

A fresh start

Transforming engagement
with disabled benefits
claimants through a case
worker model



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Executive Summary

The [Pathways to Work green paper](#) proposes to offer a 'support conversation' to anyone on out of work benefits with a work limiting health condition or disability who wants support. The intention of this conversation is to identify claimants' needs and goals and to signpost them to available support.

The support conversation represents an important step forward, but there are a number of barriers to making it work. Many claimants have negative perceptions of the Department for Work and Pensions (DWP) and our research shows that too many claimants face harmful practices within Jobcentres. DWP needs to transform its interactions with Universal Credit (UC) claimants with health problems by taking a new, more tailored approach.

This paper proposes applying a case worker model to the support conversation. Based on our previous paper, [The case for case workers](#), we argue that specialist case workers should conduct the support conversation. Case workers would be claimants' first point of contact. They would be responsible for identifying support needs and making appropriate referrals for specialist support. They could then provide ongoing light-touch careers advice and pastoral support for those who wish to have more sustained support. This would offer continuity of support for those who want it, rather than the proposed one-off conversation, without creating excessive workloads for case workers.

The conversation should be voluntary, so that disabled claimants don't feel they are being forced into work if that isn't appropriate for them. Voluntary engagement will help to combat negative perceptions of DWP and foster a relationship based on genuine support rather than fear or duress.

We propose five key principles for an effective support conversation:

1. Base the conversation on voluntary participation
2. Provide empathy and encouragement for claimants without coercion
3. Offer flexibility and tailored support by default
4. Take a holistic approach to health, wellbeing and work
5. Offer ongoing support to those who would like it

Case workers conducting the support conversation would need to specialise in health and disabilities. They should be thoroughly trained in the barriers to work that disabled people face, as well as safeguarding and crisis support. A good

knowledge of local disability support networks is vital and they should have time allocated to engage with these networks regularly.

For the support conversation to provide meaningful support, the government will also need to address a number of key barriers to success. These challenges include inconsistency in provision of local services to refer claimants to; availability of appropriate, flexible and accessible work opportunities; and a lack of trust in DWP and the Jobcentre.

If done well, the support conversation offers a fresh start to both DWP and disabled claimants. By adopting the case worker model and our 5 key principles, DWP can reset its relationship with its service users. A strong support offer then helps those claimants to get a fresh start by addressing the barriers they face and, where suitable, considering a move towards the workplace.

Introduction

In March, DWP published the [Pathways to Work green paper](#), which proposes significant changes to disability benefits, such as scrapping the Work Capability Assessment. The government has also now passed into law an increase in the UC standard allowance and cut to UC health for new claimants.¹

The green paper also sets out “a guarantee of personalised employment, health and skills support for anyone on out of work benefits with a work limiting health condition or disability who wants it.” The aim is to increase the number of disabled people in work.

To achieve this aim, DWP will offer a ‘support conversation’ to people “who have a health condition or disability that is affecting their ability to get into work or return to work”.² The intention of this conversation is to identify claimants’ needs and goals and to signpost them to available support. However, the green paper offers few details of who will conduct the conversation or what it will cover. This paper proposes an approach to address these questions.

In November 2024, the [Get Britain Working white paper](#) outlined plans for Jobcentre reform. The reforms aim to increase employment and move more people on benefits into work. We then published [The case for case workers](#), a discussion paper which proposes a vision for the reformed Jobcentre service. We argued that Jobcentres should introduce case workers, who would provide light-touch careers advice, pastoral support and referrals for specialist support.

This briefing applies the case worker model to the support conversation. It outlines the core principles for an effective conversation and how a case worker approach can facilitate tailored, holistic and sustained support for claimants facing significant barriers to work.

This research is based on a survey of 274 advisers from our local offices in May 2025 and focus groups with our advisers in April and May 2025, as well as our previously published research.

¹ For more on these changes, see our reports [Pathways to Poverty](#), [Not so Universal](#) and our [response](#) to the Pathways to Work green paper consultation.

² The government has not yet specified how it will determine who will be eligible for the support conversation. For simplicity, in this paper we refer to this group as “disabled claimants”, but it should be noted that many disabled claimants deemed fit for work are already required to meet with a work coach, so it’s likely that the support conversation wouldn’t apply to them.

The case for case workers

This chapter outlines the case worker model and explains how this approach could be applied to support conversations.

