HOUSE OF COMMONS

Work and Pensions Committee

Oral evidence: Support for Carers, HC 581

Wednesday 7 February 2018

Ordered by the House of Commons to be published on 7 February 2018.

Watch the meeting

Members present: Frank Field (Chair); Heidi Allen; Andrew Bowie; Jack Brereton; Alex Burghart; Ruth George; Steve McCabe; Chris Stephens.

Questions 61 - 157

Witnesses

I: Nikki Kimber, Carer, Olga Budimir, Carer, Liz Abrahams, Carer, Katie O'Shaughnessy, Carer, and Bethan Pound, Carer.

II: Sally Wilson Senior Research Fellow, Institute for Employment Studies.

III: Sarah Newton MP, Minister of State for Disabled People, Health and Work, Andrew Latto, Deputy Director, Devolution and Welfare in later life, and Duncan Gilchrist, Deputy Director, Fuller Working Lives and State Pension Policy.

Written evidence from witnesses:

Department for Work and Pensions

Examination of witnesses

Nikki Kimber, Olga Budimir, Liz Abrahams, Katie O'Shaughnessy and Bethan Pound.

Q61 **Chair:** Welcome, everyone. We are going to go down the panel so that we get voices. Say who you are, for the sake of the record, Liz.

Liz Abrahams: Yes, I am Liz Abrahams.

Olga Budimir: Olga Budimir.

Nikki Kimber: Nikki Kimber.

Bethan Pound: Bethan Pound.

Katie O'Shaughnessy: Katie O'Shaughnessy.

Q62 **Ruth George:** Thank you very much and welcome to the Committee. Could I ask you, in order, to say a few brief words about what your experiences have been of juggling work with your caring responsibilities, please, starting with Liz?

Liz Abrahams: My employer is very supportive of carers. It does have a flexible working and agile working policy in place. We have a carers' forum within the company—along with other disabilities and wellness—where they try to do social events, such as tea and coffee mornings, to get people talking. If you feel uncomfortable talking to your line manager, then there is someone who will approach them for you.

What I did find is that, as good as the company is at putting that in place, it depends on your manager. My current manager is fantastic and supports it. My husband is currently in hospital. They are happy for me to leave at 3.00 pm every day, whatever I need to do. If I don't want to come in one day I can work from home. My previous manager, about four years ago, was not of the same attitude. Therefore, as good as the company can be, I feel it still depends on enforcing that with the manager.

Q63 **Ruth George:** Thank you. Are you able to tell us who your employer is?

Liz Abrahams: No, sorry.

Ruth George: That is quite all right, thank you. Olga.

Olga Budimir: I am talking about the period of time when my father was diagnosed with mantle cell lymphoma. At the time my employer was an Australian advertising agency and I had been asked to set up the London advertising agency. I had broken my arm, so for the first three months of my father's illness I was pretty useless and my sister took on the brunt of that. My parents lived in Staffordshire—my mum is still alive—so there were lots of trips up and down the motorway to try to see what was going

on with my dad. I approached my employers to talk about my hours and they ignored me. They refused to respond to emails. I had one boss in Australia and one boss in the UK. I approached the boss in the UK to have meetings and he kept fobbing me off, cancelling the meetings and that sort of thing. After about three months of this I then decided my father needed me more than these people, who were rude not to even talk to me, so I resigned and gave up work. I did tell them, in my resignation email, the reason that I was doing it was to care for my father, and also that I was prepared to work if they could see a way to work part time. They ignored that and sent around an email saying I had decided I no longer wanted to support the company going forward. I was going to reply to that and say that, no, I was going to support my dying father instead but I chose to ignore that.

I gave up work in June and my father died the following March. My mum is still alive. I took up part-time work in September of that year, so I care for my mum on a part-time basis. She still lives in Staffordshire, so there is a lot of going up the M6 and the M40 again.

My current employers have 63 policies but don't have a carers' policy. I did mention to them I was coming to this meeting today and they said, "We are happy to help out in every way we can". However, it is all very dependent on who your line manager is, as this lady was saying. If you have a good line manager, I am sure they will help you out and support you. If you don't have a good line manager then they won't. While my line manager may be very good for me, if there is another carer in the company who is to say they are getting the same sort of treatment?

On the other hand, every carer's needs are different. Some people don't need to leave work at 3.00 pm most days. Every carer's needs are different so employers have to be flexible, and that is difficult for them.

Q64 **Ruth George:** Could I just ask whether, when you made your request to your original employer about working part time, you mentioned the statutory right to request flexible working and whether you were aware of that?

Olga Budimir: I did not know there was a statutory right. The thing is that you don't think of yourself as a carer—I know this might be one of your questions—you are just helping your parents out or your child. You are just doing what is right and you don't think of yourself as a carer. It is only months down the line–when you have been in and out of hospital, going to GP appointments and stuff like that—when something goes wrong with you, as it did with me, when you then think, "Hang on a second, I need some help".

Q65 **Ruth George:** Absolutely, thank you. Nikki?

Nikki Kimber: I am the mother of a beautiful 15 year-old girl who, at seven months' old, was diagnosed with profound disabilities. Someone once said to me that employment and disabled children are like oil and

water, they just do not mix. I have found this throughout the journey that we have taken with Antonia. I am a fully qualified teacher. I trained in 1996 and worked full time until Antonia was diagnosed. I then had to give up my job because there is not the highly-qualified specialist care available for me to work. At that point I became a statistic. I believe that only about 16% of women who have disabled children work, compared to about 61% of mothers who don't have disabled children. Of those of us who do manage to have a job, over two-thirds refrain from taking promotion or actually take demotion in order to balance caring and work.

My role as a carer within my school is well known. My school colleagues and head teacher are fantastic. However, it is fairly obvious that teaching and caring don't go together. The school day starts at 8.30 am and finishes at 3.30 pm—it actually does not finish at 3.30 pm, it finishes about 7.00 pm—but it is not possible, without that extra support, to cover your child in the morning or cover your child in the evening. You just cannot work. Therefore, at the same time when you are mourning the aspirations and dreams you had for your child, you end up mourning your own aspirations and dreams that you have lost. I don't now have the teaching career that I had planned. I have a teaching job. I teach for two days a week, which I am passionate about, but "juggling" is a really good word. When you say "juggling" in your question, I am becoming an expert in special needs. I am becoming an expert in legal things, in social services, in physio, in OT, in all of these things. That, in itself, is a fulltime job.

It seems very strange that, while we are fighting so hard for children to become integrated fully into society, and experience everything that all other children should experience, as parents, we cannot integrate in that way because we are not afforded the norm of having a job. There is a real issue with the amount of support available for parents of disabled children to work.

Q66 **Jack Brereton:** On our visit to Stoke-on-Trent we met a number of teachers who had taken on caring responsibility. They similarly described the difficulties they faced in that fashion because of the challenges that you have just described. They also mentioned the fact that if they have had to come out of teaching, and wanted to go back in, it is very difficult. Have you faced those challenges because of the need to keep up your qualifications?

Nikki Kimber: Exactly. I came out of teaching when Antonia was diagnosed. I had to be out of teaching until she was three or four. I went back into a school as a teaching assistant for five hours a week so I could keep my foot in the door. Fortunately for me a member of staff went on jury service, which was extended. They needed somebody to cover and I was qualified. That is how I got back in. It was just a lucky break to get back in. If I had come out for the amount of time that I had been out, to then try to get back in would have been very, very difficult. Supply is really your only route. If you are a supply teacher the work is not regular

and you cannot plan for it. Routine is absolutely what dictates our lives, so supply teaching is not an option. Therefore, yes, I totally agree that it is very, very difficult to get back in once you get out.

