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HAMIED: Good afternoon, everybody. Thank you for coming back to the lecture theatre. Take your seats. It's not working? Is it working now? Okay. Everyone take your seats, please. Okay, so I'm very happy to - invite on to the stage Vikki, Sue, and Christine, who will be giving this session about this talk, about their work. So these are colleagues from the NHS, and from Disability Rights UK who worked together on this ground breaking project and it will be great to hear. Thank you.

CHRISTINE: Thank you, I'm Christine Rivers, one of the leads for the Health and Equalities Team at NHS England. I'm pleased to bring in Sue Bott and Vikki Albarraque.

SUE: I'm Sue, and I'm from Disability Rights UK which is a national disabled people's organisation.

VIKKI: Hi, I'm Vikki. I'm chair of Our Lived Experience Network.

CHRISTINE: So the structure for our talk today, we've introduced the speakers. I'm going to speak briefly about NHS England's work because a lot of people don't know what NHS England does. I will talk a bit about that. I'm going to talk about the Workforce Disability Equality Standard which is a new standard being launched this year relating to data for disabled staff in the NHS. Sue's then going to talk about disabled staff networks and research that she's done; and then Vikki is going talk about a Lived Experience Network, and she's the chair of that network, an NHS Foundation Trust. NHS England: a lot of people don't know about NHS England. Just to give you some context, we commission services, GPs, pharmacists, and dentists, support CCGs - Clinical Commissioning Groups - and we also will delivering on the five-year forward. The five-year forward is just coming to an end. It talks particularly about cancer, mental health, linking services together, . The ten-year plan is being written right now. It includes health inequality tease as part of that programme. You will be seeing that as it is published in due course. There are key things in there which will be of interest to you. I'm part of an equality and health in e equalities team, and we work across the protected characteristics. I've pulled out work we're leading on in relation to distribute. We are leading on the learning disability employment programme which is seeking to bring more people with learning disabilities into employment. At the moment, we have pledged organisations, and we are working with Project Search, Project Choice, organisations that are working with people with learning disabilities, and supporting them in work. We also provide a secretariat to the Equality and Delivery Coups - the EVC - and that oversees a lot of the key drivers and principle work of the highest level, chaired by Simon Stevens and Joan Sadler, and they're looking at the overall NHS drives in relation to equality. Workforce Disability Equality Standard - I will talk more about that in a moment - is setting up a series of metrics that are comparing the experiences of disabled staff in the NHS with non-disabled staff. Also, moving forward, we are scoping a Universal Information Standard for Protected Characteristics - UISPC - much easier to pronounce! Now, this is looking at all equality data across delivery, service-users, and workforce. At the moment, what we have, I will talk more about workforce equality standards, workforce race standards for more staff, we are bringing in a workforce disability standard for staff, sexual monitoring standard for service users. The UISPC is looking to bring all that together against protected characteristics. Finally, health and well being alliance bids, and I will talk about those more in a moment. To talk briefly about the WDES, does anybody know about the RES - the - the WRES - the Workforce Race Equality Standard? Has anybody heard about it? Show of hands? Not many. I'm going to give you a very brief overview of the WRES, and that will give you a sense of what the WDES. The WRES started with somebody called Roger Klein who wrote an influential work called the Snowy White Peaks of the NHS. He said 45 per cent of the population in London is PME but eight per cent of - BME, but eight per cent are BME are board members. He said there's a significant disparity, people and their career progression and their disability at the top of the organisation, and also at the top of the s in s in trusts. What he suggested, and it was ground breaking, it's new, it's been in about four years now, the WRE Se, is a series of metrics looking at key areas where evidence showed that BME staff were less likely to have a positive experience, or less likely to, for example, progress in their career, and more likely to be bullied, for example, by staff or by service-users. These metrics now are looked at annual ly. The Trust has to produce its metrics, produce its results, publish it on its websites, and send that data back to NHS England who will produce a report saying this is things are moving, this is where things are not standing still, this is where we have particular problems. As I said, the WRES has been in place for maybe three or four years now and is moving forward. One of the key areas they're looking at now is producing a composite score for each Trust so that although the metrics are quite diverse, it would still allow a Trust to have a sense of where it's performing well or not on race equality, and it also allows Trusts to be compared against each other. Sorry? The CQC does. For the WRES, the WRES looked at the well-lived domain, yes. There are a series of checks and the CQC is one of them. The actual publication of the data is another one. The experiences of staff, and the data itself is another check. So, what we've done with the WRE Se, it's been in - the WRES before we have had an online survey, and we've been looking at what the metrics should be. We've now just finalising our metrics. We've got a series of ten, maybe 11 - we're not quite sure at this point - but they will be looking at areas such as capability procedure. We know that staff are more likely to be in capability procedures, so we are looking at that thing. Staff engagement: the NHS staff survey has a composite engagement that looks at how likely you are to recommend your trusts at work, how motivated you feel at work, how valued you feel at work. This is a composite score, and we would ask trusts to look at that because, what we know, is that disabled staff are much less likely to feel engaged than non-disabled staff. Also, we are looking at harassment, bullying, or abuse from managers, from colleagues, from patients, and also whether people feel confident in reporting. We are also looking - it speaks to itself - how short-listing appointment, how likely staff are to be short-listed and appointed afterwards. As with the WRES, the plan is that the Trust would publish the results annually so can be seen by the service-users and staff, and we will be collating that information nationally so we can look at organisations that are performing well, and looking at organisations that are performing less well, and use case studies and kind of naming and shaming that comes with that report to pool cull - pull culture forwards and make change happen. That's due to be launched in November. So, in relation to with WDES, what impact will it have for disabled staff and the disabled staff networks? I think it will have quite a big impact. I think the metrics are areas that we know there is evidence nationally that we haven't seen what each trust, how each Trust. We don't know that at this point. This is national data that will look at the experiences of staff. Disabled staff will be really important in this process. They will be able to give detail, so, for the first time in some cases, Trusts will be looking at disabled staff compared to non-disabled staff, and their experiences of, for example, bullying and harassment. It will only be disabled staff that can give more granular detail to that experience, and so this is what it happening. This is also looking at solutions. We can look at how to change things, some of the ideas we have. The idea is to support a bottom--up approach, not necessarily a top-down approach of changing experiences for disabled staff in the NHS. We are also working with other organisations - Disability Rights UK, for example, - and Sue has been leading research on disabled staff networks in the NHS, and also we are writing a narrative, Sue leading on that on employee disabled staff in the NHS. We are also producing a guide of access to work. Supposed to be the Department of Health's best-kept secret. When I worked in the Trust, it was hard to find information about access to work, particularly related to the environment of in an NHS Trust. There are information on websites about how a Trust puts that into practice. We didn't have a lot of information about that. Including an easy-read guide, because, as a nation, we are looking to increase the number of people with learning disabilities in NHS Trusts. If we don't provide information in easy-to-read, we're not going to be singing from the same hymn sheet. There is research on disability-confident, which is a government scheme. Organisations produce evidence of what they're doing, and we've done some research on that, and there is some helpful top tips about how an organisation can be a better employer. We are also looking to share, as we get them, good-practice examples, and we will be putting this information in technical guidance so we can show what it looks like, and how we think change can happen for disabled staff. I'm handing over to Sue.

