

Weekly Political Update

5 December 2017

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Deafness and Hearing Loss

Click on link for source

<p><u>Debate on Deafness and Hearing Loss</u></p>	<p>Chair of the APPG on Deafness, Jim Fitzpatrick MP (Labour, Poplar and Limehouse) introduced the debate that he secured on deafness and hearing loss. In doing so he moved the following motion <i>“that this House has considered deafness and hearing loss.”</i></p> <p>He said:</p> <p><i>“One person in six in the UK—or approximately 11 million people—is living with some form of hearing loss, and estimates show that nearly 90,000 use British Sign Language as their first language. The Government’s Access to Work scheme provides grants to disabled people to enable them to have equal participation in the workforce. It has revolutionised the career opportunities of deaf people, shattering the glass ceiling that had limited them to manual jobs. It has been largely due to Access to Work that deaf people have progressed as far as their talent allows: there are now deaf chief executive officers, deaf Ministry of Justice intermediaries and deaf theatre directors, among other senior professionals.</i></p> <p><i>In March 2015, however, the then Minister for Disabled People, the right hon. Member for Forest of Dean (Mr Harper), announced that the Government would impose a cap. The cap means that the scheme no longer properly supports those deaf and disabled people for whom support costs are more expensive. For deaf people who are self-employed or entrepreneurs, there is no employer to make up the difference between the award and the need. In a recent written answer, the Department for Work and Pensions indicated that it was unable to state the number of people still in receipt of awards above the cap.</i></p> <p><i>The UK Council on Deafness conducted its own survey to establish the impact of the cap on deaf people. It received 87 responses, including 60 from those who will be capped in April 2018—a high response rate, given that fewer than 200 people were identified in the equality assessment as potentially in that situation. Deaf people tell us that they are already avoiding applying for work in professional, managerial and senior roles that will be capped. The cap on Access to Work awards risks imposing a glass ceiling for deaf and disabled people in their work. Some 46% said that they would not apply for promotions, 20% said they had not applied because they were worried, and 44% said that they would stay with their current employer for as long as possible because they were worried about a new employer.</i></p> <p><i>Will the Government look again at the evidence opposing the cap on Access to Work awards? Do the Government accept that the cap on Access to Work grants is set too low? The Secretary of State amended it from £42,100 to £43,000 in his statement today, but that is still too low. If the Government will not remove the cap, will they consider raising it to a level that provides deaf people with more of the support they need? Finally, have the Government</i></p>
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considered that they may inadvertently have created legitimate financial grounds on which employers can discriminate against job applicants who use BSL? I recognise that those are questions mainly for the DWP, but if the Minister cannot respond to them today, I would be grateful if he ensured they were passed on to the appropriate quarter. In answer to my question in the Chamber about an hour ago, the Secretary of State said that the Government were still looking at evidence. I hope that means that the door is still open, because increasing the threshold by £1,000 clearly does not cut it...

“...When the Department of Health and NHS England published that plan in March 2015, it was widely welcomed. This cross-Government plan not only recognised hearing loss as a major public health issue, but highlighted the major impacts of hearing loss. It also committed the Government to improving services for everyone living with hearing loss. In addition, it set out the need to reduce variation in the provision of services, through the development of guidelines by NICE on adult-onset hearing loss.

The action plan set out five key objectives in the following areas: earlier diagnosis; good prevention; integrated services; increased independence and ageing; and good learning outcomes. There was wide support for the plan. As part of the implementation, NHS England published its new national commissioning framework for hearing loss services in July 2016. It is essential that information about that framework is properly disseminated by NHS England and that the framework is fully adopted by clinical commissioning groups. To help with that dissemination, in September, NHS England published its “What Works Guides—Action Plan on Hearing Loss”, which provides advice to commissioners and providers on supporting people with hearing loss in a variety of different settings.

NHS England is also set to publish guidance imminently, setting out the need for health and wellbeing boards to consider people with hearing loss when they are commissioning services, as well as considering its data tool. In this case, the requests made of Government would be fairly straightforward to meet, because the frameworks are in place.