The case worker model

As argued in our report 'The case for case workers', we propose reforming the structure of the Jobcentre to split the work coach role into two separate positions. The first is the case worker, who would be service users' first and ongoing point of contact. They would be responsible for identifying people's support needs and making appropriate referrals for specialist support. Case workers would provide light-touch careers advice, as well as ongoing pastoral support. The second role would be the careers advisor, who would offer more specialist employment support to service users when they need in-depth job coaching.

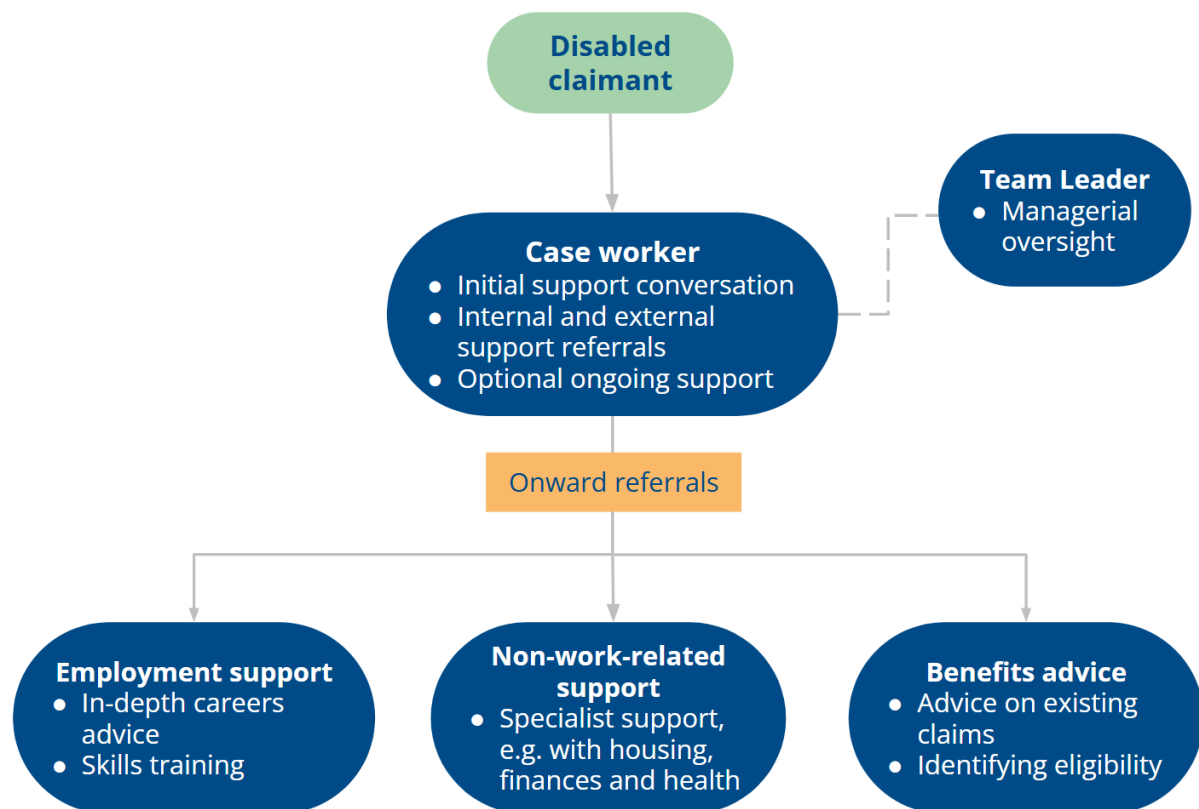
In combination, these roles would help to target support more efficiently, so that service users only see the staff members who can help with their specific needs. They would have access to more comprehensive, specialist advice, which over time could adapt to their changing needs. Jobcentre staff training would also be much more targeted, allowing staff to specialise and offering more opportunities for career development within the Jobcentre.

Applying the case worker model to the support conversation

The case worker model could be an effective approach to the support conversation. The support conversation echoes many of the principles of the initial meeting that we proposed case workers would have with anyone engaging with the Jobcentre. In this appointment, we suggested that the case worker would identify the claimant's needs, including whether advice is needed on careers, skills, benefits, housing and other issues. The case worker would then refer the service user to relevant internal and external advisors, including DWP careers advisors, charities and advice services. We envision that the new support conversation would follow a similar [structure](#), which would make case workers

well placed to conduct the conversation. Figure 1 illustrates the support path that disabled claimants would follow in this model.

