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RI World Congress
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Parallel A Moorfoot
World of Work

SEAN: I make is one minute to 4.00. We will give it a couple of minutes, in case there are any late arrivals but then we'll kick off promptly. Two more minutes.

We will make a start. Welcome. Thank you to everyone for attending this session on the world of work. My name is Sean Williams. I'm acting as the moderator for the session. We have five excellent speakers, doing four sessions for us. Each session will last ten to 15 minutes maximum for the speeches and the presentations, and then we will have at least 20 minutes at the end for questions and discussion. We really do want to make sure we leave enough time at the end to get some debate from the room. So four very interesting, quite diverse presentations. We will start off with the consequences of demographic change on rehabilitation in German pension insurance, and we've got Uwe Egner.

UWE: Good afternoon, everyone. I will show you the consequences of demographic change on the rehabilitation in Germany. My agenda, I want to present our institution, come back to the background and the population development, and some routine data from our institution. I want to present a study with workplace data and some conclusions.

Our institution is a public service provider in the field of social security. It has more than 18 million insured people. Its tasks and benefits are medical and rehabilitation, and pension as pension insurance, which means retirement pension and also pensions due to reduced earning capacity. It's funded by contributions from employers and employees. It's responsible for people all over Germany. If you look at medical rehabilitation, we have a large number of claims for medical rehabilitation. About 470,000 were approved of those claims. We invest quite a lot of money in rehabilitation. It is 2.6 billion euros a year; most of it goes into rehabilitation.

Now I come to the population development. As you can see, in the blue lines and in the pink lines, age structure in 2013 and if you look at the development to 2030, you can see a growing age, where the people are getting much older. This is a dramatic development of age in the population. So we find that the people between 20 and 65, were in 2013 35% and this decreases down to 33.6, which is quite a large development. Also, the employee rate - and this is good news for us - increased for people between 55 and 64. You can see in the middle is Germany. In 2008, it was 53% of people that were employed and this increased up to 63% in the year 2013. This was very consistent with the Lisbon goals of the European Union. So we see an increase of retirement age, which is good for us, as pension insurers. The average age

of retirement due to old age is also increasing, as you can see a small increase but it's an increase. And also the retirement age due to reduced earning capacity is increasing in the year period from 2005 up to 2014 from 49 to 51 for women, and 50.5 up to nearly 52 for men. So this is good news, they work longer at least before they retire.

Another good news for us is that retirement reduced due to muscular skeletal issues and bone tissue decreased. It was good for us because we pay for this early retirement pension. On the other hand, in another indication group it's different. In every developed country, mental and behavioural disorders are going up and going up. You see this as well with the retirement due to reduced earning capacity in the case of mental and behavioural disorders, there was a dramatic increase. So we could see a change in the population and in the ageing society, also for us in the rehabilitation system. Here, you can see the average age of rehabilitees in mental and behavioural disorders just in the ten-year period from 2005 to 2014, it grew from 44 to 47 on average. In orthopaedics, it is about the same, three years up from 49 up to 52. This means sending people to rehab centres must be considered from the rehab centre that they might have therapeutic procedures as well.

And here, you can see the different age groups with the approvals by age and you can see 50 to 54 and 54 to 59 are the large age groups for rehabilitation. The good news is that another group 60 to 64 also grew really interestingly because people go to rehabilitation from the age up to 64 and return to work afterwards. This is good news for us. The development of medical rehabilitation, we make a prognosis every three years and it says this will increase over the years because people must be claiming for rehabilitation much more nowadays. So what does this mean for the rehabilitation centres and for us, as rehabilitation providers? We made several studies in this field. We made a patient survey before starting orthopaedic rehabilitation and asked the people, "What do you think will help you most during the rehabilitation process?" The results were very interesting. We have in yellow the age group below 50 and in blue the age group of 50-plus. The yellow group said occupational therapies is important for me and occupational consultation is important to me in thinking about the return to work. The older ones say, "This is not my job." They only say 23% and 24%. They look more in the direction of relaxation therapy and not gymnastics, but not orientated to return to work.

We made a patient survey after rehabilitation and had a question that was, "Did you receive consultations and help in the centre to facilitate your return to work in the workplace?" The same question, the same answer. The patients said in the age group less than 50 that they had at least 41% recommendations and the older ones said only 31. If you see that the growing age means the rehab centres should think about caring for these older patients because they are more endangered of not coming back to the job or returning to work than the younger ones. We must discuss with the rehab centres that they change their mind, especially dealing with the older patients.

Another project that we did, we had a study with a risk index for reduced earning capacity which showed us that we could predict risk for early retirement in a high-level hit rate of 74% with our routine data with the contributions and so on for pension insurance. We will use this to check people earlier than before, especially in the higher age. Good news in Germany is, up until now, that we find a lot of people that go back to work, they return to work after rehabilitation in a two-year period, and you can see especially in this complicated field of mental and behavioural disorders that most of the people return to work after

rehabilitation. In a two-year period, they pay continuous contributions to pension insurance or at least temporary pension contributions. Here, again, it's different in the different age groups. The best return to work group is the 40 to 49. This decreases a bit in older age groups. Of course, on the right-hand side you can see this 60-plus people go to retirement quite often. But at least these had 43% pay continuous contributions to us in the 60-plus age group. That was it! I made it!

