



Department
for Work &
Pensions



Government
Social Research

The experience of Additional Work Coach Support

Findings from qualitative interviews with customers

May 2025

DWP research report no. 1093

A report of research carried out by IFF Research on behalf of the Department for Work and Pensions.

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First published May 2025.

ISBN 978-1-78659-833-2

Views expressed in this report are not necessarily those of the Department for Work and Pensions or any other government department.

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Executive summary

This report outlines the qualitative findings from a larger mixed-method study evaluating Additional Work Coach Support (AWCS).

AWCS is a policy which gives Universal Credit (UC) health journey customers and Employment and Support Allowance (ESA) customers additional appointment time with a work coach. It gives work coaches more time to understand health related barriers to work, provide relevant signposting to address barriers, and ultimately move customers towards or into work.

Barriers to work and support needs

The majority of customers in receipt of Additional Work Coach Support (AWCS) had some experience of working but most had left their last job in the past few years due to a deterioration in their health, which had left them unable to return to work.

Generally, health conditions were the biggest barriers for customers in returning to work, with many reporting that their health ruled out work now and in the future.

Customers had a variety of health conditions, and many customers expressed concern about how they would manage their health condition whilst working.

Customers also worried about whether employers would be understanding of their health conditions, and how their needs would be accommodated in the workplace.

Changes in customers' health conditions often meant they could no longer carry out the tasks required in their previous role, and many were considering retraining in a role that would be better suited to their health needs. However, there was a low awareness of the options that were available to them and how to navigate the process of retraining. Customers often had a low level of basic skills, for example digital skills, which added to the complexity of finding opportunities for retraining for a new, more suitable role.

Confidence was also a large barrier to returning to work, particularly for those who had been out of work the longest.

Most customers were not receiving any formal employment support outside of Jobcentre Plus (JCP), however many relied on informal support from friends and family.

Customers who had not received prior support from JCP before starting contact with their work coach did not have strong views or expectations on the support that they might be offered. Customers often had general negative perceptions of the Jobcentre, irrespective of whether they had prior experience of JCP. Concerns that the Jobcentre would force them into any work -regardless of their condition and capabilities- were common, though this was not generally experienced in reality.

Overall experience of Additional Work Coach Support

When customers were first contacted about Additional Work Coach Support (AWCS), it was not always clear to them what specific support was being offered. However, customers said work coaches tried to ease concerns they had about the support, and provide further information at the earlier appointments. Generally, customers were happy with the length and frequency of their appointments, and most found the format flexible to their needs. The ability to attend appointments via telephone or video was seen as a significant improvement compared to their expectation that they would need to attend in-person.

Given the varied circumstances amongst the customer groups, there were differing expectations and concerns. Concerns mainly centred around being forced into work and the impact the support would have on their benefit payments. Despite these concerns, many said the support was offered at the right time. This was often because they were either ready to return to work or were keen to do further training in preparation for returning to work. Those who were not looking for support commonly said they approached the support with an “open mind” about what would be offered. They were keen to engage as they hoped to find support with their health problems and benefit entitlements.

It should be noted that whilst AWCS was designed to be structured differently for the different health journey customer groups, in reality, work coaches took a more flexible approach to delivering the support. Generally, customers felt the support through AWCS recognised, and was tailored to, their current circumstances and health needs. Customers further away from work often felt their appointments were a simple, short “check-in” to discuss their health condition and wellbeing, rather than strictly about work. This was not seen as a problem among those who did not feel ready to discuss moving back into work. There were, though, a few customers who were closer to work who experienced short, irregular meetings which they felt held them back from progressing.

The added flexibility and personalisation of appointments appeared to contribute to a good working relationship with work coaches. The majority of customers said they had developed a positive relationship with their work coach. This was often down to the additional time allowed during sessions for listening to customers’ social, emotional and mental health support needs, or otherwise as a result of tailored signposting to wider support and opportunities. Customers who had more than one work coach, and those who felt their work coach lacked specific knowledge or skills, had a more negative relationship with their work coach.

Support provided through Additional Work Coach Support

Customers tended to feel comfortable sharing their physical and mental health concerns with their work coach. Work coaches supported customers with their physical and mental health barriers by signposting and referring them to other support, including DWP programmes (such as Access to Work). These referrals were usually tailored based on a customers' health, rather than their health journey group and the associated expectations around finding work.

Customers often viewed traditional support from the Jobcentre to be focused on just finding employment, and some felt they were not ready for this. Work coaches did also support customers with the other barriers to work they faced, including helping them to address their financial situation, lack of access to technology, and confidence around work. This wider support from work coaches was welcomed by customers.

Most customers felt that work coaches were able to get to know their needs and provide appropriate support. However, some who felt they were ready to find work immediately expected more proactive support. They wanted targeted help in upskilling, finding appropriate jobs, and preparing and applying for jobs that they could manage alongside their condition. This group tended to find work search support too general to be helpful.

Most customers were still having contact with their work coach and receiving support at the time of interview. However, there were examples of customers who had stopped contact with their work coach in both the pre-work capability assessment and limited capacity for work groups (where attendance at appointments is mandatory) and in the limited capacity for work and work-related activity group (where attendance is voluntary). Reasons for this included: further deterioration of health making support into work no longer relevant; achievement of positive outcomes meaning support was no longer necessary; or a change of circumstances meaning customers were no longer in a group where attending regular work coach appointments was mandatory.

Outcomes of Additional Work Coach Support

Many customers saw improvements to mental health and wellbeing because of the consistent, empathetic support they received from their work coach. This was often simply due to attending appointments, or through work coaches signposting customers to other mental health support. However, for those who saw their physical health as a barrier to work, there was little change in their ability to manage their physical health condition, though support with managing physical health conditions is not part of the work coach role.

Some customers also reported improved financial wellbeing. This stemmed from work coaches giving general advice about their benefit claim, guidance with applications, and signposting to debt advice services.

Another outcome seen was improvements in motivation to find work, and overall confidence. This was associated with work coaches delivering personalised support and giving customers a greater understanding of the types of support that might be available to them in the future when they felt closer to work.

Whilst feeling meaningfully closer to work was an outcome for a minority of customers, some customers gained work-related skills from Additional Work Coach Support (AWCS) if their work coach made referrals that felt tailored. Customers tended to report improved skills where they were signposted to courses or volunteering opportunities that felt relevant to career interests they had expressed. However, this was not always the case. There were customers who received advice and referrals about developing new skills or re-training that they felt was generic, and therefore unhelpful.

Successfully starting work was an outcome for a small number of customers. Advice about flexible and part-time jobs, whilst maintaining benefits, was an important factor in taking this next step. For those who were able to successfully start work, completing courses recommended by their work coach, taking on advice about suitable jobs and returning to work part-time without losing benefits were positive drivers. However, many customers still felt work was not an option for them at this time without a change in their health.

Conclusions

Customers across the groups came to their work coach with complex barriers to work. For many, especially in the pre-WCA group, their circumstances were also recently changed for the worse, and they were struggling to cope with the practical, financial and social problems that come about from deteriorating health and losing a job, often in quick succession.

Customers often had very limited support networks outside of JCP to draw on. This was particularly the case for pre-WCA customers whose change in circumstances was more recent than for other groups. Hence work coaches delivering AWCS were often filling a void.

JCP was not the obvious place for customers to look for help to overcome the barriers they faced to working. Customers were worried that their work coach could force them into inappropriate employment or that contact would result in their benefit entitlements being reduced. Even customers with very little or no prior contact held strong negative associations with JCP.

Work coaches successfully managed to overcome negative perceptions of JCP. In most cases AWCS customers had come to view their work coach as a supportive presence. Work coaches achieved relationships that customers found empathetic and tailored.

Work coaches provided well-received referrals to other organisations to support with issues that were not directly work-related. Customers often valued work coaches' advice and signposting to support to help address a wide range of problems: mental health issues, social isolation, addiction, financial advice, debt advice, housing support, and food banks.

Specific work-related support received a mixed reception from customers. In some cases they felt this was because work coaches did not have the skills to provide support that was sufficiently tailored. There may be a need to improve training and resources for work coaches to deliver work-related support that feels appropriate to customers with health conditions.

Customers felt that simply speaking to a work coach on a regular basis helped to improve their wellbeing. This was often simply due to attending appointments with someone who appeared empathetic and understanding of their situation, or through work coaches signposting customers to other mental health support.

Employment outcomes were experienced by a small minority, but a number of customers appeared to have taken steps that could move them closer to work. For some, the journey is likely to be a long one and these initial steps were quite small (such as just leaving the house on a regular basis).

Where customers felt the support was not helpful, these comments centred around a lack of consistency in the delivery of support or a perceived lack of tailoring. Not having contact with the same work coach consistently was viewed negatively, as building rapport with one individual was very important to customers. Although most customers did receive this, anything that could be done to ensure it is more often the case would improve perceptions of AWCS. There were also suggestions from some customers that support could be improved by greater work coach knowledge of the implications of some health conditions, or that having specialists in some complex health conditions may help with appropriate tailoring of support (both currently beyond the remit of the work coach role). Customers also rarely recalled being referred to other DWP programmes, and some suggested work coaches could enhance their practice by improving communications about the support available. Some customers also felt disappointed by what they perceived as poorly tailored referrals to skills and training courses.

