

*Helping **people** back to work
with*

THE **pathfinder**
PROJECT

An assessment of the occupational options available
to

MISS ANON

CLAIMANT

Miss Anon

123 Fake Street

Manchester

M99 9XX

Tel: 0161 XXX XXXX

DATE OF BIRTH:

21 August 1985 (Age now 20)

ASSESSMENT MADE BY: XX
ON THE INSTRUCTIONS OF: XXX
DATED: 3rd December 2003
INTERVIEW DATED: 18th January 2005
REPORT DATED: 29th June 2005
PFP Ref: XXX/RR/DW

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Overview

On the instructions of XXX, The pathFINDER Project (pFP) has prepared an occupational assessment on Miss Anon.

The ability to realise or actualise 'employability' depends on external factors, the individual personal circumstances and the inter-relations between the two. Miss Anon's educational attainment, previous employment, personal preferences, local area, personal skills and her present condition including mobility will be described and the occupational implications of her accident considered. Her current employability and transferable skills and abilities have been assessed in relation to labour market conditions.

Reference has been made to a variety of documentary sources and research data. This is supplemented by information supplied by Miss Anon at interview, which took place on 18th January 2005 at her home in Manchester. She was accompanied by her mother.

After assessing her educational attainment, previous employment, personal preferences, local area, personal skills and her present condition including mobility pFP has devised an Action Plan with three possible options. pFP recommends that Miss Anon should consider the Action Plan and choose the most appropriate option to enable her to return to reasonable and appropriate employment as soon as is practicably possible. pFP awaits instructions to initiate the Action Plan; in particular notice should be taken of key dates. pFP's recommendation for Miss Anon can be found at section 7.2.

Background

Miss Anon was involved in a car accident on 24th August 2001 when she was aged 16. The main physical injuries resulting from the accident were to her head, but she has also suffered severe neurological damage. She has difficulties with concentration and memory. She suffers from headaches. Her vision is affected and sleep disturbed.

Just prior to the accident Miss Anon had left school and was working part time as a shop assistant. As a consequence of her injuries she has not worked since the accident.

1. Personal Profile

1.1 Presentation

Miss Anon presents at interview as a young woman aged 19 who is 5' 5" and weighs 8 stone. She spoke softly and relatively slowly, with pauses as she chose her words. If there was a short delay in replying to a question, her mother would often volunteer the information. Her responses were frequently vague and uncertain, with a tendency to wander away from the point. She found it difficult to describe her symptoms with any degree of precision.

However, she was obviously trying to give full and accurate answers and co-operate in the process. She was always very pleasant and appeared to understand her limitations. She often expressed how much she wants to work but her condition was stopping it. She also referred several times to where she would now be in her life, but for the accident.

Overall, I gained the impression that this was a young woman who wants assistance and to put her life back on track. It is apparent to me that she wants to get back to work and make a career.

She smokes about 10 cigarettes a day and drinks a little. She is right handed.

Miss Anon's disability probably would not be apparent immediately to an interviewing employer as her difficulties are primarily neurological. In any event, most employers would automatically include a medical examination or declaration as part of a recruitment procedure. However, the length of her absence from work would be obvious to a potential employer. It is likely that she would fall under the auspices of the Disability Discrimination Act. There are some encouraging signs that employers are increasingly taking account of the Act in their recruitment and selection procedures and are prepared to make adjustments. Support is available from the Employment Service and in some cases, grant aid may be payable. Nevertheless, disabled people face considerable difficulties in obtaining and retaining employment.

1.2 Current Work Situation

Miss Anon has not been able to return to any form of employment since the accident.

She has had little personal experience of having to engage in a systematic jobsearch; this is targeted in the Action Plan. Before the accident she worked part time as a shop assistant and did some informal hairstyling work. She has never made a formal application for a job and has virtually no experience of attending job interviews; this is again targeted within the Action Plan.

She currently receives Disability Living Allowance at the lower care and mobility rates. She also receives Incapacity Benefit. Her DLA payment is £31.10 a week and Incapacity Benefit at £76.24 a week.

1.3 Current and Future Limitations

The injury has been treated by an operation in 2002 and the physical injuries have virtually disappeared. The head injury has resulted in neurological damage and psychological difficulties. She has received help for these conditions since 2003 including a course of cognitive behavioural therapy in 2004.

