HOUSE OF COMMONS

Work and Pensions Committee

Oral evidence: Plan for Jobs and Employment Support, HC 600

Wednesday 16 November 2022

Ordered by the House of Commons to be published on 16 November 2022.

Watch the meeting

Members present: Sir Stephen Timms (Chair); Nigel Mills; Selaine Saxby; Dr Ben Spencer; Chris Stephens; Sir Desmond Swayne.

Questions 96-151

Witnesses

I: Barry Fletcher, Chief Executive, Career Connect; Billy Harding, Policy and Research Manager, Centrepoint; Richard Rigby, Head of Policy and Public Affairs, The Prince's Trust.

II: Dr Jenny Ceolta-Smith, Member (Occupational Therapist and Researcher), Long Covid Support and Long Covid Work; Professor Kim Hoque, Founder, Disability@Work; Jane Hunt, Chair, Association of Disabled Professionals; James Taylor, Executive Director of Strategy, Impact and Social Change, Scope.

Written evidence from witnesses:

Career Connect JES0051

Centrepoint JES0011

The Prince's Trust JES0024

Long Covid Support and Long Covid Work JES0065

Disability@Work JES0031

Association of Disabled Professionals JES0062

Scope JES0050

Examination of witnesses

Witnesses: Barry Fletcher, Billy Harding and Richard Rigby.

Q96 **Chair:** Welcome, everyone, to this meeting of the Select Committee on Work and Pensions in our inquiry into the Government's Plan for Jobs and employment support, and a warm welcome to the three witnesses joining us for our first panel. Thank you for being here. Will each of you tell us briefly who you are?

Billy Harding: Good morning. I am Billy Harding. I am Policy and Research Manager at Centrepoint, the youth homelessness charity.

Richard Rigby: Good morning. My name is Richard Rigby. I represent the Prince's Trust. I am Head of Policy and Public Affairs. The Prince's Trust supports young people aged 11 to 30 across the UK into employment, education and enterprise.

Barry Fletcher: Good morning. I am Barry Fletcher. I am Chief Executive of Career Connect. We are a youth-focused charity based in the north-west.

Q97 **Chair:** Thank you all very much. May I put the first question? Economic inactivity is always higher for young people—generally, it has been higher for young people than for others—and it has increased sharply since the pandemic. How do you think that the pandemic has affected job prospects for young people? What are the main barriers facing young people at the moment? I will ask each of you to comment on that.

Billy Harding: From our perspective, being a youth homelessness charity, a major barrier during and since the pandemic has been the rise in mental health challenges for young people, particularly around anxiety and agoraphobia. As a result, we have seen young people struggling to get into some of those entry-level hospitality roles since the start of the pandemic. We are keen to ensure that mental health support is built in to support young people to move into work and take on those roles.

Richard Rigby: I completely agree on mental health and wellbeing. The Prince's Trust recently published research with the Learning and Work Institute and HSBC UK, a couple of months ago. We looked at how the NEET population had changed over the past 10 years, as well as the pandemic time, and we found a particular increase in young people being economically inactive due to mental health and wellbeing. Ten years ago, in 2011, 11% of the NEET population reported mental health issues; in 2021, that had risen to over 30%. We also polled a specific group of NEET young people to ask them what the No. 1 challenge was that they were facing when it came to barriers to employment. Again, mental health came out No. 1.

Barry Fletcher: I certainly agree about the mental health challenges. Of the points I would add, one is obviously the disruption to education. We now have young people coming out of education who had extreme disruption. They have not undertaken the exams that they were expecting

or had the opportunity of work experience, which is crucial. We know how important that is to help young people make the transition into those opportunities.

Also, young people tend to predominate in sectors that were most hit during the pandemic—if you look at retail or hospitality, those sorts of opportunities were hit hard. So, although youth unemployment did not rise by as much as feared during the pandemic—furlough and Kickstart made a big difference—we did see a significant spike in youth unemployment right at the start of it, definitely caused by people leaving those opportunities.

Q98 **Chair:** They were very badly hit during the pandemic, but now there is a huge number of vacancies in those sectors. What is the reason why those are not being filled?

Barry Fletcher: The point that has been made about mental health is key. That tripling, pretty much, of young people with mental health issues who are NEET has definitely had an impact. Work readiness is key: our systems are still challenging in terms of supporting people to be ready for work, as opposed to having an academic qualification, for example. We have seen, still, a drop in the number of people undertaking apprenticeships. If you look at under-19s, that has dropped by about a third over the last 10 years, so, yes, there are still challenges for young people coming out.

There has also been a growth in vacancies in areas that have quite low pay and possibly challenges around career progression. Some of the biggest growth in vacancies post pandemic has been in the care sector, which has traditionally struggled to attract young people to join it. There are also areas where vacancies are very high but young people are not necessarily able to go into them because there are age restrictions. If we look at logistics, for example, it is very difficult for a young person at, say, 18 to be able to move into a role in HGV due to the training requirements, but also due to the insurance requirements. There are some reasons why young people are still struggling to make that transition.

Billy Harding: To add to that, in a sense we saw a bounce back following the pandemic. At one point, we saw a greater proportion of the young people we support moving into work rather than education. I am not sure whether that was the first time ever, but it was certainly quite rare for Centrepoint.

With regard to some of the difficulties since then when we have seen young people moving into some of those roles, some have a real skills gap, and for a lot of those roles, young people perhaps need a bit of support or additional training before they can move into them. Speaking to colleagues in our employment team, there is also a perceived skills gap, so for lots of job descriptions and lots of roles that come through the jobcentre, young people initially think they can't do them. It is only once they sit down, perhaps with a third-party advocate or an organisation such as Centrepoint, that they realise this is something they can do. There is

perhaps a language issue, where young people think that these roles are more complex than they are.

Q99 **Chair:** You made the point that something rare happened. Tell us what was rare.

Billy Harding: Normally, of the young people we support at Centrepoint, a greater proportion go into educational opportunities rather than paid work, but following the end of the pandemic we saw quite a big jump in the number of young people taking on paid work, particularly in our London services and in Manchester. A big driver of that was increased wages in the hospitality sector. I think that has tightened a bit and we are starting to see challenges again, but it was interesting to see at the start of this year the difference in the number of young people going into that paid work.

Richard Rigby: Young people certainly have been rising to the challenge, if you like. Since the first reopening of the economy in spring 2021, we have seen an additional 300,000 young people in employment. If you look at PAYE, it is 400,000, so they have been rising to that challenge. However, a lot of those jobs have been filled by those in full-time education, so that is students going back to work rather than necessarily those NEET young people going back to work, even though you have 100,000 of those NEET young people going back to work.

I would echo the points about the sectors. It is interesting that Barry mentioned social care. The largest number of vacancies we still have is in health and social care. The Prince's Trust has the contract with the Department of Health and Social Care to help young people especially into those social care jobs, and that is very challenging. We are working very hard on it, but that is one area where we need to focus our attention.

Q100 **Chair:** Can I ask you a statistical thing I didn't quite understand, looking at the figures? Inactivity among young people is at a pretty high level, but the NEET figures are relatively low. They seem to be moving in different directions. Do any of you have any reflections on what is going on there? Is it because lots of young people are in education now and therefore—

Barry Fletcher: Yes, mostly. You saw a big bounce back in education, and you see that in most recessions or challenging labour market positions young people move into education at a higher rate than you would find normally. With the drop in things such as apprenticeship opportunities during that period, we saw a lot of young people move into education.

One of the challenges we are going to face over the next 12 to 18 months is that as the labour market is tightening—the ONS stats that came out this week showed that; unemployment actually rose for the first time in a significant period and vacancies dropped slightly—we are going to see those young people who are coming out of education now, and maybe education wasn't their first choice, finding themselves competing with those who are coming out normally. Therefore, we will see a greater number of people impacting that.

I think it is true that the NEET rates are historically low, but I think that there is a difference between being historically low and low in absolute terms. We still have over 700,000 young people who are NEET. There are 12 countries in the OECD that have a lower youth unemployment rate than the UK, and the gap between our all-age employment rate and our youth unemployment rate is one of the highest. It is important that, although it is positive that the NEET rate is decreasing, we should not feel that that issue doesn't exist and that there isn't a significant challenge for a lot of young people.

Q101 **Chris Stephens:** Billy, I will start with you, because you touched on this issue. Since the pandemic, the number of job vacancies has soared; it has gone way up and is reaching record highs now. Given that, why are so many young people still out of work? Is it because the vacancies and young people do not match? What's the reason?

Billy Harding: That is definitely a part of it. There is definitely a bit of a mismatch when it comes to skills and experience. There is also mental health, which we have touched on; particularly for some of the younger young people we worth with—21 and under—mental health and anxiety are real challenges.

From our perspective at Centrepoint, and I am sure it applies to a wider group of young people, there are some practical barriers to moving into work. Some of the up-front costs for transport, equipment, work-appropriate clothes and footwear—all those things are quite difficult to get if you are a young person in a really vulnerable situation.

While there is support available—things like the flexible support fund—we find that sometimes it is quite difficult to access. Young people do want to work, but the challenges they face, which are compounded by overall really low benefit rates for young people, can add an additional barrier to getting into roles that are available.

Q102 **Chris Stephens:** Thank you. Richard, do you have any views on this?

Richard Rigby: Within that economically inactive group, as we said, there has been a rise in those who are economically inactive due to health and disability reasons. There has been a fall in the number of those who are economically inactive due to caring responsibilities, and that has been one of the major trends over the past 10 years—you have really seen a huge decline there, driven by falling birth rates among the age group—but that has essentially been replaced by the health angle.

You have fewer young people unemployed at the moment, therefore there are fewer young people from that group going into work. If you think back to, say, 2012, you had over a million young people unemployed; now you have 300,000. But that group who have struggled to get into work—that 300,000 who at the moment are unemployed—will, by definition, have multiple challenges to moving into work. It is probably the most disadvantaged group of unemployed young people we have had for decades.

Barry Fletcher: That is certainly our experience in our programmes. We run a number of programmes for NEET young people and we are seeing a more complex set of challenges for those young people than we have seen in the past.

