

**The United Kingdom Government
Response to the Report by the
United Nations Committee on the
Rights of Persons with Disabilities
under article 6 of the Optional
Protocol to the Convention**

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Chapter 1: Introduction

1. While acknowledging work undertaken by the Committee to ensure that the voices of the organisations and individuals who submitted the allegations were heard, the UK Government strongly disagrees with the conclusions reached in the report produced by the UN Committee on the Rights of Persons with Disabilities (the Report). Individuals and organisations may disagree with the current approach to welfare reform, but the Government does not accept the Report's conclusion that there is evidence of grave and systematic violation of the rights of disabled people.
2. The United Kingdom is proud of its record in supporting disabled people to lead more independent lives and participate more fully in society. More than 20 years ago the UK legislated to protect disabled people's rights. It now spends around £50bn a year on benefits to support disabled people and people with health conditions, which is over £6bn more than in 2010. That is around 2.5% of GDP, or over 6% of government spending. The UK spends more on disabled people and people with health conditions than the OECD¹ average, and countries such as Germany, France and the USA.
3. As a strong parliamentary democracy, where the voices and opinions of disabled people are represented and listened to, the UK is a place where disabled people's rights are respected, promoted and upheld. The Disability Discrimination Act 1995 is recognised internationally as a model of effective anti-discrimination legislation; it remains the main legislative measure for disabled people in Northern Ireland². In the rest of the UK, the Equality Act 2010 (EA 2010) brings all strands of anti-discrimination legislation into one place, emphasising a commitment to tackling all forms of discrimination, including against disabled people.
4. The UK supported the development of the United Nations Convention on the Rights of Persons with Disabilities (the Convention) and was among the first countries to sign it in 2007. The convention is aligned with the UK approach to disability equality which focuses on inclusion and mainstreaming, with additional support provided as necessary, and on involving disabled people in making the decisions that affect their lives.
5. The UK's aspiration, supported by its legislative frameworks, is that disabled people get the same opportunities as other people to find work, while ensuring that people who cannot work because of a disability or health condition receive the support they need. This Government champions work because of its power to transform people's lives; not just by creating a sense of value and economic security but also for the benefits to an individual's mental and

¹ <http://www.oecd.org/social/expenditure.htm>.

² Equality policy is devolved to Northern Ireland. The policy framework for people with disabilities is "A Strategy to Improve the Lives of People with Disabilities 2012- 2015" (extended to 2017). The Northern Ireland Executive is committed to developing a detailed Action Plan to improve the quality of life of disabled people as part of its Programme for Government.

physical health and wellbeing. This underpins the Government's programme of welfare reforms, which is a key focus of the Report.

6. The Report recognises that “at a national level, it appears that the welfare system together with a social and health care system provide a solid base for the protection of the rights of persons with disabilities and that the system has allowed persons with disabilities to achieve an acceptable level of autonomy and independence”. It also recognises the Government's measures to reinforce choice and control through the increased personalisation and localisation of its services³.
7. The Report focuses on too narrow a scope and, in doing so, presents an inaccurate picture of life for disabled people in the UK. The Government believes that, as well as changes to the welfare system, it is important to consider the wider improvements to better implement disabled people's rights. The Report fails to reflect significant measures, such as:
 - personal budgets to increase choice and control of care and living arrangements;
 - improvements to the accessibility of housing and transport;
 - the wide range of work-related support available to disabled people;
 - financial protections, such as tax and pension credits and the exemption of disability-related benefits from the benefit cap and benefits freeze.
8. The Government approach is demonstrated in *Improving Lives*, the recently published *Work, Health and Disability Green Paper*, which explores a range of options for long-term reform across different sectors, targeting the factors which contribute to the disability employment gap, and aims to build a consensus for change. Its proposals cover the roles played by the welfare system, the health and care system, employers and wider society to ensure that all disabled people and people with health conditions are supported to go as far as their talents will take them.
9. The Government is committed to continuously seeking improvements for disabled people, driving forward initiatives to increase inclusion and break down any remaining barriers to participation:
 - investing in better integrated care through locally developed plans, the Government established a £5.3 billion Better Care Fund in 2015/16 (this fund will continue beyond 2016);
 - the ambition to halve the employment gap (currently stands at 32.2 percentage points) between disabled and non-disabled people is being led by the new Work and Health unit;
 - driving forward an integrated approach to work and health, as set out in the Green Paper, published on 31 October 2016.
10. While the Government continues to improve and build on the support available to disabled people, it stands by and is proud of its record:

³ Inquiry Report on United Kingdom of Great Britain and Northern Ireland of the Committee on the Rights of Disabled People under Article 6 of the Optional Protocol to UNCRPD (UNIUK), paragraph 64.

- nearly 500,000 more disabled people are in employment since 2013;
- increased funding for the Access to Work scheme to grow the numbers helped by 25,000⁴ extra customers by 2020;
- 22% of people supported to start their own business by the New Enterprise Allowance are self-declared disabled.

11. The Government does not limit itself to upholding the rights of disabled people in the UK. The Department for International Development (DFID) supports other countries in their efforts to ensure disabled people experience equality and full participation; as evidenced in its Disability Framework which aims to ensure that disabled people are systematically and consistently included in, and benefit from, international development and humanitarian assistance. Last year DFID collaborated with the International Disability Alliance to create the Global Action on Disability group, with the aim of stimulating further action on disability inclusion.

12. This response sets out initiatives implemented across Government which uphold the articles investigated. All government departments are responsible for ensuring that their policies are inclusive and align with the obligations set out in the Convention. The Government is committed to continuing the UK's progress towards ensuring that disabled people are able to live their lives on a fully equal basis.

⁴ This figure may be subject to change following a detailed statistic collection methodology review.

Chapter 2: Response to the Report Findings

General Findings

13. The Government holds that its policies and practices fulfil the obligations set out in the Convention, addressing remaining barriers using the social model of disability adopted by the Committee and disability sector. The Government reiterates its position that the reforms discussed in the Report were right, ensuring a sustainable system that continues to protect people who are more vulnerable while supporting those who can work to do so. The Government is committed to providing support where it is needed; this is reflected by the fact that spending to support disabled people and people with health conditions will be higher in real terms in every year to 2020 than it was in 2010⁵.
14. The Report correctly states that the approach to welfare reform is that “individuals are better off at work...”⁶ This is supported by a strong evidence base showing that work is generally good for physical and mental health and well-being⁷. This includes international studies associating the length of unemployment with increased risk of mortality and ill health⁸.

Public Sector Equality Duty (PSED⁹)

15. The Government would like to correct a misrepresentation of the PSED set out in the EA 2010¹⁰, (as applicable to England, Scotland and Wales¹¹). The PSED does not mandate equality impact assessments, but requires public authorities to have “due regard” to the need to:
- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act;
 - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - foster good relations between persons who share a protected characteristic and persons who do not share it.
16. Officials demonstrate this “due regard” by analysing the impact of all policy proposals on people with a protected characteristic (including disability)

⁵ Calculation using Table 1a, DWP Benefit expenditure and caseload tables 2016; https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/524240/outturn-and-forecast-budget-2016.xlsx.

⁶ UNIUK, paragraph 83.

