

Miscellaneous Actions

Responsibilities

1. Financial Assessment is a duty undertaken by an Adviser Support Officer. See the Job Roles Catalogue for a description of the Adviser Support duties.

Sensitive Customer Records

2. To ensure that the confidentiality of information held on special claimants is maintained user access must be strictly controlled on the basis of business requirement.

3. The capability of a user to access an account annotated as a Special Customer Record must be restricted to a set period of time and on an event-by-event basis. The period of time allowed should be sufficient for the activity to be undertaken, but in no circumstances should this be longer than 4 hours. If this period of time is inadequate, further management authorisation will be necessary.

4. Before being allowed access to any Special Customer Record, users will have to demonstrate to their line manager that there is a valid business reason for accessing the information. When authorisation has been granted, the user must only access, or use, that information for approved official purposes.

5. A user who has an official need to access information on a specific Special Customer Record is not entitled or authorised to access information on other Special Customer Records, regardless of whether or not they have the ability to do so. Users should be aware that access to Special Customer Records is monitored.

6. Further advice on general security matters can be found on the Departmental Security Team's intranet site, or by contacting the Department's IT Security Advice Line. See First Contact guidance for further information about sensitive records and JCP3.

Establishing correct National Insurance Number

7. If the claimant does not have, or does not know their National Insurance number (NINO) and a trace is unsuccessful or there are multiple matches, CMS will allocate a unique contact reference number.

8. The case should be transferred clerically. No further action is required until the entitlement to benefit has been established at the Benefit Centre (BC).

Payday and Periodicity

9. Periodicity and Payday (P&P) rules mean that all new and repeat claims have a benefit week ending (BWE) day and payment cycle aligned to their National Insurance Number (NINO).

10. Two new fields ("FJR Day" and "FJR Cycle") have been added to the 'Conditionality and Additional Information' screens. The fields in the 'Customer 1' tab can be modified but those on the 'Customer 2' tab (for JSA Joint Claims), is display-only.

11. For JSA claimants, the BWE day should also be the day they attend their Fortnightly Job Review (FJR). Where this is not possible, see Default JSA Attendance/ FJR Day is not suitable.

Benefit Week Ending (BWE) Day

12. Where a claimant NINO is held, the BWE day is determined by the last 2 digits of the NINO as follows:-

Last 2 digits of NINO	BWE Day default-value
00 to 19	Monday
20 to 39	Tuesday
40 to 59	Wednesday
60 to 79	Thursday
80 to 99	Friday

Note: Where a claimant NINO is not held, the BWE day should be defaulted to 'Wednesday'.

Payment Cycle

13. Where a Claimant NINO is held, the payment Cycle is determined by the last digit of the NINO as follows:-

Last digit of NINO	Cycle default-value
0,2,4,6,8	P
1,3,5,7,9	R

Default JSA Attendance/ FJR Day is not suitable

14. Even though the BWE day and cycle is determined by a claimant's NINO, the JSA attendance/ FJR day can be determined locally if necessary.

15. Jobcentres have the discretion to allocate a claimant with a different attendance/FJR day if they cannot accommodate them on their default BWE day, or where a claimant cannot attend for example, a part-time worker.

16. The amended attendance/ FJR day must be after the default BWE day.

Note: Delaying the attendance day does not alter the period a claimant is paid for. Any payment due will be released when the claimant attends on their locally determined attendance day, but payments will only be made up to the default BWE day.

Updating JSAPS with a locally determined JSA Attendance/ FJR Day and FJR Cycle

17. JSAPS must be updated to hold the correct FJR day and cycle for all new claims made on or after 6 April 2009 and existing records, where a locally determined attendance/ FJR day has been allocated.

Note: Failure to update the FJR Day and FJR Cycle fields will result in payments being missed or advanced incorrectly during bank holiday closure periods.

18. The default values in the FJR day and FJR cycle fields can be amended via dialogues JA086, JA091 and JA094.

19. For further information about Payday and Periodicity and how benefit week ending days and payment cycles are allocated see: Payday and Periodicity guidance.

Jobseeker's Allowance claims made towards the end of or at the beginning of a benefit year.

20. If a claimant wishes to claim Jobseekers Allowance (JSA) towards the end of or at the beginning of the 'benefit year', it is important to tell them about the Relevant Income Tax years used to determine whether the contribution conditions for JSA(C) are satisfied.

