



Employment support for disabled people: call for evidence

Submission to the Work and Pensions Select Committee



About CIPD

The CIPD is the professional body for HR and people development. The not-for-profit organisation champions better work and working lives and has been setting the benchmark for excellence in people and organisation development for more than 100 years.

It has 160,000 members across all sectors and sizes of organisation and provides thought leadership through independent research on the world of work, and offers professional training and accreditation for those working in HR and learning and development.

Public policy at the CIPD draws on our extensive research and thought leadership, practical advice and guidance, along with the experience and expertise of our diverse membership, to inform and shape debate, government policy and legislation for the benefit of employees and employers. It also seeks to promote and improve best practice in people management and development and to represent the interests of our members.

Introduction

We welcome the opportunity to provide evidence-based insights on disability employment support, drawing from our extensive research, policy submissions, and engagement with employers, employees, and government bodies. Our response is structured around the key questions and alignment with CIPD's evidence and wider research.

As the professional body for HR and people development, the CIPD has consistently argued that narrowing the disability employment gap requires action across work design, employer capability, and public services. Drawing on CIPD's past consultation responses and submissions, and new external evidence published in 2024-2025, this response synthesises the best available data and practice. We provide answers to each question with page-referenced evidence from the attached CIPD submissions:

- [Disability Workforce Reporting](#)
- [IES Commission](#)
- [Pathways to Work](#)
- [Keep Britain Working Review](#)
- [Written Evidence to DWP Parliamentary Committee](#)

We also include some relevant supplementary sources from government and independent evaluations. Our recommendations focus on evidence-based, scalable support (for example, IPS supported employment), fixing system frictions (for example, Access to Work delays), and mainstreaming disability inclusion (for example, better job design, flexible working and manager capability).

Questions

1. Why has progress with closing the disability employment gap slowed in recent years?

Progress in closing the disability employment gap has slowed in recent years because public policy reforms have leaned too heavily on supply-side interventions, without sufficient emphasis on boosting employer demand through better-resourced systems, regulation, services, and guidance that encourage the recruitment, retention, and progression of disabled people, alongside integrating work as a key outcome in health-related discussions.

As the CIPD research in the [CIPD Good Work Index](#) and [Health and wellbeing at work](#) reports consistently shows, the gap narrowed encouragingly from 2014 to 2019, but has remained largely stagnant since, with ONS and Commons Library [disabled people in employment](#) analysis indicating only marginal improvements by late 2023 compared to 2019, and DWP statistics confirming just a 0.3% decrease by mid-2024. This flatlining stems from a sharp rise in working-age disability prevalence to 24.8% by April-June 2024, which has increased the complexity of support needs and altered the overall picture, as highlighted in the [Economics Observatory](#)'s insights on the implications for the UK economy. Compounding this are persistent system frictions, such as extended waiting times for Access to Work decisions—often exceeding 90 days, as reported by the [Advice Network](#)—which disrupt timely support and lead to lost opportunities.

From our engagement with members and evidence in the [Disability Workforce Reporting](#) submission (pp.3-5), employer practice gaps are evident, particularly among SMEs, where uneven capability in reasonable adjustments and job design hinders progress, while our [Flexible working: Guidance](#) underscores how negative attitudes towards adjustments further stall retention. Ultimately, this slowdown reflects a confluence of demand-side pressures like employer readiness and job flexibility, supply-side challenges from rising prevalence and health service delays, and administrative bottlenecks in core programmes, all of which the CIPD urges must be addressed through holistic, people-centred reforms.

2. What barriers prevent disabled people who want to work, or to work more, from doing so? How do these vary for different disabilities? How do these vary across the country?

Many employers, especially smaller ones, struggle with the knowledge, capability, and confidence needed to foster truly inclusive environments where people feel safe discussing disability and health issues, and this is exacerbated by the pervasive misconception that adjustments are burdensome and expensive—when in reality, as our CIPD Health and Wellbeing at Work report and Good Work Index research demonstrate, many are straightforward, low-cost changes that unlock significant access to employment and sustained participation.

Our evidence shows that only 28% of employers report no challenges in managing disabled people or those with long-term conditions, with the most pressing issues revolving around line manager knowledge and confidence (cited by 50% of those facing challenges), understanding reasonable adjustments (38%), building an inclusive culture (29%), and leadership on disability matters (25%). There is therefore a need for line manager training and the wider sharing of practical manager guidance and training as highlighted in the CIPD updated guidance [Disability Confident - A practical guide for line managers](#) on recruiting, managing and developing people with a disability or health condition.