The UK Council on Deafness is asking the Government to work with NHS England, commissioners and professional bodies for medical professionals to raise the importance of early diagnosis of hearing loss; produce an analysis of the case for hearing screening, potentially adding it to the NHS health check that is provided to people in England aged between 40 and 70; and raise the importance of promoting the commissioning framework through NHS England. The framework provides a clear alternative to the decommissioning of hearing aids, and CCGs should be aware of it when designing and commissioning local services.”

In his response Parliamentary Under Secretary of State for Public Health and Primary Care, Steve Brine MP (Conservatives, Winchester and Chandler’s Ford) said:

“As we heard from the hon. Member for Poplar and Limehouse, in March 2015 the Department of Health and NHS England published “Action Plan on Hearing Loss”. That is a statement of intent for action across the health and care

sector. There is an ongoing programme of work that the action plan has initiated. There are 20 separate outcome measures, which the hon. Gentleman touched on.

In September 2017—working with the Department for Work and Pensions, the Department for Education and hearing loss charities—NHS England issued a series of “What Works” guides, providing examples of what we know works in supporting individuals with hearing loss throughout their lives. Those guides, aimed at organisations, providers and commissioners, cover hearing loss and employment, the transition to adulthood for young people with hearing loss, and hearing loss and healthy ageing.

A key point in the plan is the need for clear guidance for commissioners, and in July 2016 NHS England published “Commissioning Services for People with Hearing Loss: A framework for clinical commissioning groups”—snappy titles we do not do in the NHS, as I have learned since arriving there as a Minister. As the Minister responsible for public health, I am very pleased that that framework recognises hearing loss as a “major public health challenge”, because that is exactly what it is. The framework is a major step forward in focusing local commissioners on tackling uncorrected hearing loss and on addressing the variation in access to and the quality of services across the country.

The framework has been developed with a range of stakeholders, including voluntary sector groups and professional representative groups, such as Action on Hearing Loss, which has been mentioned today, and the British Tinnitus Association—ditto—which are members of the Hearing Loss and Deafness Alliance. The guidance is crucial in ensuring consistency across CCG commissioning in England and supporting commissioners as they make decisions on what is effective and good value for their local populations. In turn, it will help to reduce inequalities in access to and outcomes from hearing services. I recognise the need for us to maintain momentum and to ensure that the action plan secures positive outcomes for those with hearing loss and deafness.”

Regarding the Access to Work cap, the Minister Steve Brine MP said:

“I think it is worth putting it on record that resources for Access to Work were increased in real terms in the 2015 spending review. I appreciate that hon. Members have all spoken positively about Access to Work as a scheme, but resources within a publicly-funded health service are still finite and they need to be allocated to the growing numbers coming to the scheme—8% more people had Access to Work provision approved last year than the previous year, including 13% more deaf people. Last year, we spent £104 million on Access to Work grants, an increase from £97 million the year before. As has been said by a number of hon. Members, Access to Work is a demand-led scheme and therefore the number and level of awards will reflect that. We intend for it to continue to meet demand, and with that the numbers continue to go up.

I do not accept that the maximum level of support is too low. The help an individual may receive from Access to Work depends on their individual needs and their personal circumstances—up to the current maximum of £42,100 per year rising to £43,100 from April 2018. That is 1.5 times the average salary,

	<p><i>which is far more than most of my constituents, and those of every hon. Member here, earn.</i></p> <p><i>Transitional arrangements are in place for existing recipients and those who made a claim before October 2015. The changes do not apply until April 2018, provided that needs remain the same. People will receive annual reviews of their progress and support in the transition to the award level. The Government continually monitor the application of the cap and consider whether any further flexibilities might be required. “</i></p> <p>To read the debate in full, please click on the link on the left.</p>
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Employment

