



Foundations

College of
Occupational
Therapists



Report on the DFG Summit

Hosted by the College of Occupational Therapists
and Foundations in December 2015

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About Foundations

Foundations is the National Body for Home Improvement Agencies and Handyperson Services in England as appointed by the Department of Communities and Local Government.

Foundations' remit is to:



Engage with providers and commissioners to monitor the sector and enhance the quality and reach of home improvement agency services



Arrange events and training



Develop tools and resources



News and publicity

For more information visit: www.foundations.uk.com

About Home Improvement Agencies

Home Improvement Agencies (HIAs), sometimes known as Care & Repair or Staying Put schemes, help vulnerable people maintain independence in their own homes. Their services include:

- visiting clients at home or providing detailed telephone advice;
- setting out housing options to help clients decide what type of housing is best suited to their changing needs;
- checking entitlement to any financial help, including grants and charitable funding;
- project management, drawing up plans, getting estimates and liaising with others involved in any building work/adaptations needed, such as council grants officers and occupational therapists;
- provision of handyperson services, to carry out small jobs around the home, help with gardening, or coming home from hospital; and
- helping to make homes more energy-efficient.

A searchable directory of accredited HIAs and handyperson services is available at: www.findmyhia.org.uk



About the College of Occupational Therapists

The British Association and College of Occupational Therapists

The British Association of Occupational Therapists (BAOT) is the professional body and trade union for occupational therapy staff in the UK.

College of Occupational Therapists (COT) is a wholly-owned subsidiary of BAOT and operates as a registered charity. It represents the profession nationally and internationally, and contributes widely to policy consultations throughout the UK. It sets the professional and educational standards for occupational therapy, providing leadership, guidance and information relating to research and development, education, practice and lifelong learning.

As the professional body for occupational therapy, we provide guidance, advice and support to meet members' needs throughout their career. This includes lifelong learning materials; free downloads of College books; access to OT-related e-journals; a helpline; OTNews and the British Journal of Occupational Therapy, plus professional indemnity insurance cover.

What's more, COT put members in touch with each other through our regional and local groups, specialist sections, and via our Facebook pages, Twitter and discussion forums providing access to over 30,000 like-minded peers including occupational therapy students, practitioners, managers, researchers, educators, consultants, independent practitioners and occupational therapists who are returning to work after a break.



Foreword

The Disabled Facilities Grant (DFG) can often be characterised by the way it divides – opinions, delivery systems and eligibility for support. The DFG Summit was conceived to start bridging some of those divides and jointly hosting with the College of Occupational Therapists is hugely significant in signalling the need for a more collaborative approach.

The need for greater collaboration in delivery was a real theme running through all the discussions, but so was a frustration with some of the current regulations.

However, since 2007 local authorities have had the discretion to do things differently and even devise their own set of regulations – and we heard some great examples on the day. With the extra funding now earmarked for DFG we need to see many more instances coming forwards.



Paul Smith, Director of Foundations



The College of Occupational Therapists (COT) and our COT Specialist Section Housing is delighted to have collaborated with Foundations to organise the Disabled Facilities Grant Summit and report, which highlights an important area of work for both our organisations.

Occupational therapists assess and make recommendations for 95% of DFGs, for disabled children and adults. DFG's are an important provision that supports independent living, reducing the need for care and support and admission to residential care. In addition the DFG can support a preventative approach by reducing risks within the home, and assisting individuals to live and manage independently in a

safe and accessible home environment.

The DFG is 30 years old this year so it is timely that we jointly review this valuable financial provision. During the Summit we heard about innovative ways that the DFG can be used to support disabled people and promote choice and control. This report provides helpful examples of DFG service delivery and areas for potential improvement.

Julia Scott, CEO College of Occupational Therapists



Background

As part of collaborative work across government, housing, health and social care sectors to drive integration, a pioneering Memorandum of Understanding has been signed by government, sector professional and trade bodies, including Foundations and the College of Occupational Therapists. A major aim of the document was to improve health and well-being and reduce health inequalities at a local level in people's homes. Disabled Facilities Grants are a national housing grant available to adults and children with a disability to facilitate access to and within the property. The grant is available to all owner occupiers, private and housing association tenants subject to a statutory means test.

