Written evidence submitted by Shirley L Ryall, Teresa Shuttleworth, Nancy Doyle, Margaret Saunders, and Sharon Patmore (ATW0062)

Executive summary
- The contributors fully support the government’s ongoing positive initiative to support disabled employees to enter and remain in the workplace.
- The comments that follow do in no way suggest that such a programme should be withdrawn.
- It provides an insight, from their collective experience as providers of different parts of the service.
- It gives recommendations for improvement to the programme under the Select Committee’s suggested interest headings.
- The contributors’ aim is to ensure that people with disabilities are able to gain the most appropriate level of support to enter and remain in paid sustainable employment.
- To enable people with disabilities to be reasonably supported to enable them to advance in their chosen career to the highest level.

Introduction

1. Contributions to this response are from a group of Chartered Psychologists working with employees, employers and the providers of one or more elements of the Access to Work programme. The majority of comments relate to the specific part of the AtW programme that supports individual’s retention of employment i.e. The workplace assessment and recommended support required for a disabled employee experiencing difficulty in his/her job. Primarily the contributors to this response assess and/or provide services to support individuals who have a Specific Learning Difficulty SpLD (Dyslexia, Dyscalculia) and/or cognitive difference (Dyspraxia, AD(H)D, Asperger’s Syndrome).

2. The following contributors are all practicing Occupational Psychologists; members of the British Psychological Society (BPS) and registered with the Health & Care Professions Council (HCPC):

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Access to Work (AtW) application and assessment processes

3. The initial enquiry: The onus is placed on the employee when contacting the AtW advisor/call centre to know what their disability is and what support they will need at work. This is a particular problem for people with Specific Learning Difficulties (SpLD), especially if they have not had a formal diagnosis, or have not been advised of how their difference is likely to affect them in the workplace.

4. Likewise it is often difficult for people with a range of mental health issues to explain their problems. Individuals with such disabilities often have had bad experience when disclosing their disability, so making the application remotely (by phone or electronically) and explaining their condition can be a hurdle. But a lack of information gathered at the enquiry stage can lead to confusion and inaccurate notes recorded on the referral form.

5. Recommendation: The employee contacting the AtW team could be offered support to help them explain their disability. The employee/their support worker could also be asked to describe, as fully as possible, the job tasks and/or aspects of work that they find difficult. AtW referral forms often refer to one disability, rather than describing all the aspects that the employee is having difficulty with. Often there is more than one health aspect to consider e.g. stress and/or fatigue linked to the disability.

6. Advising of process: The employee and employer are frequently found to be unsure of what will happen next within the programme. Likewise it has been reported that AtW advisors are often hard to get hold of, to clarify procedure. This is time consuming and frustrating for any individual trying to contact them.

7. Providers of training, coaching etc. often have no background information about the employee's disability and/or the specific difficulties they have in the workplace.

8. Recommendations: An initial step by step information sheet to advise the employee and employer of the process and ongoing communication throughout. It could refer them to which stage of the programme they’re at, and the same document updated at different points of contact. In agreement with the employee a transfer of the information gathered could then be shared with the support provider i.e. stating the specific areas of difficulty and what support is required.

9. The workplace assessment: The workplace assessment can be too short, especially for the more complex conditions: The feedback indicates that the assessment session differs in different parts of the country i.e. The Northern provider allocating just an hour for each assessment. Within such a remit, it is easy to understand why AtW assessors often suggest a ‘typical package of software and aids’ rather than provide advice and guidance during the session and follow up with a bespoke report recommending appropriate support.
10. AtW workplace assessors often have general experience working with and supporting disabled people, only some have specific related qualifications to provide the upfront knowledge, training and expertise to advise and support employees and employers about specific learning difficulties, mental health and/or physical disabilities.

11. **Recommendation:** There is a need for a multi-level approach to get the most appropriate support for the more complex disabilities:

Level 1 - Generalised approach for individuals with disabilities or health conditions which are permanent and can be addressed by aids and adaptations – e.g. loss of a limb

Level 2 - A specialist approach for individuals with disabilities or health conditions which have subtle effects on work behaviour, and fluctuate or deteriorate over time. This would include “invisible” disabilities such as specific learning difficulties and mental health problems. It may also be appropriate for individuals who have more than one disability or health problems which may interact with one another.

