

# Chapter P6: Good Reason

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# Chapter P6: Good Reason

## Introduction

P6001 This Chapter contains guidance on good reason where the claimant fails to

1. supply information **or**
2. attend for a consultation

requested on behalf of the Secretary of State after a valid claim for PIP has been accepted<sup>1</sup>.

**Note 1:** For guidance on the provision of information/evidence for making a claim see ADM Chapter A2 - Claims.

**Note 2:** For guidance on information requirements, assessment consultations and failures to comply see ADM Chapter P2 - Assessment for PIP.

*1 WR Act 12, s 80(5); SS (PIP) Regs, reg 10*

P6002 Claimants will have had the opportunity to explain why they have not complied with a request to provide information or to attend a consultation (see guidance at P2058) and it will remain the claimant's responsibility to show good reason and provide any evidence or information to justify their good reason.

P6003 The DM considers good reason applying the principles outlined in this chapter (see P6006 et seq). The following guidance provides a framework for DMs to use when considering whether or not good reason is demonstrated and is not an exhaustive list of individual circumstances or specific criteria. The examples are for illustrative purposes only.

**Note:** For guidance on examples of what may or may not be considered good reason see further guidance throughout this chapter and in ADM Chapter K2 – Good Reason.

P6004 – P6005

## Matters to consider when determining good reason

P6006 To determine if the claimant has good reason for non-compliance for either not providing the information required or not participating in a consultation, the DM should in every case consider the individual facts and circumstances and in particular the

1. state of the claimant's health at the relevant time **and**
2. nature of any disability the claimant has <sup>1</sup>

For example, a claimant suffering from depression may not be able to manage their affairs effectively. The consideration is whether the depression has contributed to the claimant not complying with what we are expecting them to do, i.e. provide information or participate in a consultation (also see P6073).

**Note:** The criteria for considering good reason are not legislated for specifically. The DM should not just consider one factor but should consider the overall picture of the claimant's individual circumstances. See further guidance in this Chapter and also in ADM Chapter K2 – Good Reason.

*1 SS (PIP) Regs, reg 10*

### **Example 1**

Tracey has schizophrenia, but did not give this information at the initial claim stage, and when asked for more information did not comply. Further enquiries established that Tracey could be a vulnerable claimant because she was not able to complete the information required without help. When her social worker next visited Tracey, she found the request and helped Tracey to complete and send it in. The DM decided Tracey could show good reason and decided not to make a negative determination.

### **Example 2**

Bill did not attend for a consultation and enquiries were made as to the reason. Bill stated he 'slept in', and could not supply any medical reason or evidence that would support this as a good reason. The DM decided Bill could not show a good reason and made a negative determination.

### **Example 3**

Lionel was due to attend a consultation with a HP but he writes to them to request a consultation in his home due to severe agoraphobia. The HP does not receive the request and the consultation date is not postponed. Lionel does not attend the consultation. Lionel contacts the DM and provides a copy of the request that he sent for a consultation in his home and a supporting letter from his GP providing medical evidence regarding his agoraphobia. The DM decides that Lionel had good reason for not attending the consultation and a negative determination is not made.

## **Relevant time**

P6007 Relevant time is not defined in legislation so it takes its every day meaning, i.e. it is appropriate to the matter in hand. This means when considering good reason the DM considers the

1. relevant circumstances and facts of the individual case **and**
2. state of the claimants health **and**

### 3. nature of their disability

appropriate at the time of the non-compliance. Factors which are not relevant to the matter in hand are not considered.

#### **Example 1**

Joe did not attend for a consultation with the HP and did not notify that he could not attend. A negative determination is made. Joe provides evidence that he had been unexpectedly taken into hospital after a heart attack, and did not receive the notification until after he was discharged. This was evidence appropriate to Joe's failure to attend the consultation and failure to notify why he could not attend. The DM decides on review that this was good reason, and a negative determination is not given on his claim.