Glossary

Term	Explanation
Additional Work Coach Support (AWCS)	Additional appointment time offered to Universal Credit health journey customers and Employment and Support Allowance customers.
Customer	This report refers to customers receiving Universal Credit or Employment and Support Allowance.
Employment Support Allowance (ESA)	ESA is a social security benefit for individuals unable to work due to a health condition or disability. It is based on National Insurance contributions and provides financial assistance and additional support to help individuals meet their basic needs and access necessary services while they are unable to work.
Health journey customer group	Additional Work Coach Support is for three health journey customer groups: <ul style="list-style-type: none"> • Pre-work capability assessment (pre-WCA) – Universal Credit or Employment and Support Allowance customers. • Limited capability for work (LCW) and work-related activity group (WRAG) – Universal Credit and Employment and Support Allowance customers, respectively. • Limited capability for work and work-related activity (LCWRA) and support group (SG) – Universal Credit and Employment and Support Allowance customers, respectively.
Household Support Fund	Support for essential living costs, such as energy bills, food, and essential items, delivered by local councils.
Jobcentre Plus (JCP)	JCP aims to help people of working age in Great Britain, who are in receipt of benefits, find employment.
Limited capability for work (LCW)	LCW is a term applied to Universal Credit customers. This is a group of customers who are limited by their physical or mental health condition and need to prepare for work in the future by taking part in work-related activities. However, they are not required to be available for or to start work as a condition of their benefit.
Limited capability for work and work-	LCWRA is a term applied to Universal Credit customers. This is a group of customers who are limited by their physical or mental health condition and it is not reasonable to require them to undertake work-related activity. This group have no work-

related activity (LCWRA)	related requirements in relation to their benefit claim. Customers in this group are entitled to a higher rate of benefit.
Mandatory participation	The health journey customer groups that are expected to undertake work related activity and for whom attendance at Jobcentre appointments, including Additional Work Coach Support (AWCS), is mandatory. They are the pre-work capability assessment (pre-WCA), limited capability for work (LCW) and work-related activity group (WRAG) customer groups.
Personal Independence Payment (PIP)	PIP is a social security benefit that provides a financial contribution to help individuals with long-term disabilities and/or health conditions to meet the additional costs related to their condition. PIP is based on the needs arising from a long-term health condition or disability rather than the condition or disability itself. PIP is not means-tested, is tax free and can be paid in addition to most other benefits received. Assessments for PIP involve a thorough evaluation of the individual's ability to perform various tasks and activities.
Support group (SG)	SG is a group of Employment and Support Allowance customers who are limited by their physical or mental health condition and it is not reasonable to require them to undertake work-related activity. This group have no work-related requirements in relation to their benefit claim. Claimants in this group are entitled to a higher rate of benefit.
Universal Credit (UC)	UC is a welfare benefit that supports individuals and families with their living costs, including those who have health conditions or disabilities. It is designed to replace several existing benefits, making the application and payment process more streamlined. For individuals with health conditions, Universal Credit considers their specific needs, and they may receive additional support or allowances based on their circumstances.
Voluntary participation	Customers in the Universal Credit limited capability for work and work-related activity (LCWRA) and Employment Support Allowance (ESA) support group (SG) who are not expected to undertake work-related activity as a condition of their benefit. For customers in these groups all attendance at appointments and participation in Additional Work Coach Support (AWCS) is voluntary.
Work Capability Assessment (WCA)	WCA is an assessment to find out how much a person's health condition or disability affects their ability to work, which determines the amount of Universal Credit or Employment and Support Allowance they receive. It assesses what a person can

	do, as well as what they cannot do. Once an individual received a WCA decision they are moved into the appropriate customer group.
Work coach	A work coach is a DWP professional who supports individuals in their employment journey. They provide guidance, assistance, and personalised advice to jobseekers, helping them develop job search skills, explore opportunities, and create tailored action plans for finding suitable employment. Work coaches may also facilitate access to training, education, and support programmes to enhance employability.
Work related activity group (WRAG)	WRAG is a group of Employment and Support Allowance customers who have limits on things they can do, including working, because of their illness, health condition or disability. Customers in this group are required to attend regular appointments with their work coach and undertake work-related activities to prepare for work in the future.

Abbreviations

Abbreviation	In full
AWCS	Additional Work Coach Support
CV	Curriculum Vitae
DEA	Disability Employment Advisor
DWP	Department for Work and Pensions
ESA	Employment and Support Allowance
GP	General Practitioner
IPES	Intensive Personalised Employment Support Programme
IT	Information Technology
JCP	Jobcentre Plus
LCW	Limited capability for work
LCWRA	Limited capability for work and work-related activity
NHS	National Health Service
PIP	Personal Independence Payment
SG	Support group
UC	Universal Credit
WCA	Work Capability Assessment
WHP	Work and Health Programme
WRAG	Work-related activity group

1. Introduction

This report outlines the qualitative findings from a mixed-method study evaluating Additional Work Coach Support (AWCS). These findings explore the experiences of those in receipt of AWCS, the support they have received and the outcomes they have experienced. This chapter covers the background of the project, evaluation objectives and research questions.

Project background and context

Health customers are a priority for the government's plans to move economically inactive people back into the workforce. There are over 3 million Universal Credit (UC) and Employment and Support Allowance (ESA) health journey customers.

Evidence shows that with regular support, health journey customers can move towards and into work.¹ Through AWCS, health journey customers receive additional appointment time with a work coach. This additional support aims to give work coaches more time to understand customers' barriers to work and provide or signpost to appropriate support, to ultimately move customers towards work.

There are three health journey customer groups:

- Pre-work capability assessment (pre-WCA) – Universal Credit or Employment and Support Allowance
- Limited capability for work (LCW) and work-related activity group (WRAG) – Universal Credit and Employment and Support Allowance, respectively.
- Limited capability for work and work-related activity (LCWRA) and support group (SG) – Universal Credit and Employment and Support Allowance, respectively.

Attending AWCS appointments is normally mandatory for customers identified as eligible and suitable for the support in two health journey customer groups. This includes the pre-WCA group who were either waiting to have a Work Capability Assessment, or waiting for the outcome of their assessment. It also includes the LCW and WRAG customer groups who had been assessed as having health conditions that limit their ability to work, but were expected to prepare for work in some way. Work coaches assess eligibility and suitability as part of a conversation with

¹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1001785/evaluation-of-the-personalised-support-package.pdf

customers about their current health and wider circumstances during existing, regular (normally every three months) appointments with customers in these groups. AWCS policy states that suitable customers in these groups should receive 30 minutes of support per fortnight from their work coach, compared to 22 minutes every three months prior to the roll out of AWCS, with attendance at these appointments normally mandatory (in line with normal conditionality for their customer group). This frequency is reviewed for pre-WCA customers when a decision is made and they move into another customer group.

For customers in the LCWRA and SG health journey customer groups, AWCS appointments are offered on a completely voluntary basis. This group had been assessed as having health conditions that limit their ability to work and prepare for work. AWCS policy states that customers that take up AWCS in these groups could receive 30 minutes of support from their work coach per month, compared to before AWCS where they did not widely have access to regular support.

Through additional support from a work coach, AWCS aims to help more health journey customers move towards and into paid work, by helping individuals to develop work search skills and improve their confidence, motivation and attitudes towards work.

Evaluation objectives

The phased rollout of AWCS across Great Britain created an opportunity to evaluate the policy to help identify ‘what works’ for supporting disabled adults and those with long-term health conditions towards employment. This evaluation paired qualitative in-depth discussions with a longitudinal survey to measure customers’ experience of AWCS.

The evaluation aimed to:

- Understand the implementation and delivery of AWCS.
- Explore the employment barriers faced by each health journey group, and the extent to which AWCS helped them overcome these barriers.
- Measure the impact and outcomes of AWCS on customers’ wellbeing, progress towards employment, and work preparation behaviours.

Research questions

This qualitative component of the evaluation aimed to answer the following questions:

- How was AWCS communicated to customers, and what were their expectations or goals for the support?
- What were customers’ experiences of receiving AWCS in practice? Particularly in terms of frequency, length and location of appointments.

- To what extent did customers feel comfortable discussing their health condition, and other barriers to work, with their work coach?
- What types of support were offered by work coaches under AWCS, and how was this viewed by customers? Particularly whether this was appropriately personalised to customers support needs.

Methodology

The wider evaluation paired qualitative in-depth discussions with a longitudinal survey to measure customers’ experience of AWCS. While this report only covers the qualitative element, results from the quantitative surveys will be synthesised with the qualitative element and reported in 2026.

As part of the evaluation, 90 in-depth qualitative interviews were conducted with UC health journey and ESA customers. The first phase of interviews took place in May 2024 (32 before the election pause) and continued in August/ September 2024 (58 following the election pause). Interviews were conducted through a mix of telephone and online video calls, to suit individual preferences.

The sample originally contained a mix of customers in the early (fewer than five appointments) and late (five or more appointments) stages of support to understand how, if at all, duration of work coach support influenced customer outcomes. However, as fieldwork was paused during the election period, most respondents were interviewed during later stages of support. The election pause also meant that some respondents had moved customer group between the sample being drawn and their interview.

Interviews were split between the three health journey customer groups eligible for AWCS (Table 1).

Table 1: Completed interviews per customer group

Customer group	Number of completed interviews
Pre-work capability assessment (pre-WCA)	20
Limited capability for work (LCW) and work-related activity group (WRAG)	30
Limited capability for work and work-related activity (LCWRA) and support group (SG)	40
Total:	90

The duration of claim varied between respondents, though the majority had claimed for at least 100 days (around 3 months). Of the 90 respondents interviewed, 57 had a claim length between 100 days and three years, 27 had a claim length over three years, and six had a claim length fewer than 100 days.