Drawing from our Disability Workforce Reporting submission (p.8), just 38% of employers grasp reasonable adjustments fully, with variability in resources particularly acute in SMEs, where low-cost occupational health access and clearer guidance are sorely needed, as echoed in our Keep Britain Working response (pp.3-5) and Workforce Reporting submission (pp.3-5).

Flexible working and job design barriers persist due to limited availability or resistant manager attitudes, restricting entry and retention, which is why our Flexible Working guidance and IES Commission submission (pp.3-5) advocate for default flexibility and redesign. Administrative hurdles like Access to Work backlogs often result in withdrawn job offers or reduced hours, as detailed in Disability News Service reports, while stigma undermines line manager capability, prompting our collaboration with DWP's Disability Confident team on practical guidance (Workforce Reporting, p.3).

Low employer engagement is a key issue too, with our Disability Workforce Reporting highlighting that only 40% collect disability data and fewer publish it, largely due to non-disclosure fears (64% of employers), rooted in stigma and potential discrimination, as explored in our Pathways to Work response (p.6) and Commission submission, where just 60% of organisations have frameworks for disabled employees. Employer attitudes contribute, with 50% struggling on line manager confidence (Pathways to Work, p.4), alongside health system delays like long NHS waiting lists that postpone adjustments (Keep Britain Working, p.6), inadequate support structures where only 32% train managers on inclusion (Pathways to Work), and ineffective accountability despite recognition of moral (77%) and business (71%) cases for reporting (Disability Workforce Reporting).

These barriers vary by condition: for fluctuating or mental health issues, inconsistent support and disclosure reluctance are pronounced, with our [Neuroinclusion at work report 2024](#) advocating IPS-style supported employment, flexible phased hours, and psychologically safe management, often under-provided due to stigma and delayed OH referrals; neurodivergence faces unadjusted selection methods like untimed tests (Keep Britain Working, p.8); and rigid sick leave policies disadvantage those with MSK or chronic conditions, necessitating predictable flexibility and portable AtW packages (Pathways to Work, p.5; IES, pp.4-5).

Geographically, variations are stark, with Wales' gap at around 31% in 2023-24 influenced by local health, transport, and labour market factors, as per the [Senedd research](#), while SMEs in deprived areas lack HR and OH support (IES Commission, p.9). To overcome this, our CIPD recommendations include mandating disability reporting for large employers with guidance (Disability Workforce Reporting, p.12), expanding Access to Work and Disability Confident with better funding and outreach (Pathways to Work, p.6), subsidising OH for SMEs (Keep Britain Working, p.3), and



reforming SSP for phased returns (Pathways to Work, p.5), all grounded in our commitment to evidence-led, people-focused solutions.

3. *What kinds of support are most effective at supporting people with different disabilities (such as physical, mental or fluctuating conditions) to enter and stay in work?*

The most effective support are those tailored to specific condition types, drawing on proven models like Individual Placement and Support (IPS) for mental health and fidelity-assured supported employment for learning disabilities, as our CIPD Health and Wellbeing at Work and Neuroinclusion at Work reports emphasise, ensuring that interventions integrate health and work services to enable entry and long-term participation.

For physical disabilities, flexible working arrangements and ergonomic adjustments prove invaluable, allowing people to adapt roles to their needs without compromising productivity, as evidenced in our Flexible Working guidance. Early occupational health referrals and stress risk assessments to identify and manage the causes of work-related stress can help support mental health at work.

Neurodiversity thrives with tailored recruitment processes and workplace passports, as detailed in our Neurodiversity at Work resources, helping to remove barriers in selection and daily work. For fluctuating conditions like MSK or those affected by menopause, disability leave policies, flexible working, people management capability and job redesign can support retention, aligning with our Pathways to Work and Keep Britain Working submissions that advocate for these.

Overall, integrating occupational health into primary care, supporting the adoption of HSE stress standards (Keep Britain Working), and expanding Access to Work for pre-employment adjustments (Pathways to Work) create a supportive ecosystem, fostering sustained engagement through personalised, evidence-based approaches that our CIPD thought leadership consistently promotes.

Programme effectiveness and learning (Q4-Q8)

4. *How effective is the support provided by Disability Employment Advisers? Are they able to support across all disabilities?*

Disability Employment Advisers offer valuable brokerage between individuals and employers where caseloads permit tailored guidance and meaningful engagement, but their effectiveness is inconsistent due to varying expertise across conditions like mental health or MSK, as corroborated by broader evidence on adviser-led models that highlight the need for consistent disability equality, inclusion, and sector-specific training.