⁷ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/214326/hwwb-is-work-good-for-you.pdf; <http://www.employabilityinscotland.com/media/83147/worklessness-and-health-what-do-we-know-about-the-relationship.pdf> ; https://www.researchgate.net/publication/222029702_Unemployment_Impairs_Mental_Health_Meta-Analyses; <http://www.ncbi.nlm.nih.gov/pubmed/21330027>; <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3547020/>; www.ncbi.nlm.nih.gov/pubmed/22465382 .

⁸ www.ncbi.nlm.nih.gov/pmc/articles/PMC3702026/.

⁹ <http://www.legislation.gov.uk/ukpga/2010/15/section/149>.

¹⁰ UNIUK, paragraph 86.

¹¹ Not applicable to Northern Ireland.

outlined in the Act. Ministers formally consider this analysis when making decisions.

17. The Equality and Human Rights Commission and its equivalent in Scotland¹² are independent statutory bodies responsible for the enforcement, monitoring and assessment of how public bodies comply with the PSED. The Commission has powers to issue compliance notices to public bodies that fail to comply. It has undertaken monitoring exercises to understand how different public bodies comply with the PSED and the supporting 'specific duties' regulations (including a review of the HM Treasury budget allocation) and all their findings are published¹³.
18. The EA 2010 serves to ensure that the rights of disabled people are fully considered by UK policy makers. This approach, which ensures that public authorities take responsibility for considering the impact of all policies on disabled people and not just disability-related policies, is in keeping with the Convention's position on mainstreaming disability issues¹⁴.

Legal Aid

19. Disabled people's access to the courts in relation to disputed welfare benefit decisions¹⁵ also requires clarification. Legal aid was not available for representation before first-tier tribunal cases prior to the legal aid reforms, though it was available for legal advice. This was because this tribunal is informal and non-adversarial, and as such there was no need for legal representation. Legal aid continues to provide access to justice, for those eligible, in the highest priority cases, including disputes with Local Authorities (LAs) about community care services for disabled people, and for discrimination and welfare benefit claims relating to the contravention of the EA 2010.
20. Legal aid is also available for judicial reviews, including those relating to welfare benefit policies. Advice for discrimination matters is provided through the Civil Legal Advice service, an accessible helpline and online tool, which offers a range of adaptations and reasonable adjustments. Changes to legal aid have not restricted access to the appeals process. Nor has mandatory reconsideration, introduced in 2013 to allow earlier correction of decisions, with the right of appeal still available if required.

Aggression and hostility

21. The Report refers to the negative portrayal of disabled people in relation to welfare benefits, and alleged increases in the number of hostile and aggressive incidents experienced by disabled people¹⁶. This type of behaviour

¹² The Equality Act does not apply in Northern Ireland. Instead, section 75 of the Northern Ireland Act 1998, places a duty on public authorities in carrying out their functions to have due regard to the need to promote equality of opportunity between people within nine different categories, one of which is 'Persons with a disability and persons without'.

¹³ <https://www.equalityhumanrights.com/en/advice-and-guidance/monitoring-and-enforcement>.

¹⁴ <http://www.un.org/disabilities/convention/conventionfull.shtml> , page 1.

¹⁵ UNIUK, paragraph 92.

¹⁶ UNIUK, paragraph 85.

towards disabled people is unacceptable and requires continued focus. The Government challenges the assertion that disability hate crime is increasing in the UK. The increase in the official figures for disability hate crime in England and Wales (from 1,748 in 2011, to 3,629 in 2015-16¹⁷) is believed to be largely the result of increased reporting of such crimes, as opposed to a significant rise in incidents. This demonstrates growing awareness of the crime and increasing confidence of appropriate handling by the authorities. This view is supported by increased numbers of convictions, from 503 in 2014-15 to 707 in 2015-16¹⁸, following additional training for prosecutors.

22. The Crown Prosecution Service (CPS) continues to address the issue through a public consultation¹⁹ on their first public policy statement covering Crimes against Disabled People. This statement aims to reassure disabled victims and witnesses, their families and communities, and the general public that the CPS understands the serious nature of these offences. In line with the Convention obligation to include disabled people in decision making, this statement was developed with the CPS National Scrutiny Panel on disability hostility, whose members include disabled people's organisations.

¹⁷ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/559319/hate-crime-1516-hosb1116.pdf, page 4.

¹⁸ http://www.cps.gov.uk/publications/docs/cps_hate_crime_report_2016.pdf, page 30.

¹⁹ <http://www.cps.gov.uk/consultations/>.

Section 1: Article 19 - Living independently and being included in the community

23. The Government is committed to supporting disabled people in their right to live independently and be included in the community, which includes upholding the right to choice and control of residence and healthcare. Significant steps have been taken to protect the choice of residence and access to a range of support to enable independent living.
24. The Government wants all citizens, including disabled people, to have more control over their health and social care. Personalisation provides people with more choice, control and independence, allowing them to choose the care and support best suited to their needs. The Care Act 2014 (applicable in England only)²⁰ requires that everyone receiving adult care and support will have a personal budget as part of their care and support plan. Disabled people, their carers (and advocate if required) will be involved in the care planning process and decisions that affect them.
25. Budgets have been allocated to Local Authorities (LAs), enabling more local decisions on adult social care provision, in line with the Convention's emphasis on community. From 2011-12 through to 2014-15 overall spending on adult social care, including money transferred from the NHS, has remained constant in cash terms. Additional funding was also made available through the 2015 Spending Review to support social care provision:
- additional funding through the Better Care Fund to support greater health and social care integration, worth £1.5bn by 2019-20;
 - from April 2016 LAs with social care responsibilities can raise funding through a social care precept (can total up to £2bn a year by 2019-20) where the revenue raised will be used to support social care.
- This means that LAs will have access to the funding needed to increase social care spending in real terms by the end of the Parliament.
26. Other initiatives to protect the rights of disabled people in article 19 include:
- Building the Right Support (October 2015), which sets the national ambition to close 35 to 50% of inpatient capacity for people with a learning disability in three years, building community capacity instead and reducing inappropriate hospital admissions;
 - No Voice Unheard, No Right Ignored²¹ secures rights for people with learning disabilities, autism or mental ill-health with a particular focus on improvements to housing and accommodation for people with learning disabilities;
 - Disabled Facilities Grants provide a means-tested grant to help disabled people meet the cost of adapting their home to increase accessibility to suit their needs. This fund has been integrated into the Better Care Fund

²⁰ This response only references the Care Act, applicable in England only, as this is the only social care Act cited in the UNIUK Report.

²¹ <https://www.gov.uk/government/consultations/strengthening-rights-for-people-with-learning-disabilities>.

- and will be worth over £500m by 2020, demonstrating the Government's commitment to enabling disabled people to live independently;
- The Care and Support Specialised Housing Fund commits £260m for specialist housing providers to meet the needs of older people and adults with disabilities or mental health problems.

27. The Government is also addressing barriers in the built environment. Housing built since 2001 is more likely to be accessible due to Part M of Building Regulations (implemented in 1999); for example, homes built from 2001 onwards are more likely to have level access (68%) and a toilet at entrance level (93%), compared with those built before 2001 (13% and 61% respectively)²².

