



# Home Adaptations for Disabled People

Policy & Procedure

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Policy, Performance and Customer Care Team  
Adult Social Care | People Directorate

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## Policy Summary

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<b>Author</b>	Natalie Johnson, Service Development Officer, Halton Borough Council
<b>Contributors</b>	Helen Moir, Divisional Manager, Halton Borough Council Sara Griffiths, Practice Manager / Occupational Therapist, Initial Assessment Team, Halton Borough Council Jean Cunningham, Project Leader, Home Improvement Service
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<b>Superseded document(s)</b>	Housing Adaptations Policy & Procedure Manual 2013
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## 1.0 Policy

### 1.1 Introduction

This document sets out the policy, procedure and practice associated with the provision of minor and major housing adaptations for disabled people living in Halton.

#### 1.1.1 Context

*“A suitable, well adapted home can be the defining factor in enabling a disabled person to live well and independently. At a time of financial constraints and policy change, delivering help with home adaptations in the most efficient and effective ways and making best use of scarce resources is more important than ever.”*

*“The purpose of an adaptation is to modify the home environment in order to restore or enable independent living, privacy, confidence and dignity for individuals and their families. The focus is therefore on identifying and implementing an individualised solution to enable a person living within a disabling home environment to use their home more effectively rather than on the physical adaptation itself. This reflects the social model of disability which views disability as arising from the barriers presented by society and the built environment rather than being inherent in the person themselves. The model recognises that whilst people have physical, sensory, learning ability and psychological differences, these do not have to result in disability unless society fails to take account of these, and makes the necessary adjustments to ensure the inclusion of the individual, regardless of those differences.”*

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Quotes taken from: **Home Adaptations for Disabled People: A detailed guide to related legislation, guidance and good practice**, Home Adaptations Consortium, 2015 [updated], which can be found on the [Foundations website](#).

#### 1.1.2 Scope

This document is concerned with minor and major adaptations, as defined below. It is not concerned with community equipment; the provision of which is covered under a separate policy (see the [Disability Equipment \(Adult Social Care\) Policy](#)).

**Minor adaptations** are structural or non-structural works costing £1,000 or less, for example, hand rails, grab rails, stair rails. These are provided free of charge.

**Major adaptations** are more substantial works costing £1,000 or more, for example,

level access showers, hoists, bathroom alterations. These are generally, but not always, provided through a Disabled Facilities Grant (DFG).

*This document is intended to support Occupational Therapists (OTs) and Community Care Workers (CCWs) based within the Council's Initial Assessment Team (IAT) and staff within the Home Improvement Service to follow the local procedures that are in place to ensure that disabled people are provided with the housing adaptations that are required in order to meet their assessed needs.*

## 1.2 Legislative framework

Legislation relating to the provision of housing adaptations for disabled people is complex and cuts across a number of areas.

*For more information on the legislation relevant to home adaptations, see the ['Home Adaptations: The Care Act 2014 and related provision across the UK'](#) briefing published by the College of Occupational Therapists in 2016. See also section 2 of the *Home Adaptations for Disabled People (2015) guide*.*

### 1.2.1 Social Services

The **Care Act 2014** reformed the adult social care system, creating a single, modern piece of law to replace a number of separate pieces of outdated legislation.

Therefore, the legislation relevant to the provision of adaptations for **adults** is laid out in the Care Act 2014. The Act sets out the requirement for local authority social services departments to carry out a needs assessment where it appears that any person for whom they may provide or arrange care and support services is in need of such services.

*The Council's [Social Work Practice Guidance](#) fully details the policies and procedures concerning assessing need and determining eligibility for services at a local level in line with the Care Act.*

Section 1 of the Care Act sets out the guiding principle of wellbeing, which local authorities have a duty to promote. Wellbeing is defined as being made up of nine components, a number of which could be influenced by the provision of adaptations (particularly, the suitability of accommodation, dignity, emotional wellbeing and control over day-to-day life).

Section 2 of the Care Act places a duty on local authorities to prevent, delay or reduce the needs of adults for care and support and the needs of informal carers for support. Minor adaptations, in particular, are likely to feature strongly amongst preventative services.