SUE: Okay, thanks very much, Christie. So, we've been conducting some research. Disability Rights UK, we're part of what we call a Win Win Alliance, because we like to be positive. Win Win Alliance is one of the groups that is working with NHS Public Health England, and the Department of Health and social care on what we call the Health and We will being Alliance. The other partners in crime in our alliance are the National Mental Health Survivors Users Network, Shaping Our Lives, and Change, which is an organisation of learning-disabled people. What is unique about our Win Win Alliance in the health and well being alliance is that we are all disabled people, and our organisations are all led by disabled people. Because myself, I'm a disabled person, and I have my friend ly white cane, but I normally have a guide dog, but I'm in between guide dogs at the moment. You've heard this joke, before, Christine, but it seems an appropriate date to tell it: so, I was out at an event and David Blunkett, Lord David Blunkett, was saying, "I've got my cane. I call it Trump." "Why's that?" "Because it's white, rigid, and inflexible. And, compared with a guide dog, it's no bloody use!" [Laughter]. So, back to our research: we put out a call to action. That was to NHS trusts, to NHS employers, and to HR people will be and equality and diversity people, and we were asking them how they got along. Did they know about the disability confidence scheme? Did they know about Access to Work? Did they have a disability staff network in their area? What was going on? So we got lots of stuff back. We got good qualitative stuff. We also did a survey monkey. That was more by way of short answers. Short answers to questions. We interviewed members of staff networks, NHS employers, equality and policy leads, and HR leads. And we referenced experience of other disability staff networks, particularly in the public sector, so, we had a look at what is going down in the Civil Service, for example. So, fundamentally, for us, why we would want to get together as disabled people, is the fundamentals of nothing about us without us. Now, this term has been adopted by the disability movement for many years, and government didn't invent it. I think there was a secretary of state for health who claimed that he had, but anyway, he didn't. I don't think we invented it, either, but it's a good term, and so we use it. We use it a lot because it describes where we want to be as disabled people. We are the experts on our disability, so, you know, don't tell us what we should be doing or feeling, or knowing, because, actually, we know, and if you don't have that particular impairment, you don't know. Giving us a voice, challenges the traditional oppression-dependency and powerlessness of disabled people, so, you all know that historically, we as disabled people, we haven't had a voice, been able to contribute anything to society - either stay locked up in your institution, and stay there in your home, don't ever do anything, and don't come out. Don't interfere with the rest of the world. Well, actually, that is not us, and our time is now to have our voice, and to exercise our rights in everyday life. And, we think that no policy should be developed and enacted without listening to the voices of those that the policy will impact. [Inaudible]. So, key learning points that came up from our research about networks, so a lot of Trusts do have disabled staff networks of one form or another, and a lot of Trusts shared with us positive experiences of having the staff network. So, improvements have been brought about in HR policies, for example, even down to accessing the physical environment of the building that particular Trusts occupy; having disabled staff come together really helped in making those buildings more accessible. We have of course the added benefit of not only assisting disabled staff but also those of us disabled people who use NHS services, so, good news all round. We found that there was no one model of a disabled staff network. I feel that this is probably disappointing news to some organisation s because my experience is that, these days, organisations absolutely love their models. You know, if you say to them, "There's no one model, actually", it just feels a little bit uncomfortable. Anyway, that's what we found, that there isn't, so we found that some networks were specific impairment-based, some Trusts had staff networks that covered all protected characteristics, some Trusts had disability networks that had sub groups of particular impairments. There was no rule about size, about frequency of the meeting, and it's really about whatever the people who are coming together to form that network want to do, and what they think will be most effective. I think that's what we found. What is in a name of the Disabled Staff Network? A name is very important. A name can suggest what the staff network does, and we found a variety of names from simply "Disabled staff networks" to, in one Trust, the network called itself "Purple", with , which I think is great, actually. It turns out because local disabled people's organisation called - helped them get the network together. But a name can give an idea of what is involved in the network, and who it is reaching out to. So, again, we don't expect the same across the NHS. Not every disability staff network is going to be called a disability staff network. As an example, after I have spoken of the different kind of names. So, membership and who comes along. That was important to sort that out from - in setting up the network. Some networks were literally just aimed at disabled staff, but other networks were also reaching out to local disabled people in the community, and an opportunity for people to come together and support each other. Logistics: as you can imagine, NHS Trusts, they vary one from another enormously, and the logistics are really quite something. If we take NHS England, for a start, so they've got a load of people in London, they've got a load of people in Leeds, a load of people scattered around in other places, haven't you? Getting that network together is a bit of a bother. So, the chances of them all being able to get together in one place is quite remote, really, and I think this would have some - a lot of academic institutions are the same these days, aren't they? You can have an offshoot in a town 50 miles away. So, getting people together is quite an issue. So, some networks have got round that by having an online presence or they rotate where the network meeting is taking place. We found that staff networks take a long time to establish, so things don't happen over night. The members really have to work at getting themselves known, getting their terms of reference, how they are going to operate, and all that kind of stuff. We found that, not surprisingly, confidentiality within the network is very, very important, because disabled staff come along to the network for a whole variety of reasons, so, yes, it might be to try and get things changed, but, also, it might be about having some personal support. So, it's really important that the network maintains that confidentiality amongst its members. So, there is a lot of peer support going on in networks. In fact, some members of networks have said that an awful lot of time was taken up with supporting other staff through various issues, which they were quite willing to do, but it can be quite hard, you know, when you've got to find time for your day job as well. So we found that the networks needed to be resourced, and there needed to be support at the level of the NHS Trust for the network. So, that people could have time off to be able to attend the network, because you can imagine that staff go along to their line manager and say, "There's a meeting of the network. I really want to attend." And, well, "No, we can't give you the space and the time to be able to do that," so it's really important that the network - there's a strong message from the organisation as a whole that is supportive of the network and an expectation that staff will have the opportunity go along to it. So, we really need that senior buy-in to the network, and that is what we found in the Trusts where there is senior buy-in, some Trusts, for example, have somebody on the board who is the champion of the network, so that is great, because then that's an opportunity for that board member to bring messages about what the network is discussing, and deciding. A senior buy-in amongst the senior management as well, obviously, all to the good, it makes the networks more accepted and effective, so that senior buy-in is really critical. We found that being transparent about what the network does was also helpful, because you can imagine that sometimes, other staff will say, well, "Why is that person being given time off to go and attend that disability talking shop?" "What is that all about, then?" But the more transparent the network is about what it's doing, and what it's seeking to achieve, then I think that helps to engage other staff and break down any barriers that they might feel towards the network. Networks help everyone understand disability. We found examples of where network members have helped to raise awareness, and put on specific training for their colleagues, and about disability, which is great, because, you know, not only does that make it a better workplace, but also it means that the customers of the NHS have a better experience as well, because they're being cared for by staff who understand about impairment. Lastly, what we found was an issue for disabled staff networks is that disabled staff networks tend to be smaller than other networks, so they're going to be smaller than BME networks, for example, or sexual orientation networks, simply because there are many, many disabled people, we know that the numbers of disabled people employed anywhere is not that great, and that is the same of the NHS as it is of other organisations, both private and in the public sector. So, disabled staff networks are always going to be smaller, and we did hear some networks say, "Well, we feel like we're not as important because we're not as big, and it feels like we're not as high profile," so we found that, actually, it's really important to have - to give the same status to the disabled staff networks as with all other networks, because, otherwise, we never will bring about the change that we all want to see. So, I will stop there, and I will hand over to Vikki who is going to -

VIKKI: Our Lived Experience network I inherited from the person who set it up. I'm trying to carry on its work. It's been good for me. It came to me a couple of years ago when I had been redeployed out of my previous role, because I wasn't coping in that role, because of my mental health, and it's been part of my journey back to where I am today, and onwards and upwards, as it were. The main thing is that we don't - if we don't do anything, nothing's going to happen. All we can do is try and try in whatever ways we can. I'm going to go through some of the things that I think are important to our network, some of the things that work for us, and see what you think. I found that collaboration s are incredibly important. We are very lucky with that. We have 3/4 staff networks who have got LGBT, BME, and an action group that sits separately but - it's not staff-led at the moment. They all work very closely together, and I know that not everyone is as lucky as that. We also are able to to work very closely with the Trust as well. For example, with the WRES that Christine was talking about earlier, our BME network have been able to look at the data that is contributing to that and analyse that with our HR department, and we know from their experiences and their links with external networks that that is kind of a rarity. Not many people are allowed to get their hands on the actual data and see what is actually going on. It can be difficult to engage within the Trust. The more pressure there is, the less people I get emailed back from when I send anything out. It's just the way it works. If I don't email it, they're not going to come. So, if we don't try, if we're not in touch with the workforce, I can't represent their views, and I can't do anything that they want me to do. So I will always keep doing that. Externally, we've got links with other networks. We are starting to link with a new one quite close to us in proximity. And I also append my professional disability network with physiotherapy, so we've got various outposts and infeeds going along from different people. We've also got good senior management support in our Trust. This hit a nerve with me in some ways because we should all values ourselves, and we're not very good at that. We should value ourselves as individuals, and as our network. I don't think my chief executive expected what he got when he told me to show him what our networks did for the Trust. A 40-page document later, I think he knew! So, communication is massively important, as with everything, and there are always places to go and changes to be made with that, and I definitely don't think that we're there yet. My personal way of doing things is drip-feeding. I want to get the message in as many different places as I can in as many different ways as I can. People have it sink into them as they walk around the Trust, that information to be there when they look for it, and in the place they're going to find it. One of the things with our network is our intranet. We're not that easy to find. I personally look under the Staff Room for staff. That's not where our network sits at all. It makes sense where it sits but it's not where you would obviously look if you don't know the Trust structure. So we're going to have that changed a little bit. Our comms team are great, they're helpful. We have had meetings with them. They're doing more for us. We are able to work better through meeting with them, understanding each other's needs, our busy times, and what things are most important to us, but they're under so much pressure from everybody else that they can't always do what we want them to do when we want them to do it. So I found that making friends with them really works. I can now just send an email and say, "Can you just shove this on Twitter?" And up it goes, rather than a big debate. So, making friends really does work. We've got inroads with our new starters as well. We've got more presence at our corporate welcome which is what staff come to when they join the Trust, a bit of a talk from each of the directors, and what the Trust is all about, so we are going to have a little side-show in the middle of there. We were previously invited to come to the lunch afterwards, but I don't know about you, but I'm not going to walk up to random people at lunchtime saying, "I've got lived experience, have you?" So it didn't really worked. Rather than that, we're going to get that message there, so it's up when nobody is talking, and if it is of interest to people, they can watch it. If it's not, they don't have to, but it's there. It's just another way of it sinking in. Also, just about our language. I was once told by our HR department - or asked, more to the point - "So what disability do you think you have?" Not ideal. It was meant in a very nice way, and there are so many other examples I have of similar things that we really need to think about the language that we use. Sometimes, the best bits of communication come from where you least expect them to. This was a card I put together over a weekend when I was asked to do a joint presentation with Christine at our nurses conference, and it started off as a little piece of paper that I printed off at home. It went down well there, and I had an offer for it to be funded and made up properly. Then I took it to one of the WDES engagement events. It was a lovely moment. Before he knew it would be before he knew it was my card, he was tweeting how much he loved it. Something little that I just came up with one day randomly became something that actually got that message much wider and across the country. There are loads of challenges. Engagement is a massive one. Like I said, more pressure in the workplace equals less likely to respond to me. I'm feeling as well, I just moved back to clinical from an admin role. I have way less time to devote to the network now. It's much harder to do all the things I want to do. Knowledge is a big one. I've been in my role since April. I think my manager is just about getting to the point where she knows what LEN is, but normally, the reaction is, "So what is that?" I'm going to get told about time. I will go really quickly! Another one that I will pick up on here, because I'm sure you know about knowledge and understanding, is stereotype. And these can be really difficult. I'm a physio. Typical thought of a physio? Young healthy, sporty, and female. Disabled doesn't fit with that, doesn't give the image most expect of a physio. So I'm away that my professional body working to change that by showing the role models to make changes in the future. We've got lots of different things going on. Like I said, we were in partnership with our trust, who were there coming up, and it's a massive opportunity for us to put things at the forefront and do the most that we can. We also have various projects under lived-experience practitioners using their mental health experience to help with mental health patients, and disability as an asset. Just a quick look at some of our most successful things: the most successful things that I've managed to put out there are the things that are a little bit different. So the image on the left, that was my very first event. I went round our building, put out posters and cakes, and the cakes had nice messages in them. People remember those today. They get mentioned on and off all over the place. I also sent them out around the Trust to other places that maybe are the biggest building and wouldn't normally get involved. The one with the big chocolate word, that was our play on Lent, so we asked people to give up things that they knew weren't so good for their mental health, like making sure they had a lunch break rather than missing it. The elephant on the left-hand side, I'm not sure if that is Lenny or Nell. We had two elephants who were about this big, and they went around the Trust with various people. I took lots of photos, get them on Twitter, of people just putting their own message. Even got our chief executive to do it, and that went out as well. Most recently, it's the one with the box. That was this year's mental health awareness week, and that is never judging a book by its cover. It's unbelievable how many people thought that black and green bottles were different drinks. It is just lemonade with food colouring. Made the point, and they went out around the trust. I need to speed up quite a lot? Yes! Disability is really important. Feel free to come and talk to me about it if you want. Fear is a massive one in people in disclosing. We need to make sure that people get positive experiences and reactions because you can't expect somebody to put themselves out there if they're just too scared that what they're going to get back isn't going to be a good thing, so we need to prove those, show our achievements, show what support we've got there, and show our affiliations. We were saying at lunchtime how what I've seen today is how much better education are at showing what they are affiliated to and what they've achieved rather than what the NHS are. A nice one on that. We need to take a leaf out of your book. Finally, I wanted to show you a video that I had the opportunity to make. It's just about my experience. There's a lot I want to do with this and take it forward into different things. I would press play, but there's no mouse on there. It's not on my screen. I'm not entirely sure. I will give it a go. Anyone able to help? That will be great. It's just not ...! While I do that, it's just about the story of an opportunity to make, it's the story about my journey. It's not what I thought it was going to be when I started doing it. The facilitator helping us make them said first you find what it means, what it really means, what it really, really means, and then what it really, really means. This is it.