From our CIPD perspective, informed by member feedback and the IES Commission submission, DEAs are often stretched too thin to deliver truly personalised support across the full spectrum of disabilities, with only 7% of employers finding Jobcentre Plus effective for recruitment overall. Skills gaps are particularly evident in handling fluctuating conditions like mental health or multiple sclerosis, and neurodivergent needs, where specialist knowledge is lacking, underscoring the importance of upskilling as we recommend in our Pathways to Work response to ensure advisers can address diverse requirements.

5. *What can the Government learn from the Work and Health Programme?*

The Work and Health Programme provides crucial lessons in moving beyond generic provision to sector-based approaches that integrate employer-facing elements and health support, as our IES Commission submission emphasises, showing that outcomes improve markedly when employment support includes in-work progression coaching and personalised case management co-designed with employers.



CIPD research, including the Good Work Index, reinforces that tying programmes to local skills ecosystems and fostering employer involvement leads to more sustainable results, highlighting the value of flexible, collaborative models that prioritise long-term retention over short-term placements, and we urge the Government to build on this by embedding these principles into future initiatives for greater impact on disabled people's working lives.

6. *How successful has Access to Work been at supporting disabled people into work? How could it be improved?*

Access to Work has tremendous value and potential, but it is underfunded and has narrow reach (supporting just 1% of working disabled people, according to the Pathways to Work green paper). The scheme is hampered by bureaucracy and long delays. Employers and employees report applications taking months, risking job offers. Feedback from CIPD members indicates many organisations are unaware of the service, and that there is more scope for the service to more effectively support people with a disability who are already in employment to improve retention. It could be better resourced (waiting times are far too long) and more flexible and responsive, with much greater promotion of its potential benefits for employers.

Could it also be reformed to include advice for employers on making effective reasonable adjustments for disabled employees? We welcome the proposal in the Pathways to Work Green Paper on providing funds to individuals to pay for workplace adaptations beyond what could be considered reasonable adjustments - there is currently a high bar to meet for disability under equalities law and making adjustments where needed could help to keep more people with health conditions in work. Improvements needed include: fast-track Access to Work for job offers and retention, transferable awards, and service-level agreements. In CIPD's [written evidence to DWP Parliamentary Committee](#) we highlighted the need for [Triage fast-track](#) for job offers/retention, publish end-to-end processing times, extend automatic awards for stable needs, and enable employer draw-downs for standard equipment

7. *How successful has the Disability Confident scheme been at improving employer practices? How could it be improved?*

As a [Disability Confident Leader](#), we believe the Disability Confident Scheme is a very important with the potential to significantly improve the capability and knowledge of employers in creating inclusive workplaces and improving the employment of disabled people.

Feedback from our community of people professionals is that, in principle, the Disability Confident Scheme covers the right issues and offers a simple and accessible framework for employers to improve their confidence and competence in recruiting, retaining and developing people with a disability. It can be a useful first step for employers.

However, there needs to be much greater promotion of it, as well as Access to Work, by Government as part of a well-funded national campaign, in collaboration with employers, and relevant special interest group and stakeholders, as awareness of, and engagement with, the scheme and the importance of disability inclusion more broadly, could be much higher. We welcome the Government's intention to reform the Scheme, as there is scope to enhance its design and impact, thereby improving employment outcomes for disabled people.

The available data on the Scheme's impact shows that many Scheme members believe it is having impact in important areas. We know that the evidence is self-reported and could be more robust going forward, but it is still important to bear these results in mind before introducing changes that could unintentionally hamper employer engagement with the Scheme.

Of note is the very low level of Level 3 members, at just 3%, and any reform of the Scheme would need to consider how to increase progression from Level 2 to 3, and/or how to increase entry-level membership to 'Leader' status where appropriate. Therefore, it's important that any reforms do not increase any barriers, including the resources needed to gain validation, to this Level. This approach does not need to undermine the standards required to gain higher level accreditation.



Disability Confident Framework - we agree that the three-level framework should remain, also that employers should have the opportunity to access the scheme at the level which best reflects their current ways of working. On Level 1 - we think that this level is an important gateway for employers who want to embark more fully on their disability inclusion journey, but there should be greater expectation than merely complying with their legal obligations. For example, the vision set out in the Government's 'Pathways to Work' green paper focuses on encouraging employers to make reasonable adjustments beyond their statutory duty, and so this approach should be embedded at Level 3.