#### **Example 2**

Samantha suffers from mobility problems. She was asked to return her completed PIP2 by 12.1.15. She fails to do so. She informs the DM that the reason she did not return the PIP2 was because she could not write due to a broken arm and therefore had to wait for a family member to assist her with completing the PIP2. The DM asks for medical evidence which Samantha subsequently provides. The medical evidence shows that Samantha broke her arm on 15.1.15, two days after the PIP2 was due to be returned. The DM decides that Samantha has not shown that she had good reason for not returning the PIP2 at the relevant time and a negative determination is made on her claim.

#### **Example 3**

Sean suffers from diabetes and is required to attend a consultation on 22.5.15. He fails to attend and provides no explanation why. The DM makes a negative determination and Sean subsequently provides medical evidence in support of him having suffered a hypoglycaemic attack the night before. The medical evidence states that Sean would have suffered some symptoms following the attack for a few hours afterwards. The DM considers whether at the relevant time Sean's health condition affected his ability to attend the consultation on 22.5.15 and whilst his reason may have in isolation normally supported good reason it was reasonable for him to have contacted the HP on 22.5.15 if he did not feel well enough to attend. The DM decides Sean could not show good reason.

## Meaning of good reason

P6011 Good reason is not defined in legislation. DMs should take into account all relevant information about the claimant's circumstances and their reasons for their failure to provide information by the relevant time or attend a consultation as required and in particular take account of

1. their state of health at the relevant time **and**
2. the nature of their disability<sup>1</sup>.

*1 SS(PIP)Regs, reg 10*

P6012 'Good cause' has been considered in case law. It includes facts which would probably have caused a reasonable person to act as the claimant did<sup>1</sup>. This principle is equally applicable to good reason.

*1 R(SB) 6/83*

## The 'reasonable test'

P6013 DMs should establish facts which would probably have caused a reasonable person to act as the claimant did by considering what

1. would be reasonable to expect someone to do in the particular circumstance, i.e., was the action or failure to act preventable **and**
2. did the claimant do or fail to do that was different to what was the expected action **and**
3. were the claimant's reasons for their action or failure to act.

**Note 1:** A distinction must be drawn between having a good excuse and having a good reason in law which is not about one moment in time but about a person acting reasonably in the light of all the facts and circumstances and in particular how the claimant's disability may affect what can be considered reasonable and the state of the claimant's health at the relevant time (see P6011).

**Note 2:** It is the reasonableness of the claimant's actions and behaviours that is being considered.

P6014 The general rule for taking each incidence on its own merits and considering all the facts and evidence should be applied. Consideration of all the evidence should be made and the DM should decide on

1. the balance of probabilities that it is more likely than not that something happened or something is correct **and**
2. whether the evidence is inherently improbable in the circumstances.

**Note:** See ADM Chapter A1 – Principles of decision making and evidence.

### **Example 1**

David suffers with Asperger's Syndrome and can only travel on familiar bus routes on his own. His mother deals with all his correspondence and assists him with managing all of his appointments.

David is due to attend a consultation with a HP and has worked out that his usual bus route has a stop outside the examination centre so he decides he can attend alone without the help of his mother. David goes to catch his bus but discovers that his usual bus route is cancelled. He does not ask at the bus station information desk whether an alternative service goes near the examination centre. David is so upset that his usual route is cancelled that he begins to suffer from a panic attack and goes home to bed.

The following day David's mother visits him and he tells her of the previous days events. She immediately telephones to explain why David did not attend his consultation. The DM decides that because of the nature of David's disability, his state of health on the day of the scheduled appointment and his reliance on his mother for assistance, his actions were reasonable in the circumstances. The DM decides that David has shown good reason for not attending his consultation and a negative determination is not given on his claim.

### **Example 2**

Sarah suffers from mobility problems and relies on a wheelchair for journeys outdoors. Sarah is due to attend a consultation with a HP but on the day of the scheduled consultation she discovers a fault with her wheelchair and is unable to use it until it is repaired. She is therefore unable to leave the house to attend the consultation. She has the use of a mobile phone but does not telephone the HP to inform them that she could not attend. The DM decides that in light of the claimant's disability, a reasonable person in those circumstances should have been able to telephone to explain why they could not attend the consultation. There is no medical reason why Sarah could not use her mobile phone for that purpose, i.e. she has no mental or cognitive impairments that could restrict her. The DM decides that Sarah did not act reasonably and has therefore not shown good reason for her failure to attend and a negative determination is given on her claim.