21. It is especially important that claimants are made aware of this if they do not satisfy the Second Contribution Condition in the current 'benefit year', as they may do so if they wait until the following 'benefit year'.

22. This is equally important if they have no entitlement to Income Based JSA.

23. Claimants should be given this information even if they do not ask about it. This will enable the claimant to make an informed decision about whether to claim from a date in the current benefit year or wait until the start of the new benefit year.

24. If the claimant decides to claim JSA from their original claim date, continue according to existing procedures. However, if the claimant decides not to claim until the new benefit year they can claim their NI contribution credits as a non-claimant until the benefit year changes. See further information regarding non-claimants.

Emergency Payments

Introduction

25. Claimants must not be informed about Emergency Payments (EPs), unless they ask for one.

26. EPs are only paid to claimants who would otherwise suffer hardship, they should not be routinely offered because there are delays in processing new claims.

EP requested during the Financial Assessment Meeting

27. When a claimant requests an EP during a Financial Assessment meeting, always complete the meeting before dealing with the EP request.

28. Always check whether the claimant has already made an EP request earlier in the process. If one has been made, check with the claimant what the outcome was or what progress has been made.

29. Explain the new claims process to the claimant and give them an indication of the timescales involved. This may be sufficient to reassure the claimant that the claim is progressing, thus removing the immediate need for an EP.

30. If the claimant is willing to wait for their new claim to be processed, continue as per existing procedures. However, if they are not willing to, or cannot wait the claimant must attend their Personal Adviser (PA) meeting and return to complete the Financial Assessment Interview at the end of the PA Meeting.

31. The PA must be informed that the claimant must be referred back to the first available Adviser Support officer to conclude their Financial Assessment meeting at the end of the WFI/NJI due to the EP request.

EP requested during the Personal Adviser Meeting

32. When a claimant requests an EP during a PA meeting, the PA must complete the meeting, before referring the claimant back for the EP request to be progressed.

33. The PA must inform the appropriate Adviser Support officer that the claimant has requested an EP.

Financial Assessment Action at the end of the WFI

34. There is no requirement to establish whether the claimant is in hardship during the Financial Assessment Meeting. In addition, there is no need to challenge or query the claimants request for an EP or offer an opinion on whether they will be entitled.

35. Following an EP request, always establish the claimant's Initial Date of Contact (IDOC) and calculate how many days have passed since the IDOC. The IDOC is day zero. Therefore, if the IDOC is a Monday and the claimant contacts the Jobcentre on Friday then 4 days have passed.

36. The action to take depends upon whether the claimant requests the EP within 6 days of the IDOC or not.

EP requested prior to the first JSA BWE day or IS payday

37. If the claimant is requesting an EP prior to their JSA BWE day or IS payday, benefit or interim payments cannot be considered. Explain to the claimant that they may be eligible for a Social Fund Crisis Loan for Living Expenses.

38. Give the claimant the relevant Social Fund telephone number and explain that there application can be taken over the telephone. For further information, see the Social Fund Procedural Guidance.

39. As the Social Fund team need to know that benefit and interim payments have been considered and ruled out before they can consider a Crisis Loan, record the following information in CMS notes:

- 'Claimant requested emergency payment during Financial Assessment/PA meeting because (enter reason for request). Payment of benefit or emergency payment cannot be considered at this stage'

EP requested after the first JSA BWE day or IS payday

40. If the claimant is requesting an EP after the first BWE day or IS payday, benefit payments, interim payments, or a Social Fund Crisis Loan for Living Expenses can be considered.

Note: The consideration of benefit payments must take priority.

41. Record the claimants EP request on CMS or in JSAPS Dialogue JA110 or ISCS IS110 if the claim is no longer on CMS. The following information should be recorded:

- Claimant requested emergency payment at Financial Assessment/PA meeting because (enter claimant's reason for request).

42. For claimants with clerical claim forms, complete the Interim Payment proforma and fax it to the appropriate Benefit Centre (BC).

43. Explain to the claimant that a decision maker will now decide the appropriate channel for their EP request.
44. Telephone the BC **immediately** to advise them that the claimant has requested an EP and ask them to view CMS, JSAPS, or the proforma.
45. Ask for an urgent decision because the claimant is waiting. Remain on the telephone while the decision is made.
46. A benefit processor will establish the type of payment appropriate whilst on the telephone.
47. Always advise the claimant of the Benefit outcome.
48. Where the decision maker has identified that Social Fund is the appropriate channel, the claimant must be advised to apply for a Social Fund Crisis Loan for living expenses. Give the claimant the relevant Social Fund telephone number and explain that their application can be taken over the telephone. Full procedural guidance can be found at Social Fund Procedural Guidance - Claimant Makes an Enquiry.
49. If benefit is due, or if an interim payment is appropriate, explain the payment arrangements to the claimant.

