Response ID ANON-D7MX-VKQA-K

Submitted to **Work, health and disability: consultation**
Submitted on **2017-02-17 23:26:52**

About you

Are you?

A voluntary or community organisation

Please tell us why you have an interest in this area:
I run a small voluntary website called DeafATW, providing information and support for Deaf people and interpreters having problems with ATW.

What is your name?

what is your name:
Darren Townsend-Handscomb

What is your job title / job role? (if applicable)

what is your job title or job role:
I do everything!

What is your email address?

Email:
darrenth@gmail.com

Can we use your email address to update you with progress on the topic of this consultation?

Yes, please keep me up to date on progress

Are you answering on behalf of?

an organisation (in an official capacity)

If you are answering on behalf of an organisation, what is the name of the organisation.:
DeafATW

Where are you/your organisation based?

England

If you answered other please tell us where you or your organisation are based:
London

All the questions in the consultation

1. Achieving lasting change: investing in innovation

1.1 What innovative and evidence-based support are you already delivering to improve health and employment outcomes for people in your community which you think could be replicated at scale? What evidence sources did you draw on when making your investment decision?

Evidence based support:
DeafATW is a website run on a voluntary basis, supporting D/deaf people with understanding and dealing with problems with ATW.

A key issue for Deaf BSL users in particular, and deaf customers in general, is that they often don't understand the information about ATW on the .GOV pages, nor understand the information ATW advisers send them. Deaf ATW customers consistently identify this as a barrier in feedback to surveys about their customer experience.

For example, following feedback from ATW customers, DeafATW has produced plain English versions of the information about ATW if you are self-employed, how to ask for a reconsideration and how to complain, and provides regular information updates, e.g. on the cap. You can see examples of this here:

http://www.deafatw.com/self-employed-etc
http://www.deafatw.com/how-to-complain
http://www.deafatw.com/updates

NB DeafATW is run on a voluntary basis, there is less BSL translation than there should be. However DeafATW provides 1:1 support in BSL to address this.

Not understanding information about ATW is a significant barrier to D/deaf people getting ATW support, getting the right support and progressing at work.

Feedback from a recent survey of ATW customers corroborates the need for this:

"... e.g. the Lower Earnings Limit (for self-employed.) [The] guidance for this on DeafATW was INVALUABLE. I am well educated and work in intellectual roles and deal with legal questions, but without [DeafATW's] guide, I would never have understood or formed a clear picture of ATW's requirements for self-employed workers."

Recommendation: The DWP can and should provide key information in plain English and BSL. The work DeafATW does in this area can be replicated at scale, with DWP developing in house expertise, identifying key areas of information in consultation with Deaf people, Deaf ATW customers and translators. (DeafATW would be happy to assist with this).

Recommendation: ATW could also use remote interpreting (currently provided by SignVideo) in order to translate emails and documents as required. This can be done easily and without policy change or contract amendment, by inviting ATW customers to call the adviser through SignVideo; the adviser then reads out the written communication, which the SignVideo interpreter interprets.

1.2 What evidence gaps have you identified in your local area in relation to supporting disabled people or those with long term health conditions? Are there particular gaps that a Challenge Fund approach could most successfully respond to?

gaps in your local area in supporting disabled people or those with long term conditions:
The market review of British Sign Language and communications provision for people who are deaf or have hearing loss:

The previous Minister for Disabled people, Mark Harper MP, initiated a DWP led market review, to address the evidence gap with regard to BSL and communications provision for people who are deaf or have hearing loss. Running alongside and feeding into the wider review was a separate call for evidence about communication support work provided by communication support workers (CSWs). The market review and report on CSWs are soon to be published.

Recommendation: In order to secure the supply of human aids to communication for D/deaf people information must be drawn from the market review, and appropriate action taken to ensure sufficient future supply in response.

Changes in support for Deaf people who use BSL:

Deaf people (BSL users) no longer benefit from services or resources to support them with bureaucracy or personal administration. These kinds of functions were often delivered by social workers for the Deaf, or charities who could provide ad hoc support on the back of funding for other services.

The reduction in funding for charities means that this has largely been lost, and most local authorities no longer have social workers for the Deaf. Sensory impairment teams tend to focus on statutory functions due to reductions in staff and budgets. CABs also often are unable to provide access for BSL users.

Advocacy services do not provide this service, and in many cases are also not accessible to BSL users.

These kinds of informal support avenues could in the past have helped Deaf people deal with job applications, offer letters, ATW applications, HMRC admin for self-employment, and so on.

Evidence of these barriers to employment are widespread, but largely anecdotal, reported in surveys, case studies, and case work with Deaf people.

Recommendation: DWP commission research into the existence of and impact of these barriers, on supporting Deaf people (with long term health conditions and access to employment).

However, DeafATW suggests that sufficient evidence of this gap exists in order to work to reduce the barriers to ATW, UC and other relevant government services without further research on need. Three are suggested below:

Recommendation: One way of addressing this gap, is through a 'universally funded' VRS and VRI scheme open to all Deaf BSL users. Comparisons between different schemes worldwide can be found here: http://www.gov.scot/Publications/2016/03/4903/2

For such a scheme to have an impact on accessing work, it would also need to be able to offer translation from and to English, e.g. with application forms.

Recommendation: Relevant information about ATW and applying for ATW is translated into BSL, and easily accessible. (See 2.1) The same applies re Universal Credit, etc.

Recommendation: Deaf people applying to ATW for the first time, or reapplying without support, are offered either an appropriate number of hours of face-to-face or remote interpreter support (e.g. three hours, though this should be piloted). The same applies re Universal Credit, etc.

Specialist services to support Deaf people getting and staying in work:

Previously there were specialist services for Deaf job seekers, such as Deaf Job Clubs, providing support in BSL. Such specialist services were also able address common knowledge gaps and skills development needs. These services have declined as generic service providers, primes, were awarded contracts for support for both non-disabled and disabled job seekers. There is evidence that such generic providers were unsuccessful supporting Deaf and disabled job seekers.