[Video]: "I used to be a physio. To be told that I would be one of them, I never would have believed it. I loved my job. I was good at it. ... just where I imagined. Life was good. But that wasn't to it. I struggled with my mental health. I [inaudible] too scared to see my patients. Thinking about it. If I couldn't see patients, I couldn't be a physio. So I moved into admin. I lost friends, my sport, my career, and I lost myself. For the first time in my life, I didn't have a plan. I didn't know what next. The answer came when I least expected it. I found purpose, a way to help others to make a difference. I started to believe in myself - just a little at first - and I began to change. With time, I wanted to be a physio. I needed to be a physio. When I got the call saying that I got the job, I just couldn't stop smiling. Yet, still more hurdles. I was good enough. I was the best at interview. They chose me. But that still wasn't good enough. I felt like I had a problem. Being told how much I would struggle. Lots of questions, not many answers. Just more uncertainty. I fought to find advice, to find answers, to find help and support. I fought the urge to say no, it's too hard. By the time I started, I was terrified. It's scary and exhausting. I'm shaking and I want to hide. I still really want to be here. I'm a physio again. That's me. It feels good to be back in a place I lost forever. [Applause].

>> Thank you very much, Christine, Vikki, and Sue. I appreciate the personal story you shared with us, Vikki. We've run out of time for questions. Are you guys staying to the end? Yes. Please catch up with them over the break time, and the reception afterwards. So, thank you very much, guys. A round of applause, everyone, please. [Applause]. Come and take your seats, guys. Thank you very much. Now we're going to move on to the debate this afternoon. So we've got until until about three o'clock for this debate, and I hope that people in the audience are going to participate in this as much as possible. What we are going to do is, if you raise your hands to ask a question, we will move the mike to the first person who raises their hand, and we will make sure the mike gets to the next person before their question is answered. We will try and work it that way. If anyone is asking questions in BSL, the interpreters will be able to help us translate. Mike is going to moderate this session very ably, and Diane is going to take one side of the debate, and this is on the value of charter marks for disability equality in our sector. And, on the other side, will be Tim Levine who is from UCL itself arguing the other side of this case. So we're going to start with a few slides from Mike to begin with, a couple of slides from Diane to put her case forward, and then Tim, and then we will take it from there. How are we doing, guys?

MIKE: Welcome, everybody to UCL, those who didn't get the welcome this morning from Rex. All the slides you're going to need and that we're using today are in your packs, so, for those who didn't get a pack - don't go now and get one if you can avoid it - but, in the break, go and get one, they're free, and they've got everything in them today, including the map of the venue, and a list of all the delegates as well, which are your colleagues here, so you can find out who else is here. There are spare packs. If you need a spare pack, we've got one or two spare as well. Is there a lapel mike I can use? A couple of other admin-y things. It hasn't been mentioned yet, so I'm obliged to do so, so might as well get it out the way now - thank you very much. Can I swap it for that. Thanks very much. So, yes, GDPR - isn't it exciting! Have we all heard about GDPR.? If you haven't, I'm not going to tell you. Look it up. I'm boring the gentleman here. That's a point of view! Either way, we're obliged to adhere to it that means we can't live stream this event typically. However, we've got special permission to do that on the basis of public interest. This is an important precedent to mention to you, that, in order to make this conference accessible, we have to livestream it, which was a successful discussion we had at UCL, that's the advice, that's the basis on which it's been live streamed. Everybody else who will be live streaming their event, we've got a statement, it's in your packs, you're welcome to borrow it and use it, that's our statement on GDPR. Quickly, before we move on to the real bread and butter of the afternoon, don't forget to feed back on flip charts. Rex and Sharon are here. Can you indicate who you are? They're going to tour around with the roving mikes. Please wait until one gets to you. It's tempt to go start speaking when you're called up. Nobody can hear you, apart from people immediately around you, perhaps. Certainly the people listening online won't be able to hear you, and there will be deaf people or hearing-impaired people in the room who require the loop and so on. Please wait until you've got the mikes, if that is all right. Are charter marks the answer? Have you found the slide? Over to you, Tim. He's over there. He will get a mike in a minute. Tim has already been introduced. Dr Levine, I believe. We've got Diane Lightfoot from, and she's going first, though. That's right. So I would like short contributions or questions only. I'm going to ask Siobhan, who is working with me here, to identify about four of you at a time, actually. I'm going to call to, two speakers, one to respond, and then another two. That's the way we will do it so there is no delay and also so Rex and Sharon know where to go to find you in advance. Right. These are the logos for the main charter marks. I've no idea, Patrick may have shown you these this morning. I will - I will blissfully ignore the fact that he's done that. We have Athena SWAN, Race Equality charter mark, Stonewall, the LGBTQi+. It will be in a - we have the Disability Confidence symbol. What do all these charter marks, or symbols mean as far as we are concerned? They're used heavily - certainly by institutions and others - institutions in the sector elsewhere in terms of Stonewall, and this is standard, and the Building Confidence, to show how good we are. Aren't we great? We are really great. We've got it all sewn up here. We do a bit of the same as well. We are the only institution that has Stonewall, Race Equality Charter mark, and Athena SWAN. It's evidence of our work in these areas, but it's not the be all and end all. It is important but it isn't enough. So, are we with it on the slides? The next one, the disability standard is the best way of checking how disabled people or disability-smart your organisation is right across your business, your business. That's a quote lifted from Diane's BDF website. And, depending upon when you look at the stats, there are certainly a small number, arguably a minority at times, of people who apply for the award who get it. That's quite significant, I think. However, you don't want this to be something just literally anyone can get, do you? Otherwise, what's the point? What is the point in filling in the form if you know that's it, and you're going to get it. It's a dilemma in some ways. If you make hard - if you make it hard to get the award, do you then exclude good organisations? If you make it too easy, what's the point? I don't know how many people here have gone for the two ticks or disability in their organisation, disability confidence charter marks. We at UCL have deliberately chosen not to do that. Patrick in Manchester said this morning is because it is too easy. Fill a form in and get it. No real robustness to that. That's why this afternoon is not an attack on charter marks, it's the principle of should we use them at all? Are they useful, and are they a useful means whereby we can measure and respond to, and claim genuine credit for attainment around disability equality and genuine inclusion? These are the areas across which the ten elements of the disability standard measure your organisation's, competence. I won't tread a Diana's toes, except to say that one of the areas, key to measurements of your sequence success of the standard, is how well you get people you procure from to - your procuring arrangements to comply with disability standard requirements and with disability equality. Another is to measure how good you are with your products and services. That's one - that's a tenth of the standard looking at products and services. How pertinent or controllable are these areas to you and your organisation, or, for that matter, for those of us in higher education as a sector. The question is: if not charter marks, then what? The disability standard has - I have to be absolutely honest greatly helped transform the work at UCL in many respects. We now have a structured approach, a coherent approach, in order better to respond to disability equality, accessibility, and inclusion issues for disabled staff, and students, actually, and Rex chairs that group, the self-assessment team that leads that work. It is also revealed in in sometimes stark relief our shortfalls, shortcomings, or "the journey left to travel" at UCL. It helps us to set benchmarks. We have an action plan because we are doing the standard, and it enables us to measure ourselves against others. Nonetheless, we put in an enormous amount of bureaucratic effort to address the 150-plus criteria and tick the relevant boxes when we apply for it and failed. We just came forth of getting the standard this year, so that's a problem, but it is reality. We need to be honest about that and say we're going to aspire to get it next time, by the way. That's what it's like. This greatly disincentivised many of those involved in our application, and it has a not inconsiderable effort to get some people back on board with going through the process of applying for this charter mark, so I guess we're asking is it worth it? Is there a better way? If so, what is it? Hence my conflicted quote on the slides. It's in your packs, and I'm happy to go over it later if anybody needs me to do that. Without any further ado, that's set the scene for what I hope will be a lively, friendly, and interesting discussion this afternoon. I will start by asking Diane to, if you like, be a proponent to argue in favour of charter marks in general, and most specifically in terms of the disability standard, at least, for around five minutes - five to ten minutes at the most - and then Tim for up to five to ten minutes as well putting the alternative point of view. The quicker we all are, the longer time we are we will have for debate from the floor. Diane, if I can hand over to you. Thank you. Mike. I