It is also important to point out that, if you look at the NEET figures, you see that around two thirds of that NEET group are inactive and therefore in the majority of cases are not accessing services that are supporting those individuals into work. If we think about Jobcentre Plus services, the vast majority of those individuals are not on universal credit and they are not accessing services that are there to help them. That group has more complex needs, and there is definitely a gap in services, I think.

Q103 **Chris Stephens:** Richard, what proportion of young people who are not in education, employment or training—for anyone watching, that is what NEET stands for—actually want to work but other reasons are stopping them working?

Richard Rigby: I mentioned the research that we did in the summer. We tried to find an absolute number of young people who we think would like to work at the moment. We added together the number of unemployed—by definition, if you are unemployed, you are looking for work; that is part of the ONS definition. You can then look at the economically inactive group, and there is a question in the labour force survey that asks whether they would like to work or would not like to work. About a third of those young people who are economically inactive would actually like to work, despite the challenges that they might have, whether that is caring responsibilities or health conditions. Adding those groups together, we found about 500,000 young people who would like to work at the moment. That is the opportunity.

Q104 **Chris Stephens:** Billy, can I go back to the answer to my earlier question? I have been thinking about it; a lightbulb went off in my head. You talked about transport, clothes for work—all of these challenges. Is that because young people are being offered insecure work? I am thinking, for example, about some of the old things that we used to hear about three young people getting a text telling them, "The first one here gets the shift." Is it those sorts of things that are stopping people going into work?

Billy Harding: That is definitely an issue. We see lots of young people looking at working in the gig economy. Of course, those young people are expected to provide all their own equipment and their own travel to and from work. For the young people we support, who are among the most disadvantaged and cannot rely on family or wider social support, and particularly financial support, access to that equipment and those things is really difficult. We see, because of the combination of a lack of skills and a lack of formal experience, lots of young people moving towards those roles in insecure employment and the gig economy. Having to pay the additional costs that that comes with is really challenging. It puts a young person's housing situation at risk quite often. Particularly if they are in receipt of universal credit, it can cause major issues, depending on the level of their earnings, especially if they are in supported accommodation.

Q105 **Chris Stephens:** Yes. Barry, what do you think the proportion is between those who definitely do not want to work and those who want to work but there are other reasons stopping them?

Barry Fletcher: I would certainly support Richard's figures. Certainly, in the services that we see, there are a number of young people who are interested in working, but they are interested in working in a way that may address some of the challenges that they have—around, say, mental health or disability. There is around a 20% gap in terms of disability in employment for young people; disabled people have 20% less employment. That is a significant issue, and one that has not really changed that much during this period. It has not necessarily got worse, but it certainly has not changed that much.

The point that Billy makes is really important. If you look at the groups that are more marginalised, such as care leavers—a group that has significant challenges—some of the things that they need, especially in terms of financial support, really are not there to the extent that they probably should be. That definitely impacts when you now have a labour market that relies on huge amounts of flexibility by the individual, especially in the gig economy, and things like purchasing your own equipment, and the financial support is not necessarily there. You have definitely seen a shift where it is more difficult for those who may be in more difficult socioeconomic situations, such as care leavers—those with additional needs. They are the group that are often remaining that may want to work but are seeing significant barriers to that.

Q106 **Chris Stephens:** Richard, the Prince's Trust does some great work in Glasgow. I will give you an example of a young person who a couple of years ago, when I was still a union rep, was a 17-year-old. He was the first person in his family to work since his great-grandfather. Is that typical in some areas of the country, or is that unusual? In other words, if you come from a family where family members have not worked for a large number of years, is it typical for that young person then not to go into work?

Richard Rigby: I think that is less common than it was 10 years ago. I have seen some statistics on that. I don't know them off the top of my head. Certainly, that is one aspect. Bearing in mind that over the past few years young people have been spending more time in the family environment without being surrounded by peers talking about careers and potential jobs, that could be more of a fact that we might see come up due to periods of lockdown. On that social isolation piece, I was speaking to our frontline staff recently. They are 100% seeing young people come to them perhaps not knowing their strengths. They are less likely to know what is out there just because they have not been surrounded by those opportunities as much as they would have been otherwise.

Q107 **Chris Stephens:** This is my final question. Scotland has introduced free bus passes for those aged 22 and under. Will that help young people to get into work? It is one of the challenges that Billy identified.

Billy Harding: From our perspective, definitely. It would really help at least to reduce one of the barriers that young people face when moving into work.

Richard Rigby: Yes, especially with the cost of living going up at the moment. We provide cash grants to young people to help them to get to work. As we have mentioned, the flexible support fund can do some of that too; it is just not always widely known about or accessible to all.

Q108 **Dr Spencer:** Like every Member of Parliament, every time I visit a local business they speak to me about the challenges of recruiting people. Just last week I went to a local Wimpy in Addlestone. The manager told me about the great difficulties that he is having finding anyone to come and work, and the challenges that poses for this business.

I was quite concerned to hear the data in the past 10 years of young people reporting mental health issues as a particular barrier to employment, and the change from 10% to 30%. I want to drill down into that a bit. Several times you have raised that as a primary barrier. My first question is, what are the absolute numbers, as opposed to the relative numbers, from 10 years ago to today? How much is it due to change in the overall pool of young people in these times as opposed to a genuine increase in people reporting mental health issues?

Richard Rigby: You are right: the figures that I gave were proportionate rather than absolute. That was 11% to 30% over that 10-year period.

Q109 **Chair:** That was the proportion of NEET, wasn't it?

Richard Rigby: Correct. That is NEET young people reporting a mental health problem.

Q110 **Dr Spencer:** Does that represent an absolute increase?

Richard Rigby: It will be an absolute increase, because back in 2011 there were—I am trying to think off the top of my head—probably about 300,000 more young people who were NEET then. I can check that figure for you.

Chair: It was a bit over a million at the time.

Richard Rigby: Yes. It is 800,000 now. If it was about 1.1 million then, you would still see—

Chair: There is an absolute increase.

Dr Spencer: Not necessarily, because if the bigger number was a while ago, as that shrinks the proportion of people with mental health as a barrier will increase if it is an ongoing barrier.

Richard Rigby: The figure has also been going up among the non-NEET population. There is increasing prevalence.

Q111 **Dr Spencer:** Okay. If you could give us the absolute figures and the breakdown, that would be really helpful, as my brain cannot do the

necessary mental arithmetic as we are talking. My next question is, when people report a mental health issue, what does that actually mean?

Richard Rigby: On the labour force survey, they ask what your health condition is. Of those who are economically inactive due to health reasons, over half of the figure was due to anxiety and depression.

Dr Spencer: So self-reported anxiety and depression.

Richard Rigby: Yes.

Q112 **Dr Spencer:** Is there any data on diagnosed mental illness as opposed to self-reported stress, anxiety and depression? The question I am trying to get to, as I am sure you realise, is, how much is self-reported psychological distress and how much is diagnosed and treated mental illness?

It strikes me that if you are NEET, that will be quite stressful for a lot of people. Certainly, over the past 10 or 20 years, people's willingness to talk about having stress has increased, as a result of many campaigns. How much is it an actual increase in people with a disorder or psychological distress that is acting as a barrier, or has it always been there and we are just picking it up? Alternatively, is there a reverse causality: because so many are being affected, they are going on to develop psychological distress, and that is not driving NEET but is a consequence of NEET?

Richard Rigby: I know that there is a record number of referrals to CAMHS in April this year. That suggests more than just self-reported anxiety issues.

Billy Harding: From Centrepoint's perspective, it is a smaller pool of young people but just over half the young people we support have a reported mental health need. We accommodate just over 1,200 young people. A third have a mental health diagnosis. I think you are right—anecdotally and hearing from key workers and staff on our employment teams, not working does compound those mental health challenges, particularly around isolation and lack of social contact. So you are right—I think it is both a cause and an effect of being NEET.

Barry Fletcher: Yes, and CAMHS waiting lists have also gone up significantly. Obviously, there are challenges on waiting lists more broadly, but certainly the experience we have in our services for those young people who are experiencing mental health challenges is that getting access to support around CAMHS is proving challenging. Many young people are waiting 12 months and so on for that support, and that is exacerbating the issue. Whether it is caused by it or it was already there, I think there is definitely an issue around how people are getting support.

Q113 **Dr Spencer:** I challenge that referral to CAMHS is by definition indicative of pathology, because the point of the referral to CAMHS is for an assessment to see if there is pathology, but that is perhaps a rabbit hole not to go down this morning.

I think trying to differentiate how much is due to what I would call

psychological distress versus illness is really important, because that really changes the way we think about the suggestions going forward on support schemes. I will ask a question later on holistic support for people getting into work; it really links into that. What services or support should we be looking at in terms of getting younger people into work?

That is why I want to draw down on the mechanism by which this is being detected. One thing that is always very helpful is the qualitative data in your experiences and your charities' experience. What is your broader take, in terms of the young people you have seen and the barriers they are facing? What do you think? Do you think it is more of a distress/stress thing? Or do you think there is a genuine huge increase in illness in this group, which is causing a barrier for people getting into work?

Barry Fletcher: Certainly in our services, we are seeing a genuine increase in those who have more significant mental health illnesses, but we are also seeing a significant amount of social isolation.

There was a report by OnSide released in the last week or so called "Generation Isolation", which asked young people how much of their free time they spent doing different things. It was really interesting. It highlighted very high levels of young people spending time alone and on social media, for example.

That social isolation, when you are then looking at getting that young person to move into work, is obviously a significant barrier. We have to be realistic that during covid we asked young people to stay away from their friends. We asked them to isolate with their families and so on, and as the pandemic has receded, there are young people who are finding that change and that shift significantly difficult. That is certainly the experience we are finding.

To Richard's earlier point, in some ways, as that group reduces in size slightly—as the absolute numbers of young people who are out of work reduce in size—you are likely to see, as is the case with broader unemployment, a greater number of challenges and barriers in that group. That is just reality. Those individuals would have likely gone into work if that was not the case.