Figure 1: Flow chart showing disabled claimants' support path



DWP have emphasised the role of signposting in the support conversation, however, where possible, referrals would be more appropriate. By making direct referrals, case workers would be responsible for passing on relevant information to other professionals, with claimants' consent. Referrals would remove two key barriers that claimants face in engaging with support. The first barrier is having to repeatedly share sensitive information. Our [research](#) shows that claimants find it challenging to repeat their personal stories to different work coaches and support providers. The second barrier is having to proactively contact providers and apply for support which can be time consuming and physically and emotionally draining. As a result, many people wouldn't self-refer, so wouldn't access the support they need. Being referred directly would avoid these issues.

It would be important that the support conversation is conducted by specialist case workers. Generalist case workers would be appropriate for many people already engaging with the Jobcentre. However, specialist case workers would need a deep understanding of the significant barriers disabled people face in

entering and staying in the workplace. These specialist case workers would therefore need additional training, which we discuss in more detail [below](#).

One of the key intentions behind the case worker approach is that, where appropriate, they would provide ongoing support. The relationship between the service user and case worker would be sustained throughout their engagement. The case worker would act as an ongoing gateway to services and would have a responsibility for safeguarding and checking on service users' wellbeing. Any disabled claimants who wish to access additional support would therefore have a consistent point of contact. The case worker would be able to check in with the claimant to understand whether their referrals had been helpful and to offer additional support tailored to changing needs.

Conducting the conversation

Ensuring that the support conversation is based on voluntary engagement, flexibility and empathy is crucial to its success. It must be tailored to each individual and focus on health and wellbeing interventions as much as, if not more than, employment support. This section details what the conversation should cover and key principles for how it should be carried out.

The content of the conversation

The Pathways to Work green paper offers few details on what would be covered in the support conversation. It is important that the conversation is tailored to the individual, offering flexibility around which topics are discussed and in what level of detail. Personalised conversations are important, both to ensure that they are relevant to all claimants, but also to allow claimants to opt out of discussing topics they aren't comfortable with.

The primary focus of the conversation should be to get to know the claimant and understand how they have been affected by their health issues and/or disabilities. This, together with learning about their past experiences of work and skills, will help the case worker identify the barriers the claimant faces, or has previously faced, in accessing work and training.

The case worker should seek to understand any aspirations the claimant has and, where appropriate, identify realistic goals that they might work towards. Based on this, the case worker can then discuss local support opportunities that might help them reach their goals. This topic should also include reasonable adjustments they could request to help make opportunities more accessible. Finally, the case worker and claimant can agree on possible next steps and any referrals.

Based on this, we propose the following framework for the support conversation, to be adapted as appropriate to each individual:

1. Health and disability history
2. Employment and training history
3. Barriers they face to accessing work and training
4. Aspirations and goals

5. Local opportunities for support, training, volunteering, employment, etc.
6. Possible workplace adjustments to make work and training more accessible
7. Possible next steps and referrals

Principles for an effective conversation

Key principles:

1. Base the conversation on voluntary participation
2. Provide empathy and encouragement without coercion
3. Offer flexibility and tailored support by default
4. Take a holistic approach to health, wellbeing and work
5. Offer ongoing support

For the case worker to offer meaningful support and avoid causing harm, the following principles should be applied to all support conversations.

Base the conversation on voluntary participation

It is important that the support conversation is offered to claimants on a voluntary basis and no one is required to participate as a condition of their benefits. [Research](#) by NEF found that offering employment support on a voluntary basis to UC claimants from the Limited Capability for Work group achieved good engagement. People were willing to take part because the support was framed as “an informal, optional, and supportive conversation”.

If claimants are required to engage in a support conversation as a condition of their benefits, this is likely to increase fear and distrust. As one of our advisers said, “so many people simply cannot work and they should be allowed the dignity not to be pushed before they are ready.” By making the conversation compulsory, claimants may also fear that any discussion of goals or support referrals could result in further conditionality. Voluntary participation is likely to foster more genuine, trusting and open engagement from claimants.

Provide empathy and encouragement, without coercion

First, case workers must be empathetic and supportive. Many claimants have negative perceptions of DWP and Jobcentres. People who have had little engagement with DWP since their WCA are particularly likely to feel additional fear and distrust.

Our advisers said that the support conversation could be perceived as “threatening” and “stressful” and there is a risk that it may have a detrimental effect on claimants’ mental health. Case workers should therefore be understanding and non-judgemental towards claimants. They need to be adequately trained in responding to and building trust with claimants who are fearful of engaging. Claimants told us they value encouragement, humour, small talk and smiling.