Q67 **Chair:** Nikki, in Wirral we have a lot of children who are educated at home. Might people in your position be a wonderful resource for the local authority to meet its needs in children being educated at home? You could set a pattern when they came to you or you went to them. Would that be a possibility?

Nikki Kimber: That depends very much on the individual, what your passion is for teaching and where your passion lies. My passion definitely lies within Key Stage 1 of primary school, in a buzzing class of 30 children where we are covering the entire curriculum. However, I do have friends who work as teachers within hospitals. That is a very specialist niche area, and also highly rewarding. It depends very much on the individual. I am sure there are lots of people within my profession who would. I know some of my friends have gone into Portage teaching, which is a highly individualised teaching programme for children with special educational needs, which is done in the home. I am sure there is a huge bank of people you could reach out to for that.

Q68 **Ruth George:** Bethan, the same question to you about whether you have tried to find work and what your experience has been of that.

Bethan Pound: I care for my mother who was diagnosed with young-onset dementia in 2017. I used to work as an in-store housekeeper for an outsourced company within Tesco. Within seven months of my mother's diagnosis it was a joint decision that I had to leave my job. Working and my caring responsibilities became too difficult to manage effectively, more for my employer than myself. When I told my employer about the diagnosis and becoming a carer I was just blatantly told, "Okay" and my employer walked off. She did not tell me about the carer's rights. There was no information about how they could help, or support or anything like that.

Any leave I had during my work was taken up with appointments, meetings, support groups, consultations, social worker visits and occupational therapists. I have a list as big as my arm. At my work appraisal—obviously because my attendance record was so poor—the inference was to look after mum or give up work. They made the decision on my behalf and terminated my employment.

After Mum was diagnosed and I lost my job about six or seven months passed. I applied for quite a number of jobs but obviously, because of the gap where the employment was, when I applied I could not find anything because nobody would employ someone who had an employment gap of six months or so.

Q69 **Ruth George:** Can I ask if you let prospective employers know about your caring responsibilities?

Bethan Pound: Yes. When I have applied for certain jobs I do say that I am a carer. Obviously, having Carer's Allowance, I can only work so many hours and because of that they choose someone else over me. Even then, no one goes into carers' rights, how they could support a carer or things like that.

Q70 **Ruth George:** Do you think it is your gap in employment or the limit on your hours set by Carer's Allowance that is the worst of the detriments that future employers might look at?

Bethan Pound: It is both really. Obviously the gap is a big thing. It is a, "What have you been doing for the last six months?" sort of thing. I am 21. What do you do when you are 21? My caring role could last five, 10, 15 or 20 years. No one can tell how long I am going to be a carer for. I think their main worry is that one day, five or 10 years' down the line, I could say, "I am going to have to give up my job to care for my mum fulltime because she needs 24-hour care".

Q71 **Ruth George:** Katie?

Katie O'Shaughnessy: I was caring for my mum who had vascular dementia. I was in my first year at university. Her dementia developed pretty fast so she deteriorated very quickly. That meant I had to leave university in my first year and become my mum's fulltime carer straight away. I fell into that role very quickly. One of my main issues was how to get back into higher education. A lot of my goals were career development and where I wanted to go career-wise. Obviously, being 18 when I fell into that role, I did not have a lot of work experience myself. I found a lot of barriers in trying to go from being in a 24/7 caring role to get to where I needed to be and to plan out my future.

I struggled with finding information from services. I tried to do a lot of research on my own. However, one of the key points is that I had never seen myself as a carer so I was not looking in the right places and, also, people were not asking me the right questions to elicit that from me. My main challenge was getting back into some sort of work and, ideally, I wanted to get back into higher education. As I say, having the 24/7 role was extremely difficult for me.

Ruth George: Absolutely. Thank you.

Q72 **Andrew Bowie:** We have heard today that there have been a lot of different experiences in terms of accessing information. Do you think there is enough information for carers, for you to know where to turn to when you find yourselves in a caring role?

Katie O'Shaughnessy: When I first fell into that role I did go to the Jobcentre and I went on Carer's Allowance. The main issue with that was there was not enough support. I did ask about higher education. I made it clear that what I was after was career development. A lot of the time they were asking, "Are you ready to work?" I wasn't, because I was not able to leave my mum because she depended on me so heavily, so my

answer to what was an obvious, "No", but I did try and push forward to say that—

Q73 **Andrew Bowie:** Katie, was there any help from within the university at all? We talk a lot about employers and employees but you were at university, not in a job. Was there any help available from the university you were at?

Katie O'Shaughnessy: When I went to the university they were extremely helpful. The nature of university, in itself, is very flexible. When I did apply for a job at the university they were flexible about accommodating me and my hours. However, getting the job in the university still provided some challenges. When I went to the interview for the first time I was not successful because I did not have enough job experience. I only had voluntary experience. In one sense I was lucky because the person they offered the job to did not want it, so that is how I got that role. Once I did get that they were very flexible around my caring role.

The only negative thing I would state is that a lot of the time they would encourage me to take time off when I actually needed and wanted to work. My solution to that was to offer a more formal approach to flexibility around that, rather than just assuming that because I am a carer I need all these different days off. I actually needed to work.

Q74 **Andrew Bowie:** Need to work, yes, exactly. Bethan?

Bethan Pound: My experience with the Jobcentre was with the Carer's Allowance. It was the routine questionnaire and filling in forms. Nobody mentioned any support for carers or things like that.

Andrew Bowie: Was that at the Jobcentre?

Bethan Pound: Yes. It was just you go in, fill the forms in and wait for a reply. There was no, "Is there anything we can do to support you? Are there any educational things you want to do?" or anything like that. It was just you go in, and then you come back out again.

Q75 **Andrew Bowie:** You obviously had a terrible experience with your employer. Do you think there was a lack of knowledge on their part? Do you think they were deliberately not looking for help for you or was it because they were not informed as to where they should go themselves?

Bethan Pound: With my employer I think it was lack of knowledge. Not many people know about young-onset dementia. My mother was diagnosed when she was 56. I think they brushed it off as an old person's disease. You sit in a chair in a care home or something like that. There was a lot of stigma around a young carer caring for someone who is still young and has dementia. I think that was the problem they had. They just did not know where to access information to help me. That is what I think it was.

Q76 **Andrew Bowie:** Nikki?

Nikki Kimber: When we first discovered Antonia had difficulties 100% of the focus was on finding out what was wrong with her, chasing the diagnosis and looking at the prognosis. At no point in that time was there a consideration that this family might not be able to cope with what they have just been told. How are they going to deal with it or how are they going to cope with it? There was no information, other than what the health professionals were giving us, that it could be this genetic deletion or it could be that difficulty. For a long time we were in a complete bubble with this child, working with the health professionals. We had no idea there was potentially support and guidance, which is legislated for, for families like ours.

You would hope that, in a situation where it is clear a child is going to need 24/7 care for the rest of its life, there would be a big button you would press that would reach out to social services and care networks, and that they would come to you at that point and say, "You might not need us at this point but you have been flagged up to us as someone who is going to need support in the future". That does not happen. That comes through the network of wonderful people you meet.

If you are privileged to be in the world of special needs children and people who require care, you meet a number of amazing and inspirational people. That is where we get our information. It is not coming from the local authority. Yet in the legislation it says that the local authority is supposed to make sure you have this information. You are not meant to go and ask for it, it should be coming to you. However, I feel very much that it is a case of us having to prove that we need the support rather than them helping us to get it.

Q77 **Andrew Bowie:** The onus is on you?

