

**Department for Social  
Development's Response to  
Professor Malcolm Harrington's  
Third Independent Review of the  
WCA**

**November 2012**

# Ministerial Foreword

This report represents the Department for Social Development's response to the third, in a series of five, annual independent review of the Work Capability Assessment. In his previous reports Professor Malcolm Harrington, an occupational physician, has made substantial recommendations to improve the fairness and effectiveness of the Work Capability Assessment. I am very encouraged to note his recognition of the 'strenuous efforts' made to implement his recommendations. Indeed my Department has already implemented all of the recommendations from Professor Harrington's first report and 20 of the 23 recommendations from his second.

Professor Harrington has acknowledged that significant improvements have already been made to the Work Capability Assessment for both staff and claimants and we believe this has laid the groundwork from which further progress can be made. Nevertheless the key finding from Professor Harrington's third review is the need to complete the tasks that have already been started. We need to continue the work to consolidate and strengthen the improvements we have already made to shape the Work Capability Assessment process to better meet the requirements of claimants. To that end we will continue the implementation of the remaining recommendations from his previous reviews, which will introduce changes to the descriptors affecting cancer sufferers early in 2013 and a review of 'alternative' proposals to change the mental, intellectual and cognitive descriptors (including fluctuating conditions) in Spring 2013, and build on the work already done to embed his previous recommendations.

In the past we have allowed too many people with health conditions to be considered unable to work and not given them the assistance they require to fulfil their potential and contribute to society. We now focus on what people can do, rather on what they cannot and believe that generally appropriate work is good for most people's physical and mental health and well-being. The Work Capability Assessment was introduced to assess the claimant's entitlement to Employment and Support Allowance and identify the possible support needed to get them back into the workplace. However, in a period when this government is introducing the most fundamental reforms to the social security system in over 60 years, it is important that we continue to review and refine the changes which are made and in this instance ensure that the Work Capability Assessment is a fair and effective way of meeting the needs of those it is designed to protect and support. Once again, we accept the recommendations made by Professor Harrington in this review in order to continue the change process.

I welcome the emphasis Professor Harrington placed on the commitment to change within the Department, stating that he has experienced "nothing but support for what [he] was trying to achieve: that is, making the Work Capability Assessment a more humane and caring assessment which gives due consideration to those claimants who are least able to help themselves." The job won't be done overnight, but we are on the right road and the signs indicate that the process as a whole is improving and I look forward to monitoring further improvements in the coming year.

As this is his last independent review, I would like to take this opportunity to thank Professor Harrington for all his advice and hard work over the last few years and thank him for the invaluable contributions he has made to assist in improving the operation of the Work Capability Assessment in Northern Ireland.

Nelson McCausland

**Minister for Social Development**

# Introduction

1. The Department for Social Development welcomes Professor Harrington's report which represents the third independent review of the Work Capability Assessment in Northern Ireland. This report builds on Professor Harrington's first two reviews, once again gathering a range of evidence to provide an insight into how the process is working, the impact of the improvements already made, and what we can do to further improve the process. In conducting this review Professor Harrington has considered specific issues pertaining to the Work Capability Assessment process as they apply in Northern Ireland.
2. Professor Harrington's third report confirms his previous assertions that the Work Capability Assessment 'remains a valid concept for assessing... eligibility'. He acknowledges that whilst the Work Capability Assessment continues to attract considerable criticism there is no compelling arguments or evidence to indicate that the whole system is fundamentally unsound and should be scrapped.
3. The recommendations contained in Professor Harrington's previous reviews, and this Department's response of accepting and implementing them, have already significantly changed and improved the Work Capability Assessment. We welcome Professor Harrington's observations about the improvements made but acknowledge that some individuals still find the process challenging. There is still work to be done to consolidate and strengthen the improvements we have already made and we are committed to doing this, and to making further improvements as and when they are identified.
4. We welcome, and accept, the recommendations made by Professor Harrington in this review, which focuses on the need to continue and complete the reforms that we have already started, and to communicate more clearly where the process is working, as well as where it may still have room for improvement.
5. This document sets out the Department for Social Developments full response to Professor Harrington's findings and provides an overview of the improvements made to date, an update on progress with implementing outstanding recommendations, and our response to each of his recommendations from this year's report (see Annex A).

## Northern Ireland Independent Reviews

6. Section 10 of the Welfare Reform Act (Northern Ireland) 2007 places a statutory duty on the Department for Social Development to lay an independent report before the Assembly on the operation of the Work Capability Assessment each year, for the first five years. The aims of the Independent Reviews are to improve the fairness and effectiveness of the Work Capability Assessment.
  
7. Professor Harrington's first Northern Ireland report was presented to the Assembly in September 2011 and his second on 30 November 2011. The reviews identified areas where the Northern Ireland context differed from Great Britain, and acknowledged the high standard of work from Decision Makers here in Northern Ireland, whom he described as being 'part of an impressive quality assurance programme'. These reports set out a substantial series of recommendations aimed at improving the fairness and effectiveness of the Work Capability Assessment. All of the recommendations were either accepted outright, or accepted in principle subject to further investigation of how they could be implemented.
  
