

01 August 2018

Your Universal Credit claim

Work capability assessment decision

Dear 

Following your work capability assessment we've decided that you do not have limited capability for work.

This means you may be expected to look for work, depending on what you have agreed with your work coach.

What happens next

We will contact you to look again at the work-related requirements in your commitments.

You do not need to send us any more fit notes.

Your payments

You will still receive Universal Credit. The amount may change if your circumstances change. Check your statement each month to see the exact amount.

Your Universal Credit could be reduced if you do not go to appointments with your work coach or do what you agreed in your commitments. We call this a sanction.

How we made this decision

We have used all the information we have about you, including:

- your capability for work questionnaire, if you filled one in
- information provided by the Health Assessment Advisory Service following your work capability Assessment

More information

Use your journal to contact us if you have any questions.

Find out more about Universal Credit at www.gov.uk/uc

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- any other information that you or your doctor sent us

We compare that information to a list that describes physical and mental problems that could stop someone working. A brief summary of the list follows this letter.

If you want a copy of your full assessment report, or need more information, call us on 0800 328 5644.

Tell us about any changes

You must tell us straight away if there is a change in your circumstances. For example, you need to tell us if you have a new health condition or your existing health condition gets better or worse.

Use your online account to tell us about changes.

If you give wrong or incomplete information or you do not report changes straight away you may be paid more or less money than you should. You will have to pay back overpaid money when told to do so. You could also be prosecuted or need to pay a financial penalty. If we pay you less money than we should we may pay you this money back, including any arrears due.

Yours sincerely,

Universal Credit

If you disagree with a decision

You can ask us to explain why

You, or someone who has the authority to act for you, can call 0800 328 5644 or use your journal to request a written explanation. You'll need to do this within **1 month** of the date of this letter.

You can also ask us to reconsider a decision

Tell us if you think we've overlooked, or you've more, information that affects the decision. Do this within **1 month** of the date on this letter.

When we've looked at what you've told us, we'll send you a letter to tell you what we've decided and why. We call this letter a 'Mandatory Reconsideration Notice'.

When you've done this you can appeal

If you disagree with the Mandatory Reconsideration Notice, you can appeal to a tribunal.

You must wait for the 'Mandatory Reconsideration Notice' before you start an appeal.

Equality and Diversity

We are committed to treating people fairly, regardless of their disability, ethnicity, gender, sexual orientation, transgender status, marital or civil partnership status, age, religion or beliefs. Please contact us if you have any concerns.

What we look at when we assess you

We look at the information we have about you including your assessment then consider whether you could function in a workplace.

This is just a brief overview. For a complete guide, visit:

<https://www.gov.uk/government/publications/work-capability-assessment-handbook-for-healthcare-professionals>

Physical Functions

Moving around

This looks at the ability to mobilise over a distance of 200 metres, with or without a walking aid or self propelled wheelchair, without having to stop due to significant discomfort or exhaustion. The activity does not have to be performed without any discomfort or pain at all and also reflects the individual's ability to function for the majority of the time if the condition fluctuates. If relevant it also looks at the ability to negotiate two steps, with or without using a handrail, unaided by another person. It is intended to reflect the level of mobility that a person would need in order to be able to move reasonably within and around an indoor environment. The modern working environment should allow for the use of a wheelchair and any other widely available aid and therefore the concept of mobilising within a workplace is considered the critical issue – rather than just the individual's ability to walk around a workplace.

Standing and sitting

This looks at the ability to remain in one place for an hour either standing, sitting, or alternating between the two, without having to move away due to significant discomfort. When standing, a person would not be expected to need to stand absolutely still, but would have freedom to move around at the workstation or shift position whilst standing. Similarly, it is considered reasonable that a person would be able to move around when sitting. If relevant it also looks at the ability to move from one seat to another, located next to one another, without assistance from another person.

Reaching

This looks at the ability to raise at least one arm above the head. It considers the ability to reach mainly in an upward direction through movement at the shoulder joint through forward flexion or abduction and also the internal rotation of the shoulder. It is an evaluation of power, co-ordination and joint mobility in the upper limbs.

Picking things up and moving them

This looks at the ability to pick up (from waist height) and move an object equivalent in weight to a one litre carton of juice with one or both hands. It also looks at the ability to pick up (from waist height) and move a large light object such as an empty cardboard box. It does not include the ability to carry out any activity other than picking up and transferring, i.e. it does not include the ability to pour from a carton or jug.

