Adults Health and Scrutiny Panel

Scrutiny Panel 15/9/22 : residents attended to explain their personal experience of requesting equipment or adaptations to their home. This provided the Adaptations Service with valuable insight and information.

Most of the concerns raised by residents are about delays and poor communication.

As a direct result of this feedback a number of changes have already been made and more changes are planned with the aim to improve the residents experience and journey through the process.

These slides will outline what has changed since September and next steps.



Actions since September Scrutiny

Interim Head of Service appointed with a focus on improvement and culture change



Standard letters developed and sent to service users at each stage of the process (includes timescales and contact information)



Everyone on the waiting list (as of October 22) personally contacted .



Delays reduced through additional surveying and assessment capacity

Numbers of people waiting for an adaptation to be completed reduced from 812 (August 2022) to 467 (January 2023)



More focused listening and learning from resident feedback. Culture change identified



What residents can expect from the service since last Scrutiny

To be provided with the officers contact details after each visit.

A copy of their support plan (this outlines the persons views and wishes, their needs and how these will be met by equipment, care or adaptations)

A copy of the adaptation specification which has more detail about the adaptation (this is produced with the service user and family if appropriate)

Written communication at each stage of the process which explains progress and next steps and includes contact details.

A phone call every 4-6 weeks to check in with the person and report on timescales.

To be contacted when something happens on their adaptations journey (eg: the adaptations are put out to tender) or if there the adaptation isn't technically feasible .



1) When the initial assessment is made by the Occupational Therapist, the resident/family requiring the aid/adaptation should remain part of the process around the procurement of the aid/adaptation and be actively involved in any changes or updates to the agreed provision

This should now be taking place. (see actions on slide 3)

Officers have been instructed to keep people informed about the process and be consulted on changes. People have the option of arranging adaptations themselves ; new guidance has been written so people are clear on how to do this. However- there may be disagreements about how needs can be met or how to adapt a persons property. We will try our best to work with the service user to resolve these issues or clearly explain why a certain adaptation or piece of equipment can't be provided. Sometimes this is related to professional judgement, risk or best use of public money.



2) An advocate should be offered by the Council (rather than only when specifically requested) to help with the initial discussion and remain part of the process to provide support to the resident where required. An advocate should also be made available where required when a resident was attending a meeting of an assessment Panel.

The Councils advocacy contract with VoiceAbility is funded to support unbefriended people being assessed under the Care Act. (which doesn't include assessments under DFG legislation) We are in the process of discussions with Disability Action Haringey and Pohwer to arrange advocacy for people being assessed under DFG legislation.

In addition family members are invited to be involved in decisions with the consent of the service user.



3) Key communications/decisions should be confirmed in writing by email/letter so that the resident/family has a record of this.

The following standard letters have been introduced :

- Advice to service user after OT assessment (equipment , adaptations, advice given and contact details)
- Non agency information pack

People also receive a support plan and an adaptation specification

A copy of the plans/ drawings are now available on request



- 4) There should be a clear explanation for any delays and the resident/family given the opportunity to discuss any changes.
- 5) A named person and contact details should be provided to the resident/family and kept up to date during the process

Everyone on the waiting list was contacted in October . From March everyone will be contacted every 6 weeks ensure the adaptations are on track, problem solve, review risk and escalate any issues.

Changes should not be made without the persons full agreement.

The service is still working through a long backlog of delays(12 months)



6) Suggestions made by the resident/family should be recorded on the case file and treated in the same way as those from professional staff as the resident/family are experts in their own case and situation.

Family / resident views recorded on a persons Support Plan and sent to the service user. Officers records other any conversations and views on case records.

The final decision about what can be provided under the DFG legislation is made by the Council.



7) A record should be kept by the Council of all delays and the timescales agreed with the resident/family. Where the agreed timescales are exceeded, there should be an alert triggered so that the resident/family can be appropriately updated on progress with expectations set and urgent issues to be prioritised.

A new recording system is being introduced in July for all adult Social Services. This has been designed with greater reporting ability which Managers will use to report and feedback on timescales and delays.

It is hoped that regular contact with the resident will address urgent issues and be transparent about timescales.



The Commissioning team should look at widening provider choices for aids and adaptations to provide alternative options when delays or other problems occur.

Standard Equipment is provided through a call off contract which includes the London Consortium of 20 Councils. This provides best value for money but does not give residents a choice of equipment , unless they wish to self purchase. Working out how we can offer a choice of equipment will be a longer piece of work and involve resident consultation.

If delays occur the service can and should go outside of agreed processes, if the risk to the person without the equipment is high.

Occupational Therapists should remain in contact with the resident and proactively manage the order and provision of equipment.



Next steps

Customer	Consult	Communicate	Challenge	Culture	Complaints
Produce resident journey to focus on a persons experience rather than the process (workshop)	Engage with people who use the service to improve the resident journey (workshop)	Continue to prioritize communication and improved service to residents (case audits and quality checks)	Challenge and change inefficiencies in the system/process and remove these where possible	Move to a person centered culture and challenge when LBH customer standards are not met . Be accessible and approachable.	Deep dive into complaints to change practice, culture and understand what went wrong . Change practice or systems to improve performance.



Next steps

Recruit	Review	Reduce	Timescales	Information	Advocacy
Recruit to OT and Surveyor vacancies . (funds currently being used to purchase additional assessments and surveyors)	Review staffing needs against demand and agree realistic plan for meeting demand .	Reduce delays by using data to track timescales, regular reporting and intelligence and whole systems approach.	Agree timescales and a prioritization method in line with DFG Govt guidance	More detailed information on website and to residents at the start of the journey.	Commission formal advocacy for people requestion adaptations