Conclusions. What we see is the ageing workforce needs older people in the rehab centres. The risk of reduces earning capacity must be the main focus of pension insurance on the one hand for us, and on the other hand for the rehab centres, especially thinking about older clients. Services for older clients must be focused strictly on return to work. This workplace orientated rehabilitation is the main focus of German pension insurance. Thanks very much. (Applause)

SEAN: Can we take questions at the end? We will take questions at the end of the four presentations, if we can. Hold on to those questions and we will take them in the context. Next, I'd like to invite Dominique Dressler, from Austria who will be talking about the AUVA return to work strategy and model.

DOMINIQUE: Thank you. I'm very happy to join you here at the RI World Congress in Edinburgh. I come from Austria, not Australia as indicated in the preliminary programme!

A tiny country in Europe with about eight million inhabitants. You might wonder what insights I can offer to you. What I'd like to share with you is our experiences with our return to work journey in Austria, as institutional accident insurance. Our return to work quest goes back a long time. At the start, 13 years ago, when the Austrian Compensation Workers Board was formed during the Industrial Revolution, as a compulsory organisation. Return to work was certainly not on the radar. The only benefit then was financial compensation for severely injured workers that had been working in certain high-risk occupations, such as foundries or with steam engines. However, over time, task groups covered and benefits were extended.

Follow me a little bit further on that return to work journey. World War I led to a shortage of workforce. Hundreds of thousands had died or were severely injured. This experience from the battle ground was the basis in the 1920s for the creation of specialised trauma hospitals in order to better treat the so-called "soldiers of work" and to minimise possible consequences in order to allow a return to work. In the 1920s also, prevention was started to retain people at work by ensuring that accidents do not happen. World War II then led to the second major extension. In the 1950s, medical rehabilitation in dedicated rehabilitation centres and specific return to work measures started.

What are our return to work strategies today? First of all, for us, return to work is an encompassing concept. As you will see through these pictures, we, first of all, tried to avoid accidents by efficient prevention measures. If an accident has happened, we support efficient First Aid measures, provide medical treatment, if necessary. For instance, in one of our seven trauma hospitals we also provide in-patient rehabilitation in one of our four dedicated rehabilitation centres. And, where necessary, we offer individual tailor-made return to work measures and provide financial compensation in the form of pensions.

How are we financed for all of these activities? Exclusively through employers' contributions, with a single set contribution rate of 1.3% of the wages, regardless of occupation or branch. If we think of our return to work strategy and what is in it for us as a social insurance, in fact, we do not directly profit from rapid return to work as our financial benefits that depend on the loss of function are awarded life-long, regardless whether a person returns to work or not. If return to work occurs, the benefit is paid on top of the salary and it's also later off paid on top of the pension.

Old-age pension. However, for us, as the social insurance return to work is very important because a person that works returns, generates social insurance contributions through employment. The person actively contributes to the GDP and work is an expression of human dignity and purposes in society, important for all of us. Before looking at whether our overall concept is successful, I'd like to show you some of our individual tailor-made return to work measures. For return to work, there are two basic options: Return to the same employer or, if not possible, seek new work. In order of priority, we focus on return to the previous job with the previous employer. Or, if that's not possible, modification of the previous job with financial support and transitional arrangements, or a new job with the same employer with adaptations with external or internal training and financial support for the employer. If all of this is not possible and return to the previous company is not possible, we first do extensive job testing and subsequent retraining for new skills and new jobs with financial support during all of this training period. And, of course, there is also financial support for the new employer and adaptation of workplaces, mobility support and so forth. And if going back to employment on the open market is not possible, we subsidise employment in sheltered workshops. Or if that's not possible either we encourage finding meaningful leisure activities.

One element that is really important in this return to work strategy is functional capacity testing, as well as extensive job qualification testing. This ensures that people will know what they really want to do and have an opportunity of trying out things instead of going into training to possibility find out this is not what they wanted to do. Interestingly, until some years ago, about 90% of the injured workers were interested in external retraining and qualification for new jobs. This is no longer the case. In view of the shrinking labour market, most persons want (if possible) to return to their previous employer and employment. What really works in that case is early contact with the employer and with the co-workers and financial incentives for their employer to make up for reduced working capacity for up to four years. What is really important is to get the food back in the door, if you will.

Is our overall return to work strategy successful? Yes. As you can see here, about 3% of the workers insured with us have a recognised accident at work every year, but only half of those require notification because the accident was very severe or was fatal. One out of ten work accidents requires a stay at the hospital. Two thirds already return to work right after hospital. One third, however, require specialised in-patient rehabilitation. Out of these, again, four out of five can return to work after their stay in a rehabilitation centre. Only one out of five requires these specialised return to work interventions I was telling you about before. It means that out of 150 injured workers hospitalised, only one needs special RTW measures and support. Two out of three persons needing these special measures return to work through them. So, yes, it is a success story!

