## **Terminal illness**

#### Content

What is terminal illness?
Identifying someone who is terminally ill
Confirming the claimant has a terminal illness
Claimant commitment
Work and Health Programme
Staff support

### What is terminal illness?

For benefit purposes, DWP describes a terminally ill claimant as having a progressive disease health condition and due to that condition they are not expected to live more than 6 months.

The claimant, representative or third party must also have received and provided a DS1500. See confirming the claimant has a terminal illness and claimants without a DS1500

## Identifying someone who is terminally ill

Claimants can report a terminal illness at the new claim stage or at any point during the claim, as a change of circumstances. They might tell us online, by phone, or at an appointment.

When the claimant reports they have a disability or health condition using their online account, they have the option to tell us if the health condition is a terminal illness. The claimant can record this information themselves or request a call back to discuss their terminal illness. See the Case Managers Guide: Start of new claim actions.

Before the call back is made staff must check the following:

- what the claimant has entered on their online account
- if the claimant is receiving any other benefits, indicating terminal illness see Confirming the claimant has a terminal illness

It is important to check the above as DWP may have already received confirmation of a terminal illness for Universal Credit, Personal Independence Payment (PIP), Disability Living Allowance (DLA), Attendance Allowance (AA) or the Armed Forces Independence Payment (AFIP). It could result in a difficult conversation to explain when and why confirmation is needed, to ensure they receive all the payments they are entitled to. The claimant must be treated sensitively and with empathy.

Staff calling the claimant back must:

• support the claimant to make their claim (if needed)

- establish the nature of the claimant's health condition or disability
- explain why a DS1500 form is needed see Confirming the claimant has a terminal illness
- explain the Work Capability Assessment (WCA) process to those with a prognosis over six months
- explain the next steps in the Universal Credit claim
- offer any extra help they may need signposting to support charities
- answer any questions

Staff must record any information provided about the condition including the date the condition was diagnosed as well as the prognosis. This supports other staff interacting with the claimant.

## Confirming the claimant has a terminal illness

Form DS1500 is confirmation that a person is terminally ill and not expected to live more than six months. It can be completed by a doctor, other healthcare professional or Macmillan nurse.

A correctly completed DS1500 can be accepted as evidence of a terminal illness where the claimant satisfies the terminal illness description. There is no need to refer to Centre of Health and Disability Assessment for a Work Capability Assessment decision to determine if a person is terminally ill - unless there is good reason to doubt the information provided on the DS1500.

A staff member can determine if a claimant is terminally ill and record that decision based on the DS1500 as this is a non-considerative decision.

The content the DS1500 must contain - who can request and provide it and the activity on receipt of the form can be seen in Medical evidence, terminal illness section.

If the claimant is unaware of their terminal illness it is important that DWP do not disclose:

- if a DS1500 has been requested or completed on their behalf by a general practitioner or a third party
- their condition or prognosis

#### Claimants without a DS1500

If the claimant doesn't have a DS1500 confirming their health condition and has a life expectancy of 6 months or less:

- they must be advised to contact their general practitioner or other healthcare professional to obtain a DS1500
- Day 1 referral action must be taken, see Immediate work capability referrals and Switch-off and tailoring table
- they must be advised to make a claim for Personal Independence Payment (PIP) once they have a DS1500

 all work-related requirements will be switched-off while they await their DS1500

If the claimant doesn't have a DS1500 confirming their health condition and their life expectancy is more than 6 months, refer to the section of the same name in this guidance below.

#### Claimants with a DS1500

If a DS1500 is held and staff are satisfied that the claimant is terminally ill with a life expectancy of 6 months or less, the claimant is determined and treated as having Limited Capability for Work and Work Related Activity (LCWRA).

For existing claims, the claimant would report having a terminal illness as a change of circumstances and be eligible for the additional amount for having LCWRA from the date of the diagnosis.

For a new claim the additional amount for having LCWRA may be awarded from the first date of the claim.

In both situations the claimants will be eligible for the LCWRA additional amount from the first day of the assessment period.

Staff must establish if the claimant (and in couple claims - the partner), is already in receipt of the additional amounts for:

- having Limited Capability for Work and Work Related Activity
- having Limited Capability for Work (LCW)
- caring

If one or more of these additional amounts are in payment, see Adding LCW or LCWRA when additional Universal Credit for caring LCW or LCWRA exist.

Claimants determined as having LCWRA are placed in the No Work Related Requirements group. They will not be required to provide a fit note or attend a Work Capability Assessment. All work-related requirements for these claimants must be switched-off. Refer to Switching-off work availability and work related activities.

If a DS1500 is provided after the Day 1 referral has begun, it should be faxed to the Centre of Health and Disability Assessment. A Limited Capability for Work and Work Related Activity decision can be made following a Work Capability Assessment.

Once a DS1500 is provided the claimant must be signposted to claim Personal Independence Payment (PIP) or Disability Living Allowance (DLA) (if they are not already in payment) as the claimant may be entitled to them.

If the claimant or their representative states they have made a claim for or sent a DS1500 to PIP, DLA, Attendance Allowance (AA) or AFIP, staff must confirm this with PIP, DLA, AA or AFIP colleagues. This can be verified by either:

- the presence of a terminal illness marker on Customer Information System (Searchlight)
- verbal confirmation from a member of the relevant benefits staff

If PIP, DLA, AA or AFIP colleagues verify the claimant is terminally ill and has submitted an accepted DS1500, no further evidence is required to confirm it.

Personal Independence Payment (PIP) staff will notify Universal Credit of any DS1500 forms received where there is no PIP claim and the claimant has a terminal illness prognosis of less than six months to live.

The Glasgow centralised team will determine if the claimant has LCWRA and apply the award.

In existing claims, if there is a Work Capability Assessment referral in progress, the referral must be cancelled.

There may be an increase in the amount payable if a DS1500 is provided. The claimant may not know the form has been sent. If the claimant queries the increase in benefit, the terminal illness or prognosis must not be disclosed as the reason for the increase. Instead, the explanation might be an increase in their payment has happened due to the severity of their health condition.

### Life expectancy is more than 6 months

If a claimant has been diagnosed with a terminal illness but has a life expectancy longer than 6 months, and satisfies the conditions of being Treated as having Limited Capability for Work and Work Related Activity or Treated as having Limited Capability for Work, they will be submitted for a day 1 WCA referral. See immediate Work Capability Assessment (WCA).

If the claimant does not meet the criteria for being Treated as having Limited Capability for Work and Work Related Activity or Treated as having Limited Capability for Work they will be referred for a WCA at day 29.

If the claimant is not terminally ill, they are placed on the health journey. See Health conditions and disabilities – day 1 to day 29.

#### Claimant Commitment

Where the claimant is physically or mentally unable to accept a Claimant Commitment and this is unlikely to change, or it would be unreasonable to expect them to do so due to their terminal illness - the requirement to accept a Claimant

Commitment can be lifted. See Permanently lifting the requirement to accept a Claimant Commitment.

If the claimant does not satisfy the DWP description for terminal Illness as their life expectancy is more than six months, their claimant commitment must be tailored to accommodate their condition and circumstances.

The claimant is likely to be seriously ill, with a progressive disease which may deteriorate and what is agreed with the claimant must be reasonable. See Switching-off work availability and work-related activities for periods of sickness.

# **Work and Health Programme**

Where a claimant's health condition meets the description for terminal illness their participation in the Work and Health Programme will stop. The claimant can choose to continue voluntarily if they wish. See Completing the Work and Health Programme.

# Staff support

If this subject or area of work has affected you please talk to a line manager, your colleagues, work psychologist or contact the Employee Assistance Programme.