



Meeting summaries outline topics discussed by the Minister for Social Security and Disability and the Disability Unit Regional Stakeholder Network Chairs. These summaries do not reflect UK government policy unless specifically stated.

Meeting summary and action points – 19 May 2026

Quarterly meetings between the Minister for Social Security and Disability, Rt Hon Sir Stephen Timms MP and Regional Stakeholder Network (RSN) Chairs

Attendees: Minister Timms, RSN Chairs – Louise Mckiernan MBE (West Midlands), Ali Gunn (North West), Ailith Harley-Roberts (Yorkshire and the Humber interim), Marc Goblot (Greater London), Sam Everard MBE (South West), Chloe Plummer (South East), Pat Ramsey (East of England deputy on behalf of Anne Wafula Strike MBE), Elspeth McPherson (North East), Justin Donne (East Midlands), David Bateman – Head of Stakeholder Engagement, Disability Unit (DU) Cabinet Office and other officials from DU. Officials from the Department for Work and Pensions (DWP).

Discussion point	Action point
Updates from Minister for Social Security and Disability, Rt Hon Sir Stephen Timms MP (Minister Timms) • Minister Timms welcomed the RSN Chairs, including Ailith Harley-Roberts in her role as interim Yorkshire and the Humber RSN Chair. He thanked the Chairs for their valuable contributions on the previous theme, special educational needs and disabilities (SEND). He acknowledged that the Chairs have sent some follow up questions, which have been sent to the Department for Education. He said that SEND is an important area of reform for the Government and that getting the next steps right is important. Minister Timms provided the RSN Chairs with updates on some key work happening currently: • In July 2025, the Government announced that it will develop a Plan for Disability which will set out a clear vision that shows what we are aiming to achieve for disabled people in the longer term. The Disability Unit (DU) will lead on development of the Plan, in collaboration with other departments across Government. It is very important that we put the views and voices of disabled people at the heart of this work. We will be doing this in two ways. Firstly, we will make sure that the Plan is developed using a wide range of quantitative and qualitative data and evidence on the lived experience of disabled people. Secondly, we will be publishing a formal consultation later this year to gather insights from as many disabled people and organisations as possible. To support this we will be organising a range of accessible consultation events around the country and virtually, in addition to collecting consultation responses online. This work	1. RSN Chairs to submit detailed written feedback to the Timms Review by 28 May. 2. DU / Minister's Office to confirm the next theme and arrange the next meeting.

Discussion point	Action point
is being supported by the Lead Ministers for Disability, whom he works with across each Department, to ensure their contributions are included. Work is well underway, with more to come later this year. • The Government has now published the pay gap reporting consultation response, which includes draft clauses, to show how the new legislation may look. Ethnicity and disability pay gap reporting legislation will be introduced as soon as parliamentary time allows. The proposed approach would require employers with 250 or more employees to report their ethnicity and disability pay gaps; to report the overall composition of their workforce by ethnicity and disability; to report the proportion of their employees who have declared their ethnicity and disability data; and to take actions to address any ethnicity and disability pay gaps (in line with mandatory equality action plans on gender and the menopause). We will take this work forward as soon as we are able to. • The Independent Disability Advisory Panel, led by Zara Todd, will cover all the Department for Work and Pensions (DWP) health and disability policy, apart from the Timms Review. The Panel membership was recruited via an open expression of interest. We have 11 members from across Great Britain. The Panel will take a flexible approach to its work, with a particular interest in the reform of Access to Work, but also more generally, especially on employment support policy. We hope that Zara Todd can meet the RSN Chairs at some point in the future.	

Discussion point	Action point
- We've announced (19 May) that DWP will recruit 480 additional staff to deal with the Access to Work backlog, which will mean over 1,100 staff. Following new staff training, we are confident that this will enable us to eliminate the inherited backlog by September 2027. We are working on the reform of Access to Work and will come forward with proposals when we are able to. We are also carefully looking at a report on Access to Work by the National Audit Office. - Minister Timms is aware that DWP officials recently updated the RSN Chairs at the monthly meeting with DU (12 May) on the work to reform the Disability Confident scheme. We want to make sure that the scheme does a better job in the future, and we are keen to work with the Chairs to get their input into an employee survey as part of this work. One of the key aims of the reform is for employers who join at Level 1 to progress through the scheme, so that their participation makes a difference for disabled people's experience in employment. THEMATIC DISCUSSION: Feedback from RSN regions on the Timms Review of Personal Independence Payment (PIP) - The theme for this meeting is the Timms Review Call for Evidence. Minister Timms welcomed an official from DWP, joining to hear the regional feedback. The Review is co-chaired by Minister Timms, Sharon Brennan and Dr Clenton Farquharson CBE, alongside a steering group of 12 people. We've had a whole series of meetings, with another soon. In March we issued a Call for Evidence, open for 10 weeks until 28 May. We are keen to get as many responses as we can, so would be grateful for RSN Chairs encouraging their networks to contribute.	

