

JSA(CNS) Accepting the Claimant Commitment

Creating and accepting the Claimant Commitment

Universal Credit and Jobseekers' Allowance Contributions Based New Style (JSA(CNS)) are designed to ensure that for people who can work is still the best route out of poverty and an escape from benefit dependence. A personalised approach to labour market activity together with appropriate sanctions, will encourage claimants to take responsibility for themselves when preparing for work, finding work and taking up more and better paid work.

Accepting a Claimant Commitment is a condition of entitlement and is at the heart of this personalised approach. Compliance with requirements such as active work search and work preparation increases the chances that claimants will get paid work more quickly than they would otherwise. The Claimant Commitment will set out all requirements and consequences in one place – ensuring claimants understand what is required.

The Claimant Commitment is a contract between DWP and the claimant:

- it details joint responsibilities
- it is a fundamental part of the claimants claim to JSA(CNS) or UC
- it helps the claimant to either get paid work or increase their earnings
- claimants cannot receive JSA(CNS) or UC if they do not have a current agreed/ signed claimant commitment

The Claimant Commitment must:

- detail the claimant's work preparation requirements
- detail the claimant's work search requirements
- detail the claimant's work availability requirements
- detail the claimant's other work related activities
- explain the consequences of failing to comply with any of their work related requirements
- be reviewed regularly and updated as required

As accepting a Claimant Commitment is a condition of entitlement, in the case of joint claims for Universal Credit **both** eligible claimants within a household will be required to accept an

individual Claimant Commitment which will set out any work related requirements for each of them. If one member of the couple does not accept their Claimant Commitment neither will be entitled to Universal Credit if they continue to apply as a couple.

The Claimant Commitment can be accepted by phone or in writing. In most cases the Claimant Commitment will be accepted in writing during a Work Search Interview.

For JSA (CNS) only claims All Work Related Requirements will apply and a Claimant Commitment must be created Face to Face

Creating a Claimant Commitment

WSP is not able to generate JSA(CNS) Claimant Commitments. The JSA(CNS) Claimant Commitment (JSA(CNS) CC) is a clerical template edited and personalised by the adviser.

The following steps are taken to create a Claimant Commitment on WSP:

- 'General' is selected from the 'Information' menu
- 'Create Claimant Commitment' is selected from the ribbon
- this displays the 'Claimant Commitment Sanction Dialogue' box
- the dialogue box is moved to make sure the 'Claimant Group' field is visible
- the look up is selected from the 'Sanction data' field this produces a list of Sanctions
- the sanction regime relating to the claimant is selected from the drop down menu this information is gained from the 'Claimant Group' field
- OK is selected
- this returns the user to the 'Claimant Commitment Sanction Dialogue' box;
- 'Next' is selected
- this submits the data and the following message is displayed this is the end of the dialogue. Click Finish to close it'
- 'Finish' is selected

This displays the 'Claimant Commitment' screen:

- 'Preview' is selected from the ribbon which will generate a Word Document
- the Word Document is selected from the ribbon at the bottom of the page
- this will display the Claimant Commitment as a Word Document in a new window
- the 'File' tab is selected
- 'Print' is selected from the menu on the left hand side of the page
- this will display a 'Print Preview'. This must be reviewed with the claimant to ensure that it is correct before printing

The personalised elements of the Claimant Commitment will be populated by the content recorded in specific fields on WSP by the adviser.

Claimant Commitment is correct

If the Claimant Commitment is correct:

- the number of required copies for printing is selected. This is done by using the arrows in the 'Copies' field
- 'Print' is selected
- this will return the user to the Word Document showing the Claimant Commitment
- 'X/Close' is selected
- the completed Claimant Commitment will show in the 'Claimant Commitments' field

The adviser must discuss the setting of a regime for Work Search reviews with the claimant. With clerical claimant commitments, the adviser must ask the claimant to agree the content of the CC as they create the commitment together. When the claimant agrees that this is correct, the adviser prints two copies of the clerical claimant commitment.

The printed claimant commitment is presented to the claimant for them to accept.

Claimant Commitment is not correct

If the Claimant Commitment is not correct the incorrect Claimant Commitment should be deleted and the appropriate fields amended or completed in WSP.

Claimant accepts Claimant Commitment

Where the Claimant accepts the Claimant Commitment:

- the claimant is advised to sign both copies and keep one this encourages the claimant to take ownership of their Claimant Commitment
- a record that the Claimant Commitment has been accepted is recorded in the Universal Credit agent portal this step is vital because it triggers entitlement to Universal Credit without which the claimant will not be paid this is done in Claim Admin
- a copy of the Claimant Commitment is sent to the mail opening unit (MOU) to be scanned in the document repository system. The document should be labelled 'no CAMLite action' so that no duplicate actions are taken

Claimant commitment status in WSP cannot be amended if the CC issued has not been generated in WSP. The status will remain the same as it was before the clerical CC was issued. The adviser records details of a clerical Claimant commitment status in WSP Notes.

In WSP:

- the relevant Claimant Commitment is selected from the 'Claimant Commitments field'
- the look up is selected from the 'Commitment Status' field this will display a list of Claimant Commitment status'
- the 'Accepted' status is selected from the list, and
- 'Save & Close' is selected from the ribbon

Claimant does not accept the Claimant Commitment

If the claimant does not accept the Claimant Commitment, the adviser tells the claimant that they will not be entitled to Universal Credit (UC) or JSA Contribution New Style (JSA (CNS)), if they do not accept a Claimant Commitment (CC)

The adviser tells claimant that there is a 7 calendar day cooling off period and that if the claimant commitment is not accepted within the 7 days the claim will be closed.

The 7 day claimant commitment cooling off period starts from the day the claimant refuses to accept their Claimant Commitment and includes weekends but not bank holidays. The length of the cooling off period will be extended to reflect any bank holidays occurring in the 7 days following the creation of the claimant commitment.

It is the claimant's responsibility to make contact with DWP Adviser during this period if they want to accept or discuss their claimant commitment. If the claimant contacts DWP after the expiry of this period they will be advised that their claim is defective (claim not entitled/closed) and to make a new claim.

The Adviser creates a WSP Task to check the CC acceptance status on the 8th day.

The adviser tells the claimant that they can also request a reconsideration of the work related requirements and any limitations applied or not (2nd opinion with another adviser).

