

Y Pwyllgor Cymunedau, Cydraddoldeb a Llywodraeth Leol

Lleoliad:
Ystafell Bwyllgora 2 – y Senedd

Dyddiad:
Dydd Mercher, 27 Chwefror 2013

Amser:
09:15

Cynulliad
Cenedlaethol
Cymru

National
Assembly for
Wales



I gael rhagor o wybodaeth, cysylltwch â:

Polisi: Marc Wyn Jones
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Agenda

Cyfarfod preifat cyn y prif gyfarfod – 09.15 – 09.30

1. Cyflwyniad, ymddiheuriadau a dirprwyon (09.30)

2. Ymchwiliad i addasiadau yn y cartref – sesiwn dystiolaeth 1 (09.30 – 10.05) (Tudalennau 1 – 16)

Comisiynydd Pobl Hŷn Cymru
CELG(4)-07-13 – Papur 1

- Sarah Rochira, Comisiynydd Pobl Hŷn Cymru

3. Ymchwiliad i addasiadau yn y cartref – sesiwn dystiolaeth 2 (10.05 – 10.40) (Tudalennau 17 – 21)

Penaethiaid Iechyd yr Amgylchedd Cymru – Panel Technegol Tai
CELG(3)-07-13 – Papur 2

- Jonathan Willis, Rheolwr Tai, Cyngor Sir Caerfyrddin
- Owain Roberts, Rheolwr Tai Sector Preifat, Cyngor Bwrdeistref Sirol Blaenau Gwent
- Julian Pike, Rheolwr Adnewyddu Tai, Cyngor Bwrdeistref Sirol Merthyr Tudful
- Elen Probert, Prif Swyddog Tai, Cyngor Bro Morgannwg

4. Ymchwiliad i addasiadau yn y cartref – sesiwn dystiolaeth 3 (10.40 – 11.15) (Tudalennau 22 – 26)

Coleg y Therapyddion Galwedigaethol
CELG(3)-07-13 – Papur 3

- Ruth Crowder, Swyddog Polisi
- Helene Mars – Cynrychiolydd Cymru, Adran Arbenigol Coleg y Therapyddion Galwedigaethol – Tai
- Neil Abraham – Cadeirydd Grŵp Cynghori Therapyddion Galwedigaethol Cymru Gyfan (COTAG)

5. Ymchwiliad i addasiadau yn y cartref – sesiwn dystiolaeth 4 (11.15 – 11.50) (Tudalennau 27 – 31)

Nigel Appleton, Academydd
CELG(4)-07-13 – Papur 4

6. Cynnig o dan Reol Sefydlog 17.42 i benderfynu gwahardd y cyhoedd o weddill y cyfarfod (11.50)

7. Bil Safleoedd Rheoleiddiedig Cartrefi Symudol (Cymru) (11:50 – 12:00) (Tudalennau 32 – 33)

Ymgynghoriad Llywodraeth Cymru ar Ddeddf Cartrefi Symudol 1983 – ymateb drafft



Communities, Equality and Local Government Committee

Inquiry into Home Adaptations

Response from : College of Occupational Therapists

1. Introduction

There are 1.32 million homes in Wales (Welsh Government 2011), yet in 2011 Wales spent £35million on Disabled Facilities Grants; £8.5million on Physical Adaptation Grants and £1.5million in Independent Living Grant. Adaptation services have developed from a range of different pieces of legislation, supplementary orders, guidance and new policies which have been introduced to improve parts of the system over time. This has created a disjointed and complex system. The provision and funding of adaptations needs to be simplified, services need to focus on meeting people's needs rather than the funding process. The College welcomes the proposal in "A White Paper for Better Lives and Communities" (Welsh Government 2012) to review these funding methods and their interface.

- Occupational therapists enable individuals to live their life to the full. Adaptation of unsuitable environments is an important part of this intervention and should not be seen in isolation from other interventions such as reablement, long term care or support for carers. Currently the focus tends to be on the process (which funding route will be used) when it should be on the outcome of the assessment (the identified solution). There needs to be a thorough examination of the benefits of a single, tenure-blind, age-blind and preferably non means-tested adaptation system throughout Wales. In the interim there are a range of changes which could improve provision and these are listed in the section on improving services at the end of the document.

3. Adaptations systems in Wales

A modern adaptation service should put the individual at the centre and deliver the outcomes the person needs. It is vital to get the assessment right and, if an adaptation is required, the provision must be effective and timely. The delivery should form part of an integrated service working to enable people to live independently irrespective of tenure, age, or ability to pay.

- There are great inconsistencies and inequities in the systems for funding adaptations, which are dependant on tenure, age, and complexity of the adaptation. The current funding streams are: -
 - Disabled Facilities Grants (DFG)
 - Physical Adaptations Grants (PAG)
 - Direct Provision by Social Services or Housing Associations (usually minor adaptations of less than £1000)
 - Fast Track Adaptations
 - Stock Transfer Organisations Solutions
 - Independent Living Grants (ILG)
 - Housing Revenue Account Major Repairs budget (used by some of the authorities who have retained their stock)

The administration of each one of these processes may be affected by a range of local policies and decisions.

- Some local authorities use DFGs for every adaptation, others fast track some adaptations, such as stair lifts, using discretionary grant; yet use the DFG (and thus a means test) for a different solution such as a shower.



6. Some Registered Social Landlords (RSL) simply and quickly install minor adaptations with their own technical staff; others require an occupational therapy assessment; For larger adaptations the RSL has access to PAGs however some still refer for DFG funding. In some cases the adaptation is refused.
7. Stock transfer organisations cannot access PAGs and tenants have to rely on the RSL's budget or local authority social services department and the DFG process. Again, permission for the adaptation may be refused.
8. ILG's are administered by Care and Repair and as such are restricted to applicants over 60 years of age in the private or privately rented sector. The criteria for eligibility are determined by each Care and Repair agency and their health and local authority partners.
9. Funding streams with criteria based on tenure, age, diagnosis or personal contributions all generate boundaries and gaps for people with complex needs. Too often decisions are not based on what would best solve the problem but on which of the systems we are driven to use.
- 10. Variation, Performance and Timescale**

Variation in performance and delivery time is inevitable in such a complex system. The term adaptation can cover an enormous range from providing a simple handrail to an extension of a property to provide a ground floor bedroom, bathroom, and other complex components. The range of housing types and complex funding systems has an impact on the timescales involved.
11. At present, the DFG is the only type of adaptation process for which there is a performance indicator (PI). It measures average waiting time and does not differentiate between simple and complex adaptations. The separation of the measurement of children and adult adaptations is a recent improvement and allows some improved comparisons of like for like adaptations. A comparison of provision across tenure cannot be made because there is no PI for other adaptation grant routes. There is also no consistent measurement of the whole service of the person's journey through services to show which elements are creating delay.
12. Delays arising from other parts of the service which generate a wait may be attributed to the DFG process. For example, a request for an assessment for bathing difficulties may be placed as a low priority causing people to wait for an assessment. Once that person is assessed it is possible that an adaptation may be required via a DFG. The wait for the assessment is (rightly) included as it is part of the wait for the person. However, this is not a part of the DFG process but is a result of lack of capacity to manage demand across the service. Some authorities may attempt to overcome this by fast tracking DFG referrals, but these cannot always be identified from information provided at referral. There is a risk that the PI encourages DFG work to be fast tracked to the detriment of other priorities or tenures. If this continues it may mean that even with national eligibility criteria, different priority will be given to processes rather than people and their needs.
13. Following meetings with Welsh Government during 2012 the College was pleased to be involved in a stakeholder meeting to consider areas of consensus in improving adaptation services in Wales. The meeting, 'Homes for Wales: transforming Housing Adaptations' held on the 18th July 2012, included representatives from all the main stakeholder groups and the final report outlined the agreed four main priority areas: issues around complexity and equity of means testing; the quality of performance indicators; the value of the Rapid Response Adaptations Programme being available across tenure and age; and effective use of the occupational therapy resource. The report was submitted as part of the consultation response to "A White Paper for Better Homes and Communities". The meeting also identified the principles of a good service. These were agreed as: putting the service user at the centre of the process; getting housing right the first time via lifetime standards; create a single age and tenure blind adaptation process across Wales; equity and access to services.



