



Making lives better – Booklet 4

The work, health and disability green paper

Health and high quality care for everyone

Tell us what you think

October 2016



Easy Read



Department
of Health



Department
for Work &
Pensions

Important

This is one of 4 booklets about the work, health and disability green paper. This is booklet 4. There are 3 other booklets that we would like you to read.

- What we want to do
- Helping people into work and support for people with health conditions.
- Helping employers get new workers and healthy workplaces.

Each of these 4 booklets will have some questions that we would like you to answer.

Green writing

In this easy-read booklet we sometimes explain what words mean.

The first time we mention any of these words, it is in **bold green** writing. Then we write what the words mean in a blue box. If any of the words are used later in the booklet, we show them in **normal green** writing.

These words and what they mean are also in a Word list at the back of the booklet.

Contents

Health and high quality care for everyone.....	4
Giving people more control over their health.....	5
Having better talks about fitness for work and fit notes.....	5
Mental health and muscle and bone services.....	7
Making work and health services for individual people....	9
Local health and employment support.....	11
Sharing information.....	11
Work is good for people’s health.....	12
Patients as partners.....	12
The questions.....	13
What happens next.....	16
Word list.....	17

Health and high quality care for everyone

We want people to get the right health and care support, in the right place, at the right time. This will let them get the most out of their job and keep them healthy.

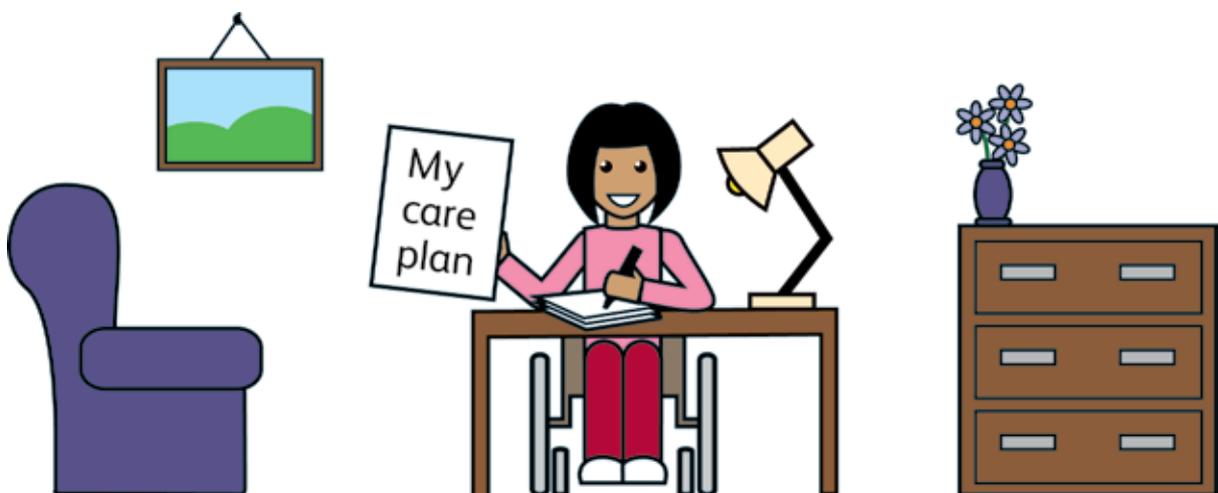
We want this care and support to start with the person and to meet their health needs and help them to get work and stay in it.

We know that services do not always work well together. This can make people angry and they can miss out on support.

We want everyone to work together, to stay as healthy as possible and to stop ill health. This includes **patients**. We want **patients** to be able to look after their own care.

Patient

This is a person who can get or is getting medical treatment.



Giving people more control over their health

If someone is working and has health problems, their workplace can support them.

This means it is more likely that the person will stay in their job. This is good for both the person's money and their health.

Having better talks about fitness for work and fit notes

Doctors can work out if a person is fit to work.

Doctors can also see if there is any support that will let the person stay in work, like slowly going back to full-time work, or having **reasonable adjustments** made to the workplace.