8. In November 2011, the Secretary of State for Work and Pensions reappointed Professor Harrington to carry out the third Independent Review and he agreed the inclusion of Northern Ireland in the review.

The terms of reference for the Review in Northern Ireland were:

- To evaluate the effectiveness of the Work Capability Assessment in correctly identifying those claimants who are currently unfit for work as a result of disease or disability;
- To evaluate the effectiveness of the limited capability for work-related activity assessment in correctly identifying those claimants whose disability is such that they are currently unfit to undertake any form of work-related activity;
- To take forward the programme of work identified in the previous reports;
- To monitor and report on the implementation of the recommendations in the year one report; and
- To provide a report of the third independent review to be laid before the Northern Ireland Assembly in order to meet the legislative requirement as specified under Section 10 of the Welfare Reform Act (Northern Ireland) 2007.

9. Although this is Professor Harrington's final review there are two further reviews to be conducted. The Department of Social Development has asked to be

included in provisions being made by the Department for Work and Pensions for the completion of these reviews. This includes a request that the independent reviewer visit Northern Ireland at least once as part of each review.

## **Improvements to the Work Capability Assessment**

10. Professor Harrington has acknowledged the strenuous efforts already made by the Social Security Agency to improve the so called 'claimant journey' and he notes that "real progress" has been made to implement his recommendations. To date all recommendations relevant to the Social Security Agency contained within his first report have been implemented along with 20 of the 23 recommendations from his second report.

11. This has resulted in major changes to the Work Capability Assessment process including:

- Improvements to the forms issued to claimants to make them clearer, less threatening, and to more fully explain the process;
- Amending the medical questionnaire (ESA50) to enable claimants to express the issues they face with a personalised justification;
- The production of a Customer Charter by Atos;
- The introduction of Mental Function Champions to provide expert advice to Healthcare Professionals when dealing with claimants with mental, intellectual and cognitive illnesses and the plain-English personalised summary statements in every report to improve the face-to-face assessment;
- Improving training and guidance for Healthcare Professionals and Decision Makers and establishing a helpline to enable Decision Makers to contact Healthcare Professionals when they need advice;
- The introduction of the pre-decision call whereby Decision Makers attempt to contact claimants by telephone to offer them the opportunity to provide further evidence before making their final decision; and
- Decision Makers now provide claimants with a 'Decision Maker Reasoning', outlining their reasoning as to how they came to their conclusion.

12. A Health Assessment Adviser was also appointed by the Department in August 2011 with responsibility for ensuring the quality of services provided by Atos. This includes their audit processes, the standard of training and training materials provided to Healthcare Professionals, quality assurance of medical guidance and the approval of all appointed Healthcare Professionals.

13. Over the past year the Health Assessment Adviser has developed a Quality Assurance Framework which incorporates a formal quarterly audit process. A number of audits of medical assessments, training and the quality of the personalised summary statements have been completed, including an external audit validation, and to date no major issues have been identified with the Atos processes, training or procedures in Northern Ireland.
14. An Evaluation Framework has also been developed by the Social Security Agency to assess the impact of the changes made as a result of implementing Professor Harrington's recommendations. As part of this a recent survey of Decision Makers in Northern Ireland emphasised the improvements made following the implementation of the year one Review with 62 per cent of respondents considering that the information contained in the personalised justification statement (ESA50) as useful when making their decision. A majority (80 per cent) of Decision Makers also confirmed that they now found it easier to complete the Decision Makers Justification.
15. We therefore agree with Professor Harrington that the next stage of the continual improvement process should be to focus on consolidation and monitoring the improvements already made. There is no evidence at this stage for a further period of radical reform.

## Improving the Work Capability Assessment – The Process

### The Claimant Experience

16. In response to Professor Harrington's previous recommendations the Social Security Agency, along with colleagues within the Department for Work and Pensions, identified and piloted a number of options to improve the customer experience and increase the return rate of the medical questionnaire (ESA50).
17. Following a positive response to the pilots in Great Britain the Department for Work and Pensions commenced national rolled out the following changes from October 2011:
- a new form **ESA35/35A** to remind customers to return their ESA50;
  - an **allowance call** to advise customers that they were entitled to Employment and Support Allowance and explain their entitlement and any action required; and

- a **pre-disallowance call** to provide the customer with the opportunity to provide any additional evidence to inform the Decision Makers final benefit entitlement decision.

18. Separate pilot exercises were conducted by the Social Security Agency in early 2012 and the findings only supported the introduction of the pre-disallowance call, which was introduced from April 2012.

19. The Social Security Agency has consistently performed strongly in achieving a low fail to return rate for medical questionnaires (form ESA50), with an average of 13 per cent of claimants not returning the form, compared to 28 per cent in Great Britain. This can, in the main, be attributed to staff's commitment and ongoing engagement to raise awareness amongst claimants and the Advice, Voluntary and Community Sector of the importance of engaging in the process and returning the medical questionnaire.