Is everything perfect in our return to work quest? Unfortunately not. Our major challenge is the changing labour market. We see an ever increasing divide between unskilled occupations on the one hand and highly

skilled occupations on the other that need specialised knowledge and skills. This widening gap makes entering the labour market very difficult for everybody and re-entering the labour market even more difficult for injured or disabled persons. Our workers compensation systems were founded over a hundred years ago in one Industrial Revolution. Our systems have been extended and perfected over time, as shown with return to work. However, our joint challenge today is another Industrial Revolution, the world of work is profoundly changing, jobs are disappearing rapidly and being replaced by digitisation in many areas. Many less skilled occupations have gone. Skilled occupations are going, too. The way we work is profoundly changing. This means that we all will have to reconsider our strategies in terms of return to work and in all areas of works compensation. Thank you.

SEAN: Thank you very much, Dominique. Next, we're going to hear from Catherine Townsend from Barclays.

CATHERINE: It's a bit easier for me to speak like this. So this is also in a change to the programme, so my director Elaine Draper was due to be speaking here today but unfortunately wasn't able to attend. It's my pleasure to be here. So, my name is Catherine Townsend, I'm head of client and customer accessibility at Barclays. I should have done a place holder slide. It's gone into my first slide already. So I work alongside a number of different colleagues and a number of different teams to deliver accessibility across the bank. Hopefully, you heard from Mike Thomson in the plenary speech around what we're doing with inclusive apprenticeships and employment. Thinking within the world of work and skills, I'm going to share with you a few examples of things we have been doing to fill that skills gap and make sure it's inclusive and accessible. However, my job is to focus on customer and client accessibility. I can quite confidently say I've got the best job in the bank! It's a pleasure to try and remove barriers in an organisation that is absolutely committed to driving this agenda and work with partners to do the same. We've been really been on a transformational journey over the last few years. We were a founding member of the business disability forum, 25 years ago now. So the ambition to support and be inclusive and accessible has always been there. However, over the last four years, we have really seen that journey transform and be revolutionised internally and move away from thinking about it in a HR-only perspective. Of course, that's very important. A lot of people think I put ramps in the branches and it just shows where people still think accessibility in a very physical sense. Yes, ramps in branches are very important. However, when the most of your customers are banking online, on their mobile or by phone, what reasonable adjustments and what adaptations are we making across all of these other channels to make sure that our customers can bank with us seamlessly and accessibly.

That's been our journey over the last couple of years. It's been a pleasure to work on something so exciting and innovative. We want to be the most inclusive and accessible bank out there and in the FTSE 100. Setting that ambition allows us to have worked on a different level, beyond the tick the box attitude I see with another organisations, sadly.

How can we really look at the opportunities of technology and partnerships to remove barriers and create a more inclusive world? We firmly believe that this is not about keeping things behind closed doors. We are passionate about sharing what we've done and our journey in an open source way. I know that open source is a very specific term about sharing things online. For us, it encapsulates how we feel about wanting to share the work we've done and to bring others on the journey. I hope that people will see that Barclays believe this is the right thing to do morally, but there is a huge commercial appetite as well and there's

nothing wrong talking about the value of customers and we've all heard the phrase "the purple pound."

I will share a couple of examples of things around skills that we're really proud of. Behind me, you will see a screen shot of something called the Life Skills website. Life Skills is one of our flagship programmes at Barclays. It's really... It's got one aim: To support young people to have a better future whatever it might look like. It works with schools and teachers, parents, businesses and individuals to provide support for the end user, to help them in their world of work, with their personal development, with interview skills and in different ways. This programme's been running for a number of years and I think the ambition -- we may have reached it now -- was to reach 100 million young futures. How can we work at scale? It's not about being a Barclay's customer. This is open to anybody. This is about social-level and societal-level change and support.

How can we work to help young people in the UK with skills? It's a great, great programme in itself. But how inclusive and how accessible is it for people at the end of the spectrum or the either end of the spectrum? My team have been doing some exciting work with the Life Skills team to make sure that this programme wasn't further excluding people in any sense. What have we done? So the Life Skills programme is delivered either in workshops ran by volunteers, so Barclays staff may go out to a group of young people in school and do a training session with them, or sessions might be delivered by teachers, by taking this content and putting it into their lesson plan. Or young people might be accessing the site themselves and watching video blogs, so there's lots of different ways we needed to think about making it accessible to all. So we had some very good content around interview skills. It was pointed out to us, you know, what if you've got autism or if they're on the autistic spectrum, some of this guidance is not appropriate. For us, it was an opportunity to make a change. We had had this issue and it had been highlighted to us, so we reached out and worked with the National Autistic Society to understand from them how we could make sure that people on the autistic spectrum were included in this process and we could work to make it not something separate, this is not about a separate programme for people with disabilities, it's more about making our programmes accessible and inclusive for all.

Video content as well, we're a nation of video watchers and I can't look at social media without seeing videos playing here there and everywhere, but making sure that every single one of those is captioned. It sounds so obvious but actually it's hugely exclusive if it's not done at the outset, so working with our business to make sure that all video content is subtitled, and actually training our staff. This is the screen shot for our staff. Any of our colleagues who are going out to a school to run a session, we've got loads more content now on how to help connect with people with different disabilities. Some of this was taken from our customer service training actually, we realised that this was definitely a skills gap and something that needed to be done, because often it's a confidence issue. We've had feedback from colleagues to say, "I really don't mind going to this school and working with this group, but I don't know what to say. I'm scared of saying the wrong thing or offending somebody." Anything we can do around those soft skills and the confidence, we have seen it work very well. This is just a summary of the stuff I mentioned about the National Autistic Society.