The adviser must explain to the claimant that:

- they can only request one reconsideration (2nd opinion from a different adviser) per CC.
- an appointment must be arranged so that claimant can discuss their circumstances with another adviser (this will include a review of information previously provided)
- the adviser will make a decision as to whether the claimant commitment is reasonable or not and relay this decision back to the referring adviser
- the adviser will then notify the Claimant of their decision. If the decision is not in favour of the claimant the adviser will close the claim and a new claim will have to be made. If the decision is in favour of the claimant the claimant will accept the commitment and the date of claim remains the same
- the claimant loses the right to a cooling off period once a reconsideration interview has been booked i.e. the claimant cannot sign the claimant commitment whilst waiting for their 2nd opinion interview

- a 2nd opinion interview **must** be conducted within the 7 day cooling off period
- the claimant has no right of appeal

The adviser tells the claimant that:

- a reconsideration has to take place during the cooling off period and cannot be asked for after the cooling off period has ended
- once a reconsideration has been requested it will take precedence over the cooling off period and they cannot decide to accept the claimant commitment until the reconsideration process is complete
- if the reconsideration is not found in their favour and they still will not accept the CC the claimant will need to make a new claim. Any payment of JSA(CNS) arising from this new claim will start no earlier than the date of the new claim. The claimant must be told that there will be no further cooling off period even if the original CC is amended following a 2nd opinion

The adviser must give the claimant a further opportunity to agree to the claimant commitment so that their claim can proceed. The adviser tells the claimant that if they choose to sign the commitment now their claim to JSA(CNS) will proceed.

The adviser asks claimant if they want to proceed

If they still do not want to sign the commitment, the adviser updates WSP notes with 'JSA Claimant Commitment not accepted – claimant in cooling off period'. The adviser **must** update WSP notes and set a WSP task on the day of the interview to follow up 7 day cooling off period.

The adviser populates a claimant notification template regarding 7 calendar days cooling off period. The adviser **must** issue this letter on the day of the interview.

Adviser updates notes on claimants WSP record that claimant notification has been issued. A copy of this notification is not saved because a note on WSP is sufficient.

Once a claimant commitment is signed the adviser creates and issues a commitment pack.

Claimant Commitment - Cooling off period

Information for agents about the 7 day 'cooling off' period

Instigating the cooling off period

If a [claimant](#) does not accept their [Claimant Commitment](#) but does not request a second opinion, or ends the interview without accepting the Claimant Commitment, they enter the 'cooling off' period which lasts for up to 7 calendar days starting from the day they refuse to accept their Claimant Commitment.

The work coach (WC) takes the following action:

1. Accesses the Claimant Commitment screen in Work Services Platform (WSP).
2. Amends the Claimant Commitment status to 'Not accepted – in cooling off period'. This action must be completed on the day of the interview as WSP automatically calculates the cooling off period and sets a task for action to be taken.
3. Issues the claimant with the '[LTR Cooling Off Period](#)' letter about the cooling off period. If there is a partner issue the '[LTR cooling off period partner](#)'.
4. For new claims only sets a WSP task to check that the 'Verified' field on the claimant's 'General' section has been updated. This should be set to 'Yes' if the Claimant Commitment has been agreed during the cooling off period or at the second opinion interview.
5. Makes a note on the claimant's WSP record to say the letter has been issued.

Accepting the Claimant Commitment

If a claimant wishes to accept the Claimant Commitment during the 'cooling off' period, the claim continues from the original date of claim. The WC follows the steps in the Claimant accepts Claimant Commitment section of '[Accepting the Claimant Commitment](#)'. In WSP, the WC selects the claimant's 'General' section and selects 'Yes' from the 'Verified' drop down field.

Claimant requests a second opinion

If a claimant requests a second opinion before the 'cooling off' period ends, they can no longer accept the original Claimant Commitment. The WC books a 'Claimant Commitment - Reconsideration' interview for the same day or the next working day and updates the Claimant Commitment status to 'Not accepted – 2nd opinion'. See Claimant Commitment second opinion

Action to take when the cooling off period has expired and the claimant has not accepted a Claimant Commitment

Where a claimant's 'cooling off' period has ended and they have not accepted a Claimant Commitment, a WC will receive a task in WSP to alert them to close the claim. The task will be in the activities section of the 'My work' screen in WSP.

To update the claimant's record where the Claimant Commitment was created on the WSP, the WC:

1. Selects the relevant task in the list of activities.
2. Selects the claimant's name in the 'Regarding' field to display the claimant's record.
3. Selects the 'Claimant Commitment' from the common menu on the left hand side
4. Selects the Claimant Commitment with the 'Not agreed' status noted 'Not accepted – in cooling off period' from the list, and:
 - if the claim is live and in payment, the WC changes the status to 'Claim closed'
 - if the claim is not live, the WC changes the status to 'Claim not pursued'
5. Selects 'OK'
6. Selects the 'Look up' in the 'Not accepted reason' field.
7. Selects 'Refuse to agree CC' and 'OK'.
8. Selects 'Save & Close'.
9. If the claim is live, follows the process in ['Closing a claim record on the Work Services Platform \(WSP\)'](#). For a joint claim the WC must deactivate the partner's claim before

deactivating the claimant's. The partner's name will be displayed as a hyperlink on the claimant's home page and then continues from step 10 below.

10. Selects 'Mark complete' to close the WSP task.
11. Sets an immediate CAMLite task for the account developer (AD) and notes the task header: 'Universal Credit claim closure', and the task body: 'Universal Credit claim to be closed, cooling off period ended (enter date): no contact from claimant'.
12. Opens the Universal Credit Agent Portal, selects the claimant's Claim admin homepage.
13. Changes the Claimant Commitment status to 'not signed'
14. Checks the 'Claim status' and if live in payment, selects 'Claim terminated'.
15. Selects 'Continue' and 'Submit' to accept the change.

Where the Claimant Commitment hasn't been created on WSP, the WC updates WSP notes that the 'cooling off' period has expired and follows the process above from step 9.

