1. Introduction

1.1. Pluss is a Social Enterprise. We are a specialist employment service provider working with people whose disability or health condition means they require additional support to move successfully towards and into employment.

1.2. We have been delivering services to DWP for over 20 years. We are a Prime Contractor on the DWP’s specialist Work Choice employment programme, holding contracts in Devon & Cornwall, and West Yorkshire. In addition, we deliver Work Choice across the West of England and in Somerset on a subcontracted basis.

1.3. We know that the Work and Health Programme will be a crucial part of the Government’s strategy to halve the disability employment gap. We believe it must be designed and commissioned in a way that ensures it will be delivered by specialist supply chains capable of delivering the right support before, during and after entry into employment, and that local expert providers are not commercially excluded from helping to deliver the programme.

1.4. We recognise that a successful Work and Health Programme, and the wider welfare reform agenda it sits within, will have a positive impact on the number of people with disabilities entering the workforce. But to reduce the disability employment gap by any significant measure will require major innovation and step change in four other complementary areas of work:

   1) The need to find ways to support for people who will not or cannot access DWP provision to re-enter the labour market,
   2) The need to focus on and vastly improve workplace retention,
   3) The need to build on the promising but limited impact of Disability Confident to support and encourage employers,
   4) The need to maximise the leverage offered by devolution flexibilities to impact directly on this agenda.

2. The Work and Health Programme

2.1. Pluss believes that there is clear evidence from both recent programme delivery and from academic research of the need for the Work and Health Programme to utilise specialist delivery at both operational and prime levels.

2.2. The new programme’s challenge is that, for a majority of its customers, ‘any job’ won’t be good enough and won’t result in long-term sustainable employment. The greater the level or complexity of the disability or health need, the more precise the fit of the ‘person’, the ‘job role’ and the ‘employer’ must be. It isn’t that people with complex support needs can’t work – our experience is that they make some of the most outstanding employees for
the companies we support. It is simply that the further along the disability spectrum a person is, the more the pool of potentially suitable jobs and work settings narrow. As we have seen on the Work Programme, getting it wrong for this cohort means customers are often pushed further from the labour market with the result that the negative perceptions of some employers are often reinforced.

2.3. In-work support must be a critical central feature of the Work and Health Programme. For individuals on the programme, the issue may be the need to grow the resilience of someone with a mental health condition, or the challenge for someone with a learning disability of transferring learning between one context and another, or the importance of nurturing natural supports to help someone adapt to workplace routines, or of helping to manage trajectories that take an employee with communication or mobility challenges from ‘acceptable’ to ‘outstanding’. For the vast majority of participants, a job start on the programme will, at most, represent only half of the journey.

2.4. Procurement for the Work and Health Programme should be focussed on ensuring that primes are in place who understand the critical nature of specialists in delivering outcomes on the programme. They will need to effectively build and contract manage a team of specialists with local credentials and partnerships. This should include ensuring that supply chains are aligned and integrated with local health systems, in particular mental health, to support the journey back to work.

2.5. Commissioners want every customer to get an outstanding service. Payment by results is vital, but any payment by results approach must ensure that the Work and Health Programme rewards the work of providers for moving challenging customers towards the world of work as well as moving them into work.

2.6. Whilst the payment mechanism should be based on payment by results, those results should include both a greater focus on sustainment through stages of employment (in order to combat the churn in and out of work more effectively) and a mechanism for rewarding providers for moving challenging customers towards the world of work.

2.7. Both Ministry of Justice and Troubled Families programmes have benefitted from the use of milestone payments to ensure that excellence is equitably delivered, and the Work and Health Programme should do the same. Payment must include a service fee element to ensure that financial resources are available for providers to invest in the intensive support before, during and after a job start which is so critical for those people who are further from the labour market. A service fee is also crucial to ensure that small specialist providers – the ones best placed to deliver wraparound support that incorporates local health and wellbeing services - are not frozen out of the new programme as a majority of them would be by a 100% payment by results system.
2.8. It is vital to ensure that resources are capable of meeting the needs of specific localities. A sensible portion of the procurement process must be about how supply chains will meet local need. The necessarily robust commissioning process to achieve this should include a competitive dialogue process to test the realism of a provider’s written performance offer.

