

## **UNCRPD examination of UK State Party: Geneva**

### **UKIM Submission to the UN Committee on the Rights of Persons with Disabilities**

**24 August 2017 (Day 2)**

>> THERESIA DEGENER: I call to order the 349th meeting of the Convention on the Rights of Persons with Disabilities. Good morning committee members and good morning, Distinguished Delegates from UK and we hope you got some sleep because we have so many questions put on your shoulders and we are looking forward to your answers. And without further ado I give the floor to honourable Jochelson.

>> KAREN JOCHELSON: Good morning, everyone. Thank you for welcoming us back. We will go immediately to business because time is short. We will answer our questions in bundle according to theme and we will weave in the answers from the first session that we didn't complete or where they were picked up again in the second session as we go around the room. I'm going to start off with the further questions that were asked about the engagement of disabled people. I did talk very briefly about that in the first set of questions but I want to return to it with a bit more detail. As I mentioned, the UK mainstreams disability into the work of each department and that means they are responsible when considering developing and implementing policies for thinking about the best way of doing that. I described the work and health consultation yesterday, but I thought another example of consultation is actually in relate to our accessibility action plan, which is being launched today. This will lead to the production of a final accessibility strategy in 2018 and the consultation will engage with disabled people carers transport providers and local authorities to improve new ways for travel and identify gaps in our transport services which serve as barriers to disabled people. We also consult with disabled people and disabled people's organizations in our operational -- in the operational structures of government. So as two examples, on the personal independence payment or PIP, we work closely with national stakeholders to improve the service, and this includes face-to-face meetings in England, Scotland and Wales, with representatives from disability charities and support organizations. And we hear firsthand the perspectives of disability and support organizations and seek their input and views on specific initiatives and developments. On the employment and support allowance, we have customer representative groups who we consult with, and this work has resulted this changes to guidance and improvements to customers. So, for example, we have simplified the wording on the work capability assessment appointment letter. The ESA-50 health questionnaire and decision letter, which have all been reviewed with claimant representative groups. And we are also launching a new fact sheet that's being introduced for the work-related activity group. And finally we also have general engagement. So our representative for the department from education talked about flare, which was an initiative to consult with young people. The office for disability issues runs the disabilities charities consortium, which allows for frequent consultation with some of the leading charities and between the leading charities and the minister. And it allows -- separately also have regular meetings with disabled people's organizations. And then a final form of consultation is illustrated through coproduction on work around innovation. So the global disability innovation

hub was created as part of the legacy from the London 2012 Paralympic Games and it's a collaborative organization bringing together a number of partners to work with communities, academics, experts, and disabled people to drive innovation, co-design and creative thinking. And we hope that over the next ten years our ambition is that it will become the leading place to come to for research, to study, practice, and share disability innovations. I would now like to turn to the question about British sign language. Again, I mentioned yesterday that government organizations are increasingly using video relay services to engage with British sign language users on specific topics. We are aware of the insufficient pool of professional interpreters and trying to understand the causes for this. We are watching the work in Scotland with interest and in Wales, the Welsh government issued a statement October of 2016, confirming the commitment to promoting British sign language and as one of the communication tools necessary to ensure that people with sensory loss have full and equal access. My colleague from northern Ireland will pick up later about Northern Ireland activities. A committee member asked about the wheelchair symbol, and this is the international symbol of disability. We recognize that it could lead to some misunderstanding of the wide range of disabilities and we have noted your comment. Finally, we were asked about the impact of the UK leaving the EU on the European structural funds in Article 9. As you are aware, identifying all the funding sources is extremely comment but again we note your comment. I will now turn to my colleague for the office from disability issues who will explain how the UK is implementing the sustainable development goals, 10 and 11, domestic and humanitarian aid.

>> Thank you. The UK was at the forefront as negotiating the sustainable development goals and we will be at the forefront of delivering them, both domestically and globally. Domestically, we committed to embedding the goals across government. Each department is responsible for considering how their policies contribute to achieving those. Colleagues later today will provide further detail with regards to the specific goals mentioned by the committee yesterday. But I would like to take this opportunity to say that the UK agrees that accessibility is a precondition to full participation in society, and also that we cannot end global poverty without reaching disabled people. The UK is committed to ensuring that disabled people systemically and consistently benefit from international aid and humanitarian assistance provided by us. As such, the UK spends over 30 million pounds on disabled inclusion aid. We will significantly increase the number and the ability of disability inclusion aid, through programs including UK Aid Direct which supports small and medium sized UK organizations and UK connect, and the Small Charities Challenge Fund to strengthen grass roots development. Additionally, we look to develop new partnerships and build global coalition on disability inclusion. Share good practice such as the Washington group questions and increase action and investment, establishing the UK as a global leader in this area. I will now hand over to Paul with the he will, government to address the implementation of CRPD and several other topics.

>> PAUL DEAR: Thank you. Examples of where government infrastructure has been adopted to facilitate the participation of disabled people. It's enshrined in law our commitment to develop policy and make decisions on basis on the long-term good of Wales. We are committed to using the act in our decision making to improve the social, economic, environmental and cultural well being of Wales now and over the long term. Through the lens of the act, we looked at our corporate planning, our policy development and how we as a government influence others through the way

we deploy our resources. The act has placed a more equal Wales as a goal of all public services. And action to tackle inequalities is a feature of a range of government commitments. Public bodies listed in the act need to make sure that when making their decisions they need to take into account the impact they could have on people living their lives in Wales now and in the future. It will expect them to work together better, and involve people reflecting the diversity of our communities and look to the long term as well as focusing on the present. The act establishes a statutory future generations commissioner for Wales, whose role is to act as a guardian for the interest of future generations. Linked to this are the disability equality forum are chaired for the cabinet secretaries for community and children and made up of disabled and nondisabled people who are active in making progress in disability equality and belong to different fields of expertise. The forum provides an opportunity for stakeholders to advise the Welsh government and the wider public sector on the key issues that affect disabled people in Wales. I will pass over to my colleague from Scotland.

>> Thank you. Good morning, ladies and gentlemen. I would like to say a little bit about our approach to the implementation of the convention in Scotland. My government has welcomed the convention since its ratification. We regard its principles as being in line with the approach we have taken to promoting equality and human rights for disabled people since the evolution and it compliments our existing domestic legislation. We have also involved disabled people and their organizations in developing our response to the Convention from the start and I'm delighted that some of them have come to Geneva for this examination. I mentioned to the committee yesterday our ambitious plan, action plan for implementation of the Convention's principles which was published in December of last year. But that is only part of the story. Underpinning, this we recognize that we have responsibility to support our disabled people's organizations so that they have the capacity to work with us. Since the evolution our funding to disability-led organizations has increased year on year. We have recently awarded a record level of over 2 million pounds each year for the next three years to disabled peoples organizations. And I Min misters have made a public commitment to maintain this level of funding. This enables disabled people and their organizations to work directly with the government, and public bodies across Scotland to help shape legislation and policies which affect their lives. Some of this funding has been used to enable disabled people in Scotland to get involved in the work of the committee, including this examination process. Our funding also supports a number of specific programs, for example, our access to elected office fund, which enabled disabled people to stand for election. In the recent local government elections in Scotland, 39 disabled people were supported, and I'm delighted to inform the committee that 15 disabled people were subsequently elected, making a significant contribution to our commitment to increasing the representation of disabled people in public life. I will now pass on to my colleague from Brenda from Northern Ireland.

>> BRENDA HENDERSON: I would like to give a brief overview of how the Convention is implemented in Northern Ireland. All bodies impact the policies on disabled people through the disability discrimination 195 as amended in Northern Ireland and the Northern Ireland act. The equality commission is responsible for monitoring to promote positive attitudes towards people with disabilities and encourage participation by people with disabilities in public life. A record of the engagement sessions on the draft program for government 2016 to 2021 was

compiled and many of the issues raised have been included in either the wider draft program of government as a cross-cutting issue or the specific draft delivery plan for disabled people. For example, feedback from the consultation process indicated that there were data gaps on disability data in Northern Ireland and as a consequence one of the six key things within the draft delivery plan is to improve access to better information and data collection. In response, the department for communities in Northern Ireland commissioned research from Queens University Belfast and University of Austria. The report is expected to be submitted in the autumn of 2017. There's a plan to establish a Northern Ireland regional disability forum. This will give disabled people the opportunity to influence the government policies and directly impact upon individuals and as I said before, the draft respect for government remains under development and in the temporary absence of devolved government remains subject to the review and approval of future ministers. If I may, I will pick up on the issues of sign language at the end of my session. I will pass over to the government eye qualities office.

>> MATTHEW KING: Thank you. The committee has a number of core cases in the business services and asked about the number of disability discrimination cases, brought to all courts in Great Britain and what the breakdown was for reasonable adjustment cases compared with other cases. I would start by noting that in 2016/17, 3,781 disability discrimination cases were brought to employment tribunal in Great Britain, representing a slight increase on the previous two years. While we would, of course, prefer that many fewer cases are brought by employers, we would also see the statistics as evidence that our legislation offers people an effective means of redress where discrimination, including the failure to make a reasonable adjustment has occurred. Unfortunately neither the courts nor the employment tribunals break down cases brought beyond a disability descriptor. So there's no breakdown into which proportion of those cases relate to reasonable adjustments. So we cannot say for sure how many reasonable adjustment cases were brought, but we would imagine that they would comprise a significant proportion of the overall total. The committee also asked for further information on court provisions in the equality act of 2010 and they asked about this in relation to the United Kingdom's compliance with the Convention. Great Britain is considering a number of provisions in the Equality Act 2010, this has not been commenced, including Section 36 which is reasonable adjustment duty for common parts on leasehold premises. We recently implemented 165 and 167 of the Equality Act which outline the requirements for drivers of wheelchair accessible and private vehicles to provide disabled people with assistance and not charge them extra. We will keep this under review. The committee asked in particular about multiple discrimination. The UK does not believe that it is. Discrimination amounts to -- as we have previously stated a person may currently enforce their rights or bring their claim on more than one. Disability and age, or sex and disability but that cannot be technically combined and does not detract to the level of help. The claims on more than one ground may be presented on the same claim form and may well be heard by the court in the same sitting. (Inaudible). I would now pass it over to colleagues in the Ministry of Justice.

>> ELIZABETH GIBBY: I would like to thank the committee for the interesting questions of yesterday relating to aspects of the justice system in England and Wales. There was a question focusing on supporting clients with learning disabilities in the court system. I covered the approach to reasonable adjustments in the court system yesterday, but I would like to add to that. Issues of disability are considered

as part of the case management process in a court case, and there is considerable training for the judiciary across all jurisdictions. Where appropriate, adjustments can be sanctioned by judges to assist those with disabilities. For example, communication specialists called intermediaries who support witnesses to understand what is being asked of them and how to respond are brought into cases. Turning next to fees charged to take a dispute to court, in England and Wales we think it is right that those who use the civil court should pay a fee, where they can afford to do so. A system of fee remissions is available, known as help with fees, based on an assessment of financial means. Those who qualify may have the fee waved, either in part or in full, depending on their means. Guidance is also available on how to apply. Most employment-related disability claims are dealt with by the employment tribunal. The UK government had to consider access to justice, the costs of litigation and how we fund the tribunals. The United Kingdom Supreme Court recognized the important role fees can play, but ruled that we have not struck the correct balance in this case. We have taken immediate steps to stop charging fees in employment tribunals and are putting in place arrangements to refund those would have paid. We are carefully considering the judgment before deciding how to proceed. Now turning to questions relating to decision making, made under the mental capacity act, which applies in England and Wales. The committee felt that the mental capacity act system is not compatible with the CRPD. The mental capacity act empowers people to make decisions for themselves wherever possible and protects those who may be unable to do so. The act defines a standard of mental capacity that applies to everyone and recognizes that disabled people have mental capacity in all areas of life. We share the aim of ensuring that the individual is supported to make a decision. The second principle of the mental capacity act requires that all practical steps must be taken to help a person with a decision. This 2015, the UK government formed the national mental capacity forum to promote and raise greater awareness of the act. In February of 2017, the forum held an action day, the theme of which was supporting decision making. The action day was attended by 140 stakeholders, from health, social care, finance, legal, police, and housing sectors. The forum continually promotes supported decision making through its close association with the social care institute for excellence, and the social care for -- the social care institute for Excellency's website now hosts extensive materials on the subject which can be accessed both by the public and professionals. I'm now handing over to my colleague David in the Department of Health.