Some claimants who already engage with Jobcentres find that the expectation on them to be polite is not always reciprocal. It is therefore important that there is an emphasis on mutual trust and respect from the case worker as well as the claimant.

Case workers should offer encouragement without coercion. It is crucial that claimants are not pushed into activities they can’t or don’t want to do. Underpinning this is an absence of conditionality that goes beyond offering the support conversation on a voluntary basis. To support claimants to openly discuss their goals and capabilities, they must also be assured that their benefits will not become conditional on them engaging further.

Safeguarding is fundamental and there should be regular managerial oversight of support conversations as well as ‘top-up’ training to reiterate these principles. A clear, transparent and consistent complaints process should be established and information about it should be easily available to service users.

Offer flexibility and tailored support by default

Flexibility should underpin every aspect of the support conversation. Many disabled people are likely to need adjustments and accommodations to make the conversation accessible and constructive. One of our advisers said that the support conversation is “a good idea if it is about the individual and not a broad sweeping approach to one size fits all.”

As acknowledged in the green paper, there must be flexibility in where, when and how the conversation is conducted. This includes offering to conduct the conversation in person, on the phone or via video call, according to the claimant's needs and preferences. DWP should consider offering the option for it to be held in the claimants' home or a welcoming third space, such as a library, community centre, GP surgery or family hub.

Claimants should be permitted to bring someone they trust to the support conversation. This could particularly help people with mental health or communication issues, as well as people who have a particular fear or distrust of Jobcentres.

As discussed above, the topics of the discussion and plans for follow ups and referrals should also be tailored to the individual. Case workers should make it clear to claimants that they can choose not to discuss certain topics and that no follow ups or referrals are compulsory.

Take a holistic approach to health, wellbeing and work

As recognised in the green paper, it's important that the support conversation doesn't focus wholly on work. Entering the workforce will feel out of reach for many people being offered a support conversation. [DWP research](#) shows that only 5% of health and disability benefit claimants felt they could work right away if the right job or support was available.

These claimants are therefore likely to benefit more from health and wellbeing interventions than employment support. There is value in everyone being given the opportunity to discuss their work aspirations if they wish to, however undue weight should not be placed on work as the ultimate goal of the support conversation. Instead, the case worker's focus should be on identifying appropriate support, taking into account realistic time frames for treatment and recovery where relevant.

For those with a realistic prospect of moving towards work, it is important that the DWP follows through on its [intention](#) to support people to find "secure, rewarding and fulfilling work". This represents a welcome move away from its previous [approach](#) of expecting claimants to take any job, which is particularly unsuitable for disabled claimants.

“The conversation should explore suitable career paths aligned with individual interests, address contextual barriers, and empower individuals to advocate for necessary reasonable adjustments.” - Citizens Advice adviser

Benefits are a vital support for people being offered a support conversation. Ensuring that people feel secure in their incomes and that they receive their full entitlement is key to supporting their health and work goals. However, people are likely to fear that the support conversation could put their existing benefit entitlement at risk.

Many people face long waits to receive their health and disability benefits. As of April 2025, new PIP claimants were [waiting 14 weeks](#) on average from registering their application to a decision being made. After going through this process, it's unsurprising that many of our clients are reluctant to try work in case the DWP uses it as a reason to withdraw their benefits. It is therefore vital that there is no conditionality attached to the support conversation or any follow up support, so that people are not at genuine risk of their benefits being reduced or stopped. Case workers and associated support services must reassure claimants that the support conversation won't negatively impact their benefits.

Case workers should work closely with advice services, including Citizens Advice and other welfare charities, to refer claimants for accurate benefits advice and support with entitlement. DWP should ensure that such services are adequately funded to account for the likely increase in referrals as a result of the introduction of the support conversation.

Offer ongoing support

Our advisers emphasised the importance of the support conversation not being a 'one-off' conversation. Claimants are likely to need support that goes beyond the scope of one time-limited conversation, such as employment support, training and practical assistance. For most claimants, there will be very limited benefit to a single conversation.

The case worker model includes provision of ongoing pastoral support and light-touch careers advice, to support progress and adapt to their changing needs. The case worker would act as an ongoing gateway to services and would have primary responsibility for safeguarding and checking on service users'

wellbeing. This flexible, tailored approach would be particularly beneficial for health and disability benefit claimants.

The need for support does not end if claimants get a job. For example, some may need help with requesting reasonable adjustments or applying for an Access to Work grant. Those who do move into work should therefore still be able to contact their case worker for advice or referrals.

