

# **What's your Experience of the Atos/Work Capability Assessment (WCA)?**

**Survey Responses**



**Disabled People against Cuts (DPAC)**

**[www.dpac.uk.net](http://www.dpac.uk.net)**

**with Black Triangle (BT) and Social Welfare Union  
(SWU)**

**“If I filled a benefit claim form in and deliberately lied, misled with my answers and omitted information / events relevant to my claim with the view to gain financially - I would have my ass hauled into court on charges of benefit fraud. The DWP and ATOS are doing exactly those things with the farce they call an assessment and are both gaining financially by, dare I say, producing fraudulent reports when assessing peoples eligibility for benefit. I suggest people pool together, write statements describing their experience with ATOS and the assessment, highlight the discrepancies between what was said / happened in the assessment and what was written into the report .. and when enough statements are gathered, hand them to the top cop in the country and demand they launch an investigation into the activities of both ATOS and the DWP on the grounds of fraudulent behaviour”.**

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## Introduction

The survey was promoted by Disabled People against Cuts (DPAC), Black Triangle (BT) and Social Welfare Union (SWU). The question construction and analysis were carried out by DPAC.

The survey drew 733 responses. It asks questions that were not specifically asked in the Harrington review on issues of recording, access, doctors input and the influence of the Department for Work and Pensions (DWP) on doctors' responses. As such it represents the first evidence based research report on these issues.

We are aware that some advice organisations used the survey and helped those going to them for advice on the Work Capability Assessment (WCA) to fill the survey in on-line. We thank all those who took the time to fill in the survey and contributed to the increasingly worrying picture of the regime and the processes of the WCA and the conduct of Atos administered work capability assessments.

The survey ran for two months and was mainly focused on recordings of the WCA. The introduction to the survey read:

In an answer to a parliamentary question on Atos from Frank Field (lab) Chris Grayling said:

"Based on the results of a trial during 2011, we have not implemented universal recording for claimants going through the work capability assessment (WCA).

We have asked Atos Healthcare to accommodate requests for audio recording, where a claimant makes a request in advance of their assessment. This approach began in late 2011 and we will monitor take up during 2012 before making a decision on the requirement for recording assessments, taking into account factors such as value for money and the value it adds to the WCA process. As part of this process we are also reviewing Atos capacity to provide recordings for those claimants who currently request one".

We at Disabled People against Cuts (DPAC), Black Triangle and Social Welfare Union (SWU) want to make sure that we gather the REAL facts on what people are experiencing. We suspect that the government will try to pull the option for recordings of WCA completely due to what they will say is a lack of demand, so we have put together a short survey to gather information on the demand for recordings and on other issues on the WCA.

The survey responses contribute to a growing list of criticisms on the experiences of the WCA, welfare reform/cuts and their impacts on the lives of disabled people. It also adds to the growing list of criticism against Atos the company contracted by the

Government to carry out assessments, at the cost of 1.10 million pounds per year. Significant concerns are being raised on the financial cost of appeals against Atos WCA decisions, currently running at 60-80 million per year<sup>1</sup>, but it is the human cost of suicides and premature deaths rising from 32 per week to 73<sup>2</sup> a week of those undergoing this process that represents a larger cost. It is a UK outrage that these assessments continue.

The survey responses show the tricks, barriers and bullying tactics used to prevent audio recordings. How difficult home assessments are and how centres, access and travel are made problematic and the ways that doctors input is being ignored and appears to be increasingly directed by the Department for Work and Pensions. The survey is a collection of the ways people are being driven to crisis point, and worse by a system with no clear public accountability.

Some of the problems of the assessments could be overcome by recording the WCA, but there has been a clear reluctance to supply enough machines for this and a clear rejection of the principle of a fair assessment- much of the money spent on appeals could be saved if recording was put in place.

However, DPAC, Black Triangle, and Social Welfare Union, along with the British Medical Association and a growing number of organisations and MPs condemn the WCA and call for its immediate end. We hope the contents of this report will help those who fail to understand why these calls are being made to begin to understand why this is the only justifiable option.

## **Background**

The survey was an on-line survey; however printed copies of the survey in different formats were also prepared and posted out when requested with return post paid. The 733 responses were from disabled people, carers, personal assistants and advice organisations.

One person completed the survey on behalf of an individual who had died waiting for the outcome of an appeal to reverse his 'fit for work' decision made by Atos, others said in the survey that they were suicidal or on the verge of losing their homes, many were left without income and many stated that they could not face further appeals. Yet, a clear theme throughout was the tenacity of individuals who viewed the WCA assessments as a war like situation for their survival.

The survey had an almost equal balance of men and women filling it in with women at 50.7%. The majority filling in the survey were disabled people at 91% with the remainder being personal assistants or allies. The largest age group were those between 40 -59 with the smallest those over 60. The largest group described themselves as having physical impairments (56.8%) followed by those describing themselves as having mental health issues (54.4%) the third largest group were those who said they had multiple impairments (35.8%) with the remainder being those with sensory impairments (9.8%) and those with learning difficulties (4.7%).

There was no clear geographical mapping regarding region, but there was a UK response in that responses came from Wales, England, Scotland and Northern Ireland.