Miss Anon suffers from:

- a) Anxiety and depression. She gets anxious and depressed; when this happens she cannot go out alone, feels awkward with strangers, cannot think properly and cannot cope with life.
- b) Lack of concentration. She is unable to concentrate for more than about 20 minutes before she loses interest and goes to do something else. She rarely watches a complete television programme, cannot watch a film and cannot read much.
- c) Lack of creativity. She is no longer able to have any ideas. Prior to the accident she said that she was particularly interested in designing clothes and trying new hair styles. She does not seem to have the interest or ability to do this any more.
- d) Disturbed sleep. She wakes up in the middle of the night once or twice a week. When she wakes up she has a variety of symptoms including crying, sweating, lack of breath and feelings of fear. After a bad night, she feels worse than usual the following day.
- e) Headaches. She gets a headache if she watches too much television, reads for any length of time, is under any stress at all, if it is noisy or if she is trying to cope with problems. She has fewer problems now that she is living in her own flat.
- f) Problems with eating. When eating she has to take copious amount of water in order to swallow and she finds it difficult to eat much. Her GP said that this is probably due to stress.

These factors have been taken into account when constructing the Action Plan.

The medical evidence says that she is capable of a simple repetitive job, but that it is important she undergoes vocational rehabilitation to allow her to achieve her potential.

She had a course of cognitive behaviour therapy in 2004, but this finished apparently without any great improvement in her condition, although it did result in her enrolling for a GCSE course.

She is due to see two doctors at a hospital in Didsbury during February. She was uncertain of the precise nature of the appointments. Other than this there is no further treatment arranged.

Her injuries do not cause her a problem with immediate mobility. She is able to walk without difficulty. She uses a bicycle. However, Miss Anon does not drive and she tends not to travel alone by public transport except by taxi. Despite her reluctance to travel alone by public transport there are bus services a few minutes walk away from her home to Manchester city centre in an easterly direction and Warrington, Cadishead, Altrincham going west. There is a railway station a very short distance away at Patricroft with services to Manchester Victoria and Liverpool Lime Street. Therefore, she has sufficient mobility to attend college/work.

1.4 Commitment to Work

The success of the Action Plan will be dependant on Miss Anon's agreement to each step and her full co-operation throughout the life of the plan.

Miss Anon wants to engage in training and has a strong willingness to work; this is outlined by her starting a GCSE course in English in September 2004 at Salford College and her desire to train as a hairdresser, a path in the Action Plan for her to consider. However, until her psychological condition improves she will not be fit for normal full time employment.

The development of the Action Plan will need to involve Miss Anon closely. It will depend largely on the outcome of the medical and occupational assessments, and progress made in improving her condition.

If she is not ready for full time employment or education in line with our suggestion, the Action Plan can be delayed. If this is the case, pFP can assist and support Miss Anon whilst her condition is improving and a reviewed Action Plan will be produced in line with Miss Anon's progress.

1.5 Vocational Preferences

Miss Anon clearly has a desire to work in hairdressing or beauty therapy. If these are not possible, then perhaps shop work or a caring role might be attractive to her. However, she does not want to work in an office or a factory because she thinks that she will get bored.

2. Education and Skills Profile

2.1 Education History

Miss Anon attended XXX High School in XXX from the age of 11 until 14. She then went to XXX High School, XXX when the family moved house. She left school in July 2001 without any qualifications

She has not undergone any formal occupational training.

Miss Anon has started a GCSE course in English in September 2004 at XXX College. She attends on one evening a week for 2 ½ hours. The course will last for one academic year. She said that she is coping well with the course, getting level B or C grades for her coursework. The College is allowing extra time for her work because of her condition.

2.2 Work History

About a year before she left school Miss Anon began part time work as a shop assistant in a baker's shop nearby. She worked on Saturdays, one night after school and during the school holidays. She also did some informal work as a hairstylist for friends and people who were recommended to her. She styled hair but did not cut or colour it.

She continued doing both these activities after she left school for the few months until the accident happened.

Other than mentioned above, Miss Anon has limited work experience. However, with correct guidance through the Action Plan, this may not prove too problematic.