Most respondents reported having more than one health condition. Of the 90 respondents, the most commonly reported health conditions were those linked to social, emotional or mental health issues (63 respondents), followed by physical health conditions or disabilities (59 respondents) and learning difficulties or autism (18 respondents). Many respondents reported mental health issues resulting from their physical conditions.

Feelings about work prior to AWCS also varied between respondents. The majority of respondents felt they were unable to work now (68 out of 90). However, 36 of the 90 respondents thought they might be able to work in the future if their health condition or disability improved. A further 17 respondents felt they could return to work now if the right job was available or they had the right support. A small minority of respondents (5 out of 90) were working prior to AWCS.

About this report

The findings in this report are based on qualitative research.

Qualitative research aims to explore people's experiences in depth and to understand how and why issues occur and does not seek to be statistically representative.

2. Barriers to work and expectations of support

This chapter provides information on the situation of customers prior to receiving Additional Work Coach Support (AWCS). It describes their health situation, employment barriers and pre-existing support networks. It then summarises perceptions and expectations of Jobcentre Plus (JCP) and work coaches prior to receiving AWCS.

Overview

Customers participating in AWCS saw their health as the key barrier to entering work. However, many were also experiencing other barriers as well.

The recency of employment was linked to how achievable customers felt work was for them, and therefore their motivation to achieve it. Generally, pre-work capability assessment (pre-WCA) customers had the most recent employment experience but this was not always the case. Some pre-WCA customers had left employment some time ago, occasionally for reasons other than their health.

In the pre-WCA, limited capability for work (LCW) and the work-related activity group (WRAG) there were customers who felt ready to start work if they could find employment that would accommodate their health conditions. However, they were often unsure what opportunities might be available to them.

Those who had been out of work for longer (typically the limited capability for work and work-related activity (LCWRA) and support group (SG) customers) had more extensive concerns about their ability to work. They felt that their health, combined with a lack of recent work experience, meant that it would take them some time to be ready to work. Some LCWRA and SG customers felt their health condition ruled out the possibility of them ever working again.

The extent of support networks outside of Jobcentre Plus (JCP) varied considerably. Those in the pre-WCA group often had no other source of support.

Preconceptions of AWCS tended to be either negative or neutral. Even some of those with no prior experience of JCP or work coaches had a negative impression of the support available and felt they would be forced into unsuitable employment.

Barriers to work

As would be expected, customers participating in AWCS saw their health as the key barrier to entering work. The types of condition and relationship with their health varied between the three eligible groups:

- For most customers in the pre-WCA group, mental health issues were their primary condition. Of those with other primary conditions, many reported mental health issues as a secondary condition. For a few, their condition was new but it was more common to have a long-term health issue that had recently deteriorated. A few customers had had their condition for over 10 years but a change in their personal circumstances (for example a bereavement) led to them claiming Universal Credit (UC) or Employment Support Allowance (ESA).
- Customers in the LCW and WRAG groups had a wider range of health conditions and many had several conditions. Often, they had developed a secondary mental health condition as a result of their initial physical condition. Most had their condition for a number of years and had seen a deterioration in recent years. A few respondents were recovering from shorter-term issues, such as an injury or surgery.
- Many LCWRA and SG customers reported physical conditions or mobility issues as their primary health condition. Fewer respondents had mental health issues. Most had had their condition for a number of years and had seen a deterioration in their health over the last few years. A few were awaiting surgery.

For some, the unpredictable nature of their health condition made it challenging to envisage being able to balance it with work. Many were concerned employers would not be understanding of their fluctuating health, and this reduced their motivation to find work. This was particularly the case in the pre-WCA group where customers were sometimes experiencing a new condition, and were still learning how it affected them day-to-day.

Other than their health, the other barriers mentioned most commonly by customers were:

- Restrictions on the ability to travel with some stating that they could only really consider working from home;
- A lack of up-to-date IT skills (particularly in the context of needing to work from home and the IT proficiency that required);
- A need for retraining more generally as they could no longer return to the type of work that they had previously done;
- Caring responsibilities (for both children and other family members);
- Confidence in their own abilities;
- Criminal records (mostly applicable to those in the LCWRA and SG groups);
- Issues with substance misuse (again mostly applicable to LCWRA and SG).

Motivation and proximity to work

The eligibility group that customers were in gave some indication of the recency of their employment experience, but this was not always the case.

Of customers receiving AWCS, those in the pre-WCA group had the most recent experience of work. For some a deterioration in their health had led to them having to leave work and triggered their benefit claim. However, in other cases, customers had initially left work because they had been made redundant, had reached the end of a fixed-term employment contract, or they had new caring commitments, and then subsequently experienced a decline in their health. This meant some of this group had not worked for some years.

Among both the LCW and WRAG, and LCWRA and SG groups, nearly all customers had some previous experience of work, but the decline in their health that led to them leaving work typically occurred two or more years ago. Among the LCW and WRAG groups, a number of customers lost their most recent employment during the COVID-19 pandemic.

The recency of employment was then linked to how achievable customers felt work was for them and therefore their motivation to achieve it.

Generally, pre-WCA customers and those in the LCW and WRAG groups who had been out of work for shorter periods were keen to return to work once they could address their health situation. Some of this group (particularly pre-WCA customers) had a relatively recent diagnosis or deterioration in their health and handling this was their primary consideration. They felt they needed to come to terms with and/or understand their condition better before they could consider a return to employment.

“I can't promise that I will be reliable enough to turn up to work on any given day or any given shift, because I might just wake up in the morning and not want to get out of bed. It's one of those mental conditions that I know I've got it, and I can talk about it but I can't really control when it happens and when it doesn't happen.” (pre-work capability assessment customer)

There were also a few customers who felt other immediate barriers they were experiencing (including caring responsibilities, housing and substance dependency) would need to be addressed before they could consider a return to work. In addition, some pre-WCA customers felt that they would only be able to fully focus on finding work once their situation with their benefit claim was resolved i.e. after their WCA.

However, in pre-WCA, LCW and WRAG groups there were customers who felt ready to start work if they could find employment that would accommodate their health condition. Most of these assumed that they would need to move into a different type of employment and that this could necessitate retraining. Commonly customers with mental health conditions felt that they might need to look for a job they could do from home (whereas previously they had travelled to a workplace). Others felt they would need to move away from a manual job to a more desk-based one. However, customers were often unsure about the type of work that would be suitable for them and were worried that there might be a shortage of appropriate roles.

"I do need extra breaks and I do need to manage my time in my own way, and some jobs don't really manage that well." (pre-work capability assessment customer)

Those who had been out of work for longer had more extensive concerns about their ability to work. They felt that their health, combined with a lack of recent work experience, meant that it would take them some time to be ready to work. This group were more likely to lack confidence around navigating the modern labour market, partly related to a lack of the IT skills necessary to apply for jobs online. They also felt employers were less favourable to candidates who had been out of work for a while.

"I think companies are struggling to get past that [being out of work for 5 years], and I'm not getting interviews or getting called into places." (work-related activity group customer)

These types of views were particularly entrenched among LCWRA and SG customers. Some of this group felt their health condition ruled out the possibility of them ever working again.

"I have lost my confidence completely. If I go somewhere strange, I start getting panic attacks... There's nothing for me at all... No one would be able to employ me." (support group customer)

However, even among the LCWRA and SG groups, there were those who felt that work would be a possibility in the future, even if they envisaged a relatively long journey that would involve confidence-building and the development of new skills.

"I'd love to go back to work, I really would, yeah, but because of my health conditions that I've got I can't exactly go back in the job I used to do because I am too old for it". (limited capability for work and work-related activity customer)

Case Study 1: work-related activity group (WRAG)

Alisha has suffered with mild depression and anxiety since she was young. An incident at work in 2022 caused her condition to deteriorate. After a period of sick leave in 2023, she resigned from her job.

“My anxiety was so high, even coming out of the house was really difficult. I was not sure that I'd actually be able to do a job.” (work-related activity group customer)

Alisha would like to return to work, but she does not want to return to her previous role. She wants support with a change of career and to build her the confidence to return to work. Alisha had concerns about attending face-to-face work coach sessions, but her biggest concern was that she would be pressured into returning to the same role she resigned from.

AWCS provided Alisha with help with finances and accessing support for her mental health. Outside of Jobcentre Plus support, she has undertaken counselling and therapy sessions.

Case Study 2: support group

Peter has a degenerative back condition which has been deteriorating over the last five years and limits his mobility. As a result of his condition, Peter also suffers from depression. Peter had been in the same job for 30 years, but after managing his condition in work for a couple of years, he resigned from work as he was unable to safely carry out the tasks of the job. Peter feels he has been unemployable for around 3 years due to his worsening health conditions.

“I have lost my confidence completely. If I go somewhere strange, I start getting panic attacks. There's nothing for me at all. No one would be able to employ me.” (support group customer)

Peter initially accepted the voluntary support on offer as he wanted to ensure he was receiving the correct benefits. He is not receiving any other support.

Existing support networks

The extent of customers' support networks appeared to differ by health journey groups, and also how long they had been managing their health condition.

Pre-WCA customers were commonly receiving no additional support other than through JCP. As many were dealing with a recent diagnosis or a deterioration in their health, they had not yet had time to build up a support network. The few that did have additional support in place were most likely to be receiving it from community mental health services.

LCW and WRAG customers typically had some support in place. This was often informal support from friends and family. Some also mentioned receiving support from health professionals, in particular in relation to mental health.

