SDP, take the following action:

Step	Action
1	Access Dialogue JA610: ESA Claim Maintenance and use the award date of the SDP as the Effective Date Note: this dialogue will only be accessible at the new claims stage or if a change of circumstances has been registered in dialogue JA060: Register Claim/Event
2	Access the EXCEPTIONAL CONDITIONS screen, JA627657, and input: the relevant person number in the ‘Person No’ field [03] to award SDP lower rate or [04] to award SDP higher rate in the ‘Reason Code’ field the start date and end date (if known) of the entitlement to SDP if known [NE] for not entitled in the final column
3	Decide on claim by accessing JA200: Award and Decision and JA405: Compute Payment

30. If the claim is maintained clerically, show the award of the SDP on form ESA14.

31. EDP is payable to ESA(IR) claimants who are in the Support Group or receive (or, if they are a member of a couple, their partner receives)

the higher rate care component of Disability Living Allowance (DLA HRCC), or the enhanced rate of PIP Daily Living component, or

Armed Forces Independent Payment (AFIP)

32. The premium will be payable at two rates:

a rate for a couple, and

a rate for a single person

33. The single rate EDP will be awarded when the claimant:

is single, or

is a lone parent, and

is in the Support Group, or

DLA HRCC or the enhanced rate of PIP Daily Living component is payable in respect of them or would have been payable in respect of them had it not been suspended as a consequence of hospitalisation, or

AFIP is payable.

34. Award the couple rate EDP when:

the claimant is a member of a married or unmarried couple, or

the claimant is a member of a polygamous marriage, and

the claimant is in the support group, or

AFIP is payable, or

DLA HRCC or the enhanced rate of PIP Daily Living component is payable or would have been payable had it not been suspended as a consequence of hospitalisation in respect of

the claimant, or

the claimant’s partner (provided they are under the age for getting Pension Credit)

35. EDP cannot be paid if there is an entitlement to PP.

36. Entitlement to the EDP will continue throughout the stay in hospital if one member of a couple or polygamous marriage is a patient.

37. The EDP will stop when a single person or a lone parent has been in hospital for more than 52 weeks.

38. The EDP will stop when each member of a couple or polygamous marriage have been in hospital for more than 52 weeks.

39. If a claimant is in a Care Home and continues to receive AFIP, DLA HRCC or the enhanced rate of PIP Daily Living component after admission, the EDP will continue in payment.

Note: AFIP is a life time award and only stops on admission to the Royal Hospital Chelsea.

40. JSAPS will automatically award the appropriate EDP where the claimant and/or their partner meet the above qualifying conditions.

41. If the claim is maintained clerically, show the award of the EDP on form ESA14 (link is external).

42. CP is paid to the claimant when they or their partner are a carer or has been treated as a carer. It is paid at one rate and can be awarded with other premiums.

43. More than one carer premium may be awarded if both the claimant and their partner satisfy the qualifying conditions.

44. To qualify for the CP, the claimant, their partner or both must:

be in receipt of Carer's Allowance

have underlying entitlement to Carer's Allowance.

45. In some circumstances, the claimant or their partner may be entitled to Carer's Allowance but do not receive it because they receive an overlapping benefit. If this underlying entitlement applies, the CP can be awarded. Carer's Allowance unit will send card DS751D to the District Office when a person has underlying entitlement to CA.

46. JSAPS automatically awards the CP if Carer's Allowance is input as received on the OTHER BENEFITS screen or if underlying entitlement is input in the EXCEPTIONAL CONDITIONS screen.

47. CP is extended for 8 weeks following the date that either:

the person being cared for dies; or

Carer's Allowance ceases for reasons other than the death of the person being cared for

48. If Carer's Allowance ends for reasons other than the death of the person being cared for, JSAPS will automatically award the CP for a further 8 weeks.

49. If the person being cared for dies, Carer's Allowance itself is extended for 8 weeks. The CP will also be awarded for this 8 week period but user intervention is required to prevent JSAPS extending the Carer Premium for a further 8 weeks after the extended Carer's Allowance ends. Take the following action on these cases:

Step	Action
1	Access the OTHER BENEFITS screen, JA617645, of dialogue JA610: ESA Claim Maintenance (link is external)
2	In the ‘D/end’ field input the date that Carer’s Allowance ceases, i.e. the last day of the 8 week extension period
3	In the ‘Rec’d’ field remove [Y] or [U] and replace with [X]
4	Confirm details and leave screen
5	Access JA200: Award and Decision (link is external) and JA405: Compute Payment (link is external) and decide/pay

50. If the claim is maintained clerically, show the award of the CP on form ESA14 (link is external).

51. All IB (IS) Reassessment customers who based on medical evidence will be converted to Employment and Support Allowance must be checked for the following before an ESA interest is registered:

If the IB (IS) Reassessment customer has a partner claiming Income Support or Jobseekers Allowance (excluding Joint Claims) in their own right.

If that partner receives a Disability Premium solely because of the IB (IS) Reassessment customers IBLT or SDA claim. For further information see the DP Identification Deskaid (link is external).

Where the above does not apply identify if the IB (IS) Reassessment customer has another condition of entitlement to Income Support (other than Incapacity).

Calculate the amount of Income Support compared to ESA if the customer decides to remain on IS. See Customer decides to remain on IS for further information.

Disability Premium Couple case identified

52. If after taking action to identify another condition of entitlement to IS a partner receives IS or JSA in their own right and receives a DP further action must be taken on the case.

53. If the customer’s partner is in receipt of a DP take action as detailed in the Couple cases with a DP expert user guide (link is external) the expert user is the member of the reassessment team with an Income Support background.

54. In all cases the customer and partner will be contacted and an explanation of their options given. As a result the customer will have 10 working days to make a claim to IS if they choose that option.

55. Where both partners fail to give consent the process cannot be discussed with either of them. If consent is not provided because contact cannot be made with the customer please issue the IBM297 (link is external) if Income Support is in payment to the partner, or the IBM297A (link is external) if JSA is in payment to the partner. See DP couple case instructions notes IBM297 (link is external) and instruction notes IBM297A (link is external) for guidance on completing these notifications.

56. To establish and calculate the customer’s entitlement to IS take the following actions:

Step	Action
1.	Use the IS identification desk aid (link is external) to identify another possible condition of entitlement to IS
2.	If another condition is identified use the IS calculation desk aid (link is external) to calculate the new rate of IS and clerically calculate what the award of ESA will be.
3.	Contact the customer providing them with their options and confirm what they want to do. If customer cannot be contacted by telephone, they must be contacted in writing.

Customer chooses to remain on IS

57. If customer chooses to remain on IS take the following action:

Step	Action
1.	Do not register ESA interest but calculate the ESA award using the ESA14 and the Effective Date
2.	Issue the clerical notification letter with the attached ESA14 explaining the award of ESA the customer would have received had they chosen to do so

3.	Retain a copy of the notification
4.	Record that it was the customer’s decision to remain on IS on PSCS and ISCS Notepads and on form A6
5.	Process the change of circumstances on ISCS to remove the Incapacity code from the case. Ensure the date of change is the Effective Date
6.	In Dialogue IS105 Compute Payment amend the ‘Award Notification to Include Appeal Rights’ field to ‘N’ ‘you do not want the award notification to include appeal rights’
7	Close the PSCS case from the day before the Effective Date.

Customer does not make decision when contacted

58. If the customer does not make a decision when contacted take the following action:

Step	Action
1.	Explain to the customer that they have 10 working days to notify us of their decision and if we do not hear from them within his time their ESA case will be actioned.
2.	Set a CAM task to review the case in 10 working days
3.	CAM notepad updated with action taken on the case
4.	If no decision is received within 10 working days, note JSAPS (when case is built), PSCS and ISCS that the option of remaining on Income Support was offered but no contact was made
5.	Continue with the customer’s reassessment journey
6.	If the customer wishes to remain on IS see Customer chooses to remain on IS

Customer chooses to be reassessed to ESA

59. If customer does not wish to remain on IS and chooses to be converted to ESA take the following action:

Step	Action
1.	Note JSAPS (when case is built), ISCS and PSCS of the customers decision
2.	Continue with the customer's reassessment journey

60. In cases where the data is received from Pensions Strategy Computer System/ Income Support Computer System (PSCS/ISCS) and there are no gaps or data conflicts, progress to inputting the WCA outcome decision in JA674.

61. When a user enters the WCA decision in JA674 and then fails to assess and/or pay the award, a Case Control is created and passed to CAM. A CAM task 'Action Pending JA200/405' is created to inform the user that further work is required on the case. When the work has been completed close the CAM task.

62. In cases where the data is received from PSCS/ISCS but there are gaps/data conflicts further action is required.

63. See Automatic data transfer for help with resolving/clearing these issues.

64. ISCS deductions which fail to migrate will be identified by a series of specific CAM tasks.

65. When all gaps or data conflicts are resolved progress to inputting the WCA outcome decision in dialogue JA674, 'ESA Personal Capability Assessment' (link is external).

66. The input of a decision in JA674 may be subject to a pre-payment check when JA405 (link is external) is reached, which must be cleared by an authorising officer as per the current process.

67. Dialogue JA230, 'Maintain IB and IS Awards' (link is external) is used to allow an ESA user to:

insert IB/SDA and when applicable IS gross award details for-

automatically Migrating claims when the data load and validation has failed

manually transferring claims

Build from Clerical claims that have been identified as having been converted from PSCS and when applicable ISCS

linked ESA claims where a previous ESA claim was transferred from IB

passed from PSCS and when applicable ISCS during the migration data upload process

inserted manually due to the claim being built from clerical or manually transferred

inserted manually when either the PSCS or ISCS gross award details have not been successfully retrieved from the source system or where the data load and validate process has failed for automatically transferring claims

Amend the IB/SDA and where applicable IS gross award details that have either been-

68. The gross award details held are used to calculate a customer’s entitlement to TA.

69. To do this, JA230 is made up of 4 different sub-dialogues:

In JA230230, ‘Maintain IB&IS Awards NINO Prompt’ input the customers NINO to either insert, amend or view details of a customers IB, SDA or IS gross award

In JA230231, ‘IB&IS Award Picklist’ select an IB or IS gross award to enter, amend or view in the subsequent screens

In JA230232, ‘IB&IS Award Details’ enter, amend or view IB and IS gross awards

In JA230233, ‘IB&IS Award Components’ enter, amend or view IB&IS gross award component details.

Inserting IB and IS gross award details in JA230

70. If the award details require amending/inputting, JA230 must be accessed to amend/input the gross award details using:

any existing clerical paperwork

PSCS dialogue RP001, ‘Notes’

RP008, ‘Incap Entitlement Enquiry’

RP507, ‘Incap Child Dependant Entitlement’

RP508, ‘Adult Dependant Entitlement’

and when applicable ISCS dialogues:

IS500, ‘Enquiry/Evidence’

IS503, ‘Enquiry/Awards’, and

IS110, ‘Notepad’.

71. The following actions must be taken:

Step	Action
1.	Access ‘Maintain IB&IS Awards Nino Prompt’ screen JA230230 and insert the customers NINO, select ‘Continue’ button
2.	In JA230231, ‘IB&IS Award Picklist’, select the clerical indicator fields relevant to the claim: ESA(C) claim, the ‘IB Clerical Indicator’ must be selected ESA(C) and (IR) claim, the ‘IB Clerical Indicator’ and ‘IS Clerical Indicator’ must be selected then select ‘Continue’ button
3.	The gross award ‘Start Date’ is automatically populated as the effective date minus 1 so that the gross award details from when the claim was reassessed can still be viewed, even if the gross award details are changed from the beginning of the claim
4.	In JA230232, ‘IB&IS Award Details’, select ‘Continue’ button to access JA230233, ‘IB&IS Award Components’ in order to input the appropriate components to make up each award
5.	In the IB Award Components screen, the correct components which made up the previous gross IB award must be entered in the ‘Number’ field. These are: 015 DEPENDANT CHILD 016 DEPENDANT SPOUSE 018 IVA LOW 019 IVA MIDDLE 020 IVA HIGH 132 IB PRE 97 AP 133 IB PRE 97 AP(FROZEN)

	140 VB BASIC COMPONENT 142 SDA BASIC 149 SDA AGE RELATED ALLOWANCE - HR 150 SDA AGE RELATED ALLOWANCE - MR 151 SDA AGE RELATED ALLOWANCE - LR 154 IBST(L) 155 IBST(H) 156 IBLT 157 INCAP AGE ADDITION - HIGHER 158 INCAP AGE ADDITION - LOWER 159 SB - OVER MPA 160 SB - UNDER MPA 181 IB POST 97 AP 186 SHARED AP 188 IB ADULT DEP -HIGHER 191 IB POST 02 AP
6.	The amount of the award component must be entered in the ‘Amount’ field for each entry in the number column
7.	The NINO must be entered in third field for each adult/child for which an ADI/CDI was awarded on the previous IB claim
8.	One of four entries can be made in the ‘Status’ field, they are: A – Amend D – Delete I – Input O - Overwrite Select ‘I’ from the drop down menu for every line of entry made, and when all entries have been made, select ‘Continue’ button

9.	JA230232 will then display each of the IB award components input in the previous screen. The ‘Effective Date’ field must be completed to ensure the correct gross amount is awarded from the correct date
10.	The ‘Name’ and ‘Date of birth’ of the person for whom any ADI/CDI applies must then be input in the ‘ADI Details/CDI details’ fields
11.	Once input, the name, date of birth or NINO of the person for whom the ADI/CDI is payable for, can be amended if found to be incorrect by taking the following action.
12.	If the ‘IS Award Component’ field was selected in JA230231, ‘IB&IS Award Picklist’, select ‘Continue’ button to access the ‘IS award Component’ screen.
13.	If the claim is for ESA(C) only, and the ‘IB Clerical Indicator’ only was selected in JA230231, go to step 19
14.	In JA230232, ‘IB&IS Award Details’, select ‘Continue’ button to access JA230233, ‘IB&IS Award Components’.
15.	In the IS Award Components screen, the correct components which made up the previous gross IS award must be entered in the ‘Number’ field. These are: 001 PERSONAL ALLOWANCE 004 PENSIONER PREMIUM 005 HR PENSIONER PREMIUM 006 DISABILITY PREMIUM 007 SEV DISABILITY PREM 010 EMPLOYMENT INCOME 011 TARIFF INCOME 012 OTHER INCOME 013 OTHER BENEFIT 014 HOUSING COSTS 019 POLY PTNR PERS EXPNSE 020 ENHANCED PENS PREM

	021 MORTGAGE INTEREST DIRECT 022 CARER PREMIUM 023 RESIDENTIAL ALLOWANCE 025 NON MID LOAN 026 ENHANCED DISABILITY PREMIUM 028 BEREAVEMENT PREMIUM 030 GUARANTEED CREDIT (PENS CRED) 031 SAVINGS CREDIT (PENS CRED) 032 PENS CREDIT TRANS PROTECTION
16.	The amount of the award component must be entered in the ‘Amount’ field for each entry in the number column
17.	One of three entries can be made in the ‘Status’ field, they are: A – Amend D – Delete I – Input therefore select ‘I’ for every line of entry made, and when all entries have been made, select ‘Enter’
18.	JA230232 will then display each of the IS award components input in the previous screen. The ‘Effective Date’ field must be completed to ensure the correct gross amount is awarded from the correct date
19.	When all award components have been input correctly and from the correct effective date, select ‘JA200’ button to access JA200, ’Award and Decision’
20.	If the WCA determination hasn’t been input on the system an error message will be received, ‘E3531 Error: Decision required in JA674’. If this occurs, populate the relevant fields in dialogue JA674 with the decision as per current guidance and then select ‘JA200’ button to access JA200 when the option is available
21.	Where the customer/partner has been in hospital for more than 28 days, and

	‘Exceptional Condition’ 07 has been input to remove the personal allowance, the total appropriate personal allowance and EDP must be clerically calculated
22.	Enter this amount as a clerical component by selecting ‘Cler Comp’ button
23.	Enter details of the clerical calculation in JA110 Notepad
24.	Set a case control in JA530 Case Controls for when the customer/partner has been in hospital for 52 weeks. The EDP will be withdrawn from that date
25.	In JA200201, ‘Evidence Summary’, select ‘Continue’ button
26.	Based on the adjustments made in JA230, JA200202, ‘Award Summary’, the ESA (C) and ESA (IR) awards will be re-calculated and will display any transitional additions which have been included in the following fields: ESA (C) Trans Addition ESA (IR) Trans Addition.
27.	Access and action JA405, ‘Compute Payment’. Any cases where the gross award is amended in JA230 will prompt a pre-payment check being created. A Team Leader must authorise the payment as per the current process.

Amending Name and Date of Birth details in JA230

72. If any of the following personal details:

name

date of birth

whom an ADI/CDI is in payment are found to be incorrectly recorded on JSAPS dialogue JA230 (link is external), an error message will display. To correct the details take the following action:

Step	Action
1.	Access JA230233 and input ‘O’ in the ‘Status’ field on the relevant line number

2.	Select ‘Continue’ button to re-access JA230232
3.	Overwrite the incorrect entry with the correct details
4.	The correct details must be input prior to accessing JA200.

Amending NINO details in JA230

73. PSCS does not hold the NINO suffixes for ADI/CDI NINOs. For reassessment purposes these are found on and transferred from CIS.

74. If the NINO is not found on CIS, and the user accesses JA230 before they assess the case, then the user must find and enter the NINO suffix.

75. If the user accesses JA230 after they have assessed the case, then they will still be able to enter a name/NINO, but will not be able to change or correct the NINO. The old ADI/CDI can be ended, but a new one cannot be added.

Reducing the ADI/CDI amount received from PSCS in JA230

76. The ADI/CDI in payment on the IB claim may have been affected by:

an increase in the Adult/Child dependants earnings, or

an overlapping benefit amount

without extinguishing the component altogether. This reduction would have been held as a negative adjustment on PSCS.

77. Negative Adjustments will be generated as a CAM task, which will appear on report map JA72701.

78. Reducing the ADI/CDI from the effective date must be done prior to Initial Assessment. It can not be amended at a later date, and can only be removed.

79. The reduction of the ADI/CDI by earnings is only applicable at the point of reassessment, i.e. on the IB award being used to calculate the first amount of TA. Any future increase or decrease in the earnings of the adult dependant must be ignored.

80. After conversion, where an overlapping benefit is awarded to the adult dependant, the TA can be reduced by an amount equivalent to the ADI in payment immediately before conversion only when the overlapping benefit is awarded at a rate which equals or exceeds the amount of the ADI. If the amount of the overlapping benefit is less than the rate of the ADI in payment immediately before conversion, the TA cannot be reduced.

81. Actions to take to ensure the correct amount of ESA and TA is awarded at the point of reassessment, are as follows:

Step	Action
1.	CAM task set (PSCS Negative Adjustments), JA72701 report received with details of negative adjustment
2.	Access PSCS dialogue RP008 and notepad RP803 to obtain details of negative adjustment
3.	When information gathered, access dialogue JA230230, ‘Maintain IS&IB Award NINO Prompt’ and insert customers NINO, select ‘Continue’ button
4.	In JA230231, ‘IS&IB Award Picklist’ insert the number of the ADI/CDI award component to be amended in the ‘Selection Number’ field, select ‘Continue’ button
5.	In JA230232, ‘IS&IB Award Details’, select the IB Reassessment effective date the adjustment must take affect from in the ‘Effective Date’ field
6.	In the ‘Amended Amount’ field, the ADI/CDI amount minus the negative adjustment amount must be inserted, for example ADI = £25 Negative Adjustment code in PSCS dialogue RP008 is 06 – Dependants Earnings, £15 per week £25 - £15 = £10 Amount inserted in ‘Amended Amount’ field is £10
7.	Select the ‘JA200’ button to access JA200
8.	The IB gross award will be re-calculated based on the revised rate of the component and award the correct TA(C) if applicable
9.	Close negative adjustment task in CAM, and input a note in dialogue JA110, ‘Notepad’ (link is external) confirming the actions.

82. Any deductions taken from an age related addition (ARA) because an IB/SDA customer is in receipt of a Guaranteed Minimum Pension (GMP), continue to be taken into account and not disregarded when the case is converted to ESA. Failure to take into account the correct rate of ARA will result in an incorrect calculation of the TA.

IB case with more than 8 CDIs

83. Where an IB case has more than 8 CDIs JSAPS can only display the first 8 in the ADI/CDI screen.

84. JSAPS will however calculate the TA correctly.

85. When accessing ELUS JA230232 and 8 CDIs display, access ELUS JA230233. An error 'Too many CDI components entered' will display if the customer has more than 8 CDIs.

86. It is not possible to change or remove details as the TA will then be calculated incorrectly.

87. Transfer the case to clerical following the normal process.

88. Rebuild the case inputting the previously calculated TA amount in the award amount field on JA230232.

89. Note ELUS JA110 (link is external) that 9 or more CDIs have been used when calculating the TA.

Amending IB&IS details in JA230

90. If the award details received from PSCS/ISCS require amending, JA230 must be accessed to amend the gross award details using any existing clerical paperwork, PSCS dialogues RP008 and RP001 Notepad, and when applicable ISCS dialogue IS500, IS503 and IS110 Notepad.

91. The following actions must be taken:

Step	Action
1.	Access 'Maintain IB&IS Awards Nino Prompt' screen JA230230 and insert the customers NINO, select 'Continue' button
2.	JA230231 IB&IS Award Picklist allows the user to select an IB or IS award to enter, amend or view in the subsequent screens by inputting the 4 digit 'Selection Number' of the entry that requires amending and selecting 'Continue' button. Only one amendment

	can be made at once
3.	In JA230232, the date the amendment takes place must be selected in the ‘Effective Date’ field, to ensure the new award takes effect from the correct date
4.	The revised award to take effect from the effective date must then be input in the ‘Amended Amount’ field
5.	If more than one amendment to an existing component is required, the ‘IB&IS Award Picklist’ can be re-accessed by selecting the ‘Continue’ button, and in JA230231, the next award component can be selected by inputting the relevant 4 digit code in the ‘Selection Number’ field
6.	Follow steps 3 and 4 for each amendment required from the components listed in JA230231
7.	When the amendments have been actioned, select ‘JA200’ button to access JA200 via JA230232 to: check the new gross award is correct, any transitional additions calculated are correct, and complete the assess award via the normal process
8.	The case will be subject to a pre-payment check due to the amendment made in JA230. This will require clearing as per the current process
9.	Input a note in dialogue JA110, ‘Notepad’ confirming the adjustment.

Removing ADI/CDI from JA230

92. If the removal, from the TA, of an amount equivalent to the rate of the ADI/CDI in payment immediately before conversion is required, the following actions must be taken:

Step	Action

1.	Access ‘Maintain IB&IS Awards Nino Prompt’ screen JA230230 and insert the customers NINO, select ‘Continue’ button
2.	In JA230231, ‘IB&IS Award Picklist’ input the 4 digit number under ‘IB Award Details’ that relates to the ADI/CDI which requires removal and select ‘Continue’ button. Please note that only one component can be removed for each time JA230231 is accessed
3.	In JA230232, ‘IB&IS Award Details’ select the date from which the ADI/CDI is to be removed in the ‘Effective Date’ field
4.	If an amount equivalent to the ADI is to be removed, insert one of the following codes in the ‘Reason for Removal’ field: 01 – Death of a dependant 02 – Partner left household 03 – Partner has overlapping benefit 04 – Child Benefit Ended
5.	If an amount equivalent to the CDI is to be removed, insert one of the following codes in the ‘Reason for Removal’ field: 01 – Death of a Child dependant 02 – Child Benefit ended
6.	If the removal of more than one component is required at this stage, select ‘Continue’ button to re-access the picklist in JA230231 and re-action steps 2 – 5
7.	When the correct components have been removed from the correct effective date, selecting ‘Decision/Assessment’ to access JA200 will prompt the message: • C3603 Comment: IB gross award amount amended confirming the removal will result in a change to the gross award payable. Select ‘JA200’ button again to accept the comment and access JA200 (link is external)
8.	Complete the assess award via the normal process, checking the adjustment has been correctly calculated

9.	The case will be subject to a pre-payment check due to the amendment made in JA230. (link is external) This will require clearing as per the current process
10.	Input a note in dialogue JA110, ‘Notepad’ confirming the removal of the adjustment.

93. CAM task ‘PSCS Action Outstanding’ may be received on cases where an end date is held on PSCS for a CDI.

94. Check PSCS for any end dates for the CDI and set a user case control in JA530 (link is external), ‘CDI ends – remove from JA230’ to remove the components from the awards at a future date and input a note in JA110, Notepad to confirm the actions required.

95. End dates are unable to be entered in JA230, therefore it’s important that the necessary prompts are put in place to remove CDI’s when applicable.

96. When the correct action has been taken, end the CAM task.

IB component code 999

97. Some of the positive adjustments uploaded via PSCS will be unable to be recognised, and will be listed as IB component code 999. They will be notified via a CAM task.

98. If there are multiple adjustments that are unable to be recognised, they will be added together. These must be investigated using PSCS to ascertain exactly how the customers IB award was calculated, and must be input as individual components.

99. As the correct adjustment component types are identified and input in JA230 (link is external), the 999 component must be reduced by the same rate.

100. Before JA230 can be exited, the 999 component must:

• be reduced to £nil after the correct positive adjustments have been added, or

• be deleted in JA230233 by inserting a ‘D’ in the ‘Status’ field when the amount previously held has been reduced to £nil.

101. Take the following actions on cases where a CAM task is received and a 999 component is uploaded into JA230:

Step	Action

1.	CAM task received
2.	Access PSCS dialogue RP008 and notepad RP803 to obtain details of positive adjustment(s)
3.	When information gathered, access dialogue JA230230, ‘Maintain IS&IB Award NINO Prompt’ and insert customers NINO, select ‘Continue’ button
4.	In JA230231, ‘IS&IB Award Picklist’ insert the number of the 999 award component in the ‘Selection Number’ field, select ‘Continue’ button
5.	In JA230232, ‘IS&IB Award Details’, select the date the adjustment must take affect from in the ‘Effective Date’ field
6.	Follow ‘Inserting IB and IS gross award details in JA230’ to re-input the correct component(s) as an ADI/CDI
7.	Repeat steps 3 – 6 until the 999 component amount is £nil
8.	The IB gross award will be re-calculated based on the revised rate of the component and the correct ESA(C) and TA(C) will be awarded if applicable
9.	When accessing JA200 to award the recalculated amount, an error displays ‘IB Positive adjustment award components apply. Check JA230’ Click OK to remove the error.
10	In ‘Next Dialogue’ field input JA530 and select cancel button. Case control screen is displayed.
11.	To clear the Case Control, select ‘System CC’s’ button and insert ‘Y’ in appropriate field. Select ‘Save’ button to navigate back to Case Control NINO screen.
12.	Once the type 999 component has been reduced to nil or removed, close the positive adjustment task in CAM, and input a note in dialogue JA110, ‘Notepad’ confirming the actions taken.

Positive Adjustments on the Pensions Strategy Computer System

102. A positive adjustment for the purposes of this guidance is an amount added to the weekly rate of IB/SDA awarded

103. IB or SDA case details including current positive adjustments are held on PSCS.

104. Certain positive adjustments held on PSCS cannot be automatically uploaded, they will be identified via a CAM task.

105. There are 6 types of positive adjustments that may be found on a PSCS case in RP008, ‘Incap Entitlement Enquiry’ which will not successfully upload. Further details may be held in PSCS notepad screen, ‘RP001’ which can be accessed by selecting ‘F7’.

106. When a CAM task is received, to identify and transfer the current positive adjustments from PSCS, take the following actions:

Adjustment Type	Adjustment Text	When Adjustment is used	Actions required prior to initial assessment in JA200 when positive adjustment is identified:
03	positive pre-tax adjustment	used to add an ADI for Spouse/Civil Partner	add an ADI component and ADI details in JA230 using the rate awarded on PSCS if positive component 999 held in JA230, reduce the amount held by the same ADI rate when all other positive adjustments have been actioned and the 999 component has been reduced to £nil select ‘JA200’ button to recalculate the IB gross amount proceed to JA200/405 to complete assessment close CAM task
10	positive adjustment	Child's non-beneficiary account cannot be deleted/if Maternity	add a CDI component and CDI details in JA230

	post tax	Allowance rate is less that IB/SDA rate	using the rate awarded on PSCS if positive component 999 held in JA230, reduce the amount held by the same CDI rate when all other positive adjustments have been actioned and the 999 component has been reduced to £nil select ‘JA200’ button to recalculate the IB gross amount proceed to JA200/405 to complete assessment close CAM task
35	Child Premium Adjustment	used to add back the Child Premium adjustment if it does not apply	if positive component 999 held in JA230, reduce the amount held by the same CP adjustment amount when all other positive adjustments have been actioned and the 999 component has been reduced to £nil select ‘JA200’ button to recalculate the IB gross amount proceed to JA200/405 to complete assessment close CAM task
49	positive adult rate adjustment	used to pay ADI if personal account record already held for spouse/civil partner. This may not be paid at the full ADI rate, if it is adjusted for earnings/overlapping	add an ADI component and ADI details in JA230 using the rate awarded on PSCS if positive component

		benefits etc	999 held in JA230, reduce the amount held by the same ADI rate when all other positive adjustments have been actioned and the 999 component has been reduced to £nil select ‘JA200’ button to recalculate the IB gross amount proceed to JA200/405 to complete assessment close CAM task
60	positive AP adjustment	will not apply	contact Adviceline if this adjustment is found
61	positive pucodi’s adjustment	will not apply	contact Adviceline if this adjustment is found

Mortgage Interest Direct

107. During reassessment there may be the need for some Mortgage Interest Direct (MID (link is external)) payments to cover a period where the customer is part-paid from ISCS and part-paid from JSAPS.

108. ISCS will pay up to the last payment date of IS and JSAPS will pay the remainder.

109. MID details can be viewed in ISCS dialogue IS506 Mortgage Payment Enquiry.

110. To record MID on JSAPS if necessary use dialogue JA301, ‘Maintain Mortgage Direct’ (link is external) and follow the process as described in current guidance (link is external).

111. All notifications to customers will be suppressed. The M1705 letter, which is issued to lenders to notify them of a change of contact details, will be issued and its issue date, can be seen in dialogue JA570.

Note: See paragraph below regarding action to take for the retention of the IS Mortgage sub-file

Using Exceptional Conditions to adjust the transitional addition

112. Exceptional Conditions can also be used to adjust the amount of transitional additions in payment to a customer.

113. Use JA230 (link is external) to adjust the TA for an indefinite period

114. Use an exceptional condition to adjust the TA for a temporary period, up to 4 weeks, via a clerical component.

115. There are 2 new exceptions conditions introduced for IB (IS) Reassessment. They are codes:

• 55 to adjust the ESA(C) TA

• 56 to adjust the ESA(IR) TA

and must be input as per the current process (link is external).

116. If the exceptional condition type 55/56 spans uprating, further uprating action will be required.

117. Note that using exceptional conditions to adjust the TA will not result in a pre payment check, which differs from using JA230.

Negative Adjustment – Tax deduction

118. IB customers whose income is taken above the tax threshold by an ADI/CDI will have received a negative adjustment ‘Tax Deduction’ from their benefit.

119. Deductions of Income Tax (link is external) are not applicable to ESA as award assessments are calculated differently. On Reassessment cases this negative adjustment must be included in the customer’s gross IB award when calculating any ESA(C) TA payable.

120. Actions to take when it is identified in RP008 that a customer has a ‘Tax Deduction’ in PSCS from their IB are as follows:

Step	Action
1.	Note the amount of the negative adjustment and the customers IB entitlement after any deductions
2.	Add the customers IB award and Tax Deduction together
3.	Access JA230 to check the IB award that JSAPS holds for the customer
4.	If the IB award held in JA230 is the gross IB award before any deductions, continue with the assessment
5.	If the IB award held in JA230 is the IB award subject to the ‘Tax Deduction’ take the relevant action to amend the award

121. The initial notification letter to the customer informs them that HM Revenue & Customs (HMRC) may contact them if they have to pay anything due to income over the tax threshold.

Transitionally protected pension income

122. Customers in receipt of occupational pension income will have received transitional protection whilst in receipt of IB. This income would have had a 100% disregard.

123. Customers in receipt of an occupational pension and also

Disability Living Allowance (DLA) with the highest rate Care Component or

the enhanced rate of Personal Independence Payment (PIP) Daily Living component or

Armed Forces Independence Payment (AFIP)

also receive transitional protection on their pension income. (This pension does not have to have been in payment prior to 06 April 2001). The pension disregard for these cases is also 100%.

124. This transitional protection will continue for customers whose awards qualify for conversion to ESA (C) following IB (IS) Reassessment therefore the pension income must receive the correct disregard.

125. The extension, of the transitional protection of occupational pension income, applies only to customers who are already receiving this protection prior to the effective date of their conversion decision and whose awards qualify for conversion to ESA. Claimants will benefit from the protection even if their pension has not yet become payable.

126. Customers who are receiving this transitional protection prior to the effective date, but who are disallowed, appeal and are awarded the assessment phase rate pending the outcome of their appeal, will be entitled to this transitional protection during the course of their appeal.

127. The disregard flag will be automatically downloaded onto JSAPS as ‘Y’, if held on PSCS, and the disregard to the pension income will be automatically applied.

128. PSCS only has one payment frequency for occupational pensions, weekly.

129. ISCS enables the user to input one of 8 payment frequencies.

130. In cases where occupational pension details are held on both PSCS and ISCS, during data upload:

the gross amount of the occupational pension is taken from PSCS

the net amount of the occupational pension is taken from ISCS

the payment frequency is taken from ISCS

the start (and end) date is taken from ISCS

the reference number is taken from ISCS.

131. As the gross amount is taken from PSCS and the payment frequency is taken from ISCS, this may result in an incorrect amount being taken into account during the assessment.

132. Using both PSCS and ISCS, each occupational pension uploaded must be input with the correct gross and net amounts, with the correct payment frequency.

The Transitional Addition

133. For more information please see Transitional Addition (TA) guidance.

134. For actions to take when a customer had a negative adjustment on PSCS, and was in receipt of an ADI or CDI, please see TA guidance to ensure the TA is calculated correctly.

Award and Decision JA200

135. When all data is available, and there are no gaps/conflicts/validation errors, the case can progress through JA674, ‘ESA Personal Capability Assessment’ (link is external) & JA400, ‘Method of Payment’ (link is external) before access to JA200 (link is external) is allowed to the award stage.

136. JA200 will automatically calculate and include the TA in the assessment, if appropriate.

137. JA200 has been enhanced to display the TA for both the contributory and income related components of the award, if appropriate.

IS cases with One/Two Strike Sanctions

138. One/Two Strike Sanctions on cases held on ISCS must be actioned against the ESA case on Reassessment.

139. Exceptional conditions would have been input on the ISCS case to reduce the amount of Income Support in payment.

140. On ELUS, inputting a sanction in JA210, ‘Maintain Suspension and Decision Details’ will reduce the amount of ESA in payment.

141. Actions to take to input a One/Two Strike Sanction on a Reassessment case on JSAPS are as follows:

Step	Action
1.	CAM task received ‘Failed ISCS Exceptional Condition’
2.	Access IS500, ‘Enquiry Evidence’ and input ‘Y’ in the Exceptional Condition field
3.	In IS500, ‘Exceptional Conditions’ make a note of the:

	person for whom the sanction applies the exceptional condition reason code the start date of the exceptional condition the end date of the exceptional condition
4.	In ELUS, progress the case through JA200, ‘Award and Decision’ until the last screen is reached and the option to access JA405, ‘Payment and Notification’ is available. DO NOT ACCESS JA405
5.	Access ELUS JA210, ‘Maintain Suspension and Decision Details and input the period of the sanction over the sanctionable period as per the current process
6.	Reassess the case through JA200, and ensure that the correct reduction has been made to the ESA
7.	Complete the case in JA405

142. Review dates for customers with capital or home loans recorded on the system will automatically default to 52 weeks on Reassessment.

143. In case’s where a review date for capital or a home loan is held, take the following action:

Step	Action
1.	Access ISCS dialogue IS092, ‘Review Claim’ and note the next annual review date for the capital/home loan
2.	In JSAPS dialogue JA530, ‘Case Controls’ create a user set case control: Review Capital Review Home Loan (when applicable) to expire on the review date previously gathered from ISCS for the ESA claims maintenance team to action. This will then appear on the Work Available Report (WAR) on the date it expires. Also input a note in notepad to confirm when the review is due

3.	When the review has been completed from the user-set case control by the ESA maintenance team, the user must access JA092 and reset the LCC review date to 12 months from when the latest review was done, not 12months from the date held in JA092
4.	Every subsequent annual review will then follow the correct cycle
5.	If the review date is due during the Reassessment period and missed, the IB (IS) Reassessment team must set case controls for prompts to appear on the WARs the day after the Effective date of the ESA claim to commence the review.

Setting the next WCA review date

144. Look at the prognosis date provided on the Assessment report by the Health Assessment Advisory Service Healthcare Professional. If the prognosis date is more than 3 months in the future, input the actual date when the next WCA date should be, in JA674 'Next WCA Date Field'. This generates the 'Auto WCA Re-referral' case control in JA530, 2 months prior to the actual date.

145. Where the customer has been given the shortest prognosis date of 3 months, the case control date must still be set for that date. Do not record a prior date.

Customers already entitled to both Incapacity Benefit and Employment and Support Allowance

146. Dual entitlement to IB and ESA may occur when the customer:

has been disallowed IB following a Personal Capability Assessment (PCA)

has appealed against the decision

has claimed and been awarded ESA in the interim

subsequently wins their IB appeal.

147. In these circumstances the IB case will be held clerically and the case must be dealt with accordingly.

Making a first payment

148. Once the award has been decided in JA200, JA405 must be accessed to award any benefit due.

Retention of documentation and remote store action

149. In cases that have been allowed, the Reassessment case documents should be retained until the ESA claim becomes dormant. The case should then be given a retention date in accordance with the Benefit Specific section of the Records Management Policy (link is external).

150. In cases where ESA has not been allowed, the RS Web Team should be notified and a retention date be given in accordance with the Benefit Specific section of the Records Management Policy for IB.

Retention of Mortgage Sub-File

151. All IS Mortgage sub-files in allowed cases, should be re-branded as an ESA Mortgage sub-file and kept with the ESA claim. This will ensure that the sub-file is given a retention date in accordance with the Records Management Policy for ESA once the ESA claim becomes dormant.

Transitional Addition

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff about the Transitional Addition (TA) to benefit which may be payable when the customer is reassessed from incapacity benefits (Incapacity Benefit (IB), Income Support (IS) paid on the grounds of incapacity and Severe Disablement Allowance (SDA)) to Employment and Support Allowance (ESA).

What is a Transitional Addition?

2. A transitional addition is an additional amount of money payable to customers who are entitled to more on their existing incapacity benefits than they are entitled to when they move to ESA.

3. For example IB customers who receive additions for dependants or Age Additions, or IS customers who receive a disability premium may receive much higher rates of benefit than ESA customers.

4. Ministers have committed that no-one being reassessed from their existing benefit to ESA will see a reduction in the level of their benefit entitlement at the point of reassessment. The TA will be equivalent to the shortfall between the two at that date.

5. The TA will erode as the rate of the ESA applicable amount increases, for example, each year due to uprating, until such time as the TA is reduced to Nil. The TA will terminate when ESA entitlement itself terminates, and, other than on revision, or following a successful appeal, when the linking rule is satisfied on a new claim exceptionally on appeal or otherwise, will not be reinstated.

6. The amount of TA will never increase, and all entitlement to a TA will end on 5 April 2020.

7. For cases held on Jobseekers Allowance Payment System (JSAPS) the system will calculate the customer’s TA based on the information extracted from the Pension Strategy Computer System (PSCS) and Income Support Computer System (ISCS) via ESA Legasuite Update System (ELUS).

8. Customers who are entitled to both ESA (C) and ESA (IR) may be entitled to a TA on top of each element of ESA. The highest overall amount will be paid.

9. All claimants who are entitled to contribution-based ESA(C) who are in the WRAG, will have their entitlement to ESA(C) time-limited to 365 days. Where they are receiving a TA with ESA(C), the TA will end when the ESA(C) exhausts after 365 days.

10. For clerical cases, assistance with calculating the TA clerically can be found in the Wholly Clerical guidance.

11. When the user confirms the IB and IS award details in ELUS dialogue JA230, ‘Maintain IB & IS Awards’ and progresses to ELUS dialogue JA200, ‘Award and Decision’ to assess the ESA award, ELUS dialogue JA200 will automatically calculate and include the TA in the assessment.

12. ELUS dialogue JA200 has been enhanced to display the TA for both the contributory (C) and income related (IR) components of the ESA award.

13. Adjustments identified from PSCS must be investigated to ensure the correct amount of TA is calculated before they are input in ELUS dialogue JA230. This is because the gross award of Adult Dependency Increase (ADI) and Child Dependency Increase (CDI) will be downloaded from PSCS whereas only the **actual amount of ADI/CDI in payment on the day before the effective date** should be included in the TA calculation.

14. Any deductions taken from an age related addition (ARA) because an IB/SDA customer is in receipt of a Guaranteed Minimum Pension (GMP) and/or additional pension, continue to be taken into account and not disregarded when the case is converted to ESA. Failure to take into account the correct rate of ARA will result in an incorrect calculation of the TA.

Assessing the correct amount of any Dependency Increase recorded on Pension Strategy Computer System

15. To ensure the correct amount of any dependency increase recorded on PSCS is included during reassessment, ELUS dialogue JA230, ‘Maintain IB & IS Awards’ must be accessed.

16. To amend the dependency increase, see Inserting IB and IS gross award details in JA230.

17. To reduce the ADI/CDI amount received from PSCS in JA230 follow this link.

The effective date

18. The effective date is the date on which a conversion decision as to whether or not a customer’s existing IB/IS award qualifies for conversion to ESA takes effect.

No transitional addition payable at effective date

19. Customers entitled to as much, or more, ESA than their entitlement to IB/IS, will not be entitled to a TA. See Example 1

20. TA is calculated using the gross amount of benefit only. Adjustments for other benefits, income and earnings are not included when calculating the TA. The exception to this rule is when an ADI or CDI is in payment.

21. Any earnings, income and Third Party deductions will be deducted from the overall ESA entitlement after the TA calculation.

22. Housing costs are not included in the calculations of the TA.

Calculating the transitional addition for Employment and Support Allowance (C)

23. Where the existing award is IB, the weekly rate payable, when calculating the TA amount at step 1 below, is:

the normal rate payable under specified legislation including age-related additions

any Adult Dependency Increase (ADI) and/or Child Dependency Increase (CDI) payable

long-term IB for widows and widowers

transitional award of Incapacity Benefit Long Term (IBLT) – (former Sickness Benefit recipients)

transitional award of IBLT (former Invalidity Benefit (IVB) recipients)

24. Where the existing award is SDA, the weekly rate payable includes any age-related addition (ARA).

25. JSAPS will take the following actions using the information held/input/amended in ELUS dialogue JA230, 'Maintain IB & IS Awards' , to calculate the TA: See Example 2

Step	Action
1.	In ELUS dialogue JA230, 'Maintain IB&IS Awards' JSAPS will check the gross amount of IB/SDA to which the customer is entitled on the last full benefit week which ends on the day immediately preceding the effective date
2.	JSAPS will check the gross amount of ESA (C), to which the customer is entitled in respect of the benefit week of which the effective date is the first day
3.	JSAPS will deduct the ESA (C) amount from the IB/SDA amount. The customer will be entitled to a TA equivalent to the difference (if any)
4.	The amount of any TA due will be added to the amount of the customer's prescribed ESA (C) to arrive at the customer's overall ESA (C) entitlement to be paid at the effective date. The TA will be displayed in dialogue ELUS dialogue JA200, 'Award and

	Decision' at section 'ESA (C) Transitional Addition'
5.	ELUS dialogue JA200 will display the revised ESA (C) award calculation including the TA

Transitional addition for Employment and Support Allowance (IR)

Child Dependency Additions

26. On starting reassessment to ESA, IS customers in receipt of Child Dependency Addition (CDA) will have those additions transferred to Child Tax Credits (CTC), as ESA does not include amounts for dependent children or young persons. CDA will not therefore be included in the calculations of the TA.

Calculating the transitional addition for ESA (IR)

27. JSAPS will take the following actions using the information held/input/amended in ELUS dialogue JA230, 'Maintain IB & IS Awards' , to calculate the TA:

Step	Action
1.	In ELUS dialogue JA230, 'Maintain IB & IS Awards' JSAPS will check the applicable amount of IS
2.	JSAPS will check the applicable amount of income-related ESA (ESA (IR)) payable to the customer in respect of the first benefit week
3.	JSAPS will then deduct the ESA (IR) amount from the IS amount - The customer will be entitled to a TA equivalent to the difference (if any)
4.	The amount of any TA due will be added to the amount of the customer's applicable amount of ESA (IR) to arrive at the customer's overall ESA (IR) entitlement at the effective date. The TA will be displayed in ELUS dialogue JA200 'Award and Decision' at section 'ESA (IR) Transitional Addition'

28. If, as a result of a change of circumstances, the customer's IB/SDA or IS increases or decreases, or is due to increase or decrease, in the benefit week of which the effective date is

the first day, then, for the purposes of calculating TA, the amount of the increase or decrease should be included in the calculation of the IB/SDA or IS entitlement.

29. This will mean that the calculation of the TA will be based on a fairer comparison of the entitlements ‘before’ and ‘after’ conversion. See Example 3 and Example 4.

30. Take the following actions to apply change of circumstances which affect the TA:

Step	Action
1.	Customer reports a Change of Circumstances (CoC) which is effective in the first benefit week following conversion to ESA and which increases or decreases the ESA award
2.	Changes are for Housing Costs, Other Income, or earnings which are not included in the calculation of TA no further action required
3.	Change is relevant to the calculation of TA, access ELUS dialogue JA230, ‘Maintain IB&IS Awards’ to input the revised IB/SDA and/or IS gross amount(s) in the ‘Amended Amount’ field as per ‘Amending IB & IS Details in JA230
4.	Using the revised IB/SDA and/or IS, JSAPS will re-calculate ESA (C) TA and/or ESA (IR) TA
5.	JA200, ‘Award and Decision’ will display the revised ESA award calculation including the TA.