2.3 Interests and Hobbies

Prior to the accident, she enjoyed hairstyling, designing clothes, reading and socialising. These activities have been taken into account in the Action Plan as potential employment that can incorporate a hobby/interest will be much more attractive to her and therefore more likely to achieve the desired outcome. Since the accident, most of her time is spent socialising with her immediate family. In addition she goes to a gym for exercise and improvement to her mood, goes swimming occasionally and walks the family's dog.

2.4 Work Skills

Assuming that after her injuries the skills she has acquired can be carried forward, Miss Anon's brief work as a shop assistant and hair stylist would mean that she has accrued some important basic skills in customer care and cash handling. She is also familiar with working on a checkout, stacking shelves and stock taking. In a more specific context, she also has some basic hairdressing skills. These experiences would also show that she can work within a hierarchy and can demonstrate organisational and responsibility skills. The organisation of her flat also backs this up.

She has some basic computer skills. She is enthusiastic about learning IT skills if needed, however she does feel that working in an office environment is not for her.

2.5 Personality

Based on my interview with her, I assessed Miss Anon as having some good social skills in spite of her difficulties, which suggests they were of a higher order pre-accident. She was able to speak to me (a stranger) with reasonable confidence, was very likable and well presented. Miss Anon seemed to have a positive outlook on life in general. She also seemed to have a decent sense of humour as her mother was able to make 'jokey' comments about Miss Anon. It is probable that her social skills would be much improved if her psychological condition improves and her confidence is restored. I would suggest that Miss Anon's personality will not hold her back in regards to securing employment.

The fact that she has embarked on an English GCSE course and speaks of a desire to train in hair and beauty shows she has a positive attitude to work.

2.6 Summary

This provides an easy-to-view assessment of Miss Anon's skills profile. The Action Plan will attempt to improve on any deficiencies.

Assets	Knowledge and skills	Customer care, cash handling, basic hairdressing, work a checkout, stack shelves, stock take
	Personal attributes	Confident communicator, personable, well presented, aspiration, sense of humour
Presentation	Appearance of CV	To be worked on by Case Manager. See Action Plan
	Qualifications	Limited. Has started a GCSE English course
	Interview technique	To be worked on by Case Manager. See Action Plan
	Work experience	Limited
Marketing and deployment skills	Career management	Limited
	Job search skills	Limited. Will be supported by Case Manager. See Action Plan
	Approach	Good. Realistic, willing to be adaptable and has a desire to train. Mobility is ok

Actions of employers also influence the ability of an individual to find and retain employment. These should be driven by employment law (but this is not always the case) and are inevitably influenced by the business needs of the employer. The organisation's history, culture and the preferences of the individuals making the decisions also play their part.

3. Test Results

3.1 Numeracy Test

Miss Anon was assessed using a basic adult numeracy test and her performance was 43%. After assessing her test results, I am of the opinion that she has reasonable basic maths skills. Her results suggest to me that she would be unable to undertake employment that requires significant and complex use of numeric skills. She could certainly cope with employment that would require simple numeracy skills; basic addition and subtraction skills for example. This result has been taken into account when suggesting possible career paths in section 5 and in the Action Plan at section 7.

3.2 Literacy Test

Miss Anon was assessed using a basic adult literacy test and her score was 46%. Her score may well improve considering her recent enrolment on a GCSE English course. After assessing her test results, I am of the opinion that she has average literacy skills. She could cope with employment that requires dependency on basic to average literacy skills. I would not advise employment that would require advanced literacy skills. This result has been taken into account when suggesting possible career paths for Miss Anon in section 5 and in the Action Plan in section 7.

3.3 Self Assessment of IT Skills

She also completed a self assessment of her IT skills. From this her IT skills can be considered as below average. She rarely uses a PC, does not own a PC and has little experience with basic IT software. She has only really used Word and the Internet. Despite having little experience, she is very keen to learn how to use a PC and is confident that she will be able to learn how to use various packages. Miss Anon's experience with IT has been taken into consideration when suggesting possible career paths in section 5 and in the Action Plan at section 7.

It should be noted that occupational tests based on short assessments do not necessarily highlight potential problems in a normal work setting due to the "exam conditions" under which they are administered. Other factors such as fatigue can also be an issue, especially with head injuries. Likewise, a normal office environment with interruptions at normal noise levels can

prove more problematic. Even relatively modest impairments on neuropsychological testing can be significant in a normal working environment.