Claimant Commitment – second opinion

How to book and conduct the second opinion interview when a claimant doesn't accept the Claimant Commitment during their initial Work Search Interview

If a [claimant](#) doesn't accept the [Claimant Commitment](#) during their initial Work Search Interview and requests a second opinion, a check must be made to see if the claimant is still in their 7 day period. This is done by:

- selecting 'Claimant Commitment' from the common menu
- checking the 'Created on' date for the Claimant Commitment marked 'Not accepted – in cooling off period'

- checking that there is an outstanding 'End of cooling off period' system task in the 'Open activity associated' screen (accessed through 'Activities' in the extension menu)

If the task is still current the claimant should still be in their 7 day period.

If the 7 day period has expired, the claim will be ended. The claimant must submit a new claim for [Universal Credit](#).

If the claimant is still within the 7 day period:

- a second opinion interview is booked (the interview must be on the same day or the next working day)
- the Claimant Commitment status is updated to 'Not accepted – 2nd opinion'

Second opinion requested during the life of the Universal Credit claim

If a second opinion is requested during the life of a Universal Credit claim, for example at a subsequent work-search interview or change of circumstances review, the steps are the same as in the above paragraph.

However, until the second opinion interview takes place the claimant must still undertake the activities that have been set out in the original Claimant Commitment.

The claimant may be sanctioned if, without good reason, they do not undertake these activities. However, if the requirements are changed at the second opinion interview, a sanction referral is not appropriate if the claimant fails to do something which, on review Universal Credit decides is no longer required.

Reviewing the Claimant Commitment at the second opinion interview

At the interview the Claimant Commitment that was previously not accepted is reviewed and a determination made if it should be changed. It should only be changed if, in the opinion of the work coach (WC) conducting the second opinion interview, the work-related requirements were unreasonable.

To review the Claimant Commitment:

- the Claimant Commitment is previewed in the [Work Services Platform](#) (WSP) by selecting the

'Preview' icon from the menu at the top of the screen (the Claimant Commitment will display as a word document)

- the claimant is asked to give their reasons why they did not accept the Claimant Commitment
- the reasons are discussed with the claimant and challenged where necessary
- a determination is made whether the work-search requirements in the Claimant Commitment are reasonable
- the decision is explained to the claimant

Claimant Commitment reasonable

For a Claimant Commitment created at an initial Work Search Interview the claimant is informed:

- their claim and their partner's will be ended
- they will have to submit a new claim online from the following day

For a Claimant Commitment created at an ongoing Work Search Interview the claimant is informed:

- their claim and their partner's will be ended
- their payments will be stopped from the beginning of the assessment period in which they failed to accept their Claimant Commitment
- they will have to submit a new claim online from the following day

The WC then closes the WSP record see 'Ending the claim in the Universal Credit Agent Portal and WSP' below.

Claimant Commitment unreasonable

If it is decided that the work-related requirements within the Claimant Commitment were unreasonable, they should be amended and a new Claimant Commitment created. The Claimant Commitment being previewed cannot be edited.

To change the Claimant Commitment (on WSP):

- the underscored claimant's name is selected on the Claimant Commitment (this opens the claimant record data gather screen)
- the relevant fields in the claimant record are amended to reflect the newly set work-related requirements (a new Claimant Commitment is created from the new information)

Claimant accepts the new Claimant Commitment

If the claimant accepts the revised Claimant Commitment, and has had no other changes of circumstances affecting their entitlement to Universal Credit, the claim will continue from the original date of claim and the steps in the 'Claimant accepts Claimant Commitment' section of the 'Accepting the Claimant Commitment guide' are followed.

If it is a new claim to Universal Credit, the WC updates the 'Verified' status in WSP. The WC then selects the claimant's 'General' section and 'Yes' from the 'Verified' drop-down list.

Claimant doesn't accept the new Claimant Commitment

If the claimant doesn't accept the new Claimant Commitment they are advised that their and their partner's claim will be ended and they must submit a new claim online. They must wait until the following day if they wish to submit a new claim for Universal Credit.

The claimant has no right of appeal if the work-related requirements set out in their Claimant Commitment are not accepted in the second opinion interview.

Once this has been explained to the claimant, they must be asked again if they wish to accept the Claimant Commitment.

Ending the claim in the Universal Credit Agent Portal and WSP

If the Claimant Commitment isn't changed or not agreed, the WC accesses the Claimant Commitment screen in WSP and the status of the relevant Claimant Commitment is changed to:

- 'Claim not pursued' if it is a new claim
- 'Closed' if it is an existing claim

The WC then closes the account on WSP see [Closing a claim record on the Work Services Platform \(WSP\)](#).

The WC also records the following information in the Agent Portal:

- the reason why the Claimant Commitment has not been accepted
- the reason why the claim has been terminated

Checking for provision

If the claimant is on the Work Programme or has any outstanding referrals to provision, the WC informs the relevant provider. See 'Change of circumstances for claimant on [Work Programme](#), Mandatory Work Activity or Work Choice'.

To check for any referrals in WSP the WC:

1. Selects 'Initiatives' from the 'Related' menu to display the Claimant initiatives screen.
2. Selects 'Work Programme referral' from the 'Active referrals' list. This displays all the referral details including the link to the provider.
3. Selects 'Save & Close' to close the Claimant initiative screen.
4. Selects 'Referrals' from the 'Related' menu. Active referrals (if any) will be shown on the Referral history screen.
5. Selects 'Save & Close' to close the claimant's record.

Mandatory reconsiderations and appeals

Where a claimant does not agree with the Universal Credit decision

When [Universal Credit](#) makes a decision on your claim or after you report a change in your circumstances, you will be sent a decision letter.

If you think the decision is wrong

If you think the decision is wrong, you must contact Universal Credit within 1 month of the date on the letter either by phone, face to face or in writing. If you do not contact Universal Credit within this time, any change to the decision may only apply from the date you make contact.

You, or someone who has the authority to act for you, can ask for:

- an explanation of the decision

- a written statement of reasons for the decision
- the decision to be looked at again (this is called mandatory reconsideration)

There may be some facts you think have been overlooked, or you may have further information that affects the decision.

If you ask for the decision to be looked at again, you will receive a letter explaining what has been done. This is called a Mandatory Reconsideration Notice. This will explain the outcome of your request, and what you need to do if you still disagree with the decision and want to appeal.

If you still think the decision is wrong

You, or someone who has the authority to act for you, can normally appeal to an independent tribunal. However, you cannot make an appeal until Universal Credit have looked at the decision again. If you can appeal, you must do this within one month of the date on your Mandatory Reconsideration Notice.