LCWRA and SG customers had the most extensive networks in place. They also typically had some support from friends and family but also mentioned support from charities (in relation both to employment and financial wellbeing), peer-mentoring groups and social workers. They were slightly less likely to mention support from health professionals than the LCW and WRAG groups. This partly reflected the lower incidence of mental health support required by this group relative to the others, and sometimes that their main health condition had stabilised to the point where they did not need ongoing medical attention.

Perceptions of Jobcentre Plus (JCP) and work coaches prior to Additional Work Coach Support

Many AWCS customers had no prior contact with the Jobcentre and therefore did not have strong views or expectations of the support that would be provided. This was mostly the case for the pre-WCA customers but also applied to some LCWRA and SG customers.

“I'm new to all this and new to benefits.” (pre-work capability assessment customer)

LCW and WRAG customers were typically meeting with a work coach prior to AWCS. In addition, some LCWRA and SG customers had prior contact but often this had been very sporadic over the life of their claim and often there had been no contact for some time.

However, even among those with no prior experience, negative perceptions were common. Customers felt that work coaches would have a narrow focus on employment outcomes and would be likely to force them into a job that would be unsuitable for their health condition. Some mentioned that they expected work coaches to be very target-driven.

Among those who had prior experience, expectations of what AWCS would involve tended to be either negative or neutral and largely driven by the nature of their previous interaction. For example, this included having dealt with Jobcentre Plus staff who they felt had not understood their needs, or having received inconsistent support as a result of being unable to see the same work coach each time.

“You'd go in but you were talking to a stranger. It was quite frustrating because you were seeing different people. There wasn't consistency.” (work-related activity group customer)

“[In the past they were] very, very regimental...I was dreading signing on this time. They were only interested in getting you back to work as soon as possible... It was not about how I was or how I was going to get back into work, it was all about ways to take money off me.” (pre-work capability assessment customer)

3. Overall experience of Additional Work Coach Support

This chapter describes how customers were initially introduced to Additional Work Coach Support (AWCS) and what appealed to them about the support. The chapter then covers how customers managed and attended appointments with their work coach, how they felt about the appointments, and what factors enabled or inhibited positive relationships with work coaches.

Overview

The main concerns that customers had prior to starting AWCS were that their work coach would pressurise them to take up unsuitable employment or that it would result in a reduction to their benefit entitlements. A few were also concerned that they would be made to attend appointments face-to-face when this was something their health did not permit. In reality, these concerns were largely not experienced.

While there were specific guidelines around the length and frequency of AWCS for each customer group, in practice, work coaches took a more flexible approach to delivering the support. Generally, customers were happy with the length, frequency and format (for example, over the phone, online video calls, or in-person) of their appointments, and therefore felt the delivery of support reflected their current circumstances.

Appointments were sometimes as short as 10 minutes and customers often viewed the sessions as a regular “check-in” which they were grateful for.

Customers generally had a positive relationship with their work coach because of the consistent supportive presence they provided, facilitated by having additional appointment time.

The biggest barrier to a positive relationship with a work coach was a lack of consistency in the delivery of support (generally where customers were not always able to see the same work coach).

Introduction to Additional Work Coach Support

Being told about AWCS

Enrolment in AWCS followed different processes dependent on the different health journey groups and customers' existing contact with work coaches. For pre-work capability assessment (pre-WCA), limited capability for work (LCW) and work-related activity group (WRAG) groups, work coaches assessed eligibility and suitability as part of conversations about customers' health and wider circumstances. These conversations tended to be part of existing, regular appointments. Limited capability for work and work-related activity (LCWRA) and support group (SG) customers would usually either be sent a message via their Universal Credit (UC) journal or a letter to offer them a voluntary work coach appointment.

The differing enrolment approaches led to different initial experiences of contact about AWCS. Customers were usually contacted via their UC journal, a letter, or during another appointment at JCP. Others received a phone call about the support and a small number said they had been contacted via email or text message. Some customers for whom Additional Work Coach Support (AWCS) was voluntary (i.e. LCWRA SG customers) said they were told about AWCS support whilst making contact with JCP about other support.

Given the differing methods of contact, the amount of information provided during the introduction to AWCS support varied. Some customers reported the letter or email informing them of their first appointments had little further information about the support on offer. Those who received a phone call from their work coach ahead of their first AWCS appointment tended to be provided with more information about the support available.

"I wasn't really sure what to expect because at that point there was nothing on the letter about what a work coach was." (work-related activity group customer)

Initial appointments

Further information about AWCS was provided by work coaches at the first appointment, though the amount of detail varied.

Generally, customers for whom AWCS was mandatory (i.e. those in the pre-WCA, LCW and WRAG groups) were aware that they were required to take up the support.

The information provided by work coaches to customers where participation was mandatory at their first appointment was typically quite structured. They were usually told about the frequency of appointments, how they could be contacted by their work coach (for example, over the phone, online video calls or in-person) and what would be discussed at the appointments.

However, many said the early appointments were not used to discuss the specific support that was on offer overall, and how it would benefit them. Whilst the support

on offer was not always discussed in initial sessions, some work coaches asked about the type of work customers would like to do in the future. This suggests work coaches were using early sessions to decide which support would be most relevant.

Customers reported feeling reassured when more detailed descriptions of the support available were provided earlier on, and when work coaches made it clear that customers' journeys towards employment would progress at their own pace.

"I saw the work coach as guiding me back into work so to speak...once we met, he put my mind at ease and I knew I could trust him. I got the impression that he will help do anything to help me back into work but when I'm ready." (pre-work capability assessment customer)

"It just could have been better explained...My main concern was, what is a work coach and what are they going to be sort of offering... I was still a bit unsure after the first meeting." (work-related activity group customer)

When it was covered, customers were pleasantly surprised to hear that there was support and advice available around issues such as health and finances.

Customers for whom AWCS participation was voluntary (i.e. LCWRA and SG customers) were made aware that they were not required to take up the support. The coverage of their initial meetings tended to be less structured than for customers where participation was mandatory. Work coaches did not usually offer information on the specific types of support available but said they would provide regular meetings to explore if, and how, they could support the customer. As a result, some customers said the sessions were "informal check-in meetings" rather than structured sessions. Work coaches also tended to be more flexible in terms of when and how they would meet customers whose participation was voluntary.

Initial concerns and expectations

The main concern that customers had prior to starting AWCS was that their work coach would pressure them to take up unsuitable employment.

Many were also concerned that engaging with AWCS would result in a reduction to their benefit entitlements.

"The first time she called, I was expecting to get stripped of all my benefits...I was terrified." (limited capability for work and work-related activity customer)

Sometimes customers assumed that they would have to attend face-to-face meetings and were concerned about this (particularly if they had anxiety or agoraphobia). However, in practice, these concerns were largely not experienced.

Those in the pre-WCA group were most likely to be positive initially. As they had recently made a new claim, they sometimes assumed that the support would be around ensuring that they were receiving the right benefits (and this seemed a logical rationale for the work coach meetings). The fact that they were dealing with a new or newly worsened health condition and were less likely to have established support networks made them more open to embracing JCP support.

“At that time, I didn’t know what I wanted. I had a lot of stuff going on in my life...I went in with a very open mind.” (pre-work capability assessment customer)

LCW and WRAG customers, who were normally required to engage in work coach support prior to AWCS, were more likely to expect that AWCS would provide more specific support with skills development, re-training for new careers and managing potential employers.

As many of them had decided that work was unlikely to be a realistic possibility in the near future (or ever in some cases), LCWRA and SG customers were not as clear about the reasons for being contacted by a work coach. This then led some to be anxious about the purposes of AWCS (and enhanced a fear that it could result in their benefit entitlements being reduced).

Attending appointments

Length and frequency of appointments

Support offered through AWCS was designed to vary by customer group, both in terms of the amount and frequency of support. For instance, it was intended that the pre-WCA, LCW and WRAG groups received 30 minutes of support per fortnight and the LCWRA and SG groups 30 minutes per month (Table 2).

Table 2: Summary of Additional Work Coach Support by customer group

Customer group	Additional Work Coach Support (AWCS)	Requirement
Pre-work capability assessment (pre-WCA)	30 minutes per fortnight , compared to 22 minutes per quarter prior to AWCS. Support reviewed when decision on WCA made and they move into another customer group.	Mandatory
Limited capability for work (LCW) and work-related activity group (WRAG)	30 minutes per fortnight , compared to 22 minutes per quarter prior to ACWS.	Mandatory
Limited capability for work and work-related activity (LCWRA) and support group (SG)	30 minutes per month , compared to no support prior to AWCS.	Voluntary

While there were specific guidelines around the length and frequency of AWCS for each customer group, in practice, work coaches took a more flexible approach to

delivering the support. It appeared from customers' descriptions that the delivery of appointments was usually influenced by the customers' distance from work, their health condition, and their personal circumstances rather than their customer group.

Generally, customers were happy with the length, frequency and format (for example, over the phone/video-call or in-person) of their appointments. The delivery of appointments was seen to be flexible to their needs. No customers reported problems keeping track of their appointments.

Customers for whom AWCS was mandatory appreciated that their work coaches understood that their health condition could mean a need to re-schedule or cancel appointments at short notice. This eased concerns about receiving unfair sanctions.