>> DAVID NUTTAL: Thank you and good morning. With respect to the mental capacity act 2005, the deprivation and levity safeguards protect people's rights to make sure that any deprivation of their liberty is in their best interests is the least restrictive possible, is assessed independently, and is challengeable in court. In determining an application, assessments are carried out by different individuals to ensure an independent view is included, including a role for an independent mental capacity advocate, as well as consultation with the person, their family, friends and carers and the appointment of a person's representative. The social care in England monitors the use of mental care act in home and health and care settings and it reports on the deprivation of liberty safeguards nationally in the state of care. With respect to the committee's questions on restraint and use of antipsychotics under the mental health act of 1983, antipsychotic medicine can be given for the first three months without the patient's consent. This may include patients who lack capacity and are accepting medication but who are unable to consent. After this period, the provider requires certification from a second opinion appointed doctor, SOAD and

has to request this from the care quality commissioner. The mental capacity act of 2005, allows for administering of medicines if it's in someone's best interests. A medical practitioner must confirm a lack of capacity and there should be consultation with the family, careers and lasting power of attorney. An independent advocate may be appointed in some cases. The person's previous wishes and leafs must be considered as reasonably practical to do. So decisions are made on a best interest assessment and this should be recorded in the care plan. The care quality commission published data in the annual reports from the use of second opinion appointed doctor this is categorized by medication, use of electric and community patients. With respect to the question asked by Mr. Babu relating to Article 5 yesterday, the UK government is committed to reform the mental health act. The plans are in development for this, but one of the motivations in doing so is to examine the disproportionate number of people of certain ethnicities, in particular black people who are detained under the act. I will now turn to the question of independent living. The Care Act 2014, where they pay to have support needs, the local authorities must carry out an assessment. They must determine whether the person has eligible needs for the outcomes what needs they have and how these impact on the well being. Where a person is assessed as having eligible care and support needs they must be met by the local authority unless the person has enough funds to pay for their own needs in which case the local authority has to meet the needs if the individual asks but the local authority doesn't have to meet needs when an individual asks if the need will be met in a care home. I will now hand over to my colleague from the department of work and pensions. Thank you.

>> Thank you very much. Martin asked about changes to benefits for people with disabilities. We are introducing personal independent payment, or PIP and a new more focused benefit to provide non-means tested support of disabled people who need it most. The purpose of personal independence payments is to provide financial support people with extra costs associated with a long-term health condition, or disability, and to focus that support on those who face the greatest barriers to independent living. It replaces disability living allowance which had been in place for over 20 years, largely unchanged and no longer properly took into account the needs of all disabled people. Currently 28% of all personal independence payment recipients and 38% of claimants who are previously on disability living allowance and have been recently assessed are receiving the highest possibility amount, compared to 50% under the disability allowance and that's 141 pounds 10 tax-free. About one-third of disability allowance the customers could go through the disability reassessment process. The large majority, 75%, have received an award of PIP with over 200,000 people receiving an increase in their benefits. And I would now like to hand over to my colleagues in Scotland to talk more about the independent living in Scotland.

>> I would like to respond to the information from Mr. Basharu, for the independent living in Scotland. The Scotland independent living fund was established on the 1st of July 2015 with the purpose of safeguarding the rights of disabled people to live independent lives. The public body, administered the 47.2 million pounds national fund which enables disabled people with high support needs to choose to live their lives in the community and live independent lives. As of the 21st of March, 2017, there were 2,517 IL. If recipients in Scotland. We have introduced a new scheme which comprises 5 million pounds to help young people with support needs make the transition in their lives. And details of the new scheme have been coproduced by the

independent living fund Working Group, the group of representation from the Scottish government, from independent living Scotland, disabled people, carers disabled groups and local authorities. I will now pass to my colleague Paul in Wales.

>> PAUL DEAR: Thank you. Continuing with this overview of the arrangements for independent living in different parts of the United Kingdom, in November 2016, the Welsh government announced that by 31st of March, 2019, all form of independent living fund recipients will have their care and support needs met with normal social care provision, having received an outcome and care and support assessment under the social services and well being Wales act 2014. This act places a legal duty on local authorities to assess the needs of all people in Wales and a requirement to meet needs that are identified. Under this requirement, authorities must assess those with needs, agree with them, the well being outcomes they wish to achieve and agree a care plan with them in order to do this. This applies to children, carer older people and disabled people who all have the same access to support. The enforcement of the act is a sea change from the previous legislation. They are now an integral part of agreeing what they want to achieve and how to do this. In doing this, people will quite rightly want to live as independently as possible whether that's at home or in the community. And I will pass back to Brenda in Northern Ireland.

>> BRENDA HENDERSON: Electroauthority can only be provided to a person without consent if a second opinion has been provided. When the mental capacity act northern Ireland 2016 is commenced, electroconvulsive therapy can never be provided without consent if the person has the mental capacity to provide consent. If a person lacks capacity, the electroconvulsive will only be provided in it's in the person's best interest and a second opinion has been provided. It requires consent or second opinion for electroconvulsive, ECT. It must be done through the regulation improvement authority. They contact the regulation and quality improvement authority to request a second opinion on their proposed treatment plan to administer electroconvulsive therapy. A second opinion doctor who is available to take on the case is required to visit and interview the patient and review entire case history and discuss the case treatment options and provide an opinion on whether or not the treatment lap to administer electroconvulsive is appropriate. In 2015/16, a total of 121 persons received 137 courses of electroconvulsive therapy in Northern Ireland. Of these, 93 were voluntary, where the person consulted and in 43 of these the cases were not able to provide consent and a second opinion was necessary. Electroconvulsive can be provided to a person without that person's consent in relation to the mental capacity act of northern Ireland to 16 in the treatment is supported by an independent medical practitioner, appointed for the purpose of providing second opinion by the regulatory body, the regulation and quality improvement authority. I will now hand over to the Ministry of Justice.

>> ELIZABETH GIBBY: Thank you. I will now turn to further questions that the committee raised on aspects to the justice system. First of all, the involvement of disabled people in jury service. Systems are in place for disabled jurors to provide information about their required reasonable adjustments, allowing arrangements to be made ahead of jury service. Jurors can have precourt visits to discuss reasonable adjustments with court staff. If it is impossible to make the necessary adjustments, the juror's service may be transferred to an appropriate court nearby. Jurors requiring third-party assistance within the deliberating room like a sign language interpreter are currently disqualified from jury service, because of the principle of the 13th juror.

Under common law, the jury are entitled and bound to deliberate in private. If a stranger, whether an officer of the court or not, is present for a substantial time during their deliberations, the verdict becomes invalid. Domestic courts are therefore bound against making such reasonable adjustments. I now turn to questions raised on what review is to take place on legal aid and changes from the legal aid sentencing and punishment of offenders act. The Ministry of Justice routinely monitor and taking action when problems are identified. The Ministry of Justice has made a commitment to publish both a postlegislative memorandum for the legal aid sentencing and punishment of offenders act 2012 as a whole and a postimplementation review of recent legal aid reform. Ministers will make an announcement in due course. The timing and the form of this review will be guided by an assessment of the extent to which reforms have reached a steady state and the research that is available. A review of the civil legal advice gateway in 2014 found. Service to be operating effectively, and the range of adaptation able to indicate those with additional needs. Following a high court judgment in 2015, changes were made to eligibility requirement for legal aid and to the exceptional case funding scheme. In 2016, we doubled the time limit for evidence of domestic violence which means more victims have been entitled to legal aid. We continue to work with domestic violence support groups to improve the situation further. A question was raised by the committee about who -- about those who are ineligible for legal aid but do not have the resources to pay for lawyers to represent them in a court case. The numbers of people coming to court without legal representation has risen since the legal aid changes, although these litigants and persons, as we describe them have always been a feature of our courts. Because representing yourself in court can be challenging, we have introduced a range of measures to support information and provide a wide range of support and that we deliver training to better equip. Judiciary to support these people in court. We also have invested in a strategy worth 5 million pounds since 2015, to increase support led by the advice, voluntary and pro bono sectors. Now turning to a question relating to deaf prisoners and the support they receive in prison. The safety and welfare of people in our custody is our top priority. Her majesty's person and probation service works to respond to the individual needs of all prisoners in their care. We have developed a national and consistent approach to all prisoners with care and support needs. Steps are taken to ensure that prisoners with hearing impairments or other types of disabilities are able to progress with their sentence plans and rehabilitate. The Ministry of Justice has a contract with a provider Clarion for arrangements for interpreter services. One component of this contract is specifically for Ministry of Justice staff, including those working in probation to access interpretation for deaf people. I would like to now hand over to my colleague Helen in the home office.

>> HELEN WHITE: I would firstly like to address the committee's question on refugees and asylum seekers. Cases are managed in consultation with safeguarding coordinators and the home office ensures that the claimant has support in place, including accommodation and access to appropriate medical support before taking a decision on their case. All asylum claimants are screened and offices will record any illnesses, disabilities and medical conditions at that time claimant and any dependents might have. Learn issue disabilities man I raised in the process. It provides for a flexible approach to be taken, that is tailored to the needs of individual claimant. In cases where an interview cannot be undertaken, provision exists to use medical evidence to support the asylum claim. Point of claim is available to asylum seekers at the point that they decide to lodge a claim. It's devised as claimants to

contact allume help who are able to give advice on the rights of asylum seekers and have extensive support in supporting reasonable adjustments. Decision making staff receive training on safeguarding issues, including identifying and handling cases where disabilities are raised and where required they will ensure that the appropriate reasonable adjustments are put in place. Regarding children, specifically, unaccompanied children are also I am viewed at the earliest opportunity to safeguard their welfare and identify any concerns or feeds. Part of the interview is devoted to solely capturing information about health and special needs. I would now like to turn to the committee's questions on the protection of women and girl as institutions and firstly I would like to mention the offense of willful neglect which was introduced in the criminal courts act where a person has been placed under the care of a medical professional in a hospital or care home. Instances will willful neglect, as well as abuse or exploitation can be reported to the care quality commission, local government and social care ombudsman or other government regulator. The independent inquiry into child sexual abuse is investigating historic cases of child sexual abuse within institutions, and in terms of current provision, the home office now funds the NSPCC whistle blowing help line which provides an independent mechanism for professionals to raise concerns where they do not believe that an institution is handling safeguarding concerns around abuse adequately. This brings us on to accessibility of services to protect disabled women and girls including those with psychosocial disabilities from abuse and exploitation. A core aim is to ensure that services are accessible to victims and survivors facing additional barriers and including disable. The new national statement of expectations sets out this aim to inform local commissioning of services. The violence against women and girls transformation fund and the tampon tax fund have already funded a range of projects to support this, including the shaping our life program, which is establishing systems that will ensure the needs of disabled women experiencing or at risk of violence, are met through service provision and that the Benardo's connection plus project Edinburgh are helping women facing violence. And the question about tasers. The independent police complaints commission or IPCC has maintained a close interest in this area. Since 2009, police forces have been required to refer all complaints about use of tasers to the IPCC. Important progress is being made on these issues, particularly regarding monitoring and all police forces are working to implement a new recording system, including Clarkistics of people on whom tasers are used and the outcomes and it's anticipated that Aesop set of data collected under the system will form part of the nay 17/18, home office data return. The threshold for any use of force means it's necessary to show that a lower level of force or indeed no force at all would not achieve the desired effect which is defend the person from unlawful violence, effect an arrest or prevent escape. In response to concerns about the use of tasers in mental health settings. Police and crime commissioners are asked to establish mechanisms to scrutinize tasers. It's now to local areas too decide the best way to do this and they will be sharing learning and justice system dates to training and guidance through concordia. Thank you. I would like to pass over to my Clegg free the department for communities and local government.