## Summary

- ▼ 98.4% said that they would prefer the WCA to be recorded
- ▼ 98.5% unsurprisingly agreed that recording would provide a better account of the WCA
- ▼ 97% did not believe that there were enough recording machines at the time of survey (11 machines for an estimated 11,000 assessments per week)
- ▼ Almost 70% were not aware that they could ask for a recording. The lack of any mention of recording of the WCA in the Atos literature helped the 'lack of demand' issue.
- ▼ If people persisted in asking for a recording they were presented with a range of barriers and hurdles to overcome
- ▼ For those that had asked for a recording but were refused one almost half 40% were not given a reason for the refusal of the remainder: nearly a quarter (24.5%) were simply told they were not allowed a recording, 20% were told the machines were broken and the remainder were told Atos staff did not like recordings.
- ▼ Of those refused recording just 12% were offered another appointment, although not all gained a recording on this subsequent appointment.
- ▼ Of those refused a recording 65% were told they must attend their appointment without recording or be classified as a 'no show'. While 23% were not aware that a recording would not be carried out until they arrived at the assessment centre where they faced the choice of returning home and risking loss of benefits or staying and going through the assessment without recording.
- ▼ 74% said that it was difficult for them to travel to the assessment centre, we heard from those who were sent for assessments away from their closest centre with complicated travel routes

- ▼ Simple access issues such as disabled parking close to the centre appeared to be a rare occurrence, heavy doors, non working lifts, complicated entry codes, long corridors, lack of understanding of sensory impairment and long waits seemed to be constant barriers before the assessment was carried out.
- ▼ Almost half (47.5%) were not aware that they could ask for a home assessment, of those that did and asked for a home assessment none believed they received a satisfactory response to the refusal to grant a home assessment
- ▼ 64% of those that said their doctors were told not to provide written support said this was because of the Department for Work and Pensions (DWP)
- ▼ Some respondents said that the DWP had written to their doctors to tell them not to issue 'fit notes' or written support, others that doctors resented such directives and would supply these based on their expertise and knowledge of the individual.
- ▼ While many doctors were seen as supportive and would supply written support, some charged from 30 -50 pounds for this, some appeared to wait for direction from Atos or the DWP and others saw any written support as a waste of time suggesting that Atos would disregard any written documents provided



## **Findings**

### **1. Sixty-six percent award Atos a Score of 1 point**

Atos score 1.99 on the way they carry out WCA. Individuals were given the option of assigning a score to the way Atos carried out the WCA with 1 being very bad and 15 being excellent. We don't believe in giving zero points, unlike Atos. The highest points Atos got were 13 -overall 66% gave the lowest score possible with the next largest percentage going to the next lowest score possible. The average overall was 1.99 Atos fails. Most people gave a score of 1 (481)

## **2. Recordings**

### **2.1 Would you prefer it if the WCA was recorded?**

When asked if people would prefer it if the WCA was recorded 4.7% said they didn't know, removing the 'don't know' left 98.4% (692) agreeing that they would prefer the WCA to be recorded. This shows that for those filling out the survey the overwhelming majority want the WCA to be recorded and proves that talk of 'no demand' for recordings is false. It is one engineered by this Government to continually increase the numbers assessed as 'fit for work' by Atos. The denial of recordings goes against any principles of fair or just assessments. It leaves many people with no other option but to go through stressful appeals procedures, recordings could prevent that, but this government not only does not want to make these available, it lies about the demand for them.

### **2.2 Would a Recording provide a better Account of the Assessment?**

When asked if a recording of the assessment would provide a better account of the assessment of those making a clear choice 98.5% (696) unsurprisingly agreed that this would provide a better account. DPAC regularly receives emails where names are incorrect on reports, and where if there is a problem with the right arm reports state that the problem was with the left arm and so on. The recording of assessments would not only serve to prevent these errors –it would save up to 80 million pounds of tax payers' money per year in tribunals and help to remove some of the stress and anxiety around that process for individuals.

### **2.3 Are there enough recording machines?**

Over ninety seven per cent (711) did not believe that there were enough recording machines, at the time of the survey there were just 11 machines with many of these reported as broken across assessment centres. Understandably the same percentage thought that if machines were broken, they should be mended. Yet, seventy per cent did not know they could ask for a recording, others did not ask

because they either had known the machines were broken, or expected to be told they would not get a recording.

## **2.4 Asking for a Recording and being refused**

For those that had asked for a recording but were refused one almost half 40% were not given a reason for the refusal of the remainder: nearly a quarter (24.5%) were simply told they were not allowed a recording, 20% were told the machines were broken and the remainder were told Atos staff did not like recordings.

Of those refused recording just 12% were offered another appointment, although not all gained a recording on this subsequent appointment. The majority 65% were told they must attend their appointment without recording and were not offered any alternative. While 23% were not aware that their requested recording would not be carried out until they arrived at the assessment centre.

There was contradictory media on recording, and to some extent the outrage of campaigners may have back fired in highlighting the lack of machines or the issue of broken machines. For others fear made asking for a recording impossible:

I am frightened to ask for a recording of the Atos assessment because I have heard that they delay your assessment over and over and in the end finally tell you have to go ahead without one anyway. as I worry much too much about appointments/meetings etc I don't want to be messed about trying to prepare for a date which is then rearranged and then threatened that I have to go ahead without a recording anyway

There was no point in asking for a machine because the press had reported that if a machine was not available then the assessment would go ahead without it!