20. We continue to monitor an ongoing pilot exercise in Great Britain regarding the use of SMS text messaging and decisions as to whether to introduce in Northern Ireland will be based on the evaluation report which is expected in 2013.

21. The Social Security Agency has instigated two research projects which will assess the claimant impact of the changes and examine in more details what happens to people found Fit for Work and those places in the Work Related Activity Group and Support Groups. The outputs are anticipated early 2013 and research already conducted by the Department for Work and Pensions will provide a useful benchmark for the research findings.

## **The Face to Face Assessment**

22. The year two review made a number of recommendations for Atos and as a result changes have been made to the IT system used by Healthcare Professionals during the face to face assessment. Additionally, the use of the free text by Healthcare Professionals is now monitored by the Health Assessment Adviser.

23. A further recommendation for Atos was made around the tightening of the target for C-grade reports for Healthcare Professionals under audit and on publishing data on Atos performance and quality. In conjunction with the Department for Work and Pensions we have asked Atos to consider the impacts of a reduction of the National C-grade target for ESA assessments from 5 per cent to 4 per cent. Atos have recently provided a detailed response to this request which the Social Security Agency is considering and will move forward accordingly.

## **The Decision Making Process**



24. Professor Harrington has maintained that it is important that Decision Makers feel empowered to make balanced and reasoned decisions and that they do not just “rubber stamp” the Atos recommendation, as they are often accused of doing in the media. The independent medical assessment, notwithstanding the potential value of other sources of information or evidence, remains a crucial central element of any objective, consistent process of qualifying for benefit. We must guard against an assumption that Decision Makers should ‘prove’ their independence by taking a different view from the Atos recommendation without regard to the specifics of the case.
25. The reviews acknowledged the high quality of decision making in the Social Security Agency and a recent survey of Decision Makers confirms that the majority believe that they are at the heart of the process and feel empowered to make independent decisions based on all the evidence before them. 81.5 per cent of respondents were confident or very confident in their decision making.
26. Similar to findings in Great Britain, some Decision Makers are uncomfortable making the new pre-disallowance calls, especially when claimants disagree with or do not understand the decision that has been reached. This was more prevalent amongst less experienced staff. However, evidence to date suggests that the calls are helpful for both Decision Makers and claimants and this will be further evaluated as part of the ongoing Northern Ireland Employment and Support Allowance Research survey.
27. In response to his second review recommendation to regularly audit Decision Makers performance, Professor Harrington considered that sufficient audit arrangements are already in place in Northern Ireland through the Standards Assurance Unit and the Standards Committee.

## **Communications**

28. In response to Professor Harrington’s recommendations in his second review to improve the communications a Harrington Communication Strategy and plan have been developed to improve both internal and external communications in Northern Ireland.
29. To improve the communications between Decision Makers and Atos, there is a telephone support service through which Decision Makers can consult Healthcare Professionals for advice on specific cases. The Decision Makers can also consult with Atos Mental Function Champions on mental health issues.
30. We are currently monitoring pilot exercises in Great Britain aimed at improving communications between the Decision Makers and Personal Advisers. Initial

findings are encouraging but more work remains to evaluate the results before a decision on implementation can be taken.

31. Work is ongoing in the Department for Work and Pensions to put arrangements in place for a designated Departmental contact to help manage the claims of persons released from prison due to a miscarriage of justice. Although these cases are an irregular occurrence in Northern Ireland, discussions are ongoing with the Department of Justice and prison support groups to put similar arrangements in place in Northern Ireland.

## Appeals

32. In his first report Professor Harrington made three recommendations regarding the appeals process and these were carried forward in their entirety to his third review. They are:

Recommendation
<b>15.</b> The review recommends that the First-tier Tribunal should routinely provide feedback to Jobcentre Plus staff and Atos Healthcare Professionals. As part of their professional development Jobcentre Plus Decision Markers should be encouraged to attend tribunals.
<b>16.</b> The review recommends that tribunal decisions are better monitored, including monitoring of the relative or comparative performance of tribunals.
<b>17.</b> The review recommends that training offered by the Chamber President to Tribunal judges and medical members should include modules on the evidence of the beneficial effects of work to an individual's well being.

33. The appeals process remains an area of concern for the Department. It is the aim of the benefit assessment process to get the decision 'right first time'. Throughout the Work Capability Assessment process there are a number of opportunities for the claimant to provide all relevant evidence to assist the Decision Maker in making their decision. Despite this, 35 per cent of appeals in Northern Ireland were upheld in the claimant's favour. However, this was mainly due to additional evidence being presented at the appeal hearing which may have been oral and/or ocular evidence considered by the appeal panel or further written medical evidence provided by the appellant or witness.

34. Whilst judges in Great Britain have started to provide limited feedback on the reasons why they upheld an appeal, these arrangements are not yet in place in Northern Ireland. Through the Appeals Project the Social Security Agency will continue its efforts to engage with The Appeals Service to move these recommendations forward.

