



An Roinn Coimirce Sóisialaí
Department of Social Protection

Make Work Pay for People with Disabilities:

Recommendations 9(a), 9(b) and 10 Report on National Consultation.

[Link to full report on gov.ie/makeworkpayreport](https://gov.ie/makeworkpayreport)



Contents

Part 1: Executive Summary

1.1	Part 2: How the consultation was done	8
1.2	Parts 3, 4 and 5: Main findings and conclusions	10

Part 2: About the consultation process

2.1	Purpose of the consultation	16
2.2	Comprehensive Employment Strategy and MWP report	17
2.3	The consultation process	18

Part 3: Changing Disability Allowance (MWP Recommendation 9a)

3.1	Findings from consultation strands	26
3.2	Next steps – Changing DA	40

Part 4: Early Engagement (MWP recommendations 9b and 10)

4.1	Findings from consultation strands	44
4.2	Other relevant MWP recommendations	52
4.3	Next steps – Early Engagement	54

Part 5: Other issues brought up in consultation

5.1	Context	58
5.2	Findings from consultation strands	58
5.3	Relevant MWP recommendations	63
5.4	Next steps – relevance of other actions	64

Appendix

Terms of reference	68
Membership	69
Results from online questionnaire – Appendix B	71
Results from regional seminars – Appendix C	71
Consultation documents – Appendix D	71

List of abbreviations

CES – Comprehensive Employment Strategy for People with Disabilities (2015-2024)

DA – Disability Allowance

DCA – Domiciliary Care Allowance

DCF – Disability Consultative Forum (DCF) (Chaired by the DEASP)

DEASP – The Department of Employment Affairs and Social Protection

MWP – Make Work Pay

PwD – People with Disabilities

List of tables

Table 1: Stages of the consultation

Table 2: Disability type by first, second and third child

Table 3: Make Work Pay Recommendations

Table 4: Make Work Pay Recommendations related to wider issues identified during consultation

List of figures

Figure 1: Views on proposal to change disability payments

Figure 2: Participation in education by child 1, child 2 and child 3

Terms used in this report

Department of Employment Affairs and Social Protection (DEASP) –

We use this description in the report for the department as that was its name at the time of writing.

Disability Allowance – A weekly allowance paid to people with a disability. Currently, if a young person qualifies for this allowance they can get it from 16 years of age. If they were in education when they turned 16, they could continue to go to school. The proposal consulted on was to raise the starting age of the Disability Allowance (DA) payment from 16 to 18 and this came from a recommendation (recommendation 9A) in a 2017 report called Make Work Pay – see below for more information.

Domiciliary Care Allowance – A monthly payment for a child aged under 16 with a severe disability, who requires ongoing care and attention, substantially over and above the care and attention usually required for a child of the same age. It is not means tested.

Early engagement (also called early intervention) – This means that if you are a person with a disability and you are able and want to work, you will get every possible support at the earliest time possible to help you get a job.

Intreo – The State Public Employment Service provided by the Department of Employment Affairs and Social Protection. It offers practical, tailored employment services and supports for jobseekers and employers. To find out more, see www.gov.ie/en/campaigns/fb84c0-intreo/

Make Work Pay report (2017) – A report that addressed the priority to further improve the participation levels of people with disabilities (PwD) in employment. The report describes the ways the DEASP and others departments / agencies can address the main barriers to people with disabilities accessing fairly paid employment. To read more visit <https://www.gov.ie/en/publication/0fb542-make-work-pay-report>.

Reconfigure – Restructure or change

Make Work Pay for People with Disabilities

The Make Work Pay report (2017) addressed the priority to further improve participation levels of people with disabilities in employment. It listed 24 recommendations that would make it easier for people with disabilities to start working and stay in work. This report presents the results of a consultation on two of the recommendations in the Make Work Pay report.

The recommendations consulted on are recommendations 9 and 10.

“(9.) Reconfigure [change] the Disability Allowance scheme for new entrants to give effect to the principle of early intervention, as follows:

a) Support for 16-18 year olds with significant support needs, which is currently paid by means of Disability Allowance, to be paid via Domiciliary Care Allowance up to 18 years of age;

b) Explore possibilities for the reform of the structure of the Disability Allowance for those between the ages of 18-22 to focus on participation in education, training and/or social inclusion according to individual capacity.

(10.) Apply the principle of early intervention across all illness and disability schemes, adapting existing schemes where necessary to give effect to this principle”



Part 1

Executive Summary

This part of the report briefly describes:

- how the consultation was done,
- the main findings and conclusions.

In 2017 and 2018, the Department of Employment Affairs and Social Protection (DEASP) undertook a national consultation with disability stakeholders. It focused on recommendations 9 and 10 in the Make Work Pay (MWP) report shown below. In line with the terms of reference (scope) of the consultation, this report describes:

- how the consultation was done,
- the main findings and conclusions.

1.1 Part 2: How the consultation was done

Part 2: Describes the main features of the consultation process

What led to the consultation?

The Make Work Pay report was published in April 2017. It addressed the priority to further improve the participation levels of people with disabilities (PwD) in employment. The report describes the ways the DEASP and others can identify and address the main barriers to PwD accessing fairly paid employment.

It made 24 recommendations including recommendations 9 and 10, which focused on:

- raising the starting age of the Disability Allowance (DA) payment from 16 to 18 (recommendation 9a), **and**
- the principle of early engagement (recommendations 9b and 10). Early engagement means that people with a disability are given all the supports they need to get a job. They get these supports as soon as they get a payment and are ready to think about work. Supports might mean education or training. They might also mean support with social skills or to take part in your community.

Why was the consultation needed?

When the report was published, the then Minister for Employment Affairs and Social Protection wanted to consult with PwD, as some of the MWP recommendations it was thought might be considered controversial. The Minister instructed the department to consult with PwD, parents and disability advocates.

Who designed the consultation process?

The DEASP and a Stakeholder Focus Group designed the consultation process with the help of an external facilitator. Read about the members of this Group in **Appendix A** (see page 69).

When and how did the consultation take place?

The consultation took place between September 2017 and June 2018. There were three overlapping phases.

These are shown in the table below.

Table 1: Stages of the consultation

Phase 1: Planning and preparation September 2017 to March 2018	Phase 2: National consultation process March 2018 to April 2018	Phase 3: Combining consultation findings and identifying next steps April 2018 to June 2018
This phase was used to: <ul style="list-style-type: none"> • plan the national consultation, • clarify the roles of those involved (including the Stakeholder Focus Group), • clarify the questions to be asked as part of the consultation, and • prepare materials in appropriate formats. 	During this phase, the DEASP collected data through three main methods: <ul style="list-style-type: none"> • written submissions, • regional seminars, and • online questionnaires. 	The DEASP used the consultation feedback to develop documents. These documents combined the main findings from the three main methods of collecting feedback. The Stakeholder Focus Group revised the documents at meetings. It then identified next steps. These documents now make up most of this summary report (parts 3, 4 and 5). Part 3 covers feedback on recommendation 9a Part 4 covers feedback on recommendation 10, and Part 5 reports on feedback on other issues raised.

1.2 Parts 3, 4 and 5: Main findings and conclusions

Part 3: Restructuring (changing) the DA payment – raising the starting age of getting this payment (recommendation 9a)

Main findings and conclusions

From responses gathered from the regional seminars and the questionnaire, the Stakeholder Focus Group considered that there was a polarisation – sharp division – of views. Around **half of respondents** were in favour of restructuring the DA scheme in line with the MWP recommendation, but **a quarter** were against the proposal.

There were many reasons why many respondents favoured the proposal to restructure Domiciliary Care Allowance (DCA) **and** Disability Allowance (DA). Some of the main reasons were that they thought:

- 16 is too young for a person to receive an adult payment (the DA payment).
- It helps to keep the young person focused on training, education and employment.
- It offers more control over finances to parents.

The Stakeholder Focus Group viewed the results of the online questionnaire, with results from the regional seminars **and** from the written submissions to get a coherent picture of views.

This picture showed that, for many families, Domiciliary Care Allowance (DCA) or Disability Allowance (DA) **met costs associated with the disability** like speech and language therapy costs.

When the Group studied the answers to open questions and quotes, it considered that **respondents who rejected the MWP proposal on DA were most likely concerned about losing family income. However, this potential loss of income depended on individual circumstances, as some families would gain financially while others would lose.**

The Stakeholder Focus Group considered that respondents were more likely to reject the proposal if:

- family income was reduced,
- the type of disability fell into certain categories, notably intellectual disability, and
- the disability was severe.

Based on the views expressed and the assurance that the proposal was not intended to reduce family income, the Group considered that, if implemented, the Government should make up for any loss of income. The Group identified three different ways this might be done.