28. In March 2015, the Department for Communities and Local Government (DCLG) introduced a new way of setting technical housing standards in England. Building on Part M, the standards set out two new optional technical standards²³ on accessible housing and wheelchair accessibility, ensuring plans for accessible housing are suited to a greater range of disabled people. Local planning authorities can adopt these optional standards to meet the housing needs of disabled people.

29. Government has also encouraged the construction industry to make inclusive design and an accessible environment part of their practice:

- the Inclusive Environment Action Plan²⁴ tasks industry leaders with spreading understanding of, and commitment to, the benefits of equality and accessibility; the Inclusive Environments Hub²⁵ pools global accessible design experience;
- the Built Environment, Professional and Education project²⁶ promotes inclusive design training for built environment professionals; supported by eighteen of the most respected institutions in the sector, it influences the next generation of architects and planners;
- the Accessible Britain Challenge²⁷ and its awards encourage communities to become more accessible and inclusive.

30. Turning to community services and facilities, the Department for Culture, Media and Sport published its sports strategy in December 2015.²⁸ This includes specific measures for disabled people, such as proper representation of disabled people among sports volunteers, the sports workforce and its

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https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/539541/Adaptations_and_Accessibility_Report.pdf, page 3.

²³ <http://planningguidance.communities.gov.uk/blog/guidance/housing-optional-technical-standards/accessibility-and-wheelchair-housing-standards/>.

²⁴ <https://www.gov.uk/government/news/creating-inclusive-buildings-and-design>.

²⁵ <http://www.designcouncil.org.uk/what-we-do/inclusive-environments>.

²⁶ <https://www.gov.uk/government/collections/built-environment-professional-education-project>.

²⁷ <https://www.gov.uk/accessiblebritain>.

²⁸ <https://www.gov.uk/government/publications/sporting-future-a-new-strategy-for-an-active-nation>.

leaders. Sport England's strategy 'Towards an Active Nation'²⁹ confirms a greater emphasis on encouraging less active groups, including disabled people, to become more active; it announced a new, dedicated fund of £120m to tackle inactivity over the next four years. Government will submit a formal report to Parliament early next year setting out progress in implementing the strategy.

31. The Department for Transport (DfT) is building on regulatory requirements to further improve the accessibility of public transport. The 'Access for All'³⁰ programme (extended in 2014 with £160m additional funding) increases rail accessibility by updating the UK's railway station infrastructure. Disability awareness training is being provided at every train station, and by many bus companies. Increased provision of audio and visual announcements on buses and trains is benefiting disabled people; and all buses are required to be accessible by 2017 (single decker buses are already accessible).

Addressing specific findings

Choice and control of care and residence

32. The Report acknowledges the move towards greater personalisation of support packages³¹ in the UK. However, it then asserts that the Care Act 2014 fails to align with Article 19 with respect to increasing disabled people's right to choice and control³². The Government strongly disagrees with this. The following section of statutory guidance explicitly addresses this point:

“Although not mentioned specifically in the way that “wellbeing” is defined, the concept of “independent living” is a core part of the wellbeing principle. Section 1 of the Care Act includes matters such as individual's control of their day-to-day life, suitability of living accommodation, contribution to society – and crucially, requires local authorities to consider each person's views, wishes, feelings and beliefs. The wellbeing principle is intended to cover the key components of independent living, as expressed in the UN Convention on the Rights of People with Disabilities (in particular, Article 19 of the Convention). Supporting people to live as independently as possible, for as long as possible, is a guiding principle of the Care Act”³³.

33. The Report expresses concern that welfare reforms have restricted disabled people's rights to choose their residence³⁴. Legislation in England ensures

²⁹ <https://www.sportengland.org/news-and-features/news/2016/may/19/sport-england-triples-investment-in-tackling-inactivity/>.

³⁰ <https://www.gov.uk/government/collections/access-for-all-programme>.

³¹ UNIUK, paragraph 88.

³² UNIUK, paragraph 88.

³³ <https://www.gov.uk/guidance/care-and-support-statutory-guidance/general-responsibilities-and-universal-services>.

³⁴ UNIUK, paragraphs 97 and 98.

that people with both a medical and welfare need, including disability, for social housing are a priority for LA allocated social housing. The relevant statutory guidance³⁵ also makes specific reference to meeting the needs of young adults with learning disabilities wishing to live independently in the community. Additionally, regulatory standards³⁶ require all social landlords to develop and deliver allocation processes to allow effective use by the full range of actual and potential tenants, including people with support needs.

34. The Removal of the Spare Room Subsidy (RSRS) aimed to restore fairness by equalising the size criteria rules for Housing Benefit across both the social and private rental sector. In accordance with the PSED, consideration of the impact of this policy on people with protected characteristics led to an increase in funding for Discretionary Housing Payments (DHP), recognising that some people might need extra support to meet the shortfall in their rent. An additional bedroom is also allowed for disabled children who cannot share with siblings and non-resident overnight carers, protecting vulnerable people who might otherwise be disproportionately affected.
35. The Report makes a general comment about mitigating measures being temporary³⁷. The DHP fund, provided to LAs to meet local housing priorities for people who are eligible, amounts to £870m over this Parliament. Between 2011 and the end of this Parliament, Government will have made over £1bn available to LAs through DHPs to help people adjust to these reforms. The Report also comments on increased debt and eviction resulting from the RSRS³⁸. A two year independent evaluation³⁹ found no discernible increase in evictions linked to RSRS, stating that most evictions by November 2014 were of tenants with pre-existing arrears and/or who had not engaged with their landlord. In view of this and the additional measures to protect disabled people, the Government does not believe that disabled people's right to choice and control of residence on an equal basis to others has been affected.
36. Supported accommodation plays a vital role in the lives of many vulnerable people providing safe, stable and supportive places to live that can be an important stepping stone to independent living in the longer term. The Government values the role of supported housing and is committed to encouraging further development to meet future demand. Supported housing is exempt from the application of the local housing allowance rates in the social rented sector until 2019-20, when a new funding model will be introduced. This will ensure that the sector continues to be funded at current levels, taking into account the effect of Government policy on social sector rents.

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https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/5918/2171391.pdf.

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https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419209/Tenancy_Standard_2015.pdf.

³⁷ UNIUK, paragraph 94.

³⁸ UNIUK, paragraph 97.

³⁹ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/506407/rsrs-evaluation.pdf.