2.9. The purpose of supply chains was never simply for its own sake but to meet a range of specific needs. The commissioning process should not only be about checking that some specialists are included in the supply chain, but should examine in detail how a prime’s supply chain can meet the needs of the whole customer cohort across the whole of the delivery area, and in a way that effectively connects with local support services.

2.10. The procurement process should reward primes who levy a low management fee to ensure that the resources of its supply chain are targeted at customer facing activity. At the very least, primes must be obliged to spell out what they are charging supply chain providers for in order to avoid the suspicion that management fees are simply a tax on smaller providers.

2.11. Similarly, primes should be rewarded in the procurement process for not simply passing down risk to providers. Again, this was not the original intention of the prime provider model. This practice must be discouraged if we are to create an environment which is viable for the local specialists that customers with complex support needs require.

3. The bigger picture

3.1. Over the last 15 years, the number of disabled people in work has risen by 350,000. But since 2011 that figure has gone up by just 23,000.

3.2. The new Work and Health Programme will have 20% of the resources of Work Programme and Work Choice combined. The programme’s proposed funding (at £120million a year) is around the same value as the current Work Choice Programme. In its most recent full year, Work Choice (which has been significantly more effective than Work Programme in moving disabled into work), supported 8,987 people into 13-week Short Job Outcomes. We need to recognise, therefore, that even a highly successful Work and Health Programme will (numerically at least) make only a minor contribution to the Government’s aspiration.

3.3. To halve the disability employment gap – to move around 1.2 million more disabled people in work and keep them there – will require significant change and real innovation in other aspects of employment and labour market activity.

4. Staying in work

4.1. According to the ONS, over 400,000 disabled people each year lose their job and fall into unemployment or inactivity. One in six of those who become
disabled while in work lose their employment during the first year after becoming disabled. 40% of all employed disabled people say that modified hours have enabled them to stay in work; 36% of those out of work say that modified hours could have helped them retain their job.

4.2. Pluss believes that, if the Government’s pledge is to become a reality, a separate set of resources must be targeted at retention. We think the design of the Fit for Work service missed a crucial opportunity to manage much more pro-actively the outflow of employees with disabilities and health conditions. We think that Government should explore ways of developing a proactive retention service that meets the needs of both employers and disabled employees. Keeping just 5% of that 400,000 exodus in work would in itself have a substantially greater impact than the Work and Health Programme.

4.3. A significant percentage of disabled people falling out of the workforce are people from professional, technical and managerial positions with acquired disabilities and health conditions who have long careers behind them and who will choose not to access JCP. Pluss believes that DWP and other stakeholders should urgently explore the potential for an intervention designed to support this cohort of people to rapidly re-enter the workforce. We believe there is the potential to fund such a service from the Joint Work and Health Unit.

4.4. We also endorse the calls of a number of organisations including Scope and Leonard Cheshire for Government to explore the potential for ‘disability leave’ as a way of more effectively and constructively managing the fluctuating conditions of some employees.

5. Employment support beyond the Work and Health Programme

5.1. If it is commissioned well, the Work and Health Programme will help upwards of perhaps 10,000 people a year to enter the workforce. The intention is that jobseekers ‘closer to the labour market’ will be supported by Jobcentre Plus.

5.2. Pluss recognises that the new Work and Health Programme will be capped, and that the demand for the programme will significantly outstrip supply. At the same time, we know that local authorities are progressively having to withdraw funding for, and in some cases terminate, employment services for people in receipt of adult social care. The same concern applies to mental health employment services commissioned by CCGs. The four DWP mental health and employment pilots about to commence are welcome, but they take place against a background of reducing funding for local mental health supported employment programmes. This is because providing employment support is not a statutory requirement for local authorities or CCGs. We think there is a danger that, as DWP funding for employment programming shrinks and local authorities struggle to balance the books, people with learning
disabilities and significant mental health conditions are in danger of being squeezed out.