Discussion point	Action point
Minister Timms asked the Chairs to share a short summary of regional feedback on the Timms Review theme. Along with DWP, DU officials also attended to hear this feedback. RSN Chairs will submit detailed feedback directly into the Call for Evidence after this meeting. <i>Chairs noted that much of their feedback mirrored other regions so they chose not to repeat all of their insights across regions.</i> • RSN North West – The system is still operating on a medical/deficit-based model of disability, focussing on proving illness rather than societal barriers faced, leaving people feeling disbelieved, scrutinised, emotionally exhausted and degraded. Lengthy, confusing and distressing forms, alongside assessments that feel adversarial rather than supportive. The system doesn't mirror daily life reality – it uses rigid descriptors and snapshots in time with a focus on what people can't do – people with fluctuating and invisible conditions struggle to capture the reality (managing a task one day but unable to do it the next). Intersectional themes such as transport and assistive technology – some pay for private services due to a lack of Local Authority support. PIP pays for the basics to support people to live, work and participate, not luxuries. Lack of joined-up systems, such as PIP, health/social care and Blue Badge – repeatedly having to provide the same information. Wider societal attitudes around disability benefits are contributing to stigma and hostility – the PIP system reinforces this by people having to prove their disability. Assessors lack training – lived experience disability awareness training is important (positive to see the Oliver McGowan training). Reforms should be rooted in trust and the social model of disability, to create a fairer society – the current system makes things harder for disabled people.	

Discussion point	Action point
• RSN South East – Due to the cost of living crisis, PIP is no longer being used for its intended purpose to support independent living, but instead is going towards everyday living costs like food and heating. The narrative around reducing benefits costs is causing anxiety – reductions in PIP risks people being unable to engage in employment where PIP is a vital support, which would go against the aim to get more people into employment. The assessment is stressful and degrading, focusing on the medical rather than social model of disability – assessors lack relevant expertise and knowledge of conditions which makes it unfair. Assessors with proper knowledge would reduce decisions being won at appeal, saving money and reducing stress – lived experience training could support this. The complexity of forms is stressful and hard to navigate. Renewal information is received with little time to complete it, forcing difficult calls to DWP to ask for extensions. The process itself is disabling, rather than helping people to reach their full potential – focusing on what people can't do, demanding justification – fluctuating conditions aren't taken into account within its one-size-fits-all approach. Cost of living, austerity and poverty issues for disabled people who are most at risk.	

Discussion point	Action point
• RSN Yorkshire and the Humber – The system isn't working and is actively harming some of the people it's meant to support. The assessment is traumatic, hostile and rooted in a culture of disbelief – designed to catch people out, not to understand needs – triggers anxiety and worsening health. The assessment doesn't work for fluctuating, invisible or energy-limiting conditions – the “moment in time” approach asking if people can perform a task on a good day doesn't capture reliable information. Medical evidence from people like consultants is often ignored, resulting in assessment reports containing errors and decisions that contradict medical reports. Flawed decision-making (high rates overturned at tribunal) – incorrect decisions and long delays can push people into poverty and create anxiety over the fear of losing support. Concerns about PIP being linked to work capacity – it must remain needs-based – it wasn't designed as a work-related benefit or to assess work capability – it would distort its purpose and risk pushing disabled people into unsafe or unsuitable work. People want a respectful, evidence-based, and trauma-informed system with assessors who understand conditions, reducing the burden on families and an end to repeated assessments for lifelong conditions. The system needs fundamental reform co-produced with disabled people and designed to uphold dignity, independence, and human rights – small changes won't help. PIP should allow people to live, work, study and participate.	

Discussion point	Action point
RSN East Midlands – PIP provides vital support for disabled people to maintain independence – makes a real difference, such as using the daily living component for practical daily support and to stay active, or the mobility component for travel, to live independently and avoid isolation. A very small minority of people treat PIP as general income rather than for disability related needs – gaps in how the system monitors. Concerns around assessment consistency and quality – people aren’t properly listened to – reports don’t always reflect the actual conversation. Outcomes depend on how confident or informed a claimant is when completing forms – parents and carers struggle to describe the most difficult parts of daily life because they are used to coping and masking problems, and documenting it can be upsetting as they usually try to stay positive. Some feel disadvantaged as they don’t know how to present evidence in the “right way” – some access advice services or support networks, but others struggle alone. Eligibility confusion – some think that a medical diagnosis automatically means entitlement, rather than about how a condition affects daily living. Improvements through schemes like Access to Work, but workplace support doesn’t remove the need for support outside of work, like with transport and daily living – particularly hard for people with mental health conditions and complex vulnerabilities.	

Discussion point	Action point
• RSN Greater London – Assessors’ lack of knowledge and problems with the process – assessors are often commercial providers with financial incentives and a target-driven culture (a target of five per day leaves no time for proper understanding of needs) – lack of knowledge around lived experience of conditions. Cultural degrading settings – feels like it is set up against people, rather than independence – independence feels false when referring to people with lifelong conditions who will never be independent. London’s flat-rate PIP structure is a huge problem due to the distorted high costs of living, including housing, transport and therapy, which can be expensive and hard to get – PIP doesn’t account for this. Diversity barriers (cultural, language, intersectionality) compound needs and access difficulties – refugees or people with English as a second language need interpreters. Access is highly uneven across London boroughs. For individuals working or self-employed, PIP is often the only financial support left allowing them to work, meaning the prospect of reassessments creates massive anxiety. Assessment reforms require improved training, reviewing financial incentives, London specific adjustments, digital accessibility, and more clarity around the scope of PIP.	