Recommendation: DWP and Job Centre Plus should look to refer Deaf and disabled job seekers to local specialist services, in order to deliver improved work outcomes. For Deaf BSL users, such services work best when staff are able to communicate with them directly using BSL.

1.3 How should we develop, structure and communicate the evidence base to influence commissioning decisions?

How should we develop, structure and communicate the evidence base to influence commissioning decisions?:
There is considerable evidence of barriers for D/deaf people to getting, keeping and progressing at work, and of the need and efficacy for specialist support to reduce those barriers.

Charities such as Action on Hearing Loss would be well placed to collate existing research, and identify any gaps. Collaborating with academic institutions such as DCAL would strengthen this.

Commissioners and procurement specialists often simply don't know about disability access issues relevant to assessing needs, and designing, selecting or procuring an appropriate service to meet those needs. They may not have the knowledge or resources available in order to address this knowledge and awareness gap. They may also lack awareness of this knowledge deficit, and so design, select or procure services that exacerbate barriers to disabled people's access to support, services, health and employment.

In order to influence and improve the quality of commissioning decisions and procurement processes a broad range of policy and action is required.

General Recommendations:

1. Government should engage with commissioners and procurement specialists in order to identify the nature and location of resources, support and incentives that are most likely to influence commissioning decisions and procurement processes in order to improve health and employment outcomes.

2. To promote resources and good practice through relevant commissioner's forums and journals.

3. To develop an online resource (or contribute to one that exist) for commissioners to better understand and access the recommended resources below:

4. To provide:

a. Template clauses, i.e. clauses that reflect best practice, that can be adapted to be incorporated in a variety of tenders.
b. Best practice examples, relating commission decisions to health and work outcomes.
c. Information about where to get expert support / advice, where expertise is lacking.
d. Other information resources (e.g. expert guides, high quality on line training, etc.).
e. Relevant research evidence. High quality sources re D/deaf people can be found from: Action on Hearing Loss; Deafness Cognition and Language (DCAL) Research Centre, University College London; Herriot Watt University, Prof. Jemina Napier, Deputy of School and Head of Languages and Intercultural Studies. Etc.

5. DWP should lead by example, and ensure that access, including communication access, is required to be specified in all tenders, and that bidders are required to specify how they will engage and work with Deaf and disabled people, and how they will meet relevant legal standards.

Recommendations to influence commissioning:

1. Framework Contracts (e.g. CSS and NHS SBS) should be required to include good practice (e.g. re access budgets, etc.). Framework guidance should provide sufficient information to ensure good practice when commissioning services related to health and employment.

2. That there is a requirement that access budgets are built in to all relevant tenders (e.g. commissioning health, employment, interpreting etc.). This reduces the likelihood of winning bidders winning because they have excluded those costs from their bid, and from having a disincentive to provide quality support, where they have not included those costs.

3. That there is a requirement that bidders specify how they will; promote the service to, engage with, work with, and assess the outcomes for, Deaf and disabled people.

4. That there is a requirement that bidders specify how they will meet relevant legal standards, including the Equality Act (2010), the NHS Accessible Information Standard, etc.

5. When the Disability Confidence scheme becomes more robust, being a Disability Confident Employer could be either a required criteria or be positively weighted in any public contract tendering process.

2. Building work coach capability

2.1 How do we ensure that Jobcentres can support the provision of the right personal support at the right time for individuals?

How do we ensure that Jobcentres can support the provision of the right personal support at the right time for individuals?:
There are barriers to Deaf people knowing about and accessing JCPs. These need to be addressed as well as ensuring that the right support is offered, accessed and is accessible.

Recommendation: Key information should be translated into BSL, be available in Easy Read, with clear processes in place to ensure that it is kept updated. Key information would include: what is the JCP service and how they can support Deaf people to find work, the job seekers agreement, job seeker requirements, etc.

This does not mean translating whole policies, but rather producing summaries of key information. This requires obtaining advice and support from Deaf specialist companies, and testing these translations with Deaf customers who use BSL, to ensure that they are useful and usable. Whilst it is good to see increasing BSL translations, for example, of this Green Paper, they are often rendered unusable by being too long and too English structured. Good translations take as a starting point the intended outcome of the communication, and knowledge etc. of the audience. However the current BSL translation commissioning process does not facilitate this outcome. This is not an academic or niche point. It's the difference between the DWP paying for translations that aren't useful, aren't used, and don't support Deaf BSL users to get into work, or paying for those that do.

DeafATW is happy to discuss this further, e.g. developing a guide for those commissioning BSL translation, to ensure it is useful, useable and cost effective.

Recommendation: DWP reviews it's BSL translation commissioning process, in order to identify and put in place processes that ensure translations are needed, useable, useful and cost-effective. (This may be possible within current contracts with interpreting and translation providers, with changes to processes and outcomes as required).

Recommendation: Ensure that Jobcentre Plus I.T. systems ensures that the communication needs of customers is required to be recorded, and is clearly visible when accessing customer information. (NHS AIS provides a good model for how this can be achieved). JCP staff to be required to ask for, record, and act on this information.

Recommendation: Ensure JCPs have access to on demand Video Relay Services (VRS), for use when contacting JCP, and when Deaf BSL users arrive at a JCP at short notice, or to make a simple enquiry. VRS should also be made available for JCP start to contact customers.

Recommendation: Ensure JCP staff use face-to-face interpreting services for longer meetings, as a matter of course. Use of access services to support engaging with Deaf and disabled people mustn't be disincentivized through having to manage local accounts and budgets.

JCP staff learning and using BSL:

It is useful to have Jobcentre staff who can use BSL, so they can engage with Deaf customers directly, helping them feel welcome, finding out what their communication needs are, and letting them know they have organised appropriate support. However, until staff have at least BSL NVQ level 4 (CertHE equivalent), or more realistically, BSL NVQ level 6 (degree equiv.) they are not fluent, and so not able to provide effective job seeker support in BSL.