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<p><u>Publication of the Improving Lives: the future of Work, Health and Disability</u></p>	<p>The command paper <i>Improving Lives: the Future of Work, Health and Disability</i> has been published by the Department for Work and Pensions and the Department of Health.</p> <p>The paper highlights the Government's Strategy to get an additional one million disabled people into work in the next ten years.</p> <p>To read the paper in full, please click on the link on the left.</p>
<p><u>Oral statement on the Improving Lives: Work, Health and Disability</u></p>	<p>Secretary of State for Work and Pensions, David Gauke MP (Conservatives, South West Hertfordshire) made an oral statement on the publication of the <i>Improving Lives: the Future of Work, Health and Disability</i> command paper.</p> <p><i>“In the workplace, employers should have the confidence to recruit and retain disabled people and those with health conditions, and to create healthy and inclusive workplaces where all employees can thrive and progress. The best employers have already realised the business benefits of hiring disabled people, and while there are many examples of good practice, we want to go further.</i></p> <p><i>This Command Paper responds to what we heard in the consultation and to the findings of “Thriving at work: The Stevenson/Farmer review of mental health and employers”. We will improve advice and support for employers of all sizes, working in partnership with them, together with disabled people and other stake- holders, to bring together information and advice that meet businesses’ needs. We will also make significant enhancements to the Access to Work scheme, including by increasing the capacity of its mental health support service.</i></p> <p>In response to the Secretary of State's statement, Shadow Minister for Disabled People, Marsha De Cordova MP (Labour, Battersea) asked:</p> <p><i>“We know, for example, that Access to Work is popular among those who use it, focused on the vital issue of retention for those in work, and effective in its results. Yet Inclusion London reports that, instead of expanding the scheme, the direction of travel from the Government has been to reduce the value of Access to Work packages. Will the Secretary of State commit now to expanding the funding for the programme as part of the wider Work and Health</i></p>

	<p><i>initiative rather than simply saying that the Government will look at enhancements? The evidence has been available for years.”</i></p> <p>The Secretary of State for Work and Pensions, David Gauke MP (Conservatives, South West Hertfordshire) responded by saying:</p> <p><i>“Let us remember what we are already delivering. The hon. Lady refers to Access to Work. Well, the budget of Access to Work—the expenditure of Access to Work—increased by 8% last year. We have in place the personal support package, helping people, where we are spending £330 million over the next four years. Let me be clear as to how we approach this on this side of the House. We recognise that there will be some disabled people and people with health conditions who will not be able to work, and we need to continue to support those people—it is worth noting that we spend record amounts on benefits for disabled people. However, there are also very many people who want to work, and we are determined to do everything we can to support them, whether that is by using our capabilities in the welfare system and the health system or working with employers, because we want to put work at the centre of this.”</i></p> <p>Chair of the APPG on Deafness, Jim Fitzpatrick MP (Labour, Poplar and Limehouse) asked the Work and Pensions Secretary, David Gauke MP:</p> <p><i>“I thank the right hon. Gentleman for his statement and welcome the passage in which it sounds as though he will introduce significant improvements to the Access to Work programme. Does that include abolishing or raising the cap on support for deaf people that was introduced in March 2015?”</i></p> <p>Mr. Gauke responded:</p> <p><i>“We continue to review that matter. We have certainly received representations on that point, and we continue to look at the evidence.”</i></p> <p>To read the statement in full, please click on the link on the left.</p>
<p><u>Written question on what assessment the Government has made of the willingness of employers to recruit deaf employees and of the Access to Work scheme</u></p>	<p>Lilian Greenwood MP (Labour, Nottingham South) has asked “Secretary of State for Work and Pensions, pursuant to the Answer of 17 October 2017 to Question 107411 on Social Security Benefits; Disability, what assessment his Department has made of the effect on willingness of employers to recruit deaf employees of the Access to Work scheme not meeting the cost of workplace support beyond an employer's obligation to make reasonable adjustments under the Equality Act.”</p> <p>Minister for Disabled People, Health and Work, Sarah Newton MP's response (Conservatives, Truro and Falmouth):</p> <p><i>“Employer willingness to address the cost of workplace support beyond an employer's obligation to make reasonable adjustments under the Equality Act is discussed in Paras 3.1.12 to 3.1.14 of The Equality Analysis for the future of Access to Work, published in May 2015, which can be found here:</i></p> <p><i>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/426416/future-of-access-to-work-equality-analysis.pdf”</i></p>

