**SCHEDULE 29** 

**FORMS** 

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## **SCHEDULE 29**

## **FORMS**

## 1 INTERNAL FORMS

1.1 Internal Forms are the forms used by the CONTRACTOR for the internal processing of Referrals and do not interface with the Customer, Claimant or GP. The CONTRACTOR shall be responsible for all aspects in relation to Internal Forms.

## 2 **AUTHORITY FORMS**

2.1 AUTHORITY Forms are listed in Appendices 1 and 2 to this Schedule 29, and must be used by the CONTRACTOR in delivery of the Services.

## 3. AUTHORITY FORMS – CONTRACTOR RESPONSIBLE

- 3.1 The AUTHORITY licences the CONTRACTOR to print the Authority Forms identified in Appendix 1 of this Schedule 29. For the avoidance of doubt the CONTRACTOR shall be responsible for all the associated costs of printing and ensuring that it maintains a sufficient amount of these AUTHORITY Forms.
- 3.2 The CONTRACTOR shall liaise with the AUTHORITY to review the AUTHORITY Forms in order to ensure that the AUTHORITY Forms continue to fully meet the requirements of the AUTHORITY. The AUTHORITY shall determine the frequency of review.
- 3.3 Any changes to the content or format of these AUTHORITY Forms will be subject to the Change Control Procedure.

## 4. AUTHORITY FORMS – CONTRACTOR NOT RESPONSIBLE

- 4.1 Business Units shall liaise with the CONTRACTOR when making changes to AUTHORITY Forms identified in Appendix 2 to this Schedule 29, prior to formal Change Control Procedures, when the Business Unit considers this is appropriate.
- 4.2 For the avoidance of doubt the CONTRACTOR shall be responsible for maintaining a sufficient amount of these AUTHORITY Forms, if appropriate.

# **APPENDIX 1**

# <u>AUTHORITY FORMS – CONTRACTOR RESPONSIBLE</u>

NUMBER	FORM	DESCRIPTION	BENEFIT
1a	AL1	Generic MEC Appointment Letter [system produced, modified for each individual benefit]	Generic
1b	AL1(clerical)	Clerical Appointment letter [used for example in system failure]	Generic
1c	AL1(ir)	IR appointment letter	IR
2a	AL1C	Generic information letter to accompany AL1	Generic
2b	AL1C Supplement	Supplement to forms AL1 and AL1C details and background to IB Reforms pilot	IB
2c	AL1C(ir)	Leaflet accompanying AL1(IR)	IR
2d	AL1C(wp)	Leaflet accompanying either AL1 or DV N1 (Veterans Agency cases)	VA
3	AL2	Generic MEC Appointment Letter [system produced, modified for each individual benefit] sent to Appointee	Generic
4	AV1	Form left by examining doctor following DV when claimant not in to advise of further visit appointment [generic]	Generic
5a	BF223 & Welsh	Request for details of Did Not Attend. Claimant requested to reply to Authority.	IB
5b	BF223 (ESA)	Request for details of Did Not Attend. Claimant requested to reply to Authority	
5c	BF223 (ESA)W	Welsh version of BF223 (ESA) above	ESA
5d	BF 223 (DV)	Request for details of DNA (for DV exams)	IB/ESA
6a	BI118D	Examination report form [ Constant attendance allowance - advice on attendance needs]	IIDB
6b	BI118X	Report form advising percentage disablement and duration – updated 04/013 – Reference 10305	IIDB
7a	BI127	Request for photocopies of Hospital Case Notes	IIDB
7b	BI127A	Request for extract of Hospital Case Notes	IIDB
7c	BI127X	Request for X rays	IIDB
8a	BI161(OD)A	Audiogram report [Prescribed disease A10 Occupational Deafness]	IIDB
8b	BI161(OD)B	Medical Adviser report form [ opinion on audiogram for prescribed disease A10]	IIDB
8c	BI161(VWF)	Consultant medical report - Vibration white finger	IIDB
8d	BI161B	Medical Adviser report form [ opinion on prescription of prescribed disease based on documentary evidence]	IIDB
8e	BI161L	Covering letter for BI161	IIDB
8f	BI161L(OD)	Covering letter for BI161[OD]	IIDB
8g	BI161L(OD) A	Covering letter for BI161[OD]A	IIDB
9	BI162L(OD) A	Covering letter to consultant to accompany BI162(OD)-PD A10 – reassessments (can also be used for reviews) –updated 04/13	IIDB