Not all claimants will need or want further support, so follow ups and referrals should be consistently offered but remain optional. For some people, there may be no relevant referrals or work-related activities. Case workers should be trained to deal with this in a constructive and positive way. This outcome should be recorded to avoid inappropriate follow ups from DWP, though claimants should be able to request another support conversation in the event of a change of circumstances, ideally with the same person.

Making the support conversation work

There are a number of practical considerations and systemic barriers that the government must address to make the support conversation a success. This chapter outlines what is needed to provide genuine support to disabled people.

Training requirements

Key training topics:

- Health and disabilities, including barriers to work
- Benefits system
- Local disability support networks and government partnerships
- Light-touch employment support
- Effective communication skills
- Safeguarding and crisis support

For the support conversation to offer meaningful help and to avoid causing harm, it is vital that the case worker has thorough training. We believe that it is important for disabled claimants to be able to see a specialist case worker who has had additional training in health and disabilities beyond that of more generalist case workers. This training would provide detailed knowledge of health issues, disabilities and their impact on people's lives. This would need to include a strong understanding of the barriers that disabled people face in accessing work and training opportunities.

It could be beneficial if some or all of the training is delivered by someone with lived experience of being disabled or having a long-term health condition. This could add authenticity and depth to the training. Trainers could also act as an ongoing 'expert advice' resource for case workers, to support continuous improvement.

Case workers would need training in the benefits system, particularly disability benefits, with strong links to local partners who can assist with identifying

eligibility and claiming benefits. Relatedly, it is crucial that case workers would have strong knowledge of local disability support networks. This includes, but is not limited to, charities, training providers, employers, medical providers, occupational health services and housing services. Time should be set aside for case workers to engage with these networks regularly and build strong relationships with them.

Government partnerships are also key. Case workers should be trained in what local and national government support is available in order to make referrals to relevant services. This might include assistance with finances, housing, social care and medical issues.³

As with generalist case workers, they should be trained to provide light-touch employment support, such as reviewing CVs and cover letters. Training in effective communication skills is vital, with particular emphasis on discussing sensitive topics. They should be trained in building trusting relationships.

Claimants offered a support conversation are likely to be at particular risk of physical and mental health crisis, as well as personal, financial and housing challenges. Safeguarding training would therefore be particularly important for specialist disability case workers, as well as accessing crisis support.

Barriers to success

An effective support conversation relies on the wider employment and benefits system to function effectively for disabled people, which in many cases it does not. Even if the support conversation itself meets the standards outlined above, if work and welfare remain largely inflexible and inaccessible, little will be achieved. The government therefore needs to address a number of barriers that disabled people face in accessing work and benefits.

Barriers to work

Through the support conversation claimants need to feel that they are being offered something meaningful that they might not have accessed otherwise. Support referrals are central to the case worker model, however they are only possible if there are adequate services available to refer to. The support

³ Medical referrals would be necessarily limited in scope, but could involve support with accessing GP and self-referral services, and the Patient Advice and Liaison Service.

conversation should only be rolled out where there is genuine support available. Trust and engagement from claimants will be undermined if these conversations lead to no new support. DWP should consider funding local services where there are provision gaps or providing services directly, where appropriate.

We welcome plans in the Pathways to Work green paper to invest in NHS services and to collaborate with the Department for Health and Social Care. Improving healthcare provision is central to supporting disabled people to move towards work. A [DWP survey](#) of health and disability benefit claimants shows that half of those who were out of work felt their ability to work was dependent on receiving treatment. However, long waiting lists and lack of healthcare for certain conditions are a considerable barrier for many claimants. 41% of DWP's respondents were on a waiting list for treatment for their health problems. Our advisers expressed concerns about the NHS being "overrun" and lacking time to collaborate with DWP on additional support for disabled claimants. One emphasised that "joined up thinking [is] required."

For those who might be ready to move into work, DWP's [own research](#) shows that it doesn't have adequate links with employers. Most employers they surveyed (79%) had not made contact with or obtained information from DWP in the last year. Jobcentres need to improve engagement with local employers to increase claimants' access to employment opportunities and to work with businesses to make work more accessible.

The lack of appropriate, flexible and accessible work opportunities for disabled people is another significant barrier to the success of the support conversation. As one of our advisers said, "there is a lack of employers that have the time and resources to support people with complex health needs in the workplace". In 2024, [a quarter of employers](#) reported that they weren't confident recruiting disabled people and people with long-term health conditions. Many of our advisers felt the support conversation was "unrealistic" or even "pointless" without an increase in job opportunities.