>> HANNAH MCNAMARA: Thank you and good morning. Mr. Tatic asked about the police and making other responders aware of the needs of disabled people in an emergency. The UK takes its duty to respond quickly and appropriately to the emergencies extremely seriously. The civil contingencies act of 2004 places responsibilities on organizations like local authorities, police and fire services to fulfil a set of duties around assessing risk and providing for civil emergencies. The act is

supported by guidance which states that emergency plans must make special provisions for disabled people. Additional guidance advises local emergency planners and responders to establish emergency plans which identify people who might be vulnerable in a crisis. In planning a public order operation police officers are trained to assess the situation. This was a question on accessible housing. New buildings are required by the building regulations to include access and emergency egress which should take account of the needs of disabled people. Tower blocks are required to have fire and emergency escape strategies which include the emergency egress needs of all people. Following the tragic fire at Grenfell tower, a building safety program has been established to identify buildings which are of concern through a thorough checking process. With the support of local fire and rescue services and a panel of independent experts governments supporting landlords and taking immediate steps to ensure the safe of residents and in reaching decisions on any necessary remedial works. In England, the homes and the community agency's national standards require social landlords to meet all applicable statutory requirements that provide for the health and the safety of occupants in their homes. Where appropriate contain hazards which are potential risk to the health and the safe of occupants, the local authority can require the landlord to make the necessary improvements to the property. Turning to Mr. Martin's question on the availability of accessible public toilets, building regulations set minimum standards for public toilets in most public buildings that includes standards unisex accessible toilets even in small buildings and changing places toilets 1,029 changing places toilets in the UK up from 140 in 2007. Good progress is made but we want to see more changing places in the right locations. Governments fund a website so that anyone can find a changing place toilet quickly and easily. Mr. Langvad asked about sustainable development goal 11. We recognize that well integrated building access is needed for a more inclusive society and that some buildings are not easily accessed in the UK. We are improving accessibility and supporting development and inclusive design. In England, the national planning policy framework states that local planning authorities should plan for a mix of housing based on the needs of different groups in the community, including disabled people. Planning policy and building regulations were updated in 2015. This included introducing two optional access standards in the building regulations to deliver accessible and adaptable housing. The second will deliver wheelchair accessible housing. I will now hand over to my colleague for the department of transport.

>> MIRIAM WADIMBA: Thank you. Picking up further on the sustainable city, goal 11 in relation to Article 9 of the convention, if I could outline the government's position on transport. The government is committed to improving disabled people's access to transport. At rail stations, the UK continues to invest in step-free access and other equipment such as tactile paving, induction loops, accessible toilets, waiting rooms and ticket offices, as well as upgraded passenger information, screens at stations. Currently 94% of buses in England comply with the legal -- with the legal accessibility requirement, including incorporating a wheelchair space and boarding ramps. The UK supports an accessible transport system that ensures all passengers who choose to fly, can enjoy the benefits that aviation brings. The UK's aviation sector regulator, the civil aviation authority has put in place, Performance framework for airports to set, monitor and publish a range of quality standards relating to the assistance service. The UK government encourages all bodies responsible for designing new major refurbishments to give full consideration to the accessibility needs of passengers for disabilities and reduce mobility, and design facility that can be used by all

passengers. If I could pass it back to my colleague from the department for education.

>> Thank you and good morning. I would like to thank Mr. Lovaszy about the bullying question. We real bullying can have devastating effect and people need a safe, disciplined environment in which to learn. All schools are therefore required by law to have a behaviour policy with measures to tackle bullying among peoples. We issue guidance to schools on their approach to bullying as part of their overall behaviour policy and we update this guidance regularly. The guidance makes clear our high expectations of schools over the prevention of bullying and the response to it when it does happen, including the bullying of disabled pupils. The independent schools regulator, Ofstead holds schools accountable. Inspectors gather a wide range of evidence from schools and their peoples based on discussions and in what they observe. We use national surveys to monitor the prevalence of bullying and these do show that peoples with special educational needs and disabilities are more likely to experience bullying than their peers. To support schools, we have provided 1.6 million pounds of funding over two years for four anti-bullying organizations. This grant aided activity includes a project run by the anti-bullying allowance that has a specific for those with special educational needs and disables and the alliance also runs an anti-bullying week for schools and this year's theme is all different, all equal. If parents believe their school has discriminated against a disabled pupil, they have access to the school's complaints procedures, and they can also make a claim of disability discrimination to the first tier tribunal for special education needs and disabilities. We support organizations such as IPS I. and the core on children's legal centers who help those thinking of making a disability claim. There was question about visually impaired people and training for the people teaching them. The key for providing special support is the visual education advisement service. Every local authority provides a service with there having qualified teachers with QTVIs. They are see in the education of children and young people with visual impairment from working in homes earlier settings, schools and post-'16 settings. They have wide ranging roles and enabling the visually impaired children and young people to fulfil their potential, including providing support for mobility and independent skills. The specialist nature of this key role is recognized by the requirement that QTV Is hold a mandatory qualification. I now hand over to my colleagues in Scotland.

>> Thank you. I would now like to address three issues raised by members of the committee. The first relates to the question posed by Mr. Langvad in relation to sustainable development goals and accessibility. In Scotland local authorities are required to consider the need for specialist provision that covers accessible and adapted housing, wheelchair housing and supported accommodation. Our policy designing streets has a strong focus on inclusive design and requires public bodies to engage with disabled people that are safe and inclusive. We publish he is Scotland's first travel framework in 2016. This was produced in close partnership with disabled people and their organizations and sets out how we will address 48 key barriers to accessible travel over the next ten years. We know that we need to do more but publishing the framework is an important milestone. We will continue to work with the disabled people over the lifetime of the framework to explore barriers and solutions and to ensure positive change: Turning now to the point raised by Mr. Martin on accessible public toilets. Scotland we have seen a significant increase in the changing place toilets since 2016. There are currently 151 across the country. We have also invested in a program to develop mobile changing places toilets, the

first of which was launched earlier this year. Our lead sector organization in this area has now appointed a champion to further increase the numbers across Scotland. Finally, turning to the point on intersex raised by yourself, Madam Chairperson: We added intersex to at preach to gender identity in 2014. This was in recognition of the specific issues intersex people may face. We have provided funding of 45,000 pounds each year since 2015 to one of our leading LGBTI organizations, the equality network to facilitate engagement between public bodies and intersex people. The funding supports their inclusion and engagement in the equality policy and in the development of best practice. We will be publishing our consultation on gender identity later this year, and as part of that consultation, we will fully consider the points in relation to the rights of intersex people. I will now hand over to my colleague Paul from the Welsh government.

>> PAUL DEAR: Thank you. I'm grateful once again for the opportunity to highlight a number of areas where there are distinctive arrangements in Wales in relation to issues raised by members of the committee, and in relation to the various articles of Convention. In particular, three topics. First, relating to safeguarding disabled people in health and care settings. The social services and well being Wales act introduced a number of key safeguards for adults through the introduction of a new duty to report to the local authority someone suspected to be an adult at risk of abuse or neglect. This Welsh account indedeuces adult at risk, and also infuses a new duty for the local authority to make inquiries or cause inquiries to be made to determine whether any action is required to safeguard vulnerable people. Healthcare inspectorate Wales inspects health services across Wales to check whether or not these standards are being met. Their inspections take place regularly and where possible, they are unannounced. During the inspections health care inspectorate Wales ask people about their experiences of care, talk to staff, and check that the right systems and processes are in place. They judge whether the standards are being met or not, and publish the reports on their website. Secondly, in relation to bullying in schools, in October of 2011, the Welsh government published respecting others, a suite of comprehensive antibullying guidance covering five key areas, including bullying, involving disabled pupil and people with special educational needs. This guidance is currently being reviewed and we expect a formal consultation to take place next spring. And then thirdly and finally, for me, on social housing quality standards, the Welsh housing quality standard sets a standard for all existing social housing in Wales. The standard requires homes, for example, to be in a good state of repair, safe and secure with doors and windows, smoke alarms adequately heated, fuel efficient and well insulated. In addition the standard requires homes as far as possible to suit the needs of household. All necessary aids and adaptations must meet the specific requirements of any residence, including those with disabilities and they these should be provided. I will hand again to Brenda from northern Ireland.

>> BRENDA HENDERSON: Thank you for the opportunity to outline what northern Ireland is doing to promote high quality sign language interpreting and the provision, of course is to support deaf children and adults and their families. In northern Ireland, the executive recently has a master course in sign language interpreting for 11 interpreters to improve standards of interpreting. And it also funded 15 sign language tutors to become qualified sign language teachers to improve standards of teaching in northern Ireland. The department for communities is currently analyzing responses to its public consultation on the sign language framework, which contains legislative

and policy proposals to promote both British sign language and Irish sign language and improve access to all public services for sign language users, deaf children and their families. The analysis of the public consultation will help to inform the development of an action plan for consideration and approval by incoming ministers. In addition, the department for communities provides courses to overcome the social exclusion experience by deaf children, and adults and their families, such as deaf awareness, and British sign language and Irish sign language courses to voluntary community sector service providers, universities and schools, family sign language courses and accredited British sign language courses to parents and families of deaf children and accredited British sign language courses for deaf children and young people of deaf adults. The department of communities is also working with two universities to develop suitable courses to increase the number of sign language interpreters available. I will now hand back to my colleague Karen.

>> KAREN JOCHELSON: Thank you. I will ask David from the Department of Health to pick up on the issue of unexpected deaths.

>> DAVID NUTTAL: Thank you. There was a question yesterday about unexpected deaths in health care settings. Improving patient safety across the national health service is a key priority for the government. The government wants to continue improving how the NSA, the national health service investigates and learns from mistakes and unexpected deaths. In England, the care quality commissions report learning candor and accountability, a review of the way trusts review and investigate the deaths of patients in England examined the deaths of people who had a learning disability or severe mental health problem across different trust types, including acute general trusts and community trusts. It concluded that trusts were not given sufficient priority to learning from deaths and must do more to engage families meaningfully. The Department of Health in England is taking forward, including NHTA improvement to respond to all the recommendations in the care quality commission's review report. This would include the rollout of the national learning disabilities mortality review program. I also wanted to just return to the question of redress for instances where people's care package was reduced, which was a question raised in respect to Article 19. Concerns were raised about unfavourable treatment would be initially dealt with through local complaints procedures and in this case, the local authority, where complaints cannot be resolved locally, complaints about health and social care can also generally be referred to the parliamentary and the health services ombudsman for health matters or the local ombudsman for social care matters. These are independent of government. The beyond, this people may challenge decisions in the courts through judicial review of the council's decision. That means the court is looking only for legal error in the local authority's decision. It does not conduct its own assessment of what is appropriate for the person. A recent example of challenge to a local authority's decision to reduce a person's care budget which failed is the case of Davey vs. Oxfordshire county council 2017. Thank you.