### **Example 3**

Alan has epilepsy and is due to attend a consultation with a HP. He fails to attend. He contacts the DM and explains that on the day of the consultation appointment he had already got an appointment to visit the dentist. It is established that this was a routine inspection appointment. The DM decides that a reasonable person should have been able to rearrange their dental appointment to attend the consultation. Additionally, Alan had known about the consultation appointment for some time and made no effort to contact the HP to rearrange it. The DM decides that Alan did not

act reasonably and has not shown good reason for his failure to attend. The DM therefore makes a negative determination on his claim.

P6015 – P6020

## Time to show good reason

P6021 There are no specified time constraints for a claimant to show good reason. However, if the DM decides that they require further evidence to support the good reason decision they can request additional evidence at any time and allow a reasonable amount of time for the claimant to provide that evidence (see P6022).

P6022 DMs should give the claimant sufficient time to provide evidence appropriate to the particular circumstances of the failure when requested. This should be flexible to reflect an individual's circumstances. A shorter time may be required where the claimant can be contacted by phone. A longer time may be needed if the claimant

1. needs to seek information or evidence from a third party (for example get medical evidence from a doctor) **or**
2. has an agent or representative **or**
3. has a health condition or other temporary circumstances that prevents them from replying (e.g. a pre-existing health condition that is relevant or existing caring or parental responsibilities that may be relevant).

**Note 1:** Allowance must be made for posting where further evidence is requested by post<sup>1</sup>.

**Note 2:** If the claimant agrees to provide evidence face-to-face, by telephone or by electronic means a record of the evidence should be made for evidentiary reasons in the event the claimant asks for a reconsideration or subsequently appeals.

*1 Inte Act 78, s 7*

P6023 The DM will then consider whether the evidence constitutes good reason taking into consideration all the facts and evidence particular to the individual circumstances and make rational decisions when considering making a negative determination<sup>1</sup> having particular regard to the

1. claimant's state of health at the relevant time **and**
2. the nature of any disability<sup>2</sup>.

*1 WR Act 12, s 80(5); SS (PIP) Regs, reg 8 & 9; 2 reg 10*

### **Example**

Alessandro suffers with anxiety and panic attacks. He failed to attend a consultation with a HP. Alessandro informed the DM that he did not attend because his support worker was on annual leave and he needed his support and assistance to attend. The DM asks Alessandro to obtain a letter from his support worker confirming that he was on leave at the date of the consultation. The DM decides to give Alessandro three weeks in order to obtain this letter to allow sufficient time for Alessandro to contact his support worker and for the support worker to draft the letter.

### **Reconsideration**

P6024 If the claimant provides information or evidence giving good reason after a negative determination decision has been made then the claimant can request a reconsideration of the decision. Any new facts and evidence received within the normal time limits for revision (1 month) should not stop the normal revision rules coming into play which would alter the original decision<sup>1</sup> (see guidance in ADM Chapter A3 (Revision)).

*1 UC, PIP, JSA & ESA (D&A) Regs, reg 18(3)*

#### **Example 1**

See example 3 at ADM P6014. On receiving his negative determination Alan provides a letter from his dentist to confirm the routine inspection appointment and that he would have incurred a £5 cancellation charge if he had cancelled the appointment and requests a reconsideration of the decision. The decision is reconsidered but not altered. The DM considers that Alan would normally have been able to provide a good reason as we should not make the claimant incur any expense to cancel his appointment. However Alan had plenty of notice in which to cancel his appointment and the letter from the dentist confirms the charge would only be incurred if the cancellation was actually done on the day of the appointment. This did not deter from the fact that regardless of the dental appointment he did not make any effort to contact the HP to say he could not attend the consultation. On reconsideration the DM considers Alan cannot show a good reason for his failure to attend the consultation.