Feedback is that staff with NVQ level 2 (CSE equiv.) or NVQ level 3 (GCSE equiv.) are sometimes trying to provide direct support to BSL users. This can be compared to trying support a French job speaker (who uses no English) using your CSE or GCSE French level skills. It may look like communication, is unlikely to be effective, and may end badly. (For more information about qualification equivalents: https://www.gov.uk/what-different-qualification-levels-mean/list-of-qualification-levels)

Recommendation: Jobcentre staff should use face-to-face or remote interpreting when working with BSL users, unless they have at least BSL NVQ level 4 fluency.

Learning from customer feedback and complaints:

Currently many D/deaf people feed back that ATW staff are defensive about, and avoid processing complaints. DeafATW has seen many examples of emails that support this. Changing this culture is important if you want to JCP to provide the right support at the right time, because complaints are the easiest and quickest way to identify when this isn't happening, to identify patterns within and across Jobcentres, and so take action to put it right.

Recommendation: Have an effective complaints handling function that draws learning from complaints and uses this information to improve services in a timely way. Currently complaints are not used in this way, to identify and improve support.

Recommendation: Make effective complaints handling a key staff objective, train staff on complaints handling, make complaints a source of information for learning and continuous improvement. Refer to the Ombudsman's principles for good administration and principles for good complaints handling.

Additionally JCP staff need to be able to refer Deaf BSL users to appropriate specialist (accessible and knowledgeable) services.

Recommendation: DWP should put in place monitoring and evaluation for JCP services, that include quantitative and qualitative data (for both staff behaviours and work outcomes) that incentivise and recognise effective work with Deaf and disabled people.

2.2 What specialist tools or support should we provide to work coaches to help them work with disabled people and people with health conditions?

What specialist, tools or support should we provide to work coaches to help them work with disabled people and people with health conditions?:
Knowledge and understanding:

In order to be effective, coaches who support Deaf and disabled people must have an in depth understanding of the main disabilities and long term health conditions, including invisible disabilities, and including Deaf BSL users, deaf English users, and deafblind people.

Coaches will also need to understand the opportunities and barriers for different disabled groups in different employment sectors, so that they can challenge myths employers hold, as well as be able to provide support and guidance for self-employment and entrepreneurs.

They also need to understand and be able to access ATW support for the people they work with, as well as other relevant benefits, including UC.

This level of understanding requires acquiring appropriate specialist knowledge. For this to be meaningful it must be substantial (not a day's Deaf / disability awareness training), involve Deaf and disabled people in the training, be supported with meaningful accurate resources, and be regularly assessed with clear knowledge targets.

Recommendation: Job Coaches are required to attend in-depth training (not single day disability awareness), where learning is assessed and a pass mark required. Training and support should be available on an on-going basis. Training and on-going support must involve Job Coaches meeting with and learning from Deaf and disabled people. (The current apparent policy that people who receive ATW not being allowed to provide training for the DWP should be dropped to facilitate this. Any perceived conflicts of interest can be dealt with on an individual basis).

Recommendation: Job coaches should have access to specialist support, both online resources and people/organisations they can contact, in order to address inevitable knowledge gaps in working with a wide range of disabled people.

Flexible processes and evaluation supporting innovation:

Job Coaches will need to be able to work with people with disabilities flexibly, in order to provide the right support at the right time for individuals. This requires that their work is not narrowly process driven, focussed on ticking boxes and quantitative outcomes. Instead identifying stretching goals (a career rather than job), innovating, trying things out, and accessing specialist support as required, should all be incentivised and recognised.

Feedback from Deaf ATW customers is that there is a noticeable difference between advisers who are outcome focussed, and those who appear to be policy / rule focussed, with the latter at times impeding work outcomes. One example of that is where advisers, who appear to have time driven targets, close down applications within 48 hours of leaving a Deaf person a message to respond. If the Deaf person is on AL, or has no access to an interpreter in time, the application is closed.

Recommendation: Job Coaches work to processes that encourage a flexible, person centred approach to supporting disabled people to find work; encourage stretch goals and aspiration for disabled people (not just a job); encourage innovation, and allow for experimentation and failure.

Recommendation: Monitoring and evaluation for Job coaches should include quantitative and qualitative data (for both staff behaviours and work outcomes) that incentivise and recognise effective work with Deaf and disabled people.

Providing Job Coaching to Deaf people using BSL:

Ideally Job Coaches would be fluent in BSL, and could provide a direct service. This would be likely to improve work outcomes as well as reduce the need for interpreting.

Recommendation: DWP should consider how Deaf BSL users can be recruited and best used to provide Job Coaching for Deaf BSL users seeking work, e.g. perhaps with a wider supra-regional remit.

Recommendation: Jobcentre staff should use face-to-face or remote interpreting when working with BSL users, unless they have at least BSL NVQ level 4 fluency.

Recommendation: Key information Job Coaches need to use with job seekers should be translated into BSL, and be available in plain English, with clear processes in place to ensure that it is kept updated.

Recommendation: Job Coaches should have access to on demand Video Relay Services (VRS), for use when being contacted, and for them to contact job seekers.

Recommendation: Job coaches should use face-to-face interpreting services for longer meetings, as a matter of course. Use of access services to support engaging with Deaf and disabled people mustn't be disincentivized through having to manage local accounts and budgets.

Access to Work:

Job Coaches will need to have an excellent understanding of ATW, and the ability to work closely with ATW in order to ensure job seekers are appropriately supported. This includes: Communication Support at Interview (CSI), the ability to pre-approve provisional support packages (increasing confidence of both potential employee and employer), and the ability for D/deaf people to trial communication support and/or equipment at work - in order to find the most appropriate cost effective solution. These are covered in more depth in 3.1

3. Supporting people into work

3.1 What support should we offer to help those 'in work' stay in work and progress?

What support should we offer to help those 'in work' stay in work and progress?:
Improve the Disability Confidence Scheme:

DeafATW welcomes the idea of the Disability Confident scheme as a central focus for government and employers focussed on improving employment prospects for Deaf and disabled people.