31. Where the final benefit week of IB/IS/SDA falls immediately before an uprating, and the first benefit week of ESA falls in uprating week itself, then, for the purpose of calculating the TA, the gross amount of benefit payable in the final week of IB/IS/SDA must be adjusted to reflect the amount that would have been due in the first benefit week of ESA, had no reassessment occurred. See Example 5.

Step	Action

1.	Effective Date for ESA is in the week which includes Uprating A day (the first Monday following 6th April)
2.	IB/SDA and/or IS uprated award amount is input into ELUS dialogue JA230
3.	Using the uprated amounts for IB/SDA and/or IS, JSAPS calculates the ESA (C)TA and/or ESA (IR) TA
4.	ELUS dialogue JA200, ‘Award and Decision’ will display the ESA award calculation including the TA

Differences between IB, IS, SDA and ESA transitional addition payments at uprating

32. IS and ESA are weekly benefits, usually paid fortnightly and uprating takes effect from the first day of the benefit week for the individual customer following the uprating date.

33. IB and SDA are daily benefits usually paid weekly or fortnightly, the daily rate being one seventh of the weekly rate. When uprating occurs the IB/SDA customer can have two different rates of benefit payable in the same benefit week.

34. This means that, for IB and SDA customers, in cases which spans the uprating period, the calculation of the TA will vary depending on the individual benefit week ending dates. As a result the TA will differ between individuals whose benefit converts during uprating week.

35. Where a customer is entitled to ESA (C) and ESA (IR), JSAPS will compare the two amounts payable (including the TAs) and pay the higher amount in the normal way. See Example 6

36. JSAPS will take the following actions using the information held/input/amended in ELUS dialogue JA230, ‘Maintain IB & IS Awards’ , to calculate the TA:

Step	**Action**
1.	Calculate the transitional addition for ESA (C)
2.	Calculate the transitional addition for ESA (IR)
3.	Compare entitlement to ESA (C) + TA(C) with entitlement to ESA (IR) + TA(IR)

4.	Where ESA (IR) exceeds the ESA (C) amount, the ESA (IR) amount is payable, which is inclusive of the ESA (C) and ESA TA (C) the full amount of ESA (C) and the ESA TA(C) remains taxable.

37. There may be customers whose occupational pension (in ESA (C) cases) and/or income/earnings (in ESA (IR) cases) at the point of conversion, is such that, applying the normal assessment rules, they have no entitlement to ESA (IR) or to any payment of ESA (C), but who are entitled, in applying the TA calculation, to a TA of either ESA (C) or ESA (IR) as appropriate. These are referred to as 'TA only' cases. Where, very exceptionally, the customer is entitled to a 'TA only' in respect of both ESA(C) and ESA(IR), they will receive the higher of the two amounts, in the normal way.

38. A customer who is entitled to IB /SDA, but who does not receive any payment because of the level of their occupational pension, will follow the normal reassessment process. If their award qualifies for conversion to ESA, and their IB/SDA entitlement is greater than their ESA entitlement, for example because of an age addition, they will be entitled to a payment of ESA(C) 'TA only' regardless of the amount of occupational pension, and regardless of any future change in that amount.

39. In some few cases this may result in the customer being slightly better off after reassessment. See Example 7

40. An award of 'TA only' is a legitimate award of ESA. Where it is in payment on an income-related basis, the customer will be entitled to the 'passported' benefits (e.g. housing benefit, council tax benefit, free prescriptions etc) and eligible for budgeting loans and community care grants from the social fund, in the normal way.

41. Any awards of TA only will be subject to normal erosion and termination rules.

42. JSAPS will take the following actions using the information held/input/amended in ELUS dialogue JA230, 'Maintain IB & IS Awards' , to calculate the TA:

Step	Action
1.	Calculate the transitional addition for ESA (C)
2.	Calculate the transitional addition for ESA (IR)
3.	Complete assessment for ESA (C) and ESA (IR)

4.	Assessment calculation results in nil award of ESA (IR). TA(IR) is unaffected
5.	Assessment calculation results in nil award of ESA (C). TA (C) is unaffected
6.	Compare entitlement to TA (C) with entitlement to TA (IR) and award the correct TA elements
7.	Where TA (IR) exceeds the TA (C) amount, the full amount of TA (C) is taxable.

43. The TA is reduced (but not below nil) by the total of relevant increases in the amount of ESA payable which occur on or after the effective date.

Meaning of ‘relevant increase’ for Contribution Based Employment and Support Allowance

44. A ‘relevant increase’ for the purposes of ESA (C) is an increase in the customer’s prescribed amount of ESA

on moving to a higher component i.e. the Support Component (SC) instead of the Work Related Activity Component (WRAC)

as a result of uprating. See Example 8

reinstatement of a component will normally erode the TA, but see ‘Exception’ section.

Adult Dependency Increase or Child Dependency Increase ends

45. When Child Benefit (CHB) ceases or the adult dependant leaves or dies, and, prior to the effective date, ADI or CDI had been in payment in the incapacity award, the amount of any TA in payment will be reduced, (but not below nil) by an amount equivalent to the relevant CDI or ADI previously in payment.

46. Take the following action to remove the amount equivalent to the ADI/CDI.

47. Using the information held in ELUS dialogue JA230, ‘Maintain IB & IS Awards’ , JSAPS will then recalculate the TA(C).

48. JSAPS will then compare entitlement to ESA (C) + TA(C) with entitlement to ESA (IR) + TA (IR).

Meaning of ‘relevant increase’ for Income Related Employment and Support Allowance

49. A ‘relevant increase’ for the purposes of ESA (IR) is an increase in the customer’s applicable amount, attributable to -

the entry of a new partner into the assessment

a move to a higher component i.e. the SC instead of the WRAC

the award of any new premium

Pensioner Premium (PP)

Severe Disability Premium (SDP)

Enhanced Disability Premium (EDP)

Carer Premium (CP), or

uprating.

See Example 9

50. The reinstatement of a component will normally erode the TA, but see header ‘Exception’ below.

Exception

51. Where the increase in the award amount is the result of the reversal of any decision (on appeal or otherwise) that

a person who was previously entitled to the Support Component (SC) and Enhanced Disability Premium (EDP)

has become entitled to the WRAC

becomes entitled to SC on reversal of the decision

will retain the original TA (less any uprating erosion)

52. Take the following action:

Step	Action
1.	Customer in Support Group (SG) is entitled to ESA (IR) with TA(IR)

2.	WCA outcome now places the customer in Work Related Activity Group (WRAG) the ESA (IR) applicable amount is decreased no effect on TA
3.	Decision to place the customer in the WRAG is overturned and customer is placed in the SG from the original decision date: ESA (IR) applicable amount increases No effect on TA – it remains at the same value as at Step 1 (less any uprating erosion) Pay arrears of ESA (IR) from date of decision

53. Entitlement to a TA terminates -

when the TA is reduced to nil (but not below nil) by the total of relevant increases in the amount of ESA payable which occur on or after the first day of the benefit week after the benefit week of which the effective date is the first day

when the customer's entitlement to ESA ends

in an income-related case, where an exclusion reason is in force for one day or more (except for exclusion reason 04, where the customer's partner is in full-time work).

on 5 April 2020, which is the termination date of all TA awards whichever of these occurs earliest.

54. Once terminated, TA can only be reinstated:

on revision

when an appeal is successful

the 'special rule' around the partner's full time work applies

linking rule applies.

Adjusting the Transitional Addition

55. JSAPS dialogue ELUS JA230, 'Maintain IB&IS Awards' will adjust the TA for an indefinite period when recording a change to an ADI/CDI in payment.

56. Exceptional Conditions can be used to adjust the amount of transitional additions for a temporary period, up to 4 weeks (except in the case of a long-stay hospital in-patient), via a clerical component.

57. There are 2 new exceptional conditions introduced for IB (IS) Reassessment. They are codes:

55 to adjust the ESA (C) TA

56 to adjust the ESA (IR) TA

and must be input in dialogue JA610, ‘ESA Claim Maintenance IB (IS) Reassessment’.

58. If the exceptional condition type 55/56 spans uprating, further manual uprating action will be required in JA200, ‘Award and Decision’ .

59. Note that using exceptional conditions to adjust the TA will not result in a pre payment check, which differs from using JA230, ‘Maintain IB & IS Awards’ to adjust the TA.

60. On 01/05/2012 the 104 week linking rule was abolished. The normal linking rule will apply to the IB (IS) Reassessment. If a period of limited capability for work (LCW) is separated from another by no more than 12 weeks, the TA will be re-instated (from the outset of the repeat award) subject to a fresh determination of LCW.

61. Where the customer was previously entitled to ESA (IR) with a TA or ESA (IR) TA only, and their entitlement to ESA (IR) has ceased because their partner has taken up full-time work, then the special 12 week safeguard will apply.

62. For the amount of the TA to be re-instated, see Value of TA to be re-instated

63. It is important that these customers are not required to re-serve their assessment days so users must ensure that the ‘Assessment days served’ field on JSAPS Linking Screen JA628 in the new ESA claim contains the value ‘91’ (i.e. a full 13 weeks of Assessment-Phase ESA) to prevent this. Take the following action:

Step	Action
1.	Confirm that customer’s new claim links to a previous claim under the 12 week linking rule

2.	Access ELUS JSAPS dialogue JA610 Claim maintenance details and then the Picklist JA610. Choose ‘Linking’
3.	On the Linking screen, JSAPS screen JA628, enter the value ‘91’ in the Assessment days served’ field
4.	Ensure that the field ‘Assessment days served’ contains the value ‘91’. Enter the value manually if necessary.

12 Week Linking on previous IB Reassessment claim

64. Where a “reassessed” award comes to an end, and the claimant re-applies within 12 weeks, the new claim is exempt from the requirement to satisfy the contribution conditions. The claimant regains their previous entitlement to Employment and Support Allowance.

Customer starts part-time working

65. If a customer has excess hours or earnings from work which exceed the Permitted Work (PW) limits, they are treated as not having LCW and their ESA entitlement terminates. Their TA terminates at the same time.

Partner starts full-time work

66. Where the customer ceases to satisfy the conditions of entitlement to ESA (IR), any entitlement to ESA (IR) TA will normally terminate at the same time. However, a special rule applies where the partner of an ESA (IR) customer starts full-time work.

67. Where a customer’s entitlement to ESA (IR) and ESA (IR) TA terminates because their partner has found full-time work , then, if, following a change of circumstances, the customer re-establishes their entitlement to ESA (IR) within 12 weeks of the termination of the previous award (because the partner has subsequently given up full-time work), they will retain their entitlement to the income-related TA from the outset of the repeat award. The customer themselves will have continued on ESA (C) (with an ESA (C) TA, where appropriate), or on a credits-only basis, so will not need to undergo any fresh test of LCW before the ESA (IR) TA can be reinstated. See Example 11.

68. Where the customer

loses entitlement to ESA(IR) and ESA(IR) TA because the partner starts full time work and

subsequently does not have LCW following a WCA or because of starting non-exempt work

so loses entitlement to ESA(C) or credits, but then

regains entitlement to ESA(C) or credits

and the partner ceases full time work

both within 12 weeks of the termination of the previous award, the customer will retain their entitlement to the income-related TA from the outset of the new award of ESA(IR).

69. Where a customer's entitlement to ESA (IR) and ESA (IR) TA terminates because their partner has found full-time work, and the customer subsequently re-establishes their entitlement to ESA (IR) but there is a gap of more than 12 weeks between awards, they will not become re-entitled to the ESA (IR) TA. So if the customer comes back onto ESA (IR) after, for example, 4 months, they will not re-acquire any entitlement to their former TA.

70. If a customer receiving ESA (IR) with a TA has capital which becomes greater than £16000.00, they will lose their entitlement to ESA (IR), and their TA (IR) will also terminate. Customer will become a Credits-only or ESA (C) case**.**

71. JSAPS will ensure any TA reduced by a deduction will be restored to the amount payable prior to the deduction commencing when the deduction ends.

72. JSAPS will allow the recording and the recovery of any transitional addition that has been overpaid. These overpayment deductions will be recorded in ELUS dialogue JA303, 'Maintain Overpayments' .

73. Awards of TA will be suspended where a customer loses their entitlement to ESA following a Work Capability Assessment and following the receipt of a valid appeal , becomes entitled to an award of ESA at the assessment rate pending the outcome of that appeal.

74. This will apply until such times as the appeal is determined by the First-tier Tribunal or is otherwise disposed of.

75. Where a decision ending entitlement to a converted award of ESA is reversed on revision or appeal, entitlement to the TA may be reinstated. See Example 12.

Value of the transitional addition to be reinstated

76. Where TA is re-instated on a repeat claim or where the 'special rule' around partner's full time work applies, the value of the TA must be adjusted, where appropriate, to reflect any reductions in the amount that would have been made had there been no break in the award. See Example 13.

Hospital in patients previously on IS

77. For ESA cases, the component is withdrawn after the customer has been a hospital in patient for 52 weeks. This means that, in reassessing a long-stay hospital in-patient on IS, the normal ESA entitlement is the prescribed amount without the component.

78. The TA calculation is based on a comparison between the IS amount and the sum of the prescribed ESA amount plus the applicable component.

79. The result is that, on reassessment, this claimant is entitled to a reduced amount of ESA (ie the amount without the component) plus a TA of nil because there is no shortfall between their IS and ESA entitlements. See example 14 below.

Hospital in patients previously on IB

80. If the TA is calculated in the usual way for those long-stay hospital in-patients on IB, i.e. including the relevant component, then the claimant will see a considerable reduction in the amount of their ESA at the point of conversion. This goes against the original policy that nobody should see a reduction in their benefit entitlement at the point of conversion.

81. Where the claimant has been a hospital in-patient continuously for 52 weeks at the point of conversion regulations allow us to calculate the TA without the relevant component. This means the claimant will receive a TA which equates to the difference between the IB entitlement and the ESA entitlement after conversion without any component. See example 17 below.

82. The system has not been enhanced to automatically calculate the amount of TA payable in these cases. It will, therefore, be necessary to pay this via an exceptional condition and clerical component. Take the following action:

Step	**Action**
1.	Confirm the customer has been a hospital in-patient continuously for 52 weeks at the point of conversion.
2.	Calculate the claimant’s ESA entitlement at reassessment without the relevant component.
3.	Deduct this amount from the IB entitlement prior to reassessment. This will be the rate of the TA
4.	Enter the relevant exceptional condition in JA610: Claim Maintenance Details, screen JA627657. For ESA(C) only and ESA(C) + ESA(IR) cases use type 55

	For ESA(IR) only cases use type 56 The start date will be the effective date.
5	Enter the relevant clerical component in JA200: Award and Decision. For ESA(C) only and ESA(C) + ESA (IR) cases use type 40 For ESA(IR) only cases use type 41 Enter the amount as calculated at step 3.
6	Continue processing the claim in the usual way.

Unemployability Supplement

83. Ministers have committed that no existing incapacity benefit claimant whose award or awards qualify for conversion to ESA will see a reduction in the level of their benefit entitlement at the point of change.

84. However, this is not the same as a commitment that, following conversion to ESA, no claimant will be worse off in strict cash terms. There are claimants who, for example, on moving to ESA, become liable for child support maintenance for the first time, or those who become liable for tax for the first time or for increased tax.

85. Claimants in receipt of Unemployability Supplement (US) will, following conversion, see a reduction in their ESA entitlement. This is due to the different ways the overlapping benefit provisions operate for IB and ESA. For IB US will only overlap with the basic rate so any additional pension is left in payment. Whereas for ESA US will overlap with the whole amount including any components etc. See example 15 below.

Deductions and Negative Adjustments

Introduction

1. The purpose of this guidance is:

to inform Benefit Centre Directorate staff how to identify cases involving incapacity benefits - Incapacity Benefit (IB), Severe Disablement Allowance (SDA) and Income Support (IS) paid on the grounds of incapacity, which have negative adjustments/deductions in force at the time of National Reassessment.

to show how to apply these deductions to the Employment and Support Allowance (ESA) case during the National Reassessment process.

2. This guidance does not cover the process for dealing with Special Customer Records.

3. IB cases maintained on the Pension Strategy Computer System (PSCS) have deductions recorded as negative adjustments. These are not transferred automatically. Input these into the appropriate JSAPS dialogue via ESA Legasuite Update System (ELUS).

4. Deductions from the Income Support Computer System (ISCS) are automatically transferred, and require confirmation in the appropriate JSAPS dialogue via ELUS.

5. IS cases maintained on ISCS (IS paid on the grounds of incapacity) have the deductions recorded in the dialogue IS300 Deductions from Benefit.

6. This guidance also provides instructions for exception cases where data has not been transferred from ISCS.

7. Regulations have provided

for the transfer of deductions from the customer's IB/IS/SDA to the customer's ESA

that deductions can be taken from the customer's ESA including from any Transitional Addition (TA) which is treated as part of the customer's ESA.

Change of circumstances

8. A change of circumstance received from a customer during the Reassessment process before the Effective Date, which may result in a deduction from benefit, should be treated and actioned as in the IB (IS) Reassessment change of circumstances process.

Cases with an outstanding Payment and Periodicity loan

9. Cases with a Payment and Periodicity loan will not be selected for IB (IS) Reassessment until repayment of the loan has been completed.

10. A deduction/negative adjustment for the purposes of this guidance is an amount deducted from the weekly rate of benefit awarded.

11. For example

from IB

Social Fund repayments

Overpayment recoveries

Flat Rate Maintenance Deductions/Child Maintenance Deductions.

Social Fund repayments

Out of Hours (OOHS) payment recoveries

Third Party Deductions (TPDs)

Overpayment recoveries

Flat Rate Maintenance Deductions /Child Maintenance Deductions.

from IS

12. TPDs can be deducted from ESA as listed in current ESA guidance .

13. All system notifications to customers will be suppressed on claim closure. A letter will be issued to third parties on reassessment, notifying them that the customer is now in receipt of ESA, and the date recorded in dialogue JA570 ‘Enquiry, Notification’.

14. Where TPDs are dealt with and maintained clerically, this should be done using IBM76C where appropriate.

15. Debt Management must be informed of any reassessed cases with current Overpayment deductions.

16. Do not raise a new referral to Debt Management for existing deductions.

17. For actions to take when a customer has the negative adjustment ‘Tax Deduction’ click here.

18. Input all deductions and negative adjustments before accessing ELUS JA405, 'Payment and Notification' for the first time. Any deductions or negative adjustments not input prior to this stage must be retained in BF until the effective date has been reached, and then actioned as a change of circumstances.

19. The records for these types of cases, for example special customer records, must be built onto JSAPS manually.

20. IB or SDA case details including current negative adjustments are held on PSCS.

21. Negative adjustments held on PSCS cannot be reassessed automatically. A report is received detailing the negative adjustments and an associated CAM task is automatically created.

22. This is the Daily Report (Report No. JA72701) of cases which have IB/SDA negative adjustments.

23. The Report is available in the print queue at the ESA owning office

24. Clear the CAM tasks to enable the case to progress to the 'Ready for Assessment' status.

25. To identify and transfer current negative adjustments (deductions) from PSCS to ELUS take the following action after the effective date has been calculated and assess and award action has been completed, but prior to ELUS JA405 being actioned:

Step	Action
1.	A CAM task is created to notify that there are Negative Adjustments on PSCS
2.	View current negative adjustments from benefit on PSCS Incap Entitlement Enquiry, select Dialogue RP008 Negative Adjustments
3.	Check PSCS Notepad (R001 then select F7) to see if there are further details relevant to current deductions
4.	Confirm negative adjustments by checking reason for the adjustment - if necessary recall clerical papers from RS Web to check reason and details
5.	Process deductions via ELUS dialogue: JA300, Maintain General Deductions . This includes FRM deductions

	JA302, Maintain SF Deductions JA303, Maintain Overpayments . Enter clerically maintained deductions in ELUS dialogue JA304 Maintain Clerically Identified Overpayments
6.	When all actions are taken clear the CAM task. If the task is not cleared a CAM management check will be generated.

26. Where a negative adjustment has been identified as an Overpayment Recovery take the following action:

Step	Action
1.	Do not raise a new referral to Debt Management using information visible on ELUS
2.	Continue to maintain current Overpayment deductions from IB/SDA and set a CAM task for the effective date
3.	Enter and process the Overpayment deductions in ELUS JA303 (before completing ELUS JA405 Compute Payment action)
4.	When the CAM task matures, inform Debt Management of the change of benefit using the IB (IS) Reassessment Debt Management template . Make sure to record: Customers name and National Insurance Number (NINo) Case is part of IB (IS) Reassessment End date of IB/SDA ESA start date (Effective Date) Amount of customer’s award if they have a valid appeal
5.	Send template via e-mail to the Central Debt Management In-box. Global Address - SHSVCS Debt Management IB Migration
6.	Record issue of e-mail template to Debt Management on ELUS JA110, Notepad . The

	customer will be informed during the ‘entitlement’ call that the Overpayment deductions they are paying currently will continue to be taken from their ESA.

27. Where a negative adjustment has been identified as a Social Fund (SF) deduction take the following action:

Step	Action
1.	Inform Social Fund of cases with SF deductions held on PSCS by completing the IB (IS) Reassessment Social Fund e-mail template . Make sure to record: Customers name and National Insurance Number (NINo) Case is part of IB (IS) Reassessment End date of IB/SDA ESA start date (Effective Date) Amount to be deducted Outstanding balance of the loan at the effective date, not the original debt Repayer’s reference number if the Repayer is not the customer Amount of the customer’s award if they have a valid appeal Any further relevant information
2.	Send template via e-mail to the appropriate Social Fund office.
3.	Record issue of SF e-mail in ELUS JA110 Notepad The customer will be informed during the ‘entitlement’ call that the Social Fund deductions they are paying currently will continue to be taken from their ESA
4.	When the Effective Date is reached, SFCS will send a transaction to JSAPS via JARI to start the deductions on ESA from the first BWE following the Effective Date.

28. Use the table below to find the correct e-mail address to send the Social Fund e-mail template to.

Region	BC responsible	Contact e-mail address
Scotland	Perry Barr	JCP Perry Barr RECOVERIES Team
West Midlands	Perry Barr	JCP Perry Barr RECOVERIES Team
North East	Sunderland	JCP Sunderland BDC Regional Social Fund
North West	Belle Vale	JCP Liverpool Belle Vale Debt Recovery Team
South East	Milton Keynes	JCP Milton Keynes BDC Recoveries Team
	Basildon	JCP Basildon BDC SF call-backs
South West	Balham	DWP Balham Irene House Recoveries
London	Balham	DWP Balham Irene House Recoveries
Wales	Wembly	JCP Wembley BC SF Call Backs
Yorks & Humber	Chesterfield	JCP Chesterfield BDC SF Recoveries
East Midlands	Chesterfield	JCP Chesterfield BDC SF Recoveries
East of England	Chesterfield	JCP Chesterfield BDC SF Recoveries

29. A Child Premium (CP) on an IB case is an adjustment made by PSCS against a Child Dependency Increase (CDI) component held on an IB award.

30. The CP was applied on PSCS automatically against the IB award unless negative adjustment type 29, ‘Spouse/Dep Earnings affect CDI’ was input to remove the CDI (the negative adjustment would reduce the CDI value to nil).

31. On Reassessment, cases with a CP automatically applied will be notified via a CAM task.

32. Action to take to impact the Child Premium against the Child Dependency Increase

Step	Action
1.	Subtract the rate of the Child Premium from the amount of the CDI component. This amount is now the revised CDI component.
2.	Access ELUS JA230 and input the revised rate of the CDI component. JSAPS will automatically recalculate the IB gross award correctly, ensuring that the TA is calculated correctly
3.	Clear the CAM task.

33. Where the CDI was not in payment in respect of the eldest child, but PSCS automatically adjusted the IB award with a CP, a positive adjustment, Type ‘35’ – ‘positive child rate adjustment’, would have been applied to re-credit the customer with the amount the CP had reduced their gross award by.

34. The CDI component does not need to be adjusted in ELUS JA230 but the positive adjustment component must be adjusted to correct the IB award details in ELUS JA230.

35. If the IB award or any components are found to be incorrect in ELUS JA230, they must be amended accordingly.

36. If an adjustment is made to a component held in ELUS JA230, ensure that any re-calculated gross IB award held is correct.

37. When the gross IB award, CDI component and CP adjustment have been correctly applied, the CAM task must be cleared.

38. Deduction details for customers’ receiving IS on grounds of incapacity are held on ISCS.

39. As part of the IB(IS) National Reassessment, existing deductions maintained on ISCS will automatically transfer to the Jobseekers Allowance Payment System (JSAPS) except for:

Out of Hours Recoveries

Recoverable Overpayment

Payment on Account

Flat Rate Maintenance (FRM)Child Maintenance Deductions(CMD) deductions that are held for **both** customer and partner.

40. A CAM task will be generated to inform which type of deduction has been transferred from ISCS to JSAPS. Deductions that are automatically transferred will create the following CAM tasks:

ISCS Deductions (3rd Party)

ISCS Deductions (Social Fund)

ISCS Deductions (Overpayments)

41. One CAM task will be generated for each type of deduction although there may be more than one deduction recorded against each task.

42. A CAM task will be automatically created for each external organisation that has failed to transfer from ISCS where there is not already an open CAM task for that organisation. There may be more than one deduction recorded for the external organisation, for example if deductions are being made for both gas and electricity. CAM displays the details of the external organisation in the comments field.

43. To identify and process current deductions that have transferred from ISCS to JSAPS take the following action after the effective date has been calculated and assess and award action has been completed, but prior to JA405 being actioned:

Step	**Action**
1.	A CAM task is created to notify that deductions have been transferred from ISCS
2.	Confirm deductions by viewing current deductions on the ISCS IS505 Enquiry/Deductions
3.	Process deductions via ELUS dialogue: • JA300, Maintain General Deductions • JA302, Maintain SF Deductions • JA303, Maintain Overpayments. Enter clerically maintained deductions in ELUS dialogue JA304 Maintain Clerically Identified Overpayments
4.	When all actions are taken clear the CAM task. If the task is not cleared a CAM management check will be generated.

44. For Overpayment deductions transferred take the following action:

Step	Action

1.	Do not raise a new referral to Debt Management using information visible on ELUS
2.	Confirm Overpayment deductions by viewing current/new/amended deductions on dialogue IS300 Deductions from Benefit
3.	Check if customer has deductions in respect of an Eligible Loans Deduction Scheme or recovery of HM Revenue & Customs Debt, deductions or recoveries that are being made on behalf of a local authority for Housing Benefit or Council Tax overpayments. This information must be included on the email template
4.	Continue to maintain current Overpayment deductions from IS and set a CAM task for the effective date
5.	Process the Overpayment deductions in ELUS JA303 (before completing ELUS JA405 Compute Payment action)
6.	When the CAM task matures, inform Debt Management of the change of benefit using the IB (IS) Reassessment Debt Management template . Make sure to record: Customers name and National Insurance Number (NINo) Case is part of IB(IS) Reassessment End date of IS ESA start date (Effective Date) Amount of customer’s award if they have a valid appeal
7.	Send template via e-mail to the Central Debt Management In-box
8.	Record issue of e-mail template to Debt Management on ELUS JA110, Notepad . The customer will be informed during the ‘entitlement’ call that the Overpayment deductions they are paying currently will continue to be taken from their ESA.

45. Social Fund (SF) deductions previously held on ISCS will either have been set up automatically by SFCS via the Automated Recovery Interface (ARI), or set up manually in IS300 (Non-ARI deductions) who would then inform the SF team who input the details on SFCS and classify them as ‘Clerical IS Deductions’.

46. On Reassessment to ESA, ARI deductions will automatically transfer into ELUS JA302 from ISCS.

47. On Reassessment to ESA Non-ARI deductions will not automatically transfer into ELUS JA302 from ISCS.

ARI deductions

48. For SF ARI deductions transferred take the following action:

Step	Action
1.	A CAM task is created informing that SF deductions are being made on ISCS. NOTE: At this point it will not be known if the deductions are ARI or Non-ARI
2.	Check ELUS JA302 to confirm if SF deductions have transferred. If they have, these are ARI deductions
3.	Process the SF deductions in ELUS JA302 (before completing ELUS JA405 Compute Payment action)
4.	The customer will be informed during the ‘entitlement’ call that the Social Fund deductions they are paying currently will continue to be taken from their ESA
5.	When the Effective Date is reached, JSAPS will send a transaction to SFCS via the Jobseekers Automated Recovery Interface (JARI) to end the deductions on ISCS from the last benefit week ending (BWE) date and to start them on JSAPS from the first BWE following the Effective Date.

Non-ARI deductions

49. For SF Non-ARI deductions not transferred take the following action:

Step	Action
1.	A CAM task is created to notify that SF deductions are being made on ISCS. NOTE: At this point it will not be known if the deductions are ARI or Non-ARI

2.	Check ELUS JA302 to confirm if SF deductions have transferred. If they have not, these are Non-ARI deductions
3.	Inform Social Fund of cases with clerically maintained SF deductions held on ISCS by completing the IB (IS) Reassessment Social Fund e-mail template . Make sure to record Customers name and National Insurance Number (NINo) Case is part of IB(IS) Reassessment End date of IB ESA start date (Effective Date) Amount to be deducted Outstanding balance of the loan at the effective date, not the original debt Repayer’s reference number if the Repayer is not the customer Amount of the customer’s award if they have a valid appeal Any further relevant information
4.	Send template via e-mail to the appropriate Social Fund office.
5.	Record issue of SF e-mail in ELUS JA110 Notepad Customer will be informed, during the ‘entitlement’ call that Social Fund deductions they are paying currently will continue to be taken from their ESA
6.	When the Effective Date is reached, SFCS will send a transaction to JSAPS via JARI to start the deductions on ESA from the first BWE following the Effective Date.

50. In cases where a SF deduction was held on ISCS the closure of the ISCS case triggers a report to SFCS to advise Social Fund that the recovery has ceased.

51. Use the agreed clerical process to inform Social Fund of clerically maintained IB (IS) Reassessment cases which have current Social Fund deductions.

52. CAM tasks will be generated to inform which type of deduction has not transferred from ISCS to JSAPS. Deductions that are not automatically transferred will create the following CAM tasks:

08 – Out of Hours Recoveries

21 – Recoverable Overpayment – this includes FRM deductions that are being taken for both the customer and partner

22 – Payment on Account.

53. A CAM task will be generated for each of the above deductions that have failed to transfer from ISCS.

54. To identify and process current deductions that have not transferred take the following action.

Step	Action
1.	A CAM task is created to notify that the deductions have failed to transfer from ISCS
2.	Confirm deductions by viewing current deductions on the ISCS IS505 Enquiry/Deductions
3.	Enter deductions via the relevant ELUS dialogue for the deduction. For FRM/CMD deductions the ISCS deduction will need to be split into two and entered for both the customer and the partner
4.	When all actions are taken clear the CAM task. If the task is not cleared a CAM management check will be generated.

55. If JSAPS is unable to recognise the Third Party details as held by ISCS, a Big Gap task will be created ‘External Org not found’. Check the Common Creditor ID List. If the organisation is listed, input the correct code in ELUS JA300.

56. If the organisation is not listed take the following action:

Step	Action
1.	Complete form STAP43 and issue to Payment Resolution Service (PRS). For further action see Payment Resolution Service -Third Party Payments Guidance.

57. Cases with deductions for Flat Rate Maintenance (FRM)Child Maintenance Deductions for the customer or partner will automatically transfer to the Jobseekers Allowance Payment System (JSAPS) in the same way as TPDs and will require confirmation via ELUS JA300.

58. For partner deductions the “For” column needs to be amended from “00” to “P” (for customer deductions 01 will display and not need updating).

59. Where and FRM/CMD deduction is held for both customer and partner the deduction will not be automatically transferred and will need to be entered as described above.

60. When using the CAM Smart-scripts when contacting the customer, the Smart-scripts will not mention details of deductions being made from the customer’s benefit.

61. Look for full details of possible deductions on all systems before contacting the customer.

62. A sanction is a penalty imposed by a Decision Maker which may result in a deduction from benefit.

63. WFI sanctions levied against the customer’s IB/SDA/IS cannot be carried forward to ESA, as they only apply to the existing award, which is terminated on IB (IS) Reassessment.

64. A sanction imposed following a conviction for a fraud offence, known as a loss of benefit provisions will be liable to have any award of ESA limited for the balance of the period of restriction.

65. IB/IS/SDA cases with sanctions imposed should not be excluded from the IB (IS) Reassessment.

66. Where payment of a customer’s existing award is suspended, for example because they have been imprisoned, or there are doubts about whether they are still living at the last known address, the issue causing a suspension should be resolved before a notice is sent to begin the conversion phase.

67. Where the suspension is imposed after the conversion phase has begun, the conversion process should be delayed until the issue causing a suspension is resolved.

Payment and Notifications

Overview of Payments and Notifications

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to pay Employment and Support Allowance (ESA) to customers who have successfully gone through the National Reassessment process. This includes those customers who qualify for Transitional Additions (TA) as part of their ESA award.

2. This product also covers the notifications issued to customers and third parties.

3. The customer must be notified that their Incapacity Benefit/Income Support/Severe Disablement Allowance (IB/IS/SDA) claim has been reassessed and that they have been awarded ESA.

4. This notification must be made by telephone initially and then confirmed in writing.

5. In order to make the first payment to the customer take the following action:

Step	**Action**
1.	Input relevant WCA outcome details in ESA Legasuite Update System (ELUS) JA674
2.	Access ELUS JA400 to verify Method Of Payment (MOP) against documents/information held. If MOP not held or the information is conflicting an error message E3585 "Error: Check Method of Payment in dialogue JA400", is displayed and access to ELUS JA200, Award and Decision is prevented.
3.	Access ELUS JA200 and check the award amount is correct. To confirm the award select JA405 button.
4.	Access ELUS JA405, Compute Payment where the first payment of ESA is calculated in line with existing ESA payment cycles, i.e. 2 weekly. Select Save button to set up the payment to be released when it is due.

6. If the case is subject to LO1 adjudication, the authorising officer must take the following actions to review and clear the case:

Step	**Action**
1.	Access ELUS JA093, 'LO1 Specialist Decision' to select Reassessment case for checking

2.	In ELUS JA660, ‘ESA Claim Maintenance Migration’ review and check the case
3.	Once the authorising officer is ready to clear the check they must fast-path by inserting JA200 in the next dialogue field then select Cancel button.
4.	The authorising officer must then proceed to ELUS JA405 to clear the check and authorise payment.

Additional Error Messages and case controls.

7. New reassessment specific error messages have been created In addition to existing error messages generated when ELUS JA405 is accessed:

Error “E6666 Error: Deductions held – must be viewed or amended” will display, if an S353 case control exists. This case control is created when Income Support Computer System (ISCS) deductions have been uploaded as part of National Reassessment and will be cleared in either ELUS JA300 , ELUS JA302 or ELUS JA303 depending on the deduction.

Error “E3599 Error: S357 exists Manager Approval of IB/IS closure reqd” will display if an S357 case control exists. This case control is created to alert the manager that closure dates for IB or IS have been entered. JSAPS will not release payment until the manager has approved the user action in ELUS JA530, ‘Case Controls’ .

8. To prevent “E3599 Error: S357 exists Manager Approval of IB/IS closure reqd” being displayed when attempting to access ELUS JA420, Payment Checking , and "E6359 Error: Pre-payment check outstanding" when attempting to access JA530, the following actions must be taken in this order:

Step	**Action**
1.	Access ELUS JA120, ‘Event Maintenance’ to close any IB/IS event interest
2.	Complete JA405, creating pre-payment check
3.	Team leader can clear pre-payment check in JA420
4.	JA530 can then be actioned to check for any outstanding case controls.

9. The award process involves contacting the customer by telephone, unless they request no telephone contact.

10. If the customer has requested no telephone contact or does not have use of a telephone, the ESA award notification M1050 will be issued to inform them of the decision.

11. To contact the customer by phone take the following action:

Step	Action
1.	Check the following details: customer contact details customer personal details customer needs appointee/representative potentially violent person marking. customers living in Wales must be contacted in their preferred language
2.	Access the customer record on CAM to make the outbound call
3.	Manually create the CAM ‘Contact History’ with the following values: Caller name – input customer’s full name Reason for contact – select appropriate reason from drop-down Channel – telephone In/Out – outbound external Do this for every call, even if it is not the first time the customer has been contacted that day. If this is not done at this stage for every contact, CAM will not update the Contact History correctly.
4.	Select the ‘Sufficient Security Questions Test Button’ in CAM
5.	If there is insufficient security information on CAM, you should access PSCS/ISCS systems to ask security questions .

6.	Record the questions and answers on CAM Notepad
7.	Contact customer and continue call using Smartscript
8.	If there is sufficient security information on CAM contact customer and continue the call using the Smartscript
9.	If the customer fails the security questions, advise them that a letter will be sent explaining the reasons for the call
10.	Terminate the call. Manually update the Contact History with reason for call failure
12.	If customer passes the security questions continue call using the appropriate Smartscript
13.	Update the manually created Contact History.

Telephone call to customer who has been successfully reassessed

12. Take the following action to carry out the telephone call to a customer who has been successfully reassessed:

Step	**Action**
1.	If first attempt to deliver call is unsuccessful, update CAM Contact History with the time the call was attempted and try again after 4 hours
2.	If first attempt to deliver outbound allowance call is successful, proceed to step 7. **Note:** A call will be considered to be successfully delivered once the customer has answered the phone even if the customer cannot continue with the call. Customer will not be called back
3.	If second attempt to call is unsuccessful, update CAM Contact History with the time the

	call was attempted and try again after 4 hours
4.	If second attempt to deliver call is successful, proceed to step 7. **Note:** A call will be considered to be successfully delivered once the customer has answered the phone even if the customer cannot continue with the call. Customer will not be called back
5.	If third attempt to deliver call is unsuccessful, update CAM Contact History with the time the call was attempted. No further attempts will be made. Issue failed contact letter and ESA 3 .
6.	If third attempt to deliver call is successful, proceed to step 7. **Note:** A call will be considered to be successfully delivered once the customer has answered the phone even if the customer cannot continue with the call. Customer will not be called back
7.	Using the Smartscript, ensure the appropriate security questions procedure is followed before giving further information
8.	Using the Smartscript inform the customer of: their Work Capability Assessment (WCA) result whether they have been placed in the Work Related Activity Group (WRAG) or the Support Group (SG) their weekly entitlement including any Transitional Addition (TA) or deductions.
9.	If the customer requests information regarding their WCA result, this must be sent to them on form IBR65. Update the CAM contact history correspondence type 'IBR65'
10.	Where the customer has been placed in either the Work Related Activity Group (WRAG) or the Support Group and is ESA (C) only and the Reason for Contact has been selected as 'IB Migration Allowance', the ESA (IR) Smartscript is launched at the end of the Allowance call.
11.	If the customer wishes to have this decision changed take reconsideration action

12.	If the customer was previously paid 4 weekly, advise them that any future payments will be made fortnightly
13	Direct Payment (DP) is the normal method of paying ESA. This is a cost effective, safe means of payment which is less open to fraud. A DP is a payment of benefit paid direct into a claimant's bank, building society, credit union or Post Office card account. If the account details have not been supplied, a **Method of Payment discussion** must take place during the allowance call. DPs are issued at the same frequency as other method of payments.
13.	Update the manually created Contact History.
14.	Manually clear any outstanding CAM tasks
15.	The ESA award notification M1050 will be issued by JSAPS overnight after completion of ELUS JA405 and will be viewable in Notifications On Line (NOL) and JA570.

13. If the customer is a Welsh speaker and is living in Wales, and the oral language indicator has been set to Welsh, the call must be made in Welsh.

14. FEP/IFEP Payments

When a FEP/IFEP payment is required in an IB(IS) Reassessment case, Finance will need to rely on prints from a Closed Case.

For instructions on issuing Faster Payment, see the Methods of Payment chapter.

System Notifications to customers

15. The customer will not receive any notifications from ISCS when the IS claim is closed with reason code 36 or 37.

16. The only system notification the customer will receive from PSCS when the IB claim is closed with reason code 0, 8 or 9, is the P45.

17. When the ESA claim has been assessed, the award notification M1050 'IB Migration decision' is issued directly to the customer from JSAPS.

System Notification to Local Authorities

18. There is no system notification issued to the Local Authority (LA) on the termination of an IS claim closed with reason code 37 where ESA has been allowed.

19. There is a system notification issued to the LA on the termination of an IS claim closed with reason code 36 where ESA has been disallowed.

System Notifications to HMRC

20. Notifications to HMRC Tax Credits section are suppressed from ISCS, where the IS claim has been closed with reason code 37, where ESA has been allowed.

21. Where the IS claim has been closed with reason code 36, when ESA has been disallowed, the notification to HMRC Tax Credit section from ISCS is still issued.

22. PSCS will send P45s to HMRC when the IB claim has been closed with reason code 0, 8 or 9.

23. PSCS will send end of year returns to HMRC from a monthly scan that will pick up cases that have been closed with reason code 0, 8 or 9.

24. PSCS will send an end of credits notification to HMRC dated from the Saturday before the claim closure date where the case has been closed with reason code 0, 8 or 9.

25. PSCS will send an end of State second pension credits (S2P) notification to HMRC dated from the last day of entitlement to IB when the IB claim has been closed with reason code 0, 8 or 9. S2P credits cannot be earned from 06/04/2016. PSCS will automatically send an end of S2P notification to HMRC dated 05/04/2016 for all records with a S2P open end date and for those records with an end date after 05/04/2016, the end date will be replaced with 05/04/2016.

System Notification to CIS

26. The system notification which is broadcast to the Customer Information System (CIS) on the termination of an IS or IB claim will still be made where ESA has been allowed or disallowed.

System Notifications to mortgage lenders

27. There is no system notification issued to the mortgage lender on the termination of an IS claim closed with reason code 37 where ESA has been allowed.

28. There is a system notification issued to the mortgage lender on the termination of an IS claim closed with reason code 36 where ESA has been disallowed.

System Notification to Child Maintenance and Enforcement Commission

29. There is a system notification issued by ISCS to the Child Maintenance and Enforcement Commission (CMEC) when the IS claim is closed with reason code 36 or 37, ESA allowed or disallowed.

System Notifications to Third Parties

30. There is no system notification issued by ISCS to the third party on the termination of an IS claim closed with reason code 37 where ESA has been allowed.

31. There is a system notification issued by ISCS to the third party creditors on the termination of an IS claim closed with reason code 36, where ESA has been disallowed.

Handing over the customer to Jobcentre Directorate for Work Focused Interview process

32. JSAPS will automatically update LMS via the interface, identifying which group the customer has been placed in.

33. JSAPS will produce a system case control and the Diary Administrative Support Officer (DASO) at the jobcentre will take any necessary action to consider the impact on the Work Focused Interview (WFI) regime as they would currently.

Use of drugs and alcohol identified on ESA50

34. When a completed ESA50 is returned by the Health Assessment Advisory Service in the ESA55 Assessment referral jacket check the question on page 7 headed “Drugs, alcohol and other substances”.

35. If the “yes” option has been ticked to indicate the customer has a drug or alcohol related problem, send form IBM23 to the DASO recording exactly on Part 3 of the form – ‘Drug/Alcohol misuse’ - the information provided by the customer.

36. This is in addition to the JA674 action.

37. Once ESA is awarded and payment action is completed in JA405 , a case control P143, is created in JSAPS which inhibits payments until confirmation of the closure of the source systems is received.

38. JSAPS automatically notifies PSCS/ISCS to close the IB/SDA/IS claim, whichever is applicable.

39. When JSAPS has received confirmation from the source system, via CIS, that the cases have been closed, case control P143 is cleared and payment is released.

40. This notification will also be broadcast to the Customer Account Management (CAM) system via CIS and the CAM National Reassessment case will be automatically closed down with no action required from the user.

41. If PSCS/ISCS cannot be closed automatically, a case control P143 will be generated and reported on a Work Available Report.

42. There is a known fault on PSCS when the customer has failed to return medical evidence and the system shows ‘Credits Only –Susp1’. The suspension cannot be lifted on Credits only cases. The case must be closed manually.

43. Manually close PSCS and ISCS. Access ELUS JA120, Event Maintenance to end the event interest and clear the case control to allow payments to be released.

44. Manually close down the CAM National Reassessment case using the CAM Close Case functionality if appropriate.

45. There may be cases where PSCS/ISCS have been closed down, but there is still outstanding action to be taken in JA405 on JSAPS before payment can be released.

46. A CAM task ‘Action outstanding on JSAPS’ will warn the user that action is required to complete JA405 and issue payment to the customer. The user must investigate immediately and complete the action to ensure payment is made without delay.

Manually closing a case on PSCS

47. A case on PSCS can be closed within 28 days of the incapacity end date.

48. It is important that the PSCS case is closed before any combined ISCS case is closed.

49. Take the following action to close the case:

Step	Action
1.	Access dialogue RP603, ‘Account Summary’ and select ‘Enter’
2.	In RP603, ‘Decision’ input: off-line decision type code ‘47’ (Incapacity) in the ‘Incapacity Type’ field reference number ‘21514’ in the ‘Decision Number’ field type ‘A’ (Allowed) in the ‘Decision Type’ field input the actual date of the decision in the ‘Decision Date’ field
3.	Access dialogue RP303 Controls and Reviews’
4.	In ‘Incap Claims Control’ screen RP303, in the ‘Incapacity End Date’ field enter day before Effective Date i.e. last day IB is to be paid
5.	In the corresponding ‘Type’ field input the reason code 8 as the customer has been allowed ESA following their WCA

6.	Select ‘Enter’. The closure reason code is decoded. Select ‘F4’ to access RP303, Outcome Reasons’
7.	In RP303, in the ‘New Outcome Reason Code’ field, input code 16 (Claimed another benefit) and select ‘Enter’
8	Ensure there are no outstanding BFs on the case. If there are, make a note of them as relevant BFs must be transferred to ELUS JA530
9.	In either RP801, ‘Notes’ or RP803, ‘Notepad’ enter ‘Case reassessed to ESA’
10.	Access RP801865 to check if the closure of the case in PSCS has generated a pre payment check. If case control 6541 is present, a check has been generated and a Line Manager/Team Leader must be notified
11.	The Line Manager/Team Leader must complete the IB (IS) Reassessment Clerical Pre Payment Template , ensuring the following information is included: customer name customer NINO that there is a payment check outstanding and the template must be issued to the single point of contact (SPOC) in the IB owning office at 4pm.
12.	On receipt of the template, the SPOC must then arrange to clear the check and then complete the ‘Cleared by and date’ section of the template and return to the original sender to confirm the clearance
13.	Line Manager/Team Leader on the reassessment team must then populate RP803, Notepad on PSCS that payment check occurred and has been cleared.