#### **Example 2**

See example 3 at P6042. On receipt of the negative determination Alice's daughter phones on her behalf to say Alice is currently having more bad days than good days as her medication is not controlling her condition. On the third occasion she was due to attend the consultation Alice never got out of bed on that day and when she wasn't answering her phone her daughter had driven to her home to check on her. Alice was taken to casualty by her daughter where they gave her an emergency steroid injection and drained fluid from her knees to relieve her symptoms and pain. She was then referred to see her consultant the following week. Her daughter says



she can get a letter from the hospital to confirm this. A letter is provided from Alice's consultant confirming the events as above and her daughter sends an accompanying letter which says she works full time and lives several miles away from Alice and if she knows the date of the next appointment she will arrange to take a day's leave from work to ensure Alice attends the consultation.

The DM decides Alice could show good reason for the failure to attend and reconsiders the original negative determination and refers to the HP to consider a home consultation due to the frequency, nature and severity of Alice's flare ups.

P6025 - P6030

## Evidence

P6031 The DM should seek further evidence where it is considered necessary in order to

1. clarify reasons **or**
2. seek further evidence

as sufficient proof to justify good reason.

P6032 This could involve either writing to or telephoning the claimant. Where evidence is collected by telephone a record of the conversation should always be made in Departmental records should it be required for evidentiary purposes in the event the claimant asks for a reconsideration or appeal.

P6033 It is the responsibility of the claimant to provide evidence to demonstrate good reason. Although it is not necessary for claimants to corroborate their own evidence, the DM should not accept evidence from the claimant, or anyone else, uncritically.

P6034 The DM needs to be satisfied, on balance, that there is good reason. Whatever the DM decides, it should be reasonable and without bias or discrimination

**Note:** See further guidance in ADM Chapter A1 – Principles of Decision Making and Evidence.

### Example 1

Sofia failed to attend her consultation with a HP. She contacted the department three days later and said she had broken her leg on the day of the scheduled consultation. The DM asks Sofia to provide medical evidence to show when Sofia had broken her leg before determining good reason.

### Example 2

Jasmine failed to return the PIP2 on time. She informed the DM that she had been out of the country when the PIP2 was sent to her as she had travelled to Spain for one month to visit her mother who was terminally ill. The DM asks Jasmine to

provide evidence, such as flight bookings, to show that she was out of the country at the time when the PIP2 was sent before determining good reason.

### **Example 3**

Bob was due to attend a consultation with a HP but failed to attend. Bob informs the DM that the reason for his failure to attend was that he had to look after a family member who was ill. The DM decides that more information is required before a determination is made. In particular the DM thinks it is important to find out who the family member was, the nature of the illness and whether there was another person who could look after them before determining good reason.

### **Example 4**

Naveed failed to attend a consultation and provides no good reasons. A negative determination is made and Naveed phones to say he did not receive the appointment letter for the consultation. The DM decides she requires further evidence in order to consider whether Naveed can show good reason. She checks first if the letter was sent to Naveed's normal contact address and then asks Naveed if he has ever reported a problem with receiving post at that address before or reported difficulties receiving post from any other organisation and whether the address is considered a 'safe' address for the delivery of post before determining good reason (also see guidance at P6114 et seq).

P6035 – P6040

## **Previous failures**

P6041 Each case should be looked at on its individual merits though past behaviour can be taken into account. If the claimant has a record of previous failures the DM should consider those failures as evidence of whether or not the evidence presented to support the claimant's reasons for a current failure are credible or not. The DM should consider how likely is it that

1. a claimant happens to have a problem coinciding with when they are required to attend for a consultation or provide further information **and**
2. it would happen twice or more than that.

**Note 1:** It is for the DM to identify any patterns and trends in a claimant's behaviour when considering a claimant's reasons for a failure in consideration of all the facts of the individual case.

**Note 2:** Past attendance or non-compliance is not always an indication that the claimant doesn't have a good reason on the occasion under consideration. It is important to bear in mind that people's health conditions may fluctuate frequently and vary significantly for both mental health & physical health conditions.