Eligibility under the Care Act is determined through three key questions:

1. Does the adult have care and support needs arising from, or related to, a

- physical or mental impairment?
2. Is the adult unable to achieve at least two of the outcomes\* listed in the regulations?
  3. As a consequence, is there, or is there likely to be, a significant impact on the adult's wellbeing?

*\*The outcomes listed in the Care Act regulations are (many of which are affected by the provision of adaptations):*

- *Managing and maintaining nutrition;*
- *Maintaining personal hygiene;*
- *Managing toilet needs;*
- *Being appropriately clothed;*
- *Being able to make use of the adult's home safely;*
- *Maintaining a habitable home environment;*
- *Developing and maintaining family or other personal relationships;*
- *Accessing and engaging in work, training, education or volunteering;*
- *Making use of necessary facilities or services in the local community;*
- *Carrying out any caring responsibilities the adult has for a child.*

If all three questions are answered yes, there are eligible needs, which the local authority has a duty to meet (assuming the adult is ordinarily resident in the area), unless there is an informal carer able and willing to meet the needs.

Similarly, local authorities are not required to meet the need if it can be met through another statutory route (e.g. DFG or NHS continuing healthcare) and they are only required to meet the need in the most cost-effective way.

Local authorities are permitted to conduct a means test with a view to charging for services, except in the case of minor adaptations costing £1,000 or less, which the regulations state local authorities must not charge for.

It is also important to note that the Care Act represents a change of approach to informal carers; they have the right to be assessed against specific eligibility criteria for carers and, if they meet it, the local authority has a duty to meet their needs for support. Those needs can be met either by arranging provision for the carer or the adult and adaptations might be one way of meeting such needs.

The Care Act **does not** apply to children (other than the provisions regarding transition from childhood to adulthood). For **children**, the legislation covering the provision of adaptations is set out in the **Children Act 1989** and the **Chronically Sick and Disabled Persons Act 1970 (CSDPA 1970)**, which was repealed by the Care Act for adults but remains in place for children.

Section 2 of the **CSDPA 1970** states that local authority social services departments may discharge their duties by providing adaptations. It also states that there is a duty to ensure that disabled people get the assistance they need, particularly in cases where needs cannot be met through a DFG.

Section 17 of the **Children Act 1989** includes a general duty for local authorities to

safeguard and promote the welfare of children in need (which includes disabled children), which would include the provision of major adaptations.

The **Children and Families Act 2014** (which reformed special education law) is also of some relevance, as Section 37 states that anything provided for a child under section 2 of the CSDPA 1970 must be contained within the Education, Health and Care (EHC) Plan (a document that sets out a child or young person's education, health and social care needs). This would therefore include any adaptations.

### **1.2.2 Housing**

The legislation concerning the provision of Disabled Facilities Grants (DFGs) is covered within the **Housing Grants, Construction and Regeneration Act 1996 (HGCRA 1996)**. This Act is unaffected by the Care Act and the right to apply for a DFG is absolute. For major adaptations, the HGCRA 1996 is usually the first port of call.

Eligibility for a DFG is determined by establishing whether:

- There is a disabled\* occupant;
- The proposed adaptations fall within the prescribed list of purposes;
- The works are necessary and appropriate; and
- They are reasonable and practicable.

*\*For the purposes of a DFG, a person is disabled if:*

- *Their sight, hearing or speech is substantially impaired;*
- *They have a mental disorder or impairment of any kind; or*
- *They are physically substantially disabled by illness, injury, impairment present since birth, or otherwise.*

The maximum amount awarded under a DFG is £30,000. This is also subject to a deduction as a result of a means test in the case of adults but not children.

There is a further piece of housing legislation of relevance to adaptations – the **Regulatory Reform (Housing Assistance) Order (RRO) 2002**, which gives local authority housing departments the discretion to assist with local housing, including adaptations. If needs are not met (or not met in full) under the HGCRA 1996, the RRO 2002 can be used and this would mean that social services departments would not need to step in under the provisions of the Care Act.

There is no restriction on the amount of assistance that can be provided under the RRO 2002 and it may be in addition or as an alternative to a mandatory DFG. It may be used, for example, to avoid the procedural complexities of mandatory DFGs or to top-up the level of assistance provided through a DFG where the local authority believes the DFG assistance is insufficient to meet the level of need. It may also be used to assist with the acquisition of alternative accommodation in cases where the local authority is satisfied that this would benefit the occupant at least as much as adapting their existing accommodation.

