

Operations, Correspondence and Feedback Team

OFFICIAL SENSITIVE

Internal Process Review

Customer: [REDACTED]

Review conducted by:

Name:

Address:

Operations, Correspondence and Feedback Team

	<p>[Redacted text]</p>
<p>[Redacted text]</p>	<p>[Redacted text]</p>

2. **Summary of Findings**, including highlighting any area where incorrect action has been taken

[Redacted text]

[Redacted text]

[Redacted text]

[Redacted text]

Operations, Correspondence and Feedback Team



3. Annexes

Additional papers listed below. [Embed as required]



Recommendations

Name: [REDACTED]

NINo: [REDACTED]

Panel Members

- [REDACTED] – Chair, IPR Focal Point
- [REDACTED] – IPR Focal Point
- [REDACTED] – IPR Focal Point
- [REDACTED] – LM, Employers and Work Services Business Partner, vulnerable customers
- [REDACTED] – IPR SPOC NE
- [REDACTED] – NE
- [REDACTED] – Disability Services
- [REDACTED] – DRT Quality Teams
- [REDACTED] – OED SDM live Products Portfolio
- [REDACTED] – IPR SPOC LHC
- [REDACTED] – OED Disability Portfolio (PIP)

Recommendations

None required as action is already being taken.

[REDACTED]

[REDACTED]

- Further local awareness needed on the 6 point plan which was not fully followed.

However, these are known issues and are all being addressed and are being highlighted more widely as Senior Leaders continue to re-enforce the messages that Decision Makers have the ability to return cases to the Health Care Provider if there is any doubt raised by their report and that they must consider all available evidence. This and the reminder about the 6 point plan has been picked up by the [REDACTED] [REDACTED] with the G6s for onward cascade to Case Managers and is on the agenda of the DWP Networks.

Referred to Customer Journey Team N/A

Operations Correspondence and Feedback Team

Date:	Name:
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Referred to DWP Network Chair

Date:	Name:
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Outcome

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DWP Network Chair Sign Off

Date:		Name:	
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