

APPENDIX 2

Summary of Improvements: Major Adaptations 2017 to 2022

2017:

New Disabled Facilities Grant (DFG) Policy Implemented – the absence of a written policy on the implementation of DFG's was recognised as a weakness and meant we were unable to make use of The Regulatory Reform Order (RRO) 2002, which provided Local Authorities with greater flexibility in the delivery of the DFG. In 2008 the government made a number of changes to the way DFG was administered and the ways it could be used, including the relaxation and removal of the tight ring-fence allowing DFG monies to be used more flexibly and as part of wider strategic projects and reduce the bureaucracy in the grants administration.

The Regulatory Reform Act 2012(RRO) gave Local Authorities greater flexibility to use the grant and removed ring fencing restrictions. This allowed the council to develop a DFG policy which improved access for residents and enabled us to work in a more flexible way.

We are one of only a few councils making use of this reform and have provided valuable insight to DFG Foundations and Central Government for them to consider in the recent DFG review.

The changes we were able to make following the implementation of the policy were:

- Removed the financial means testing for all applicants
- Removed the mandatory grant ceiling, which allowed us to provide adaptations that met the assessed level of need without grant restriction, therefore removing the need for people to pay the difference
- Used the grant funding to facilitate and meet *Better Care Fund* outcomes around prevention, hospital discharge and equipment provision
- Used the grant to make properties safe and appropriate for residents with complex behavioural need
- Utilised the money to pay for essential services such as OT assessment

Contractor framework implementation –we introduced a Contractors Framework with Procurement and this reduced the completion time for adaptations from 24 months to 15 months by September 2020 through a more efficient procurement processes.

2018:

Significant waiting list for OT assessments – this issue required additional resources to clear the backlog and we procured an external OT agency to undertake assessments on our behalf. At start of 2018 over 700 people were waiting for assessment and this has reduced to 44 currently. There are no outstanding paediatric assessments and those cases waiting assessment are rated low risk.

OT assessment to commencement of works – a review of this process was undertaken and we identified that this was a point in the process that was crucial in terms of ensuring that the needs identified through the OT assessment were

understood by the resident before works began and a surveyor was commissioned to make an initial assessment of works.

2019:

Mosaic workflow steps –a review of how the end to end process was undertaken and several areas were identified where new workflow steps would improve the process and enable improved recording, tracking and monitoring. Work in this areas is still ongoing and is included within current and planned service improvement work. Progress in this area has been impacted by Covid 19 pandemic and reduced capacity within Mosaic Support Team to implement the required changes within the system.

New process, OT assessment to commencement of work – following the review of this process in 2018, a new process was implemented to improve handover from initial assessment to surveyor. This included standardised OT specifications, defining roles and responsibilities of the OT and surveyor, removing unnecessary work steps in Mosaic to improve flow

Performance report - a new performance report was introduced in autumn 2019 and shared with the relevant teams. This is discussed monthly within the service performance call over and reported into Performance Management Team by exception.

2020:

Dynamic purchasing system (DPS) –the end of the Contractors Framework meant the process had to be reviewed. In consultation with Procurement we moved to DPS to improve contractor procurement process, increase capacity, streamline approval process and invoice payment

COVID-19 and Lockdown – the implementation of social distancing requirements from March, meant that no adaptations were undertaken between March and August and this had a significant impact, compounding existing delays and creating a backlog of cases. Services resumed, on a limited basis, with use of PPE, where clients were willing for this to happen. However, many clients have indicated that they wish to postpone work.

Resumption of service improvement work – in autumn 2020 service improvement planning resumed and a schedule was put together and agreed

2021:

Review of all outstanding cases – the service undertook a review of all the cases open for significant period and agreed focused action and identified cases where there has been significant delays or where common themes from complaints have been identified

Assessment and Surveying Teams – reviewed use of platforms and mechanisms, including Perform Plus and KPI, to ensure robust enough

Discussion at Service Improvement Departmental Team Meeting (DMT) on progress and to collectively work through any areas of concern – this forum is used to problem solve and review the impact of agreed service improvement focus areas. Progress report to be presented by Head of Service.

Mechanism to trigger review of delayed cases - established mechanism to flag cases where an assessment has been made and approaching 6 month point and to trigger plan where this is the case. Also agreed a new process to ensure application forms are returned in a timely manner and if not we close the application until contact from residents/ family.

Benchmarking exercise – practice in neighbouring/comparable Local Authorities undertaken by Team Manager

2022:

Communication with residents:

February:

Documentation/new communication/sign off documents - a review will be undertaken of all documentation and standard communication materials, to provide greater clarity on process and transparency for all parties. This will be designed and brought to Service Improvement DMT for sign off.

Point of contact: The service will ensure going forward that all cases requiring a MA will have a named point of contact throughout their journey i.e. allocated OT or an allocated surveyor.

Mosaic and business reports – new workflow steps to be embedded, which will enable business reports to be run, to provide a live overview of the current status of any MA.

June:

Measuring impact of service improvement work – Head of Service to undertake mini review of impact of service improvement work.

Identification by HoS and Team Managers of further improvement measures – depending on the outcome of the review, further measures, adjustments to be identified and put in place.