For others the media or what campaigners were saying didn't matter as some centres came up with their own deterrents, lies, and what appeared to be veiled threats

Told it was against data protection act, then they didn't like them, then that it was breaching their (assessors) data protection act, then [I was] asked if it was to be used in litigation then they couldn't record

They said that they no longer record and have stopped doing them

I was told on the 4th July 2012 by an employee at Nottingham Atos that "Atos do not any longer audio record medical assessments and that all audio recordings had now been stopped, and are no longer to be used"

...was told DWP instructed Atos not to offer recording anymore

I was told that having the assessment recorded would not change the result of the assessment in my advantage at all.

..home medical arranged understand recording not allowed at home

Many were threatened with the loss of support if they persisted in asking for recording

I was told that the machines were not available and that they could not postpone the assessment, I would have to make that choice and they would have no option than to tell DWP that I had refused to have my assessment...

The first 3 times it was rearranged. The last time Atos told me DWP instructed them I can only have a NON-recorded WCA and would stamp my file "did not attend" if I refused or demanded a recording

I was told that no recording was allowed to take place, and that the appointment must take place or sanctions would be applied.

The lack of any mention of recordings in the Atos literature also, obviously helped the 'lack of demand' issue. This may go some way towards explaining why 70% were unaware of the option of recording.

One person was told they could not take notes and offered a recording in order to prevent them from note taking. However, the notion that notes cannot be taken is wrong too:

I wasn't informed a recording was possible until I asked (and was refused) to take notes but was told the WCA could be recorded. I then asked for a recording but was told this had to be booked in advance. Nothing at all about notes or recording was in the "What you need to know before your assessment" info leaflet

At the same time, the lack of machines and willing Health care practitioners (HCPs) to carry out recordings ensured that any proposed recording wasn't an easy process

I was advised that they would have to change my appointment as they only had a few of their staff volunteering to participate in the recording of assessment. So not only a lack of machines, but also very few staff which causes problems as both have to be available on the same day which would take time to organise.

I've been 'allowed' a recorded assessment but still await it after two cancellations of appointment and a third which they arrived 50mins late for appointment which left them 15 mins to complete assessment before I had to go to another appointment-hence this third appointment was cancelled.

The option for people to use their own recording equipment was also prohibited when people asked, although some did receive more detailed and positive replies to this issue

They said that if I wanted to make my own recording it would have to be done with professional quality equipment and that I would have to provide them with a copy.

A minority did achieve recordings

Asked for a recording and got one. Of all the names on the appointments sheets I could see on the reception desk, mine was the only one marked as asking for a recorded assessment. I don't think enough people know they can ask to have it done. The recording was given to me on an old fashioned cassette tape and as players are few and far between nowadays, it would be better if a digital format could be used

I was granted recording - it proved WCA was corrupt

## **Endnotes**

The very principle of a recording is both logical and fair. The fact that so many people first, were unaware of the option, second were frightened or saw no point in asking and third appeared to receive contradictory responses is expected, but at the same time completely unacceptable.

The lack of machines, working machines or HCPs unwilling or unable to support recording show beyond a doubt that demand for recordings has been quashed through various means. The threat of sanctions, losing benefits, being counted as a 'no show' and added stress to an already stressful situation prove, once again, that the system does not work in disabled peoples' favour.

The high percentages of those who believed that a recording would improve accountability, and who said they should be made available fundamentally disproves any notion of a lack of demand for recordings, rather it proves that this government has wilfully sought to promote false claims on demand for recordings of the WCA aided by the DWP and Atos. It marks the ethos of the entire WCA process, its unfairness and its fundamental lack of accountability.

### 3. Access to Assessment Centres

Of those that had an assessment 71% (492 of 603) said the centres were accessible with the remainder saying they were not. However, there were 115 comments on this question, many of which gave illustrative descriptions of issues which showed how assessment centres were often not accessible. These comments moved beyond the issues of whether an assessment room was on the ground floor. The comments were divided into difficulty of travel to the centre, and people being sent to centres that were not the closest to their home for no clear reason. In answer to question 11: is it difficult for you to travel to your assessment centre? just over 74% said it was. This too must be taken as part of the inaccessibility argument. Other issues raised included car parking, or lack of it, non working lifts and heavy doors:

My "local" assessment centre is not accessible to me. I live in a rural village and have agoraphobia/anxiety attacks (particularly bad in busy/crowded places). My nearest centre is over 40 miles away, in the VERY busy city centre I haven't been to for over 10 years.

I was sent a travel itinerary of how to get to the assessment centre from my house. The journey was to take 60 minutes consisting of a 7 minute walk from my house to a bus stop, a 20 minute bus journey, a change of bus for another 22 minutes journey finished by an 11 minute walk to the assessment centre. I'm pretty sure anyone who could do all that would be automatically declared fit for work! The trip took less than 15 minutes by car.

Our assessment office in Truro does not have adequate directions from the town centre, when we arrived in Truro we parked in a disabled bay by the Cathedral, not having the correct information with us due to a stressful panic attack prior to leaving the house we were forced to walk up a steepening hill through the town, then up 2 flights of stairs into a courtyard and then up another 3 flights of stairs to the main doors of the reception area which looked like the back entrance of an office complex. If I were in a wheel chair and had come to the assessment office from the town centre, I would have been stopped by the increasingly steep hill before I even got to the steps!

It is a despicable location with limited parking, even with a Blue Badge, loads of stairs & long corridors.

It is a long way out of the city centre with no parking nearby & no buses.

I do not use a wheel chair but I have Fibromyalgia and have trouble with stairs but the assessment was upstairs in a building with no lift

Stories on car parks being far away from centres are wide spread; sometimes these do not have any disabled parking, with parking only available in another car park further away.