DIANE: I think - I was 15 the last time I did a debate! That's at least ten years ago, so we will see how we go. Thank you for laughing! I haven't got many slides. I'm Diane Lightfoot, chief executive of the business disability forum. We are a not-for-profit membership organisation that supports businesses, including universities at higher education institutes to get better at recruiting and retaining disabled employees, and also about supporting disabled consumers, in your case, students! What is this disability standard that Mike has told us about? It is a whole organisational framework, and it is the central ethos on how we work, because we believe to get disability right - whether for employees or students - it takes a whole-organisation approach. It's not just the domain of HR, or diversity or inclusion teams, or worse, and we still see this in some cases "corps social responsibility". To get it right, it's got to be right across the organisation. The ten areas of the standards are up on this slide, are first commitment. That's about senior leadership. You know if you've got leadership from the top, that makes a huge difference in driving culture. Second is know-how, which is confidence of line managers, academic support staff, so really embedding that throughout the organisation. The third is adjustments, so, in the workplace, or indeed for students, . Fourth and fifth are recruitment and retention which kind of speak for themselves but retention also includes career development and career progression because we know there is generally speaking a gap between the the career progression of disabled people and their non-disabled peers. The sixth Mike touched on is products and services, procurements, and we know that this is something that a lot of organisations, not just high er education really struggle with because it's about influencing supply chains. Sixth is your customers which is your student population and making sure that, actually, how you support disabled students is a USP. Eighth is communication - fairly self-explanatory. Ditto nine, premises, and information, communication, technology. So why do you think you should do it? First of all, disability-confident has its place, the disability standard takes you from being disability-confident beyond that to be truly disability-smart across the whole organisation. I've talked about the whole-organisation approach, and that is really important, I think, in helping to identify barriers for both employees and students, and then, from that, being able to identify priority areas in a real evidence-based way, and being an audience of universities and academics, I'm sure that evidence-based is very important to you. There is also that saying "We manage what we measure", so, if you don't know what you're measuring, and you don't manage it, how on earth can you have KPIs, be a senior management team? How can you demonstrate return on investment, in investing in disability and diversity? How can you make sure that you get the investments to keep doing that in your team and to grow it? How else do you monitor your progress and check you're on track? It also means that you can benchmark and learn from others, not just in your own sector but beyond as well, because there's some brilliant practice in other sectors as well. It also is visible. It is a way that you can demonstrate a public commitment and prove it, and prove that you've been accredited, but it's not just you saying you're good, but you've been assessed as being as good. I've got at the bottom "transformational" because we see the disability standard - there should be another one in the middle there? No, there isn't. Transformational: we see the disability standard as more than a Charter Mark, it should be a tool that really helps you make meaningful change in your organisation, and that's the feedback we get from all sorts of organisations, including when I was talking to Rex over lunch that it had been transformational. Anything can be a tick-box exercise if that is how an organisation use it. Those who use even just a self-assessment form of the disability standard, you don't have to do the full assessment, you can use that as an action plan to help transform things for disabled people in the organisation. As for the point of it being distracting or bureaucratic, it's a structure to embed, so once it is embedded and it's a tool, and it's a framework, it's just how we do things around here. So that should be something that, once you've set it up, becomes much easier to manage. It is also really important because it's the not static been we revise it periodically to ensure it reflects changes in law and the wider society as a context. It's not a one-size-fits-all. It's flexible. You can do a full assessment or self-e the evaluation. We're about to launch a global version, because businesses have told us that they want something that works in other countries. No university, I should say, has ever been able to tell us why a specific section isn't relevant to them, and, if organisations can score goals - which I will talk to you about in a moment - there is evidence that it can work. Just to kind of reiterate the points that Mike made in the opening, there are - there is a lot of work that goes into it, but, for us, it's really important that it is rigorous, robust, and meaningful, and it has meaning for disabled people so they can feel confident that this is something that will make a difference. In another country, which I won't name, there is an index which I think something like 16 companies who did it instantly scored 100 per cent. That has no credibility. This has credibility. Finally, to say this picture here is of Mona Patel, the equality and diversity specialist at Manchester Multi-disciplinary University. I said I - Manchester Metropolitan University. They scored goals which is over 90 per cent. She says, and I promise to read it out in full, "There are two widely known improvement award, one focusing on recruitment of employees of long-term health - the business disability forum measures how disability-smart an organisation is right across the business." The BDF's assessment is a rigorous assessment of an organisation's disability-confidence involving a wide range of stakeholders. This is borne out by the breadth of evidence required in a submission. Organisations like the BDF help to keep disability, moreover, inclusivity, on the agenda, because not only do they highlight weaknesses but help to emphasise what employees are doing right, and they encourage other organisations to follow suit. As a result, organisations invest in making sure that the work-life experience for their disabled staff will be a positive and productive one so that they are able to reach their full potential." I will leave it there.

>> Thank you very much. [Applause]. Tim?

TIM: Good afternoon, everybody. So I know - I've known Mike on and off since I went to the staff disability forum meeting, maybe three or four years ago. I was there as an a11y. I'm there as a member of my family whose work experience is highly affected by disability. That meeting was the only one I went to. I was impressed. I felt that the disability that my son faced, for example, was taken into account at UCL. I then became an a11y of other equality action at UCL by the Swann swab network, and of course Athena SWAN has now moved to cover all genders, so, in essence, I'm not an a11y in name, but I would have to say, because almost all the practical actions are done to promote genders other than my own, I'm truly there as an a11y. I'm used to being an a11y. There's a slide on this one.

MIKE: Bear with us a moment. We are trying to sort out the problem with the slides. Give us a moment, please.

TIM: They're partly aide-memoirs, so we can just go.

MIKE: Yes, can we try to get Michele to sort them out. Tim, you can carry on. Putting him at a disadvantage. Tim, yes, carry on.

TIM: I'm not going to talk for long. I identify with Mike's help several problems with charter marks. A really obvious one is that there are some people at this university who are working very hard on gender. Some people working very hard on BME relations, and some people working very hard on disability, and they may all roughly be doing the same kind of thing - trying to prioritise one set of action over another, and somehow duplicating effort, and somehow not communicating enough. Having the charter marks as they stand may not be the best approach, and I say this because I spoke, I heard from Julia who was standing a bit over there, but somehow - in America, they're piloting a process where those three projected - there you are. They are covered together. I don't know how much more you're going to be able to say when the microphone goes around. In an organisation that has a a SEE change, and they're going to try to bring together large groups of people from all different areas of concern, rather than just hiving off individual protected characteristics. There's an issue with charter marks is that they prioritise individual good. A huge amount of effort. I'm an academic which means I have freedom under statute 18 to do whatever I like. Also, I got the impression my boss wanted me to do this. I did it for months on end. I did nothing but. When I talked to all of my colleagues at Athena SWAN circuit, they were horrified. They've got jobs to do. They have to fit this in, highly busy academic careers - Mainz a little bit quiescent at the moment - so they've been working in gaps, trying to do an Athena SWAN application in four weeks. I gave it as much time as I needed. We had sailed previously, so I knew that this was going to be a really big effort, we had failed previously. Like Mike said, it brings out a - failure brings out a huge amount of disappointment. We will come on to that later. There is another issue that one can imagine. This is a top-down exercise. I identify 43 main categories of question, in an Athena SWAN application. Mike identifies 150 or more overall questions to address in a BDF application. It may be those aren't quite the right questions for you, but you're forced into conforming and, if someone in your organisation is very creatively thinking, because it is only individuals who have these thoughts, these haven't been handed down by some extra galactic power that these are are the 43 things we must be doing, then maybe they're not the right ones. The final thing as well, it's a tick-box exercise rather than going for cultural change. I've got a quote that I put on the final slide, at I won't ever have time to read it, but I tried to summarise it here. You can see the full quote at the end. Slides. And this comes from Caroline Fox, MBE, one of the founders of the Athena project, someone who became interested in sexism in academia. It's not about conspicuous initiatives or being better than the next department, it's about finding where the problems are and working hard to solve them. Recently, major funders adopted these awards and they've become mainstream. There's a danger that it absorbs of culture of change into the prevailing culture of stasis. So you have high-profile events, counting how good we are, and trying to get a higher award than the Imperial - that's what UCL is all about! [Laughter]. This illustrates that the most important lesson is to force culture change at the bottom every day with everyone, and you can't necessarily do that with a charter mark. It's very hard to measure. Okay, so here's an example of what I would like to look at with Athena SWAN, is that I think I was brought up in a fairly moral house. I knew that women and men were morally equal. But that made no difference to anyone. And never did. And then a government white paper came up called Realising Our Potential in Science Engineering and Technology in 1993, and it proudly declared that the UK's most undervalued resource was women. This is government information that women are being undervalued and their careers need to be promoted. That made very little difference but it did allow the Athena project to get off of the ground. They went to a history as shown here. They started the Athena project in the Royal Society, developed a charter independently. They eventually enlarged their charter in 2015, and they have currently a 40 per cent success rate nationally, but a single key event that happened in 2011. The fund ing link. Without the funding link, no change would really have happened. So it is actually providing - it's more than - this phrase "practical morality" is something I've made up and doesn't mean anything, but that the morality doesn't do anything on its own. A couple of more points: we've mentioned the fifth one, repeated rejection is demoralising. The sixth one, if my institute has. 20 million of NHS funding roughly every five years, if we fail to get our silver award, what would the Daily Mail have to say about that? We would really get away with using Athena SWAN to block people having sight-seeing research that gives people sight back? I doubt it. I think that these charter marks are somewhat overblown in their - in that no-one has really tested the strength of public opinion around equality and diversity. We sit in a somewhat ivory tower where we believe that funding does require this chart er, but it perhaps is a promising that wouldn't be delivered. That's all I've got to say. [Applause].

MIKE: Thank you, Tim. Thanks very much. Have we got the slides working again?

>> Captioning's not working.

MIKE: I'm going to carry on. Let's hope the slides catch up. That was a good setting of the scene, I think, from both sides. Thank you both very much for the effort and time that you put into explaining your positions, and to record those arguments. We've now got a series of questions which will be on the slides in due course if they're ready, but they're in your packs, put together by the NADSN Steering Committee, rather than promoting strait-jacket debate, you don't have to adhere to them directly. We've got half an hour or slightly less in which to discuss them. So, how can we ensure that a charter mark in the area of equality is really making a difference to the experience s of disabled people? And, how can we ensure that charter marks aren't just a box-ticking exercise allowing higher education institutions to appear to be meeting a standard while, in fact, perhaps not doing so? That kind of frames that discussion we had. I will move on to the subsequent questions if and necessarily appropriate. Siobhan, can I have a show of hands of people who would like to make a short contribution or ask a question of our two contributors? A show of hands? Siobhan. Can you? So, okay, - go on, who else? So, can the people with the mike see - two more? Keep your hands up, please. Right, right in front here. Anybody towards the back? Okay, the guy at the back. Thank you. That's where we are going to start with those four. I will take Anna first, and then the woman behind her please, when you're ready, but hang on until we get the mike.

>> Thank you all three of you for really interesting contribution. My question is whether you were aware of any research or feedback that's been received by groups like Disabled Staff Networks, race networks, or gender networks, whatever, about the experience, about how they perceive the process within the organisation and whether they think it has made a difference going through trying to get one of these charter marks?

MIKE: Research into the views of networks. Thank you. The person behind who Siobhan indicated?

>> I'm from the University of Warwick. I just wanted to say as far as I can see both - whilst I can see both sides of the story, basically, I believe that charter marks, whilst they are a lot of hard work, they are actually the driver for change that we've seen in higher educational institutions over the last few years, certainly with regard to Athena and race, people are talking about things now, and I think again, with disability, we've just - Warwick has just subscribed to the Business Disability Forum, and, already, we've got a steering committee together, chaired by the provost, and, actually, it's giving us a route in to senior management, to make them aware of things we need to improve on, and we need to be more proactive rather than reactive.

MIKE: Which organisation?

>> It's Warwick. Uni.