We fully agree that there should be a 'separate track' for micro and small organisations. Many small employers typically lack the HR, EDI and people management expertise and resources to implement a sophisticated and formal framework - nor do they necessarily need it to create inclusive cultures and practices. But they would benefit from access to more bespoke advice and support on Disability Confident to develop their employment practices, improve workforce disability outcomes and progress to higher levels of the scheme.

We understand the aim of developing a more robust evidence base on outcomes from the Scheme but believe the plan to introduce a performance framework and obligations on employers to collect quantitative data needs careful consideration. Any proposal needs to be carefully considered within the Government's plans to introduce mandatory disability pay gap reporting, a proposal which CIPD is urging should be phased in slowly starting with very large employers. Otherwise there is a risk that such obligations would be regarded as a tick box exercise, given the considerable new regulatory requirements facing employers through the Employment Rights Bill. There is a risk, according to our CIPD research, that some employers could become more risk-averse in their hiring practices (eg the new Day 1 Unfair Dismissal right), which could have a regressive unintended consequence of employers adopting less diverse recruitment practices. Ultimately, Disability Confident is a voluntary scheme and we need to inspire employers to appreciate the benefits of gaining accreditation.

Finally, care is needed to ensure that the Scheme is regarded as an enabler that supports employers' ability to recruit and grow great talent, rather than a compliance-based exercise.

8. *How well is Connect to Work working? Does it work better in some circumstances, or for some disabilities, than others?*

Connect to Work holds promising potential but is currently underperforming because of inconsistent employer engagement and insufficient integration with health support services, and it would require significant scaling to make a real difference, given that its current funding targets helping just 100,000 people into work. From our CIPD lens, informed by member experiences and the Pathways to Work response, it tends to work better for individuals with physical conditions where straightforward adjustments can be brokered, but falls short for those with mental health or fluctuating conditions that demand ongoing, continuous support to ensure retention. To enhance its effectiveness, we recommend integrating it more deeply with occupational health and employer co-design, aligning with our Health and Wellbeing at Work report's emphasis on holistic, condition-sensitive approaches that prioritise long-term participation over isolated placements.

Reporting, Data and Employer Action (Q10-Q11)

10. *What should the Government prioritise with its additional employment support for disabled people arising from the Pathways to Work Green Paper?*

The Government should prioritise retention and job security in its additional employment support from the Pathways to Work Green Paper, focusing not just on getting people into jobs but on sustaining them, particularly for those with long-term or fluctuating conditions, as our [Disability Workforce Reporting Submission 2002](#) reveals only 40% of employers collect disability data and even fewer publish it, with barriers like low disclosure (64%), resource shortages, and line manager confidence gaps—where just 60% have supportive frameworks—undermining progress.



CIPD research, including the Health and Wellbeing at Work and Good Work Index reports, shows clear benefits from reporting, with 77% of employers acknowledging the moral case and 71% the business value, as transparency drives accountability, reduces bias, and boosts retention through policies like flexible working. The debate between voluntary and mandatory reporting highlights the need for stronger frameworks and leadership to avoid patchy adoption or mere compliance, and we advocate for adjustment passports that transfer between jobs to support mobility. Overall, priorities should include targeting SME capability through HR support pilots (IES Commission, p.10), inspiring genuine commitment through phased implementation, and embedding these in broader people management practices as our guidance promotes.

In relation to disability pay gap (DPR) reporting, In our response to the [Equality \(Race and Disability\) Bill: mandatory ethnicity and disability pay gap reporting](#) consultation from the Office for Equality and Opportunity, the CIPD reinforced its longstanding feedback that greater transparency, backed by meaningful action for both ethnicity and disability pay reporting (EDPR) has the potential to help reduce workplace inequalities.

We highlighted that the introduction of both ethnicity and disability pay gap reporting (EDPR), alongside the publication of employer action plans. Done well, can shine a spotlight on disparities, drive strategic change, and ensure reward decisions are fair and evidence-based - benefiting both organisations and their employees. However, EDPR presents complexities beyond gender pay data and gap reporting. Challenges such as inconsistent disability disclosure rates, limited HR data capability, and cultural sensitivities around identity must be carefully navigated.

That's why the CIPD recommended a phased introduction. We propose that DPR initially apply to organisations with 1,000 or more employees. The CIPD believes that the earliest that employers with 1000 or more workers should be required to start DPR would be reporting year 2027.28. Over time, the requirement could extend to those with 500-999 employees, and eventually to those with 249-499. This gradual roll-out mirrors the successful approach used for automatic pension enrolment and aligns with the EU's pay transparency directive.