Further testing can be administered later if felt appropriate in conjunction with the Action Plan.

4. Local Labour Market

4.1 Information

According to the January 2005 edition of Labour Market Trends the ILO unemployment level for the UK was 1.38 million, a rate of 4.7% in the three months to October 2004 down 0.1% from the previous three months and down by 0.3% from the same period a year earlier.

Claimant unemployment for the XXX City Council area at November 2004 was 2,410 male, 740 female, totalling 3,150 expressed as 2.3% of the workforce.

Reference was made to the Manchester Economic Development Agency website, from which the following relevant information is taken: -

- a) The most important sectors for employment in XXX are wholesale and retail trade 17.7%, real estate 15.5%, manufacturing 14.2%, health and social work 10.8%.
- b) Employment is declining in textiles, retail trade and manufacturing. It is increasing in education, wholesale trade, education, hotels and restaurants and health and social work.
- c) Average earnings in XXX are a little above the average for the Manchester area and a little below the national average.
- d) Economic activity rates in XXX are below the Manchester and national averages.
- e) XXX ranks badly on the UK index of multiple deprivation, ranked 324th out of 354 local authorities in the country.

XXX's population has 29% of its population with poor literacy and/or numeracy skills compared with the UK average of 24%. Only 36% of school leavers attain 5 good GCSE passes compared with the national average of 51.5%

5. Occupational Opportunities

5.1 Potential Careers

The following table is a review of the potential career areas that pFP feels Miss Anon could enter after considering her personal desires, employment history, skills (personal and educational) and test results.

	Occupation	Level
a)	Hairdresser	Trainee
b)	Hair stylist	Trainee
c)	Beauty therapist	Trainee
d)	Telephonist	N/A
e)	Care assistant and home carer	Trainee
f)	Shop assistant	N/A
g)	Telephone salesperson	N/A

These careers have been identified as the most likely to return her to reasonable and appropriate employment. In the event Miss Anon reconsiders her career path, pFP will be able to offer assistance in this process.

6. Logistical Review of Potential Careers

6.1 Review

Career	Hairdresser (or related, e.g. Hair Stylist/Beauty Therapist)	Telephonist	Carer	Shop Assistant	Telephone Salesperson
Skills/training needed	Level 1 NVQ in Hairdressing	On job development	BTEC First Diploma in Care	None	On job development
Training centres	- XXX College - City College, Manchester - Bolton Community College - South Trafford College	N/A	- City College, Manchester - XXX College	N/A	N/A
Geographical availability of careers	Many available	Many available	Many available	Many available	Many available
Travel ability	Within 10 mile radius	Within 10 mile radius	Within 10 mile radius	Within 10 mile radius	Within 10 mile radius

6.2 Contact Details

The following contact details will help in Miss Anon's job search:

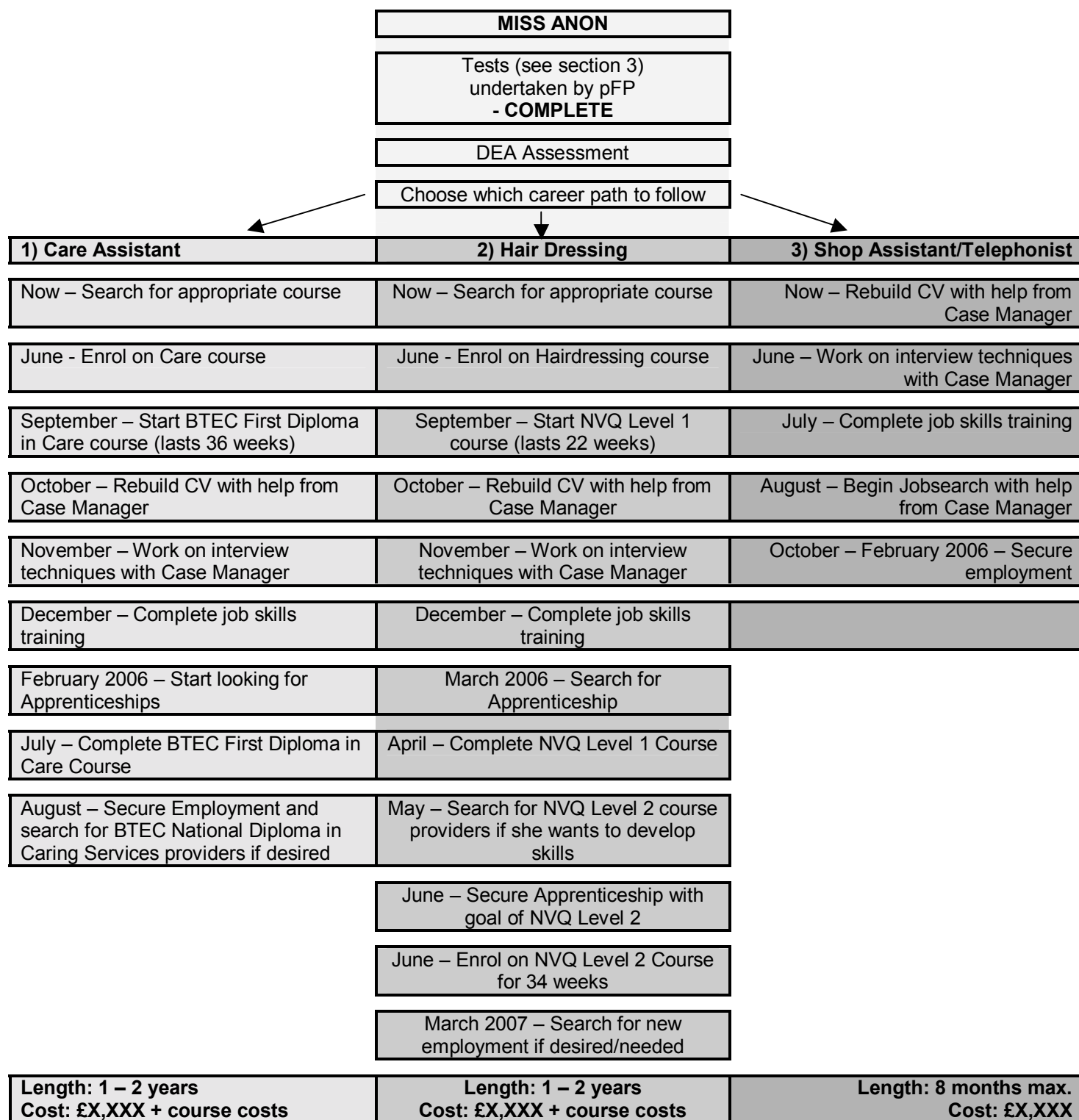
Organisation	Address	Telephone	Email
Job Centre	Ground Floor, Peel House, Monton Road, Eccles, M30 0NA	0161 912 8600	
Salford College		0161 702 8272	
City College, Manchester		0800 013 0123 / 0161 614 8000	admissions@ccm.ac.uk
Bolton Community College	Manchester Road Centre, Manchester Road, Bolton, BL2 1ER	01204 907 200 / 01204 907 000	info@bolton-community- college.ac.uk
South Trafford College	Manchester Road, West Timperley, Altrincham, WA14 5PQ	0161 952 4600 / 0161 952 4686/7	enquiries@stcoll.ac.uk
Reed Social Care	4 th Floor, 55 Spring Gardens, Manchester, M2 2BY	0161 228 2431	

7. Action Plan

Statement

The production of this Action Plan has taken into account Miss Anon's educational attainment, previous employment, personal preferences, local area, personal skills and her present condition including mobility. However, this Action Plan is formulated with the assumption that Miss Anon would be ready to go back to reasonable and appropriate full time employment now.

7.1 Flowchart



7.2 Written Commentary of Action Plan

1) Care Assistant – For Miss Anon to follow this route she will need to enrol on a BTEC First Diploma in Care at the College of her choice. It would be advisable for her to gain some experience in the caring sector first so she is sure this is the path she wants to follow. pFP also recommends that she works at perfecting her CV and practising her interview techniques and job application skills with the support of pFP. Towards completion of the course she should start by trying to secure employment with a Care agency and, if she desires, apply for a course in BTEC National Diploma in Caring.

Miss Anon would constantly be reporting back to the Case Manager in line with pFP's back-to-work log.