Preferences for channel of appointments varied and generally the appointments were adapted to meet these preferences. Many commented that having telephone or video appointments was beneficial, as these customers found attending the Jobcentre in-person to be a cause of anxiety. Others liked the opportunity of speaking to someone face-to-face. Having flexibility in how to meet with their work coach was viewed as a positive way of recognising the differing effects of individuals' health conditions.

"It's just easier. I used to find that going to the Job Centre made my mental health worse. It's not a very friendly place to go to...you're just a number to them." (work-related activity group customer)

There were just one or two cases where customers felt that their work coach had opted for a telephone meeting, when they would have preferred face-to-face to both build rapport and give them a reason to leave the house.

"So I've ended up with phone conversations, which is ...OK. But it's just when you feel isolated it's nice to see somebody as well." (limited capability for work and work-related activity customer)

Pre-WCA customers reported contact with their work coach varying from upwards of 30 minutes a fortnight down to 10 minutes a month at different stages depending on their need. Regardless of the amount of time received, customers tended to feel that the frequency and amount of support was tailored to their needs. Some of the customers in this group who reported very poor health commented that the work coach had reduced the intensity and length of appointments while they waited the outcome of their WCA, and that they appreciated this.

LCW and WRAG customers often had shorter monthly appointments lasting around 20 minutes, after an initial phase of longer fortnightly interactions of around 30 minutes. Generally, customers were positive about the length and frequency of their appointments, especially those who felt further away from work. There were, however, a couple of customers in this group that reported having an irregular and unpredictable schedule of appointments. This led to customers feeling their appointments were too short or rushed. These customers were keen to return to work and said they would have liked more intensive support to find work.

LCWRA and SG customers mostly received 30 minutes of work coach support or less a month. Whilst support was designed to be monthly, many customers in this group met with their work coach less often (typically every 6 weeks).

Appointments were sometimes as short as 10 minutes and customers often viewed the sessions as a regular “check-in”. Given many customers in this group said their condition made it difficult for them to work at the moment, the length and regularity of appointments was also considered to meet their needs.

“Because I am ESA support group it could be at a slower pace that suits me and my health conditions. I felt supported straight away especially because of my health conditions.” (support group customer)

Some LCWRA and SG customers had initially received more support but had since moved down to less frequent appointments, and others reported they were no longer receiving AWCS. These customers either reported that they no longer had to see their work coach due to worsening health conditions, or that appointments had ended abruptly and they were unsure why.

Whilst less common in this group, some LCWRA and SG customers wanted proactive support to move closer to work and so were dissatisfied with the length and frequency of appointments. They expected more intense regular support from a work coach to help them achieve their goals, especially since they had opted-in to the support.

There were also a handful of customers who had limited contact overall with a work coach, having just a few short appointments.

“[After the first appointment] she phoned up a month later. Then she phoned up 6 weeks later, and then she never got back to me.” (limited capability for work and work-related activity customer)

Perceptions of work coach approach to support

Customers generally felt work coaches recognised their current circumstances and health needs. For those with complex health-related barriers to work, having a focus on wellbeing during appointments was viewed positively.

“The way the work coach interacts, friendly body language and very discrete and making you feel like you’re in the centre, everything’s tailored not generic, person centred.” (pre-work capability assessment customer)

Typically, customers felt the support was tailored to their needs. This was often linked to the rapport they had with their work coach, and feeling their work coach understood their health condition. Conversely, those who were less positive about the support being tailored stated it was often because it was generic and did not take into account their health condition.

“She was very understanding, very sympathetic. I told her that I was mentally ill and you know [had] all these problems. And she said, ‘well, right, I don’t think telling you to get a job right now is going to be of any help to you. You need to get help to get better’.” (pre-work capability assessment customer)

What customers and work coaches discussed at appointments tended to vary depending on how close the customer felt to employment, rather than their customer group. Customers closer to work tended to discuss the type of work they might look for, work preparation activities (for example, attending open days, reviewing job adverts shared by the work coach, and improving their CV and interview skills) and support for wider barriers to employment or health where necessary.

Customers closer to work said that discussions were relatively unstructured. Only a few customers could remember having a “work plan” or a “staged approach” for getting back to work. Support did not always meet expectations if customers wanted more intensive support to find appropriate upskilling opportunities and job openings.

Customers further away from work tended to recall meetings with their work coach featuring discussions about their wellbeing and changes to their health condition, rather than work-related goals. They also discussed the support customers could access for their health and wider barriers to employment. Customers appreciated the appointments being less work-centred because it allowed them to focus on smaller, more ‘manageable’ tasks initially.

Work coaches also encouraged these customers to take actions around improving their health and wellbeing. This included simple tasks such as getting out of the house and meeting up with a friend, as well as attending therapy, counselling or peer mentoring sessions, or contacting their GP.

“You know she doesn’t really mention work, it’s like I said before, it’s just a general phone call... there’s no pressure at all.” (work-related activity group)

Many of the customers further from work felt the support was tailored to their needs as it took into account the complexity of their health condition and the extent to which they could work.

The customer and work coach relationship

Enablers of a positive work coach relationship

Customers generally had a positive relationship with their work coach because of the consistent supportive presence they provided, by having additional appointment time. Nearly all customers felt that they received this. The other key enabler of a good relationship was signposting or referrals to other relevant support, though customers less commonly felt that they received this.

The key components of providing a consistent supportive presence were:

- **Flexibility:** Customers commented positively on the flexible nature of the support, in terms of the delivery of appointments and the type of support offered. Customers

appreciated that work coaches understood when they were not able to attend appointments, due to their health or other barriers. Customers also felt reassured that work coaches did not threaten them with benefit sanctions, which allowed them to focus on improving other aspects of their life before focusing on employment.

- **Understanding of needs:** Many customers felt that their work coach understood their needs. Customers appreciated that work coaches used the early sessions to discuss their general needs, such as health, wellbeing and wider barriers to employment, rather than immediately talking about job applications. This was particularly appreciated by pre-WCA customers who initially needed to focus on wider support to improve their health due to a recent diagnosis or deterioration, rather than work-related activities.

"It doesn't seem like general questions, she asked questions regarding my health, regarding what I'm doing, or what I maybe can do, it's like tailored for each person." (pre-work capability assessment customer)

- **Empathy:** Customers noted that empathy was a crucial skill for work coaches. Those who felt their work coach was empathetic reported that they felt listened to, which supported a strong and trusting relationship. Where customers received empathetic support from their work coach, this positive relationship developed regardless of whether the work coach helped them move closer to work.

"She was a lifeline for me, I thought she was amazing. Very understanding and caring and incredibly professional. I've been more comfortable sharing with her than with my friends and family." (pre-work capability assessment customer)

- **Consistent duration and intensity of support:** Those who had consistently seen the same work coach for longer appointments over several months had built stronger rapport and trust, which encouraged a more positive relationship. This was more common for customers where participation was mandatory who typically had longer and more frequent appointments.

The key ways in which work coaches delivered effective signposting or referrals in a way that led to a positive relationship were:

- **Working hard to understand individuals' specific context:** Beyond just building rapport, customers reported a positive relationship when they felt that work coaches used extra time to understand their wider circumstances and used this to signpost them to relevant support. For the pre-WCA group this often meant initially looking at options for health and wider (e.g. financial) support.
- **Making proactive recommendations to improve wellbeing:** For many customers, a positive relationship with their work coach was demonstrated by the work coach proactively making suggestions about support they could receive, focussing on the issues that were most pressing for the respondent first. This went beyond simply 'checking-in', by signposting to work search and health-related services.

- **Signposting to work-related support:** Several customers actively appreciated support with finding jobs and upskilling opportunities that helped address barriers to work.

Case Study 3: support group (SG)

Jon has had a complicated recovery from his second stroke leaving him housebound and unable to return to his past employment. He is an ESA support group customer and has been having regular meetings with the same work coach every 3 – 4 weeks over the phone.

Jon has built a good relationship with his work coach and feels they understand his health condition. Despite having been assessed as having limited capacity for work and work related activity, and the future state of his health currently unknown, Jon has continued to meet with his work coach monthly and is positive about the support. He values the regular support which focus on his health and how he is coping.

“It was good for me because dealing with one person all the time is quite a good thing because you get used to that one person and they know you as well, so it works both ways really.” (support group customer)

Barriers to a positive work coach relationship

The biggest barrier to a positive relationship with a work coach was a lack of consistency. Customers who perceived their work coach to have poor skills or knowledge to help them progress also reported worse work coach relationships. In some cases, customers reported that their own lack of capacity to engage with support had prevented a good relationship from developing.

A perceived lack of consistent support was typically seen to result from:

- **Changes in work coach:** A change in work coach was a consistent factor that customers felt led to a poor relationship. Customers felt that they then had to rebuild rapport and the work coach’s understanding of their circumstances, meaning support was less tailored.
- **Very short appointments:** More rarely, the length of appointment was linked to a poor relationship. A few customers felt their work coach’s lack of understanding was as a result of short, rushed appointments of 10 minutes or less. These customers did not consider the work coach had taken the time to ask questions or understand their situation, which again meant that support felt less tailored to their needs and circumstances.
- **A lack of work coach experience or skills:** Customers with severe mental health issues or specific conditions often felt their work coach did not have the skills to provide the appropriate support or tailor their communication style in the appointment to their needs. It is worth noting, however, that these skills were outside the remit of the work coach job role. There were also some, mostly LCWRA

and SG customers, who had a good rapport with their work coach but felt that their work coach did not have the skills to move them closer to work. This group were looking for more intensive support to help them find appropriate jobs, suitable employers and retraining or upskilling courses. A few mentioned low quality CV support.