## **The Descriptors**

35. Respondents to the call for evidence in Northern Ireland were critical of the suitability of the descriptors used in the assessment, particularly for customers suffering from mental health conditions and from cancer.
36. In the course of his reviews Professor Harrington has looked at a number of sets of descriptors used in the Work Capability Assessment. We agree with Professor Harrington that the descriptors are not the be-all and end-all of the process; it is as much about how the assessments are done (the process) as it is about the legislation. However, we do recognise that the descriptors are a particularly sensitive area and the focus of much criticism. Following detailed work we have made significant progress to change or build the evidence base we need to underpin any change.
37. Work on improving the descriptors has included consideration of the best way to respond to concerns around the sensory descriptors, and the impact of pain and fatigue. We agree with Professor Harrington that there is insufficient evidence at this stage to warrant specific changes to the descriptors themselves. However, we are updating our guidance products, for Decision Makers and Healthcare Professionals, to include reference to any changes that are needed around sensory impairments and the impact of pain and fatigue.

## **The 'gold standard' or 'evidence based review'**

38. Professor Harrington tasked Mind, Mencap and the National Autistic Society to suggest refinements to the mental function descriptors and representative groups around the fluctuating conditions descriptors. Following on from this work the Social Security Agency, in conjunction with the Department for Work and Pensions, will conduct an evidence-based review in spring 2013 to assess whether the 'alternative' proposals to change the mental, intellectual and cognitive descriptors (including fluctuating conditions) would lead to improvements in the assessment.

## **Individuals undergoing treatment for cancer**

39. Following on from Professor Harrington's work with Macmillan Cancer Support, the Department conducted a consultation in January / February 2012 which set out proposed reforms to the Work Capability Assessment and sought to gather further evidence and a wider range of views regarding the proposals.
40. As a result of the evidence gathered from the consultation process proposals were revised and legislation is being brought forward, in early 2013, to expand the categories of cancer treatments under which a claimant may be treated as having limited capability for work related activity, to include individuals who are:

- awaiting, receiving or recovering from treatment by way of chemotherapy irrespective of route; or
- awaiting, receiving or recovering from radiotherapy.

41. It is the debilitating effects of their treatment which will be the deciding factor. We anticipate that each individual will be assessed on a paper basis with the vast majority being placed in the Support Group, subject to supporting medical evidence. Amendments are also being made to the medical questionnaire (ESA50) to introduce a 'light touch' evidence gathering process to support the proposed changes.

## **Conclusion**

42. Professor Harrington has acknowledged the strenuous efforts already made to implement the recommendations from his previous reviews in Northern Ireland. The changes made have already significantly improved the Work Capability Assessment for both staff and claimants and we believe has laid the groundwork from which further progress can be made. Nevertheless further work is required to shape the Work Capability Assessment process to better meet the requirements of claimants and we will continue to visibly support the changes and take steps to ensure compliance with the new processes and procedures introduced.

43. Work continues to progress implementation of three recommendations from Professor Harrington's second review and an update on these and all the recommendations from the first two reviews is contained at Annex A.

## **Year Three - Call for Evidence**

44. In August we launched the call for evidence in Northern Ireland to inform Professor Harrington's third independent review. By the closing date of 14 September 2012 over 270 responses had been received. The majority of responses, 243, were from individuals with the remaining 36 from professional and voluntary organisations.

45. A considerable amount of information was gathered through the call for evidence. The key themes in these responses were that:

- The face to face assessment can still be impersonal and mechanistic;
- Mental health conditions and people with cancer are often not adequately catered for in the assessment, and as a result the descriptors need improving;
- If supplied, medical evidence is 'ignored'; and

- Claimants felt pre-judged and that the system was set up to remove them from the benefit.

46. All Northern Ireland responses were shared with the Great Britain Review team for their consideration.

## **Key Findings of the Third Review**

47. The key finding from Professor Harrington's third independent review is the need to complete the tasks that have already been started. He acknowledges that although progress has been made, more work needs to be done in the following areas:

- Improve communications with claimants and Operations;
- Improve the face to face assessment;
- Establish quality dialogue between the Department and the Appeals Tribunals;
- Keep the Decision Maker central to the assessment process and providing them with the relevant documentary evidence they need to get the decision 'right first time';
- Continue to monitor the effectiveness of the changes made to the Work Capability Assessment; and
- Complete the work underway on the descriptors.

48. Professor Harrington has acknowledged that the process of change in such a complex system, and a large Department, will take time to introduce, to refine and to bed in. Despite these challenges we have made significant improvements already and remain committed to driving through the improvements already underway.

## **Improving the Work Capability Assessment – Recommendations from the Third Independent Review**

49. The main themes emerging from this year's review is the need to get decisions 'right first time', to build on the progress already made in improving the Work Capability Assessment and to complete the work already underway to implement the remaining recommendations from the previous reviews. This review proposes no major new reforms, but does make four specific recommendations to improve the process, and suggests two areas of focus for subsequent reviews, a total of six recommendations.