<p><u>Written question on what estimate the Government has made of overspend and underspend in the Access to Work scheme in the last three years</u></p>	<p>Lilian Greenwood MP (Labour, Nottingham South) has asked “the Secretary of State for Work and Pensions, what estimate he has made of the amount of (a) overspend and (b) underspend in the Access to Work scheme in each of the last three years for which figures are available.”</p> <p>Minister for Disabled People, Health and Work, Sarah Newton MP’s response (Conservatives, Truro and Falmouth):</p> <p>“Access to Work is a demand led scheme and we look to meet that demand from a broader financial envelope rather than have a fixed budget. As the amount spent reflects the number and nature of those demands we do not routinely publish forecast spend.</p> <p>The amount spent on AtW in each of the last 3 years is set out below</p> <p>Spend on the Access to Work Scheme</p> <table data-bbox="475 920 1350 1111"> <tr> <td>2014/15</td> <td>2015/16</td> <td>2016/17</td> </tr> <tr> <td>Total Access to Work programme spend</td> <td>£97.0m</td> <td>£96m</td> <td>£104m</td> </tr> <tr> <td>Associated admin costs</td> <td>£8m</td> <td>£7.0m</td> <td>£8m</td> </tr> <tr> <td>Grand total</td> <td>£105m</td> <td>£103m</td> <td>£112m”</td> </tr> </table>	2014/15	2015/16	2016/17	Total Access to Work programme spend	£97.0m	£96m	£104m	Associated admin costs	£8m	£7.0m	£8m	Grand total	£105m	£103m	£112m”
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<p><u>Written question on what estimate the Government has made of the cost of increasing the Access to Work cap</u></p>	<p>Lilian Greenwood MP (Labour, Nottingham South) has asked “the Secretary of State for Work and Pensions, pursuant to the Answer of 17 October 2017 to Question 107411 on Social Security Benefits: Disability, what estimate his Department made of the cost of increasing the Access to Work cap to (a) two-times national average earnings, (b) two and a half-times national average earnings and (c) three times national average earnings.”</p> <p>Minister for Disabled People, Health and Work, Sarah Newton MP’s response (Conservatives, Truro and Falmouth):</p> <p>“The Equality Analysis for the future of Access to Work, published in May 2015, includes estimated savings over 2014/15 for cap levels including double the average salary. See Table D here:</p> <p>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/426416/future-of-access-to-work-equality-analysis.pdf</p> <p>The information requested in questions (b) and (c) is not readily available and to provide it would incur disproportionate cost.”</p>															
<p><u>Written question on the steps the Government is taking to achieve its target of 1 million more disabled people</u></p>	<p>Dan Jarvis MP (Labour, Barnsley Central) asked “the Secretary of State for Work and Pensions, pursuant to the Answer of 11 July 2017 to Question 3585, on disability: employment, what steps his Department is taking to achieve its target of 1 million more disabled people in work over the next 10 years.”</p> <p>Minister for Disabled People, Health and Work, Sarah Newton MP’s response (Conservatives, Truro and Falmouth):</p>															