Reasonable adjustments

This is when a change is made to a building, a work area or to the way something is done. The change makes it easier for a disabled person to do their job, or for a disabled customer to get better services.

The fit note was made to get doctors and their **patients** to talk about work and health.

The fit note can be important in helping a person look after their condition, stay in work or go back to work. It can also get a doctor to send the person to the **Fit for Work service**.

Fit for Work service

This service gives all kinds of advice and support. For example, health services and advice about money, housing and help to stay in work.

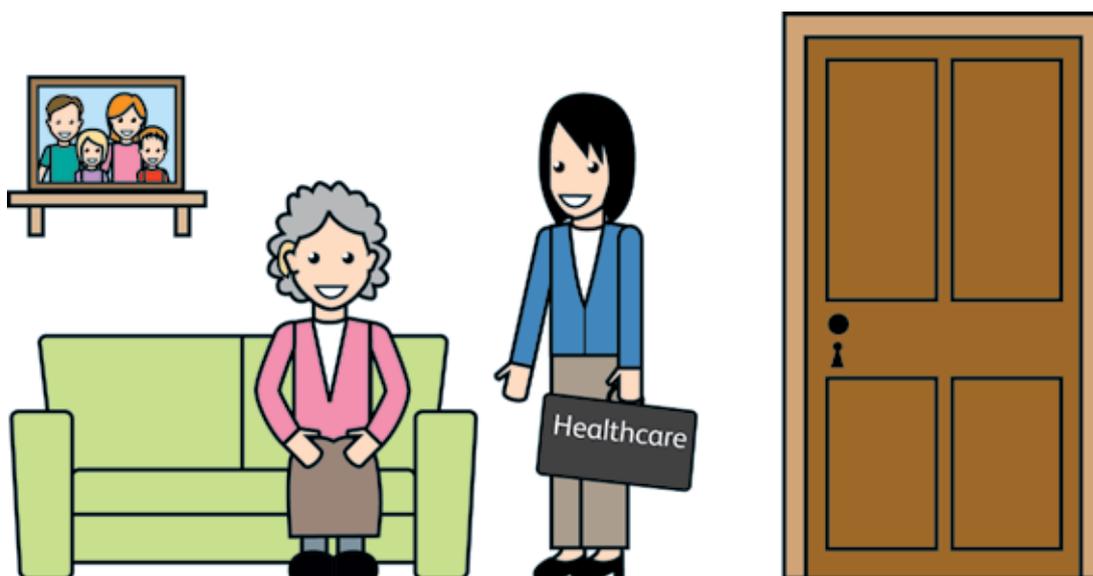
At the moment the fit note does not always do what it is supposed to do.

In a lot of cases the decisions that are made do not show that a person can work if they have the right support.

We want a system where people get these things.

- The support they need to understand their health condition.
- The treatment they need.

We also want **employers** to get information that can help them to support their workers



We want to help healthcare professionals to do these things.

- They have the right skills and know about health and work.
- They understand that work is important for health.
- They use fit notes well.
- They use the **Fit for Work service**.

We are going to look at how fit notes work. Then we will look at whether we should let more healthcare professionals, as well as doctors, issue fit notes to people.

Mental health and muscle and bone services

Too many people with common mental health conditions, like anxiety or depression, stop work.

And too many people with common muscle and bone conditions, like back pain or arthritis, stop work.

Too often people with common conditions cannot get the services to help them when they are needed.

Many of these people end up getting sickness benefits and never go back to work.

The **Improving Access to Psychological Therapies** programme helps more people use the services for common mental health conditions. We are going to make this programme bigger so that more people can use it.

Improving Access to Psychological Therapies programme

This programme helps people with mental health conditions get the right treatment.

We are going to look at new ways of using muscle and bone services, called musculoskeletal services.

We will link help and support for work more closely with treatment. We will also make it easier to send people to the service.

We will collect information about **patients** with muscle and bone problems more often.