50. The four recommendations aimed at continuing to improving the Work Capability Assessment are:

- **Decision Makers should actively consider the need to seek further documentary evidence in every claimant's case:** This builds on the year one recommendation for Decision Makers to ensure that all relevant information is available when coming to a decision on eligibility for benefit. Professor Harrington has raised concerns that further evidence is often only provided during the reconsideration process, when it would be more relevant earlier in the process. We anticipate that the best way of implementing the intent behind this recommendation would be to introduce an additional element to the Atos process whereby Healthcare Professionals would actively consider the need for further evidence, and include a justification where they decide it is not necessary. In conjunction with colleagues in the Department for Work and Pensions we will review the implications of the proposed change and any final decision on implementation will be based on the outcome of this review.
- **Operations need to strike a balance between 'right first time' decisions and performance benchmarks:** Professor Harrington has previously commented on the quality of decision making in the Social Security Agency and audit arrangements which are in place to monitor and maintain quality, through the Standards Assurance Unit and the Standards Committee. We accept Professor Harrington's emphasis on the need for decisions to be 'right first time' and striking a balance between quality and performance benchmarks. Part of this balance depends on acknowledging the role of appropriate benchmarks in maintaining the processing times required to ensure claimants are dealt with in a timely fashion. The Social Security Agency will continue to review benchmarks and use the Quality Assurance Framework to further improve decision making standards.
- **The Department should continue to encourage the First-Tier Tribunal Service:** Whilst judges in Great Britain have started to provide limited feedback on the reasons why they upheld an appeal, these arrangements are not yet in place in Northern Ireland. Through the Appeals Project the Social Security Agency will continue its efforts to engage with The Appeals Service to move these recommendations forward.
- **Take the initiative and highlight the improvements that have been made where they exist, as well as being open about where problems remain:** This recommendation highlights the ongoing perception problems with the Work Capability Assessment and the need to be more proactive in articulating

the strengths of the process, as well as being open about its shortcomings. This applies equally to Atos who can find themselves the target of unjustified criticism about their performance, despite the significant and ongoing efforts they have made to improve their processes and provide a better experience for our claimants. We will do more in the future to make clear where we and Atos have improved, as well as where we think there is more work to do.

51. Our full response to all six recommendations is included at Annex B.

## Year 3 recommendations

List of Recommendations	Department for Social Development's Response
<p>1 Decision Makers should actively consider the need to seek further documentary evidence in every claimant's case. The final decision must be justified if this is not sought.</p>	<p><u>Response:</u> <b>Accepted in Principle</b></p> <p>We must first work to ensure it can be implemented in a cost effective fashion before taking a final decision.</p> <p>While the claimant is provided with a number of opportunities to provide all relevant documentary evidence through the process, we accept it is preferable to receive this as early within the process.</p> <p>The Social Security Agency's will work with the Department for Work and Pensions and Atos to review the possibility of introducing an additional element to the Atos process whereby Healthcare Professionals would actively consider the need for further evidence, and include a justification where they decide it is not necessary.</p>
<p>2 DWP Operations must enable Decision Makers to undertake their enhanced role free of unnecessary bureaucracy – including throughput time, targets or benchmarks – at a local level, otherwise there is a real risk of derailing the positive progress made to date.</p>	<p><u>Response:</u> <b>Accepted in Principle</b></p> <p>All Decision Makers within the Social Security Agency are subject to performance targets and quality checks to ensure productivity, standards of decision and customer service. The evidence would not suggest that this is impacting on the progress to enhance the Decision Makers role. DSD will continue to work with DWP and local management to monitor the situation and take action to address any issues identified.</p>
<p>3. DWP should continue to work with the First-tier Tribunal Service, encouraging them to, where appropriate, ensure robust and helpful feedback about reasons for upheld appeals.</p>	<p><u>Response:</u> <b>Accepted in Principle</b></p> <p>The Social Security Agency acknowledges that receipt of robust feedback regarding the reasons for upheld appeals would be beneficial in improving the standard of decision making. The Agency's Appeals Project continues to pursue cooperation from the Appeals Service in taking forward this recommendation.</p>



	<b>List of Recommendations</b>	<b>Department for Social Development's Response</b>
4	DWP must take the initiative and highlight the improvements that have been made where they exist, as well as being open about where problems remain and their plans to address these.	<u>Response:</u> <b>Accepted in Principle</b> The Social Security Agency has a Communication Strategy and Plan in place for the Work Capability Assessment Review. This will continually be monitored and reviewed to ensure that key messages are communicated to the relevant audiences.
<b>Training</b>		
5	The year four and five Reviews should further explore the quality of the outcomes rather than simply on the quantity of the training offered.	<u>Response:</u> <b>Accepted in Principle</b> A final decision on what should be covered in the fourth year review will be at the discretion of the new independent reviewer. However, we support the proposal that this could be a fruitful area to be considered in next year's review.
<b>Complex problems and chaotic lifestyles</b>		
6	DWP Operations and Atos Healthcare should take further steps to engage effectively and meaningfully with the UK Drug Policy Commission and other related groups concerned with the needs and difficulties of problem drug users to improve the WCA processes for them.	<u>Response:</u> <b>Accept in Principle</b> The Social Security Agency in collaboration with DWP and Atos will continue to engage with relevant experts to help facilitate updates to relevant sections of the Work Capability Assessment Handbook.