However, in practice there are many problems with the DCS. It is self-assessed, level 1 and 2 are tick-box easy and require minimal awareness or effort, and for level 3 you choose your own verifier. There is no independent auditing or follow up. The DCS could be good, but at the moment, makes limited difference, and can't work unless it is more robust, more challenging, audited, and followed up to ensure standards achieved continue. Currently it is does not have creditability

with Deaf and disabled people, as its successes and impact has been overstated.

Recommendation: Review the Disability Confident Scheme, to reduce reliance on tick-box self-assessment, and introduce greater challenge, commitment, learning, and need for behaviour change / action. Introduce independent auditing and follow up. The scheme as a whole needs to have robust and verifiable targets, relating to individual employer commitments, and to the wider goal of reducing the disability employment gap, rather than the number of employers who have adopted it, which tells us almost nothing. DeafATW agrees with the idea of a Disability Index as an evidence based approach to influencing employer behaviour.

Access to Work:

Evidence for the rest of this question focuses on Access to Work, as a pivotal service in supporting Deaf and disabled people to get, stay and progress in work.

Deaf people cite Access to Work as having been transformational in changing their work opportunities and career aspirations. They see the increase in Deaf people having customer facing, managerial, or leadership roles as being directly attributable to ATW, aspiration for younger Deaf people raised by having these role models.

Having an ATW that is fit for purpose is essential to help Deaf people to get, keep and progress at work. There are a number of ways that ATW can be improved in order to be more effective at this.

Currently ATW sometimes feels as if it has been designed for people having one job, with predictable work demands and regular meetings. Rather than having caught up with the realities of today's mixed economy, where people may have more than one employer, be both employed and self-employed, work under zero hours contracts, and work in pressured and often unpredictable environments.

The priorities below are informed by our case-work with Deaf people applying for and using ATW, and from responses to our recent survey (January 2017, 115 respondents, including Deaf BSL users, Deaf English users, deafblind people - full survey responses available on request).

Improvements to ATW:

Deaf ATW customers have fed back on a number of recent improvements with ATW. These include the ability to communicate in email with ATW advisers, the ability to communicate in BSL with the ATW call centre and ATW advisers using remote interpreting (SignVideo), and increased flexibility to use award budgets as needed (although the ability to be flexible was not consistently applied), personal budgets were an example of this flexibility. Deaf people fed back that the remote interpreting service could be made more useful.

Recommendation: Ensure all Deaf customers are clearly told they can use this service (some current customers complained of not being able to communicate with ATW in BSL, demonstrating that they did not know this was possible), extending the service to cover all parts of ATW, especially the finance team, and extending the service to cover translation of written correspondence. This latter can be done easily and without policy change or contract amendment, by inviting ATW customers to call the adviser through SignVideo; the adviser then reads out the written communication, which the SignVideo interpreter interprets.

Reduce or remove the minimum turnover required for people who are self-employed:

ATW customers fed back that the Lower Earnings Level (LEL) requirement is a barrier to employment in an increasingly mixed economy.

• Some report that part time self-employment alongside part time paid employment means that their turnover is too low;
• BSL tutors require ATW interpreter support for their first day, and for meetings / events outside the classroom, but don't teach enough hours to meet the LEL;
• Severely disabled customers or those with fluctuating conditions are unable to earn enough to meet the LEL.

Whilst we understand that the purpose of the cap was to reduce risk of supporting non-viable businesses, this appears to function as a blunt instrument, which also prevents disabled people from work in a mixed economy.

Recommendation: The LEL should be removed as a threshold to qualify for ATW support. Instead there should be guidance on what constitutes viable turnover, which takes into account; the nature of the self-employed business, the amount of support required, whether and how much the person is also employed, the impact of a person's disability, including of fluctuating conditions, etc.

The cap on ATW awards - a potential chilling effect on progress:

ATW customers report feeling a burden on employers who already have significant financial pressures (e.g. Local Authorities), have days without communication support where they are not able to work effectively, and are un likely to apply for promotion if it would require more communication support, taking them over the cap. (Evidence available on request).

One employer has withdrawn a job offer to a Deaf person for a work opportunity explicitly because of the cap and the cost on the employer. The employer is a Local Authority, so money is tight, and has Disability Confident Employer status. (This is unusual only in that most employers don't put such decisions in writing.)

The Deaf person fed back: "I'm … devastated about it and don't know what I should do next. The affect of AtW cap has resulted in withdrawn job offer which goes against the purposes of AtW scheme. Because of the effect of AtW cap I don't feel confident applying for similar jobs [for] career advancement ..." The Deaf person will tell their deaf friends about this, who will tell their friends …

The Equality Impact Assessment (EIA) that evaluated the impact of introducing the cap looked at the direct impact on those people who were receiving awards that would be above the cap. This however failed to identify the chilling effect of the cap on the aspirations and employment of other Deaf BSL users, who no longer see such senior roles as viable.

The cap, in conjunction with the impact of austerity, means that Local Authorities, charities, and DDPOs, etc. will struggle, may try to avoid, or may be unable, to make up the difference between the Deaf person's access needs and the cap.

Also for self-employed customers, where there is no 'employer' to make up the difference between the cap and their access needs, they report scaling back business plans, subsidising their own access by reducing the income they take, and are concerned that the additional costs will leave them uncompetitive against businesses that don't have these access costs.

The policy intent behind the scheme as a whole is to remove the financial burden on employers of providing access for high cost disabilities. The cap acts in direct opposition to this policy objective.

Recommendation: Remove (or significantly raise) the cap to ATW support. Replace it with greater scrutiny for higher value awards, and closer working on identifying appropriate cost effective solutions.

Recommendation: Government should review disabled people in work, with a focus on how disabled people progress, get and retain senior and leadership roles. This should specifically include Deaf BSL users who are the most likely to be affected in senior roles by the ATW cap.