Manually closing a case on ISCS

50. It is important that the PSCS case is closed before any combined ISCS case is closed.

51. Take the following action to close the claim:

Step	Action
1.	Access dialogue IS091: Change of circumstances
2.	Input the: date of change – the Effective Date date the notification of the WCA determination was received on MSRS select ‘F24’
3.	Input a ‘Y’ in the ‘About You’ ‘About You Cont’ ‘Other Benefits’, and ‘Linking’ fields select ‘Enter’
4.	In the ‘About You’ screen IS091, input code 37 (Reassessment Allowance) in the ‘Exclusion reason’ field. Select ‘Enter’
5.	In the ‘About You Cont ’ screen IS091, remove the National Insurance Office (NIO) code and select ‘Select’
6.	In the ‘Other Benefits’ screen IS091, input the IB termination date in ‘D/End’ field. If there is DLA/PIP/AFIP held and the initials ‘INT’ are next to the benefit code 11 or 44, the end date for each award must also be input as the IB termination date. Select ‘Enter’
7.	In the ‘Linking’ screen’, IS091 and remove the first day of sickness, and the DP qualifying date. ‘Enter’

8.	Access dialogue IS200 and then dialogue IS105 Compute Payment Arrange to pay the customer to, and end the IS claim, on the effective date
9.	Action all outstanding Case Controls in dialogue IS530 ‘Case controls’ or transfer to ELUS JA530 if appropriate.
10.	Access dialogue IS110: Notepad. Input note ‘Reassessment Case – ESA awarded’. If the customer is to be claimed for by someone else, input details of the new partner's name, NINO and date of claim in dialogue.
11.	If the closure of the case in ISCS has generated a pre payment check, a prompt will appear and a Line Manager/Team Leader must be notified
12.	The Line Manager/Team Leader must complete the IB (IS) Reassessment Clerical Pre Payment Template , ensuring the following information is included: customer name customer NINO that there is a payment check outstanding and the template must be issued to the single point of contact (SPOC) in the IS owning office at 4pm
13.	On receipt of the template, the SPOC must then arrange to clear the check and then complete the ‘Cleared by and date’ section of the template and return to the original sender to confirm the clearance
14.	Line Manager/Team Leader on the reassessment team must then populate IS110, Notepad on ISCS that a pre payment check has occurred and been cleared.

Retention of documentation and remote store action

52. In cases that have been allowed, the Reassessment case documents should be retained until the ESA claim becomes dormant. The case should then be given a retention date in accordance with the Benefit Specific section of the Records Management Policy .

53. In cases where ESA has not been allowed, the RS Web Team should be notified and a retention date be given in accordance with the Benefit Specific section of the Records Management Policy for IB or IS.

Retention of Mortgage Sub-File

54. All IS Mortgage sub-files in allowed cases, should be re-branded as an ESA Mortgage sub-file and kept with the ESA claim. This will ensure that the sub-file is given a retention date in accordance with the Records Management Policy for ESA once the ESA claim becomes dormant.

Taxation

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to deal with taxation during National Reassessment.

2. This guidance supports National Reassessment and is in addition to existing Employment and Support Allowance (ESA) guidance.

Explanation of HMRC forms

3. The weekly amounts of taxable benefit are added up and reported to HMRC on the following forms:

P45 (1) U - must be issued when the benefit claim ends –this will allow us to update the current code for the new employer.

P14U - issued at the end of the tax year if the claim continues past 5 April

P180 - issued to notify HMRC of changes to the amount of taxable benefit previously reported on P45 (1) U or P14U

4. When a customer is reassessed they will be subject to ESA rules.

ESA comprises of two elements:

Contribution-based - ESA (C) is liable to tax

Income-Related - ESA (IR) is not taxable.

5. Incapacity Benefit (IB) customers who were previously in receipt of Invalidity Benefit (IVB) or Severe Disablement Allowance (SDA) will not have been taxed on these benefits.

6. These customers will now be liable to pay tax under Contribution-based ESA (ESA (C)).

7. Currently the Child Dependency Increase (CDI) paid with IB is non taxable.

8. When the claim is transferred to ESA the total amount of the ESA (C) award will be taxable.

9. When Pension Strategy Computer System (PSCS) interest is closed the (IB) customer will receive a P45. The P45 is not required for reassessment purposes and should be retained by the customer for their records.

10. Previous tax details can be obtained from PSCS dialogue TX009.

11. Customers who are in receipt of SDA and IVB will not receive a P45.

12. When PSCS interest is closed HM Revenue & Customs (HMRC) will be notified automatically.

13. PSCS does not issue any notifications to customers who live abroad. All P45’s will go to IPC who will re-issue to the customer.

14. As soon as possible after an award of ESA (C) of **more** than £120 per week has been made, a clerical notification **must** be sent to HMRC to advise them of the award.

15. This will allow HMRC to make an early adjustment to the claimant's tax code and prevent the claimant from receiving a tax demand. This in turn will help to reduce avoidable contact from the claimant.

16. The notification should be e-mailed

Clerically Maintained Claims

17. All wholly clerical claims will be maintained as per current ESA clerical guidance.

System Maintained Claims

18. All system reassessed claims will be maintained as per current ESA taxation guidance. The P45 is not required for reassessment therefore no action will be required. Where a P45 is received in the office it should be returned to the customer.

19. JSAPS automatically issues form P60U, certificate of taxable pay and tax paid, to the customer.

20. JSAPS notifies HMRC via an electronic P14U transaction of the customer's end of tax year position.

Note: Where a claim is being maintained clerically a P14U must be completed and issued manually to HMRC at

HMRC,

Customer Operations,

Queensway House,

Stewartfield Way,

East Kilbride,

Scotland,

G79 1AA.

21. Send form P60U(MAN) to the claimant

Tax calculation at the end of the tax year

22. At the end of every tax year a Pay As You Earn (PAYE) calculation must be performed for every ESA customer with Limited Capability for Work (LCW) on 5 April.

23. PAYE calculation for system and clerically held cases will be done as per existing guidance.

24. All end of year tax calculation must include the transitional addition.

25. All other tax action is as per current ESA taxation process.

26. A PB3 is issued to inform HMRC that there is a clerically maintained taxable ESA claim.

27. Only issue a PB3 when some, or all, of the ESA award is ESA (C).

28. Where the whole award is ESA (IR) do not issue a PB3 to HMRC.

29. Complete form PB3 marking it as ‘IB (IS) REASSESSMENT’ and send to HMRC using the ‘Fully Tracked Documented Service’ on a daily basis.

30. Where a customer was in receipt of IB prior to 13 April 1995, annotate the PB3 **‘Pre-1995’**. This is because these cases do not hold an IB tax record and are transferring from a non-taxable benefit to a taxable one.

Good Cause

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to consider good cause during National Reassessment.

2. This guidance supports National Reassessment and is in addition to existing Employment and Support Allowance (ESA) guidance.

3. Non-compliance with the Work Capability Assessment (WCA) process requires a good cause determination to be made. Non-compliance can be:

failure to return (FTR) the ESA50

late return of the ESA50 after disallowance

failure to attend (FTA) the Work Capability Assessment

failure to participate (FTP) in the Work Capability Assessment.

4. A good cause determination is made by the Decision Maker (DM).

5. When making a Good cause determination always consider if the customer has mental health issues and take this into account.

6. If good cause is not accepted and the customer is getting Income Support (IS), you must check if the customer satisfies another condition of entitlement to receive IS.

Considering good cause for cases with Incapacity Reference Guide Code 0700

7. Many cases are currently recorded on Pensions Strategy Computer System (PSCS) with Incapacity Reference Guide (IRG) Code 0700, where the user found no corresponding IRG code for the customer's incapacity as stated on the medical evidence. Details of the incapacity should have been noted in dialogue RP801, RP803 or previously recorded in RP011.

8. It may not be possible to tell from these dialogues whether or not the customer has mental health issues.

9. If information isn't available on PSCS, MSRS must be checked.

10. The current good cause procedures should be followed if you are unable to identify the customer's incapacity from the source systems or MSRS.

Customer has mental health issues

11. If it can be established that the customer has mental health issues and the ESA50 has not been returned take the following action:

set the Mental Health flag on MSRS

ensure MSRS is updated with current GP details

raise a new S referral following current guidance

support this S referral with a Supporting Case File ESA55 jacket with the diagnosed medical incapacity written on the front.

12. Where the DM accepts that the customer has demonstrated good cause for non-compliance, the CAM task should be updated with the sub-status ‘Re-referral Req Good Cause’

Failure to return ESA50

13. When the customer fails to return the ESA50 the Decision Maker (DM) considers whether they have demonstrated good cause for failing to return the form.

14. An automatic CAM task will be created when the customer fails to return an ESA50 within the given timescale, 6 weeks.

Good cause accepted for failure to return ESA50

15. Where the DM accepts good cause for failure to return the ESA50:

resume the reassessment process from the point that the customer failed to comply

follow IB (IS) Reassessment MSRS guidance

record the determination on Decision Making and Appeals Case Recorder (DMACR) and in Notepad on PSCS/Income Support Computer System (ISCS)

record the good cause determination in CAM

update and close the ‘To Do – ESA50 Non-Return’ task to ‘Re-referred (Good Cause)

close any CAM tasks that have now been cleared.

Good cause not accepted for failure to return the ESA50

16. After taking disallowance action:

record the determination on DMACR and in Notepad on PSCS/ISCS

record the good cause determination in CAM

close any CAM tasks that have now been cleared

Late return of the ESA50

17. An automatic CAM task will be created for late return of an ESA50.

18. The action to take on late receipt of an ESA50 depends on whether or not a decision has been made on the ESA50 non return.

19. In the majority of cases the conversion decision will already have been made when a late ESA50 is received. The case, plus all supporting documentation, must be re-referred to the DM to consider if the previous decision needs to be treated as never having been made.

20. There is no absolute time limit beyond which good cause cannot be accepted in these circumstances.

ESA50 returned after conversion decision made

21. There may be exceptions where the ESA50 is received after the 4 week completion period has expired but before the decision maker has completed their ‘ESA50 not returned’ decision. No decision is required in these circumstances and the WCA process should continue immediately with an S referral.

22. When the ESA50 is returned after the Effective Date and PSCS/ISCS claims have been closed, refer to the DM, ensuring it is attached to an ESA56, to determine if the customer has demonstrated good cause for the late return.

23. Where the DM does not accept good cause for the late return of the ESA50, there will be no change to the original outcome decision disallowing conversion to ESA. In these cases advise the customer to make a new claim to ESA via the Contact Centre. The earliest the date of claim can be is the Effective Date. The ESA50 will be used for Assessment referral to the Health Assessment Advisory Serevice. There is no need to issue a new ESA50.

24. Where the DM accepts good cause for the late return of the ESA50:

resume the reassessment process from the point that the customer failed to comply

follow IB (IS) Reassessment MSRS guidance

record the determination on DMACR and in Notepad on PSCS/ISCS

record the good cause determination in CAM

update and close the ‘To Do – ESA50 Returned-Late’ task to ‘Re-referred (Good Cause)

close any CAM tasks that have now been cleared.

Failure to attend WCA

25. CAM will create a task ‘To Do – Did Not Attend’ to alert the user to check WCA outcome on MSRS.

26. When the customer fails to attend a WCA, the Health Assessment Advisory Service issues a BF223 asking the customer to return it to the Benefit Centre within 7 days giving the reason for non-attendance.

27. A CAM task ‘To Do Other’ will be automatically created to check return of BF223.

28. When the customer provides reasons for failing to attend a WCA the DM considers whether they have demonstrated good cause for not attending.

Good cause accepted for failure to attend WCA

29. Where the DM accepts good cause for failing to attend a WCA:

- resume the reassessment process from the point that the customer failed to comply
- register the new Assessment referral in MSRS
- send any associated paperwork to the Health Assessment Advisory Service, including DNA1 V5 if appropriate, the BF223 and a copy of the DM decision.
- record the determination on DMACR and in Notepad on PSCS/ISCS
- update and close the ‘To Do – Did Not Attend’ task to ‘Re-referred (Good Cause)
- close any CAM tasks that have now been cleared.
- Good cause not accepted for failure to attend WCA

30. After taking disallowance action:

- record the determination on DMACR and in Notepad on PSCS/ISCS
- record the good cause determination in CAM
- close any CAM tasks that have now been cleared
- Failure to participate with a Limited Capability for Work Assessment

31. Follow existing guidance where the customer fails to participate in the Limited Capability for Work Assessment.

Disallowance and Reconsideration

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff what action to take during National Reassessment when a claimant in receipt of Incapacity Benefit (IB), Income Support (IS) paid on the grounds of incapacity, or Severe Disablement Allowance (SDA):

- has undergone the Work Capability Assessment (WCA) process and been found not to have Limited Capability for Work (LCW)
- not returned the ESA50 after reminder and subsequent 'good cause' action
- failed to attend (FTA) the WCA after reminder and subsequent 'good cause' action
- failed to participate (FTP) in the WCA and reasonable steps were taken to explain the consequences of non-participation.

2. This guidance also describes how to complete the next steps actions, including revising or superseding a decision.

3. For claimants who live in Wales and who choose to deal with their business in Welsh refer to the Welsh language process.

4. When the claimant has undergone the WCA process and following the WCA determination, the benefit entitlement decision is made. The outcome decision may be subject to reconsideration or supersession in the future.

5. A change of circumstances that has an effective date of change prior to the ESA effective date may result in the decision on the IB/IS/SDA award being revised/superseded. In turn this may lead to a revision or supersession of the conversion decision.

6. The claimant's entitlement to IB/IS/SDA is ended by action of law (from the effective date) following the making of the conversion decision, rather than because the claimant has ceased to satisfy any of the conditions of entitlement to that benefit. Although the claimant may raise this issue during the appeal, the decision under appeal is the conversion decision which is based on the ESA conditions of entitlement not the conditions of entitlement to the existing benefit. It is not in the power of the Decision Maker (DM) or the tribunal to reinstate entitlement to the existing benefit in these circumstances.

Claimants who need help in using our services

7. Claimants, or their representatives, may have had very little contact with Jobcentre Plus and it is essential that they understand the reasons for the actions being taken with their benefit. See the Vulnerability Hub for further guidance.

8. Claimants not already identified as being in need of help in using our services and additional support may become so at any point during the Reassessment process. There is extensive Jobcentre Plus guidance on dealing with this client group and also a specific National Reassessment guidance.

9. Check the ‘Additional Needs’ applet in CAM before preparing the relevant Disallowance Notification or conducting the Decision Assurance call. Claimants may need their notifications in Braille or Large Print or require telephone calls to be made via a text phone.

10. Claimants identified as needing additional help may be invited by the DM, during the Decision Assurance call, to take any further information they may have to support their case into the local Jobcentre. An appointment will be made for them using the AJCS diary using the current process.

Effective Date

11. The claimant’s current IB/IS/SDA must only be disallowed from the effective date.

12. The effective date is the date on which a conversion decision as to whether or not a claimant’s existing award qualifies for conversion to ESA takes effect.

Change of Circumstances

13. If the claimant notifies any changes in their circumstances after the decision, but before the effective date, these changes, which may lead to disallowance for reasons other than no LCW, should be actioned in line with the National Reassessment change of circumstances guidance.

14. Only claimants who have been found to have no LCW must be contacted by phone.

15. The following process must be followed by the Decision Maker when contacting the claimant by phone.

16. The DM should make 2 attempts to contact the claimant or their representative to carry out the call.

17. All contacts and their outcomes must be logged in CAM.

18. It is imperative that users run the Wrap Up Call SmartScript each time they have created a Contact History Record. Only by doing this will the correct Management Information be available.

19. Take the following action:

Step	Action
1.	Before contacting the claimant by phone check the following details: claimant contact details claimant personal details claimant needs appointee/representative potentially violent person marking.

	claimants living in Wales must be contacted in their preferred language
2.	Access the claimant record on CAM to make the outbound call
3.	Manually create the CAM ‘Contact History’ with the following values: Caller name – input claimant’s full name Reason for contact – select appropriate reason from drop-down Do this for every call, even if it is not the first time the claimant has been contacted that day. If this is not done at this stage for every contact, CAM will not update the Contact History correctly.
4.	Select the ‘Sufficient Security Questions Test Button’ in CAM.
5.	If there is insufficient security information on CAM, access PSCS or ISCS to formulate the appropriate security questions
6.	Record the questions and answers on CAM Notepad
7.	When there is sufficient security information available contact claimant and continue the call. Launch the Security Questions SmartScript Populate the following fields whilst on the phone to the claimant: Channel – Telephone In/Out – Outbound External.
8.	If the claimant fails the security questions, advise them that we will send them a letter explaining the reasons for the call
9.	Terminate the call using Call Wrap Up SmartScript. Completing this action will populate the ‘Reason for Contact’ ‘Call Outcome’, Case Type’ and ‘Case Number’ fields
10.	Arrange to send the appropriate letter to the claimant. Manually update the Contact History with the following values:

	Caller name – input claimant's full name Reason for contact – select appropriate reason from drop-down Channel – letter In/Out – outbound external
11.	If claimant passes the security questions continue call launch IB Migration SmartScript
12.	Complete IB Migration SmartScript - 'Call Outcome' is populated
13.	Launch the Call Wrap Up SmartScript. Case Type and Case Number are populated.
14.	'Call Ended' Contact History Record is correctly populated.

20. If the claimant has requested no telephone contact, does not have use of a telephone or has requested they are only contacted in writing, the DM must issue the form IBM270 to allow the claimant to provide any further relevant information they may have.

21. Form IBM270A must be issued as a reminder to the claimant to provide any information they have if the IBM270 is not returned within 17days.

22. If the claimant is subsequently disallowed or fails to provide any further information, send the notification of disallowance with IBR65 immediately to the claimant after the disallowance decision has been made, and form ESA65B to the claimant's GP.

Claimant fails to return ESA50 to Health Assessment and Advisory Service

23. Action to take when claimant has failed to return (FTR) ESA50 to Health Assessment and Advisory Service.

Step	Action
1.	A prompt 'ESA50 not returned' is generated in Claimant Account Management (CAM) to confirm the ESA50 has not been returned. Follow existing Reassessment procedures to establish good cause
2.	If good cause is not accepted, and the IS claimant has satisfied another condition of entitlement to IS, it will be deemed, by default, that they wish to carry on receiving IS

3.	Calculate the effective date
4.	Check if the claimant is eligible to remain on IS with another condition of entitlement. If they are, the Disability Premium may no longer be payable and any National Insurance credits they are receiving may cease
5.	If the claimant is eligible to remain on IS with another condition of entitlement, assess the IS case with the other condition of entitlement.
6.	If the claimant wants to make a new claim to IS, arrange handover to IS Section following agreed procedures using email template. Mark template as 'IB (IS) Reassessment case'
7.	Issue the appropriate IB (IS) Reassessment specific clerical disallowance notification
8.	CAM will create a task to alert the user to close the Pensions Strategy Computer System (PSCS) and/or Income Support Computer System (ISCS). Close the IB and IS claims and update CAM notepad that the claimant has failed to return the ESA50
9.	In 'Task' mark any open CAM tasks as 'Closed' in the 'Task Status' field
10.	If an appeal is received and recorded on the 'Close CAM Case' task as received after the Effective date, CAM will display an information message 'Appeal Received after source system claims closed. Manual Migration Required.'

Late return of ESA50 following disallowance

24. In event of the ESA50 being returned after the FTR decision has been made, take the following action:

Step	Action
1.	If the ESA50 is returned late CAM will create a task with a sub-type 'ESA50 – Returned Late' to prompt the user that a good cause decision may be required
2.	If the claimant subsequently demonstrates good cause and this is accepted by the DM,

	since they have not yet completed their WCA, reinstate their IB/IS/SDA and recommence Reassessment from the point it ceased (i.e. they should be referred again to MS by creating an S referral)
3.	Close the CAM task ‘Close ISCS/PSCS case’ as this action is not required if good cause is accepted
4.	If the claimant subsequently demonstrates good cause and the IB/IS/SDA case has been closed down and cannot be re-opened, arrange with the owning office to maintain and pay the case clerically and follow the IB (IS) Reassessment process from the point it ceased (i.e. claimant should be referred again to MS).
5.	Record in CAM the good cause determination for the late return by closing the CAM task with subtype ‘ESA50 – Returned Late with a sub-status of ‘Re-Referred (Good Cause)’
6.	Refer again to M MSRS as an S type referral
7.	Record disallowance on CAM [may be closed with a sub-status of either ‘Good Cause Not Accepted’ or ‘Re-Referred (Good Cause)’, or potentially ‘Not Required (Mental Health)’]
8.	Where the DM does not accept good cause for the late return of the ESA50, there will be no change to the original outcome decision disallowing IB/IS/SDA. This decision will however extend the time for submitting an appeal if a written application for revision is made within the one month period
9.	CAM will create a task to alert the user to close the Pensions Strategy Computer System (PSCS) and/or Income Support Computer System (ISCS). Close the IB and IS claims and update CAM notepad that the claimant has failed to return the ESA50
10.	Issue the appropriate IB (IS) Reassessment specific clerical disallowance notification and close the CAM task down with a sub-status of ‘Good Cause Not Accepted’

Claimant has failed to attend a Work Capability Assessment

25. If the claimant has failed to attend (FTA) a Health Assessment take the following action:

Step	Action
1.	A task ‘Did not attend’ will be generated in CAM
2.	Follow existing reassessment procedures to establish good cause
3.	A CAM task will be created for mental health and for non-mental health claimants to confirm they ‘Did Not Attend’. Follow the same process in both cases as the non-mental health claimant may have unrecorded mental health issues
4.	The ‘Did Not Attend’ task will become overdue when 7 calendar days have elapsed since the BF223 has been issued by the Health Assessment and Advisory Service, and consider disallowing the claim or arranging a Safeguard visit for mental health claimants
5.	While awaiting the BF223 try to contact the claimant by telephone for an explanation of why they did not attend the WCA Assessment
6.	If good cause is not accepted, check to see if IS claimants have satisfied another condition of entitlement to IS
7.	Calculate the effective date
8.	Check if the claimant is eligible to remain on IS with another condition of entitlement. If they are, the Disability Premium may no longer be payable.
9.	If there is no other condition of entitlement to IS continue to follow existing processes to disallow IB/IS/SDA from the effective date
10.	If good cause is not accepted, continue to follow existing procedures to disallow IB/IS/SDA from the effective date
11.	Issue the IB (IS) Reassessment specific clerical disallowance notification.
12.	Record disallowance on CAM

13.	If good cause is accepted, reinstate their IB/IS/SDA and restart the Reassessment from the point it ceased (referred again to MSRS)
14.	If the claimant demonstrates good cause and the IB/IS/SDA case has been closed down and cannot be re-opened, arrange with the owning office to maintain and pay the case clerically and follow the IB (IS) Reassessment process from the point it ceased (i.e. claimant should be referred again to MS).
15.	Record in CAM the good cause determination for the FTA. The task with subtype 'Failed to Attend' will be updated as 'closed' with a sub-status of 'Re-Referred (Good Cause)
16.	Refer again via (MSRS) as an S type referral.

Claimant fails to participate in the Work Capability Assessment

26. When a claimant attends a Health assessment but fails to participate/comply with the process, the assessment is terminated by MS. This may happen where the claimant:

- poses a threat to staff or others
- shows inappropriate or threatening behaviour
- shows intoxication from alcohol or substance abuse
- is persistently uncooperative.

27. If the claimant's behaviour is considered to be unreasonable, see guidance on Unacceptable Claimant Behaviour.

28. A further appointment will be arranged by the Health Assessment Advisory Service.

29. If the claimant's assessment is terminated for a second time, MS will record a full and detailed account of the claimant's behaviour and the reasons for terminating the assessment on the ESA85AMIN. This should be treated as a 'Failed to Attend WCA' and action as appropriate.

30. Where the Reassessment Decision Maker (DM) determines that a claimant potentially does not have LCW, an attempt must be made by the DM to contact the claimant or their representative by telephone before the disallowance of their IB/IS/SDA is put into effect. This is called the Decision Assurance call (DAC). Follow the DAC desk aid(1) when making the call, there is also a Welsh version.

31. This call is designed to help claimants decide on the next steps. It includes contacting the claimant:

- by the claimant's preferred method of contact which could be via Text phone, landline or mobile telephone number

- to explain that based on the information available it is likely that the claimant will be disallowed
- to ask if they wish to provide any further relevant information
- to inform them of the disallowance process, explain the decision and discuss further options with them
- to explain that their benefit will cease from the effective date if they are disallowed
- to explain the next steps available to the claimant
- Moving to another benefit – IS or JSA
- Appealing against the decision (or, from 28 October 2013, requesting a Mandatory Reconsideration)
- Leaving benefit
- the appropriate steps to progress the claimant's preferred option.

32. If at any stage of the Decision Assurance call, the DM decides that the claimant requires more time to consider the information they have been given, they can be offered a mini-break and the DM will call them back within 72hours to continue with the call and discuss their options further. NOTE: Only one mini-break can be taken by each claimant.

33. Take the following actions when it is identified that the claimant may require a mini-break during the Decision Assurance call:

Step	Action
1.	Check CAM notes to identify if the claimant has previously had a mini-break: if the claimant has previously had a mini-break continue with the Decision Assurance call if the claimant has not previously had a mini-break and the DM feels one is appropriate, offer to contact them again within 72 hours to continue the call, when they have had time to consider the information given or allow them the opportunity to provide more information. If the claimant refuses the offer of a mini-break, continue the Decision Assurance call as normal
2.	When a convenient time and date have been agreed to call the claimant back, set a CAM task to make the call
3.	Record in CAM notes the stage of the Decision Assurance call at which the mini-break and call back was offered to the claimant
4.	If the claimant accepts the offer of a mini break and they have already been informed that they are not entitled to ESA, as action has been taken as per section titled 'Claimant does not have further information' of the Decision Assurance/Disallowance

	Call Desk Aid (1) , the disallowance notification must be issued at this stage
5.	When the CAM task matures, the DM must make one attempt to call the claimant back at the time and date agreed to continue with the Decision Assurance call at the stage it previously ceased
6.	If the call is effective, check CAM notes and continue the call from the point at which it previously ceased and answer any further questions the claimant may have
7.	If the claimant has more information to provide, take action as per section ‘Claimant has further information to send in to us’ of the Decision Assurance/Disallowance Call Desk Aid (1)
8.	If the claimant has no further information to provide, and the disallowance notification has not already been issued, take action as per section titled ‘Claimant does not have further information’ of the Decision Assurance/Disallowance Call Desk Aid (1) and issue the relevant disallowance notification to the claimant
9.	If the claimant is unavailable when the call back is made, issue the relevant disallowance notification.

34. The effective date is calculated from the date that the disallowance notification is sent to the claimant. This means the effective date may be delayed if the claimant requests time to submit further evidence in support of their claim.

35. Action to take when contacting the claimant who has no LCW

Step	Action
1.	Outcome received on MSRS. Automatic CAM task set - ‘Record and Review’
2.	When Claimant Service Officer (CSO) receives CAM task and must determine if claimant has LCW
3.	Access claimant’s current IB/IS/SDA award details to establish payment cycle

4.	Calculate a provisional effective date and enter this date in the CAM notepad
5.	Check on the Claimant Information System (CIS) to see if claimant has an interest in IS
6.	If there is an ISCS interest shown on PSCS check ISCS for possible other condition of entitlement to IS and note CAM notepad
7.	Note in CAM Notepad that this is potential disallowance case and a Decision Assurance call is required
8.	If claimant has no LCW, CSO updates CAM task to 'In Progress' and reassigns on CAM to a DM
9.	DM to review information on CAM and in clerical papers
10.	Check the following on each case for any conflicting information: Medical Certificate ESA50 medical questionnaire – claimant's view ESA85 Assessment report from MS any other evidence held. Record in the Decision Making and Appeals Case Recorder (DMACR) if there is any conflicting information
11.	If there is any evidence that is contradictory or further information is needed on any medical aspect of the case, contact MS for advice
12.	When all facts have been established and the claimant still appears to have no LCW, using call type 'Notify No LCW Decision' ' the DM must make the Decision Assurance call to the claimant to: explain that based on the information available the claimant will be disallowed using Disallowance Desk Aid (1) ask if they are able to provide any additional relevant information The 'Record and Review' CAM task status must be left open – 'in progress' – to avoid

	prompting closure of the CAM case
13.	If the call is unsuccessful, a further attempt to contact the claimant must be made, leaving at least 3 hours between each attempt. Note all attempts and outcomes on CAM notepad and CAM contact history
14.	If unable to contact the claimant, issue the appropriate disallowance notification
15.	If the claimant has requested no telephone contact, does not have use of a telephone or has requested they are only contacted in writing, issue form IBM270 to the claimant requesting any further relevant information they may have within 17days. Set a manual CAM task for 17days and update CAM notepad and contact history
16.	If the information hasn't been provided when the CAM task matures, issue form IBM270A as a reminder to the claimant to provide any information they have. Set a further CAM task for 10days and update CAM notepad and contact history
17.	If the information has not been provided when the CAM task matures, issue the appropriate disallowance notification
	Claimant wishes to provide additional relevant information
18.	If claimant wishes to provide further relevant information: tell the claimant to provide the information in writing, or if they are identified as needing additional help or they don't wish to send their information through the post, invite them to provide the information at their local jobcentre by booking an appointment via the AJCS diary as per the current process wrap up the call and update the 'Awaiting Ver' CAM task sub-status to 'Awaiting Documentation' update the B/F for 14 days
19.	Update CAM Notepad and Contact History with the action taken on the case
20	If claimant submits the further relevant information and is found to have LCW take action to gather information and assess and award

21.	When CAM task matures, telephone the claimant again to query if they intend to supply the information. If they still wish to supply the information BF the case again for 7 days or as appropriate if claimant is waiting on a third party e.g. hospital consultant
22.	When the claimant sends in the evidence and further information is needed on any medical aspect of the case, contact MS for advice. Update the 'Record and Review WCA Outcome' CAM task sub-status to 'Advice Ref Required (New Info)'.
23.	When the advice report has been completed the user updates the sub-status of the task to 'Advice Ref Complete (New Info)'. This updating triggers the Status of the case to automatically update to 'Advice Ref Complete-New Info'.
24.	If on re-examination of the evidence the claimant has LCW, take action to gather information and assess and award the case. Update CAM Notepad with action taken on the case and update the "Record and Review WCA Outcome" task to progress the case.
25.	If on re-examination of the evidence the claimant does not have LCW, the DM must: re-calculate the effective date and update CAM Notes continue the Decision Assurance call, using the Disallowance Call (2) deskaid there is also a Welsh version explain disallowance and next steps
26.	Follow existing processes to disallow IB/IS/DSA from the effective date
27.	Close CAM task 'Record and Review' - No LCW'. This will create two new tasks: issue disallowance notification make disallowance call. Issue the appropriate disallowance notification with the IBR65 immediately to the claimant, and form ESA65B to the claimant's GP. Clear both tasks and update the contact history correspondence type 'IBR65'
	Claimant has no further evidence to provide

28.	The provisional effective date calculated at step 4 now becomes the actual effective date
29.	If the claimant has no further evidence to provide, whilst still on the call, the DM must: update CAM Notepad update CAM task 'Record and Review' task sub-status to No LCW. will automatically create two new tasks: issue disallowance notification make disallowance call.
30.	DM must: continue the Decision Assurance call, using the Disallowance Desk Aid (1) explain disallowance and next steps
31.	Close CAM task 'Record and Review' – No LCW'. This will create two new tasks: issue disallowance notification make disallowance call. Issue the appropriate disallowance notification with the IBR65 immediately to the claimant and form ESA65B to the claimant's GP. Clear both tasks and update the contact history correspondence type 'IBR65'
32.	If the claimant expresses an intention to appeal record this in CAM
33.	Update CAM Notepad and Contact History with the action taken on the case.
34.	If the claimant states that they wish to continue with, or make a claim to, IS under another condition of entitlement see Claimant has no LCW but may have entitlement to Income Support on grounds other than incapacity
35.	If there is no other condition of entitlement to Income Support arrange to: disallow claimants IB/SDA from the day before the effective date (this will pay any IB/SDA to the day before the effective date)

	disallow claimant's IS from the effective date if there is no other condition of entitlement to IS (this will pay any IS to the day before the effective date).
	Claimant expresses interest in claiming Jobseekers Allowance
36.	After being informed of the disallowance and the claimant expresses an interest to claim Jobseekers Allowance, using warm handover process, transfer claimant to the Contact Centre Directorate (CCD) using existing process
37.	Disallow IB/IS/SDA on PSCS/ISCS as at step 34
38.	When the disallowance notification task has been cleared, two new CAM tasks are created Close ISCS/PSCS Claim - This is a User set task. The User must insert the date of the day before the effective day. The task will mature and must be cleared on the day before the effective date so that users can be sure that the claimant's IB/IS/SDA case has been closed Close CAM Case - This Task should be left open. It will automatically create a BF to mature in 30 days, allowing time for the claimant to appeal. If the claimant does not submit a valid appeal within the 30 days the task can be cleared and the case will close
39.	If the claimant has submitted a valid appeal see IB (IS) Reassessment guidance
40.	There will be a 5% CAM Management Check on cases disallowed under this process. Action the Management check as usual.
41.	Check if the claimant is IB claimant is participating in either the Jobcentre Plus Offer programme or the Work Programme (WP) and notify the jobcentre or the WP Provider as appropriate. See Change of Circumstances (WCA Outcomes, para 5)

36. When a claimant has been disallowed benefit, the process to follow depends on whether or not:

- the claimant has indicated they intend to or may wish to appeal
- do not close the CAM case.
- the CAM case can be closed where it is certain that the closure will be permanent as the CAM case cannot be reopened.

- the claimant’s reassessment is complete and the claimant is unlikely to appeal, indicated they may claim IS or JSA or leave benefit altogether

37. If the Case Closure Reason ‘Migration Completed’ is selected it will not be possible to re-open the CAM case. Do not select ‘Migration Completed’ unless you are confident that the case closure is permanent.

Claimant indicates they wish or may wish to appeal

38. Update the CAM Notepad and the CAM Contact History.

39. CAM will create two tasks:

‘Close ISCS/PSCS Case’ task

this is a user set task. The user must input the date of the day before the effective day. This task will mature and must be cleared on the day before the effective date so that users can be sure that the claimant’s IB/IS/SDA case has been closed

leave this task open - it is an automatic task set by CAM to mature in 30 days, allowing time for the claimant to appeal. If the claimant does not submit a valid appeal with the 30 days the task will mature and can be cleared and the case will close.

‘Close CAM Case’ task

40. If the claimant does appeal, this is captured by recording ‘Appeal Received’ on the sub-status of the ‘Close ISCS/PSCS Claim’ task if it is still open, and the ‘Close CAM Case’ task.

Claimant wishes to claim JSA or IS or leave benefit altogether

41. When a claimant indicates they wish to claim JSA or IS or come off benefit altogether after updating CAM Notepad and the CAM Contact History take the following action:

Step	Action
1.	Access the IB Migration Case Summary View via ‘Access Case’ on the ‘Case Summary’ tab
2.	Select the Case Closure Reason ‘Migration Completed’. By choosing this option the user is confident that the case closure is permanent. It will not be possible to re-open the case
3.	If you are unsure but suspect that the case may need to be reopened use the Case Summary View with either of the other Case Closure Reasons: IB Terminated – the claimant’s IB is terminated, but it will be possible to re-open the case. The Close CAM Case task action should be used in preference as it will create

	the required 30-day BF for receiving an appeal. Incident Raised – only if an incident has been raised on the case and is awaiting a solution
4.	Once the Case Closure Reason has been selected the Close Case button will be enabled
5.	Select the Close Case button to finally close the case on CAM.

Claimant decides to claim Jobseekers Allowance

42. If during the Decision Assurance call the claimant decides to claim JSA the claimant should be told that JSA can be claimed in advance, although the claim will not be effective until the effective date.

43. The claimant must be advised that their claim should be made online at www.gov.uk/jsaonline. The claimant should not be transferred to a contact centre for the claim to be taken.

Claimant has no LCW but may have entitlement to Income Support on grounds other than incapacity

44. All IB/IS cases must be checked to see if the claimant has another condition of entitlement (other than incapacity) to Income Support.

Establish and calculate the claimant's potential entitlement to IS

45. To establish the claimant's entitlement to IS the DM must take the following actions:

Step	Action
1.	If claimant does not have LCW, use the IS desk aid to identify if they have another possible condition of entitlement to IS, other than incapacity
2.	If another condition is identified use the IS desk aid to calculate the estimated entitlement to IS
3.	DM makes the Decision Assurance call explaining it appears that the claimant's Income Support will continue after the effective date as they have another condition of entitlement other than grounds of Incapacity

	the potential award of Income Support from the effective date. If the claimant cannot be contacted by telephone, they must be contacted in writing.

No other condition of entitlement to IS identified prior to the Decision Assurance call

46. Where no other condition of entitlement to IS has been identified prior to the Decision Assurance call, the DM should conduct the Decision Assurance call using the Decision Assurance deskaid 1 .

Another condition of entitlement to IS identified

47. If the claimant is identified as having another condition of entitlement to IS, the DM should take the following action:

Step	Action
1.	Advise the claimant that it appears that we can carry on paying Income Support because they satisfy another condition of entitlement to IS
2.	Explain the other condition of entitlement to the claimant
3.	Explain the estimated amount of IS which may be payable from the effective date.
4.	Explain that the claimant will receive a letter explaining the IS outcome and the effect on their IS award. Explain that the letter will have a telephone number they can use should they have any additional questions.
5.	Pass the case back to the CSO to take further action
6.	Issue the appropriate disallowance letter immediately following the call.

IB (IS) Reassessment processing team action

48. When the case is received from the DM take the following action:

Step	Action

1.	Record that an explanation of the potential continuing award of Income Support has been given to the claimant in ISCS notepad.
2.	Record the change of circumstances on ISCS removing the Incapacity code. Ensure that the date of change is the Effective Date.
3.	In Dialogue IS105 Compute Payment amend the ‘Award Notification to Include Appeal Rights’ field to ‘N’ ‘you do not want the award notification to include appeal rights’
4.	Close the PSCS case from day before the Effective Date.

Claimant does not want to continue claiming Income Support

49. If the claimant notifies us that they do not want to continue claiming IS before the effective date, continue with the disallowance action.

50. If the claimant notifies us that they do not want to continue claiming IS after the effective date, this will be current business process.

Claimant declares new circumstances as a result of being contacted

51. If the claimant declares new circumstances as a result of the Decision Assurance call the DM should take the following action:

Step	Action
1.	Use the IS Desk Aid to check if the new circumstances may meet one of the criteria for ongoing entitlement to IS. This cannot be confirmed with the claimant until the change of circumstances has been processed
2.	Advise the claimant that we may be able to continue paying IS because they appear to have another condition of entitlement
3.	Using the IS calculation Desk Aid estimate and explain the estimated IS amount to the claimant
4.	Using the IS calculation Desk Aid estimate and explain the estimated IS amount to the claimant

5.	Issue the appropriate disallowance notification
6.	Take action to close the IB/SDA claim on PSCS. This must be actioned before the case is handed over to the Income Support section
7.	Handover to the IS section following the agreed procedures, requesting IS section to call claimant back within 3 hours and conduct a change of circumstances
8.	The effective date must be noted and passed to the IS section. This is the date on which IS must be put into payment. (Claimant's IB/SDA will cease the day before). Handover the email template to the IS section for their continued action on the case
9.	The IS section will write to the claimant explaining the IS outcome and will include a telephone number that the claimant can ring if they have any questions about IS.

52. Notification of disallowance must be given to the claimant, or their representative, by telephone where possible and in writing when they have been found to have no LCW.

53. The DM must take the following action when notifying a claimant of disallowance:

Step	Action
1.	Complete and issue the IBR65 along with the appropriate disallowance letter.
2.	The CSO completes the IBR65 on DMACR, which will include the Decision Maker's Reasoning.
3.	When the CSO selects the option to print the IBR65. A message box will appear asking if they would like to include the decision wording in the IBR65. The CSO will select "Yes" and DMACR will locate the relevant decision, copy the wording and automatically populate the IBR65 prior to the IBR65 user form being displayed.
4.	The CSO will need to check the reasoning is fit for purpose – e.g. reads clearly, is in plain English with no spelling or grammatical errors and refers to the claimant by name at least once.

5.	If any errors are identified then the CSO will need to refer the case back to the DM to make the necessary amendments. The DM must rectify any errors and refer back to the CSO to issue the IBR65.
6.	The CSO will issue the IBR65 (from steps 3 onwards)

54. All system generated notifications to the claimant will be suppressed when the IB, SDA or IS claim is closed. (the exception is the P45, which is issued when a claimant has been entitled to IB which is a taxable benefit).

55. The following IB (IS) Reassessment specific disallowance notifications are available and must be used as appropriate:

Form	Description
IBM280A	Failed to Attend WCA
IBM280B	Failed to Attend WCA – another condition of entitlement to IS
IBM280C	Failed to Attend WCA – deductions being taken from benefit
IBM280D	Failed to Attend WCA – another condition of entitlement to IS – deductions being taken from benefit
IBM280E	Non-return of ESA50
IBM280F	Non-return of ESA50 – another condition of entitlement to IS
IBM280G	Non-return of ESA50 – deductions being taken from benefit
IBM280H	Non-return of ESA50 – another condition of entitlement to IS – deductions being taken from benefit
IBM280i	No LCW

IBM280J	No LCW – another condition of entitlement to IS
IBM280K	No LCW – deductions being taken from benefit
IBM280L	No LCW – another condition of entitlement to IS – with deductions being taken from benefit

FROM 28 OCTOBER 2013

56. From 28 October 2013 ensure that the 10/13 version of the above forms are used for the new Disputes and Appeals process .

Completion of IB (IS) Reassessment specific disallowance notifications

57. When issuing the IB (IS) Reassessment disallowance notification to the claimant, enter

- office details and telephone number
- claimant's Reference Number/NINO
- claimant's address
- claimant's title and surname
- date of last payment of IB/IS/SDA if there is no other condition of entitlement to IS
- dates for non-return of ESA50 and reminder letter (if appropriate)
- date claimant failed to attend the WCA (if appropriate)
- date from which IS payment will start if there is another condition of entitlement
- the condition of entitlement to IS
- signature.

How to close an Incapacity Benefit/Severe Disablement Allowance claim on PSCS

58. A case on PSCS can be closed within 28 days of the incapacity end date.

59. Please note it is important that the PSCS case is closed before the IS case is closed on ISCS.

60. Take the following action to close an IB/SDA case on PSCS:

Step	Action
1.	Access dialogue RP603800, 'Account Summary' and select 'Enter'
2.	In RP603600, 'Decision' input: off-line decision type code '47' (Incapacity) in the 'Incapacity Type' field

	reference number ‘21514’ in the ‘Decision Number’ field type ‘D’ (Disallowed) in the ‘Decision Type’ field Decision Date – input the actual date of the decision
3.	Access dialogue RP303 ‘Controls and Reviews’
4.	In ‘Incap Claims Control’ screen RP303680, in the ‘Incapacity End Date’ field enter day before Effective Date i.e. last day IB is to be paid
5.	In the corresponding ‘Type’ field input the reason code 0 because the claimant has been disallowed ESA following their WCA NOTE: if a valid appeal is received prior to the IB/SDA end date being reached, code ‘0’ must be overtyped with code ‘9’ ESA Disallowed/Appeal Received
6.	Select ‘Enter’. The closure reason code is decoded. Select ‘Enter’ again to leave the screen
7.	In either RP801805, ‘Notes’ or RP803830, ‘Notepad’ enter ‘IB Reassessment case disallowed’
8.	If the closure of the case in PSCS has generated a pre payment check, a prompt will appear and a Line Manager/Team Leader must be notified
9.	A Line Manager/Team Leader must check the payment is correct, and complete the IB (IS) Reassessment Clerical Pre Payment Template, ensuring the following information is included: claimant name claimant NINO that there is a pre payment check outstanding and the template must be issued to the single point of contact (SPOC) in the IB owning office at 4pm
10.	On receipt of the template, the SPOC must arrange to clear the check, complete the ‘Cleared by and date’ section of the template and return to the original sender to

	confirm the clearance
11.	Line Manager/Team Leader on the reassessment team must populate RP803, Notepad that pre payment check occurred and has been cleared.
12.	Following claim closure, ensure that any outstanding Action List Prompts are actioned or delete the system BF as appropriate.

Incapacity Benefit claimant paid by Schedule

61. It is the intention that from October 2010 it will no longer be possible to pay by schedule payment . A new payment system, Central Payment System (CPS), will integrate with PSCS from October 2010 and will not support schedule payments.

62. However, there may be a few residual MOP schedule payment outstanding at the start of IB/IS reassessment.

63. In these cases, where a claimant's method of payment (MOP) is by schedule, when the user attempts to close the case, this will generate an Action List Message (ALM) to the owning office to instigate manual closure action.