<p><u>in work over the next ten years</u></p> <p><u>Written question on how the Government plans to report its progress on getting 1 million more disabled people into work over the next ten years</u></p>	<p><i>“We remain committed to improving employment outcomes for disabled people. The manifesto commitment to get one million more disabled people in work over the next ten years gives us a clear, ambitious, and time-bound goal.</i></p> <p><i>The employment rate of disabled people is 49% – up 4.7 percentage points since 2014. There are 3.5 million disabled people in work – an increase of over 530,000 since 2014. We know that there is much more that needs to be done, so that everyone who can work is given the right support and opportunities to do so. Today (November 30th 2017) the Secretary of State for Health and the Secretary of State for Work and Pensions have published our response to the Work, Health and Disability Green Paper consultation in Improving Lives: the Future of Work, Health and Disability. This sets out our vision for a 10 year programme of reform, the actions we have taken since the Green Paper and our immediate next steps.</i></p> <p><i>We will track the number of disabled people in employment and publish a statistical update annually. We will also consider other useful statistical indicators, which give more information about how disability and employment change over this time period, and inform our actions.”</i></p> <p>Dan Jarvis MP (Labour, Barnsley Central) asked <i>“the Secretary of State for Work and Pensions, pursuant to the Answer of 11 July 2017 to Question 3585, on disability: employment, how his Department plans to report its progress on getting 1 million more disabled people into work over the next 10 years.”</i></p> <p>Minister for Disabled People, Health and Work, Sarah Newton MP’s response (Conservatives, Truro and Falmouth):</p> <p><i>“We remain committed to improving employment outcomes for disabled people. The manifesto commitment to get one million more disabled people in work over the next ten years gives us a clear, ambitious, and time-bound goal.</i></p> <p><i>The employment rate of disabled people is 49% – up 4.7 percentage points since 2014. There are 3.5 million disabled people in work – an increase of over 530,000 since 2014. We know that there is much more that needs to be done, so that everyone who can work is given the right support and opportunities to do so. Today (November 30th 2017) the Secretary of State for Health and the Secretary of State for Work and Pensions have published our response to the Work, Health and Disability Green Paper consultation in Improving Lives: the Future of Work, Health and Disability. This sets out our vision for a 10 year programme of reform, the actions we have taken since the Green Paper and our immediate next steps.</i></p> <p><i>We will track the number of disabled people in employment and publish a statistical update annually. We will also consider other useful statistical indicators, which give more information about how disability and employment change over this time period, and inform our actions.”</i></p>
<p><u>Written question on what estimate the Government has</u></p>	<p>Shadow Minister for Disabled People, Marsha De Cordova MP (Labour, Battersea) asked:</p>

<p><u>made of the proportion of new Employment and Support Allowance claimants who have moved into work</u></p>	<p><i>“The Secretary of State for Work and Pensions, what estimate he has made of the proportion of new Employment and Support Allowance claimants who have moved into work as a result of the removal of the Work-Related Activity Group Addition of £29.05 per week in April 2017.”</i></p> <p>Minister for Disabled People, Health and Work, Sarah Newton MP’s response (Conservatives, Truro and Falmouth):</p> <p><i>“The information requested is not readily available and could only be provided at disproportionate cost.</i></p> <p><i>The latest information to May 2017 on the number of Employment and Support Allowance (ESA) claimants by phase of claim is published and available at:</i></p> <p>https://stat-xplore.dwp.gov.uk/</p> <p><i>Guidance for users is available at:</i></p> <p>https://sw.stat-xplore.dwp.gov.uk/webapi/online-help/Getting-Started.html”</p>
<p><u>Written question on what steps the Government is taking to reimburse Employment and Support Allowance claimants who had payments miscalculated</u></p>	<p>Chair of the Work and Pensions Select Committee, Frank Field MP (Labour, Birkenhead) has asked:</p> <p><i>“The Secretary of State for Work and Pensions, what steps his Department is taking to reimburse claimants of Employment and Support Allowance who were subject to payment miscalculations between 2011 and 2015 when those people were moved from incapacity benefit and if he will make a statement.”</i></p> <p>Minister for Disabled People, Health and Work, Sarah Newton MP’s response (Conservatives, Truro and Falmouth):</p> <p><i>“We are aware that some individuals have been underpaid when moving to Employment and Support Allowance. The department has started to put this right and will bring these plans to parliament.”</i></p>

Hearing devices

Click on link for source

<p><u>Written question on when the carina hearing device will be available on the NHS</u></p>	<p>Jim Shannon MP (DUP, Strangford) has asked “<i>the Secretary of State for Health, when he expects the new carina hearing device to be available on the NHS.</i>”</p> <p>Minister for Public Health and Primary Care, Steve Brine MP’s response (Conservatives, Winchester and Chandler’s Ford):</p> <p><i>“The carina hearing device is a cochlear implant which is currently available through the National Health Service. It is only considered to be suitable for a small number of patients, and is available through a number of auditory implant centres including Oxford, Sheffield and Cambridge.</i></p> <p><i>The NHS England Specialised Ear Surgery and Ophthalmology service specification covers cochlear implants and implantable devices:</i></p> <p>https://www.england.nhs.uk/commissioning/spec-services/npc-crg/group-d/d06/“</p>
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NHS Continuing Care