14. Progress on implementing recommendations from the Equality of Opportunity Committee's 2009 report on home adaptations

The College welcomed the recommendations of the Equality of Opportunity Committee's report in 2009. Many occupational therapy services have redesigned their part of the DFG and adaptation system in order to make them more lean and efficient. Local authorities have worked hard to continue to improve and deliver excellent services to their clients despite complex and difficult processes.

15. Recommendation 9: the College worked with the Older People's Commissioner, Age Cymru and Care and Repair Cymru to produce a short Information Leaflet (Care and Repair Cymru et al 2010) to help people navigate their way around the system. The leaflet directs older people, their families, health or social care professionals to the relevant page on the Care and Repair website which gives detailed information and links to the adaptation pages of each local authority's website.

16. Recommendation 10: most occupational therapy services are developing improved partnerships across health housing and social care services in their area and between neighbouring local authorities. The All Wales Occupational Therapy Advisory Forum (OTAF), whose members include senior occupational therapists from every health board and local authority across Wales have produced a progress report in respect of integrated occupational therapy services outlining some of the innovative developments (WTAC 2012).

17. Recommendation 12: Information at the stats-wales website shows the whole time equivalent of occupational therapists has risen from 216 in 2009-10 to 242 in 2011-12. It is not clear whether these posts are in the community occupational therapy teams which service adaptations or whether this increase is in the rapidly developing reablement services. Services remain very small and fragile; easily susceptible to impact from long term leave such as maternity leave, long term sickness or from staff turnover. Eight of the local authorities have establishments in single figures; the range is 2-21. Such small numbers mean that even a short period of sickness can have an impact on capacity to maintain a service. It places huge pressures on sustaining specialist expertise, such as a children's specialist or a housing specialist therapists. There must be sufficient staff employed to provide the service.

18. Recommendation 13: the Care Council for Wales now collects workforce information on occupational therapists as part of the planning for the whole social care workforce. This ensures that decisions about the numbers of occupational therapy students trained include the demand from social services as well as the NHS. This helps maintain the levels of therapists available and has been vital as local authorities have sought more therapists to meet the demand to provide reablement and other services.

19. Although recommendation 14 was rejected, the Housing Minister created an opportunity for improved communication between occupational therapists and government officials; and enabled the College to join the South East Wales Housing Renewals and Adaptations Group with Private Sector Housing Officers.

20. The impact of the reduction in resources for housing on the provision of home adaptations

Making the system simpler and more efficient would ensure that best use is made of the remaining available resource. Since the last committee review, many social landlords are making better use of existing adaptations and are trying to avoid removing adaptations by first checking waiting lists for tenants who may require that type of adaptation.

21. The impact of increased access to reablement and rehabilitation services needs to be recognised. These services enable people to become more independent and thus can reduce or



remove the need for adaptation. Improved integration of all services makes a coherent whole for the individual and their family.

22. Monitoring the provision of adaptation services

A DFG is only one of several means to achieve an outcome: it is not an outcome in itself. Monitoring needs to be in relation to the identified need, agreed outcome and the impact for the individual. The College recommends that the new National Outcomes Framework should ensure that effective person-focussed outcome measurement is used to monitor the impact and outcome for all service users. **All** parts of the service should be monitored, including all routes for adaptation provision.

23. The Regulatory Reform Order has enabled local authorities to be more creative in providing adaptations or alternative solutions to achieve improved timescales. Examples of this are fast track schemes and relocation grants. Some authorities provide certain types of adaptation through a discretionary grant which removes the need for a means test. Others may use a DFG for a whole range of adaptations, including small works. None of this is made overt in the performance indicator.

24. What more could be done to improve adaptation services

The College and the College of Occupational Therapists' Specialist Section- Housing response to the Welsh Government consultation "Meeting the Housing Challenge" called for

- 24.1 Improved design of all new housing, including private developments, to meet lifetime homes standards: the need for adaptation should be a sign that housing policy has failed.
- 24.2 A single, tenure blind, non means tested public funding system of providing adaptations to reduce inconsistency and potential discrimination in supporting people with varying needs and resources.
- 24.3 Commitment to making best use of housing stock across the social housing sector. This includes registers of adapted or accessible properties and links between adaptation and allocation processes to ensure existing available properties are an alternative to adaptation where they exist.

25 An excellent adaptation system would:

- Meet the needs of the individual and deliver the right outcomes
- Be integrated with other services and agencies, delivering the right outcomes together
- Measure performance in terms of outcomes not funding processes
- Consist of a simplified funding stream: applied equitably across Wales
- Be delivered by an agency with a lean, well integrated journey across departments
- Be tenure and age blind
- Apply any bureaucratic elements (such as means tests if retained in a proportionate and sympathetic way.
- Enable effective fast-tracking and the provision of 'minor adaptations without delay'
- Articulate clearly how to access professional advice and make best use of staff expertise in complex situations

26 Changes can be made now to improve performance even within this existing complexity. A good example of this are the systemic changes made to deliver a more focussed person centred and cost effective service in Bristol City Council (Mackintosh 2012). Many of these proposals are being implemented by many Welsh local authorities.

- 26.1 Develop proportionate responses including fast track and direct access for simple adaptations. These should be removed from the DFG system which should only be used for works over £5,000 as recommended by both Jones (2005) and Mackintosh (2012).
- 26.2 Occupational therapists working in housing and social services are highly expert in assessing for and designing effective adaptations to meet complex need. Using that expertise can reduce costly mistakes and increase effective solutions.



- 26.3 Implement 'Minor Adaptations without Delay' (COT 2006) even more widely around Wales. This offers a practical guide to help provide straightforward adaptations without the need for an occupational therapy assessment.
- 26.4 Enable people to access assessment and advice even if they then wish to self fund the provision.
- 26.5 Redesign services to improve integration within agency departments
- 26.6 Learn the lessons from the local authorities who have employed specialist occupational therapists in housing departments
- 26.7 Improve the collaboration and partnership working across housing health and social care.
- 26.8 Some RSLs pass maintenance, warranty and replacement costs on to the tenant following the adaptation. This means that tenants may refuse an adaptation because they can't afford the increased rent or they may be faced with an unexpected cost at the end of the process. The Minister's review of adaptations offers an opportunity to develop some regulation or guidance about what is charged to tenants in these situations.
- 26.9 Using progress chasers or support workers to help people navigate the complex system can be very effective in order to keep the process active.
- 26.10 Accurately examine the whole adaptation journey as part of a holistic service for citizens to identify where delays or bottlenecks occur. It is important to consider impact on the whole journey before investing extra resource or making changes which simply move a problem to another part of the process.