ATW not getting things right:

Whilst some Deaf ATW customers report that ATW has improved, with more flexible and outcome focussed advisers, many also report of advisers not getting things right, and then ATW failing to put this right in a timely fashion. This includes:

• Some decisions and some reconsiderations are flawed;
• Incorrect information given by advisers about 'rules' (see below);
• Poor record keeping leading to repeated requests for information that has been submitted;
• Failure to recognise when ATW does not get things right;
• Failure to respond to communication;
• Mistakes with payments/poor record keeping in relation to invoices and claims.

Recommendation: Have an effective complaints handling function that draws learning from complaints and uses this information to improve services in a timely way.

Recommendation: Make effective complaints handling a key staff objective, train staff on complaints handling, make complaints a source of information for learning and continuous improvement. Refer to the Ombudsman's principles for good administration and principles for good complaints handling.

Advisers applying inconsistent 'rules', and relying on citing 'rules' rather than an explanation of a decision:

DeafATW has seen examples of illogical decision making, or decisions based on 'rules' that are not in fact rules, and the subsequent reconsideration decision not addressing the flaws in the original decision.

I have also seen examples where neither the decision nor the reconsideration decision are explained, but instead a set of principles is cited as having been applied, without explanation as to what evidence or information has been drawn on in applying those principles. The principles alone do not explain the basis for the decision.

Examples of these can be supplied on request.

Recommendation: If one doesn't exist, it would be useful to have a short simple myth-busting guide for ATW staff in order to dispel incorrectly held beliefs, updated as new myths are identified in customer feedback and complaints.

Create the ability to try different kinds of support:

Feedback from Deaf ATW customers is that they may not know what support or equipment exists that could meet their needs. When applying for ATW customers will usually be asked to say what support they need straight away, without knowing what resources and equipment there are and/or may meet their needs.

Providing information about and the ability to try, without commitment, support and equipment, will make it more likely that D/deaf people end up with a menu of support that meets their needs, potentially more cost effectively. For example, trialling remote interpreting may result in more Deaf BSL users choosing to have funding for support that is a mix of face-to-face and remote interpreting.

Recommendation: Provide a hub for potential and existing ATW customers, showcasing different human aids to communication and equipment to support communication (in accessible formats).

Recommendation: Review and implement ATW process to make it possible for customers to try different human aids and/or equipment before agreeing a final support package. Make it possible to do this on application, review, and when customers become aware of new services.

Promote ATW to employers and Deaf people:

There is considerable evidence that employers and Deaf people don't know about ATW. Action on Hearing Loss's recent research adds further support to that. Providing information about ATW to employers and disabled people will increase uptake, so supporting Deaf and disabled people stay and progress at work.

Recommendation: Promote ATW to employers, larger employers through Disability Confident Business Leaders Group, Business Disability Forum, etc. and to smaller employers through the Chambers of Commerce and Federation of Small Businesses.
Recommendation: Promote ATW to the public, including targeted promotion to Deaf people in BSL.

One-stop shop, information and resource hubs:

Deaf ATW customers and employers struggle to find information about ATW and resources. That is partly why DeafATW exists, and is again supported Action on Hearing Loss's recent research.

Recommendation: Government / DWP consider a one-stop-shop, with separate information and resource hubs, including:

• A hub for employers, bringing together information about ATW.

• A hub for potential and existing ATW customers, bringing together information (in accessible formats), online application, and contact details, including remote interpreting.

• A hub for potential and existing ATW customers, showcasing different human aids to communication and equipment to support communication (in accessible formats).

• An online portal for ATW, including the ability to apply, save & return, enter change of circumstances, conduct on-line invoicing, keep a track of your expenditure & remaining package and see when your review date is (the latter two identified as a priority by Deaf ATW customers).

o The existing portal needs reviewing - as some of the English could be less complex, e.g. 'genuine' at the beginning would not be understood by some Deaf people with English as a second language.

o To add access for BSL users. This could be a relatively easy process e.g. to use a remote interpreting / translation service (like SignVideo) to have them translate the answers into written English, and / or have questions / information interpreted into BSL.

o The 'how would you like to be contacted' choice should include BSL for those Deaf customers who can't access English.

Improve communication support at interview (CSI) for career development opportunities:

Deaf ATW customers report that CSI has improved, especially as the potential employer is no longer contacted and asked to pay for the communication support. However current fastest response times given are 48 hours, and sometimes take much longer. There needs to be the ability to respond more quickly to short notice interviews. Also many Deaf people don't know that they can request this support.

Recommendation: Produce specific publicity in BSL re CSI, and disseminate to young Deaf people, and the wider Deaf community. Introduce a guaranteed fast track response for genuinely short notice interview opportunities.

Make awards portable:

Deaf people have fed back that they believe being able to say to an employer at interview, "it's safe to employ me, I have ATW support" would substantially improve success rates, and reduce the risk of cost-averse discrimination that they believe underlies some difficulties in getting employment.

Also, having to apply for a new award when receiving a promotion to a new role or changing jobs is a disincentive to progress, as there is always the risk that the new award will not meet access needs. This is also a disincentive to employers

Recommendation: Consider pre-approving, subject to evidence and review, ATW support based on information available at the time. E.g. this might be based on ATW customers' similar previous jobs, or a minimum package of support that can be added to when more information is available. There are difficulties with implementing this, but it is worth serious consideration, as it could be a powerful tool in combating discrimination.

Recommendation: Where ATW customers are applying for a promotion or new post, the change should be treated as a review, in order to minimise bureaucracy and delays.

Deaf and interpreter awareness (DIA) training:

Deaf people have reported that their colleagues, manager and employer would benefit from greater Deaf and interpreter awareness, so that their work environment is a better place for them to work (increasing retention), and they are more likely to be considered for career development opportunities. However this is not something they think ATW would support, and it is usually not in their award.

Recommendation: When Deaf people first apply, or are reviewed, they should be told that DIA is an option they can request, and that it can be part of their award.