Your appeal must be in writing and sent to Her Majesty's Courts and Tribunals Service (HMCTS).

You will have received 2 copies of the Mandatory Reconsideration Notice. You will need to send 1 with your appeal and 1 is for you to keep. Your appeal will not go ahead unless you include a copy of this notice with your appeal.

How to get an appeal form

You can use the Tribunal's Notice of Appeal form to make your appeal. Using this form will help you to make sure that all the information the tribunal needs is included.

To get a copy you can download an appeal pack, which includes a Notice of Appeal form, go to either of the following:

- HMCTS website www.justice.gov.uk/tribunals
- www.gov.uk

Other outlets such as the Citizens Advice Bureau may also stock the Notice of Appeal form. Further information can be found on the HMCTS website.

You can appeal by letter giving all the reasons for your appeal. If any information is missing it may take longer to register your appeal and the Tribunal may have to contact you for further information.

Where to send your appeal

If you live in England or Wales, send your appeal to HMCTS, SSCS Appeals Centre, PO Box 1203, Bradford BD1 9WP.

If you live in Scotland send your appeal to HMCTS SSCS Appeals Centre, PO Box 27080, Glasgow G2 9HQ.

Where to get more information

You can get more information and advice on how to appeal from:

- HMCTS website www.justice.gov.uk/tribunals
- www.gov.uk
- an advisory service for independent support such as Citizens Advice Bureaux

Handling mandatory reconsiderations and appeals overview

How to process a mandatory reconsideration or appeal when a claimant disputes a Universal Credit decision by telephone, face to face or in writing

Once a [Universal Credit](#) decision has been made a decision notice is sent to the [claimant](#).

Decision notices are sent when Universal Credit is initially awarded or when a change affects the claimant's Universal Credit award. A decision notice can be either system generated or issued clerically.

If the claimant disagrees with a decision, a mandatory reconsideration must be carried out before an appeal can be considered. A mandatory reconsideration can be requested either by telephone, face to face or in writing.

Mandatory reconsiderations should be carried out by a different decision maker (DM) to the one who made the original decision. The mandatory reconsideration request is recorded in the Decision Making and Appeals Case Recorder (DMACR) and form [UC108](#) and/or [UC6](#) is used to record details of any further evidence or calculations used in the decision making process. Both of these forms need to be retained.

Following an application to reconsider a decision, then unless it's a late application and not admitted, a decision maker will reconsider the decision to see if it can be changed.

Once the DM has reconsidered the decision, 2 mandatory reconsideration notices are issued to the claimant advising of the action taken. If the claimant now wants to appeal, they must send a

Mandatory Reconsideration Notice (MRN) to Her Majesty's Courts and Tribunals Service (HMCTS) along with their appeal. They are unable to appeal to HMCTS without this.

A Universal Credit decision may be reconsidered, following:

- an application for mandatory reconsideration made by the claimant, or the claimant's representative
- DWP staff acting on behalf of the Secretary of State identifying circumstances that may lead to a reconsideration decision

Claimant requests a mandatory reconsideration by telephone or face to face

To gather and record information when a claimant is disputing a decision, the agent:

1. Accesses form [UC108](#) located in [Supporting Documents for the Appeals and Decision Making process](#) and completes Section 1 'Claimants Details'. Where there is a joint claim the agent should record both claimants' details. Either partner can ask for a mandatory reconsideration, however the agent should encourage the claimant who is directly affected to make the dispute. Universal Credit may require additional information relating to the dispute and generally they would be in a better position to provide further details.
2. Asks the claimant for the date of the decision notice in dispute and records this on Section 2a of the UC108.
3. Determines if the date of the decision notice is more than 1 calendar month from today's date. If the date of the decision is more than 1 calendar month from today's date, the agent notifies the claimant that a request can only normally be accepted within 1 calendar month and asks the reasons for the delay in contacting Universal Credit. These reasons are recorded on the UC108, for example if today's

date is the 07/05/13 and the date of the decision notice was 04/04/13, this is outside the calendar month. The application period for a mandatory reconsideration begins on the day after the decision notice was issued. In the case of this example the application period would be 05/04/13 to 04/05/13. Although, the one calendar month must always be extended by 1 day where the claimant makes an application on the day after the 1 month period.

4. Records on the UC108 what aspect of the decision they are disputing and the reason they disagree.
5. Summarises and ends the call/interview. The agent acknowledges receipt of the request for the decision to be looked at again and advises the claimant that the information will be passed to a DM who will consider their request. They should also be informed that the DM may contact them for more information and/or evidence and let them know the outcome.
6. Updates Contact history on [CAMLite](#).
7. Creates a generic clerical CAMLite task for the DM and completes the 'Notes' field with: 'Claimant is disputing decision and is requesting a mandatory reconsideration - see UC108 held in DRS'. The Service Level Agreement (SLA) date is overridden to 1 day.
8. Uploads the UC108 to the [Document Repository System](#) (DRS) and exits all claimant records.

Claimant requests a mandatory reconsideration in writing

If the reconsideration is requested in writing this is uploaded onto the DRS. A task is created for the DM to consider the reconsideration.

Next steps when a claimant disputes a decision

Following a request from a claimant for a mandatory reconsideration by telephone, face-to-face or in writing, a DM receives a CAMLite task. The DM:

1. Opens the CAMLite task and DRS.
2. Searches DRS to find the written reconsideration request and the date of the request if the request was made in writing. If the request was by telephone or face to face form UC108 will be available.
3. Reviews the request and all other relevant information/documentation by accessing the appropriate systems. These could include:
 - Agent Portal
 - CAMLite
 - Medical Services Referral System (MSRS)
 - Work Services Platform (WSP)
 - Legacy systems
4. Determines if the reconsideration was requested within 1 calendar month from the date of the decision notice. If outside the 1 calendar month the DM refers to section 'Late Request for a Mandatory Reconsideration' in the Advice for Decision Makers (ADM) Universal Credit chapters.
5. Makes an outbound call to the claimant, but only if the original decision can't be changed or is changed partially. The call is to explain the decision, to clarify the points at issue in the reconsideration and to ask for additional information or arrange for any further evidence to be sent in. A desk aid has been produced to act as a prompt for completing the call. This doesn't need to be followed as a script and is intended be a general guide. If further evidence is to be provided, the DM creates a CAMLite task to mature in 1 calendar month.
6. Records the outcome of the call on form UC6 and updates CAMLite Contact history with brief details of the action taken.