The Disabled Facilities Grant (DFG) summit was identified as an important part of this plan in bringing together practitioners to look at how local delivery of a key national grant could be improved. The event was organised by Foundations and the College of Occupational Therapists who invited Occupational Therapists, HIA managers, Grant Officers, Government officers and leading policy people to discuss good practice in the delivery of the DFG.

The recent comprehensive spending review has promised a continued DFG funding stream for the next 5 years, from £395m in 2015/16 right through to £500m in 19/20, providing a vote of confidence and trust in that what we are doing is preventing pressure on acute services and supporting independent living. With this investment there is a duty amongst stakeholders to administer the fund in an efficient and customer friendly way.

The meeting discussed 5 key questions about DFGs and their context in the wider theme about people remaining independent in the community, regardless of their means. The questions were framed around how to improve what we are doing and how to include self-funders within the framework of the DFG.

Below is a summary of the main points brought up on the day together with some apposite case studies showing what works well now. We have also included ideas from people who wanted to contribute but couldn't attend on the day. Each exemplar shows off an area of good practice that will be more appropriate to some areas than others. We are looking for areas of expertise rather than a single model of operation.

The document closes with major themes that emerged from the day together with some key recommendations of what can be changed nationally and locally to improve delivery.



What works well in current practice

- It is the only statutory grant left for disabled people living in homes not accessible or meeting their needs.
- It can be used flexibly and not just for adaptations.
- At its best it provides a professional, accountable, holistic, personalised solution.
- Practical measures that work well
 - Early test of resources to ensure choice and control
 - Efficient triage systems with fast tracking for urgent cases
 - Common data systems allowing all parties access to process
 - Co-location of services
 - Fast track adaptations without a means test
 - Dedicated housing occupational therapist

Good Practice Example: Ealing Home Improvement Agency



WHERE

Ealing is a large London borough consisting of over 342,000 residents with a very diverse population including over 40% from minority ethnic communities. The housing stock was mostly built in the 30s and has significant disrepair. There are significant pockets of health deprivation.

WHAT

The agency carries out adaptation work across all tenures. Total budget is nearly £4m
The agency carries out over 400 jobs per annum two thirds of which are in the private sector. There is also 400k for the Handyperson service enabling them to complete 2,500 jobs

HOW

For DFGs a caseworker checks whether the customer can be passported through or if not they do a home visit using their own 4 page form.

Children's cases are processed quickly and are offered an interest free loan if they exceed £30k

Innovative use of Handyperson services for hospital discharge and re-ablement

Occupational Therapists working in the Agency

Stair lifts are dispensed without a means test enabling a fast efficient process



How can we improve customer service?

- Measure end to end process times and share information
- Simplify the process
- Importance of individual design- a person centred approach
- Budget and process led attitudes- we need to tailor a system to the customer
- Information at all stages of process
- Clarity of cost and what is in or out
- Update the existing means test

Good Practice Example: Cornwall Home Solutions



WHERE

Cornwall Home Solutions is a county-wide service that emerged from 3 externally sourced HIAs being amalgamated into a single service. The County is predominantly rural, serving over 600,000 people with a huge demand for HIA and related services.

WHAT

The agency has been expanded to include the occupational therapists and housing options services. This enables the whole customer journey to be included within a single organisation, preventing the common communication problems and forming a unitary approach to the customer.

HOW

The agency has embraced new technology with a focus on reducing the number of visits to the customer throughout the journey. This speeds up the process, reduces the stress on the individual and of course makes the process more efficient for all parties..

Early intervention - Housing Options is most effective discussed at an early stage in the process

Efficiency – Better use of technology can reduce time on visits, speeds up the process and is more customer friendly.