So one of the things we learned as part of this process is that it's about the content. You have to make sure the content is accessible. You have to make sure that the channel is accessible, so that the videos are captioned, that the reading materials are available in alternative formats, as standard. It's about the

colleague training, but it's also about who you work with. So how do we make sure that the people that need this the most get to hear about it? Because, you know, we've got a long list of teachers who can access this site but making sure that some of the traditional schools or organisations who would never have thought this existed were able to access it, so working with the guide dogs association, National Deaf Children's Society, RNIB, and others, to say, "You've got groups of young people, most have programmes already, how can we work with you to improve the content and make sure that they can access it as well?"

SEAN: You have seven minutes left. Six minutes!

CATHERINE: This is a photograph of a session we ran at one of the schools. These young ladies have learning disabilities or social anxiety issues or cognitive issues. It was posted by a colleague on our internal Facebook site in Barclays, where we share examples of things that we're doing across the business. It was just written with a lovely story. What struck me was the impact not only on these young women at the end of the session and they were sharing things on the paper about what they felt confident about, but also the fact this the staff member had been absolutely transformed by what she'd seen and what she'd experienced and you could tell that she'd gone through a journey as well and would go on to deliver more sessions and become a real advocate and that's what we see. When we engage with people in a meaningful way that they can see is not a tick the box activity, those people become high advocates of us and go on to do lots more.

So digital. Digital skills are just one of the other ones I wanted to mention. Hopefully, some of you might have heard of our Digital Eagles programme. Show of hands if you have heard of a Digital Eagle? At least seven people! So our Digital Eagles -- it's not easy to say. Is this the sign? This is the eagle! It's an opportunity for colleagues who are passionate about digital skills to actually share this with their colleagues. We realised this is not about colleague-to-colleague only. These people have an opportunity to share with customers and their communities about the digital world. So here is a picture of an event we ran with the ZSL, London Zoological Society. They run an event every weekend, and it's about opening up the zoo in London and Whipsnade to all families and they make lots of adjustments. We ran an event with our Digital Eagles around coding and it was the first time we had made this coding event accessible to people. We've ran many, many coding sessions in our branches for young people, to try and address this skills gap of coding, this issue that we have in the UK. We hadn't necessarily thought about these extreme ends of the spectrum and potentially people with disabilities, and how they got involved. We worked at this event to run a code playground. We made sure it was fully accessible. We had different sorts of tablets with us. We looked at voice and sound in different ways to make sure it wasn't just things on screen. We'd even got play doh kits with electric circuits that could be used by people with severe disabilities and it was much more sensory and tactile. We had the full range. To witness this engagement with digital technology, even in its simplest form, was absolutely fantastic!

We have taken learns from that now, to look at how we engage with the Digital Eagles programme more mainstream and share that passion and knowledge across the country. This was just one other example. We had the fortune to go to New York last year for the 25th anniversary of the Americans with Disabilities Act. We ran an event with the mayor of New York and had some groups of people, some with learning difficulties and some with sight loss. We ran a couple of digital skills sessions with them.

This is just a couple of images from that day. This is another one. So what's next? Our next event looks at skills and inclusive skills sharing and it's for international day of people with disabilities. For the third year, we're really proud to work with Leonard Cheshire Disability, the global charity, to run Tea and Teach events, which connect our staff with people, either in care homes or in their own homes, or in branches or in cafes, all over the place, to bring digital technology into their hands and help them do something they've never done before. This is not about banking. We're not looking at banking apps with them. This is about looking at a YouTube video of something that means something to that individual or Skyping with somebody in another country that they know. It's about finding a common ground to connect with them around digital and giving people the skills and confidence to do it themselves. It's about finding that thing that inspires them, even if they have never picked up a tablet before. This is an image from last year's Tea and Teach event. I look forward to your questions. Thank you very much.

SEAN: Thank you very much. Next up, I'd like to invite up John Spiers and Grant Carson, who will talk about the development of disabled graduates' positive action partnership between NHS and the Scottish Government.

GRANT: Hello there. We are from Glasgow centre for inclusive living. We will talk about the development programmes we have developed over the last 15 or so years. GCIL is a great organisation. 70% of our staff are disabled people and another 85% of our directors. Our members are all self-identifying disabled people and they, of course, elect our directors. That way, our services are founded in our community of interest and continue to reflect the needs of our community of interest. We've been providing independent living services since 1995. All of our services are based on the social model of disability and on the principles of the independent living movement. Because of that, our services work to empower disabled people to take control of their own lives and manage their own support systems. Some of our systems -- I won't go into all of the services we run -- but some of our systems include innovative housing and employment services, our inclusive living support service, and our training service which includes disability equality training. The support service is one of our larger services and that focuses on our use of self-direct support and the use of the independent living fund that Nicola Sturgeon was talking about earlier. They run their own care packages of support. Some of them become employers and manage their own care and become care managers. It enables them to provide flexible care systems. If they wish to take up employment or study, that flexibility is there in the package of support they have.