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<p><u>Debate on NHS Continuing Care</u></p>	<p>Chair of the Science and Technology Committee, Norman Lamb MP (Liberal Democrats, North Norfolk) introduced a debate which he secured on NHS Continuing Care. He said:</p> <p><i>“I suspect that I will not be alone in the House in having concerns about how NHS continuing care is operating these days. Concerns about the process will have been raised by the constituents of many hon. Members on both sides of the House. It is worth recognising that the process of NHS continuing care has always been fraught because a lot of money often turns on the outcome, and the families affected are often going through a very difficult time as they cope with a loved one with serious care needs. However, particular things are happening in the system now that seem to justify our spending some time on considering whether the current situation is acceptable.</i></p> <p><i>As the NHS and the care system struggle with what I think are impossible finances, some wholly unacceptable practices are emerging around the country, some of which I want to deal with this evening. First, it is clear that a postcode lottery is emerging, with no democratic legitimacy at all. The massive variation in the acceptance rate for applications for NHS continuing care has no apparent justifiable explanation. The BBC’s “Inside Out East” programme made a freedom of information request about the period between July 2016 and July 2017. It found that Birmingham South Central clinical commissioning group rejected 75% of those assessed for NHS continuing care, whereas the figure for Tameside and Glossop CCG was just 5%. Given that this is public money, how can we possibly justify such an extraordinary variation without any democratic legitimacy? The BBC’s figures also showed that 73% of people in my constituency were turned down, but that the figure for Manchester was just 17%. These are not odd examples—there are enormous variations across the</i></p>
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country. I would be grateful if the Minister could explain how these extraordinary variations are happening and what she and the Government intend to do about them.”

He continued that:

“There are a number of cases around the country in which the costs of packages have been capped, with top-ups required from relatives. A growing number of clinical commissioning groups are applying a cap to what they will pay for home support packages above the cheapest care home alternative. That is really insidious. At the extremes, it is reasonable to recognise the pressures on public finances but, as the BBC reported on “You and Yours”, 19 CCGs refused to pay for home care packages if the costs were 10% higher than the costs of a care home. There are many cases in which couples who may have been married for decades are suddenly forcibly separated. What are we doing? That is inhuman, and, as I have said, it breaches a human right—the right to a family life.”

Gareth Snell MP (Labour, Stoke-on-Trent Central) interjected and said:

“I congratulate the right hon. Gentleman on securing this debate on a very important subject. I have encountered cases in my constituency in which people have been delayed from leaving hospital because an argument is raging between the local authority and the CCG about who is ultimately responsible for payment, partly because the CCG is encouraging people to opt for cheaper care home provision even if that is not what they want. Has the right hon. Gentleman come across similar cases in the course of his research?”

Norman Lamb MP (Liberal Democrats, North Norfolk) responded:

“Depressingly, I have. Earlier this evening, when I was giving the Speaker’s lecture, I made the case that we need, ultimately, a pooled budget for both health and care to stop these awful arguments between the health and social care silos.

Parliamentary Under Secretary of State for Health, Jackie Doyle- Price MP (Conservatives, Thurrock) responded to the debate saying:

“Decisions about NHS continuing healthcare are important and have a big impact on people’s lives, which is why it is right that there is a careful and considered decision-making process in place, which must take into account each individual’s care and support needs. My officials are currently working on updating the NHS continuing healthcare national framework, which is the national guidance that underpins the system. That will help health and social care professionals across the country to apply the framework more consistently and effectively, and improve the experience for individuals. We are working with NHS England, local authorities and key stakeholder organisations such as