>> KAREN JOCHELSON: Thank you. Madam Chair and members of the committee, that concludes the UK's response to articles 11 through 20 and some of the remaining issues from -- on articles 1 to 10. Thank you.

>> THERESIA DEGENER: Thank you very much, head of delegation and thanks to all the distinguished members of the UK delegation. It opens the round for our third

round of questions, Article 21 to 33. 21 to 33 and first speaker is Mr. Kim, followed by Mr. Buntan, Mr. Basharu. Mr. Kim, you have the floor.

>> HYUNG SHIK KIM: Thank you. I'm glad I'm the first one to do the questions. I have a few questions on 25, Article 27, and 32. Please provide the scope and the extent of systemic, awareness and barriers linking persons with disabilities to access the highest attainable -- please ensure how the person with disabilities are causing discrimination in accessing healthcare in relation to sexual and reproductive healthcare issues, especially for persons with intellectual disabilities and girls with disabilities. Moving on to Article 27. This is an interesting question for me, because I examined the court implemented system in England. Your state report refers to wide ranging specialists disability employment provisions, such as work choice, new work program, access to work, control, et cetera. They all sound very promising, yet, it is difficult to come up with any detailed information on how the data on employment. When you have a 32% of persons with disabilities unemployed, can you still claim that your disability employment policies are effective? What are the measures available to ensure successful implementation of the green paper? What is the extent of pay gap between disabled and nondisabled workers. Are they going to deliver this. Can the state party outline how it will incentivize and support employers, particularly in areas of the economy to employ significantly more disabled people. Also, please explain the State Party's measures to reduce unemployment among persons with disabilities at workplace, also please provide specialized targets or strategies to eliminate designation and first affirmative action and reasonable accommodation. Moving on to Article 32, I used to look up defeat in the area of disability inclusive development. I note it had been in the forefront of advocating adoption of the convention by the UN, you had also affirmed that disability is an issue of human rights and also pursuit of equality. And criticized MDS for its failure to include people with disabilities. These are the basis to make it difficult to put a question to you, however, in terms of technical assistance, could you show us what efforts you have made for full participation? I heard earlier, you made reference to UK aid, for example. When I talk about full participation, not just a symbolic, but persons with disabilities and their representative organizations really play a key role in identifying, designing, implementing and monitoring disability inclusive projects. To take monitoring as an example, coordinations tend to undertake all the monitoring in terms of the outcome and performance, their own performances, I must say. How about training persons with disabilities, especially from the classroom to do their own monitoring themselves, monitoring in their own terms. I would like to -- I would like aid agencies mentioning their roles by making them redundant. How long should we wait to see aid agencies becoming redundant as a result of strengthening empowering persons with disabilities? Thank you.

>> THERESIA DEGENER: Thank you very much. The next speaker is Mr. Buntan.

>> MUNTHIAN BUNTAN: Thank you, Madam Chairperson and many thanks to the distinguished delegations from the United Kingdom for making effort to answer our questions. I need to, however, go back to revisit my earlier questions in some aspects. With regard to active participation of persons with disabilities through their representative organizations, it's been clear that some of the evolved governments have made effort and have through legislative measures empower enabled -- enabled persons with disabilities and their representative organizations to take part in decision making, however, I have not yet seen the overall infrastructure, the

nationwide infrastructure that has come up with a very sustainable, well-structured systemic way in ensuring true participation and that would have significant impact upon the role of persons with disabilities and their representative organizations in monitoring action. In Article 33.3, which I need to also ask whether the State Party has any legal mandate or legal structure in mind to ensure such -- such involvement and participation. With regard to accessibility, I did not ask earlier questions but I think there's some loophole and some questions that I need to follow because you are going to come up with the EU bill to take care of all EU laws once you step out of EU. I'm wondering what would happen to accessibility law taken from the EU directive, knowing the nature of, for example, web accessibility directive is make nearly a guideline and not a mandatory accessibility standards and you wonder, how are you going to take it further from there? And I also would like to know. Now I'm going to Article 24. Since you maintained the parallel system, between the mainstream and the special education and, well, I -- I don't think I would like to have a debate on this issue, but I would like to know what criteria that you used to determine whether a student with disability can go or cannot go to mainstream school education, mainstream education. And I would like to know if any mainstream school can have a rejection policy, would rejection be considered a form of discrimination? And I would like to know in the State Party has any plan to reform the existing established special education schools so that they can act in support of inclusive education system in the long run. Coming to Article 27, and I have been asking these questions to a lot of countries. I know that many European countries with a long history of welfare system, you have a lot of persons with disabilities working in a sheltered workshop. I would like to know if you have any plans in mind to transform those people working in the sheltered workshop to the more open, inclusive labour or at least through a support employment system? Number 29, and this -- sorry, number 28. This is a bit complicated, but I will try to address the issue that is connected to my yesterday's question. I know that you have an assessment to assess the eligibility of people to receive the employment and the support allowance or the personal independence payment, and many persons with disabilities fail such assessment which means they face sanction and because they are not eligible, and -- but the answer you gave us yesterday is you said the number of -- especially ESA claimants that were -- that were sanctioned is less than 1%. I thought that you calculate that monthly, whereas the annual sanctions rate is much higher than that. As far as I know it could be high, up to 18% annually which is quite high and it's a dreadful statistics. And you come up with some kind of measure to help change, to help solve this problem. You call it the mandatory reconsideration, but I -- it seems to me that it is very difficult for persons who are sanctioned to -- to be able to get this through the mandatory reconsideration because of the long process, and because people who are involved in this reconsideration do not want to make changes to the way assessment that was originally done by medical care professionals. So you end up having are most people who cannot appeal, or who cannot file for mandatory reconsideration. So I would like to ask if you have done any evaluation on the effectiveness of such mandatory reconsideration, so as to present persons with disabilities who are badly affected by this a long way of assessment and -- and attempt to also get the social attention benefits back so as they can live independent and be included in the society. My last question is Article 30, and this is also related to your Brexit. Now you know that the European Union through the CJ, court of justice, which rule that the matter of ratification of Marrakesh Treaty is an exclusive competence of the EU. Now that you are going to walk out of the ex U, I would like to

know the position of UK over the issue of ratification and implementation of the Marrakesh Treaty and I wonder if you have any plan in mind to ratify the Marrakesh Treaty because the UK will be regarded as one of the leaders to help facilitate access to published work by persons who are blind, visually impaired or otherwise print disabled. Thank you very much. And have a safe and joyful trip back.

>> THERESIA DEGENER: Thank you very much, colleagues, please keep in mind that we have 12 people on the list of questions and we have to finish by 11:45 to give the delegation time to reorganize for answers. The next speaker is Mr. Basharu. You have the floor.

>> DANLAMI UMARU BASHARU: Thank you, Madam Chair. Article 21, please inform on measures by the State Party to provide increased information follow deaf persons on regular broadcast services. Considering the telecom watchdog asks broadcast services to provide only 30 minutes of sign interpreted programming a month, could hardly be said to be adequate and meaningful. 25, please provide information on concrete and effective measures taken to address the concerns that women with disabilities who lack access to sexual and reproductive health and services including measures to sure that women with learning disabilities have spored to make their own decisions about the contraception and pregnancy. On 29, please inform on measures to fully include people with disabilities in the electoral process, including providing information in accessible formats, modes and means of communication to enable persons with disabilities to participate effectively, but as candidates and administrators of the electoral system. How many people with disabilities are part of the electoral commission. And as well put by my colleague Kim, please inform on measures taken to inform the U. K's international agencies such as Defig through the various country offices to develop concrete mechanisms for adequate and full inclusion and participation of persons with disabilities through their representative organizations and the design implementation and monitoring of programs that are disability driven and not merely on a consultation basis. Thank you.

>> THERESIA DEGENER: Thank you very much. Mr. Chaker.

>> IMED EDDINE CHAKER: Thank you, Madam Chair. Well, I'm going to speak about the political participation, Article 29. Please provide information on measures taken to guarantee the right of all persons with disabilities to vote by secret ballot and their own -- and their own or assisted by persons of their choice. And with full respect to the free expression of their will and the stakes taken to ensure the full accessibility of voting procedures, environmental facilities and materials. Of course, in Great Britain and in England, you have had a lot of experience of this kind. We all know the blind minister. We also know Mr. Law, the house of lords and also others that we don't know. We, in Africa, also we had the lady in South Africa as I think assistant minister. I used also to be member of parliament, but that's not enough. I think we have to maybe use these figures, and David Blanket and others to sell the image and in Africa in all the world, about the political participation and the right to have positions like this one for the persons with disabilities in all countries. Thank you.

>> THERESIA DEGENER: Thank you very much. Mr. Ruskus.

>> JONAS RUSKUS: Thank you, Madam Chair. My first question is on Article 24. Since ratification of the Convention in 2009, numbers of children with disabilities

being included in mainstream education has declined year on year this is because families of children with disabilities don't feel confident that schools can meet the needs of the children and schools do not have any real incentives to develop inclusive education. Please inform how the UK government has responded to the interpretive declaration, the commitment to build the capacity of mainstream education providers to be more inclusive for all children with disabilities and what efforts of the government has -- the effort the government has made to remove the desensitiveness. In the system that prevent and denied the right of children with disabilities to be fully included in mainstream education with all necessary supports and adjustments. Article 25, please describe the monitor for the disability matters training for the healthcare professionals mentioned in paragraph 125 and whether such trainings contain disability-gender sensitive focus and how persons with disabilities and their representative organizations have been involved. Please also explain the ways in which medical professionals communicate with persons with hearing impairments, deaf persons and persons with dementia. Please further explore about health care measures as concerns persons with dementia. Please also inform about measures taken upland by the State Party and involving governments to address the lack of mental health services and community-based services available across the country, especially in northern Ireland. Thank you.

>> THERESIA DEGENER: Thank you very much. Mr. Parra.

>> CARLOS ALBERTO PARRA DUSSAN: Thank you, Madam Chair. Thank you to the delegation also for their responses so far to our questions. Two questions, the right to education, the first question. As you know, this committee approved a general comment, number 4 on education. And we're very much promoting inclusive education, but we do see that you -- you maintained the two models of inclusive education and specialized education. I would like to know if the purpose -- do you intend to keep the two models concurrently or are you going to protect inclusive education or is your plan to maintain the two modernals so that with specialized education being an alternative? And then the second question refers to Marrakesh. Now, do you intend to ratify that treaty? Along with EU directives. Now, the Convention in general has been ratified. It still needs -- will it be ratified by the government now that the UK is leaving the European Union. Thank you.

>> THERESIA DEGENER: Thank you. Mr. Babu. After Mr. Babu, Mr. Kabue.

>> I have two questions. One on Article 35. Please explain how the State Party and the devolved governments in their efforts to implement this sustainable development goals, especially goal four and targets 4.5 and 4. a will be guided by Article 25 of the convention and the committee's general commitment number four of 2016. Now on statistics and article collection, Article 31. Please explain how the State Party in its efforts to implement this sustainable development goals, including goal 17 and target 17.18 shall be guided by Article 25 of the Convention. And finally, chair, this is -- this being my last take on the interface with the government of the UK, I would like to very much appreciate the very positive responses that the delegation of the government of the United Kingdom has given to us as a committee so far. But I have noticed that with exceptions to a few situations, we are not well taken. Most answers were a non-effort, to say we are doing everything very well. Good. That's fine. I would like to know if there are any important learnings that the delegation of the United Kingdom has picked from this interface with the Committee. And I would request if they cannot

at least mention only three of those most important ones and how the learnings will guide future policy and legislative development in the United Kingdom in favour of people with disabilities. Thank you, Chair.