If the call is unsuccessful (after 3 attempts over 3 hours apart), the DM proceeds to complete the mandatory reconsideration, unless the claimant has indicated in their written mandatory reconsideration request that further evidence is to be sent. In this case set a task to mature in 1 month.

If no new evidence is being provided. or the agent is satisfied that all the evidence has been provided, the DM accesses DMACR.

Mandatory Reconsideration Notices (MRN) will focus on the issues under dispute but must refer to all elements that make up the outcome decision.

- HMCTS have agreed that appeals for multiple elements can be heard by a single judge and a single MRN and appeal notice will be produced for these cases. The following are the exceptions to this rule:
- Limited Capability for Work (LCW) and Limited Capability for Work and Work-Related Activity (LCWRA) appeals must be heard by a 2 person tribunal (a judge and a medical practitioner) and a separate MRN and appeal response will be produced for this type of dispute
- separate MRN and appeal response for sanctions cases
- separate MRN and appeal response for overpayment and civil penalty disputes where they have the same root cause (however, where the MR request is made at different times and/or the civil penalty and overpayment is unrelated, Universal Credit will produce a separate MRN/appeal response to cover each aspect)

If HMCTS considers an appeal against the claimant's entitlement, overpayment and civil penalty decisions at the same time (and with the same root cause) the appeal will be heard by a single tribunal but recorded as 3 separate decisions.

The DM:

1. Uses the ADM Universal Credit chapters to apply the relevant legislation, records the decision on the DMACR decision template and

uses the UC6 to record any further evidence or calculations. The DMACR decision template must include the date of the original decision, the effective date and the relevant facts and regulations used to support the decision.

2. Uploads the DMACR decision(s) and UC6 (where applicable) to DRS.
3. Creates a CAMLite task and completes the 'Notes' field with: 'Reconsideration completed. DMACR decision uploaded on (enter date). Please review in DRS, action accordingly and issue Recon/Appeal Outcome Notification'.
4. Closes the original CAMLite task and exits all systems and claimant records.

Late request for a mandatory reconsideration

If it is determined that the request for a mandatory reconsideration is outside the 1 month the DM:

1. Accepts the request if it is only a few days outside the calendar month period.
2. Determines whether a written statement of reasons was requested by the claimant within one calendar month of the original decision date if the request is more than a few days late. If a written statement of reasons was requested, within one calendar month of the original decision date, the claimant has 14 days in addition to the original calendar month to request a mandatory reconsideration. The DM checks to see if the late request for mandatory reconsideration was made within 14 days of the receipt of the written statement of reasons.
 - if the mandatory reconsideration request is issued outside the 1 calendar month, the claimant is allowed 14 additional days from the date of issue

- mandatory reconsideration requests received after the 14 day date are considered to be late and the reasons for the delay must be sought
 - if a written statement of reasons wasn't requested, and the request is more than a few days late, the DM obtains the reasons for the delay from the claimant
3. Considers if there is good cause for the delay, if so the late request should be accepted. See ADM Universal Credit chapters. If a late request for a mandatory reconsideration isn't accepted (and this would be the exception) the claimant can't appeal against this refusal or appeal to HMCTS against the original decision as they will not have an MRN)to send to HMCTS with their appeal. The claimant's only recourse in these circumstances will be to apply for a Judicial Review.
 4. Issues a late MRN to the claimant. This tells them that a mandatory reconsideration will not be undertaken and that they have no right of appeal against this.

If a late request is accepted the DM goes to 'Next steps when a claimant disputes a decision' above.

Mandatory reconsideration outcome decisions

Once a mandatory reconsideration is complete a task is set for an agent to check if the mandatory reconsideration decision affects the claimant's Universal Credit award.

The account developer (AD):

1. Opens the task.
2. Searches DRS to find the DMACR decision template or appeal outcome/UC6.
3. Accesses the Agent Portal and opens the Claim admin to check if the Universal Credit claim is open or closed.

- if the claim is open the AD checks if the mandatory reconsideration changes the Universal Credit award for the relevant assessment period and updates the Agent Portal as per the decision (the agent also checks if there has been an under or over payment and records this on a UC6)
 - if the claim is closed the agent determines if there is an impact on any previous assessment periods
 - if there is no impact then the agent sets a CAMLite task to mature on the last day of the current assessment period
 - if there is an impact on the assessment period, the AD contacts the claimant to determine if any change of circumstances have occurred since the termination decision (this enables the AD to correctly assess the Universal Credit entitlement for every assessment period involved)
4. Writes up the discussion with the claimant on the MRN and UC6 and records what additional information/evidence has been identified. This should also include if the claimant has stated that there is no additional information/evidence.
 5. Uses the information from the DMACR decision template and UC6 to complete the free text box of the MRN. The text should include the elements disputed, the evidence used to make the decision and the weight placed on the various pieces of evidence. Each element under dispute should be shown in the free text box under a separate heading and it should be made clear how the law relates to the decision. Quotations of legislation are not required. The information provided should be comprehensive and in a simple language that the claimant can understand.

6. Updates CAMLite Contact history. If the task is a mandatory reconsideration outcome, the AD prints 3 copies of the mandatory reconsideration notice, 2 copies are sent to the claimant and 1 to DRS. The copy sent to DRS is marked 'No CAMLite action required' to prevent the generation of a CAMLite mail received task being created. Where the DM has made more than one decision (and this will be the case for WCA, sanctions, overpayments and/or civil penalties) a separate MRN for each decision will need to be issued to the claimant in duplicate.
7. Updates Contact history and records that 2 copies of the MRN(s) have been sent to the claimant.
8. Closes the task and all claimant records.

If the call is unsuccessful (after 3 attempts over 3 hours apart) the AD requests the information by post.

Claimant requests the appeal form face-to-face or by telephone

If a claimant requests an appeal form they should be signposted to:

- HMCTS www.justice.gov.uk/tribunals
- welfare rights groups, for example CAB
- www.gov.uk

If the claimant doesn't have any other means of obtaining the form, and only as a last resort, Universal Credit will email the claimant's name and address to HMCTS for a form to be posted. Under no circumstances must this address be provided to claimants.