Making work and health services for individual people

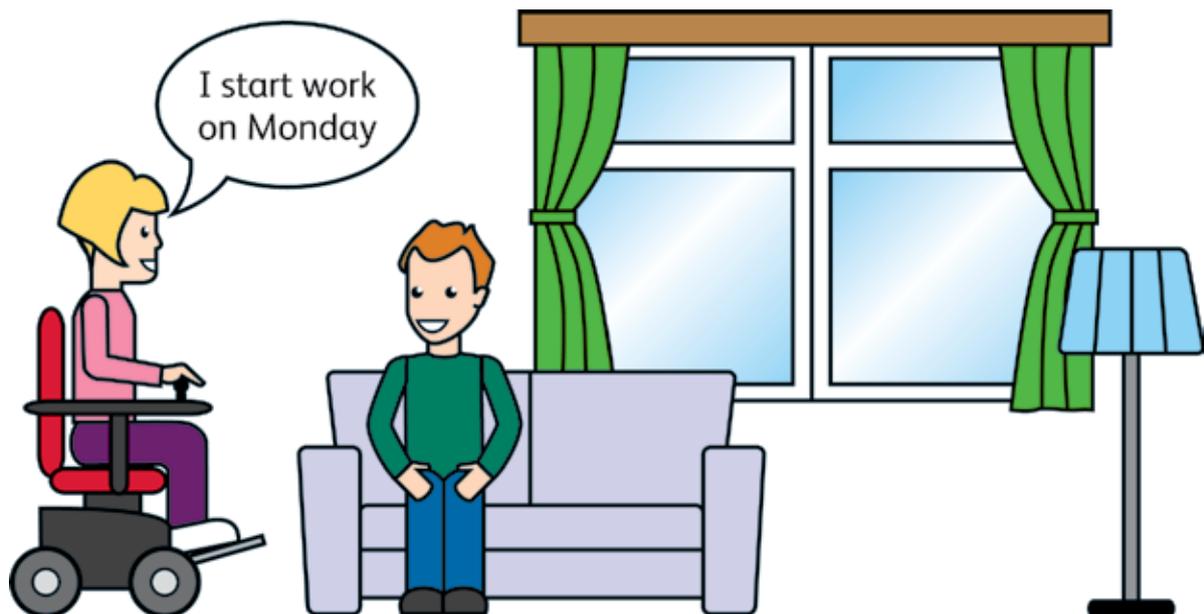
Occupational health services and **vocational rehabilitation services** keep people healthy and safe in work. They also manage risks in the workplace that may cause ill health.

Occupational health services

These are teams of people that keep workers well at work. They will help to keep workers healthy and safe while dealing with any risks in the workplace that may make people ill

Vocational rehabilitation services

Vocational rehabilitation lets people with both mental health conditions and physical conditions overcome the **barriers** to starting a job, staying in work or going back to work.



Barriers

These are things that stop disabled people living like other people. For example, the ways other people think and act towards disabled people.

At the moment these services do not work together and they are not easy to use. Also, these services are not made for each person taking account of their needs.

Only some **employers** give people occupational health support.

Employer / Employers

These are people you work for if you have a job.

Many health professionals do not know enough about occupational health.

We want **occupational health services** to meet the different needs of people. Whether they are off sick from work, out of work, or self-employed.

We want to make some changes to **occupational health services**.

We want everyone who can be sent to **occupational health services** to be sent, unless it would be against the law or it is not right to do so.

We will look at how we can get the **occupational health services** working with the health and social care systems.

Local health and employment support

We want health services and employment services to work together in local areas.

This could mean just one service giving people health and employment support. Or it could mean joining local services together.

Sharing information

Sharing information can help people stay healthy and in work.

We will work with others to collect information about whether people are in work or not.

We will find out how well local areas are helping people to stay healthy and in work.

We will also look at how we can bring together evidence about work and health in one place so people can use it when making new services.



Work is good for people's health

We know that work is good for people's health. We want to make sure that all health and care professionals are able to make this part of their everyday work.

We want to make sure that when health and care professionals are learning their job, they are taught that work is good for people's health.



Patients as partners

Patients and those people who use services should be partners in their care.

We can support this in different ways.

- We can give better information about using the employment and healthcare systems.
- We can give people the chance to send themselves to services.
- We can help people to understand how to look after their conditions better.