Richard Rigby: I think it is both the clinical aspect you mentioned, but also, from the Prince's Trust perspective, we hope we can help young people through the building confidence and self-belief motivational work, seeing the opportunities around you and knowing your strengths angle. Especially if they are on the CAMHS waiting list, maybe we can do some of that work beforehand. When we polled young people on the quantitative aspect, they—the NEET group—said that the No. 1 aspect that would help them into work at the moment would be confidence building.

Billy Harding: We see the same. At Centrepoint, obviously we are working with a group who are especially vulnerable—young people who have experienced homelessness and significant trauma. But throughout the pandemic we have seen an increase in mental health referrals through our own services and an increase in what you call general psychological

distress, but also diagnoses of more serious levels of mental distress. The point is that one can quite easily cascade into the other without that support and without effective referral and early intervention. We do believe that for lots of young people work and work experience is certainly part of the picture when it comes to reducing social isolation and supporting mental health.

A particular challenge that we see in supported housing stems from the benefits system. It acts as a real driver of young people not taking on or moving into work, and especially not taking on more hours. I don't know if this is the best juncture to discuss this, but what we see with the young people we support in supported housing is that challenges with the benefits system mean that they can only work a minimum number of hours and can only earn quite a minimal amount per week. That means that young people want to work but feel frustrated by the benefits system. We surveyed 200 young people being supported by homelessness services in England last year and found that half said that they wanted to work but found they couldn't take on a role or more hours because of the benefits system, and the impact that would have on their overall income and benefits claim.

There is a variety of factors that come together and make it difficult for young people who want to work, and who already face significant barriers. We are talking about young people who have been through homelessness, have experienced significant trauma, are tackling mental health challenges and face lots of issues. This is just an additional barrier that we think is unnecessary and unfair. It means that those young people who do want to move into work face an additional challenge, which they should not have to.

Q114 **Dr Spencer:** Thank you for the evidence on benefits and people in social housing, the population that you look after. If you don't mind, I have one more question on this. You have mentioned trauma. Richard, you mentioned confidence, and Barry, you mentioned isolation, as things you are tackling.

In the way you conceptualise when you talk about mental health barriers going in for employment, are those the key things you are talking about? Is that within your definition of mental health issues: confidence, trauma, isolation, within the whole works? So that I can understand what you mean when you talk about mental health barriers.

Barry Fletcher: Yes, I would certainly say so. When I talk about isolation, there is often anxiety alongside that, whether one causes the other etc. On mental health, although this is not about diagnosed illness, pretty much the largest survey done of young people, the Youth Voice Census, showed that 51% of young people said that mental health was a barrier to work. Whether or not that is a diagnosed illness with those young people, they view that as one of the largest barriers to work they are facing. It is important to understand what that is causing for those young people; that it is acting as a barrier, as they see it.

Q115 **Dr Spencer:** That is 51% of all young people?

Barry Fletcher: That is 51% of those surveyed. It was a representative survey, yes. They were seeing mental health as a barrier to work.

Q116 **Dr Spencer:** That is just so big. It leads one to think what is going on there in that discussion, where somebody would see mental health as a barrier to work. What is the social discourse that is happening there?

Barry Fletcher: It is something that needs to be unpacked further, but it is an interesting perspective that has come out.

Q117 **Chair:** Billy, on the point you made about the benefits system. People in supported housing get supported by housing benefit. Then they move into work, and they are into universal credit. It is the way that those two things interact that is the problem, isn't it?

Billy Harding: Yes, exactly. There is a bit of a kink in the benefits system, or between two benefits systems. As you say, people in supported housing have living costs met through universal credit. Whereas people in general need, such as in a private rented tenancy or general needs social housing, would have their whole claim through universal credit, including housing costs.

For people in supported housing, such as hostels and the like, the housing element is still retained within the legacy system, so within housing benefit. What that means is that people in supported housing are on both systems at once. It is not a problem until somebody earns enough to come off universal credit. Within universal credit, there is a 55p taper rate. For every pound you earn, your UC award is reduced by 55p.

For somebody who has their whole universal credit, including the housing element, as a single flat line, as they earn, their benefit is withdrawn. But people in supported housing come off the universal credit element when they earn enough, which is not much at all. A young person on the under-25 standard allowance has to earn only about £112 a week to be tapered off universal credit entirely.

Once you are off universal credit, your income is calculated according to housing benefit rules, which are less generous and less focused on the work-enhancing elements of universal credit. If you can imagine it on a line, there is quite a steep drop as somebody comes off the universal credit system on to housing benefit, as a result of the way that income is recalculated. We find that for young people—under 25—in supported housing with no additional universal credit element and just receiving the standard allowance, it is fine until they work over 12 hours on the national minimum wage at the under-23s rate. But once they do that, they see a £25 drop in their overall income because of the move on to housing benefit and the different way that that is calculated, and then those earnings are not met until they work a further 10 or 12 hours.

As you can imagine, it is a very tricky system for us to sit here and try to get our heads round, and particularly if you are a young person in a homeless hostel trying to understand the sweet spot to which you can

earn until your overall award is affected. There is a real impact on young people's perceptions of work. We see lots of young people having bad experiences of taking on a role, not realising the impact it will have on their benefits claim and, as a result, being liable for quite high housing costs and falling into arrears.

We have a few thoughts on what could help to relieve this. Obviously, we think that young people in supported housing should be supporting their own housing costs if they are in work and where they can. But if the taper rate within housing benefit was reduced to 55p—the same rate as it is in universal credit—and if there were some further tweaks to housing benefit around applicable amounts, it would mean that for people in supported housing there could be the same flat line, so that as they are earning, it is much clearer how their benefit will be affected. It would not address the issue of high supported housing costs, but it would bring a bit of parity between those who are in supported housing and those who are not.

Q118 **Sir Desmond Swayne:** We have Kickstart, the youth offer, Restart, the Work and Health programme, JETS and SWAPs. How good are they at actually helping young people to overcome the barriers to work? Are there aspects of them that put people off applying, and what do we need to do to improve what is available?

Barry Fletcher: The first thing to say is that in the pandemic, Kickstart and the wider offer that DWP made was an extremely positive one. DWP worked really closely with the sector to look at what would work and what had the evidence base. Kickstart, as an intermediate labour market programme giving young people six months of subsidised employment, has been shown to work in the UK in the past and internationally. My starting point would be that there were a lot of positive programmes put in place that made a real difference. Over 160,000 young people went through Kickstart. That was less than intended, and that is where there are some lessons to be learned about how you could roll that out in slightly different ways, but overall, it was positive.

On the wider youth offer—I will probably speak more about the youth side—the impact is probably less clear. For example, it is unclear what impact youth hubs, which have been rolled out, are having. There is a lack of data and evaluation on those at the moment. It is a slightly more amorphous concept, rather than funded provision that is making a specific difference to young people. There are good examples of it being done really well. There is an example in Birmingham supported by Impetus that is considered a really good model, but it is fair to say that across the country, there are quite big disparities in how effective they are.

If I look at the covid pandemic and coming out of it, Kickstart was very positive. The furlough scheme made a very big difference to young people. Restart has been a successful programme at getting young people into work, but my biggest issue is that most of these programmes do not target those who are inactive—the vast majority of young people who are NEET and are not in work are not claiming universal credit—including Kickstart, which did not target anybody who was not on universal credit.

The reality is that the programmes that are there and are successful only target a minority of those who are not working.

Q119 **Sir Desmond Swayne:** On that point, clearly the main effort of the DWP is its outreach to those who are actively looking for work. What should it be doing differently to get the very people to whom you have just drawn attention, and how would that offer differ substantially?

Barry Fletcher: There are a couple of things. If we take Kickstart, for example, and if a similar scheme is to be run again, I fully understand the desire for DWP to be in control of that to a certain extent—for example, it has to be done through referrals—but they could have opened up eligibility to young people who are out of work and were not claiming benefit at that time, so that they could then take on those opportunities.

Actually, over 100,000 opportunities through Kickstart were not filled, and it would have been entirely sensible to suggest: "Yes, JCP might still take responsibility for that", but a young person who might be working with another service—especially local authority services, because they tend to work with a lot more young people at that age—could then do that. It is about thinking about that eligibility.

Also, if we think about the more inactive group more broadly, they tend to be supported in more local areas. I do not think that it is always about whether it is JCP or DWP's responsibility to provide support there; more support is needed, but it might be better delivered in a more localised way.

Richard Rigby: On Kickstart, I support Barry's general support for the measures that were introduced as part of the Plan for Jobs. The time they came in was enormously difficult. Kickstart operated through such a drastically different period: at the beginning of Kickstart, there were still lots of concerns about the virus, but towards the end vacancies were booming and full-time jobs were available, as well as the part-time jobs being offered through the Kickstart.

A significant amount of work is being done by the Department to evaluate Kickstart. It is so significant that we will not actually get the final evaluation until summer 2024, which obviously is a long time in economics and politics, so it would be useful to have interim findings before then, especially with the potential for another recession around the corner. If that led to an increase in youth unemployment, we would support a similar scheme being introduced—with some of that learning from Kickstart.

The Prince's Trust supported 4,000 young people with employability support on Kickstart, so we saw the benefits of it. The group that we worked with—we will see if this is borne out by the statistics across the board—tended to have various challenges to work, so it was not just those who were work-ready and able to get whatever job came up.

Billy Harding: I agree with what Barry and Richard said. First, we thought that the ambition and vision behind schemes like Kickstart were brilliant and, for a good number of the young people we worked with,

Kickstart for example worked really well, but we did see a few barriers, one of which was the rule about a minimum of 25 hours for Kickstart schemes, which for people in supported housing pushed them above the earnings threshold, making it quite difficult.

Another issue was flexibility. Young people, particularly those facing the most challenges, taking on a Kickstart role but struggling to manage, might have realised that it was not for them, but felt unable to leave the role or, if they did leave the role, were at risk of sanction. That touches on a wider point, the lack of flexibility around what we think is young people's need to find good work experiences or to try out different roles—to leave them, if they feel they need to, without the risk of sanction. That was quite a challenge with Kickstart.