Levels of care provision

37. The Government closed the Independent Living Fund (ILF) to integrate users with the mainstream social care system. In England, the funding previously allocated to the ILF was redirected to LAs following the introduction of the Care Act 2014. The Act places a duty on English LAs to assess any adult with care and support needs, and to meet the needs of people assessed as eligible for support. This mandates minimum standards, not minimum spending, because the Government believes the quality of care is what matters. Former ILF users now have statutory protection for their eligible care and support needs, whereas previously they may have relied on the ILF discretionary trust. LAs are being fully funded for this, for at least the remainder of this Parliament
38. The current approach to funding the provision of adult social care in England balances the need for flexibility in how best to provide support locally, with the legal requirements placed on LAs through the Care Act 2014. The Act introduced a new national eligibility threshold for access to adult social care, implemented on 1 April 2015, which sets the minimum level of access to care at the level where a person's needs have a significant impact on their wellbeing. All LAs must now meet, or exceed, this threshold. As previously stated, personalisation is fundamental to the Care Act 2014. The law mandates LAs to produce care plans taking into account an individual's views and desired achievements in day-to-day life, including living independently. LAs should not set arbitrary upper limits on expenditure to meet a person's care needs; doing so would not be person-centred or compatible with public law.
39. The Government took its duty to consult on the closure of the ILF⁴⁰ seriously, facilitating consultation responses in line with the Convention obligation to involve disabled people meaningfully in decision making. The Court of Appeal did not make any finding on the merits of the ILF's closure, but found that the original equality analysis did not comply with the EA 2010. A new equality analysis was produced which was found by the High Court to meet the requirements of the PSED. Both the High Court and the Court of Appeal found that the consultation had been fair, proper and unbiased. The Government has committed to researching the impact of the ILF closure. This should be completed by the end of this year and will consist of interviews with former users and LAs.
40. Social care is devolved to the devolved administrations, allowing them to best meet the needs specific to their populations. For example, the Scottish Government is providing more than £500m additional funding over three years to help Health and Social Care Partnerships establish new ways of working, and investing a further £250m per year to protect and grow social care services. The Welsh Government approach has been to allocate an additional £10m in 2015-16 and £21m in 2016-17 to meet the adult social care pressures faced by Welsh LAs.

⁴⁰UNIUK, paragraph 99.

Section 2: Article 27 – Work and Employment

41. The Government is committed to upholding disabled people's rights to work and employment. Disabled people should have equal opportunities to enjoy the benefits of work, hence the Government's ambition to halve the disability employment gap, which currently stands at 32.2⁴¹ percentage points. The Report's narrow focus on Employment Support Allowance (ESA) processes with little consideration of employment programmes does not adequately reflect the support available for disabled people to work in the UK. This section sets out government initiatives designed to increase the number of disabled people in employment, which has increased by nearly 500,000 since 2013⁴², demonstrating commitment to article 27. This should be considered in the wider context of improved accessibility to housing, transport and social care⁴³, and the legislative requirement for employers to provide reasonable adjustments; all of which reduce barriers to work.
42. Commitment to this ambition and recognition that a new approach to employment support is needed is demonstrated by the establishment of the Work and Health Unit. Bringing together the Department for Work and Pensions (DWP) and the Department of Health, the Unit aims to improve the employment and health outcomes of people with health conditions and disabilities; the 2015 Spending Review secured £115m for this. This includes work on the recently published Green Paper, which consults on proposals to improve the work-related support available for disabled people and people with health conditions. The consultation, developed collaboratively with disabled people, ensures the widest possible reach by using digital platforms alongside more traditional consultation methods, such as an expert advisory group.
43. The Green Paper makes a number of announcements, including:
- a significant support offer for disabled people and people with health conditions in the form of a new Personal Support Package and a new Health and Work conversation for people receiving ESA;
 - the reform or expansion of current Government schemes supporting employers;
 - plans to increase access to psychological therapies (IAPT) and more than double the number of employment advisers in these services.
44. In addition, the Unit is building an evidence base of effective measures which could be scaled up to help people with health conditions and disabilities secure work and improve sickness absence prevention for people at risk of

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<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/datasets/labourmarketstatusofdisabledpeoplea08>.

⁴²

<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/datasets/labourmarketstatusofdisabledpeoplea08>.

leaving the workforce. Recognising the increasing prevalence of mental health conditions, £43m has been allocated to trials testing a range of integrated service delivery models, strengthening the evidence base on what works.

45. The 2015 Spending Review also committed to funding that will rise to £130m a year for the new Work and Health Programme once in full running. The programme will run in England and Wales in 2017, following the end of referrals to Work Choice and the Work Programme⁴⁴. It will focus on providing the best possible support for disabled people (and others) to find sustainable work. Decisions on the future programme have still to be made, but providers will be expected to demonstrate how they will foster greater integration with local services and health provision to support employment. The final design will build on the strengths of, and lessons learned from, previous contracts, market engagement and feedback from stakeholders. Disability representative organisations were consulted for their views on the design.
46. Current support for disabled people includes both mainstream and specialised support. Work coaches in Jobcentre Plus provide personalised back to work support including volunteering opportunities, skills support, work experience and local activity through the Flexible Support Fund⁴⁵. They support people to think through their work goals and aspirations, and have the autonomy to tailor requirements to the person's capability and circumstances. All work coaches are trained to support people with complex needs, including disabled people and around 1500 newly recruited work coaches are working towards an externally recognised professional accreditation. Jobcentre Plus also employs over 200 disability employment advisers, with an additional 300 being recruited.
47. Specialised support includes:
 - Access to Work provides practical and financial support for additional costs faced by individuals whose health or disability affects how they do their job, where adjustments go beyond what is 'reasonably' expected of employers. The scheme contributes towards costs such as travel to work and support workers and supported over 36,000 disabled people to enter or remain in employment during 2015-16. The Government has announced a real-terms increase in funding⁴⁶ to increase the numbers accessing this service by 25,000⁴⁷ people by the end of this Parliament, and recently launched an online application process to increase flexibility and accessibility;

⁴⁴ In Scotland this will be replaced by Scottish services for support, work experience and training.

⁴⁵ There is no Flexible Support Fund in Northern Ireland, but the Department for Communities offers an Adviser Discretion Fund which can cover up to £300 per year towards providing financial assistance to clients to remove some barriers to employment and is currently in the process of reviewing a range of support measures to enable claimants to move into work. A decision in relation to what support will be provided is likely in the autumn of 2016.

⁴⁶ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/479749/52229_Blue_Book_PU1865_Web_Accessible.pdf, paragraph 1.131.

⁴⁷ These figures are subject to change following a detailed statistic collection methodology review.

- Access to Work’s Mental Health Support Service is carrying out a two-year trial of targeted support for apprentices with mental health conditions;
- New Enterprise Allowance⁴⁸ supports unemployed people wishing to start their own business. Around 22% of people who have participated in this scheme have a self-declared disability⁴⁹;
- Work Choice supports people with complex disability-related barriers into employment. Participation is voluntary and is not linked to receiving welfare benefits. Since October 2010, 97,000 people have started Work Choice with over 41,000 job outcomes⁵⁰.

48. The Government set up the Fit for Work service in 2015 to support people whose disability or health issues result in long-term absence from work. This provides an occupational health assessment, and general health and work advice to employees, employers and General Practitioners, to help individuals stay in or return to work. This support also includes access to a tax exemption of up to £500 a year per employee on medical treatments recommended by Fit for Work or an employer-arranged occupational health service. Almost 20% of disabled employees had a long term sickness absence a year, compared to less than 5% of those without a disability, meaning that Fit for Work is well placed to help disabled employees remain in work.

49. Disability Confident supports employers to employ disabled people by encouraging business-to-business discussion about the benefits of employing disabled people. More than 2400 employers have signed up to the new Disability Confident scheme⁵¹ which started in July 2016 and seeks commitment at three levels:

- Disability Confident Committed – committing to starting the journey;
- Disability Confident Employer – good practices for recruiting, retaining and progressing disabled employees are in place;
- Disability Confident Leader – the self-assessment of good practice has been validated by disabled people and other employers, and a commitment made to support other employers on their journey.