5.3. We note that £115 million of funding has been allocated for the Joint Work and Health Unit, including at least £40 million for a health and work innovation fund, to pilot new ways to join up across the health and employment systems.

5.4. Pluss believes that the innovation fund could be used to develop a series of pilots designed to develop interventions targeted at the retention agenda, at the rapid re-entry into the labour market of professionals with acquired disabilities and health conditions, and at models that would incentivise local authorities to maintain and develop supported employment services designed for people with moderate or severe learning disabilities.

6. Employers

6.1. We know that 16% of the UK working-age population are disabled. The ONS predicts that by 2020, over a third of the workforce will be aged 50+, and more than half of the over-50s workforce will have disability or impairment, so adopting a positive approach to the employment of disabled workers will become increasingly important.

6.2. As a social firm (meaning at least half of our employees have a disability), Pluss was closely involved in the development of the Disability Confident. The initiative has had a positive start, with some outstanding examples of local activity. Pluss, for example, have staged a wide variety of events in both the South West and in Yorkshire.

6.3. But we recognise that nationally, only 376 employers are registered as official supporters of Disability Confident, and only 68 are ‘active members’.

6.4. It is clear that we need a step change in the way employers are engaged and supported to be part of the solution. We need Disability Confident to become a national movement which is identifiably driving the agenda to halve the disability employment gap.

7. Transitions

7.1. As a specialist in disability employment, Pluss recognises the difficulties over more than a decade of trying to help talented young people with learning disabilities onto apprenticeship routes into work, and the frustrations around this for young people and for their families.

7.2. We are pleased that the Minister for Disabled People, Justin Tomlinson MP, and the Minister for Skills, Nick Boles MP, have recently agreed to establish a taskforce to explore access to apprenticeships for those with learning disabilities and other hidden impairments. We strongly support the clear ambition of this taskforce, and see a direct correlation with the wider agenda to halve the disability employment gap.
7.3. We believe that, alongside the issue of access to apprenticeships, Government should review the impact of supported internships which are designed for people with moderate and severe learning disabilities. The recent SEND reforms are welcome in seeking to raise aspirations for young people with disabilities to enter work, but our clear sense is that their impact is both patchy and limited. There remains no national unified drive to ensure that every young person with a disability who wants to transition into work can do so.

7.4. We believe the Project Search (internship) model, which Pluss has run successfully, is the single most effective way of building routes into work for young people with a learning disability; we know that most of these routes are developed into public service organisations; we believe that, since austerity will continue to be a watch-word for many years to come, it is imperative that internships and complementary initiatives can grow into a clearly identifiable national transitions programme, and that young people with learning disabilities have an equal chance to find a job and build a career wherever they live.

8. Jobs and growth

8.1. The UK Commission on Employment and Skills Working Futures study shows that by 2022 there will be a net increase in job creation at the top and bottom of the labour market (where disabled people are under-represented), but a net fall in jobs in the middle tier where they are over-represented.

8.2. An Institute for Fiscal Studies analysis of Government data projected a fall of 1.1 million jobs in the public sector between 2010/11 and 2017/18 – a drop of up to 40%, disproportionately affecting disabled people who previously made up 13% of the public sector workforce.

8.3. For these reasons, it seems critical to Pluss that the devolution agenda becomes a vital tool in shaping new opportunities for disabled jobseekers rather than a door that slams shut in their faces.

8.4. Government should engage specialists in disability employment support to work with DWP and other regional and sub-regional stakeholders to ensure that the strategic, directional and commissioning weight of LEPs, City Deals and Growth Plans are used in a concerted and co-ordinated way to maximise the chances of disabled people to enter the labour market.

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