27 Conclusion

The College of Occupational Therapists recommends that a thorough review is undertaken into the whole range of adaptation grants and funding processes with a view to establishing a more modern, cost effective and efficient, age and tenure blind system which puts the person at the centre. Sufficient resource, such as occupational therapy establishment to meet demand is vital. Adaptations must be viewed as a response to an assessed need rather than focussing on the DFG alone as a service.

28 References

- Care and Repair Cymru, College of Occupational Therapists, Age Cymru, Older People's Commissioner (2010) *Adaptations: the Key to Independent Living*. (<http://www.careandrepair.org.uk/housing-adaptations-information/> accessed 23.1.13)
- College of Occupational Therapists, (2006) *Minor Adaptations without Delay*. London COT (<http://www.cot.co.uk/publication/books-z-listing/minor-adaptations-without-delay> accessed 23.1.13)
- Jones C, (2005) *Review of Housing Adaptations Including Disabled Facilities Grants – Wales*. Cardiff, Welsh Government
- Mackintosh S, (2012) *From Housing Adaptations to Accessible Homes: putting people at the heart of redesigning the adaptation service in Bristol*. Housing Learning and Improvement Network Case Study 62. (http://www.housinglin.org.uk/library/Resources/Housing/Practice_examples/Housing_LIN_case_studies/HLIN_CaseStudy_62_Adaptations.pdf accessed 23.1.13)
- Welsh Government (2011) *Meeting the Housing Challenge: building a consensus for action*. Cardiff Welsh Government
- Welsh Government (2012) *A White Paper for better lives and communities*. Cardiff Welsh Government
- Welsh Therapies Advisory Committee (2012) Occupational Therapy progress report in respect of the development of integrated services. (<http://wales.gov.uk/topics/health/ocmo/committees/therapies/reports/6260875/?lang=en> accessed 23.1.13)

Eitem 3

CELG(4)-07-13 – Paper 2

Communities, Equality and Local Government Committee

Inquiry into Home Adaptations

Response from : Welsh Heads of Environmental Health, Housing Technical Panel

Introduction

The Housing Technical Panel is an expert panel of managers who work in local authorities and are responsible for private sector housing issues. (Enforcement, renewal, adaptations, energy efficiency etc). The Housing Technical Panel involves all twenty two local authorities.

The Housing Technical Panel is well regarded as a source of expertise and has been identified as a body to assist in the development of a number of new national initiatives by Welsh Government such as its “House to Homes” scheme and licensing of the private rented sector.

A key aspect of the group is the promotion of best practice and service improvement. A number of Technical Panel members will be responsible for developing and running adaptation services across tenure within their local authorities. We are therefore of the view that our evidence will be critical to this inquiry.

General

The Housing Technical Panel is of the view that the provision of adaptations is of paramount importance in terms securing independence, keeping older people in their own home as opposed to expensive residential care as well as facilitating hospital discharge.

The delivery of adaptations is a critical part of local authority housing strategies. We are of the view that maintaining this local delivery is essential. In addition the delivery of adaptations to the private sector involves a significant proportion of the households in Wales (82%). The delivery of adaptations compliment social care services and homelessness services. In the main the provision of adaptations also compliments general home improvement services offered by local authorities through its Private Sector Housing Renewal Policies.

The Housing Technical Panel is of the view that local authorities provide a “one stop shop” for adaptation/home improvement services through their private sector housing teams. In many cases, particularly where local authorities have retained their own housing stock they will also deliver adaptations to council tenants.

Whilst the focus from a local authority perspective will be the delivery of adaptations to private sector and council homes it is hoped that the enquiry will look at Physical Adaptations delivered by Registered Social Landlords.

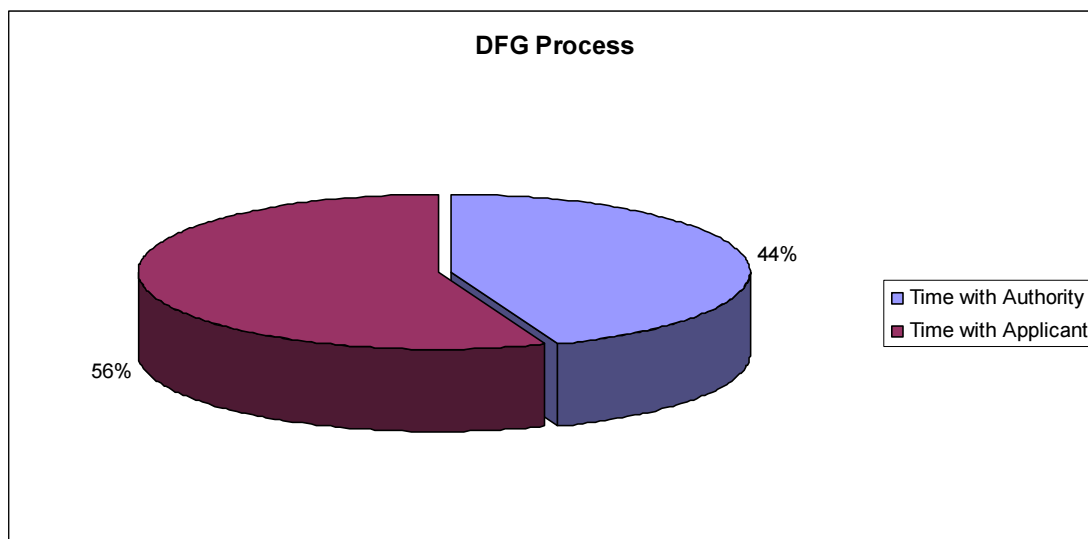
Why are there still significant variations in the time it takes to deliver aids and adaptations funded by Disabled Facilities Grants (DFG's)?

It is worth mentioning that the question relates only to DFG's, it makes no mention of any service disparity in relation to adaptations provided for Council tenants or Physical Adaptations Grants (PAG) for tenants of Housing Associations. These areas should also come in for scrutiny as part of the Inquiry.

There is an assumption that that reference is being made to National Performance Indicator in relation to the delivery of DFGs. The performance data in relation to this P.I shows a steady improvement in the delivery time for DFGs with the average time being reduced from 545 days in 2005/06 to 326 days in 2011/12, an improvement of 40% over 6 years. It is also clear that the level of consistency between authorities has improved.

Members of the Housing Technical Panel assisted in the development of this performance indicator and from the above information it is clear that it has helped to improve delivery times. However based on our experience it remains a very basic indicator as to the quality the services being delivered. A number of local authorities have considered the value of adaptations delivered in terms of health improvement maintaining independence and overall satisfaction of the client.

It is important to remember the performance indicator is an average and in terms of delivery. In many cases the time it takes to complete a DFG is dictated by client choice i.e. when they want the work done and by which builder. Whilst local authorities can influence this to a certain degree it will delay things. Below is an example provided by one local authority of how the time taken to deliver a DFG is split between the local authority and the client?