"The job market is inherently hostile to hiring disabled people who can do less hours and cannot be available to work at all times [...] Disabled people often can't find work anywhere close enough or that accommodates their needs because even the job market for non-disabled people is harsh." - Citizens Advice adviser

DWP should work with employers to help them to hire more disabled people. It's also vital that disabled people aren't placed under undue pressure to find a job or blamed for being unable to do so. For more detail on these issues, please see our recent report [Making Work Pay for Disabled People](#).

Barriers within the social security system

Many disabled claimants face barriers within the social security system itself, including practical challenges caused by flaws in benefits policy and broader structural issues.

As discussed [above](#), many people fear engaging with DWP because of its often poor reputation and/or their own negative past experiences. Case workers may be employed directly by Jobcentres or through charitable or business partners. In either case, the government would need to tackle reputational issues to build trust and work to 'reset' the relationship with claimants. Case worker training should include how to address claimants' concerns relating to their case worker's position within the DWP or other organisation.

Jobcentre staff have high workloads and are afforded little time to support claimants. Some claimants [told us](#) they received little individualised support from their work coaches, but also understood the pressure that work coaches are under. It is important that case workers have manageable workloads so they can offer people adequate time for support conversations and, where appropriate, provide ongoing support.

Recently, [cuts to UC health](#) and previously proposed cuts to PIP increased fear and distrust among disabled claimants. When the cuts were announced, Mind [reported](#) that people felt "under attack, stigmatised and that the legitimacy of their conditions is being called into question." The government therefore needs to think holistically about how its broader policies impact the effectiveness of programmes like the support conversation.

For many claimants the system can also feel opaque and inaccessible. Our recent report, [Work incentives aren't working](#), shows that even policies introduced to help people move into work can be off-putting due to their complexity. For example, many UC claimants do not have an adequate understanding of the taper and work allowances (i.e. elements of the UC system designed to allow people to keep some benefit income when they enter work or increase earnings) and still believe there is a cliff-edge. One adviser told us that

Council Tax Support calculations are “so complex and localised that it is hard to reassure clients that working is a good thing.”

Government funds to address wider barriers to work, including Access to Work and the Flexible Support Fund (FSF), also need investment and improvement. Our [research](#) shows that many claimants are unaware or unable to access the FSF, which offers support with the costs of finding a job, such as travel expenses, training courses and clothing for interviews. In a survey of our advisers, three quarters (74%) said most or all of the people they help are unaware they can ask their work coach for money from the FSF.

The Access to Work scheme offers financial assistance for workplace adjustments and offers employers support in making those adjustments. These grants are vital for many disabled people to be able to work. The scheme currently struggles to meet demand, yet the Pathways to Work green paper proposes scaling it back. The green paper instead suggests placing more of the burden on employers to make workplaces accessible. However, as discussed [above](#), many workplaces would need significant changes to be accessible to disabled people. The proposed reforms to Access to Work risk fewer disabled people getting the adjustments they need.

Conclusion

With an empathetic, flexible and tailored approach, the support conversation could offer many disabled people meaningful support that they wouldn't have had access to otherwise. However, DWP faces a significant challenge to transform its relationship with disabled claimants and address the fear and distrust many feel towards DWP.

We propose five key principles for an effective support conversation:

1. Base the conversation on voluntary participation
2. Provide empathy and encouragement for claimants without coercion
3. Offer flexibility and tailored support by default
4. Take a holistic approach to health, wellbeing and work
5. Offer ongoing support to those who would like it

The case worker model offers a new way to support disabled claimants. Case workers' primary role would be to offer an empathetic and informed listening ear, in order to identify people's needs and refer them for support. Claimants would have access to a consistent advocate and guide, distinct from those providing direct employment or health interventions.

The case worker role would help to target support efficiently, so that service users only see the staff members who can help with their specific needs. Through referrals, they would have access to comprehensive, specialist advice, which, for those wishing to engage further, could adapt to their changing needs over time.

As one of our advisers said:

"By prioritizing individual needs, fostering genuine support, and ensuring access to appropriate resources, the DWP can transform this initiative from a bureaucratic exercise into a meaningful step towards empowering disabled individuals in their journey towards sustainable and fulfilling employment."

However, even with the case worker approach, there are a number of barriers that the government must address before any support conversations can be successfully implemented. Investment and planning is needed to tackle the systemic issues disabled people face in accessing healthcare and suitable jobs.

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