Three ways (three proposals) to make up for any loss of income

The Stakeholder Focus Group suggested the following three proposals to make up for any loss of income:

1. Within a larger discussion and analysis of the cost of disability, build in the need for an arrangement to replace any lost income.

This proposal would include looking at the cost of a disability that:

- varies by person,
- can be covered by existing State or other supports (for example, the Medical Card).

2. Design and introduce a **transitional support payment** for the years 16-18.

This proposal would achieve the broader MWP objective and make sure that PwD would have a regular income with no gaps. If the age for receiving a disability allowance is raised to 18 (currently 16) a new support payment be introduced for those in the 16-18 bracket that have significant support needs.

3. Introduce a **transitional arrangement for the DCA payment** for the years 16-18 to deal with potential loss of income.

This proposal would increase the rate of the DCA (a payment to parents or guardians). This would maintain income levels for families that would otherwise have their income reduced.

The Stakeholder Focus Group did not see its role as identifying a preferred approach or costing these approaches.

Part 4: Early engagement (recommendation 9b and 10)

Main findings and conclusions

The majority of views from the three main consultation methods broadly welcomed the principle of early engagement, so long as there were **supporting actions**.

These actions included:

- Provide a clear sense of how early engagement will work before it is implemented.
- Develop the early engagement way (model) of working based on the work being done by the Midlands Intreo test project on early engagement. (Intreo is a single point of contact for all employment and income supports. Intreo offices are in various places around the country.)
- Strengthen the capacity of the Intreo service to address the needs of PwD. For example, Intreo staff need to be trained to find information for PwD who are interested in working, and so on.
- Make sure the principle of voluntary engagement (defined on page 44) is kept.
- Consult further with the disability sector to develop the early engagement way of working.
- Develop local networks and protocols (rules) for encouraging agencies to work together.

Part 5: Findings about other issues that arose from the consultation

During the consultation, some issues about better employment outcomes came up. Here are just two examples of other issues:

1. Better joining up of policies across Government

Respondents called for better joining-up of policies across Government, especially with the health and education sectors. In this way, PwD could start and stay in work if they wished without unnecessary barriers.

2. Having a more proactive information and communication campaign about how work pays

Respondents also called for a more proactive information and communications campaign. This campaign would make sure that any changes about employment for people with disabilities are communicated clearly and early. In this way, all involved would understand the implications of any changes and how to make work pay.

The Stakeholder Focus Group acknowledged that many of these issues were already in government policy documents like the Comprehensive Employment Strategy for PwD. It recommended that the interdepartmental committees (with members from two or more government departments), senior official groups and Cabinet sub-committees (committees made up of Ministers) should help by:

- highlighting the actions that depend on each other to make it easy for people with disabilities to find and stay in work; and
- making the process answerable where there is lack of progress.

The DEASP as advocate

The Stakeholder Focus Group considered the DEASP should advocate to address barriers throughout the disability support system to make work pay. After all, the DEASP provides employment supports and services. As an advocate, the DEASP would publically recommend and support action to address barriers.

2

Part 2

About the consultation process

This part of the report tells you about:

- the purpose of the consultation,
- background to its development, and
- the consultation process.

2.1 Purpose of the consultation

This report describes the consultation process undertaken by the Department of Employment Affairs and Social Protection (DEASP) along with a Stakeholder Focus Group – a specially formed group with specialist expertise in disability issues. The consultation took place from September 2017 to June 2018.

It centred on the Make Work Pay report – a report that looks at ways to help people with disabilities to achieve their work ambitions, and remove the barriers that prevent them from doing so – and in particular recommendations 9 and 10. These recommendations focused on the principle of early engagement with persons with disabilities to improve employment outcomes and on reconfiguring (changing) the Disability Allowance (DA) scheme to support this.

2.2 Background: Comprehensive Employment Strategy and MWP report

The Make Work Pay (MWP) report was published in April 2017. The report was compiled following a commitment in the Comprehensive Employment Strategy (CES) 2015-2024 to better identify how people with disabilities could take up work. The report made many recommendations including that the Disability Allowance payment and other schemes should be changed (reconfigured) for new entrants aged 18 and over to make sure their work ambitions could be explored systematically at an early age (known as the 'principle of early engagement').

Specifically, the MWP report recommended the following:

“(9.) Reconfigure [change] the Disability Allowance scheme for new entrants to give effect to the principle of early intervention, as follows:

(a) Support for 16-18 year olds with significant support needs, which is currently paid by means of Disability Allowance, to be paid via Domiciliary Care Allowance up to 18 years of age;

(b) Explore possibilities for the reform of the structure of the Disability Allowance for those between the ages of 18-22 to focus on participation in education, training and/or social inclusion according to individual capacity.

(10.) Apply the principle of early intervention across all illness and disability schemes, adapting existing schemes where necessary to give effect to this principle.”

Government decided to consult on these recommendations

After the MWP report was published, and aware that some of the recommendations might be controversial, the Minister for Social Protection at that time, Leo Varadkar, TD, indicated that the Government would consult with people with disabilities and their families in relation to some of the recommendations. Specifically, the Department of Employment Affairs and Social Protection's (DEASP) press release at the time of publication said:

“The report highlights the importance of early intervention and making supports available at the earliest opportunity. One of its recommendations is to support young adults through education, training and social inclusion according to their capacity, and to change the qualifying age for disability allowance at 16. However, there is a legitimate expectation among parents and families that a child who currently receives domiciliary care allowance will qualify for disability allowance at age 16. Minister Varadkar has therefore ruled out making any change in this area unless it is supported by the disability sector. And he has invited parents and disability advocates to discuss the issue.”

The DEASP held an **initial consultation** with its Disability Consultative Forum (DCF) – a forum it chairs – in April 2017 on the recommendations and the type of consultation needed. After this, the DEASP decided to hire an external facilitator through a competitive process. The Forum wanted to make sure the consultation process was as wide-ranging as possible and included representation from relevant stakeholders. The DEASP appointed management consultant, Kieran Murphy, as facilitator.

Make Work Pay Stakeholder Focus Group set up

The DEASP then established a Make Work Pay “Stakeholder Focus Group”, made up of around 30 people with experience of disability issues. This Group was tasked with designing and implementing a wider national consultation process.

Details of the terms of reference of the Stakeholder Focus Group and its membership are set out in **Appendix A** (see page 67).

2.3 The consultation process

With the help of the facilitator, the Stakeholder Focus Group and the DEASP developed the consultation process together (“co-created”) to make sure it was as inclusive and comprehensive as possible.

The approach paid equal attention to:

- designing, preparing for, and doing the consultation; and
- creating a space for open and honest dialogue between the DEASP and the Stakeholder Focus Group, and among the members of the Stakeholder Focus Group.

This approach took considerable time and energy both from the members of the Stakeholder Focus Group and the members of the DEASP. It focused on:

- building trust, openness and honesty to fully hear the views of all the participants and to have robust conversations about the important issues that needed to be explored and agreed; and
- making sure that all participants experienced the process as an inclusive one where their contribution was acknowledged and valued.

The consultation process was designed to take place over three phases:

Phase 1: Planning and preparation (September 2017 to March 2018)

Phase 2: National consultation process (March 2018 to April 2018)

Phase 3: Combining findings and identification of next steps (April 2018 to June 2018)

We look at the work done in each of these phases in turn.

Phase 1: Planning and preparation (September 2017 to March 2018)

Phase 1 involved planning and preparation and focused in large part on bringing together a Stakeholder Focus Group who met to plan materials and consultation methods.

Stakeholder Focus Group: The Stakeholder Focus Group met seven times in all and four of these meetings happened in this phase. They were held at Richmond Barracks, Dublin 8. At the meetings, the group discussed:

- the MWP recommendations;
- the implications these would have for people with disabilities; and
- the best way to create a comprehensive and inclusive process.

These discussions enabled the Group to develop a broad approach to the consultation in line with the terms and reference for the consultation, as set out in **Appendix A** (see page 68).

Preparing clear consultation materials: This included preparing materials to:

- explain the rationale behind the recommendations;
- identify in broad terms the effects of the recommendations on people with disabilities and their families; and
- identify the conditions under which these recommendations could receive broader acceptance.

Documents were produced in a range of accessible formats such as easy-read, braille, audio, video captioned and Irish Sign Language.

There were three main consultation strands planned.

1. Questionnaires developed

Two questionnaires were prepared to capture the views of people with disabilities, their parents and carers on the MWP recommendations:

1. Questionnaire to gather feedback on Recommendation 9a (12 questions).
2. Questionnaire to gather feedback on recommendations 9b and 10 (13 questions).

The DEASP sent a letter to the 35,000 or so families who receive the Domiciliary Care Allowance (DCA) payment, inviting them to take part and explaining why it was important to hear their views.