Nikki Kimber: The onus is on us. It is your level of tenacity. You have to put to one side the level of fatigue you feel as a carer because the people you are caring for have only you. When you give up, because you don't have it in you any more, that affects them and your wellbeing. We live with guilt and failure all the time. We should not have to.

As part of becoming an expert in all the different things, you become an expert in the field of all the legal things and I feel the local authorities cherry pick the legislation that they can use. For example, I was entitled to a carer's assessment. However, because Antonia is below the age of 18 the carer's assessment is purely a cathartic paper and pen activity. It is a chance for me to vent about how difficult my life is. They are not duty bound to provide any support for me through that carer's assessment because she is not yet 18. That could be interpreted as correct if you only look at the Carers Act. However, if you look at everything else that is put in place for families with disabled children, everything leads to the best possible outcomes. If the child-in-need assessment is done properly my carer's assessment should feed through that. My needs, my husband's needs, and our other little girl's needs should all be considered in that. However, with the local authority it is

very much, "If we don't have to give it to you we are not going to give it to you".

Q78 **Chair:** Can we just pause at that, Nikki? Katie, were you offered a carer's assessment?

Katie O'Shaughnessy: Not when I went to the Jobcentre. They did not identify me as a carer, even though I was taking the Carer's Allowance. Neither the staff there nor I identified myself as a carer. It was not until a lot later, and not from the Jobcentre, that I was identified and offered that.

Bethan Pound: I have the same answer. I was not offered one through the Jobcentre. I was offered one, months later, through a carers' charity. That was a piece of paper with a star on it that said, "How difficult is it, 1 to 10? Do you feel like you need support, 1 to 10?" It was not suited for my needs. It was for everybody; it could be for your needs or your needs. It was not specific to how I felt. It was: "Can you cope?" and general things like that.

Q79 **Andrew Bowie:** Olga, is there enough information?

Olga Budimir: I never saw myself as a carer, so I never looked for a carer's assessment. I looked at myself as somebody who was trying to help Dad and sort Dad out. About four months down the line, when I lived and breathed Dad and his appointments—as I said, my parents lived in Staffordshire, so I was spending a long time in Staffordshire—I needed a flu jab, because Dad had neutropenia. I wanted a free flu jab because I wasn't working but I could not get one without paying for it. My GP said, "But you are a carer".

Q80 **Andrew Bowie:** Was that the first time anybody had said that to you?

Olga Budimir: Yes.

Q81 **Andrew Bowie:** How many years had you been doing this?

Olga Budimir: It was about four and a half months, when my GP said, "But you are a carer". I then had to register as a carer. Who do you register as a carer with? I live in Wandsworth but my parents live in Staffordshire. Wandsworth would not accept me because my parents live in Staffordshire, and Staffordshire would not accept me because I lived in Wandsworth. Eventually I registered in Wandsworth, not mentioning where my parents lived and then I got a flu jab.

Once I was registered as a carer all sorts of goodies opened up. I got a health assessment. Still to this day I have never had a carer's assessment. I applied for a Carer's Credit eventually—I looked on the internet—because I was not earning. I did not go near the Jobcentre. I have been there before and it is horrendous. My sister was a teacher and she could not get time off work.

You just don't realise you are a carer. I was talking earlier on to Carers UK. I am a member of the "Twitterati" and I found Carers UK on Twitter and that opened up more doors. It was fantastic.

Q82 **Andrew Bowie:** Would it be helpful if there was something pan-England or pan-UK instead of having to register in Staffordshire or Wandsworth?

Chair: You said you opened Pandora's Box and it all came out?

Olga Budimir: It wasn't Pandora's Box. It was a goodie box.

Q83 **Chair:** The one thing that did not come out was to say you could have a carer's assessment?

Olga Budimir: No, because even then I did not really consider myself a carer. Who do you go to for a carer's assessment? I would not know now where I would go.

The thing is that you don't recognise yourself as a carer. I was talking to Carers UK earlier. Where would I have seen literature about being a carer? I don't remember seeing any literature in Dad's cancer clinic about being a carer. Even if I had, would I have recognised that was me? However, my Dad's GP saw me many times and knew I was whizzing up and down the motorway or staying in Staffordshire when I lived in London, so he knew I was caring for my dad. My dad's consultants knew I was caring for my dad and knew about the whizzing up and down the motorway. My dad's nurses knew. They were giving him chemotherapy, his first chemotherapy at the age of 92; way to go Dad. The social services knew that I was a carer and was whizzing up and down the motorway. All these people around me knew I was a carer, yet not one of them came forward and said, "Do you need any help?" They are the people who know. I did not know I was a carer but they knew. Where were they?

Q84 **Chair:** Again, can we go back to Katie? Did you consider yourself as a carer?

Katie O'Shaughnessy: No, I did not consider myself as a carer until I became involved with Barnardos Young Adult Carers. That is when I was offered my assessment.

Q85 **Chair:** How did you get involved with Barnardos Young Carers?

Katie O'Shaughnessy: My aunty called up. I wanted to go to university and we were trying every angle to put support in place. She searched on the internet and came across it that way, so I was referred by a family member.

Bethan Pound: I first thought I was a carer when everybody was going, "How are you doing?" and things like that. When forms were coming through, "What is your job?" I used to just put "carer" down. Instead of being mother and daughter you become patient and carer then. It breaks the bond of parents and things like that.

Q86 **Chair:** Nikki?

Nikki Kimber: It was our GP. We moved from down south to up north, to live near to my parents. It was our GP who expressed real concern that we had never had a carer's assessment, because we had never been offered a carer's assessment.

Q87 **Chair:** How long was that?

Nikki Kimber: I think we had a carer's assessment when Antonia was 13.

Q88 **Chair:** You had been caring for how long then, Nikki?

Nikki Kimber: She was diagnosed as having a profound disability at seven months old. She was 13 and I did not know that we could have a carer's assessment.

Q89 **Andrew Bowie:** In that time you would have seen multiple doctors.

Nikki Kimber: It was never offered to us. It was our GP who wrote to social services and said, "My goodness, this family have not had a carer's assessment. This is a serious oversight. I want it addressed right away."

Going back to something Bethan has just said. It was really interesting that, even in the questions we were sent by the panel, they talked about your role as a carer. I am never referred to, in any of the documentation and assessments we fill in, as a mother and Justin is not a father. We are now carers. The title of "carer" comes before "mother" and "father". "Mother" is one of the most coveted titles. Many women want to have that title. It is almost removed and becomes generic.

Then what happens, when you are looking after a disabled child, is that, again, they can cherry pick, "You are a carer for the purposes of this assessment but when we want to give you some support you are just a mother, because it is a child and, as a mother, you would be expected to look after your child". You are either a carer, and afforded the same rights as everybody else whether the child is 18 or younger, or you are a mother and you are expected to get on with it like all other admirable mothers do.

Q90 **Chair:** Bethan was making a slightly different but very similar point: that people ceased to view it as a mother/daughter relationship but as a carer/dependant relationship.

Nikki Kimber: That is one of the reasons why it is so good to have a job, because when you go into the playground and people say to you, "Hi, Mrs Kimber" I am not, "Hi, carer lady with disabled child". I have an identity at school and that is so important to me for my wellbeing.

Olga Budimir: That was the same with my dad. I just became my dad's carer. Eventually that is how I saw myself. I completely lost my own identity. I was living with Mum and Dad. I was eating their food. I was doing the things they wanted to do. I had given up my hobbies. Then my

sibling started to help out so I could take up my hobbies. I completely lost myself. I did not know who I was. That is why I had to go back to work, for my own sanity.