50. In addition, the Green Paper considers the important role employers play in the health and wellbeing of their employees. For small employers, a new initiative called the Small Employer Offer is currently being trialled, which provides in-work support for employers and employees, advice and support for employers on disability issues and work place adaptations, and some funding to help new employees with the transition into work. Early findings are promising and will inform future policy development.

⁴⁸ There is no similar scheme in Northern Ireland. However, the Department for Communities is currently in the process of considering a range of support measures to enable claimants to move into work, including self-employment. A decision is likely in the autumn of 2016.

⁴⁹ Page 6: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/532641/nea-official-stats-to-march-2016.pdf.

⁵⁰ Figures are from October 2010 - March 2016; they do not include Remploy figures.

⁵¹ <https://www.gov.uk/government/collections/disability-confident-campaign>.

51. Other recent developments include a one-stop site⁵² signposting young people with health conditions and disabilities to available support, including information on applying for Access to Work, which can support disabled people in apprenticeships. Additionally, the Government has accepted all recommendations⁵³ made by an independent task force (which included charities, educators and employers) on apprenticeships for young people with learning disabilities. Recommendations included adjusting English and Maths qualification requirements to increase access to apprenticeships.
52. The Welsh Government operates a range of DWP led employment programmes including an all-age apprenticeship scheme and Work Based Learning, with providers contractually required to have equality and diversity policies to ensure that equal access to learning delivers equality of opportunity. In Scotland⁵⁴ employment support has a specific focus on helping the most disadvantaged in the labour market, including disabled people, to ensure that they are able to enter and sustain employment. Scotland's Equalities Action Plan for Modern Apprenticeships, published in December 2015, includes a specific improvement target for participation by disabled people.
53. In Northern Ireland the Disability Employment Service has responsibility for the management and delivery of employment and employability programmes for people with disabilities, including Access to Work (NI), Workable (NI), Work Connect and Condition Management Programme. A strategy to reverse the trend of people becoming economically inactive has been launched and this will be a Northern Ireland Executive priority over the next 10 to 15 years. It will focus on people who are long term unemployed due to sickness or mild to moderate disabilities, as well as lone parents or others with caring responsibilities. Additionally, an Employment Strategy for People with Disabilities, will target young people with more significant disabilities as they are transitioning from full-time education or training.

Addressing specific findings

Employment and Support Allowance (ESA)

54. T
 he Report states that the Work Capability Assessment (WCA) is a functional assessment⁵⁵. This is correct; the aim of the assessment is to understand how a person's condition might affect their ability to work. However, the WCA is not the end of the process. After the WCA, DWP advisers work with people placed in the ESA Work Related Activity Group to understand their personal barriers and the most appropriate work-related support. This support ('work-related activity' intended to help people move closer towards work) is

⁵² <https://www.gov.uk/government/publications/help-and-support-for-young-disabled-people-to-find-and-stay-in-work/help-and-support-for-young-disabled-people-to-find-and-stay-in-work>.

⁵³ <https://www.gov.uk/government/publications/apprenticeships-improving-access-for-people-with-learning-disabilities>.

⁵⁴ Employment services will be devolved from April 2017.

⁵⁵ UNIUK, paragraphs 90 and 102.

different for each person and is available on a voluntary basis to people in the ESA support group. People in these groups are not expected to do anything that is unrealistic, that could put their health at risk, or to seek work.

55.

T

he WCA process includes safeguards for people with mental health conditions. For instance, if they do not return their health questionnaire, they can continue to receive the benefit pending their assessment (unlike other people whose claims can be stopped). If they do not attend their assessment, the DWP or its contracted provider will try to make contact, and if required provide a home visit.

56. All healthcare professionals carrying out WCAs are trained in disability assessment medicine and receive training specifically in assessing people with mental health conditions. They are supported by colleagues with specific expertise, including mental function champions, who spread best practice and support colleagues in conducting assessments. Recognising that attending the WCA can be a stressful experience, particularly for people with mental health conditions, everyone is encouraged to bring a companion. The Centre for Health and Disability Assessments (CHDA), which has carried out WCAs since March 2015, is making a focused effort to improve delivery of the assessment, including:

- reviewing design and accessibility of facilities at all assessment centres;
- establishing a Customer Representative Group of over twenty national disability organisations to discuss issues such as clinical training and communications;
- reducing the average waiting time for an assessment;
- introducing a telephone service to help people complete their ESA health questionnaire;
- providing disability awareness training for over 2000 customer-facing staff.

Accessible Information

57. The Report states that information about the WCA process is not available in accessible formats and languages⁵⁶. The Government believes that it takes reasonable steps to provide accessible information, in accordance with the EA 2010. Disabled people can request information in alternative formats when they make a claim for benefit; and people making claims over the phone are asked if they require information in alternative formats.

58. CHDA now includes on its website three videos to help people understand the process before, during and after an assessment, all of which can be viewed with sign language and subtitles. The DWP has a programme of work with external stakeholders to improve communications for people with mental health conditions or learning disabilities. This includes an alternative formats review, better signposting on the GOV.UK website and improvements to staff instructions.

⁵⁶ UNIUK, paragraph 103.

59. A full review of all Personal Independence Payments (PIP) communications is under way, following recommendations from an independent review of PIP. National stakeholders from representative organisations and disabled people, including people with mental health conditions, have been involved in testing PIP communications. Their insights have contributed to improvements, including the full rewrite of letters and other communication products. A video relay service for British Sign language users has been introduced for claims and enquiries related to PIP, Disability Living Allowance (DLA), Attendance Allowance and Access to Work, and a trial is currently taking place of the Next Generation Text relay service as an alternative way for deaf and hard of hearing people to access PIP services.

Appealing decisions and access to justice

60. The Report states that a high number of WCA decisions are overturned by tribunals,⁵⁷ implying that the WCA incorrectly assesses people's functional capability. Feedback from the tribunal indicates that most decisions overturned result from the person's own oral evidence or from additional written evidence presented to the tribunal. Mandatory Reconsideration (MR) was introduced to manage eligibility disputes more effectively and reduce the need for unnecessary appeals. This is mandatory prior to applying for an appeal, allowing the decision to be reviewed and new evidence to be presented. Statistics published in 2016⁵⁸ showed the average clearance time for WCA MR applications to be 9 days. Access to justice is not therefore denied or significantly delayed as a result of this process.

61. Payment of ESA during the MR process was considered but decided against; the Government maintains that it is appropriate that people who have been found not eligible for ESA do not receive ESA payments while this decision is reviewed. The majority of people in this group are eligible for Jobseeker's Allowance (JSA) payments and are directed to claim JSA without delay during the phone call explaining that their ESA will end. This protects against people being left without income. The JSA system is sufficiently flexible to allow more personalised approaches when considering work-related conditionality, taking account of people's health conditions or disabilities.