A significant part of the time can be taken up by the client (choosing a builder, deciding when the work starts and is completed).

Local authorities have constantly reviewed their processes to improve the time taken and quality of service from its own perspective and that of the client. This was highlighted in the Equality of Opportunity Committee Report in 2009 and the CEL Transform Report for Welsh Assembly Government “Review of progress in implementing recommendations on the provision of Adaptations Services in Wales” 2010.

Clearly there will be some degree of inconsistency across Wales given the differences in need, health, population, geography, labour markets, organizational structures, processes and financial pressures.

Local Authorities were, however, involved in bringing together best practice and assisting the WLGA in producing “Housing Adaptations for Disabled Persons – A Good Practice Guide.” Likewise, the Wales Heads of Environmental Health Housing Technical Panel who have representation from all Welsh Local Authorities have also been active in ensuring that good practice and standards within the delivery of adaptations is available for all to share.

Whether sufficient progress has been made on implementing recommendations from the Equality of Opportunities Committee’s 2009 report on home adaptations.

Most of the recommendations are targeted at the Welsh Assembly Government. A more appropriate question maybe should be around what support have the Welsh Government could provide to improve the delivery of adaptations in Wales.

Local Authorities were involved in bringing together best practice and assisting the WLGA in producing “Housing Adaptations for Disabled Persons – A Good Practice Guide.” Likewise, the Wales Heads of Environmental Health Housing Technical Panel been active in ensuring that good practice and standards within the delivery of adaptations is available for all to share.

Our view is that services in local authorities have evolved and improved since the Welsh Assembly Governments Review of Adaptation Services by Chris Jones in 2005. Housing Technical Panel members report a range of initiatives including:

- A single point of contact, or reference point for advice and assistance has been developed which links to OT staff with housing
- Fast track systems for priority cases
- Targets for delivery of key stages
- Use of specialist staff to carry out home visits to help access the service and help find builders and agents
- The introduction of better sign-posting involving the development of a Registered Builders Scheme
- The provision of agency services via co location with Care & Repair

- The use of self-assessment questionnaires particularly in terms of minor adaptations
- Integrated working arrangements for OTs across Health Social Care & housing.
- Better use of Council owned stock including incentives to move vacant already adapted properties.
- Recycling of stair lifts
- Use of complementary services such as loans, small grant and handy person schemes.

What impact reduced resources for housing are likely to have on the provision of home adaptations?

It is evident there is inequity in terms of funding and how performance is measured. In 2010/11 housing association tenants who make up less than 10% of households in Wales had access to £8.5m of funding for large scale adaptations via the Welsh Government Physical Adaptation grant (PAGs) scheme. In contrast owner occupiers and private tenants who make up 82% of households in Wales had access to just over £35m for Disabled Facilities Grants through Local Authorities.

Having sufficient capital resources will dictate the number of people local authorities offer grants to. Whilst DFGs are mandatory other forms assistance may not be available because of local financial pressures. Repair issues are often evident within the home environment and it is difficult to proceed with an adaptation because the property may need repairs.

There has been some discussion on the removing the current means test provision because it causes delays. This is not the case and in most cases the process is quick and straight forward. Removing the means test would put enormous pressure on local authority capital resources and deflect from supporting the most vulnerable.

A further issue relates to the level of staffing resources available to local authorities. Revenue resources are also under immense pressure within local authorities which if reduced will impact on delivery times and the quality of service. A particular issue relates to the time taken to undertake an assessment of need. This is a particular requirement in most cases and is invaluable to ensure the correct packages of measures are specified. The time taken to undertake an assessment is often the most significant delay in the process. We are of the view that dedicated Occupational Therapists are required within adaptation and private sector local authority teams.

It is clear that the provision of adaptation services protect other budgets such as health and in view of the pressure from a growing elderly population it is our view there would be value in deflecting more resources to local authorities.

Is the Welsh Government effectively monitoring the provision of adaptation services?

The only monitoring evident appears relates to the performance indicator. It is our view that there is a role for Welsh Government in exploring the value of adaptations services in Wales via some form of Health Impact Assessment. We are aware of the work being undertaken by Swansea University on the value of improvements to social housing. We are of the view that a similar study would support the view that more resources are required by adaptation services.

What more needs to be done to improve home adaptation services in Wales?

Members of the Housing Technical Panel are committed to continuous service improvement in terms of adaptation services. Further improvements to systems and process need to be developed through perhaps a systems thinking approach. The Housing Technical Panel would welcome any support the Welsh Government could provide with regard to this.

Inevitably there will be a limit to how effective service improvement and process re-engineering can be. With a growing elderly population and an increased demand sufficient capital resources to offer grants and revenue resources to support delivery teams will be critical. The Welsh Government need to ensure there is sufficient resources available to local authorities and it is properly targeted.



CELG(4)-07-13 – Paper 3

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Communities, Equality and Local Government Committee

Inquiry into Home Adaptations

Response from : Older People's Commissioner

Ann Jones, Chair
Communities, Equality and Local
Government Committee

Thank you for the opportunity to submit evidence to the Committee's Inquiry into Home Adaptations. I very much welcome the Committee's decision to revisit its 2009 report into this issue in order to scrutinize the progress that is being made in a service area that is of significant interest and relevance to older people.

Older people consistently tell me how important it is to them to maintain their independence and to be able to stay living within their own homes as long as they wish. Home adaptations provide essential support in helping achieve this outcome for many older people in Wales and can make a major contribution to their wellbeing, helping them experience a life that has value, meaning and purpose.

Home adaptations therefore have the potential to be a very high impact but low cost service area. They play a crucial role in the early intervention and preventative agenda and as such, can deliver major cost savings across other health and social care budgets.

My evidence to the inquiry (attached) outlines in detail my concerns at the significant variations in delivery times that currently exist for adaptations services, in particular Disabled Facilities Grants, across Wales. Despite



successive reviews, reports and good practice guidance, public services are still not getting it right for many older people in Wales and there is much that still needs to be done to ensure that all older people have access to that little bit of help on a timely basis. I have also set out what I, as Commissioner, am doing support and encourage ongoing improvement in this area over the next twelve months.

I have outlined my views in respect of the urgent need to move towards a more simplified system of adaptations in Wales which is centred on the needs of the individual. I very much welcomed the Commitment to a whole-scale review of adaptations which was presented in the recent Housing White Paper and I have written to the Housing Minister Huw Lewis asking him to expedite this review as a matter of urgency. Within this, there is a pressing need to move towards fairer and simplified funding arrangements for adaptations, and a system which monitors the impact of home adaptations on wider wellbeing outcomes for older people.

I look forward to expanding on these points when I give verbal evidence to the Committee in February. I hope that we can work together to ensure that older people live in their own homes for as long as possible and receive assistance in a timely manner, because this is fundamental to their continued independence and wellbeing.

Yours sincerely

A handwritten signature in black ink that reads "Sarah Rowley". The signature is written in a cursive style with a long, sweeping tail on the final letter.