In order to make use of the RRO 2002, local authorities must have a published policy setting out what use they intend to make of the power. At the time of writing this policy, Halton is in the process of developing a new Home Assistance Policy.

### 1.2.3 Health

In some cases, the provision of adaptations may be the responsibility of the National Health Service (NHS). The **NHS Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012** state that if a person's needs amount to a primary health need and thus constitute a continuing healthcare need, the person's package of care must be arranged and funded solely by the NHS. In addition, section 22 of the Care Act prohibits social services from doing anything that the NHS is required to do.

The position in relation to continuing care is less clear for children than it is for adults but as stated in the College of Occupational Therapists' briefing "the more closely related the adaptation is to the treatment of a complex health condition or essential medical need, the stronger the argument may become that the NHS should arrange or at least assist with an adaptation".

## 1.3 Underlying principles

Adaptations will be provided within the context of the following principles:

### 1.3.1 Stepped approach

When considering the need for adaptations the following stepped approach will be used:

- Consideration as to whether a different way of approaching tasks, rearranging the layout of the property and/or provision of equipment and /or minor adaptations may meet needs, reduce risks and alleviate the need for more major adaptation work.
- Where it is established that major adaptations are required, the adaptation should be done within the existing footprint of the property.
- Where extensive major adaptations are required, consider the possibility of assisting the disabled person to move to more suitable accommodation.

### 1.3.2 Best value and cost effectiveness

Best value requirements demand that local authorities seek to spend money cost effectively. It therefore follows that:

- Although the disabled person's preference will be taken into account, it is not the only consideration. The most cost effective solution, that also meets the disabled person's needs, should be found,
- If a more expensive option is available, the disabled person has the opportunity to pay the additional costs, provided that the adaptation is consistent with the needs of the disabled person and DFG processes.
- The stepped approach to considering the extent of adaptations will be used.
- Alternative housing will be recommended if a more suitable property would

remove the need for extensive adaptations or if adaptations are not technically feasible in the current property.

- There may be a need to be flexible in more complex cases. Such cases will be considered by Divisional Manager for Independent Living Services, together with Principal/Practice Managers, from the relevant Complex Care Team and staff from the Housing Improvement Service, if necessary.

### **1.3.3 Additional considerations**

- The planning of adaptations should take account of the disabled person's current and long term needs.
- There must be due consideration given to a person's religious, cultural and ethnic background.
- The disabled person and their family/carers will be consulted at all stages of the process and provided with adequate information on which to base their decisions.
- Staff will always carefully record their evidence, reasoning and conclusions in determining the course of action they will follow, in conjunction with the disabled person and taking their views into account.
- Major adaptations cannot be considered until the disabled person has completed all recommended treatments and rehabilitation. However, interim help may be given through the provision of specialist equipment and/or minor adaptations.
- Adaptations are not a means of providing additional bedrooms to alleviate issues of overcrowding.
- Adaptations will not be provided to repair or replace features in the property which the home owner has failed to regularly and adequately maintain e.g. poorly maintained doors or windows resulting in difficulties in opening or poorly maintained, broken or leaking sanitary ware requiring replacement.

Where funding for adaptations is provided through a DFG or by Social Services and the service user subsequently receives payment in respect of an insurance or damages or personal injury claim, that includes an amount towards adapting their home, they will be expected to repay the grant so far as is appropriate, out of the proceeds of any claim.

## 2.0 Procedure

### 2.1 Assessment and Eligibility

As described in policy section 1.2, there are a number of legal avenues for the provision of home adaptations for disabled people. Assessment will take place in order to determine eligibility under the various pieces of legislation.

The three legal avenues through which adaptations are provided are described in the table below along with details of the types of adaptations that fall within each category within Halton:

Legal avenue	Adaptations provided
Assistance from local authority social services departments in line with the Care Act 2014 (for adults) and the Children Act 1989 / Chronically Sick and Disabled Persons Act 1970 (for children).	<ul style="list-style-type: none"><li>• Minor adaptations for owner-occupiers and tenants in the private rented sector (those in housing association properties will have minor adaptations provided by their landlord)</li><li>• Major adaptations funded through the Social Services Panel process (via a Discretionary Support Loan)</li></ul>
Mandatory assistance (subject to eligibility) from local authority housing departments through a DFG in line with the Housing Grants, Construction and Regeneration Act 1996.	<ul style="list-style-type: none"><li>• Major adaptations funded through DFGs either using or not the Home Improvement Agency route</li></ul>
Discretionary assistance from local authority housing departments through local policies developed under the Regulatory Reform (Housing Assistance) Order 2002.	<ul style="list-style-type: none"><li>• Major adaptations through the Housing Association joint funded route</li><li>• Stair lifts</li><li>• Ceiling track hoists</li><li>• At its discretion, the Council may offer loan assistance to help a disabled person in a privately owned dwelling to move to a different property if it is not reasonable or practicable to adapt the present home. The disabled person must have been resident in the borough for a period of 3 years and the new home must be considered suitable or capable of being made suitable for the needs of the disabled person.</li></ul>

Eligibility will be established in line with the criteria under relevant legislation as described in policy section 1.2.

### **2.1.1 The assessment process**

Initially, the needs of a disabled person and any carer will be assessed by an Occupational Therapist (OT) or Community Care Worker (CCW) based within the Initial Assessment Team.

During the initial assessment process staff will gather information about the person's condition, the problems and difficulties they have in carrying out daily tasks using a balanced risk-taking approach, and explore whether all appropriate treatments, including rehabilitation, have been received.

Medical opinion and advice will be requested to clarify the nature and extent of the person's diagnosis and prognosis and identify any potential contraindications or risk created by proposed solutions.

In considering solutions to improving a person's independence, alternative methods of meeting people's needs, rather than the provision of major adaptations, will always be considered first.

See policy section 1.3, in particular the stepped approach.

#### ***Involving the disabled person and their family/carers***

The disabled person and their family/carers will be fully involved in the assessment process and their views will be taken into account.

The amount of care and support provided by relatives and carers, and the type and size of equipment used, will be taken account of when determining the space requirements of any proposed adaptations.

A consensus on the final proposals for adaptations must be sought between the disabled person, their family/carers and other members of the household along with other agencies, where appropriate.

At all stages the disabled person and their family/carers must be provided with adequate information on which to base their decisions.

#### ***Deteriorating conditions***

Assessments will always take account of the person's current and long term needs, particularly if the person has a condition that is likely to deteriorate over time.

Age and/or prognosis alone should not be a barrier to the provision of adaptations. However, in the case of major adaptations, due to the length of time required for building works, generally the disabled person's needs will be met by the supply of equipment and/or minor adaptations.

#### ***Assessing a child's need for adaptations***

Planning adaptations for children needs to take account of their ability to grow, develop and increase in weight. Therefore, recommendations need to be appropriate for their level of development and their potential level of achievement.

The provision of adaptations to the family home where there is a disabled child or young person can be a complex process.

Any assessment or review of need must include the views of the child or young person and their parents.

The assessment must take account of the child's developmental needs, the needs of parents as carers and the needs of other children in the family.

With children it is not always possible to determine their long term needs, particularly if they are receiving treatment or training to improve their level of independence, or if they have not yet reached their developmental milestones. In these situations the provision of equipment and/or minor adaptations may be the best immediate solution while gathering all the relevant information on which to predict the child's future needs.

Occupational Therapists will consult widely with all those involved in providing the child's care and treatment to gain an appreciation of potential longer term needs.

## 2.2 Minor Adaptations

Minor adaptations are relatively small and inexpensive and can be defined as structural or non-structural works (see list below) costing £1,000 or less (this may be the cost of a single item or a combination of items).

It is accepted practice that minor adaptations costing £1,000 or less will be provided free of charge.

*See the Minor Adaptations Criteria and Guidance at appendix 1.*

HBC social services will fund minor adaptations for owner occupiers and private tenants.

Housing associations will fund minor adaptations for their tenants, and many of the larger housing associations accept self-referrals (further information should be obtained from individual housing associations). Cost-related criteria may vary between local housing providers meaning that the definition of items as either minor or major adaptations may also differ.

### **Structural minor adaptations:**

- Hand rails – external
- Half steps
- Extra paving to widen pathways
- Re-siting of sockets
- Additional sockets
- Re-location of light switches
- Lower section of kitchen workspace
- Re-hanging of doors
- Re-location of radiators
- Widening of doorways – key access points
- Compressible threshold
- Alter position of WC
- Lowering of shower controls
- Alterations to service meter cupboard
- Trim window sill
- Trim newel post

### **Non-structural minor adaptations:**

- Grab rails
- Stair rails – not the primary rail
- Lever taps
- Drop down rails
- Floor fixing of toilet frames
- Brackets for swivel bathers and bath boards
- Spatulate WC handles
- Lower wall cupboards/worktop
- Change door handles/kitchen door handles
- Flashing light door bells
- Smoke alarm alerts
- Door and wall protectors
- Intercom door release system
- Toilet plinth
- Microphone pick up units

The majority of minor adaptations are provided within 7 days, apart from external adaptations, door widening and WC alterations, which are provided within 4 weeks.

## **2.3 Major Adaptations**

Major adaptations are more substantial items ranging from level access showers to ground floor extensions.

There are a number of different arrangements in place with regards to the provision of major adaptations depending on the type of adaptation and the tenure of the property:

*See the Major Adaptations Practice Guidance at appendix 2.*

1. Disabled Facilities Grant (DFG) route, which can be either using the Home Improvement Agency (HIA) or not using the HIA;
2. Non-DFG Housing Association joint funded route;
3. Non-DFG route for stair lifts;
4. Non-DFG route for ceiling hoists;
5. Non-DFG route via Panel (Discretionary Support Loan).

Each route is covered in more detail in the following sections.

### **2.3.1 Major Adaptations – DFG route**

These are mandatory grants to fund eligible works up to the statutory maximum (*currently £30,000 including all professional fees, VAT and any client contribution etc.*).

All grants are subject to a financial means test, except in the case of children. The financial assessment may result in the disabled person making a full or part contribution towards the cost of the adaptation. A DFG may fund major adaptations or minor works totalling more than £1,000, following a full assessment of need.

*See appendix 3 for the guidance notes regarding the purposes for which a DFG may be given.*

*See appendix 4 for the DFG leaflet which is available for prospective applicants.*

*Although tenants of Housing Associations can apply for these grants, Halton has separate streamlined arrangements in place through partnership working arrangements with most Housing Associations (see 2.3.2).*

Under the Housing Grants, Construction and Regeneration Act 1996 all adaptations provided through a DFG must be **'necessary and appropriate'** and **'reasonable and practicable'**.

To be **'necessary & appropriate'**, adaptations recommended by Occupational Therapist / Community Care Workers must be required in order to enable the disabled person to remain in the dwelling with a great degree of independence or in order to enable their carer to take care of them. The needs of the disabled person should be wholly or substantially met by the proposed adaptation.

Recommendations are subject to technical feasibility. If the proposed adaptations cannot be achieved within the existing footprint of the home, some people may find that their needs may be best met by support for re-housing to more suitable adapted accommodation or to accommodation that can be adapted.

The local housing authority must also decide whether the works are **'reasonable and practicable'**. This decision relates to the age and condition of the dwelling, i.e.:

- The architectural and structural characteristics of the dwelling, which may render certain types of adaptations inappropriate;
- The practicalities of carrying out adaptations to smaller or older properties where limited access could make wheelchair use difficult;
- The courts have stated that where the works would be abnormally expensive, due to the age and condition of the property, the local authority can take this into account when making a decision. However a general lack of resources and insufficient budget alone cannot justify a decision that the works are not 'reasonable and practicable'.

### **DFG flexibility**

The Council will agree the most suitable and cost effective scheme to meet the needs of the disabled person and will award a DFG based on the eligible costs. In the event of the applicant deciding to carry out additional works or choosing to provide the adaptations in a different way, then the Council will only pay the cost of the Council's recommended scheme and the applicant will be required to pay for any additional costs.

The Council will also only make the payment if the revised scheme is considered to meet the needs of the disabled person. In these circumstances, the Council is unable to provide the services of the Home Improvement Agency.

## **Halton Home Improvement Agency (optional service; fees apply)**

The Council's Home Improvement Agency provides a full agency service to owner occupiers and private tenants applying for a Disabled Facilities Grant. This ranges from initial help and advice in the completion of the application forms to a full architectural design and contract administration.

**Note:** Clients not wishing to use the in-house HIA can engage their own agent/designer to assist with the DFG funded works. Reasonable professional fees can be considered as part of the DFG award.