Alongside pay gap data, we recommend employers publish a narrative and action plan outlining how they intend to address disparities. As with EDPR itself, this should begin with the largest employers (1,000+ employees), before gradually including smaller cohorts. These plans must be clear, data-driven, and practical – focused not just on intent, but on measurable outcomes.

11. What should be the focus of the 1,000 Pathway to Work advisors?

The 1,000 Pathway to Work advisors should focus on specialising by condition clusters—such as MSK, neurodivergent, or mental health—to develop deep expertise that goes beyond recruitment to encompass in-work progression, adjustments, and retention, as our IES Commission submission (p.10) and Pathways to Work response advocate for triaging at-risk individuals, brokering adjustments with employers, linking to clinical pathways, and providing ongoing coaching. Drawing from our Neurodiversity at Work and Flexible Working guidance, their remit must prioritise people-centred support, integrating with occupational health services through co-location with Jobcentre Plus, and funding ACAS to advise SMEs on adjustments (Pathways to Work, p.8), ensuring a holistic approach that builds employer capability and sustains better working lives.

12. Are there any international examples, or examples from the devolved nations, of effective disability employment support that the Government could learn from?

Scotland's, Fair Start Scotland stands out as a strong devolved example, offering personalised, voluntary support with a heavy emphasis on co-design involving disabled people themselves, which aligns with our CIPD principles of inclusive, user-led practices as seen in the Pathways to Work and Keep Britain Working submissions. Internationally, the Individual Placement and Support model for mental health from the US and Scandinavia, along with supported employment for learning disabilities across the EU, deliver sustained outcomes when implemented with high fidelity, demonstrating the value of integrated, evidence-based approaches that our Health and Wellbeing



at Work report echoes. We recommend adopting a "healthier working lives" commission (CIPD, Keep Britain Working, p.7) and piloting wage subsidies for disabled hires, inspired by Australian models, to enhance UK efforts through collaborative, adaptable strategies.

13. To what extent is the success of DWP's plans to improve disability employment contingent on improvements made to other public services, in particular, health?

The success of DWP's plans to improve disability employment is deeply contingent on enhancements to other public services, especially health, where patchy access to occupational health, counselling, and physiotherapy directly undermines programme effectiveness by delaying necessary adjustments and support. Our Keep Britain Working and Pathways to Work responses highlight how integrating health and employment services is essential for holistic outcomes, and we recommend mandating disability workforce reporting for very large employers (1,000-plus) with supportive guidance to build readiness, drawing on our Good Work Index to ensure these interconnections foster resilient, inclusive workplaces.

14. How can DWP apply a systems-based approach to safeguarding[1] in the design and delivery of employment support for disabled people?

DWP can apply a '[systems-based approach](#)' to safeguarding by embedding it explicitly at every stage—from referral and conditionality to delivery, monitoring, and evaluation—as we at the CIPD recommend, adopting trauma-informed practices particularly for those with fluctuating conditions or histories of marginalisation to ensure support is safe, respectful, and effective. Grounded in our Health and Wellbeing at Work and Neurodiversity at Work resources, this means prioritising co-design with disabled people, continuous training for advisers, and robust evaluation mechanisms that align with our people-focused guidance to protect and empower participants throughout.

Conclusion

Closing the disability employment gap now hinges less on quantity of activity and more on quality, timeliness and integration. Evidence since 2019 shows a stall in progress while disability prevalence and support complexity have risen. Programmes work when they are fast, personalised, and integrated: IPS/supported employment with in-work coaching; rapid adjustments via a well-run Access to Work; and capable line managers offering good work design and flexibility. Government should stabilise the core enablers (AtW, adviser capability, data), scale what works (IPS, supported employment), and raise employer practice through measured standards under Disability Confident—supported by CIPD's ongoing guidance to managers. If we align work, health and skills around these principles, sustained improvements in employment and job quality for disabled people are achievable.

By addressing these priorities, employers can enhance workforce resilience and productivity, businesses can secure long-term performance gains, and the wider economy and society will benefit from healthier, more engaged participation in the labour market. The CIPD urges the Government to:

- Encourage disability workforce reporting while supporting employer readiness.
- Encourage and overtime introduce mandatory disability pay gap reporting to align with Gender Pay Gap reporting and Ethnicity Pay Gap Reporting(if EPG is mandatory).
- Expand Access to Work with faster, transferable awards and reform SSP for phased returns.
- Strengthen Disability Confident with outcome-based assurance.
- Ensure Pathway to Work advisors are condition-specialist and focused on retention as well as recruitment.
- Embed safeguarding and co-design at every stage of employment support.
- Integrate health and employment services, learning from international models.