NUMBER	FORM	DESCRIPTION	BENEFIT
9a	BI181	Medical Adviser report opinion on diagnosis Respiratory diseases	IIDB
9b	BI181C	Medical Adviser report opinion on diagnosis D12	IIDB
10a	BI205	Request for factual report from medical records	IIDB
10b	BI205L	Covering letter for BI205 – updated 04/13	IIDB
11	BI609	Medical Adviser report form [ hand injury]	IIDB
12	D3/D8 diagnosis	PD D3/PD D8 diagnosis form	IIDB
15	CR1	Examination report form [Capability Report - IB reforms]	IB
16	CX1	Travelling expenses claim form following examination	Generic
17	CX2	Subsistence allowance claim form following examination	Generic
18	CX3	Financial loss allowance claim form following examination	Generic
19	CX4	Awaiting employer confirmation for FLA claim following examination	Generic
20	CX5	Financial loss confirmation: Employer's guidelines following examination	Generic
21a	DLA AL1	DLA/AA DV Appointment letter	DLA
21b	DLA AL1C	DLA/AA information letter to claimant issued before DLA AL1	DLA
21c	DLA AL1C Insert	DLA in Mecs appointment letter	DLA
21d	DLA AL1E	Appointment letter	DLA
22	DVN1	Domiciliary visit notification letter [generic]	Generic
23	DV Questionnai re	DV Questionnaire	
24	EA1	Exemption Advice at examination	IB
25a	ESA AL1	Customer Medical Appointment Letter	ESA
25b	ESA AL1 (LCW)	Customer LCW only Appointment Letter	ESA
25d	ESA AL1C	ESA Examination Leaflet	ESA
25e	ESA AL1Cw	ESA Examination Leaflet (Welsh version)	ESA
27	ESA50	ESA Limited Capability for work questionnaire v01/13	ESA
27a	ESA 50W	ESA Limited Capability for work questionnaire (Welsh version) v01/13	ESA
27b	ESA50A	Capability Work Related Activity Questionnaire v01/13	ESA
27d	ESA 50Aw	Capability Work Related Activity Questionnaire (Welsh version) v01/13	ESA
28a	ESA 51	Questionnaire Request Letter to be issued alongside the ESA50- this version dated 08/12	ESA
28b	ESA 51A	Customer Cover letter issued along side the ESA 50A	ESA
28c	ESA51AW	Customer Cover letter issued along side the ESA 50A	ESA
28d	ESA51W	Questionnaire Request Letter to be issued alongside the ESA50 (Welsh version) - this version dated 08/12	
29	ESA 52	Request for additional information on ESA 50	ESA
30a	ESA 53	Reminder to customer to return ESA 50 Questionnaire	ESA

NUMBER	FORM	DESCRIPTION	BENEFIT
30b	ESA 53A	Reminder letter to customers to return ESA 50A	ESA
30c	ESA 53AW	Reminder letter to customers to return ESA 50A	ESA
31	ESA 85	Medical report form (Employment and Support Allowance) – version dated 07/12	ESA
31a	ESA 85A	Medical report form (Employment and Support Allowance) - version dated 06/12	ESA
31b	ESA85A	Scrutiny report form (Employment and Support Allowance)	ESA
31c	ESA85 Scoresheet	DM Scoresheet	ESA
31d	ESA85	Clerical Medical Report	ESA
31e	ESA85s	Clerical Personalised Summary	ESA
31f	ESA85S	Personalised Summary	
32	ESA 86	Request for Advice to determine LCWRA	ESA
33	ESA113	Request for further medical evidence	IB/ESA
34a	FRR1	Further Medical Evidence request	IB
34b	FRR2	Further Medical Evidence request	IB/ESA
34c	FRR3	Further Medical Evidence request	IB/ESA
34d	FRR4	Further Medical Evidence request	
50	MEC Questionnai re	MEC AC Questionnaire	
51	ML1	Multilingual Notice issued with all appointments to advise of availability of interpreters	Generic
52a	NR1	Letter to Claimant where Questionnaire is no longer required	ESA/IB
52b	NR1W	Letter to Claimant where Questionnaire is no longer required	ESA/IB
53a	OD1	Letter advising that hearing test is being arranged [IIDB or DLA]	DLA
53b	OD2	Hearing test appointment letter	DLA
54	R1	Rejections Form	Generic
55a	SDA21	Request for medical report [Extract of hospital case notes]	IB
55b	SDA22	Request for medical report [Consultant]	IB
55c	SDA23	Request for medical report [GP]	IB
56a	SL1	Advice form - DNA UTA [with reasons]	IB
56b	SL1	Medical Services Scheduling Log	IB
57a	UE1	Report on unexpected findings at examination	Generic
57b	UE2	Request for disclosure of information to General Practitioner	Generic
58a	No reference	Medical Services Customer Survey – Invitation Letter	Generic
58b	No reference	Medical Services Customer Survey – Examination Centre	Generic

