

Further written evidence from Macmillian Cancer Support [SWP0083]

DWP Ministers have told the Committee that they have redeployed large numbers of staff to process UC claims, which means that there are less staff working on disability benefits. As a result, are you seeing delays in assessments and Mandatory Reconsiderations Processes?

Redeployment of staff

- We recognise the need for the Department to redeploy staff to manage increased demand for Universal Credit and understand that 8,000 DWP staff have been redeployed on this basis.
- Our key concern with this is that the Department has given no indication as to where these staff have been deployed from, which makes it difficult to predict where the gaps in resource will appear.
- The Secretary of State has confirmed that the Department is monitoring their performance in areas where staff have been redeployed and will return staff to those areas if the 'response rate is unacceptable'.
- Whilst we welcome this commitment to monitoring, the lack of transparency from the Department as to what it considers to be an unacceptable response rate is of concern. It is also concerning that the Department would consider it appropriate to wait until potentially extensive delays are experienced before seeking to plug resourcing gaps.
- We are calling on the Department to publish its monitoring criteria, as well as data outlining how it is performing against these criteria. This should include statistics on UC claims and broader indicators across other benefits to identify where resource needs to be reallocated, e.g.:
 - Number of UC claims processed and payment timeliness
 - Average waits across the DWPs telephone lines
 - The areas of the Department where staff have been redeployed from
 - Length of time between a claimant notifying the Department of a health condition and a WCA referral
 - Number of PIP claims processed and end to end journey times for assessments o Processing times for claims or changes to existing legacy benefit claims including ESA and Carers Allowance
- We are also receiving a high volume of calls from people with cancer who have experienced errors in their applications, or have been misadvised by the DWP as to their entitlements or what they need to do to access them.
- Whilst errors are not a new issue, these appear to be increasing following the COVID-19 outbreak, which indicates that the large numbers of staff being redeployed to process claims without sufficient training. We would be happy to share examples of this with the Committee.

Delays

- We are seriously concerned by reports from our welfare rights advisers that people with cancer are facing significant delays in referrals to a WCA within Universal Credit.
- Our services have reported these delays for some time, which appear to be continuing and possibly worsening during the COVID-19 outbreak.
- We have heard some very worrying reports that some work coaches and Jobcentres are refusing to make referrals into the WCA process or send out UC50 forms at all until after the COVID-19 outbreak is over.

- We are concerned that the direction from the Government to suspend face-to-face assessments has been misinterpreted by some localities as a suspension of the entire WCA process.
- We have raised this issue with the Department who have confirmed that WCAs should be taking place, either on paper or over the phone, but that they expect claimants to experience some delays.
- It is unacceptable that people with cancer are facing delays in this process, particularly in the context of the broader uncertainty and, for many, financial hardship brought on by COVID-19.
- It is also completely unnecessary in that people with cancer who are awaiting, undergoing or recovering from cancer treatment are automatically entitled to the highest rate of UC on the basis of their UC50 form, without the need for a face-to-face WCA (or in this case a telephone assessment).
- Delays in receiving the UC50 form cause people with cancer to miss out on this vital additional entitlement which, in the context of rising costs as a result of COVID-19, is more important than ever.
- Being placed in the LCWRA conditionality group also provides additional protections to people with cancer, such as exemption from the benefit cap and eligibility for the work allowance within UC.
- We are concerned that the Department seems to be accepting these delays rather than setting out plans to mitigate them. At this stage it is difficult for us to understand the extent and scale of these delays, so we would encourage the Department to be transparent about this and publish any data available.

How is the remote assessment process working?

- Our evidence on the remote assessment process is still emerging – possibly in part due to the delays outlined above – but we do have some concerns that the challenges people with cancer face with the face-to-face PIP assessment process in particular, will be carried over when these assessments are delivered remotely.
- We hear from people with cancer regularly who have had poor experiences of PIP assessments, with many finding the process difficult and stressful.
- Our research with people with cancer, and evidence from our services, tells us that many people with cancer feel like they are ‘on trial’ during an assessment, and have to fight for the support they need.
- The questions that are asked during assessments can often be ‘closed’ and not give people the opportunity to give a full account of how their condition impacts them. This issue can be exacerbated where assessors lack specialist knowledge of cancer and the diverse ways it can impact people, and so do not ask relevant probing questions or completely understand the descriptions of their condition that people are able to provide.
- We understand from the Department and Independent Assessment Services (IAS) that the questions asked to people during telephone assessments are likely to mirror as far as possible those asked in a face-to-face assessment. The same decision-making criteria will also be used.
- We are therefore concerned that rates of inaccurate reports and incorrect decisions will remain high during the COVID-19 outbreak.
- One element of the face-to-face assessment that cannot be replicated over the phone are informal observations. We hear from people with cancer that these observations, which often inform inaccurate decisions, erode trust and perceptions of fairness in the system.

- There is therefore potential for the move to remote assessments to be positive for some people with cancer, if informal observations are not taking place.
- We would urge the Department to acknowledge the detrimental impact informal observations can have on the experience and outcomes of assessments, and not to return to their use once face-to-face assessments are re-established.

May 2020