12. **Reasonable adjustments:** Within the current system the employer is not consulted, about recommendations for support to the employee, prior to the AtW report being written. Consequently, some expensive technology, special aids and coaching are recommended which is not deemed appropriate for the role and organisation. The employer is forced to implement recommendations to avoid an Employment Tribunal.

13. **Recommendations:** A copy of the draft report including the recommendations could be sent to all parties to allow for a “reasonable challenge period” to highlight inappropriate recommendations, and any amendments agreed. The draft report could then become the “Recommended Support Report” on lapse of the “challenge period”.

14. One of our contributors is currently researching the efficacy of coaching as a reasonable adjustment and has already found promising results in favour of it: specifically between good and bad coaching the latter being worse than none as the service users are not informed consumers and will blame themselves when it doesn't work. Should the DWP be interested we are offering to support DWP with an evaluation of reasonable adjustments on a wider scale.

15. **Delivery of service:** There is a reported difference of service throughout the country. Remote areas appear to suffer, experiencing a restricted service e.g. phone support rather than face to face support. Timescales for delivery also vary: Delayed decisions obviously impact greatly on the individual, as well as the employer-employee relationship.
16. **Recommendation:** Standard minimum timescales could be implemented and regular training and communication would ensure a consistency of decision making across the country. Best practice sharing would encourage assessors to use bespoke interventions to suit the individual’s needs as well as take account of their geographical location.

**Adequacy of on-going support and the help and advice offered by DWP.**

17. **Knowledge of available support:** Both employers and employees are often unaware of the type of support that is available through the programme. Some believe it’s just aids and equipment, when what they really need is specific information and advice on how to manage the disability within the workplace.

18. **Recommendation:** ATW could offer a discrete option for “disability management consultancy” to employers and the employee, particularly where an employee’s job is at risk, or on starting work. This is particularly important for employees with specific learning difficulties and mental health problems where it can make a significant difference when employers and work colleagues have an understanding of how their disability affects for them. Often reasonable adjustments, such as job re-structure, re-deployment and changing working routines can be more effective and appropriate than aids and equipment.

19. **Assessment of support providers:** Within the wide range of suppliers there appears to be no benchmarking to ensure that support providers are qualified, and that they have the appropriate and up to date expertise to deliver the support required.

20. **Quality and quantity of support:** The recommendations for support currently fall into four areas: technology, aids, training and coaching. Training and Coaching usually have a recommended number of sessions. The number of sessions appear standard rather than bespoke to the needs of the individual.

21. Currently there is no automatic review or monitoring to ascertain whether the recommendations have helped the employee with the specific area of difficulty or whether the individual’s needs have changed: The employee’s disability, their work environment, job or tasks within their role.

22. **Recommendations:** Providers could be audited to ensure an adequacy of provision. The number and period of training and coaching sessions required should relate directly to the type and level of support required. An expansion of provision could include innovations and group or e-based alternatives.

23. Introducing an evaluation of the effectiveness of ATW to look at if the service users are still in work and/or working to their full potential. It could also assess the
user’s satisfaction with the service. The evaluation would provide an opportunity to identify any changes to the employee’s condition and/or workplace. The support could then be amended appropriately i.e. removal of, or additional support may be required.

Supporting people with mental health conditions and learning disabilities

24. Currently any employee who has a specific learning difficulty (SpLD) E.G. Dyslexia, Dyspraxia, and Dyscalculia that affects their work performance will often be recommended Strategy Coaching as well as any appropriate technology. The AtW assessors suggest a standard number of sessions for such one-off coaching e.g. 6 x 2 hour sessions to help the employee formulate strategies to help him/her manage their work. The number of session often don’t reflect the individual difference.