NUMBER	FORM	DESCRIPTION	BENEFIT
58c	No reference	Medical Services Customer Survey – Domiciliary Visit	Generic
58d	No reference	Medical Services Customer Survey – Reminder Letter	Generic
59a	SPVA Expenses note	Medicals Direct Appointment Note	SPVA
59b	SPVAapClm (v2)	Medical Direct Appointment Letter	SPVA
59c	SPVA expenses note	Medicals Direct Expenses Claim Form	SPVA
61	ESA-IB-AL1	MEC Appointment letter	ESA
62	Fax Sheet	Fax Sheet Atos Notifications of Changes APR 11	
66	ESA-IB	MEC appointment cancellation letter R2.3 v3	ESA
67	WCAAL1C	WCAAL1C_07/13	
68	AL1	ESA flyer	ESA
69		ESA56	ESA
70		ESA55	ESA
71		ESAC	
72		Comments, complaints and suggestions – amended Jan 13	
73		Welsh – Comments, complaints and suggestions - amended Jan 13	
		Total: 101 forms as of 05/09/12	

# **APPENDIX 2**

# **AUTHORITY FORMS – CONTRACTOR NOT RESPONSIBLE**

SCHEDULE 29 REFERENCE NUMBER	FORM	DESCRIPTION	BENEFIT
1	Austrian Helplessness and Care Benefit	Detailed report on the persons abilities and care required	IPC
2	AA EMP Report	AA EMP Report	DLA
3	BI32	Customer consent on old claims	IIDB
4a	BI8	Referral jacket for IIDB referrals	IIDB
4b	BI8A	Further information on referral	IIDB
4c	BI8C	Advice on rework referrals	IIDB
5	BI18DM	The 2008 Diffuse Mesothelioma Scheme / Prescribed Disease D3	IIDB
6a	BI118 [OD]	Medical Adviser initial report in PDA10 cases	IIDB
6b	BI118A	Medical Adviser report in reassessment cases	IIDB
6c	BI118H	Medical Adviser report on claim for REA	IIDB
6d	BI118R	Medical Adviser initial report change of circumstances	IIDB
6e	BI118Accident	IIDB Initial Advice for an Industrial Accident Claim	IIDB
7b	BI180Adjust	Medical Adviser report on adjustment of PDD1 claim for PDD12	IIDB
7c	BI180Diag	Medical Adviser report on diagnosis of respiratory PD except D12	IIDB
7d	BI180CAssess	Medical Adviser report on initial assessment D12	IIDB
<b>7</b> f	BI180P	Medical Adviser report re-examination D1 re- employment scheme	IIDB
8a	BI183A	Medical Adviser report on renewal	IIDB
8b	BI183R	Medical Adviser report on reconsideration of disablement	IIDB
9	BI187	Medical Adviser report on post mortem examination	IIDB
10	BI613	Advice about prescribed disease claim	IIDB
11	BO45 and MBB62	Request for medical examination by Jersey authorities.	IPC
12	CS1	Medical Adviser report form [confirmation of additional needs for Child Support Agency]	CSA
13	DBD385 07.06	Advice report form	DLA
14	DBD313A	Request for medical report	DLA
16	DLA369	Medical Adviser report on audiogram	DLA