### **Land Charges /Repayment of Grant (DFG)**

In Halton, land charges are placed on all owner-occupied properties where the DFG exceeds £5k, in order to recover some of the cost of the grant if the property is sold, transferred or ceases to become the main residence of the disabled person within 10 years of completion of the works.

This will apply where the DFG is for more than £5,000 and the Council may then require repayment of that part of the grant, which is in excess of £5,000 up to a maximum of £10,000. However, repayment can be waived in some circumstances.

### **2.3.2 Major adaptations – Housing Association joint funded route**

A Joint Funding Agreement is in place with the majority of local housing associations through which the Council and the housing association each pay 50% of the cost of the eligible adaptation work (subject to the availability of resources by both parties). The Housing Association will organise and deliver the adaptations; on completion they will invoice the Council for the agreed amount.

Tenants living in properties owned by Housing Associations, which have not participated in the joint funding agreement with the Council, can apply for a DFG to fund the eligible works.

### **2.3.3 Major adaptations – non-DFG route for stair lifts**

In May 2019, a new process for the provision of stair lifts commenced.

Those who are assessed to be in need of a stair lift will be able to apply to have one provided through the Council's contract with

*DFG using the HIA: Appendix 5 describes the process when using the HIA route and a process flow chart is included at appendix 6. Appendix 7 details the range of letters, leaflets, forms and memos that are used during the process. Appendix 8 is a leaflet for service users detailing the help provided by the HIA.*

*DFG not using the HIA: Appendix 9 describes the DFG process when not using the HIA.*

*See the Process for Major Adaptations in Housing Association Properties at appendix 10 and the HBC/Housing Association Joint Funding Agreement at appendix 11.*

*See appendix 12 for the stair lift grant process, appendix 13 for the stair lift process flow chart and appendix 14 for the stair lift leaflet.*

Prism. This application will involve a means test in line with that used as part of the DFG application process, which may result in the individual having to contribute (in part or full) to the cost of the stair lift and associated works.

Under this contract, stair lifts are installed with an extended warranty for a period of five years. After this period, the lift becomes the responsibility of the individual in terms of ongoing maintenance.

### **2.3.4 Major adaptations – non-DFG route for ceiling hoists**

Those who are assessed to be in need of a ceiling hoist will have one provided via the Council's contract with the supplier (currently Prism). There is no means testing. The hoists are provided with a 10 year extended warranty, which aligns with the life cycle of the hoist. After this point, if there is continued eligible need it is anticipated that a new hoist would be supplied, again with a 10 year warranty; responsibility for ongoing repair and maintenance of ceiling hoists will not transfer to individuals.

### **2.3.5 Major adaptations – non-DFG route via Panel (Discretionary Support Loan)**

A Discretionary Support Loan may be granted in exceptional circumstances to fund a shortfall in contributions due to financial hardship.

Occupational Therapists/ Community Care Workers can advise service users to apply to Panel if:

- They report an inability to pay their assessed contribution towards major adaptations;
- They do not qualify for a DFG (i.e. their borrowing power exceeds the costs of the work but they report an inability to pay the total cost of the works);
- The major adaptations are in excess of £30,000 (current DFG ceiling) and they report an inability to pay.

*See appendix 15 for more information on the Discretionary Support Loan / Panel process.*

## **2.4 Major adaptations – warranties, maintenance and removal**

Most items of equipment and building work will be covered by warranties for the first six months from completion. Some items may be covered for a longer period.

The disabled person and their family/carers must be supplied with information on which items are covered and for what period and who has ownership and responsibility for ongoing servicing and maintenance after the warranty period.

The responsibility for ongoing servicing and maintenance varies depending on the type of adaptation, the tenure of the property and how the works were funded, as described in the table overleaf:

Funding route/ type of adaptation	Responsibility for maintenance
<b>DFG funded / Discretionary Support Loan via Social Services Panel</b>	The standard position is that once items are installed they become the property of the individual who is therefore responsible for any ongoing servicing, maintenance and repair as necessary. The Council will secure an extended warranty for some pieces of equipment (mechanical lifts, wash/dry toilets and adjustable height products). The Council will also provide information as to how the individual can make their own arrangements for ongoing maintenance (e.g. by purchasing a warranty).
<b>Housing Association properties</b>	Either the tenant or their landlord will be responsible but practice varies according to the policies of the various Housing Associations. Tenants should check with their Housing Association (landlord) if they are unsure.
<b>Stair lifts</b>	Stair lifts are provided with a period of extended warranty (five years in total) at the point of installation, after which point they become the responsibility of the individual.
<b>Ceiling hoists</b>	Hoists are provided with a 10 year extended warranty, which aligns with the life cycle of the hoist. After this point, if there is continued eligible need it is anticipated that a new hoist would be supplied, again with a 10 year warranty; responsibility for ongoing repair and maintenance of ceiling hoists will not transfer to individuals.