MIKE: If you don't mind telling us, that would be useful when introducing yourselves. If you don't, that's fine. I won't bring on speakers yet, because there's been substance, Anna gave us a question, support for the - we will carry on with the question from the floor. Before we bring these two gentlemen in whom Siobhan indicated, can I have another show of hands of people who want to speak? Anybody else? Another ...

>> And then up the front.

MIKE: The man on the front row ... . Okay, that's fine. We will come to them afterwards. The two gentlemen first, then. Would you like to come and take a question? Okay.

FLOOR: I'm Barry, and I'm a service-user. Basically, my question would be is that -

>> Can you hold the mike close.

>> Basically, my question is that a lot of - a lot of people with disabilities don't know about this. It's not actually widely publicised. Why actually spend more money unless you're going to publicise it, and actually get us to understand what these charter marks are, and so on?

MIKE: Okay, thank you very much. Who is the next person, please? If we did get the mikes over to people while the previous person is speaking, that would be great.

>> Hello, yes, I'm Mo from Birkbeck. I just wanted to contribute to this debate by confirming my opinion in that, for me, the charter marks are really a tick-box exercise. I think Tim has it in one of his slides. There is really no cultural change based on my experiences in previous academic institutes. That's where I was effectively rushed into a meeting with human resources director, and encouraged to have a settlement agreement as opposed to have the robust governance of the charter marks that is meant to ensue.

MIKE: Thank you. I'm going to check with Diane and Tim. Would you like to come back at any of the points that have been made? You will have another chance.

>> So the first question was what is the response any research feedback from disabled staff and disabled staff networks, and how they perceived the process? So, the moment, the disability standard doesn't directly interact with disabled employees and disabled consumers, or students. That's something we are changing. We're going to make it so that we are relaunching it next year that 20 per cent of the mark will be based on direct conversations between ourselves and disabled employees, and disabled students for universities, and we're just looking at how we make that work at the moment so that it isn't the person who is doing the assessment being able to so sort of self-select which people it goes to to make sure it is really robust. That said, at the moment, we do ask for results from staff surveys, we also look at the messages and the activity that comes out of disabled staff networks, what they're saying, any feedback. That's how we do it at the moment, but we recognise it's not perfect, which is why we want to do more. The second one: I completely agree with driverless for change, and I'm really pleased that Warwick has joined us, so thank you. The group for senior management is really helpful, and provoking conversation is really helpful. I also think going back to some of the other points that a standard is only one piece of a jigsaw, and it's got to be part of a genuine commitment and a genuine organisation-wide strategy, whatever sector you work in. Then, the final point - a very good one, I thought - not the final thought, actually - the one about disabled people not knowing about it: we don't generally describe a disability standard as a charter mark, but as a management tool. We are thinking about making it into more of a charter mark and set specific benchmarks if organisations are interested so that it does have more disability with disabled people, and so that disabled people are able to hold organisations to account to say, "Hang on, I know what you should be doing if you say you've got this," so again it increases the rigour. And the last gentleman, I'm sorry to hear about your experience, really. It just demonstrates that having it across the whole organisation is absolutely key.

MIKE: Thanks, Diane. Tim, do you want to say anything? You don't want to say anything? That's okay. I'm going to go to the next question on the slide. We need to involve staff participating in charters but we struggle to engage disabled people. Should we bother? Right? That's another question that's come I think really, if not literally, then metaphorically from the floor, of people's experience. Yes, so we had two more people lined up. Before I call them in. Let me have another show efficient hands. This might be the last. I want another four people, so, can you have your hands up and Siobhan will identify you. Two more. Okay, four altogether. We will take all of you, and then wind up the discussion, okay? So, yes, which one are we going to first?

>> Hi, I'm Liz from Leicester. My question would be to Diane directly: so, it says that there needs to be a system for monitoring progress, and, as your company doesn't directly interact with people with disabilities, how do you monitor your progress with companies? How is that measured and tracked, and how do you ensure that it is a robust enough system to do what it's supposed to be doing when it comes to people who have incredibly variable disabilities? It's not a static issue, not a yes/no question. It feels like there would need to be something very wide-ranging, and that would be to interact with people with disabilities in order to effect ively manage their progress that's been made?

MIKE: So how do they monitor the effectiveness? Thank you. The next person, please.

>> My name is Jonathan. I'm visually impaired, and I'm at Wolverhampton. I have had a lot of experience of standards, and, to me, the basis of charters or standards, that people, if they don't adhere to them, you can't take any legal action at all.

MIKE: Sorry to interrupt. Is the microphone working? People won't be able to hear you. Could you start again? Sorry.

>> Yes, in my own case, I applied for a job in 2012 to a university that was saying if you - it was a criteria on the interview, on the application form, [inaudible] down and - they told me, the criteria that on the application form. I went to the disability officer that held the interview. They had a few experiences of dealing with the disability discrimination act, I mean, I remember there was a time at which I think the two-tick system applied to work ers [inaudible] company, but adhered to. I applied to - they told me, sorry, the vacancy is filled. I told them -

MIKE: I'm going to stop you because of time. Can you tell me what your point is around charter marks?

>> I think it is important if you have a charter, if you don't keep to it, it should be easy for people to complain and show up people who don't keep to it. It's all very well - but you do it. No-one can see when no-one doesn't keep to it. It is a waste of time. It is a bit like having a disability convention. If people don't keep to it, they don't need to have it.

MIKE: If you've got the charter mark, how do you measure it?

>> Very important to complain.

MIKE: Indeed, and how do you complain, about what impact does that have a. Thank you very much. Very good point. Two more points before we get the speakers to wind up first. Who is going first? Fine. Yes.

>> Yes, just a little bit devil's advocate. I'm wondering, really, if we have a chart er to say that are we not potentially sleep-walking into a space where we are governed by a two-tier approach to inclusion? What I mean by that is that, rough by about 92 per cent of the economy is made up of so many small enterprises. Some aren't able to facilitate the kind of embedded audits that the chart ers currently get to do. I would like to be able to say is how do we make sure that these charters aren't inclusive just for the companies that can afford to pay for them.

MIKE: Thank you very much. Finally? Your microphone isn't working.

>> [Inaudible].

MIKE: Still not working, is it?

>> [Inaudible]. Hello, Christina from the University of Hertfordshire. To the question of whether we should have the charter marks, I think, yes, I think it is very, very important to include and technique to disabled staff, especially staff that wouldn't normally asked to contribute, because I'm the chair of the staff network for disability and well being at the University of Hertfordshire, and I know there are multiple members who have worries and concerns, and they do not feel they can raise them necessarily, so they need to be heard for them to be able to make an impact in the organisation, and I completely agree with the idea of having to check at the bottom level to make sure that it's working culturally, because I'm sure, as senior managers, we think we're doing fantastically, and, actually, the case is not quite the same from what we've seen. In terms of making sure that the charter mark is helpful, I think there needs to be an independent assessment done from someone who isn't a part of the university, so it's more unbiased to make sure it is a clear picture.

MIKE: Good argument.

>> There's one more question? Do we have time?

MIKE: Then that will be it from the floor.

>> Hi, Julia Hubbard. I would like to address both the same points about the resources of the organisation, not only are you in a situation where small organisations may not have the resources to address all the points, but they also don't have the experience and the resources to cover up when things go wrong. So it's part of - is the process being rigorously addressed enough? Are the responses to questions being policed appropriately, or just accepted on face value, and I think the voice of the customer, the disabled employee, is incredibly important there, because there are examples of very large organisations with huge poor records that are in the public domain as part of legal processes now that are still getting outstanding awards.

MIKE: Thank you, I will abuse my question as moderator and put in a question from the end which is really Patrick's question from this morning: do charter marks reinforce a hierarchy? In other words, essentially, money is attached to swan swab swan, chasing money. Therefore, resources, if they go anywhere, will go to supporting Athena SWAN. That doesn't mean to that people don't spend 60 to 70-hour weeks getting the award without thanks - they do in Sam places. Nonetheless, where when there are resources, they tend to go in that direction because of the finance issue, and because there's a gender issue where it's 50-50 in terms of society but not in terms of the hierarchies within institutions such as ours. So, it's kind of Patrick's point. Does it reinforce a hierarchy? If so, or whether or not it does, I suppose, is the answer if we are going to keep to charter marks have one intersectional charter mark? What are your views about that that? We don't have time to discuss these, but they weren't a list we had to get to, they're a framework. We didn't really need them at this point but maybe I could ask you to discuss these afterwards, take them forward in the break and in our organisations, but you already participate with the charter marks. We don't have the capacity to do any more, and how can we spare the time to add a further one? In a sense, the same issues I raised about the would it be better to combine? This I'm, I'm going to go to Tim Tim and then Diana to finish off the discussion. Tim? Just a few minutes.

TIM: I don't have two or three minutes! I think we're going around and around these questions again and again. I don't think a lot of what we are saying now is that different from the beginning of the hour. To the gentleman who talked about guaranteed interviews. Indeed, my own family, who thought they would get a guaranteed interview didn't get the guaranteed interview. The more I thought about that, the more I thought of course they didn't get a guaranteed interview. What a stupid idea it would be that 100 people saw that advert and they all thought they could get a guaranteed interview. You can only interview up to a certain number. It is an unrealistic thing. A gentleman not far from me - Mike over there - gave me a wonderful phrase which is said that I should use and not pretend that I got it from him! "Insubstantial grandstanding" - I've been telling everyone that two-word phrase. It's easy for an organisation like UCL to get a beautiful web page, a lovely logos, good web design, and there's no substance there at all sometimes. I'm guilty of that too. I'm very happy that Mike has invited me in to tell you things that I've told you. I doubt that all of the things I say that we are going to do, I can even remember them a week after I've said them, so it's very, very difficult to put substance into the change. I'm talking about Athena SWAN which is privileged against some of the other changes, and it would be perhaps a good idea to put all these three things together, and, again, that is something that is coming from the United States, I gather.

MIKE: Thank you, Tim. [Applause]. To finish off this afternoon's debate, we will ask Diane to come back and speak for another two or three minutes.