The other things we do in terms of barrier removal are in terms of our housing service, it's obvious that housing is the cornerstone of independent living. Without an accessible house which meets the need the disability person, they can't access employment or education or training or social and recreational opportunities. It's why we have some innovative online housing services, one called Home to Fit, which is Scotland's accessible housing register, funded by the Scottish Government under the ministerial commitment in homes fit for the 21st century. It's a bit like a dating site where on the one hand you have accessible and adaptive housing and people with a housing need and you match the two. Disabled people can find a house quickly and easily. For disabled people who perhaps aren't suitably housed but don't wish to move, the other system we have is adaptive to fit, which focuses on adaptations. They are essential in removing the barriers identified by the social model of disability which enabled disabled people to take up employment, education and training. I will hand over to John now.

JOHN: Thanks, Grant. Thanks for the opportunity to speak to you today. Okay, right. So, firstly, I will give you a couple of statistics because they're the most exciting part of any presentation! To put it into context the experience of disabled people in relation to employment and education in Scotland. Disabled people are twice as likely to be unemployed as non-disabled people and four times as likely to have no qualifications and almost a quarter of disabled people in Scotland have no qualifications. So these numbers obviously paint a broad picture of the disadvantage that disabled people experience in relation to employment and education. So, as Grant mentioned a minute ago, this is underpinned by the social model of disability. When we considered how we challenged the disadvantaged that disabled people experience in accessing employment we used a two-pronged approach. We focused on positive action to providing employment opportunities specifically for disabled people. Positive action is enshrined in the Equality Act 2010, it is when an employer can take steps to help underrepresented groups to encourage them to apply and equalise opportunities within their work face, and secondly the promotion of good practice initiatives.

As Grant said, I will give you a history of the employment services we have delivered since 2001. We set up a programme called Open Door. This is an employment programme that specifically for the identified most disadvantaged groups of disabled people in Glasgow. The vast majority of people in receipt of disability living allowance at that time would more likely to be unemployed and have few or no qualifications. The average length of unemployment was six months and participants were offered real salaried jobs within a workplace, a training and development plan, ongoing support in work, job seeking skills training and, crucially, access facilitation. Now, when we talk about access facilitation, you are supporting the participants to identify the most appropriate equipment adaptations and/or arrangements in order for them to access the job fully. We provided guidance and support for them to go through the process of accessing the funding for that equipment or arrangements through the Access to Work programme. Do you know what the Access to Work programme is? Yep. Okay. So for anybody who doesn't, Access to Work is a publicly funded employment programme that aims to support and help disabled people to stay in work and can provide practical and financial support for disabled people. This process forms a critical part of the empowerment process for those individuals who can identify, address and take control of their own access requirements and take this forward throughout the rest of their career. So, Open Door has been running since 2001. We have had over five hundred people through the programme, five hundred disabled people coming from unemployment to employment. Over 70% of those people have progressed into further employment beyond the programme. Clearly, it demonstrates the barriers to employment are addressed properly, and then disabled people can flourish in the workplace. In 200the, building on the success of Open Door, over a number of years we noticed that there were a lot of disabled graduates applying to the programme. So we developed a graduate traineeship programme named Professional Careers, which was one of the graduate traineeship programmes specifically for disabled graduates, with the aim of addressing the underrepresentation of disabled people specifically in the housing sector, because we had a history of working in the housing sector and partnership with the housing services that we have. So we carried out some research and that showed that less than 1% of employees within the housing sector across Scotland were identifying as disabled people, and we strongly believed that the very few of that 1% were in senior positions. So as I said, the programme builds on the Open Door model and offered a similar package of employment, training and personal development support in to further employment. The programme is two and a half year contract of employment, salaried at officer level, and access to a relevant housing qualification. It could be anything from Level 4 post-grad, Masters and we had a couple of PhD students through the programme. 63 participants have come through the programme

with many of them progressing into a career beyond the programme. The success of this programme played a big part in the development of the partnership that we have with Scottish Government and the NHS Scotland. So, again, building on the success of the previous programmes in 2013 we launched GCIL quality academy. We carried out some research which reinforced what we already knew; there were key areas of need we would focus on. We extended the scope to include all sectors and we provide consultancy support to organisations in addressing institutional forms of discrimination through the development of their policies, practices and procedures and we continue to do that today.

We're pushed for time. Okay. So the partnership which we are talking about, we developed a partnership with NHS Scotland and the Scottish Government to develop a graduate traineeship programme for the NHS in Scotland. A wee bit of Scotland, a report was published in 2013 and it showed that the representation of disabled people identifying as disabled people and NHS workforce was 0.5%. When you consider the percentage of disabled people in Scotland is anything up to 23%, that's clearly an issue there. To put that into context, there's 150,000 people employed by the NHS and less than 1,000 people were identifying as disabled. So the NHS Scotland boards recognised this is as a key equality issue. Through the independent living movement, we were invited to put a proposal to the NHS for the development of a programme. So we developed a proposal based around the combination of a positive action approach and mainstream equality through development with the following specific objectives: To offer two-year employment opportunity for disabled graduates, 22 disabled graduates, so 22 boards NHS Scotland boards dotted around the country. Trainees would be employed with the equality academy and then obviously an immediate impact, although very small in terms of increased representation of disabled people within the NHS, so we presented this to the 22 chief executives in January 2015 and the proposal was unanimously agreed we would go ahead and do that. So we were then tasked to go and get these 22 disabled graduates for each of the boards from Orkney to Dumfries and everywhere in between. We commenced that in June last year. The salary was £22,600 per year per trainee. They were offered a two-year contract at professional level employment, as well as the package we offer, personal development and training, peer support and support into further employment. So we completed the process in September last year. It sounds quite simple saying it like that in a few seconds, but it was a hell of a lot of work for a very small team! So the trainees are all in place now. They're about halfway through their traineeships. They work in a wide variety of functions; we have a micro biologist and admin functions and various other functions. We're halfway through the first phase of the programme. The Scottish Government is currently carrying out an evaluation. I will speak faster because I want to go on to the case studies! With a view to mainstreaming it through the standard practice but certainly repeating the process.