## Summary of Progress on Year One and Year Two recommendations

YEAR 1 RECOMMENDATIONS UPDATE			
No	Recommendation	Current Position	Status
1	Jobcentre Plus should manage and support the claimant during the course of their benefit claim and identifies their chosen Healthcare Adviser.	<b>ESA35/35A</b> - The issue of a new form ESA35/35a was piloted in NI Jan / Feb 12 to reduce the failed to return rate of the ESA50. The issue of the form had no impact on the Failed to Return and consequently the form was not rolled out.	<b>Closed</b>
		<b>Pre –Decision Call</b> - Following a pilot in February 2012 which contacted over 90 per cent of customers whom the Decision Maker was inclined to disallow the call was rolled out in the ESA centre from 1 April.	<b>Closed</b>
		<b>Allowance Call</b> - Following a pilot in NI when the response rate was only 30 per cent, and only 40 per cent of those contacted wanted to continue with the Call it was not introduced in the SSA.	<b>Closed</b>
2	The ESA50 should include a more personalised justification so the claimant can express the issues that they face in a short paragraph.	A revised version of ESA50, taking account of the recommendation, was introduced by the Social Security Agency with effect from 28 March 2011.	<b>Closed</b>
3	In the longer term, the review recommends that the Government reviews the ESA50 to ensure it is the most effective tool for capturing relevant information about the claimant.	Following a review the Social Security Agency, in conjunction with Department for Work and Pension colleagues determined that the ESA50 is currently the most appropriate tool supported by the medical assessment and the provision of any additional documentary evidence	<b>Closed</b>
4	Written communications to the claimant should be comprehensively reviewed so that they are clearer, less threatening, contain less jargon and fully explain the process.	The Social Security Agency has revised a number of written communications and these were introduced from 8 April 2012	<b>Closed</b>

<b>YEAR 1 RECOMMENDATIONS UPDATE, Continued</b>			
<b>No</b>	<b>Recommendation</b>	<b>Current Position</b>	<b>Status</b>
5	Every Atos assessment should contain a personalised summary of the assessment in plain English.	Solution implemented in Northern Ireland by the Social Security Agency on 28/10/11. Process also put in place to monitor quality of the statements.	<b>Closed</b>
6	Every claimant should be sent a copy of the Atos personalised summary and is able to discuss any inaccuracies with a Decision Maker.	Professor Harrington agreed to the issue of the Decision Makers Justification rather than the Personalised Summary statement and the Social Security Agency now issues this along with disallowed decisions.	<b>Closed</b>
7	Atos should provide mental, intellectual and cognitive champions in each medical assessment centre. These champions should spread best practice amongst healthcare practitioners in mental, intellectual and cognitive disabilities.	The Social Security Agency initially made provision for one champion to be put in place but the service was enhanced from 16 April 2012 to extend the provision to four champions.	<b>Closed</b>
8	Atos should pilot the audio recording of assessments to determine whether such an approach is helpful for claimants and improves the quality of assessments.	Atos piloted the audio recording of assessments in Great Britain and as a result of the evaluation of the Pilot this has been withdrawn.	<b>Closed</b>
9	Atos should develop and publish a clear charter of claimant rights and responsibilities, and should consider publishing the HCP guidance online for customers and advisers.	Atos published the Health Care Professional Guidance on 21 April 2011. The Customer Charter has been published and displayed in Medical Examination Centres since 19 September 2011	<b>Closed</b>
10	Jobcentre Plus Decision Makers be put back at the heart of the system and empowered to make an independent and considered decision.	Existing Social Security Agency processes already incorporate this recommendation.	<b>Closed</b>
11	Better use of the reconsiderations stage.	The Social Security Agency has arrangements in place to conduct Reconsiderations by another Decision Maker at appeal stage.	<b>Closed</b>

<b>YEAR 1 RECOMMENDATIONS UPDATE, Continued</b>			
<b>No</b>	<b>Recommendation</b>	<b>Current Position</b>	<b>Status</b>
12	Decision Makers are able to seek appropriate chosen healthcare professional advice to provide a view on the accuracy of report if required.	The Social Security Agency has arrangements in place to conduct Reconsiderations by another Decision Maker at appeal stage.	<b>Closed</b>
13	Better communication between Decision Makers and Atos Healthcare Professionals to deal with borderline cases.	Existing Social Security Agency processes already incorporate recommendation.	<b>Closed</b>
14	Decision Makers receive training so that they can give appropriate weight to additional evidence.	Existing Social Security Agency processes already incorporate recommendation.	<b>Closed</b>
15	The First-tier Tribunal should routinely provide feedback to Jobcentre Plus staff and Atos Healthcare Professionals. As part of their professional development Jobcentre Plus Decision Markers should be encouraged to attend tribunals.	Carried over to Year 3.	<b>Ongoing</b>
16	Tribunal decisions should be better monitored, including monitoring of the relative or comparative performance of tribunals.	Carried over to Year 3.	<b>Ongoing</b>
17	The Chamber President should offer training to Tribunal judges and medical members and should include modules on the evidence of the beneficial effects of work to an individual's well being.	Carried over to Year 3.	<b>Ongoing</b>

**Note: Definition of terms**

**Closed:** Immediate action completed and Professor Harrington has advised that recommendation deemed implemented in Northern Ireland. However, monitoring of SSA and DWP position is continually reviewed and a process is in place to evaluate the impact of any changes made.

