

Work and Pensions Committee

Oral evidence: Disability employment gap, HC 975

Wednesday 24 March 2021

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Members present: Stephen Timms (Chair); Debbie Abrahams; Shaun Bailey; Siobhan Baillie; Steve McCabe; Nigel Mills; Selaine Saxby; Dr Ben Spencer; Sir Desmond Swayne.

Questions 132 - 157

Witnesses

I: Lord Shinkwin, Chair, The Centre for Social Justice Disability Commission, Matthew Oakley, Director, WPI Economics, and Angela Matthews, Head of Policy and Research, Business Disability Forum.

II: Matthew Ainsworth, Assistant Director for Employment, Greater Manchester Combined Authority, Clare Gray, Organisational Lead for Disability Advocacy, Shaw Trust, and Huw Davies, Chief Executive, British Association for Supported Employment.

Written evidence from witnesses:

([DEG0163](#)) Business Disability Forum

([DEG0123](#)) Centre for Social Justice Disability Commission

([DEG0181](#)) Shaw Trust

([DEG0065](#)) British Association for Supported Employment



Examination of witnesses

Witnesses: Lord Shinkwin, Matthew Oakley and Angela Matthews.

Q132 **Chair:** A warm welcome to everybody to this meeting of the Work and Pensions Select Committee for our inquiry on the disability employment gap. I am particularly grateful to all the witnesses who have joined us this morning. First of all, I am going to ask each of the three witnesses for our first panel to tell us who they are, starting with Lord Shinkwin, please.

Lord Shinkwin: Thank you so much for inviting me, as Chair of the CSJ Disability Commission, to give evidence. I would like to thank you and the Committee for choosing such a timely moment to look at disability employment, with the impending publication of the Prime Minister's National Strategy for Disabled People. Now is the time and it is a perfect moment. Thank you.

Chair: Thank you very much for being with us.

Matthew Oakley: Good morning. I am Matthew Oakley and I am Director of WPI Economics.

Angela Matthews: Morning, everyone. I am Angela Matthews, Head of Policy and Research at Business Disability Forum. Thank you for inviting me.

Q133 **Chair:** Thank you for coming. I have the first question. What I would like to do first is ask each of you about data and targets because the Government used to have a target to halve the disability employment gap. The target now is to get 1 million more disabled people into work by 2027. Which target do you think is better? If we talk about the disability employment gap, do you think we should be looking at gap measures for different impairment groups or is it okay just to look at the overall disability employment gap? Do you think employers should be required to publish data on the number of disabled people they employ? Lord Shinkwin, could you start us off on that?

Lord Shinkwin: First of all, I think that having a 1 million figure is risking missing the point because it masks the problem. The number of people in work, certainly before the pandemic, was going up. We had record employment figures, so it is entirely logical that more disabled people should be in employment as a result. Indeed, I think previous witnesses to the inquiry have said that disability prevalence suggests that the gap itself has not closed nearly as much as the Government would claim.

If I may address two of your other questions, first, in terms of the impairment specific, yes, that is important, as is the raw figure. Then in your final question, you mentioned mandatory workforce reporting. That



is absolutely vital because, as we have seen with mandatory gender pay gap reporting, that has moved the conversation in the boardroom on. Indeed, I have heard from a global managing partner of a major law firm that, even though the composition of boards has not fundamentally changed yet, the conversation has. In fact, the Minister for Women and Equalities in the Lords told me in a written answer, in January 2020, that the Government were very pleased with the difference that mandatory gender pay gap reporting was making for women. The transparency and consistency that comes with workforce reporting is essential if we are to make measurable and tangible progress in closing or reducing the disability employment gap.

Matthew Oakley: Three very good questions there. I will try to be short. I very much agree with the previous witness that targeting a 1 million increase is nowhere near as good as halving the gap. I completely agree. To repeat the phrase, it is ultimately missing the point. What we hope to see in the next 10 years is all ships rise and that employment for all groups is rising. What we want to see most of all, though, is that the disadvantage that disabled people face and have faced in the labour market is closed. That means closing the gap. That means halving the gap at least—as the previous commitment was—and making sure that interventions are put in place for that to happen, so I am very strongly supportive of a measure that is focused on closing the gap, not just on increasing numbers.

On the second question around how to measure the gap itself, there is a clear need for more than one measure to look at different groups. If you just take two very basic examples, the Government publish the official statistics on this. I think the current gap stands at around 28 percentage points. That looks at all disabled people in the labour market compared to all people who do not report to have a disability.

If you look instead at those people who report to have a condition or impairment disability that limits the extent or type of work that they can undertake, the disability employment gap for that group suddenly rises by 11 percentage points compared to the previous group to around 39%. That is just one example of two quite different groups and how different the employment gap for them can be.

If you break that down further and look at different impairments and different sorts of conditions that people report, the differences can be much, much larger. For instance, if you look at it by different age groups, the disability employment gap for those between 55 and 64 who have a work-limiting condition is up near 46%. For those in that same age group—55 to 64—who have a mental health issue as their primary condition, the disability employment gap is 60%. There is a huge difference between that 60% and the 28 percentage points figure that the Government report.



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Looking at this in a much more granular way is very important. The data are available in a report we published recently with the Social Market Foundation, so there is no reason that we cannot look at that, track, monitor and seek to reduce those gaps over time in a much more focused and tailored way.

On the third question around reporting, obviously there is a strong precedent here for gender pay gap reporting. The one note of caution I would put forward is that this has to work for all businesses, not just large businesses. Changing conversations in the big boardrooms of the UK is very important, but also changing conversations and providing support, importantly, for those small businesses that employ the vast majority of people in the UK is equally important.

I would question whether disability employment reporting for those small businesses will really move the dial here and whether that is going to be an effective route to get the targeting and improvement in those businesses. What I would argue for those businesses is more support and more help from Government and others to make sure that they have the policies and the practice in place to support disabled people into the workforce. That would be much more appropriate. Yes, it is important for big firms, but there is a different approach needed for small firms.

Angela Matthews: On the first question I will be brief, because I agree with my previous two colleagues about having a measure that halves the gap instead of 1 million more people. I would completely agree with that.

On the second question, I follow what Matthew said and completely agree that more granular data are needed, looking at the different gaps that exist and looking at different conditions and impairments. If we want a more disability-inclusive labour market, we need to be measuring the journeys of people who are furthest from the labour market at the moment as well.

What I would add is not just numerical data but more longitudinal data that looks at: are we, as a society and as an economy, removing barriers to work? Why people are falling in and out of work, what causes that and how we make sure that we do not replicate those barriers that cause people to fall back out of work when making our policies about the economy and about work. As well as the numerical data, we need more longitudinal data that does look at disability as a whole but also different condition and impairment groups.

On your third question, Business Disability Forum is supportive in principle of mandatory workforce reporting. We think it is a good measure for transparency. Also a lot of the businesses we work with—we work with some 380 businesses—agree that measuring by number can be helpful. However, it is limited. A lot of our businesses, because they are public sector organisations, have been reporting for a long time. They have said, “Yes, we do it. We are happy to do it. It is a good measure for our business data needs.” However, it doesn’t really change things for



disabled employees. Some of the businesses we have spoken to have said, “What do you want us to spend our time on—further inclusion and making a better experience for disabled people, or do you want us to be reporting numbers?” A lot of our members agree, as do we, that both are needed.

What we cannot rely on is a measure of inclusion that just looks at a reported number when there are so many reasons why a lot of disabled people would not say to their employer that they have a disability. Some of those are not about feeling unsafe as a disabled employee; it can be about culture, religion and a lot of other things. In addition, we have seen at BDF that a lot of businesses have moved away from reporting by number and reporting by protected characteristic because they have noticed that their workforce do not identify as a protected characteristic, as worded in the Equality Act.

In addition to that, what we have seen is, when employers open up their workplace adjustments process to anyone who wants to work in a different way, their—for want of a better phrase—declaration levels of disabled people have gone down. They have a more inclusive workforce and people have everything they need, but the number of disabled people has fallen.

A lot of our members who have seen that in their workforce are saying, “Yes, we can report the number of disabled people in our workforce, but we are going to be judged by that on how inclusive an employer we are.” We are supportive of mandatory workforce reporting, but there is some detail to flesh out. The big thing is: what is the question that we measure disability by? That is less than straightforward.

Q134 Nigel Mills: I am sure we would all agree that the key to this is getting some proper support in place from DWP to get people into work and then help them sustain the work when we have them there. What are the panel’s views on how effective DWP has been on that in the past, and what we have learnt from what went well and what went less well when we try to design future schemes for this? Angela, do you want to start us off?

Angela Matthews: I am so sorry, could you repeat the question? I lost you for a little bit.

Nigel Mills: I was asking about what programmes DWP should have in place to support people into work and sustain them, and then what we have learnt from past experience about what worked and what worked less well.

Angela Matthews: Thank you; I just missed the beginning of what you said. At BDF we do not work with the supported employment programmes too much. One of the things that we are very interested in, with the support that DWP can provide, is around Access to Work. We



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would like to see Access to Work be brought in to work alongside job schemes in Jobcentres, so bringing Access to Work in a lot earlier.