SCHEDULE 29 REFERENCE NUMBER	FORM	DESCRIPTION	BENEFIT
17	DLA Examination Report Form	Examination Report	DLA
18	DPTC948	Declaration by examining doctor that claimant attended examination [for loss of earnings]	IR
19	DS1500	Request to GP for DLA Special Rules advice re terminal illness	DLA
20	ESA 55	ESA Medical Referral Jacket	ESA
21	ESA/IB 60	Request for rework form	ESA/IB
22	E213	Detailed medical report	IPC
23a	FAS1500	Medical Report 06.06	FAS
23b	FAS1500 FAX	Referral Form 11.05	FAS
23c	FAS1501	Rework Form	FAS
23d	FAS(con)	Medical Consent Form 06.06	FAS
24	ESA-N-200	ESA – Request to GP for details of conditions affecting ability to work	IPC
25a	IB50	Incapacity for work questionnaire	IB
25b	ESA-N-50	LCW questionnaire	IPC
26	IB51	Covering letter	IB
27	IB52	IB50 incomplete	IB
28	IB53	IB50 reminder	IB
29	ESA(N)54C	Medical examination report	IPC
30	IB55	Referral file to Medical Services [front cover]	IB
31	IB57	Request for medical report [OOT]	IB
32	IB59	CSD Report form [Request for advice]	IB
33	IB60A	Medical Adviser report [reconsideration]	IB
34	IB62	Referral form [Section 102 IIDB Incapacity due to Industrial accident]	IB
35	IBS003a, b, c	Advice required on whether the customer's incapacity is of a permanent nature. Jamaican/Barbados and an adapted form for Turkey	IPC
36	ESA003	Request for medical opinion on capability for work when E213 received from foreign country	IPC
37	IB113B	Incapacity for Work	IB
38	Internal Memo	Request for medical examination by Jersey authorities. Sent with form B045 (Disablement Benefit) and MBB62	IPC
39	JSA 100	Medical Adviser advice report form for JSA	JSA
41	POD1025	Customer consent to release information foreign authority	IPC

SCHEDULE 29 REFERENCE NUMBER	FORM	DESCRIPTION	BENEFIT
42	POD969	Medical report form for pneumoconiosis	IPC
43	PODSU1147 & Spanish version	Medical report supplement for back injury	IPC
44	PODSU1203 & Spanish version	Medical report form for REA	IPC
45	PODSU1279 & Spanish version	Medical report form for Chronic Bronchitis and/or Emphysema	IPC
46	PODSU1366 & Spanish version	Medical report supplement for hand injury	IPC
47	PODSU1518	Request for medical examination sent with blank E213 (customer in UK)	IPC
48	PODSU1519	Request for medical examination sent with Care Benefit Experts Report (Austrian Helplessness)	IPC
49	PODSU1689	Medical report form for Tuberculosis	IPC
50	PODSU638 & Spanish version	Medical report form	IPC
51	PODSU722	Questionnaire to customers prior to examination for foreign authority	IPC
52	PODSU948	Request for exam for foreign authority	IPC
53	SDA15	Medical Adviser advice report form	IB
54	SDA16	Medical Adviser examination report form SDA	IB
55	SDA16A	Medical Adviser rework report form SDA	IB
56	SDA19	Medical Adviser harmful information report form SDA	IB
57	SMP42	Request for medical report - pregnancy related illness	IR
58	SMP50	Deciding SMP entitlement	IR
59	SMP56	decision on pregnancy related illness	IR
60	SSP/SMP44	Employee's consent to medical examination	IR
61	SSP24	To employer -4 or more short illnesses	IR
62	SSP34	To employer for more information for Med. Referral	IR
63	SSP35	Result of Medical examination	IR
64	SSP36	Employee fails to attend medical examination	IR
65	SSP39	to Liquidator	IR
66	SSP42	To GP - fit for own job	IR
67	SSP43	Medical Services opinion on fitness for own job	IR
68	SSP45	To GP - 4 or more short illnesses	IR
69	SSP46	To Medical Services - list of short illnesses	IR
70	SSP50	Deciding SSP entitlement	IR
72	VAD30	Request for Medical Opinion by VDPU	VDPU