2) Hairdressing (possibly leading to Hair Stylist or Beauty Therapist) – For Miss Anon to follow this route she will need to enrol on a NVQ Level 1 course in hairdressing at the College of her choice. She already holds some hairdressing experience and has a desire for this work and should therefore find this course the right level for her abilities. pFP suggests that she continues to develop her hairdressing and/or beauty therapy skills via college courses once she has completed her NVQ Level 1 and secured employment. pFP also advises that she works at perfecting her CV and practicing her interview techniques and job application skills with the support of pFP's allocated Case Manager.

Miss Anon would constantly be reporting back to the Case Manager in line with pFP's back-to-work log.

3) Shop Assistant – For Miss Anon to follow this route we advise that she works at perfecting her CV and practising her interview techniques and job application skills with the help of pFP's allocated Case Manager.

Miss Anon would constantly be reporting back to the Case Manager in line with pFP's back-to-work log.

In my view, these three options are all certainly achievable for Miss Anon, but it is a matter of choice. I would suggest that Miss Anon follows Route 2. If Miss Anon did not feel she was quite ready to embark on Route 2, she could start Route 3 and reconsider her options in a few months, when she feels ready.

7.3 Review

Should Miss Anon not be ready to go back to work in line with the proposed Action Plan due to her injuries, pFP will provide a re-scheduled Action Plan. In this event, it would be most likely that she would have to enrol on a course in 2006. In the meantime, I suggest she embarks on Route 3 of our proposed Action Plan when she feels ready. This will ensure that she is beginning the back-to-work process and can start her jobsearch training with our Case Manager. pFP would be able to take her through Route 3 in preparation to embark on Route 2. This would be outlined in an updated Action Plan should this arise.

7.4 Job Search Assistance

Whether or not Miss Anon undergoes further training, she will need assistance at some stage with her conduct of a job search. It would not be totally reasonable to expect her to identify potential employers alone. This will involve learning how to conduct a search, how to identify employers, the creation of a CV, completion of speculative letters and application forms, how to make personal contacts and present herself at interview.

It will be possible to provide coaching and support to help her find employers prepared to consider employing her. However, experience of employment may be in the form of a work placement to determine the suitability of a particular type of work.

This assistance would be provided on a one-to-one basis through pFP and with the help of the Employment Service if she were to meet the criteria for assistance from the New Deal.

7.5 Case Management Reports and Mentoring

The Action Plan will be regularly monitored and monthly Case Management reports will be sent to you. Miss Anon will have constant contact with the Case Manager in line with pFP's back-to-work log. The Action Plan will undergo a full review three months after commencement, or before if requested. Any needed modification will be carried out only after consultation with the funder.

7.6 Continuing Case Management and Mentoring

The path back does not stop once suitable employment has been obtained. The new employee, employer and colleagues may well need support during the initial stages to overcome obstacles, help her learn the job and settle in.

If deemed appropriate we would work alongside Miss Anon and help her adapt to her new situation. This includes helping her build working relationships with her new colleagues and adjusting to the work environment. We would also advise on the development of work aids or adjustments to the jobs.

pFP will produce monthly reports on the progress of Miss Anon.

7.7 Cost

The roll out of the Action Plan would be overseen by a Project Director (usually the author of this report), whose role will be to ensure that the action is taken by the Case Manager in accordance with the agreed Plan. Timescales and progress will be monitored and any remedial action taken to ensure that satisfactory progress is maintained. The Project Director will also be responsible for taking appropriate interventions to deal with any unforeseen occurrence that may inhibit Miss Anon's return to employment.

If it proves impossible to secure and retain suitable work, a full report will be provided to the funder.

The cost of delivering the plan will be dependent on the course of action chosen. If Miss Anon opts for a training programme, there will be the costs of assessment, supporting her through the course and then jobsearch assistance. For this service we anticipate a charge of no more than a maximum of £X,XXX excluding VAT.

If she chooses to seek employment to which she is suited as soon as her condition permits, then the plan will consist of the assessment followed by jobsearch assistance. If this option occurs, then we anticipate a cost of £X,XXX excluding VAT.

The cost of any training is not included and will need to be resourced separately.

Miss Anon will be expected to provide her own stationery, computing facilities and be responsible for all costs of travelling to courses, interviews, jobcentres and employer's premises and telephone calls and any day-to-day overheads to enable her to conduct a jobsearch.