	<p><i>the Continuing Healthcare Alliance and other charities on this update, to ensure that we draw on the full range of experience and knowledge. Members of the public with experience of NHS continuing healthcare have also made a valuable contribution to this process.</i></p> <p><i>I would like to reassure the House that this update to the national framework will not affect eligibility for NHS continuing healthcare, or the extent of the service provided by the NHS. Instead, the update aims to clarify the process and improve outcomes for patients, carers and their families, and those working in the health and care system. The Department will publish this update to the national framework in the new year. However, we understand that these changes alone are not enough to deliver all the necessary improvements, particularly on issues such as the variation in eligibility decisions that the right hon. Gentleman highlighted. That is why we are working closely to support NHS England with its NHS continuing healthcare improvement programme.”</i></p> <p>To read the debate in full, please click on the link on the left.</p>
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Disability impact assessments

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<p><u>Oral question on whether the Government will carry out a full impact assessment of social security policies relating to disabled people</u></p>	<p>Shadow Minister for Disabled People, Marsha De Cordova (Labour, Battersea) has asked <i>“this Sunday, 3 December, is the United Nations International Day of Persons with Disabilities. So far, the Government have refused to carry out a cumulative impact assessment of their social security policies on people living with a disability. Will the First Secretary now mark this day by doing the right thing for disabled people and carrying out a full cumulative impact assessment? “</i></p> <p>First Secretary, Damian Green MP’s response (Conservatives, Ashford):</p> <p><i>“I am sure the hon. Lady, who has great expertise in this field, will know that this Government are spending £90 billion on disability benefits. More to the point, we are being more successful than ever before in giving disabled people a degree of independence. Hundreds of thousands more disabled people are in work than have ever been before. We have a plan to have an extra million in work over the next 10 years. That is an extremely important and practical way to improve the lives of hundreds of thousands of disabled people. That is what this Government are doing, and that is what we will continue to do.”</i></p>
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Parliamentary terms

Early Day Motion (EDM)

Early Day Motions are formal motions for debate submitted by MPs in the House of Commons. There is usually no time available to actually debate an EDM, but they are useful for drawing attention to specific events or campaigns and demonstrating the extent of parliamentary support for a particular cause or point of view. MPs register their support by signing individual motions.

Oral Parliamentary Question (OPQ) and Written Parliamentary Question (WPQ)

Parliamentary Questions are used by both MPs and Peers to question Ministers in the House of Commons and the House of Lords. They are used to seek information, and Ministers are obliged to explain and defend the work, policy, decisions and actions of their departments, oral questions can also be used to make political points. Parliamentary questions are a vital tool in holding the Government to account. The Prime Minister answers oral questions from the House of Commons every Wednesday at midday.

Debates

Both the House of Commons and the House of Lords hold debates in which Members discuss government policy, proposed new laws and current issues. All debates are recorded in a publication called 'Hansard' which is available online or in print.

All-Party Parliamentary Group (APPG)

All-Party Parliamentary Groups (APPGs) are informal groups composed of politicians from all political parties. They provide an opportunity for cross-party discussion and co-operation on particular issues. All-party groups sometimes act as useful pressure groups for specific causes helping to keep the Government, the opposition and MPs informed of parliamentary and outside opinion.

Select Committees

House of Commons Select Committees exist to scrutinise the work of government departments. Most committees have about 11 members and reflect the relative size of each party in the Commons. They conduct enquiries on a specific issue, and gather evidence from expert witnesses. Findings are reported to the Commons, printed, and published on the Parliament website. The Government then usually has 60 days to reply to the committee's recommendations.

Written ministerial statements

Government ministers can make written statements to announce:

- The publication of reports by government agencies
- Findings of reviews and inquiries and the government's response
- Financial and statistical information
- Procedure and policy initiatives of government departments

Private Members' Bills

Private Members' Bills allow backbench MPs or Peers to introduce their own legislation. There are three types of Private Members' Bills introduced into the House of Commons:

- **Ballot Bills:** A ballot is held at the beginning of each parliamentary year the 20 MPs whose names come out top are allowed to introduce legislation on a subject of their choice.
- **Ten Minute Rule Bills:** The sponsoring MP is given a slot in which they may make a speech lasting up to 10 minutes in support of his or her bill
- **Presentation Bill:** a Member is not able to speak in support of it and it stands almost no chance of becoming law