DLAppealForm@hmcts.gsi.gov.uk

Appeal received in error by DWP

Under Direct Lodgement a claimant must send their appeal directly to HMCTS in order to lodge an appeal. Appeals can no longer be sent to DWP.

A claimant can only appeal against a decision once a mandatory reconsideration has been done and they have received a MRN.

If the claimant sends their appeal to DWP instead of HMCTS, consider the following action:

- if the claimant includes their MRN, return the appeal and MRN to the claimant with a notification telling them to send their appeal to HMCTS
- if the claimant has not had an MRN on the decision they're appealing against, treat the appeal as a request for a mandatory reconsideration and issue a notification to the claimant
- if there is an mandatory reconsideration already in progress, check that the new information doesn't affect the reconsideration and continue with the mandatory reconsideration (return the appeal to the claimant with a notification)
- if the claimant has had an mandatory reconsideration but has included new information that affects the original decision then the DM;
- conducts a reconsideration, including the reconsideration phone call if necessary
- records outcome of the mandatory reconsideration on a Universal Credit Tactical DMACR Solution
- records the new details in CAMLite notes
- issues a new decision notice, 2 MRN's and a letter telling the claimant the correct appeal process.
- if the claimant has included new information that doesn't affect the original decision, return the appeal to the claimant with the new information and a letter containing instructions to send the appeal to HMCTS

On receipt of an appeal from a claimant, the agent:

- accesses the Universal Credit Tactical DMACR Solution and identifies the decision the claimant is appealing against

- opens CAMLite and checks Contact history to confirm if a MRN was issued

If a MRN hasn't been issued the DM considers the following:

- if a mandatory reconsideration is in progress, returns the original appeal to claimant (via hard copy request process) with a standard letter explaining that their mandatory reconsideration is in progress and that the appeal must be sent directly to HMCTS with a copy of the MRN once they receive it
- if a mandatory reconsideration isn't in progress, a standard letter is issued informing the claimant that the appeal can't be accepted at this stage and that this request will be treated as a mandatory reconsideration request (the agent then follows the process for a mandatory reconsideration)

If a MRN was issued the DM:

- returns the original appeal to the claimant if no additional evidence is provided – this is done by requesting a 'hard copy' of the appeal via the Hard Copy Request Single Point of Contact (HCR SPOC) for the retrieval of the original hard copy document stored at the Mail Opening Unit (MOU), together with a standard letter informing the claimant the appeal must be sent directly to HMCTS with a copy of the MRN
- if additional evidence is provided and this will affect the original decision, then a further reconsideration is done (the DM refers to 'Claimant disputing a decision' and 'New evidence received with the appeal request')
- creates a CAMLite task and enters in the Notes Field 'HCR made with HCR SPOC on [insert date]' and overrides the Task SLA field to 6 days.

The DM then closes all claimant records.

Preparing an appeal response

When an appeal is received by HMCTS they will notify DWP and request an appeal response. HMCTS will send a notification letter to DWP with a copy of:

- the notice of appeal
- the MRN
- any other documents that have been submitted with the notice of appeal

Universal Credit has a legal obligation to provide an appeal response to HMCTS within 28 days (from when DWP received the appeal response request) unless a time limit extension has been requested.

The DM:

1. Records the date the appeal is received by DWP (as the DWP time limit clock starts from this date).
2. Sets a CAMLite task for 21 days to ensure that the 28 day time limit target will not be missed.
3. Views all information sent in relating to the appeal and identifies the decision the claimant is appealing against.
4. Accesses the Universal Credit Tactical DMACR solution and identifies the decision the claimant is appealing against.
5. Accesses DRS and other relevant IT systems to find the relevant documents relating to the decision already made by Universal Credit.
6. Identifies if the Reconsideration/Appeal request is against an overpayment of Universal Credit. If the Reconsideration/Appeal request is against a decision on an overpayment of Universal Credit then Debt Management will need to be notified as the recovery of that payment will be suspended pending the outcome of the Recon/Appeal.

7. Identifies if the documents received contain new information or evidence that hasn't been considered before.
8. Identifies if at any point that the 28 day time limit can't be met, completes a TL1 and emails it to HMCTS.
9. Ensures that HMCTS are given a clear, detailed explanation as to why the extension is needed and a date on the TL1 when the appeal response is likely to be sent to them. For example, if the claimant states in the appeal request that they will send a consultant's letter after an appointment:
 - consider how long it might take to receive this evidence
 - add on to this any assessment provider referral time (if appropriate)
 - add on the appeal preparation time, including photocopying etc
10. Ensures that the reasons for the request are carefully worded as HMCTS will send a copy of the TL1 to the claimant and/or their representative. The DM:
 - considers if a 'direction' from HMCTS is needed and can ask on the TL1 that the Judge orders a specific action to be carried out (for example by asking the Judge to tell the claimant to provide documentation if this is delaying the appeal process)
 - ensures the information, which will include the reasons for the delay and the new appeal response date, is sent in the form of an email to both HMCTS and the MOU for scanning onto DRS (the copy sent to DRS is marked 'No CAMLite action required' to prevent the

generation of a CAMLite mail
received task being created)

11. Sets a CAMLite task to mature 7 days prior to the time requested for the extension. See 'Informing HMCTS that an extension to provide an appeal response is needed' below.
12. Prepares the appeal response to HMCTS based on the information on the DMACR decision template/MRN. See relevant sections of ADM Universal Credit chapters.
13. Takes into account any non-disclosure documents/evidence which if disclosed could lead to harm or distress to the claimant. If any non-disclosure documents are present normal DWP procedures to be followed as laid down in ADM/DMG.
14. Sends a copy of the appeal response to MOU for scanning onto DRS. The copy sent to DRS is marked 'No CAMLite action required' to prevent the a CAMLite mail received task being created.
15. Prints all the appeal evidence documents from DRS and sends along with the appeal response to Bulk Reprographics Unit (BRU) for copying. 1 copy for HMCTS, 1 copy for claimant and 1 for claimant representative (if appropriate).
16. Checks that copies have been returned from BRU and then sends to HMCTS, the claimant and representative (if appropriate). The DWP 28 day time limit clock now stops.
17. Closes all relevant systems.

If an appeal is made against a decision that doesn't carry the right of appeal, a short submission to the tribunal is prepared on form AT39 and supporting documents are sent to HMCTS.