I just want to show you one quick case study. This is Ryan from 2010. He was also interested in pursuing a career in sport. He went to America and worked in sports America camp, where he became a director. He was then had a tick bite and left paralysed. He was seven years' unemployed when he got back to Glasgow. He joined the professional careers programme in 2010. Took part in a Level 4 qualification in housing. He gained that with merit and gained further employment beyond the programme. He said that the programme had changed his life and had his confidence and self-belief back. He continues to progress. He then moved on to work for an organisation called Housing Options in Scotland where he has been promoted three times and is now the managers of the programme and he said -- I will cut the coat down to the end -- which is the crux of it. "I can't put into words the positive impact the programme has had on both me and my family."

In summary, this is what we do, how we do it, why we do it and the impact. The development of the partnership with Scottish Government and NHS Scotland and GCIL is an excellent example of how, when we draw upon combined expertise, real positive outcomes and change can be achieved. At the strategic level, the programme contributes to one of the specified outcomes within the Scottish Government's delivery plan for the United Nations convention on the rights of disabled people. At a personal level, as you can see from Ryan's case study, when disabled people get the opportunity to move from long-term unemployment, social exclusion with no or little prospects for change, to accessing an opportunity at professional level employment, training and development, and progressing into sustainable career of their own choice, not only their lives but the lives of their families can be transformed for the better. I think Ryan summed it up correctly: "I can't put into words the positive impact this programme has had on me and my family."

SEAN: Thank you, John and Grant. We have 20 minutes for questions. If your questions are general questions, please say so. If you have a specific question for one of the panellists, please say so. If people can keep -- speakers have kept to the time allotted -- so please don't make your question as long as their sessions! Who would like to kick off?

FLOOR: [inaudible].

SEAN: Now it works! My name is Paulo, I come from Finland. About the last presentation, how do you finance everything?

SEAN: John and Grant, one for you, please.

JOHN: Grant is only 22 and I'm only 24. We spend every day, all night and all day, chasing up the phone and chasing funds. A big part of our role is fundraising. So this particular programme, the partnership with the Scottish Government and NHS is funded by them. Each of the NHS boards fund the major part of each trainee salary and the Scottish Government contribute to the running of our service. We have myself, two placement co-ordinators and an administrator who run the programme. It was a big logistical exercise for us to cover the whole of Scotland. But the issue of funding is major issue for us. We have never had more than three years' funding at any given time. In the past, we have worked from year to year. It's a big part of our role.

GRANT: The Open Door programme ironically is funded by the European social fund. We have another two years' funding and then after that who knows what replacements will be in place. It's always a basket approach. I think the employability services and housing services we currently have 30 different funders and part of the job, as John said, is trying to report to those 30 funders, reapply to those 30 funders, and manage the funding package. It's a major part of what we do.

SEAN: A question right at the back. Thank you.

FLOOR: Hello. Thank you for your presentation. I didn't get your name but you forgot to mention all of the people in the [inaudible] Digital Eagles.

CATHERINE: I didn't catch the question.

FLOOR: All of the people in the Digital Eagles. I met two older people last week that were there. I was looking forward to talking about that. It would be good for you to explain it a bit.

CATHERINE: The Digital Eagles programme has touched older people more than younger people. I focused on the younger person. It is one of our biggest success stories amongst the Digital Eagles. We re-purposed the branch environment and putting the kettle on, get a pack of biscuits and invite people into the branch and talk to us about technology. You don't have to be a Barclays' customer. It was just about saying we have got some passionate people who know a little bit about technology. They might not have all of the answers but if they don't know, let's Google it together. That's the approach they take. It's worked really well. We have had people coming in. We've had a lot of people, especially after Christmas, bringing in their iPads still in the wrapper and looking pleadingly at the member of staff. Help me! This has been bought by my child or grandchild, what do I do with it? Whether it's setting up a device to using Skype or Facetime, we have absolutely supported a lot of people with the older age range.

For International Day for Older People on 1st October, we have had a proud partnership of doing Tea and Teach events across the country. Last year, we did over five hundred in one week in different care homes. This year, we managed over 400 again.

SEAN: Fantastic. Thank you. The next question.

FLOOR: Chris Ball. I'm from the UK. Actually, I work for Shaw Trust. I'm a specialist adviser on the ageing work force. I will stand up so you can see me better. Two thoughts, really. A lot of what people have been saying has been to describe how they cope within the existing system and the people from Glasgow in particular were really talking about how they use the funding system, how they play the system as far as they can, the difficulties and the constraints and so forth. It seems to me that that leads to, firstly, a question about the results of Brexit, if it happens, as it presumably will, the European social fund is a very important way in which projects are funded in the UK. The farmers seem to have done a good job in lobbying the Government to protect the agricultural fund. I'm just wondering whether there's some momentum that we could create behind an argument that says that actually these social projects should be protected in the same way.