- **Inappropriate work-related referrals:** Customers were more likely to report a poor relationship with their work coach if they received referrals to job search and upskilling support or opportunities that did not feel tailored. This included work coaches suggesting manual jobs when they had poor physical health, or referring customers to courses irrelevant to their interests and aims. This was more common among LCW and WRAG customers, where conversations were more likely to be focused on work and skills.

Low levels of customer engagement with support (and consequent lack of a good relationship with their work coach) resulted from:

- **Customers viewing themselves as beyond help:** In some cases, the customer felt their work coach was unable to provide useful assistance because they had such severe difficulties, such as poor mental health or severe pain and mobility issues. This was more common among pre-WCA, LCW and WRAG customer groups. They tended not to engage fully with their work coach because they felt employment would not be achievable for them ever.
- **Participation purely because they felt they had to:** This was the case for a few of the LCW and WRAG customers for whom attendance was mandatory. Some of the LCWRA and SG customers also attended out of habit with minimal engagement because they felt they should do so.

4. Support provided through Additional Work Coach Support

This chapter explores the support that work coaches provided to customers through Additional Work Coach Support (AWCS) in more detail. This includes practical employment support and advice, as well as wider support for other barriers to employment, including help building confidence and skills.

Overview

In addition to practical employment support and advice – which was associated with the traditional role of a work coach – work coaches provided wider support which helped customers make positive steps towards employment, even if that was not the immediate intended outcome. In some cases, this involved referrals to other DWP programmes.

Where customers had experience of the Jobcentre before, the support they received through AWCS positively challenged existing perceptions of the traditional role of a work coach.

Support provided for health-related barriers to work

Many customers saw their appointments with their work coach in themselves as support for their mental health. In the absence of a regular routine, customers valued having regular check-ins with a consistent person who asked about their day-to-day life and followed their progress towards different outcomes.

“[Work coach] doesn’t realise how much she helps me having that regular catch up.” (pre-Work capability assessment customer)

In addition, work coaches provided health-related support through signposting to:

- GPs.
- Local or national charities, such as Mind or a local charity focused on addiction.
- Group sessions or peer mentoring.

- Disability Employment Advisors and other DWP support, such as Personal Independence Payment (PIP) or Access to Work.
- Therapy, counselling or addiction treatment.
- Social prescribing, such as walking groups or men's mental health groups. Some customers were working with social prescribers at their GP.
- Volunteer groups.

There were, however, a minority of customers who, when asked about their further support preferences, would have appreciated more signposting to health support, and did not receive this. This was more common among customers outside the pre-WCA group. .

Support for other barriers to work, including confidence

Work coaches supported customers to address the wider barriers to work they faced, including their financial situation, lack of access to technology, and confidence around work.

Customers reported that work coaches supported them to improve their financial situation both through identifying other benefits that they might be eligible for, by identifying other potential sources of support and through sign-posting to debt management support. For example, this sometimes meant helping those who were caring for a family member to apply for Carer's Allowance. Similarly, work coaches identified when a customer may be eligible for other financial support because of their circumstances (for example, being a single parent) such as a reduction in council tax, the Household Support Fund, or free school meals. Signposting to financial support was most commonly provided to those in the groups receiving AWCS on a mandatory basis who had left work more recently or had unstable circumstances.

Customers who lacked basic digital skills or access to technology, often received support from their work coach with these. For example, some customers reported that their work coach had organised a new laptop for them. This helped customers to then engage with activities both directly related to finding work (exploring job vacancies) and more indirectly for example through exploring opportunities for further study or volunteering. Others were referred to digital skills courses. This type of support was more commonly provided to customers who were closer to work, including those who were open to finding work despite their health condition.

"So they actually bought me...believe it or not, they bought me a laptop and a mobile phone. So that if I do go down that [volunteer] route, I've got a separate phone number that I can be contacted on by an end user." (support group customer)

Other support provided included referrals to local Job Clubs or confidence-building courses.

The support provided by work coaches to address wider barriers to work was welcomed by customers, especially those who did not feel ready to work immediately. They were pleasantly surprised that work coaches were able to offer support beyond simply helping with work search activity. Often helping with access this sort of support was important in demonstrating to customers that their work coach had taken time to get to know them.

Support provided for work search

Not all work coach support was directly related to finding employment, but this was provided where work coaches felt customers were ready. When work coaches held conversations about a return to work, and support for this, customers generally felt these conversations were appropriate and happened at their right point in their journey. Whether and when these conversations took place appeared to be tailored to individual circumstances rather than driven by the eligibility group that individuals were in. There were some customers where participation was mandatory where their work coaches had only (so far) focused on wider circumstances. On the contrary, there were some examples of customers where participation was voluntary who actively engaged in employment conversations throughout their contact.

“I was very reluctant to think about work at the time, and [work coach] was incredibly sympathetic – because my mental health at the time was a lot worse than it is now. A lot at the beginning was focused on the help and support I needed. Later was geared to what else I could possibly do.” (pre-work capability assessment customer)

Those who received work-related support from their work coach mentioned:

- Discussing previous work history.
- Receiving advice on looking at new sectors to which their existing skills might be transferrable.
- Being sent links to relevant job opportunities on GOV.UK or other job websites, such as Indeed.
- Signposting to volunteering opportunities as a first step towards employment.
- Help with CVs, cover letters and interviewing skills.
- Providing help with costs for travel to interviews or buying interview clothing.
- Signposting to work search skills organisations, for example, Reed in Partnership or Maximus.
- Signposting to DWP funded employment support programmes (covered in detail below).

As well as practical work search support and referrals, work coaches supported customers to improve their general confidence around work. Especially for those who had been away from the labour market for longer, or older customers who felt their options were limited. Sometimes this was about encouraging customers to consider retraining for new occupations more suited to their health situation. In other cases, it

was about reassuring customers that they would not necessarily lose all benefits if they entered work and conducting the calculations that demonstrated they would be better off in work. For others, the concerns were around not being able to re-claim benefits if they found a job but were unable to maintain it (a particular concern for those with fluctuating health conditions) and work coaches were able to provide reassurance here to.

Some customers felt their health condition made them a 'burden' to employers, which discouraged them from finding work. In such cases, work coaches reassured customers about what flexibility can be available in workplaces and sometimes encouraged them to pursue opportunities such as volunteering and staged transitions to employment.

"They said it is allowed for benefit [customers] to do work placements. I could do a few hours to see how I am until I increase hours and not go back into fulltime but go slow and increase hours as I became more confident." (support group customer)

Some of those closer to work who did engage with support to develop work search skills, reported that it lacked what they needed to move closer to work. They found that some of this support was generic, and not sufficiently tailored to their circumstances to be helpful to them.

Support for training and skills

Customers had mixed views on work coach support for additional training and skills. This depended on both the perceived knowledge of the work coach and the extent to which recommendations were tailored to their circumstances.

Some customers who were closer to work were referred to courses that they felt aligned well with their career aspirations and goals. This was more common among pre-work capability assessment (pre-WCA), LCW and WRAG customer groups. For example, work coaches referred customers to numeracy, literacy and digital skills courses that addressed an identified barrier. There were also examples of referrals to career aligned courses, such as courses to obtain a HGV license, SIA license, Food Safety certification, and sector specific courses (for example, retail or fashion).

"If I couldn't get the job that I needed maybe get me on the course that would help me for that job, and maybe help with literacy and numeracy." (limited capability for work customer)

Work coaches also commonly referred customers to more general courses designed to support a return to work. These were usually online and tended to involve learning about wellbeing, managing mental health or building confidence.

There were other examples of referrals to courses where the primary purpose of participating was to improve wellbeing, such as courses in woodworking, gardening or animal care.

Some customers were disappointed about the referrals that they received to skills and training. This tended to be because they were hoping that a work coach would be able to proactively identify specific courses that related to a career of interest that would lead to accreditation and improve their employability. Where they could not see this direct path to employment, customers did not find support for training and skills development to be impactful. There were several cases of customers starting courses and not completing them due to a lack of motivation.

Signposting to other DWP programmes

Customers rarely recalled being signposted or referred to other DWP programmes although it is worth noting that it will not always be obvious to customers that support discussed with them is actually part of a formal programme or offer. Among those who did recall discussing other DWP programmes with their work coach, these were rarely taken up.

Work coaches had the option to refer customers to see a Disability Employment Advisor (DEA). These are specialists located in Jobcentres who provide advice and guidance to disabled individuals, helping them find meaningful work or to help them in their role. Pre-WCA customers were most likely to report that work coaches had discussed DEA support with them. The few customers who did take up this support felt it was useful in securing additional benefit income (for example, Personal Independence Payment (PIP)) or advising on debt.

Access to Work² provides support to disabled people and those with a physical or mental health condition, to help them get or stay in work. Through this scheme, individuals can apply for a financial support that helps pay for practical support to help them manage their condition while finding work (for example, at job interviews) or while in work. Some LCWRA and SG customers reported that their work coach had discussed Access to Work with them. One individual appreciated the idea of this support and had discussed how it could be used to make a future place of work accessible for them.

The Work and Health Programme (WHP)³ provides personalised support to help individuals find work. It is aimed at a wide range of individuals who may be experiencing difficulties, including disabled people and those with a mental or physical health condition. One customer had heard about WHP separately and proactively asked their work coach to refer them to it, which they did successfully (though the customer had not yet started the programme at the time of interview).