3.2 What does the evidence tell us about the right type of employment support for people with mental health conditions?

What does the evidence tell us about the right type of employment support for people with mental health conditions?:
That Deaf BSL users benefit from specialist mental health services delivered in BSL. The government should engage these specialist services as early as possible in order to support Deaf BSL users who have mental health needs whilst at work. Currently there are several supra-regional NHS and private providers of these services.

Recommendation: DWP look at how specialist mental health services, including counselling, can be delivered promptly in order to support Deaf BSL users at work. This is likely to include the need for services to be delivered remotely.

4. Improving access to employment support

4.1 Should we offer targeted health and employment support to individuals in the Employment Support Allowance Support Group, and Universal Credit equivalent, where appropriate?

Please explain your views:
Yes.

Deaf BSL users often find significant barriers to gaining employment and accessing job search and support services. Deaf people may often lack core knowledge and skills around writing job applications, CV's, interview skills, etc.

4.2 What type of support might be most effective and who should provide this?

What type of support might be most effective and who should provide this?:
Specialist services to support Deaf people getting and staying in work:

Specialist services for Deaf job seekers, such as Deaf Job Clubs, providing support in BSL, in order to be able to address common knowledge gaps and skills development needs.

Recommendation: DWP and Job Centre Plus should look to refer Deaf and disabled job seekers to local specialist services, in order to deliver improved work outcomes. For Deaf BSL users, such services work best when staff are able to communicate with them directly using BSL.

4.3 How might the voluntary sector and local partners be able to help this group?

How might the voluntary sector and local partners be able to help this group?:

4.4 How can we best maintain contact with people in the Support Group to ensure no-one is written off?

How can we best maintain contact with people in the Support Group to ensure no-one is written off?:

5. Supporting young people

5.1 If you are an employer who has considered providing a supported internship placement but have not done so, please let us know what the barriers were. If you are interested in offering a supported internship, please provide your contact details so we can help to match you to a local school or college.

If you are an employer who has considered providing a supported internship placement but have not done so, please let us know what the barriers were. If you are interested in offering a supported internship, please provide your contact details so we can help to match you to a local school or college.:

6. Reforming the assessment process

6.1 Should the assessment for the financial support an individual receives from the system be separate from the discussion a claimant has about employment or health support?

Should the assessment for the financial support an individual receives from the system be separate from the discussion a claimant has about employment or health support?:
Yes.

6.2 How can we ensure that each claimant is matched to a personalised and tailored employment related support offer?

How can we ensure that each claimant is matched to a personalised and tailored employment related support offer?:

6.3 What other alternatives could we explore to improve the system for assessing financial support?

What other alternatives could we explore to improve the system for assessing financial support?:

7. Assessments for benefits for people with health conditions

7.1 How might we share evidence between assessments, including between Employment Support Allowance/Universal Credit and Personal Independence Payments to help DWP benefit decision makers and reduce burdens on claimants? What benefits and challenges would this bring?

How might we share evidence between assessments, including between Employment Support Allowance/Universal Credit and Personal Independence Payments to help DWP benefit decision makers and reduce burdens on claimants?:

What benefits and challenges would this bring?:

7.2 Building on our plans to exempt people with the most severe health conditions and disabilities from reassessment, how can we further improve the process for assessing financial support for this group?

Building on our plans to exempt people with the most severe health conditions and disabilities from reassessment, how can we further improve the process for assessing financial support for this group?:

7.3 Is there scope to improve the way DWP uses the evidence from Service Medical Boards and other institutions, who may have assessed service personnel, which would enable awards of benefit to be made without the need for the claimant to send in the same information or attend a face-to-face assessment?

Is there scope to improve the way DWP uses the evidence from Service Medical Boards and other institutions, who may have assessed service personnel, which would enable awards of benefit to be made without the need for the claimant to send in the same information or attend a face-to-face assessment?:

8. Embedding good practices and supportive cultures

8.1 What are the key barriers preventing employers of all sizes and sectors recruiting and retaining the talent of disabled people and people with health conditions?

What are the key barriers preventing employers of all sizes and sectors recruiting and retaining the talent of disabled people and people with health conditions? :
Myths:

Employers beliefs about employing D/deaf people. These are evidence in Action on Hearing Loss's recent Working For Change report and myth-busting guide.

Recommendation: Myths are identified and used in campaigns and available on an employer's information hub.

Using the phone:

Many jobs require staff to be able to answer the phone at any point during their working day. As well as employers not knowing that Deaf people can use the phone, using remote interpreting services or NGTS, and that ATW can support these, the ATW cap places a real limit on the amount of support a Deaf person can get in such a job.

Recommendation: One way of addressing this gap, is through a 'universally funded' VRS and VRI scheme open to all Deaf BSL users. Comparisons between different schemes worldwide can be found here: http://www.gov.scot/Publications/2016/03/4903/2

Such a scheme would move the cost of providing such support (e.g. ATW) and access (e.g. DWP) to one central fund, and would remove a significant barrier to Deaf people's ability to work. I.e. all Deaf people would be able to use the phone as much as required.

It would also mean that Deaf people could contact other business, providers etc. rather than only be able to contact those who have decided to provide this service as an anticipatory reasonable adjustment, typically only larger businesses.

Employers and Deaf people's knowledge of ATW:

There is considerable evidence that employers and Deaf people don't know about ATW. Action on Hearing Loss's recent research adds further support to that. Providing information about ATW to employers and disabled people will increase uptake, so supporting Deaf and disabled people stay and progress at work.

Recommendation: Promote ATW to employers, larger employers through Disability Confident Business Leaders Group, Business Disability Forum, etc. and to smaller employers through the Chambers of Commerce and Federation of Small Businesses.

Recommendation: Promote ATW to the public, including targeted promotion to Deaf people in BSL.

Recommendation: Government / DWP consider a one-stop-shop, with separate information and resource hubs, including a hub for employers, bringing together information about ATW.

Cost:

Employers are often worried about the cost of employing a disabled person. Whilst many reasonable adjustments are free or low cost, now there is a cap on ATW awards, employers may face substantial costs, of £10,000, £20,000 or more. This is both a disincentive in itself against employing Deaf BSL users, or deafblind people, but also risks employers believing more widely that Deaf and disabled people may still cost them a lot, despite ATW support.