The second thing I guess in a way is related to that. One of the things I do, I'm on the European age platform, that's the organisation based in Brussels which brings together all of the significant age-related charities and not-for-profit organisations in Britain. We lobby the Parliament on a lot of issues. I think there is a European platform for people with disabilities that does the same sort of thing. And I'm wondering whether Britain is part of Europe or not and there could be some momentum behind looking again at employment rights, a rights-based approach. We seem to have settled for the fact that we have a certain number of limited rights, i.e., the right to expect a reasonable adjustment, but all of what everybody has been saying appears to accept that we continue to live in a context where there is quite a lot of prejudice against employing disabled people. What more would we want if we had better rights? Is there any thought on that?

SEAN: Thank you very much for that. I will look to our panellists and see if someone would like to take the question. The theme of both of those questions around Brexit. The first one specifically when the ESF funding goes, given it funds a lot of good projects, what will happen next? I suspect if you can answer that one, you know rather more than the British Government! What should happen next? Secondly, particularly around rights and what happens to employment rights post-Brexit and particularly employment rights for disabled people who we know are already discriminated against in the workplace.

JOHN: We have developed the GCIL equality academy. I didn't go into the second part of what we do the positive action programme we deliver; clearly I think there is a place for positive action. I think they should expand on positive action. The other side of that is we work with the organisations to develop effective equality policies and practices and mainstream them into their practice, which will hopefully have a longer term impact in terms of their standard day-to-day policies and practices and impacts it will have. In terms of the funding, clearly Brexit will have a major impact, a profound impact on the European Social Fund. Grant is probably better placed to talk about that.

GRANT: The Scottish Government are devolving a lot of aspects of employability to Scotland. They will be setting up, as Nicola said earlier, a bespoke service for disabled people in Scotland. I think we will have to wait and see how some of that plays out. I do think that the questioner is quite right. I would be surprised if a level of support currently available for disabled people is maintained in two and a half years' time. But wait and see, I suppose.

SEAN: Does anybody else want to contribute? I will abuse the chair's privilege and pick up on that. I wanted to pick up on a notion from the questioner on lobbying, which I think is something... because we are quite fragmented in terms of organisations, in terms of funding sources, that actually this is a job for lobbying and farmers and the banking industry and others have done very good job of being very noisy around some of this area. And actually we need to be as noisy. Any more questions? A question here, please.

FLOOR: My name is Jim. I want to ask a leading question because... centre for individuals. My question is how does our statistics differ from those people in the labour market and do we give value for money for disabled people's organisations.

SEAN: I think the question was around comparative statistics of disabled people in the labour market.

FLOOR: And other Government-funded placements organisations and do NGOs give any value.

SEAN: Fantastic. Who would like to take that, please?

GRANT: Thank you for that question. I think the outcomes for the Government programme are about 30%. Our outcomes for the 50-week Open Door entry level are 60%. John's programme is a two and a half year programme and is closer to 85% or 90%. Our outcomes are far better but that's because the Government work programme offers very limited, time-limited support. So you're lucky to get six months out of the Government work programme. Our programmes are 50 weeks to two and a half years. Because of the level

of impairment that our clients have, they simply need longer to be current job ready and to seek other job opportunities. That's the difference between the Government programmes which are short-term and cherry pick people with lower levels of impairment. What was the other part of your question, Jim?

FLOOR: DPOs. Added value.

GRANT: Obviously, because 70% of our staff are disabled people and we employed and we are positive role models for people who come through the door. It sets a different mind-set when people who go to organisations that are not DPOs. I think that ethos of positive role models impacts on what we do and how we do it. The fact that John and myself and our colleagues go out and about to employers, again influences their mind-set and the attitudes of the employers who come into contact with us. They're not used to seeing disabled people in positions of authority. They are not used to seeing directors of services to be disabled. It's still very unusual in our society. It's part of the difference between DPOs and traditional service provision.

SEAN: Did anyone else have anything to say specifically on having disabled people at the heart of the organisation and leading the organisation and generating better outcomes?

JOHN: Just to say that the evidence that we've built up over 15 years now in delivering these services is that there has been implied in the past that our services are relatively expensive but we have carried out cost benefit analysis and we don't focus on the cost, obviously, but there is a cost involved. The cost benefit analysis shows that the people who come through our programme, as Grant said, we can demonstrate our experience at high-level of disadvantage, and through the support that they get and the chance to progress within a longer term placement, the outcome is far more sustainable. The cost benefit for that is somebody goes in, who is long-term unemployed, but gets the skills, knowledge and confidence to create a career, a long-term sustainable career, which obviously financially, apart from all of the other benefits, means they're contributing to society.

SEAN: Thank you. Any other questions?

FLOOR: Thank you. Hi, Sean. Patrick Hughes, salient work limited. Thank you to the presenters and the people we heard earlier on today. A wealth of information and thought provoking ideas. It immediately leads one to think about why we aren't all doing it. Right now! And yet, if you look at the spread of disability employment rates between the main OECD countries, there's a massive disparity between the high scorers like Sweden and France, and the low scorers like Ireland and the UK, I'm sorry to say. What do we do? My question to all of the panel, if I may, is of all of the things you have said, one piece of good practice you do and would you recommend to others. And just slightly more strategically, how do you think we should get better at spreading good practice and what works? Thank you.