The Intensive Personalised Employment Support Programme (IPES)⁴ was targeted at individuals furthest away from the labour market and empowered them to find sustainable employment or self-employment, or develop the skills to do so. One customer in the LCWRA group was referred to IPES and was positive about their

² [Access to Work: get support if you have a disability or health condition: What Access to Work is - GOV.UK](#)

³ [Work and Health Programme - GOV.UK](#)

⁴ [Chapter 1: Introduction and overview - GOV.UK](#)

experience, stating that the support felt suitable to their situation because it was aimed at individuals who had been out of work for longer.

The Restart Scheme⁵ provides intensive support for up to 12 months to help individuals who have been on Universal Credit for at least six months into sustained work. Two customers were told about this programme, but neither pursued this. One customer in the LCW group was referred to Restart, but they were experiencing additional non-health related barriers which meant they were not in a position to find work yet. Another customer found employment before starting the scheme.

Reasons for no longer having contact with a work coach

Most customers accessing AWCS voluntarily (i.e. those in the LCWRA and SG groups) were still having contact with their work coach at the time of interview, although often less frequently than was the case initially. However, some customers where participation was voluntary had stopped appointments. This was usually because they had concluded that they would not be able to work at any point in the foreseeable future and hence did not see any reason for continuing. This sometimes coincided with their health deteriorating and making a claim for PIP. A few of these individuals had subsequently seen an improvement in their health and were contemplating re-engaging with their work coach.

Similarly, most customers in the groups where participation in AWCS was mandatory were still having contact with their work coach. Among those who were receiving AWCS on a mandatory basis, one reason for stopping was that they had since been allocated to the LCWRA group for whom it is voluntary.

“Before I knew it, I was in the support group with less support from the work coach and the DWP.” (support group customer)

Even in the LCW and WRAG groups there were some instances where customers said that they were no longer required to attend work coach appointments due to their health deteriorating.

The few customers who found work stopped having contact with their work coach once they moved into work. Similarly, the small numbers that had entered other DWP programmes or long-term training had also stopped seeing their work coach. A few had also reached retirement age.

In a few cases, customers reported that communication with their work coach had ended but they were unsure why this has happened, and some would have valued continued support.

⁵ [Restart Scheme provider guidance - GOV.UK](https://www.gov.uk/guidance/restart-scheme-provider-guidance)

"As soon as I got my limit to capability to work, which was last month...I don't have a UC journal anymore. I don't have to go in for meetings. I don't have to apply for jobs... as good as and as helpful as that is, because I really needed it just to take the pressure off - I still want to be in work. I still want to go to work, even if it is, part time before full time. But I feel like they've just left me alone."
(pre-work capability assessment customer)

Delivery challenges and improvements

Most customers had a good experience of support in general. However, the perceived lack of specialised knowledge and skills amongst work coaches stood out as a suggestion for improvement. Customers often expected work coaches to make effective, personalised referrals to help them develop the right skills, and to find work that aligned with their aspirations. Customer perceptions suggest this rarely happened.

"I thought they'd be able to say, we've got this job coming up, do you think you'd be able to do it? And then help me to apply...but it wasn't like that."
(limited capability for work and work-related activity customer)

Customers suggested work coaches could enhance their practice by improving communications about the support available, particularly other DWP programmes available (for example, the Work and Health programme). Some customers also suggested that it would have been helpful if work coaches had followed-up with them after signposting or making a referral to ensure customers had been able to successfully access the support.

Some customers would have valued more hands-on practical support in finding employment, such as more support developing CVs and cover letters and making job applications to mitigate low digital skills, or more consistent signposting to supported employment (for example, the Individual Placement and Support Primary Care Initiative⁶). Work coaches could make it clearer what support they can and cannot provide themselves.

Another suggested improvement was around work coaches improving their understanding of specific health barriers; severe mental health issues, autism and substance misuse were cited as specific examples of where knowledge could be improved. Customers felt this would enable them to better deal with the many customers with long term and severe health conditions and provide more appropriate health-related signposting. However, it is worth noting that these skills were outside the remit of the work coach job role.

In some cases, the availability of the work coach could have been improved. There were a handful of cases where customers reported having contact with their work coach less frequently than they wanted to, receiving irregular support, or having their support reduced or stopped without clear communication about why. Customers

⁶ [Individual Placement and Support in Primary Care Initiative - GOV.UK](https://www.gov.uk/government/programmes/individual-placement-and-support-in-primary-care-initiative)

The experience of Additional Work Coach Support

preferred having one consistent work coach, and those who were passed between work coaches consistently stated that they were not able to build a relationship with them and they felt the support was not tailored to their circumstances.

5. Outcomes of Additional Work Coach Support

This chapter explores the extent to which customers felt that Additional Work Coach Support (AWCS) had led to positive outcomes in terms of health and wellbeing, skills development and movement into work.

Overview

Many customers saw improvements to their overall wellbeing, motivation and confidence, and attributed this to the good rapport they had built with their work coach.

Customers who received work-focused support often did not feel that this resulted in positive outcomes because they felt it was too generic and their work coach was not equipped to identify appropriate opportunities for retraining, or roles suitable for their condition.

Feeling meaningfully closer to work was an outcome for only a minority of those interviewed.

Health and wellbeing outcomes

Many customers reported that regular meetings with their work coach had contributed to improved wellbeing. These customers had developed a good relationship with their work coach, felt that they understood their circumstances and appreciated the consistent supportive presence they offered. Having someone to talk to on a regular basis outside of their family or friends provided comfort and contributed to improved mental health and wellbeing overall.

“I think it was just nice knowing that he did care, and he advised me as much as he could...He did improve my wellbeing because I felt he did care about my situation.” (support group customer)

“She was a lifeline for me... Very understanding and caring and incredibly professional. I’ve been more comfortable sharing with [my work coach] than with my friends and family.” (pre-work capability assessment customer)

Work coaches also supported positive mental health outcomes and wellbeing through signposting customers to mental health support. These customers often felt

that the support was personalised and that their work coach had a strong understanding of their situation because of the relevance of their signposting.

Given that poor mental health and wellbeing was a barrier to employment for many customers, improvements in wellbeing put customers in a better situation to start to consider progressing towards employment.

While the impact of work coaches' support on wellbeing was largely seen as positive, there were a small number of limited capability for work (LCW) and work-related activity group (WRAG) customers who felt that the support had a negative impact. These were customers with existing mental health issues, who felt the stress of having to see a work coach regularly had negatively affected their mental health.

While support from a work coach often improved mental wellbeing, there was little change in the customers' ability to manage physical health conditions. For those who saw their physical health as a barrier to work, this generally remained the case despite work coach support.

Financial outcomes

In many cases work coaches also supported customers to improve their financial situation, which in turn improved mental health and wellbeing.

In some cases, work coaches supported a customer in the process of moving to a different conditionality group which was better suited to their circumstances.

They also helped customers access other benefits or support that improved their financial situation (for example helping with claims for Personal Independent Payment (PIP) or supporting applications to the Household Support Fund). Some customers were also referred to debt advice charities for further support which had led to a more stable financial situation.

As well as practical advice and signposting, work coaches reassured some customers – particularly those in the LCWRA and support group (SG) groups – that they were worthy of receiving financial support.

Case Study 4: limited capability for work and work-related activity

Amy is a Universal Credit (UC) customer in the LCWRA group and feels her mental and physical health rules out work as an option now and in the future. She has mobility issues, and past operations affected her work as an industrial cleaner.

Before she met her work coach she was not thinking about work. In addition to her health barriers, she felt there was a lack of suitable job roles available for her. She also had concerns around her anger issues in a workplace environment.

She spoke to her work coach every four weeks over the phone. They encouraged her to get out of the house and go for walks and discussed how she could

overcome some of her health barriers. Amy appreciated having someone to talk to and she felt that the relationship between herself and the work coach meant she could discuss problems the way she would with her late husband. Amy's work coach helped her move from limited capability for work (LCW) to LCWRA, following discussions of her health. Overall, Amy felt that the work coach had a positive impact on her health and wellbeing.

"When you're close and confident with somebody you'll tell them anything. That was the rapport I had with [my work coach]." (limited capability for work and work-related activity customer)

As a result of the support from a work coach, Amy felt better about life in general and even felt ready to begin to look for work as she was equipped with advice from her work coach that felt suitable to her physical and mental condition. Her income has also increased, and she feels deserving of the benefits she received as the work coach validated her incapacity to work.

"I feel like there's a light at the end of the tunnel." (limited capability for work and work-related activity customer)

Building motivation and confidence

Customers also saw improvements in motivation and confidence as a positive outcome of AWCS. These were most common amongst LCW and WRAG customers, who tended to be closer to work. Even if work was not an immediate option for these customer groups, many felt more optimistic about the future knowing they had options once their situation improved.

"I feel my confidence is much better and my approach to people is a lot more open... Speaking to employers about a work placement is building my confidence up. It feels like I do an active search and [active] activities rather than the old days of seeing if a job is available [on the notice board] and if not, you just left." (support group customer)

A few customers mentioned that attending the meetings themselves helped ease their social anxiety or fear of talking on the phone, an important step towards building workplace confidence.

Pre-WCA, LCWRA, and SG customers were less likely to report an improvement in their work motivation and confidence following support from a work coach. This was mainly because their health condition(s) continued to be their over-riding concern. However, some in this group reported a greater understanding of the type of support and opportunities available to them. This provided improved confidence for the future, if and when their situation improved.

