To Sam Barnett - Cormack C/o request-100910-134ddec4@whatdotheyknow.com

**DWP Central Freedom of Information Team** 

e-mail: freedom-of-information-xxxxxxx@xxx.xxx.xxx

Our Ref: FOI 3299-IR311

**DATE 11 June 2012** 

Dear Sam Barnett - Cormack,

Thank you for your Freedom of Information request that was received by the Department for Work and Pensions (DWP) Adelphi on 11 May 2012 and forwarded on the same date to the Department for Work and Pensions (DWP) Medical Services Contracts Correspondence Team (MSCCT) to respond to.

The DWP MSCCT Freedom of Information Internal Reviewing Officer has read your letter and accepted this as a request for an Internal Review of FOI reference 2910-688 which was received by the Department on 16 February 2012.

I have therefore conducted a full investigation into your original request to check that the information previously supplied to you, clearly and accurately answered your request. I have also reviewed any decisions to withhold information and in doing so I have fully considered the public interest in disclosure.

You asked:-

Dear Department for Work and Pensions,

Please pass this on to the person who conducts Freedom of Information reviews.

I am writing to request an internal review of Department for Work and Pensions's handling of my FOI request 'Training, briefing and knowledge-base materials for WCA assessors regarding certain conditions'.

On the 16th of February I wrote to point out deficiencies in the response to my FOI request of 19th January; I followed this up on the 2nd of April. I have still not received any response beyond an automated acknowledgement to these contacts. I thus feel it is appropriate to request an internal review at this time.

My original email of 16th February detailing deficiencies and requesting clarification said the following:

"The section on Narcolepsy in the document containing extracts from LiMA is not, in fact, about narcolepsy. It is about sleep apnoea it mentions narcolepsy as, effectively, a differential diagnosis for similar symptoms. Does the inclusion of this information, but no other information

about narcolepsy, indicate that this is the full extent of information about narcolepsy in the areas outlined in my initial request?

"In my original request, I also asked for any guidance in dealing with patients who are still seeking a diagnosis, or those who are no longer actively seeking diagnosis based on medical advise. I see that there is an entry on medically unexplained symptoms (also referred to as somatoform disorders) in the neurological and infection guide. This is, however, both a narrower and separate definition to the scenarios I describe, and in fact refers to the same thing sometimes known (such as in the APA's DSM) as somatisation disorder. Can you confirm that there is no written guidance for HCPs in assessing patients who are still undergoing diagnostic efforts, and those who have been medically advised to stop such efforts, even if temporarily?"

This outlines why I am dissatisfied with the original response; I am entirely dissatisfied with the (lack of) response to my emails seeking clarification in these matters. I trust that those responsible for internal reviews will be able both to satisfy the original problems, and explain why there has been such a delay in response to my requests for clarification.

DWP has now supplied you with the full information held on these matters in the letter dated 15 May 2012 (reference FOI 2910-688) which stated the following:-

In response to **Q1**, I can advise that there is no other information to add to what has already been provided on narcolepsy.

In response to **Q2**, there is guidance within the WCA handbook (section 3.1.3.6.2 Medical content of the report) about when exact diagnoses are not available, as follows:

"In many instances the entries will be symptoms rather than exact diagnoses. Your role is to assess disability and for that reason precise diagnoses do not add to the Decision Maker's understanding of the report. Only be specific if you have good evidence of the diagnosis".

The role of the disability analyst is explored both in the pre-course reading and training. Disability can vary significantly between claimants.

The letter should have also explained that it was necessary to confirm if the information you required to clarify your points was held by the Department, draft a response and have this approved for release. Delays did occur in responding to you, this was due in part to a significant increase in numbers of Freedom of Information requests being received by MSCCT. The MSCCT Internal Reviewing Officer apologises to you for the oversight of not keeping you informed of the progress of your request or providing a response within 20 days.

The Freedom of Information (FoI) Act allows 20 working days from date of receipt of the request in which to respond. We endeavour to answer promptly and no later than the 20 day deadline, unless the deadline is extended to consider if an exemption applies. The 20 working day deadline for the request was 15 March 2012 and I note that the response was issued to you via the What Do They Know website on 15 May, and in this instance, the Department failed to respond within the 20 working days and I apologise for the delay.

In reviewing your request I uphold your complaint as the Department failed to respond to your request within 20 days.

Your right to complain under the Freedom of Information Act	
DWP Central Fol Team	
Yours sincerely,	
above.	

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