Recommendation: Remove (or significantly raise) the cap to ATW support. Replace it with greater scrutiny for higher value awards, and closer working on identifying appropriate cost effective solutions.

Recommendation: Government should review disabled people in work, with a focus on how disabled people progress, get and retain senior and leadership roles. This should specifically include Deaf BSL users who are the most likely to be affected in senior roles by the ATW cap.

8.2 What expectation should there be on employers to recruit or retain disabled people and people with health conditions?

What expectation should there be on employers to recruit or retain disabled people and people with health conditions?:

Recommendation: Government and DWP should lead by example, actively and visible recruiting, retaining and promoting Deaf and disabled people, sharing learning and good practice with other employers.

Recommendation: When the Disability Confidence scheme becomes more robust, being a Disability Confident Employer could be either a required criteria or be positively weighted in any public contract tendering process.

8.3 Which measures would best support employers to recruit and retain the talent of disabled people and people with health conditions?

Which measures would best support employers to recruit and retain the talent of disabled people and people with health conditions? :

8.3(a) What information would be reasonable for employers to be aware of to address the health needs of their employees?:

8.3(b) What are the barriers to employers using the support currently available?:
Poor communication from ATW advisers and inconsistent decision making:
As well as enabling employment, inconsistent decision making (see 3.1), unclear procedures, and poor communication (contact DeafATW for more information about this) can add to the perceived burden of employing a Deaf or disabled person.

Employers and Deaf people's knowledge of ATW:

There is considerable evidence that employers and Deaf people don't know about ATW. Action on Hearing Loss's recent research adds further support to that. Providing information about ATW to employers and disabled people will increase uptake, so supporting Deaf and disabled people stay and progress at work.

Recommendation: Promote ATW to employers, larger employers through Disability Confident Business Leaders Group, Business Disability Forum, etc. and to smaller employers through the Chambers of Commerce and Federation of Small Businesses.

Recommendation: Promote ATW to the public, including targeted promotion to Deaf people in BSL.

Recommendation: Government / DWP consider a one-stop-shop, with separate information and resource hubs, including a hub for employers, bringing together information about ATW.

8.3(c) What role could a 'one stop shop' play to overcome the barriers?:
Feedback from Deaf ATW customers, and employers (as also evidence in Action on Hearing Loss's survey of employers) is that many don't know about ATW. If they do know about ATW, they may not know what support or equipment exists that could meet their needs. When applying for ATW customers will usually be asked to say what support they need straight away, without knowing what resources and equipment there are and/or may meet their needs.

Providing information about ATW to employers and disabled people will increase uptake, so supporting Deaf and disabled people stay and progress at work.

Providing information about support and equipment, will make it more likely that D/deaf people end up with a menu of support that meets their needs, potentially more cost effectively. For example, trialling remote interpreting may result in a package that is a mix of face-to-face and remote interpreting.

Recommendation: Government / DWP consider a one-stop-shop, with separate information and resource hubs, including:

• A hub for employers, bringing together information about ATW.

• A hub for potential and existing ATW customers, bringing together information (in accessible formats), online application, and contact details, including remote interpreting.

• A hub for potential and existing ATW customers, showcasing different human aids to communication and equipment to support communication (in accessible formats).

• An online portal for ATW, including the ability to apply, save & return, enter change of circumstances, conduct on-line invoicing, keep a track of your expenditure & remaining package and see when your review date is (the latter two identified as a priority by Deaf ATW customers).

o The existing portal needs reviewing - as some of the English could be less complex, e.g. 'genuine' at the beginning would not be understood by some Deaf people with English as a second language.

o To add access for BSL users. This could be a relatively easy process e.g. to use a remote interpreting / translation service (like SignVideo) to have them translate the answers into written English, and / or have questions / information interpreted into BSL.

o The 'how would you like to be contacted' choice should include BSL for those Deaf customers who can't access English.

8.3(d) How can government support the development of effective networks between employers, employees and charities?:

8.3(e) What role can information campaigns play to highlight good practices and what they should cover?:

8.3(f) What role can government play in ensuring that disabled people and people with health conditions can progress in work, including securing senior roles?:
Learning from Deaf and disabled leaders:

As well as the Disability Confident leaders group, there should be a Disability Confident Deaf and Disabled Leaders group. This would provide valuable feedback and insight from the experience of those for whom the supported is intended to lead to success.

Recommendation: Establish Disability Confident Deaf and Disabled Leaders group, comprising potential, new, and established people with senior or leadership positions, to provide feedback and advice on the Disability Confidence scheme, ATW, etc.

Review the cap to ATW awards:

ATW customers report feeling a burden on employers who already have significant financial pressures (e.g. Local Authorities), have days without communication support where they are not able to work effectively, and are unlikely to apply for promotion if it would require more communication support, taking them over the cap. (Evidence available on request). 3.1 for more discussion.

Recommendation: Remove (or significantly raise) the cap to ATW support. Replace it with greater scrutiny for higher value awards, and closer working on identifying appropriate cost effective solutions.

Recommendation: Government should review disabled people in work, with a focus on how disabled people progress, get and retain senior and leadership roles. This should specifically include Deaf BSL users who are the most likely to be affected in senior roles by the ATW cap.

Government and the DWP should be model employers, leading by visible example:
Recommendation: Government and DWP should lead by example, actively and visible recruiting, retaining and promoting Deaf and disabled people, sharing learning and good practice with other employers.

Recommendation: When the Disability Confidence scheme becomes more robust, being a Disability Confident Employer could be either a required criteria or be positively weighted in any public contract tendering process.

8.3(g) What impact did the previous financial, or other, incentives have and what type of incentives would influence employer behaviour, particularly to create new jobs for disabled people?:
Deaf people cite Access to Work, without a cap on awards, as having been transformational in changing their work opportunities and career aspirations. They see the increase in Deaf people having customer facing, managerial, or leadership roles as being directly attributable to ATW, aspiration for younger Deaf people raised by having these role models.