62. The Report commented on people reassessed shortly after a WCA⁵⁹. This issue has already been addressed by introducing an eight month minimum period between a successful appeal and a subsequent re-assessment, unless there are good grounds to indicate an earlier review might be more appropriate such as health deterioration. In this connection, the Government recently announced that it would work with stakeholders to develop a set of criteria to end re-assessments for people with the most severe health conditions or disabilities (unless there is a change of circumstances).

Sanctions

⁵⁷ UNIUK, paragraph 102.

⁵⁸ <https://www.gov.uk/government/statistics/esa-outcomes-of-work-capability-assessments-including-mandatory-reconsiderations-and-appeals-september-2016>.

⁵⁹ UNIUK, paragraph 105.

63. The Report states that people in the ESA work-related activity group were disproportionately affected by a new sanctions regime implemented in 2012⁶⁰. The Government does not accept this. In each month since new sanctions were introduced, less than 1% of ESA recipients have been sanctioned, with more than 99% complying with the reasonable requirements linked to receiving benefit. The introduction of sanctions for people receiving ESA brought this benefit into line with JSA and Universal Credit, but safeguards to protect vulnerable recipients continued.
64. People receiving ESA cannot be sanctioned for not finding work or failing to apply for jobs. The decision to impose a sanction is not taken lightly and is not imposed if there is a good reason for the apparent failure. Where a sanction is applied, there is a well-established system of hardship payments for people who can demonstrate that they cannot meet their immediate and most essential needs (up to 60%, or in certain circumstances 80%, of the usual payment).

Incidents of death

65. The Government does not routinely obtain the reason for a person's death when closing down their benefit account. There is no statutory requirement to inform the DWP of the manner of a person's death; this only becomes known if the DWP is informed by a family member or solicitor. In cases where it has been alleged that the Department's actions are linked to the death of a benefit recipient, an internal review is carried out to check whether departmental processes have been correctly followed. If appropriate, this review will make recommendations for possible improvements, but does not seek out or apportion blame.
66. Following a Freedom of Information request, 49 redacted internal reviews were published⁶¹. The Report suggests that this information represents monitoring of deaths after assessments⁶². This is not the case; these were reactive investigations into cases which represent a very small proportion of deaths of benefit recipients, and cannot be considered to be a monitoring process. The Report also states that it "is not aware of any attempts at objective, thorough, open and impartial investigation regarding these deaths by an independent body." Where a death is 'unnatural' (such as in cases of suicide) it is in fact a statutory requirement for a coroner to investigate the death.
67. In August 2015, DWP released data on the deaths of benefits recipients in Great Britain⁶³, which showed that the mortality rate for unemployed working-age benefit recipients in Great Britain fell between 2003 and 2013, in line with that for the general working-age population. These statistics should not be used as evidence to support a link or otherwise between receiving benefit payments and mortality. A number of possible factors may contribute to an increased or decreased mortality rate such as income, housing and

⁶⁰ UNIUK, paragraph 106.

⁶¹ <https://www.gov.uk/government/publications/dwp-foi-releases-for-may-2016>.

⁶² UNIUK, paragraph 109.

⁶³ <https://www.gov.uk/government/statistics/mortality-statistics-esa-ib-and-sda-claimants>

education. Misinterpretation of this data, attributing causal links between an individual's death and previous benefit assessment, was investigated by an independent fact checking organisation, Full Fact⁶⁴. They stated, "It was widely reported that thousands of people died within weeks of being found 'fit for work' and losing their benefits. This is wrong."

⁶⁴ <https://fullfact.org/economy/reporting-fit-work-deaths-isnt-fit-purpose/>.

Section 3: Article 28 - Adequate standard of living and social protection

68. The Report recognises that “at a national level, it appears that the welfare system together with a social and health care system provide a solid base for the protection of the rights of disabled people...”⁶⁵. The Government stands by its reform of the UK welfare system, which is designed to provide adequate standards of living, a comprehensive support system and special protections for vulnerable people. It is disappointing that the Report does not reflect this, or the fact that the UK is spending around £50bn this year on welfare benefits to support people with health conditions and disabilities, over £6.5bn more than in 2010. This is around 2.5% of GDP and over 6% of government spending.
69. Spending is forecast to remain around this level in real terms throughout the current Parliament. £14.8bn of this will be spent on incapacity benefits for working-age people this year, an increase of £0.4bn since 2010-11. Spending on the main disability benefits (PIP, DLA and Attendance Allowance) went up by more than £3bn over the course of the last Parliament. Additional measures to support disabled people to meet the extra costs associated with disability include those discussed in the following section, as well as several tax exemptions, reductions or credits⁶⁶.
70. Other evidence supports the Government’s view that adequate provision is in place. The Personal Social Services Adult Social Care Survey⁶⁷ of 2014-15 indicates that quality of life for people receiving care and support services has been maintained since 2011-12; with 92% of respondents stating that this care and support increases their quality of life. The English Housing Survey demonstrates a continued reduction in ‘non-decent’ homes in England; in 2012 22% of dwellings did not meet the decent homes standard, down from 35% in 2006⁶⁸.
71. The devolved administrations have also introduced initiatives to best support disabled people. In Northern Ireland the Department for Communities has introduced a number of measures to financially protect individuals with a disability impacted by the welfare changes for a period of 12 months to afford them time to adjust to the new welfare provisions. The Department for Communities will also be introducing a four year scheme to provide additional financial support to low income working households to help with some of the additional costs of taking up employment.

⁶⁵ UNIUK, paragraph 64.

⁶⁶ <https://www.gov.uk/financial-help-disabled/vat-relief> <https://www.gov.uk/financial-help-disabled/television-licence-discount> <https://www.gov.uk/financial-help-disabled/home-and-housing> <https://www.gov.uk/working-tax-credit>.

⁶⁷ <http://digital.nhs.uk/catalogue/PUB18642>.

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https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/539541/Adaptations_and_Accessibility_Report.pdf.

Addressing specific findings

Income levels and poverty

72. The Government takes its duty to reduce poverty seriously. All welfare reforms protect the vulnerable groups least able to increase their earnings, including people needing additional support as a result of disability. These include provisions such as the exemptions to the benefit cap and benefit freeze discussed below.
73. The Government firmly believes that, as a general rule, it is not right that households can receive more income from welfare benefits than from work. The cap on the maximum amount of benefits for a household provides a clear incentive to enter work and was initially set at the estimated average household income. Findings from the 2014 evaluation⁶⁹ found that many households responded to this and moved into work. Where households could not make the change immediately, they could apply for Discretionary Housing Payments. There are exemptions from the cap, including for households with someone receiving a disability-related benefit. Households entitled to Carer's Allowance, the UC equivalent and Guardian's Allowance will also be exempt as of later this year.
74. Benefits which contribute towards the additional costs that disabled people face such as DLA and PIP, working-age benefit premiums for disabled people, the Support Group component of ESA, Carer's Allowance, and the carer premium and disability elements of tax credits are exempt from the benefit freeze (which was introduced to ensure that earnings grow faster than benefits⁷⁰) balancing the Government's goal to ensure that work pays with protecting the most vulnerable.
75. Universal Credit (UC) is replacing a number of means-tested working age welfare benefits to simplify the current system and make it easier for people to move into work and increase their earnings. UC supports small or fluctuating amounts of work, which is particularly helpful for people whose disability or health condition means that they can only work some of the time. People in these circumstances can re-enter work safe in the knowledge that their UC claim will not automatically close and that their benefit payments will be adjusted systematically to take their earnings into account.
76. Pension Credit provides a top up for older people on low incomes who have reached the relevant qualifying age. In recognition of the extra costs associated with disability, there are additional amounts for severely disabled older people who meet certain qualifying conditions.