SCHEDULE 29 REFERENCE NUMBER	FORM	DESCRIPTION	BENEFIT
73	VAD30MA	Registered Medical Practitioners Report for VDPU	VDPU
74	VAD82	Request for Medical Opinion by VDPU	VDPU
75	VAD82MA	Registered Medical Practitioners Report for VDPU	VDPU
76	VIF22	Medical Adviser Report for DOH	VDPU
77	WP0331	Medical Examination Report	SPVA
78	WP0303A	Inform client of audiology examination Domiciliary visit case	SPVA
79	WPA0020	Complaint received re: Medical Services	SPVA
80	WPA0040	Medical acknowledgment form	SPVA
81	WPA0043	Medical information reminder	SPVA
82	WPA0050	Reminder to audiologist unreturned audiology report	SPVA
83	WPA0070	Non attendance at audiology medical examination	SPVA
84	WPA0291	Case referred to a Regional Consultant / independent medical expert - claim only no appeal lodged	SPVA
85	WPA0301	Audiology report	SPVA
86	WPA0302	Claim for expenses - deafness claim	SPVA
87	WPA0303	Inform client of audiology examination	SPVA
88	WPA0304	Advise of need for ERA examination	SPVA
89	WPA0304A	Letter to claimant - consultants report required in addition to audiometric report	SPVA
90	WPA0305	Notes on expenses rates	SPVA
91a	WPA0314IRL	Request for a medical examination / report (general) for Irish cases	SPVA
91b	WPA0314IRL-ENT	Request for a medical examination / report (ENT cases) - for Irish cases	SPVA
91c	WPA0314IRL-EYE	Request for a medical examination / report (eye cases) - for Irish cases	SPVA
91d	WPA0314IRL-PSY	Request for a medical examination / report (Psychiatric cases) - for Irish cases	SPVA
91e	WPA0314UK	Request for a medical examination / report (General) UK cases	SPVA
91f	WPA0314UK-ENT	Request for a medical examination / report (ENT cases) - for UK cases	SPVA
91g	WPA0314UK-EYE	Request for a medical examination / report (EYE cases) - for UK cases	SPVA
91h	WPA0314UK-PSY	Request for a medical examination / report (psychiatric cases) - for UK cases	SPVA

SCHEDULE 29 REFERENCE NUMBER	FORM	DESCRIPTION	BENEFIT
92	WPA0317	Arrangements for a medical examination	SPVA
93	WPA0330	Parliamentary case - arrangements for a medical examination	SPVA
94	WPA0332	Medical examination report WPMS cases	SPVA
95	WPA0333	Medical examination report UNSUPP/ALSO cases	SPVA
96	WPA0334	Medical examination report Respite Care cases	SPVA
97	WPA0335	Medical examination report CAA cases	SPVA
98a	WPA0347	Request for medical examination	SPVA
98b	WPA0347A	Request for medical examination	SPVA
99	WPA0357	Medical report - clothing allowance	SPVA
100	WPA0358	Medical report - skilled nursing care	SPVA
101	WPA0845	Request for examination by a consultant	SPVA
102	WPA0850	CAA terminally ill case	SPVA
103	WPA0851UK	Medical boarding form (for UK mainland, Channel Islands, Isle of Man and Scottish Islands cases	SPVA
104	WPA0854IRL	Medical boarding form (for Northern Ireland and Eire cases)	SPVA
105	WPA0902	WPMS posthumous medical report	SPVA
106	WPA0954ENV	Filecover. Medicals issued to BAMSC	SPVA
107	VAD30 MA MCA	Request for Medical Opinion by VDPU	VDPU
108a	VAD31	Request for Medical Opinion by VDPU	VDPU
108b	VAD31 MA	Registered Medical Practitioners Report for VDPU	VDPU
109	ESA 50	ESA Questionnaire	ESA
109b	ESA 50C	Employment and Support Allowance	ESA
110	IB 50	Incapacity for work questionnaire	IB
111	CTF34C	Child Trust Fund or Junior ISA Consent form	HMRC
112	CTFJISA34	Early access to a Child Trust Fund or Junior ISA	HMRC
113	CTF-JISA1500	Child Trust Fund or Junior ISA. Early access medical report	HMRC
114	CTFJISA34b	Child Trust Fund or Junior Individual Savings Account	HMRC
115	CTFJISA35	Medical Advice regarding terminal illness	HMRC
116	BI613RD	IIDB Initial advice about a repository disease claim	IIDB
	Total: 137 APP2 forms as of 05/09/2012		