64. Take the following action to close the case:

Step	Action
1.	From the ALM identify claimant as currently having Schedule MOP
2.	During Decision Assurance call only if the claimant is to receive a final payment, identify which MOP the claimant wishes to be paid by – Cheque, Direct Payment or Payable Order
3.	When the user attempts to input closure details on screen RP303680 a Validation error will occur
4.	Select screen RP701 to change MOP details
5.	Terminate the claim on PSCS from the day before the effective date using dialogue

6.	RP303.

How to close a claim on ISCS

65. It is important that the PSCS case is closed before IS case held on ISCS is closed.

66. Take the following action on ISCS to close an IS case held on ISCS:

Step	Action
1.	Access dialogue IS091: Change of circumstances
2.	Input the: date of change – the Effective Date date the notification of the WCA determination was received on MSRS then select ‘F24’
3.	Input a ‘Y’ in the: ‘About You’ ‘About You Cont’ ‘Other Benefits’, and ‘Linking’ fields then select ‘Enter’
4.	In the ‘About You’ screen IS091161, input code 36 (Reassessment Disallowance) in the ‘Exclusion reason’ field. Select ‘Enter’
5.	In the ‘About You Cont ’ screen IS091162, remove the National Insurance Office (NIO) code and select ‘Enter’
6.	In the ‘Other Benefits’ screen IS091174, input the IB termination date in ‘D/End’ field. If there is DLA held and the initials ‘INT’ are next to the benefit code 11 or 44, the end date for each award must also be input as the IB termination date. Select ‘Enter’

7.	In the ‘Linking’ screen’, IS091198 remove the first day of sickness, and the DP qualifying date. Select ‘Enter’
8.	Access dialogue IS200 and then dialogue IS105 Compute Payment Arrange to pay the claimant to, and end the IS claim, on the effective date
9.	Action all outstanding entries in dialogue IS530 ‘Case controls’
10.	Access dialogue IS110: Notepad. Note that ‘Case has failed to transfer to ESA’ and state the reason for the claim termination, e.g. No LCW. If the claimant is to be claimed for by someone else, input details of the new partner's name, NINO and date of claim in dialogue.
11.	If the closure of the case in ISCS has generated a payment check, a prompt will appear and a Line Manager/Team Leader must be notified
12.	A Line Manager/Team Leader must check the payment is correct, and complete the IB (IS) Reassessment Clerical Pre Payment Template , ensuring the following information is included: claimant name claimant NINO that there is a pre payment check outstanding and the template must be issued to the single point of contact (SPOC) in the IB owning office at 4pm
13.	On receipt of the template, the SPOC must arrange to clear the check, complete the ‘Cleared by and date’ section of the template and return to the original sender to confirm the clearance
14.	Line Manager/Team Leader on the reassessment team must populate IS110 Notepad that pre payment check occurred and has been cleared.

Revising a decision

67. The revision process allows the DM to re-examine the facts of the case, the law used and other issues such as how discretion was applied when making a decision.

68. Revising a decision at an early stage can avoid the need for cases to proceed to a formal First tier Tribunal (FtT) hearing.

69. Reconsideration is the process by which an application for revision of a decision is considered.

Explanation

70. Every effort must be made to provide the claimant with a full explanation of the reason for their disallowance during the Decision Assurance call.

71. Record the explanation and the claimant’s response in the CAM notepad.

72. If the claimant does not accept the explanation, they should be offered a reconsideration before they decide to appeal against the decision. A request for an appeal must be made in writing.

Reconsideration

73. Take action as described in current ESA guidance.

FROM 28 OCTOBER 2013

74. Take action as described in ESA Guidance Handling Reconsiderations.

75. Although it is not a requirement to obtain any further evidence, there will be occasions when further evidence, medical and non-medical, is necessary. In such cases it should be obtained and looked at carefully along with the existing evidence.

76. The Reconsideration CAM task must be set when a claimant has requested a (mandatory) reconsideration.

77. The CAM case must be re-assigned on CAM to another DM to undertake the (mandatory) reconsideration. Take the following action to re-assign a case on CAM to another DM:

Step	Action
1.	Access the ‘IB Migration Case Summary’ view
2.	Click on ‘IB Migration Case’ Tab
3.	Select the icon in the ‘Owner’ field and select the staff number of the DM whom you wish to assign the case to, from the dialogue box that displays

4.	Select ‘Assign to’ and select ‘Assign’. This will change the owner of the case and the related tasks to the new DM
5.	The new DM actions the Reconsideration as required
6.	When Reconsideration is completed, close the ‘Reconsideration’ CAM task with appropriate sub status

78. Claimants who are disallowed due to FTA , FTR ESA50 or FTP can appeal against their disallowance but are not entitled to receive ESA whilst the appeal process is ongoing.

Appeal

79. An appeal must be made within one calendar month from the day following the date the outcome decision notification is posted or handed to the claimant or a person acting on their behalf. Under certain circumstances this time limit may be extended.

FROM 28 OCTOBER 2013

80. If a claimant wishes to dispute a decision that has been notified on or after 28 October 2013, they cannot appeal straight away. They must first have a Mandatory Reconsideration (MR).

81. Once they have received notification of the outcome of the MR, the claimant can then lodge an appeal with Her Majesty’s Courts and Tribunal Service (HMCTS). An appeal must be made within one calendar month of the date on the Mandatory Reconsideration Notice. Under certain circumstances this time limit may be extended.

See ESA Guidance - Disputes and Appeals Process from 28 October 2013 .

Updating the Decision Making and Appeals Case Recorder

82. All decisions must be recorded on the Decision Making and Appeals Case Recorder (DMACR).

83. DMACR guidance is available on the DMA Homepage .

Retention of documentation and remote store action

84. In cases that have been allowed, the Reassessment case documents should be retained until the ESA claim becomes dormant. The case should then be given a retention date in accordance with the Benefit Specific section of the Records Management Policy.

85. In cases where ESA has not been allowed, the RS Web Team should be notified and a retention date be given in accordance with the Benefit Specific section of the Records Management Policy for IB.

Retention of Mortgage Sub-File

86. All IS Mortgage sub-files in allowed cases, should be re-branded as an ESA Mortgage sub-file and kept with the ESA claim. This will ensure that the sub-file is given a retention date in accordance with the Records Management Policy for ESA once the ESA claim becomes dormant.

Appeals

Introduction

1. The purpose of this guidance is to explain the actions to be followed in Benefits Centre Directorate (BCD) when an appeal is received.

2. Where an appeal has been received, the Reassessment team may liaise with the ESA owning office to determine if the appeal is valid.

3. If the appeal is valid and received before the effective date, the Reassessment team will complete a data gather, input data on to the ESA Legasuite Update System (ELUS) (including Transitional Addition (TA) components), assess and award Employment and Support Allowance (ESA) at the assessment rate and will release the first payment. Where ESA is awarded at the assessment rate pending the appeal, this does not include any TA.

4. If the appeal is valid and received after the effective date, it will be necessary to arrange for a nominated user to transfer the case in ELUS using the desk top icon.

5. Once the appeal has been accepted, the Reassessment team will be responsible for carrying out a reconsideration of the claimant's claim.

6. If the decision on the claimant's claim is upheld, the Reassessment team will forward the appeals paperwork to the relevant appeals team within the owning Benefit Centre (BC).

7. If the reconsideration finds in the claimant's favour, the appeal will lapse and the claimant will continue to the end of their reassessment journey.

8. It will be the responsibility of the ESA owning office to record the appeal on the Decision Maker Appeals Case Recorder (DMACR), obtain the information that is required to support the appeal, construct the submission, send the file to the Tribunals Service and take all future actions where necessary.

9. If the appeal is not initially received by the owning Appeals team, the date entered in the 'Date Received by DWP' field on DMACR must be the date that the appeal was originally received.

10. For claimants who live in Wales and who choose to deal with their business in Welsh refer to the Welsh language process.

11. This guidance does not cover the process for dealing with Special Claimant Records.

FROM 23 OCTOBER 2013

12. The purpose of this guidance is to explain the actions to be followed in Benefits Centre Directorate (BCD) when an appeal is received.

13. When a claimant wishes to dispute a decision issued on or after the 28 October 2013, they must first have a Mandatory Reconsideration (MR) and receive a Mandatory Reconsideration Notice (MRN), before they can lodge an appeal.

14. If after receiving the MRN, the claimant wishes to appeal they must send their appeal direct to Her Majesty's Courts and Tribunals Service (HMCTS).

15. HMCTS will determine whether the appeal is valid, and send an Appeal response request to the Department, for an appeal response to be prepared.

See ESA Guidance for further information about the Disputes and Appeals process from 28 October 2013 . The Code of Appeals Procedures Guide gives detailed guidance on dealing with appeals.

16. If the appeal is valid and received before the effective date, the Reassessment team will complete a data gather, input data on to the ESA Legasuite Update System (ELUS) (including Transitional Addition (TA) components), assess and award Employment and Support Allowance (ESA) at the assessment rate and will release the first payment. Where ESA is awarded at the assessment rate pending the appeal, this does not include any TA.

17. If the appeal is valid and received after the effective date, it will be necessary to arrange for a nominated user to transfer the case in ELUS using the desk top icon.

18. The Reassessment team will forward the appeals paperwork to the relevant Dispute Resolution Team within the owning Benefit Centre (BC).

19. It will be the responsibility of the relevant Dispute Resolution Team to record the appeal on the Decision Maker Appeals Case Recorder (DMACR), obtain the information that is required to support the appeal, construct the submission, send the file to the Tribunals Service and take all future actions where necessary.

20. For claimants who live in Wales and who choose to deal with their business in Welsh refer to the Welsh language process.

21. This guidance does not cover the process for dealing with Special Claimant Records.

22. The different types of appeals that could be received during the reassessment process will not differ from those listed in ESA Appeals guidance.

23. The ESA process for handling appeal applications applies for all reassessment claims.

24. All disallowed reassessment cases will already have been contacted by telephone and/or in writing and given an explanation and opportunity to supply further evidence or ask for a (mandatory) reconsideration of the decision.

25. On receipt of an appeal in writing, the DMA Admin staff will record an IB (IS) Reassessment decision under referral source ‘Appeal Reconsideration’, and forward the appeal to the IB (IS) Reassessment Decision Maker (DM).

26. A reconsideration information call must be undertaken if the claimant has not had a reconsideration. Where the claimant is unable to be contacted by phone, or has requested no phone contact, they will have received a written explanation and the opportunity to supply further evidence or ask for a reconsideration of the decision. There is no need to attempt to contact these claimants

27. The DM must contact the claimant to ask if they have any further supporting documentation they would like to provide to support their case.

28. If there is further supporting documentation the case must be reconsidered using the new evidence. If there is a need for a further medical opinion that may change the original decision, refer the file clerically to Medical Services.

29. Manually create a contact history record before the call commences which will automatically be completed during the Wrap-up Call Smartscript.

30. Set a CAM task ‘Evidence Verification’ with a sub type of ‘Medical Certificate’. This will automatically set the sub status to ‘Awaiting Documentation’. Set a B/F for one calendar month from the date of the request to provide the information. Allow a longer period if it is reasonable to do so. **Note**- ‘Medical Certificate’ should be selected as it is the most suitable option from the drop down menu in this circumstance.

31. When the documentation has been received, update the CAM task sub-status with 'Documentation Received'.

32. If the information has not been received on the date that the task matures a further telephone call must be made to advise the claimant that the information has not been received.

33. If the claimant states that the information has been sent, a search must be carried out and duplicate requested where necessary.

34. A further CAM task should be set for 1 week for the return of the information.

35. If the information has still not been received when the second task matures, a reconsideration of the decision will take place using all the evidence that is available.

36. If the decision is not in the claimant’s favour the appeal and reconsideration decision will be sent to the owning ESA Benefit Centre.

37. If the decision is altered in the claimant’s favour, benefit will be reinstated, the appeal will lapse and will not be sent to the owning ESA Benefit Centre.

38. If on examining the information provided, the DM revises the original decision, record this revision on DMACR.

39. The DM must then forward the appeal to the DMA Admin team who originally recorded the Appeal Reconsideration. The admin team must record receipt of the appeal and immediately lapse the appeal.

40. Pass the case to the IB Reassessment processing team to take the required action on JSAPS to award ESA.

41. Alternatively, the DM must record on DMACR if the decision is not revised, before forwarding the case to the Reassessment processing team to award assessment phase rate ESA when the appeal received is valid, and forwarding the appeal to the Appeals Team at the owning Benefit Centre.

FROM 28 OCTOBER 2013

42. The Reconsideration Information Call will not be appropriate as a Mandatory Reconsideration (MR) must be carried out before an appeal can be submitted to HMCTS. A Decision Assurance Call or Outbound Reconsideration Call is made to ask the claimant if they have any further information/evidence to support their case.

Registering receipt of valid appeal

43. Action to take to register receipt of a valid appeal

Step	Action
1.	Update CAM notepad that a valid appeal has been received
2.	When a valid appeal is received and recorded on the ‘Close CAM Case’ task as received after the Effective date, CAM will display an information message ‘Appeal Received after source system claims closed. Manual Migration Required.’
3.	Update CAM contact history that a valid appeal has been received
4.	If the appeal has been received prior to the IB/SDA end date being reached, amend the closure code ‘0’ in PSCS screen RP303680 to ‘9’, ESA disallowed/Appeal received
5.	Forward all paperwork/associated documents to the owning Benefit Centre, who will then record appeal on DMACR.

44. Until the appeal is decided, claimants who are already on Income Support (IS) can remain on IS if they satisfy another condition of entitlement other than incapacity, for example if the claimant is a carer. Other claimants not currently in receipt of IS may make a new claim to IS. All claimants may make a claim to Jobseeker’s Allowance (JSA).

45. Claimants may also receive assessment phase rate ESA pending their Appeal outcome. Claimants who wish to claim IS/JSA will not be entitled to ESA.

FROM 28 OCTOBER 2013

46. The above action will be taken on receipt of an appeal response request .

Valid Appeal received against outcome decision before Effective Date and no overlapping benefits are in payment

47. Claimants who are found not to have LCW following the WCA will have their IB/SDA/IS case terminated. The claimant can receive ESA at the assessment phase rate if they submit an appeal. This will be paid up to the conclusion of the first tier tribunal hearing or to the end of Medical Evidence where this is earlier. The DM must consider if Medical Evidence is required.

48. The following action must only take place if the appeal is received and interest is registered in CAM 3 days or more prior to the Effective Date.

49. **Do not** register an appeal within 2 days of the Effective Date. For the correct action to take follow this link.

50. Take the following action when a valid appeal is received against a no Limited Capability for Work decision:

Step	Action
1.	Transfer case in CAM if appropriate
2.	Close the CAM tasks listed below in the following order to prevent data extract failure: ‘Close CAM Case’ task with a sub status of ‘Appeal Received’ ‘Close ISCS/PSCS Case’ task. This will update the Case Stage to ESA Appeal and the Case Status to Reconsideration Required.
3.	Two new CAM tasks will be created: ‘Reconsideration’ task ‘Register Interest’ task
4.	A reconsideration should have already been undertaken and the ‘Reconsideration’ task can be closed. If the reconsideration has not been undertaken this must be completed and an appropriate sub status selected before the task is closed.
5.	Register interest on CAM by selecting the ‘Register Interest’ button and close the task.
6.	If CAM cannot determine the correct sub-type an error message will be produced. At this point the sub type can be amended
7.	CAM will display an error message if, when the case is being registered as ESA (C), there is an open IS clerical interest in CIS, but no open IS award on CIS. This error message is to prompt investigation of what the correct sub-type should be. Contact the owning office to check whether or not a live IS clerical case exists and obtain clerical case if appropriate. If IS is in payment: amend the sub type to ESA (C) and IR register interest again (there should now be no error message).

8.	CAM will give the following error message if it cannot find an IB or SDA award, ‘No open Incapacity Benefit record or Severe Disablement Allowance is held for the claimant’
9.	Check whether reassessment is still appropriate and if so, select the correct Case Sub Type
10.	Where there is an IB Reassessment case registered with no sub-type and an IB or SDA case is open on CIS, but there is no open IS clerical or system interest on CIS, CAM will allow the interest to be registered and will automatically set the IB Reassessment case sub-type to ‘Contributions Only’
11.	Check for successful data extract CAM task. A CAM task will be created when data extract has taken place. This can take upto 5 days
12.	Check for medical evidence details in Pension Strategy Computer System (PSCS) dialogue RP303 to ensure the claimant has valid medical evidence if claimant has decided to claim ESA during appeal. Where medical evidence has not previously been required, this is now a condition to continue to receive ESA at the assessment phase rate when an appeal has been received against a WCA outcome
13.	Write to the claimant to request medical evidence where this is not held.
14.	Enter the Effective Date in JA660 and complete data gather action.
15.	Enter the WCA decision type 7- Disallowed through ELUS dialogue JA674 and select ‘Continue’. When the screen is redisplayed register the appeal by inputting an R in the appeal status field. The WCA effective decision date will be the Effective Date for all appealed auto-migrated claims
16.	Assess the award at the assessment rate. If the claimant is in receipt of IB and has preserved rights to a prescribed occupational pension disregard of 100% do not take any occupational pension income into account whilst the claimant is receiving the assessment phase rate pending the outcome of the appeal The ESA award will begin on the Effective Date, or the day the medical evidence begins, if later. If there is a gap between the Effective Date and the day medical

evidence begins, the claimant can self certify for up to 7 days.

FROM 28 OCTOBER 2013

51. The above action will be taken on receipt of an appeal response request .

52. At Step 4 – a Mandatory Reconsideration must have already been undertaken before the Appeal and the ‘Reconsideration’ task can be closed.

Valid appeal received against not complying with Work Capability Assessment process

53. Claimants who are disallowed due to failure to show good cause for Failing To Attend (FTA), Failure To Return ESA50 form (FTR ESA50) or Failure To Participate (FTP) in the WCA process, can appeal against their disallowance but are not entitled to receive ESA assessment phase rate whilst their appeal is heard.

54. The Incapacity Benefit (IB), Severe Disablement Allowance (SDA) and Income Support (IS) claim is terminated from the effective date where good cause for FTA/ FTR ESA50 /FTP is not shown.

55. Note PSCS/ISCS Notepad screen, appeal received for FTA/FTR/FTP in WCA process.

56. A reconsideration information call **must** be undertaken if the claimant has not had a reconsideration.

57. If reconsideration has already been conducted forward appeal to the owning ESA BC.

FROM 28 OCTOBER 2013

58. The Reconsideration Information Call will not be appropriate as a Mandatory Reconsideration (MR) must be carried out before an appeal can be submitted to HMCTS.

Valid appeal received against allocation to Work Related Activity Group or Support Group

59. The claimant who is entitled to ESA and has, as a result, been placed in either the Work-Related Activity Group or Support Group will be able to appeal against the decision if they consider they have been placed in the wrong group.

60. Until the appeal is heard, the claimant is entitled to main phase ESA (i.e. inclusive of the relevant component), and any transitional addition to which they are entitled.

61. Carry out the reconsideration process as outlined in Reconsideration Information Call. If the decision is not in the claimant’s favour forward the appeal and reconsideration decision to the owning ESA BC.

62. If the decision is altered in the claimant's favour, amend the benefit rate, the appeal will lapse and will not be sent to the owning ESA BC.

FROM 28 OCTOBER 2013

63. The Reconsideration Information Call will not be appropriate as a Mandatory Reconsideration (MR) must be carried out before an appeal can be submitted to HMCTS.

Appeal received against no Limited Capability for Work decision after Effective Date and no overlapping benefits are in payment

64. Claimants who are found not to have LCW following the WCA will have their IB/SDA/IS case terminated. The claimant can receive ESA at the assessment phase rate if they submit an appeal. This will be paid up to the conclusion of the first tier tribunal hearing or to the end of Medical Evidence where this is earlier. The DM must consider if Medical Evidence is required.

65. This process should also be followed for appeals that have been received within 2 days of the Effective Date.

66. Take the following action when a valid appeal is received against a no

LCW Decision and claimant is not in receipt of an overlapping benefit :

Step	Action
1.	Manually Re-open the case in CAM if required
2.	Manually create a Contact History to say the appeal letter has been received
3.	Go to 'Close CAM Case' task and select from the drop down sub status list 'Appeal Rec'd' and close the task. This will update the Case Stage to ESA Appeal and the Case Status to Reconsideration Required.
4.	CAM will create 2 new tasks 'Reconsideration' and 'Register Interest'. Once the Reconsideration Information Call has been made and ESA Interest has been registered these tasks must be closed.
5.	Close the CAM case choosing 'IB Terminated' in the 'Case Closure Reason' field.
6.	Transfer case in ELUS JA030 i f appropriate
7.	Register ESA interest in dialogue PD350 and then JA060 . (register event type 01 sub-type 17 for ESA Contributory (C) or 18 for ESA (C) & ESA Income related (IR) for

	this type of case in JA060)
8.	Complete the clerical data gather
9.	Note PSCS and ISCS Notepad that an appeal has been received
10.	Retrieve the IB/SDA/ IS award details from PSCS dialogue RP008 and ISCS dialogue IS503
11	Manually build the case on ELUS from the Effective Date through dialogue JA610 using the data gather information and IB/IS/SDA award details
12.	Enter the WCA decision type 7-Disallowed through ELUS dialogue JA674 an d select 'Continue'. When the screen is redisplayed register the appeal by inputting an R in the appeal status field
13.	Select JA230 button and input the IB/SDA/IS awards
14.	If awaiting a new decision from medical services, when this is available from MSRS, input the WCA decision in CAM by updating the sub-status of WCA referral task
15.	Assess the award at the assessment rate. If the claimant is in receipt of IB and has preserved rights to a prescribed occupational pension disregard of 100% do not take any occupational pension income into account whilst the claimant is receiving the assessment phase rate pending the outcome of the appeal The ESA award will begin on the Effective Date, or the day the medical evidence begins, if later. If there is a gap between the Effective Date and the day medical evidence begins, the claimant can self certify for up to 7 days.

FROM 28 OCTOBER 2013

67. The above action will be taken on receipt of an appeal response request .

68. At Step 4 – The Reconsideration Information Call will not be appropriate as a Mandatory Reconsideration (MR) must be carried out before an appeal can be submitted to HMCTS. These tasks can be closed

Appeal received against no Limited Capability for Work decision and claimant has claimed, or has already been awarded Jobseeker's Allowance

FROM 28 OCTOBER 2013

69. The action below will be taken on receipt of an appeal response request.

70. If the claimant has made an advance claim to JSA but later decides to appeal against a no LCW decision, and elects to receive ESA pending their appeal, they can withdraw their JSA claim over the telephone at any time before it is decided.

71. Subject to satisfying the relevant conditions, ESA will become payable at the assessment rate from the Effective Date, provided the claimant supplies medical evidence valid from that date. If there is a gap between the Effective Date and the day medical evidence begins, the claimant can self certify for up to 7 days.

72. If the claimant already has an award of JSA at the time of appeal, they can continue to receive JSA.

73. Alternatively on or after the effective date, the claimant can give up their entitlement to JSA, and subject to satisfying the relevant conditions, they can receive ESA at the assessment rate until the appeal is decided. This will be paid up to the conclusion of the first tier tribunal hearing or to the end date of Medical Evidence where this is earlier.

74. If a claimant chooses to receive ESA, they must supply medical evidence from when they claim ESA for the duration of the appeal. ESA will be paid up to the conclusion of the first tier tribunal hearing or to the end date of Medical Evidence where this is earlier.

75. If the claimant decides to remain on JSA, send the appeal and any supporting documentation to the owning ESA BC for action and notify the relevant JSA section that appeal has been received.

FROM 28 OCTOBER 2013

76. If the claimant decides to remain on JSA, notify the relevant JSA section that appeal has been received.

77. Take the following action when the claimant wants to claim ESA and JSA is already in payment:

Step	Action
1.	Check Claimant Information System (CIS) to confirm if the claimant is in receipt of other benefits

2.	If the claimant is in receipt of JSA notify the benefit section that an ESA appeal has been received and agree JSA closure date using current process
3.	Transfer case in ELUS in dialogue JA030
4.	Register ESA interest in dialogue PD350 and then register the ESA case in JA060 from day after JSA claim closed. (register event type 01 sub-type 17 for ESA (C) or 18 for ESA (C+IR) for this type of case in JA060) NOTE: the JSA case must be Dormant before this action can be taken
5.	Obtain the IB/SDA/IS award details from PSCS dialogue RP008 and ISCS dialogue IS503
6.	Note the PSCS/ISCS/JSAPS Notepad that an appeal has been received
7.	Manually build the case on ELUS through dialogue JA610 using the data gather information and IB/IS/SDA award details
8.	Enter the WCA decision type 7-Disallowed through ELUS dialogue JA674 and select 'Continue' button. When the screen is redisplayed register the appeal by inputting an R in the appeal status field
9.	Assess the award at the assessment phase rate ESA.

Appeal received against no Limited Capability for Work decision and claimant is in receipt of Income Support

78. If the claimant appeals and they satisfy another condition of entitlement to IS, they can carry on receiving IS pending the appeal. They will lose their entitlement to the disability premium where this was payable **only** on the grounds of their incapacity.

79. If the disallowance decision was based on a no LCW decision, and subject to satisfying the relevant conditions, they can choose to receive assessment phase rate ESA until the appeal is decided. This will be paid up to the conclusion of the first tier tribunal hearing or to the end date of Medical Evidence where this is earlier.

80. If, before the Effective Date the claimant chooses to receive ESA instead of IS, they must supply medical evidence from the effective date and for the duration of the appeal.

81. If on or after the effective date, the claimant chooses to receive ESA instead of IS, they must supply medical evidence from the day after the last day for which IS is paid and for the duration of the appeal.

82. Take the following action when a valid appeal is received against a no LCW decision and claimant wishes to receive ESA:

Step	Action
1.	Check CIS to confirm if the claimant is in receipt of other benefits
2.	If the claimant is in receipt of IS notify the benefit section that an ESA appeal has been received and agree IS closure date using current process
3.	Ask nominated user to transfer case in ELUS using desk top icon, in JA030 if appropriate
4.	Register ESA interest in dialogue PD350 and then register the ESA case in JA060 from day after IS claim closed. (register event type 01 sub-type 17 for ESA (C) or 18 for ESA (C+IR) for this type of case in JA060) NOTE: the JSA case must be Dormant before this action can be taken
5.	Obtain the IB/SDA/IS award details from PSCS dialogue RP008 and ISCS dialogue IS503. The last award of IS prior to the effective date should be used for reassessment purposes and input into dialogue JA230 (disability premium may have been withdrawn from the Effective Date)
6.	Note the PSCS/ISCS/JSAPS Notepad that an appeal has been received
7.	Manually build the case on ELUS through dialogue JA610 using the data gather information and IB/IS/SDA award details
8.	Enter the WCA decision type 7-Disallowed through ELUS dialogue JA674 and select ‘Continue’ button. When the screen is redisplayed register the appeal by inputting an R in the appeal status field
9.	Assess the award at the assessment rate. If the claimant was in receipt of IB and has preserved rights to a prescribed occupational pension disregard of 100% do not take any occupational pension income into account whilst the claimant is receiving the

	assessment phase rate pending the outcome of the appeal.

FROM 28 OCTOBER 2013

83. The above action will be taken on receipt of an appeal response request .

Appeal received against no Limited Capability for Work decision on or after Effective Date and claimant is in receipt of other benefits.

84. Take the following action when a valid appeal is received and claimant is in receipt of other benefits:

Step	Action
1.	Check CIS to confirm if the claimant is in receipt of other benefits
2.	Where an overlapping benefit is in payment existing guidance should be followed to decide on how this should be treated
3.	Inform the other benefit section that an ESA appeal has been received
4.	Ask nominated user to transfer case in ELUS via desk top icon, using JA030 if appropriate
5.	Register ESA interest in dialogue PD350 and then register the ESA case in JA060 from the Effective Date. (register event type 01 sub-type 17 for ESA (C) or 18 for ESA (C+IR) for this type of case in JA060)
6.	Complete the clerical data gather
7.	Manually build the case on ELUS from the Effective Date through dialogue JA610 using the data gather information and IB/IS/SDA award details
8.	Enter the WCA decision type 7 through ELUS dialogue JA674 and select enter. When the screen is redisplayed register the appeal by inputting an R in the appeal status field

9.	Assess the award and pay only the assessment phase rate

FROM 28 OCTOBER 2013

85. The above action will be taken on receipt of an appeal response request.

86. ESA will be awarded from the Effective Date however JSAPS will not release any payments until medical evidence has been received.

87. Take the following action to request Medical Evidence:

Step	Action
1.	Check by accessing Claimant Account Management (CAM) notepad and contact history that a reconsideration has been carried out
2.	Request medical evidence if appropriate on form IBM164 and set a CAM task ‘Evidence Verification’ with a sub type of ‘Medical Certificate’. This will automatically set the sub status to ‘Awaiting Documentation’. Set a 2 week B/F for the return of the medical evidence
3.	If the medical evidence has not been received try to contact the claimant by telephone or issue a reminder form IBM164. Set a CAM task for a further 2 weeks
4.	If there is no reply within the four week period, treat claim as having no Limited Capability for Work (LCW) and close CAM task
5.	On receipt input medical evidence and doctor details in dialogue JA670 and close CAM task
6.	Enter dialogue JA405 release payment to the claimant
7.	Forward medical evidence, and any other information, to the ESA BC dealing with the appeal.

88. It will be the responsibility of the reassessment team to action any change of circumstance received prior to sending the appeal to the owning ESA BC.

89. Change of circumstances received on an appeal case, where:

- the effective date of change is later than the ESA Effective Date, and
- Assessment Phase rate ESA has not yet been awarded
- take the following action:
- adjudicate on the Appeal claim and complete JA405
- register a CoC in JA060 and action the change using current guidance.

90. Taking this action will ensure the appeal decision letter is issued to the claimant. Actioning a change of circumstance prior to the initial JA405 action will prevent this letter being issued.

91. Refer the case to a Band C decision maker to consider the change impact on the appeal.

92. When preparing to send the appeal to the ESA owning office, include all the relevant evidence/information if appropriate. For example:

- claim form or extracts where appropriate
- ESA55
- statements
- letters
- medical evidence including General Practitioner (GP) factual reports, Work Capability Assessment (WCA) reports, hospital records
- A6 report or Secretary of State (SofS) certificate relevant to the decision under appeal
- copy of the Legally Qualified Panel Member (LQPM) or DM decision to extend the time limit for appealing
- record of the reconsideration.

93. In order to keep paperwork together, it must be placed/inserted in a clear plastic wallet (one case per wallet). Place all wallets into a TNT Courier pouch. Mark pouch "restricted" and annotate with full office details of owning and sending office/team. Send out via courier service.

94. Notify the ESA owning office appeals team by e-mail that the appeal paperwork has been dispatched.

95. On receipt of the appeal, if the owning office Appeals team are unable to view the decision text after attempting to import it on DMACR, they must request that the IB (IS) Reassessment team e-mail the decision text to them to be copied and pasted into the Appeals template.

96. In cases where the text can not be viewed, report this issue/fault to the DMA Performance Team as per the current process.

97. Where an appeal has been allowed, register the decision on DMACR using the ‘Appeal Allowed’ text.

98. Where an appeal has lapsed, register the decision on DMACR using the ‘Appeal Lapsed’ text.

99. Where an appeal has been dismissed, register the decision using the ‘Appeal Not Allowed' text.

100. Where the appeal is favourable this is conclusive evidence as to whether the claimant has LCW/LCWRA.

101. Take the following action on JSAPS:

- Update JA320 with the appropriate result:

A – Adverse

F – Favourable

N – No change

- Access JA120 – Event Maintenance and clear the event using the appropriate Reason Code

- Access JA110: Notepad and note that appeal has been returned.

- Access JA674: ESA PCA and input TS decision and date.

102. Where the claim has been disallowed terminate the claim from the first day of the benefit week following the date on which the DM is notified of the FtT decision using the F1 key which will take you to dialogue JA099 ,

103. Claimant has LCW - in the Support Group, claimant has LCW - in the Work Related Activity group, claimant has LCW - Terminally ill:

Update JA320 with the appropriate result:

A – Adverse

F – Favourable

N – No change

- Access JA120 – Event Maintenance and clear the event using the appropriate Reason Code

- Access JA110: Notepad and note that appeal has been returned.

- Access JA674: ESA PCA and input TS decision and date.

104. If following the outcome of an appeal, an IB/SDA claimant is placed in the SG and is awarded contribution based ESA **only,** you must consider whether they may be entitled to income related ESA with a disability premium.

105. If it is not possible to make the allowance call to the claimant or their representative, send an ESA3 with a covering letter.

106. The normal rule for returning an ESA3 applies. There is no need to issue a reminder.

107. The issue of the ESA3 must be recorded in either CAM contact History or JSAPS Notepad.

108. If the ESA3 is returned after the initial payment of ESA has been issued, forward it to the owning office to process.

109. Where JSAPS is not available, or an ESA claim cannot be system-maintained (e.g. due to a system fault or limitation), the Reassessment team will use clerical processes in order to progress the appeal.

110. The current process for handling defective appeals applies for all reassessment claims.

111. The current process for handling withdrawn appeals applies for all reassessment claims.

Change of Circumstances

Introduction

1. The purpose of this guidance is to inform staff in Benefit Centre Directorate (BCD) how to deal with change of circumstances at each phase of National Reassessment.

2. A change of circumstances may be reported at any point during the reassessment process and may affect the customer’s incapacity benefits:

- Incapacity Benefit (IB)
- Severe Disablement Allowance (SDA)
- Income Support (IS) paid on the grounds of incapacity
- Employment and Support Allowance (ESA).

3. On receipt of a change of circumstances, the action to take will vary depending on:

- the type of change received
- what stage of the reassessment process has been reached
- whether the effective date has been reached.

4. The IB/SDA/IS teams continue to own the case through the reassessment process until either the:

- case is disallowed and closed
- ESA case is allowed and moved to the ESA load maintained by the owning office.

5. Change of circumstances which require verification are dealt with by the IB/SDA/IS owning office up to the point where the WCA outcome decision is made and data gather action is taken prior to the award of ESA being assessed.

6. If the reassessment process has begun and the change of circumstances does not require verification, the IB (IS) Reassessment team will action the change on PSCS/ISCS via the Common Update Enquiry Dialogue (CUED), or clerically when applicable.

7. The Customer Service Agent (CSA) in the Contact Centre Directorate (CCD) will update CAM with change of addresses or change to phone numbers and email details on the existing handover template via call logger to the IB (IS) Reassessment team in the Benefit Centre (BC) linked to the customer’s postcode. If the CSA is unable to update CAM with a change of address and/or phone number, they will complete the e-mail template via call logger and forward to the relevant IB (IS) Reassessment BC.

IB/IS Enquiry Line notified of change of circumstance

8. If a customer contacts the IB/IS Enquiry Line to notify a change of circumstances, the IB/IS Enquiry Line will contact the Reassessment team by email. The Reassessment team must decide what to do next.

9. It is not anticipated that there will be many of these cases as reassessment customers will already have been supplied with the correct contact details for the Reassessment office.

Contact Centre identifies the change of circumstance

10. If at any point during the reassessment process a change of circumstance(s) is identified by CCD, the existing e-mail template will be completed and emailed to the IB (IS) Reassessment team within the correct BC. The IB (IS) Reassessment team identify at what stage in the process the case is at, and if necessary it will be forwarded to the relevant IB/SDA/IS owning office within the BC.

11. CCD will handover all call-backs to the relevant IB (IS) Reassessment team by e-mail where cases are identified as reassessment cases.

12. If the Work Capability Assessment (WCA) outcome is not yet known, the IB (IS) Reassessment team may need to do another handover to IB/SDA/IS maintenance teams for call-back by email.

13. Prior to the case being converted to ESA it is important that any outstanding change of circumstances and associated case controls on PSCS/ISCS are cleared before the IB/SDA or IS cases are terminated.

14. For IS cases, the RIS26008-IB Reassessment Report must be printed off in the owning office and sent to the appropriate IB (IS) Reassessment team to action.

15. The RIS26008-IB Reassessment Report will list all IS cases which have a condition that will cause auto conversion to fail. A change of circumstance may be reported after this report is produced but before the IS case is due for closure on reassessment. These changes must be actioned immediately prior to the case closing on reassessment to ensure there is no conflicting information in the notifications the customer/third parties will receive.

16. As previously mentioned, the IB/SDA/IS teams continue to own the case through the reassessment process until the case is either allowed or disallowed.

17. On receipt of change of circumstances, a case can be identified as being a Reassessment case by viewing the feedback line on PSCS in dialogues RP001 or RP008.

18. The following indicators will be present if the case has begun Reassessment:

1 - ESA – PCA case control smoothed

2 - ESA – Commenced Migration

3 - ESA – Data Migrated

4 - ESA – Claim Closure received/recorded

19. For cases with indicator 1 or 2:

changes received by the owning office will be actioned by the owning office

changes received by the Reassessment office which do not require verification will be dealt with by the Reassessment team

changes received by the Reassessment office which do require verification or are deemed as complex must be dealt with by the owning office

20. For cases with indicators 3 or 4, all change of circumstances must be dealt with by the Reassessment team.

21. ISCS will output a warning message, ‘W9851 Warning – ESA must be notified of changes made’ when the user enters dialogue IS091 to input a change of circs on cases where data extract to JSAPS has taken place.

22. The ISCS feedback line contains the text ‘LIVE IN PYT ESAEXT’ or ‘LIVE IN PYT ESACLO on these cases.

23. An IS case that has undergone Reassessment but has now become dormant will be identified by the text ‘DORMANT AUTOCONV’ or ‘DORMANT MANUCONV’, or by viewing dialogue IS500 ‘About You’ screen, and exclusion reason 36 or 37 will be displayed.

24. Retrospective change of circumstances received which affect a dormant IB/SDA/IS case must be actioned clerically as per the current clerical process.

25. For wholly clerical cases, change of circumstances will be dealt with by the IB/SDA/IS owning office until the Reassessment team request the case when the WCA outcome has been received.

26. Record in dialogue IS110 Notepad on ISCS, RP801 Notes or RP803 Notepad on PSCS, or on an A22 in clerical cases, if the change has been forwarded to the owning office where applicable.

27. Send any change of circumstances notified directly by the customer to the IB/SDA/IS owning office immediately using the ‘Fully Tracked Documented Service’.

28. From 28/02/11, when a change of circumstance is received from either the:

IB (IS) Reassessment team as the change requires verification, or

customer undergoing IB (IS) Reassessment

view the feedback line on PSCS to ascertain the case status.

29. One of the following indicators will be present if the case has begun Reassessment:

1 - ESA – PCA case control smoothed

2 - ESA – Commenced Migration

3 - ESA – Data Migrated

4 - ESA – Claim Closure received/recorded.

30. For cases with indicator 1 or 2 on the feedback line:

- action the change as per current guidance
- notify the IB (IS) Reassessment team if the change:
- leads to IB ceasing
- is a notification of the customers death
- a change of address
- a change of name
- a change to the customers date of birth

- IB ceasing
- notification of the customers death.

notify the Health Assessment Advisory Service immediately using the current process if the change relates to:

31. For cases with indicator 3 or 4 on the feedback line:

- action all change of circumstances as soon as possible as the change may affect the customers IB (IS) Reassessment and/or their ESA assessment
- send the change of circumstances to the IB (IS) Reassessment team using the 'Fully Tracked Documented Service' to action the change on the ESA case
- record in dialogue RP801 Notes or RP803 Notepad on PSCS that the change has been forwarded.

32. Changes to the customer's personal details (such as change of address) received by the IB/SDA owning office must also be notified to the IB (IS) Reassessment team who will update CAM.

33. For clerical cases, change of circumstances will be dealt with by the IB/SDA owning office until the Reassessment team request the case when the WCA outcome has been received.

34. From 28/02/11, when a change of circumstance is received from either the:

- IB (IS) Reassessment team as the change requires verification, or
- customer undergoing IB (IS) Reassessment
- that the case is an IB (IS) Reassessment case to ensure the correct actions are taken with the change.

35. These cases can be recognised when one of the following occurs:

- ISCS outputs a warning message, 'W9851 Warning – ESA must be notified of changes made' when the user enters dialogue IS091 to input a change of circs on cases where data extract to JSAPS has taken place.
- the ISCS feedback line contains the text 'LIVE IN PYT ESAEXT' or 'LIVE IN PYT ESACLO'
- an IS case that has undergone Reassessment but has now become dormant is identified by the text 'DORMANT AUTOCONV', 'DORMANT MANUCONV', or by viewing dialogue IS500 'About You' screen, and exclusion reason 36 or 37 will be displayed.

36. When a change of circumstance is received directly from a customer, where the case has already undergone data extract from ISCS to JSAPS the change of circumstance must be actioned as soon as possible as the change may affect the customers IB (IS) Reassessment journey and/or their ESA assessment.

37. Notify the IB (IS) Reassessment team immediately if the change relates to the death of a customer or IS ceasing.

38. All changes must then be forwarded to the IB (IS) Reassessment team to action the change on the ESA case.

39. Changes to the customer’s personal details (such as change of address) received by the IS owning office must be notified to the IB (IS) Reassessment team who will update CAM.

40. ISCS RIS Report RIS26008 is a new report produced daily at the IS owning office due to outstanding actions on an IB (IS) Reassessment case. These reports must be sent to the IB (IS) Reassessment team to action.

41. When forwarding documents to the IB (IS) Reassessment site

- send using the ‘Fully Tracked Documented Service’
- record in dialogue IS110 Notepad on ISCS that the change has been forwarded.

42. For clerical cases, change of circumstances will be dealt with by the IS owning office until the Reassessment team request the case when the WCA outcome has been received.

43. For guidance on actioning Child Dependency Allowance – Child Tax Credit cases, where the IS case is clerical, take the actions as detailed in the Wholly Clerical guidance.

44. The Change of Circumstance process may involve contacting the customer by telephone, unless they express a wish otherwise.

45. When contacting the customer by phone take the following action:

Step	Action
1.	Before contacting the customer by phone check the following details: customer contact details customer personal details customer needs appointee/representative potentially violent person marking. customers living in Wales must be contacted in their preferred language
2.	Access the customer record on CAM to make the outbound call
3.	Manually create the CAM ‘Contact History’ with the following values: Caller name – input customer’s full name Reason for contact – select appropriate reason from drop-down Channel – telephone

	In/Out – outbound external (If this is not done at this stage CAM will not update the customer's Contact History correctly.)
4.	Select the 'Sufficient Security Questions Test Button' in CAM
5.	If there is insufficient security information on CAM, access PSCS or ISCS to formulate the appropriate security questions
6.	Record the questions and answers on CAM Notepad
7.	Contact customer
8.	If the customer fails the security questions, terminate the call
9.	Manually update the Contact History with reason for call failure
10.	If necessary arrange to send an appropriate letter to the customer. Manually create a Contact History with the following values: Caller name – input customer's full name Reason for contact – select appropriate reason from drop-down Channel – letter In/Out – outbound external
11.	If customer passes the security questions continue call
12.	Launch the Wrap–up Call Smartscript. This will automatically update the manually created Contact History.

46. If a change of circumstance is notified which ends the IB/SDA/IS claim:

close PSCS and/or ISCS

close CAM case

if the WCA process is ongoing, use MSRS to notify the Health Assessment and Advisory Service

any claim registered on JSAPS must be transferred to clerical if the customers entitlement has ceased prior to the effective date

any ESA interest registered on JSAPS must be ended in PD52 as per the current process if closing the CAM case hasn't done this already.

Overview

47. When the report of a customer's death is received, it is important that:

Customer's death is verified as in current process

- payment is suspended immediately. This will avoid overpayments, issue of unnecessary notification and other unnecessary aggravation for the customer's family
- the IB/IS/SDA case is closed and CIS notified
- the IB(IS) Reassessment case is suspended until it can be closed once the PSCS/ISCS action has been completed
- Health Assessment and Advisory Service is notified immediately to stop the WCA process. Complete the Annex 5 Proforma and fax to Health Assessment Advisory Service. They will take action to withdraw the Assessment referral.

48. The action to take will depend on where the notification of the customer's death has been received.

Notification of Death received by the IB(IS) Reassessment office

49. When a customer's death is reported to the IB(IS) Reassessment office they must

- notify the IB/IS/SDA owning office immediately by telephone so the owning office can suspend payment and close the case on PSCS/ISCS
- Notify health Assessment Advisory Service to cease the WCA process if it is still ongoing. If so, complete the Annex 5 Proforma and fax to Health Assessment Advisory Service. Services. They will take action to withdraw the Assessment referral;
- Notify the Jobcentre if necessary
- Make sure that all notifications to the customer are suppressed

Update and close the CAM case to ensure data extract does not take place by taking the following action:

Step	Action
1.	Log in to CAM
2.	Access the Customer's IB Migration case (e.g. Search on NINO or personal details

	from the search centre, or use the access case button from the home page for a case they already own)
3.	In the IB Migration Case Summary View, select IB Terminated in the Case Closure Reason dropdown list
4.	This then enables the “Close Case” button in the same view
5.	Select Close Case and the case will close on CAM.

50. When notification is received from the IB/IS/SDA owning office that the final payment has been made and the case closed, the user must take action to close the case on JSAPS following current closing the case process. Using ELUS:

Step	Action
1.	Access JA505: Deductions Enquiry and check if there are any current deductions. If there are these should be ended prior to claim closure to ensure final payments are issued at the correct rate, correct notifications are issued to the Third Party Deductions team and the claim can be successfully closed
2.	Access JA400, ‘Method of Payment’ and in the ‘Cheque Details’ screen, JA400401, select the ‘Personal Issue’ check box to prevent any notifications being issued to the deceased persons address
3.	Access dialogue JA060 Register Claim/Event to register a change of circumstances. Enter • [02] in the ‘Event Type’ field for a Change of Circumstances; • [01] in the ‘Event Sub Type’ field; • the receipt date in the ‘Change of Circumstances, PCA, Receipt/Reg Date’ field; Select JA610 button to access JA610 (NB: not JA91, this is for JSA cases only)
4.	In JA610, input the effective date of change in the ‘Effective Date’ field and select F24. Input ‘Y’ in the evidence complete fields for ESA(C) and (IR). Select ‘Save’ button

5.	The customer's date of death may already be held in JSAPS because it is recorded in PSCS and has been transferred. If this is the case, JSAPS will allow the user to navigate to dialogue JA099 from dialogue JA060 using the JA099 button. Otherwise enter date of death
6.	Access JA099091 Record Claim Termination Details . • In field 'Claim Termination Reason' Input termination code ' [01] Jobseeker deceased' • In the field 'Claim termination date' input the date of the day after the date of death
7.	Select JA200 button to go to dialogue JA200 Award & Decision
8.	Scroll through JA200 using JA200 button. Check Payment Dialogues
9.	Select JA405 button to access dialogue JA405, check 'Award To' date and END.

Notification of Death received by IB/IS/SDA owing office

51. If the notification of death is received by the IB/IS/SDA owning office, then they must

- notify the Reassessment Office by telephone of the date of death
- notify health Assessment Advisory Service immediately if the WCA process is ongoing
- continue current processes to action and close the case on PSCS/ISCS
- notify the Reassessment Office by telephone once the case has been closed on PSCS/ISCS
- make a note in RP803/IS510 Notepad on PSCS/ISCS confirming that the (IB)IS Reassessment office has been contacted and that all reassessment action has ceased.