HMCTS refer to the first tier tribunal for a decision and inform DWP of the outcome.

HMCTS are responsible for informing the claimant that the appeal is not to continue and is closed. Any outstanding tasks relating to the appeal should be deleted.

Examples of non-appealable decisions are:

- a decision to impose the Minimum Income Floor
- a decision to apply the Benefit Cap (although a claimant can still dispute this if Universal Credit is calculated incorrectly)
- how Universal Credit is calculated
- payments to third parties in the claimant's interests

These are examples, not a complete list. See ADM chapter: FLDM (DMA) > Guidance > Advice For Decision Making > Decisions and determinations that are not appealable.

Informing HMCTS that an extension to provide an appeal response is needed

The DM identifies the reasons for the delay which may include:

- awaiting additional evidence
- translation services needed
- request to delay from third party (for example, the Citizens Advice Centre)

The DM completes the TL1 template where they identify a realistic date for the response to be completed and supply detailed reasons why an extension is needed. Care must be taken in the wording on the TL1 as HMCTS will provide claimants with a copy of the reasons given for the extension request.

The agent must consider if a 'direction' from HMCTS is needed and can ask on the TL1 that the Judge orders a specific action be carried out. For example, asking the Judge to tell the claimant to provide documentation if this is delaying the appeal process.

This information, which will include the reasons for the delay and the new appeal response date, will be sent in the form of an email to both HMCTS and MOU for scanning onto the DRS. The copy sent to DRS is marked 'No CAMLite action required' to prevent a CAMLite mail received task being created.

The agent updates CAMLite notes with the new appeal response date.

TL1s are sent to the relevant HMCTS processing centre:

Sutton sscsa-xxxxxx@xxxxx.xxx.xxx.xx

Leeds xxxxxxxxxx@xxxxx.xxx.xxx.xx

Cardiff sscsa-xxxxxxx@xxxxx.xxx.xxx.xx

ACS Birmingham ascbirmingham@hmcts.gsi.gov.uk

Liverpool sscsa-liverpool@hmcts.gsi.gov.uk

Newcastle sscsa-newcastle@hmcts.gsi.gov.uk

Glasgow sscsa-glasgow@hmcts.gsi.gov.uk

The DM:

1. Prints off a copy of the email and sends this to the MOU for scanning. A copy of the email is scanned into DRS.
2. Sets a CAMLite task for the extended period being requested.
3. Updates the Universal Credit Tactical DMACR Solution with the details of the extension.

New evidence received with the appeal request

The DM considers if the evidence changes the decision under appeal.

Further evidence received which doesn't affect the decision

When writing the appeal response the DM must include an explanation as to why this new evidence doesn't affect the decision under appeal.

This evidence is recorded in the Schedule of evidence at section 2 of the response.

Further evidence received which does affect the decision

When evidence is received that affects the original decision several outcomes are possible.

1. Original decision changed wholly in the claimant's favour

Whilst considering the appeal response, the DWP agent revises the original decision wholly in claimant's favour after taking any further evidence into consideration.

The agent:

1. Lapses the appeal, accesses DMACR and completes the decision template and records in CAMLite notes.
2. Sends a new decision notice and 2 copies of the MRN to the claimant/representative.
3. Sends 1 copy of the MRN, the decision template and any UC6 to MOU for scanning onto DRS. The copy sent to DRS is marked 'No CAMLite action required' to prevent of a CAMLite mail received task being created.
4. Sends notification (LT203C) to HMCTS informing them that appeal has lapsed.

Once the LT203C has been sent to HMCTS the time limit clock stops. A notification of the lapsed appeal is sent to the claimant by HMCTS.

2. Original decision changed partially in the claimant's favour

Whilst considering the appeal response, the DWP agent decides that the original decision should be revised partially in claimant's favour after taking any further evidence into consideration.

The DM phones the claimant to discuss a potential new decision (2 phone calls can be made but they must be 3 hours apart DM establishes if the claimant wishes to proceed with their appeal if the proposed revised decision was made.

If the claimant does wish to proceed with the appeal:

- the appeal continues and the decision is not revised
- details of the new potential decision are included on the appeal response to HMCTS explaining why decision not implemented
- no notifications are issued to the claimant
- the agent completes the response and send to HMCTS/claimant/representative
- the DWP 28 day time limit clock now stops

If the claimant doesn't wish to proceed with the appeal, the agent:

1. Accesses DMACR and completes a decision template.

2. Lapses the appeal and records notes in CAMLite as appropriate.
3. Sends a new decision notification and two MRN to the claimant/representative.
4. Sends 1 copy of the MRN, decision template and any UC6 to MOU for scanning onto DRS, The copy sent to DRS is marked 'No CAMLite action required' to prevent a CAMLite mail received task being created.
5. Sends notification (LT203C) to HMCTS informing them that appeal has lapsed.

Once the LT203C has been sent to HMCTS the time limit clock stops. A notification of the lapsed appeal is sent to the claimant by HMCTS.

If the call is unsuccessful and the agent is unable to discuss the potential new decision:

- the appeal continues and the award and decision are not revised
- details of the new potential decision are included on the appeal response to HMCTS explaining why the decision is not implemented
- no notifications are issued to the claimant
- the agent completes the response and send to HMCTS, the claimant or representative (if appropriate)

The DWP 28 day time limit clock now stops.

3. Decision revised unfavourably at the appeal consideration stage

Whilst considering an appeal response, the DWP agent revises the original decision not in claimant's favour after taking any further evidence into account.

The DM:

1. Accesses DMACR and completes the decision template, calculates any over payment and records on a UC6.
2. Notifies the claimant of the new Universal Credit decision.

3. Sets a CAMLite task for 1 month for claimant to make further representation.
4. Completes TL1 to request an extension of time from HMCTS.

If the claimant or representative receives a new decision and they want to make further representation the DM considers further information. If there is a change in decision consider either:

- lapsed appeals – original decision changed wholly in the claimant's favour
- lapsed appeals – original decision changed partially in the claimant's favour (call successful or call unsuccessful)

If there is no change the appeal response is sent to HMCTS after 1 month based on the revised decision.

The DWP agent completes the response and sends to HMCTS, the claimant or representative (if appropriate).

The DWP 28 day time limit clock now stops.