Discussion point	Action point
• RSN West Midlands – noted that an RSN member is also on the Timms Review steering group. PIP plays a vital role for disabled people to live independently, manage additional costs and participate fully in society, however it's not consistently achieving this purpose – it should be seen as essential support not a welfare payment. The assessment fails to reflect the lived experience of disability, particularly for fluctuating conditions, mental health issues, neurodivergence, and chronic fatigue – it focuses on isolated tasks, not the cumulative impact of living with a condition over time. Support levels don't match the actual costs especially given the cost of living crisis. The public narratives of disability benefits frame disabled people in terms of economic costs rather than needs and rights – stigma makes constructive reform more difficult. Mobility support is critical to independence, especially for accessible transport and adapted vehicles. Assessment criteria doesn't reflect modern life – decision making relies on short snapshots and limited interactions with assessors who lack training and understanding of conditions. Lots of decisions overturned at appeal – questions decision-making fairness. Stressful and degrading process, forcing people to repeatedly justify limitations and endure lengthy appeals before getting support. Complex forms and volume of evidence required feels overwhelming for families and financial appointees. PIP hasn't adapted to reflect society and workplace changes, alongside growing awareness of mental health and neurodiversity. The cost of living and reductions in local support services have increased pressures, leaving PIP to fill gaps that other systems no longer meet.	

Discussion point	Action point
• RSN South West – Text reminders received for a PIP assessment scheduled that same day without having ever been previously informed – causes anxiety and stress on the calls. For younger claimants aged 22 to 24, PIP payments are going directly to parents, and they are questioning why they can't manage the money themselves – need for a clearer changeover process between appointees and young people. PIP processing delays create challenges with other things, such as Blue Badges and Motability, because there is an insufficient length of time left on their PIP award. Concerns regarding linking to work benefits. Young people with epilepsy moving into independent or supported living are being incorrectly informed by council workers and social workers that they are entitled to PIP when they don't meet the criteria – indicating a need to review the criteria. Where someone has a PIP claim backdated, resulting in a lump sum payment, this can take them over other limits, causing other benefits to be stopped and triggering a government investigation – information needs to be shared within government.	

Discussion point	Action point
RSN North East – PIP doesn't align with the Care Act, which frames social care provision around "well-being domains" (including safeguarding), reflecting the lives people want and should be able to live – if a benefit is meant to enable people in and out of work, it needs to align with this legislation. DWP terminology conflicts with social care, the voluntary sector (VCS), and the NHS terminology – creates conflicts where people with substantive disabilities supported by specialists are referred to non-specialist DWP assessments using different definitions. DWP is not equipped to assess disability, and its contracted providers are generalists who shouldn't hold the authority to override specialist consultants and nurses. Lots of money could be saved by abolishing DWP assessments and relying instead on existing health/social records and Education, Health and Care Plans, managed by condition specialists who understand the impact on good and bad days. Reliance on non-specialist DWP assessors reinventing the wheel leads to high appeal decision overturn rates. People with a substantive disability to meet PIP criteria usually have a consultant or specialist nurse (except groups who don't engage with statutory services, such as Gypsy traveller or homeless groups).	

Discussion point	Action point
• RSN East of England – On the experience of individuals applying for PIP for the first time, drawing from experiences in a support organisation, interview rooms require essentials (tissues and water) because the process is very painful for people who are upset as they are losing their independence and ability to support their families. Living with a disability makes basic, ordinary tasks like going shopping more expensive – this isn't accounted for. Questions whether PIP could be reviewed more dynamically and frequently, by changing circumstances, such as incorporating the impacts of long Covid following the pandemic, so that as renewals arise, claimants transition onto appropriate, up-to-date questions, rather than forcing massive, infrequent structural overhauls where everyone is forced to change. • A DWP official said that she found the regional reflections extremely interesting. She noted that the themes raised specifically around fluctuating conditions and the degrading experiences people endure during assessments strongly match the insights the steering group has identified so far. She will share this feedback with the other Timms Review co-chairs. She said that she would really welcome the RSN Chairs submitting their detailed reflections into the formal Call for Evidence as well.	

Discussion point	Action point
• Minister Timms closed by thanking the RSN for their regional feedback. He asked the RSN to submit their views to the Call for Evidence by 28 May. Following the Call for Evidence the review will do other things, like offering “Workshop in a Box” opportunities for organisations who would like to host independent workshops, followed by deliberative events across the UK, to test initial emerging idea recommendations to gather feedback. He said he will be grateful for any further involvement from the RSN. The next quarterly meeting will take place in September or October 2026, with the date to be confirmed. The next theme is yet to be decided, but potential themes are being considered, including social care and at some point on the Plan for Disability. He noted that the RSN annual activity update (covering December 2024 to December 2025) is being worked on. He thanked the Chairs for their continued work and support, and DWP for joining.	