2. Regional seminars

Four regional consultation seminars were planned.

A direct consultation event was also planned with a number of young people (14-18) with disabilities.

3. Written submissions (press alerted)

An announcement was placed in the national and regional press inviting written submissions from interested groups and parties.

The national consultation process was planned for Spring 2018 and expected to last 6-8 weeks.

Phase 2: National consultation (March 2018 – April 2018)

Phase 2 started with the launch of the consultation and was followed by the consultation proper. The consultation involved questionnaires, regional seminars, a young people's consultation event, and written submissions.

Launch: the then Minister for Employment Affairs and Social Protection Regina Doherty TD and Minister of State Finian McGrath TD launched the Consultation Process in Richmond Barracks, Inchicore, Dublin 8 on 7 March 2018.

The consultation process focused on the three planned consultation strands as follows:

1. The questionnaires

1. Questionnaire on Recommendation 9a relating to the change in the age condition for eligibility to DA and DCA; **and**
2. Questionnaire for Recommendations 9b and 10 relating to the principle of early engagement.

The questionnaires were developed on Survey Monkey (online questionnaire tool). People could access the questionnaires:

- online, through the Department of Employment Affairs and Social Protection website, for those people with internet access;
- in paper copy format for those with no internet access to complete and return to the Department;
- by phoning the Department and having their responses recorded.

2. Regional seminars

During this phase, four regional seminars were held in:

- Cork,
- Dublin,
- Sligo, and
- Limerick.

Three took place over a morning. An evening event was held in Dublin. All were promoted in national newspapers.

The seminars featured a brief presentation by a member of the Stakeholder Focus Group on the purpose of the consultation followed by two presentations by a DEASP official setting out the rationale behind the MWP recommendations. Those attending were then invited to complete consultation questions. Each table of participants did this with the help of a facilitator and a note-taker.

Young people's consultation event

The Department tried to arrange a consultation event with young people aged 14-18. Contact was made with a number of relevant groups but, unfortunately, it was not possible to complete this process. However, a facilitated discussion took place with a number of **third-level students with disabilities** and the results of this are reflected in this report.

3. Written submissions invited and received

Written submissions (using email) were also invited as part of the consultation. The closing date for written submissions and completed questionnaires was Friday, 6 April 2018, but this was extended by a week (to 13 April) due to severe weather conditions.

Phase 3: Combining consultation findings and identifying next steps (April 2018-June 2018)

Phase 3 of the consultation process focused on combining the findings from the three main consultation strands and agreeing on next steps in line with the terms of reference. During this phase, the Stakeholder Focus Group met three times. Two of these meetings focused on the findings.

For the meeting on 23 May 2018, the DEASP prepared three documents from the three consultation strands. These focused on:

- early engagement,
- DA changing (reconfiguring), and
- other issues that emerged during the consultation process as necessary for implementation of the MWP recommendations. These are outlined in Part 5 (see page 61).

Each document identified provisional findings under each of the themes based on the material gathered. The Stakeholder Focus Group discussed the extent to which a **coherent interpretation** could come from the main sets of consultation findings and its members agreed to meet again to combine the findings and to use these to identify the next steps. The Stakeholder Focus Group met again on 6 June 2018 to consider a number of combined findings documents and reach agreement on findings, recommendations and next steps. These revised documents in effect represent the bulk of this final summary report (parts 3, 4 and 5).

You can read the results of the online questionnaire at **Appendix B** and the summary report of regional events at **Appendix C** on the gov.ie website. The consultation documents and material themselves are also on the gov.ie website at **Appendix D**.

3

Part 3

Changing Disability Allowance (MWP Recommendation 9a)

This part of the report tells you about:

- findings from the consultation strands as they relate to the change in the age condition to be eligible for Disability Allowance (DA) and Domiciliary Care Allowance (DCA) – Recommendation 9a of Make Work Pay Report (2017),
- next steps for changing DA.

3.1 Findings from consultation strands

This section gives a summary of the views expressed as part of the national consultation process through its three consultation strands:

- written submissions;
- findings from the four regional seminars (as well as a focus group with students); and
- findings from questionnaire responses to the questionnaire on MWP recommendation 9a (while findings are not statistically representative they are valuable).

3.1.1 Findings from written submissions

The following five main conclusions can be drawn from the written submissions in relation to Recommendation 9a.

1. Allowances mainly used to buy supports

Many families used both Domiciliary Care Allowance and Disability Allowance to buy essential and additional supports like physiotherapy for the child with a disability. They stressed that essential supports were often unavailable at critical developmental stages.

2. Risk assessment needed

Many identified a need for a risk assessment **before** any change is made to DA or DCA to find out how many families with a child with a disability are currently living in poverty. The risk assessment would examine the effect on family income if recommendation 9A of the Make Work Pay recommendations is introduced as outlined in the original Make Work Pay report.

3. Analysis of additional costs needed

Most submissions called for an analysis of the additional financial costs faced by people with a disability and the introduction of a scheme to address these additional costs.

4. Clarity needed on secondary benefits – medical card important

It is not clear what secondary benefits such as travel, household benefits or living alone allowance would be available after payments had been changed (restructured).

Many submissions emphasised that access to a medical card must be kept as part of any proposed change.

One submission suggested that the DEASP should publish a short factsheet in multiple formats outlining the secondary benefits that will be kept while working. These include benefits like free travel and the “fast track” reapplication process.

5. Other points that need to be considered

Some submissions from individuals argued for a system that recognised that there are people with disabilities who will never work **and** that income supports for this group should not be reduced in any changing (restructuring) of payments.

In relation to recommendation 9b, one submission argued that the level of payment for young people (aged 18-22) should not be reduced in line with Jobseeker’s Allowance under any circumstances.

Another submission called for the introduction of a “transitional support payment” scheme for young people with disabilities who are taking part in further education, training or employment. The rate of payment of such a support should equal the DA payment rate and continue beyond age 22 where appropriate.

3.1.2 Findings from regional seminars

The following three main conclusions can be drawn from the feedback from the four regional consultation seminars on changing Domiciliary Care Allowance and Disability Allowance. These conclusions are followed by views from students.

1. Mixed views about changing DCA and DA

There are very mixed views about the proposal to change disability payments. While just over half (53%) either ‘Agree’ or ‘Strongly Agree’ with the proposal, more than a quarter (27%) either ‘Disagree’ or ‘Strongly Disagree’. A further 20% ‘Don’t know’.

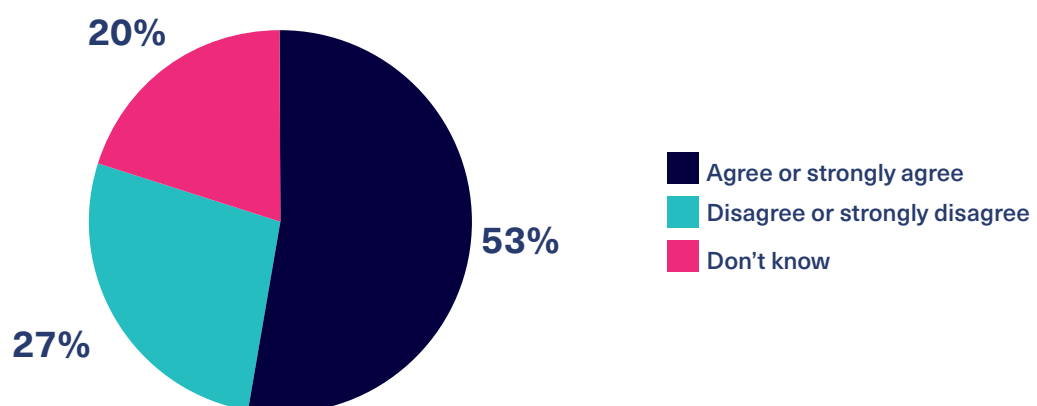


Figure 1: Views on proposal to change disability payments

(This diversity of views was also expressed in response to the question about the **timing of the introduction of any changes** where 37% did not agree with the proposal and opted for 'I don't know. Do not make any changes to the current payments').

Strong support to change DCA and DA

As stated above, 53% supported the proposal to change (reconfigure) Domiciliary Care Allowance (DCA) and Disability Allowance (DA) and gave the following reasons:

- 16 is too young for a person to receive what can be considered an adult payment.
- It would help to keep the young person focused on training, education and employment.
- It offers more control over finances to parents.
- There may be negative implications for the young person concerned, such as possibly the decrease in the desire to work.

Also, significant opposition

Some 27% either disagreed or strongly disagreed with the proposal to change DCA and DA. Their reasons included:

- Loss of significant income to the household.
- Loss of access to services and secondary benefits which are accessed through receipt of Disability Allowance.