The building has a lift but is about 1/2 mile from the nearest public car-park

...but no car parking for over a mile, and a good 10min walk to nearest bus stop so its really hard to get to my centre. ..and need permission to use the lift but often no one to ask- I waited almost 20mins for someone to come past so they could input the code. no way of contacting assessment office to tell them you're in the building but stuck downstairs etc

My assessment centre is accessible but they do not tell you cannot park near entrance with disabled badge as there are signs at car park to say they are only for staff, then you have to park miles away in city centre then get marked for this in assessment (seems wrong)

Of course access is not only about ramps and lifts, but this did not seem to have been taken into account at many assessment centres

Probably not, everything uses phones, all the time, and I am deaf so am struggling with access. Accessibility isn't just physical mobility stuff.

No, visually impaired so they need to appoint an independent advocate before the process can proceed...they don't have the funds for this so they are not processing it at the moment.

#### **4. Accessible information**

While 15.5% had asked for and received accessible information e.g. in large print, easy read or other formats, 75% (548) said they did not realise that they could ask for this, a further 9.6% had asked for accessible information , but this had not been provided. The Equality Act 2010 stipulates that this is a legal. Therefore it is a requirement of government departments and private companies contracted by government departments including the Department for Work and Pensions. A Freedom of Information request confirmed this<sup>3</sup>

#### **5. Home assessments**

Just over 34% had asked for a home assessment, of all that responded to the question, almost half 45.7% that answered this question did not know that they could ask for a home assessment. Of those that asked for a home assessment and were refused all said they did not receive a satisfactory reason for this. However, comments offered more illustrations on the bizarre notions of Atos.

In some cases rather than any concrete policy, people were at the mercy of whoever was at the end of the phone:

Man shouted down phone 'you've got to come in'

They said they don't do them, which I knew to be untrue.

Agoraphobia was not a valid reason for not attending an Atos centre

It would be uneconomical for them to process claimants on this basis

Told that if I didn't attend their centre this would be recorded as a refusal

Atos told my MH Support Worker that I would need Community Psychiatric Nurse & GP's letter to insist on a home assessment. It would take too long to arrange a home appointment and in the meantime I MIGHT lose benefits

They told us that they had considered the matter, and thought a home visit was unnecessary - despite our doctor insisting that a home visit was needed!

[Home assessment refused] because my GP didn't specifically say "And as a result of his condition, he is unable to attend the medical centre, even if you send a taxi for him." this statement arrived from JC+ via email this morning.

Slightly less simplistic strategies using the constant too and fro between Atos and DWP were also employed to strip people of benefits

They said I'd have to call DWP [Department for Work and Pensions] and DWP said it was Atos who should deal with it. This went back and forth until I got a letter saying I'd not attended my assessment at the centre (after telling 3 different people at Atos that I would not be able to) and that my benefits would be stopped.

Others were intimidated or mis-represented to crisis point:

My first ever assessment had been terminated by the Atos HCP on grounds of being aggressive (the only person being aggressive was the HCP, who had reduced me to tears within a matter of minutes, continuously interrupted me while I was trying to tell him his manner was causing me to feel anxious and upset and I wasn't being aggressive), despite complaining to Atos customer services while still in the assessment centre. Atos cancelled a home visit for DLA before they had even investigated the matter as they [said they] were not prepared to send their staff into a potentially violent environment. The experience actually made me suicidal and I was consequently referred to the crisis team by my counsellor.

For those that had the energy to persist, which many understandably don't, there seemed to be some gains:

My GP asked for a home assessment, but I was offered an appointment at an assessment centre. When I phoned up, the appointment was immediately changed for a home appt. When I asked for it to be recorded, they gave me a number to ring saying it was the "team for recording at home" which was actually the customer service number. When I rang the local office to find out why I hadn't originally been offered a home appointment they denied that my new appointment that I had just been given, was for a home appointment, and said the original request was denied because they had not received enough information from my GP. They made no attempt to contact either myself or my GP for more info, and I did not find out until I rang and enquired. They also said that I had cancelled my original appointment, although it was they who had, in order to offer me an appointment at home. When I started the

complaints procedure, and said I was also intending to complain to the DWP and my GP regarding their conduct, they decided that I didn't actually need assessing at all

Home medical was initially refused till I pointed out my GP had sent a letter requesting one. They told me home medical not possible as letter out of date. [They] sent me appointment for medical at local centre. I argued the letter was dated the same as when I returned the forms, so not my fault if it had taken them weeks to get back to me with appointment. Eventually they agreed but not had it yet.

At the same time requests for letters from doctors were sometimes not possible because of some doctors' attitudes or costs, some could not afford to pay for a letter if their doctor charged for this.

Atos told me to get a letter from GP stating I could not get there on public transport; GP wanted £35.00 for the letter. I couldn't afford it.

Increasingly more and more doctors are doing this when people are on low incomes it is not helpful and provides another barrier. Also some surgeries are refusing to provide supporting document full stop. However, when produced it seems the letters can make a difference, although it is not always the case. The answer seems to be to get as much information to Atos as possible.

I wasn't refused a home assessment per se. I requested one and ATOS asked for evidence to back up my need for one. When I submitted evidence from my doctor and psychiatrist, they decided they had enough information to make a recommendation without seeing me and the DWP then put me into the WRAG for ESA.