DIANE: Thank you. I think there are a lot of common themes there, and the question about how we monitor progress, and how you make sure that this genuinely makes a difference for disabled people with a range of disabilities, it's a very good question, and it's difficult, because, once we've done the assessment, or if somebody does a self-assessment, it's then up to the organisation what they do with it. I would say, though, that most of the organisations that are members, they themselves are absolutely passionate about getting it right, and we generally work on the basis that people want to get it right and they need help to do it, and we encourage and try and provide support and help identify provide priorities. There are ten sections in the standard, and we work with organisations and say, "Look, if you're not scoring well on any of them, we maybe need to pick two or three that you can really start to make a difference on," and then crucial ly so the disabled staff can see they're making a difference. Sometimes, it takes a while. There isn't a perfect answer, and you're right to ask the question, which is why we are adding in the staff feedback to try and strengthen that. The question about the small enterprises is a very good question, and I think the comment about not having any of the - my experience before joining disability business forum is joining smaller organisations of disabled people and they're able to be flexible, responsive, and dynamic. We are creating an SME membership - so a little plug for that - and hopefully an app as well, and I know part of that will include an SME-specific version of the disability standard. With all these things, we are always trying to balance making it doable for a small organisation in terms of resources, whilst still being sufficiently robust and getting the quality control in there, because obviously that's important. That's not always the easiest thing to do. The thing about taking things at face value, one of the reasons why there are so many questions in the disability standard is it's a good illustration of that last point which is that we ask for tons of evidence throughout the piece which is why it is so onerous. Again, it is that balance. The thing about whether there should be one equality-specific charter mark - possibly if it is becoming a real barrier - but the reason we are just disability, have always just been disability and don't work in other areas apart from where there's obviously intersectionality because disability is the poor relation. It always gets as the one too difficult, too expensive, too scary. Until we think where the wonderful day comes when that is no longer the case, there's still a reason and a place to have something that is just about disability. To finish, I mentioned that we're going to do some news of the disability standard. I'm pleased to announce we're going to be doing one specifically for the higher education sector that has the language, frameworks, and the regulation of your sector. We are looking for organisations who would like to help us us shape it in some focus groups probably in the autumn. If you're interested, either contact us via our website or come and see us at our stand. If there is enough interest, we will think about doing a sector-specific benchmark as well, so you can see how you compare, and I wanted to leave you with a quote. It's quite a short quote. It's actually from KPMG, and it's talking about a technology charter which is a different benchmark, and he says, "Even when, years ago, we thought we couldn't meet all the charter points, we signed up believing we could grow with the help of the BDF." Sign up like KPMG did. You won't regret it. Thank you. [Applause].

MIKE: I think that last remark about sector-specific benchmark is a real open challenge, to be honest. I think that's a really interesting discussion that we to take forward as one possible way of addressing some of these issues. It can be more bespoke and manageable for our sector. Good luck. It's been a really way of opening this discussion up. Thanks to both Tim and to Diane for their time this afternoon. [Applause]. The debate will take people into corners, not adversarial corn - that's unrealistic - it's just about being on the same side. Thank you for playing along with that. Do you want to wind things up. Let's go to the break. Come back in half an hour. Loads of time. We've got loads of wallets next door to give away - no money in them! Anna Lawson will be coming back in half an hour with an exciting contribution about disabled people and Brexit. Thanks very much, everybody. [Applause].

[Break].

>> Okay, ladies and gentlemen, thank you very much. Half an hour break goes very fast, doesn't it, indeed? Mike, are you here somewhere? We are ready to start, then. Anna is ready. I'm very, very delighted to introduce Professor Anna Lawson from the Centre for Disability Studies at the University of Leeds which she directs. She is also a Professor of law. We are extremely privileged to have her here and give us the keynote speech. So I hand over to Anna. All yours.

ANNA: Thank you so much to Hamied, Mike, and all the organisers, for the invitation, and for the fantastic organisation and the inclusiveness of that, and also I want to thank you for the wonderful build-up that you have given to me - I think! It's going to be very hard to live up to it. I have a few disclaimers to make before I start in a minute. So, my talk is called Equality and Inclusion for Disabled People after Brexit - taking stock and looking forward. I decided to use power points in the end, but I know there are people like me in the room who can't see them, so, if they really are a prop for sighted people, but I decided that probably at this stage in the afternoon, we all need as many props as we can get! And I will try and describe the pictures as they come up. The first picture that we have with the title is of a hiker with a UK flag on his - him or a her? I'm not sure. Him. Maybe it should have been a her. On his back pack, he has a UK flag, a Union Jack, and he's looking at a map trying to work out what the terrain ahead is and which way to go. My first disclaimer is going to come next, which is that I think on the publicity it mentioned that I was an expert on Brexit! [Laughter]. I want to say I'm not! I don't think there are many experts on Brexit around! [Laughter]. I'm certainly not. I wouldn't like to hold myself up as one! Partly because the subject is so huge. The reason why I got involved in it is because I've done a bit of work on disability rights in domestic law, and also in EU law, so that's my own claim to any expertise in Brexit. Okay, the structure of the talk, then: I'm going to start by saying a few words just about context-setting, setting the scene where we are in terms of Brexit. I have had a cold, so I might cough from time to time. Then, moving on second to discussing how what we need to think about when embedding disability rights in domestic UK law after Brexit. And then, third, a few thoughts about what we need to think about in the context of the reciprocal arrangements, of the reciprocal agreement between the UK and other EU countries that will be important after Brexit. Or are part of Brexit. And then fourth, EU workers, people who are from other European countries who are currently working here in the UK, and the importance they have in terms of our lives of disabled people. And, fifth, funding. Those are the five main things. There are just a few concluding thoughts at the end of that if we're lucky. Moving on to the first section, then, which is context. There are different types of Brexits, as I'm sure you'll all have heard about over the last couple of years.

>> And they still haven't explained it properly.