Q91 **Andrew Bowie:** Yes. Sorry, Liz, I feel like we have been waiting to talk to you. Do you think there is enough information out there and where did you go?

Liz Abrahams: Absolutely not. My story is different. It is my husband who is disabled. As we talk, he is now in a coma. He was diagnosed with MS in 2000. He went to a wheelchair five years ago. To this day I have never had a carer's assessment. I have never been given any caring information. I resuscitated him four times last year and my children resuscitated him twice on their own. There is no help for them.

Q92 **Andrew Bowie:** Would you know to ask for a carer's assessment?

Liz Abrahams: I did not hear about one until we joined a different MS support group last year. They did a respite weekend and it was only through the speakers that I even heard that there was such a thing.

Obviously since the year 2000, and with everything that happened last year, we have seen many a doctor and hospital, occupational therapists, everybody. I asked them to get someone in to help the children. The Young Carers Clubs are 4.00 pm on a Monday. My children go to secondary school and they are not even out of school at 4.00 pm on a Monday. The local carers group meets at 2.00 pm on a Friday. I am at work. There is nothing for anybody anywhere.

No, there is not enough information. Everything I found out, I found out for myself on the internet or through support groups that we eventually found last year.

Q93 **Heidi Allen:** Thank you. I am hearing so much about coincidence, you Googled, found somebody on Twitter, or your aunty. I am interested—we have heard a little bit about it, but not very much—in where the Jobcentre fits into all of this. Olga, for example, it sounds like it would never have occurred to you to go to the Jobcentre.

Olga Budimir: I have been there before, it is horrendous.

Heidi Allen: You were also in your dad's world. I am interested in any of you who thought that was the right place to go, what support you got when you got there, and whether it was the right kind of support. How big a feature in your very stressful lives has the Jobcentre been, and when? Shall we start with Katie?

Katie O'Shaughnessy: Yes. I went to the Jobcentre straightaway and applied for Carer's Allowance because I thought that was the right thing to do.

Q94 **Heidi Allen:** How did you know to do that?

Katie O'Shaughnessy: My dad told me. He said because I was not working or having any employment that that was available to me. I went off his guidance. When I got there I don't think I got any useful information from them.

Q95 **Heidi Allen:** How long ago was it? The Jobcentres are changing quite a bit as well. I am interested to know when it was and if you knew whether the Jobcentre you went to was on Universal Credit. You have probably heard this is the big new benefit system that is coming in that should be changing how Jobcentres operate. It would help me if we had some context about when and how your Jobcentre was operating.

Katie O'Shaughnessy: It was 2013 to 2015, the period I was with them. I am not 100% sure about the Universal Credit thing.

When I went there they did not offer me relevant information about higher education, which is what I was always pushing them to do. They introduced me to Local Solutions—they gave me a leaflet—that is like an adult caring centre in Liverpool. I did not know that that was what it was because they did not really explain that to me. Again, it was not explained that I was a carer and that there were lots of benefits and things that I was able to access. Then the visits became less frequent and I did not find that helpful.

Q96 **Heidi Allen:** It was literally just about Carer's Allowance, sign you on and "Have a leaflet"?

Katie O'Shaughnessy: Yes. They did ask me about my career development and where I wanted to go, but they just logged it in and then it was never really readdressed.

Q97 **Heidi Allen:** What about you, Bethan?

Bethan Pound: My experience with the Jobcentre was, like I said before, just go in, fill in the forms and come back out again. I had one appointment with them. I have not seen them since 2016.

Q98 **Heidi Allen:** Do you know whether your Jobcentre had Universal Credit?

Bethan Pound: Yes, they did at the time.

Q99 **Heidi Allen:** You went in, filled in the paperwork?

Bethan Pound: Filled in the paperwork, signed a document and they said, "Right, that's it. Okay, thank you very much." That was it. There were no leaflets, booklets or normal paperwork that you should get saying, "Would you like any support?" There was none of that. It was, "Thank you very much, goodbye".

Q100 **Heidi Allen:** That triggered you receiving a Carer's Allowance, filling in that paperwork, and that was the end of it?

Bethan Pound: Yes, and that was it. That was when I initially thought, "Okay, I am a carer now".

Q101 **Heidi Allen:** What about you, Nikki?

Nikki Kimber: My experience was back in 2004 to 2005. It was very novel that somebody may have been a carer. The jobs were very black and white. It was, "These are the hours. This is what is available. If you cannot do those hours don't apply for that job."

At that point—because the physiotherapists who do Riding for the Disabled suggested it—I applied for Carer's Allowance. I had the Carer's Allowance and then I walked across the road to the local primary school to see if I could volunteer.

Q102 **Heidi Allen:** The Carer's Allowance was triggered from you going into the Jobcentre, presumably?

Nikki Kimber: Yes, because the physiotherapists explained to me, "This is what you need to do", so I got the Carer's Allowance and then walked into the primary school to volunteer. There happened to be a teaching assistant post for five hours a week that did not take me over the threshold.

Q103 **Heidi Allen:** That was just your own endeavours, trying to find a role?

Nikki Kimber: Yes.

Q104 **Chair:** We are looking at the Jobcentre. That was the limit of it?

Nikki Kimber: That was the limit of that, yes.

Q105 **Heidi Allen:** There was no assistance to help you. It was just, "Here are some jobs, crack on".

Nikki Kimber: "If you cannot do those hours, don't apply for that job."

Q106 **Heidi Allen:** Olga, loving the Jobcentre as you do.

Olga Budimir: I have worked all my life, but I had two periods of unemployment for six months each time. I was a managing director. The guy who filled in my forms on the computer could not even spell "managing director". They did not have such jobs.

This time I did not go to them. I did not see how they could help me because I was up in Staffordshire. If you have to sign on every two weeks, which I presumed I would have to do, and say I was looking for a job—which I wasn't, because I was looking after my dad—I did not see in what shape or form the Jobcentre could help.

Q107 **Heidi Allen:** Therefore, you did not bother at all?

Olga Budimir: I did not bother at all. Any research about Carer's Allowance or Carer's Credit I did myself on Google.

Q108 **Heidi Allen:** That is interesting for evidence for us because the Jobcentre is changing. Perhaps there was a communication issue or a perception issue that you remembered the Jobcentre as it was and it would not have

occurred to you to go.

Olga Budimir: No.

Q109 **Heidi Allen:** Liz?

Liz Abrahams: Because my husband is 43 and because I work we are not entitled to anything. There is a lot of help for elderly people and there is a lot of help for under 18s, or more so than for that middle ground. Because I work we are not allowed to claim anything. There is no reason to go to a Jobcentre.

We were not even entitled to a Disabled Facilities Grant when we had to adapt our house, so we had to increase the mortgage by £70,000, which is obviously all on my shoulders. Therefore I have to work. I have no choice. I would love to drop my hours and go to part time but I have no choice. Obviously I have the original mortgage and that. I am not 20 years old and cannot get a 30-year mortgage. It is over quite a short time, so it is a big monthly payment. We get no assistance and no help.

Q110 **Heidi Allen:** The grant that could have paid for the adaptations in your house, who was it you were talking to about that?

Liz Abrahams: I had quite a few arguments with the local council. I went to our MP. I confronted him at one of these library things. I went through all the different departments of social services. It was about a six-month thing. When they means test in my area for a family of four with a disabled person, not children, it is £20,000 before tax. Obviously hardly anyone qualifies. Therefore, we did not qualify for the Disabled Facilities Grant so I had to get £70,000 added to my mortgage.

Q111 **Heidi Allen:** You just battled on, on your own?

Liz Abrahams: We had to. We had no option. My husband lived in our front room for three years with a commode. I had to wash it for three years until we got the funds and adapted the house.