**Ongoing** – Work continues to complete the required activities to implement the recommendations in Northern Ireland and put in place procedures to evaluate the impact of the changes made.

## YEAR 2 RECOMMENDATIONS UPDATE

No	Recommendation	Current Position	Status
1	<p>Implementation of the Reviews recommendations should be monitored over time and on a regular basis, including:</p> <ul style="list-style-type: none"> <li>• Per cent of claimants failing to return initial ESA50;</li> <li>• per cent of claimants failing to attend face-to-face assessment;</li> <li>• per cent of decisions meeting criteria in the DM Quality Assessment Framework;</li> <li>• per cent of reconsiderations received;</li> <li>• per cent of decisions changed following reconsideration;</li> <li>• per cent of appeals received;</li> <li>• per cent of appeals successfully upheld.</li> </ul>	<p>The Social Security Agency has developed and implemented an Evaluation framework to monitor the impact on staff, the customer and the business of the implementation of Professor Harrington's recommendations. Statistical information is also collated on a monthly basis.</p>	<b>Closed</b>
2	<p>Unannounced visits to Benefit Delivery Centres and Atos Medical Assessments Centres during the year 3 review.</p>	<p>Due to centralised units in Northern Ireland for key benefits and the location of senior managers within them Professor Harrington considered that these visits were not required.</p> <p>The Health Assessment Adviser undertakes visits to Atos on a regular basis and also attends training events etc.</p>	<b>Closed</b>
3	<p>A "gold standard" review be carried out, beginning in early 2012. future decisions about mental, intellectual and cognitive descriptors should be based on the findings of this review.</p>	<p>The Social Security Agency and colleagues within the Department for Work and Pensions will conduct an evidence based review in Spring 2013 to assess whether proposals new descriptors would lead to any improvements, with any changes to the descriptors being based on the results.</p>	<b>Ongoing</b>
4	<p>DWP should consider working with relevant representative groups and clinical advisers to:</p> <ul style="list-style-type: none"> <li>• update Atos the handbook and guidance; and</li> <li>• produce practical guidance for Decision Makers.</li> </ul>	<p>The Social Security Agency has put arrangements in place, as part of its business as usual processes, for the production and updating of handbook and guidance.</p>	<b>Closed</b>

<b>YEAR 2 RECOMMENDATIONS UPDATE, Continued</b>			
<b>No</b>	<b>Recommendation</b>	<b>Current Position</b>	<b>Status</b>
5	This "bottom-up" model - involving a wide range of experts as well as DWP - should also be adopted in any future changes to the WCA descriptors, where appropriate.	The Social Security Agency has put arrangements in place, as part of its business as usual processes, to take forward any proposed changes to descriptors.	<b>Closed</b>
6	Work on the specific wording of the sensory descriptors and an additional descriptor which addresses the impact of generalised pain and/or fatigue should be considered early on in the year three review.	Following engagement with the relevant groups Professor Harrington concluded that there is insufficient evidence at this stage to warrant specific changes to the descriptors themselves. However, as part of business as usual, guidance products are being amended to include reference to any changes that are needed around sensory impairments and the impact of pain and fatigue.	<b>Closed</b>
7	As and when changes to the descriptors are made, DWP and other relevant experts should monitor the impact of these changes to ensure both that they are working and that they are not causing any unintended consequences.	The Social Security Agency has put arrangements in place, as part of its business as usual processes, to take forward any proposed changes to descriptors.	<b>Closed</b>
8	DWP consider ways of sharing outcomes of the WCA with Work programme providers to ensure a smoother claimant journey.	The Social Security Agency is monitoring the Department for Work and Pensions pilot and will consider the Northern Ireland position on receipt of the evaluation report.	<b>Ongoing</b>
9	DWP undertake regular audit of DM performance.	Professor Harrington considers that sufficient audit arrangements are already in place in the Social Security Agency and applied by the Standards Assurance Unit and the Standards Committee.	<b>Closed</b>
10	In year 3, further research is undertaken to examine what happens to people found Fit for Work. place in Work Related Activity and Support Groups, and the factors influencing these outcomes.	The Social Security Agency has completed a research specification and questionnaires and commenced the research project. The final research report is due Mar 2013.	<b>Closed</b>