With regard to the youth offer and some of the things in that, again the vision behind them we really welcome—things like the youth hubs. Again, there is a lack of evidence as yet for exactly how those are working. There is also a bit of an issue with consistency; a youth hub means one thing in one place, but can mean something quite different in another place. We have some feedback: some places, like Manchester, are working really well; and in particular the co-location of services outside a jobcentre setting—that more formal, perhaps institutional setting—is helpful for young people. You talk about how people not involved with the jobcentre or formal support might come forward to be helped, and we think that youth hubs could be part of that. If young people have negative perceptions of the jobcentre, that more community-based, youth-friendly setting could be helpful in bridging the gap for those young people who might be reluctant to go into the jobcentre to sign on in that way.

Barry Fletcher: The co-location piece has been well evidenced. One of the reasons why youth hubs were developed is that there was good evidence. The Mygo Centre in Ipswich was seen as best practice in this space, where you have Jobcentre Plus staff, other support, careers, debt—different support in a setting that was not Jobcentre Plus. For a lot of young people, especially the younger age group of 18 or 19, Jobcentre Plus is not necessarily it—there is some evidence for the perceptions of Jobcentre Plus not being particularly positive in that age group and of it not being seen as somewhere they wanted to go. So, the youth hub principle is a good one; the challenge is that funding is not really associated with it, and there is no standard structure, so what you get when you go to a youth hub could be very different depending on where you are around the country.

Billy Harding: Going back to the homelessness point, we are really keen that the co-location of services addresses a range of issues. Work coaches and the wider DWP are really important partners in tackling youth homelessness. We have worked positively and closely with teams in DWP to roll out resources to work coaches. Effective co-location can be a real positive not just for young people moving into employment, education and training, but for things like homelessness prevention and support for

mental health. We really support the vision, but it needs funding, evaluation and hard data to show where it is and isn't working.

Barry Fletcher: The really good international examples—the Netherlands, Germany, etc—don't make that distinction between benefits and non-benefits. The Netherlands has the lowest youth unemployment rate in the OECD. They actively work on transition, and they support all young people to make that transition. They don't make the distinction that we often do between those who are unemployed, who get support, and those who are inactive, who don't. That is important.

Q120 **Nigel Mills:** Following on from that, what do you think the role of the work coaches at the DWP should be? I think there is a vision that, at their best, they could be all-singing, all-dancing support for all aspects of people's lives on their work journey, but you seem to be suggesting that that is not what people really trust them to do or want them to do. What should the role be?

Billy Harding: I think there is a balance. We need to recognise that the primary job of the work coach at the jobcentre is employment support. It is not necessarily fair for them to take on additional roles, such as social worker and housing worker. That said, through effective training—through psychologically informed environments and principles like that—work coaches can be a gateway to further support. We are keen to ensure that work coaches and jobcentres are informed of the local support that is available, so that they can effectively refer young people, whether that is formally to a local authority in a homelessness situation. They should be well equipped to refer to the local services and support that is available. We want a work coach to be well trained and well aware of where that further support is available.

Q121 **Nigel Mills:** Do you think it would be better for the Department to use their work coaches as benefit enforcers and then commission other people to do the support, or do you think they can make that hybrid model of benefit enforcer and support worker work?

Barry Fletcher: I think it is challenging to do both. One of the challenges around the perception of young people is that work coaches are seen as being focused on administration, benefit management and sanctions, not necessarily on support. There are excellent work coaches out there doing a really difficult job, but they are given very limited time with an individual. The average length of time that a work coach spends with an individual tends to be five to 10 minutes. They have case loads of 100 to 150 people, depending on which piece of data you look at, so it can be very challenging to give the type of support that young people need. It is about how DWP might fund and work with other organisations that can give more intensive support to young people, and therefore help them back into work. There is a definite role for the work coach, but trying to do both roles is challenging, especially given that we have a sanctions regime that is more punitive than many other countries, and we are more focused on our sanction rates, which have jumped post pandemic. Doing both is a challenge.

Richard Rigby: You do hear great stories about amazing work coaches. A young person will tell us, "My work coach made such a difference to my life. They saw strengths in me that I didn't know I had and referred me to the Prince's Trust"—that is in our case, but there are other organisations—"and that was the best thing for me at that time." The best work coaches are those who tailor to the individual strengths. I am not sure whether they can do that with sanctions.

Q122 **Nigel Mills:** Presumably if more people are out of work and case loads go up for work coaches, this gets harder and worse, and they get less time to engage.

Barry Fletcher: I think that is true in part, although I commend the Department for rapidly increasing the number of work coaches during the pandemic. They did that very quickly, and that definitely provided support. Some of those case load levels did not rise in the way that they might have done, and therefore the work coaches were able to give more support than would have been the case otherwise.

I am talking more specifically about young people here. I have a question, looking at the best practice out there, about whether JCP is always going to be the best place to give that support, however good or not the individual work coach is—there are lots of excellent work coaches. Referral and support to other provision that may be more youth friendly, and more targeted and focused around young people, is possibly a better solution.

Q123 **Nigel Mills:** Finally, on in-work progression, do you think there is more work they should do to stay in touch with the young person? When they have got them into the first job—perhaps up to the first 12 hours that Billy was talking about—should they be trying to support people through a journey into sustained full-time work?

Billy Harding: We think definitely. An important first step is more information for young people who are in work. With the young people we work with who might be moving into the gig economy or more insecure roles, we see a lot of them not being aware of their rights and the key information that they need—this goes back to supported housing and the benefits system—such as the overall impact it will have on their benefits claim. As a minimum, I think there is a good role for the jobcentre and work coaches to provide that quick and easy information on different types of work, and to provide support that way.

Richard Rigby: There is certainly a demand for in-work support and progression. I do not know whether it should be the work coaches providing it, but from the Prince's Trust's perspective, early next year we are launching our first pilot of in-work progression based on our experience of running Kickstart. We will be providing a number of employers with three months-worth of employability support for their new joiners to help them to settle in and sustain their role in the workplace.

Barry Fletcher: I think there is a policy position here around in-work support. Obviously, with UC there is conditionality—it may come in to a greater extent in the future—which may mean that work coaches are

pulled into doing that more. I think there is also a look at things like the National Careers Service. If we are looking at how people build a career, and how they improve their prospects and wages, something like the National Careers Service, where you have trained careers advisers, may be a better place to provide that type of support—especially because that is a lot of phone and web-based support—than a Jobcentre Plus. Inevitably, people associate Jobcentre Plus with being out of work, and honestly it is not necessarily very well set up to provide support once people are in employment. I think there is an interesting question there about how you might refocus the National Careers Service around that.

Q124 **Dr Spencer:** I want to continue the line of discussion about support. You made a fantastic point, Barry, that we can have centres of excellence, but how do we ensure that that spreads everywhere and people get consistent support? It is a question that we have raised in many inquiries. When you look at the wraparound support, how do you make sure everyone gets a good deal? In my constituency, we have the Weybridge youth hub, which covers my patch, run by Ben Hyde-Wardle. It is absolutely amazing, and I want everywhere to have a Weybridge youth hub. How do you think we can do that?

Barry Fletcher: I think we should provide some funding for the youth hubs. There is not a specific funding pot for that; it relies on local organisations working with JCP on bringing people together and collaborating, but collaborating without an overarching funding structure. I think there needs to be data and an evaluation of the way that works. There needs to be a standard set of MI that you create that says how many young people are going through and what outcomes the young people are getting, so that we can understand what is making a difference and what is working. You may raise it, but I certainly have not seen anything published by DWP around that on youth hubs, so I think it is really difficult to look beyond the anecdotal. When you are trying to create a consistent England-wide service, I do not think you should do that.

Richard Rigby: I agree. The youth hubs were set up enormously quickly, and there was a target to hit a certain number. That involved lots of local partners and Jobcentre Pluses coming together at breakneck speed to bring this together. There were a number of—I think there were three—different minimum viable products that they had to be running, but now we have more of an opportunity to improve the quality, not just the quantity that we were doing so quickly. We are involved in running a number of youth hubs. Sometimes that's our staff working on other sites. Sometimes we have youth hubs in our centres. But again, there is no funding involved for organisations that are helping with those youth hubs.

Billy Harding: I agree entirely. I think funding for the youth hubs is an issue. But a principle that we are really keen in Centrepoint on looking at across the homelessness sector is the idea of psychologically informed environments and ensuring that services are built around the recognition that people present in certain ways as a result of mental health challenges and particularly trauma. That is particularly important for places like jobcentres and youth hubs, which will be working with people who are

coming from positions of disadvantage. What it means is ensuring a base level of training around psychologically informed support and ensuring that there is a base level of standards for youth hubs across the country that organisations can refer to. I think that would be useful.

Q125 **Dr Spencer:** You are all masters of holistic support for people. That has been quite clear in the evidence that you have given. Over and above what we have discussed already, is there anything else that you see as a barrier to people getting that holistic support? What would be your recommendations? Is there anything else we could do to make sure that people get that, or are key stakeholders working to provide the best support?

Barry Fletcher: I think we can build on models that are working. A good example that the DWP have recently launched is about putting employment advisers within the IAPT services. That is something they trialled, piloted and now have expanded, and I think it's a good example of where you are bringing together that psychological support and mental health support with employment support. I think that is to be commended and a really positive programme. There isn't really anything quite the same or similar for young people. Interestingly, there isn't anything that works like that around CAMHS, for example. I think an interesting question is: how might you bring those things together in a different way? The youth hubs have the potential to do that really well, because they can bring in debt support, housing support and work coaches. But I think they are unlikely to meet that potential unless structure, funding and data are brought together.

Richard Rigby: I think that across the whole system we need more targets, concerted efforts, bringing lots of the— Sir Desmond mentioned earlier how many acronyms there are for various schemes, and it can be, of course, quite a confusing landscape for young people wanting to know exactly where they should be going. "Should I be going to a jobcentre? Should I be going to the National Careers Service? How do I navigate this?" I think that, longer term, we would support—I think that in one of your previous evidence sessions, Tony Wilson, from the Institute for Employment Studies, talked about how we need a system that brings this all together in a one-stop-shop, no-wrong-door approach, where you can access multiple services. "What is the best thing for this individual? Is it training, further education, higher education or employment support at this point?" To get to that stage, we need some concerted effort across the Department for Education, the Department for Work and Pensions and the Department of Health and Social Care. Last week, it was announced we would have a new Youth Minister, which was a positive move on that journey. To have that cross-Government working would be really helpful.