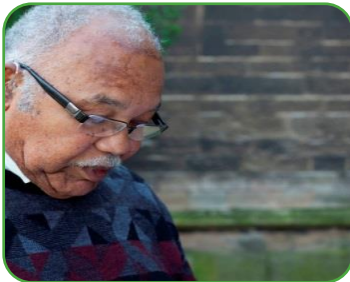
Integration - A single approach presents a unified message to the customer.



How can we support self-funders

- DFG is now part of BCF and should be based on need not just finance
- Enable self- assessment, aspirations, choice and customer control greater influence in the specification of adaptations
- Provide free and independent advice and information and support to work through the implications of choices.
- Provision of brokerage and project management
- Allow access to agreed rates on DFGs.
- Work with the supply chain to develop market solutions
- Ensure that housing and care options are offered to all clients at an early stage.
- Mainstream accessible design accessible through a range of points of sale
- Compile evidence of good practice outcomes

Good Practice Example: West of England Care & Repair



WHERE

WE C&R operates over 4 unitary councils covering the old Avon district area. There are pockets of deprivation amongst the relative affluence. In Bristol the picture is different with 1 in 5 older people living in relative poverty and there are areas of need across the other districts

WHAT

Centres for Independent Living combine a space where customers can see a range of adaptations to suit their needs with a functioning centre where people can be assessed for their needs and advised impartially on what might suit them best.

HOW

WE C&R has developed a commercial service called **Enterprises**, offering a complete design and build service to people looking to fund their own adaptation and repairs. They have also developed a contracting arm that will compete with private contractors

Innovative centre for independent living co-located service with pooled budgets

Pursuing a commercial approach to serving self -funders

Effective joint working across housing, social care and health



How can we collaborate better with other services

What does a collaborative DFG service look like?

- It will be available to all at the point of need
- It is capable of being targeted at bottle necks in the system without losing its broadly preventative nature. It will also be quicker
- One holistic assessment to reduce numbers of assessments and staff involved. /rationalisation of assessment and more integrated staff roles
- Single point of contact throughout pathway. Customer is kept informed of progress.

How can DFGs integrate with other services supporting independent living?

Access:

- Align assessments to existing eligibility criteria.
- The system is designed to identify which service will provide greatest impact on a person's wellbeing at any one time
- Responsibility for it is shared by the whole system- shared accountability through shared budget
- Co-location of services
- Alignment of health and social care occupational therapy

Targeting v prevention

- Identify high use and high need individuals through market research and local surveys
- Review the customer pathway so that it is not just a lean system focussed on high end need
- The range of options constricts depending on urgency of need
- New triage systems and fast-tracking
- Include carers needs

Availability to all at the point of need

- Greater public awareness on planning for healthy ageing (public health campaign)
- Mixed economy of provision
- Greater visibility of adaptations in the mainstream
- Better use of the publicly funded part of the programme in shaping the wider market for adaptations, including the setting of expectations and standards.
- Equity for all age groups including families with disabled children and younger adults
- Placement of an occupational therapist within HIA to support self-funders.
- Ensure advice and information is offered up front to all people

DFG is part of a whole system solution whether the person needs adaptations, residential care or extra care.

Training

- More information on new and innovative solutions
- More job swaps/shadowing to understand each other's roles
- Training on new issues e.g. design for dementia
- Letting go of professional boundaries
- Housing and Care options
- Improve Choice Based Letting systems/longer void times for adapted properties
- Equality issues – more equal treatment of different tenures

Information and networking

- Outcome measurement – key variables measured at the start of the customer journey linked to outcomes at the end of the journey - outcomes dashboard.
- More information on DFG in BCF plans and Joint Strategic Needs Assessment.