Older People's Commissioner for Wales



Older People's Commissioner for Wales
Comisiynydd Pobl Hŷn Cymru

Communities, Equality and Local Government Committee:

Inquiry into Home Adaptations

January 2013

1 Why there are still significant variations in the time it takes to deliver aids and adaptations funded by Disabled Facilities Grants across Wales

- 1.1 As the Older People's Commissioner, I am deeply concerned and have spoken very publicly at the significant variations in delivery times that currently exist for Disabled Facilities Grants across Wales. The majority of people who benefit from DFG-funded adaptations are older people¹ who need this assistance so they can return to their home from hospital, stay within their own home, maintain their safety and independence, and exercise choice in the way they live their lives. Yet, older people across Wales are facing unacceptable waiting times for sometimes very basic adaptations and significant variations may exist because of the different ways that different LAs in Wales deliver their DFG and adaptation services.
- 1.2 The most recent Local Government Data Unit Local Government Report revealed that local authorities took an average of 326 days to deliver a Disabled Facilities Grant and seven local authorities in Wales recorded average waiting times exceeding the 12 month statutory timescale. One local authority had an average delivery time in excess of 600 days.
- 1.3 Whilst I acknowledge that these figures represent a marked overall improvement over recent years, with delivery times having reduced substantially since 2005 when DFGs were taking 544 days on average, the fact remains that some older people are being denied the help they need on a timely basis. This situation is, in my view, wholly unacceptable.
- 1.4 In September 2012 I wrote to Local Authorities² in Wales outlining my deep concern that some older people are waiting too long for an adaptation that would make a significant difference to their quality of life, and which in some instances is essential to keeping them safe and in their own homes. I asked those local authorities who are not currently complying with the statutory timescales to provide me with information on how they were planning to improve delivery times in their area. I also wrote to local authorities who are performing well and asked them to share with me examples of good practice and innovation so I could pass this on to poorer performing organisations.

¹ CEL Transform (2010) Review of progress in implementing recommendations on the provision of Adaptations Services in Wales. Report for Welsh Assembly Government

² A copy of this letter is enclosed as appendix 1

- 1.5 The responses that I received to this correspondence suggested that supporting older people to remain safe and independent in their own home is an issue which local authorities do take seriously. There was overwhelming consensus around a commitment to make improvements in the way that DFGs are delivered across Wales, and this was supported by many examples of creativity and good practice.
- 1.6 However, whilst there is positive work being undertaken by many local authorities in Wales, I am very concerned that for some people, long waiting times, ineffective processes and under-resourcing of aids and adaptations mean that we are letting down older people at a point in their lives when are particularly vulnerable and in need of low level but timely support. Evidence that the Commission has received directly from older people has revealed that during this time of waiting, some are forced to move to residential care before the help they need is provided.
- 1.7 I am aware that there are current discussions about the need to balance speed of delivery of adaptations with meeting needs of and choices of the customer and the quality of outcome for the individual. I would support the need for a service that is person centred and focused on the needs and preferences of the individual receiving that service, but I do not see this as a barrier to delivering adaptations on timely basis. Whilst I accept that there are often good reasons why individual cases can take longer to complete, for example when an applicant's circumstances change, or when they have to go into hospital, and that these can skew average figures somewhat, I am not convinced that these cases can be used to justify average waiting times that exceed 365 days.
- 1.8 As Commissioner, I will be taking an on-going interest in the performance of all local authorities in relation to this service area and will be looking for evidence of sustained improvement over the next 12 months. I have informed local authorities³ that I will be writing to them in September 2013 seeking assurance of improvement in the following areas:
- That progress has been made in reducing end to end waiting times for DFGs, without the use of 'front-end' waiting lists. I have suggested that a 20% annual reduction in waiting times is a reasonable target.

³ Copy of this letter enclosed as Appendix 2

- That there is a fast and effective route for the completion of minor adaptations, particularly those linked to hospital discharge, so that no older person is left waiting for the little bit of help they need on a timely basis.
- As part of the performance management of aids and adaptations, that local authorities are monitoring and reporting evidence of the customer experience of the service, and the overall outcomes for the wellbeing of individual older people.

1.9 I believe that these revised expectations are appropriate and deliverable in the current environment and I will be undertaking further scrutiny in 2013 to ensure that a focus remains on a service area which is so important in allowing older people to stay within their own home, maintain their safety and independence, and exercise choice in the way they live their lives.

1.10 I am keen to work closely with the Committee to support your own scrutiny of performance in relation to home adaptations and to continue push for on-going and sustained improvements in provision of these services across Wales.

2. Whether sufficient progress has been made on implementing recommendations from the Equality of Opportunity Committee's 2009 report on home adaptations

2.1 The inquiry by the Committee in 2009 found that older people were waiting unacceptably long times for adaptations, that these waiting times could be longer for people living in different parts of Wales and in different types of housing, and that there had been little progress for improving the situation for older people in Wales since the Welsh Government's extensive review of DFG's in 2005.

2.2 Despite the fact that waiting times for DFGs have improved significantly since 2005, as I have outlined above there remain some significant challenges to the effectiveness and timeliness of services provided by some local authorities in Wales and there are unacceptable variations in quality of services that have still not been addressed.

2.3 In relation to progress made on some of the specific recommendations of the 2009 report, a number of recommendations

have not yet been implemented. For example, Recommendation 3 called for evaluation and research to inform revised guidance to local authorities. I am not aware of any specific guidance that was produced following the Committee's report. Furthermore, from the work that I have undertaken in this area over recent months it is clear that good practice is still not standard practice and there remains substantial scope for improvement in the way that knowledge and learning is shared effectively between organisations.

- 2.4 Recommendations 5 and 6 relate to the performance monitoring of adaptations services and this is another area where little progress has been made. More detailed comments on the impact of the current lack of strategic approach to performance monitoring are included below.

3. What impact reduced resources for housing are likely to have on the provision of home adaptations?

- 3.1 The significant financial challenges faced by public services at present mean that the operating environment is uncertain, difficult and rapidly changing. Older people are already directly feeling the impact of the current economic climate and the impact of financial constraints upon social and community support and amenities.
- 3.2 Aids and adaptations are an excellent example of a low cost, high impact service area that play a crucial role in the early intervention and preventative agenda. There is much evidence to show that timely adaptations can deliver major cost savings across other health and social care budgets. Care & Repair Cymru for example, have estimated from information gathered over the last 10 years that each pound spent on Rapid Response Adaptations saves Health/Social Services around £7.50.
- 3.3 The following table, taken from Welsh Government's own research provides further evidence of the cost savings that can be derived from affective home adaptations.

	Cost of DFG £	Cost / saving to other service £	Comment
Hip fracture	300-1,000	30,000	DFG cost form basic stair lift to Estimated cost to NHS (Parrott, 200, adjusted to 2009 costs)
Delayed transfer to residential or nursing care	18,000	108,000	DFG costs to cover installation of level-access shower and extension to bedroom to accommodate. Saving based on delaying transfer to residential or nursing care by 4 years
Discharge into independent living from residential care	6,500	270,000	DFG cost based on finding appropriate level access property and further adaptations. Saving based on 10 years not needing residential care
Discharge seriously disabled child from hospital to home care	36,000	251,850	Maximum DFG/ Saving based on cost of hospital care for a seriously disabled child, ODPM figures 2005, adjusted to 2009 costs
Reduced need for social care	10,000	20,000	DFG cost based on installation of ground floor bathroom. Saving to care budget as only needs 1 person to attend daily, based on 5 years

Source: CEL Transform (2010) Review of progress in implementing recommendations on the provision of Adaptations Services in Wales: Report for Welsh Assembly Government

3.4 This is a period of opportunity, to be smarter in the design and delivery of public services, to work with the energy and creativity of older people to meet their own challenges and to shift patterns of service so that they prevent dependency far more effectively.