<b>YEAR 2 RECOMMENDATIONS UPDATE, Continued</b>			
<b>No</b>	<b>Recommendation</b>	<b>Current Position</b>	<b>Status</b>
11	These changes to LiMA, based on comments from the stakeholder seminars should be adopted and that further changes to LiMa should be considered as and when they are raised.	The Social Security Agency has put arrangements in place, as part of its business as usual processes, to take forward any further changes to the LiMa.	<b>Closed</b>
12	Atos and DWP monitor and audit the use of free text within LiMA to ensure a consistently high standard of accurate reports.	<ul style="list-style-type: none"> <li>• Monthly reporting in place on the use of free text</li> <li>• Quarterly management information reports produced and any problems identified, etc</li> <li>• The Social Security Agency has arrangements in place, as part of its business as usual processes, to take forward any further changes to the LiMa.</li> </ul>	<b>Closed</b>
13	If needed, Atos Healthcare Professionals are provided with the relevant IT training - especially typing - to enable them to use the LiMA system intelligently and ensure that the quality of the face-to-face assessment does not suffer.	<ul style="list-style-type: none"> <li>• The Social Security Agency's Health Assessment Adviser attends Atos training on an ongoing basis as part of core activity and any problems identified are reported and monitored</li> <li>• Following a review Atos and the Health Assessment Adviser advise that Health Care Professionals in Northern Ireland do not require this training as keyboard skills already sufficient.</li> </ul>	<b>Closed</b>
14	Given the importance of the quality of assessments (especially with Incapacity Benefit reassessment fully underway) DWP should consider lowering the target for C-grade reports.	The Department for Work and Pensions is negotiating with Atos to take this forward and the Social Security Agency is monitoring developments and will replicate the outcomes.	<b>Ongoing</b>
15	To improve the transparency of the face-to-face assessment, data on Atos performance and quality should be regularly published.	The Social Security Agency already publishes data on Atos performance and quality.	<b>Closed</b>
16	DWP should closely monitor the recruitment, and retention, of Atos Healthcare Professionals in year 3.	The Social Security Agency has arrangements in place whereby the Health Assessment Adviser to approve all appointments of Healthcare Professionals and monitors recruitment and retention.	<b>Closed</b>



**YEAR 2 RECOMMENDATIONS UPDATE, Continued**

No	Recommendation	Current Position	Status
17	DWP should continue to monitor the quality and appropriateness of DWP Operations and Atos training.	<ul style="list-style-type: none"> <li>• Training needs analysis complete</li> <li>• The Social Security Agency's Health Assessment Adviser has held workshop with the business areas to identify additional training</li> <li>• Health Assessment Adviser attends Atos training events and reports findings / recommendations.</li> </ul>	<b>Closed</b>
18	Where appropriate, there should be sharing of knowledge and training between the various groups involved in the WCA.	The Social Security Agency has arrangements in place to share knowledge and training between the various groups involved in the Work Capability Assessment and incorporates the business, Atos and the Department for Employment and Learning.	<b>Closed</b>
19	DWP Operations should improve internal communications to ensure that each part of the claims process and Personal Advisers have a broad understanding of the policy intent of the WCA, what a fit for work decision means for a claimant and the support available to them.	The Social Security Agency has developed and put in place a Harrington Communication Strategy and plan.	<b>Closed</b>
20	DWP Operations should continue to monitor the impact of the year 1 recommendations, particularly the additional "touch points" with claimants, to better understand whether SSA about the support available on JSA are fully understood by claimants.	<ul style="list-style-type: none"> <li>• The Social Security Agency has developed and implemented an Evaluation framework for the ongoing monitoring of the impact on staff, the customer and the business of the implementation of Professor Harrington's recommendations.</li> <li>• Evaluation criteria and timelines are included in the Social Security Agency's Work Capability Assessment Review implementation plan for each recommendation.</li> </ul>	<b>Closed</b>
21	DWP should ensure that Universal Credit considers the risks of applying conditionality to those claimants who are currently employed.	DWP have engaged with the UC project and this will read across to NI. On those grounds Professor Harrington agreed to NI close the recommendation.	<b>Closed</b>



**YEAR 2 RECOMMENDATIONS UPDATE, Continued**

No	Recommendation	Current Position	Status
22	DWP Operations should consider seeking, and using, advice and guidance from the UK Drug Policy Commission and other relevant experts in order to improve and enhance the knowledge and capability of Decision Makers and Personal Advisers in managing these cases.	Following discussions with Professor Harrington he advised that the Department for Work and Pensions have completed this work and there is no need for the Social Security Agency to replicate.	<b>Closed</b>
23	Similar advice should be sought by Atos for their Mental Function Champions and the UK Drug Policy Commission and other relevant experts could be involved in updating the relevant sections of the Atos Guidance Manual for their Healthcare Professionals.	Following discussions with Professor Harrington he advised that the Department for Work and Pensions have completed this work and there is no need for the Social Security Agency to replicate as the outputs will inform guidance which will apply equally in Northern Ireland.	<b>Closed</b>

**Note: Definition of terms**

**Closed:** Immediate action completed and Professor Harrington has advised that recommendation deemed implemented in Northern Ireland. However monitoring of SSA and DWP position is continually reviewed and a process is in place to evaluate the impact of any changes made.

**Ongoing** – Work continues to complete the required activities to implement the recommendations in Northern Ireland and put in place procedures to evaluate the impact of the changes made.