7.8 The Next Step

A decision and commitment needs to be made on the action that should now be taken. pFP can help decide what action is best and provide all necessary support and assistance that is required to achieve the desired result. We reiterate the need for prompt instigation of the Action Plan to ensure that key dates are not missed.

Appendix

i) Job Opportunities

The Department for Education and Employment estimates that Jobcentres handle about one-third of all vacancies. A further third are advertised in the press, with the remaining number filled by word-of-mouth or by other means, e.g. employment agencies.

Information taken from the *Labour Force Survey* (as reported in *Labour Market Trends*, August 2002) shows that more than half of all employees obtained a job by hearing from someone who had worked there or replying to an advertisement. A more detailed breakdown is given in the following table:

Method	Men (%)	Women (%)
Hearing from someone who worked there	30	25
Replying to advertisement	25	31
Direct application	14	17
Private employment agency or business	10	10
Jobcentre	9	8
Other	12	9

ii) Employment of Disabled People

Unemployment and Jobseeking: the experience of people with disabilities (1999) found:

- 59% of claimants with a disability or health problem aged 45+ had made a job application four weeks prior to the survey compared to 69% for those aged 25-45 and 81% for those under 25
- Other claimants made more applications than the disabled despite both groups spending the same amount of time on jobsearch activities
- Disabled people attended fewer interviews

While the overall success rate of disabled people's applications was greater their exposure was less.

- People in both groups sought jobs in the local paper (c90%) and in Jobcentres (c70%)
- Disabled people were less likely to make direct contact with employers but more likely to speak to friends and family

Some difficulties were experienced with the Employment Service and Benefits Agency.

- 21% compared to 14% of other claimants had to visit two or more offices
- Older people in both groups "complained" about difficulties more than younger people
- 37% of those over 45 with health problems reported the whole claiming process as a "hassle" or a bit difficulties compared to 26% of those without disabilities

Other problems included repeatedly filling in forms, waiting, giving the same information to different people, and being referred to other offices. Fewer disabled people had completed a *Back to Work* Plan. Older people in both groups were more likely than their younger counterparts to follow it. The majority of people thought it was not particularly useful. Nevertheless disabled people thought that the staff tried all they could to find them work and acknowledged the difficulties the staff were having.

In 1997 the IES, in *Jobsearch* found the consequences of unemployment to include:

- social isolation
- impaired psychological well-being
- lack of self-esteem
- confidence and motivation
- financial hardship
- boredom
- feelings of uselessness and rejection.

The length of unemployment eroded the qualities associated with successful jobsearch and the long-term unemployed tended to be over-reliant on formal methods. Critical factors in successful jobsearch included knowledge of the labour market and contacts with people in relevant employment.

The *Labour Force Survey* (September 2003) reported that:

- Some 7 million disabled people were of working age
- The non-disabled were more likely to be in work than the disabled (80.8% compared with 48.8%).
- The economic inactivity rate for the disabled was 46.8% (15.4% for the non-disabled)
- ILO unemployment for disabled people was 8.2% about twice that for the non-disabled (4.5%)
- But more disabled people (14.7%, compared to 3.7% of the non-disabled) want a job
- Fewer disabled people than non-disabled people were working full-time (35.0% compared with 61.8%)

This data confirms that the disabled are much more likely than other people to be unemployed or out of the labour market.

Under the Disability Discrimination Act, a disabled person is someone with a current long-term disability, a work-limited disability or both. National statistics tend not be helpful in dealing with individual cases, where an assessment of employability should focus on factors including previous experience, transferable skills, motivation, mobility and the merits of each case. For some, disability is an absolute bar to employment, while in others the occupational impact is of minor significance.

iii) Employability

Simply put, "*Employability is the capability of getting and keeping satisfactory work.*"

Many employment reports suggest that because x number of jobs are unfilled at a jobcentre and there are y number of claimants registered, the chances of an individual getting a job are y:x. Likewise, if the average time taken by individuals to leave the claimant count in a town is z weeks, it should take on average an individual this amount of time to get a job.

Matching individuals to jobs is a far more complex process and obtaining a suitable job is more than a product of the number of vacancies compared to the number of unemployed people available to fill them. Many people already in work move between jobs distorting the figures and often appearing to be more attractive to employers than those out of work.