The questions

Please answer as many questions as you can. You do not have to answer every question. Some of these questions are for **employers**.

If you cannot answer a question do not worry. Just move on to the next question that you can answer.

Question 1

How can we make sure that when a person is talking to a healthcare professional they look at the work someone can do? Not what they can't do.

This is very important in the early stages of an illness or condition.

Question 2

Are doctors the best people to give information about work and health, decide if someone is fit for work and give out fit notes?

If no, which other healthcare professional should do this?

Question 3

What information should be on the fit note to help support the person to stay in work or go back to work?

Question 4

Does the fit note show all the information that is needed?

Does the fit note meet the needs of its users?

Question 5

How should the way that people with mental health conditions or muscle or bone conditions get services, treatment and support with work change?

We want their health and work needs to be met in the best way possible.

Question 6

How can we help people to easily find information about mental health and muscle and bone conditions?

Question 7

How can **occupational health services** be organised so that everyone can get them and they can be used for everyone?

Question 8

If you have used the **Fit for Work service** please tell us about this and say what you think about it.

Question 9

What would a system that sends people to **occupational health services** and gives them advice look like?

Question 10

We want to use groups of people from businesses, councils and government in the local area.

How can we get these groups to come up with new ideas to make health and the chances of getting a job better?

Question 11

How can we get health services to record whether a person is out of work, off work sick or has a job and is in work?

Question 12

What should we include when looking at the way jobs and health are working in local areas?

Question 13

How can we get people to share information about health and jobs?

Question 14

How should we bring together and share existing evidence so we can learn from it?

What happens next?

When the **consultation** has finished we will look at all the replies.

Consultation

This is when the government asks people what they think about its plans. They also ask people for their ideas about the best way of doing things

Before we decide what to do we will think about how any changes will affect people.

We will then write a report saying what replies we had and what we have decided to do.

Word list

Barriers

These are things that stop disabled people living like other people. For example, the ways other people think and act towards disabled people10

Consultation

This is when the government asks people what they think about its plans. They also ask people for their ideas about the best way of doing things16

Employer / Employers

These are people you work for if you have a job.10

Fit for Work service

This service gives all kinds of advice and support. For example, health services and advice about money, housing and help to stay in work.6

Improving Access to Psychological Therapies programme

This programme helps people with mental health conditions get the right treatment8

Occupational health services

These are teams of people that keep workers well at work. They will help to keep workers healthy and safe while dealing with any risks in the workplace that may make people ill9

Patient

This is a person who can get or is getting medical treatment. .4

Reasonable adjustments

This is when a change is made to a building, a work area or to the way something is done. The change makes it easier for a disabled person to do their job, or for a disabled customer to get better services.5

Vocational rehabilitation services

Vocational rehabilitation lets people with both mental health conditions and physical conditions overcome the **barriers** to starting a job, staying in work or going back to work9

© Crown copyright 2016

You may use the words in this booklet in any way you want to as long as you make sure you use them correctly.

The Open Government Licence covers the use of the words. The only thing you cannot use are the logos.

If you want to know a bit more about the Open Government Licence or if you need some help to understand what we have said, the website which tells you more about the Open Government Licence is

www.nationalarchives.gov.uk/doc/open-government-licence

Or you can write to

The National Archives
Kew
London
TW9 4DU

Or email your questions to psi@nationalarchives.gsi.gov.uk

If you need more of these easy-read reports, please contact us. Our address is shown below. Easy-read reports are free.

If you want to look at the full report written in English, you can see it on our website at www.gov.uk/government/consultations-on-the-pip-assessment-moving-around-activity

A copy of this easy-read report is also on this website.

Copies of the full report can be made available in other formats on request. Our contact details are shown below.

The Work, Health and Disability Consultation,
Ground Floor,
Caxton House,
6-12 Tothill Street,
London,
SW1H 9NA

Email: workandhealth@dwp.gsi.gov.uk

Please contact us if you have any other problems getting the report.

© Crown Copyright 2016

ISBN: 978-1-78425-874-0

Published by the Department for Work and Pensions

October 2016