P6042 The DM may not automatically accept good reason even if the reasons given for the failure would in isolation normally support good reason when considering previous failures to comply. The DM should be satisfied that the good reason is valid by seeking supporting evidence, especially where there is compelling or contradictory evidence that may require further enquiry. It is not unreasonable for the DM to ask the claimant to provide written evidence to support the claimant's reasons for a failure, for example, medical evidence from a doctor or a letter to provide evidence of another appointment or evidence from a support worker.

### **Example 1**

Eric was asked to return his completed PIP2 by 12.3.15. He did not comply with this request. Eric then provided the DM with evidence that he had been in hospital with appendicitis and the DM accepted that he had good reason for not returning the PIP2 and a negative determination was not made. Eric was given further time to return the PIP2 but failed to do so. Eric stated that he had been admitted into hospital again and the DM asked Eric to provide further medical evidence to support this. The DM received evidence that showed Eric had been involved in a car accident and had spent two weeks in hospital. The DM accepted that Eric had shown that he had good reason for not returning the PIP2 and a negative determination was not made.

### **Example 2**

Janine had previously been asked to attend for a face-to-face consultation but had failed to attend. She had not given any reason for her non-compliance. She was contacted and stated the reason for her not attending was that she had recently moved house and during the move had lost her letter and could not remember the date of the appointment. This was accepted and a new appointment was made for her. She did not attend this further appointment and, again, gave her reason as losing her letter. As this was the second time she had lost her appointment letter, the DM considered it was reasonable to have expected Janine to have made a note of the date and time of the appointment. Therefore the DM considered she could not show a good reason and a negative determination was made.

### **Example 3**

Alice is 50 years old, lives alone and suffers from Rheumatoid Arthritis. When Alice has a flare up of her condition her daily functioning and mobility are severely affected. She cannot even hold a cup of tea, a pen or use a phone key pad. On a good day Alice should be able to attend the consultation as normal. She works as a care assistant accompanying disabled people on an access bus. On her PIP2 she states she has had several flare ups of her condition in the last few months.

Alice is required to attend a consultation and fails to attend. She provides medical evidence that on the day of the consultation she was suffering from a severe flare

up of her condition and that her state of health was such that she was not capable of even using a telephone to make contact to cancel the appointment, The DM considers Alice has good reason for failing to attend the consultation and does not make a negative determination. A further appointment is made for another consultation.

Alice fails to attend the second consultation. Medical evidence is provided and again supports another flare up of her condition that means it was reasonable for her not to cancel the appointment. The DM accepts good reason and does not make a negative determination. The nature of Alice's disability and state of health at the relevant time mean she could show good reason for the failure. A third appointment is made.

Alice fails to attend the third consultation and phones 2 days later to say she had another flare up of her condition and was incapable of attending the appointment. On this occasion Alice says she did not seek medical help from her doctor and can provide no medical evidence to support the failure. The DM considers all the evidence and without supporting medical evidence considers that it is inherently improbable that on a third occasion Alice had a flare up of her condition which coincided with the date of the consultation. The supporting evidence (PIP2) suggests Alice suffers several flare ups a year and it is improbable that she has suffered 3 flare ups in a month that coincided with the dates of the consultation appointments. The DM decides on this occasion Alice did not have good reason and makes a negative determination. Also see example 2 at P6024.

P6043 – P6050

## Specific examples which may be good reason

P6051 The following paragraphs provide some examples which may be considered when deciding whether a claimant can show good reason. This is not an exhaustive list or specific criteria that mean a claimant would have automatic good reason but examples of what may contribute to a claimants actions when considering what may be reasonable.

P6052 The DM should in every case consider the individual facts and circumstances of the case when deciding whether a claimant can show good reason and in particular the

1. state of the claimant's health at the relevant time **and**
2. nature of any disability the claimant has<sup>1</sup>.

**Note:** For further guidance see ADM Chapter K2 – Good reason, where there are further illustrative examples and specific examples of what may and may not be considered to be a contributory factor to a claimant being able to show good reason.