2. Early engagement must work well before any changes to disability payments

Many felt that the process of early engagement needs to be working successfully before any changes to disability payments are introduced.

3. Changes to disability payments need to be notified early

Any changes to disability payments need to be publicised well in advance of any changes. This would allow people with disabilities, their parents or guardians and service delivery organisations to understand the implications and prepare for the changes.

Views of third-level students

As noted earlier, the Department tried to arrange a consultation event with young people aged 14-18. While contact was made with a number of relevant groups, unfortunately, it was not possible to undertake such a consultation. However, a facilitated discussion did take place with a number of **third-level students**.

In May 2018, the facilitator/researcher held a separate meeting with students on the Trinity Centre for People with Intellectual Disabilities courses in Arts, Science and Inclusive Applied Practice.

The students **did not support** the proposal to change the payment age for Disability Allowance from 16 to 18. The reason they gave is that 16-18 years is an important transition time for a person with a disability, from dependent child to independent adult. Getting DA at 16 helped to enable this transition. For example, it gave access to free transport which gave young people greater freedom to socialise with friends, access services, and access work opportunities. It also gave them an income which they could use to access services and supports which would otherwise be beyond their means.

3.1.3 Findings from questionnaires

The following sections draw on feedback from the 13 main questions asked in relation to MWP recommendation 9A. For a list of the questions, please see **Appendix D**.

Overall, 3,297 people completed the questionnaire. However, the responses cover families with one child or more, indicating that, in some families, more than one child had a disability.

Q1 and Q2 (family currently in receipt of DCA): Some 97% of people who completed the questionnaire receive Domiciliary Care Allowance (DCA) for 1, 2, 3 or more children. Some 88% of families had one child with a disability, 11% had two children with a disability and 1% had three children with a disability. More than half (54%) of children with a disability are 10 years of age or older.

Q3 to Q5 (nature of disability for child 1, child 2 or more children): The table on the next page indicates the type of disability.

Please note that the number of disability types reported is nearly twice the number of actual responses. This shows that many children have multiple disabilities and this increases where there is a second and third child in the family.

Also, bearing in mind that many children have two or more disabilities, physical disabilities make up about 30% of the total reported disabilities.

This breaks down as:

- vision (2%),
- deafness (2%),
- physical (16%), and
- chronic illness (10%).

Other disabilities reported worked out as follows:

60% of disabilities reported are for intellectual or cognitive disabilities. 11% of disabilities were reported as mental health disabilities.

The 3,168 respondents mentioned various types of disabilities, so the total number of disabilities was higher than respondents.

Table 2: Disability type by first, second and third child

Disability type	First child	Second child	Third child
Vision	101	13	3
Deafness	133	19	2
Intellectual	977	81	17
Autism	1,557	212	28
Learning	1,072	144	23
Physical	968	119	15
Mental Health	603	104	18
Chronic Illness	584	69	13
Total number of mentions (remember: a child might have more than one disability)	5,995	761	119
Actual number of respondents	3,168	381	54

Q6 (education of children): In the bar chart on the next page, we summarise the education of the children we asked about (Child 1, Child 2 and Child 3).

Overall, about:

- 50% of children go to mainstream school,
- 18% go to special school, and
- 17% go to a special class in a mainstream school.

The others (14%) are too young for school, do not attend or are home-schooled.

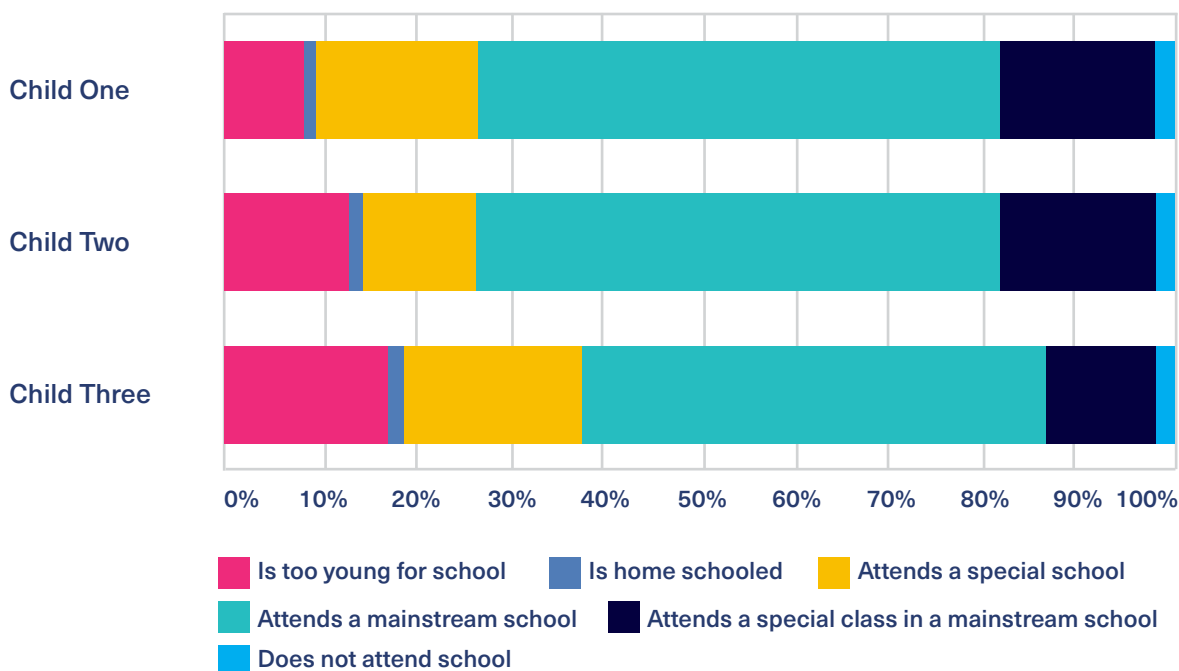


Figure 2: Participation in education by child 1, child 2 and child 3

Q7 (where children with disabilities live): 39% of respondents live in a city or large town, 27% in a small town and 34% in a rural area.

Q8 (degree of confidence that your child (or children) who is getting a DCA payment will take up training or employment in the future): Overall, 42% of parents or guardians were either confident or very confident about their child being able to take up training but only 23% expressed confidence about employment.

However, there was also a great degree of uncertainty in response to this question. Some 34% said “don’t know” in relation to their confidence in accessing training while 44% said “don’t know” in relation to employment.

Q9 (main concern about access to work): The most important issue for people was the availability of suitable work and supportive workplaces. Of somewhat lesser importance was the availability of help in finding work or suitable training and the issue of getting to work. Access to education, training or how employment might affect their entitlements was ranked lower in priority.

Q10 (future benefits of taking up work to your child – or children): Most respondents said self-confidence and well-being and greater independence were the main benefits of taking up work. Social contact and, to a lesser extent, being better off financially were seen as less important benefits.

Q11 (most important things that would help your child (or children) overcome barriers to getting work): The need for more information about work opportunities, help in finding work and having a supportive workplace were the most important barriers to tackle. This is consistent with the answers to question 9 above. Difficulties in accessing transport or lack of information about financial benefits were seen as considerably less significant.

Q12 (view on MWP recommendation 9a – to pay Domiciliary Care Allowance to parents or guardians until the child is 18 years of age, and that the qualifying age for Disability Allowance would change from 16 to 18 years of age): Some 82% of respondents agreed or strongly agreed with the Make Work Pay report recommendation that Domiciliary Care Allowance be paid to parents or guardians until the child is 18 years of age, and that the qualifying age for Disability Allowance would change from 16 to 18 years of age. However, 12% disagreed or strongly disagreed.

Below, we give a selection of comments from those against, for and unsure about the recommendation. As you can see, there are strongly held views and quite a degree of polarisation – sharp division – of views. These quotes are taken exactly as written from the questionnaires. They have not been edited.

Against the change – 12%

“We are against the proposed changes to the system. The fact that a child with a disability can leave school at 16 does not mean that most will and with lots of schools for disabilities catering for the kids until age 18, it is unlikely that many children with disabilities will opt out at age 16. Consideration must also be given to the fact many of these children will either be encouraged by their parents to remain on until age 18 and many of the children with an increased level of disability will not even be personally aware that they could leave school at 16 and will therefore continue by default and most probably because it is their parents wish that they do so. I do not know ANY parents of children with disabilities that would encourage their child to leave school early.”

“My child will never work but will always need substantial occupational therapy and speech therapy both of which we have to pay privately even at 6 years old. Reducing his income would severely reduce the amount of assistance he has to help him function.”