With recent job schemes, such as the Kickstart scheme, there was a great opportunity for Access to Work to be linked up with providers before the candidate gets the job so that, before they are put on a placement, they already know that they have adjustments, the employer knows that adjustments can be made and will be provided by DWP and there is not this sort of recruitment process where no one knows yet—the employer or the employee—if they are going to have adjustments to make this placement work.

Nigel Mills: Thank you. Matthew, do you have any thoughts for us?

Matthew Oakley: A few, I am afraid. The first thing to say here is that, since the review of sanctions that I did for the Government in 2014, there has been a huge amount of progress—doing work within Jobcentres and looking at how they are treating people who come into a Jobcentre, for instance. There has been a huge amount of progress in terms of how they are treating people and the approach that they take. No longer is it the view of work coaches that conditionality is the only game in town and sanctions is the core thing that they want to use to get people to try to engage with work, whether they are disabled or not. What the approach now seems to be is treating everyone as vulnerable until they prove otherwise. That is a huge step change and is to be hugely welcomed. That comes right from the top of the Department—both ministerial teams and the senior civil servants. That is very encouraging.

That said, there are still huge problems in trying to deliver employment support for what is a very diverse group of people. Disabled people have a range of different qualities, attributes and opportunities in the labour market and a range of different challenges and barriers to gaining work. Trying to deliver that through an incredibly large national network of Jobcentre Pluses in a very tailored and effective way is a very significant challenge that I do not think we have cracked.

To provide some specific examples, work that the Social Security Advisory Committee published last year showed that Jobcentre Plus is still putting requirements on claimant commitments, requiring—this is requiring as a mandated action—people to attend GP appointments, to take prescribed medicines and to tackle the underlying health conditions that they are facing. My understanding is that it is neither what is advised to happen, nor is it probably legal. There are huge challenges of making sure that in such a large network everything is done as it should be.

Secondly, we have recently done some work speaking with disabled people about their experience of Jobcentre Plus, showing that a general feeling is that quite a lot of the support is too generic. It is not tailored to their needs and often is pushing them towards work that they suggest is unsuitable for them. One example is of a lady who was in a wheelchair who was asked whether she could do manual care work. I think her exact



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quote was, "I sometimes struggle to look after myself, let alone somebody else." There are some real challenges here, and this is not to point the finger at individual work coaches or individual Jobcentres. It is just saying that within a large system it is very difficult to produce the tailored support that we need.

I am not saying either that the support that was provided through, for instance, the Work Programme was perfect, but I do think in many cases it was better. A return to thinking about how we can commission much larger-scale, more intensive, more tailored and more practical support for disabled people to get back into work is a very important point. There are lessons to learn from that. There are a large number of views on that and I am not going to go into it now, but there are lessons we can learn from previous support programmes.

The one thing I want to add is that evidence shows—and the NAO has said as well—that it is very difficult to identify what is effective at helping large numbers of people back into work, particularly given that a lot of the disabled people on benefits right now have been out of the labour market for a very long time. What we need is a two-pronged strategy of supporting those disabled people who want to get back to work to get back into work, alongside a strategy that helps those people with the onset of a condition, impairment or disability to remain in work. Here there is a huge absence in what the state provides.

If you think about the support that somebody gets if they have the onset of a health condition, disability or impairment currently in work, they perhaps go on sick leave, they face the challenges they are facing and then it turns out they cannot return to work. That might be six months later. They then hit a Jobcentre and the benefit system. During that six to nine months they have spent no time engaging with work and no time engaging with support at all, and, once they hit the Jobcentre, the chances of them finding work are very slim.

My question is: why can we not do more up front? What support can the state provide to businesses and to people to make sure that they remain in work and can stay in work with the onset of those conditions, disabilities and health concerns, rather than waiting nine months until they end up in a Jobcentre and the chances of them getting back to work then are pretty slim? It is a two-pronged approach here. We are looking a bit at one of them but not really at all at the other.

Q135 Nigel Mills: Just to follow up on your first few points, Matthew, I think we are about to go back to a situation where we have a rather larger number of people out of work and needing support from the Jobcentres. Was the culture change that you have seen in the last seven years because the cohorts they were dealing with had those challenges and, therefore, they could not use the standard approach? If we end up with 1 million or more people needing to be pushed back into work, to a certain extent will they just go back to the old "sanction and threaten" approach because that is



what you can do at scale? Do you think they really do have a culture change of wanting to do things differently and that will survive the increased pressures of more numbers?

Matthew Oakley: I can only report on the people that we spoke to and the evidence we got. This was prior to the pandemic. Again, this is a quote straight from people: "They will regard everyone as vulnerable until they are told or proven otherwise." That is what people repeatedly said to us as a research team, so I can only go on that. Of course there are challenges with increasing the scale.

That comes back to the question of the extent to which you can meaningfully tailor support within a system that is trying to provide support to such a large number of people with such a low amount of time spent with each of those people. Speaking to Jobcentre staff, they do have significant challenges with identifying some of the challenges we are talking about and tailoring support in a meaningful way. That is why I think what we need is a different route where more tailored, targeted support is provided much more intensively to those people who need the greater support rather than relying on a system that, as you say, is more set up for tackling mass unemployment or getting a large number of people in and out of the door again, in crude terms.

Q136 **Nigel Mills:** Thank you. Kevin, you have made some suggestions in the past about supported employment services and supported internships as two models that you think have been successful. Can you just talk us through how those work and how many people have been helped by those?

Lord Shinkwin: Yes, of course. Thank you, Mr Mills. There is a real opportunity here coming out of the impending—as I mentioned earlier—publication of the Prime Minister's National Strategy for Disabled People to completely reset the dial. Supported internships should be a very important part of that conversation because, crucially, there is an opportunity to marry taxpayers' money and Government schemes with actual measurable outcomes that make a difference.

One of the key problems with some of the programmes that the DWP operates is that we do not have measurable outcomes; we have a real paucity of outcomes. Just as in the private sector we need to see an ROI, we need to see a return on investment. I am very lucky. I should declare an interest here: as well as being Chair of the CSJ Disability Commission, I am a trustee of DFN Project SEARCH and the DFN Foundation. It holds the licence for a very impressive scheme that was set up, Project SEARCH, in America. That has an outcome rate that is about 10 times that of Government schemes.

About 60% of its graduates—that is typically young disabled adults—pass its programme of intensive supported internships and then go on to a position that is full-time, minimum 16 hours a week and paid the prevailing work rate. Work is in an integrated setting and is non-



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seasonal. It is measurable, so we are talking about Government schemes of about a 5.6% success rate versus 60% for supported internships. I find that very encouraging and I hope the Government will look again at that.

Mr Mills, if I may touch very briefly on your broader question of: what are the lessons we can learn from the Government schemes? For example, if I look at Access to Work, it is a fantastic concept. It is making a real difference but there are problems with bureaucracy. Is it still fit for the modern workplace? Cyberattacks require security to be built into computer systems in the workplace, yet in many cases Access to Work is not adept at taking that into account and providing bespoke options for people if they are using, say, assistive technology.

You also have a cap on support of £60,700 a year and that is a problem with BSL users. Then you have a problem with passports and whether that is using the disabled students' allowance in the transition from higher education to employment or whether it is from one job to another.

If you look at Disability Confident, the key problem there is that the primary stakeholders—disabled people—do not have confidence in the scheme. I also think there is a major problem with awareness. For example, according to polling conducted by the commission that I am chairing, only 59% of private sector employers have even heard of it. The key issue that we are finding, and the Department for Work and Pensions' own survey in November 2018 exposed this, is that most of the companies who are already participating in the scheme said the biggest change they have made was promoting to their internal and external agencies—that is the PR angle—that they were signed up to the scheme.

However, there is light at the end of the tunnel. To his credit, the Prime Minister has nailed his colours to the mast when he says he wants his strategy to be the most ambitious and most transformative disability plan in a generation. I will not talk too much on this particular answer, but I would love to be able to share with the Committee some of the things that I hope that plan will include.

Q137 Sir Desmond Swayne: How well do employers understand their obligation to make reasonable adjustments, and how easy is it for them to get guidance and information on how to support their disabled employees? Should there be a one-stop shop?

Angela Matthews: Generally, we find with the businesses we work with that the idea—the concept—that you make reasonable adjustments for disabled people is generally understood. However, in terms of assessing what is reasonable, that is where knowledge seems to lack a little bit and also where confidence lacks a bit as well. Also, agreeing and coming to what reasonable adjustments might work is a collaborative conversation ideally between the employee and the employer.



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However, assessing what is reasonable is very much an employer's process. Aside from lack of knowledge around what is reasonable and the steps you go through to identify if an adjustment is reasonable, what we find also lets that process down, which starts off reasonably collaboratively, is what is communicated to the employee—"This is the process we go through to identify if what we have suggested is reasonable." That can sometimes be very hard for an employee to hear, that something they suggested is not reasonable. There definitely needs to be something more around identifying what is reasonable.