## **Endnotes**

Access includes many areas, it is not just about wheelchairs or those with mobility impairments, but must include issues for those with sensory impairments and mental health issues. There were common accessibility problems travel was one of the overriding problems according to 74% suggested routes were convoluted, and car parking appeared to be made as difficult as possible. Accessible information was provided for just 15.5% of respondents. Most were unaware that they could ask for this. Both of these issues contravene the Equality Act 2010, but this appears to be no problem for the Government, the DWP or Atos.

In addition, home assessments were often refused for no apparent valid reason when in many cases there appeared to be a clear need for these. At the same it was evident that passing people between Atos and the DWP on particular issues and enforcing strategies to make any option difficult helped to break down peoples' resolve, drive some to crisis point and others to find themselves stripped of income without any assessment taking place.



## 6. Doctors Support

The majority received support from their doctors. However, of those that said their doctors were advised not to provide documentation 64% cited the DWP as giving this directive, others cited Atos with the remainder suggesting that it was surgery policy.

Overall doctors appeared to be supportive in providing, letters, documents and 'fit notes' when asked, as already mentioned increasingly doctors are asking for payment for anything they or their surgeries do not deem to be an everyday occurrence or distracting from what they perceive as their GP practices. This could often mean that people were unable to secure supporting documents, although the fit note remains free so far.

Some people felt that they did not 'get on' with their doctors this could make them less likely to ask and others noted that their doctors had retired which placed them in a different situation than previously. In the survey response junior doctors or locums appeared less likely to be sympathetic. It is not clear if this is a trend of more recent training practices or a coincidence, the figures were too low to draw full conclusions. Although we are seeing more doctors directed to online resources for advice some of which are Atos Health care themselves and others of which focus on 'work being good for people' which take a clear bio-psychosocial model route in developing advice and options .

Some didn't ask doctors for any supporting documents because they either didn't think they would need them or were unaware that they could ask for these. For others

. GP information is not given any credence even though they are more qualified than assessors and are more aware of patients' abilities and limitations. I have found a few lies on the reports I have had in the last two years. I was told my GP was contacted but he disputes this. All of this was to my detriment.

### 6.1 New 'Fit Note' Cultures

The Fit note replaced the sick note in 2010. The fit note serves the same purpose as the old sick note. The confusing turnaround appears to be a play on linguistics, rather than any clear change apart from an option for a doctor to suggest a return to work if certain factors are put in place. These changes can be adapted equipment that the employer is expected to provide, reduced hours or other options to speed the return to work, and apparently rid Britain of what Iain Duncan Smith has called 'the sick note culture'. The follow through on doctors suggesting work place changes may produce an interesting study. For those going through an Atos assessment, or going through an appeal or tribunal there are a number of problems with the 'fit note culture'.

Often when Atos had made an assessment of 'fit for work' doctors could refuse to issue a 'fit note', regardless.

My doctor refused to assess me after a letter from the DWP, received in late September, pertaining to an assessment carried out in March, showed Atos found me fit for work

For others, doctors persisted in their own diagnoses and knowledge of an individual

My doctor is prepared to provide a sick/fit note at any time I ask for one as they believe that I am totally unfit for work!

Because the DWP wrote and told him I didn't need it [fit/sick note], the doctor registered my shock, and after reading my notes and examining me, gave me a sick note with no hesitation

He said he wasn't allowed to give me one [fit/sick note] as he was writing it and then gave it me...he is retired now. He has known me a long time and knows I am genuine.

References to doctors being contacted by the Department for Work and Pensions were scattered throughout the survey responses. At the same time there did appear to be evidence that some doctors did not understand the system or the work capability assessments, to the extent of not knowing that they were happening.

GP asked for a letter from DWP as to what they wanted them to do...

Not refused - most doctors don't seem to understand the system; the last doctor didn't even know what ESA was!

There was a problem, I have an appeal going through and saw a jnr doctor who refused me one [fit/sick note]. I had a meltdown... I left and came back, saw my proper doctor and it was fine.

Doctor told me he was legally unable to give me sick note after I lost my tribunal in 2011, I Now know this is false.

More amazingly

Locum Dr refused to help appeal against fit for work ruling stating that GP takes guidance from DWP decision maker

My doctor thinks my condition is not helped by 'being at home' and I should be out looking for work. I may have to go back in for surgery. I won't know until at least October. How the hell can I be one thing or the other in a matter of a few months? It makes no sense. My doc backs the Tories in what they're doing.

The D.W.P informed my doctor not to issue me with a sick note.

## 6.2 Written Support from Doctors

Once again many doctors were happy to do this at the time of the survey, some charged, some wanted direction from the DWP and others did not appear to understand the system. However, when supporting documents were provided many survey respondents said they were ignored by assessors.

Provided but Atos assessor threw it back over the desk at me

At the medical, the nurse conducting the assessment flatly refused to look at the documentation and evidence I had taken with me, and wouldn't allow me to elaborate on answers insisting only on yes or no answers. When I saw the report that Atos had compiled, I thought at first that my notes had been mixed up with someone else's. Everything that had been discussed at the medical had been ignored entirely. The report also contained several comments which directly contradicted one another. I don't understand how these people are allowed to get away with committing what amounts to fraud on a daily basis

Some doctors seemed to be of the same opinion, that is: that any documentation they provided would be ignored, as a logical result, they didn't write anything and it was ignored on the basis of not being presented at all.

My GP has told me that there is no reason for them to support me with statements or documentation as their input is not considered by the DWP and that as such it was a waste of their time which was already considerably pressured...