8.3(h) Are there any other measures you think would increase the recruitment and retention of disabled people and people with health conditions? :

8.3(i) Do you think there should be a different approach for different sized organisations and different sectors?:
Yes.

Different networks and information sharing are required for small and larger businesses.

The impact of the cap on different sized organisations and different sectors should also be evaluated.

8.4 How can we best strengthen the business case for employer action?

How can we best strengthen the business case for employer action?:

9. Moving into work

9.1 How can existing government support be reformed to better support the recruitment and retention of disabled people and people with health conditions?

How can existing Government support be support be reformed to better support the recruitment and retention of disabled people and people with health conditions?:
It would be useful for ATW overview and application pages to also have clear links to other relevant information, including: employer fact sheet, customer fact sheet, the reconsideration and complaints process, and a link to the online portal.

10. Staying in or returning to work

10.1 What good practice is already in place to support inclusive recruitment, promote health and wellbeing, prevent ill health and support people to return to work after periods of sickness absence?

What good practice is already in place to support inclusive recruitment, promote health and wellbeing, prevent ill health and support people to return to work after periods of sickness absence?:

10.2 Should Statutory Sick Pay be reformed to encourage a phased return to work? If so, how?

Not Answered

Please explain your views:

10.3 What role should the insurance sector play in supporting the recruitment and retention of disabled people and people with health conditions?

What role should the insurance sector play in supporting the recruitment and retention of disabled people and people with health conditions? :

10.4 What are the barriers and opportunities for employers of different sizes adopting insurance products for their staff?

What are the barriers and opportunities for employers of different sizes adopting insurance products for their staff?:

11. Improving discussions about fitness to work and sickness certification

11.1 How can we bring about better work-focussed conversations between an individual, healthcare professional, employer and Jobcentre Plus work coach, which focus on what work an individual can do, particularly during the early stages of an illness/developing condition?

how can we bring about better work-focussed conversations between an individual, healthcare professional, employer and Jobcentre Plus work coach, which focus on what work an individual can do, particularly during the early stages of an illness/developing condition? :

11.2 How can we ensure that all healthcare professionals recognise the value of work and consider work during consultations with working-age patients? How can we encourage doctors in hospitals to consider fitness for work and, where appropriate, issue a fit note?

how can we ensure that all healthcare professionals recognise the value of work and consider work during consultations with working-age patients? How can we encourage doctors in hospitals to consider fitness for work and, where appropriate, issue a fit note? :

11.3 Are doctors best placed to provide work and health information, make a judgement on fitness for work and provide sickness certification?

Are doctors best placed to provide work and health information, make a judgement on fitness for work and provide sickness certification?:

11.4 Turning to the fit note certificate itself, what information should be captured to best help the individual, work coaches and employers better support a return to work or job retention?

Turning to the fit note certificate itself, what information should be captured to best help the individual, work coaches and employers better support a return to work or job retention?:

11.5(a) Is the current fit note the right vehicle to capture this information, or should we consider other ways to capture fitness for work and health information?

Is the current fit note the right vehicle to capture this information, or should we consider other ways to capture fitness for work and health information?:

Does the fit note meet the needs of employers, patients and healthcare professionals?:

12. Mental health and musculoskeletal services

12.1 How should access to services, assessment, treatment and employment support change for people with mental health or musculoskeletal conditions so that their health and employment needs are met in the best possible way?

How should access to services, assessment, treatment and employment support change for people with mental health or musculoskeletal conditions so that their health and employment needs are met in the best possible way?:
Ensure providers provide approximate communication support, meeting NHS AIS requirements.

12.2 How can we help individuals to easily find information about the mental health and musculoskeletal services they can access?

How can we help individuals to easily find information about the mental health and musculoskeletal services they can access?:
Provide information in BSL.

13. Transforming the landscape of work and health support

13.1 How can occupational health and related provision be organised so that it is accessible and tailored for all?

How can occupational health and related provision be organised so that it is accessible and tailored to all?:

Please explain your views:

13.2 What has been your experience of the Fit for Work service, and how should this inform integrated provision for the future?

what has been your experience of the Fit for Work service, and how should this inform integrated provision for the future? :

13.3 What kind of service design would deliver a position in which everyone who needs occupational health assessment and advice is referred as a matter of course?

what kind of service design would deliver a position in which everyone who needs occupational health assessment and advice is referred as matter of course?:

14. Creating the right environment to join up work and health

14.1 How can we best encourage innovation through local networks, including promoting models of joint working such as co-location, to improve health and work outcomes?

How can we best encourage innovation through local networks, including promoting models of joint working such as co-location, to improve health and work outcomes?:

14.2 How can we encourage the recording of occupational status in all clinical settings and good use of these data?

How can we encourage the recording of occupational status in all clinical settings and good use of these data?:

14.3 What should we include in a basket of health and work indicators covering both labour market and health outcomes at local level?

What should we include in a basket of health and work indicators covering both labour market and health outcomes at local level?:

14.4 How can government and local partners best encourage improved sharing of health and employment data?

How can government and local partners best encourage improved sharing of health and employment data?:

14.5 What is the best way to bring together and share existing evidence in one place for commissioners and delivery partners?

What is the best way to bring together and share existing evidence in one place for commissioners and delivery partners?:

14.6 What is the best way to encourage clinicians, allied health professionals and commissioners of health and other services to promote work as a health outcome?

What is the best way to encourage commissioners of health and other services to promote work as a health outcome?:

15. Changing the culture around work and health

15.1 How can we bring about a shift in society's wider attitudes to make progress and achieve long lasting change?

how can we bring about a shift in society's wider attitudes to make progress and achieve long lasting change?:

15.2 What is the role of government in bringing about positive change to our attitudes to disabled people and people with health conditions?

what is the role of government in bringing about positive change to our attitudes to disabled people and people with health conditions?: