

**Report for:** Adults and Health Scrutiny Panel – 31 March 2025

**Title:** Update – Aids & Adaptations and Disabled Facilities Grant (DFG)

**Report authorised by:** Jo Baty, Interim Service Director – Adult Social Services

**Lead Officer:** Amanda Edwards – Service Manager, OT  
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Services

**Ward(s) affected:** All

**Report for Key / Non-Key Decision:** Non-Key Decision

## **1. Describe the issue under consideration**

1.1. This report updates the Adults and Health Scrutiny Panel on the Council's response to its previous eight recommendation areas concerning Aids & Adaptations and the Disabled Facilities Grant (DFG). It also provides a general overview of further improvements to the service that have been implemented or are planned, aiming to enhance the timeliness of providing equipment and adaptations, and to improve communication with residents.

## **2. Background information**

2.1. The Panel first received a report from the Head of Integrated Care on this issue in September 2022. During this meeting, several residents shared details of their experience of the Occupational Therapy (OT) Aids and Adaptations service. Some residents reported difficulties in getting aids and adaptations installed in their homes. Concerns were raised about communications with residents and delays to work being completed.

2.2. The Panel subsequently made a series of recommendations for change.

2.3. In March 2023, an update report on the progress made towards these recommendations was presented to the panel. It was reported that significant additional work had been carried out to increase capacity, reduce delays and improve communications.

2.4. In February 2024, the Panel received another update, which included representations from members of the community. While progress had been made, it was acknowledged that further work was needed to improve waiting times and communication with residents who had an assessed and had eligible need for an OT Aid and / or Adaptation.

## **3. Overview of changes to the Aids and Adaptations Service during 2024/25**

3.1. In March 2024, a project board was established to oversee significant improvements in the Council's service delivery related to Aids & Adaptations provided by both Housing Revenue Account and Disabled Facilities Grant (DFG) funding streams.

The primary goal is to enhance the timeliness of providing equipment and adaptations, and to improve communication with residents.

- 3.2. The Board reviews initiatives across four main workstreams: Residents, Workforce, Foundations & Information and Finance, to ensure that all elements that contribute to a positive Resident journey through the OT and Adaptations teams are within the improvement journey.
- 3.3. Benchmarking with other Local Authorities in March and April 2024 identified some models of best practice due to their low Adaptations waiting list. We are adopting two key elements of their approach. One is creating a shortlist of adaptations suppliers with whom surveyors will work regularly. The second change is around better and more consistent contact with residents throughout the process.
- 3.4. One of the key initiatives has been creating resilience and support within the OT workforce. This has included the creation of an OT Duty Team, which was established to triage OT cases and reduce inappropriate referrals to the OT Team.
- 3.5. The OT Duty team assess all OT contacts to determine whether a referral to the OT Team is necessary or if needs can be met through low-level equipment or other smaller interventions. This approach has significantly improved the speed at which residents are seen and has reduced the number of referrals to the main OT team.
- 3.6. Occupational Therapy Assistants (OTAs) have been employed to contact residents on the waiting list under our 4-6 week contact pathway, ensuring they are informed about their status and addressing any short-term equipment needs. It has enabled the OT team to reassess priority of residents on the waiting list as well. Despite considerable pressure on resourcing this process, residents continue to be contacted, and everyone on the waiting list from on or prior to September 2024 has been contacted.
- 3.7. In October 2024, we secured resource for two OT agencies to work on the council's behalf to help us clear our OT waiting list. At the time of writing, our OT waiting list has reduced from a peak of 1,105 cases to 436. We will be working with our Procurement colleagues to secure a medium-term resourcing solution to keep our waiting list low, whilst we examine the extent to which the OT Duty Team might provide the support needed to manage our current and future workload without an external resource in addition.
- 3.8. We continue to face considerable recruitment needs across all OT teams, due to a national shortage of OTs. This does have an operational impact, but the Team Managers work hard to ensure that residents are contacted regularly and that priority cases are dealt with by either the external OT agencies or our own OT teams.
- 3.9. Advice and Assessment Officers (AAOs) within the Adaptations Team, have been actively contacting residents on the Adaptations Waiting List to keep them updated and reprioritise cases as needed, again under our 4-6 week contact pathway. Additionally, methods to manage complex adaptations have been developed, including regular officer meetings. Where needed, client specific action plans and regular meetings with residents and their family members are also provided.