“It is not clear from the recommendation if the Domiciliary Care Allowance will be increased to the rate of Disability Allowance from 16 to 18 years of age. If the Domiciliary Care Allowance is increased to the same rate of payment as the Disability Allowance for these two years then I would see merit in it. However, if the rates remain the same and at the current rates this will result in a difference of €6,322. This is a significant amount of money for any household to be without and would have a negative and detrimental effect and impact particularly on the person with the disability and also the family.”

“My family will receive €12,644 less if we agree to this change and will not get free travel until he is 18 years old. I will not be able to advocate for my child when applying for DA if he is 18 years old when making application.”

“I want my daughter to become as independent as possible and would like her to start receiving her disability allowance from age 16 so she will have her own bank account and also be able to look after her own money.”

“Absolutely not!!!! My child is suffering from a learning disability, severe emotional disregulation, including Oppositional Defiant Disorder, ADHD, severe anxiety, and Autism. All parents would have to do in this case is to not apply for DA for their child until they turn 18 if that's how they feel. I think this is wrong and if the government are adamant in making changes, then there should be an option for parents to apply for DA for their child at 16 or choose to remain on DCA until the ages of 18. Change should not be forced on us. The option should be there for parents to choose.”

“I strongly disagree, as a “one size fits all” approach cannot be used for such a variance of disabilities. To give you an example, I know of a huge cohort of parents who are in receipt of DCA who are delighted with this proposal as they know that their children will not qualify for Disability Allowance as the only condition their child has is Type 1 diabetes. Their responses are going to totally distort parents’ feelings on this. In our case, sadly, our daughter will more than likely never be able to work because of her medical condition, so to arbitrarily take away a valuable benefit for the two years between 16 and 18 seems rather amoral to say the least.”

For the change – 82%

“Parents of special needs kids. Need all the financial help they can get.”

“I strongly agree because I think the parents or guardians would be better able to budget the money for the child until he/she was 18 years old.”

“From what I’ve read, my children wouldn’t qualify for Disability Allowance and we would be left with nothing while they are still attending secondary school.”

Unsure – 6%

“I don’t think it should be a one-size-fits-all approach. This whole process is somewhat insulting as it takes the disabled as a homogeneous group. I am dyslexic but have had a better than average life, held a great job, education and raising my family. I am ‘disabled’ but I am nothing like my child who is incapable of any speech, reading, following a story, or indicating any level of understanding. What I am getting at is the idea that a single ‘handout’ is appropriate to all who fall into the box labelled “disabled” is very unfair. Some people have obvious and pressing needs for substantial support. Others may very well do perfectly well with a little inclusion and support from those around them.

My child is such. No amount of money given today will affect the future more than what she gets for free from us, the teachers in school and the wider community who go out of their way to ensure no one is left outside. As for the change at 16 ... well, we are 8 years away from that so not able to say how it will affect us. I do know that many children do have greater and more costly needs as they grow older. Ask any parent and they will tell you that the late teen years are brutal. Some will benefit as their child develops and achieves more ... but the losers in this case will be those more severely disabled who will remain, and increase their dependence on their family, should they still have one capable of supporting them. I would watch out for unexpected consequences from changes.

While we should try to target help in a fairer way, we also must avoid pushing others beyond their ability to cope. Most will benefit from being encouraged to stay in school longer, but how many really wish to leave anyway. School is the highlight of my child’s day and money means nothing to them. All it does is pay for a new computer or handheld that can be used for PECS [education] or buy the right type of clothes that doesn’t itch ... For our kids this will not improve their future, they want to go out ... be it school, training or work... or even the park to feed the ducks. These kids just need the places to train and work to do, or at least some reason to get up.”

Q13 (When do you think the recommended changes in the DCA and DA payments for those aged 16 to 18 should start?):

Nearly one in four people (23%) did not want to see any change in the current system. However, 65% felt the change should be introduced immediately while 12% felt the change should be implemented in 5 years.

Overall, the results from the questionnaire, show a considerable degree of polarisation (sharp division) in responses, especially to Q11 which asks whether the DCA should be paid to age 18 and DA started at age 18 instead of age 16. To better try to understand the reasons for this, we did a deeper analysis of the responses.

More analysis

When we compared Q12 (view of MWP recommendation 9a) results with Q3 to Q5 (type of disability), we found that those with an intellectual disability were the most likely to disagree with changes to the payment schemes (25% compared with 12% overall).

We found the same pattern when we compared Q12 (When do you think the recommended changes in the Domiciliary Care Allowance and the Disability Allowance payments for those aged 16 to 18 should happen/start?) results with Q3 – 38% of those with an intellectual disability said that they didn't want to see any changes compared with 23% overall. Having said this, over 50% of those with an intellectual disability said that they wanted to change immediately suggesting considerable variation among this classification.

3.1.4 Combined findings

The survey results do not compare with a statistically representative survey. However, the Stakeholder Focus Group believes there is a majority in favour of reconfiguring (rearranging) the disability payments scheme, but there is also a significant minority opposed. This is based on the responses gathered from the questionnaire and from the regional seminars.

A rough breakdown is as follows:

- about half of the respondents were in favour of changing (reconfiguring) the scheme,
- a quarter were against,
- another quarter didn't express a view.

In any event, the consultation process showed a polarisation of views.

Based on the comments in the questionnaires and at the seminars, the Stakeholder Focus Group felt that opposition to the MWP proposal was most likely based on a fear of a potential loss of income and that a family's position would most likely depend on their personal circumstances.

They felt that families were more likely to be against the proposal if:

- family income was lower,
- the type of disability fell into certain categories notably intellectual disability, and
- the disability was more severe.

This feeling about the proposal could be less strong depending on the capacity of the 16-18 year old to make good decisions with payments received. In relation to this, a discussion with third-level students with disabilities from Trinity College Dublin concluded that the current situation should remain unchanged.

The Stakeholder Focus Group noted that for many families the payments – DCA or DA – met costs for services associated with the disability and to consider them only as income supports was not appropriate in many cases. Such costs include speech and language therapy or occupational therapy.

Based on the views expressed **by families and the assurance that the proposal was not intended as a way to reduce funding, the Stakeholder Focus Group said that if the proposed changes were implemented, Government should make up for loss of income for those families. They identified a number** of ways this could be done.

Ways to make up for loss of income

- Examine the need for an arrangement to cover the loss of income as part of a wider discussion and analysis of the cost of disability.
- Design and introduce a support payment for 16-18 year olds which would achieve the broader MWP objective while maintaining continuity of income.
- Introducing ‘a transitional arrangement for the DCA payment for the years 16-18 to address potential loss of income (in effect raise DCA to a higher rate to take out the financial loss for that group).’

The Stakeholder Focus Group’s role

The Stakeholder Focus Group did not see identifying a preferred approach or doing the technical work around costing these approaches as part of its role. However, it suggested that each approach be evaluated against a number of headings to make sure the best approach was taken.

The Stakeholder Focus Group also noted that many who took part in the consultation process called for a **risk assessment** of any change, including looking at unintended consequences with regard to secondary benefits such as the medical card.

More generally, the Stakeholder Focus Group looked at how changing (reconfiguring) the payment was linked with early engagement and employment. In this context, they felt that disability payments should be seen and designed as **in-work support payments** rather than purely as income support (assuming little income from employment).

3.2 Next steps – changing DA

The Stakeholder Group identified steps to change (reconfigure) the DA. These can be thought of in terms of three main steps.

Step 1: Carry out an impact assessment on the potential effect of proposed changes

Even though the consultation process identified a broad mandate (authority or order) for change, the Stakeholder Focus Group agreed that, given the degree of sharp division in views, the Government should first do an impact assessment on the potential effect on families of proposed changes to the DA scheme. The impact assessment should examine:

- the loss of income for different household types;
- access to secondary benefits like the medical card; and
- how the proposed changes might affect DA recipients with reduced decision-making capacity about their financial affairs.

Step 2: Find ways to avoid potential losses for some families

The Stakeholder Focus Group said that Government should consider ways to avoid potential losses for families and people with disabilities. These could include the three approaches identified earlier ([see page 39](#)).

1. Within a larger discussion and analysis of the cost of disability, build in the need for an arrangement to replace any lost income.

This proposal would include looking at the cost of a disability that:

- varies by person, and
- can be covered by existing State or other supports (for example, the medical card).

2. Design and introduce a **transitional support payment** for the years 16-18.

This proposal would achieve the broader MWP objective and make sure that PwD would have a regular income with no gaps. If the age for receiving a disability allowance is raised to 18 (currently 16) a new support payment be introduced for those in the 16-18 bracket that have significant support needs.

3. Introduce a **transitional arrangement for the DCA payment** for the years 16-18 to deal with potential loss of income.

This proposal would increase the rate of the DCA (a payment to parents/guardians). This would maintain income levels for families that would otherwise have their income reduced.