52. Customers who have previously been in receipt of IS, but as a result of a change of circumstance their case becomes IB credits only, must not be reassessed for ESA, as legislation has not yet been developed to allow for credits only cases to be reassessed.

53. If a change of circumstance occurs which ceases entitlement to IS, upto and including the day before the effective date, and results in the case becoming IB credits only, take the following actions:

Step	Action
1.	Close CAM case using option 'IB Terminated'

2.	Notify Atos that reassessment has ceased using the existing process
3.	Contact customer by telephone to advise them that due to their change of circumstances, they will not be reassessed at the current time, and they can ignore any further correspondence they may receive regarding reassessment until they are notified that they will be reassessed again
4.	Send IBM296A to the customer
5.	Transfer the IB credits only case to clerical
6.	Set a BF date of 01/05/2013 on all cases - this date will be used to review whether legislation is in place to enable a credits only case to be reassessed
7.	Build a clerical IB credits only case. Annotate on the paperwork that the case must be stored in a separate clerical run as it was selected for reassessment but the journey had to be stopped due to a change of circumstance ceasing the IS award. Forward all paperwork to the IB owning office to be stored until the Assessment referral date is reached
8.	Where ESA interest and/or JA200 action has been completed check JA300, 'Maintain General Deductions' and JA570, 'Enquiry – Letters Issued' to identify any departments JSAPS will have already interfaced with, for example: Local Authorities Child Support Agency Third Parties Mortgage Companies and notify them of the customers new circumstances as per the current process
9.	Take any underpayment/overpayment action where necessary
10.	Delete the ESA case taking screen prints of the ESA case on JSAPS and retain for 30 days pending any system or assurance checks, and then destroy in line with the Data Protection requirements.

54. Prior to reassessment, if a customer had notified a change of circumstances that caused IS to cease and the case to become IB Credits only, the case may have been incorrectly selected for reassessment because the IS reference number had not been removed from PSCS.

55. If the IS claim has been closed before the Initial Notification letter was issued by PSCS, and the case is now IB Credits only these cases should not have been selected for reassessment by the system as there are no regulations yet in place to reassess IB Credits only cases.

56. Following the Initial Notification Letter the customer may contact at any time to query their selection for reassessment as they will not be in receipt of IB, SDA or IS.

57. If, on investigation, the customer should not have been selected for reassessment the process should be terminated immediately.

58. Take the following action:

Step	Action
1.	Close CAM case using option ‘IB Terminated’
2.	Notify Atos, if appropriate, that reassessment has ceased using the existing process
3.	Any claim registered on JSAPS must be transferred to clerical
4.	Send IBM296B to the customer
5.	Close the IB Credits only case on PSCS and build a clerical IB Credits only case.
6.	Set a B/F date of 01/05/2012. This date will be used to review whether the legislation is now in place to enable a IB credits only case to be reassessed
7.	Forward the IB clerical case and all paperwork to the IB owning office. Annotate on the paperwork that the case must be stored in a separate clerical run. This case must be maintained clerically until reassessment

Entitlement ceases and Job Grant is due

59. If the customer/partner commences remunerative work during reassessment, and their entitlement to IB/SDA/IS ceases and they satisfy the qualifying conditions to the Job Grant:

award in Job Grant Decision screen RP303693 on PSCS award in IS160, Job Grant Administration on ISCS.

60. Job Grants can only be awarded on PSCS up to the day before the effective date. If not awarded by then, the job grant must be paid clerically via the existing process.

61. Job Grants cannot be awarded on ISCS if the case has gone dormant, and must be paid clerically via the existing process.

62. If a customer moves abroad to a country where payment is allowed by the Persons Abroad regulations, EEC regulations or an appropriate reciprocal agreement during the reassessment process, the International Pensions Centre (IPC) must be notified of the change of circumstance as per current IB guidance. If the Assessment referral process is ongoing, the Health Assessment Advisory Service must be notified using MSRS.

63. If a customer moves address during their reassessment, the change of address must be input on CAM by either the CSA in CCD, or by the Reassessment team.

64. If the change is received prior to interest being registered on ELUS, the change must be input on PSCS/ISCS and then will be included in the data extract to JSAPS.

65. Change of Circumstances reported after Register Interest on ELUS will need to be entered on PSCS/ISCS and ELUS. Additionally if IB/IS award amounts are adjusted as a result of the change, then the award details in dialogue JA230 Maintain IS & IB Awards will need to be clerically adjusted to ensure TA is correctly calculated by the system.

66. Notify Health Assessment Advisory Service via MSRS of the change of address as they will refer the customer to the relevant Assessment Centre according to their address.

67. If the change of address is reported before the customer has had their Work Capability Assessment (WCA), and the customer moves to an area covered by a different Reassessment BC, any paperwork must be sent to the new Reassessment BC via the designated courier service, and the new Reassessment BC will take over the customers Reassessment process.

68. If the customers change of address is reported after the customer has had their WCA and the customer moves out of the area covered by the Reassessment BC, the case should continue to be owned by the original Reassessment BC throughout the process, and then transferred to the new ESA BC on allowed cases via the track and trace courier service.

69. If the customer’s change of address results in a change to their local Jobcentre, and an IBM23 has been issued, a further IBM23 must be issued notifying the Diary Administration Support Officer (DASO) of the change, who will update Labour Market System (LMS) and notify the new Jobcentre.

70. If the owning site BC receive notification that a customer has been admitted to hospital as an in-patient, they should check PSCS screens RP001 or RP008 to see if the IB(IS) Reassessment marker is present.

71. If the marker is present, the information must be referred to the IB(IS) Reassessment team. If the marker is not present treat the case as normal.

72. On receipt of the information, the Reassessment team must

- issue Annex 5 to Health Assessment Advisory Service as in current processes
- notify Health Assessment Advisory Service that the customer is in hospital in order to delay the Assessment referral of an ESA50.

73. Make sure you have the following information from the customer or their representative:

- details of hospital and the ward the customer is in
- the length of time the customer has been in hospital
- how long are they expected to remain in hospital
- the name of their consultant
- the reason they are in hospital.

74. On receipt of this information health Assessment Advisory Service will make the decision whether to cancel the WCA or delay it to a later date and notify the Reassessment team of their decision.

75. If the ESA50 has already been issued by the Health Assessment Advisory Serevice before the claimant goes into hospital, the Health Assessment Advisory Services will either hold the case over for an appointment after discharge from hospital, or they will deem the case depending on the circumstance.

76. Some customers may choose to remain on Income Support if they satisfy another condition of entitlement to IS other than incapacity. The action to take will vary depending on the stage their case has reached in the reassessment process.

77. The following action must be taken for customers who choose to remain on IS, after an unfavourable/favourable WCA outcome:

Step	Action
1.	Terminate the IB/SDA claim on PSCS from the day before the effective date
2.	Record the change of circumstances on ISCS removing the Incapacity code. Ensure that the date of change is the Effective Date.
3.	Reassess the IS claim without the IB/SDA and disability premium if appropriate, from the effective date
4.	In Dialogue IS105 Compute Payment amend the ‘Award Notification to Include Appeal Rights’ field to ‘N’ ‘you do not want the award notification to include appeal rights’
5.	Close the ESA case on CAM if appropriate.

78. The following action must be taken for customers who choose to claim IS after ESA has been awarded and after the effective date:

Step	Action
1.	Terminate the ESA claim and notify the Jobcentre, using the current process
2.	JSAPS will automatically end the ESA interest in CIS via PDCS
3.	Contact the customer to inform them they must make a new claim to IS via existing channels.

79. If a customer who is claiming IB credits only and IS decides to claim Pension Credit during Reassessment, the following actions must be taken:

Step	Action
1.	Cease the customers Reassessment process immediately and notify the Health Assessment Advisory Service via MSRS if appropriate
2.	Attempt to contact the customer by telephone to advise them that their Reassessment has ceased with immediate effect (unless they have previously stated that they do not want to be contacted by telephone) and inform them that they will receive confirmation in writing
3.	Issue form IBM296 to customer
4.	Close the ESA case on CAM if appropriate.

Change of circumstances received prior to the Work Capability Assessment referral

80. Change of circumstances:

- reported to CCD during the inbound or outbound calls will be updated on CAM by CCD where applicable and then sent to the correct IB(IS) Reassessment BC via the existing e-mail handoff template.
- a change to personal details that hasn’t been actioned on CAM by CCD must be updated by the IB(IS) Reassessment team on CAM
- will be actioned in PSCS via CUED by the IB (IS) Reassessment team, if the change does not require verification

- will be actioned in ISCS via CUED by the IB (IS) Reassessment team, if the change does not require verification
- received by the IB (IS) Reassessment team that require verification or further evidence must be forwarded to the relevant existing IB/SDA/IS owning office to action
- actioned on PSCS/ISCS will be included in the Data Extract and Upload process to ELUS.
- Change of circumstances received after Work Capability Assessment process has commenced but before outcome

81. Change of circumstances:

- reported to CCD will be updated on CAM by CCD where applicable and then sent to the correct IB(IS) Reassessment BC via the existing e-mail handoff template
- a change to personal details that hasn't been actioned on CAM by CCD must be updated by the IB(IS) Reassessment team on CAM, as the owning IB/SDA/IS owning office will not have access
- will be actioned in PSCS via CUED by the IB (IS) Reassessment team, if the change does not require verification
- will be actioned in ISCS via CUED by the IB (IS) Reassessment team, if the change does not require verification
- received after the Assessment referral has been made but before an outcome has been received, must be input immediately on MSRS by the IB(IS) Reassessment team, to notify Health Assessment Advisory Service if it relates to a
- change of address
- change of name
- change to the customer's date of birth, or
- notification of the customers death.
- that require verification must be forwarded to the IB/IS maintenance teams to action, who will notify the Reassessment BC when the action has been completed.
- actioned on PSCS/ISCS will be included in the Data Extract and Upload process to ELUS.
- Terminal Illness Reported

82. A change in diagnosis, including terminal illness, must be reported to the Health Assessment Advisory Service using Annex 5.

83. Complete the pro-forma in ESA MSRS User Guide Annex 5 and fax the proforma to the Health Assessment Advisory Service.

84. Health Assessment Advisory Service staff cannot update MSRS with the new diagnosis but will file the Annex 5 proforma in the ESA55, constructing an ESA55 if required. The new diagnosis details are then available for the HCP consideration.

NB when faxing any information to the Health Assessment Advisory Service you must follow the following procedure

Telephone the Health Assessment Advisory Service to advise them you are about to send a fax.

Ask them to ring you back on receipt of your fax.

Change of circumstances notified after date of decision but before the effective date has been reached

85. Change of circumstances received:

- for customers who have been placed in the Work Related Activity Group, but whose condition has deteriorated after the WCA outcome has been received must be notified immediately to the Health Assessment Advisory Service if appropriate as a decision may be required around moving the customer to the Support Group
- regarding a change to personal details must be updated on CAM by the IB (IS) Reassessment team
- when the effective date has been calculated but not yet reached must be actioned in PSCS and ISCS via CUED where appropriate by the IB (IS) Reassessment team. The change must then be processed as a change of circumstances in ELUS.
- If the customer reports a change after Auto Closure of PSCS & ISCS but the effective date of the change is prior to the reassessment effective date:
- for PSCS, changes can be applied 5 working days before the final payment is due, and payments will be amended where payments up to the effective date have not already been issued.
- for ISCS, changes can be applied up until the night before the reassessment effective date and the payments will be amended where payments up to the effective date have not already been issued.
- must be actioned clerically where appropriate by the IB (IS) Reassessment team if the IB/IS cases are closed
- that affect the previous IB/IS award may affect the Transitional Allowance (TA) payable from the Effective date, therefore the new awards must be used during the calculation
- which result in an over/underpayment must be dealt with by the IB (IS) Reassessment team.
- Retrospective change of circumstances notified on or after the effective date

86. Take the following action when a change of circumstance is notified on or after the effective date and the change affects the IB/SDA/IS/ESA award:

Step	Action
1.	Check which benefits are affected by the change of circumstances
2.	Any previous IB/IS awards the customer had will have been terminated on conversion to ESA. The IB (IS) Reassessment team must reassess the IB/IS awards clerically
3.	If the change of circumstances affects the IB/SDA/IS award, the award details in JSAPS dialogue JA230 will need to be checked and adjusted if necessary to ensure the TA is calculated correctly

4.	Take overpayment /underpayment action if appropriate using existing processes.

87. When preparing to send the change of circumstances to the owning office, collate all the relevant evidence/information and send all paperwork together through the courier service. It should be marked “restricted” giving the full office/team details of the owning office and sending office.

88. Customers who fail to qualify for ESA but have a deterioration in their condition, or develop an additional incapacity, after the date of the reassessment decision, but before the effective date, must be invited to use the existing channels to make a new claim to ESA from the effective date. No new claims information will be taken by BCD staff.

89. The customers’ existing awards of IB/SDA/IS or credits will continue for between 14-27 days i.e. from the date the decision is notified until the day before the effective date of that decision, in order to ensure that benefit payments are continuous.

90. The customers will not have any entitlement to transitional protection.

91. Change of circumstances received during the reassessment appeal process must be actioned by the IB (IS) Reassessment team until ESA has been put into payment at assessment phase rate.

92. Ensure all change of circumstances received are actioned prior to the appeal documents being sent to the owning BC and the impact of the change considered by a Band C DM.

93. Change of circumstances may be received via the online Work Available Report (WAR), these are tasks generated from PSCS/ISCS to notify staff that action is required on a customer’s account.

94. These WARs will only be generated prior to data extract or disallowance action.

95. Where IB/SDA/IS maintenance teams action Reassessment CoC’s, the Health Assessment Advisory Service should be notified via MSRS, if it relates to a change of address, a change of name, a change to the customer’s date of birth, or notification of the customers death as appropriate**.**

96. If the change is to the customer’s personal details (such as change of address) IB/SDA/IS maintenance teams must also notify the IB (IS) Reassessment team who will update CAM.

97. Any change of circumstances notified at this stage will be picked up as part of the data gather process, if entitlement to ESA is established.

98. New functionality will allow the Health Assessment Advisory Service to notify BC’s of any change of circumstances they become aware of using MSRS.

99. Action change of circumstances as per the National Reassessment MSRS guidance.

100. Staff should note that changes of circumstance details are only available on MSRS for 2 months.

101. When MS notify a change of circumstances via MSRS take the following actions:

Step	Action
1.	If case marker is 1 or 2 return case to IB owning office as in current IB(IS) Reassessment guidance
2.	IB/SDA/ IS Decision Maker (DM) to make decision on reported change of circumstances
3.	Check if new circumstances would result in change in current rate of IB/SDA/IS
4.	Is there a change in current rate of IB/SDA/IS? •No - do not update the IB/SDA/IS case. Data transferred for reassessment will be sufficiently accurate. •Yes - action immediately as it will affect the data transferred and the eventual amount of ESA payable
5.	When assessing ESA award : DM will decide on whether customer will be placed in the Support Group or the Work Related Activity Group (WRAG) as normal. User must amend customer's condition on JSAPS in mandatory dialogue JA674 screen JA674695 Current Incapacities by entering new medical information in the appropriate field. This will determine the amount of ESA and whether or not a Transitional Addition is payable.

102. For information on the Transitional Addition (TA), please see additional guidance.

Clerical Process

Introduction

1. The purpose of this guidance is to explain the process for the management of existing clerically maintained cases. These are:

IB only case maintained clerically

IB and IS where both cases are maintained clerically

IB cases maintained clerically where the IS case is maintained on ISCS

2. The guidance covers cases that will be clerically maintained after the National Reassessment process, or that will be built on to JSAPS after the Health Assessments by the Health Assessment Advisory Service.

3. This guidance is for staff in the Contact Centre Directorate (CCD), Jobcentre Directorate (JD) and Benefit Centre Directorate (BCD). This guidance is in addition to the existing National Reassessment ESA clerical process guidance.

4. This guidance does not cover the process for dealing with Special Claimant Records that are maintained clerically.

5. National Reassessment will commence from 28 February 2011. From this date claimants currently in receipt of Incapacity Benefit (IB), Severe Disablement Allowance (SDA) and Income Support (IS) on the grounds of incapacity will be selected for reassessment dependent on their Personal Capability Assessment (PCA) maturity date.

6. From the maturity date onwards, the PCA will be re-scheduled as a Work Capability Assessment (WCA).

7. National Reassessment for IB/IS clerical cases will commence in February 2011 and will be completed over a period of 3 years.

8. National Reassessment for SDA clerical cases will commence after completion of the IB (IS) cases.

9. Cases are clerically maintained for many reasons:

- System faults
- Cases which contain four or more mortgages or home loans
- Cases where the claimant has more than one legal partner (polygamous marriages)
- Cases where either the claimant or their partner has either a first name or a last name that consists of a single letter
- Certain de minimis cases, where entitlement is less than 10p per week
- Cases with a Level 2 nationally sensitive marker
- Cases where the claimant claims ESA(C) and their partner also claims either ESA(IR) or JSA(IB) for them

- Cases where claimants receive IB and another benefit, and these are paid on the same legacy system but they are unable to be combined. For example claimant receives IB and Bereavement Benefit.

10. For cases where a BB or WB is in payment take the following action:

Step	Action
1.	Check if the IB and BB/WB is being paid by Pensions Service by combined payment
2.	If the payments have been combined, an IB93 **must be sent** to end the combined payment from the day before the Effective Date
3.	For IB/IS cases where a BB or WB is in payment follow existing ESA Guidance to input BB/WB on JSAPS.

PCA date falls between 28 February 2011 and 23 May 2011

11. Where the clerical BF date for the PCA falls in between 28 February 2011 and 23 May 2011 for IB/IS cases, for the action to take go to ‘Introductory Phase’ guidance.

12. The Health Assessment Advisory Service can assess claimants using the new regulations on or after 14 March 2011. These cases will be ‘Scrutiny’ only cases until 11 April 2011, there will be no cases disallowed until this date.

13. Decision Makers can determine LCW but cannot make an entitlement decision until the regulations come into force on 28 March 2011.

14. The data-gather can take place prior to 28 March 2011 as the claimant will not be advised of the LCW or entitlement decision during this call.

15. An e-mail template is sent from the owning office 14 days before the WCA is due. This e-mail contains all information needed to populate the claimant notification letter and the e-mail template that is sent from the reassessment team to CCD for the initial outbound call.

16. When the e-mail templates are received via the Handover and Outbound Telephony Tool (HOTT) from the owning office, the reassessment team manager distributes them to individual members of the IB (IS) reassessment team.

17. Action for BCD reassessment team member to take on receipt of e-mail template from reassessment team manager

Step	Action
1.	Open the notification letter:

	IBM259F – This is issued when the claimant's telephone number is held IBM259G – This is issued when the claimant's telephone number is not held IBM259H – This is issued when there is an Appointee/PAB and a telephone number is held IBM259I – This is issued when there is an Appointee/PAB and a telephone number is not held
2.	Using the information contained in the e-mail template received from the owning office input all relevant fields in the notification letter. This notification letter is issued for all cases. Where a claimant living in Wales has expressed a preference for communication with the department in Welsh, ensure the notification is issued in Welsh
3.	To complete the 'Office phone number' field and the 'Text phone' field, access FIND. Using the claimant's post code find the linked BCD telephone and textphone numbers. Input these numbers on to the notification letter. This will route the call to the correct CS agent.
4.	Record the issue of the letter and the date it was issued on the clerical case tracker, A22 and IS110 Notepad if there is a system maintained IS case. The issue date must be 14 days prior to the WCA date. Set a BF date for 9 working days after the date of issue of the letter
5.	Issue the letter to the claimant (or their appointee).
6.	Where a claimant does not have a contact number, refer the case to the Health Assessment Advisory Service via MSRS after 14 days, if there has been no response from the claimant with notification of a current telephone number.
7.	Where a claimant does have a contact number, BF the case for 9 working days to allow time for the claimant to receive the initial notification letter, before sending the initial e-mail template.
8.	When the BF matures, complete and send the initial e-mail template to CCD by 3pm on the last working day before the date the call is due. This will enable them to make the initial outbound call to the claimant. For example: The first initial outbound call to the claimant is made on 08.06.11, so all templates relating to that call must be completed and sent by 3pm on 07.06.11.

	Where an initial outbound call is due on a Monday, the initial e-mail template must be sent by 3pm on Friday
9.	Record the issue of the template and the date it was issued on the clerical case tracker, A22 and IS110 Notepad if there is a system maintained IS case.

18. Action for reassessment team member to take when completing the initial outbound e-mail template to be sent to CCD for the initial outbound call to be made. The e-mail template should be completed 9 working days after the initial notification letter has been sent.

Step	Action
1.	When the BF matures, complete the initial outbound e-mail template
2.	Note on the template the secure e-mail address for your office. Do not include your personal e-mail address
3.	Note the template with the date the notification letter was issued
4.	Note the name of the owning office
5.	Using the information from the A22 or clerical case tracker, note on the template the date the PCA is due
6.	Note the claimant's NINO, full name and title. Where the claimant is Welsh speaking and living in Wales, this must be noted on the template, as the initial outbound call must be made in Welsh
7.	Note the claimant's address and postcode. This information can be found on the e-mail template sent from the owning office
8.	Include security information to enable CCD to ask security questions when establishing the claimant's identity when they make the initial outbound call. This information can be found on the e-mail template that was sent from the owning office

9.	The 5 security questions must be from the strong list in the first instance and then from the weak list if there is insufficient information available. Strong list: Other Benefits PAB/COP name Home telephone number Benefit amount Partner/dependant name Weak list: Address Postcode Mobile telephone number Where there is a PAB/COP this must always be included, as this is a mandatory security question when CCD make the call
10.	Where appropriate, note that the claimant is in receipt of a Child Dependency Addition (CDA) from Income Support (IS). This information can be found on the e-mail template that was sent from the owning office
11.	If, from the e-mail template sent from the owning office, it is known that the claimant has additional communication needs, such as living in Wales and Welsh speaking, or needs to use the textphone service, then these needs must be included on the initial e-mail template
12.	E-mail the completed template to the CCD inbox address 'JCP CCD IB REASSESSMENT' This must be sent by 3.00 pm on the last working day before the date that the call is due. Mark it 'Restricted'
13.	Note on the A22 and clerical case tracker the date the CCD template was sent and set a BF for 3 days to await the reply from CCD indicating whether the initial outbound call was successful or not.
14.	If the Clerical Template has not been returned by the time the 3 day BF matures the SPOC at the BC should send a reminder to the SPOC at Bangor.

Reply received from Contact Centre Directorate

19. Reassessment team member action to take when the e-mail template has been received back from CCD

Step	Action
1.	When the template has been received from CCD regarding the outcome of the initial outbound call, note the result, whether successful or unsuccessful, on the A22, IS110 Notepad if there is a system maintained IS case and clerical case tracker
2.	Continue with the reassessment process even if the call was unsuccessful and unanswered
3.	If the template states that the claimant said the initial notification letter had not been received, issue a duplicate and record on the A22 that a duplicate has been issued and the date of issue
4.	Where there had been a change of circumstance notified by the claimant during the initial outbound call, send the template to the owning office for the change to be actioned
5.	Include details of the change on the e-mail template sent from the owning office at the beginning of the reassessment process, or on the gathering information template.
6.	Where the template states that Child Dependency Additions (CDA) are still being paid through the claimant's Income Support, follow the process below.
7.	Where there was a complex enquiry, that was unable to be answered by CCD, the claimant must be phoned back. Ensure where the claimant lives in Wales, that the call-back is in the language the claimant has requested
8.	Where the claimant has additional needs such as, Braille, Large Print, Text Phone or is a Welsh speaker living in Wales, these needs must be taken into account when phoning or writing to the claimant
9.	Once all the actions are complete, the case must be manually referred to the Health Assessment Advisory Service.

20. Select this link for the process to follow for IB cases maintained clerically where the IS case is maintained on ISCS.

21. Use the following process for IB and IS cases where both are maintained clerically.

22. Claimants who have been identified as being in receipt of a Child Dependency Addition (CDA) in their IS claim are asked in the initial outbound call whether they want Child Tax Credit (CTC) to be claimed on their behalf.

23. The CCD user notes the claimant's answer on the initial e-mail template and this is returned to the reassessment team. Some claimants will agree to CTC being claimed on their behalf.

24. If the claimant cannot be contacted due to no telephone number or the failure of 3 call attempts, these claimants will be classed as 'Deemed' and will have a claim to CTC made on their behalf. The CCD user notes on the initial e-mail template that the claimant has not been contacted.

25. Take the following action to claim CTC for claimants who agree to the claim to CTC being made on their behalf or claimants who have been classed as 'Deemed' (those we have not been able to contact):

Step	Action
1.	Contact the owning office to request details of the claimant from the clerical papers, in order to complete the form TC600 and the CTC proforma on the claimant's behalf
2.	If there is insufficient information contained in the clerical papers to complete the TC600, contact the claimant to obtain the missing information by phone. If unable to contact by phone, send IBM290D
3.	Record the contact on an A22. Set a b/f for 2 weeks if the claimant has been asked to send in additional information, for example birth certificates or Home Office documents.
4.	Send a reminder after 2 weeks if the claimant does not respond and set a b/f for 1 week. If there is no response after this time, send the claim to the Decision Maker to make a decision on the case.
5.	If there is sufficient information to complete the TC600 follow step 6 onwards
6.	Complete the TC600 on the claimant's behalf. NOTE: An agreement has been made with HMRC that the Ethnicity Questionnaire' on the back of the TC600 does not require completion in these cases

7.	Calculate the CDA end date and enter on A22 and clerical case tracker. The period of calculation agreed with HMRC is 4 weeks. The period of calculation will commence from the next full benefit week after completion of the TC600 (CDA end date must be a benefit week ending (BWE) date) Example: TC600 completed on 07.06.11 Claimant is BWE Wednesday 4 week period for HMRC to calculate CTC is 09.06.11 – 06.07.11 CDA end date 06.07.11
8.	Calculate the expected start date of CTC. This is the day after the CDA end date. In the above example the CTC start date is 07.07.11. Make a note of this date on A22 and clerical tracker.
9.	Complete the CTC proforma and attach it to the completed TC600 and send to HMRC
10.	Include on the CTC proforma: • the calculated CDA end date in the 'CDA END DATE' box • the calculated CTC start date in the 'CTC START Date' box
11.	Note on the A22 and clerical case tracker to show that the TC600 and the CTC proforma have been sent to HMRC and the date they were sent. Issue IBM290A to claimants who have agreed to a claim to CTC being made on their behalf. Issue IBM290B to claimants who have been 'deemed'
12.	Refer the case for the Work Capability Assessment (WCA) through MSRS.
13.	Send details of expected end date of CDA to the owning office. The owning office set a b/f to contact HMRC one week prior to the CDA expected end date, to check that the CTC has been awarded. If CTC has not been awarded by the expected date, the owning office agrees a further date with HMRC and continues to pay CDA and any associated child premiums.
14.	When the MSRS outcome is received, check with the owning office that CTC is in payment and that CDA has ceased before continuing the reassessment action.

15.	**Do not** continue with reassessment action until CTC is in payment and CDA has ceased.

26. To claim CTC on the claimant's behalf complete form TC600 .

27. All forms must request Weekly payment to avoid possible hardships resulting from gaps in payment.

28. Submit to HMRC. To enable the claim to be fast-tracked, a CTC proforma must be completed and sent with the TC600.

29. When completing the TC600 follow existing HMRC guidance on TC600 completion .

30. As previously mentioned, an agreement has been made with HMRC that the Ethnicity Questionnaire' on the back of the TC600 does not require completion in these cases.

31. The information needed to complete the TC600 is requested from the owning office (and the claimant, if there is any information missing). The CTC proforma must be completed with the appropriate dates and other information and forwarded to HMRC with the TC600.

32. If the claimant has been deemed due to failed contact, or has not been contacted as there was no missing information, the selected frequency must be 'Weekly'.

33. Where further information has been requested from the claimant, e.g. birth certificates, Home Office documents etc, these must be photocopied and annotated 'I certify this is a true copy' then signed and dated. These photocopies must be securely attached to the TC600 before sending to HMRC.

34. Send the claims to HMRC address on the CTC proforma on a daily basis where they will be fast tracked.

35. The single point of contact for HMRC is available via the GSI mailbox address

36. Claimants who do not agree to CTC being claimed on their behalf will be referred to as 'Non Deemed '. If the claimant has not agreed, take the following action:

Step	**Action**
1.	When the e-mail template is received from CCD noting that the claimant does not agree to a claim to CTC being made on their behalf, issue a clerical notification letter IBM290C to the claimant outlining the consequences of not submitting a claim to CTC. This notification will also include a CCD telephone number for the claimant to contact, if they reconsider their decision not to claim CTC
2.	Record refusal to claim CTC and the issue of the clerical notification on an A22 and clerical case tracker.

3.	Refer the case for the Work Capability Assessment (WCA) via MSRS.

37. If the claimant calls in response to the letter explaining that their CDA will cease and now wishes to claim CTC, the CCD user notifies the IB (IS) reassessment team via the Handover and Outbound Telephony Tool (HOTT) , to make the CTC claim on the claimant's behalf.

38. Where the IB case is maintained clerically, there are two ways to make a Health Assessment Advisory Service referral to start the Work Capability Assessment (WCA) process.

39. Where possible, cases must be referred using MSRS.

Making a Health Assessment Advisory Service referral using MSRS

40. Take the following action when referring a case to the Health Assessment Advisory Service electronically through MSRS. This action starts the Work Capability Assessment (WCA) process.

41. Access MSRS by selecting the Health Assessment Advisory Service (formerly Medical Services) icon on your desktop.

42. All information on creating and managing Health Assessment Advisory Service referrals can be found in the IB (IS) Reassessment MSRS User Guide. This should be read in conjunction with this guidance.

43. The Health Assessment Advisory Service will use existing processes to complete the LCW reports. All reports will be completed and noted on MSRS. These can be viewed by the IB (IS) Reassessment team.

44. Following the Health Assessment Advisory Service' assessment, the Assessment outcome will be notified on MSRS, and relevant documentation will be returned from the Health Assessment Advisory Service.

Making a Health Assessment Advisory Service referral clerically

45. To make a clerical referral take the following action:

Step	**Action**
1.	Complete an ESA55 Assessment Referral file cover and complete the 'Clerical Referral to Health Assessment Advisory Service' side
2.	In the 'Benefit Type' section, ensure the 'IB Migration' tick box has been selected
3.	Complete the 'Claimant Details' section with the: NINO

	Name Sex Date of Birth Address Phone number
4.	Complete the ‘Jobcentre Plus office details’ section with the: • DO number – this is office ID of the reassessment office • Contact phone number – this is the direct line phone number of the reassessment team • Do not complete the ‘Return address for WFHRA or CR1 (Stamp)’ box (This is because the claimant is following the WCA process and WHFRAs are currently suspended.)
5.	In the ‘Other Information’ section complete the • First day of incapacity – from the information on the e-mail template that was received from the owning office when the case was selected for reassessment • Diagnosed cause of incapacity – use the information on the above e-mail template, for example, renal dialysis • ‘Mental health related incapacity’ box – this must be selected where the incapacity listed above is related to a mental health condition. If you are unsure whether the incapacity is related to a mental health issue, check the Incapacity Reference Guide (IRG). The incapacities marked with an asterisk denote a mental health incapacity. • ‘Support Group applies’ box – do not complete this box
6.	In the ‘Referral details’ section complete: • The referral type – this must be ‘Q’, ‘S’ or LCWRA only, depending on the individual claimant’s circumstances • Use a ‘Q’ referral where this is the initial referral and an ESA50 is to be issued by the Health Assessment Advisory Service • Use an ‘S’ referral where evidence is already held, ESA50 has been returned and a good cause decision has been made on the Failed to Attend (FTA) • Use the ‘Advice’ referral type • ‘CN’, for any case where advice is required before the DM decision • ‘CZ’, for reconsideration advice required after the DM decision • Use an LCWRA referral where the claimant already has LCW, but the group the claimant is to be placed in has yet to be decided • Re-Ref – this must be ‘Yes’

	• Date of referral – this is today's date • Form or letters issued – do not complete this section
7.	In the 'Notes' section • make a note if claimant has previously • complained about a particular Healthcare Professional • appealed a decision based on a report completed by a Healthcare Professional • Enter details of the Healthcare Professional involved in the complaint or appeal. (The Health Assessment Advisory Service must refer claimant to a different Healthcare Professional for the current assessment.)
8.	For all clerical referrals, set a BF for 4 weeks on an A22, IS110 Notepad if there is a system maintained IS case, and clerical case tracker to monitor progress of the referral.

Change of circumstance occurs after referral

46. Where a change of circumstance is reported once a claimant has been referred to the Health Assessment Advisory Service, but before the LCW report has been finalised, the change must be actioned **immediately**.

47. If the change is notified to the IB (IS) Reassessment team, and the IB or IB/IS case is maintained clerically, the reassessment team will send details of the change via the Handover and Outbound Telephony Tool (HOTT) to the owning office who will action the change.

48. In addition, if the IS case is maintained on the system, follow Change of Circumstances guidance.

49. If the change is notified to the owning office, they will action the change.

50. When the change has been actioned, the owning office will notify the IB (IS) Reassessment team by HOTT if appropriate.

51. When the change is received by the IB (IS) Reassessment team, they input the change of circumstance directly on to MSRS if appropriate.

52. On completion of the Health Assessment Advisory Service's action, a variety of electronic outputs from MSRS in the 'Browse New Response List' are received, and the ESA55 and accompanying paperwork is returned.

53. Where the IS case is maintained clerically, check with the owning office that CTC has been awarded and the CDA removed, in those cases that were receiving CDA for their dependent children.

54. Where the IS case is maintained on ISCS, access ISCS dialogue IS503 to confirm that Child Tax Credit (CTC) has been awarded and the CDA payments have ceased.

55. Where the CTC has not been awarded take no further action until the CTC award has been made.

56. Where the IS case is maintained clerically set a b/f for the expected date of award, which must be requested from the owning office, to contact them again to check whether CTC has now been awarded.

57. Where CTC is now in payment, or where this was a case with no CTC interest, e-mail a request for the IB or IB/IS clerical case papers from the owning office.

58. When the case papers are received, refer the relevant paperwork and the ESA55 to the Decision Maker (DM).

59. The DM will make the decision whether the claimant has LCW or not based on all evidence supplied from the claimant, Health Assessment Advisory Service or any other source, such as consultant reports etc.

60. If the claimant has LCW, the DM will also determine whether the claimant has Limited Capability for Work Related Activity (LCWRA)

61. If the DM determines that the claimant has LCW **and** LCWRA the claimant will be placed in the Support Group. If the DM determines that the claimant has LCW but **does not** have LCWRA the claimant will be placed in the Work Related Activity Group.

62. Check whether the claimant has a drug or alcohol misuse problem. In England only this must be clearly referred to the DASO at the Jobcentre.

63. Claimants in receipt of occupational pension income prior to 2001 will have received transitional protection whilst in receipt of IB. This income would have had a 100% disregard.

64. Claimants in receipt of an occupational pension and also

- Disability Living Allowance (DLA) with the highest rate Care Component, or
- the enhanced rate of Personal Independence Payment (PIP) Daily Living component or
- Armed Forces Independence Payment (AFIP)
- also receive transitional protection on their pension income. (This pension does not have to have been in payment prior to 06 April 2001). The pension disregard for these cases is also 100%.

65. This transitional protection will also apply to claimants whose awards qualify for conversion to ESA(C) following IB (IS) Reassessment therefore the pension income must receive the correct disregard.

66. The extension, of the transitional protection of occupational pension income, applies only to claimants who are already receiving this transitional protection prior to the effective date of their conversion decision and whose awards qualify for conversion to ESA.

67. Claimants who are already receiving this transitional protection prior to the effective date of their conversion decision, but who are disallowed, and appeal and are awarded the assessment phase rate pending the outcome of the appeal, will continue to be entitled to this transitional protection.

68. The claimant will retain their occupational pension disregard in the normal way whilst receiving the assessment phase rate.

69. If the claimant wins their appeal, they will retain their transitional protection.

70. Claimants in receipt of an occupational pension and also

Disability Living Allowance (DLA) with the highest rate Care Component, or

the enhanced rate of Personal Independence Payment (PIP) Daily Living component or

Armed Forces Independence Payment (AFIP)

also receive transitional protection on their pension income. (This pension does not have to have been in payment prior to 06 April 2001). The pension disregard for these cases is 100%.

71. When the DM has made the LCW determination, and the ESA55 and accompanying paper work has been returned to the IB (IS) Reassessment team, take the following action:

Step	Action
1.	Update DMACR with the LCW determination
2.	Where the claimant does not have LCW, go to ‘Claimant Disallowed’ section
3.	Look at the clerical case papers and ISCS if appropriate, complete the gathering information template and establish whether all necessary information is contained there. Contact the claimant if there appears to be data gaps or conflicting information. For claimants living in Wales, the language preference must be established and the claimant contacted in their preferred language
4.	Try to contact the claimant by telephone. If the first call is not successful, try to contact the claimant again at 4 hourly intervals. In total 3 attempts should be made to contact the claimant over 2 days
5.	If the claimant was claiming IB only, check CIS and take the following action in the ‘Where you live’ section of the template: ‘Local Authority Separate Interest’ indicator on CIS has start date but no end date record on the template that HB has been claimed record on the template that HB has not been claimed

	record on the template that HB has not been claimed record on the template that HB has not been claimed. ‘Local Authority Separate Interest’ indicator on CIS has start date and end date No ‘Local Authority Separate Interest’ in CIS No ‘Local Authority Separate Interest’, but there are open ‘Housing Benefit’ interest held on CIS
6.	If the claimant is having difficulty communicating on the telephone, or it has not been possible to contact the claimant at all, contact them in writing. If the claimant appears vulnerable an appointment can be booked for a face-to-face meeting in the Jobcentre via the AJCS diary.
7.	Request the information from the claimant on form IBM164, sending a reminder if the claimant does not reply within 2 weeks. Note on the A22 , IS110 Notepad where the IS case is maintained on ISCS and clerical case tracker that this has been done. Set a BF for 4 weeks for the issue of the reminder
8.	If the claimant fails to supply the necessary information refer the claim to the Reassessment Decision Maker.
9.	When the data gather has been successful: build the case on JSAPS via ESA Legasuite Update System (ELUS) or clerically assess ESA if case can not be built onto JSAPS
10.	If the claimant is currently in receipt of HB use form NHB(ESA)Clerical to notify their local authority of any changes.

72. Where a clerically maintained IB (IS) case can be built on JSAPS and no longer has to remain clerical, this must be done.

Building IB (IS) Clerical Cases on to Jobseekers Allowance Payment System (JSAPS)

73. All IB/IS cases that were clerically maintained must be built on to JSAPS by a specifically nominated user using the ESA Legasuite Update System (ELUS) accessed by the desk top icon.

74. It will not be possible to build on to JSAPS:

- Cases which contain five or more MID mortgages or home loans

- Cases where either the claimant or their partner has a last name (surname) that consists of a single letter
- Cases where the reassessment claimant claims ESA (C) and they are a partner on a JSA (C+IR) claim or on an ESA (C+IR) claim where the ESA (C+IR) claim is held at a different office to the reassessment claimant's ESA (C) claim.

75. Nominated user must access ELUS via Desk Top icon.

76. Action to take to build a case on to JSAPS, when the claimant has LCW and the data gather has been successful:

Step	Action
1.	Using the claimant's pay dates from the clerical papers and ISCS where appropriate, work out the effective date
2.	Transfer the account through JA030 if required
3.	Close the IB/IS interest as normal process and register the ESA interest in PD350 from the effective date and complete CP650 action if required
4.	In ELUS JA060 register the ESA claim as a new claim using event type code 01
5.	Input the original date of claim as the Date of Claim
6.	A warning message will display, if when the case is being registered as ESA (C), there is a possibility that IS is being paid clerically. Check CIS to verify if the case should be for ESA (C + IR). If so, overtype code '13' with code '14' and continue with register interest action. Obtain clerical case papers if appropriate
7.	Using the information from the clerical papers input the type of ESA the claimant is claiming, ESA (C) or ESA (IR). 13 – Manual IB Migr Conts Only 14 – Manual IB Migration Conts and IR
8.	Select JA610 button to go to ELUS JA610

9.	Enter the reassessment effective date calculated at step 1 in the 'Eff Date' field on the Picklist screen
10.	For claimants on IS with a partner with an LR interest code 0, set the CSA new rules flag on ELUS 'Y', NRP Partner flag to 'Y' and the partner's LR flag to 1
11.	In JA610 select 'Chge Effv Date'. Enter the 'Rec'd date' on the 'Picklist'. This is the date that was input in ELUS JA060
12.	Waiting days served will display as zero, do not take any action
13.	Using the information from the clerical papers, ISCS and claimant where appropriate, select the relevant screens from the JA610 Picklist, for example; Current Work, Other Benefits, Exceptional Conditions, etc and press 'Enter' to navigate through the selected screens. Linking details must always be completed in order to award a mixed credit, as follows: For IB claims enter type '03' linking: • the first day of sickness. This is the Period of Incapacity for Work (PIW) date • the end date of the IB claim • For IS claims enter type '07' linking: • the start date of the IS claim • the end date of the IS claim **NOTE:** Dependant's input before the start of the claim will not be visible in the 'Dependants' screen until the ESA Effective Date of the claim is reached
14.	When all required evidence screens have been completed and screen ELUS JA610 is displayed, input 'Y' in 'Completed Evidence' fields as appropriate and select JA400 to go to dialogue JA400, Method of Payment
15.	In ELUS JA400, input the claimants method of payment and then select 'Save'
16.	As JA674 cannot be accessed until the ESA Effective Date has been reached, assessment cannot continue until then. Set a BF for the ESA Effective Date
17.	When BF matures, access ELUS JA674 'Personal Capability Assessment' to input the WCA outcome decision and select 'Save' when input. The ESA effective date recorded in JA610 is displayed in the WCA Effective date field and protected, so cannot be

	amended
18.	Go to JA092 if there is a mortgage and/or capital on the case. Using the information from the clerical papers', input the correct review date(s) and select 'Save' when input
19.	Go to JA230 'Maintain IB & IS Awards'. Input the IB and IS gross award details. When inputting an amount for an ADI or CDI ensure the actual amount paid is input
20.	Where there are social fund deductions or overpayments, there is a separate process for these. Where there are any other forms of deductions follow the link.
21.	Select ELUS JA200 'Award and Decision' button
22.	Select 'Continue' to go to the 'Award Summary' screen. The ESA awards display, including the Transitional Additions, where these are appropriate. Ensure that where the claimant receives an occupational pension that this has been given the correct disregard **NOTE:** Claimants have been given transitional protection if they were in receipt of an occupational pension prior to 06 April 2001, or are in receipt of Disability Living Allowance (DLA) with the highest rate Care Component, or the enhanced rate of Personal Independence Payment (PIP) Daily Living component or Armed Forces Independence Payment (AFIP) and also in receipt of an occupational pension. (This pension does not have to have been in payment prior to 06 April 2001). In both these cases there is a pension disregard of100%.
23.	Access JA405 'Compute Payment' to set up the payment to be released when it is due
24.	As IB/IS awards have been manually created in JA230 a pre-payment check will be generated, which must be urgently cleared in JA420 **NOTE:** The clerical IB/IS case will need to be terminated from the ESA Effective Date and payments on CPS(LP) stopped, with the last IB/IS payment being made up to the day before the ESA Effective Date.

77. If the case cannot be built on to JSAPS use the existing ESA guidance Assessing and Calculating the award using ESA14 in conjunction with this guidance.

78. All the information needed to complete the ESA14 can be found on the claimant's clerical case papers, ISCS where appropriate and the gathering information template.

79. Where the information indicates that the claimant qualified for either

SDA, or

IB as the IB contribution conditions were satisfied

• these claimants are treated as satisfying the contribution conditions for ESA(C).

80. Calculate the claimant's effective date before completing the ESA14.

81. Ensure that a mixed credit is awarded and or State Second Pension (S2P) if the date to be entered is before 06/04/2016 is awarded where appropriate. See Desk Aid.

Action to take to complete ESA14

82. A desk aid is available to help with completion of the ESA14.

Step	Action
1.	Annotate the Notes box of the ESA14 'IB Reassessment' in red
2.	Complete the Relevant Income Tax Years (RITYs). Use the information on the information gathering template to complete this. (This information will be used when building the case on JSAPS)
3.	Where a claimant **does not** have housing costs, complete ESA14 to Box 8 'Transitional Addition / Applicable Amount' using Assessing and Calculating the award using ESA14 current guidance. Use the information on the information gathering template to complete this. Input the applicable amount. Go to step 6.
4.	Where a claimant **has** housing costs, complete ESA14 up to and including Box 6 'Severe/Enhanced Disability premium' using Assessing and Calculating the award using ESA14 **,** current guidance. Use the information on the information gathering template to complete this.
5.	Total the amount and put the totalled figure in the Notes/Other action box on the reverse of the ESA14. This figure is the applicable amount minus any housing costs. This is because a Transitional Addition (TA) may be payable, and this must exclude housing costs.