- 3.10. The Adaptation Waiting List peaked at 220 in March 2024, and by October was down to 30 cases. Though it has increased to 153 at the time of writing, this is due to the use of the external OT agencies clearing the backlog of OT assessments. The Adaptations team has been fully resourced with 6 Surveyors and a Team Manager, and they continue to work at pace through cases.
- 3.11. A resident feedback form has been reinstated to gather information about service satisfaction, and complaints and compliments monitoring has been embedded to ensure continuous improvement. Resident feedback about adaptations indicates a high level of satisfaction with Adaptations. Complaints generally are about delays, but we expect that as other initiatives are embedded, there will be a decrease in complaints of this type.
- 3.12. A performance and management information dashboard has been implemented to help managers monitor progress and the impact of the OT Duty and external OT agency teams.
- 3.13. We are finalising an OT Aids and Adaptations Policy, that reflects our improved processes and practices. This policy will clearly outline what residents can expect from the service. The draft of the Policy will be shared with internal and external stakeholders with an aim to have it completed and through our governance processes by the end of June 2025.
- 3.14. The procurement team has been working with OT to onboard and recommission Adaptations suppliers to streamline the commissioning process for contractors and enhance contract management. This change aims to reduce the time the Adaptations process takes, by limiting the number of suppliers with whom we work in this area. The procurement process will also ensure that specialist equipment can be procured directly with specialist suppliers.
- 3.15. By building relationships with a select group of providers experienced in working with vulnerable residents, we can ensure better and more efficient support for those with additional needs. This forms part of our direct learning from the benchmarking work undertaken.

#### **4. Progress to date against Scrutiny's recommendations**

- 4.1. This section summarises the progress made on the recommendations for change proposed by the Panel in 2022.
- 4.2. **Recommendation: *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.***
- 4.2.1. **Progress:** Through the Support Planning process, residents and their families are kept informed of what equipment can be procured to meet the resident's eligible needs, which includes discussions about what equipment options there may be in each case. Complex cases are now managed through weekly case discussions and/or monthly supervisions with the involved staff members.

4.2.2. **Next Steps:** Ensure that if families want more details about the equipment/adaptation and its installation that the pilot of implementing a workplan update process is implemented more widely across the service.

4.3. **Recommendation:** *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.*

4.3.1. **Progress:** The Council has a statutory duty to offer advocacy to individuals who lack mental capacity as defined under the Mental Capacity Act 2005 AND have no one who can advocate on their behalf; and / or who are within a safeguarding process and/or who are undergoing a change of accommodation. We continue to fund advocacy services for these statutory requirements. We actively signpost residents to advocacy services whenever they are eligible and wish to access them.

4.3.2. **Next Steps:** Signpost residents to advocacy services as part of our initial contact information we share with residents, so they can buy-in this service themselves should they wish.

4.4. **Recommendation:** *Key communications/decisions should be confirmed in writing by email/letter so that the resident/family has a record of them.*

4.4.1. **Progress:** Residents receive support plans from OTs which clearly outline their eligible needs and how they will be met. We have made significant progress in supporting families with more complex adaptations by offering monthly meetings (where required) and developing a workplan that outlines when different aspects of the build will take place and the estimated dates of completion. The plan is updated and sent to families weekly, or at least monthly, depending on their preferences.

4.4.2. **Next Steps:** Ensure our auditing processes review communications at key stages of the process, and that we monitor staff performance regularly.

4.5. **Recommendation:** *There should be a clear explanation for any delays and the resident/family given the opportunity to discuss any changes.*

4.5.1. **Progress:** Occupational Therapy Assistants (OTA's) and Advice and Assessment Officers (AAO's) are working through contacting every resident on the OT and Adaptations Waiting Lists respectively to check in with residents to determine if any needs have changed, and if any interim equipment or support can be offered. Originally, the OT Waiting list comprised 815 residents when this process started. It is now around the 430 mark, but this includes residents who have been added to the list since the process started.

4.5.2. The waiting list for Adaptations dropped to around 35 in October, and while it has risen to just over 150 (due to the work taking place to reduce the OT waiting list), it continues to keep at-pace. The AAOs continue communication with residents on the waiting list to ensure any changes to circumstances that might change the urgency for the adaptation are monitored.

4.5.3. **Next Steps:** Continue to allocate cases to the external OT agencies to continue to reduce the waiting list and maintain recruitment of OTAs and

OTs where financially possible. AAOs continue to maintain regular contact with residents on the Adaptations waiting list.

**4.6. Recommendation: *A named person and contact details should be provided to the resident/family and kept up to date during the process.***

4.6.1. **Progress:** Due to the movement between teams during the Resident journey in the OT process, it is not possible to assign a named person throughout the entire process as inevitably, the person will change as a resident moves from e.g. an allocated OT to a Surveyor. However, residents can re-contact the OTAs and AAOs to discuss their case if needed following the initial contacts from the 4-6 telephone call pathway.

4.6.2. **Next Steps:** Ensure that all information shared with residents, especially in introductory conversations with Adult Social Care, give clear guidance on contact information for residents, and make this as personalised as possible.

**4.7. Recommendation: *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.***

4.7.1. **Progress:** The suggestions made by the resident and family are recorded on the case file and captured within the assessments, support plan and housing needs plans throughout the process.

4.7.2. **Next Steps:** Use our auditing processes to ensure this is enshrined in day-to-day practice.

**4.8. Recommendation: *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.***

4.8.1. **Progress:** The Council's case management system ("LAS") has been improved to help us track the movement of cases between teams along the entire OT Aids & Adaptations process. This allows us to see when progress is made on a case and how long it is with any given member of staff. In addition, staff members are now informing the residents at each step of their adaptations on a 4–6-week basis. Managers monitor case allocations and progress within each individual case with their practitioners via team meetings and 1:1 supervision. This ensures that any delays are understood and can then be communicated with the resident effectively.

4.8.2. **Next Steps:** Currently there is no function on LAS to alert managers to delays in process. However, this has been discussed with the Performance team who are in discussion with the LAS developers to see if this functionality can be added. In the meantime, case timeframes and progress are monitored by our team managers in supervisions, team meetings and actioned as required.

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



- 4.9.1. **Progress:** A purchasing solution for Specialist Equipment and Adaptation provisions is being procured via the Dynamic Purchasing System (DPS) in the coming months, which will provide a choice of supplier for residents via the OT and Adaptations Services. We remain engaged in discussions with our NRS Consortium colleagues for the purchase of mainstream equipment. Our contract monitoring information and qualitative information suggests that the supplier's performance is improving.
- 4.9.2. **Next Steps:** We continue to work with our NRS Consortium colleagues to manage the contract and improve delivery to Haringey residents. This includes attendance and feedback via both Operational and Director-level Consortium groups. Contract monitoring indicates some opportunities for further development, and group members remain open to all options we can use within the contract and going forwards.

## **5. Recommendations**

- 5.1. The Committee to note the contents of this report, endorse our approach and help us consider how we can sustain and build on improvements to our support for residents, given the financial climate within which we work.

## **6. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)**

### **6.1. Finance and Procurement**

- 6.1.1. This is an update report for noting and as such there are no direct financial implications associated with this report.

### **6.2. Legal**

- 6.2.1. This is an update report for noting and as such there are no recommendations for action.

### **6.3. Equality**

- 6.3.1. This is an update report for noting and as such there are no recommendations for action.

## **7. Use of Appendices**

N/A