>> THERESIA DEGENER: Thank you, Mr. Kabue.

>> SAMUEL NJUGUNA KABUE: Thank you Madam Chair. Thank you. It's good to interact with the UK delegation. I have three very, very short questions. In your opening statement, you indicated that in the coming years the UK will create over 1 million jobs for people with disabilities. The area of employment has been cited as a concern, and it would help if you could explain the measures being taken to create these good number of jobs. My other question relates to Article 32 on international cooperation. As you rightly said, the UK is considered worldwide as a lead, you know, partner in development, particularly in many of their law -- their laws of developed countries, and since much has been done in the UK on the area of disable, I would like to know whether in your development aid the disability component is considered because some of these countries will not see disable as a priority. But if there is a conditionality, like there is on gender, in aid to developing countries, for disability consideration, this would help. I wonder whether this is an issue that has been considered by Britain as the lead donor, partner, in many of the countries. Finally, I would like to ask something on Article 33 on implementation mechanisms. Presentations given have indicated that the United Kingdom implementation mechanism is not very effective because it is seriously underfunded. People with disabilities and their organizations have also indicated they have not been adequately involved, not just to be consulted, but to be involved, proactively in taking part in the monitoring and implementation of the convention as stipulated in this Article 33. What measures are taken to remedy these situations? Thank you very much.

>> THERESIA DEGENER: Thank you. Mr. Martin, please.

>> ROBERT GEORGE MARTIN: Thank you, Madam Chair. I've got two articles, and I want to come back to one as well. I'm concerned about the report's appearance of learning disabilities are not getting the support they need and often get their children taken off of them. Do you have any figures of how many families this has happened to since UK ratified the Convention? And what are you doing to help families stay together? Article 29, in a recent general election in the UK, some people with learning disabilities turned up to vote were turned away by the election officers who said they couldn't vote under the mental capacity act and they were not even under the act. What protections will you put in place to make sure that people with a learning disability have the rights to vote that they were entitled to as citizens of the UK? And going back to Article 12, because I felt you didn't answer my question. Still waiting for an answer on the graded guardianship. Guardianship and supported decision making do not go together. If you have supported decision making, you do not need guardianship. Why are some. Places in the UK looking at guardianship? Thank you.

>> THERESIA DEGENER: Thank you. Mr. Al Saif. Please.

>> AHMAD AL SAIF: Thank you, Madam Chair. I have just a couple of questions. Firstly, regarding Article 32 -- 31, sorry. Please provide up to date information on the development of system -- of systems of data collection and statistics based on the

human rights model of disability. And to date, statistics on persons with disabilities and the exercise of their human rights. The other question regarding that article, Article 32. Please provide information on national plans developed with the rights of persons with disabilities for the implementation of the agenda for sustainable development. Thank you very much.

>> THERESIA DEGENER: Thank you. Mr. Rukhledev.

>> VALERY NIKITICH RUKHLEDEV: Thank you, Madam Chairperson. I have questions on articles 24. Does the state have programs, requirements or methodologies for teaching deaf persons in the framework of inclusive education? Are there concrete examples of how staff working with children and youth with disabilities and general education schools how they involve them and help them participate and work with other young people in accordance with the sustainable development goal number four? Can you please explain what is meant when you say in your responses to the list of issues -- it applies to the list of issues that there are circumstances where educational requirements of a child with disabilities are best met by the assistance of a specialist who is not from the local community. Can you all explain how and under what circumstances the UK intends to withdraw its reservation to Article 26 of the convention? On Article 29, does the electoral commission of the UK involve nongovernmental organizations working with persons with disabilities in helping to create accessible conditions for polling booths and electoral material? Are political statements and televised debates of politicians provided with sign language interpretation? Are there candidates with disabilities would take part in elections? Are they provided with the necessary budgets for the electoral campaigns and does it provide for expenditure and reasonable accommodation and services -- and the services that they need? On Article 30, are there mandatory state programs for developing adaptive reasonable accommodations for enabling disabled people access to sports venues? Do deaf persons receive state support and for the Paralympics are there prizes given for deaf persons on par with other types in the Paralympic Games? Thank you very much.

>> THERESIA DEGENER: Mr. Lovaszy.

>> LASZLO GABOR LOVASZY: Thank you, Madam Chair. Let me begin by a personal note. The delegation taking part in a constructive dialogue Your Excellency. And I also thank you for the responses to my questions. The first question, we relate to Article 24, and partly echo my colleague's questions. After having consultations with DPOs, it looks to me that disability laws in all UK administrations do not support sufficiently the development of a fully inclusive education system because as reported, each piece of legislation has caveats that schools, colleges, refuse access to mainstream schools, college, where it is considered to adversely impact the education of nondisabled. I wonder if this is (Inaudible) -- as well as the spirit of the relevant laws with regard to the ongoing reform in the frame of assessment system for children with disabilities. In addition, I'm also wondering whether the UK government considers the mobile legal caveats that reported significantly of children and young people to be included in mainstream education. Please also comment that whether the funds provided for sign language interpretation service for deaf students was indeed cut and what other alternative measures were introduced, including the situation of the deaf students at universities. In relation to, this I'm also wondering whether there are universally applicable standards for the equal interpretation of

reasonable accommodation provide provided for students with disabilities and how the students who do not rely on sign language, including at the level of higher education, in entities of the State Party in order to make sure all students at universities in the UK have equal access to education, on an equal basis with others. I think it will be mutually beneficial for all parties since the British universities are very popular, even among foreign students whose mother tongue is not English. Do you have any relying on foreign students as well. And last but not least in the field of education, how does Welsh government, indeed, to incorporate the CRPD into the additional learning needs. My last question, we realize the specific question dealing with the access to reasonable accommodation, supported by the state budget in the UK. I learned that in scales of -- in case the national has service refuses an application for providing the funding of reasonable accommodation and while the application can turn to the information commissioner for remedy, it looks as if the procedure is not free for persons with disabilities, and it is burdensome for them. Please comment on this issue. Thank you.

>> THERESIA DEGENER: Thank you. Mr. Tatic, please.

>> DAMJAN TATIC: Thank you, Madam Chairman. Honourable Ms. Jochelson, and members of U. K delegation thank you kindly for your replies and since my other dear colleagues have raised questions, I wanted to ask about articles 24 and 33, with some different lenses. I will use up the time and I will ask three follow-up questions. My apologies with this question technique but first, I deeply appreciate the information about the accessibility transport strategy. I would like to hear if it's possible how that strategy will be resourced, funded and when more precise dates will take place. I was very happy to hear about the explanation of possibility when a person's care package has been reduced, the legal remedies that are available to him or her and now in the context of Article 28 relating with Article 19. If you can give us some figures and numbers and how many cases people went through the administrative courts complaints procedures the cases of reduction of care packages? And remaining on Article 28, I was very happy to hear that 200,000 persons have their PIP increase and that's really praise-worthy. I would appreciate if you could share with us the figures on the number of cases where PIP has decreased compares to the previous disability allowance. And last but not least, since I always love to finish on a positive note and these inactive dialogues and my friend Lovaszy is absolutely right. This has been one of the largest and most interactive delegations. I think only Canada and EU were the State Parties who had as large delegations as UK and that's praise worthy and also the involvement of independent monitoring mechanisms. It was really very intensive and much, much appreciated. Since this is your window to the world and I do know because I have been to your country many times. There are many wonderful tourists and cultural venues. I have visited some and I hope to visit more in the future and come back to the UK. So please provide us more information on accessibility of tourist and culture events in your country can be done, and especially, because I worked with the council of culture, I know the U. K has made some great efforts in making historic sites accessible to persons with disabilities. So, you know, as an example, good practice, you can share it with us. And I thank you very much and I wish you a safe journey home. Thank you very much.

>> THERESIA DEGENER: Thank you.

>> COOMARAVEL PYANEANDEE: Thank you, I have some questions but I have two questions, I need to ask. The first one is a follow-up question regarding an awareness raising. What persons with disabilities in UK. Are most concerned about a negative public attitudes towards persons with disabilities who are on benefits, fueled by the media, government representatives. What is the UK government doing to promote and generate positive attitudes towards persons with disabilities who are unable to earn a living through paid employment. The second question is about Article 30. There are many UNESCO sites, world heritage, in UK, including and the list of UNESCO sites, I found name accessible island, which is one of the Tristan Dacunian islands in the southern Atlantic. There's no doubt that none of the you UNESCO sites are accessible, not to speak of inaccessible island. There's a -- there's also no doubt that it is common challenge among all State Parties -- parties having UNESCO sites because UNESCO sites are considered to be untouchable and therefore not being adapted to the needs of persons with disabilities, however, we believe UNESCO sites must be also accessible for people with disabilities. We, living today in this planet are responsible for -- for texting and maintaining our heritage while all of us have the right to access and appreciate them. So please inform on concrete measures taken to adopt UNESCO sites to live up to accessibility standards and universal design principle. Thank you very much.

>> THERESIA DEGENER: Thank you Mr. Pyaneandee, please.

>> COOMARAVEL PYANEANDEE: Given that we are pressed for time, I will move straightaway to the question on Article 25. I could Forbe the chairman of the British medical association said, the government's ambition to put mental healthcare on a par with physical care remains a very distant perspective. That was a reaction to the issues carried out which clearly indicate that patients with mental health requirements were disproportionately affects in the sense that that they had to travel miles to get their treat. And in less than two years, that number of persons that had to travel increased by 40%. I will not get into the Steven Hopkins reaction to that. So -- and also, that triggered a reaction in -- in -- subsequent in a read out which demonstrates the rate of society linked with mental health issues and in particular northern Ireland the rate of civil society twice higher. My question is. What do you intend to do in relation to this state of affairs which is in our view very serious? My last questions relate to Article 27. The first is the disability employment schemes is funding itself. What then is the justification for maintain the 42,000 pounds a year cap? And finally, my question is: How do you -- how do you explain pay gaps between persons with disabilities and persons without disability who are the hole of the United Kingdom and if you want to create 1 million employment, how do you intend to address this challenge? Chair, as I'm the last before the rapporteur to speak, if we have been asking these questions, it's not at all that we are -- but a I'm a former student of the United Kingdom and want to see you becoming back as a world leader which at the moment, I'm afraid you are not, but D. POs, I congratulate -- from whom I draw my inspirations are, in fact, the world leaders in your country. Thank you.