Customers' age also influenced the extent to which work coach support had positive outcomes in terms of motivation and confidence. Some younger customers reported that they had reframed their options following advice and support about the type of work available to them. They also saw updated advice on how to apply for jobs digitally as invaluable. Others felt their age prevented them from progressing towards work, particularly those who were closer to retirement.

"I just feel like I'm wasting people's time who are genuinely interested and want to help, which is great and hats off to them. But I can't see how that is going to be beneficial to me, learning another skill when I'm not gonna be able to implement it on anything. And for the courses you're talking 2 or 3 years, I'm going to be nearly retired." (limited capability for work and work-related activity customer)

Case Study 5: limited capability for work

Elijah is a Universal Credit customer in the LCW group. An engineer by trade, he returned to the UK from working abroad just before the pandemic. He has not done paid employment in the UK since returning (though he has volunteered).

While Elijah would like to find work in the future, he feels that he needs to improve his confidence first. He recently experienced a crime which led to Post-Traumatic Stress Disorder (PTSD), worsening his confidence in general. He has other health conditions/ learning disabilities which impact his ability to work, including spinal problems and attention deficit hyperactivity disorder (ADHD). He also feels out of touch with the UK labour market.

"What I've said to [work coach] is basically, I really need to re-build my confidence. Because I want to go back into the work force. But I was starting from zero." (limited Capability for Work customer)

Elijah has a positive relationship with his work coach and feels like they understand his wider needs which limit his ability to work (e.g., health, court case). He had no expectations about the support offered by a work coach because he hasn't been unemployed before.

Elijah's work coach offered valuable employment support. They helped him to refine his CV and encouraged him to reconsider his career options, such as roles where he could better manage his health (e.g., retail). They have also referred him to necessary health support, including a psychologist. Elijah finds this a useful tool in managing his self-confidence.

"My resume was about 8 pages long, because I've worked all around the world—she reformatted my resume and helped me summarise it to make it into a page and a half now." (limited capability for work customer)

While Elijah has not found employment, he feels more confident about doing so in the future – especially when the court case is over. He regularly reviews actions

taken with his work coach, including check-ins about his physical/ mental health and jobs applied for.

Because of the employment and health support he has received, he feels positive about an alternative career where he can better manage his health, equipped with the right tools (e.g., an effective CV). His improved confidence has had wider benefits beyond employment. He feels he is now more active/ sociable e.g., going for walks.

Building work-related skills

For a few customers, engagement with AWCS resulted in the acquisition of new skills or qualifications. They felt these would enable them to showcase their abilities to employers when they were ready to begin looking for work.

For example, a WRAG customer followed recommendations from their work coach to gain two food-related qualifications. This helped them build new skills needed for their volunteering role at a local café. Another LCWRA customer attended IT skills and interview confidence courses upon their work coach's recommendation and later moved in to work. Customers that pursued these relevant work-related skills courses often appreciated the encouragement from their work coach to improve their skillset.

Case Study 6: limited capability for work and work-related activity

Rebecca suffered an injury 22 years ago in a manual labour job and has not worked since. Since her injury she went to university and graduated with a degree in Art and Design. She was also referred by DWP to training as a computer-aided design technician where she gained certification.

Rebecca would like to return to work if the right job was available, although she feels her physical mobility is a barrier to employment. She has gone to the job centre on a weekly basis for 22 years to look at job boards, however said she felt ashamed for being unemployed for so long and has struggled to find a job that suits her.

"With the support and the retraining to go into a different area, I feel as though I am worth employing again, but lighter work rather than heavy manual ... I want to be capable of paying my way, paying the rate and having some money for myself and joining the rest of society." (limited capability for work and work-related activity customer)

After asking for a work coach, Rebecca was told that they could meet in person or over the phone. She prefers visiting the job centre for the face-to-face interaction and they meet every two or three weeks for 20 minutes.

Rebecca hoped to find a route back into employment via her work coach. She has a very good relationship with her work coach, who has referred her to several courses. Rebecca's work coach also suggested that she meets up with a peer

mentoring group at the local library to undertake work related activities together, including contacting employers.

Rebecca has gained some certificates from courses on problem solving, self-esteem and self-awareness. She feels the new skills she gained from the courses helped to build her confidence and equip her with new skills.

However, Rebecca would have liked longer sessions to discuss how to manage her health in relation to employment with her work coach, including a medical assessment for her return to work.

She would also have appreciated information on managing finances and extra emotional support for the impact of long-term unemployment, which she felt was lacking.

“Maybe another [or extra] work coach if available with a little bit of a counselling attitude to check where you are in your life generally – it affects all your life.” (limited capability for work and work-related activity customer)

However, a number of referrals to external skills development courses were not taken up, or the courses were not completed due perceived lack of relevance. For example, a UC LCW customer reported they were given an irrelevant referral by their work coach to digital skills training. This felt unhelpful to the customer, as they did not own a computer.

“They say the same thing to everybody. I don't mean about being depressed and asking me how I'm feeling, but about the courses and things like that.” (work-related activity group customer)

Work coaches also supported a minority of customers to take up volunteering opportunities which customers viewed as a positive step towards future employment. These opportunities helped them develop general work-related related skills, such as communication and confidence, and in some cases practical experience in roles and sectors they hoped to work in in the future. For example, a LCW customer discussed volunteering opportunities with their work coach and felt the work coach helped them to stay motivated throughout the application and training process, which they would have found overwhelming without support.

Starting work

A few customers moved into work or felt meaningfully closer to work following work coach support. Some of these customers attributed this to the support they received from their work coach. For example:

- One customer explained that advice from their work coach on how to start part-time work, while minimising the impact on their benefits, encouraged them to begin working three mornings a week. The customer felt that their work coach made them confident in returning to work with reduced hours and in a non-

managerial role to reduce stress. They also received CV support which contributed to them finding employment opportunities. This customer felt that returning to work in some capacity had significantly benefitted their health and wellbeing.

- A pre-WCA customer was volunteering as a support worker for a domestic violence charity at the start of AWCS. Their work coach signposted them to alternative but related work. The customer ended up taking on a paid role at the charity where they were volunteering but still felt they had benefitted from the awareness of other opportunities their work coach gave them.
- A LCWRA customer found work following a volunteering opportunity their work coach had signposted them to. The initial volunteering had a huge impact on their confidence, and they were able to network within the employment sector they were interested in.

“Just interacting with different people and becoming like a more confident, happy person. And I feel like it did help with that. So that was quite nice, really, that I felt that I wasn't just a mum or just a housewife. I actually had like a role within the community.... and then that led me onto becoming confident enough to then apply for my [employment].” (limited capability for work and work-related activity customer)

- A further LCWRA customer was supported to explore whether she could earn a living from self-employment. Critical here was the reassurance she was provided about the impact that this would have on her benefit entitlements.

Case Study 7: limited capability for work and work-related activity

In some cases customers were able to do some self-employment without it impacting their benefits, following encouragement from their work coach.

Clara is a single parent in the LCWRA group and has chronic health problems. Two of her children have been diagnosed with learning difficulties, which along with her poor physical health, prevents her from working for an employer.

Clara is motivated to work and has taken steps to help her get there, including gaining qualifications in fields of interest to her – reflexology and healthcare.

Clara has received support through Business Gateways and the ‘Parents Back to Work’ scheme, who helped her with a business start-up grant to help pay for courses to make and sell her own products online.

Clara needed reassurance from her work coach that doing this work would not impact her eligibility for benefits, as when experiencing a period of poor health, she is not able to work and would still require the financial support. The work coach helped her understand how much income her business could make before it affected her benefits income.

At first, she received messages from DWP saying her business was not sustainable, and she would need to find alternate work, but the work coach seemed to amend this.

"I am desperate to be able to get that space to work.....I want to be able to drop off the kids and go to work... I feel useless." (limited capability for work and work-related activity customer)

Case Study 8: limited capability for work and work-related activity

Katie was born with a severe hypermobility spectrum disorder which affects both her flexibility and her heart & lungs. Her physical health had got worse over time, and she had been out of paid work for over 20 years after she had a heart attack. Katie also suffered with her mental health because of the limitations of her physical disability.

Katie was eager to get back into work with the help of a work coach, but she felt that employers doubted her employability because of her disability. She was eager to get back into paid work, or volunteering, to enable her to get out and socialise with people, which she was missing out on.

She saw her work coach face to face at the Job centre for 20 minutes every month and communicated via UC journal. Katie said her work coach was very accommodating and made time if she needed longer sessions. They also built a strong personal relationship and Katie felt she could trust her, despite an initial hesitance.

"In the beginning the system was 'you don't have to work, carry on as you are,' but after a few sessions, Kirsty said 'no, I hear you' ...she understood that I did want to work." (limited capability for work and work-related activity customer)

Katie received interview support, signposting to a course at a local college on interviewing techniques, a CV writing course, and advice on her pensions. Katie was provided a new laptop which was previously a barrier to her work as it was outdated. She was also offered a taxi to work every day, but declined as she felt she didn't need it.

The biggest impact Katie's work coach had on her journey into employment was helping her develop skills to fit job requirements, and actively looking for roles Katie could apply for.

Her work coach found out about an NHS Reservist role and supported her in her application and approval period from the Occupational Health team. Her role is flexible hours and does not affect her benefits as she works less than the cut off

amount. Her employment also helped her mental health by getting her out of the house daily.

“She’s been amazing, she really has, my work coach. Even if we don’t talk about work, it’s how are you - how are you coping? We’ve learned a lot of each other’s roles which neither of us were expecting.” (limited capability for work and work-related activity customer)