There have been suggestions about edifying the employment code of practice to that end. For the most part, what is reasonable generally comes from case law and relies on people, such as BDF, to interpret it for our membership and develop practical tools for our members to use. There are other organisations, such as Acas. There are things online that can be accessed for free, but bringing it together would be helpful.

Chair: Thank you. Any other brief comments from Matthew or from Kevin?

Lord Shinkwin: Sir Desmond asked a very good question. Two points that I would make further to what Angela has said is that of course this is an anticipatory duty, so it is not a case of, for example, Pret a Manger on Victoria Street¹. I appreciate I am coming at it from the perspective of a customer rather than an employee necessarily, but, even if it was an employee, to be able to get into an office should not involve the employer saying, "I'm going to make a change—I'm going to introduce an induction loop, and I'm going to make the office more wheelchair-accessible—only when I have a disabled employee."

There is a requirement in law—and it goes back to Angela's point about awareness—that there is a duty to anticipate the change. It also goes back also to her point about reasonableness, which does relate to cost. I was on the National Disability Council way back—the youngest member way back when the Disability Discrimination Act was introduced—where we looked at the cost and how that was related to the turnover, for example, of a firm. I do think that there is more that can be done. We touched on supported internships. They can help here because, if there is a job coach role, there is some very good advice that job coaches can share with employers to make sure that they understand what is required.

One of the recommendations that the CSJ Disability Commission made was that there should be the creation of a What Works centre. There is a constant battle on the awareness front to, as you say, Sir Desmond,

¹ Correction: Lord Shinkwin let us know immediately after the session that he had also meant to say "" which I can't get into in my wheelchair" following "Victoria Street".



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that they are up for it. They are backing the Prime Minister. You may have seen *The Sunday Times* front page article in its business section last Sunday. It is backing the Prime Minister's call for a truly ambitious, transformative strategy because it is very keen to do the right thing with regards to disability.

Q138 Sir Desmond Swayne: You have already passed some comment on Access to Work. What is your assessment of Disability Confident as measured against increasing the number of disabled people in work? Is it any good?

Lord Shinkwin: Thank you, Sir Desmond. I appreciate that question because it is such an important one. I have to be honest with you: no, it is not making a measurable impact. Even those employers who participate in the scheme told the DWP in November 2018—a survey that it conducted² by telephone—that they do not know how much of a difference it has made in terms of whether they have recruited an additional disabled person. There is a lot of warm mood music, which has its place, but in terms of measurable outcomes, that is one of the reasons why employers—but particularly disabled people—do not have confidence in Disability Confident.

Q139 Selaine Saxby: Good morning, everyone. The Government have announced their intention to publish a National Strategy for Disabled People. What would each of you like to see in that strategy as a priority and how effectively do you feel the Government have engaged with key stakeholders, including disabled people themselves, on its development?

Lord Shinkwin: Ms Saxby, I am very pleased you have asked that question. It is incredibly pertinent because now is the time that we need to be addressing these issues. I think the key issue is the issue that the Committee is focusing on today: employment.

We have a number of recommendations, both in the submission that we have made to the Committee and in the report that we published yesterday, "Now is the Time", that focus on employment. Mandatory workforce reporting would make a tremendous difference in enabling businesses to play on a level playing field.

It is so important, with the introduction of mandatory gender pay gap reporting, that what we have seen is that businesses are on a level playing field. They are able to say to bright young women graduates, "Come to us. Come and work with us because we promise you that we will use your talents and we will support you through career progression. We are the number one company."

² Clarification: Lord Shinkwin let us know immediately after the session that he had meant to say, "a survey that was conducted" instead of "a survey that it conducted".



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We want the same thing to happen on disability. We see that as a natural progression, but the other reason why it is so important is because unless and until more disabled people—particularly at senior management level—are leading the conversation, the conversation we are all having today will never change. That is mandatory employment and pay gap reporting.

I have mentioned supported internships. I particularly emphasise the outcome focus. That is very important. Then on procurement, we are talking about something like £292 billion for Government procurement. That is a tremendous opportunity to drive the agenda for change. Then of course we are making recommendations on reforming Disability Confident and Access to Work, as I have already touched on.

On your final point about Government engagement with disabled people, I am sorry to say, but, as a Conservative parliamentarian, I am mortified by the way that the DWP in particular treats disabled people—who after all are its main stakeholder—with such palpable disrespect. At the moment the PM deserves credit. He has nailed his colours to the mast with his promise of this truly ambitious transformative strategy, and disabled people are pinning their hopes on it, but the DWP is handling its engagement with disabled people badly. You have an online survey that seems to have been created to offend. It has very offensive questions in it, including one about: would you ever consider having a relationship with a disabled person?

Tomorrow we have the closing date for a literature review on the lived experience of disabled people. It is closing, unbelievably, and the literature review is not due to end until late October, yet the Cabinet Office, in its tender advertisement, is saying that it is meant to inform the strategy. It is completely back to front. My question is: how on earth is that meant to instil the confidence of disabled people? My concern is that with such an approach, the PM's strategy is not going to land well. That is so unfair on both the PM and disabled people.

Selaine Saxby: Thank you. Angela or Matthew, did you want to come in?

Angela Matthews: I will begin by thanking Lord Shinkwin for his words on behalf of disabled people. I agree with his words on the consultation and share his sadness and disappointment on behalf of the businesses as well, who would not advocate some of the questions such as the relationship question asked in the survey.

The other thing that BDF and the businesses we work with are quite disappointed with is the name of the strategy. This is not a strategy for disabled people. This is a strategy for an inclusive society. This is for everyone. If we are serious about us, the UK, being an inclusive society, everyone has a stake in this strategy.

Following Lord Shinkwin's point about consultation, as a business-facing organisation, we have been quite saddened by the lack of consultation



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with businesses. Some of the things we expected to see in the strategy very much depend upon businesses delivering. For example, as Lord Shinkwin has said, public services, procurement and a large number of our private sector organisations will be delivering those contracts and they have not been consulted with. We are a little bit disappointed with that. We are still consulting with our members about the strategy, and we are passing that insight on to the Disability Unit.

To respond to your question about what we would like to see in it, I will not repeat the things where we agree with Lord Shinkwin. I would second what he said about procurement. Furthering that, we would like to see an inclusive design of products, services, procurement and job design. By inclusion design, I mean a commitment to up-front equality analysis that includes disabled people in the design, delivery and review of products, services, contracts and job design. We have already spoken about data. Maturing the type of data we have on disabled people and their lives is key. We have spoken about that, so I will not dwell on that now.

There are other two key things we would like to see. The first is a commitment to inclusive communications from across the Government. We have had a pandemic, where disabled people have been left behind in many ways, not least in terms of getting accessible information and getting crucial information to them in a way that they can use and understand. We would like to see a long-term financially sustainable plan for social care. It is no longer the case that social care and employment are two mutually exclusive settings. They are not. As we rightly become a more inclusive society, people who rely on social care can and do have a place in the labour market, so our economy is depending on getting social care right as well.

Selaine Saxby: Thank you. Matthew, did you have anything you wanted to add?

Matthew Oakley: Yes. The big thing that is missing in this space is a vision. That sounds like a very silly thing to say, but it is someone setting out what it is we want to achieve and defining it with disabled people. What is it we want the Department for Work and Pensions to deliver for and with disabled people? What do we want the outcomes to be? We talked a bit about that earlier around halving the disability employment gap, but what else do we want to see? Where do we see the world in 2035 and how will that be different from today?

Until we agree and set that out as a society, as we were just talking about, working with disabled people, hearing their voices and deciding as a society as a whole what it is we want to achieve, we have no chance of getting there. First and foremost, I would like the strategy to start to outline a clear vision for what it is the Government right now think we want to achieve by 2035.

One of the things within that is then saying, "How do we want to achieve it?" Here we can learn an awful lot and fairly straightforwardly from what



is happening in Scotland. If you look at what it does on benefits, everything they talk to claimants about and every communication that is sent to claimants has three words on it: "Dignity, fairness and respect". A similar approach here in England could provide a very strong signal that that is what is expected of all communications with claimants, whether they are disabled or not. That is a very strong starting point for redesigning and rethinking the system and achieving the vision.

There is one part of that vision and plan for the future that is absolutely essential, and that is poverty. The Social Metrics Commission has shown that half of all people in poverty in the UK are either disabled themselves or live in a family that includes a disabled person. That cannot be right. It cannot be right in society today that we are allowing that to happen. Tackling that issue and reducing poverty among disabled people and their families is fundamentally a huge priority in taking that forward.

That is going to take action across a whole range of different areas. For this Committee, there are obviously issues around employment, which we are talking about today. There are three key areas where I would like to see progress, both in the strategy itself and in the upcoming Green Paper from the Department for Work and Pensions. First, as I mentioned earlier, this is not just about getting disabled people back into work. That is not the only way of tackling the disability employment gap. It is about maintaining employment in the first place.

As I highlighted, the state has nothing to say on that in the first six to nine months of someone experiencing a health condition or a problem that means they might have to leave work. That is a huge gap in our arsenal in terms of how we can support people to stay in work, maintain work and not fall into poverty because they have to leave work. Maintenance of employment is incredibly important. We have talked about returning to employment, which is equally important.