>> THERESIA DEGENER: Thank you. Before I hand over the floor to the country rapporteur, I would like to ask some questions myself. I would like to thank the full conference for answering our questions and especially, I would like to thank the Distinguished Delegate ever Scotland for taking up the intersex, the subject of intersex persons because when I listen to your answers yesterday, I thought there was a misunderstanding because you related the -- the answers related to female

genitalia mutilation and but I was talking about intersex genitalia mutilation. While you give 456 million pounds, to the LGBT, it doesn't relate to the intersex people and the harmful practices which I mentioned yesterday which this committee and other Treaty Bodies consider as ill treatment and in some instances as torture, it will be stuck and I'm afraid giving some money to civil society, is not enough in order to stop serious human rights violations. Regarding Article 24, I would like to say that like Mr. Rukhledev, who I think mentioned 26, but you meant your reservation on 24, I would like to join with what he said, why is the UK not withdrawing its reservations to Article 24 in the State Party report you say that you believe that the right to education entails a choice between mainstream and special education. Please look at our general comment now before, Article 24 is not about choice. It is about the right to inclusive education. The in the replies to the list of issues, the reservation will be retained because you believe that in some instances, special education outside mainstream education is sometimes better, claiming to be a world leader in disability rights, which is I think a right claim but means taking responsibilities. You don't know how much easier you would make our work if a country like UK would take away its reservations on Article 24, because many, many countries who are doing much, much, much worse are hiding behind the UK, and this reservation. With respect to northern Ireland, I would like to ask the UK government, please explain why in 2015 '1680% of children with disability were without a statement of special education needs within the required 26-week period prescribed by law. And what steps is the U. K government taking to monitor and end the inform article inclusion of children from schools in northern Ireland and to guarantee their right to inclusive education without discrimination on an equal basis with others. I would like to remind you of Article 4.5 which says the provision of the present Convention shall extend to all parts of the state without limitations or exceptions. So I would like you not to hide behind nonexisting executives or local governments. If I may be so blunt. Then Article 27 and 28 are the last articles I refer to. I think your fit for work program is based on the understanding that disabled people are capable to work, and I think that is a right understanding, but, however, you -- evidence before us now and in our inquiry procedure as published in our 2016 report reveals that social cut policies has led to human catastrophe in your country, totally neglecting the vulnerability -- the vulnerable situation people with disabilities find themselves in. Please inform us whether there will be any meaningful engagement and monitoring and assessing of the effects of the social cuts and fitful program and please inform on cases where also I would like to know about cases where employers refuse to provide reasonable accommodation which lead to discrimination complaints and if such cases have occurred, what were the outcomes of the proceeding. Please also inform on what measures State Party has implemented the recommendations of the commission of parliament of U. K, especially the house of lords pertaining to the reformer. So for social protection of people with disabilities in the State Party and the recommendations from our inquiry report. And with that I hand over to our country rapporteur.

>> STIG LANGVAD: Thank you, Chair. It's difficult to keep track of all the questions, but I think you still have a few seconds to consider some questions from me as well. I have a mix of follow-up and new questions and some more overarching questions. First of all, I would like you to provide information including certificate data on measures to terminate pregnancy on the basis of potential impairment of the features across the State Party and the developed governments. I would also like you to inform on if and when the State Party intends to withdraw its reservation to Article 18

of the Convention. And please provide detailed information on how the State Party calculates the costs of independent living via the institutionalization of any persons with disabilities. I would also like you to provide information about the future funding of the office of disability issues and the equality and Human Rights Commissions to strengthen their work and please provide information about the governmental coordination mechanisms and the actions taken in its role as required by Article 33.1 of the Convention. And lastly, I would like you to explain how efforts to mainstream disability rights in the State Party is in line with HGT specifically goal 8, 8.5, target 8.5, goal 10, target 10.2 and please explain how organizations of people with disabilities are consulted in that process. Thank you very much.

>> THERESIA DEGENER: Thank you very much, and apology for going over our time. I know that you tried very hard to keep the time and without further ado, we will take a break now for 15 minutes to give you -- to give you time to organize your questions. 15 minutes break. (break).

>> THERESIA DEGENER: We are back and we have -- welcome back. And we have received a message from conference service that everyone is talking too quickly and too fast, and I apologize for that because I think I'm the reason behind it because I'm rushing everyone. But we also need to take into account that speak need to be able to work and interpreters cannot work if we talk too fast. So without further ado, I give the floor to the honourable head of delegation, Ms. Jochelson for answering our third round of questions.

>> KAREN JOCHELSON: Thank you very much, Madam Chair. Again, the UK delegation has bundled the various questions so we'll address them thematically and pass them from department to department. I will start with the questions related to rights to vote and participate in the electoral process. The UK has measures to ensure that all who are eligible can vote, and as some examples a voter with a disability is entitled to -- has the right to request assistance to mark a ballot paper and this could be by asking the presiding officer at a polling station to mark the ballot paper for them, bringing a close family member who is over 18 to help them vote, or bringing someone who is eligible to vote at the election, for example, a support worker as long as they are entitled to vote themselves. There's also use of a tactile voting device that may be fixed on to a ballot paper, so visually impaired people can mark their ballot in secret. You can also see a large print version of the ballot paper for reference. This has to be clearly displayed in a polling booth and a copy can be given to a voter to take into the polling booth, but a voter must still only mark their ballot paper. And finally, there is also assistance to gain access to a polling station. So returning officers must consider accessibility requirements when planning for elections and polling stations are selected in consultation with local disability groups. If a voter can't enter the polling station, because of a physical disability, the presiding officer may take the ballot paper to the elector. In order to continue dismantling barriers, disabled people may face in registering to vote or voting itself, the cabinet officer chairs an accessibility group that includes leading charities and key 50 electoral stakeholders. We are committed to ensuring the register to vote website is as accessible and user friendly as possible. And officials are currently undertaking an internal review of that site. In terms of standing for elections, the UK is keen to ensure that participation in decision making in parliament and local government reflects the makeup to our society and any participating in public life are removed. Section 104 of the equality act 2010 allows registered political parties to make

arrangements in relation to the selection of election candidates to address the under representation of disabled people in elected bodies. For example, by reserving a specific number of seats for disabled persons on an election short list, and Scotland also gave an example of its own work that enables disabled people to stand for elections. The access for elected office fund that was run under the coalition government, between 2012 and the election of 2015, to offer financial assistance to disabled people seeking elected office, the fund closed after that election, and an evaluation was subsequently carried out. The evaluation and any decision made in light of it will be published in due course. Finally, a question was asked about the number of disabled people on the electoral committee. We don't have details on that but I think it's relevant to reflect on the UK's public appointments. So we recognize that boards of public bodies should reflect society as a whole and we are committed to the increasing the public appointments. We recently appointed a new governments code with a specific focus on increasing diversity. The center for public appointments is working across white hall as well as with the different sectors to modernize recruitment processes and make sure that processes are aimed at making public appointments accessible to the widest group of possible people and on the comments related to peers and M Ps who have declared disabilities at their being role models we can only agree with you and say there are med ol's domestically and internationally for disabled people and those who are not disabled. I was asked questions around our approach to broadcasting and media. The government, UK broadcasters and content providers are committed to meeting the needs of both visually and orally impaired people. And the UK communications act of 2003 is regarded as across the world as a good example of a legal framework for television access services. Broadcasters are to meet statutory targets. These are expressed as percentages of the service provided, and they rise from a lower level to a ten-year target prescribed by the act and that is 80% for subtitling and 5% for signing. In the case of channel 3 and channel 4, the relevant target for subtitling is 90% and for the BBC, it is 100%. And this excludes BBC parliament which is has no obligation to provide subtitles but there's a public record of public debates provide in Hansard. Turning to the repeated questions on the involvement of disabled people, this is not set out in law, and I have explained how we main stream disability issues into the activities ever different departments. I thought it would be helpful to explain some of our learning from our fulfilling potential strategy. This was published in July 2013 and its vision was for disabled people to be able to fulfil their potential. Last year, we committed to reviewing the strategy in recognition of progress made in certain areas, but also to address any new issues impacting on disabled people's lives from 2013. We were also the fulfilling potential strategy also held various indicators which we found were not being very widely used. So we are currently developing our thinking on this, and we are planning to use our concluding observations from the dialogue to help inform our future thinking on engaged -- and our approach to engagement and data collection. And I want to -- touching on the questions again about attitudes to people on benefits. We are aware of the issues set out by members of the committee, and we have explained approaches that we have towards improving awareness raising. We have -- I spoke briefly about disability confidence, which is an approach aimed at employers to improve their awareness around employment of disabled people. The latest figures show that 4,800 businesses have signed up to this, and we viewed it as a very positive start towards dealing with stigma and awareness raising in the employment sector. Turning to questions about data. There are numerous published reports for the UK, which include data desegregated to

highlight how disabled people fair and these reports are based on a combination of routine and ad hoc surveys and administrative data. They provide rich information for service users in the UK and we very much value their impact. And I want to conclude with questions around the role of the office for disability issues, as a focal point. As I mentioned before, the office for disability issues supports the minister in her cross government, cross sectoral role and the role provides the office for disability issues with levers to act as the U K.'s focal point for the convention, and there are additional focal points in each of the administrations and heard throughout this dialogue, we have all given examples of how we approach our roles in this respect. I have also spoken about mainstreaming. In addition, the office for disability issues also facilitates direct discussion with disabled people across government. So supporting departments to meet expectations, set out in the civil service consultation guidelines to consult the full range of people affected by a policy. The office for disability issues currently has 16 members of staff, and is supported as well by lawyers, analysts and other specialists working in the department nor work and pensions. Our budget negotiated with work and pensions on the basis of upcoming work and priorities on a yearly basis. The equality and Human Rights Commission has and will continue to receive sufficient funds to enable it to fulfil its statutory functions. BAHRC has received its full spending review settlement for it to plan for the longer term. By the end of the spending review period, we expect the EHRC's budge tote remain above the minimum level required to fulfil the statutory functions currently set at 17.1 million. I'm going to reserve the question about our learning from the experience of dialogue towards the end because it seems to me a very good way for us to comment on what we have learned from the review process. So I will now turn to Miriam and the department for transport.

>> MIRIAM WADIMBA: Thank you. In response to the committee's request about disability transport strategy, as we previously mentioned, the government is launching an accessibility action plan. This is, launched today and which is for consultation to lead to a final accessibility strategy in 2018. The plan has been drafted with disabled persons transport advisory input and aimed to bring together a range of actions from across different modes of transport with the aim of increasing disabled persons access to transport. If I could pass over to department of communities and local government.

>> HANNAH MCNAMARA: Mr. Rukhledev asked about reasonable adjustment for access to sports venues and Mr. Tatic asked about access to tourist and cultural venues. It requires reasonable accessible. Support in the design and the commissioning of accessible venues can be found in the star guidance that comes with the building regulations guide on audience, spectator and refreshment facilities. Turning specifically to cultural venues we expect museums funded by direct government sponsorship or via arts council England to increase access and participation among groups less likely to visit museums, including disabled people. The 15 government sponsored museums and the British library have already implemented measures to make the buildings and the collections universally accessible with level or ramped entrances, accessible toilets and wheelchair availability. Facilities are provided for people with sight and hearing impairments, audio descriptions and guides and touch tours. Museums also offered tailored events for people with both physical and learning disabilities. The museum's review due to report in autumn 2017 looks at the accessibility of museums to different groups. It will commit government in our arm's length bodies to providing streamlined support to

police department its support which include increasing participation. We are committed to ensure that the arts are accessible to everyone. In the culture white paper, we made a commitment to continue working with the cultural sectors to improve physical access to venues. Attitude is everything and arts council England supported national portfolio organization, have a chapter of best practices which include like-minded businesses to improving accessibility beyond the legal obligations of the equality act. In 2016, attitude is everything, and commercial research which demonstrated a 26% rise in deaf and disabled people attending live music events. We note points plead by Mr. Ishikawa on access to UNESCO site and deaf people participating in the Paralympic Games. I will now pass to my colleague in the home office.