Chair: All right, that is really informative. Thank you very much. We have on board the business about your own identity that ought to be running alongside the double identity you have as carers. A huge thanks to all of you for coming. Thank you very much.

Examination of witness

Sally Wilson

Sally Wilson: My name is Sally Wilson. I am an Independent Policy Research Fellow at the Institute for Employment Studies.

Q112 **Chris Stephens:** Sally, did the Carers in Employment project, which operated over a two-year period, achieve finding out what works in supporting carers to remain or return to employment? If so, what did

work?

Sally Wilson: It worked in finding out what works to help carers who work feel supported. If we are talking about changing labour market outcomes for carers—helping carers remain in work that they otherwise might have left, or helping carers not in work into work—we did not find evidence that it was successful in doing that.

Q113 **Chris Stephens:** Is one of the reasons where there are late notice shift changes, for example, which appear regularly in social care and other places? Is it going to take changes to employment law to help carers?

Sally Wilson: One of the reasons that it was difficult for us, as evaluators, to see actual change was because the pilot was for two years and we had less than two years to look at any change in status of the carers who we talked to. It can take time for somebody's labour market status to change.

Q114 **Chris Stephens:** You were saying there was not enough evidence for this project of helping carers into work. Is that because there are employment law barriers? Are there employment law solutions to help carers?

Sally Wilson: This happened partly because carers were supported. The carers we spoke to felt supported. They felt that through the project they were given more information than they had had previously about the support that was available to carers. As a result of receiving that support and information not all of them decided, for example, to step up their hours or to stay in work.

When I say it was successful in helping people feel supported, they felt that they had more practical support. They knew more about the benefit options available to them and some of them felt more empowered or supported to ask for flexible working. It was more that when you give carers more information they don't necessarily make a decision to work more.

Q115 **Chair:** Was that the main decision of your work, Sally?

Sally Wilson: Because of the way that the projects were run across the country they were all very different. They all delivered a different cluster of activities and interventions. Our quantitative and numerical information about carers was provided by each of the sites that delivered the services across the country. As evaluators, we knew how many carers they said that they had reached and, because it was a qualitative study, we did speak to carers. Of the carers who we did speak to, they did feel supported. However, as far as we were aware, none of them stepped up their hours or were doing more work than they were doing previously. For some of them it may well have helped their attachment to the labour market. In the long term that may play out as retaining them.

Q116 **Steve McCabe:** If I have understood it correctly, the evaluation report

shows a number of useful soft outcomes from the pilot but virtually no impact on the labour market outcomes. Why did you think that was the case?

Sally Wilson: As I said before, carers were supported in the sense that, for example, an adviser was allocated to provide them with advice and moral support. As a result of that, they felt their wellbeing improved, their ability to cope and their ability to balance work with care improved. Those who were in work sometimes made the decision that, for them, work was not the right thing at that point. For example, some of them would not have known about the Carer's Allowance and would not have known about their welfare entitlements. There were some changes that resulted in carers perhaps temporarily dropping out of the labour market, reducing their hours or working the same hours because they felt more empowered or had the knowledge that they were able to ask their employer if they could work flexibly.

Q117 **Steve McCabe:** Would it be fair to say that, if the Government's aim was to help carers in terms of employment, the pilots were a failure in that respect?

Sally Wilson: The pilots were all doing very different things. From the perspective of people working hard to deliver them, they were a success because they felt that carers were becoming aware of all the information that the people we have just listened to lacked. They were able to reach employers who knew very little about how to support carers.

As you say, in terms of soft outcomes it was a success. As an evaluator, we take a broad view of what success is but, however, yes, not in the strictest respect that you are referring to.

Q118 **Chair:** When you say that in the sample there were people who acted as advisers, who were these advisers?

Sally Wilson: The different projects around the country were predominately led by local authorities or specialist agencies and partners working with the local authority. They were all people who, for example, were working in some sort of carer support role as a professional. They understood caring and carers.

When I say "adviser", I mean somebody who was staffed by the project money, their salary was paid for by that, and who would do various sorts of outreach to work with carers. If their particular model allowed it, they might be working for a sustained period with a carer to support them periodically.

Q119 **Chair:** How did you pick the carers? We went up to Stoke and met a lovely large group of carers, but none of them had heard of the project. Was it meant only to be a selected few within an area, Sally, or what?

Sally Wilson: All of the areas struggled to reach carers. They know the carers are out there but, as we have just heard, some people don't identify with the role of carer.

Q120 **Chair:** About 40 carers turned up for our meeting in Stoke. Somebody managed to get hold of them. They all came along and were very, very active in lobbying us and saying what they thought, which is absolutely right. None of them had heard of the project. One group was well able to give us a hall full of very attentive and careful carers getting over their message about what they wanted a group of MPs to hear, yet they had not heard of the project. That was a puzzle to us.

Sally Wilson: I don't think the marketing activities across the nine different areas were necessarily always successful in reaching every carer or every type of carer. Some successful approaches were about engaging with people in GP surgeries or in A&E departments, so they could catch carers at a crisis point. Some carers were reached via their places of employment. There were very different ways that the various providers were trying to reach out to carers. They had different methods. Obviously they were not always successful in alerting every carer who might have been eligible for support.

Q121 **Alex Burghart:** Sally, having looked at these nine different pilots and thinking of them individually rather than as one group, initially, what were the standout lessons from individual cases that have stuck with you and that ought not to be forgotten?

Sally Wilson: I would say what was more successful from the perspective of carers were approaches that involved one-to-one contact, rather than passively receiving information, advice and guidance that was generic. It was tailored support that meant they saw somebody who understood caring and the demands of caring, a person they saw on a repeated basis, built up a relationship with and could establish trust with. That would be the key lesson. It would be the more intensive forms of support that were the most successful.

Q122 **Alex Burghart:** What was the experience of the pilots' interaction with different employers?

Sally Wilson: It was interesting. It varied tremendously. As you might expect, some employers were more ready to engage than others. For those sites that worked with employers, again, it could be a bit hit and miss in terms of reaching them. Some of them used local networks to reach employers, like Chamber of Commerce and things like that, and some relied more on cold calling. Their experience was that some employers were ready to engage and quite warm already and that some employers were not interested and did not engage. As you might expect, there was a bit of picking low-hanging fruit and those who were ready to engage were the ones they worked with. It was a mixed experience.

Q123 **Chair:** When we were in Jack's area, looking at talking to people as part of the pilot, the only employers that were mentioned were in the public

sector. The local authority and county council in Staffordshire were good. We then had an employers' forum and there were some charities. We did not have private sector employers. Sally, was that generally true of the results?

Sally Wilson: No, it was not the case that there were no private sector employers. Some who stand out for me were some of the supermarkets who were very ready to engage and have a lot of people working for them in the working-carers cohort.

Q124 **Chair:** If I have it right, Bethan said that she worked for Tesco.

Sally Wilson: That would make sense, yes.

Ruth George: She worked for an outsourced company.

Chair: She got the cold shoulder.

Ruth George: It would not have been Tesco.

Q125 **Chair:** No, it was not Tesco. Apologies to Tesco, which has enough on its hands today. Do you want to add anything to that about the balance between public, the third sector, and private employers? Sally, how did it spread out?

Sally Wilson: We were given information from each of the sites about the numbers of employers they reached. We are not able to be specific about the proportions.

It does make sense to me that a lot of them would be public sector, because of the nature of jobs that predominately women in the age group of a lot of carers are in do. They often work in teaching, health, social care and in public sector environments. What would happen with some of the pilots is they would approach employers who they thought would be receptive. Often the most receptive would employ people meeting certain demographic criteria. Often they would go for some of the larger employers, with the hope of making the biggest impact. In a lot of those areas the largest employers were hospitals and county councils.