Further evidence received – response already sent to HMCTS

If further evidence is received the DM must consider all of the following:

- if the evidence changes the decision under appeal, or if more evidence is needed
- if the further evidence doesn't lead to any changes to the decision, completes the relevant fields on the AT39 and supplementary response
- sends AT39 to HMCTS with a supplementary response and the additional evidence
- if the further evidence received leads to a revision of the appealed decision, the appeal may lapse if the decision is wholly in the claimant's favour (send a LT203C to HMCTS (or UC equivalent if there is one) to tell them that the appeal has lapsed – see 'Original decision changed wholly in the claimant's favour' above)

- the appeal won't lapse if the decision is only partially in the claimant's favour, or less favourable than the original decision

Late appeals

A late appeal will normally be allowed by HMTCS if it is only late by a couple of days. HMCTS will complete a waiver certificate and enclose it along with the appeal request for DWP to provide the appeal response.

If the appeal is more than a couple of days late and the claimant hasn't provided any reasons, HMCTS will write to the claimant. The appeal at this point isn't sent to DWP until the claimant replies with the reasons for the delay.

Once the claimant replies HMCTS will send the appeal and the reasons to DWP to decide if the reasons for the delay can be accepted.

HMCTS won't scrutinise the reasons for the delay prior to sending the appeal response request to DWP. It is DWP's responsibility to decide if it is appropriate to object to the late appeal being accepted, but HMCTS can override DWP. See ADM Chapter A5 for the guidance on late appeals.

The DM should consider the reasons given and the guidance in the ADM Guide paragraph A5081 et seq before deciding whether an objection is appropriate.

If DWP don't accept the reasons, then form AT39 is completed with an explanation for not accepting the reasons of the late appeal. The AT39 is returned to HMCTS and a note added to ask the tribunal to issue a direction for the time they expect to receive the appeal response. A task is set for 1 month.

A letter is sent from DWP to the claimant to advise that the late appeal hasn't been accepted and that Universal Credit is waiting for the judge's direction. A task is set to await the outcome of the judge's direction.

Receiving of the appeal outcome from HMTCS

The appeal outcome will be sent from HMTCS either by Secure and Auditable email or the courier service.

The DM closes any associated CAMLite tasks and records details of the appeal outcome on the Universal Credit Tactical DMACR Solution. The appeal will be scanned by MOU and a task created. There are various types of appeal outcomes:

- favourable – appeal allowed
- unfavourable – decision upheld
- appeal withdrawn
- appeal struck out
- appeal reinstated – an appeal that was formerly struck out by the tribunal may, in some circumstances be reinstated by the tribunal

The DM opens the task created by the MOU, accesses DRS and determines the appeal outcome.

If the outcome is favourable and the appeal is allowed, the DM considers whether an appeal to the Upper Tribunal might be appropriate and if so requests a written statement of reasons. See ADM Universal Credit chapters.

The DM then creates a CAMLite task for 14 days if a written statement of reasons is required and records in DMACR that a written statement of reasons has been requested and the date of request.

If written statement of reasons isn't required, the DM

1. Creates a CAMLite task to start in 1 day, records the date that the appeal outcome was received and that it is held in DRS.
2. Sends documents to DRS to be scanned. These are marked 'No CAMLite action required' to prevent a CAMLite mail received task being created.
3. Updates the Agent Portal (if the appeal outcome changes the Universal Credit award) with the decision, checks if there has been an under or over payment and records on a UC6.
4. Closes all claimant records.

If the outcome of the appeal upholds the original decision the DM sends all the relevant appeal documents to DRS to be scanned. These are marked 'No CAMLite action required' to prevent a CAMLite mail received task being created.

If the outcome of the appeal changes the Universal Credit award the agent updates the Agent Portal with the decision and checks if there has been an under or over payment and records on a UC6.

The agent then closes all claimant records.

If the outcome of the appeal is returned 'Appeal reinstated' the DM:

1. Creates a CAMLite task for 3 calendar months from today's date, allowing time for the appeal to be heard and the outcome received.
2. Considers if the appeal was struck out before a response was prepared. In this case another will need to be prepared and submitted within the 28 day time limit.
3. Sends all relevant appeal documentation to DRS to be scanned. This is marked 'No CAMLite action required' to prevent a CAMLite mail received task being created.
4. Closes all claimant records.

For other appeal outcomes, CAMLite Contact history is updated and all relevant documents are sent to DRS marked 'No CAMLite action required'.

In all cases the DM considers whether Debt Management needs to be notified of the mandatory reconsideration/appeal request and/or the mandatory reconsideration/appeal outcome. They must check CAMLite notes to confirm if the appropriate action has already been taken to prevent duplication.

Debt Management must be notified of the request or outcome using the appropriate form.

When a valid mandatory reconsideration or appeal is received against an overpayment of Universal Credit, Debt Management must be notified so that they can suspend the recovery of the overpayment. The agent completes and issues a mandatory reconsideration/appeal suspension notification.

When a decision is made on a mandatory reconsideration/appeal request against an overpayment of Universal Credit, Debt Management must be notified of that decision so that the appropriate action can be taken.

Written Statement of Reasons from HMCTS

HMCTS will send the Written Statement of Reasons by courier.

On receiving the statement the DM updates the Universal Credit Tactical DMACR Solution with the next steps for Written Statement of Reasons and considers whether the tribunal's decision contains an error in law. There will be an error in law if:

- the provisions of the act or regulation and rules have been misinterpreted or misapplied
- the decision is not supported by evidence
- the decision is such that no person acting judicially and properly instructed about relevant law could have reached it
- there has been a breach of natural justice
- there are other errors of law (for example, ignoring relevant evidence)

These are examples, not a complete list.

If the DM considers that the decision contains an error in law, the agent:

1. Prepares and sends a file to DMA Leeds for them to consider appealing to the Upper Tribunal.
2. Considers whether to suspend implementing the First-tier tribunal's decision.
3. Notifies the claimant of any next steps.
4. Creates a CAMLite task for 3 calendar months to contact HMCTS if no appeal outcome has been received.
5. Completes 'Notes' to show that the appeal result is received, the application has been sent to DMA Leeds and the date it was sent.
6. Closes all claimant records.

If the DM considers that the decision doesn't contain an error in law, the agent goes to 'On receipt of the appeal outcome from 'HMCTS' above.

