



*Scrutiny Review of Adaptations for Disabled
People*

Report
January 2010

CONTENTS

Contents	Page	Paragraph
Purpose of the report	3	1.0
Structure of the report	3	2.0
Introduction	3 - 4	3.0
Methodology	4	4.0
Evidence and Analysis with findings/conclusions and recommendations	4 - 15	5.0
Overall Conclusion	15	6.0

Annexes	Number
Topic brief	1
Methodology	2
IT systems currently in use	3
Action Plan	4

1.0 Purpose of the Report

The purpose of the report, as outlined in the initial topic brief (at *Annex 1*) is to:

- ◆ Gain an understanding of the complexities of the financial processes/issues around adaptations;
- ◆ Consider national best practice and research in terms of self-assessment, personalisation and the use of modular buildings;
- ◆ Raise awareness generally of the service and the value of adaptations for service-users (including finance and independence);
- ◆ Examine the effectiveness of specifications/plans to ascertain if these could be simplified; and
- ◆ Consider resources available in terms of IT systems to ensure adequate monitoring of the DFG.

2.0 Structure of the Report

This report is structured with the introduction, a brief summary of the methodology followed by evidence, analysis with findings/conclusions and recommendations. The annexes include the topic brief, methodology detail, IT systems and Action Plan.

3.0 Introduction

3.1 Reason the report was commissioned

Historically a high level of complaints had been received regarding the waiting time for adaptations for service-users, the costs/financial output was identified as very high and the importance of adaptations in the independence of disabled people staying longer in their own homes was highlighted.

Over the last two years, major changes have been made internally to the structure and processes within the adaptations service. In April 2008 the Independent Living Team, Grants Team and Home Improvement Agency integrated becoming the new HHILS Team (Halton Home Improvement and Independent Living Service) based at John Briggs House in Widnes.

There are different routes for adaptations, particularly in relation to the tenure and whether the property is owner-occupied/privately rented or it is owned by a Registered Social Landlord.

3.2 Policy and Performance Boards

This report was commissioned as a scrutiny working group for the Healthy Halton Policy and Performance Board.

3.3 Membership of the Topic Team

Membership of the Topic Team included:

Members	Officers
Cllr Ellen Cargill Cllr Joan Lowe Cllr Dave Austin Cllr Bob Gilligan	Ruth McDonogh – Divisional Manager for Halton Home Improvement and Independent Living Service and Chairperson Phil Brown – Principal Housing Inspector Graham Foxley – Budget Monitoring Officer Emma Mookerji – Service Development Officer HR

4.0 Methodology Summary

This scrutiny review was conducted through a number of means:

- Bi-monthly meetings of the scrutiny review topic group;
- Presentations by various key members of staff (detail of the presentations can be found in *Annex 2*);
- Regular financial activity updates regarding each aspect of the Disabled Facilities Grant at each meeting from the Budget Monitoring Officer;
- Provision of information;
- Service-user consultation;
- Field visit to a modular building; and
- Meeting with members of the HHILS team.

5.0 Evidence (summary of evidence gathered) and Analysis with findings/conclusions

5.1 Financial Processes

The most complex area of the major adaptations process is the financial aspect particularly in the administration of the Disabled Facilities Grants (DFGs). To enable members of the topic group to

gain a good grasp of the financial processes involved, a detailed presentation during one of the first topic group meetings was given by the Principal Housing Inspector and the Budget Monitoring Officer. At every meeting the Budget Monitoring Officer also gave an update summarising the current financial position.

5.1.1 Financial Allocations

The table below details the allocation of funds towards the various aspects of the adaptations service as well as the staff costs for the team as a whole.

Budget for staff costs for the whole team	£ 1,182,552
Allocations for Capital are:	£
Disabled Facilities Grant	686,000
RSL Adaptations (Joint Funding)	650,000
Stair lifts	120,000
Modular Buildings	62,000
Total for Capital	1,518,000

5.1.2 Savings brought about by the use of adaptations in properties

In the Office for Disability Issues document *Better Outcomes, Lower Costs – Implications for health and social care budgets of investment in housing adaptations, improvements and equipment: a review of the evidence by Frances Heywood and Lynn Turner* a study was conducted and found that the provision of housing adaptations and equipment for disabled people produce savings to health and social care budgets in four major ways. These are summarised below:

- (i) Saving by reducing or removing completely an existing outlay
 - a) Saving the cost of residential care – For a seriously disabled wheelchair user, the cost of residential care is approximately £700-£800 a week, or £400,000 in ten years. The provision of adaptation and equipment that enables someone to move out of a residential placement produces savings, normally within the first year. Providing adaptations to enable a person to remain in the community rather than going into residential care will save £26,000 per person per year. The average cost of an adaptation would be £6,000 to provide a level access shower and a stair lift, for example.
 - b) Reducing the cost of home care – An hour's home care per day costs in the region of £5,000 a year.

- (ii) Saving through prevention of an outlay that would otherwise have been incurred
Savings under this heading include the prevention of accidents with their associated costs, prevention of admission to hospital or to residential care and prevention of the need for other medical treatments, for example:
- a) Prevention of hip-fractures – Falls leading to hip fracture are a major problem internationally, but in the UK in 2000 they cost £726 million. Housing adaptations reduce the number of falls. The average cost to the State of a fractured hip is £28,665.
 - b) Prevention of other health costs – the provision of adaptations and equipment can save money by speeding hospital discharge, as well as preventing admission to hospital by preventing accident and illness.
 - c) Prevention of health care costs for carers – For parent care-givers without adaptations and equipment there is a 90% chance of musculoskeletal damage, falls leading to hospitalisation, and stress caused through inadequate space. When suitable adaptation/equipment is supplied there is improvement to physical and mental health of the carers.
 - d) Prevention of admission to residential care – Adaptations give support to carers. By preventing back injuries and reducing stress, they lessen the costs to the health service. Carers in turn, if they are well supported, will save the costs of residential care.
- (iii) Saving through prevention of waste
Waste is money spent with no useful outcome. There is evidence that much of the waste in regard to adaptations comes from under-funding that causes delay or the supply of inadequate solutions that are ineffective or psychologically unacceptable.
- (iv) Saving through achieving better outcomes for the same expenditure
- a) Adaptations produce improved quality of life for 90 per cent of recipients and also improve the quality of life of carers and of other family members.
 - b) A disabled person may have a carer come every day to lift them on and off a commode and help them to wash, but for the same amount of money they would normally choose the solution that offers more dignity and autonomy.
 - c) The average cost of a disabled facilities grant (£6,000) pays for a stair lift and level-access shower, and these items will last at least 5 years. The same expenditure would be enough to purchase the average home care

- package (6.5 hours a week) for just one year and three months.
- d) There is substantial evidence that for the average older applicant, an adaptation package will pay for itself within the life-expectancy of the person concerned and will produce better value for money in terms of improved outcomes for the applicant.

The information provided within section 5.1.2 has been taken from "Better Outcomes, Lower Costs" Executive Summary by Frances Heywood and Lynn Turner.

5.1.3 Financial Detail

The detailed presentation on 25th August 2009 covered Major and Minor Adaptations in the Registered Social Landlord (RSL) stock within the borough, private sector – people who own their own homes and those who rent from private landlords, Housing Grant expenditure, joint arrangements with some RSLs on a 50/50 funded basis, spend on 50/50 agreements and a detailed spreadsheet for the capital programme. Throughout this presentation many questions were asked to clarify the financial processes. It was a very thorough session focussing on the detail of the financial processes.

Although close relationships have now been established with the RSLs through both formal meetings and informal connections, one of the issues raised during this presentation was that process issues remain and careful and regular monitoring of the arrangements is essential. Some RSLs were originally slow to send in invoices and there were some delays in Community Care Workers and Occupational Therapists agreeing schemes. These teething difficulties have been managed and processes amended to ensure greater efficiency.

5.1.4 Entitlements, Application Process and Financial Eligibility of Service-User

At the meeting on 6th August 2009 the Project Manager and Housing Renewal Support Officer gave presentations on Entitlements/How people apply for grants and the Application Process and the Financial Eligibility of Service-Users (Means Test).

Again, this is another complex area of the DFG process. The background to the Halton Home Improvement Agency was described with an explanation of the team members and the services offered by the team. The mandatory nature of the grants was discussed with two main pieces of legislation covering them, Housing Grants, Construction and Regeneration Act 1996, with additional guidance in the Department of Health's publication Delivering Housing Adaptation for Disabled

People (A Good Practice Guide) issued in 2004. The types of work that could be considered as DFG eligible were highlighted. It was also confirmed that there is not a waiting list for assessments. A folder was circulated around the group showing photos of before and after situations for various projects that have been completed and some case studies were discussed. Sometimes the proposed works have to be altered because for instance from initial referral by the assessment worker the health of the service-user may have deteriorated so the scheme needs to be changed accordingly. A different scenario can occur because the adaptation process is now much quicker than it used to be so that service-users with degenerative conditions sometimes withdraw from the process as they find it difficult to accept that in future they may need significant adaptations.

The presentation on the application process and financial eligibility of the service-user described how all applicants must go through the financial assessment (except where the DFG is for a disabled child or young person). The various financial forms and processes involved were described at length with examples of the forms being circulated around the group. The financial assessments take into account all income, savings and investments, but not outgoings, e.g. mortgage. The main DFG application form is produced by the Government and can seem quite daunting for applicants to complete, so the Housing Renewal Support Officer offers assistance by going out to visit the service-user at their home. Supporting evidence in the form of statements and documents is required with the form, and again, this can cause delays with the application process. A lot of discussion took place around this area with questions and clarification on the processes involved.

Conclusion

At the end of the topic group meetings, all members felt they had a good understanding of the financial processes involved with major adaptations and DFGs, in particular, the complex nature of some of the financial areas and methods used within the processes. The Disabled Facilities Grant is difficult to comprehend without the background and understanding of the financial procedures and processes involved, as well as the application process and eligibility. It was also highlighted the financial savings to other organisations, in particular health services, with the implementation of adaptations.

Recommendations:

- (i) Continue to closely monitor the financial processes that are in place between the Council and the RSLs.**
- (ii) Consider arranging a further Members Briefing Session focussing on some of the financial complexities of the DFG and including the application/eligibility procedures.**
- (iii) Consider developing a Business Plan for a financial contribution from Health towards adaptations to set against the savings achieved for health as described in 5.1.2.**

5.2 Personalisation and the use of Modular Buildings

5.2.1 Personalisation

Some research was undertaken via the Internet into the links between the DFG process and personalisation/self-assessment. During October 2008 a report by the Individual Budgets Evaluations Network (IBSEN) "Evaluation of the Individual Budgets Pilot Programme" was issued. There was only a small paragraph around DFGs stating *"While it was acknowledged that equipment or adaptations could transform a person's need for personal care, and also reduce social care costs, most Individual Budget (IB) lead officers and lead officers for DFG did not feel that DFG was a suitable or legitimate funding stream to align with IBs. Applications for DFGs required specialist assessments; timescales were not compatible with the IB process; and DFGs involved capital sums, not an income stream to the individual. Most interviewees did not expect individuals would benefit from taking responsibility for managing a DFG (for example, contracting with builders)."*

Despite the difficulties with the current constraints of the present DFG legislation we have already started to move towards the personalisation agenda in working more flexibly to make the process more straightforward and efficient for service users. The provision of stair lifts under the contract agreement is one example of this. Another example is where a family with a disabled child is applying for DFG and so would have no contribution to make. The HHILS team have identified that the most cost effective way to meet the child's needs could be through providing access to the first floor by a vertical lift and modifications to the first floor bathing facilities. The family instead wish to provide a ground floor bathroom and bedroom extension which would also meet the needs but at much higher cost. Consequently we have agreed to offer grant support to the building of the extension to the estimated value of the scheme proposed by HHILS. The government has already started to simplify the DFG process with some changes implemented in 2008 and these changes are also about promoting the more flexible approach that has been adopted by HHILS.

"Shaping the Future of Care Together" A Green Paper sets out a vision for a new care and support system. The Green Paper highlights the challenges faced by the current system and the need for radical reform, to develop a National Care Service that is fair, simple and affordable for everyone.

"Lifetime Homes, Lifetime Neighbourhoods - A National Strategy for Housing in an Ageing Society" by the Communities for Local Government. The ageing of the population will be one of the greatest challenges of the 21st century for housing. This strategy sets out our response to this challenge and plan to create Lifetime Homes in

Lifetime Neighbourhoods. It outlines our plans for making sure that there is enough appropriate housing available in future to relieve the forecasted unsustainable pressures on homes, health and social care services.

5.2.2 Modular Building

Two modular buildings have now been installed in Halton. One being an RSL property in Widnes managed by Halton Housing Trust and the other being in private ownership in Runcorn. The RSL installation was jointly funded with the Council in line with the 50:50 the partnership arrangement but was organised by HHT. The private sector scheme was organised by Property Services with the assistance of consultants Cassidy & Ashton.

On 27th October members of the topic group had the opportunity to take a field visit to observe the Halton Housing Trust modular building being craned into position at the property in Widnes. This was a property requiring an additional bedroom and shower room for a disabled child.

During the meeting on 4th January 2010 the Practice Manager gave a presentation to the topic group on the background to the modular buildings. Research was done into what worked well in other authorities and modular buildings were identified, in particular Salford Council who had been using them successfully for 15 years. The team put forward proposals for the private sector scheme and was successful in gaining funding for a modular building for a family with a disabled son who required an extension to their terraced property in Runcorn. A few people from the team along with representatives from HHT were able to visit the factory of the company that Salford used, at a time when the company was manufacturing a modular building for Salford. The company was then asked to check the Runcorn property to ensure it was viable for a modular building. The installation of modular buildings requires planning permission and building regulation clearance. Legal were also involved. The pod was installed and there was a small issue with the drains not lining up that meant installation was delayed, but this was rectified. The service-user was extremely pleased with the end result and could not fault the staff who had been involved. As this was the first modular building for Halton, feedback was sought from everyone involved in the process, which was extremely positive. The outcome for both of the service users was that they were delighted with the end product and the building work had been less disruptive than a traditional build.

Conclusion

As these were the first two modular buildings to be used for adaptations in conjunction with Halton Borough Council, the success was not fully known until after installation. Members of the group who

attended the actual siting of the second pod confirmed that the process was well managed on the day and went very smoothly. Although building work did take place in both cases, this was less disruptive than a traditional build, which is another positive outcome for the service-users involved. The most significant negative in terms of the use of modular building is the high initial cost of installation at the first location where the cost of the pod and the groundwork are likely to be well in excess of traditional build. The economies only come into effect with the re-use of the module particularly at the third siting when savings are likely to be made.

Throughout the research carried out and with the example case studies given, the link between independent living and the personalisation agenda goes hand-in-hand. It is clear to see that adaptations have a huge role to play in helping people live independently for longer in their own homes.

Recommendations:

- (i) Support the continued use of modular buildings for any other relevant situations that require extensions.***

5.3 Raising Awareness, the value of Adaptations for Service-Users

5.3.4 Raising Awareness

At the initial meeting of the topic group on 23rd June 2009, the Divisional Manager gave a presentation on the background to the service area, the team and the modernisation of the adaptations service. During 2007 it was agreed that the two teams of Independent Living Service and the Home Improvement Agency and Grants Section would be merged to create the Halton Home Improvement and Independent Living Service (HHIILS) and the team would be located in one base at John Briggs House in Widnes. This change involved staff throughout the whole process, expert support, a programme of meetings focussing on different areas of the merger and research into other services. During the meeting on 4th January 2010 members of the topic group had the opportunity to meet with staff from the HHIILS team and have an informal chat about their work.

In modernising the adaptations service, there has been a general update in terms of all policies and procedures that the team work to, in particularly, the review of the Housing Adaptations Policy, and the Procedures and Practice Guidance for the Provision of both Major and Minor Adaptations to the Homes of Disabled People.

Conclusion

The modernisation of the adaptations service has already shown improvements within the delivery of the service, in particular through

streamlined processes and improved communications from being located together and part of one service improved problem-solving and further innovation in the development of the service.

Recommendations:

- (i) Continue ongoing evaluation/review of the adaptations service so that improvements can be continual.**
- (ii) Endorse the review of the Housing Adaptations Policy and related procedural guidance**

5.3.5 The Value of Adaptations to Service-users/Carers

At the meeting on 4th January 2010 a service-user and carer attended to give their perspective and experience of the DFG process. The service-user had experience of two adaptations, a kitchen and a shower, one as a Council Tenant and one through Halton Housing Trust (HHT). Following a stroke the service-user described having communications difficulties, but felt that the builders involved in the adaptation went above and beyond to ensure that they gave him all the information to ensure the works were completed with the least disruption. With both adaptations, the service-user chose to stay in the properties while the building works were carried out, although he was offered the option to go into respite care. He felt less anxious staying there and watching the progress for himself. If any minor issues arose he could deal with them there and then. Members of the topic group asked the service-user and carer various questions regarding the adaptations. The service-user thanked the officer from Halton Borough Council who had been pivotal in the success of his adaptations.

Also during this meeting the Divisional Manager distributed copies of draft service-user feedback forms for members of the group to take away and comment on. The aim of the feedback forms is to gather monitoring information from service-users at various stages of the DFG process. It was highlighted that with the introduction of new feedback forms careful consideration was required around training.

Conclusion

It was clear from the experiences described by the service-user and carer that having a new kitchen and shower fitted had made a considerable difference to their quality of life.

The implementation of service-user feedback forms would give the service valuable information throughout the DFG process so that changes and amendments could be made to continually improve the service offered to the residents of the borough.

Recommendations:

- (i) Support the implementation of the service-user feedback forms at various stages within the DFG process to ensure ongoing improvements.**

- (ii) *Ensure adequate training for staff within the Contact Centre dealing with the feedback forms is in place.***

5.4 Effectiveness of Specifications/Plans

On 25th August 2009 the Project Leader HIA gave a detailed presentation to the topic group on plans and specifications. The presentation covered the detail of these from the initial drawing stage right through to the planning approval stage. A “real” example was used to show exact data such as timescales at various stages. The timescales for Building Regulations is on average six weeks and for planning approval approximately two months. The complex nature of some of the drawings done either manually or using the computer program Autocad was highlighted. The Project Leader also brought along a file containing “before” and “after” photographs of different types of adaptations. This gave a greater understanding to the topic group as to the works involved in the different adaptations, being able to see how a room would alter following the building work.

The Project Leader explained that due to limited resources in the form of technical staff, the Council (through Property Services) has been using Cassidy and Ashton to produce technical drawings. This extra design capacity has helped to increase the number of DFGs to 100.

Conclusion

Having the plans and specifications explained in detail with the differential timescales put this part of the process into context with the other areas. Looking at the before and after photographs made it so much easier to understand the changes rather than just looking at a technical drawing. Knowing that this process is used with service-users, taking them through from start to finish so that they understand the overview of the work involved, the disruption that will take place, but also, the end result. Explaining in this way gives the service-user confidence in what’s going to happen, bringing them along the way so they understand every part of the process.

Having more technical staff in-house would reduce the staffing costs that are currently being used on a regular basis with Cassidy and Ashton, although retaining them as a back up for times of pressure would be advantageous.

Recommendations:

- (i) Continue to work in this way, closely with the service-users so they fully understand what will be involved with any installation of an adaptation.**
- (ii) Proceed with the recruitment of the vacant technical post, so that the consultant designers only need to be used on an ad-hoc basis.**

5.5 Administration and IT Resources

On 25th January 2010 the Team Support Officer for the HHILS team attended to present information regarding the role of the administration team. The broad range of tasks that the admin team carry out was discussed and this highlighted both the variety of tasks and the limited resources that were available. Chasing up contractors was described as a regular and time-consuming task as two quotes are required prior to an order for works being placed. The admin team also takes on board chasing up the backlog from RSLs due to the volume of work some of them are currently dealing with. The Team Support Officer confirmed that having in place the 50/50 funding has speeded up the process with RSLs, although some are still experiencing delays purely due to the volume of work. The admin team have a pro-active role in phoning RSLs to find out exactly where their situation is up to and recording it on a spreadsheet. The team would like to appoint an Adaptations Liaison Officer to take on the role of liaising with RSLs so that the admin staff can concentrate on their own role.

The Team Support Officer circulated examples of various spreadsheets that the admin team maintain and explained that each system used to record information is stand-alone, requiring manual input. As well as recording information, these spreadsheets are used to monitor/measure timescales and milestones so that the team know exactly where all projects are up to. A list of each computer system that is used, along with the different spreadsheets used can be found at *Annex 3*.

There are also forms and letters for every stage in the process, and again, these are completed manually. This is very time consuming, especially as each form requires the same personal information inputting for each person.

Conclusion

It was clear to see from the presentation the sheer volume of tasks that the admin team deal with. Not only that, but the fact that the lack of one computerised system to produce, retain and update the information regarding the whole process has a detrimental effect on the team in terms of time wasted duplicating information on each form/spreadsheet, and having to input data onto so many different systems that are completely stand alone and are not able to communicate with each other. The role of progress chasing was identified as a very important part of the success in moving projects forward, but again, this took away time from the admin team to carry out their own tasks.

Recommendations:

- (i) ***Approve the in-house design of a bespoke IT system that brings together all the current systems therefore considerably cutting down on time and resources of the admin team.***
- (ii) ***Proceed with the recruitment of the Adaptations Liaison Officer post.***

6.0 Overall Conclusion

This scrutiny review has been both a successful and a worthwhile exercise in terms of covering all the outputs and outcomes from the initial topic brief and gaining a thorough knowledge of the whole adaptations service within Halton. All elements of the Disabled Facilities Grant process have been explored and in particular, an in depth examination of the complex financial procedures has taken place.

The recommendations from the scrutiny review have been arranged into an Action Plan at Annex 4 for ease of reference and monitoring.

TOPIC BRIEF

Topic Title:	Disability Facilities Grant
Officer Lead:	Operational Director (Adults of Working Age)
Planned start date:	April 2009
Target PPB Meeting:	March 2010

Topic Description and scope:

A review of the Disability Facilities Grant, focussing on developing an understanding of the complexities of the finances within adaptations.

Why this topic was chosen:

Over the last two years, major changes have been made internally to the structure and processes within adaptations. In April 2008 the Independent Living Team, grants team and Home Improvement Agency integrated becoming the new HHILLS Team (Halton Home Improvement and Independent Living Service) based at John Briggs House.

Key outputs and outcomes sought:

- ◆ An understanding of the complexities of the financial processes/issues around adaptations;
- ◆ Consider national best practice and research in terms of self-assessment, personalisation and the use of modular buildings;
- ◆ Raise awareness generally of the service and the value of adaptations for service-users (including finance and independence);
- ◆ Examine the effectiveness of specifications/plans to ascertain if these could be simplified; and
- ◆ Consider resources available in terms of IT systems to ensure adequate monitoring of the DFG.

Which of Halton's 5 strategic priorities this topic addresses and the key objectives and improvement targets it will help to achieve:

Improving Health:

Key Objective C: To promote a healthy living environment and lifestyles to protect the health of the public, sustain individual good health and well-being and help prevent and efficiently manage illness.

Key Objective E: To remove the barriers that disable people and contribute to

poor health through ensuring that people have ready access to a wide range of social, community and housing services, and cultural and sporting activities that enhance their quality of life.

Halton’s Urban Renewal

To transform the urban fabric and infrastructure. To develop exciting places and spaces and to create a vibrant and accessible Halton - a place where people are proud to live and see a promising future for themselves and their families.

A Safer Halton

To ensure pleasant safe and secure neighbourhood environments, with attractive, safe surroundings, good quality local amenities, and the ability of people to enjoy life where they live.

Children and Young People in Halton

To ensure that in Halton children and young people are safeguarded, healthy and happy, and receive their entitlement of high quality services that are sensitive to need, inclusive and accessible to all.

Nature of expected/desired PPB input:

Member led scrutiny review of the Disability Facilities Grant.

Preferred mode of operation:

- Review of the Disability Facilities Grant – including assessment process, other grants, specifications and plans
- Literature review/best practice in other areas, in particular the impact of Personalisation
- Field visits including:
 - To a local authority who use Self-Assessment within DFG;
 - To a local authority who use Modular buildings;
 - Teams involved with DFG working at Halton BC; and
 - Service-users

Agreed and signed by:

PPB chair

Officer

Date

Date

Methodology Detail

a) Presentations

The following officers gave presentations as part of this scrutiny review:

Name of officer	Title of Presentation
Ruth McDonogh, Divisional Manager	Modernisation of Major Adaptations Service in Halton
Janet Wood, Principal Manager	The Assessment Process for Major Adaptations
Phil Brown, Principal Housing Inspector and Graham Foxley, Budget Monitoring Officer	Financial Assistance for Improving Housing in Halton
Jean Cunningham, Project Manager and Carole Heywoode, Housing Renewal Support Officer	Entitlements/how people apply for grants
Phil Brown, Principal Housing Inspector	Building Works, Monitoring and Meeting Needs
Michele Finney, Occupational Therapist	Accessible Homes Register
Norman Lloyd, Service-User and Glenys Bagley, Carer	Service-user/Carer Perspective
Lynne Royle, Practice Manager	Modular Building
Ruth McDonogh, Divisional Manager	Service-user Feedback Forms
Cherrie Walker, Team Support Officer	Administration within the HHILS team

IT Systems currently in use

1. **Carefirst** – All details and information is recorded onto Carefirst, including basic information, assessments, letters, activities, recommendations and events.
2. **Msoft** – This is the system we use to order equipment from the equipment service. All basic detail are recorded on Msoft, also details of the equipment ordered and delivery dates. These are subsequently recorded on Carefirst and in the service users case notes.
3. **Femis** – This is the system that records all enquires and outcomes for DFG Major adaptations also Major and Minor Works Assistance Grants. It also monitors performance and time scales. The information regarding DFG Major adaptations is also then recorded on Carefirst, service users case notes and the relevant spreadsheet.
4. **Home Grants Package** – This is an in-house system which records financial information, costs of adaptations and calculates grant eligibility. This information is also then recorded on Carefirst, service users case notes and the relevant spreadsheet.
5. **Excel Adaptations spreadsheets** – We keep a spread sheet for the following different types of adaptations
(A new spreadsheet is created each year for each):
 - Major Adaptations DFG Funded
 - Major Adaptations ILT Funded
 - Minor Adaptations – Contracted items
 - Minor Adaptations – Outside of contract
 - Major Adaptations separate spreadsheet for each RSL
 - Minor Adaptations separate spreadsheet for each RSL

Each spreadsheet records all the basic details about a service user's name, address, date of birth, carefirst number, types of adaptation, all dates for specified milestones until completion. This information is already recorded somewhere on one of the other databases above and also in the workers case note for the service user.

We also have a couple of other systems that we use:

- **Crimson** - this is the Zurich Insurance system, which they use to notify HBC when an annual inspection has been completed on equipment, which has been supplied and is maintained by HHILS. Each time an inspection is carried out a copy of the report needs to be looked at on Crimson and any issues or queries raised need to be followed up and actioned.

- ADL Smartcare – this is an on line self-assessment tool for service users. Activity on this system needs to be monitored and the admin team on a monthly basis creates summary reports.

All of these different systems and spreadsheets, which do not “talk” to each other, create a great deal of work for the clerical team within HHILS. But if we had a bespoke system that could communicate with other systems and populate information into specified fields – for instance basic details onto forms, this would improve efficiency considerably and improve the teams overall performance.

ACTION PLAN**ANNEX 4**

Action No.	Action	Responsible person	Timescale	Resources Required	Progress
1	Continue to closely monitor the financial processes that are in place between the Council and the RSLs.	Ruth McDonogh	Monthly		
2	Consider arranging a further Members Briefing Session focussing on some of the financial complexities of the DFG and including the application/eligibility procedures.	Ruth McDonogh	May/June 2010		
3	Consider developing a Business Case for a financial contribution from Health towards adaptations to set against the savings achieved for health as described in 5.1.2.	Ruth McDonogh	July 2010		
4	Support the continued use of modular buildings for any other relevant situations that require extensions.	Phil Brown	As appropriate		Two modular buildings were installed in 2009/10.
5	Continue ongoing evaluation/review of the adaptations service so that improvements can be continual.	Ruth McDonogh	Initial evaluation by December 2010		

6	Endorse the review of the Housing Adaptations Policy	Ruth McDonogh	April 2010		
7	Support the implementation of the service-user feedback forms at various stages within the Adaptations process to ensure ongoing improvements.	Phil Brown/Janet Wood			
8	Ensure adequate training for staff within the Contact Centre dealing with the feedback forms is in place.	Phil Brown/Janet Wood			
9	Continue to work, closely with the service-users so they fully understand what will be involved with any installation of an adaptation.	Phil Brown/Janet Wood			List of service users willing to contribute to service development is maintained
10	Proceed with the recruitment of the vacant technical post, so that the consultant designers only need to be used on an ad-hoc basis.	Phil Brown			
11	Approve the in-house design of a bespoke IT system that brings together all the current systems therefore considerably cutting down on time and resources of the admin team.	Ruth McDonogh			
12	Proceed with the recruitment of the Adaptations Liaison Officer post.	Janet Wood	Approved April 2010		