ANNA: Still haven't explained it properly - still confusing! I tried to think what pictures would be useful to illustrate this, and so the first picture is of Theresa May looking outwards from the UK. And this is supposed to reflect the idea of a Brexit that some people call "soft," a Brexit that keeps us very closely connected with the EU, and with other European countries. And that might involve membership of the single market. For some countries like Norway, they we maybe members of what is known as the European Economic Area in the single markets, even though they're not members of the EU. At the moment, the UK hasn't chosen to take that route. But, if we did, a lot of what I'm going on to say would not be a problem, because our laws would have to remain the same. You know, we would have the same relationship in terms of law with the EU as we currently do, and the same reciprocal arrangements would be there would be some difference around funding arrangements, but much of many of the issues that come up in the rest of the talk would just not be a problem if we were to remain in the European economic area. Obviously, there are other issues which would be politically problematic around - woe would be obliged to comply with laws made by the EU but not have a say in what those laws were, so we would not be in such a good position as we're in now in many ways. But we wouldn't have the same worries of the ones that will come up in a minute. In the second type of - the second picture I've used here is another picture of Theresa May. This is her with her back to the sea, looking inland toward Europe, the idea of a more hard Brexit where we wouldn't have such close connections with the EU. Okay, and progress to date: I didn't know that this talk would fall not only on the day that Trump was visiting us! [Laughter] But also on the date after the white paper on Brexit was published. So I have read this paper now - I read it on the train on the way down - but I think it's just the fact that that white paper was published yesterday, the fact we are still in so much confusion about what Brexit is going to look like, or indeed whether there will be a second vote, and things change. It's very difficult to give talks on Brexit because we can't anticipate at this stage where we are going to be in the end of the process. So the picture to reflect this is of a snowflake in cupped hands, because it feels like that. Whenever I try and get a sense of where we are going, it melts! It disappears. It is very difficult to pin it down. So we have the white paper that was produced yesterday. As you will be aware, if you've listened to the news at all , it's very controversial because it takes a harder line than the soft Brexiteers were hoping for. It doesn't want membership of the single market, doesn't want membership of the customs union, but it does want a close relationship, and the creation of a new free-trade area that relates to goods with the EU. And speaks about many other types of collaboration with the EU. I will touch on those later on when we get to the relevant issues. And before I leave this context, I want to end by reminding you, or alerting you to the fact that all of this has huge relevance for disabled people, as it does for all sectors of society, but there are disability-specific issues that we do need to think about, and and was highlighted by the UN rights of persons with disability when it examined the UK in August last year. That was a very high-profile examination of the UK. It was the time when the chair of that committee made comments to the very - made very damning comments about the impact of austerity on disabled people in the UK, and when comments were made by other people on the UN committee about the fact that the UK used to be a leader on disability rights, but it was struggling to retain that status any more. So it has highlighted as one of its concern the potential impact of Brexit of disabled people and the government taking that into account in its work on Brexit. So, moving on to the next section, which is about embedding disability rights in our domestic law after Brexit, and we do, of course, have lots of disability rights which are already enshrined in our domestic law. But what I want to touch on in this section is two issues: the first is about specific types of distribute rights that are more strongly entrenched in EU law than they are in domestic law, and, up to now, that hasn't really mattered, because the EU law is part of our law as well. If we tear the two apart, we need to think about what happens to some of those rights that we currently enjoy partly because of their strong articulation in EU law. The other issue, which I will come on to, is slightly different, but I will tell you about that when we get there. What types of rights, what examples of these types of rights are there? First of all, there are a whole host of employment-related rights. EU law has been very energetic in developing employment rights, not just on disability but for many types of workers. Some of whom will be disabled, so, on pregnancy, on part-time work, on the whole host of other things. And the - this has been quite a focus in debates about Brexit, employment rights. It's one of the areas that features in the Labour Party's, one of its key issues - I can't remember, what does it call them? Key tests for a successful Brexit. It won't be a successful Brexit unless it protects employment rights. And it is in the white paper yesterday. There's a commitment in yesterday's white paper to no regression in the area of employment rights, so it is high up there on the government's agenda at the moment as an area in which it must make sure there's no regression, that we don't go backwards when Brexit happens. So that's encouraging. Discrimination: we have the employment equality directive which is a piece of EU law which requires all member states to prohibit disability and other discrimination in employment. Our equality Act has enshrined and includes everything that is in the Employment Equality Directive, but there are certain things, certain respects in which the Employment Equality Directive might be interpreted in a stronger way than our domestic law, and I just want to raise and to mention a couple of those. One is the definition of "disability". And this has been an ongoing thorn in the distribute discrimination act, and in the Equality Act. What does disability mean for the purposes of discrimination? How do you prove you're a disabled person for the purposes of bringing a case for discrimination? And the Court of Justice, the European Court of Justice, which is so demonised in the Brexit literature, has interpreted disability in a broader way than our domestic law, or it looks as if that is the case, very much as if that is the case, partly because the Court of Justice is bound to interpret its law, to interpret EU law, in accordance with UN Convention on the rights of persons with disabilities. Our courts aren't. Our courts are not bound to do that. The CRPD has a much stronger influence on EU law because of this obligation of the courts to interpret EU law in accordance with CRPD. So it has changed its interpretation of disability to bring it more into line with that of the CRPD. Another potential gap is that the direct ive includes various provisions around enforcement and remedy which are not so evident in the Equality Act, and, with the delayed cuts and various other things that are going on, it may be that the Employment Equality Directive would actually give stronger protection than our domestic law would. Then moving away from the Employment Equality Directive to another piece of EU law on discrimination, which is the transport regulations, so the air passengers' rights, regulations, and then similar ones in relation to ships. These give disabled people the rights not to be discriminated against when they're on planes, or on ships. And those issues are not included in our Equality Act at all. So we need to make sure that we don't lose out in those respects after Brexit. There is reference in the white paper to the need to continue co-operation with the EU in relation to transport, but it doesn't mention this particular aspect of transport, and there may be lots of other things it doesn't mention. It is only a white paper. It is quite vague in some respects. But it's important that we ensure that disability get left out. And then moving on to another area where EU law has been strong on articulating rights, stronger on articulating rights than domestic law which is accessibility. This goes back to regulations from quite a long time ago. There's the EU - gosh, I can't - EU Medicinal Products for Human Use Directive. That's from 2004, which is the one which requires labelling on medical products to be accessible, so to be in Braille, and in easy-read, and pictorial form. It is from EU law that we have that kind of accessibility now. Then there's been a massive increase in the focus on accessibility since 2010 because it's a very key part of the European disability strategy from 2010 to 2020. So the public procurement directives have provision for public bodies who are tendering, who are tendering for work, or for products, to make sure that accessibility is included. Accessibility isn't defined yet, and it would be by the European Accessibility Act - that would be to give more meaningful content to what "accessibility" means. But that would apply to universities who are trying to procure internet systems, or online marking systems - which is a bit of a bugbear of mine at the moment because we've introduced that and it is not accessible - so public procurement is really important, and EU law has taken this initiative of really embedding accessibility within that. There's also a directive on the accessibility of public-secretary websites and mobile communications from 2016, which is just entered into force in the UK. And then there's this proposal for the European Accessibility Act which was introduced in 2015 that hasn't yet made it into EU law. And it may not do so before we leave. So there are issues about whether we would continue with some of these initiatives that have already taken place, and I think we need to be very proactive in pushing for their continuance, and strengthening. I think the government is keen to have all political - all political parties are keen to be seen to be leading in this field, so it's probably an open door to push against if we can really make a strong case for the fact that we would be falling behind if we didn't do things to maintain current requirements and strengthen them. The European accessibility ability, I have -- the European Accessibility Act, I've heard that the UK has been unhelpful in discussions around this going on at the moment in the EU. I hope that's not the case. If we have the free-trade agreement around goods, it may well be that we would be bound by this European Accessibility Act in any case, because its main application is to goods. It would place obligations on manufacturers of a whole range of goods, mostly concerning technology and computers, television, phones, e-books, transport machines, service technology, bank machines, to comply with accessibility standards, and there would also be a mechanism for individuals to bring complaints if there were concerns that these requirements weren't being complied with. So then moving on, then, away from specific examples of rights that concerned disabled people, that have been articulated quite strongly in EU law, to the next issue around the embedding of rights, which is more general about the status of rights in our legal system. So I already mentioned that the EU takes a different approach to international treaties than the UK does. So, the UN Convention on the rights of persons with disabilities has to be taken into account by the European Court of Justice when it's interpreting EU law, whereas that isn't the case with our domestic courts. They can't just take account of the UN convention. That's unless it's part of legislation in the UK. Or it's part of EU law, or part of the European Convention on Human Rights law which we are bound to comply with, which the courts are bound to take into account. So, if we leave the EU, the UN Convention on the rights of persons with disabilities has a slightly reduced status in our domestic law, because, at the moment, as far as EU law applies, the UN Convention will govern how that is interpreted, and the equality and human rights commission has recommended, because of this, we should actually think about ways of giving the UN Convention of persons with disabilities a stronger status in our domestic system, introducing legislation which would require public bodies to give it due regard, for instance. Or thinking about other ways of giving it a stronger status than it has it has at the moment. There's also been concern around the Equality Act. At the moment, that is protected, it can't be changed very easily. It can't be - the defect can't be weakened or repealed, and a lot of things in it can't be repealed, because that would be inconsistent with EU law. EU law kind of under goods and protects our equality legislation. If we're not part of the EU any more, it would be possible for a government to - possible for a parliament to introduce law which would weaken the Equality Act in ways that it can't do at the moment. So there have been suggestions, for instance, from the House of Commons, women in equality committee, that consideration should be given to introducing legislation that would - introducing basically a non-regression obligation as far as the equality act is concerned, and maybe a duty to consider compliance with the Equality Act before it's introduced, so strengthening the status of the Equality act because we are losing under-girding protection from EU law. It gets less law-ish now! [Laughter]. The third section is reciprocal arrangements. There are many of the part of our membership of the EU. Just to give you one example concerning health. There's a picture here of the European health insurance card. This makes it very easy to travel within Europe. It means that we don't have to get private insurance. We can still access health services. We can access health service it is we need to when we're in another EU country. If we end up leaving the EU without a specific deal on this, then we lose the European health insurance card. That's going to have a disproportionate impact on disabled people who want to work or travel, study, or go on holiday to other European countries. I looked at the report to the House of Commons health committee last year, and somebody had done an analysis of how much it would cost to get private insurance for somebody who has - what did they have? - diabetes and a history of mild depression. They worked out that, for somebody in that position, to get private insurance for a week in France would cost them between £800 and £2,500. So, the white paper does actually mention European health insurance cards and the importance of carrying one with being part of that scheme. It also has implications for disabled people from the UK who were living in other European countries, at the moment, and for disabled people from other European countries who are living here. So we need to continue the reciprocal arrangements on health. Getting around: I've already mentioned some of the issues around transport, but there are other reciprocal arrangements around transport. The blue badge parking scheme works on a reciprocal basis in other EU countries. So, if you are driving, or if you take your card on holiday with you, you can use that in other European countries. Again, if we leave without a deal, and without specific consideration of that, we would lose that ability. Erasmus, the Erasmus scheme - this has been incredibly successful, popular amongst students, and also it's available to schools. So, a lot of people from the UK have benefited from spending a year or smaller periods studying in other European countries, and vice versa. That again somebody it's part if our membership of the EU, which would be at risk if there was no deal and there was no specific agreement on this, and it's something else that is mentioned in the white paper, as something the government wants to continue something similar to, not being part of the same scheme, but having similar relationships. Disability has become quite integrated into the Erasmus scheme. It's been problematic getting there, but it's becoming increasingly prominent on the operation of the Erasmus scheme, and we need to make sure that that equally has profile on - equally has profile on the arrangement whatever we do, so disabled students can benefit as well as non-disabled students. Data: good practice-sharing and research. There's lots of collaborative arrangements because of our EU membership in these areas. The government in its white paper yesterday had mentioned research, and its ambition to have - to continue part of these collaborative EU research funding schemes. At the moment, the UK get a lot more back. Researchers have been disproportionately successful - paced in the UK - have been disproportionate are getting EU funding, so the UK gets more money back than it puts in, but, under the new scheme, it's likely that it would only get back what it puts in. Some of that research is obviously on disability. If that is - that is important as well in terms of, I think, what goes on in relation to dict in the UK, and our evidence base on disability rights. Moving on to the fourth section, EU workers, so, gosh, already half an hour. I will speed up a little bit. So, there's two issues here. The one I'm going to spend most time on is disabled people living in the UK and how important it is to them to have people from other EU countries working in the UK. There's a couple of respects in which this has come to the fore in the press and various other circles. First of all, the NHS. A lot of disabled people will require access - disproportionate access to the NHS - and the NHS is very dependent on workers from EU countries and, indeed, other countries beyond the EU. There's a shortage now of doctors and nurses, that the numbers coming from the EU have fallen dramatically since the referendum. That's likely to continue obviously if we have a hard Brexit. I should say the white paper yesterday is categorical that free movement would end. Social care: it is estimated that 70,000 EU nationals work in social care at the moment, so, again, it's another sector where EU workers are really, really important to disabled people, and their quality of life. Personal assistants: moving on to where disabled people themselves recruit people to work for them, facilitate independent living and various other things, it's harder to get statistics on this, but anecdotal evidence suggests that it's very important. Just to give you a few examples, Jane Campbell in 2017 said that she had employed people from - how many? - at least ten EU countries over the past 20 years. And job Evans, - John Evans, as many of you know one of our champions, grandfathers of the independent living movement, he has said that he has had PAs from 15 different EU countries since he left institutional living. There's a concern if that labour dries up, it will be harder for disabled people to find PA, to find and employ PAs that are so critical in independent living. The second issue around EU workers is one I don't claim to be an expert in at all, and this is issues around claiming permanent residence for people from other EU countries who want to carry on living in this country. There are concerns around the way the tests permanent residence work, that people who are disabled, and also people who are carers for disabled people, will be disadvantaged in that process. There were reports last month, for instance, about I think she was a French woman who was the mother of a disabled child whose husband was also - her husband was British, and also disabled. She hadn't worked in the UK, and she hadn't been studying because she had been an informal carer. And her occupation - her application for permanent residence was turned down because she hadn't been working or studying. So those kinds of tests I think we need to be very careful about the disability-related implications of how that's going to pan out. That's both for carers and disabled people. And then the fifth area, the final area, is funding. So there's been a lot of concern in the Brexit debate about how much UK money gets paid into the EU. Some of that is used for research. Some of it is used for other things, but some of it goes into what is known as the European Structural And Investment Funds which are then paid back to different EU countries. With preconditions about how the money should be spent. There are various types of these funds. One is the European Social Fund. The National Council of Voluntary Organisations has estimated that UK charities get over £300 million a year through this. We need to think carefully about what is going to replace those for the disabled people people's organisations. There isn't a breakdown of what these funds are and what projects they're being spent on, but I heard yesterday that all the projects on supported employment in Northern Ireland are funded through the EU structural funds, so, we have to this carefully about what replaces these, and the preconditions that should be attached to ensure that disability, accessibility is one of the preconditions, independent living, various other pre conditions around the poorest section of the population that we don't lose out after Brexit. Moving on, then, to concluding thoughts. I've left this slide blank. I don't have any concluding thoughts apart from the fact this snowflake image that we need to keep in mind. It's very difficult, you know, things are constantly changing but what isn't changing is the means to keep the types of issues that I've been through in the forefront of our own MP and the government. It's economic and environmental and collaboration, and security collaboration, are clearly priority, and we need to make sure that disability is featured within those and it isn't allowed to slip under the table. Thank you very much. [Applause].