Finally, obviously this is not the issue for today, as this is about employment, but we should also not forget that not everyone is able to or can work at the moment or in the future. We cannot forget that that is the case. 42% of people currently relying on disability benefits are in poverty. Is that right? Is it right that as a society we have said for a large proportion of that group, "We don't expect you to work in return for your benefits, but we are going to provide benefits that mean you and your family are living in poverty"?

I would argue that that is not right at all and that taking action to tackle that and ensuring that where people are not expected to work, they are not living a life in poverty is a fundamental priority that we should be taking forward. Obviously it is less relevant for today's inquiry and the conversation today, but I just wanted to make sure we are not forgetting that work is not always the answer. Work is not always something we should be taking forward, and we need to protect those people.

Q140 **Selaine Saxby:** Thank you for that. Building on the point that you



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finished on, Matthew, which Government Department do you think should be leading on disability employment? At present the DWP has the Work and Health Unit, which spans the DWP and the Department of Health, plus there is the Disability Unit in the Cabinet Office. Where should it sit and how is what is currently in place happening?

Matthew Oakley: I am not a big fan of shuffling chairs on the cruise ship. I am not sure that, with the right targets and the right vision, it matters too much where this sits. By changing responsibilities, you are probably just going to move the same civil servant into a different building in Whitehall and do that in a way that probably costs quite a lot of money and does not have much impact.

The starting point is setting out a vision, setting out targets that that vision needs to achieve and then setting out the policy drivers and policy levers that need to be taken forward. With that kind of clarity, you would hope that then people could work together to deliver that. Of course that is a challenge, but it is the accountability that matters. It is being able to hold Government overall to account in delivering what they say they are going to achieve and having metrics and measures that are in place that allow us to understand and track progress. With that, I am not quite sure whether they are sat in Caxton House or in different parts of Whitehall matters that much. What matters is setting out what it is we want to achieve and holding people to account for delivering that.

Selaine Saxby: Thank you. Angela, did you have anything you would like to add?

Angela Matthews: I would agree with Matthew. I agree that, with the right policy ambitions, it should not matter too much. However, I think the policies in individual Departments all matter to make disability inclusion a success in England. BEIS, DWP, the Department of Health and Social Care and Education all have a very important stake in this. It would be good to see the Disability Unit—my understanding is this is its role—co-ordinate movement together. One of the things that has been difficult is each Department has moved at a different pace on sometimes similar things and they are not joined up. If the Disability Unit could have a role in bringing that together and overseeing, that would be ideal.

To your point on the Work and Health Unit, we have advocated its work. The consultation that it published, "Health is Everyone's Business", was welcomed by the employers we work with. They were impressed that it was asking the right questions. There were some recommendations that we put in to think about, but on the whole it was very welcomed. They felt it was a unit that was asking the right questions and understood the challenges. The way the Work and Health Unit has worked with us has been quite impressive. BDF and our members are looking forward to the outcome of the "Health is Everyone's Business" consultation because it touched the right notes for us.



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As I said, if the Disability Unit could bring together, oversee, co-ordinate and make sure everyone is moving at the same time on very important things, that would be great. Other than that, I agree with Matthew. If the policy visions are there, it should not matter too much where it sits.

Selaine Saxby: Thank you. Lord Shinkwin, did you have anything you would like to add?

Lord Shinkwin: Yes, very quickly, if I may. I totally agree that the vision is absolutely imperative. Sadly, as I mentioned earlier, the PM's strategy is not going to land well if it is entrusted to the Department for Work and Pensions to take forward. In fact, it will be as good as dead on arrival because not only does the DWP insult its primary stakeholders—disabled people—in many of its communications but, to go back to Angela's point, the culture is very much about doing things for disabled people rather than with them.

Obviously, I cannot presume to and I would not tell the PM what to do in his forthcoming reshuffle, but if he wants his strategy to land well—as I think it deserves to, and I hope it will—he probably does need to look at the ministerial personnel, not move the deck chairs for the sake of it, to pick up Matthew's point. I do not think his strategy will land well if the current incumbent, as the Minister for Disabled People, is in the post. There needs to be a reset, both on the mechanics but also in terms of the relationship.

The final point I would totally agree with you and others on is that I think you are implying this needs to be driven from a strategic perspective. That is best done at the heart of Government, rather than sat in, for example, DWP. I also think there is a very important role to be played here by business. The business-facing Departments, in particular BEIS, need to be leading that conversation in a very positive way, rather than, "How can we use you as a fig leaf for inaction?" which is what the DWP does at the moment.

Matthew Oakley: Can I just add one thing, very quickly?

Chair: Very quickly, if you would.

Matthew Oakley: I think we have forgotten here that not all policy is made in Whitehall and that there are some very strong regional subnational Governments. There are some great things going on in combined authorities, for instance, and making sure that we are recognising that and giving them the right powers is very important too. The key thing we can do here is try to do some of the reporting on the disability employment gap, for instance, at that subnational level so that we can start to put some of the accountability on those elected leaders as well as the elected leaders sat in Whitehall.

Chair: Thank you very much. There are two members of the Committee who would like to put some points to you. Can I ask you to make your answers quite succinct, if you can, because we are running a little bit



behind? Steve McCabe first.

Q141 **Steve McCabe:** Thank you and good morning. How effectively does DWP work with local partners, and what would be the benefit of commissioning employment support schemes locally rather than nationally?

Matthew Oakley: That is probably quite a good thing to do. I know that has already been done in London; it has already been done in Greater Manchester. I would advocate for more of that to happen and for that to happen probably with more say over the actual design of the policy and the design of the programme in question.

Again, the clear point here is that, as long as you are backing that up with clear measures so you can see what is working, that is the key thing. What we do not want is passing down powers to, for instance, combined authorities, where we are not clear about how we can compare the outcomes across those different areas, and making sure that we have that accountability framework is very important, but overall some of those areas are closer to the businesses they need to work with. They are working with the Local Enterprise Partnerships. That kind of approach can be very powerful in making sure that the business community that Angela talks about can be really involved in this agenda going forward. I think that is a very strong idea in the future.

Angela Matthews: Very briefly, I would agree with what was just said. Although we don't focus on supporting employment schemes too much, a lot of our businesses that we work with, who have engaged with the supported employment schemes or a local scheme with the Jobcentre, have said that local level works better for them. The end users—disabled people—who they have worked with have said the same.

One of the reasons for that has been that when something is done locally, for example, the Jobcentre and local authority already has connections with a lot of local groups. They understand the local issues, whether that is about transport, culture or poverty, and those local sort of pressures were identified as being something that was very important to feed into the design and delivery of a scheme or programme.

Lord Shinkwin: Very briefly—just agreeing with what has already been said—consistency and transparency in measurement, particularly of outcomes, is crucial but, yes, in principle working with partners locally is a very good thing. I also think that this relates to the idea of a What Works centre. This could be one of the first things that a What Works centre based in the Cabinet Office could look at: what are the examples of best practice that we can draw on, particularly in terms of, for example, incentivising local chambers of commerce to engage with us?

Q142 **Debbie Abrahams:** My question was specifically to Matthew about his "Time to think again" report but, to be fair, you probably answered all the questions that we wanted to put to you on that. I congratulate you particularly on the language that you use about kindness being central to



how we should be hoping that our social security works in the future.

I want to ask all of you specifically on points around the disability strategy. None of you have mentioned the UN Convention on the Rights of Persons with Disabilities, as it is referred to. Surely that provides the vision that we need—the fact that we need a social model of disability—and we should be applying that. Do you want to comment on that? Given that six out of 10 Covid deaths were disabled people and there is an additional risk, regardless of age, what do you think we should be doing about that in the context of the strategy?

Matthew Oakley: Very big questions there. I am not going to go into the UN convention. A vision needs to be much more specific about what it is this Government want to do. For instance, my thought here is on what they are going to do about poverty. A vision could be that by 2035 no disabled person relying on benefits is in poverty. That is the kind of level of vision that we need across a whole range of areas that we have talked about today.

We have seen the impact of Covid, in terms of health, mortality, social and economic, hit hardest on those who are least able to shoulder the burden. That is true in terms of deprivation, place and specific groups of people, and of course disabled people have been one of those groups.

Q143 **Debbie Abrahams:** There is an additional risk, Matthew. It is independent. You can adjust for all of those factors, including age and underlying conditions, and there is still an additional risk. That has not been recognised.

Matthew Oakley: Just to echo the point that it is something that needs to be addressed and we need to think about going forward. I do not know what the answer is, but, again, with all of these things it is about working with disabled people, hearing their voices and taking that forward in a way that means we can co-design policy and the vision for the future to make sure it does not happen again.

Debbie Abrahams: Thank you. Any final points, Angela or Lord Shinkwin, very briefly?

Lord Shinkwin: Angela, do you want to go first?

Angela Matthews: Thank you, Lord Shinkwin. I will be very brief. Thank you for the observation that six out of 10 deaths have been disabled people. The Government have been quite silent on that, particularly the Disability Unit. We have been looking for, if not the answer, the recognition for that. It is worth saying that the silence around that, given the impending strategy, was noticed and it would be ideal to address that somehow. As Matthew said, I am afraid I do not have the answer right now, but just recognising it is very important, given the strategy is coming out.