6.	Where the applicable amount is less than the claimant's existing benefit entitlement, Calculate a Transitional Addition for ESA(C) and input the TA amount in box 8 in column A Calculate a Transitional Addition for ESA (IR) and input the Transitional Addition amount in box 8 in column B.
7.	Complete rest of ESA14 as Assessing and Calculating the award using ESA14
8.	Enter details of any occupational pension in box 10, ensuring the appropriate disregard has been given.
9.	In box 18 in the 'Date of claim or change' input the claimant's effective date
10.	Strike through the 'Tax Ceiling' field, as there are no tax ceilings for ESA. The taxable amount which is taken into account instead of Tax Ceilings is the total amount of ESA (C) which is in Box 15 Column A of the ESA14 and copied onto Column 04 of ESA14P and should be used for End Of Year Tax Action
11.	In the 'Waiting days apply' field', tick 'No' as the waiting day rules do not apply where an award of IB/IS is converted to ESA
12.	In the 'Prepared by' field, clearly write your name and input the date in the 'Date' field
13.	In the 'Signature' field, sign your name and input the date in the 'Date' field
14.	In the 'Forms used' box, input the name of any forms that have been issued under 'Form' any BF dates that have been set under 'BF' the dates that the outstanding action has been cleared under 'Cleared' your initials when the outstanding action has been cleared under 'Cleared' any other relevant information under 'Miscellaneous'
15.	The 'Notes/Other action' box must be used to display any of the following when

	appropriate: notifications that have been issued to the claimant the amount of other benefit that has been in payment any rate of TA that has been awarded that the TA has been considered if none due The actual amount of any Adult Dependency Increase (ADI)/ Child Dependency Increase (CDI) in payment. to flag any required future activity such as uprating case controls carried forward from IB/IS Winter fuel payments Christmas bonus payments
16.	Delete all ‘ Notes 1 – This amount will be paid . . etc’. This is not relevant to IB(IS) Reassessment claimants, who do not have to wait 13 weeks before receiving Main Phase ESA
17.	Update A22 and clerical case tracker

83. Dual entitlement to IB and ESA (main phase) may occur when the claimant:

- has been disallowed IB following a Personal Capability Assessment (PCA)
- has appealed against the decision
- has then claimed and been awarded ESA
- subsequently wins their IB appeal.

84. The claimant’s entitlement to IB is retrospectively re-instated and they remain entitled to ESA, as there was no provision preventing claimant entitlement to IB and ESA at the same time.

85. The ESA(C) that they have been awarded is subject to time- limiting and will exhaust when the 365th day of entitlement is reached.

86. As these claimants should have been continuously entitled to IB since they were disallowed, (and not ESA(C)), when their IB reassessment to ESA takes place, these claimant will be entitled to a further 365 days ESA(C) from the effective date. This is so that these claimants are not adversely affected compared to other IB reassessment claimants.

87. Where the 365 day limit has been reached on the ESA(C) AP or WRAG award, these claimants have the full rate of IB reinstated until the end of the IB reassessment process.

88. Duel entitlement cases must not be referred to the Health Assessment Advisory Service for a further WCA as they have already been found to have LCW or LCWRA when they were awarded ESA. This determination is being used for the reassessment process.

IB Owning Office action on maturity of 365 day Exhaustion Date BF

89. When the 2 week exhaustion date BF matures, prior to the PCA maturity date, take the following action:

Step	Action
1.	Reassess the IB claim for the day after the ESA(C) exhaustion date.
2.	Maintain the claim clerically until the IB Reassessment decision is made
3.	Issue Change of Circumstances notification to the claimant
4.	Do not award Credits as this will have been awarded by ESA and note this on the A22
5.	Notify the ESA user by phone or email of the full rate of IB
6.	If there is no PCA review date refer the case to the DM to determine a new PCA review date
7.	Once there is a PCA review date set a BF for 2 weeks before to commence the IB Reassessment process
8.	Maintain the claim clerically until the BF date is reached.
9.	When the BF matures complete an initial e-mail template and send it to the appropriate IB Reassessment office Note the email template that the clerical papers have been sent Send the clerical case papers to the IB Reassessment office on the same day

IB Reassessment Office action on receipt of clerical papers

90. Action to take when email template and clerical papers have been received:

Step	Action
1.	On receipt of the e-mail template, complete the clerical tracker with the claimant’s details.
2.	Reassessment user must check CIS to see if ESA award held on system (ESA in payment). If there is also an ESA award in payment this means claimant has dual entitlement to benefit (IB and ESA)
3.	Using details from the clerical papers work out the effective date
4.	Terminate the claimant’s existing clerical IB award from the day before the effective date
5.	BF the case to the effective date
6.	On the next working day after the payment of the dual award ESA is issued by JSAPS, the claimant's existing ESA award must be transferred to clerical. Take screen prints of all screens before passing to authorising officer to transfer to clerical
7.	When the case has been transferred to clerical, BF for three working days
8.	When the three working day BF matures convert the claimant’s dual IB/ESA award to an ESA Reassessment award from the effective date using JA672, ‘Build from Clerical’, re-enter the details from the original ESA claim record the IB award details in JA230 so that any Transitional Addition (TA) can be calculated by the system In screen JA672673 enter the cumulative total days as zero in the ‘Cum Tots field (The ‘Cum Tots’ field will have reached 365 days because of the previous ESA(C) claim)

9.	Complete the allowance notification IBM260A /IBM260AW to the claimant. This is a specific allowance notification for dual entitlement claimants and includes the effective date and the amount of the new award of ESA. (This must be sent in addition to the system generated notification).

91. The Effective Date is the date on which the “conversion decision” (being the decision as to whether or not a claimant’s existing award qualifies for conversion to ESA) takes effect.

92. The Effective Date is defined as:

where the claimant receives their existing benefit at fortnightly intervals, the effective date is the first day of the Benefit Week, following the period covered by the first full fortnightly pay period of the existing award, after the date on which the conversion decision is made/issued. The examples illustrate this in practice.

where the claimant receives their existing benefit at other than fortnightly intervals (weekly, quarterly or annually), the effective date is the first day of the benefit week immediately following the end of the second complete benefit week after the date on which the conversion decision is made/issued

93. The effective date is also the date from which the claimants entitlement to IB, SDA and IS on the grounds of disability or a health condition terminates, whether or not they are found to have LCW. The existing award is paid up to and including the day before the effective date.

94. Payment of IB/IS/SDA will continue for a minimum of 14 days and a maximum of 27 days after the date the claimant is notified of the conversion decision

95. Claimants who do not have Limited Capability for Work (LCW), can choose to:

- claim Jobseekers Allowance (JSA)
- appeal the Limited Capability for Work decision (and where the claimant appeals against the WCA outcome they can receive ESA at the assessment phase rate. This will be paid up to the conclusion of the first tier tribunal hearing, where medical evidence is held for the whole period)
- claim or continue to receive Income Support (IS) under another condition of entitlement
- leave the benefit system altogether.
- Decisions notified on or after 28 October 2013

96. If a claimant wants to dispute a decision that was notified on or after 28 October 2013, they must first have a Mandatory Reconsideration and receive a Mandatory Reconsideration Notice before they can lodge an appeal with Her Majesty’s Courts and Tribunal Service(HMCTS).

Calculating the Effective Date

97. Examples of how to calculate the Effective Date are as follows:

Example 1

Claimant is a Monday payday

Last payment made on Pensions Strategy Computer System/ Income Support Computer System (PSCS/ISCS) – 11/07/2011

WCA outcome decision made and claimant notified on 10/07/2011

Next payment due on 25/07/2011 for period 12/07/2011 to 25/07/2011

IB/IS final payment on 25/07/2011

The Effective date is **26/07/2011.** ESA is payable from this date where appropriate

Example 2

Claimant is a Tuesday payday

Last payment made on PSCS/ISCS – 05/07/2011

WCA outcome decision made and claimant notified on 12/07/2011

Next payment due on 19/07/2011 for period 06/07/2011 to 19/07/2011

Claimant will receive a payment of IB/IS for period 20/07/2011 to 02/08/2011

IB/IS final payment on 02/08/2011

The Effective date is **03/08/2011.** ESA is payable from this date where appropriate

98. A Transitional Addition (TA) is an additional amount of money which will be paid to claimants who are entitled to more on their existing IB, IS or SDA benefits than they will be entitled to when they move to ESA.

Calculating the transitional addition

99. TA is calculated using the gross amount of benefit only. Adjustments for other benefits, income and earnings are not included when calculating the TA.

100. Any earnings, income and Third Party deductions will be deducted from the overall ESA entitlement after the TA calculation.

101. Housing costs are not included in the calculations of the TA.

No transitional addition payable at effective date

102. Claimants entitled to as much, or more, ESA than their entitlement to IB/IS, will not be entitled to a TA. See Example 1.

Transitional addition for Incapacity Benefit claimants

103. Where the existing award is IB, the weekly rate payable, when calculating amount (A) at step 1 below, is

- the normal rate payable under specified legislation including age-related additions
- any Adult Dependency Increase (ADI) and/or Child Dependency Increase (CDI). Only the actual amount payable must be included in the calculation.
- long-term IB for widows and widowers
- transitional award of Incapacity Benefit Long Term (IBLT) – (former SB recipients)
- transitional award of IBLT (former Invalidity Benefit (IVB) recipients).

104. Take the following action to calculate the TA: See Example 2

Step	Action
1.	Using form ESA14 Calculate Amount (A) = the gross amount of IB to which the claimant is entitled on the last full benefit week which ends on the day immediately preceding the effective date
2.	Calculate Amount (B) = the gross amount of ESA (C), to which the claimant is entitled in respect of the benefit week of which the effective date is the first day
3.	Deduct (B) from (A) - The claimant will be entitled to a TA equivalent to this amount (if any)
4.	Add the amount of any TA to the amount of the claimant's ESA (C) to calculate the claimant's overall ESA (C) entitlement. Include on ESA14 at Section 'Transitional Addition'
5.	Make a note on the ESA14 of any ADI/CDI, including for each: Dependant's name National Insurance Number/Child Reference Number Date of Birth Amount paid. This information is needed to reduce TA, by the correct amount, should any relevant changes occur during the period TA is in payment e.g. partner leaves the household
6.	Show calculations on the reverse of form ESA14 in the 'Notes / Other action' section
7.	Set BF to review at uprating, or where future change is known if this is earlier

Transitional addition for Income Support claimants

Child Dependency Additions

105. On starting reassessment to ESA, IS claimants in receipt of Child Dependency Addition (CDA) will have those additions transferred to Child Tax Credits (CTC), as ESA does not

include amounts for dependent children or young persons. CDA will not therefore be included in the calculations of the TA.

Calculating the transitional addition for Income Support

106. Take the following action to calculate the TA:

Step	Action
1.	Using form ESA14 Calculate Amount (A) = the applicable amount of IS (excluding housing costs, other income or Third Party Deductions)
2.	Calculate Amount (B) = the applicable amount of income-related ESA (ESA(IR)) payable to the claimant in respect of the first benefit week (excluding housing costs, other income or Third Party deductions)
3.	Deduct (B) from (A) - The claimant will be entitled to a TA equivalent to this amount (if any)
4.	Add the amount of any TA to the amount of the claimant’s ESA (IR) to calculate the claimant’s ESA (IR) entitlement.
5.	Show calculations on the reverse of form ESA14 in the ‘Notes / Other action’ section
6.	Set BF to review at uprating, or where future change is known.

Change of circumstances on or around the effective date – effect on calculation of transitional addition

107. If, as a result of a change of circumstances, the claimant’s IB or IS increases or decreases, or is due to increase or decrease, in the benefit week of which the effective date is the first day, then, for the purposes of calculating amount (A) (see step 2), the amount of the increase or decrease should be included in the calculation of the IB or IS entitlement. This will mean that the calculation of the TA will be based on a fairer comparison of the entitlements “before” and “after” conversion. See Example 3 and Example 4.

108. Take the following actions to apply change of circumstances which affect the TA:

Step	Action
1.	Claimant reports a change of circumstances which is effective in the first benefit week following conversion to ESA and which increases or decreases the ESA award
2.	No further action is required where the change is for Housing Costs, Other Income, or earnings which are not included in the calculation of TA
3.	If the change is relevant to the calculation of TA, recalculate the final IB and/or IS award to take account of the CoC. This is now Amount A
4.	Using the new Amount A calculate ESA(C) TA and/or ESA(IR) TA
5.	Issue revised notification
6.	Show calculations on the reverse of form ESA14 in the ‘Notes / Other action’ section.

Transitional addition calculation around uprating

109. Where the final benefit week of IB/IS falls immediately before an uprating, and the first benefit week of ESA falls in uprating week itself, then, for the purpose of calculating amount (A), the gross amount of benefit payable in the final week of IB/IS (amount (A)) must be adjusted to reflect the amount that would have been due in the first benefit week of ESA, had no reassessment occurred. See Example 5.

Step	Action
1.	Effective Date for ESA is in the week which includes Uprating A day (the first Monday following 6th April)
2.	ESA calculation uses the new uprated amounts
3.	Using the uprated amounts for IB and/or IS recalculate the final IB and/or IS award

	This is now Amount A
4.	Using the revised amount A, deduct the uprated ESA amount to calculate ESA(C) TA and/or ESA(IR) TA
5.	Show calculations on the reverse of form ESA14 in the ‘Notes / Other action’ section.

Differences between IB, IS, and ESA transitional addition payments at uprating

110. IS and ESA are weekly paid benefits and uprating takes effect from the first day of the benefit week for the individual claimant following the uprating date.

111. IB is a daily paid benefit, the daily rate being one seventh of the weekly rate. When uprating occurs the IB claimant can have two different rates of benefit payable in the same benefit week.

112. This means that, for IB claimants, in cases which are reassessed during uprating week, the calculation of amount (A) will vary depending on the individual benefit week ending dates. As a result the TA will differ for those whose benefit converts during uprating week.

113. The Uprated award should display in PSCS.

Entitlement to transitional addition for both ESA (C) and ESA (IR)

114. Claimants who are entitled to both ESA (C) and ESA (IR) may be entitled to a TA on top of each element of ESA, and these must be calculated separately.

115. Where a claimant is entitled to both ESA (C) plus an ESA (C) TA and to ESA (IR) plus an ESA (IR) TA, compare the two amounts payable (including the TAs) and pay the higher amount in the normal way. See Example 6

116. Take the following action recording it on form ESA14 :

Step	**Action**
1.	Calculate the transitional addition for Income Support
2.	Calculate the transitional addition for Incapacity Benefit
3.	Compare entitlement to ESA (C) + TA (C) with entitlement to ESA (IR) + TA (IR) and pay the higher amount.

4.	Where ESA (IR) exceeds the ESA (C) amount, the full amount of ESA (C) and the ESA TA (C) remains taxable.

Awards of ‘transitional additions only’ on conversion

117. Exceptionally, there may be claimants whose occupational pension (in ESA (C) cases) and/or income/earnings (in ESA (IR) cases) at the point of conversion, is such that, applying the normal assessment rules, they have no entitlement to ESA (IR) or to payment of ESA (C), but who are nevertheless entitled, in applying the TA calculation, to a TA of either ESA (C) or ESA (IR) (or both) as appropriate. These are referred to as “TA only” cases.

118. In some few cases this may result in the claimant being slightly better off after reassessment. See Example 7

119. An award of “TA only” is a legitimate award of ESA. Where, therefore, it is in payment on an income-related basis, the claimant will be entitled to the “passported” benefits (e.g. housing benefit, free prescriptions etc) and eligible for budgeting loans and community care grants from the social fund, in the normal way.

120. Any awards of TA only will be subject to normal erosion and termination rules.

121. Take the following action recording on form ESA14:

Step	Action
1.	Calculate the transitional addition for Income Support
2.	Calculate the transitional addition for Incapacity Benefit
3	Complete assessment for ESA (C) and ESA (IR)
4	Assessment calculation results in nil award of ESA (IR). TA (IR) is unaffected
5	Assessment calculation results in nil award of ESA (C). TA (C) is unaffected
6	Compare entitlement to TA (C) with entitlement to TA (IR) and pay the higher amount.
7	Where TA (IR) exceeds the TA (C) amount, the full amount of TA (C) is taxable

Erosion of the transitional addition

122. The TA is reduced (but not below nil) by the total of relevant increases in the amount of ESA payable which occur on or after the effective date.

Meaning of “relevant increase” for Contribution Based Employment and Support Allowance

123. A “relevant increase” for the purposes of ESA (C) is an increase in the claimant’s prescribed amount of ESA

on moving to a higher component i.e. the Support Component (SC) instead of the Work Related Activity Component (WRAC)

as a result of uprating. See Example 8

‘Relevant Increase’ – Adult Dependency Increase or Child Dependency Increase end

124. When Child Benefit (CHB) ceases or the adult dependant leaves or dies, and, prior to the effective date, ADI or CDI had been in payment in the incapacity award, the amount of any TA in payment will be reduced, (but not below nil) by an amount equivalent to the relevant CDI or ADI previously in payment.

125. Take the following action to calculate TA with ADI recording it on Form ESA14:

Step	**Action**
1.	Calculate transitional addition for Incapacity Benefit claimant
2	Adult Dependant leaves. Note the ESA14 that the ADI for: Dependant’s name National Insurance Number Date of Birth Has been removed. Also note: Date of removal Reason for Removal Amount available to be removed
3	Recalculate the TA (C)
4	Compare entitlement to ESA (C) + TA (C) with entitlement to ESA (IR) + TA (IR) and pay the higher amount.

126. Take the following action to calculate TA with CDI recording it on Form ESA14

Step	Action
1.	Calculate transitional addition for Incapacity Benefit claimant
2	Child Dependant leaves. Note the ESA14 that the CDI for: Dependant’s name Child Reference Number Date of Birth Has been removed. Also note: Date of removal Reason for Removal Amount available to be removed
3	Recalculate the TA (C)
4	Compare entitlement to ESA (C) + TA (C) with entitlement to ESA (IR) + TA (IR) and pay the higher amount.

“Relevant increase” for Income Related Employment and Support Allowance

127. A “relevant increase” for the purposes of ESA (IR) is an increase in the claimant’s applicable amount, attributable to -

- the entry of a new partner into the assessment
- a move to a higher component ie the SC instead of the WRAC
- the award of any new premium
- Pensioner Premium (PP)
- Severe Disability Premium (SDP)
- Enhanced Disability Premium (EDP)
- Carer Premium (CP), or
- uprating.

See Example 9

128. The reinstatement of a premium will normally erode the TA, but see header ‘Exception’ below.

Exception

129. Where the increase in the award amount is the result of the reversal of any decision (on appeal or otherwise) that

- 130. Take the following action: a person who was previously entitled to the Support Component (SC) and Enhanced Disability Premium (EDP)
- has become entitled to the WRAC
- becomes entitled to SC on reversal of the decision
- will retain the original TA (less any uprating erosion)

Step	Action
1.	Claimant in Support Group (SG) is entitled to ESA (IR) with TA (IR)
2.	WCA outcome now places him in Work Related Activity Group (WRAG) the ESA (IR) applicable amount is decreased no effect on TA
3.	Decision to place him in the WRAG is overturned and claimant is placed in the SG from the original decision date: ESA (IR) applicable amount increases No effect on TA – it remains at the same value as at Step 1 (less any uprating erosion) Pays arrears of ESA (IR) from date of decision.

12 week linking rule

131. The normal linking rule will apply to the IB (IS) Reassessment. If a period of limited capability for work (LCW) is separated from another by no more than 12 weeks, the TA will be re-instated (from the outset of the repeat award) subject to a fresh determination of LCW.

132. For the amount of the TA to be re-instated, see Value of TA to be re-instated

133. If the claimant is a Work or Training Beneficiary and may be entitled to Housing Benefit (HB), their Local Authority may contact you. Use the locally agreed procedures to provide the information the Local Authority require.

Termination of transitional addition

134. Entitlement to a TA terminates -

when the TA is reduced to nil (but not below nil) by the total of relevant increases in the amount of ESA payable which occur on or after the first day of the benefit week after the benefit week of which the effective date is the first day.

when the claimant’s entitlement to ESA ends on 5 April 2020, which is the termination date of all TA awards whichever of these occurs earliest.

135. Once terminated, TA can only be reinstated:

- on revision
- when an appeal is successful
- the “special rule” around the partner’s full time work applies
- linking rule applies.
- Claimant starts part-time working

136. If a claimant has earnings from work which exceed the Permitted Work (PW) limit, they are treated as not having LCW and their ESA entitlement terminates. Their TA terminates at the same time

Effect of increase in capital

137. If a claimant receiving ESA (IR) with a TA has capital which becomes equal to or greater than £16000.01, they will lose their entitlement to ESA (IR), and their TA (IR) will also terminate. Claimant will revert to become a Credits-only or ESA(C) case.

Partner starts full-time work

138. Where the claimant ceases to satisfy the conditions of entitlement to ESA (IR), any entitlement to ESA (IR) TA will normally terminate at the same time. However, a special rule applies where the partner of an ESA (IR) claimant starts full-time work.

139. Where a claimant’s entitlement to ESA (IR) and ESA (IR) TA terminates because their partner has found full-time work, then if following a change of circumstances, the claimant re-establishes their entitlement to ESA (IR) within 12 weeks of the termination of the previous award (because the partner has subsequently given up full-time work), they will retain their entitlement to the income-related TA from the outset of the repeat award. The claimant themselves will have continued on ESA (C) (with an ESA (C) TA, where appropriate), or on a credits-only basis, so will not need to undergo any fresh test of LCW before the ESA (IR) TA can be reinstated. See Example 11.

140. Where the claimant

- loses entitlement to ESA(IR) and ESA(IR) TA because the partner starts full time work and
- subsequently does not have LCW following a WCA or because of starting non-exempt work
- loses entitlement to ESA(C) or credits, but then
- regains entitlement to ESA(C) or credits
- **and** the partner ceases full time work
- **both** within 12 weeks of the termination of the previous award, the claimant will retain their entitlement to the income-related TA from the outset of the new award of ESA(IR).

141. Where a claimant’s entitlement to ESA (IR) and ESA (IR) TA terminates because their partner has found full-time work, and the claimant subsequently re-establishes their entitlement to ESA (IR) but there is a gap of more than 12 weeks between awards, they will not become re-entitled to the ESA (IR) TA.

Withdrawal of transitional addition pending appeal

142. Awards of TA will be suspended where a claimant loses their entitlement to ESA following a WCA and, following the receipt an Appeal Response Request from HMCTS, becomes entitled to an award of ESA at the assessment rate pending the outcome of that appeal.

143. This suspension will apply until such times as the appeal is determined by the First-tier Tribunal or is otherwise disposed of.

Entitlement to Employment and Support Allowance reinstated on revision or appeal

144. Where a decision ending entitlement to a converted award of ESA is reversed on revision or appeal, entitlement to the TA may be reinstated. See Example 12.

Value of the transitional addition to be reinstated

145. Where TA is re-instated on a repeat claim or where the “special rule “ around partner’s full time work applies, the value of the TA must be adjusted, where appropriate, to reflect any reductions in the amount that would have taken place had there been no break in the award. See Example 13.

146. Where a case is wholly clerical, deductions must be recorded on the ESA14.

147. Where the claimant has had a reduction in the rate of benefit for failure to attend a WFI, that reduction of benefit cannot be transferred to ESA.

Including Deductions on ESA14

148. When the ESA14 has been completed and either ESA (C) or ESA (IR) has been awarded, complete the ‘Deductions’ panel with the appropriate deduction(s) in section 17 ‘Deductions’.

Third Party Deductions

149. Take the following actions to record third party deductions on form ESA14 when it has been completed to box 16:

Step	Action
1.	View data gather template to identify any deductions taken from the claimants IB/IS
2.	Note each deduction on the reverse of the ESA14, and record for each, using the data gather template: the amount outstanding, including any arrears, **at the effective date** (calculate this figure including all deductions made up to the effective date. The amount outstanding at the effective date must then be input on the data gather template) the end date of the deductions (if this isn’t known, it must be calculated) the amount of the final deduction prior to the debt being cleared (if this isn’t known, it

	must be calculated)
3.	Make a separate entry for each deduction from the claimants entitlement in box 17
4.	Record what the deductions are for in the ‘For’ field
5.	Record the amount of the deduction in the ‘Amount’ field
6.	Record the amount being deducted for arrears in the ‘Arrears’ field (ensure the correct uprated amounts are used when applicable)
7.	Add together the deductions input in the ‘Amount’ and ‘Arrears’ field and show the calculations in the ‘Notes/Other Action’ box on the reverse of the ESA14
8.	When all deductions have been recorded add together each of the amounts in the ‘Total’ field and show the calculations in the ‘Notes/Other Action’ box on the reverse of the ESA14
9.	Input the total amount of deductions required in the joint total box under columns A and B
10.	Complete the rest of ESA14 as per current guidance
11.	Create a BF for the end date of each deduction to complete a revised ESA14 to: amend the amount of the final deduction made (if the amount deducted is less than the normally deducted amount) reassess the award when the debt has been cleared
12.	Issue clerical notification IBM76B by first class post to each creditor to inform them the claimant has been Reassessed for ESA and their deductions will continue as normal. The address will be held in the clerical papers. Note on the A22 and on reverse of ESA14 that the notification has been sent
13.	Take action to end the IB/IS case and continue assess and award process. When

	ending the IB/IS do not send the normal deduction end notifications to the claimant.

Deductions for Overpayments

150. When a deduction has previously been made on the IB or IS clerical case for an overpayment, take the following action:

Step	Action
1.	Complete the IB (IS) Reassessment Debt Management e-mail template and ensure the following information is recorded: claimants Name and National Insurance Number (NINo) case is part of IB (IS) Reassessment end date of IB/IS ESA start date (the Effective date) claimants ESA award if they have a valid appeal
2.	Send the completed template to the Central Debt Management inbox ‘SHSVCS Debt Management IB Migration’
3.	In the ‘Notes/ Other Action’ box on the ESA14, A22 and clerical tracker, note that the e-mail has been sent to Debt Management and the date it was sent
4.	Complete the ESA14 with details of the overpayment and any other appropriate deductions
5.	Debt Management will return details of the overpayment to the Reassessment team
6.	Make the ‘Entitlement Call’ to the claimant and inform them of the deductions being taken from their benefit. Take further action as found in payment and notification guidance.

Deductions for Social Fund loans

151. When a deduction has previously been made on the IB or IS clerical case for a Social Fund loan, take the following action:

Step	Action
1.	Complete the ESA14 with details of the existing Social Fund loan and any other appropriate deductions. The current Repayment Programme and the Repayment Schedule for the Social Fund loan is held in the clerical papers.
2.	Set a BF for the effective date on A22 and clerical tracker
3.	At the effective date complete part 'C' of the Repayment Programme and Repayment Schedule held in the clerical papers, by ticking 'Other' and annotating with 'IB(IS) Reassessment case now moving to ESA' and send this to Social Fund.
4.	Set a BF for 14 days from the effective date, to await the new Repayment Programme and Repayment Schedule. Note this on the A22 and clerical tracker.
5.	If the BF matures and the new Social Fund Repayment Programme and Repayment Schedule have **not** been received, contact Social Fund to check that it has been sent. Set a further BF for 7 days.
6.	Social Fund will update SFCS with the IB or IS end date and that the recovery source is now ESA. New Repayment Programme and Repayment Schedule will be issued to the owning office
7.	When the new Social Fund Repayment Programme and Repayment Schedule is received, ensure the ESA14 is correct with the appropriate Social Fund deductions. Note on the reverse of the ESA14 the total amount of the loan and the date the loan will be repaid
8.	Ensure CPS(LP) payment schedule is correct
9.	The SPOC on the reassessment team sends part B of the new Repayment Programme and Repayment Schedule to Social Fund to acknowledge that deductions have been implemented clerically. Note this on the A22 and clerical tracker. Social Fund will update SFCS accordingly when received.
10.	Create a BF for the end date of the deduction to complete a revised ESA14 to:

	the amount of the final deduction made (if the amount deducted is less than the normally deducted amount) the award when the debt has been cleared Note this on the A22 and clerical tracker

152. When a Social Fund deduction has previously been made on an Incapacity Benefit or Income Support case, and the claimant has been disallowed, take the following action:

Step	**Action**
1.	Close the IB or IS case.
2.	At the effective date complete part ‘C’ of the Repayment Programme and Repayment Schedule by ticking ‘Other’ and annotate with ‘IB (IS) Reassessment case. ESA disallowed.’
3.	Send part ‘C’ of schedule to the appropriate Social Fund office

153. Where Flat Rate Maintenance (FRM)Child Maintenance deductions(CMD) were being taken from IB (IS) cases these deductions will continue to be taken.

Step	Action
1.	Check IB/IS case for existing FRM/CMD deductions
2.	Where there are existing FRM deductions, or new FRM/CMD deductions complete form IBM300
3.	Send IBM300 by courier, marked ‘RESTRICTED,’ to 2012 Scheme Maintenance Team Plymouth CSAC (Dartmeet Wing Clearbrook House Towerfield Drive Bickleigh Down Business Park Plymouth

	Devon PL6 7TN) - ensuring that the following information is included: Claimant’s surname Claimant’s NINO
4.	and retain in a copy of the IBM300 for 30 days pending any checks/queries.
5.	30 days destroy the IBM300
6.	Include FRM /CMD deductions on ESA14.

154. When a clerically held ISCS case is ended, the mortgage lender would normally be sent a clerical notification of the end of the MID payments.

155. When ESA is awarded and paid clerically, any future payments of Mortgage Interest Direct (MID) must be paid through the Central Payment System (CPS)/Local Payment System (LPS) to the lender as per the current process.

156. A sanction is a penalty imposed by a Decision Maker which may result in a deduction from benefit.

157. WFI sanctions on the claimant’s IB/IS cannot be carried forward to ESA, as they only apply to the existing award, which is terminated on IB (IS) Reassessment.

158. A sanction imposed following a conviction for a fraud offence, known as a loss of benefit provisions will continue on an award of ESA.

159. When the reassessment case has been assessed, the claimant must be notified that their Incapacity Benefit /Severe Disablement Allowance/Income Support case has been converted and that they have been awarded ESA.

160. The notification must be by a telephone call to the claimant and followed up in writing using form IBM260 /IBM260W . Ensure that where a claimant living in Wales has expressed a preference for communication with the Department in Welsh, that a Welsh speaker makes this call.

If the claimant does not have a telephone or does not want to be contacted by phone, issue the notification of allowance immediately.

The action to assess the award, complete the notification and make the call to the claimant must be completed on the same day.

Retain the written notification until the claimant has been notified by telephone. Once the telephone call has been made, post the written notification along with the ESA14N (ESA14NW for Welsh speaking claimants).

If it has not been possible to contact the claimant by telephone after three attempts have been made, post the notification and issue failed contact letter and ESA3.

If the claimant is a person without an address (PWA cases) the local office should have already established clear communication links at the earliest point of contact and ensured the required attendance and conditions for payment and notifications were comprehensively explained.

Telephone call to claimant who has been awarded ESA

161. Action to take when contacting the claimant by telephone:

Step	Action
1.	Using the telephone number for the claimant contained on the clerical case papers or A22, telephone the claimant. Ensure that where a claimant living in Wales has expressed a preference for communication with the Department in Welsh, that a Welsh speaker makes this call
2.	Ensure the appropriate security questions contained on the e-mail template completed by the owning office, to validate the identity of the claimant/PAB/COB, have been asked, before giving further information
3.	Use the Desk Aid to carry out the telephone call.
4	Direct Payment (DP) is the normal method of paying ESA. This is a cost effective, safe means of payment, which is less open to fraud. A Direct Payment is a payment of benefit paid directly into a claimant’s bank, building society, credit union or Post Office card account. If the account details have not been supplied, a Method of Payment discussion must take place during the allowance call. Direct Payments are issued at the same frequency as other method of payments.

162. As the newly reassessed cases will continue to be maintained clerically Claimant Information System (CIS) must be notified and action taken to register the clerical ESA interest on CIS .

163. To register the clerical ESA interest in PD350, the Reassessment team must send the Clerical Interest Template to the relevant Benefit Centre (BC). See Register ESA Interest Desk Aid

164. The user must include their:

Name

Reassessment Office

Phone Number

in case the ESA owning office needs to contact the Reassessment team.

165. The Name and National Insurance number must be entered for each claimant for whom clerical interest requires registering, and a separate template must be sent to each relevant BC.

166. Clerical interest must be registered within 24 hours, and will be confirmed by the return of the template to the original sender.

167. Once the ESA claim has been assessed, form ESA14P must be completed in order to pay the claimant.

168. The ESA14P has been amended for Reassessment to include columns for:

ESA (C) TA in column 6

ESA (C) TA payment code (correct code is 671) in column 7

ESA (IR) TA in column 8

ESA (IR) TA payment code (correct code is 672) in column 9

to help when completing the correct fields on CPS(LP).

169. The ESA (C) TA amount can be found in Box 8 Column A of ESA14 .

170. The ESA (IR) TA amount can be found in Box 8 Column B of ESA14.

171. Third Party Deduction amounts must be input into CPS(LP) to ensure creditors are sent payments at Chapter 9 of current process .

172. As the details of the payment are maintained clerically (they are not recorded on any benefit system), full payment information must be recorded on Central Payment System (CPS)/Local Payment System (LPS) using this guidance and the appropriate CPS(LP) guidance.

173. This is to allow full accounting information to be obtained.

174. In Reassessment cases, the amounts for the ESA (C) and ESA (IR) TA must be input separately from the ESA (C) and ESA (IR) and can be taken from the information held in column's 6-9 on the ESA14P.

175. Action to take on CPS(LP)

Step	Action
1.	Access CPS(LP)

2.	View the ongoing payment schedule set up by the owning office before they sent the clerical case papers.
3.	Cancel the ongoing payment schedule from the day before the Effective Date.
4.	Set up a new ongoing payment schedule for the maximum period – 13 payments from the Effective Date.
5.	The action to take to make and authorise the first payment of ESA on CPS(LP) is in existing CPS(LP) guidance.
6.	Set a BF for the date after the first ESA payment has been issued and record this on the A22
7.	Once the first payment has been made, transfer the case to the BAU BC ESA Team.

Use of drugs and alcohol identified on ESA50

176. When a completed ESA50 is returned by health Assessment Advisory Service in the ESA55 check the question on page 7 headed “Drugs, alcohol and other substances”.

177. If the “yes” option has been ticked to indicate the claimant has a drug or alcohol related problem, send form IBM23 to the ASO recording exactly on Part 3 of the form – ‘Drug/Alcohol misuse’ - the information provided by the claimant.

178. This is in addition to the JA674 action.

179. When the reassessment case has been assessed, the claimant must be notified if they:

- have undergone the Work Capability Assessment (WCA) process and been found not to have Limited Capability for Work (LCW)
- they are not treated as having LCW because
- they have not returned the ESA50 after reminder and subsequent ‘good cause’ action, or
- they have failed to attend (FTA) the WCA after reminder and subsequent ‘good cause’ action, or
- they have failed to participate (FTP) in the WCA and reasonable steps were taken to explain the consequences of non-participation.

180. The disallowance decision will be taken if ‘good cause’ has been considered and rejected.

181. For the specific actions to take, depending on the reason for disallowance go to:

- Claimant has no Limited Capability for Work
- Claimant fails to return ESA50 to Health Assessment Advisory Service
- Claimant failed to attend a Work Capability Assessment

- Claimant fails to participate/comply in the Work Capability Assessment

182. When issuing the IB (IS) Reassessment disallowance notification to the claimant, the user should enter the relevant details from the following list:

- Reassessment office details and telephone number
- Claimant’s Reference Number
- Claimant’s address
- Claimant’s Title and surname
- Date of last payment of IB/IS if there is no other condition of entitlement to IS
- Dates for non-return of ESA50 and reminder letter (if appropriate)
- Date claimant failed to attend the WCA (if appropriate)
- Date from which IS payment will start if there is another condition of entitlement
- The condition of entitlement to IS
- Signature.
- IB (IS) Reassessment Disallowance Notifications

183. The following IB (IS) Reassessment specific disallowance notifications are available and must be used where appropriate.

Form	Description
IBM280A IBM280AW	Failed to Attend WCA
IBM280B IBM280BW	Failed to Attend WCA – another condition of entitlement to IS
IBM280C IBM280CW	Failed to Attend WCA – deductions being taken from benefit
IBM280D IBM280DW	Failed to Attend WCA – another condition of entitlement to IS – deductions being taken from benefit
IBM280E IBM280EW	Non-return of ESA50
IBM280F	Non-return of ESA50 – another condition of entitlement to IS

IBM280FW	
IBM280G IBM280GW	Non-return of ESA50 – deductions being taken from benefit
IBM280H IBM280HW	Non-return of ESA50 – another condition of entitlement to IS – deductions being taken from benefit
IBM280i IBM280iW	No LCW
IBM280J IBM280JW	No LCW – another condition of entitlement to IS
IBM280K IBM280KW	No LCW – deductions being taken from benefit
IBM280L IBM280LW	No LCW – another condition of entitlement to IS – deductions being taken from benefit

Claimant has no Limited Capability for Work

184. Where the Reassessment Decision Maker (DM) determines that a claimant potentially does not have Limited Capability for Work (LCW), an attempt must be made by the DM to contact the claimant or their representative by telephone before the disallowance of their Incapacity Benefit/Income Support (IB/IS) is put into effect. This is called the 'Decision Assurance' call.

185. This call is designed to help claimants decide on the next steps. It includes contacting the claimant:

- to explain that based on the information available it looks like the claimant will be disallowed
- to ask if they wish to provide any further relevant information
- to inform them of the disallowance process, explain the decision and discuss further options with them
- to explain that their benefit will cease from the effective date if they are disallowed
- to explain the next steps available to the claimant

- moving to another benefit – IS or Job Seekers Allowance (JSA)
- seeking a reconsideration of or appealing against the decision
- leaving benefit
- taking the appropriate steps to progress the claimant’s preferred option.
- ‘No LCW’ Decisions Notified on or after 28 October 2013

186. If a claimant is notified that they have no LCW on or after 28 October 2013 and they wish to dispute the decision, they must first have a Mandatory Reconsideration and receive a Mandatory Reconsideration Notice before they can lodge an appeal with HMCTS.

187. The effective date is calculated from the date that the disallowance notification is sent to the claimant. This means the effective date may be delayed if the claimant requests time to submit further evidence in support of their claim.

188. Action to take when claimant has no LCW:

Step	Action
1.	Health Assessment Advisory Service’s reply received on MSRS
2.	Claimant Service Officer (CSO) accesses MSRS. Using the Health Assessment Advisory Service’s recommendation decides claimant may not have LCW
3.	CSO must check for a possible other condition of entitlement to IS
4.	Calculate a provisional effective date
5.	Note that this is a potential disallowance case, note the provisional effective date and that a Decision Assurance call is required
6.	If claimant potentially has no LCW, case must be passed to a DM
7.	DM to review information in clerical papers
8.	the following in each case for any conflicting information: Medical Certificate ESA50– claimant’s view ESA85 report from the Health Assessment Advisory Service

	any other evidence held. Record in the Decision Making and Appeals Case Recorder (DMACR)
9.	If there is any evidence that is contradictory or further information is needed on any medical aspect of the case, contact the Health Assessment Advisory Seervice for advice
10.	Prepare appropriate IB (IS) Reassessment notification of disallowance and IBR65. Do not issue at this stage
11.	all facts have been established and the claimant still appears to have no LCW, the DM must make the Decision Assurance call to the claimant to: explain that based on the information available the claimant will be disallowed ask if they are able to provide any additional relevant information.
12.	the call is unsuccessful, a further 2 attempts to contact the claimant must be made, leaving 4 hours between each attempt. Note all attempts and outcomes on the A22
13.	unable to contact the claimant, issue the disallowance letter IBM280i
14.	during the call, the DM decides that based on all the evidence the claimant does not have LCW, the DM must: continue the Decision Assurance call, using the Disallowance Call (2) deskaid explain disallowance and next steps
15.	Where the claimant does not wish to provide any additional evidence, continue with the call, explaining the claimant’s options. They can either: seek a reconsideration or appeal apply for Jobseekers Allowance receive IS under another condition of entitlement leave the benefit system altogether **to step 23**

16.	claimant wishes to provide further relevant information: tell the claimant to provide the information in writing end the call and Bf for 2 weeks to await this information update the clerical papers with the action taken on the case continue to pay IB/IS
17.	If claimant submits the further relevant information and is found to have LCW take action to assess and award
18.	If claimant questions the decision, follow process for reconsideration and appeals. For disputed decisions notified on or after 28 October 2013. See Mandatory Reconsideration
19.	the BF matures, telephone the claimant again to query if claimant intends supplying the information. If claimant still wishes to supply the information set a further Bf for 5 working days or as appropriate if claimant is waiting on a third party e.g. hospital consultant
20.	a further 5 working days has elapsed and the information or evidence has not been received, phone the claimant to confirm that they have now been disallowed ESA. Go back to step 15 to explain the claimant's options
21.	If on re-examination of the evidence the claimant has LCW, take action to assess and award the case. Update the clerical papers with action taken on the case
22.	on re-examination of the evidence the claimant does not have LCW, the DM must: calculate the effective date and update the clerical papers continue the Decision Assurance call, using the Disallowance Call (2) deskaid explain disallowance and next steps
23.	the appropriate clerical disallowance notification to the claimant with the IBR65 and close the IB/IS claim whether clerically maintained or maintained on ISCS.

24.	Set a Bf for one calendar month from the date of the disallowance notification, to allow for the receipt of a letter of appeal
25.	Where the claimant has stated that they intend to continue with their claim to IS under a further condition of entitlement, the CSO must: close the IB claim assess the award for IS using another condition of entitlement create a new payment schedule on CPS(LP) from the effective date if the IS case is clerically maintained.
26.	Where the claimant has stated that they **intend** to make a claim to IS or JSA, the CSO must close the IB claim from the day before the effective date
27.	Make a note of all contacts and outcomes with the claimant
28.	File clerical papers for a month

Claimant decides to apply for Jobseekers Allowance

189. If, during the decision assurance call, the claimant decides to claim JSA, explain to the claimant that although JSA can be claimed in advance, the claim will not be effective until the Effective Date. Their IB/IS will be paid until the day before the Effective Date.

190. Transfer the claimant to the Contact Centre Directorate (CCD) for JSA data gather, using the following warm handover process:

Step	Action
1.	While the claimant is on the phone, press the ‘3 Way Call’ button to put the claimant on hold
2.	Dial the staff priority number for CCD, 01367 733123. **Please note that this number must not be given out to claimants**
3.	When connected to the First Contact New Claims Agent explain that the claimant you have on hold has been informed they are not eligible for reassessment to ESA and have chosen to claim JSA

4.	Press the ‘3 Way Call’ button again to connect all three parties
5.	Hang up the call and the JSA new claim agent will take the claimant through the JSA new claim process.

Identifying another condition of entitlement to IS

191. To identify another condition of entitlement to IS, before making the decision assurance call, check the clerical case papers, ISCS where appropriate and A22.

192. Where there appears to be a further condition of entitlement, for example the claimant is a carer in receipt of Carer’s Allowance, ask the claimant whether they wish to remain on IS with this condition of entitlement.

193. If the claimant decides to remain on IS under another condition of entitlement inform them that although they may remain on IS,

any disability premium in payment awarded on the basis of their incapacity alone will be withdrawn

they will lose their entitlement to a National Insurance credit in respect of their ‘incapacity for work’

if their other condition of entitlement is because they are a carer, in receipt of Carer’s Allowance, they will still be entitled to a National Insurance credit

194. Reassess the IS claim using another condition of entitlement.

195. If the claimant is not entitled to ESA and has not made the decision on whether or not to remain on IS under another condition of entitlement before the Effective Date, it will, by default, be deemed that they wish to carry on receiving IS. This will safeguard their continuity of benefit.

Claimant does not make decision whether to remain on IS before the Effective Date

196. If the claimant is not entitled to ESA and has not made the decision on whether or not to remain on IS under another condition of entitlement before the Effective Date, it will, by default, be deemed that they wish to carry on receiving IS. This will safeguard their continuity of benefit.

complete a new A14 with the details of the new condition of entitlement

input the Effective Date as the date of claim or change

end their current payment on CPS(LP) the day before the Effective Date

set up a new payment schedule for 13 fortnightly payments or 26 weekly payments with their new amount of IS

transfer the case papers back to the original owning office.

197. Where the IS case is maintained on ISCS follow existing procedures.

Claimant fails to return ESA50 to the Health Assessment Advisory Service

198. Action to take when claimant has failed to return (FTR) ESA50 to the Health Assessment Advisory Services

Step	Action
1.	The case papers must be passed to a DM and the DM must follow existing processes to establish good cause
2.	If good cause is accepted, use MSRS guidance for correct process
3.	If good cause is not accepted, and the IS claimant has satisfied another condition of entitlement to IS, it will be deemed, by default, that they wish to carry on receiving IS
4.	If there is no other condition of entitlement to IS, continue to follow existing processes to disallow ESA and IB/IS under same decision
5.	The DM must issue the IB (IS) Reassessment clerical disallowance notification IBM280E. Issue form ESA75
6.	Record disallowance on DMACR
7.	The CSO must end the IB and IS claims and update clerical papers and IS110 Notepad where appropriate that the claimant has failed to return the ESA50.

Late return of ESA50 following disallowance

199. In event of the ESA50 being returned after the FTR decision has been made, the user should take the following action:

Step	Action
1.	If the ESA50 is returned late, the user must first taken action to establish if they have good cause
2.	If the claimant subsequently demonstrates good cause and this is accepted by the DM, since they have not yet completed their WCA, reinstate their IB/IS and recommence Reassessment from the point it ceased. Claimants should be referred again to the Health Assessment Advisory Service. Create an ‘S referral’

3.	Record the good cause determination in the clerical papers and IS110 Notepad where appropriate
4.	Where the DM does not accept Good Cause for the late return of the ESA50, there will be no change to the original outcome decision disallowing IB/IS. This decision will however extend the time for submitting an appeal if a written application for revision is made within the one month period
5.	Prepare the IB (IS) Reassessment specific clerical disallowance notification
6.	Decision maker will notify the claimant of the decision and issue the disallowance notification
7.	Record disallowance on DMACR
8.	Note the clerical papers that claimant has been disallowed due to late return of the ESA50

Claimant has failed to attend a Work Capability Assessment

200. If the claimant has Failed To Attend (FTA) a Work Capability Assessment take the following action:

Step	**Action**
1.	MSRS receives notification that WCA outcome is available, that the claimant ‘Did Not Attend’.
2.	Check for a possible other condition of entitlement to IS. Where another condition of entitlement to IS exists, note the condition in the clerical papers and IS110 Notepad where appropriate
3.	Case must be passed to a DM
4.	The DM must follow existing processes to establish good cause

5.	If good cause is accepted, select link to MSRS User Guide for correct process
6.	If good cause is not accepted, check to see if IS claimant has satisfied another condition of entitlement to IS. If the entitlement conditions are satisfied, it will be deemed, by default, that they wish to carry on receiving IS
7.	If there is no other condition of entitlement to IS, continue to follow existing processes to disallow ESA and IB/IS under same decision
8.	Close the IB from the day before the Effective Date and the IS claim from the Effective Date
9.	Issue the IB (IS) Reassessment clerical disallowance notification IBM280D. Issue form ESA75
10.	Record disallowance on DMACR

Claimant fails to participate/comply in the Work Capability Assessment

201. When a claimant attends a WCA assessment but fails to participate/comply with the process, the assessment is terminated by the Health Assessment Advisory Service. This may happen where the claimant:

- poses a threat to staff or others
- shows inappropriate or threatening behaviour
- shows intoxication from alcohol or substance abuse
- is persistently uncooperative.