4. Is the Welsh Government effectively monitoring the provision of adaptation services?

4.1 At present, the DFG is the only type of adaptation process for which there is a performance indicator; there is no common approach to monitoring the quality or impact of other adaptation grant routes.

The need for a more strategic approach to monitoring housing adaptations was a key recommendation of the 2009 Committee Inquiry that is yet to be progressed.

- 4.2 In relation to the current framework for monitoring DFGs, successive reports have raised issues about appropriateness of the current performance indicator. In particular, these relate to:
- Consistency of interpretation of the current indicator by local authorities
 - The extent to which this indicator is currently measuring 'like for like' across different local authority areas
 - The potential for particularly complex applications to skew overall average delivery times
 - The extent to which local authorities are reporting on stages of the process that they feel they do not have responsibility for, e.g. contractor delivery times.
 - The effectiveness of the current monitoring framework in capturing the customer experience and the outcomes and impact of the adaptations service.
- 4.3 Whilst I acknowledge that the current performance indicator does not currently paint a full picture in respect of adaptations services in Wales, it does provide a small but important part of that picture, focusing on the statutory duties of local authorities. I have already set out my position that concerns with the quality of the PI should not be used to justify unacceptably long delivery times. I do however, agree with the concerns relating to the customer experience and that is why I have asked local authorities to work towards capturing this information in future. A number of local authorities are already doing this effectively and there is an opportunity to learn from this good practice.
- 4.4 Overall, as Commissioner I see a strong need for consistent, accurate and comparable data on performance in relation to the provision of adaptations across Wales, regardless of the particular funding route. A DFG is only one of several means to achieve an outcome: it is not an outcome in itself. Any useful monitoring needs to be in relation to the outcome and impact for the individual. There is potential for some strong alignment to the new National Outcomes Framework and I would recommend that Welsh Government gives further consideration to the links that can be made with this programme of work in order to ensure that effective

person focussed outcome measurement is used to monitor the impact and outcome for all service users.

5. What more needs to be done to improve home adaptation services in Wales?

- 5.1 The overall context within which aids and adaptations services are funded and delivered is complex. Adaptation services have developed from a range of different pieces of legislation, supplementary orders and guidance and new policies which have been introduced to improve parts of the system over time. This has created a disjointed and complex system which needs fundamental review and reform to meet modern needs. Local authorities in Wales are subject to statutory duties to provide effective Disabled Facilities Grants and also have discretionary powers to deliver a wide range of adaptations services as they see appropriate. Public, private and voluntary agencies fulfil different, sometimes overlapping roles. These multiple routes can create unnecessary complexity and unfairness, and create bureaucratic processes which often inhibit a common sense response to a problem.
- 5.2 There are also inconsistencies and inequalities in the current funding arrangements, with access to resources dictated by housing tenure, age, and complexity of the adaptation. There are at least six different funding streams including:
- Disabled Facilities Grants (DFG)
 - Physical Adaptations Grants (PAG) delivered by housing associations (excluding LSVTs)
 - Individual solutions developed by LSVT's
 - Minor Adaptations directly funded by local authorities or housing associations
 - Fast Track Adaptations
 - Independent Living Grants (ILG)
- 5.3 Differences in the way that these funding streams are administered and implemented, depending on local policies and decisions, create a serious risk that people with complex needs will fall through one of these funding gaps. For the older person trying to access the help they need, navigating this complex web of eligibility criteria can act as a significant barrier. I am concerned that current funding arrangements are not conducive to developing a common sense

solution to the needs of an individual but instead are directed by the accessibility of the strands above.

- 5.4 There is consequently much to do to improve the wider framework and funding arrangements within which aids and adaptations are delivered in Wales. Home adaptations should be delivered as part of an integrated prevention service, with all sections working to enable people to live independently irrespective of tenure, age, or ability. A modern adaptation service needs to put the individual at the centre and create an experience which delivers outcomes centred around the wellbeing of that individual.
- 5.5 In light of this, I strongly have welcomed the commitment to the whole-scale review of the current framework for aids and adaptations in Wales that was set out in *Homes for Wales*, the Housing White Paper and I have written to the Housing Minister Huw Lewis asking him to expedite this review as a matter of urgency. I would recommend that this review needs to consider how we might move towards:
- A simplified system focused on meeting the needs of the individual on a timely basis
 - Fairer and simplified funding arrangements
 - A monitoring framework for adaptations, centred around the outcomes for an individual's wellbeing, and which takes account of the customer experience
- 5.6 I look forward to contributing to the Welsh Government's review in due course. I also committed to working with the Committee to support your continued work relation to Home Adaptations and to play my own part in pushing for on-going and sustained improvements in provision of these services across Wales. There is a need to eliminate unacceptable variations in the delivery of what should be a simple, low cost service and to prevent the risk that older people lose their independence unnecessarily. This would be a failure in public service and should not be tolerated. I am confident that we can work together to ensure that older people live in their own homes for as long as possible and receive assistance in a timely manner, because this is so fundamental to their continued independence and wellbeing.

Appendix 1

24 September 2012

Dear

Following the publication of the Local Government Data Unit's most recent Local Government Report, I am writing to you in relation to Disabled Facilities Grants (DFGs). The majority of people who benefit from DFG-funded adaptations are older people who need this assistance so they can return to their home from hospital, stay within their own home, maintain their safety and independence, and exercise choice in the way they live their lives.

I am disappointed to learn that your local authority was not successful in meeting its statutory duty to deliver DFGs within 12 months from the date of application (where the application is approved). It is not acceptable that some older people in your area are waiting too long for an adaptation that would make a significant difference to their quality of life, and is in some instances essential to keeping them safe and in their own homes. During this time of waiting, some are forced to move to residential care and, sadly, some may even die before the help they need is provided.

As Commissioner, it is my expectation that your local authority will, as a minimum, be compliant with the statutory requirement for delivering DFGs by this time next year. In light of this, I invite you to write to me providing me with an action plan that sets out how you plan to achieve this.

I would be grateful if you would provide me with this information no later than **Monday 5 November 2012**.

The variance in timescales for delivering DFGs is a clear example of the postcode lottery that many older people experience. I am also writing to all local authorities that meet the statutory requirement asking them to share with me good practice, which I am happy to forward to the WLGA so it can be shared with you.

There is a wider issue regarding the way in which basic aids and adaptations are provided to older people in Wales. Failure to provide aids

and adaptations to older people on a timely basis not only undermines their safety and independence, it also places an additional burden upon local authorities. There are a number of strong reasons for requiring that this issue is a priority across Wales, hence my writing to you as the Commissioner for Older People.

I look forward to receiving your response.

Yours sincerely,

A handwritten signature in black ink that reads "Sarah Rochira". The signature is written in a cursive style with a long, sweeping tail on the final letter.