Q126 **Ruth George:** I was going to ask, Sally, there are very structural reasons in employment law and in benefits that make it more difficult for carers to work on top of their caring responsibilities, such as the threshold for Carer's Allowance, lack of day one right to request flexible working or carer's leave. Do you think that any relaxation of those rules would assist the carers you were looking at to increase hours of work or to get back into the labour market? Were those a factor?

Sally Wilson: I think there is an appetite among all working carers to work as flexibly as they possibly can. What they want are employers to be willing and open to that. Some carers did not know that they had the right to request that. Once they did, and were supported to do that, many of them found that they could. Some of it is about increasing awareness and some of it is about employers being persuaded that it is good to offer this to carers.

Chair: Sally, huge thanks. It is interesting to meet one of the faces behind the project after our visit to Stoke, so thank you very much for coming in.

Examination of witnesses

Sarah Newton MP, Andrew Latto and Duncan Gilchrist.

Q127 **Chair:** Thank you very much for coming in. Sarah, might you identify yourself and the team with you?

Sarah Newton: I am Sarah Newton, Member of Parliament for Truro and Falmouth, and Minister for Disabled People, Health and Work in the Department for Work and Pensions. This is Andrew and Duncan, who are both part of the policy leadership team in the Department that support in this policy area.

Q128 **Andrew Bowie:** Morning, Minister. In the written evidence to the Committee the DWP said, "All employees are entitled to 28 days of paid annual leave. These days can be used by carers to meet their caring responsibilities". Do you think it is fair that carers have to use their annual leave to fulfil their caring responsibilities?

Sarah Newton: It is not the only thing that I said in that evidence. As we have heard, I was very proud that it was our Government since 2010 that brought in the ability for carers to ask for flexible working. That is incredibly important. As was set out in the ambition of the piece of work that the Prime Minister asked Matthew Taylor to undertake, which I think will be reporting imminently, we want to make sure that we have a workplace that meets the needs of the current population, so fuller working lives and the responsibilities of women towards caring. We absolutely need to be constantly thinking about what more we can do to enable people to participate in the workplace and balance their caring responsibilities. I am sure there will be more that we will be looking at in the future so that we can support people to care and work.

Q129 **Andrew Bowie:** It was the Conservative Manifesto last year that committed to introducing a statutory entitlement to carers' leave. When can we expect to see this on the statute book?

Sarah Newton: It is an absolute commitment. Across Government there is a lot of work going on at the moment. The Department of Health and Social Care really lead in this policy area, but it needs all parts of Government to work together, so we are involved, BEIS are involved. The Department will set out a Carers Action Plan in the next few months. I also see the development of the Green Paper on the future of care, both for working-age people but also for older people, as a really great opportunity to feed back, from this Committee's work and other work the Department has been doing, to ensure that we are doing everything

possible to support people with caring responsibilities and to enable them to balance that with working responsibilities at the appropriate stage in their lives.

Q130 **Andrew Bowie:** I know this is going off track slightly, but you sat through the evidence session, obviously you heard some pretty horrific stories and from Bethan working for the outsourcing company. Can I ask for your reaction as a Minister?

Sarah Newton: Unfortunately, because of where I was sitting, I could not see any of the names. I would really like to give a personal response but unfortunately I cannot.

It was really excellent that they came today. It was a very brave thing to do, to come and share their personal experiences in such a public forum. I really welcomed the opportunity to listen to them. It shows how much more we all have to do to prevent those things from happening and to overcome the barriers to providing, first, the support they so richly need and, secondly, the support to combine their caring responsibilities with employment. We had that very well-articulated, the importance for the individual—their sense of identity, their sense of work and their wellbeing—while they are combining it with their caring responsibilities. In my job, every day I meet carers. Every day I am listening to experiences. This is informing the work that we are doing cross-Government to improve services and to improve the outcome for people.

Q131 **Andrew Bowie:** Do you think DWP and Government, as a whole, should be encouraging employees to go out of their way to help carers more than they are right now—to find the help that they need?

Sarah Newton: It is important that both public sector and private sector employees do everything they can. We heard some dreadful examples today, but of course in your evidence you have received some good examples of organisations that are doing a lot and have carers' policies and are signed up to and implement a huge amount of positive—

Q132 **Andrew Bowie:** It is the luck of the draw though, isn't it? Some are great, some are not so good. It is the same everywhere.

Sarah Newton: Yes. What we have to do is make sure that every employer understands the benefits to them of enabling flexible working and the support that is required for carers and, at the same time, ensure that it is consistent right across the country.

Q133 **Chair:** Sarah, you are almost the exception among Ministers who come and sit in the whole session before they answer questions, so next time you come, please come and sit on our table with us so you can see peoples' names.

Sarah Newton: That is very generous.

Q134 **Chair:** Might I just take you back to a question that Andrew asked? You said there is this in the Tory party manifesto. You said there were all

sorts of pathways leading to that, but Andrew asked you when could we expect you to fulfil the commitment in the manifesto? When do you think that will be?

Sarah Newton: I honestly do not know the actual date we are going to bring that forward but it is a very clear commitment. I can see that, with the work we will be bringing forward this year, there will be opportunities to do that. But whether it is going to be this year or not, I don't know. There will be a huge amount of public consultation following the Government's response to the Taylor review. There will be a huge amount of public consultation on proposals on the future of adult social care for working age people and for older people. A huge amount of hard work is going on now, which we will soon see the fruits of in consultations on what we are going to bring forward in terms of legislation.

Q135 **Chair:** We proposed a Bill to the Government, and one way of hurrying this along would be if you could take back to Government that we would love the opportunity to introduce that Bill and you could attach some other things to it. It is all part of that Taylor review.

Sarah Newton: As I said, when the response is published to the Taylor review, it is going to have a response to your Select Committee proposals.

Chair: It is, yes.

Sarah Newton: I will be very much looking forward to listening and reading your proposals following this inquiry. There are going to be various opportunities this year for us to be able to take these ideas forward into legislation.

Q136 **Heidi Allen:** Just here to help drafting legislation, so you don't need to; that is the Select Committee's approach these days. Just a broad question: what we heard so much of today—and it is true in a lot of life—it is the good people who look out for people to make sure the right things happen: good manager, bad manager. Do you accept that there will need to potentially be a bit of a stick, and that is what the statute might need to be there for, because some employers just are not going to play this game otherwise?

Sarah Newton: You are absolutely right. I am very proud of the fact that we are very committed to advancing rights for workers. We want everybody in our country to have good employment and all employers to have good employment practices. We have shown our commitment in a range of measures we have already brought in, as well as firm commitments, in our manifesto and elsewhere, to further advance the rights of workers. One would hope that employers would voluntarily do the right thing by their employees. That does not always happen and that is when we have to legislate.

Q137 **Jack Brereton:** My question is particularly about flexible working and, as we have heard from a number of carers, flexible working is important in

many cases to allow them to stay in employment. We have also heard from employers that there is huge variability between what some employers offer and others don't offer, as the case may be. What are your views in terms of that statutory right to request flexible working? At the moment it is after 26 weeks. Do you think that should be improved?

Sarah Newton: First, I would say that personally I benefited from flexible working, like lots of women who have combined having children with work. We can learn a lot of lessons from the big journey that we have been on, in terms of both good practice and legislation around enabling women to combine childcare with employment. Facing the huge challenge of an ageing population, we need that huge culture change now to look at how we combine enabling people to care—it is often women but it is men as well—for an ageing population. I would have the same focus as we have on childcare on eldercare. Other countries use that term. We do not tend to use that term in this country.