SEAN: Thank you very much, Patrick. Dominique, can you start that?

DOMINIQUE: What has really been working in the last few years is support for the employers, support for a limited period of time, up to four years, but as we found out once a person is actually employed as a person with disabilities, that person can prove their worth. The problem is getting in. The employer's doors open

more easily if there is financial support at the beginning. Maybe the person won't be able to do 100% and you will see for the first one or two years, we will pay you a certain amount that will compensate. And once somebody's in, that's the major part.

UWE: I had on one of my slides a risk index. We had identified people who were endangered and we wanted to find them before this disability and ask them if they would go to rehab because rehab is much less costly than the disability pension. This is our project for the next years.

SEAN: Thank you.

CATHERINE: If people are already in the organisation and acquire or disclose and share their disability in terms of their adjustments and remove that bureaucracy, if they know what they need to make their working life better, just order it. A lot of people worry about the cost of it. It's rubbish, just get what they need. Work with disability organisations to get them out and get people along to recruitment days and share that publicly.

SEAN: Thank you.

JOHN: At the risk of repeating myself...! Positive action is one initiative, but it ultimately creates some role models and good practice for individuals. The other side of that is that we work with organisations to challenge the institutional forms of discrimination, the stuff that is normalised through practice, and still is accepted. You still see jobs that are advertised for must have driving licence, when you actually analyse the job you don't need a driving licence. That in itself excludes whole rafts of people. I have worked with hundreds of organisations over the years. I have never met one yet who will say they're not an equal opportunities employer, but if you look at the statistics it's not the case. It comes at a strategic level with a change in policies and procedures, as well as running alongside a positive action approach.

GRANT: It's easier to move from a job to a job. The subsidised schemes that work best for us. It's the ones we have developed over the last 15 years. It needs to be the way that Government needs to proceed to ensure that disabled people are not just volunteering all of the time and not in that cycle. They need positive employment opportunities, gain their wage and gain the self-respect and confidence that comes from that, and move from subsidised employment to sustained employment.

SEAN: We have one last question. Now is your final opportunity. Last question. Thank you.

FLOOR: I defer to anyone who hasn't asked this question, but if...

SEAN: Speak now. It's your last chance!

FLOOR: It seems that there is a sort of balance between asking employers, cajoling and encouraging, hoping that employers will do the right thing. I think we have had some good examples of that. We have seen Barclays, for example. They've spoken at length. BT earlier. Great when we can get employers to do that. And also, I come back to my question about rights. Nobody wanted to respond to that or felt perhaps able to do so. I wanted to just perhaps mention one thought and the lady from Finland might

want to comment on that in particular. In Finland, my understanding is that the Government, employers the trade unions over a number of years, since the early nineties, through the Finish programme for aging workers developed something called Workability. The workability model. This brings me in a way to the blurring of disability and work capacity. Older people, for example, in some jobs may suffer a gradual decline in their workability. We can define workability, we can produce a model for what it is and the Finns, interestingly, have even produced an index to measure the individual workability of an individual. So I thought that was very interesting. And Finnish employers are obliged to make workability assessments of their workplaces. Once again, a very positive thing. I've been thinking that maybe just to bring this around full circle, the individual rights thing, we ought to start to grasp the idea of an assessment of an individual's need that then gives them a legal right, just in the same way as, for example, an assessment, a statement of educational needs for a child with a learning disability and can then give them enforceable rights, rights they can enforce against the local education authority. So I just wanted to throw those few ideas out. Probably not very well structured but rather than just leave these things in the air without raising them.

SEAN: Two issues there. I don't know if our contributor from Finland wanted to talk to the workability model.

>> In Finland, it's true that the employers have a very strong responsibility to the workforce and keeping their workforce able to work. So there's a very strong legislation for the employers that if someone is ill or is about to become ill, the employers have to take action and we have a large, like, occupational healthcare system. It is very good for people who already are employed. The whole system of that rehabilitation measurement for people who already have a workplace, it's similar perhaps to what we heard about in Austria and what you probably have in Germany. So it works pretty well from our perspective. The problem, however, is for those people who never get a job to begin with, those who are born with a disability, or those who are disabled from a very early job and they don't get the protection from employers in the way that those do who get ill when they already have a job. This is still a problem also for us, because it seems like there is not enough financial incentive to put those people who are already on some kind of retirement payment back to work, because many of the insurance agencies might think that it's too costly because they don't have any work experience and they probably don't have proper education and so on and so forth, so there's still a risk for those people to be left out of the workplace entirely.

SEAN: Thank you. I guess on the notion of rights, usually on the other side of a right there is a responsibility somewhere. I think kind of two points there might be interesting. One is the responsibility of employers, I think particularly around quotas. I won't talk over bagpipes! And, secondly, it comes back to maybe the intermediate responsibility of guaranteeing a job. You may need to guarantee it on a creation model. Can we say a huge thank you to our five contributors? (Applause)

Thank you. Enjoy the rest of the conference.