P6053 Examples of a claimant's circumstances which may be treated as contributing to good reason for failures to provide information and evidence or failing to attend a consultation include those who

1. have mental health conditions or disorders (see P6071)
2. are disadvantaged, e.g. the claimant
  - 2.1 is homeless (see P6091)
  - 2.2 has a disability which is not the reason for the claim to PIP which may affect their ability to provide the required information or attend the consultation (see example 1 at P6034 and example 1 at P6042)
  - 2.3 has learning difficulties and for example needs someone to act on their behalf or requires additional support from a third party such as a case worker or social worker (see example 1 at P6014)
3. have domestic emergencies (see P6111)
4. there will be
  - 4.1 a significant harm to health (see ADM Chapter K2) **or**
  - 4.2 an unreasonable physical or mental stress (see P6073) **or**
  - 4.3 a risk to the health and safety of the claimant or that of others
5. have certain temporary circumstances (see ADM Chapter K2).

**Note:** This list is not exhaustive and each case should be considered on the individual circumstances and merits (see P6052). The DM considers all the individual facts and circumstances of the case and any reasons the claimant provides for the failure to comply.

P6054 – P6070

## **Mental health**

P6071 Claimants may have good reason if they fail to carry out tasks or participate in relevant consultations if they were experiencing poor mental health which meant that

1. they were not able to comply with a reasonable request **or**
2. complying with the request in question would put their mental health at risk **or**
3. complying with the request would have put the health of other people at risk.

**Note:** The consideration at 3. would apply to any situation where the claimant was involved with others, for example their mental health may involve unprovoked violent episodes or may mean they cannot concentrate fully.

P6072 The DM should consider each individual case on its own merits taking into consideration all the facts and evidence and whether the claimant understood what was required of them and their reasons for the failure taking into account in particular their mental health.

**Example 1**

Barbara has a long term mental health issue and was invited to a consultation with the HP after she made a claim to PIP. She did not attend for the consultation so enquiries were made as to the reason for this. Her support worker phones to explain that Barbara needed her to attend the consultation with her. She has psychotic episodes and can be violent towards people she doesn't know because she feels vulnerable and frightened.

At the last minute the support worker was unable to accompany Barbara due to a domestic crisis of her own and had forgotten to phone up to cancel on Barbara's behalf. The support worker confirms that even with prompting Barbara probably could not have phoned up and cancelled the appointment herself.

Due to the nature of Barbara's health condition at the relevant time the DM decides that the support worker would be required to accompany Barbara to the consultation and key to providing insight into how her disability affects her day-to-day living. Barbara has difficulty remembering things and it is more than probable without the support of her case worker she would not remember she had to attend the consultation. The DM decides that Barbara has shown good reason as to why she did not attend the consultation, and a new appointment is made for her at a time that is suitable for the support worker to accompany her.

P6073 As well as giving consideration to those claimants who have a clinically diagnosable mental health condition, the DM should consider whether a claimant who has no diagnosed condition may be temporarily distressed by particular circumstances that could worsen or precipitate mental ill health.

**Example 1**

Kuldip has mobility problems and was invited to attend a consultation with a HP after he made a claim to PIP. He phoned on the day of the consultation to say he could not attend because he had flu. The DM accepted that Kuldip had good reason for his failure to attend.

A further consultation was arranged and again Kuldip phoned on the day of the consultation to explain he could not attend because he had a fall the day before which worsened his mobility problems. The DM accepted that Kuldip had shown good reason and a further consultation was arranged.

Kuldip failed to attend for a third time and he informed the DM that he had a sickness bug on the morning of the appointment. He had not sought any medical

help from his doctor and could provide no medical evidence to support his reason for not attending. The DM did not accept that Kuldip had shown good reason for his failure to attend and a negative determination was made.

Kuldip later sent a letter from his GP indicating an underlying mental health issue and detailing that he experiences extreme anxiety and panic attacks when attending medical appointments. The DM reconsiders the case and decides that Kuldip has shown a good reason for his failure to attend the consultation and a negative determination is not made. His severe anxiety state meant it was unreasonable to expect him to attend the medical appointment. The DM considers whether Kuldip should have a home visit (see guidance in ADM Chapter P2 – Assessment for PIP on home visits)..