But also we must be very mindful of the very powerful testimony we heard from a mum today about caring for a disabled child, and that responsibility is going to be continuing from childhood into adulthood. These are big culture changes that we need to bring about. Of course, legislation has an important role in that.

Historically, the rights of workers have been accumulated over time. Usually there is a presumption that you have to be employed for a particular period of time before you acquire a particular right. That is one of the aspects that the Matthew Taylor review was looking at: should certain rights like sick pay and others be acquired from day one? The Prime Minister very clearly signalled her intention to improve the condition for all workers in our country, by asking for an independent review of how we can do that across a range of workers' rights, accepting—as Matthew Taylor did in his report—that we have to balance out workers' rights with employment opportunities. Therefore, we don't want to create a situation where the obligations on employers are so demanding that it will stifle employment. There has to be a sensible balance there of good employment protection in a way that enables businesses to employ people.

Q138 **Jack Brereton:** When we had Aviva giving evidence to our Committee, it suggested that in the future it was going to offer all its new jobs to be flexible. Do you think all employers should be offering job adverts as being flexible, if possible?

Sarah Newton: I absolutely think so, for their own benefit. We have almost full employment in large parts of our country today, and I want employers to be prepared to look at a whole range of people who would love to work but are currently excluded from the workplace. Whether that is people with disabilities or people with caring responsibilities or people who are perhaps recovering from substance misuse or people leaving prison. I would love them to take a look at a huge pool of talent in our

country that, with the right support, can play their full part in society, which includes work.

Q139 **Chair:** Sarah, can I make one comment on your replies to Jack? On the first panel, Nikki talked about being a mother of a child with disabilities. It was a very different journey from that of other mothers, who were expecting their children to—and may be dreading it—leave the nest. For many of those who are not caring for children, you know you are caring for somebody, but the end result is going to be death. So there is in a sense this status between somebody who is caring for loved ones in that position. It is a different task from knowing that the end product is not going to be the success of the child moving into adulthood and their own careers, their own lives, their own loves, and so on. I want you to bear that in mind when you are thinking there was a comparison. We have learnt a lot from women with children being flexible and how they manage care. It is just another load on you if you are caring for somebody who you know that the end result is not life but death.

Sarah Newton: I completely agree with what you say. I am glad for this opportunity to clarify what I was meant. It was just I wanted to say that we put a lot of focus in society on enabling women to care for children and to work. We need to put equal focus on enabling people to care for disabled children or disabled adults or older people; that care and responsibility need to be seen to be as important by society as caring for children. It does not always fall on women. Men are carers too. I am that generation of women who have both children and older family members to care for, and this is predominantly an issue that many woman at my age and situation can personally identify with: the challenges of wanting to be yourself, reach your own potential—as so well described by the lady sitting at the table today—but also taking very seriously the very personal responsibility towards the loved ones in our family, whatever their ages.

Q140 **Steve McCabe:** I am sure people hearing this or reading the transcript will be very pleased to hear that you say you wish employers to be more accommodating, but you are a Government Minister. What they want to hear is that you are going to take some decisive action to make them be more accommodating. Isn't that what the Committee needs to hear today?

Sarah Newton: I am pleased it was this Government in coalition that brought in these rights.

Q141 **Steve McCabe:** I am talking about your wish list now. I am saying: don't we need to hear you say that there are decisive steps coming now?

Sarah Newton: What I have heard from the ladies at the table this morning—and I am sure you have heard in your evidence—is overwhelming: that people do not even know what their rights are today, and that companies are not fully implementing their rights. There is a big job we have to do in terms of making sure people understand.

Steve McCabe: It is important you drive them.

Sarah Newton: Yes, and I want to come on to that point. We want to, understandably, make sure that there is proper enforcement of the existing legislation. That is obviously going to come clearly out of your report. Then of course we will be looking to see what more we can do to take action in legislation, which I have said.

I would like to answer the question about the Jobcentre. Of course, that was disappointing hearing peoples' very negative attitudes towards the Jobcentre; people saying they would never even go there and then, when somebody did go to the Jobcentre, not having as good an experience as I would like them to have.

If I can I just say though that, where we have the full rollout of Universal Credit, if people need benefits above and beyond Carer's Allowance the work coaches that they will be working with have had good training in identifying carers and being able to signpost to local support. In the Jobcentres, there will be community partners who will be from carers' organisations, people with the lived experience of carers, so that the sort of service, which I am sure you and I would both like to see, is that somebody who is both combining wanting to work, or increasing their hours with caring, will get a work coach in front of them who has empathy and knowledge of what they are facing, and will be able to signpost them to support.

If somebody is going to a Jobcentre today, even in a Universal Credit full rollout area, and they are just asking to complete the forms for Carer's Allowance, and they are not looking for any other benefit, clearly they will not get access to the work coach. That is something that I heard very clearly from one of the ladies; I think the lady here who is 21. I am taking that away. I can quite understand how that happens, because the administration of Carer's Allowance is done by the Pension Service. The Jobcentre in that situation is a place to go to fill your forms in, not get access to the work coaches. It is our investment in work coaches, their training and the community partners and services, which enable people to get access to that service. We need to take that away so that, when that person comes into the Jobcentre to fill in that form, we can improve communications and referrals into other services, which they may benefit from.

Q142 **Chair:** There are bound to be carers watching this, Sarah, so you will be pleased if carers wrote into the Committee to give you examples of where it still isn't working as you want it to work?

Sarah Newton: Always. I am always delighted to receive direct contact from citizens who are experiencing the benefit system. I also work very closely with Carers UK and a number of organisations that spend time explaining the situation to me.

Q143 **Jack Brereton:** I want to come back on the point around those

flexibilities, and the fact that many carers do not know what they are entitled to. As you mentioned, we have heard that today but, also, during the visits that we had to speak to carers in Stoke-on-Trent, there were a number of carers who did not know what they were fully entitled to. You have mentioned the need for a cultural change. When we have such significant changes that need to happen, how do you see that cultural change happen?

Sarah Newton: It is not going to be a single bullet. All the different Government Departments need to pick up this challenge. We heard that it was often a GP that identified a carer for the first time. I have participated, as I am sure all MPs have, in working with their local carers' organisation during Carers Right weeks. I have stood in the reception area of my local hospital. I have been down in the town centres trying to engage people to get them to identify themselves as carers. That is the No. 1 challenge we all face, and then being able to signpost them to the support that is available.

GPs clearly have an important role to play. Teachers, social services, the Jobcentre, this requires a whole new strategy across Government, which is what the Department of Health are leading on, and I am very confident that, when they publish their carers' action plan, which is due in a matter of months, we will see these issues addressed.

Q144 **Ruth George:** Obviously, you heard from the carers this morning that some of them saw the earnings threshold on Carer's Allowance as limiting the work they could do or being able to move into work at all. Are you prepared to consider a tapering on that threshold, because it is very much a solid cliff-edge and work disincentive at the moment?

Sarah Newton: I absolutely agree with you that it is a barrier. That is why we have been increasing it and we are committed to increasing it this year. There are a lot of disallowances; all sorts of expenses that you can incur that don't go towards that cap.

Q145 **Ruth George:** Many people don't know about those expense allowances. The carer's expenses allowance for a paid carer is not even on the gov.uk website.

Sarah Newton: If there is any evidence of things not being on the gov.uk website I would be very pleased to hear it. When I looked at the information that is available to the work coaches, who would be supporting people in employment and to increase their hours, there are pages and pages and all different sections of good advice for the work coaches.