How should we redesign services for the future

Assessment Process

- Better early advice and information about healthy ageing in one's own home
- A simple guided self-assessment tool to establish recommendations (in conjunction with occupational therapy assessment)
- On-line means test and application form
- Early means test to ensure customer has real choice
- Clear and simple eligibility criteria
- Professional advice on adaptations dependent on choice not prescription
- Segmented offer depending upon customer choice
- Moving on choices as part of offer

Delivery

- A framework to call off 60-80% of works
- Clear and timely parameters on start and completion of works
- Speed according to need- prioritise urgent and at risk cases
- Integrated IT system – or effective way of linking systems
- Independent appeals process
- New, online version of 'Minor Adaptations Without Delay' to enable construction industry partners, Registered Social Landlords, Trusted Assessors, and Handypersons to have access to a manual of best practice in the choosing and fitting of minor adaptations.
- A local shop/assessment centre designed to appeal to aspirations as much as need
- Integrated delivery based on minimum number of visits

Contractors

- Transfer the risks of unforeseen work to contractors on the framework - needs to be fair to minimise risk of pushing up costs.
- Better training for construction industry partners (Trusted Assessor/Trusted Technician)

Strategic

- Part of a strategic approach to ensuring the housing stock meets the immediate and long term needs of the population
- More customer involvement – user groups, continual service improvement
- More disabled people employed in adaptation services

Good Practice Example: Knowsley Care & Repair



WHERE

Knowsley is a small urban authority squeezed between Liverpool and Manchester. It is made up of a number of larger towns and overspill estates from Liverpool. Life expectancy is lower in Knowsley with 14.5 % of people expressing that their life was limited by illness.

WHAT

An Independent living Centre includes the HIA, occupational therapists, grants teams and equipment centre. The whole centre is a partnership between Knowsley Borough Council, NHS, Knowsley Housing Trust and Care and Repair. A User group is has been involved from the start.

HOW

Being in a single space enhances integrated working and the DFG, ILC and Equipment budgets are pooled. This means no cost shunting and now includes additional monies from the BCF. This money allows for hospital discharge cases to be fasttracked saving resources at the acute end.

Pioneer Centre for Independent Living

Integrated and collocated service with pooled budgets

Promotion of independent living solutions

Good Practice Example: Wokingham Local Authority



WHERE

Wokingham is a Unitary Authority situated in Berkshire with a population of 156,663 and has an above average population of children between 5-14 years.

WHAT

The occupational therapy and Service Manager responsible for disabled children's services secured budget on the basis of **Invest to save**, to support DFG grant works that exceed the £30k grant limit. As many adaptations for children do exceed the grant amount, finding the additional funds is often difficult to secure completion of works required. Funding from this budget allows DFGs for disabled children to be completed; reducing the need for residential placements, back injuries and crisis management plus providing a safe and accessible environment.

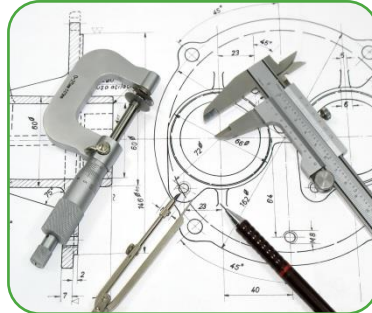
HOW

All cases requiring additional funding (top-ups) are presented and ratified at the DFG panel to agree the most effective scheme that meets a child's need for more than five years.

This budget provides a mechanism to secure additional funding that is often needed in a timely way and avoids much needed works from not progressing.

By having a safe and accessible environment enables the family and child to manage everyday life independently.

Good Practice Example: London Borough of Barking and Dagenham Local Authority



WHERE

The London Borough of Barking and Dagenham has introduced a Direct Payment grant scheme that also offers self assessment to enable adults to make their own arrangements for installing straightforward adaptations e.g. stairlifts, showers, door widening and downstairs toilets. Grants of up to £4,000 are available.

WHAT

Applicants complete a self assessment form and means test. Eligibility is determined without a visit. Payment is made net of the clients contribution. If eligible; the service user is able to make their own arrangements for installation and organise installation and design to meet their preference. They are required to only use this grant for the stated purpose.