Sarah Rochira
Older People's Commissioner for Wales

Appendix 2

Address Goes Here
Here
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TWO FOLD

19th November 2012

Dear

Re: Disabled Facilities Grants

I recently wrote to you regarding aids and adaptations, specifically the delivery of Disabled Facilities Grants. As a Local Authority that is not currently complying with the statutory timescales for delivering this service, I set out my expectation that your local authority will, as a minimum, be compliant with the statutory requirement for delivering DFGs in a years time and invited you to provide me with an action plan setting out how you plan to achieve this.

Thank you for your response to this letter which made it clear that, supporting older people to remain safe and independent in their own home is an issue which you take seriously and which reassured me that you are committed to making improvements in the way that DFGs are delivered in your locality.

Despite some of the positive work being undertaken by many local authorities in Wales, I am very concerned at that long waiting times, ineffective processes and under-resourcing of aids and adaptations are resulting in some older people aren't getting the help they need, when they need it.

As Commissioner, I will therefore be taking a on-going interest in the performance of all local authorities in relation to this service area and, as I suggested in my previous letter, will be looking for evidence of sustained improvement over the next 12 months. I will be writing to all local authorities in September 2013 seeking assurance of improvement in the following areas:

- That progress has been made in reducing your end to end waiting times for DFGs, without the use of 'front-end' waiting lists. I suggest that a 20% annual reduction in waiting times is a reasonable target.
- That there is a fast and effective route for the completion of minor adaptations, particularly those linked to hospital discharge, so that no older person is left waiting for the little bit of help they need on a timely basis.
- As part of your performance management of aids and adaptations, you are monitoring and reporting evidence of the customer experience of the service, and its overall impact on older people.

I believe that these revised expectations are appropriate and deliverable in the current environment and I hope this will provide the necessary independent scrutiny and focus on a service area which is so important in allowing older people to stay within their own home, maintain their safety and independence, and exercise choice in the way they live their lives.

As Commissioner, part of my role is to ensure that good practice becomes standard practice and to support improvement through sharing knowledge and learning. I recently wrote to those local authorities who are currently performing well in their delivery of DFGs and asked them to provide examples of good practice so that these could be shared with other organisations to support them in improving their performance in this area.

I am currently compiling those examples of good practice and innovation that were provided to me by all the organisations who responded to me in a separate briefing which I intend to share with you shortly. I hope you find that you can make use of this information in your efforts to continually improve the service you offer to older people in your local area.

As well as examples of good practice there were a number of other common issues that were raised by local authorities in their responses to me. These included:

- The legislative framework relating to DFGs
- The effectiveness of the current performance indicator

I have therefore taken the opportunity to set out my views and expectations in respect of these issues in the attached appendix, which I hope provides the necessary clarification.

I am also aware that there is much to do to improve the wider framework and funding arrangements within which aids and adaptations are delivered in Wales. In light of this, I have already written to the Housing Minister Huw Lewis asking him to expedite the review of aids and adaptations that he committed to in this year's housing White Paper. I have also welcomed the announcement of a follow-up inquiry into aids and adaptations by the Assembly's Communities, Equality and Local Government Committee and look forward to sharing my views with that Committee as part of their evidence gathering.

Getting aids and adaptations into the homes of older people on a timely basis is fundamental to their safety and independence I look forward to working with you and other partners to further improve the way we deliver aids and adaptations services across Wales.

Yours sincerely

Older People's Commissioner for Wales

CELG(4)-07-13 – Paper 4

Communities, Equality and Local Government Committee

Inquiry into Home Adaptations

Response from : Nigel Appleton

Introduction

The duty of public authorities in relation to the needs of people with disabilities has been set out in legislation from the National Assistance Act of 1948, through the Chronically Sick and Disabled Persons Act of 1970 to subsequent legislation and guidance from both Westminster and Welsh governments. This has identified three main areas of responsibility:

- To develop an understanding of the nature and volume of need that people with disabilities might have within each geographical area (normally the boundaries of the “Welfare Authority”).
- To provide professional assessment to those who appeared to have needs to which the Authority could respond through the provision of services.
- To ensure that the needs that are assessed are appropriately met.

Although within Wales there has generally been a more progressive approach to the delivery of services to meet the needs of disabled people when compared with some other countries of the United Kingdom even here the expectations generated by legislation and guidance have been only incompletely delivered.

- Attempts to quantify need have been, at best, sporadic for fear of creating expectations and demands beyond likely resources.
- Various techniques have been used to restrictively gate-keep access to assessment and criteria used, such as the grotesquely mis-named “Fair Access to Care” criteria.
- Resources to support the delivery of assistance have generally been regulated to meet budget management requirements, rather than to respond to the presentation of need.

The Benefits of timely and appropriate adaptations

There is an extensive literature documenting the benefits that arise for a range of stakeholders from the provision of adaptations in the homes of disabled people. Reporting in 2001¹ Heywood identifies a range of benefits for the disabled person, their carers and family members. These are principally in the area of mental and

¹ Money well spent: the effectiveness and values of housing adaptations, Heywood F, Joseph Rowntree Foundation, 2001

physical well-being and, for the disabled person, improved dignity, privacy, independence, health (both physical and mental), social inclusion, and opportunities for education and employment. The impact on well-being is further documented in the wide-ranging literature review undertaken by Heywood and Turner in 2007 for their report "Better outcomes, lower costs".² Their report also reviews studies that had sought to establish cost savings to the health and social care economy through the provision of adaptations.

The question of cost benefit from the provision of adaptations relies on an equation which is simpler to state than to specify: how many events requiring high cost health or social care services have been avoided, multiplied by the estimated cost of providing those services. The second part of that equation is less problematic than the first; there are many sources that will provide the cost data.³

Work by the Lean Enterprise Research Centre at Cardiff University reports a study of people moving to residential care over a five year period⁴. Of the total of 750 people moving to residential care 244 had been identified by OT services for a Disabled Facilities Grant (DFG), 85 had received a DFG and 159 had not. Those who received a DFG entered residential care at an average age of 84 years, whilst those who did not entered at an average age of 80 years. The report suggests that there is a high correlation between receiving a DFG and an average delay in admission of four years.

Whilst there are a number of imponderables in making the calculation (whether the person receiving the adaptation also receives home care before transfer to residential care and whether, once there, they were meeting part of the cost of their care themselves) the gross cost of four years of residential care is in the region of £80k per person to set against the average cost of a DFG of around £7k.

The second area in which financial benefit is widely asserted is in the prevention of falls and resulting fractures. The cost to public funds of a hip fracture was estimated at £28,665 in 2007.⁵ The difficulty here is that the circumstances that lead to a fall are multi-factoral and a single intervention will only have a partial rather than determining impact. Whilst an adaptation may identify and remove tripping hazards, improve accessibility and generally modify the risk inherent in the home environment it will represent only one element in determining a safer outcome. Other factors may include underlying health conditions, medication, nutrition and hydration, chronic joint conditions, balance, and lifestyle.

² Better outcomes, lower costs- Implications for health and social care budgets of investment in housing adaptations, improvements and equipment: a review of the evidence", Heywood R & Turner L, Office for Disability Issues and University of Bristol, 2007.