I agree with you about the UN convention. It is a question that BDF, the organisations and the Disability Charities Consortium put to the Disability Unit. Where does the strategy sit with the UN convention? The Government and disability policy are often quite silent about the convention. It goes back to our discussion about vision: how can we live the convention through the strategy that we want to be a success?

Debbie Abrahams: Lord Shinkwin, do you have any final quick remarks?

Lord Shinkwin: This is such an important question because we only have one shot at this. We have to get it right. The PM has said that not only will his strategy be the most ambitious transformative disability plan, but it is going to be a once in a generation plan. We really have to get this right. I am very encouraged, just listening to Angela, that business is backing the PM. That is why now is the time—and you are absolutely right to mention the social model—that we deepen that engagement with disabled people. It is why I think now is the time for a complete reset of that conversation. Thank you very much.

Chair: Thank you, Debbie, and thank you all very much. That concludes the questions we wanted to raise with you. Thank you very much, all of you, for your very helpful answers, which are going to be very useful for the Committee as we pursue our inquiry. Thank you all for the contribution you have made.

Examination of witnesses

Witnesses: Matthew Ainsworth, Clare Gray and Huw Davies.

Q144 **Chair:** Now I welcome our second panel, who I think were listening in for the conversations we have just been having. Thank you all very much for joining us. Can I ask each of the four of you to, in one sentence, tell us who you are, starting with Clare Gray?

Clare Gray: Hello. Thank you, Chair. My name is Clare Gray. I am the Organisational Lead for Disability Advocacy and Accessibility at the Shaw Trust Group.

Chair: Thank you very much. Sorry, it is not four, it is three. Apologies, I got that wrong. Secondly, Matthew Ainsworth.

Matthew Ainsworth: Good morning. I am Matthew Ainsworth. I am the Assistant Director for Employment at Greater Manchester Combined Authority.

Huw Davies: Good morning. I am Huw Davies, Chief Executive of the British Association for Supported Employment.

Q145 **Chair:** Thank you all very much. As you were hearing, it has been suggested to us that local commissioning of employment support for disabled people would work better than national commissioning. Can I



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ask each of you what your view is about this and on what grounds? Perhaps I ought to start with Matthew, since you are doing local commissioning already. Do you think it works better?

Matthew Ainsworth: It is a complicated question to answer but I will try my best to be as succinct and clear as possible. I have been a commissioner of services and support for people with health conditions and disabilities for seven years now in Greater Manchester. That started from a recognition that Jobcentre Plus can be effective at supporting those closer to work, but, as the previous panel said, it is not really geared up to adequately support those with more complex needs. When we looked at the more specialist support that DWP had commissioned—this is going back seven years ago, looking specifically at the Work Programme—there were a number of failures within that and, in particular, it failed significant numbers of people with health conditions and disabilities.

That was our starting point, about what could we do differently locally that could improve those outcomes. The approach that we have taken is around personalisation and intensive support and looking broader than just employment, so work, health, housing, skills—all those things—to create a more personalised package and moving away from a black box approach to one that is grey box, a kind of suite of minimum service standards that we can use to manage the quality of support. To be fair, our first endeavour in this space—the Working Well pilot in 2014 to 2016—was extremely successful in that regard. It was twice as successful as the Work Programme in outcomes for people with long-term health conditions, particularly ex-incapacity benefit customers.

What I am pleased to say, though, is that DWP has worked collaboratively with us on our programme. Many of the things that we put in place at the outset for Working Well, which is the brand name for our suite of programmes, have been incorporated within the Work and Health Programme nationally. Some elements have been and some elements have not been. On the Work and Health Programme, the current employment outcomes for the Greater Manchester programme are very similar to the national one at this moment in time. It is difficult to look at that without thinking about the context that we are currently living in and the fact that Greater Manchester is the third most deprived area nationally.

There are some key points of difference that I want to quickly focus on. There is a significantly greater focus in Greater Manchester on quality of work, not just any work. Our outcomes are around real living wage as opposed to the national living wage. We put a huge emphasis on success that is broader than just employment. The programmes that we deliver are also monitoring whether people's management of their health condition, their debts, their finances and their family lifestyles is improved or not through the integrated support that is on offer. There are



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some fantastic results in those areas—that kind of journey into work—that are not in place for the national programme.

The other point I want to make is the significant amount of additional funding that can go into programmes when commissioned at a local level. The Greater Manchester Work and Health Programme would be closing its door now were we just using DWP funding. Instead, we are running for a further two years because we have been able to lever local funding into that programme to increase the numbers of people that we can support. We are targeting that specifically at those with health conditions and disabilities and not so much on long-term unemployed. My answer is, yes, I think local can deliver a better service. Can we say it absolutely delivers better employment outcomes? I think the jury is still out on that one.

Q146 Chair: Clare, I think you have been commissioned in national programmes and locally commissioned programmes. What is your view on the relative merits of local as opposed to national commissioning?

Clare Gray: We are one of the biggest providers of the Work and Health Programme, for example. There are pros and cons to national and local provision. Local programmes can plug the gaps often not provided by national programmes, because they can be much more tailored and flexible to the person's need. As has been mentioned before, they can bring together more services on a very localised level, bringing in skills and qualities that the person needs in terms of support around housing and benefits and other additional needs that that person might have.

While we are a national provider, our key principle of the Work and Health Programme is that it is grounded in localism and provides support tailored to the individual. We use the individualised placement support approach, which is tailored to meet people's needs. It did start out as a programme that was focused on people with moderate or severe mental health conditions, but now, through one of our pilot schemes, which is the High Five programme in Birmingham, we are looking at that broader approach to support people who identify as disabled, so not just focused on people with mental health conditions.

While there are benefits to localised provision, there are also drawbacks. There is the scale and capacity, and I feel that national programmes like the Work and Health Programme do work for certain people with certain disabilities and certain health conditions. For example, 86% of people on the programme report having one or more health conditions. Some people need just a light-touch approach to support them with the barriers that they might experience to getting into work, such as job searching, CV, interview skills, application skills and setting and achieving goals. I do not think it has to be either/or. The two approaches would be beneficial for disabled people and people with health conditions going forward and hopefully trying to reduce this gap that has remained the same for many years.



Huw Davies: I would just start by saying that most of our 200-odd member organisations are generally supporting people with learning disabilities or autism or long-term mental health needs, so my comments are largely around that group. For those cohorts, I do not think the national programmes have worked at all. If you look currently at the Work and Health Programme, we have 32% of people starting and getting their first pay cheque within 12 months. We only have 15% who are still working six months later. My fear with national programmes is that it is about dropping people into jobs and then moving on to the next person.

The difference you get with a local approach is that continuity of support. One of the points that was raised earlier was about retention and employers' need for ongoing support. That is what local programmes can provide. The irony is that probably the most successful disability programme, or the makings of one, was back with WorkStep, which ended in 2010. That engaged with very many local authorities using national funding and it allowed the local authorities to harness partnerships across health and education to feed people through into that programme. We also had inspection with that programme, which gave some assurance to employers about the quality they could expect from providers. It was geared around providing that longer-term ongoing support, which we know is critical for employers.

There are many people with disabilities who are getting a job and dropping out of work in the first six months. I was speaking to a bank earlier this week, which was seeking support through Access to Work to retain two staff who have come through a programme. They are really struggling to navigate the whole system.

There are a lot of things that could be done more effectively, particularly for those people who need more intensive and personalised support at a local level.

Q147 **Debbie Abrahams:** Good morning, everyone. You have probably answered most of my question. Stephen was asking about commissioning and my question was specifically on delivery, but in your very comprehensive responses you have answered that.

Can I then dig a bit deeper? In terms of all the positive things that you have been saying about local delivery on personalisation and addressing local needs—we know that in the early days of black box commissioning, local providers were included as “bid candy” but they were never usually used—how can we make sure that the good from the local delivery is incorporated into this without the variance or postcode lottery that we might have? Is there a role similar to the NHS, where we have standards through NICE guidelines on effective delivery, that we need for employment support as well, with local provision being around local deliverers and local providers?



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Huw Davies: I think that employers are crying out for some sort of assurance about the quality they can expect. If they are going to work locally with very many organisations, they need to know what they are getting into. We owe some sort of quality assurance standard to providers. We have model fidelity assessments and scales across IPS services and places introducing a kite mark for local supported employment services.

It is not just about service standards. It is about workforce development. Lord Shinkwin was talking about how good supported internship programmes are, but they vary enormously from some that are delivering 90%-odd job outcomes and sustaining them, through to others that are hardly getting any jobs. That is because the college is turning around to its learning support assistants and saying, "You are a job coach next week." We need to professionalise the sector. At the moment, we do not have any strategy around making sure that people are properly professionally qualified and held to account for the quality of their work.

Debbie Abrahams: Very good points, thank you very much. Who wants to go next?