202. If the claimant’s behaviour is considered to be unreasonable, see guidance on Unacceptable Claimant Behaviour .

203. When the claimant has failed to participate in the WCA a further appointment will be arranged by the health Assessment Advisory Service.

204. If the claimant’s assessment is terminated for a second time, the Health Assessment Advisory Service will record a full and detailed account of the claimant’s behaviour and the reasons for terminating the assessment on the ESA85MIN. This should be treated as a ‘Failed to Attend WCA Assessment’ and actioned as appropriate.

205. When claimant has no Limited Capability for Work (LCW), the decision assurance call has been made and the formal decision to disallow has been made, take the following action:

Step	Action
1.	Issue the appropriate clerical disallowance notification to the claimant with the IBR65 (IBR65W)
2.	Note on the A22 a BF date of one calendar month from the date of the disallowance notification, to allow for the receipt of a letter of appeal
3.	Where the claimant has stated that they intend to continue with their claim to IS under a further condition of entitlement: disallow IB, where the IS case is clerically maintained, end the current payment schedule on CPS(LP) from the day before the effective date close the claim assess the award for IS using the further condition of entitlement create a new payment schedule on CPS(LP) from the effective date where the IS case is maintained on ISCS follow the process in existing guidance
4.	Where the claimant has stated that they intend to make a claim to IS or JSA, disallow IB, end the current payment schedule on CPS(LP) from the day before the effective date and close the claim
5.	Make a note of all contacts and outcomes with the claimant on A22
6.	File clerical papers for a month.

206. Whether a claimant has been allowed or disallowed ESA, the existing claim must be closed from the day before the Effective Date, unless the claimant is claiming IS and wishes, or can be deemed, to claim under another qualifying condition.

207. Actions to take to close any existing IB/SDA or IS clerical cases are as follows:

Step	Action
1.	Complete an A14A/A14 with the Effective Date input as the date of change, showing a

	nil entitlement
2.	For IB/SDA cases update the BF40 (clerical rating sheet) with the end date of the claim, which is the day before the effective date
3.	Action any outstanding BFs, where this is possible. All other BFs must be transferred to the new clerical ESA claim
4.	Send a P45 to the claimant
5.	Ensure the current payment schedule is closed from the day before the effective date. Where the claimant has been allowed ESA, set up a new payment schedule in CPS(LP) for 13 fortnightly payments, or where the claimant is still weekly paid, 26 weekly payments, starting from the effective date
6.	Update Decision Maker and Appeals Case Recorder (DMACR) with the new ESA award details
7.	Ensure the clerical IB interest in CIS has been closed. Where the claimant has been allowed ESA, arrange for clerical ESA interest to be registered in PD350
8.	Where the claimant was claiming IS and has been disallowed ESA, close the IS claim and end the clerical IS interest in CIS
9.	Terminate the IB liabilities via eNIRS2
10.	Award IB/SDA credits via eNIRS2 where appropriate
11.	When the claimant's effective date has been reached, complete form IBM23 to notify the Adviser Support in the appropriate Jobcentre to create the LMS record.

208. Do not issue the Clerical notifications that would normally be issued when an IB or IS claim is closed. These notifications do not reflect the reassessment process.

Local Authorities

209. When ESA has been allowed or disallowed on a case where Housing Benefit has been claimed, issue NHB (ESA) Clerical to the local authority, noting on the form that this is an IB (IS) Reassessment case and the effective date.

Mortgage lenders

210. When ESA has been allowed, issue a clerical notification to the lender.

211. When ESA has been disallowed, issue clerical disallowance notification M1076, to the lender.

Third parties

212. When ESA has been allowed, issue a clerical notification to third parties, IBM76B (IBM76BW) (This was formerly A76B).

213. When ESA has been disallowed, issue clerical disallowance notification IBM79B (IBM79BW).

Claimant's GP

214. When ESA has been disallowed because the claimant has been found capable of work, issue a clerical notification, ESA65B (ESA65BW) to their GP.

HM Revenue & Customs

215. When the IB clerical claim has been closed, issue the appropriate P45 to HMRC and send an IB107 to the Tax Liaison Section (TLS) to notify them of the details of taxable benefit that has been paid off-line. At the end of the tax year the TLS then issue a clerical P14 to HMRC.

216. Issue a PB3 on the effective date to inform HMRC that there is a clerically maintained taxable ESA claim.

217. When some, or all, of the ESA award is ESA (C) issue a PB3 and annotate with 'IB (IS) Reassessment Claim'.

218. On a disallowed case where the claimant appeals and is awarded assessment phase rate ESA, and some, or all of the award is ESA (C), issue a PB3 and annotate with 'IB (IS) Reassessment Appeals Case'.

219. Where the whole award is ESA (IR) do not issue a PB3 to HMRC.

220. Where a claimant was in receipt of IB prior to 13 April 1995, annotate the PB3 'Pre-1995'. This is because these cases do not hold an IB tax record and are transferring from a non-taxable benefit to a taxable one.

Child Maintenance Group

221. Where ESA has been allowed, CMEC must be notified that the ESA case is being maintained clerically where appropriate.

222. Where ESA has been disallowed, and the claimant is no longer entitled to IS, send form A421B giving final payment amount and date and reason that FRM deductions have ceased.

223. Form A421B must be sent to the single point of contact (SPOC) in CMEC.

224. Action to take to complete A421B

Step	Action
1.	Complete the claimant's personal details
2.	Input the date of change as the effective date
3.	Select 'Claim transferred to clerical'
4.	Select 'Deductions continue'
5.	In the 'Other information' box note that the claim is an IB(IS) Reassessment case
6.	E-mail completed form to the SPOC.

System Notifications

225. Where the clerical cases have been able to be built on to JSAPS, the relevant notifications will be issued automatically.

Explanation

226. Make every effort to provide the claimant with a full explanation of the reason for their disallowance before going on to reconsideration.

227. Record the explanation and the claimant's reaction on form A6 and retain in the clerical case-papers.

228. If the claimant does not accept the explanation, they should be offered the opportunity to request a reconsideration of the decision before they decide to appeal against the decision. The request for reconsideration can be made verbally or in writing. A request for an appeal must be made in writing.

229. Refer the case to the DM on form LT54 when a request for either reconsideration or appeal has been received. Retain a copy of LT54 in the clerical case papers.

Reconsideration

230. It is a requirement to contact the claimant with a view to obtaining any further evidence or information the claimant may have. There will be occasions when further evidence, medical and non-medical, is necessary. In such cases it should be obtained and looked at carefully along with all of the existing evidence.

231. Claimants who are disallowed due to FTA, FTR ESA50 or FTP can appeal against their disallowance but are not entitled to receive ESA whilst the appeal process is ongoing.

232. An appeal must be made within one calendar month from the day the outcome decision notification is posted or handed to the claimant or a person acting on their behalf. For the appeals process and type of appeals received during IB (IS) Reassessment, select the link.

Types of Appeals received during IB (IS) Reassessment

233. There can be several different outcome decisions following the Work Capability Assessment (WCA) which can be appealed against:

- Failure to Return (FTR) form ESA50
- Failure to Attend (FTA) the Health Assessment
- Failure to Participate (FTP) in the Health Assessment
- claimant attended Health Assessment and does not have Limited Capability for Work (LCW).

234. When LCW/Limited Capability for Work Related Activity (LCWRA) are met the Decision Maker (DM) determines

- claimant is in the Support Group
- claimant is in the Work Related Activity group
- claimant has a Terminal Illness .

235. There are also other types of appeal which could be received i.e. group allocation.

Handling Appeals

236. The time limit for appealing is 1 calendar month from the notification of the decision. The decision is notified when it is posted or handed to the claimant.

237. If an appeal is received more than one calendar month after the date of issue of the decision a DM should consider extending the one calendar month time limit.

238. All appeals must be received in writing and consideration given to whether they are invalid or valid.

Invalid appeal

239. If the appeal form/letter is not signed, or it contains insufficient information for the appeal to proceed all information must be returned to the claimant or their third party representatives. For further information see code of appeals procedures chapter 2 paragraph 2074.

Valid appeal

240. There is no change to the existing process for receiving a valid appeal .

241. Take the following action when valid appeal received:

Step	Action

1.	Update Decision Maker Appeals Case Recorder (DMACR) that valid appeal received
2.	Update the A22 and the clerical tracker that valid appeal received

242. Until the appeal is decided, claimants who are already on Income Support (IS) can remain on IS if they satisfy another condition of entitlement other than incapacity for example if the claimant is a carer. Other claimants may either claim IS or Jobseeker's Allowance (JSA).

243. Claimants who are found not to have LCW, and have valid medical evidence, may also receive assessment phase rate ESA pending Appeal outcome.

244. Claimants who wish to claim IS/JSA will not be entitled to receive ESA.

Appeal valid and ESA assessment phase rate not to be awarded

245. Claimants who are disallowed due to failure to show good cause for Failure to Attend (FTA), Failure to Return ESA50 form (FTR ESA50) or Failure to Participate (FTP) in the Work Capability Assessment (WCA) process, can appeal against their disallowance but are not entitled to receive ESA whilst their appeal is heard.

Appeal valid and ESA assessment phase rate to be awarded pending appeal outcome

246. Claimants who are found not to have LCW following the WCA will have their IB/IS claim terminated. The claimant can receive ESA at the assessment phase rate if they submit an appeal. This will be paid up to the conclusion of the first tier tribunal hearing or to the end date of Medical Evidence where this is earlier.

247. An IB claimant in receipt of a preserved 100% occupation pension disregard will continue to receive that disregard whilst undergoing the appeal process and receiving assessment rate ESA. (If the claimant's appeal is successful the disregard will continue.)

248. Take the following action when a valid appeal is received:

Step	Action
1.	Check for medical evidence details held in the clerical casepapers to ensure the claimant has valid medical evidence if claimant has decided to claim ESA during appeal. Where medical evidence has not previously been required, this is now a condition to continue to receive ESA at the assessment phase rate when an appeal has been received against a WCA outcome
2.	Write to the claimant to request medical evidence where this is not held. Set a 4 week Bf for return
3.	Gather the relevant information and assess and award benefit on form ESA14

4.	Where valid medical evidence is awaited, do not make any payment. Once the medical evidence has been received, check the date this has been signed. If this is on or before the effective date, pay the assessment phase rate from the effective date. If this is after the effective date, pay the assessment phase rate from the date of signing. If there is a gap between the Effective Date and the day medical evidence begins, the claimant can self certify for up to 7 days.
5.	Where valid medical evidence is already held, pay the assessment phase rate from the Effective Date.
6.	Calculate any arrears due. Note this calculation on the reverse of the ESA14 in the 'Notes / Other action' box
7.	Once the ESA claim has been assessed, form ESA14P must be completed in order to pay the claimant.
8.	Set up a new ongoing payment schedule for the maximum period – 13 payments from the Effective Date, or to the expiry of the medical evidence if that is earlier, on Local Payment System
9.	Set a Bf for two weeks prior to the expiry of the medical evidence to await receipt. Assessment Phase Rate will not continue if valid medical evidence is not received
10.	Complete and issue IBM23 form, selecting assessment phase rate box, to the Adviser Support to build Labour Market System (LMS) account
11.	Notify the Local Authority (LA) on form NHB(ESA)Clerical that ESA at the assessment phase rate has now been awarded.
12.	Arrange with owning office to register clerical interest in Claimant Information System (CIS)

Appeal valid and ESA assessment rate to be awarded - JSA in payment

249. The claimant can continue to receive JSA if they are appealing against a WCA outcome or can receive ESA at the assessment phase rate if covered by medical evidence.

Claim cannot be built on to JSAPS

250. Action to take when the claimant wants to receive ESA at the assessment phase rate and JSA is in payment and the claim cannot be built on to JSAPS:

Step	Action
1.	As claimant is in receipt of JSA, check JSAPS for any change of circumstances
2.	Access CIS to check if the claimant is in receipt of any other benefits
3.	Check that current medical evidence details are held in the casepapers. Where medical evidence has not previously been required, this is now a condition to continue to receive ESA at the assessment phase rate when appealing against a WCA outcome
4.	Note on clerical tracker and A22 that an appeal has been received
5.	As the claimant is in receipt of JSA, notify the benefit section that an ESA appeal has been received and agree a JSA closure date using current process
6.	Gather any relevant information and assess the award. Complete an ESA14 and pay only the assessment phase rate from the day after the award of JSA terminates, or from the date from which medical evidence is provided, where this is later. (Where, exceptionally the award of JSA did not commence on the effective date, the claimant will be entitled to arrears of ESA for the period between the effective date and the date of the commencement of the JSA award, provided that medical evidence is supplied in respect of the “gap” period.) Note the calculation on the reverse of the ESA14 in the ‘Notes / Other action’ box
7.	Once the ESA claim has been assessed, form ESA14P must be completed in order to pay the claimant
8.	Access CPS(LP). Do not create a payment schedule. Make a single payment to cover any arrears due and the assessment phase amount up to the claimant’s last payday
9.	Create a BF on A22 for the next payment due to the claimant. Continue to make only one payment and create a BF for the subsequent payment, until the result of the appeal is known

10.	Set a BF on the A22 for a date two weeks prior to the expiry of the current medical evidence
11.	If new medical evidence is not returned within six weeks, then reassess the award and treat the claim as having no LCW
12.	Send e-mail template to the Adviser Support as per the current process to update LMS. Clearly state this is an IB (IS) Reassessment case and the claimant's Effective Date
13.	Notify the Local Authority (LA) on form NHB(ESA)Clerical that ESA at the assessment phase rate has now been awarded.

Case can be built on to JSAPS

251. Action to take when the claimant wants to receive ESA at the assessment phase rate following receipt of a valid appeal and JSA is in payment and the claim can be built on to JSAPS by the nominated user via the ELUS desk top icon.

Step	Action
1.	As claimant is in receipt of JSA, check JSAPS for any change of circumstances
2.	Access CIS to check if the claimant is in receipt of any other benefits
3.	Check that current medical evidence details are held in the casepapers. Where medical evidence has not previously been required, this is now a condition to continue to receive ESA at the assessment phase rate when appealing against a WCA outcome
4.	Notify the JSA benefit section that an ESA appeal has been received and agree a JSA closure date using current process
5.	Once the JSA claim is dormant, and all outstanding actions in JA530 Case Controls have been cleared, transfer the case to ESA in JA030 Transfer Claim
6.	Arrange to register ESA interest in PD350 from the day after the JSA closure date

7.	In ELUS JA060 Register Claim/Event register the ESA claim as a new claim using event type 01
8.	Input the day after the agreed JSA closure date as the ‘Rec’d date’
9.	Using the information from the clerical papers and ISCS if appropriate, input the type of ESA the claimant is claiming, ESA (C) or ESA (IR) with a sub-type of 17 – ESA (C) 18 – ESA (C + IR)
10.	Select ‘JA610’ button to go to JA610 Claim Maintenance Details
11.	In JA610 select ‘Chge Effv Date’ button. Enter the ‘Rec’d date’ on the ‘Picklist’. This is the date that was input in JA060
12.	Enter the reassessment effective date in the ‘Eff date’ field. This will be the day after the agreed JSA closure date. For example, if JSA was terminated from 07.12.2010 then the reassessment effective date input is 08.12.2010
13.	Populate the picklist with the information on the clerical papers and the information received from the claimant. For example, current work, benefits, any exceptional conditions, occupational pension, etc
14.	Go to JA092 Review Claims if there is a mortgage and/or capital on the case. Using the information from the clerical papers’, input the correct review date(s)
15.	BF case to Effective Date. Access to JA674 will not be available until the case is closed on PSCS/ISCS
16.	When BF matures, access JA674 ‘Personal Capability Assessment’ to input the WCA outcome decision. The ESA effective date recorded in JA610 is displayed in the WCA Effective date field and protected, so cannot be amended
17.	Go to JA530 Case Controls and input a date 2 weeks prior to the date the medical evidence expires. If new medical evidence is not returned within 6 weeks, treat the

	claim as having no LCW and reassess the award
18.	Input in JA110 Notepad that a valid appeal has been received
19.	Go to JA230 ‘Maintain IB & IS Awards’ . Input the IB and IS gross award details. When inputting an amount for an ADI or CDI ensure the actual amount paid is input
20.	Where there are social fund deductions or overpayments, there is a separate process for these. Where there are any other forms of deductions follow the link
21.	Access JA400 ‘Method of Payment’ . Check payment details are correct, or amend details where incorrect or missing
22.	Select ‘JA200’ button to access JA200 ‘Award and Decision’
23.	Select ‘Continue’ button to go to the ‘Award Summary’ screen. The ESA assessment phase amount displays. The claimant will have their occupational pension income taken into account in the normal way whilst receiving the assessment phase rate, if they have appealed and are waiting for the outcome of that appeal. Claimants with a 100% disregard will retain that disregard while on the assessment rate, and afterwards if their appeal is successful
24.	Select ‘JA405’ button to access JA405 ‘Compute Payment’
25.	Send e-mail template to the Adviser Support as per the current process to update LMS. Clearly state this is an IB (IS) Reassessment case, the claimant’s Effective Date and that the claimant has made an appeal against the LCW decision
26.	The Local Authority (LA) will be automatically notified through JSAPS that ESA at the assessment phase rate has now been awarded pending the result of the appeal.

Appeal valid and ESA assessment rate to be awarded and overlapping benefit in payment

252. The claimant can remain on IS pending their appeal when they have another condition of entitlement to IS.

253. The claimant can only be awarded ESA from the date that IS ends if they relinquish the award of IS.

254. Take the following action when the appeal has been accepted as valid and an overlapping benefit is in payment:

Step	Action
1.	Check the clerical case papers and ISCS where appropriate for any change of circumstances
2.	Access CIS to check if the claimant is in receipt of any other benefits
3.	Check that current medical evidence details are held in the case papers. Where medical evidence has not previously been required, this is now a condition to continue to receive ESA at the assessment phase rate when appealing against a WCA outcome
4.	Note on clerical tracker and A22 that an appeal has been received
5.	If the other benefit exceeds the ESA assessment rate, the other benefit must remain in payment as it is more beneficial to the claimant. Inform the other benefit sections that ESA appeal has received and note clerical tracker and A22
6.	If the other benefit does not exceed the ESA assessment phase rate, inform the other benefit section(s) that an ESA appeal has been received and agree a closure date of the other benefit(s) using current process
7.	Gather any relevant information and assess the award. Complete an ESA14 and pay only the assessment phase rate from the Effective Date. Offset any IS payments already paid against any ESA due. Note this calculation on the reverse of the ESA14 in the ‘Notes / Other action’ box
8.	Once the ESA claim has been assessed, form ESA14P must be completed in order to pay the claimant
9.	Access CPS(LP). Do not create a payment schedule. Make a single payment to cover any arrears due and the assessment phase amount up to the claimant’s last payday
10.	Create a BF on A22 for the next payment due to the claimant. Continue to make only one payment and create a BF for the subsequent payment, until the result of the

	appeal is known
11.	Set a BF on the A22 for a date two weeks prior to the expiry of the medical evidence
12.	If the medical evidence is not returned within six weeks, then reassess the award and treat the claim as having no LCW
13.	Send e-mail template to the Adviser Support as per the current process to update LMS. Clearly state this is an IB(IS) Reassessment case and the claimant's effective date
14.	Notify the Local Authority (LA) on form NHB(ESA)Clerical that ESA at the assessment phase rate has now been awarded.

Forwarding appeal to owning Benefit Centre

255. When preparing to send the appeal to the owning office, include all the relevant evidence/information if appropriate. For example:

- claim form or extracts where appropriate
- statements
- appeal letter/GL24
- medical evidence including General Practitioner (GP) factual reports, Assessment reports, hospital records
- A6 report or Secretary of State (SofS) certificate relevant to the decision under appeal
- copy of the Legally Qualified Panel Member (LQPM) or DM decision to extend the time limit for appealing
- record of the reconsideration.

256. In order to keep paperwork together, it must be placed/inserted in a clear plastic wallet (one case per wallet). Place all wallets into a TNT Courier pouch. Mark pouch "restricted" and annotate with full office details of owning and sending office/team. Send out via courier service.

257. The user must notify the owning office appeals team by e-mail that the appeal paperwork has been dispatched.

258. There is no change to the existing process for handling defective appeals or withdrawn appeals .

259. Ensure all details are captured on the clerical tracker and the A22.

260. Where claimants have been passed on to JD, inform them that the claimant's appeal against the disallowance of ESA has been withdrawn.

261. Notify the Local Authority (LA) on form NHB(ESA)Clerical that the claimant's appeal against the disallowance of ESA has been withdrawn.

262. When the Health Assessment Advisory Service have completed their actions and close the case on MSRS, the closure action must be completed by:

Selecting and opening the case on the MSRS ‘Browser’ list

On the 'view referral' screen select 'claimant action' then select 'Confirm' in the 'clear response' screen to complete the closure.

Retention of documentation and remote store action

263. In cases that have been allowed, the Reassessment case documents should be retained until the ESA claim becomes dormant. The case should then be given a retention date in accordance with the Benefit Specific section of the Records Management Policy .

264. In cases where ESA has not been allowed, the RS Web Team should be notified and a retention date be given in accordance with the Benefit Specific section of the Records Management Policy for IB.

Retention of Mortgage Sub-File

265. All IS Mortgage sub-files in allowed cases, should be re-branded as an ESA Mortgage sub-file and kept with the ESA claim. This will ensure that the sub-file is given a retention date in accordance with the Records Management Policy for ESA once the ESA claim becomes dormant.

Medical Services Referral System

Introduction

1. Existing Personal Capability Assessment (PCA) prompts will be re-sequenced by Pension Strategy Computer System (PSCS) into Work Capability Assessment (WCA) prompts.

2. Two weeks after the WCA prompt matures, an automatic Assessment referral will be sent to MSRS via a new electronic interface and the WCA process will commence.

3. Whilst the majority of cases will follow the automated referral route, certain categories of cases will need to be handled manually.

4. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to create and action manual Assessment referrals to MSRS, action outputs from MSRS including change of circumstances and rework for IB (IS) Reassessment.

5. This guidance only details the changes to MSRS introduced through MSRS releases 2.2.1 and 2.3 that will affect IB (IS) Reassessment cases.

6. The ESA MSRS User Guide should be read in conjunction with this guidance.

7. Cases that will not be automatically referred via the new interface will be:

- where other payees are held on the source system
- where the address status is held as PWA (Person Without Address) on the source system
- where the address status Dead Letter Office (DLO) is held on the source system
- where the customer National Insurance number (NINO) does not contain a suffix
- where the address held on the source system does not contain a postcode
- where the payment suspension flag is set to Y (except credits only cases)
- where the National Sensitivity flag is set in source system
- treat as Limited Capability for Work (LCW)
- corporate other payees (COP) are held on source system
- cases marked as potentially violent (PV) on the source system.

8. The user will be prompted by exception report JA72712 as well as a CAM task that will be created for these cases. These cases must be referred manually via MSRS.

9. All IB IS Reassessment cases are referred to as IB Migration on MSRS.

10. Staff who use ‘JAWS’ assistive technology note that the radio buttons are labelled slightly differently. The title of the radio button is red. Use the down arrow to select the radio button option.

11. In some cases ‘JAWS’ will not speak the error messages. Action to take, either:

Read the page in full and ‘JAWS’ will speak the error message, or

Select ‘Control’ and ‘Escape’ to refresh the screen, select ‘h’ for the next heading, and ‘JAWS’ will speak the error message

12. Staff who use ‘Zoomtext’ note that the ‘Speak it’ function must be used to read the contents of combo boxes and the titles of ‘Edit’ fields.

13. Staff who use ‘Supernova’ note that the virtual focus must be selected to read the check boxes. Select this by using ‘Control’ and ‘4’.

14. MSRS manages each referral on three levels:

Client - Register Client

Case - Register Case

Referral - Register Referral

15. For the majority of IB reassessment cases there will already be an existing client account on MSRS. These cases will have previously been an IB referral. The first step will always be to search for a client.

Search for Client

16. Access MSRS and input customer NINO to search for the client account.

Create Client

17. If a customer account is not found and MSRS displays ‘No records found for the search parameters’ in red at the top of the page you will need to create a new Client record.

Update Client

18. Whether there is an existing client account or a new client account has been created users must always check the client account and update where appropriate. This applies where there has been no change(s) to the client account.

MSRS changes to ‘update client’ screen – PV Status

19. MSRS release 2.3 allows a PV marker to be set on an open referral. When updating MSRS the ‘PV Text’ field is available to add a note for the reason the PV marker has been set, see PV Cases .

Ownership of MSRS accounts

20. As from October 2010 the Department for Social Development (DSD) Northern Ireland (NI) previously known Northern Ireland Social Security Agency (NISSA) will also be using the MSRS system. A new ‘Ownership’ section will be visible under the Client account address details. Ownership is automatically set to ‘**GB**’ for DWP users and ‘**NI**’ for DSD users based on the department creating the account.

21. If when searching for a client, DWP staff enter a NINO for a claimant record owned by DSD an error message will be displayed stating “A matching Client record does exist for this NINO, but is currently owned by the Department for Social Development (DSD). Please contact DSD if ownership of this Client needs to be transferred”

22. As Client accounts cannot be pulled from one authority to another the owning authority must be contacted to close their referral action and transfer the account ownership.

Note: MSRS will prevent duplicate Client records with the same NINO from being created. Health Assessment Advisory Service staff **will not** be able to transfer accounts.

How to change MSRS account ownership

23. Where a client account exists on MSRS and is marked as being owned by GB, but they are now resident in NI, the DSD contact the DWP (as current owning office) to request the ownership be changed.

24. To change the ownership, the DWP member of staff must be in the user group that allows them to change this field (Change Ownership user group).

25. The DWP member of staff enters the NINo in the Client Search field and selects View Client. From View Client, the user selects Update Client Details. Just above the Appointee Details is the Ownership field. As the user is in the correct user group, rather than this field being read only, it is populated with GB, but has a dropdown next to it. The user clicks the dropdown arrow and selects NI. The user clicks the Update button.

26. The ownership is now changed to NI, and the DWP user can no longer access the client. The same process is used to transfer ownership from DSD to DWP however DSD staff must take the appropriate action.

27. A new case must be created on all IB (IS) Reassessment cases. Users must always select:

Benefit Type as ‘Employment and Support Allowance’

IB Migration drop down menu select ‘Y’.

28. This information is essential to ensure the specific IB IS Reassessment process is correctly applied by Health Assessment Advisory Service. This will also allow the correct Management Information (MI) to be collated.

29. When creating an IB(IS) Reassessment case complete the fields as follows:

Field	Action
Benefit Type	This MUST always be Employment and Support Allowance
Back Office	This field will be automatically populated by MSRS to show the Back Office based on the customers post code.
Customer Office (mandatory)	Enter the office ID code for the IB (IS) Reassessment team: Aberdeen BC - 102731 Belfast BC - 102039 Bradford BC - 104140 Burnley BC - 102240 Coatbridge BC - 104740

	Derby BC - 101839 Glasgow BC - 104832 Hanley BC - 103838 Hyde BC - 102339 Kilmarnock BC - 102536 Newcastle BC - 101336 St Helens BC - 105338 Wellingborough BC - 101936 Wolverhampton BC - 103739 IPC - 104532
Date Created	Pre-populated
DV Mandate	Automatically defaults to ‘N’. This field is completed by Health Assessment Advisory Service staff only
Availability Constraints	Select the appropriate Yes or No option from the drop-down menu. Where Availability Constraints apply, see link.
Availability Constraints Details	This field must be complete if ‘Y’ selected in the Availability Constraints field
Availability Constraints Expiry Date	This field must be complete where the date is known. If the date is not known leave blank
First Day of Incapacity	Enter the first day of the customer’s incapacity on IB. This information can be found by accessing PSCS dialogue RP001.
Re-referral (mandatory)	Select ‘Y’. All IB (IS) Reassessment cases must be referred as re- referrals
Previous Support Group	Automatically defaults to ‘N’. This must not be changed

Mental Health (Mandatory	Select the appropriate option ‘Y’ or ‘N’.
IB Migration (Mandatory)	Must always select ‘Y’
Previously Treat as LCW flag (Mandatory**)**	Must always select ‘N’
Create Referral for this Case	Must always be selected – select ‘NEXT’ to create a new referral
Next	Select ‘NEXT’ will automatically take you through to the ‘Create New Referral’ screen.

30. For IB (IS) Reassessment cases there are 4 suitable MSRS referral types. These are:

‘Q’ referral

‘S’ referral

Advice referral (CN/CZ)

‘LCWRA Only’ referral.

How to create a referral

Create new Referral Screen

31. When creating an IB (IS) Reassessment ‘Q’,’S’, ‘Advice’ or ‘LCWRA Only’ referrals complete the fields as follows:

Field	Action
Referral Category (Mandatory)	Select ‘Q’, ‘S’ or ‘Advice’ referral only for IB (IS) Reassessment cases.
Over ride Default Rules	MSRS always tries to populate the Create New Referral screen with the most appropriate referral options. However, do not adjust the default settings for IB (IS) Reassessment cases

Referral Sub-Category (Mandatory)	This field will only appear if the selected referral category is ‘S’ or ‘Advice’. For ‘S’ categories select: ‘ED’ where good cause has been accepted, or ‘S’ for all other referral For ‘Advice’ categories select ‘CN’, any case where advice required before the DM decision ‘CZ’, reconsideration advice required after the DM decision
Supporting Case File (Mandatory)	Select ‘Y’ or ‘N’ as appropriate
LCWRA Only (Mandatory)	Establish if the customer can be treated as having LCW. Select ‘Y’ or ‘N’ as appropriate
LCWRA Only Reason (Mandatory)	LCWRA Only Reason field only available where ‘LCWRA Only Field’ is selected as ‘Y’. The LCWRA reasons are: In hospital Pregnancy Infectious disease Regular treatment
LCWRA Only Reason Text (Mandatory)	Enter details for LCWRA referral.
Questionnaire Issue Date	This field is only enabled if an ‘S’ referral is being created and there is no previous ‘Q’ referral (and the current date is before the conversion of all referrals onto the new WCA Review “rules”).
Next	Select “Next” and follow the instructions below for the referral type you are creating.

Referral Details Type Screen

Creating an Advice Referral

32. When creating an ‘Advice’ referral type select: ‘CN’, any case advice required before the DM decision

‘CZ’, reconsideration advice required after the DM decision

33. The Advice Text box is used to record information relating to the advice required.

Referral Details Type Screen

Creating a Q Referral

34. When creating a Q (questionnaire) referral the following action must be taken.

Select “Transcribed from Med3” or “Taken from client”.

Enter the Diagnosis text in the free text box.

If the client details are marked as PV, you must enter the PV text to describe the incident (taken from IF1).

Referral Details Type Screen

Terminal Illness (TI) Referrals

35. On the rare occasions that a customer is reported as Terminally Ill (TI) during the IB (IS) Reassessment referral process, take the following action immediately:

Withdraw any live automatic referral from Health Assessment Advisory Service

Create an advice referral (CN) as outlined in paragraphs 31 to 32

Use the Advice Text box to record specific referral information

If a DS1500 (or other supporting evidence) is available, set the Supporting Case File indicators in MSRS

Send the supporting documents in an ESA55 or by secure fax link to Health Assessment Advisory Service

Telephone Health Assessment Advisory Service to make them aware of the new advice referral.

Creating an S ED Referral

36. When creating an ‘S’ ‘ED’ referral the following action must be taken.

Select the DNA Reason from the Drop Down menu.

If the client details are marked as PV, you must enter the PV text to describe the incident (taken from IF1).

Update/Add GP Details

37. The GP details are no longer mandatory on MSRS, however in all cases the GP details should be checked and updated where appropriate.

Action when sending a Supporting Case File

38. All ESA55 file covers for IB (IS) Reassessment cases must be clearly marked as ‘IB Migration’ and sent to the correct Assessment Centre.

39. Users must check which Assessment Centre has been allocated on MSRS and ensure the correct Assessment Centre been entered on the ESA55 file cover.

Confirm Case File Sent Screen

40. The MSRS ‘Confirm Case File Sent’ screen will include a new function in Release 2.3. See

41. The screen shown at will appear when an ‘S’ referral with a supporting case file (SCF) is created AND the customer back office has changed, for example:

customer FTR ESA50

good cause accepted as customer had moved address.

‘S’ referral with SCF created and new address enter in MSRS.

MSRS identifies back office location has changed due to new customer address entered in MSRS (customer post code will determine the back office).

‘Confirm Case File Sent’ screen with Release 2.3 fields will appear to inform the user that the back office has changed from the original referral.

42. Ensure that the ESA55 is sent to the correct Assessment Centre.

Availability Constraints

43. An Availability Constraint applies if a customer is, unable to attend an assessment on a certain day of the week for the following reasons:

Regular hospital appointment

Unable to attend an exam over a period of time

A PWA

Should not be examined by a particular Health Care Professional if JCP staff are aware that the customer has previously complained about a particular Healthcare professional, or appealed a decision based on a report completed by a Healthcare Professional, details of the Healthcare Professional must be entered in the Availability Constraints field.

Note: Separate action needs to be taken for No Fixed Abode customers.

Has a different correspondence address advising that all correspondence for the customer be sent to this address or other restriction.

Note: A correspondence address is not directly an availability constraint it will create difficulties for the Health Assessment Advisory Service Virtual Contact Centre (VCC) when scheduling appointments. Therefore the notation ‘check the default MEC allocated when making an appointment as the customer actually lives elsewhere (state address)’ must be recorded in the ‘Availability Constraint Details’field.

44. Special customer records must **not** to be registered on MSRS.

45. Referrals must be made clerically using the ESA55 . Ensure the top of the ESA55 is clearly marked as ‘Sensitive Access’, the ‘IB Migration’ benefit type is selected on the front of the file and send to the correct Assessment Centre.

46. On completion of the ESA55 a nominated person phones the Health Assessment Advisory Service Site Manager to advise them that an IB IS Reassessment referral is due. Send the ESA55 file in a sealed polylope to the nominated Health Assessment Advisory Service officer at the Assessment Centre for their action. Set a BF on the A22 clerical record.

47. Health Assessment Advisory Service will return the ESA55 to the issuing IB IS Reassessment office.

48. The only cases not suitable for referral on MSRS are Special customer records. These cases will require a clerical referral.

49. At either the Virtual Contact Centre teleprogramming stage to schedule the customer for an examination, or earlier, the customer may request a DV. If the customer requests a DV they will be advised that they must provide medical evidence to support the DV request. The examination appointment is still scheduled for the appropriate Assessment Centre pending receipt of the supporting medical evidence. A DV is only arranged when approved by Health Assessment Advisory Service.

Rejections

50. It is essential to ensure that referrals to Health Assessment Advisory Service are correct first time. This applies to MSRS referrals and any supporting case files. Health Assessment Advisory Service will try to rectify issues that have been identified by telephone and you must co-operate with them to resolve the problem immediately.

51. All rejections must be agreed by both JCP and Health Assessment Advisory Service. If you disagree with a rejection, resolve the issue locally. If this is not possible, bring disputed cases to the attention of the IB/ESA Lead for discussion at the monthly Local Interface Meeting (LIM).

52. Any case rejected by Health Assessment Advisory Service must not be referred again as a Q referral unless a new questionnaire issue is appropriate.

Withdrawals

53. For MSRS Release 2.3 there will be a new functionality introduced to allow both JCP and the Health Assessment Advisory Service users to withdraw referrals on MSRS

Withdrawal Referral Screen

54. To withdraw a case from MSRS take the following action.

Field	Action
Withdraw	Select the appropriate reason from the drop down menu:

Reason (Mandatory)	Dead Gone abroad Returned to Work Now PV Other
Note	The free text notes box is optional, unless ‘Other’ is selected. If the ‘Other’ reason is selected you must put full details for the withdrawal in the notes box.
Withdraw Referral	Once completed select the withdrawal button.

55. The Health Assessment Advisory Service will be notified of the withdrawal reason to take appropriate action.

56. The Health Assessment Advisory Service should be contacted by phone where the withdrawal reason is customer death or is a PV status with an open referral at the appointment scheduling stage

0700 Cases Returned for Non-Compliance

57. For IB (IS) Reassessment cases where the Incapacity Reference Guide (IRG) code is given as “0700” (Other) and case has been returned for non-compliance in the WCA process, BFD need to check for the correct incapacity reason. Users will need to check PSCS RP001 notepad and RP011, MSRS previous IB referrals and any clerical papers to identify the most current incapacity.

58. Where investigations determine that the current incapacity is a mental health condition:

Refer the case on MSRS as an S-Referral

Mark the mental health (MH) flag on MSRS

Clearly mark the ESA55 with the MH and new incapacity reason

Clearly mark the ESA55 as an IB Migration Case and send the SCF to the correct Assessment Centre.

59. In some cases there will be no documentation in addition to the ESA55 file cover. The ESA55 is required to notify the Health Assessment Advisory Service of the new MH incapacity.

60. If no current MH condition can be identified refer the case to the DM to consider disallowance.

61. Cases with a PV marker will not be automatically referred to Health Assessment Advisory Service and will have to be manually referred.

62. The reason for the marker being set may not be recorded on PSCS. The user must contact the nominated officer to obtain the reason for marker being set and confirm that it is still appropriate.

63. When manually referring the case the user must inform Health Assessment Advisory Service that a PV indicator is held

Update Client Screen

64. MSRS R2.3 ‘Update Client’ screen includes a ‘PV’ Text field to enter the ‘PV’ reason for the referral.

65. If a referral has previously been made on MSRS for a PV customer the PV details already held on MSRS may be shown in the PV Text box. Users must check any pre populated PV text to ensure it is still valid. If the PV reason has changed enter the updated reason for the PV status in the free text box.

How to mark a case as ‘PV’ at the referral stage

66. To mark a case as PV at the referral stage take the following action:

Field	Action
PV Code	At Create Client or Update Client, enter the correct PV code from JSAPS
PV Text	At Create Referral, enter the PV text, based on the wording from the IF1, when prompted on MSRS.

How to mark a case as PV during an open referral

67. To mark a case as PV during an open referral take the following action:

Field	Action
PV Code	Select the correct PV code
PV Text	Enter new PV reason based on the wording from the IF1

68. MSRS R2.3 provides a new facility allowing JCP staff to mark a customer PV whilst there is an open MSRS referral.

69. If a customer is identified as Potentially Violent (PV) whilst there is an open referral, the referral must be marked with the PV Code from the drop down list and the reason(s) added in the PV Text box.

70. Where a PV status is identified and MSRS has been updated, any open referral which has progressed to the appointment process will be withdrawn on MSRS automatically.

71. If the case is at the appointment scheduling stage a message will be displayed to the DWP user instructing them to contact the Health Assessment Advisory Service site manager to inform them of the PV marking.

72. As the “withdrawal” has been made by the DWP, there will not be an entry added to the Browse New Response List.

73. Where there is an appointment booked, the system will automatically send an appointment cancellation letter.

74. If the appointment date is within the next two days and there is a phone number available on the system for the customer, an entry will show in the ‘View Appointment Cancellations’ list to inform the JCP user to contact the client to cancel the appointment as the letter may not arrive in time.

75. The View Appointment Cancellations list must be monitored and actioned on a daily basis.

76. When contacting a PV customer to inform them that their appointment has been cancelled, do not inform the customer that their appointment is cancelled due to the PV status. Advise the customer you are calling to inform them their appointment has been cancelled. They will be informed when a new appointment date has been rescheduled.

77. This will prevent the customer attending the appointment where the cancellation letter may not reach the customer before the actual appointment date.

78. On completion of Health Assessment Advisory Service’s action you will receive a variety of electronic outputs from MSRS in the Browse New Response List.

79. The Browse New Response List must be monitored on a daily basis.

How to Filter Browse New Response List

Browse New Response List – Select Filter Option Screen

80. MSRS Release 2.3 includes additional filter options added to the Browse New Response List screen for IB (IS) Reassessment. The new options are:

Referral Outcome SubCode

Threshold met flag

Note: A score below the threshold does not automatically mean a disallowance is appropriate. The Assessment report must always be checked for exceptional circumstances.

81. To filter for IB IS Reassessment cases, take the following action:

Field	Action

Customer Office	Enter the IB (IS) Reassessment team office
Benefit Type	This must always be Employment and Support Allowance
Client Surname	Enter the first 3 letters of the customers surname – this is optional
Referral Category	Choose any specific referral category required from the drop down menu
Referral Outcome	Choose any specific referral outcome required from the drop down menu
Referral Outcome Subcode	Choose any specific referral subcode required from the drop down menu
(Referred by) Surname	Complete the (Referred by) Surname field if you require to filter by referring officer name
(Referred by) Forename	Complete the (Referred by) Forename field if you require to filter by referring officer name
Supporting Case File	Select With, Without or either from Supporting Cases File option
IB Migration	Select Yes for IB Migration
Threshold met flag	Select Yes, No or Either options to filter by the HCP assessment score
View Response List	Click View Response List to select your filter options

82. All Health Assessment Advisory Service outputs **must be checked** to ensure they are fit for purpose **BEFORE** the IB (IS) Reassessment WCA outcome decision is made. The clerical process will be required for Rework.

83. Whenever a ‘Not Returned’ output is received from MSRS the decision maker (DM) must take all reasonable steps to ensure the current customer details are correct.

84. IB (IS) Reassessment customers may not have had any contact with the department for some time and more in depth enquires may be required. DMs need to pay particular attention to the existence of previously unknown mental health conditions.

Action following ‘Good Cause accepted’ decision

85. Where the decision maker has accepted good cause for either FTR or FTA a further referral will be required on MSRS.

86. These referrals will be ‘S’ Referrals with a Supporting Case File (SCF) unless the customer FTR the ESA50 and a mental health condition has now been identified.

87. If the referral was a 0700 case then a SCF will be required with the new MH diagnosis

88. MSRS release 2.3 has been updated to include the facility to show a notification when a Change in Circumstances (CoCs) has been made using MSRS.

89. The CoCs records screen can be accessed from the list menu on the left side of the MSRS Options view.

90. The action to take will depend on who the customer notifies of the CoCs.

Customer notifies CoCs to JCP

91. Where a customer notifies JCP of a CoCs, JCP need to decide if the change impacts on the current WCA referral.

92. Where the change is relevant to the WCA referral, the Health Assessment Advisory Service must be notified of the change. If the change is due to customer death or is a PV status with an open referral at the appointment scheduling stage, the Health Assessment Advisory Service must be contacted by phone when.

93. To notify the Health Assessment Advisory Service of a CoCs, JCP users can record the change on the relevant MSRS screens. This will allow the change to be identified and action appropriately by the Health Assessment Advisory Service

94. .

95. JCP staff will need to consider the impact of the change on other sections when a CoCS is received and actioned.

Customer notifies CoCs to Health Assessment Advisory Service

96. Where customer notifies the Health Assessment Advisory Service of a CoCs, the Health Assessment Advisory Service will record the change in MSRS which will produce an output on MSRS. The changes must be viewed in the ‘View CoCs Records’.

How to Access and Action CoCs Records

97. MSRS release 2.3 will include the facility to view and action a CoCs reported by the customer to the Health Assessment Advisory Service.

98. This facility allows the user to view a list of changes/updates made by the Health Assessment Advisory Service relating to the customer/appointee details held on MSRS.

View Change of Circs Records Screen

99. The ‘View Change of Circs Records’ contains an ‘IB Migration’ filter to limit the CoCs list to IB Migration.

100. The ‘View Change of Circs Records’ must be monitored on a daily basis.

101. Take the following action to view the CoCs records.

Field	Action
Customer Office (Mandatory)	Select the IB (IS) Reassessment team office
Item Changed	Select the appropriate change from the drop down menu. Drop down values are: Client address Client telephone no Client mobile no Client gender Appointee name Appointee address Appointee telephone no GP name GP telephone GP address Client date of birth Select a value from the list or select blank to list all CoCs.
Client Surname	Enter the first 3 letters of the customers surname – this is optional
View Change of Circs Record	Select to view CoCs

View Change of Circs Records Screen

102. When the required search criteria (view Change of Circs) is entered MSRS will display a list of all outstanding Change of Circs records.

103. The Change of Circs list provides a sort option. The list can be sorted by NINo, Surname and Changed Date from the above header fields.

104. Only one page can be actioned at any one time. Individual or multiple records can be cleared from the list on the chosen page.

105. The change of circs list must be viewed and actioned on a daily basis. The change of circs will remain on the list for 2 months only before they are removed automatically.

106. When a record(s) is cleared from the list the closure date of the corresponding Change of Circs record is set to the current date. The closure reason is set to 'cleared' and will be removed from the list.

View FME Screen

107. MSRS provides a new facility where decision makers can view further medical evidence received over the phone (FME).

108. In the View Referral screen, the Referral Action field allows the DM to access '**View FME'** to view FME gathered by Health Assessment Advisory Service as a result of pre board check activity.

109. The Decision Maker can now view FME gathered by Health Assessment Advisory Service over the telephone.

By selecting 'Requested Text' shows specific questions asked by the Healthcare Professional in an Assessment report. The report is returned to the Health Assessment Advisory Service and will be held in the ESA55.

By selecting 'Evidence Text' shows either the diagnosed cause of incapacity as recorded by the JCP user or the telephone FME. If the "contact type" is blank, then the evidence text is the diagnosed cause of incapacity. If the "contact type" is populated, then the evidence text is the FME received over the phone.

110. There are two new screens to show Appointment Cancellations. The screens can be accessed from the list on the left side of the MSRS Options menu.

111. The Appointment Cancellations list must be monitored on a daily basis.

To view Appointment Cancellations

112. Take the following action to view the appointment cancellations records.

Field	Action
Customer Office (Mandatory)	Select the IB (IS) Reassessment team office

Migration Flag	Select 'Yes' to filter by IB (IS) Reassessment cases
Client Surname	Enter the first 3 letters of the customers surname – this is optional
View Appointment Cancellation	Select to view Appointment Cancellations list.