Q146 **Chair:** The cap is so low. All of us are lucky MPs who have salaries. We could take out the Carer's Allowance and hardly notice that we are spending it. Can I just bring you back? It is great the Government are trying to lift the threshold—I think I speak for the whole Committee—we would love you to do that much more radically but, also, Ruth's point about preventing cliff edges, to have it then phased out.

Sarah Newton: It is a good idea because it is the whole premise of Universal Credit that work always pays. That is the whole rationale behind UC, and something I very much support: that work should always pay and that, for every hour that people work, they should always be better off. I do think it is well worthy of consideration as we roll out Universal Credit.

I want to be very reassuring, because I am sure people from Carers UK and others will be listening to this, that the recognition of Carer's Allowance to be outside the benefits cap is important. For those people who are listening thinking, "Oh, my goodness", maybe now we are signalling that we are not going to be doing that in the future. We are very committed to making sure that it is outside the benefit cap.

Q147 **Ruth George:** It is a very low level of benefit obviously; at the moment £62.70 for 35 hours a week of care, which is a very low weekly rate for the role that so many carers do, which is far more than 35 hours a week.

Sarah Newton: I appreciate that, Ruth. Every year we are committed to increasing it, and we are increasing it but of course I would like to see it—

Q148 **Ruth George:** It is going up in small amounts, but still nowhere near the sort of minimum wage-type levels for doing the care. You mentioned about Universal Credit and tapering under that, but there are many carers who will not qualify for Universal Credit. Is it something that you will also look to do outside that system, because £120 a week, the proposed threshold-plus of earnings, plus your Carer's Allowance, still is a poverty trap, essentially? That is the maximum people would be able to get.

Sarah Newton: I am very aware that I have my colleagues, Duncan and Andrew, here who have not had a chance to come in here.

Chair: This is a policy area, so we would love to hear them talk on that.

Sarah Newton: Yes, given that they are so knowledgeable about how we feel that we are supporting carers better within Universal Credit—and that is very much our intention, to support carers better in Universal Credit—it is a good opportunity to hear a bit from them.

Chair: Jack, does yours relate to Universal Credit?

Jack Brereton: Mine is slightly different.

Q149 **Chair:** Fine, very good. Andrew?

Andrew Latto: Can I say thank you for inviting me and can I say two things about carers and the taper point, because we have looked at this? First, to be clear about Carer's Allowance, it was introduced in 1976. It has not been changed very much since, and earnings: I think the last benefit we have has a negative test of earnings, so you have to prove to us that you are not earning too much to get it, my caricature.

Q150 **Ruth George:** They have to prove every week what they are earning.

Andrew Latto: This reflects the circumstances in which it was introduced in 1976. It is something we do need to look at. The earnings rule in Carer's Allowance serves a different purpose from the one in Universal Credit, but I hear what you are saying. There is a technical point there about just tapering, if I might be a little bit technical. If you wanted a cost-neutral way of doing that—there would be bits of Government that will be quite keen on that—the taper would have to kick in at a low level, so we would need to look at how that would work. If you wanted the taper to kick in at the current starting point, where the earnings limit is, then obviously that would have a cost attached to it so we need to balance that.

Q151 **Ruth George:** One would hope that Departments would look at balancing the positive impacts of carers being able to increase their hours of work against the financial cost of doing so.

Sarah Newton: I am sure that is right.

Ruth George: At the moment, Carer's Allowance has always been set at just below the limit of 16 hours at the national minimum wage, so no one is able to claim Working Tax Credit at the same time as Carer's Allowance. That is a big limit as well. Is that something that the Department might be prepared to look at because it would not take much to take it above that?

Andrew Latto: Intrinsically, the replacement of Working Tax Credit with Universal Credit looks at that to some extent, so, Carer's allowance and Universal Credit, you will be able to claim it concurrently and you will, therefore, be able to claim Carer's Allowance and the in-work version of Universal Credit.

I take your point about the full economic case. It is simply looking at the benefit effects, so the aim of the effects of doing particular things in Carer's Allowance does not give you the full picture. It feeds into the employer point as well; productivity for employers. The case to make to employers is, "As labour supply contracts and ages, it is in your interest to do this. We just need to nudge you along a little bit". We need to take that kind of thing into account, in making a business case for looking at how we might change those sorts of roles in Carer's Allowance.

Chair: Duncan, do you have a message for us?

Duncan Gilchrist: I am afraid not. Carer's allowance is definitely part of Andrew's policy, so I would not want to trespass.

Sarah Newton: You asked a broader policy question, so we have looked at the detail of how it is functioning now. That is absolutely what I want to do. I do not want there to be disincentives in the system, both for employers or employees. As I said, we are looking very carefully at whether we have a Green Paper on the future of adult social care, and

the role that informal carers play within providing care to society is absolutely critical. There is plenty of opportunity and appetite to look again at what more we can do to support carers in their caring responsibilities but, also, to combine that with employment.

Q152 **Jack Brereton:** We have touched on the issues around current income, which is extremely important for those carers. I want to ask about the longer-term impact on individual finances, particularly around savings and pensions contributions. If individuals have to come out of work for care and responsibilities, that has a huge impact on their future savings and pensions contributions. What are you looking at in terms of those issues to try to improve the situation for those carers?

Sarah Newton: I am going to get Andrew to give you the in-detail technical answer, but that was something that the Government absolutely recognised and brought in NC3, National Insurance contributions, so that people—it tends to be women but not always women—who do take time out of work to care are not disadvantaged; that they can acquire their National Insurance contribution, so they can get the full state pension. But Andrew or Duncan might explain in detail how we do that.

Duncan Gilchrist: I can certainly talk about the state pension side of things. We have the Carer's Credit. We have about 14,000 people on that. To explain, that is essentially closing a loophole. We have a very wide range of credits available. Most means-tested benefits provide the National Insurance credit so, as far as the state pension is concerned, we have pretty good coverage of the overall carer population.

Q153 **Ruth George:** I find that quite surprising because you said 40,000 people—

Duncan Gilchrist: 14, one four.

Ruth George: But over 800,000 people claim Carer's Allowance and therefore—

Duncan Gilchrist: About 1.2 million.

Ruth George: —their earnings will be too low to pay National Insurance.

Duncan Gilchrist: That is true, but if they are claiming pretty much any other DWP benefit that is means tested, they will already be catered for. This is a loophole plugger. It is not a means of providing all the carers with a mechanism.

Q154 **Jack Brereton:** The figures that we have here suggest that that has failed to reach 97% of that target group.

Duncan Gilchrist: I don't think 97% of carers are without National Insurance cover. When we look at the number of people we know who provide some sort of care, which is about 4.9 million, were that to be the case, it would show through in our wider figures about state pension coverage, and it doesn't.

Q155 **Chair:** Nikki, are you covered? On the National Insurance credits?

Nikki Kimber: No, because I pay them myself because I work. I work two days a week.

Bethan Pound: Not that I know of, no.

Duncan Gilchrist: If you tell me afterwards which benefits you draw I can always check it.

Q156 **Chair:** Duncan, we would love to hear. Might you check that because I cannot believe those figures are adequate?

Duncan Gilchrist: We can certainly provide you with all the different benefits that provide National Insurance cover.

Q157 **Chair:** Yes, if you could. Is it possible for you to give us your estimate, Sarah, of the numbers of carers who are, whatever their circumstances, not building up a record for the new state pension?

Sarah Newton: We will give you all the analysis that we have on how carers—

Chair: Including that, if we can. Sarah, Andrew and Duncan, huge thanks for coming here this morning; it is good that you attended this inquiry. We will report soon.