HOW

To ensure grants are used for the stated purpose; 10% of cases are checked and all recipients of this grant sign an agreement confirming they will use grant for specified purpose. Recipients are also offered assistance if they wish throughout this process. This scheme provides a personalised and preventative approach.

This scheme is simple, straightforward and meets the demand for lower cost adaptations that is both preventative and personalised.



DFG Summit - Themes of the day



Three main themes emerged after analysing the content of the day:

Collaborative Services

Collaboration was a recurring issue during the day, with a common understanding that delivery was improved by having a single team administering adaptations. Having the occupational therapy function integrated into the grants/HIA team made for better communication, fewer visits, faster processing and reduced confusion for customers. Corporately having a unified approach helped the customer understand the system and allowed for a single view to be presented.

Advice and Information

Advice and information offered at an early stage were seen as an important way of both defraying demand for DFGs as well as offering informed advice and support to people prior

to receiving a grant. Adaptations are part of a whole suite of interventions intended to support people to live independently. For the system to work effectively, advice and information needs to be given at an early stage enabling people to make effective choices about their housing. People can then choose whether to move home in a timely manner or adapt their current property to meet future needs. All the evidence shows that interventions are much cheaper and more effective if carried out in good time rather than in the midst of a crisis.

Interpretation of DFG Regulations

The final major theme of the day was the need to understand how flexible the DFG system was and how the funding can be used for a variety of purposes outside the mandatory system. The Regulatory Reform Act (2002) replaced Renovation and Minor Works legislation and in 2008 the government brought the DFG system into the flexible fold of this Act.

This allows local authorities, once they had set a private sector housing policy, to spend the DFG monies in a more flexible way than following the mandatory route. The DFG monies could then be used for example to finance support to move or facilitate stair-lift provision without a means test. The Act is very flexible and can support any intervention facilitating independent living. This is in keeping with the recently published guidance to the BCF that states local areas are required to fund NHS commissioned out-of-hospital services and to develop a clear, focused action plan for managing delayed transfers of care (DTOC) including locally agreed targets. It is important that the local Housing Authorities ensure that housing concerns are seen as integral to addressing DTOC when considering use of the additional DFG money.





Recommendations

Collaborative Systems

- Create single/co-located teams for delivery ensuring better communication and reduced number of visits. This can be done in a number of ways, the key being a single management view of the process to ensure a seamless service for customers.
- Use the NHS number when recording information as recommended by the Better Care Fund. This allows for a single reference for people at all stages of the process.
- Record end to end times for the customer journey dating from when they contact the Council to when the work is signed off. This is essential to ensure systems are operating in a timely and effective manner.
- Link up the IT systems within Social Care and Housing/Grants so the effect of DFGs on Social Care interventions such as residential and home care can be measured.
- Ensure a way of recording information that can be seen by all parties. The example in Somerset of a common 'portal' that all parties can use is one way to do this.

Prevention

- A consistent offer to customers whether they are self-funders or funded ensuring that the needs of the whole population are met.
- Clear information and advice given at an early stage to ensure customer choice and avoid unnecessary and costly adaptations.
- Use of a Trusted Assessor approach for simple cases to allow occupational therapists to employ their skills with more complex cases. This can allow for simple adaptations to be fast tracked through the system.

DFG Regulations

- Raise the maximum DFG from £30,000 to take account of inflation, it not having been raised for over 5 years.
- Revise the DFG means test to include actual housing costs or adopt the Social Care means test to create commonality across the system.
- Be more creative with the DFG monies using flexibilities given under the Regulatory Reform Order:

From 2008-09 the scope for use of DFG funding will be widened ... to support any local authority expenditure incurred under the Regulatory Reform (Housing Assistance) (England and Wales) Order 2002 (RRO). This will enable authorities to use specific DFG funding for wider purposes, which may be more appropriate for individuals than current DFG arrangements allow. Creating greater flexibility will allow the DFG to be used for associated purposes, such as moving home, where this is a more appropriate solution, or funding could be pooled to purchase portable extensions which are suitable for re-use, through improved procurement models.



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