Using hands (manual dexterity)

This looks at the ability to use a pen or keyboard with either hand. If relevant it also looks at the ability to pick up a small object, press a button or turn the pages of a book. It is intended to

reflect the level of ability to manipulate objects that a person would need in order to carry out work related tasks.

Being understood (speaking, writing or typing)

This looks at the ability to convey a simple message, such as the presence of a hazard, by speaking or writing unaided by another person. The level of communication represents a very basic level of communication and this can be achieved by writing or typing if speech is not possible. The concept of communicating a message such as a hazard is hypothetical and the immediate availability of a computer or pen and paper to write a message would not be considered. It is not limited to the English language, but looks at communication in whatever the first language is.

Understanding communications (hearing or reading)

This looks at the ability to understand a simple message, such as the location of a fire escape, by hearing, lip reading or reading large print or Braille. Restriction in either vision or hearing must be considered as an individual must have capacity to understand a simple message through both the written and spoken word. This descriptor relates to an individual's ability to understand communication at a very basic level. The descriptor reflects only basic comprehension of writing and is not intended to reflect any higher level of literacy.

Navigation (getting around safely)

This looks at the ability to navigate visually (using a guide dog if appropriate) around unfamiliar surroundings without being aided by another person. Any restriction identified must relate primarily to a sensory problem, and not cognitive issues as these are considered elsewhere.

Incontinence (bladder or bowel)

This looks at whether there is loss of control, whilst conscious, leading to extensive evacuation of the bladder or bowel, sufficient to require cleaning and a change of clothing despite wearing or using an appropriate aid such as an incontinence pad.

Consciousness

This looks at whether there are regular involuntary episodes of lost or altered consciousness during waking periods which result in significantly disrupted awareness. Altered consciousness implies that, although the person is not fully unconscious, there is a definite clouding of mental faculties resulting in loss of control of thoughts and actions. This can be caused by such conditions as epilepsy, cardiac arrhythmia or hypoglycaemic episodes.

Eating and drinking

This looks at physical or mental conditions that restrict the ability to convey food or drink to the mouth. It also looks at any physical or mental condition that prevents or inhibits chewing or swallowing requiring the assistance or prompting of someone else.

Mental, Cognitive & Intellectual Functions

Learning tasks

This looks at the ability to learn anything beyond a moderately complex task such as operating a washing machine. It is not relevant as to whether a person learns a task by watching a visual

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demonstration, learns by reading or through verbal instruction. Within the workplace, the ability to learn tasks is vital. This activity may be relevant to conditions including learning disability and organic brain disorders including acquired brain injury or stroke. A simple task may only involve one or two steps while a moderately complex task may involve 3 or 4 steps.

Awareness of hazards

This looks at whether there is a reduced awareness of every day hazards (boiling water or sharp objects) that could lead to a significant risk of injury to themselves or others, or damage to property. It reflects a lack of understanding and insight that something is dangerous or that there is an impaired ability to recognise that a situation will present a potential hazard.

Starting and finishing a task

This looks at whether a mental impairment affects the ability to initiate and complete personal, day to day actions such as planning, organising, problem solving or prioritising in regard to activities such as washing, dressing, shopping or paying bills.

Coping with change

This looks at the ability to cope with any unplanned change to the extent that day to day life is made significantly more difficult. It is intended to include difficulties that could be encountered by people with learning difficulties, autistic spectrum disorder, brain injury, severe anxiety or psychosis. It is not intended to reflect simple dislike of changes to routine, but rather the inability to cope with them.

Getting about unaccompanied

This looks at the ability to visit familiar or unfamiliar places without being accompanied by another person due to such mental conditions as extreme anxiety, agoraphobia, or a learning disability.

Dealing with other people

This looks at the ability to interact with an unfamiliar person due to a cognitive impairment or mental disorder. It is intended to reflect a significant lack of self-confidence in face to face social situations that is greater in its nature and its functional effects than mere shyness or reticence. It reflects levels of anxiety that are much more severe than fleeting moments of anxiety such as any person might experience from time to time.

Appropriateness of behaviour

This looks at whether there are regular uncontrollable episodes of aggressive or disinhibited behaviour that would be unreasonable in any workplace. It is intended to reflect difficulties in social behaviour which might for example, be encountered by people with psychotic illness or other conditions such as brain injury that result in lack of insight.