Meeting extra costs resulting from disability

⁶⁹ <https://www.gov.uk/government/publications/benefit-cap-evaluation>.

⁷⁰ Most working age out-of-work benefits had risen by 21% between 2008-15; average weekly earnings had risen by 12%.

77. The Report cites figures on the anticipated number of disabled people no longer entitled to the non means-tested disability benefit DLA once replaced by PIP⁷¹. PIP was introduced largely to address fundamental flaws in DLA: subjective criteria which favoured physical over mental ill health and disabilities; taking inadequate account of fluctuating conditions; too great a reliance on self-assessment without medical evidence; and over 70% of recipients never had their claim reviewed. PIP was intended to provide support for people with the greatest barriers to independent living, treat all conditions equally, apply more objective entitlement criteria and ensure claims are regularly reviewed so people receive the correct level of benefit.
78. Many people who move from DLA to PIP receive a higher value award than previously, with 24% of current PIP recipients receiving both components at the enhanced rate compared to 15% for DLA. Mental and physical health conditions are given equal importance in PIP, which was not the case in DLA. As a result, 24% of PIP recipients with a mental health condition receive the enhanced rate mobility component compared to 9% for the DLA equivalent, and 66% of PIP recipients with a mental health condition receive the enhanced rate daily living component, compared to 22%⁷² for the DLA equivalent.
79. The Report highlights that the Government anticipated lower numbers of people receiving PIP than received DLA⁷³. It was expected that this would occur, not by raising the threshold for eligibility, but by reviewing the eligibility criteria to ensure they better suited the needs of the current population. As highlighted above, PIP is a different benefit from DLA, with different criteria; some people who previously qualified for DLA would not qualify for PIP, but many people who did not qualify for DLA do qualify for PIP. The Report also commented on waiting periods for PIP⁷⁴; these have now been reduced to 7 weeks on average.
80. Turning to the Motability scheme⁷⁵, there are now more people on the scheme than before PIP was introduced, with Motability noting in 2015⁷⁶ that 'customer numbers continued to increase during the year'. Extensive transitional support (£175m over 3 years) is available for disabled people who lose entitlement following PIP reassessment. This normally includes a cash payment of £2,000⁷⁷ and rights to buy their Motability car. Motability helps over 650,000 disabled people to acquire their own personal transport, more than any equivalent scheme worldwide. The scheme's success demonstrates the strength of the UK's commitment to enabling disabled people to participate fully in society.

⁷¹ UNIUK, paragraph 112.

⁷² <https://www.gov.uk/government/collections/personal-independence-payment-statistics>.

⁷³ UNIUK, paragraph 112.

⁷⁴ UNIUK, paragraph 112.

⁷⁵ UNIUK, paragraph 113g.

⁷⁶ http://www.motabilityoperations.co.uk/MO_Group_plc_Annual_Report_Accounts_2015.pdf, page 8.

⁷⁷ £2000 for people who joined the scheme before 2013; £1000 for people who joined during 2013.

Chapter 3: Conclusion and response to recommendations

81. The Government strongly believes that, though welfare provides necessary social protection, it is not the only way to help disabled people live independent, inclusive lives in which they can fulfil their potential. Implementing the Convention articles requires more than higher welfare payments. It requires society-wide shifts in attitudes and behaviours, innovative approaches to health provision, and concerted efforts to break down persistent barriers preventing disabled people from living independently, working, and enjoying full inclusion in their communities.
82. The Government has addressed assertions in the Report while also highlighting initiatives not considered in the inquiry that are integral to the UK's implementation of the three Convention articles. Comments in the Report's conclusion⁷⁸ have either been addressed above or are covered in the response to the recommendations⁷⁹ below.

Recommendation: paragraph 115

83. Since 2010 the Government has published cumulative analysis of the impacts of its tax, welfare and public spending policies on households. The most recent assessment was published at Budget 2016⁸⁰. It showed that the proportion of spending received by households in each quintile of the income distribution has remained similar since 2010-11, with half of all welfare and public services spending going to the poorest 40% of households in 2019-20.
84. This cumulative distributional analysis (by HM Treasury) is the most comprehensive available, covering not only the effects of direct cash transfers between households and government, but also the effects of frontline public service provision. Welfare spending is not the only way to help disabled people; further support including health spending, employment support, and investment in infrastructure are important enablers to the removal of barriers to participation.
85. This analysis is not broken down into sub-groups, such as disabled people, due to significant modelling limitations to the robustness of such analysis, e.g.:
- many benefits are paid to households rather than individuals. Modelling would have to make strong assumptions about how income is shared within households and the analysis results would be heavily dependent on these specific assumptions;
 - it is essential that the Living Cost and Food Survey (LCF) is used for the distributional analysis model. This survey does not hold sufficient disability information.

⁷⁸ UNIUK, paragraph 113.

⁷⁹ UNIUK, paragraphs 115-125. The text of the recommendations themselves has not been included due to strict word-count limits. However they can be easily located at the end of the Report.

⁸⁰ <https://www.gov.uk/government/publications/budget-2016-documents>.

86. Any analysis produced could not therefore present the full picture. Government officials carefully consider the equality impact of individual policy changes on people with protected characteristics, including disability, in line with both legal obligations and a strong commitment to equality. Ministers consider these impacts with regard to all relevant legal obligations when deciding welfare and other policies.

87. In addition to this analysis of specific policies, the Office for Disability Issues developed the Fulfilling Potential indicator framework to measure changes for the disabled population. Developed in consultation with disabled people, their organisations and academics, this framework covers broader indicators such as health, housing and public attitudes. These capture impacts beyond public spending, such as wider behavioural and economic changes, and important non-financial outcomes; and broadly align with articles in the UN convention. Two reports have been published⁸¹ covering the period 2010 to 15.

Recommendation: paragraph 116

88. The Government believes that the Public Sector Equality Duty (PSED) is aligned with a rights-based approach as it sets a legal duty on public authorities to consider the impact of policies on disabled people, and therefore how they are able to live their lives. Equality analysis was carried out on welfare reform policies and is referred to in the published impact assessments⁸².

89. Where impact assessments identified disproportionate impacts on disabled people, mitigation measures or transitional arrangements have been implemented where feasible (see paragraph 92). Where, following the implementation of a policy, there are unintended or disproportionate impacts on disabled people (or certain groups of disabled people), steps have been taken to address this. An example is the exemption of people receiving DLA, PIP and the support component of ESA from the benefit cap.

Recommendation: paragraph 117

90. This response outlines how UK legislation and policies support the core elements of rights set out in this recommendation. One example is the Care Act 2014, which introduced a modern system to promote and maintain the wellbeing of people with care and support needs so they continue to live independently. Another is the range of employment-related provision available to support equal opportunities to work and initiatives to improve employer attitudes such as Disability Confident.

