

# BRIEFING: INDEPENDENT REVIEW OF THE WORK CAPABILITY ASSESSMENT AND THE DWP RESPONSE



## SUMMARY OF THE REVIEW

### Background

In June 2010 Professor Malcolm Harrington was commissioned by the Department for Work and Pensions (DWP) to undertake the first independent review of the Work Capability Assessment (WCA) – the Harrington Review. The review was commissioned in order to improve the effectiveness and fairness of the WCA.

The WCA has been in operation since October 2008 and was brought in as a part of the Employment and Support Allowance claim process. The WCA is also used to reassess claimants on Incapacity Benefit (IB) to migrate people off this now obsolete benefit. The face to face medical assessment is undertaken by the contractor Atos Healthcare, but the decision making responsibility rests with the DWP.

### Key Findings

Evidence submitted to the Harrington Review “...consistently and regularly highlighted problems with each stage of the WCA process, which limit both the assessment’s fairness and effectiveness.”

The key findings were:

- Claimants’ interactions with both Jobcentre Plus and Atos are often impersonal, mechanistic and lack clarity
- The Jobcentre Plus Decision Makers do not in practice make decisions, but typically ‘rubber stamp’ the advice provided through the Atos assessment.
- Some conditions are more difficult to assess than others, such as mental health or other fluctuating conditions.

### Recommendations

The Harrington Review made 25 recommendations across the following core areas of the WCA process: the customer experience; the Atos assessment; the decision making process; the appeals process; descriptors<sup>1</sup> and programme of work for year two.

## DWP RESPONSE AND PROPOSED ACTION

The DWP has stated that they fully endorse and accept all the recommendations of the Harrington Review and intend to implement changes as quickly as possible.

Selected recommendations and actions include:

Recommendation	DWP action	Comments and concerns
1. That Jobcentre Plus manages and	JCP staff to call claimants at the start of the WCA	We are concerned that homeless and vulnerable may be difficult to contact

<sup>1</sup> ‘Descriptors’ are the terms and statements used in the Atos assessment to describe the claimants experience across their health and activity capabilities

supports the claimant during the course of their claim and identifies their chosen healthcare adviser	process and ahead of the decision letter; in terms of "identifying the chosen healthcare provider this means to emphasise the <i>claimant's</i> need to supply additional evidence.	by telephone for this additional level of support, that such claimants may not have a healthcare provider to supply evidence, that homeless / vulnerable people will require support to obtain this evidence
7. Atos to provide mental, intellectual and cognitive disabilities champions to spread best practice amongst healthcare practitioners	DWP and Atos will establish healthcare professionals with enhanced skills as champions; Atos has produced an additional training module on mental health conditions	We endorse this as we asked for better understanding of these conditions. We have concerns that Decision Makers in the DWP may lack the expert knowledge to understand these conditions and note that additional training is not being provided at this level.
10. & 14. JCP Decision Makers empowered to make independent and considered decisions; Decision Makers receive training so that they can give appropriate weight to additional evidence	New forum for sharing of good practice is in place. A QAF will be developed to improve consistency of decisions, Learning and development to be reviewed	We support the improved process for considered decision making. We have concerns about Decision Makers receiving adequate training to understand the impact of homelessness, chaotic lives and multiple needs on the health and capability to work of homeless people without significant support provided to them.
11. A better use of the reconsideration process	Undefined 'changes' have already been rolled out for ESA claimants and will be extended to the IB group in 2011	We welcome the use of the reconsideration process especially if it can minimise the need to make a full appeal and be a more empathic and transparent process for claimants. We have concerns that homeless and vulnerable people may still be disadvantaged because of the level of engagement and support needed to participate in this process.
18. Review has asked specialist organisations to advise on refining the mental, intellectual and cognitive descriptors	DWP are awaiting the further report from Prof Harrington and the specialist organisations	We welcome this use of independent specialist organisations in this field. In terms of homeless people we are concerned about the high level of undiagnosed conditions that various aspects of the WCA will miss.
19. Examine the descriptors, particularly for fluctuating conditions	DWP accepts this and is a part of the work plan for year two	We endorse the review of the descriptors, especially for fluctuating conditions. We would like to be sure this includes fluctuation in mental, intellectual and cognitive needs

## HOMELESS LINK'S SUBMISSION TO THE REVIEW

Homeless Link's key asks in the submission to the Harrington Review were:

- that homelessness be considered a health issue in itself
- that assessors be well trained in understanding chaotic lives.
- that the fragile early days of recovery from drug and alcohol problems be protected through an extension of the period on ESA.
- that the descriptors of mental, cognitive and intellectual functions take into account that these can also be fluctuating capacities.
- that the impact of multiple needs be reflected in the WCA, especially to show the cumulative effect of multiple 'low level' needs.
- that as homeless people with chaotic lives rarely establish ongoing relationships with healthcare providers, that statements from non-medical support workers who have a good knowledge of the claimant be admitted to the evidence of the claim process.

## HOMELESS LINK'S ONGOING CONCERNS ABOUT THE WCA

We welcome the recommendations of the Harrington Review and commend the DWP on their prompt acceptance and implementation of the recommendations. However, the Harrington Review made no mention of homeless people or the impact of housing issues on health, made no recommendations about the need to assess the impact of multiple conditions (despite referencing this in the Review) and continues to prefer the evidence of medical professionals, over other professions who may be engaged with the claimant.

Homeless people have a higher rate of multiple needs than the general population. Research suggests that 8 in 10 homeless people have a physical health need, and 7 in 10 a mental health need. Many clients experience these over a number of years, and in many cases they will not be engaged with health services.<sup>2</sup> If the WCA uses housing status as part of the assessment criteria, then homelessness or a history of homelessness should require the assessor to explore if the client presents multiple needs.

Key concerns:

- Fair assessment of the impact of multiple conditions
- Fair assessment of undiagnosed conditions, especially in relation to mental health and learning disabilities, prevalent in homeless people who have not been able to maintain relationships with healthcare services
- Reliance upon health professional evidence only, when homeless people may have only had ongoing engagement with non-health professional support staff

Kathleen Caper  
Policy Projects Co-ordinator  
HOMELESS LINK  
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**Homeless Link, Gateway House, Milverton Street, London SE11 4AP**  
**+44 (0) 20 7840 4430 | [info@homelesslink.org.uk](mailto:info@homelesslink.org.uk) | [www.homeless.org.uk](http://www.homeless.org.uk)**

Chief Executive: Jenny Edwards | Chair: Ann Skinner | Charity Registration No. 1089173 Company Registration No. 4313826

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<sup>2</sup> Homeless Link, Interim Findings from the Homeless Health Needs Audit (publication forthcoming, more information is available at: <http://www.homeless.org.uk/health-needs-audit>)