The Stakeholder Focus Group said the advantages and disadvantages of each option should be laid out clearly under various headings such as:

- practicality of implementation,
- fairness,
- value for money, and
- contribution to long-term outcomes, and so on.

Step 3: Government to address view that the proposed recommendation was a 'cut' in resources

The Group also said that the Government should address, in its communications, the perception that the proposed recommendation was a "cut" in resources for families (up to €10,000 a year in some cases) rather than a proposal about spending the same amount of money in a better way. This perception/concern was frequently raised during the consultation.

4

Part 4

Early Engagement (MWP recommendations 9b and 10)

This part of the report tells you about early engagement in terms of:

- findings from the consultation strands,
- other relevant MWP recommendations,
- next steps – early engagement.

4.1 Findings from consultation strands

This section gives a summary of the views expressed as part of the national consultation process through its three main consultation strands:

- findings from written submissions;
- findings from the four regional seminars (as well as a focus group with students); and
- findings from questionnaire responses (while findings are not statistically representative they are valuable).

As part of the preparatory phase, the Stakeholder Focus Group agreed a set of **six underlying principles underpinning early engagement**. These were used extensively in the material provided to participants:

1. Engagement will be voluntary

You can choose not to use the service if you think it is not right for you. This would not affect your entitlement to a payment.

2. Engagement will encourage new recipients of disability income support payments to use the Intreo service and support.

If you are awarded a disability income support payment for the first time, we will invite you to attend your local Intreo centre. Here you can discuss your work ambitions and what supports and services you might need to achieve them. The date when this will start has not yet been decided.

3. Engagement will focus on your needs

The process will look at how best to support your education, training and social inclusion needs according to your disability level. If you wish, you will be able to bring a family member or friend with you for support when meeting an Intreo adviser. The Intreo adviser would help you to develop a personal progression plan according to your capacity. The plan might include education or training, or it might look at other ways to help improve your long-term work prospects.

4. Engagement will be effectively resourced

Intreo service staff and supporting organisations will receive training in disability awareness and have access to information about suitable services and supports to help you find suitable employment. There would be regular reviews of progress towards your employment goals.

5. Engagement will be joined up

There will be agreements between Intreo and other service providers to make sure that engagement is as seamless as possible. This will help you to achieve your employment ambitions.

6. Engagement will address barriers to work faced by people with disabilities

These may be barriers within the welfare system itself or in the wider workplace and society.

4.1.1. Findings from written submissions

Most submissions welcomed the principle of early engagement but with a number of requirements including:

- providing a clearer definition of what is meant by early engagement and how it will work in practice;
- strengthening the capacity of the Intreo service to address the needs of people with a disability and providing evidence of this; and
- making sure that the principle of voluntary engagement is maintained.

A number of submissions outlined the wider context of rights against which any decisions should be assessed.

They identified:

- Article 28 concerning 'Adequate Standard of Living and Social Protection' and Article 27 concerning the right to 'Work and Employment' of the United Nations Convention on the Rights of People with Disabilities (UNCRPD); and
- public sector duty requirements provided for by section 42 of the Irish Human Rights and Equality Commission Act, 2014: advocating (publically support or recommend) that people for whom work is not an option should be supported to live life as they choose.

One submission observed that the principle of voluntary engagement should be underpinned by legislation.

Another observed that a charter setting out the services that jobseekers with a disability can expect is needed before the changes are implemented.

4.1.2 Findings from regional seminars

Feedback from the regional seminars on early engagement helps us draw four main conclusions.

1. Introduction of six principles welcomed

The six principles capture what is required of, and expected from, a process of early engagement. While there was lots of feedback on the individual principles and there was difficulty in ranking them, there were no significant gaps identified in the principles themselves. An additional principle is not needed.

2. Six principles not reflected in people's lives

People with disabilities and their parents or guardians affirmed the importance and validity of the six principles, but highlighted the lack of these principles in their everyday lives. This lack was identified in relation to employment but also in other services and supports that do not accurately or adequately respond to their multiple and complex needs. For instance, people with disabilities face significant and persistent barriers when trying to access services and supports which are inadequately resourced. They also experience a lack of 'joined-up' thinking and practice among the various departments and agencies which affect their lives.

3. Some concern if early engagement will work

For the early engagement process to meet the expectations of people with disabilities and for them to be confident in it, it must:

- meet and address their needs; and
- address the barriers to employment they face.

4. Welcome shift in role with some concerns as to readiness

There are high levels of support for a proactive early engagement process by the Department of Employment Affairs and Social Protection (DEASP) through its Intreo centres – local centres that offer practical, tailored employment services and supports for jobseekers and employers.

The shift in role for the DEASP in relation to people with disabilities is seen as significant in that it is moving from managing benefits to supporting and resourcing people to find work.

Many people are unaware of Intreo and the services it provides. There were also concerns expressed about whether or not staff in the Intreo centres are sufficiently skilled and experienced to work successfully with people with disabilities.

What students with disabilities think of Intreo's role

As mentioned earlier, in May 2018, the facilitator held a separate meeting with students on the Trinity Centre for People with Intellectual Disabilities course in Arts, Science and Inclusive Applied Practice.

The students agreed that people with disabilities should be invited into an Intreo centre to discuss their work ambitions and to get support in accessing suitable work. However, they expressed three main concerns:

1. Some concern about the sensitivity, and awareness, of Intreo staff

Would the staff in Intreo be sensitive to their disability and appreciate the complexities of their situation? For example, the volume of sound, the atmosphere, the amount of activity and physical appearance of the offices might be very challenging for someone with autism.

2. Fear that DA payment might be at risk

Although the meeting with Intreo is 'voluntary', there was suspicion that in some way it might be connected to their DA payment and if they declined the visit, their payment would be at risk.

3. Other issues with getting DA a concern

Students asked if PwD took up paid employment and later wanted to reapply for DA, would they experience a delay or difficulty in getting back on DA. They also asked if PwD would lose important secondary benefits such as the medical card and free travel.

4.1.3. Findings from questionnaires

There were 2,145 responses to the questionnaire which had 13 questions. Most people answered all the questions, but we tell you how many people filled in answers to each of the question areas listed below. To see the questionnaires we used, please see **Appendix D** on the gov.ie site.

Personal information

Q1 (about who responded)

All 2,145 participants answered this first question about who they are. This is really helpful to us. Here is who they said they were:

- Parent or family member of a person with a disability – most people (92%)
- Some 112 participants (about 5%) identified themselves as a person with a disability
- Other category.

What respondents with disabilities told us

(Questions and answers for questions 2 to 5 inclusive)

Q2 (nature of disability)

A total of 78 people with a disability responded to this question about the nature of their disability with some choosing more than one category. The breakdown is shown in the following table in order of the most commonly defined disability types. As you can see, the disability mentioned most by 26 participants (33%) was a difficulty with pain, breathing, or other chronic illness or condition.

Answer choices	Responses (%) and number	
A difficulty with pain, breathing, or any other chronic illness or condition	33%	26
A difficulty with learning, remembering or concentrating	24%	19
Blindness or a severe vision impairment	23%	18
A psychological, mental health or emotional difficulty	22%	17
Autism	21%	16
An intellectual disability	18%	14
A difficulty with basic physical activities, for example, washing, dressing, climbing stairs, going to the toilet	18%	14
Deafness or a severe hearing impairment	6%	5
	Answered	78

Q3 (education – highest level)

In relation to education, participants with disabilities described their education as follows:

- 40 (50%) had qualifications at certificate, diploma or degree level,
- 28 (35%) had a junior or leaving cert, and
- 10 (13%) had no formal qualifications.

Q4 (current work status)

In relation to work, participants with disabilities described their work status as follows:

- Some (25%) were in full-time, part-time or voluntary work
- Another (20%) were looking for work
- A further (29%) were not looking for work at the time.

Q5 (If not working, what are you doing - training)

Of the 23 participants who were not looking for work, they were in education or training as follows:

- One in three (33%) of them was in education, and
- 12 people (15%) were in either day services or in rehabilitative training.

What parents, guardians and other participants told us.

Work ambitions and your views on how to achieve them. The following questions were asked of all people completing the survey. This included people with disabilities, family members, carers, supports or advocates.

Q6 (concerns about what might be hard for a person with a disability to get work)

The top two factors identified as making it hard for a person with a disability were:

1. the lack of a supportive workplace
2. the lack of suitable work

The lack of help in getting a job, of suitable education or training courses was also seen as significant.

Other concerns included transport and entitlements being affected.

Q7 (benefits of work)

Participants identified the main benefits of taking up work as:

- greater independence and self-confidence,
- more social contact with colleagues,
- being better off financially, and
- earning one's own income.