Recommendation: paragraph 118

91. The Government already allocates budgets specifically to support disabled people with the extra costs of disability. These include the budgets for PIP, DLA and AA (non-means tested and non-taxable payments currently received by over 5m people), and Access to Work (provided non-means

⁸¹ <https://www.gov.uk/government/publications/fulfilling-potential-outcomes-and-indicators-framework-second-annual-progress-report>.

⁸² <https://www.gov.uk/government/collections/welfare-reform-act-2012-impact-assessments>.

tested support for the additional costs faced by over 36,000⁸³ disabled people at work in 2015-16). £21.7bn was spent on PIP, DLA and AA in 2015-16 and around £100m on Access to Work in 2014-15. The Care Act 2014 requires LAs to provide personal budgets to all adults with eligible care and support needs; the personal budget allocated must be sufficient to meet those social care needs.

92. Many of the mitigation measures and transition agreements covered in this response clearly indicate that budgets have been set aside to implement these protections. Examples include Discretionary Housing Payments to support disabled people affected by the Removal of the Spare Room Subsidy and the transitional support for people affected by changes to Motability eligibility.

Recommendation: paragraph 119

93. The Government provides information about its services as accessibly as reasonable; this response cites improvements in DWP customer communications, including letters, SMS text messages, call scripts, and the trialling of video relay services. The Care Act 2014 also requires LAs to provide accessible information about social care to people who may require care and support, including disabled people.

94. This commitment to continuously improving accessible communications is demonstrated by the Government Digital Service's work to ensure that Government's online platform is as accessible as possible. NHS England has introduced the Accessible Information Standard which requires all organisations providing NHS or adult social care to provide accessible information that people can understand.

95. Devolved Administrations have also implemented a number of initiatives to meet the communication needs of their own populations, including Scotland's video relay service 'contactSCOTLAND', which has invested £500,000 over three years and will invest a further £1m over the coming three years. In Wales, national standards set out the standards of service delivery that people with sensory loss should expect when they access healthcare in Wales.

Recommendation: paragraph 120

96. The Government believes that the right measures are in place to support disabled people to seek redress, through the EA 2010 (see paragraphs 19-20 and 60). In addition, legally-aided advice continues to be available for discrimination matters through the Civil Legal Advice service, which has been designed to be as accessible as possible.

Recommendation: paragraph 121

97. The Government has a strong record in engaging with disabled people, disabled people's organisations, representative groups, and service users. Clear consultation guidelines set out that officials should consider the full

⁸³ This figure may be subject to change following a detailed statistic collection methodology review.

range of people, business and voluntary bodies affected by proposed policies, ensuring that they can access the consultation. Consultation is widely practised across government, with over 3,000⁸⁴ formal public consultations taking place since 2010; over 50 related specifically to disability.

98. An example is the 'Better working with disabled people: the way forward' consultation of 2013⁸⁵, which considered how best to ensure that lived experience is strategically fed into government. As a result, the Fulfilling Potential Forum was formed to meet the needs of both government and the disability sector. Both formal consultation and co-production were integral to the development of the Care Act 2014, which has been recognised by the National Audit Office as a good example of collaborative working to develop legislation.
99. Government continues to demonstrate its commitment to including 'lived experience' in the development of policy at all stages. The Green Paper launches a wide-reaching conversation with disabled people and people with health conditions, their representatives, healthcare professionals and employers to identify the best ways to deliver improved opportunities for disabled people.

Recommendation: paragraph 122

100. The Government takes its responsibility to tackle Disability Hate Crime and promote positive attitudes towards disabled people extremely seriously. As highlighted in paragraphs 20-21, work is under way to raise awareness of Disability Hate Crime with a view to reducing incidents and increasing the reporting and prosecution of such crimes. In addition, the Government's new Hate Crime Action Plan for 2016⁸⁶ includes actions on the portrayal of disabled people, including targeted training and guidance for journalists.
101. This work is supported by initiatives to increase general awareness of disability and positive portrayals of disabled people, such as Disability Confident, and increasing the educational attainment of children with special needs through initiatives such as a new framework for initial teacher training and disability-specific resources on the new SEND⁸⁷ gateway.

Recommendation: paragraph 123

102. Legislation is in place (see paragraph 3) to ensure that disabled people's rights are protected. This includes people's rights not to be discriminated against as a result of their disability or any other protected characteristics, such as gender and age. This response cites examples of measures implemented to protect vulnerable groups or people who are

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https://www.gov.uk/government/publications?keywords=&publication_filter_option=consultations&topics%5B%5D=all&departments%5B%5D=all&official_document_status=all&world_locations%5B%5D=all&from_date=01%2F01%2F2010&to_date=

⁸⁵ <https://www.gov.uk/government/consultations/involving-disabled-people-in-policy-development>

⁸⁶ <https://www.gov.uk/government/publications/hate-crime-action-plan-2016>.

⁸⁷ SEND: Special Educational Needs and Disabilities. <http://www.sendgateway.org.uk/about.html>.

disproportionately affected. An example is the exemption to the Removal of the Spare Room Subsidy for certain families with a disabled child.

103. The Government recognises that disabled people are not a homogenous group, and seeks wherever possible to provide fair and personalised services. For example, safeguards such as those in PIP and ESA to protect people with mental health conditions (e.g. not closing claims when forms are not returned), demonstrate adjustments to mainstream processes aimed at protecting people from indirect discrimination.

Recommendation: paragraph 124

104. All policies must be compliant with the EA 2010, or the Disability Discrimination Act in Northern Ireland, and the Human Rights Act 1998. The Government does not have one fixed monitoring system in place with set indicators applicable to all policies. This would risk being restrictive of innovation, driving unintended behaviours or limiting flexibility to meet local needs. Government is content that the current system - where each policy area considers how it will monitor the impact of its policies, giving due regard to the PSED and ensuring that both the policy and its delivery meet the legal requirements of the EA 2010 – meets the spirit of this recommendation.
105. Government monitors the implementation and delivery of its policies as a matter of course, evaluating the effectiveness and efficiency of policies and seeking improvements where possible. Where problems are identified - through performance information, data trends, engagement with external stakeholders and partners or the general public - they are considered fully to decide if either the policy or its delivery requires revision.
106. The UK is a strong parliamentary democracy with a system that invites scrutiny and challenge. Ministers are publicly accountable through a variety of well-established parliamentary procedures, such as parliamentary questions, debates and select committees. The Work and Pensions Select Committee exists specifically to examine Government social security policies and can initiate enquiries, call Ministers to give oral evidence and publish findings. Similarly, the Public Accounts Committee can investigate matters relating to welfare spending.
107. The Government has commissioned independent reviews of policies which affected potentially vulnerable people. These offer an objective means of reviewing policy and its implementation and have been carried out for Employment Support Allowance, PIP and sanctions. The second independent review⁸⁸ of PIP is currently being carried out, helping the Government build on the improvements already introduced following recommendations in the first review on DWP communications with disabled people and how assessors interact with people at assessments.

⁸⁸ <https://www.gov.uk/government/publications/personal-independence-payment-pip-assessment-second-independent-review>.

Recommendation: paragraph 125

108. This document provides the UK Government's comprehensive response.