It should be noted that a person cannot have a DFG for the same item twice, apart from mechanical lifts that are unrepairable or have reached the end of their life; a report as proof of this would be required.

In cases where the Council retains ownership of an item, the Council may recover the item if it is no longer required and/or at the request of the homeowner. It may then be re-used as appropriate for another disabled person.

Removal of some types of adaptations, for example through floor lifts and step lifts may cause damage to or disturb ceilings, walls, floors and floor coverings. Where ceilings, walls or floors are damaged or disturbed, the areas will be 'made good' by Halton Borough Council to a standard appropriate for re-decoration by the homeowner. Where carpets/floor coverings are cut and/or re-laid, they will be checked for safety but not replaced.

Where removal of bathroom adaptations, for example, clos-o-mat WCs and hi-lo baths, necessitates replacement of sanitary fittings, the Council will fund the cost of the basic item only and 'making good' to a standard appropriate for re-decoration by the homeowner.

Where items have been re-located or associated works have been carried out to make way for the adaptation, for example heating, sockets, meter cupboards, lowered kitchen worktop etc. they will be left in position following removal of the adaptation.

## 2.5 Complaints and feedback

If disabled people and/or their family/carers are dissatisfied with the way in which the policy has been applied to them, or if they have other concerns e.g. about the quality of the service they have received or the behaviour of staff, they can access the social services complaints procedure at any time.

The Home Improvement Service routinely sends out feedback questionnaires following the completion of DFG works in order to monitor the quality of service provision.

*More information on the complaints procedure is available on HBC's website:*

[Adult Social Care](#)

[Children's Social Care](#)

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## Appendices

Appendix	Document Name	Date of last update
<b>1</b>  Appendix%201%20-%20Minor%20Adaptat	Minor Adaptations Criteria and Guidance	June 2019
<b>2</b>  Appendix%202%20-%20Major%20Adaptai	Major Adaptations Practice Guidance	June 2019
<b>3</b>  Appendix%203%20-%20Purposes%20for%	Purposes for which a DFG may be given – Guidance Notes (2015)	2015
<b>4</b>  Appendix%204%20-%20DFG%20LEAFLET	DFG leaflet	July 2019
<b>5</b>  Appendix%205%20-%20DFG%20process%	DFG process – HIA route	January 2018

Appendix	Document Name	Date of last update
<b>6</b>  Appendix%206%20-%20Major%20Adapta	Major Adaptations process flow chart (DFG route using HIA)	January 2018
<b>7</b>  Appendix%207%20-%20HIA%20DFG%20p	HIA DFG process – forms, letters, leaflets, memos	November 2017
<b>8</b>  Appendix%208%20-%20DFG%20AGENCY%	DFG using HIA leaflet	July 2019
<b>9</b>  Appendix%209%20-%20DFG%20process%	DFG process non-HIA (private) route	November 2017
<b>10</b>  Appendix%2010%20-%202019-20%20Appe	HBC process for major adaptations – RSL (housing association) properties	April 2019

Appendix	Document Name	Date of last update
<b>11</b>  Appendix%2011%20-%20RSL%20Joint%20	RSL Joint Funding Agreement 2019-20 (agreement between the council and housing associations)	April 2019
<b>12</b>  Appendix%2012%20-%20Stair%20lift%20G	Stair lift grant process	April 2019
<b>13</b>  Appendix%2013%20-%20Stair%20lift%20P	Stair lift process flow chart	April 2019
<b>14</b>  Appendix%2014%20-%20STAIRLIFT%20LE	Stair lift leaflet	July 2019
<b>15</b>  Appendix%2015%20-%20Discretionary%20	Discretionary Support Loan Process for Major Adaptations	August 2019