25. Employees with co-occurring difficulties like AD(H)D or Asperger’s syndrome often need a different type of coaching, and employers more advice in managing aspects of behaviour, than those employees with Dyslexia for example. Specific number of sessions requested by the AtW assessor should be supported if the employee’s need is justified.

26. Employees with ‘invisible’ or fluctuating conditions are at a particular disadvantage in accessing AtW support. The process is stressful and debilitating because it requires them to focus on their areas of difficulty. Such individuals cannot always predict the severity or frequency of their problems, and the process itself of applying for the AtW programme may make their condition worse. The current process assumes that the individuals are able to articulate clearly the psychological, social and emotional aspects of their disability.

27. Recommendations: There is a need therefore for an employee with either mental health condition or a learning difficulty to be offered an appropriately qualified mental health practitioner or skilled facilitator to support them in making an application and throughout the process including the actual provision of the support.

28. The number of sessions for any recommended coaching or training should reflect the individual’s need.

Helping disabled people to: secure a job, stay in employment and develop their careers.

29. The vital benefit of the AtW programme is that it helps individuals gain independence through work, manage their disability and support them to identify transferable skills and find successful careers. It also helps employers and the
employee’s peers to understand hidden disabilities, helps the employer retain experience and can reduce recruitment and training costs.

Secure a job:

30. The contributors to this response are not aware of specific services provided by the AtW, apart from a general English or Maths course, that help unemployed individuals understand and manage their cognitive difference e.g. Dyslexia, Dyspraxia, Dyscalculia, AD(H)D and Asperger’s syndrome. Specifically they need support in relation to what jobs, organisations or self-employment options would be most appropriate to pursue.

31. **Recommendation:** To extend the service to provide coaching to help those individuals with learning differences understand their strengths, identify appropriate types of jobs and be advised of the range of support that could assist them in the workplace.

32. The AtW programme should also be extended to unpaid employment – to help people with disabilities obtain paid sustainable employment.

Stay in employment

33. Disclosure is a hurdle when entering the workplace for the first time or changing jobs. We have found that previous discrimination will influence an individual in admitting their hidden disability. Therefore the employee’s difficulties start to occur either during their training or within the first 12 months of the job. Consequently often the individual can be under a “performance improvement plan” when AtW are contacted. Mainly because he/she is struggling to perform in the role unsupported.

34. It is sometimes difficult for individuals with SpLD and/or co-occurring difficulties to identify possible work tasks that may be difficult for them, especially if they are entering the workplace for the first time, or the job specification is unclear about the wider requirements of the role. This often means that there is no technological or coaching solution to help this person perform fully in the role.

35. **Recommendations:** Therefore it is suggested that employers are encouraged to provide a reasonable transitional period for the AtW recommendations to be implemented and learning/behaviour allowed to be supported.

36. To encourage employers through an educational approach that there’s a need sometimes to redesign/adapt a role e.g. To remove/add tasks in order that the individual can perform using his/her strengths. Currently there is no process to
facilitate this consultancy help, as the AtW assessors have neither the time nor expertise, in most cases, to advise on this.

**Develop careers**

37. If an employee has had difficulty obtaining the right support in the first instance through AtW, or received inappropriate recommendations, they will be cautious about applying for promotion or changing roles to develop their careers.

38. **Recommendation:** All reports and reviews of the employee should detail the employee’s feedback and consider any future requirements for the individual considering promotion and/or change of roles.

**Extending AtW**

39. There is still a lack of public awareness of the AtW programme. It would appear from our feedback that employers and employees working in the Public sector are more widely aware of the programme than those working in Private and Third sector organisations.

40. **Recommendations:** Increase marketing and awareness to the Private & Third Sector especially small businesses. This could be done through local council indicatives, also through relevant disability organisations and educational institutions. It would be beneficial to advise/remind doctors and medical practitioners of the type of support available e.g. job coaching available for those who have been long term sick and returning to work.

41. There is a need for more joint working with government agencies who have responsibility for health and employment to also promote ATW as part of their service delivery centrally and locally e.g. NHS, ACAS, HSE, Public sector employers and third party agencies delivering welfare to work programmes.

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