³ See for example: Unit costs of health and social care services 2011, Curtiss L, 2011, PSSRU

⁴Lean Enterprise Research Centre, Cardiff Business School (2010) Lean and Systems Thinking in the Public Sector in Wales

⁵ Better outcomes, lower costs- Implications for health and social care budgets of investment in housing adaptations, improvements and equipment: a review of the evidence", Heywood R & Turner L, Office for Disability Issues and University of Bristol, 2007.

The Care and Repair England report 'Time to Adapt'⁶ cites a notable example of how really close links between home adaptations providers and the health service can improve services for disabled people considerably. Blackpool Care and Repair has organised their service from the perspective of the user, not the provider and the PCT, home improvement agency and local authority have worked together to bring the time it takes to complete a home adaptation down from a year to an average of 8 weeks - or even less if a case is urgent. John Turner, the Integrated Systems Manager at Blackpool PCT states that

'The links between housing suitability and health are incontrovertible. If we want to improve older people's health, enable their independence at home, prevent falls and reduce other common problems it is absolutely critical that we work effectively with housing colleagues to make older people's homes safe, decent and adapted places to live.'

The delivery of adaptations

The arrangements for the provision of assessment and delivery of adaptations to dwellings to meet the needs of disabled people seem uniquely structured to encourage delay, bureaucracy and fragmentation in the delivery of service. Through the initiative and imagination of individuals the system is, in many cases, made to work for the benefit of disabled people. Where goodwill, adequate financial resources, inter-disciplinary trust and corporate leadership are absent disabled people suffer delay and compounded risk for themselves and their carers.

The principal means of delivering statutory funding and public assistance to provide adaptations relies upon the Local Government and Housing Act of 1989 which introduced a specific grant: the Disabled Facilities Grant, to fund eligible adaptations for eligible applicants. The Housing Act 1996 and the Regulatory reform Order (Wales) 2002 further refined that provision.

Where the National Assistance Act and the Chronically Sick and Disabled Persons Act had laid responsibility squarely on the Welfare Authority the introduction of the Disabled Facilities Grant gave the lead in delivery of adaptations to the Housing Authority. Application for the grant was made to the Housing Authority who would administer a Test of Resources to determine financial eligibility for assistance. The legislation suggested that in administering the grant the advice of Community Occupational Therapists, generally working within Social Service Departments, should be taken into account. In practice the Occupational Therapy service generally came to be the gatekeepers to this provision, determining what works are "necessary and appropriate" to meet the disabled persons needs, whilst housing colleagues determine whether what is proposed is "reasonable and practical" and generally supervise their delivery.

Whilst the primary responsibility for identifying, assessing and responding to the needs of disabled people remained with the Welfare Authority this was often obscured or poorly understood at an operational level. Thus the exhaustion of

⁶ Adams, S. and Ellison, M. (2009) Time to Adapt - Home adaptations for older people: The increase in need and future of state provision, Nottingham: Care and Repair England.

available budget within Private Sector Housing, where the administration of the grant was generally located, would be taken as an absolute bar to delivering any adaptations until further resources became available.

Because the delivery of Disabled Facilities Grant now occupied centre stage in the response of local authorities to the provision of adaptations those who did not qualify for financial assistance were often offered no assistance at all. Their right of access to assessment, specification of works and support through the execution of adaptations for which they themselves were going to pay too often met with no service response.

The whole system is characterised by delay: applicants waiting to be assessed to find that they will not qualify for financial assistance; requirements to prove title for home owners or to secure landlord's consent that will often be problematic in anything other than very straight-forward circumstances, delays in process between departments; all contribute to delay. The review of housing adaptations including Disabled Facilities Grants in Wales, undertaken by Chris Jones and reported on in March 2005, drew attention to delay in delivering adaptations as the greatest limitation in the then existing system. The average time from referral to completion reported by Jones was eighty-five weeks.

To a person confined to the house or remaining in hospital because their home is not accessible, to the carer carrying their disabled loved one to the shower or to the toilet because the only one available is inaccessible, eighty-five weeks is an intolerable period to wait.

As a result of the work by Chris Jones and a parallel consultation in England to improve DFG delivery, revisions to the DFG in Wales were introduced in Annex D of the National Assembly for Wales Circular 20/02 in 2007⁷. This had the aim of putting the needs of the disabled person at the heart of the service, improving co-ordination between different service providers and reducing delays. The DFG Review Report also recommended that lower cost adaptations should be streamlined and made less bureaucratic by channelling adaptations up to the value of £3,000 through a fast-track system rather than through the traditional DFG route. Whilst these improvements are welcome timeliness, or the lack of it, remains the most pressing issue in devising a fit for purpose system for the delivery of adaptations.

In the work undertaken in 2011/2012 to evaluate the Independent Living Grant⁸ initiative six local authorities within Wales were identified as case studies. In those six areas the time taken from referral to completion of an adaptation under the DFG process, even after the improvements of 2007, ranged from 315 days to 632 days, with a typical average period of 340 days. The time from referral to completion of an Independent Living Grant ranged from 32 to 78 days with an average of around 58 days.

The challenge

⁷ National Assembly for Wales (2007) Circular 20/02 Annex D – Revision of Disabled Facilities Grant

⁸ Evaluation of the Independent Living Grant (ILG), Appleton N, Leather P & Mackintosh S, Welsh Government Social Research, 2012 ISBN: 978 0 7504 7505 1

The need for adaptations will not go away. The ageing of society will, as a consequence of the chronic conditions and functional inhibitions that characterise extended old age, drive an increasing level of demand. The continuing advances made by surgeons and physicians in improving survival rates for people born with serious disabilities and those who suffer serious illness or injury adds a smaller number, but often with more complex needs for adaptations to their homes.

The provision of assistance, including financial assistance, to achieve adaptations in the homes of disabled people should rightly be regarded as an issue of citizenship. The right to inclusion, to the dignity and maximisation of independence that an adaptation can bring is just that: a right, not a privilege.

However the administration of assistance to those requiring adaptations is firmly locked into a “welfare” model: one in which applicants must demonstrate incapacity and impoverishment to achieve eligibility. Where concern to constrain and account for public expenditure can over-ride all other considerations. One in which flexibility to achieve timeliness in delivery adaptations is thwarted by vested interest. In which only need defined by professionals is valid and aspiration by disabled people and their carers is felt to be inappropriate. In all the professions and organisations involved in the delivery of adaptations to people in Wales there are those who are committed to working collaboratively and flexibly, with imagination and empathy to achieve the best outcomes for disabled people and their carers. They need to be empowered by the support of policy makers and legislators.

To meet the continuing requirement for adaptations, to do that in a way that recognises that this is a rights based activity, and to deliver adaptations in a timely way, requires flexibility, imagination and commitment to the person rather than to the bureaucratic process. Wales has shown how this might be achieved: in the Rapid Response service, in the Independent Living Grant experiment and the innovative patterns of working that some were able to adopt through that initiative. It is time to “mainstream” those approaches, so that the delivery of adaptations in Wales sets a new standard in responding to the needs and aspirations of those of its citizens who live with disability.

Nigel J W Appleton
February 2013

Eitem 7

Mae cyfyngiadau ar y ddogfen hon