The Jnr doctor told me that she could not give me a medical note because the DWP would not believe them even if they had seen me and signed it. My regular GP is very supportive and has written me a report.

My G P told me they wouldn't take any notice of his letter's, he's right...DWP have not contacted my G P or any other medical profession I have seen for my condition's & many ailment's.

Other doctors said that the DWP or Atos would ask them for written support if it was needed, many respondents remarked that they did not expect this to happen

My doctor said that he didn't agree with the assessments and that his opinion as to whether I was fit to work or not should be enough, and that he would only provide written support if they wrote to him and asked for it.

Dr said Atos would need to write to the surgery saying exactly what info they needed as she could not just hand over reams of paper.

When I first asked my doctor said they will be asked by work and pensions so my doctor would not do me one. My doctor then did me one after my medical, they then said they it was too late.

### **6.3 The influence of the DWP**

There appeared to be an increasing influence of the DWP on doctors. It's difficult to understand why if a trained GP has been seeing a patient for many years how the DWP are suddenly able to supplant that knowledge.

I haven't had to ask my Dr for information for my appeal as I've only just sent it in I did ask her for a sicknote ( or whatever they call it now) and she was and has been helpful, I have spoken to my Dr about the WCA and she has explained that she might not be able to help me as the DWP may contact her and tell her she can't as it has been happening more and more frequently.

Although my GP did provide a letter for my tribunal, he initially filled it out in a manner that would not help. Only when I sat face to face with him, did he agree and looked rather embarrassed at what he had initially done. I firmly believe pressure is being put on GP's to be unhelpful. I am also aware through friends that pressure is being exerted on physios [physiotherapists] to do the same. This is directly from the mouths of physios who I used to work with.

GP stated that guidance from DWP & ATOS was contradictory and that contact can only be made with ATOS who state that GP need not supply any further info as they already have what they need to carry out a fully comprehensive assessment and that any more info from GP would waste the GPs already pressing time.

DWP told me off the record that Atos were irrelevant and my benefit would be cut regardless. I appealed and left the appeal after 3.5 mins having got 15 points on the first question – didn't even get to my major illness”.

Some DWP staff took it on themselves to offer ‘an opinion’ to individuals or advise them incorrectly.

I had a work accident in 1990 that almost killed me. I worked on an unknown prolapsed disc until 1994 when my back gave in, I've now got two and permanent sciatica. The medical on 12/12/11 was flimsy at best, the report is full of contradictions. Had a phone call from [name removed] at Nottingham DWP who took pleasure in bullying me and insinuating that I was a criminal cheating the system. Told me that no one would help me, had to find CAB by myself, they are helping me with appeal.

I have been told by DWP members of staff that I cannot provide the letters from my doctor or consultant. If the ATOS assessment or tribunal staff feel they need the information they will request this from the relevant medical professionals. How am I able to prove my case without this information?

### **Endnotes**

The DWP contract Atos at 100 and 10 million a year to carry out the WCA. This is a contract that has been ongoing for a number of years beginning under the

government of New Labour. In this time criteria has been tightened in assessments and criticism of the process has increased. Until now, no questions have been asked of the ways the DWP may be influencing doctors, rather there has been an assumption that doctors are best qualified to assess an individual's day-to-day barriers and fitness for work in the majority of cases by individuals and by common sense thinking. The fact that Atos overrides this through the WCA and now that the DWP appear to be 'leaning' on doctors regarding their own patients well-being is yet another issue that should raise concerns.

Although references to junior doctors provide less than a snap shot, it is also a concern that respondents said junior doctors appeared to be less likely to reject dictates of the DWP in favour of their profession opinions; it may be that they also thought that they did not know the individual concerned well enough. However it also points to a potential shift in training which incorporates the bio-psycho-social model and an emphasis on the mantra that 'work is good for you' positing an emphasis on attitudes rather than on diagnosis. It is an area in which more work is needed; this also applies to the increasingly destructive influence of the bio-psycho-social model itself<sup>4</sup>.

## Conclusion

The survey responses offer a snapshot of the procedures and experiences of Atos, of the misery and the negligence of the company contracted by the Department for Work and Pensions and the Coalition Government. A company contracted to remove genuine people from forms of disability and sickness state support. There is also wider evidence of what happens to people in that trajectory: the deaths and suicides of up to 73 people a week, the removal of income, the stress and anxiety, the revolving door of assessment, successful appeal, and then reassessment often within weeks of a successful appeal decision have been well documented elsewhere.

The experiences of those completing the survey were undoubtedly negative ones. The notion that some doctors may now be being told what they should do and how they might respond or not respond to their patients' needs by DWP is particularly horrifying. Yet, there is much more here: threats, bullying tactics and denial on the possibility of recordings of assessments, which the Coalition Government reproduce as evidence of a lack of demand for recordings. A lack of accessible testing centres without parking, without lifts and without the things we should expect under the Equality Act. The criteria of this Act is not being applied at the even the most basic level. Overall the report has uncovered important evidence based information from those going through the process which has not been available elsewhere.