### **Example 2**

Theo was involved in a road traffic accident when his car spun off the road in icy conditions. He fractured his neck, collar bone and right leg which has left him with severe neck and back pain and restrictions in his mobility. Theo has claimed PIP and is required to attend a consultation on 11.3.15.

Theo fails to attend the consultation and later in the day he rings to say that since the accident he also suffers from mild depression and anxiety which is exacerbated when he has to drive, particularly in adverse weather conditions. On the day of the consultation there were light snow flurries and a severe frost. Theo says he went into complete panic about driving to the consultation. When asked if he could have arranged for a taxi or to get a bus instead he said he just wasn't thinking straight, he saw the snow and panicked. He says he does take a mild medication for this problem and his doctor could confirm this if required.

Even though Theo is claiming PIP based on his physical condition, on the day of the consultation his mental health contributed to his reasons for not attending. The DM decides Theo could show good reason for the failure and does not make a negative determination. A further appointment is made.

P6074 In particular where a claimant has no previous history of mental ill health, the DM should seek supporting medical evidence or other information via the claimant. The DM should ask the claimant to supply evidence from additional sources which may include

1. health or support services
2. housing support services **or**
3. hostel keyworkers

where the DM can establish that the claimant is in contact with these services

P6075 – P6090

## Disadvantage

### Homelessness

P6091 Many homeless people face multiple issues that can add up to form complex barriers to compliance, for example: mental health issues, significant medical health problems, substance abuse, exclusion and trauma.

**Note:** Each case should be considered on the individual merits and circumstances but in particular taking into consideration the nature of the claimant's disability and the state of health at the relevant time.

P6092 Homelessness in itself is not provided for in legislation but a DM may consider the claimant can be treated as dealing with a domestic emergency when they are homeless if a DM considers the accommodation status impacts on the claimant's capacity to comply with requirements.

**Note:** For further guidance on the consideration of good reason see ADM Chapter K2 - Good reason.

P6093 Homeless people may also have more complex issues with the receiving and accessing of post due to unsafe addresses or frequent changes of address which may contribute to their reasons for failing to provide information or attending a consultation (see further guidance at P6114 where a claimant says he failed to receive an appointment letter.)

P6094 – P6110

### Domestic situations

P6111 Where crises arise unexpectedly which limit a claimant's ability to meet the requirements to either provide information or attend a consultation the DM should give careful consideration when deciding whether a claimant can show good reason and take into account in particular the nature of the crises and what is reasonable in the individual's circumstances. For example

1. short notice caring commitments of the elderly, sick or young children
2. a domestic emergency
3. a family bereavement
4. homelessness (also see P6092).

**Note 1:** This list is not exhaustive. The DM should consider each case on the individual facts and circumstances of the case.



**Note 2:** The DM should in particular consider what is reasonable behaviour expected by a reasonable person in a similar situation but in particular taking into consideration the nature of the claimant's disability and the state of health at the relevant time.

**Note 3:** For further examples and guidance see ADM Chapter K2 - Good reason.

P6112 The DM should consider

1. the nature of the emergency **and**
2. when the emergency arose **and**
3. any alternative arrangements the claimant has made **and**
4. any alternative arrangements the claimant could reasonably have made.

**Note:** There is no automatic good reason, the DM should consider all cases on the individual merits and circumstances of the case applying the 'reasonableness' test (see P6013).

#### **Example 1**

Sally lives alone with her 7 year old daughter Elizabeth. Sally is due to attend a consultation with a HP and on the morning of the consultation Elizabeth wakes up suffering from a sickness bug so she is unable to go to school. Sally telephones the HP immediately to inform them that she cannot attend. It is established that Sally is a single parent and has no other family except her mother and father who live 50 miles away. It is accepted that it would be unreasonable to expect Sally's parents to look after Elizabeth while she attends the consultation. The DM determines that Sally has shown good reason for failing to attend the consultation and another consultation appointment is made for her.