Billy Harding: Yes, it's a question of having that single front door that is accessible. And I think we need steps to perhaps address some of the perceptions around the jobcentre. Again, youth hubs can have a part to play in this. Perhaps some young people are more resistant to going into that setting. If they are aware of a service that is more holistic or more youth-focused, that could help to address that as well.

Q126 **Dr Spencer:** Where does employer engagement fit in all this? One of the things I have noticed—I have been quite astounded, actually, by the number of companies I go and visit that tell me they have barriers to recruitment. I say, "Well, have you spoken to our local jobcentre?", and they say, "Oh—no," and then they go ahead and do that; and then sometimes they are able to recruit. I am wondering where that fits in the ecosystem. We talk a lot about the client side—if we are going to call the person seeking work the client—but not so much the provider.

Barry Fletcher: I think the jobcentre does have an important role to play. Where that relationship works well— It's interesting if you look at the data. A relatively small number of employers engage with Jobcentre Plus, but those who do have generally a very positive view of the experience that they have had. But I think there are a lot of organisations that don't think that Jobcentre Plus is something that is going to be able to support them. So I think there's a marketing element that you need to do with employers. I also think that the best organisations that are supporting young people especially do have those employer links as well. I certainly know that that is something that we do as an organisation, and I know that the Prince's Trust and many other charities also do it really well. It may not be directly with Jobcentre Plus, but it is with organisations that can support young people into work. There is a definite place for Jobcentre Plus, but there is also a place for other organisations, especially charities, that are supporting young people.

Richard Rigby: Yes, through Kickstart and Way2Work there were improved links between Jobcentre Plus and employers. I think in many of those cases it was the large national employers that were able to come to the Department with hundreds of jobs, rather than the smaller employers—that is probably the area where you need greater outreach.

Billy Harding: There is probably not much more to build on there. More can be done within jobcentres, but we have good relationships with a large number of employers. They have recognised that we are a more specialised organisation that can provide that additional support for young people facing the most disadvantages. That works really well where there is more of a three-way relationship between employers, large and small, the jobcentre and those specialist organisations that can provide the in-work support and the wider holistic support that young people might need.

Q127 **Chair:** May I ask you a little bit more about youth hubs? When were youth hubs first set up?

Richard Rigby: They were announced in summer 2020 as part of the Plan for Jobs, and I imagine they were set up first in the autumn of 2020.

Q128 **Chair:** So it was a pandemic response. You said that there is no funding involved, so what were the incentives for the Prince's Trust to host youth hubs?

Richard Rigby: For example, in Mr Stephens' constituency in Glasgow, our centre there is a youth hub. For us, it is about that link to those work coaches who are based in that centre having a greater understanding of

what our offer is, and that makes for a better referral system. Of course, there are overheads that come with the space and everything else.

Barry Fletcher: We have our staff based in a number of youth hubs. Fundamentally we do it because our mission is to support more young people into work, and therefore it relies on us choosing to do that—and, to be honest, funding that—ourselves. That is where there is a challenge for organisations.

Chair: Very interesting. That concludes our questions to you. Thank you all very much for your very interesting answers. We bid you farewell.

Examination of witnesses

Witnesses: Dr Jenny Ceolta-Smith, Professor Kim Hoque, Jane Hunt and James Taylor.

Q129 **Chair:** Welcome everybody. Hello to our virtual witnesses and thank you very much for joining us. I will ask each of you, both the two witnesses who are here in person and the two who are joining us virtually, to introduce yourselves in one sentence and say who you are. I apologise, because I gather that we have had some technical difficulties that have affected both of the virtual witnesses this morning. I am sorry that has been difficult, but I can see that you are both with us now. Thank you for sticking with us, and we are looking forward to what you have to say.

James Taylor: Good morning. I am James Taylor, and I am director of strategy at the disability charity Scope.

Professor Hoque: I am Kim Hoque and I am professor of human resource management at King's Business School.

Dr Ceolta-Smith: Good morning. I am Jenny and I a member of the Long Covid Support employment group, and co-founder of Long Covid Work. I am living with long covid.

Jane Hunt: I am Jane Hunt from the Association of Disabled Professionals. We support disabled people in work. We did a piece of research called "Ableism and the Labour Market", which was published in June.

Q130 **Chair:** Thank you all for being with us. Can I put the first question to you? Economic inactivity has risen for disabled people since before the pandemic, and being long-term sick is increasing as a reason for inactivity. Are we seeing the effects of long covid or is it something different? Why do you think inactivity has risen among disabled people? Given the very large number of vacancies at the moment, what is holding disabled people back from gaining jobs?

James Taylor: There has been an increase since the pandemic of about 500,000 disabled people, and the number of people who are out of work due to being long-term sick has gone from about 2 million to 2.5 million in

the latest quarter. The overall figure of disabled people who are economically inactive at the moment is about 4 million, which is the highest number for 10 years. I do not think the increase is due only to long covid; there are lots of reasons we can see from the ONS figures. In fact, the trend of people moving out of work due to sickness or disability started just before the pandemic. It is most pronounced among people with a disability.

The reasons include the increase in the NHS waiting list; many people have to wait for operations and appointments, which causes them to fall out of the workplace. Some 35% of disabled people who left a job in the last two years are on an NHS waiting list. We have seen increases in mental health conditions, particularly among younger people, as we heard in the previous session. There have also been huge increases in people reporting issues with their back and neck, which is most probably the impact of working from home with the wrong equipment. There is a whole host of reasons that the number of people falling out of work and into economic inactivity is increasing.

Q131 **Chair:** You gave two figures there: 2.5 million and 4 million. Just tell us what those figures represent again.

James Taylor: In total there are 4 million disabled people who are economically inactive and 2.5 million people who are reporting long-term sickness. Long-term sickness is a period of sickness of four weeks. A disability or health condition is defined as 12 months or longer. There is a larger group of disabled people who are out of work, and many of those people are also classified as long-term sick.

Professor Hoque: The concern around what is happening with the healthcare system is a really important point. As James said, there are 7 million people on the waiting list. Some will be able to continue to work; some won't, and will drop out of the labour market or job search activity as a result.

It is interesting to look at international comparisons. In the UK we have seen an increase in inactivity rates as a result of the pandemic. Those inactivity rates have not fallen back to where they were before the pandemic, but in other countries they tend to have done so. That suggests that it is not just long covid that is causing this, because if that were the case other countries would be equally affected, but they do not appear to have been in the same sort of way. Countries such as the Czech Republic had a higher rate of covid infections than we did, so you would expect them to have the same problems in terms of labour market inactivity, but that does not seem to be the case.

That really shines a spotlight on the healthcare system from the point of view of whether people who need medical treatment in order to be sufficiently well to stay in work are actually getting that treatment. I think the Bank of America recently made a statement along those lines. It is an argument and a concern that is increasingly being recognised.

Q132 **Chair:** What did the Bank of America say?

Professor Hoque: They identified the problem of healthcare provision as a significant factor in explaining labour market inactivity rates.

Dr Ceolta-Smith: From a long covid perspective, I agree with what has been said. However, we feel that there will be a huge impact in the figures in relation to long covid. We had the ONS data last month reporting that 2.3 million had been impacted by long covid, and over 300,000 people have been severely impacted in their day-to-day activities. We feel there is a huge problem in the figures because long covid is a complex multi-system health problem. It is a cardiovascular infection, and we know there are increased rates of heart disease, blood clots and strokes. People experience over 200 long covid symptoms, and debilitating fatigue is a key symptom that impacts on people's everyday activities. We have also got whole households impacted by long covid. We have single parents who might have long covid, and also their children might have long covid.

What we have is a growing body of research now around people with long covid in relation to work. There are consistent findings within that research. There was a study recently by Indeed. There has been a study by Lunt et al and TUC Equality. What we see is that around three quarters of the people who take part in those studies are unable to work or significantly need to reduce their hours, so we agree with what has been said, but we also feel that there is a huge problem for people with long covid not being able to return to work.

A key point that has already been brought up is access to healthcare. People with long covid feel very abandoned by the system. People have been waiting in some cases two years to be seen, and there are lots of people reporting to us from the long covid community that when they attend long covid clinics the experiences are very mixed, especially in relation to return to work, so there are lots of challenges there from a long covid perspective.

Jane Hunt: I don't have anything to add.

Q133 **Chris Stephens:** Let me start with you, James. You said something that got the lightbulb going. It is about the challenges that disabled people face in finding and keeping employment, and whether that has changed since the pandemic. You mentioned home working, which was all the rage during the pandemic, yet it seems to me that many employers, including Government Departments, are forcing people from their homes back into the office. Is that a factor in some of the challenges that disabled people have in trying to find and keep employment?

James Taylor: Undoubtedly. Working from home over the last couple of years has been a major boost for lots of disabled people who have called for flexible working and home working for a long, long time and had not been able to do it. But then suddenly we had a global pandemic and employers found it very easy to do—in lots of cases; not always in others. That made it easier for people to work at their own pace, work their own hours, and be at home. But you are right: now that we are beyond 2020,

we are seeing employers demanding and wanting people back in the workplace.

Chris Stephens: Forcing.

James Taylor: Potentially forcing them, too, which does have a negative impact on disabled people. The disability employment gap has risen for the last two quarters, when previously that should have been going down slightly. It is still around 30 percentage points, but now it has risen and we are seeing more disabled people falling out of work than non-disabled people are. Undoubtedly, the push to go back to the office is having an impact on that.

Q134 **Chris Stephens:** Professor Hoque, one of the issues I touched on with the first panel was that perhaps one difficulty that disabled have is the actual vacancies themselves and the nature of those vacancies. It could be insecure work, transport costs, work clothes and so on. Is that an additional challenge that disabled people have had since the pandemic? A lot of the vacancies out there are for insecure work, or there are transport costs and all of these issues.

Professor Hoque: It is an ongoing problem that we have had since before the pandemic: an insufficient spotlight on what is happening in the workplace in terms of breaking down the sorts of barriers that disabled people encounter. There has been an awful lot of focus over the years on the supply side and labour market activation policies and getting disabled people into job-seeking activity and then hopefully into work. Of course, if the workplace is not sufficiently accessible, there will not be the jobs there for disabled people to do. This is one of the initiatives I have been involved in recently.