## Recordings

Iain Duncan Smith MP claimed that there was no demand for recording of the WCA. Over ninety eight percent of those responding to the survey said that they would prefer their WCA to be recorded, 98.5% unsurprisingly, agreed that recording would provide a better account of the WCA. Almost 70% were not aware that they could ask for a recording. The lack of any mention of recording of the WCA in the Atos literature helped the 'lack of demand' issue. For those that had asked for a recording but were refused one almost half 40% were not given a reason for the refusal of the remainder: nearly a quarter (24.5%) were simply told they were not allowed a recording, 20% were told the machines were broken and the remainder were told Atos staff did not like recordings. Of those refused a recording 65% were told they must attend their appointment without recording or be classified as a 'no show'. While 23% were not aware that a recording would not be carried out until they arrived at the assessment centre where they faced the choice of returning home and risking loss of benefits or staying and going through the assessment without recording. Of those refused recording just 12% were offered another appointment, although not all gained a recording on this subsequent appointment. If people persisted in asking for a recording they were presented with a range of barriers and hurdles to overcome.

The lack of machines, working machines or HCPs unwilling or unable to support recording show beyond a doubt that demand for recordings has been quashed through various means. The threat of sanctions, losing benefits, being counted as a 'no show' and added stress to an already stressful situation prove, once again, that the system does not work in disabled peoples' favour.

The high percentages of those who believed that a recording would improve accountability, and who said they should be made available fundamentally disproves any notion of a lack of demand for recordings, rather it proves that this government has wilfully sought to promote false claims on demand for recordings of the WCA aided by the DWP and Atos. It marks the ethos of the entire WCA process, its unfairness and its fundamental lack of accountability.

### **Access to testing centres and home assessments**

In all 74% said that it was difficult for them to travel to the assessment centre, we heard from those who were sent for assessments away from their closest centre with complicated travel routes. Simple access issues such as disabled parking close to the centre appeared to be a rare occurrence, heavy doors, non working lifts, complicated entry codes, long corridors, lack of understanding of sensory impairment and long waits seemed to be constant barriers before the assessment was carried out. Almost half (47.5%) were not aware that they could ask for a home assessment, of those that did and asked for a home assessment none believed they received a satisfactory response to the refusal to grant a home assessment.

In addition, home assessments were often refused for no apparent valid reason when in many cases there appeared to be a clear need for these. At the same time it was evident that passing people between Atos and the DWP on particular issues and enforcing strategies to make any option difficult helped to break down peoples' resolve, drive some to crisis point and others to find themselves stripped of income without any assessment taking place.

### **Doctors and the increasing influence of the Department of Work and Pensions (DWP) and the Bio-psychosocial model**

The largest majority (64%) of those that said their doctors were told not to provide written support said this was because of the DWP. Some respondents said that the DWP had written to their doctors to tell them not to issue 'fit notes' or written support, others that doctors resented such directives and would supply these based on their expertise and knowledge of the individual, often because they knew them to be genuinely not fit for any form of work. While many doctors were seen as supportive and would supply written support, some charged from 30 -50 pounds for this, some appeared to wait for direction from Atos or the DWP and others saw any written support as a waste of time suggesting that Atos would disregard any written documents provided.

Until now, no questions have been asked of the ways the DWP may be influencing doctors, rather there has been an assumption that doctors are best qualified to assess an individual's day-to-day barriers and fitness for work in the majority of cases both by most individuals and by common sense thinking. The fact that Atos overrides this through the WCA and now that the DWP appear to be 'leaning' on doctors regarding their own patients well-being is yet another issue that should raise concerns. Although references to junior doctors provide less than a snap shot, it is also a concern that respondents said junior doctors appeared to be less likely to reject dictates of the DWP in favour of their profession opinions; it may be that they also thought that they did not know the individual concerned well enough. However it

also points to a potential shift in training which incorporates the bio-psycho-social model and an emphasis on the mantra that 'work is good for you' positing an emphasis on attitudes rather than on diagnosis. It is an area in which more work is needed; this also applies to the increasingly destructive influence of the bio-psycho-social model itself.

Since the survey responses were analysed we have also been made aware of an increasing number of doctors' surgeries that are simply refusing to issue any supporting documents for the WCA. This raises more questions on the input of the medical profession to serve their patients' well being.

## **Summing up**

We have drawn on experience based evidence provided through survey responses, rather than rhetoric. The issues raised about doctors' expertise may be interpreted by some as bringing in the medical model of disability. It should not be. All the grass root groups concerned with the survey adhere to the social model philosophy. The social model itself is the principle through which DPAC, in particular was formed.

We accept that issues of disabled peoples' employment are based on structural and environmental barriers, the attitudinal barriers of many employers, as well as the demands of an increasingly competitive labour market. These issues have not been solved by the Coalition Government; in fact they have worsened in an era of unnecessary cuts, rising unemployment, and unpaid labour schemes. These factors have culminated in a depression of wages and the loss of many employee rights.

The barriers that disabled people face to paid employment are complex and are not just based on an individuals' health, they certainly should not be reduced to an individuals' attitude about often incurable or degenerative conditions that cause disablement as in the WCA. The fact that the WCA fails to take into account this complex set of factors is to be derided, but is also telling as clear evidence that these tests are not about work but about the reduction of a welfare state whose trajectory is moving towards an Americanised system of individual insurance against unemployment, illness and disability.

There are few doubts that the Atos WCA assessment is not fit for purpose. There have been endless critical media pieces, debates by MPs, and several parliamentary early day motions brought before parliament. A growing number of MPs are now calling for an end to this regime. Legal challenges are being made, however, with the removal of legal aid in 2013 for benefit based cases this route is also under threat. DPAC have been campaigning against Atos and the DWP since 2010, its good that the rest of the UK is now aware of the misery of these tests and the impacts on lives and the deaths of disabled people- its good that the name Atos is known more for its WCA assessments than IT, but still people need to endure this horror. All available evidence must point to the conclusion that the WCA must stop.