Q8 (supports needed)

Families said the most important factors in overcoming barriers to work were a supportive workplace and help in finding work. Information about what work was available and the effect on benefits was also highlighted. Families also mentioned the need for better transport as a required support.

Role of Intreo service

Q9 (How could the Intreo service best help you (or someone with a disability) – ranking of six principles)

This question asked respondents to rank the six principles of early engagement (see pages 44 and 45). They said the most important factor was the presence of trained and experienced staff in the Intreo service.

Having a flexible person-centred approach and contacts with other organisations were also seen as important.

Q10 (experience of using Intreo service as a person with a disability)

Most respondents – 60% – had never heard of Intreo, and only 3% of respondents had used the Intreo service for help in finding work and found it useful.

Q11 (benefits of early engagement)

Almost two-thirds of respondents (65%) thought that early engagement could help achieve work ambitions. However, nearly 10% disagreed with this.

(A similar breakdown was seen among people with disabilities although more had reservations: 32 respondents (56%) thought early engagement would help them while 10 respondents (18%) did not.)

Q12 (invitation to meet Intreo adviser)

Some 73% agreed that a person on a disability payment should be invited to meet an adviser at their local Intreo service, but almost 12% disagreed. This breakdown was also seen among people with a disability.

Q13 (ranking of Intreo services and supports in terms of most important)

Respondents were asked to rank Intreo services, which include information about educational and training opportunities, types of work opportunities, and available supports. Respondents said all three were important.

4.1.4 Combined findings

The Stakeholder Focus Group agreed with the findings, but said it was important that the implementation of an early engagement approach should be accompanied by the following actions:

- Provide training for Intreo staff in disability awareness and engagement.
- Enshrine the six principles in the way the DEASP/Intreo work with people with disabilities.
- Make sure the engagement is person-centred.
- Develop an information and communications strategy to support early engagement.
- Put in place protocols (rules) with other service providers. For example, there could be an agreement that local education and training boards would refer PwD interested in work to Intreo centres.

4.2 Other relevant MWP recommendations

The Stakeholder Focus Group reviewed a range of other MWP recommendations. They felt if DEASP puts these recommendations in place, they would contribute to effective implementation of the early engagement process. These are shown in the following table which is taken directly from the MWP report.

Table 3: Make Work Pay Recommendations

		The due date
11	Offer case officer support and other supports to people with disabilities through the Intreo service at the earliest possible opportunity, and work with them to develop a personal progression plan.	Q4-2018
13	Develop a basic ready reckoner to enable people with disabilities to calculate the likely net monetary value of taking up or going back to work. This would cover basic tax and welfare entitlements, and indicate whether the person would be eligible on income grounds for a Medical Card.	Q2-2018
14	<p>Develop a proactive and ongoing strategy to communicate clear, simple and accurate information in a user-friendly way on what benefits people with disabilities will keep if they are in employment. This strategy should include the following steps:</p> <p>Provide clear information on the website of the Department of Social Protection as the lead Department in this area, with cross-links to relevant information from other Departments (e.g. on Medical Card entitlement) and to www.citizensinformation.ie. Include information on fast-track return to benefits.</p> <p>Develop dedicated information on www.citizensinformation.ie and on the microsite www.gettingbacktowork.ie around employment for people with disabilities and associated benefits that would be retained.</p> <p>Provide for the information to be available in accessible formats as required, such as Easy to Read, and a signed video with subtitles.</p> <p>Provide training for Citizens Information Centres in the operation of the Ready Reckoner, and how to build on this to provide a more personalised individual assessment of a wider range of benefits in more complex circumstances.</p>	Q1-2019

Offer case officer support and other supports to people with disabilities through the Intreo service at the earliest possible opportunity, and work with them to develop a personal progression plan.

Ensure front-line staff in Intreo Offices are trained to know how to access the relevant information, how to operate the Ready Reckoner, and how to refer a client to the local Citizens Information Centre for assistance with a more detailed financial and benefits assessment of complex circumstances.

Agree formal referral paths from Intreo Offices to local Citizens Information Centres or the Citizens Information Phone Service. Develop information leaflets/messages targeted at people leaving long-term disability payments to enter a job.

Develop some simple clear messaging around 'It pays to work'.

15 Extend inter-agency protocols, where relevant, to include referral of people with disabilities to authoritative sources of information and guidance on the financial and other aspects of employment.

Q1-2019

16 Develop and strengthen the capacity of the Department of Social Protection Intreo Service to support people with disabilities to get and maintain employment by:

Q1-2019

- Designating Intreo as the first point of contact for people with disabilities interested in work.
- Developing the Intreo Service as a welcoming and supportive environment for people with disabilities, with a personalised approach to each case.
- Facilitating the attendance of a family member, friend or advocate to support the person with a disability throughout the engagement, if the person desires.
- Training Intreo Service case officers and other front-line staff to work with people with disabilities, to identify their needs, and support them to fulfil their employment ambitions, in accordance with their capacity.
- Designating named case officers at Intreo Centres to support people with disabilities interested in taking up work.
- Provision by the Intreo Service of a continuum of support to the person with disability as they transition into work.

17	Develop a suite of protocols with the range of State-funded Disability Service Providers to work in partnership with Intreo offices to advance common objectives, and support people with disabilities to fulfil their employment ambitions, in accordance with their capacity.	Q1-2019
18	At local level, review and revise existing protocols and service level agreements with State service providers (including HSE offices, Education and Training Boards, EmployAbility, Local Enterprise Offices, Local Employment Services, Job Clubs, Community Resource Centres) to reflect the opportunities now available at Intreo Offices.	Q1-2019
20	Formally proof all new schemes or reforms at design stage to minimise complexity, and ensure that a person with a disability, who is interested in work, is supported and is not financially disadvantaged by taking up employment.	Q2-2017

4.3 Next steps – early engagement

Develop Intreo as the main way to get employment supports and service

Intreo is a single point of contact for all employment and income supports and is part of the Department of Employment Affairs and Social Protection. It offers practical, tailored employment services and supports to a person looking for a job (a job seeker) and employers.

Intreo should be developed as the primary gateway to employment supports and services as part of a wider process of early engagement. This should start with the Stakeholder group identified in MWP Recommendation 9b and extend to other groups over time (in line with MWP Recommendation 10):

Make sure Intreo staff know how to work with people with disabilities

Intreo staff must receive appropriate disability training and develop competency in working with people with disabilities.

Use existing good practice to develop early engagement

The Intreo engagement model should be developed incrementally, building on work done as part of the Midlands pilot project on early engagement.

Develop a charter of early engagement

DEASP and Intreo should develop an “early engagement” charter (a document) outlining the services and approach that a person with a disability can expect from Intreo case officers. This charter should take into account the following four points:

- **Focus on the PwD**

The early engagement approach must be centred around the person with a disability and their needs. All Intreo centres should follow the same approach. The person with a disability should have the right to change their case officer.

- **Develop work experience internships**

DEASP should develop work experience programmes with employers.

- **Continue to consult to develop early engagement**

There should be continued consultation with the disability sector through the Disability Consultative Forum and other avenues to develop the model for early engagement.

- **Develop interagency working**

The DEASP/Intreo should develop local networks and protocols (agreed ways of working together) for interagency working. This would help promote working between, for example, local education and training boards and Intreo.

5

Part 5

Other issues brought up in consultation

This part of the report tells you about other issues in terms of:

- context, findings from consultation strands, relevant MWP recommendations,
- next steps – relevance of other actions.

5.1 Context

As part of the consultation around MWP recommendations 9 and 10, a range of other issues were identified. These were not directly linked with the recommendations, but were identified as part of the broader objective of improving overall social and employment outcomes for people with a disability.

5.2 Findings from consultation strands

This section is a summary of the other issues highlighted in the written consultations and at regional seminars.

5.2.1 Findings from written submissions

The main issues from written submissions were as follows:

- Critical to keep adequate health supports and access to day services
- Need to focus on capacity and generating expectations
- Provide courses at accessible levels
- Need transport to access opportunities
- Enhanced role for employers
- Need for more research

Let's look at each of these in turn.

Critical to keep adequate health supports and access to day services

The importance of keeping the Medical Card is critical. A number of submissions called for the full implementation of recommendation 1 of the Make Work Pay report before any changes are made to the structure of payments. Recommendation 1 deals with changing disability payments and supports to make sure work pays.

People with disabilities should have access to day care services to explore their employment ambitions. Some people with a disability may need the support of a personal assistant to do this.

Need to focus on capacity and generating expectations

A focus on capacity and generating expectations for people with disabilities was identified as an area where the education sector, from early childhood through to third level, plays an important role. Some submissions identified a lack of career guidance particularly in special schools as a major barrier to promoting a culture of participation in work. One submission recommended exploring a range of post-school options, not just HSE-funded options. This submission also advocated developing models of early engagement to be mainstreamed in Intreo offices.