One of the main initiatives has been the disability employment charter. That has now been signed by more than 130 different organisations. One of its key focus areas is on the demand side. In other words, what are the sorts of things that Government can do to lead, essentially, to a situation where employers engage more broadly and in greater depth with the disability employment agenda? What can Government do to get employers to break down the sorts of barriers that disabled people face in their workplaces? The fact that it has been signed by 130 organisations—including Scope, all the country's leading disability charities and an increasing number of mainstream business organisations, such as McDonald's, Schroders and Herbert Smith Freehills—demonstrates how much appetite there is out there for Government to go further. Arguably, they should have gone further in the national disability strategy from the sorts of policies that it puts into place around that. That sign-up also shows the consensus in terms of what those practices might be, because these organisations do not sign the charter lightly—it is something that will go right up to the top of the organisation for them to sign it off.

One of the key problems we have now is that with the national disability strategy effectively having been paused because of the case that is going through the High Court at the moment, the work that was going on

around, for example, the consultation on the introduction of disability employment reporting and the review of the Government's Disability Confident scheme have just come to an end. From what I understand, there is no indication of when that work will restart, so some of the key things that we would see as needing to be put into place to encourage employers to adopt a more receptive attitude towards employing disabled people are just on hold at the moment.

Q135 **Chris Stephens:** Perhaps we will see that Parliament can sign your charter, as well. We will maybe push that, Chair, on another occasion.

Jenny, covid and long covid obviously did not exist before the pandemic, so this question is perhaps similar to the one I asked James. Would home working benefit people with long covid to get into work? Perhaps the change of forcing people from home working back into offices is having an impact. That is one of the challenges. Are there any other challenges that you think disabled people face since the pandemic in finding employment?

Dr Ceolta-Smith: I think the points that have been made on working from home are absolutely crucial to the vast majority of people with long covid. There is also a wealth of research and a good research report undertaken by Chronic Illness Inclusion around people with energy-limiting conditions. Working from home is a key factor that can enable people, particularly because it enables people to work at the time, the pace and the place they need when they are managing an energy-limiting condition such as long covid.

I think we are very clued up now on what the enablers are for people with long covid, and there is this increased need, as has been mentioned, on the demand side, because there is so much onus on the individual to be working. Let us really make clear that we need to start from the premise that people do want to work. There is no need to be coercing or pushing people into work. When we are well enough, we will work, but we need the conditions that are right for us. Working from home may not be suitable for everybody, and it may not be wanted by everybody, but that is a key enabler, and that is coming out in research and anecdotal reports.

Bearing in mind that we have already heard about the ONS data on musculoskeletal problems, we do need to ensure that, if people are working at home, the onus is on employers to ensure that they are following legislation in terms of things that are provided. That is where, in the discussion today, Access to Work is absolutely key to supporting people at home.

I would also like to raise a really important factor, particularly around vulnerable people—not just those with long covid but those with other health conditions and disability—which is the real concern about reinfection. Long Covid Support has done a survey on reinfection from covid and how that can lead to more detrimental impacts on people's health. They may have just got back to work, and then they are reinfected. There are real risks then, not only to their health but to them keeping that job.

Q136 **Chris Stephens:** There will also be fears of that. People will be scared to go into a very busy workplace environment because they believe they might get reinfected. Is that another factor?

Dr Ceolta-Smith: I would put it even more strongly than that: there is a real risk that they will be open to that infection. We stated strongly in our written evidence that we really need much more in public health measures. We need hazard-protection measures in the workplace. We need to put the mitigations in so that the long covid numbers do not rise.

The figures were actually shown to have risen yesterday. If we look at, say, the NHS, we are aware in the community that the number of staff taking early retirement or being dismissed is growing, but unfortunately we have been made aware this week that those figures are not held by the Department of Health and Social Care. Similarly, the Department for Work and Pensions is not collecting data on the people who are claiming ESA or universal credit for long covid. These things are impacting on the need to look at provision and planning for employment support and health as well.

Q137 **Chris Stephens:** Thank you, Jenny. Jane, is there anything else we are missing here, in terms of the challenges that disabled people face in finding and keeping employment since the pandemic?

Jane Hunt: I think that perhaps it is about the jobs that are available. In most places, you might have jobs just in skilled work. Where I live, it is the tourism industry and, clearly, people are crying out for staff to work in the cafés. Now, that is not suitable for some disabled people. So it depends on where the job vacancies are. Also, we have seen advertisements for hybrid working. That is becoming very popular with disabled people because they can work part time at home and part time at work. Obviously, that does not appeal to everybody, because they still have the same problems as everybody else with childcare and UC and getting the equipment that they need to do the job.

There are some employers who are very good at implementing workplace adjustments. Most workplace adjustments are about flexibility of working, which costs nothing. I think some employers are finding it very difficult to realise that some reasonable adjustments are very cheap to make. Some reasonable adjustments are about thinking about how people do the task. It is about thinking about the job itself and the environment and removing the barriers.

Q138 **Sir Desmond Swayne:** How effective have the programmes that the DWP specifically focuses on getting disabled people into work been? How good are they at helping disabled people to overcome the barriers they have to work, and what changes need to be made?

Professor Hoque: The initiative that I have focused on most closely in my research is Disability Confident, which has grown significantly in recent times. Around 20,000 employers now have Disability Confident accreditation. We can look at that and say, "That's great—there are lots of employers getting involved, recognising the importance of doing the right

thing and putting the right sort of policies in place to make their workplaces more accessible to disabled people."

The research we have done is on Two Ticks rather than Disability Confident, but we would expect the effects to be the same, given the fact that in many ways, Disability Confident was just a rebranding of Two Ticks and operates in very similar ways. Using Government data, we looked at what happens in Two Ticks versus non-Two Ticks workplaces, first in terms of whether or not they employ proportionately more disabled people than non-Two Ticks workplaces, and we find out that they do not. There is no difference in terms of the extent to which Two Ticks and non-Two Ticks workplaces employ disabled people.

We also look at disabled people's experience of work—does Two Ticks improve disabled people's experience of work and close disability gaps in terms of job satisfaction, wellbeing and so on? Again, we find that it does not have that effect. When we then look at the sorts of policies and practices that employers put into place, again, there is no difference. Two Ticks workplaces were not even putting into place the sorts of policies, processes and practices that you would expect a good disability equality employer to put into place.

Our concern is that the same problems hold where Disability Confident is concerned. The growth in the number of Disability Confident employers gives the impression of improvement, but that is a false impression of improvement, because unless they are actually doing anything different, there is no improvement at all. Government could well look at that and say, "We don't need to introduce tougher regulation around mandatory reporting because employers are doing this sort of stuff anyway."

Our main ask where Disability Confident is concerned is that it becomes focused on outcomes rather than processes. At the moment, you get Disability Confident accreditation by committing to implement certain policies, practices, procedures and so on. Our argument is that it should be based in particular on whether you meet certain thresholds in terms of the percentage of your workforce that is disabled. Employers really should not have Disability Confident accreditation unless they are actually employing disabled people in significant numbers. We suspect that that would result in Disability Confident accreditations going down, because employers would need to have proper, accurate figures on how many disabled people they employ. But it would make it a much stronger scheme, because it would send a much stronger signal to disabled people in the labour market about which employers are genuinely likely to employ them. At the moment, the scheme does not have a particularly good reputation among disabled people. This is a way in which that could be remedied.

Q139 **Sir Desmond Swayne:** We have already expressed our scepticism about that. What about the Work and Health programme?

Professor Hoque: It is not something that I have very much knowledge of, but there are certain other initiatives. For example, individual

placement and support programmes are much smaller scale, and are focused particularly on people with serious mental health conditions. They are about getting job coaches working alongside the medical health team. The idea is that work is a health outcome.

If you put those into place, they are expensive and very intensive. The job coach role goes on for a long time into the person's employment. Public Health England figures suggest that around 9% of people who are aware of having serious mental health conditions are in employment. When they go for the IPS scheme, that rises to 30%. There are schemes out there that work well, but they are quite small scale, and arguably they need to be scaled up to cover a broader range of conditions.

James Taylor: I agree with everything my colleague has just said. At Scope, we believe that the fundamental issue is that it is impossible for the DWP to say how effective its programmes have been in closing the employment gap. We had a target of getting 1 million more disabled people into work, which we celebrated reaching in the spring of this year. However, it is impossible to say whether Disability Confident, Access to Work and the Work and Health programme have contributed to that target. Most of it is because people feel more confident talking to their employer about their disability; they are already in the workplace and are now just talking about the fact that they are disabled or have a long-term health condition. There is no public evaluation of any of these schemes that would suggest how effective they are. That is why we outside are trying to evaluate them ourselves.

On the Work and Health programme, we have some concerns that disabled people who are part of that programme are subject to mandatory conversations at the beginning, and that most people who come out of the programme are in a job only for one or two years. It is not leading to sustainable, long-term employment, which is what many people want to see. Scope's own employment services are completely voluntary and completely personalised. We see better outcomes in terms of long-term job sustainability among the disabled people we support than the Work and Health programme.

Arguably, Access to Work is a very good programme. This Committee has heard many times how positive it is for claimants. It is not well known. Employers do not know about it. They do not know that they can get money back from adjustments and kit in the workplace, and there are not that many claimants who use it. There are far more disabled people who could be benefiting from it. Access to Work needs to be better promoted among employers, job seekers and people in the workplace.

Jane Hunt: The Access to Work programme has been talked about on the Committee many times. When it works, it is fantastic, but there are some bureaucratic issues that need to be ironed out, because the rules are very strict. We had a case where somebody knew that they needed a very expensive iPad and that was going to cost £1,000. The Access to Work person ordered a pair of spectacles at £3,000 which was totally inaccessible that did not work for them, because the iPad had certain

technology. The Access to Work rules are that iPads are normally provided by the employer. Access to work could have considered the cheaper option of paying the difference between the basic iPad and the expensive version of the iPad saving something like £2300. There are some people who have not received the right equipment.