>> HELEN WHITE: Thank you very much. I will address the question on the UK's reservation to Article 18, while the UK government does not disagree with the essence of the article that people with disabilities should be treated in the same way as people without disability, this needs to be seen within national frameworks and legislation. Disabled people in the UK have the same right to British nationality as nondisabled people. British passports are issued to people who are deemed to the British nationals under the various British nationality acts. Disabled people can actually apply for the right to enter or remain in the UK in the same ways as nondisabled people. On ratifying the Convention, the UK answered a Convention that it does not create new or additional rights to enter or remain in the UK. The government's concern is that the language suggested in Article 18 can be construed as ambiguous and in part implies additional rights to nationality, residents and movement to people with disabilities compared to those without. The UK agreed to review the reservation 12 months after ratification to assess whether there was a continued need for it and the UK has consulted disabled as an interest in these issues as part of the review. I will now pass over to my colleague in the government equalities office.

>> MATTHEW KING: Thank you. The Chair raised a question of the availability of figures concerning reasonable adjustment cases brought in the United Kingdom. As we mentioned earlier, unfortunately, neither the courts, nor the tribunals collect separate data on reasonable adjustment cases brought before them. There is currently not the facility to do this open the IT systems used by the courts, however, we think it is likely that reasonable adjustment cases comprise a significant proportion of the overall total, as I say, unfortunately, we don't have the precise figures for that. I would also address the disability pay gap which was mentioned by the committee. The disability pay gap as reported is a concern, and in terms of an explanation, we need to consider this further, but as with the gender pay gap in the case of women, lack of opportunities of more senior positions in business is likely to provide part of the answer. The United Kingdom has made great strides in recent years on tackling the gender pay gap and the financial financial year, all employers with 250 or more employees are required to publish their gender pay gap and the gender bonus gap. The government plans to go further on this and in to the 17 election manifesto, it committed to asking larger employers to publish information on the pay gaps of people from different ethnic backgrounds. Recognize there is also evidence of pay gaps for disabled people, just that they face greater challenges in gaining employment compared to people who are not disabled. So this is a priority issue for the government and we will keep this under careful review. I now pass over to any colleagues in the department of work and pensions.

>> Thank you, Matthew. I would like to address the various questions that committee members raised around our strategy to get more disabled people into work, and also around changes to the welfare benefits system. There are currently over 3.5 million working aged disabled people in employment in the United Kingdom, which is an increase of over half a million in the last three years. And over the same time, the disability employment rate has risen by almost 5 percentage points to where it now stands at over 49%. The disability employment gap has decreased by 2.5 percentage points over the last three years. But we have nevertheless committed to moving 1 million more disabled people into work over the next ten years. And drawing together experts from my department, the Department of Health, the UK government established the work and health unit in 2015, to improve the health and employment outcomes of working aged people. You have all health conditions and disabilities. As a result, we published the work health and disability improving lives in October of 2016, which set out both the short and the long-term ambitions to reform the role of the welfare, health, and employer systems to improve lives. A result of this consultation is currently being considered, but I can answer some of the questions that the committee had on the evaluation and monitoring. We will use the labour force survey to monitor the number of disabled people in employment over the next decade. I would like to turn to the questions on mandatory quotas of disabled employees and sheltered workplaces. Several committee members mentioned what we can learn from the Convention and from the committee. And one of the very strong messages I took away from the early conferences of States Parties, was the importance of disabled people being employed and inclusive mainstream work places. So we're working with employers to encourage and support them to recruit disabled people, and create those inclusive workplaces. We have consulted on what expectations this should be on employers to recruit and retain disabled people and people with health conditions. And as I said, we are considering responses to that consultation. We are also working to get people who have been in sheltered work places into inclusive places and support them to make that transition effectively. We believe that access to work, the disability confidence scheme and the work of the work and health unit are all key to supporting employers to work with us to get a million more disabled people into employment. So that's what lies at the heart of our strategy. Disability confidence is about getting employers to think differently about disability, and to take action to improve how they attract, recruit and retain disabled workers. It encourages businesses to talk to other businesses, and they need to access the widest. It includes a whole range of employer practices central to ensuring disabled people can be successfully recruited, retained and developed. As part of their self-assessment, disability competent employers are aware that they have a disability awareness and the legal requirements of equality act. In addition to this, there's a commitment to ensure that managers are aware of how they support staff who are sick or absent from work and, again, it should cover the full legal framework. Staff carrying out recruitment should be aware of steps to make the recruitment process fully accessible. Proactively offering and making reasonable adjustments as required. Managers and supervisors understand how to support their disabled staff. There was a specific question about access to work. In the spending review, we announced a real terms increase in funding to help people with disabilities and health conditions return to and remain in work, including extra funding for access to work. We are also promoting access to work as part of disability confidence. I think it's important to note that access to work does not replace the duty an employer already has under the equality act to make reasonable adjustments. Instead, it

provides support that is over and above that which is a reasonable adjustment. The amount of help an individual may receive from access to work depends on their individual needs. And personal circumstances up to the current maximum of 42,100 pounds per year. The award limit establishes the principle access to work provided a consideration towards meeting additional costs, rather than covering all costs on an unlimited basis. This is about providing a generous but reasonable level of support that's found to employees, employer and the taxpayer and it's worth noting that no other government scheme helps to help people into work, offers unlimited support. I would now like to turn briefly to our employment programs. I was asked a number of questions about those and how we were evaluating them. Key programs work choice, voluntary specialist, employment program designed specifically for people who find it difficult to find or keep a job, due to their disability or health condition, and whose needs cannot be fully met through access to work and workplace adjustments. That program as introduced in 2010, and by March 17, nearly 110,000 people had started work through that program. And more importantly, the proportion of people starting work choice with a sustained outcome have seen a study rise over the lifetime of the program, increases from 13% in 2011/12 to 26% for the latest year for which statistics are available. The 2015 spending review announced a working health program would launch this year in Wales following the end of referrals to work choice and the work program and we intend to build on what we have learned from work choice to continue to support disabled people into main stream employment. I would like to turn now to questions around the welfare and benefits system. And I think firstly, just in terms of responding to committee recommendations we did submit a written response to the committee's report, I will say that the United Kingdom takes very seriously its duty to protect the most vulnerable people in society, while supporting those who can to find and retain work. We do carefully consider the impact of policy changes on people with characteristics including disability and went stand by reforms to the UK welfare system which is designed to provide adequate standards of living and special protections for vulnerable people. Reforms made to welfare do include numerous protections least able to increase their earnings. This includes some people needing additional support as a result of disability. And for example, these safeguards include exceptions from the benefit cap and the benefit freeze for people with disabilities. Regarding personal independence payments, Mr. Tatic asked me to expand on this of the numbers. It's parent to say that personal independence payment is different from the disability living allowance. Moving from disability living allowance to the personal independence payment does not mean that they are guaranteed the same level of award. The large majority, 75% of reassessed customers have received an award of personal independence payment with over half of all customers receiving either an increase in benefits which is the 40% or the 30 yesterday or 12%, their rewards remain the same. Many of these reassessed climates had not undergone any type of assessment of their needs for several. Since personal independence payment is a different benefit, and outcomes depend very much on individual circumstances and need, we always expected to Schee some cases where individuals find a change in the amount of support to which they are entitled following reassessment and also as is a needs based assessment, rather than a diagnostic assessment, we would always expect t see some variation between the disabled groups. Finally, I would like to turn to some of the questions regarding employment and support allowance. Firstly, there was a question about mandatory reconsiderations. We track mandatory reconsiderations to see trends and improve our decision making processes. We do believe mandatory reconsideration is an

effective process and critical to improve dispute resolution which benefits claimants as well as the department. And I draw committee member's attention to a review by the Social Security advisory committee, an independent body which supports the secretary of state in July of 2016, which echoed that view, and recommended some improvements which we are taking forward in the improvement plan. Finally, I was asked about sanctions. I think it's very important to make the distinction between the outcome of the work capability assessment, which determines efforts to implement toolment to the benefit and a sanction which is a reduction of benefits for failing to comply with -- to deliver actions that have been agreed with the department. I did give a monthly figure and I apologize if did not make that sufficiently clear, but as we said in our published benefits sanctions statistics we think this is the most relevant statistic because it shows how many people are affected by a sanction at any given point in time. Thank you and I will hand over to my colleagues from Scotland.

>> Thank you. Thank you and improving the employment prospects of disabled people is a key priority for my government in Scotland and we will host a major Congress on employability issues early next year. We are working with our partners towards a long-term ambition of having disability employment gap in Scotland. We are working with our national skillsa the skills development Scotland to make modern apprenticeships more open, attractive and available to people with disabilities. Other measures which will be introduced to increase number of disabled people in the workforce include the development and the delivery of devolved employment services in Scotland from April next year, the integration of health and employability support, further promoting and supporting the delivery of the supported employment model, and the publication of a youth employment strategy, as well as autism and learning disability strategies, and a development of internships and piloting projects for work experience for young disabled people in Scotland. Annoy pass to my colleague Paul from the Welsh government.

>> PAUL DEAR: Thank you. The Welsh government and the UK government have a joint ambition to support all people who wish to work to find sustainable employment, a major expression of this in Wales is our community's work program, which is jointly funded by the Welsh government, the department for work and pensions and the European social fund. The program provides the spoke support to those who face significant and complex barriers which prevent them taking up training or employment and this includes those with work limiting health conditions. The program will provide over 70 million pounds in employment support services, in the most deprived communities in Wales until 2020. It supports action to reduce the levels of persistent poverty experienced by participants and mitigate the risk of their falling into poverty in future. At June 2017, advisors have engaged with 9,900 people, of which 2,000 had work limiting health conditions and 1,000 were disabled people. The program has so far supported over 2,400 individuals into employment. An example is Mark from Wales who had been out of work for over ten years as a result of a car accident which left him with mobility issues and a degenerative spine condition. After receiving support from communities for work, Mark was offered paid work for a local community center. He's become a great asset and his manager says they could not do without him. He enjoys working at the center and is proud to be employed again. I will pass to colleagues from the Department of Health.

>> DAVID NUTTAL: Thank you. With regard to some of the questions that were raised by the committee relating to Article 25, the Department of Health funded the

development of disability matters an eLearning tool to provide training and understanding and supporting the needs of people with a disability. It was developed in partnership with people with a disability and their families. It is a free resource in the national health service, social care and other settings for people with a disability. With regard to mental health, this government gave parity esteem to the treatment of national health in the mental health service and has set up waiting times for mental health. This commitment was backed by significant increase in funding, spending on mental health has increased to a record 11.6 billion pounds in 2016/17 with a further investment of 1 billion pounds by 2020-21. The Queen's speech set out the legislation and ensure that mental health is prioritized in the mental health service. With regard to access to sexual and reproductive health and information services, the UK government recognizes the importance of equality of access to sexual and reproductive health information and services for everyone, including those with disabilities. The Department of Health's framework for sexual health improvement in England provides information and support tools to help ensure the accessible services and intervention are available. With respect to Mr. Tatic's question, we don't currently hold detailed information on the number of complaints or court cases against local authorities with respect to social care. Turning to the questions from the Chair, and to supplement our previous answer, the female genital mutilation act, makes FGM a criminal offense. These circumstances are where the operations are carry out by an approved American such as a medical professional and are necessary for a woman or girl's physical or mental health and this could, in certain sections include intersex. Decisions on whether such intervention is necessary includes assessment with parents or carers and the individual circumstances of case. With respect to the questions from Mr. Langvad, the UK does not look at relative costs of care and institutions in care, the community, over where to support people, but rather where is the most appropriate on an individual basis. With respect to abortion on the grounds of disability, under the abortion act 1967, disability selective abortions are currently available, right up to the moment of birth, but are only lawful where two medical practitioners are of the opinion that there's a substantial risk that if the child were born, it would suffer from such physical or medical abnormalities to be severely handicapped in the wording of the law. The abortion act 1967 has not extended to Northern Ireland as the main political parties were opposed to the extension of the act to Northern Ireland. I will now hand over to the colleagues from Northern Ireland.