It has not been possible to include all of the many harrowing reports on the system of the WCA that were given in the survey. However, we do aim to include these in further documents, because DPAC, BT and SWU believe that it is only by producing and constantly repeating evidence based accounts that attests to the already prominent stories and reportage on the conduct of the WCA that will lead to its end.



This is the only reasonable and humane conclusion that can be drawn by anyone dedicated to the principle of any form of human rights.

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## References

<sup>1</sup> <http://www.bbc.co.uk/news/uk-19244639>

<sup>2</sup> [http://statistics.dwp.gov.uk/asd/asd1/adhoc\\_analysis/2012/incap\\_decd\\_recips\\_0712.pdf](http://statistics.dwp.gov.uk/asd/asd1/adhoc_analysis/2012/incap_decd_recips_0712.pdf)

<sup>3</sup> [http://www.whatdotheyknow.com/request/accessible\\_formats\\_from\\_dwp](http://www.whatdotheyknow.com/request/accessible_formats_from_dwp)

<sup>4</sup> <http://www.leeds.ac.uk/disability-studies/archiveuk/jolly/A%20Tale%20of%20two%20Models%20Leeds1.pdf>

## **General**

The real figures on the 'fit for work' scandal

<http://www.dpac.uk.net/2012/11/the-real-wca-figures-after-appeal-76-entitled-to-support/>

Joint statement on WCA by DPAC and Black Triangle

<http://www.dpac.uk.net/2012/10/joint-statement-on-work-capability-assessment-wca-by-dpac-and-black-triangle/>

Grayling tries to stop You Tube video that helps people appeal re work capability assessments (WCA)

<http://rssnewstoday.com/?cat=611>

John McDonnell's EDM

<http://www.parliament.uk/edm/2012-13/295>

Calum's List- list of those sharing suicides deaths due to WCA

<http://calumslist.org/>

BMA demand end to WCA with immediate effect

<http://bma.org.uk/news-views-analysis/news/2012/june/scrap-work-capability-assessment-doctors-demand>

Charges for doctors supporting evidence for the WCA

<http://falseeconomy.org.uk/blog/what-does-medical-evidence-for-atos-work-capability-assessments-and-appeals>

## **Recording of WCA assessments**

<http://www.bhfederation.org.uk/federation-news/item/1743-government-says-%E2%80%98no-guarantees%E2%80%99-over-recording-of-%E2%80%98fit-for-work%E2%80%99-tests.html>

DWP Spent over a £1million pounds on Audio Recording Machines for Fraud Dept...

<http://atosvictimsgroup.co.uk/2012/08/16/dwp-spent-over-a-1million-pounds-on-audio-recording-machines-for-fraud-dept/>

### **Bio-psycho-social model**

Advice for Doctors based on discredited Bio-psycho-social model

<http://www.healthyworkinguk.co.uk/>

Doctors advised to call Atos on new fit note 2010

[http://www.fom.ac.uk/wp-content/uploads/guid\\_gp\\_healthwork.pdf](http://www.fom.ac.uk/wp-content/uploads/guid_gp_healthwork.pdf)

TUC on fit note

<http://www.tuc.org.uk/extras/fitnote.pdf>

## **ANNEX**

### **Survey Questions**

- 1. On a scale of 1 to 15 with 1 being very bad and 15 being excellent how many points would you give Atos for the way they carry out the Work Capability Assessments?**
- 2. Would you prefer it if your Atos/work capability assessment (WCA) was recorded?**
- 3. Do you think a recording of the assessment would provide a better account of the assessment and what was said?**

- 4. Do you think that 11 recording devices for an estimated 11,000 assessments per week are enough to satisfy the demand of those who want their assessments recorded?**
- 5. What do you think Atos should do if all 11 recording machines for the estimated 11,000 assessments per week are broken?**
- 6. Have you asked for a recording of your assessment and been told that you can't have one?**
- 7. If you have asked for and been refused a recording what was the reason given?**
- 8. If you have been refused a recording did Atos arrange another appointment for you when a recording could be done?**
- 9. Is your assessment centre accessible to you e.g. if you are a wheelchair user/have a mobility impairment have you been sent to a centre without a lift?**
- 10. Are Atos providing you with accessible information e.g. large print, easy read documents if you ask for them?**
- 11. Is it difficult for you to travel to your assessment centre?**
- 12. Have you asked for and been refused a home assessment?**
- 13. If you have asked for a home assessment and been refused what was the reason given?**
- 14. Has your doctor refused to provide you with letters or documents to help with your assessment?**
- 15. Has your doctor refused to provide you with letters or documents to help with your appeal?**
- 16. Has your doctor refused to provide a sick/fit note when requested within the past month?**
- 17. Has your doctor told you that he/she cannot provide any written support for your WCA/Atos assessment because he/she has been told he/she is not allowed to?**
- 18. If your doctor said they are not allowed to provide any written support, who did they say told them that?**
- 19. Are you a disabled person  
a PA/carer filling in this form for a disabled person**  
  
**male**  
**female**
- 20. How would you describe your impairment? ( If a P.A./carer please put impairment /disability of person you are filling in survey for)**

**21. Which age group do you fit into**

**22. Please provide the area where you live. You can also provide contact details if you would like a summary of survey results or keep up with campaigns. Your contact details will remain confidential.**

**23. Are there any other comments you want to add?**