Matthew Ainsworth: I will come in. The current commissioning of large-scale programmes like the Work and Health Programme does preclude many quality small organisations from being part of that process, partly because of the way that commissioning has happened around such a large geography. It is quite difficult for providers just to engage with them. Also, to be fair, some of the approach to and focus on price rather than quality can preclude some.

There also needs to be a recognition that especially over the past 10 years many of the quality local organisations that were in place to provide support are no longer there or, if they are, they are significantly reduced. There is a significant piece of work to do around capacity building and putting investment back in.

If I give a practical example, Huw has worked with us in Greater Manchester on developing a Working Well specialist employment service, which is specifically for people with learning disabilities and long-term health conditions and autism. The reality is that five or six years ago many of the local authorities in Greater Manchester had supported employment services that they delivered. Most of those have now gone because of the social care cuts. There is a lot of work for us to do to rebuild that infrastructure if we are going to ensure that there is quality in it. There are both quality standards and the investment in capacity building of providers.

Clare Gray: At Shaw Trust we received excellent standards assessment by Merlin in the management of our supply chain, but I also recognise that there have been calls for improvements to be made in terms of that assessment and a review to be made of those quality measures. I completely appreciate that. Continuous improvement is what we would



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seek as a national provider, so we totally support that call and that recommendation.

As I said before, it is very true to say that it should not be an either/or approach. It has to be a combined approach and what is best for that individual person. Some people do need that intensive support and others do not. It is really important for a person to be able to move and have that flexibility to move between those programmes, whether that be a national programme or a localised programme.

It is about what good work looks like for that individual. It is not about getting a job. We focus far too much on job entries and getting a person into work, and it is about sustainability. More people fall out of work than go into work, so while job entries are very good, the amount of people who fall out of work is not good. It is about supporting employers to understand the importance of retention, and that is why in-work support is so critical, making sure that that is long term within the Work and Health Programme.

It is about six months that we can provide in-work support, and when you look at the average time that it takes for a person to get reasonable adjustment, from research, it is three months. That is not much time at all to enable that person to sustain their employment when it takes that long to get them what they need to be at the production levels of everybody else.

Debbie Abrahams: Lovely, thank you so much, Clare.

Chair: Thank you, Debbie. Siobhan Baillie.

Siobhan Baillie: Chair, I think that the panel has already answered my question. It was mainly about commissioning and what can be improved with examples. They have kindly already dealt with that.

Chair: Thank you, everybody, for pre-empting our questions. We come then to Nigel Mills.

Q148 **Nigel Mills:** On a similar theme, I was going to ask about DWP's support programmes, the Work and Health Programme and previous versions of that, to see whether the panel had any views on what works best if we end up commissioning a wide-scale employment support programme and perhaps what lessons we should learn from what did not work last time or previous times we have tried this.

Matthew Ainsworth: I have mentioned some of it in terms of how the Working Well programme has evolved over time. DWP has learnt some lessons from that because we worked closely with the commissioning teams on it in terms of personalisation, bringing in minimum service delivery standards and so on.

There are some areas where there is still significant room for improvement, and this is something that the previous panel touched upon as well. One of those is how service users—people with disabilities



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in this instance—are involved in the shaping of policy and the commissioning process. We have put a lot of emphasis on that in Greater Manchester where we have had devolved programmes. The Work and Health Programme has been decentralised, so most of it has been set by Government.

There are other programmes that we have run under the Working Well banner, particularly around ill health and for people with learning disabilities and autism, where we have been able to change the way that we procure. Building service users—people with lived experience—into that process is something that DWP could do more of. Similarly, the voice of work coaches and disability employment advisers is something that DWP could do more on.

For me, there are a couple of things. Large-scale programmes operating with relative uniformity across large areas are pretty good where we know what works and there is a relatively clear set of actions required, which are the same everywhere. Where DWP can work better with local areas in terms of its commissioning is more specialist support. How can we ensure that there is an ability to bring in those smaller providers and to develop programmes that genuinely meet the needs of individuals as opposed to trying to meet the needs of everybody? That is where we could have a lot more smaller commissions with the ability, as Clare said, to step on, step off, and move between programmes.

At the minute, the approach is really rigid. Once you are on a programme, that is it—you are on that programme until you complete. Often that means that you cannot go on other things at the same time. To give you a practical example, there are people currently being supported in our Work and Health Programme in Greater Manchester who would absolutely be perfect for a Kickstart job, but at the moment they are not allowed to. They would need to leave the Work and Health Programme, go back to Jobcentre Plus and then go on to the Kickstart scheme, which is just ludicrous.

There is something about how we genuinely ensure that the customer is at the heart of this and not the programme. That is the shift that we need to smaller, more responsive programmes where people can step up, step down, step on and step off.

Q149 **Nigel Mills:** That makes sense. Have you thought through what might happen in—*[Inaudible.]* We may end up with those closest to work being prioritised and this agenda gets set back until we have the economy into a more normal position.

Matthew Ainsworth: You broke up a little bit there for me, but if I understood the question correctly, prior to Covid and the economic fallout of Covid there were already significant labour market inequalities in place, particularly for people with long-term health conditions and disabilities. There is a real concern that those inequalities that existed prior to 2020 will be exacerbated. If anything, DWP quite rightly needs to



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hunker down and provide support to deal with unemployment. That also means that we need to redouble our efforts in terms of supporting those people who are furthest away.

I would like to have seen more longer-term funding being made available, whether it is through community renewal funds or the Shared Prosperity Fund, to put some at-scale, large-volume programmes in place. Certainly, it is a significant investment. At the moment, it is not clear what that is, so a real concern I have is that the Work and Health Programme and Restart are seen as the answers. They may do something to reduce some of the inequalities spreading even further, but we need to have some dedicated support, whether it is around supported employment, increased investment in IPS or more disability support services here and now. That is the concern. I am not quite sure where the Department is on that.

Nigel Mills: Thank you. Clare, any thoughts on this topic?

Clare Gray: I would totally support what Matt has just said. Dialogue with providers and commissioners about the design of programmes going forward is so important, bringing disabled people and that lived experience into the front and centre of those conversations.

Historically, disabled people are consulted initially but then that is as far as it goes. You need those personal insights into the programmes about where they are working well and where they are not working so well. The programmes are great in isolation, but most of the time it is the administration of the programmes that falls down. It is the same with Access to Work. It is a fantastic scheme—what it says is what it does—but when you try to access it as a disabled person once you have that employment opportunity, it is extremely challenging and can end up making people fall out of work. You have to get those insights from disabled people, both about the programmes and about the support provisions that are available there, too.

Nigel Mills: Thank you. Huw, any comments on this?

Huw Davies: It may be a slight tangent, but I think it is very admirable that DWP came out a number of years ago and said, “We are not quite sure what works” and asked for ideas and evidence around effective support. It is still incredibly frustrating.

Supported employment has been delivered in the UK for 40 years now. We have never had national funding for it. It has always been funded locally. It is not statutory. It is under threat. Services are being cut, as Matthew said. Government does not seem able to invest in supported employment, including IPS. It is very welcome that IPS is coming out now, but it has never put any research into it. This comes back to Matthew’s point about vision. It just makes me wonder how much they actually believe that people with learning disabilities and autism have a part to play in the economy and can work.



I find it difficult when people are always referred as furthest from the labour market and the hardest to help. They are not. They are calling out saying they want to work, they want a job. They just need appropriate local support that they can trust. The hardest to help are people on Jobseeker's Allowance or Universal Credit who have absolutely no interest in working. I would find it very difficult to get somebody a job who does not want to work. What we are talking about here is a group of people who really want to work, and it is upon a Government Department to recognise that as citizens of this country, they deserve appropriate support that we know is effective.

Q150 Chair: Thank you very much. Matthew, can I just pick up a point with you? You made the point to us earlier that Working Well did twice as well as the Work Programme but that your implementation of the Work and Health Programme is doing about as well as the national Work and Health Programme. It was always my impression that Working Well was not a Manchester implementation of the Work Programme—it was something a bit different—whereas it sounds as though the current programme is a Manchester implementation of the national Work and Health Programme. Is there a distinction there? I suppose what I am wondering is: if you had been given greater freedom over the current programme, do you think you might have been able to have a higher level of success than the national programme?

Matthew Ainsworth: Yes, you are absolutely right. Our first Working Well pilot, which went live in 2014, was in effect our local response to what we saw as the inadequacies of the Work Programme. The Work Programme still operated in Greater Manchester. There were some elements of it that we thought were not successful in terms of outcomes and personalisation and integration and that we felt were having an impact on the outcomes for people, particularly people with health conditions and disabilities.

Our first Working Well pilot was commissioned separately by Greater Manchester as a response to that, and what we showed was that the more intensive, localised, personalised approach, bringing in health services as part of the offer, with a more holistic assessment—not just looking at how far you are away from work but what other things are going on in your life and looking to address them coherently and collectively—would achieve better outcomes. We showed that for people's long-term health conditions and disabilities it did achieve better outcomes than the Work Programme.