>> Thank you for the committee's question on statement of needs in Northern Ireland. The Department of Education in Northern Ireland is to put in mace a new special educational needs framework during the 2018/19 academic year. The special educational needs act Northern Ireland 2016 provides a statutory basis to identify, assess, and provide support to all children in Northern Ireland who have educational needs. In relation to delays and special educational statements of needs, as a result of the Northern Ireland audit office report, a special educational needs program board has been set up to address the recommendations within the report, including that the educational authority must record and monitor reasons for all delays in issuing statements in order to take effective actions to reduce waiting times. I will now pass to colleagues in the Department of Education.

>> Thank you and thank you to committee members for your questions about the education of disabled children. I'm going to begin by quickly setting out our policy framework and our overall approach to inclusion. We are strongly committed to the

inclusive education of disabled children and young people. For England the children and family's act of 201 secures the general presumption in law of mainstream education in relation to decisions about where children and young people with special educational needs and disabled children should be educated. We consider that our reservation and interpretive declaration are entirely consistent with this. 98.6% of children in England are educated in mainstream schools and we have very high expectations of those schools. Parental choice is at the heart of our system. Parents have the right to specify the school they want named in their child's education, health and care program which is a statutory plan. That school must be named other than in certain specified and limited circumstances and schools must then admit the child. And while many parents of disabled children choose main stream education, others will want a specialist setting. Some children have complex special education needs which means that the best educational experience for them will be in a specialist school. We expect those special schools to work closely with main stream schools and to chair their expertise and specialist knowledge. Turning to specific questions, Mr. Buntan asked about the criteria for admission to mainstream schools. There are very strong rights in law for parents to express a preference for mainstream schools and for those schools to be named in the statutory education health and care plan. Once named, schools are required to make reasonable adjustments to enable disabled pupils to participate and if named in a plan, the schools must then under required in law to admit the pupil and we take very seriously any failure to comply with that. Mr. Ruskus asked about declining numbers of children of disabled children in mainstream schools. There has been a slight increase in the number of children in special schools which we are monitoring, although as I have said, 98.6% of English children are educated in mainstream schools. And that is very often a positive parental choice. He also asked what we are doing to build capacity in mainstream schools. Our statutory code is very clear on expectations, and we published last year new teacher standards which strategies a stronger focus on meeting the needs of disabled children and those with special needs. We also support the development of a wealth of materials and training resources for teachers, including an online portal from the national association of special educational needs and other specialist materials. All schools are required to have a special educational needs coordinator. I have listened very carefully to the comments from the Chair and committee members on the UK's position in relation to the reservation on Article 24. While we are strongly committed to inclusion, we continue to see an important role for special schools as part of the widest spectrum of provision, in particular for the small minority of children with complex needs. Importantly placement should be a positive choice by parents and we are very clear that we expect special schools to be part of the overall school community, supporting inclusion that is set out in the statutory code. There is also an important role for specialist units based in mainstream schools which have examples of excellent practice. We can continue to keep the reservation under review, taking account of new research, other evidence, and emerging international practice. Finally, I'm turning very briefly to the issue raised by Mr. Martin in relation to parents with learning disabilities and whether their children may be been taken into care. One of the key principles in the UK law is services provided by the local authorities and professionals should aim to keep families together, wherever this is in the best interest of the child. The aim is to promote the well being and safeguard children and the disability of parents should only be relevant if it affects the care for the child at home. The decision on whether to take a child into care is a matter ultimately for the courts who are independent of government, and where the child cannot being looked

after at home, the support should return home and they should return home with support available for their family and for their parents. Thank you.

>> Thank you, with reference to Mr. Lovszky's question, in the brief time able, I would just say that I believe the bill relating to traditional learning needs in Wales is fully in the spirit of the Convention but with reference to Mr. Babu's question about learning, one the learning points for me from this process will be to go back and ensure that in the implementation of that program, both the spirit and the letter of the Convention are adhered to as much as possible. And Article 30, in Wales entry is free of charge for disabled visitors to all UNESCO heritage site. I would invite Mr. Tatic or any of the committee members to come and visit us at their veeps. I will now turn to Northern Ireland.

>> People in Northern Ireland have worse mental health. Evidence cases that Northern Ireland has high levels ever often untreated post-stress disorder, and other mental health disorders as a result of almost 40 years of conflict. Suicide rates for disabled people are not routinely collected in Northern Ireland. A service framework for meant alt health is under development which the set out standards of care that individuals, their careers and wider family can expect to receive from the health and the social care system. The findings of evaluation of the action plan 2012 to '15, which is subject to executive approval will inform the prioritization of mental health service development. I will now pass back to Mr. Ishikawa colleague Karen.

>> THERESIA DEGENER: With that. I thank you for answering our questions. At 1:10, there will be no more interpretation, at 1:10 there will be no more interpretation but we will continue with 2 minutes for the and I give the floor now for the concluding statement by the government. Thank you very much.

>> KAREN JOCHELSON: Thank you very much, Madam Chair. On behalf of the UK delegation, I wish to thank you, Madam Chair, Mr. Langvad and the distinguished committee members for the opportunity to share the UK's experiences in implementing the Convention. We regret the time hasn't enabled us to answer all the questions we hoped to, but we take this as a positive sign of interest in practices in the UK and we look forward to continuing this discussion through the concluding observations. In the brief time I have, I would like to take up the question about the three learning points. We noted that -- we have noted this dialogue's emphasis on engaging with disabled people and disabled people's organizations in is decision making and policy making. We will reflect on this as we plan our next steps following publication of the concluding observations. We have also been asked frequently for data to demonstrate the impact of policies on disabled people. Question also acknowledge the benefit of strong data to guide policy development and policy making and monitoring and also its benefit to civil society and holding government to account. And finally, we were asked frequent questions about the involvement of the disabled people in awareness raising. We have seen this, the benefit of this in training provided, but today's comments have rarely brought home to us the need for increasing such practices. In her opening comments, the Chair talked about holding the UK to a higher standard. We think it is right that the UK is scrutinized carefully and we have welcomed this. It reflects our minister's commitment set out in the opening statement that the UK wants to continue to progress disabled people's rights and consult with disabled people on government policy and public services. And we have taken note of the wide ranging questions and the insights these offer for the UK

delegation. We also want to thank civil society for the commitment to engage so actively with the review process and we regard this as a sign of healthy, democratic debate about the nature and the future of UK society. I'm sure I speak for the whole delegation in saying this has been a fascinating discussion. It has been challenging at times but we feel the dialogue has been presented in the spirit of developing a greater understanding of how we deliver on our commitments to disabled people's rights in this Convention. The UK is determined to remain a global leader in disability issues and these last two days will certainly support us in this ambition. We look forward to receiving and considering the Committee's concluding observations. We are already looking forward to our next steps and we hope that the National Human Rights Institutions and civil society will join us in such considerations. Indeed, we invite them to do so. So helping us to continue our duty to progressively implement the Convention. Thank you Madam Chair.

>> THERESIA DEGENER: Thank you very much and I give the floor to the representative of the National Human Rights Institutes and thank you again, for the interpreters that you gave us more time.

>> Would thank the committee with the opportunity to make a closing statement, and for their probing questions over the past two days. We also take this moment to recognize the extensive and invaluable considerations of deaf and disabled people's organizations, leading up to and during this session. We commend the UK for sending a delegation with representation from across key UK government departments and the devolved administrations. This long anticipated dialogue leaves much to reflect on. From the outset, we have been struck by the disconnect between the UK delegation's replies to many questions and the lived experiences of disabled people. For example, we have a delegation that legal aid provides equal access to justice and this stands in stark contrast to overwhelming evidence to the contrary. We most with concern that the UK delegation has chosen to focus on describing measures on paper with little or no evidence, whether we are disabled people's rights in practice. We are also disappointed that the devolved administrations did not provide information in response to all relevant questions and deprivation of liberty were not discussed with the Scotland and Northern Ireland administrations. We want to see progress on the issue you raised in this dialogue. We are also united with deaf and disabled people's organizations here today, and the conviction that there needs to be swift progress on two areas of overarching importance.

>> Firstly, we want to see the UK and devolved governments safeguard in disabled people's rights in. Particular, they must address the gaps and inconsistencies in legal protections for disability discrimination across the UK, and in the legal basis for sign language rights. This includes bringing into the equality act and addressing the lower level of protection in Northern Ireland. They should also take steps to embed CRPD rights in domestic law as we leave the EU. This must include maintaining the protections within the human rights act going forward. Secondly, over the past ten years, there has been a lack of joined up working between the four focal points in the UK. We need a cohesive approach to the implementation of the convention and we put in place a coordinated UK-wide action plan to implement the committee's recommendations. These two priority areas must be addressed with formalized arrangements for meaningful involvement of disabled people. Inclusive discussions in preparation for this examination have demonstrated the value of the

principle of the nothing about us without us. Deaf and disabled peoples organizations have put forward practical solutions that will improve the lives of disabled people in the UK. The UK independent mechanism set out key problems faced by disabled people in the UK. Through this dialogue we hope the UK will recognize that real progress can happen only when there is a willingness to acknowledge shortcomings and resolve to do better. We look forward to working with the government and the deaf and disabled people organization's to realize the measures set out in this convention. Thank you.

>> THERESIA DEGENER: Thank you. The last three minutes belong to the country rapporteur.

>> STIG LANGVAD: Thank you, Chair. I would like to thank the delegation for its many answers to our difficult questions. The dialogue has without any doubt been the most challenging exercise of the history of the Committee. Despite your extensive and structured replies many questions remain unanswered and it has become evident that the committee has a very different perception on how human rights should be understood and implemented within the State Party. The committee is deeply concerned that the State Party still considers itself as a champion of human rights, the lack of demonstration of the commitments following the ratification of the convention and the following inconsistency with the State Party on disability policies. The committee expects the State Party to without hesitation develop and decide upon a concrete strategy which is sufficiently funded with timetable to fully acknowledge and implement the Convention. The committee is deeply concerned about the lack of recognition of the findings and recommendations of the conducted inquiry which found grave and severe violations of human rights within the State Party. We expect the State Party to take the appropriate measures to address the recommendations of our inquiry report. I could provide a long list of examples where the State Party does not live up to the Convention. Unfortunately, the time is too limited. During the dialogue, the State Party has provided extensive information on the legal frameworks, however, the committee is convinced that the existing legislation is not sufficiently implemented at -- and overall fails to secure the rights of persons with disabilities across the state party, the developed governments and the overseas territory. The committee understands that the State Party consider itself to be without legal intout and the regulations upon its devolved governments and overseas territories, which is -- which is conflicting with both the intent and the content of the convention. The committee expects far more insisting and ambitious approach by the State Parties to watch the overseas territories on implementing the rights in the convention. As expressed by the chair of the committee, the State Party is considered as an example to follow by many State Parties and because of this, you have a special obligation to set high standards and to realize the rights of people with disabilities as enshrined in the convention. With these few remarks, I look very much forward to be working with the concluding observations and their specific recommendations to the State Party. And hereby I send you home with your homework. Thank you very much. (Laughter).

>> THERESIA DEGENER: Thank you very much. Honourable head of delegation, Mrs. Jochelson, Distinguished Delegates from the UK, Distinguished Representatives from NNRI and the team representatives from the DPOs and civil society organizations, I thank everyone, including the sign language interpreters and captioning who stayed with us until now. I thank everyone for constructive dialogue

and we hope that our concluding observations will help to implement the human rights model of disability in the UK. The meeting is adjourned.

(end of meeting 1:17 p.m.)