View Appointment Cancellations

113. The 'View Appointment Cancellations' screen shows all appointments that have been withdrawn/cancelled by DWP at short notice i.e. within 2 days of the appointment date.

114. An appointment cancellation letter will be issued by the system when the withdrawn/cancellation reason is entered.

115. Appointments that have been withdrawn/cancelled at short notice i.e. within 2 days, must be actioned immediately.

116. BFD must contact the customer to inform them of the cancellation and, where appropriate, a new referral will be created at a later date.

117. This action must be completed immediately to ensure the customer does not attend the cancelled appointment

118. Once the customer has been notified, select the entry in the list and click "Confirm Notification". The entry will be removed from the list.

119. An NFA customer is considered to have an unsafe postal address, e.g. customers using a 'care of' address for their post or allege persistent problems with their postal delivery arrangements.

120. The initial process for NFA customers is the same as customers with an address. However, follow the PWA customer process with or without a telephone number, if the customer alleges they have not received:

• the ESA50, or

• the appointment letter

121. To register a NFA case once the completed ESA50 has been received in the BC complete the following action on MSRS:-

- Retrieve an existing customer record or create a new one,
- When in the 'View Client' screen from the 'Client Actions' dropdown list select 'Update Client Details',
- Input the BC address in the 'Client Address'
- If the customer has provided a phone number then enter the details if not leave the field blank.

- Add an availability constraint that states ‘NFA’,
- Create or update the Case
- Create S Referral with supporting case file ticked
- Enclose ESA50 in a complete ESA55 case file to send to Health Assessment Advisory Service. Complete the following mandatory fields on the Return of Support Clerical Documents on the ESA55 file:
- Benefit Type
- Customers Details section in full
- Jobcentre Plus Office details (DO number).
- How to Create a Referral for Persons Without an Address (PWA)

122. Persons without an address (PWA) are customers who are actually homeless not No Fixed Abode (NFA) customers with an unsafe address or frequently changed addresses.

PWA – New address available

123. Where a new address is held take action on MSRS to create Client, create case and make a Q referral and update the relevant system(s). These customers are no longer PWA.

PWA – With a telephone number

124. If the customer is a PWA and a telephone number is held in PSCS, ring the customer to enquire if they have an up to date address. If the customer states they have a new address take the information over the phone and take action on MSRS to create Client , create case and make a Q referral.

125. If the customer does not have an address available, tell them that they must obtain and complete an ESA50 to continue with their claim. Advise the customer to call in at any Jobcentre and obtain an ESA50 to complete.

126. If the customer needs help completing the questionnaire they can either:

- Ring the BC Telephony teams for advice, or
- Request a face to face appointment at a Jobcentre.
- PWA Customer Without a Telephone Number

127. To contact PWA Customers without a telephone number the current ESA PWA Customer without a Telephone Number guidance process will apply.

128. When the completed ESA50 has been returned to the BC, register a PWA case and complete the following action:

- Retrieve an existing customer record or create a new one Search for Client
- When in the View Client screen from the Client Actions dropdown list select ‘Update Client Details’
- Input the BC address in the Client Address fields How to create customer address
- If the customer has provided a phone number then enter the details if not leave the field blank.
- Add an availability constraint that states ‘PWA’, see How to enter New Case details .
- Create or update the Case
- Create an S Referral with supporting case file ticked

- Enclose ESA50 in a complete ESA55 case file to send to Health Assessment Advisory Service. Complete the following mandatory fields on the Return of Support Clerical Documents on the ESA55 file:
- Benefit Type
- Customer’s Details section in full
- Jobcentre Plus Office details (DO number).

When Health Assessment Advisory Service have completed their actions and close the case on MSRS, the closure action must be completed by:

Selecting and opening the case on the MSRS ‘Browse Response’ list

On the 'View Referral' screen select 'customer action' from the drop down list

Select 'Confirm' in the 'Clear Response' screen to complete the closure.

CAM Tasks Management

Introduction

1. This guidance will inform Benefit Centre (BC) agents how to manage Customer Account Management (CAM) system tasks and how Contact Centre Directorate agents can use the system generated task section to answer inbound complex enquiries.

2. This guidance is to be used with CAM reassessment System Reference Guide (SRG).

3. Actions on CAM are tracked using tasks, whereas on Legacy Case Controls are used.

4. Tasks should not be individually reassigned to another agent, the whole case should be reassigned for another user to own a task.

5. Tasks will be automatically re-assigned when a case is re-assigned to a new owner.

6. CAM users and their Team Leaders can use CAM Tasks with the CAM Query function to monitor and manage the status of their workload.

Types of CAM Task

7. There are three types of tasks:

Case tasks – manually created

Customer tasks – manually created

System generated tasks.

8. Case tasks are created/generated in association with a case or customer. The tasks associated with a case can be viewed in the Case Task View:

9. There will be some scenarios during Reassessment where the agent will need to manually create a task. Examples of scenarios are:

The agent conducts the decision assurance call and the customer says that they wish to provide further information, therefore a task will need to be created to await the customer's information

After the decision assurance call, the customer has provided further information and the Decision Maker (DM) is unable to determine LCW so the case is referred back to the Health Assessment Advisory Service, therefore a task will need to be manually created to await the WCA outcome.

10. The manually created task will have the following values:

Task Type	Sub-Type	Possible Status	Possible Sub Status	BF Date	
To Do	Other	Not Started	Open	5	This task will be created manually by agents

		In Progress Open Closed	Closed		

To create a new case task:

11. Take the following steps to create a new case task:

Select the New button to enable the fields to create the new task

The owner field defaults to the staff number of the agent creating the task

12. Select task type ‘To Do’ from the drop down options in the Task Type field

Select task sub type ‘Other’ from the drop down options in the Task Sub Type field

Select task status ‘In Progress’ from the drop down options in the Task Status field

Select task sub status ‘Open’ from the drop down options in the Task sub status field

The customer’s National Insurance Number (NINO) will be system populated and displayed in the NINO field

If no NINO is held, a system populated customer reference Number (CRN) is displayed in the CRN field

The customer's last name or family name is displayed in the Customer Last Name field

The Brought Forward (B/F) Date and Days to B/F Date fields are system populated to alert the agent that a task should be actioned and when by. Select the mvg button to change the B/F date

If the B/F date has expired and the task status has not been set to closed, the Overdue Flag is automatically set

The date the task is created is system populated in the Task Created field

The username of the agent who created the task (if manually created) or ‘automatic’ (if automatically created) is system populated in the Task Created By field

The Comments field is a free text field where any general comments or notes may be added, for example, receipt of medical evidence from the customer. When performing a handoff to a Customer Service (CS) team, ensure this field is completed with details of your name, team and reason for handoff.

13. Note: When a task needs to be closed because the agent has done all the necessary action, the Task Sub Status must be updated before the Task Status is set to closed.

14. Customer tasks are created/generated in association with a case.

15. The tasks associated with a case can be viewed in the Customer Task View:

16. There will be some scenarios during Reassessment where the agent will need to manually create a task. Examples of scenarios are:

The agent conducts the decision assurance call and the customer says that they wish to provide further information, therefore a task will need to be created to await the customer's information

After the decision assurance call, the customer has provided further information and the Decision Maker (DM) is unable to determine LCW so the case is referred back to the Health Assessment Advisory Service, therefore a task will need to be manually created to await the WCA outcome.

17. The manually created task will have the following values:

Task Type	Sub-Type	Possible Status	Possible Sub Status	BF Date	
To Do	Other	Not Started In Progress Open Closed	Open Closed	5	This task will be created manually by agents

18. Take the following steps to create a new case task:

Select the New button to enable the fields to create the new task

The owner field defaults to the staff number of the agent creating the task

19. Select task type 'To Do' from the drop down options in the Task Type field

Select task sub type 'Other' from the drop down options in the Task Sub Type field

Select task status 'In Progress' from the drop down options in the Task Status field

Select task sub status 'Open' from the drop down options in the Task sub status field

The customer's National Insurance Number (NINO) will be system populated and displayed in the NINO field

If no NINO is held, a system populated Customer Reference Number (CRN) is displayed in the CRN field

The case number captured in the Cases (Additional Information View) applet is displayed in the Case No. field

The name of the contact is displayed in the Customer Name field

The Brought Forward (B/F) Date and Days to B/F Date fields are system populated to alert the agent that a task should be actioned and when by. Select the mvg button to change the B/F date

If the B/F date has expired and the task status has not been set to closed, the Overdue Flag is set

The date the task is created is system populated in the Task Created field

The name of the agent who created the task is system populated in the Task Created By field

The Comments field is a free text field where any general comments or notes may be added, for example, receipt of medical evidence from the customer. When performing a handoff to a CS team, ensure this field is completed with details of your name, team and reason for handoff.

Clearing a Task on CAM

20. In order to clear a task on CAM the user must do the following

Locate the task in the “My task” view

Select an appropriate value from the “Task Sub status” field; this will depend on the task

Once the ‘’Task Sub Status’’ field has been completed, select “Closed” from the “Task Status” field.

21. Note: When a task needs to be closed because the agent has done all the necessary action, the Task Sub Status must be updated before the Task Status is set to closed.

Customer Account Management Queries

Introduction

1. This guidance is to inform Customer Account Management System (CAM) Users and their Team Leaders how to use the CAM Query function to monitor the status of their workload in order to manage it successfully.

2. This is part of the CAM Task Management process.

3. The Query function searches CAM and returns information based on the criteria of the Query raised by the user/Team Leader.

4. References made to “Syntax” throughout this guidance are referring to the actual text to be inserted in the Syntax field.

Types of Queries

5. There are two types of queries, predefined queries and new queries:

Predefined Query: These are found in the Queries drop down list and already have their criteria established. Select Queries from the drop down and select Predefined Query type required.

New Query: Users can run a new query to search on chosen criteria. To do this, from the lower level menu toolbar, select the Query drop down list, Select New Query, define the Query by changing or completing the fields you wish to search on and Select the GO button

How to setup and save a New Query

6. The following guidance details the steps required to setup and save a New Query, as well as a number of recommended queries that can be used regularly in order to assist with the Management of Team / Individual workloads:

Task, Case and BDC Queue Queries

7. Queries can be run for Tasks and Cases.

8. Four predefined Queries are available for cases caught in the BDC Queue.

9. For all Queries, the information shown in the last column below will detail the Syntax (text to insert) which should be copied into the ‘Query Field’.

10. If this does not correctly run the Query the relevant Syntax (text to insert) from this last column should be typed directly into the ‘Query Field’.

IB(IS) Reassessment – Handling cases held up in the Benefit Delivery Centre Queue

Introduction

1. This guidance is to show how Benefit Centre Directorate (BCD) nominated users must handle cases which have been held up in the Benefit Delivery Centre Queue.

2. For the purposes of this guidance, the terms IB Migration and IB(IS) Reassessment are considered interchangeable as IB Migration was the original designation for IB(IS) Reassessment and it will still show as IB Migration on some screens.

3. Screens that refer to IB Migration BDC Queue should be read as referring to BCD due to a change in directorate name

4. The following scenarios have been identified where cases should not be in the site IB Migration BCD Queue:

- Cases with the following statuses:
- Before initial outbound call is made
- Cases requiring a manual MSRS Assessment referral
- Case that have just been reopened
- Cases in the following stages:
- Cases that are at any point at or after WCA Outcome is received
- Cases that have had the initial outbound call completed but have not been referred to MSRS within 14 days of case creation
- Cases that have been referred to MSRS but have not had any response from MSRS within 42 days.
- Cases where users have not followed the correct business process (Not closing the Outbound Call Task before Assigning the Case from BC to CC).

5. Specific fields must be set up on My Team Case List View.

6. The nominated BCD Team Lead must run all the queries listed to identify all cases that have potentially become stuck in the site IB Migration BDC.

Table identifying all queries which must be run to identify the case stuck in the BDC Queue from the case list view

Query	Details	Field (in HLS Case List View)	Field Value
Cases stuck in site BDC Queue –	A case should not be in the site IB Migration BDC Queue until the CCD	Case Stage	IB Migration Started

Unexpected Case Statuses	actions have been finished and should not move into/remain in the Queue if a manual Assessment referral is required or the case has been re-opened	Case Status	“Case Created” OR “Manual MSRS Assessment Referral Required” OR “Case Re-opened”
Cases stuck in site BDC Queue – Unexpected Case Stages	If a case is at the WCA Outcome Received stage, or later, then it is not correct for the case to be in the Queue.	Case Stage	“WCA Outcome Received” OR “LCW Identified” OR “NO LCW Identified” OR “ESA Appeal”
Cases stuck in site BDC Queue – Referral not made in 14 days	This is a case which has had the initial outbound call completed but has not been referred to MSRS within 14 days of case creation. The MSRS referral should happen two weeks after the case was created, and the case should either move out the Queue (manual referral required), or remain in the Queue but move to the ‘Referred to MSRS’ status. There are two possible reasons why this may not happen. These reasons and actions required to clear each one are listed below: If a case is held in the queue for longer than 14 days and where prompt 3 has	Case Status	Initial Call Actioned
		Date Claim Made	<TODAY-14

	not reached CAM for a genuine reason (Customer died, IB claim closed) - User should close CAM case Where CAM tasks have not been created and/or case stage and status not updated - User should raise incident and assign case to an agent to do manual referral if required. If the case is not covered by one of these scenario's then the exception reports must also be checked. In addition if the case has been referred on MSRS already but has not updated in CAM to reflect this then an incident would need to be raised. This would also apply if the case has not been referred and it cannot be determined why it has failed (i.e. there should be a manual referral task). Following the outcome of the incident a manual referral should be made. If the case has either been referred or a manual referral is required and CAM has created the relevant tasks but has not assigned the case to an agent then it should be manually assigned.		
Cases stuck in site BDC Queue – Referral Outcome not returned in 6 weeks	Case referred to MSRS but no response has been received within timeline (e.g. 42 days allowed for MSRS Referral and 14 days between case creation to referral made)	Case Status	Referred to MSRS
		Date Claim Made	<TODAY-56

Table identifying queries which must be run to identify the case stuck in the BDC Queue from the my team tasks view

Query	Details	Field (in My Teams Tasks View)	Field Value

Cases stuck in site BDC Queue – Assignment Manager failures	A case should not be in the site IB Migration BDC Queue if the case requires a manual MSRS referral, it should instead be assigned to an appropriate agent	Owner	XXXX IB Queue (where XXXX equals the relevant site location)
		Task Sub-Type	"Manual Referral" OR “Trans Rejec”

7. This is an example of a relevant query for identifying cases stuck in the site IB Migration BDC Queue. However, each of the queries outlined in the table in section one must be setup to ensure all relevant potentially stuck cases are identified.

8. To create and save a query the BDC Team Lead with active site IB Migration BDC Queue Position must take the following action:

Step	Action
1.	Log onto CAM and navigate to My Team’s Cases View
2.	Select “Query” option in the Tool Bar
3.	Select “New Query” to create the new query. This enables the My Team’s Cases List Applet and Case Details Applet
4.	Set the Case Stage to “IB Migration Started” in the “Case Stage” field of the Case Details Applet. (This will define cases in case stages that shouldn’t be in the site IB Migration BDC Queue)
5.	Set the Case Status to ‘ “Case Created” OR “Manual MSRS Referral Required” OR “Case Re-Opened” ‘ in the “Case Status” field. Note that “OR” should be in capital letters, and case statuses should be enclosed with quotation marks as in the example
6.	Go to “Query” from the top toolbar and select “Save Query As”

7.	In the Pop Up window, type in the name for the query. The Query is now saved and will appear in the ‘Queries’ dropdown list on the top right hand side of the window.
8.	Select the query from the drop down list to run it.

9. In order to assign cases out of the site IB Migration BDC Queue, the nominated CAM User must have the secondary position of “XXXX IB Migration BDC Queue” (where XXXX is the first four characters of the site name).

10. In order to view the cases stuck in the Queue, the user may need to change his/her active position on CAM.

11. To change their active position a user must take the following action:

Step	Action
1.	User must log into CAM, and navigate to User Preferences View (Tools -> User Preferences -> Change Position). All positions available to the User are displayed, the user’s current active position is ticked
2.	User must highlight ‘XXXX IB Migration BDC Queue’ position, and select the ‘Change Position’ button. (XXXX = the first four letters of the site name)
3.	User must change their active position back to their primary position (Tools -> User Preferences -> Change Position) when activities to resolve cases stuck in the IB Migration BDC Queue have been completed.

12. To change case ownership, once they have changed their active position to the IB Migration BDC Queue for their site, the nominated Team Lead should take the following action:

Step	Action
1.	Navigate to My Team’s Case View (Cases -> Case List)
2.	Select and run one of the ‘Cases Stuck IB Migration Queue’ queries detailed earlier (each query needs to be run one by one)
3.	List of ‘Stuck’ cases is displayed to the User

4.	User investigates why the case is stuck and if it is deemed appropriate to move the case on, they select a stuck case, and click on the ‘Owner’ field
5.	User clicks on the MVG icon in the owner field in order to launch the Ownership MVG Applet. All possible case owners are displayed
6.	User must select an appropriate user to re-assign the case to. (This may be one of their own team members, or another IB (IS) Reassessment Team Lead to allow that Team Lead to assign the case to one of their team members)
7.	User must change their active position back to their primary position (Tools -> User Preferences -> Change Position) when activities to resolve cases stuck in the IB Migration BDC Queue have been completed.

13. Once a Case is assigned from a Contact Centre (CC) to a Benefit Centre (BC), the Initial Outbound Call Task should have been completed and closed.

14. Cases with no other open Tasks will be automatically assigned to the ‘IB Migration BDC Queue’ for the site in question to await the automatic referral to MSRS and the subsequent result.

15. There are only two types of case which will pass straight to a BCD Customer Service Officer (CSO),

Open CDA-CTC related task that will have been automatically created by the system

MSRS Manual Referral / Transaction Rejection Task created automatically following the referral to MSRS.

16. However, if users do not follow the correct business process (Not closing the Outbound Call Task before Assigning the Case from BC to CC) other types of case will be wrongly assigned to users in the BC.

17. If the Initial Outbound Call Task is still open at the point at which the Case is in the BC, a nominated Customer Service Team Leader will need to take the relevant action.

18. Once the Customer Service Team Leader required action has been completed, the case may need to be moved back into the IB Migration BDC Queue to await the result of the MSRS Referral.

Identify and Action Cases

19. To identify and action cases in this category the nominated Customer Service Team Lead must take the following action:

Step	Action

1.	Look at Open Tasks on the case in question to determine whether or not there is an open Agreement or Disagreement to CTC Task present on the case
2.	If the Task is present, user must check the customer's Contact History records to establish whether or not there is a Contact History Record for the Initial Outbound Call Task
3.	If there is a Contact History Record present indicating a successful call for the Initial Outbound Call, or if there is a Contact History Record that indicates that the Customer has failed Security Questions then the user must Close the Initial Outbound Call Task with a sub-status of 'Call Successful' and a status of 'Closed'
4.	Following this action, the case should be retained by the user to which it was assigned as there is still an open CDA-CTC related task that should be completed.
5.	If there is no Contact History record present, this indicates that the Customer was not contactable (Contact History records are only created for successful calls). User must close The Initial Outbound Call Task with a sub-status of 'Third Call Failed' and a status of 'Closed'
6.	Following this action, the case should be retained by the user to which it was assigned as there is still an open CDA-CTC related task that should be completed.
7.	If there is not an Open CDA-CTC related task, the user must check whether or not the Initial Outbound Call Task is open. If this task is not open, this indicates that there are MSRS related tasks on the case (Either a Task indicating that a Manual Referral is required, or that there has been a Transaction Rejection following an automated referral attempt). The agent in question must retain ownership of this case in order to action the open Task as in usual business process
8.	If the Initial Outbound Call Task is open, the nominated Customer Service Team Leader should check whether or not there is a Contact History Record present for the Initial Outbound Call
9.	If there is a Contact History record present, or if the Customer has failed Security Questions, the Initial Outbound Call Task should be closed with a sub-status of 'Call Successful' and a status of 'Closed'

10.	The Case should then be re-assigned back from the BCD CSO and into the Queue
11.	If there is not a Contact History Record present for the Initial Outbound Call then the User must close the Initial Outbound Call Task with a sub-status of ‘Third Call Failed’ and a status of ‘Closed’
12.	Following the closure of the Initial Outbound Call, the BCD CSO should check if the CAM has now created a CDA-CTC Task. If such a conversion is required, then this agent should retain ownership of the case and action as in usual business practice
13.	If the customer does not require a CDA-CTC conversion, then the case must be re-assigned back from the BCD CSO and into the Queue
14.	Users must change their active position back to their primary position (Tools -> User Preferences -> Change Position) when activities to resolve cases have been completed.

Moving cases from the Customer Services Officer into the IB Migration BDC Queue

20. Moving cases from the BCD CSO back into the IB Migration BDC Queue is the responsibility of the nominated Customer Service Team Leader with a Secondary Position of the XXXX IB Migration BDC Queue (where XXXX is first four letters of site name).

21. The nominated officer must log into CAM, and take the following action:

Step	Action
1.	The user must navigate to User Preferences View (Tools -> User Preferences -> Change Position). All positions available to the User are displayed, the user’s current active position is ticked
2.	The user must highlight ‘XXXX IB Migration BDC Queue’ position, and select the ‘Change Position’ button (where XXXX is the first four letter of the site name)
3.	User must navigate to the Search Centre (Customers Tab) and search for the customer’s NINO
4.	User must navigate to the IB Migration Contact Case View

5.	User must select the ‘Owner’ MVG icon to launch the Ownership Applet
6.	User must click on ‘Query’ and enter ‘XXXX IB Migration BDC Queue’, (where XXXX is the first for letters of their site) in the ‘Position Field’
7.	User must select the relevant record, and select ‘OK’ (i.e. user selects the row relating to the IB Migration BDC Queue for their site). This moves the case to the Queue.
8.	User must navigate to ‘Home’ to verify that case has been successfully re-assigned and is visible in the My Cases list on the Home Page.
9.	Users must change their active position back to their primary position (Tools -> User Preferences -> Change Position) when activities to resolve cases have been completed.

Building IB(IS) Reassessment Trial Cases on to Jobseekers Allowance Payment System (JSAPS)

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to build IB (IS) Reassessment Trial cases onto the Jobseekers Allowance Payment System (JSAPS).

2. This guidance supports National Reassessment and is in addition to existing Employment and Support Allowance (ESA) guidance.

3. From 11 October 2010 the IB (IS) Reassessment Trial was implemented to provide a limited start to the National IB (IS) Reassessment phase.

4. All IB (IS) Reassessment Trial cases transferred on to ESA have been maintained clerically until the IT functionality became available.

5. From 23 May 2011 all IB (IS) Reassessment Trial cases can be built onto JSAPS using the customer details from the information maintained on the ESA14, ESA14P and any clerical papers available

6. Current Build from Clerical (BFC) process will apply, except for JSAPS screen JA672673 Build from Clerical Details and JSAPS dialogue JA230 Maintain IB/IS Awards .

7. JSAPS screen JA672673 Build from Clerical Details will include 2 fields:

Normal BFC

Migrated BFC.

8. These two fields will default to display [N] when the screen is accessed for the first time. Enter [Y] in the ‘Migrated BFC’ field to indicate the case type. A new function key F5 will navigate to JA230.

9. JSAPS dialogue JA230 has 3 screens to input the IB/IS Award details. These new JSAPS screens are:

JA230231 - IB/IS Award Pick list

JA230232 – IB/IS Award Details

JA230233 – IB/IS Award Component .

10. Using the clerical information on the ESA14, ESA14P and any clerical papers available input the IB/IS award details in dialogue JA230232 IB/IS Award Details.

11. Using the clerical information on the ESA14, ESA14P and any clerical papers available input the IB/IS award components in dialogue JA230233 IB/IS Award Component, header using the IB (IS) Reassessment ‘input codes’ and relevant amounts.

12. JA230233 IB/IS Award Component - IB (IS) Reassessment Codes table for IS award component:

001	Personal Allowance
006	Disability Premium
007	Sev Disability Prem
019	Polygamous Partner Personal Expenses
022	Carer Premium
026	Enhanced Disability Premium
028	Bereavement Premium

13. JA230233 IB/IS Award Component - IB (IS) Reassessment Codes table for IB award component:

015	Dependant Child

016	Dependant Spouse
018	IVA Low
019	IVA Middle
020	IVA High
132	IB Pre 97 Additional Pension
133	IB Pre 97 Additional Pension (Frozen)
140	IVB Basic Component
142	SDA Basic
149	SDA Age Related Allowance – Higher Rate
150	SDA Age Related Allowance – Medium Rate
151	SDA Age Related Allowance – Lower Rate
154	IBST(L)
155	IBST(H)
156	IBLT
157	Incap Age Addition - Higher
158	Incap Age Addition - Lower

159	SB
160	SB
181	IB Post 97 Additional Pension
186	Shared Additional Pension
188	IB Adult Dep
191	IB Post 02 Additional Pension
999	Positive Adjustment

14. JSAPS will automatically calculate the Transitional Addition (TA) payable from the information entered in dialogue JA230 Maintain IB/IS Award.

15. Check the calculated amount of TA in JSAPS dialogue JA200 against the clerically calculated amount on the ESA14. This is to ensure both have been correctly calculated

16. Where the TA amounts differ, establish the correct amount and take overpayment or under-payment action where appropriate. Note any action in JSAPS JA110 Maintain Notepad .

17. An LO1 adjudication will be prompted in dialogue JA200 when an attempt to access JA405, ‘Compute Payment’ is made. This check will appear on 100% of cases. Pass all paperwork to the authorising officer to clear this check and complete payment action in JA405.

18. Access JA100, ‘Taxation Changes’ and complete the following fields:

- adjust benefit paid
- adjust taxable benefit
- adjust up/down (+/-)
- using the ESA14P and form PB8.

19. Input a note in JA110, ‘Notepad’ to confirm build from clerical action and taxable benefit has been adjusted.

20. Any IB (IS) Reassessment Trial cases that cannot be built onto JSAPS must be maintained as current ESA clerical process including the maintenance of the TA.

21. Once the case is built on to JSAPS all clerical papers must be sent to remote storage.

Building IB(IS) Reassessment Introductory Phase Cases on to Employment and Support Allowance Legasuite Update System

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff how to build IB (IS) Reassessment Introductory Phase cases on to Job Seekers Allowance Payment System (JSAPS) via Employment and Support Allowance Legasuite Update System (ELUS).

2. This guidance supports National Reassessment and is in addition to existing Employment and Support Allowance (ESA) guidance.

3. From 23 May 2011 all IB (IS) Reassessment Introductory Phase cases will need to be built on to JSAPS via ELUS and the customer details from the information maintained on the Gathering Information template, ESA14, ESA14P and any other clerical papers available.

4. The Central Payment System (CPS) payment schedule must be stopped from the date the claim is being built on to JSAPS via ELUS, the 'Commence System Payment' date.

5. Special Customer Records are not covered in this guidance.

6. It will not be possible to build on to JSAPS:

Cases which contain more than five or more MID mortgages or home loans

Cases where either the customer or their partner has a last name (surname) that consists of a single letter

Cases where the reassessment customer claims ESA (C) and they are a partner on a JSA (C+IR) claim or on an ESA (C+IR) claim where the ESA (C+IR) claim is held at a different office to the reassessment customer's ESA (C) claim.

7. ELUS provides a comprehensive like-for-like dialogue/screen re-face and modernisation of all the Jobseeker Allowance Payment System (JSAPS), ESA Personal Details (PD) and Central Payment (CP) dialogues and screens.

8. ELUS is normally launched from either Contact History View or Case Summary View on CAM to deal with a specific case. For manual reassessment or BFC cases ELUS can be launched via desktop Icon.

9. ELUS will update JSAPS in real time as the user works on the system

10. ELUS can be used in the following scenarios:

- Build from clerical - The desktop icon is used here and source system data can be manually entered via ELUS to build the IB(IS) Claim
- Manual Migration - As BFC above the desktop icon is used and the source system data is entered via ELUS to build the claim
- Auto Migration - Where data has been automatically pulled in form the source systems, Tasks on CAM will prompt user action - this action could be a prompt to investigate (that may or may not require further action on the case) or it could be something the user has to do on ELUS.

11. The ELUS dialogues and screens have improved navigation and input functionality.

12. ELUS complements the existing ELES providing the added facility via JSAPS to input information with relaxed data validation functionality.

ELUS – Key differences

13. ELUS introduces other functionality which differs from Legacy:

Picklists: Fields can be populated with ‘drop-down’ lists of values or ‘drop-down pop-ups’, existing code entries can still be used.

Calendar Pop Up: Dates can be entered via a Calendar Pop Up, date entry can also be entered by entering numerically for example: 23052011.

On Screen Messages: Errors, Warnings and Comments will now display as windows (pop-ups) rather than at the bottom as on the Legacy screen.

History Viewer: Enables user to see record of previous Sessions and Dialogue Screens in ELUS for the previous 14 days. Ensure History viewer is on by looking at Header Bar (red light).

Navigation: Navigation Bar is used to move from screen to screen rather than Function Keys.

User can navigate around the screen using the mouse or by Tabbing

User can navigate to a different screen using the Menu Bar, but must save the current screen before selecting the next one. Otherwise all the information input on the current screen will be lost.

14. ELUS will only include JSAPS Enquiry dialogue JA511 Contributions Enquiry and JA540 IB&IS Award Details. All other JSAPS Enquiry dialogues can be viewed in ELES which can be accessed through the ELES icon in the screen header bar.

15. All data input in ELUS will be recorded and can be viewed in the JSAPS dialogues and screens.

16. Due to time constraints the IT systems have not been updated to reflect the change in terminology. System screens may still reference IB (IS) Migration. Where this is the case, it is referring to IB (IS) Reassessment.

17. ELUS has four new JSAPS dialogues to assist the IB (IS) Reassessment process

Dialogue JA660 – ESA Claim Maintenance Migration. Where errors have been found on the data being uploaded from PSCS or ISCS (if Income Related), on entering ELUS from the desktop icon and selecting JA660, the ‘Error Summary’ screen will be shown first. If entering ELUS from the CAM icon, ELUS will show the errors on the Error Summary screen on entry. The screen Picklist will also show, and can be viewed at the same time

Dialogue JA220 – Award and Decision Validation. Once dialogue JA220 is completed and the user has selected OK to clear the comment message, the user must then select CONTINUE to save the details. The ESA Claim Maintenance prompt screen (JA060666) will display. The user can then navigate to the next dialogue via the dialogue menu list on the left hand side of the page or the NEXT DIALOGUE function on the screen.

Dialogue JA230 – Maintain IB & IS Awards. Use this Dialogue with BFC cases to input the previous IB/IS award to enable the calculation of Transitional Addition (TA).

Dialogue JA540 – IB & IS Awards Enquiry.

18. Dialogue JA230 will be used for BFC cases to input the previous IB/IS award to enable the calculation of Transitional Addition (TA).

28. The fields displayed on screen JA672 can be viewed in the Legasuite SRG.

Contributory claim received and effective dates

29. The Contributory claim received date will be displayed, protected, as the date that was entered in dialogue JA060 when the BFC event was registered.

30. Enter the Effective Date.

Income Related claim received and effective dates

31. Enter the Income Support (IS) received date in the Income Related (IR) received date field.

32. Enter the IS effective date in the IR effective date field. It need not be the same date as that of the Contributory element, but must not be earlier.

Jobcentre Plus office

33. This is the Jobcentre Plus office administering the claim which was entered when the new Claim Event was registered in Register Claim\Event dialogue JA060. This is a display field only.

Benefit Centre number

34. This is the Benefit Centre number of the BCD (based on the customer's postcode) who will take over ownership of the ESA claim, entered when the Build From Clerical (BFC) event was registered in Register Claim\Event dialogue JA060. This is a display field only.

Normal BFC Indicator.

35. Ignore

Migrated BFC Indicator

36. Complete the Migrated BFC field as 'Y' to enable access to ELUS JA230 'Maintain IB & IS Awards' .

37. This indicates that the claim being built from clerical has been transferred from PSCS and ISCS to clerical, then JSAPS via ELUS.

Commence System Payment (CSPF) date

38. This is the date from which the claim is to begin to be administered by the system.

39. This date must be the first day of the Benefit Week following the Benefit Week Ending date to which the claim has been paid clerically.

40. Users should note that the picklist screen, JA636, shows the effective dates of system administration of the claim, rather than the dates that the claim actually became effective.

Next full case check date

41. The date on which the next full case check is due should be sourced from the Gathering Information template.

42. This must be later than the CSPF but no more than 3 years in the future.

43. A Full Case Check case control will be set using the date input. This is only applicable for ESA (IR) claims and input of a date for an ESA (C) claim will be prohibited.

Partner WFI Indicator

44. Input ‘M’ if the customer had a partner on or before the Effective Date or leave blank if partner WFI is not applicable.

First and Second Contribution Conditions satisfied flag

45. This flag indicates whether the First and Second Contribution Conditions are satisfied. This must be set to:

‘Y’ where the customer was entitled to IB, as they are deemed to have satisfied both contribution conditions for ESA

‘N’ where the customer was credits only for IB.

46. Error message E 2479 ‘FCC/SCC Fields Set – Other details must be entered’ displays when First and Second Contribution are completed but one or more of the following mandatory fields is incomplete: LCW Start date, Assessment Phase days, Waiting days, Credits awarded to date and Last effective day fields. All these fields may take a zero value, but the ‘0’ must be entered. (A blank is not acceptable.)

LCW Start date

47. The start date of the current Limited Capability for Work (LCW) period must be the Contributory effective date, the Period of Incapacity for Work (PIW) of the IB claim.

Assessment Phase days

48. For BFC reassessment cases, the value will be overwritten to 91 days and a comment C3581 ‘Migrated claim, Assessment days overridden’ will be displayed on re-entry to the screen.

Waiting Days

49. For BFC reassessment cases, the value will be overwritten to 3 days and a comment C3582 ‘Migrated claims, waiting days overridden’ will be displayed on re-entry to the screen.

State Second Pension date

50. Input the Effective Date of ESA in the State Second Pension (S2P) date field only if the start date is before 06/04/2016.

51. Insert 364 in the S2P linked ESA days field.

WCA Status

52. This is to record the action already taken with regards to the Work Capability Assessment (WCA).

53. The field will have allowable values of

0 - no Medical Services Referral System (MSRS) action taken on claim,

1 - MSRS notified but no WCA action, and

2 - WCA action completed.

54. For BFC reassessment cases, WCA status the value must be set to 2. Otherwise the error message E3583 ‘Migrated case, WCA status must be 2‘ will be displayed.

MSRS date

55. Enter the Effective Date.

Credits awarded to date

56. This is the number of credits awarded so far from the start of this contribution year or from the ESA Effective Date (whichever is the later). This must not exceed the maximum weeks in that period. The maximum number of credits is 53.

Last effective day

57. The last effective day (LED) is the date to which the ESA case was administered clerically. This must be completed.

Picklist screen dialogue JA672

58. Once all the necessary fields have been completed, the user will be navigated to protected Picklist screen dialogue JA672 .

59. The Picklist screen is then displayed again with the lower part of the screen unprotected for selection of required screens.

60. If the BFC process has been interrupted and resumed, the lower part of the screen is unprotected on entry.

61. In JA672 Build From Clerical - Tax Screen, input:

total benefit paid to date in the ‘Total Benefit Paid’ field

total taxable benefit paid to date in the ‘Total Taxable Benefit’ field

the figures held on clerical documents ESA14P and PB8.

62. After all screens selected have been visited, the Picklist is presented again.

63. Declare that evidence is ‘complete’ for the Contributory and where applicable the IR claim.

64. Press as appropriate

JA230 button - access dialogue JA230 Maintain IB & IS award details for BFC reassessment claim. This is the dialogue used to record any Transitional Addition

WCA button - access dialogue JA674 ESA Work Capability Assessment for completion of necessary details within this dialogue prior to the claim being assessed. NOTE: Dialogue JA674 can only be accessed when the case is closed on the source system

JA400 button - access the Method of Payment screen dialogue JA400 and amend Post Office in CP650 if appropriate.

65. Once the evidence has been completed for both Contributory and where applicable the IR claim and the claim has successfully passed through adjudication and first payment, the claim will no longer be in BFC mode and subsequent changes on the claim must be completed via the Maintain Claim Details dialogue JA610 after having first registered the event in Register Claim/Event JA060 .

66. Selecting Save button will save all data captured so far and return the User to the BFC NINo Prompt. After this action, when the BFC screen is re-entered it will display the claim dates and office numbers. It will be possible to amend the data in the lower part of the screen except for the CSPF date, which is protected.

67. Selecting JA674 button will navigate to ESA Personal Capability Assessment dialogue to input the WCA outcome decision and the customer group.

Interrupting the BFC process

68. The BFC process can be interrupted by using the Save button. The earliest point the Save button can be used is during the first visit to the picklist screen JA610636 , after ‘Chge Effv Date’ button has been selected to register the claim. Subsequently the stored data is displayed on the JA672673 screen and Save button can be selected after making any required changes to the BFC details.

69. Select the screens to be entered and any appropriate mandatory screens will be pre selected by the system.

Specific Build from Clerical Case Controls

70. These are the specific Case Controls affected by the BFC Details screen. No others are used as a direct consequence of the BFC action

P024 Postal Check Due Date

S283 WCA Referral Not Cleared

S292 WCA Progress .

Accessing Dialogue JA674

71. In the BFC process, cases will continue to be live on the source system (ISCS/PSCS) until the clerically calculated effective date is reached. During this period, action on JSAPS Dialogue JA674 ESA Personal Capability Assessment will not be possible.

72. Users must set a BF date to mature on the effective date, when the case will be closed on the source systems, in order to access dialogue JA674 to input the WCA outcome decision and the customer group.

73. Users can progress through and complete dialogues JA060, JA610 and JA400 before setting the BF to the effective date.

74. The effective date recorded in JA610 will display in the WCA Effective Dated field in JA674. It is protected so cannot be amended.

75. In dialogue JA674 record:

the WCA details

the WCA outcome or appeal received

confirm and maintain customer's medical evidence.

76. Using the clerical information on the ESA14, ESA14P and any clerical papers available input the IB/IS award components in dialogue JA230233 IB/IS Award Component, using the IB (IS) Reassessment 'input codes' and relevant amounts.

77. JA230233 IB/IS Award Component – IB (IS) Reassessment Codes table for IS award component:

001	Personal Allowance
006	Disability Premium
007	Sev Disability Prem
019	Polygamous Partner Personal Expenses
022	Carer Premium
026	Enhanced Disability Premium
028	Bereavement Premium

78. JA230233 IB/IS Award Component – IB (IS) Reassessment Codes table for IB award component:

015	Dependant Child
016	Dependant Spouse

018	IVA Low
019	IVA Middle
020	IVA High
132	IB Pre 97 Additional Pension
133	IB Pre 97 Additional Pension (Frozen)
140	IVB Basic Component
142	SDA Basic
149	SDA Age Related Allowance – Higher Rate
150	SDA Age Related Allowance – Medium Rate
151	SDA Age Related Allowance – Lower Rate
154	IBST(L)
155	IBST(H)
156	IBLT
157	Incap Age Addition – Higher
158	Incap Age Addition – Lower
159	SB – Over MPA

160	SB – Under MPA
181	IB Post 97 Additional Pension
186	Shared Additional Pension
188	IB Adult Dep
191	IB Post 02 Additional Pension

79. JSAPS will automatically calculate the Transitional Addition (TA) payable from the information entered in ELUS dialogue JA230233 IB/IS Award Component.

80. Check the calculated amount of TA in ELUS dialogue JA200 against the clerically calculated amount on the ESA14. This is to ensure they are both the same amount. Where the amounts differ, the correct amount should be identified and input in dialogue JA230233 IB/IS Award Componen t and add a note in JA110 Maintain Notepad .

81. Where the TA amounts differ, establish if there is an overpayment or under-payment and action appropriately.

82. An LO1 adjudication will be prompted in dialogue JA200 when an attempt to access JA405, ‘Compute Payment’ is made. This check will appear on 100% of cases. Pass all paperwork to the authorising officer to clear this check and complete payment action in JA405.

83. Access JA100, ‘Taxation Changes’ and complete the following fields:

• adjust benefit paid

• adjust taxable benefit

• adjust up/down (+/-)

using the ESA14P and form PB8.

84. Input a note in JA110, ‘Notepad’ to confirm build from clerical action and taxable benefit has been adjusted.

85. Once the case is built on ELUS all clerical papers must be sent to remote storage. Send all clerical papers to the ESA owning office to take the appropriate RS Web action.

86. Any IB (IS) Reassessment cases that cannot be built onto ELUS/JSAPS must be maintained as current ESA clerical process including the maintenance of the TA.

87. Ensure case controls are set in ELUS dialogue JA530 Case Controls, for any future reviews and the next Work Capability Assessment (WCA), using the date(s) recorded clerically on the A22.

Third Party Deductions

88. Only Third Party Deductions will be manually entered on to ELUS. Take actions as detailed on the Deductions deskaid to input in ELUS dialogue JA300 Maintain General Deductions .

Flat Rate Maintenance

89. When the case is to be built on JSAPS via ELUS after 23 May 2011, send an A421B to the Single Point Of Contact (SPOC) requesting Flat Rate Maintenance (FRM) deductions via JSAPS from the date of change, ensure the following information is included:

personal details

date of change

select ‘request for deductions via system – case built from clerical’

90. For partner deductions the “For” column needs to be amended from “00” to “P” (for customer deductions 01 will display and not need updating).

91. Where and FRM deduction is held for both customer and partner the deduction will not be automatically transferred and will need to be entered as described above

92. These deductions will be downloaded automatically via the interface and no manual action is required other than to accept the download when received.

Social Fund Deductions

93. Take the following actions when the case is ready to be built onto JSAPS via ELUS:

send clerical acknowledgement to Social Fund to inform them that the clerical deductions have ceased

Social Fund will end the clerical deductions record on Social Fund Computer System

Social Fund will then initiate automated deductions from ESA via the interface.

94. These deductions will be downloaded automatically via the interface and no manual action is required other than to accept the download when received.

Debt Management Deductions on PSCS

95. Where a negative adjustment on PSCS has been identified as an Overpayment Recovery take the following action:

Step	Action
1.	Do not raise a new referral to Debt Management using information visible on ELUS
2.	Continue to maintain current deductions other than overpayments from IB/SDA and set a CAM task for the effective date

3.	Enter and process the ‘other’ overpayment deductions in ELUS JA303 (before completing ELUS JA405 Compute Payment action)
4.	When the CAM task matures, inform Debt Management of the change of benefit using the IB (IS) Reassessment Debt Management template . Make sure to record: Customers name and National Insurance Number (NINo) Case is part of IB (IS) Reassessment End date of IB/SDA ESA start date (Effective Date) Date transferred to JSAPS (date of last deduction from benefit) Amount of customer’s award if they have a valid appeal
5.	Send template via e-mail to the Central Debt Management In-box
6.	Record issue of e-mail template to Debt Management on ELUS JA110, Notepad . The customer will be informed during the ‘entitlement’ call that the Overpayment deductions they are paying currently will continue to be taken from their ESA.

IB(IS) National Reassessment – handling Severe Disablement Allowance cases

Introduction

1. The purpose of this guidance is to inform Benefit Centre Directorate (BCD) staff what action to take for National IB(IS) Reassessment when a customer is receiving Severe Disablement Allowance (SDA) as they are in receipt of a passported benefit or they are subject to the Disablement Condition.

2. This guidance is in addition to the other National IB(IS) Reassessment guidance which deals with the overall process of reassessment.

3. From 20 December 2010 it has not been possible to send any further SDA 80% disability assessment type referrals to the Health Assessment Advisory Service.

4. For customers who live in Wales and who choose to deal with their business in Welsh refer to the Welsh Language guidance

5. To have qualified for SDA a customer must fulfil any one of the following:

have originally qualified for SDA prior to 6 April 2001 and the claim has been continuous

submitted a claim on or after 6 April 2001 that links to a previous SDA entitlement;

6. Some customers qualified for SDA because they were in receipt of a passported benefit.

7. This guidance deals with two possible scenarios

the reconsideration of the Disablement Condition (80% test) falls between 20 December 2010 and 31 March 2014 (inclusive)

the benefit which has passported the customer to SDA terminates prior to 31 March 2014

8. Customers reaching pensionable age before 6 April 2014 are excluded from the IB (IS) Reassessment process.

9. On receipt of a 6512 report ‘Reconsider disablement condition for SDA’ from the Pension Strategy Computer System (PSCS) take the following action:

Step	Action
1.	Do not refer to the Health Assessment Advisory Service
2.	Check to see if the customer has a passported benefit
3.	If ‘Yes’ make a further award of SDA as per the existing instructions on dealing with passported benefits
4.	If ‘No’, set a case control in dialogue RP303 Controls and Reviews to extend the expiry date of the current 80% disability assessment to 01/04/2014
5.	Confirm the award by completing the adjudication screens in dialogue RP603 Off-line decision
6.	Leave the case to continue the Reassessment process.

10. When notified that a customer’s passported benefit has or is about to expire during this period, take the following action:

Step	Action
1.	Check to see if another benefit award can be treated as a passported benefit for SDA purposes

2.	If ‘Yes’ action as per the existing instructions on dealing with passported benefits
3.	If ‘No’ set a case control to extend the SDA award temporarily for 3 months in dialogue RP303 Controls and Reviews
4.	Check that the Personal Capability Assessment (PCA) date is 3 months or more ahead.
5.	Take no further action. Reassessment continues on maturity of PCA date.
6.	Set a case control for the expiry of the 3 month SDA extension period. If the case control matures and the customer has not been called for a WCA, re-extend for a further 3 months, and again as required
7.	If ‘Yes’ extend the SDA award temporarily for 3 months in dialogue RP303 Controls and Reviews and maintain SDA award on PSCS. Commence customer’s reassessment journey clerically.
8.	Monitor the progress of the customer’s Reassessment journey. The customer should have been reassessed for ESA and the SDA closed down on PSCS before the system set medical opinion assessment date is reached. This will ensure that the customer is not notified twice that their reassessment journey is about to start.