The other issue that some people have encountered is a very bureaucratic system where you have to sign a handwritten piece of paper and send it in. Why can that not be technologically possible to do online? You need to think about the practical issues that are a barrier for people. It is a great system, but the civil servants need to make it work properly and be more flexible about what is needed. They need to recognise applicants need equipment quickly to enable them to do the job

Also, the onus is on the employee knowing about Access to Work. The employer perhaps should get more involved with the process. Sometimes a person cannot start the job from day one if they need that assessment, because they cannot do the job properly. They don't have the support they need.

Dr Ceolta-Smith: I really agree with some of the points that Jane has been making about the bureaucratic process with Access to Work. First, to say from the long covid community's perspective, we hear that this is an invaluable resource for people who want to get back to work or stay in work.

But we have noticed there are problems with the provision at the moment, particularly in terms of timely access. We are aware that people are waiting for 20-plus weeks for assessment. Again linking to what Jane said, the administrative process can be overly burdensome. When somebody has an energy-limiting condition, or maybe cognitive dysfunction, those kinds of process, paperwork and deadlines are quite challenging.

Worryingly, occupational health experts have told us that some employers are unwilling to fund the 20% contribution, which is a huge barrier. We feel that there is a need to ensure that the costs are reasonable, especially when somebody is adopting a hybrid approach with long covid. They may be working from home and in the office.

Perhaps they need to trial the equipment at home first. As we know with long covid, some people are returning to work, then having to take further sickness absence. Rather than having both costs incurred at the start, it is maybe better to see if that equipment is suitable in one location, and what is generally preferred is working from home.

One barrier I would like to raise, which does not just cut across Access to Work but occupational health reports and healthcare professional reports, such as from occupational therapists. There is not a huge amount of weight sometimes on whether an employer will actually follow that advice. That very much ties in from a long covid perspective with the fact that we agree—those of us within long covid support—with the TUC equalities campaign to have long covid classed as a disability within the Equality Act.

There would be more onus on the employers to follow the guidance from Access to Work, because that is not necessarily always happening.

We see Access to Work as an excellent service. There are particular benefits for people who are self-employed around having personal assistance for doing the administrative roles and the accounting, and help with things to do with cognitive dysfunction. We wonder whether there is enough money in the pot for the help that is needed for people with long covid. We really feel that an evaluation is needed of how effective and cost-effective Access to Work is for people with long covid, and that we need to look at the evidence base from people with energy-limiting conditions who use Access to Work.

I would like to add to the comment on Disability Confident. Our views chime with what has been said. We have numerous people with long covid who have been dismissed by Disability Confident employers. We know that people are not getting the reasonable adjustments. There are some great examples of employers doing the right thing, but a theme today is that many employers are not doing the right thing for disabled people or people with health conditions.

I would like to touch on the Work and Health programme. I cannot comment specifically on the outcomes, but in terms of people with long covid accessing the programme now, we call for the Department to make a shift in what it considers a successful job outcome. Currently, it is 16 hours for the payment model. Really, we need to shift thinking and value disabled people and people with long covid and other energy-limiting conditions.

Actually, a successful work outcome for somebody like me might be one hour a week, certainly initially. What the evidence base and the Society of Occupational Medicine agree with is that we must look to very slow and gradual increases of work when we are ready and medically safe to return to work. If someone is going to the Work and Health programme with long covid, I have real concerns that those programmes and those providers are sufficiently equipped, skilled, prepared and knowledgeable about long covid. They may actually cause people harm and worsen their condition if they are looking at the 16 hours.

With all the kinds of employment support within the jobcentre, we hope to have a discussion today on the permitted work model, because we feel that there is huge potential there, not just for people with long covid, in order to align with best practice and gradually build up people's hours if they are able to do so.

Q140 **Selaine Saxby:** The Work and Health programme does not require an individual to be in receipt of benefits to apply. I just wondered what your thoughts were on why more economically inactive disabled people are not using this support programme.

Professor Hoque: That is very good question. I would go back to looking at the issue of the employer. Ultimately, you can have the most wonderful

supply-side scheme that is providing disabled people with support to get into job-seeking activity, but will that be effective if employers are not sufficiently engaged with the disability employment agenda, making their workplaces sufficiently accessible, putting the reasonable adjustments in place and, essentially, developing an environment that disabled people feel comfortable to go into?

If even the supposedly exemplar firms—Disability Confident firms—are not doing that, I suspect an awful lot of disabled people will say that these programmes may or may not be effective. The fact that they are not engaging with them suggests that it may be a case of looking at those programmes and asking just how fit for purpose they are from the point of view of the support that they give to disabled people. Even if disabled people look at them and say, "They could be helpful in terms of the support they provide," if they do not feel that that will necessarily lead to work, because of problems of workplace accessibility, you will get a sense of disengagement.

James Taylor: The issue is that it is not tailored to the individual. When you have huge groups of disabled people who are economically inactive for one reason or another, some of that might be because they have had a really awful experience trying to find a job in a similar programme in the past. A blanket approach with a new programme will not work. You really need to go to the individual, understand where they want to get to in terms of their career and aspirations, and go from there, rather than have a one-size-fits-all employment support programme.

Dr Ceolta-Smith: Certainly within the long covid community, there are many people who have never experienced being out of work before, so in terms of awareness there is a need to market what is available, but we need to ensure that those programmes can meet the need. We have some very specialist smaller organisations that, unfortunately, are not part of the Work and Health programme. We gave the example of Astriid in our written evidence. Those specialist organisations should be easier for people to access, and should be part of the bigger programmes. They have a wealth of experience. Astriid, for example, has been working for five years with people with energy-limiting conditions. We need to maximise that knowledge base and ensure it is incorporated into the other programmes.

Jane Hunt: People have said that the Work programme and the Access to Work programme are the best-kept secrets, because nobody knows about them. I didn't know until about three weeks ago that there are some work programmes for everybody, not just people on benefits.

Q141 **Selaine Saxby:** That is very helpful. Let us move on. How effective is the support of Jobcentre Plus work coaches for disabled people, and how should the DWP reach disabled people who are economically inactive if they are not in contact with a work coach?

James Taylor: How effective is the support from work coaches and Jobcentre Plus staff? The honest answer we hear from many disabled

people is that it really depends on who the member of staff or job coach is. We have had disability employment advisers put into lots of jobcentres over the last couple of years, but Scope's own employment service team is hearing that some are now being withdrawn, and instead their knowledge is being passed on to generalists. That might work for some people, but if you have multiple conditions—perhaps even if you have long covid—it is really helpful to have a dedicated member of staff who understands your disability. There is an issue with people not necessarily understanding someone's condition and subsequently the barriers they might face to getting a job.

How can it be improved? It is really important for jobcentres and work coaches to understand which charities, organisations and groups are in their local area, and to connect with them, because they will have contact with people that jobcentres find it hard to reach.

Professor Hoque: I agree with all that. You hear that there is arguably too much focus on sanctions and ensuring that people are engaged in intensive job search activity, rather than a more supportive approach that looks at individual conditions and the sort of support people need. There is certainly some work to be done there, as James said, to look at how appropriate the support is on occasion.

There is also the ongoing sense of the relationship between disabled people and the disability community, and DWP and Jobcentre Plus. There is an ongoing problem in whether disabled people fully trust the service and what it is looking to achieve. Is it really looking to support them, rather than to sanction them or push them into jobs that are inappropriate for them? A lot of work has got to be done to rebuild those sorts of relationships, so that disabled people look at DWP, and Jobcentre Plus more broadly, as bodies that they feel are looking to support them rather than to sanction them.

Q142 **Selaine Saxby:** Is there anything you would like to add, Jane or Jenny?

Jane Hunt: One of the concerns that we have is that sometimes a job coach can still decide for the disabled person which job they take, and that job might not be suitable when they try it. They are then sanctioned because the placement was unsuccessful. It is not the fault of the disabled person. In these circumstances the job coach needs to look at their skills or ask what they like doing etc. They need to look at their background as well. We get people who want to work but they do not have the equipment and support at home to be able to do that. We had an example of somebody with a learning difficulty who wanted to work, but he couldn't get out of bed in the morning, so we suggested an alarm clock so that he could get out of bed and go to work. That resolved the whole problem. I think it is a holistic issue to look at why someone cannot get to work. They might have a carer or support worker who can't get there for 7 o'clock in the morning and they've got to be at work at 8, so you have to look at the whole picture.

Dr Ceolta-Smith: It must be incredibly challenging for work coaches to be supporting people with long covid. We have the role of the DEA as well, who can support the work coach. It is our understanding from people from the long covid community who have engaged with the jobcentre that there will be a real need for training and upskilling work coaches and DEAs around long covid.

Many of our symptoms are hidden and not visible, and the impact of activity that we engage in can lead to what is called post-exertion symptom exacerbation, so we may look okay when we are face to face with a work coach, but later we may not be.

That leads on to work coaches needing to understand and offer reasonable adjustments in terms of appointments for people with long covid. For example, we have already talked about work being at the right time and in the right place, and about flexibility. A work coach might send an appointment for 9 in the morning, which really is not going to be suitable for somebody. There are phone options—there are other ways.

We hear that accessing a work coach is particularly difficult for some people. If you are put in the support group, you don't have a way of accessing a work coach. You may be at a point where you are ready to start doing things around work or want some advice around that. We know that work coaches are not necessarily signposting people with long covid to the right forms of support, and we have not heard of any examples where a work coach will let someone know about PIP, for example. PIP is essential if people are to get back into work.

Work coaches play a pivotal role. People in health need to integrate more with the work coach and update databases of local provision within Jobcentre Plus for signposting. A recent study showed that work coaches have taken on a social dimension to their role. People are in crisis, so when they attend the jobcentre or speak to the jobcentre, there are urgent, pressing needs to do with housing, mental health, finances, food and all those sorts of things. A work coach is going to end up being caught in those things.

Crucial to all of this, as has been mentioned, is trust and confidence in the jobcentre. I have come across some very good and caring work coaches in my time. But we cannot escape or separate the harmful policies—the sanctions, the conditionality—that are really impacting people's lives. We have evidence of attending a jobcentre worsening people's mental ill health or causing mental ill health, and we have cases of suicidal ideation and, unfortunately, suicides.