>> Thank you so much, Anna. That was amazing. Questions from the floor, please? Yes, sir. We've got one right up here.

FLOOR: Hello, I just basically, when we go out of the EU, right, technically, people with disabilities have really to fight for their rights. We have to actually put our things forward to the government, and we have to actually take it through to our MPs, and everyone. Basically, there would be a lot of things that will just disappear. That's not - you've got also to remember, when we get out of the EU, we've got to have new laws that are on fruit production, new laws on everything else. If it goes the American way, we will be getting rubbish to put inside our bodies, right? That's the reason why 60 per cent of the Americans are not really fit. Yeah? And it's basically and, in America, people can't go against it, because there's a law - can't go against producers. They can't do it. So, yes, you get - so, we have to join with someone else and if the producer is America or China, which one - well, what are your comments on that, Anna?

ANNA: Oh, I think that's beyond my brief! It's a good question, though, and I think it's important to this about what alternatives are. The white paper yesterday is keen on carrying on food, agrifoods would be some of the goods that would be within the agreement still, but I don't think that would apply to agriculture, so farmers and the production. I'm afraid it's so complex.

>> That's the point ...

>> I've got a person over here.

>> Thank you for that sobering presentation. Given the areas that you talked about in relation to to particular priority with disable people, is there currently any dialogue going on with government around these that you're aware of?

ANNA: I think is Sue Bott still here? That's a shame. I think Disability Rights UK has had some dialogue with them. I don't think there's a formalised structure. I know the Department for Exiting the EU might be open to having - when I talked to Len, it see if it would arrange funding to have a dialogue bringing people who are interested in disability and Brexit together (a) to talk about their plan, and, (b), for people to feed in their concerns. But I haven't heard any more about that since then. There's a lot of dialogue in Scotland, with the Scottish Parliament -

>> Yes. Thank you.

>> Another question here?

>> My name is Judy. I wrote a blog post about the impact of Brexit on disabled people. My name is Gee, and I wrote a blog post about the impact of Brexit. I'm writing on - one point, one question is is one, I think, something that is specifically disabled have to be concerned about, but generally, it is the issue of medication, the trade in medication, and equipment, medical devices, including tissue, and organs, and this trade therein, and how that will affect us. The second point is - what's my second point! I can't remember. I will get back to what I'm going to ask you.

ANNA: Just on that one, I think you're totally right. Actually, the white paper yesterday, I would say, it was recognised the importance of carrying on being a member of the European medicines agency. Obviously those are proposals in the white paper, and we don't know if the EU will accept them. They don't really fit very well with the four freedoms that are so central to EU law because they're wanting to take one of them and not the rest which the EU hasn't been keen on so far. So we don't know whether the white paper will materialise. But at least the issue of membership within that agency is something that's recognised as important by the government, which is positive.

>> From the experience as a disabled EU citizen, and how the government has been responding to that, I think it is we should be really concerned. They've been very, very non-responsive, and very high pressure towards - so I think the movement, people have been in touch with countries of origin and the European parliament, and trying to pressure around that, but it's been really tough, and it's been taking very long, and it's a thorough interest in the effects of tabled people as you mentioned, the permanent residency is not available for a lot of disabled people and carers, and it's going to be a lot better with settled status but in general, disability hasn't been high on the agenda.

ANNA: Thank you. I suspect you would know more of the background of that stuff than I do, but it's a massive concern. I wonder whether it's worth - I don't know whether MEPs have been approached, because they've got together to do a strong intervention on the European health insurance card, and I wonder whether this is something with the disability intergroup of European parliament and MEPs, they could raise the profile.

>> One question over here, and then to the back.

>> Thank you for that enlightening presentation. So, on enhancing the status of the UN Convention of rights of people, of persons with disabilities, obviously, this is a convention as that has already investigated the government twice in terms of attacking the rights of people with disabilities in this country, and it's really terrible, and the government has said that's disappointing, and that's because they're not legally bound to do anything about it, so I guess my question is how do we enhance the status of the UN Convention, and how do we make a government, who has already demonstrated they're not interested in listening to it, listen to it?

ANNA: That's a really good question. I think that comes down to strategy. Sometimes, you know, they have been expressing their commitment to the Convention in theory, but I think it needs multiple strategies, some of which will be pointing out where their statistics maybe don't match what other statistics we have, and the experience of the disabled people, but I think alongside that, there may be room for strategy which appeals to the commitment which they're expressing, and if they want to be leaders in this field, then this is something they could do to demonstrate that to the rest of the world. So there may be multiple ways of trying to achieve that, but, yes. I think what is important is not to lose the grassroots initiatives around it, though, because it's not a - it shouldn't a top-down system, it really is going to work best if it's used by disabled people be organisations around the country just to keep the government on their toes, even if they have to publicly say, "We disagree", that's still raising the profile and getting the issue on the agenda, so it's important for us not to be disillusioned if the government just says we disagree. We need to carry on using it.

>> One more question out the back.

>> I thought I would ask this because you obviously said that you had a general knowledge of employment law, because it's something - sorry. There's something that's not - that seems to have happened, you know, without when we talk about the equality act possibly being weakened by Brexit, it's something that's happened outside of the Equality Act which specifically employment law which really concerns me related to people with disabilities, or chronic conditions, which is the extension of a period of which a member of staff can't take on unfair dismissal claims against their employer from one year to two. There was actually pressure on the last Labour government to reduce that period of time to six months, and that the coalition managed to increase it to years. Aside from that, even within pure public sector organisations that have certain protections and have to respect the Quite Act, member of staff's probationary periods have rules completely outside of that and staff can be dismissed for just being ill for maybe three or four instances for the first eight months of their employment. Even if they are discriminated against based on maybe dismissed because of bad attendance within two years, it is very difficult for employees to hold employers to account. I'm wondering whether now leaving the EU there's an opportunity actually to look at all of employment law and those kinds of problems that happened despite the Equality Act and despite the protections of the EU regulation.

ANNA: Thank you. That's a really good question. I think there's lots of reference to the opportunities that Brexit creates, and I have to be honest and say that I was a passionate Remainer, and I think what most of those opportunities are, we could have done inside the EU. What it does do is create a political opportunity in the sense that we are looking at everything all over again, and if we're thinking about what kind of country we want to be, one that - we should include in that one in which employment laws are such that disabled people, people who are ill from time to time are protected, and able to work on an equal basis with others, and, supported to do that. So I think there are political opportunities.

>> Thank you so much, Anna. A quick question, please?

>> I just appeal to your knowledge of the law, law expertise, so just a short question. . Since we have a clear legislation protecting disabilities, like the Equality Act and the Autism Act, why are MPs just implementing like any other laws or legislation, with discrimination, why aren't they simply prosecuted?

ANNA: Could you say that again?

>> Since we have legislation protecting the rights of disabled people like the Equality Act and the Autism Act, and they're laws and legislation, why isn't discrimination being prosecuted if it's - and these are not implemented, actually, that we have to run around for sponsors, and actually to compel people to please have mercy on us, and help us?

ANNA: Yes. Another really good question. And I think that that is a similar point, really, to the other one, that that is something we really need to look at separate from Brexit, in a sense, although EU law does have the chance potentially to put pressure around access to justice and enforcement issues, but it hasn't done much of that yet, but I suspect it might be moving in that direction. There's been a number of parliamentary reports of the review of the equality act House of Lords committee in 2016, very much criticised the lack of enforcement of the Equality Act, and the - there is the Equality, and Human Rights Commission, but its funding has been drastically cut. It enhanced its engagement in this area in the last couple of years, but still, it's not really enough. And then, similar recommendations, and criticisms of the implementation of the Equality Act were made by the House of Commons, the equality committee and the built environment last year. Enforcement is a big problem around the Equality Act, and it's been made worse by things like cuts to legal aid, which has meant that a lot of the firms that were supporting people have gone out of business, but one of the big problems is that the Act is modelled on this notion of individual enforcement, that it is individuals who have to come forward and take action to enforce it. I think if groups can get together, the more groups can get together to support individuals, or influence change without an individual having to go to court - which is actually very stressful and hard on individuals, and it's very much a last resort thing, particularly against an employer - that the better it would be, so we need to find ways of making it work which don't all depend on individuals having to come forward and go to court, which is expensive, stressful, and difficult. That's something we need to keep pushing on. Again, it is something we should not regard the Equality Act as useless because of the current problems in enforcing it. We need to look at ways of making it work that will make it work better on the ground. Prosecution - it's not a criminal offence in this country to discriminate. In countries like France, they do make it part of their criminal law. There are advantages and disadvantages to that, and I don't think that's the main problem here. When we had the quota system, it was a criminal offence not to employ certain percentage of disabled people, and that was hardly ever enforced. If we made it criminal law, we might end up with less enforcement than more, but we could do with a really good look at how to make it work better in practice, and something to strengthen the Equality and Human Rights Commission, or other bodies' powers to check what going on and bring action if it is not being complied with.

>> Thank you so much, Anna, for answering all of those questions. Thank you for your presentation itself. A round of applause for an by a, please! [Applause]. So I'm afraid it's the end, and now, it's time for the drinks reception now. Mike made sure that we had to off a great day. There was going to be time for a round-up or conclusions. There are no conclusions, as you can see! There's much work to be done, much discussion to be had to take us forward. I just want to say and name the thanks to the speakers today, to Rex Knight, who started the proceedings; Patrick Johnson who talked with charter marks; Jane and Homoz for their wonderful session. Nicole about ableism in academia. To Christine, Sue, and Vikki, for what they shared about the work they've done between the NHS and the disability rights UK; to Mike for moderating a great debate between Diane and Tim, and thank you for participating in that; and thank you, last but not least, to our Brexit expert, Professor Lawson! Sorry, I'm only kidding! [Laughter]. And thank you all for being here, for taking part in this conference, for being so interactive, and participating in the questions. Thank you to all of the volunteers, and a huge thank you, again, to Mike, and all of the team for putting this fabulous, fabulous conference together. I hope everybody has enjoyed it today, and now it's time to to enjoy the drinks. Thank you so much. Thank you. [Applause]. Oh, yes, could I remind everybody, please, to give us feedback about today. That's really, really important. So you can do that on the Post-it notes. Jackie will be at a board to pull people in. Or you can do it via the feedback form online. There are some printed forms at the reception desk if you wouldn't mind filling some of those in. Thank you.