Because we have been on this journey with DWP over the past seven years, the learnings from our first Working Well pilot have informed DWP's approach to the Work and Health Programme. You are absolutely right, Greater Manchester is the commissioner of the Work and Health Programme but, in effect, the main policy intent of it and the main structural design of the programme were set by Government, which includes things like the payment mechanism. We had limited flex on that,



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so we flexed it where we could in terms of real living wage rather than national living wage. We thought that that will make a difference.

There were other things where DWP wanted more commonality across the country, which limited some of the things that we may have done, including the number of contracts that we may have wanted to let. We probably would have wanted more contracts within Greater Manchester, bringing more smaller providers in. That was not necessarily something that was available to us.

The Work and Health Programme is just one element of our Working Well suite. There are other areas where we have identified gaps and done some things that are very different and touch on some of the points raised in the previous panel.

Partly as a result of Working Well and the fact that it has that buy-in from the Greater Manchester public service system, our investment in other Working Well programmes or early health and specialist employment services come primarily from health. There is health funding, local authority funding and European social funds in there, which we have pooled together, as well as skills funding. We have been able to pool skills outcomes into some of the programmes where we have that control over the funding, which we did not have as much for the Work and Health Programme.

What we have been able to do is commission some new things such as early help for people who are employed but off sick. It is that rapid response to work. Some of the same principles that we took from the Working Well pilot we have applied to that rapid response back into work, which we are testing now in Greater Manchester. Similarly, that pooling of budgets has enabled us to put £4 million-worth of investment into supported employment and IPS services in Greater Manchester, which we would not have been able to do before.

Picking up on Huw's point, it is still a sticking plaster. The level of need and the inequalities that exist for people with learning disabilities are even greater than the disabled population as a whole. It is flexibilities around those elements that we would like to see more.

The other point is around national funding. Nationally funded programmes can preclude some of that step on and step off. On the point I made around the Work and Health Programme and Kickstart, we would like to have the ability to determine who goes on to a programme better—a better assessment—but also the flexibility to move on to something else if that is the right thing for the customer at that point in time. At the moment, the Work and Health Programme is just too rigid.

Q151 Steve McCabe: Good morning. Can you tell me what international evidence there is that the Government should draw on to provide better employment support schemes? I understand that the Government say that they have looked at models but they do not seem to have settled on



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anything. Are there good examples out there that, from your experience, you would recommend?

Huw Davies: I think that they are making a go of it in Sweden.

Q152 **Steve McCabe:** What is it that they do?

Huw Davies: The Government are setting up a national programme to support people with more significant disabilities using supported employment techniques. France has had a big programme just started up. Interestingly, they have employment quotas in some European countries. In France, any fines for not meeting the quota are pooled into a budget, which is then used to commission supported employment across the country. That has been going for a couple of years.

There are pockets here and there. I am not sure that any one country has it right. You could go to America and see bits of it where there is brilliant practice and other bits where it is woeful. It often comes down to individual projects and schemes rather than a nationally thought-through infrastructure.

Steve McCabe: Thank you. Do you have anything to add, Clare or Matthew?

Clare Gray: Yes, I have something to add there. There is a good example in Australia: the DES/SES scheme, which has been evidenced as best practice. They have two levels of support. They have the disability management service for jobseekers with disability injury or a health condition, and that is about having occasional support. Then there is the more intensive support, which is around employment support, providing assistance to jobseekers with a more permanent disability or health condition. There are the two levels of support all under the one programme, so to speak.

What is key to this particular scheme is that it works with local schools to recruit disabled people into employment programmes before they leave school. For us at Shaw Trust, one of our key assets is that we provide that child to career approach. This is what we are learning. We have multiple academies. We have mainstream academies and special needs academies.

What we are beginning to see and what we want to do some more research on is those cliff edges—those periods where people move from education to employment and they slip through the net, because people do. It is so important to try to address that going forward and what measures need to be put in place to pick those people up, make sure they do not fall off that edge and make sure there is a smooth transition from education to employment.

Matthew Ainsworth: I have one thing to add. DWP, when it was developing the Work Programme subsequent to that, has looked over at the Australian model, which is more customer choice, I suppose. In



effect, there is a range of providers who are quality assured and receive a quality mark. Then customers decide which provider they want to go with based on an agreed set of performance measures. It is putting the customer at the heart of that customer journey.

The Department toyed with that to an extent but, in effect, it just built in some competition without the customer choice being a part of it. It goes back to one of Huw's points earlier around some clearer quality standards and professionalism. Those are the things that we could learn from in this country so that customers can make more informed choices about the services they access and why.

Huw Davies: To add to that, one of the things that we have learned from Australia is how they engaged very locally around the development of the National Disability Insurance Scheme, NDIS. There is huge engagement there. It contrasts a little bit to what we are seeing with the current strategy in the UK.

I would also add a couple of points. Canada seems to be getting it right at the moment, but I really want to stress Clare's point about how vitally important education is as a pathway to working. We are talking to DfE a lot and I am really impressed by its level of collaboration and open thinking around this. We have to get much better education pathways so that people have particularly the soft skills that employers need. It is more about those soft skills than necessarily just qualifications in getting people to move from education and into a job. We know with the current state of things that, if young people with disabilities are not getting a job by the age of 25, they are very unlikely to work. That is just such a waste of human potential.

Q153 Dr Ben Spencer: In common with a few other questions from the Committee, a lot of this area has already been covered at least tangentially. I wanted to dig in a bit more detail on individual placement and support programmes, which I know have been used or proposed to be used for people with severe mental health problems. From your perspective, what do you think about these programmes? How widespread are they? How successful have they been, and can they be used for people with disabilities that are not mental health-related? I can see Huw smiling. It is quite a lot of questions to ask. Huw, do you want to go first?

Huw Davies: Can I just clarify that IPS is supported employment? It is a term that was coined in America by people working in mental health and employment. They have used the supported employment model and they use the term "individual placement and support" to cover it. It is supported employment, and in the recent Government paper it was referred to as "supported employment including IPS". The principles are exactly the same.

Dr Ben Spencer: That is very helpful.



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Huw Davies: I find it quite frustrating when people use the American term of IPS to say we should do this with people with learning disabilities. It is the same thing.

Dr Ben Spencer: That clarification is very helpful. Matthew, do you want to come in?

Matthew Ainsworth: It is interesting that the leadership for IPS sits with NHS England at the moment, whereas supported employment either does not have a home, as Huw has said, or it would sit more with DWP.

The ambition about increasing access to IPS is positive and is welcome. I suppose in the current climate there is a question about how that NHS England ambition flows through the NHS in particular and that leadership, when it is competing against a whole host of other things at the moment, especially with Covid, remains front and centre as part of that recovery pathway. I do have some concerns that it could be seen as an add-on or a lower priority because of where it sits at the moment.

Coming on to Huw's point about the fact that IPS and supported employment are very similar models but working with, essentially, a slightly different cohort, is there a better way of integrating some of that support so that it is not departmentally siloed?

Clare Gray: There is research on IPS that says that for every £1 invested, there is a return of £1.41. If you scaled that extensively, the costs can be very high. As I have reiterated before, it should not be an either/or approach. There are people who will benefit from the IPS approach bringing clinicians in to work with employment advisers. Bringing in those eight key principles of IPS is very important. It is about working with people who are motivated. As Huw said before, there are many disabled people, especially young disabled people with learning disabilities and difficulties, who are motivated to work, yet we have created a system that prevents them accessing good work opportunities. That is different to work opportunities. It is about enabling people to progress as well.

Q154 **Chair:** Can I just pick up on a point that Matthew made earlier? You said you put some money in Manchester into IPS additionally to what would have happened previously. Is that IPS being delivered through the NHS, or have you come up with some other method of delivering it?

Matthew Ainsworth: Partly as a result of the devolution agreement in Greater Manchester with greater local control of the NHS funding, because we have had NHS colleagues locally on the journey with us in terms of the Health and Employment agenda, we managed to, in effect, earmark an element of local NHS funding for IPS but use that then as match funding with some local authority money for European social funds.

We could double the amount of money available so that we could support not just people in mental health services but also people known to adult



social care with a learning disability. In effect, we used what could have just been a single IPS service or model and used local devolution powers and ability to pool budgets to increase its scope to work to also ensure that it delivered a supported employment offer.

Q155 Dr Ben Spencer: This is a question on a slightly different topic. On the Disability Confident scheme, do you have any comments or thoughts on how successful it has been and any suggestions for improving it? I realise it is a wide, scoping question, but I wonder if you could give your instant feedback.

Huw Davies: I thought that the key points were covered quite well in the first session. I speak as somebody running a company that is level 2 Disability Confident. I am not sure I have ever filled in a piece of paper about it. The worry is that it just becomes a numbers game: "Look at all these employers that are involved." I am not convinced that it is actually making much difference on the ground.

I really believe that employers need to be in this conversation more. The point was made earlier about how companies are getting much more active, but overwhelmingly still it is individuals in companies who make a difference rather than a strategic approach to these things. We have to somehow translate that individual action because a senior manager has a son with autism or whatever. It is how we encourage that into a more strategic approach by businesses. There are signs that it is starting to happen.