Many people in the long covid community are very vulnerable and have been through a harrowing experience in their journey. Work coaches really need to understand that. I would really welcome the DWP meeting Long Covid Support, meeting people with lived experience, and helping to build some resources and training. Crucially, we know from the wealth of evidence beyond long covid that a key barrier to people returning to work is their health management. Work coaches are not healthcare

professionals. There has to be that true integration, and perhaps we will talk about that in terms of specialist support as well.

Q143 **Nigel Mills:** Can I just pick up on that point, Jenny, about integration between healthcare and the DWP? I suspect you are not advocating that there should be sharing of patient sickness information; we shouldn't have healthcare professionals telling the jobcentre who is fit for work and who is not, the symptoms they have and how long they could work for. That is done by a fit note, but there shouldn't be any more sharing of health information beyond that, should there?

Dr Ceolta-Smith: In terms of work coaches and the information they receive, historically there has been a huge number of problems. I actually worked alongside work coaches shortly before I got ill, in a proof-of-concept role. It is incredibly difficult for work coaches if somebody presents at the jobcentre and says they are suicidal, in terms of their duty of care and everything else.

We do know that there are huge problems with the work capability assessment, and we have submitted our evidence on health benefits. We know that work coaches are working with people who are waiting for their work capability assessment. For example, if someone is in receipt of universal credit and they haven't had the work capability assessment, a work coach is, in some cases, overriding the fit note and deeming them capable of doing things.

I do not think a work coach should be getting the medical records as such, but there needs to be a much better system. It is not fit for purpose at the moment in terms of health. We are aware that the Society of Occupational Medicine is involved in a pilot project, and we really feel that the DWP needs to attend or be part of the taskforce for long covid with the Society of Occupational Medicine to understand what the challenges and issues are.

There is a real role for health within employment support, but where is it best placed? We need employment adviser and work coach-type roles in the health system as well. For example, in the long covid clinic there should be a welfare adviser in a work coach-type role within that service, so that everyone is working within their scope of practice, but with the person's consent. It is up to them how much they want to share in terms of the medical side.

Q144 **Nigel Mills:** I have been on this Committee for a long time. We have looked at Access to Work several times, but things don't seem to have changed. Is there a way that we can pre-approve people for support?

One of the frustrations that we always saw was that you go for a work capability assessment and they say, "You are fit for work if you get these adaptations." But nobody ever gets those adaptations. It goes on forever. Would that be progress—that somebody says, "If you give me a job, I am entitled to this support," and that can be lined up pretty quickly and not take a long time? Is that a way of improving the process?

Professor Hoque: I am glad you have raised that. That is actually one of the asks of the Disability Employment Charter—for people to have indicative awards that they can take to an employer and say, "If you are to give me this job, this is what I will get." That will make it a lot clearer for the employer. They will take that person on with much greater certainty, knowing that if an application goes in, that application will be successful. Yes, I think there is a lot of scope for that.

Q145 **Nigel Mills:** Is there any more we could do to improve that process? It seems we have kicked it around so long, but in reality it never seems to get to the level it needs to.

Professor Hoque: The Access to Work process generally?

Nigel Mills: Yes.

Professor Hoque: One of the problems is the lack of visibility—the number of people who don't know. I do wonder if there are certain inflection points in people's lives and their careers where Access to Work information should be disseminated. School leavers, for example—why not tell all school leavers about Access to Work? For some of them, it will be completely irrelevant, but it may lodge with them the idea that it is there, it exists and it is something they may well need to draw on in the future.

Jane touched on some points on the bureaucracy surrounding Access to Work, which needs to be looked at. There is the passporting of Access to Work from one organisation to another. There is the shift from the disabled students' allowance to Access to Work as well. That needs to be made a lot more seamless, because people are getting entitlement to certain adjustments and so on through the disabled students' allowance that they are not then getting for Access to Work.

Then there is lifting the cap as well. The cap is prohibitive for people who require British Sign Language, for example—they are just not able to get that within the current cap. The Disability Employment Charter outlines all these things. A lot can be done to improve the scheme.

Jane Hunt: I think you also need to think about the continuity issue, because when people move from one job to the next and they have to have particular equipment or support, that support doesn't get followed up by the new employer and it might take six months to get that support. That is not something that a disabled person wants; they want the support to be in place from day one. One of the problems is that the employer sometimes pays a percentage of that equipment. That can be a barrier, because the previous employer, who paid for it, is going to say, "We want our money back for the portion that we paid." So there is a problem there as well.

Q146 **Nigel Mills:** Thank you. Jenny, it is a bit hard for people with long-term health conditions because there is no obvious adaptation or device or something that you could ask for. Is there more the Government could do to support people with conditions like long covid to get into work and to help employers feel they could take somebody on in that situation?

Dr Ceolta-Smith: It really comes down to the quality of the medical assessment. This is where I really think the Department needs to have conversations with, for example, the Society of Occupational Medicine and the Royal College of Occupational Therapists, because, unfortunately, we know that there are so many problems.

I highlight one example that we put in our evidence. Somebody who was quite unwell was found fit for work and the statement was, "This person is able to do 16 hours work a week sedentary." There is no way that person was able to do that. Also, we don't advocate going from zero hours to 16—when it comes to equipment and those sorts of things, it is too soon. It has to be individualised and to match the job requirements and demands. You cannot just say, "You need this." It is not that straightforward because that will depend on the nature of the work and the symptoms. If we can have access to healthcare, timely appointments and early intervention, some of our problems further down the road will not be as challenging.

There are areas where the Department can improve, but they need to start having conversations with experts who are really knowledgeable about long covid now—we are over two years down the line. More and more people like me will be out of work if we don't address these issues much more quickly.

Q147 **Nigel Mills:** Is self-employment a way forward? Should we be trying to give people more support to form their own businesses or is that a nice idea but not really very useful for the vast majority?

James Taylor: We have found that it is quite useful, actually. We have heard about quite a lot of push factors—whether attitudes in the workplace or poor support from a work coach who is pushing disabled people into self-employment—but there are also a number of pull factors. You can work your own hours and be your own boss. You don't necessarily have to travel to an office.

Over the last couple of years, we have seen an increase of 30% in the number of self-employed disabled people, which points to the fact that it is a positive option. At Scope, we have worked with an organisation called Unlimited to fund entrepreneurs and self-employed disabled people to get more disabled people into those positions—into setting up and running their own businesses. We have seen huge success with that.

Professor Hoque: I completely agree; there are both push and pull factors for disabled people where self-employment is concerned. Disabled people are more likely to be self-employed, proportionately, than non-disabled people currently. Research-wise, we do not actually know why—whether it is the push or pull factors driving things. Given that self-employment is often less secure and that you do not get all the employment protections, we need to be a bit careful about the idea of more disabled people going into that form of work if it is the only option available to them.

More could probably be done to give support. Access to work, for example, is available to somebody looking to set up a business; if you can demonstrate that you have a viable business plan, you get Access to Work support for 52 weeks. If that business is viable at 52 weeks, it will continue. If it is not, of course, the support is withdrawn and, from what I understand, you cannot apply for another 52 weeks.[1] That is potentially problematic and even potentially discriminatory.

Think about how many businesses out there are not able to sustain the entrepreneur after a year—businesses often need a lot longer to get up and running. People in the entrepreneurship world will tell us that entrepreneurs often need to engage in serial entrepreneurship, going through a number of different ventures that fail. They learn from each one and then find the one that actually works and makes a difference. If you have to wait 52 weeks to get your Access to Work support back again, that option will not be available to disabled people.

Jane Hunt: Can I come in there? We have been supporting disabled people in these circumstances for over 20 years now. We find that disabled people want to work to get some money, and they want to work from home and to have the flexibility to have control over their lives, which is important They also have the same issue as everyone else such as childcare, Kids in school, partners working flexibly etc. Quite a few of our clients build up their hours and money and lose their UC work allowance, which is very low—the work allowance is £373 a month if you also get housing benefit or £573 a month if you do not have housing benefit. There is a problem there.

The flexibility removes the barrier of getting to work. Some people cannot do a nine-to-five job. where you have a deadline, but I have had people email me at 3 o'clock in the morning. That is the benefit of being able to work when you want to, basically, with support when needed. Obviously, they have deadlines to meet. Again, the Access to Work scheme can be very useful, but it can be very bureaucratic. If you need transport and cannot use public transport, you need to claim for a taxi to take you to the client. The way that Access to Work works is that you have to get three quotes every time you use a taxi and then submit it to Access to Work, so there is a problem there. But some disabled people prefer being in entrepreneurship because they can control their lives.

Q148 **Chair:** Thank you very much. May I put a couple of follow-up points to you, James? On that last point about self-employment, the Department used to support it through the new enterprise allowance, but that has now ended. Is what you are doing in that area independent of the DWP, or should the DWP be providing additional support?

James Taylor: It is independent. We are investing in disabled people who are setting up—

[1] Comment includes outdated information regarding the Access to Work scheme. DWP ended the 52-week limit on receiving support from Access to Work in 2017.

Q149 **Chair:** Did you use the new enterprise allowance before?

James Taylor: No.

Q150 **Chair:** So that was not really relevant. My last point this morning: we have not heard much about the Work and Health programme. Does that have much of a profile among the people you are working with?

James Taylor: Among Scope's employment advisers it does; among the general population, probably not that much. We have heard of lots of piecemeal programmes, and the Committee has heard evidence over five or six years of how they are failing.

The gap is not changing or improving, but the size of the prize is that if you halve the employment gap, you bring back £17 billion to the Exchequer in a decrease in benefit payments and an increase in tax. There is huge opportunity there for DWP, the Government and No. 10 to put some momentum behind disability and employment in the same way as we saw with furlough or the Kickstart programme. We would see a huge difference. However, what we have is a programme over here, a programme over there and nothing really speaking to each other or being evaluated.

Q151 **Chair:** All a bit underpowered.

James Taylor: Yes.

Chair: Thank you. That concludes our questions. Thank you all for joining us, here in the Committee Room and virtually. You have given us helpful information for our inquiry. That concludes our meeting.