Electronic transfer of emergency payment cases

50. Where appropriate at the point of selecting [Start Transfer], in cases where an interim payment has been requested, Customer Management System (CMS) displays the message, 'Has an Interim Payment been awarded?' to prompt checking the outcome of any interim payment request.
51. This allows cases where an interim payment has been requested, but not decided or awarded, to be successfully transferred electronically. This will increase the opportunities of an electronic transfer.
52. Liaise with the Benefit Centre to ascertain whether there has been a decision to award an interim payment. If one has been awarded, select [Yes].
53. If the claim is for Income Support or Jobseeker's Allowance, CMS will override the transfer method to clerical. This is to ensure that the claimant is not overpaid.
54. If there has been a decision not to award an interim payment or if the decision has not yet been made, select [No]. If the claim is for Income Support or Jobseeker's Allowance, CMS will allow the case to be transferred electronically.

Claimants Under Threat of Eviction

55. If the claimant is under threat of eviction, the WFI/New Jobseekers Interview (NJI) will be booked as soon as possible for the same or following day to enable the application to be processed quickly.
56. The Customer Service Agent will arrange an immediate WFI and inform the claimant of the time and date of the interview. They will also be reminded to bring any verification requested to the interview.
57. On completion of the First Contact process, the Customer Service Agent will record the date and time in the Case Notes.

Child Maintenance interest identified

58. If it is identified there is a child maintenance interest during first contact and the claimant chose not to be referred/signposted to options, encourage

the claimant to contact options and issue leaflet 'If you are claiming benefits'. - Provide the claimant with the relevant telephone numbers.

Forwarding forms and other post to Local Authorities

59. If claimants bring in any clerical forms or other post for Local Authorities (LA) these must be sent to the relevant LA as per locally agreed procedures.

Case Notes

60. Case Notes enable the user to create and save notes after initial details have been created on CMS but prior to the last benefit associated with the claim being initiated for transfer.

Note: Any 'pop-up' dialogue, for example, 'Verification Previous Work', will need to be completed before the Case Notes option can be selected from the 'Case Notes' link on the left hand side of the screen.

61. The purpose of this screen is to allow viewing of all existing notes in a list for a case, and allows the addition of a new note or view existing notes details.

Note: All the Notes input will be produced on the appropriate Input Document when the case is transferred.

62. Click on any of the column headers to re-sequence the notes on this screen.

63. Selecting the [Add] button will go to the 'Note Creation' screen. Access to this screen is available until the last benefit on a claim has been initiated for transfer.

64. Highlighting the individual note and selecting the [View] button, will go to the 'View Note' screen. Access to this screen is available at all times.

65. Selecting the [Close] button will return to the screen where the Notes facility was triggered.

Note creation

66. The purpose of this screen is to add a new note to a case.

Input to fields

67. The following fields will be pre-populated:

- 'Date and Time';
- 'Location'; and
- 'NINO/CRN'.

68. Complete the following fields:

Field	Input
Heading	this is a mandatory field, enter a meaningful title for the note. The heading can be up to a maximum of 50 characters;
Disclose To	this is a mandatory field, select who to disclose their note to. Select one of the following options: LA; JCP; or Both;
Details	this is a free-text field, to type the note, it can be up to a maximum of 2000 characters;

69. Consider the appropriateness of disclosing certain claimant information to the LA and do not disclose information that is not relevant to the claim for HB/CTB, for example:

- previous work;
- medical certificates; or
- labour market information.

70. The [Save] button:

- validates entries in all of the fields;
- saves all the data entered; and
- returns to the main Case Notes screen.

71. Once saved, Case Notes cannot be amended, added to or deleted.

72. The [Cancel] button will close the screen without saving any of the data entered and will return to the main Case Notes screen.

View Case Notes

73. The purpose of this screen is to allow the viewing of a note held for a particular case.

74. Selecting [Previous] will display the previous note in the sequence, in date and time order.

75. Selecting [Next] will display the next note in the sequence, in date and time order.

76. Selecting [Print] will print the individual note being viewed.

77. Selecting [Cancel] closes the screen and returns to the main Case Notes.