



**Report To:** Housing Portfolio Holder  
**Lead Officer:** Director of Housing

15 October 2014

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## **Review of HRA Funded Aids and Adaptations Policy**

### **Purpose**

1. To review how the Council through the provision of aids and adaptations can support tenants to achieve an improved sense of wellbeing given the rising number of older and disabled people in council homes.
2. To review the existing Aids and Adaptations Policy, the budget setting for the service and consider whether the Council should employ an Occupational Therapist directly.
3. This is a key decision because it does involve expenditure and affects all communities where there are Council owned properties and it was first published in the April 2014 Housing Portfolio Holder Forward Plan.

### **Recommendations**

4. It is recommended that the Housing Portfolio Holder approves the revised Aids and Adaptations policy attached as Appendix A, subject to further consultation with members of the Tenant Participation Group, and gives permission to employ an in-house Occupational Therapist as set out in the scoping document Appendix B

### **Reasons for Recommendations**

5. The new Care Act 2014 focusses on integrated services where housing plays a key role in promoting health and wellbeing in the community.
6. The report has drawn on feedback from residents and staff about the existing policy and how it could be improved. The dissatisfaction expressed has mainly focussed on not being able to meet the expectations of residents following an OT assessment. It has also drawn on historical finance and demand data to assess the positioning of the budget.
7. Significantly the report has drawn on tenants' experience of having to wait 18 weeks to be assessed. This is a consistent waiting time which results in prolonged hardship for disabled residents struggling to cope in their home.

### **Background**

8. The Aids and Adaptations policy required to be reviewed as the policy dated before April 2012 when the HRA Refinancing came into place resulting in an increase in potential capital and revenue expenditure.

9. Prior to April 2012 the budget had been reduced and the policy reflected this in that it focussed on the prescriptive rather than taking a holistic approach to residents' accommodation needs.
10. Since April 2012 there has been an increase in demand and subsequently expenditure but that can only be evidenced since 2013/14. It is anticipated that there will be a similar demand this financial year, but even if this level of demand is maintained, it is likely that the capital budget will continue to be potentially underspent by £150k annually.
11. As many existing adaptations are old and in some cases not fit for purpose any underspend could be easily utilised by updating and replacement of equipment.
12. Within the housing stock there are existing adapted properties but there is not the resource to take a sustained proactive approach to matching applicants to properties.
13. When residents seek help in maintaining their independence and require adaptations to their current home they have, with the exception of people suffering from an accident, reached crisis point. Unfortunately residents then have to wait 18 weeks for an assessment from an NHS Occupational Therapist (NHS OT).
14. The expectation has been that following an assessment, aids and adaptations will be installed. The Council has taken the stance to resist fitting aids and adaptations that are unsuitable for the property such as level access showers in upstairs bathrooms in family sized accommodation. Residents have been offered the option to move to more suitable accommodation, however after an assessment good practice research suggests that people are less likely to consider moving if they can have aids and adaptations installed to enable them to carry on living in their existing home. Resisting the installation of adaptations has not resulted in many people moving as their expectation has been set by the assessment. By not meeting expectations tenants are understandably upset by this. There was initial criticism from the NHS OT service on the Council's position although they understood the reasons for taking this approach. Some agencies have been supportive of the stance.

### **Considerations**

15. The revised policy offers a holistic accommodation assessment whereby the best solution is sought for the resident at that time and for the future. Such an approach could involve an increase in transfers and associated void costs. However, as an example, it may cost £1k to move someone and complete minor adaptations in their new home whereas a level access shower in their existing accommodation will cost a minimum of £4k.
16. The Council must comply with the Equalities Act 2011 to ensure that tenants are not offered a lesser service than others. By employing an OT directly the Council would be seeking to reduce the waiting time for an initial assessment down to two weeks.
17. By employing an Occupational Therapist directly could result in criticism if we do not ensure that a directly employed person has adequate specialist supervision and appropriate opportunities for continuous professional development (CPD). In order to meet this requirement there is an opportunity to contract with an independent service from the health field that will provide that service. There is an independent service existing in Cambridge.

18. As the existing contact centre for Cambridge Community Services (NHS) takes calls for many forms of assistance and provides a triage service it is proposed that this continues and they sign post tenants to the Council for assessment.
19. As employing an OT directly will involve expense, it is a service that could provide support to the disabled facilities grants function of the Council and possibly be sold to other organisations.

### **Options**

20. The Housing Portfolio Holder is requested to consider the revised Aids & Adaptations Policy at Appendix A and to suggest changes or additions where required, subject to further consultation with members of the Tenant Participation Group. To also approve the direct recruitment of an Occupational Therapist for the reasons set out above and in the scoping document Appendix B.
21. There is an option to contract with the services of an Independent Occupational Therapist rather than employ an OT directly however this would potentially hamper the scope and the opportunity for growth that a direct post affords.
22. The option to do nothing in terms of the Occupational Therapist service would mean that we could not improve our service to tenants in terms of reducing the time taken for an assessment or provide a more holistic approach, as this would continue to be outside of our control.

### **Implications**

#### ***Financial***

23. The service is financed wholly through the HRA however there is a cost to employing an OT and contracting the support services of an independent OT. As the role would solely cover tenant and housing application assessments there would be no cost to the General Fund.
24. There is a cost saving opportunity by ;
  - a) matching applicants to properties which saves removing expensive adaptations
  - b) moving tenants to a suitable property could save on the installation of expensive adaptations.
  - c) Options for future income generation to sell the services of an in-house Occupational Therapist.

#### ***Legal***

25. Not applicable

#### ***Staffing***

26. There would be the addition of a member of staff to the establishment with specialist experience and qualifications.

#### ***Risk Management***

27. There is a recognised risk in employing from a profession outside of the Council's usual activity. The risk of not maintaining adequate supervision or CPD is mitigated by contracting an Independent OT service

***Equality and Diversity***

28. An EIA has been completed showing a positive impact on disabled people.

**Consultation responses (including from the Youth Council)**

29. Members of the Tenants Participation Group will be consulted on the Aids and Adaptations Policy at their next TPG meeting.

**Effect on Strategic Aims**

**Aim 1 - Wellbeing**

30. Ensure that South Cambridgeshire continues to offer outstanding quality of life for our residents.

**Background Papers**

Appendix A – Aids & Adaptations Policy

Appendix B – In-house Occupational Therapy Service

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