I am not particularly convinced that Disability Confident is doing much to support that, and the worry is that it is just a numbers game. We only have just over 300 companies that are level 3 Disability Confident, so there needs to be much more monitoring and reporting about the impact of it.

Matthew Ainsworth: I would agree with Huw. First, I do not know what the outcomes of Disability Confident are because I have not seen anything published that says, "This is the outcome of the Disability Confident programme." Just speaking to employers locally, there is almost a risk that there can be too many individually focused asks of employers, and it dilutes what we could do and could provide fatigue.

I was reflecting on some of the things we have done in Greater Manchester around a broader Good Employment Charter, which is, "This is what it means to be a good employer," of which Disability Confident is an element, but also paying the real living wage and making sure that your employees have a voice. There is probably more we can do to bring some of these things together, not just on individual issues but that this is what it means in totality to be a good employer.

A point that the previous panel made is giving that some real teeth, in terms of reporting but also the point around public procurement and how we can genuinely tie some of this in. If you want to win public services



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and deliver public services and public funds, you need to be able to demonstrate that you are a good business and a good employer. That is one way in which we could make a difference.

Dr Ben Spencer: Thank you. That is very helpful. Clare, did you want to come in?

Clare Gray: Yes, I want to add to that and basically agree with both Huw's and Matt's points. The previous panel also made some very good points about the Disability Confident scheme.

While it does have a good place and it gets employers' interest in disability, which has been some way behind the curve on other diversity aspects about employment, the Disability Confident scheme is very much focused on processes rather than outcomes. What we want to see is those outcomes and those differences that it is making to disabled people in those organisations and also people who want to work for those organisations.

Something I am very mindful of from the disabled people I speak to is that, having approached a Disability Confident employer, their experience has not been any different than it would be for somebody who did not have that accreditation or that badge, so to speak. While it does have its place and it is good for getting organisations' interest in disability and helping them through those stages of building that inner disability confidence, there is still some way to go in getting better measurement of the effectiveness of the commitments that those employers sign up to.

There is also a place for us as a Work and Health Programme provider that work trialling should be part of the Disability Confident scheme, enabling people to go into organisations and try out positions to demonstrate their abilities and not have their benefits cut for that time while they are doing that. There are implications for people in receipt of Universal Credit. Most disabled people want to work but they are forced not to because it is going to have detrimental effects on their benefit entitlement. There is a place for the Disability Confident scheme to open those doors and enable people to have more of those opportunities.

Q156 **Dr Ben Spencer:** Building on one of your points, one of the criticisms that we have heard—and I think it has come out today—is that, as I understand it, a lot of the Disability Confident assessment is a self-appraisal, but there is no external assessment of how it is operating. It strikes me that feedback from people living with disabilities would be an interesting and important part of an appraisal system, and you could see how you could implement that, with very big companies perhaps.

I was just wondering how you would go about doing that and how you might evaluate industries in Disability Confident, particularly if it ends up, as Matthew suggested, being something that we start looking at in terms of public procurement. What would be your assessment programme?



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Clare Gray: As we touched on before, it is not just about the measurements of how many disabled people work for an organisation; it is also about the progression routes for somebody in an organisation. Do they have the same opportunities for learning and development? Are managers supported to understand the importance of getting adjustments in a timely way to enable somebody not to fall out of work? Are people paid at the same level? Currently, we see disabled people paid on average £2.10 a week less than a non-disabled person. The scheme could be used to address those inequalities and to measure the effectiveness of it.

While we have the voluntary reporting framework, it is voluntary and we could make it more mandatory. We could publicise the information about the organisations. There are thousands of employers signed up to the scheme and there are thousands waiting to join up to the scheme, but we also have to ensure that the support is there to help them to progress through the scheme and understand what it truly means to be committed to disability.

Huw Davies: A lot of the call for reporting seems to be focused on companies employing more than 250 people. In our experience, most of the jobs out there are actually with SMEs. That is where we need to focus more support: this idea of a one-stop-shop for information and advice. People are really confused where to go to for advice. They are incredibly worried about getting it wrong.

In my experience, most employers are very willing to go on this journey of offering somebody a job if there is somebody to hold their hand through the process, reassure them and point them in the right direction. What employers are really scared of is ending up in an industrial tribunal. You have to remember that most human resources departments are about compliance with the law and mitigating risks. If you have HR in charge of this, their natural way of looking at things is, "Why should we do this? It is risky."

We need that information and reassurance and somebody local to offer continual support. Then I think we will see companies standing up and saying, "It was great. It worked for us. Here are the benefits," and they will then become champions and spread the word to other SMEs. I think that if we get some of the right things in place, the numbers will follow. Data is important, but I am worried that we are getting too caught up in data without getting the basics right of what good support looks like.

Matthew Ainsworth: I will very briefly add to that. The approach that Huw has mentioned is very much the approach that has been taken for the Good Employment Charter in Greater Manchester, which is that hand-holding for businesses on a whole host of employment issues, of which Disability Confident is one. It is that supportive role to help them on that journey. At the end of it there is an independent panel that assesses whether thresholds have been met to say that this organisation is now an



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accredited good employer, and it is important to have that element of independent assessment.

Chair: Thank you very much. Our final question comes from Shaun Bailey.

Q157 **Shaun Bailey:** It was touched on in the first panel, but I just want to get the witnesses' views on the national disability strategy that is going to be launched in the spring. Obviously there have been calls across the sector for more concrete plans and for better engagement, and we heard that in the first panel. How confident are you that this is going to be an effective strategy and not just another announcement from on high that does not improve anything?

Matt, in terms of the work that the combined authorities have been doing in this space, do you feel that the top-down structure that we are seeing in launching strategies like this is still relevant and still works, or do you feel that a more localised approach to how we develop wider strategies on supporting disabled people into work is the way that Government and the Department should now be looking at this, empowering organisations like the Greater Manchester Combined Authority or the West Mids Combined Authority to do work on this?

Matthew Ainsworth: A more localised approach makes absolute sense for this because different areas are different. Tomorrow Greater Manchester is launching the findings of its independent inequalities commission. It is that type of research and local intelligence that should be driving the strategies at a local level, because they are grounded in what local people have said and local evidence.

I am not sure about the national disability strategy. I know there have been discussions with providers of services. I have no sense of active engagement with people with lived experience. I do not know; they may have, but I am not aware of it. There is certainly—the point that Clare made—little evidence of that following right the way through strategy into implementation into service design. That absolutely needs to be at the heart of it, and that is better at a local level rather than at a national level.

Shaun Bailey: Clare and Huw, do you have anything to add to that?

Huw Davies: Yes, hopeful but not confident sums it up. The strategy was announced back in April, then we heard nothing for eight or nine months, and then suddenly it was, "Here is a survey." I have no idea how they are going to analyse and pull together the feedback from that survey and how it can be of any use to them. I am a member of one of the regional stakeholder forums. It is not clear whether they are actually being listened to and how they inform the strategy.

I am more interested in how it is going to be delivered afterwards. We are hearing of five or six cross-Government thematic working groups, but again there is very little information about how they are going to operate.



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If we are going to make big improvements, we have to get much better cross-Government collaboration and much better collaboration from Government with employers, people with disabilities and providers. It just does not seem to be happening at the moment.

There is a marked difference between engagement with DfE and DWP. We are talking to DWP about some trailblazers on supported employment. Fingers crossed they will go ahead. We had some proof of concepts a couple of years ago. DWP will not even share the outcome data with me. We helped to design it and we did model fidelity assessments on the quality of it, but they will not share the final data. Why? I just do not understand it.

I would like to see far better collaboration from Government Departments with the public and employers but also across Government.

Clare Gray: To add to everything that Huw and Matt have said, the strategy has to be an holistic approach. If we are going to reduce the disability employment gap, employment is not the place to start. That is sometimes the end result of inequalities, starting at a very young age. It is putting a sticking plaster on inequalities that happen from infants through to adulthood. We need to address these issues, and it is about transport, accessibility, access to assistive technology and social care, as was mentioned in the first panel session. We often talk about social care but it is always talked about for older people. It is not talked about in terms of the barriers that it presents for working age disabled people and having to access it to enable somebody to go to work.

There is legislation as well. We have a fantastic Equality Act but it is not robust. It has no teeth when you have employers still not putting the adjustments in place for people. There have to be some measures put in place to make sure that the Equality Act is enforceable and employers are held to account for what is there. I hope that the disability strategy will do something about that.

For education, learning and skills it has to look at addressing the poor outcomes for learners with special educational needs. When you have something like 6% of people in SEN provision going through to full-time employment, how can you say that is good? It is not good. It is inadequate, and it has to be a joined-up approach.

Shaun Bailey: That is great. Thanks for that.

Chair: That brings us to the end of our questions to you. Thank you all very much indeed for being with us. I know that you all listened in to the first panel as well as taking part in this one. It has been really helpful to have your reflections on what you heard in that session. You have given us very useful evidence and information that we will make good use of in drawing up our recommendations at the end of this inquiry. Thank you all very much indeed for being with us. If anything else occurs to you that you would like to have said or occurs to you subsequently, please e-mail



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in. We would be really interested in any further comments you have. That concludes our meeting this morning.