Provide courses at accessible levels

SOLAS and the Education and Training Boards need to develop accessible courses for people with disabilities. One submission stressed that the proposed changes will cause difficulties for children under 18 who have been excluded from school due to anxiety and who do not get enough hours of home tuition.

Need transport to access opportunities

Most submissions highlighted the importance of transport as vital so that people with disabilities in rural areas who cannot use public transport can access appropriate training, education and work opportunities.

Enhanced role for employers

Work for people with disabilities must be meaningful. Some submissions called for a commitment to review obligations around reasonable accommodation in the workplace before implementing any changes to engagement with 18 to 22 year old young people with disabilities.

Need for more research

More research is needed on the extent to which people with disabilities will be better off in work. A Cost of Disability Commission should be set up to report on the extra cost of living with a disability, including for young people aged 16-18.

One submission suggested that DEASP should publish data on the numbers of children on DCA and review the application process for Disability Allowance before making the proposed changes.

5.2.2 Findings from regional seminars

At the regional seminars, participants emphasised the need for the early engagement process to be **'joined up'**, particularly in relation to:

- the Department of Health,
- the Department of Education and Skills,
- the Health Service Executive (HSE), and
- the HSE's New Directions policy (a policy that looks at personal supports for people with disabilities).

More collaborative working

Too many agencies in Ireland, including voluntary charities and the HSE, are doing the same thing. Sometimes, this means that nobody provides employment supports, so people then fall through the cracks. Agencies should work together to avoid duplication of services.

Timing of the early engagement process

The early engagement process should only happen when:

- other supports are in place (supported employment, job experience, and so on);
- the Department of Education and Skills has created a transition-to-work plan for every young person with a disability and career guidance for young people with a disability is available;
- all relevant supports and services are in place; and
- there is a strategy for getting extra jobs for people with disabilities.

Information campaign needed before changes introduced

There needs to be a proactive information and communications campaign well before any changes are introduced. This will ensure that people with disabilities, their parents or guardians and service delivery organisations know and understand the implications of the changes.

Some concerns

- Some people expressed concern that the Government might reverse the early engagement policy, as the following comments show:
 - “If a decision is made on change, this cannot be undone by future government.”
 - “2 years is ideal – government changes every 4-5 years. So a change of gov(ernment) could disrupt transition from one scheme to another.”
- Others felt more consultation is needed before finalising the decision to introduce any changes to disability payments:
 - “More dialogue ... is needed before making any decisions.”
 - “If it’s to change we need another step in the process. Parents should be consulted around what training and supports children need to get them in employment.”

Clarity about continued access to important benefits

There needs to be clarity about whether or not there will be continued access to secondary benefits if DCA is to be paid until age 18. For example, medical cards and transport supports are currently available to DA recipients at age 16.

5.2.3 Combined findings

The Stakeholder Focus Group met on 6 June 2018 and concluded that:

- Issues identified (beyond the immediate scope of early engagement and scheme reconfiguration) are important enablers of changes to these arrangements. These issues should be addressed alongside the proposed recommendations.
- Many of these issues are contained within the National Disability Inclusion Strategy 2017-2021, CES and MWP actions. However, they are not being delivered quickly enough, and there is a lack of focus on monitoring and implementation. In particular, there is concern that the slow progress in key areas of education and healthcare will increase the risk that DEASP commitments under MWP and the CES will not be delivered.
- To improve implementation, better communications at national, regional and local levels is needed.
- Existing mechanisms could be used to monitor effective implementation of actions. For example, the Comprehensive Employment Strategy Implementation Group oversees how aspects of services for people with disabilities are developed. This group is made up of government departments and disability stakeholder representatives.

5.3 Relevant MWP recommendations

The Stakeholder Focus Group noted a range of actions in the MWP report which covered the wider issues outlined in 5.2. The table below is taken directly from the report.

Table 4: MWP recommendations related to wider issues identified during consultation

		Lead	The due date
1	Raise the Medical Card earnings disregard ¹ from its current level of €120 per week for people on Disability Allowance or on Partial Capacity Benefit associated with Invalidity Pension.	DoH/HSE	Q4-2018
2a	Dispense with the requirement that work be of a 'rehabilitative nature' for medical card earnings disregard purposes.	DoH/HSE	Q4-2017
3	Develop and bring forward proposals to address access to or affordability of necessary aids/appliances/assistive technology.	DJE	Q4-2018
5	Undertake a review of transport supports encompassing all Government funded transport and mobility schemes for people with disabilities, and to make proposals for development of a coordinated plan for such provision.	DJE	Q4-2017
6	The Transport Support Scheme currently being developed by the Department of Health should seek to avoid creating financial barriers for people with disabilities who will be eligible under that scheme and who wish to access employment supports or further their employment ambitions.	DoH	Q4-2017
7a	Put in place and promote a system for fast-track reinstatement of the medical card for people with disabilities who have lost it on return to work, and have subsequently had to leave their job within one year.	DoH	Q1-2018
24	Incorporate an annual review of delivery of actions recommended in this Report and the outcomes achieved in the reviews of progress under the Comprehensive Employment Strategy for People with Disabilities 2015-2024.	DJE	Q4-2017

Abbreviations explained: DoH – Department of Health; DJE – Department of Justice; HSE – Health service Executive

¹An earnings disregard is the amount of money which you can earn that is not assessed as part of a means test.

5.4 Next steps – relevance of other actions

The Stakeholder Focus Group reviewed the next steps that need to be taken during its meeting on 6 June, 2018.

The Stakeholder Focus Group recommended that the structure of senior officials' groups, interdepartmental committees and Cabinet subcommittees be used to:

- highlight that actions are interdependent, and
- make the process more accountable.

As the DEASP role is to provide employment supports and services for people with disabilities, the Stakeholder Focus Group felt the DEASP should use its position as an advocate to address blockages elsewhere in the system.

Appendix A

Stakeholder Focus Group – Terms of Reference and Membership

Terms of Reference

- To develop, with the Department, a shared understanding of the possibilities of the principle of 'early intervention' for people with disabilities; an appreciation of the multiple and complex perspectives and challenges involved in advancing MWP Recommendations 9 and 10; and co-creating an approach to a wider consultation process with disability stakeholders.
- To agree on the format of the wider consultation process; design the format of the consultation process to ensure that it is as inclusive as possible; and to consider the substance of MWP Recommendations 9 and 10 so as to develop material for dissemination and consideration by the wider stakeholder group.
- To explore and consider the findings from the wider consultation process and agree a set of 'next steps' for the Department and other stakeholders for advancing the principle of 'early intervention'.

Membership

Name

Adam Harris
Brendan Lennon
Brian Hayes
Catherine Kelly
Christy Grogan

Ciaran Diamond (replaced by Paul Hill)

Dan Power

Declan Tanham
Derval McDonagh
Gary Owens
Geraldine Graydon
Gerard Byrne (replaced by Niamh Connolly)
Helen Faughnan (replaced by Simonetta Ryan)

Joan Carthy
Joan O'Donnell
John Bohan

John Dunne
Kate Mitchell
Lorraine Dempsey
Louise Carey
Marion E. Wilkinson
Mark O'Connor
Michael Gogarty
Naoise Cunningham
Paul Hill

Professor Michael Shevlin
Michelle Conroy

Ruth Gilhool
Teresa Mallon
Valerie Maher

Nominated by

As I Am
Deaf Hear
National Platform of Self-Advocates
Walk
Department of Employment Affairs and Social Protection
Department of Employment Affairs and Social Protection
Department of Employment Affairs and Social Protection
EmployAbility service
Cope Foundation
Down Syndrome Ireland
AsFAn (Autism Spectrum Family Advocacy Network)
National Council for the Blind of Ireland
Department of Employment Affairs and Social Protection
Irish Wheelchair Association
Disability Federation of Ireland
Department of Employment Affairs and Social Protection
Family Carers Ireland
Mental Health Reform
Special Needs Parents Association
Headway
National Disability Authority
Inclusion Ireland
Independent Disability Consultant
Centre for Independent Living
Department of Employment Affairs and Social Protection
School of Education, TCD
Department of Employment Affairs and Social Protection
DCA Warriors
St John of God Services
One Family

During the consultation, one of the members of the Stakeholder Focus Group, Mr. Gerard Byrne nominated by NCBI, sadly passed away. The Stakeholder Focus Group wish to both acknowledge his contribution to the consultation process and to extend its sincerest sympathy to both Gerard's family and colleagues.

The following documents are available online at gov.ie

Results from online questionnaire – **Appendix B**

Results from regional seminars – **Appendix C**

Consultation documents – **Appendix D**