#### **Example 2**

Steve suffers from diabetes and mobility problems and is due to attend a consultation with a HP. On the morning of the consultation Steve wakes up to find that a water pipe in his home is leaking and he calls a plumber to fix it urgently that day. Steve telephones the HP and states that he is unable to attend the consultation as he has to wait in for the plumber. It is established that Steve lives with his partner and adult son who do not work. The DM determines that as Steve has no problems going out alone it would be reasonable in the circumstances to expect Steve's partner or son to wait in for the plumber while Steve attends his consultation. The DM therefore decides that Steve has not shown good reason for his failure to attend the consultation and a negative determination is made.

### **Other reasons**

P6113 The reasons and examples illustrated in this chapter are not exhaustive when considering good reason. The DM must consider any reason(s) the claimant puts

forward for failing to attend a consultation or for failing to provide relevant information/evidence by applying the test of reasonableness (see P6013) established in case law in consideration of all the facts and evidence in the individual case and in particular taking into account the

1. state of the claimant's health at the relevant time **and**
2. nature of any disability the claimant has.

The DM should not just consider one factor but should consider the overall picture of the claimant's individual circumstances.

**Note:** For further guidance on good reason see ADM Chapter K2 – Good reason.

## **Claimant raises issue of notification as good reason**

P6114 Where a claimant fails to attend a consultation or fails to provide information as required and raises the issue of notification in their good reasons, for example he says he did not receive the relevant appointment letter, the DM will have to investigate further to decide whether the claimant can show he did not receive it.

**Note:** If the claimant is able to show that the notification has not been received the notification cannot be treated as correctly served and a negative determination could not be made. However the balance of proof is on the claimant to show he did not receive the notification.

P6115 The DM should check the relevant notifications and any other supporting evidence to try and ascertain

1. the address to which the letter(s) was/were addressed
2. the security of that address
3. whether or not it was the address agreed with the claimant as his normal contact address and there are no reported changes of address
4. whether there were problems receiving mail at that address before or reported difficulties receiving mail
5. the claimants compliance history
6. whether the claimant had received written or text reminders regarding the consultation appointment and was it reasonable to expect that specific claimant in their circumstances to have chased up at that point **and**
7. any other relevant information.

**Note:** This list is not an exhaustive list, the DM will make a reasoned decision considering all the available evidence and individual circumstances of the case and on the balance of probabilities whether it is inherently improbable that the notification was received. If the claimant cannot show the notification was not

received then the notification was correctly served and the DM will go on to make a negative determination.

### **Example 1**

See example 4 at P6034.

Naveed responds to say there have been problems on occasion with the delivery of post as he lives at number 1 Accommodation Close and around the corner is number 1 Accommodation Road. He is Mr Naveed Ali and Mr Murad Ali lives at number 1 Accommodation Road.

On checking with the HP it seems the letter was addressed to Mr Ali at number 1 Accommodation Road. Naveed also provides evidence in a letter that on checking with the post office the week the letter was supposed to arrive there was a relief post man working on that route as the regular post man was on holiday. There are no records of any previous non-compliance.

The DM considers it is a possibility that the appointment letter was actually delivered to the incorrect address and decides on the balance of probabilities that Naveed has shown good reason for the failure to attend the consultation and the negative determination is reviewed and a further consultation appointment offered.

### **Example 2**

Lynsey fails to attend a consultation appointment and provides no reasons for the failure. A negative determination is made.

Lynsey phones to say she did not receive the letter notifying her of the consultation.

Lynsey can provide no evidence to show she did not receive the notification. Records show the letter was sent to her normal contact address and there are no records that Lynsey has reported problems receiving post at that address before. In fact she did receive the negative determination posted to the same address. She lives with her elderly parents and the address is considered a 'safe' address for the delivery of post. Lynsey has had one previous incident of non-compliance when she failed to attend a consultation appointment when she claimed she was sick and good reason was accepted. There is no evidence to suggest she is not capable of dealing with her own post. Her disability is chronic back pain and spondylosis.

Lynsey confirms she received a text reminder but didn't understand which appointment the text was referring to but didn't consider to chase the matter up.

The DM considers Lynsey cannot provide a good reason for the failure as on the balance of probabilities it is probable she did receive the notification as she can provide no evidence that she did not and it was reasonable in her circumstances to have expected her to chase up the text reminder. The DM does not alter the negative determination.