Local Government OMBUDSMAN







Making a house a home: Local Authorities and disabled adaptations

Focus report: learning lessons from complaints

March 2016

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Introduction

Adaptations for people with disabilities

Adaptations for people with disabilities provide a lifeline to thousands of people every year. They allow people to continue living in their homes independently, but all too often in the cases we see applying for and receiving a Disabled Facilities Grant (DFG) is beset by delay.

The Local Government Ombudsman (LGO) investigates complaints about councils and social care providers. People come to us if, after complaining to their council, they are unhappy with how their case has been dealt with. Our experience, as well as independent research, shows many people in need of adaptations are being let down. This can often lead to vulnerable people being left for too long unable to use bathrooms and bedrooms. struggling to get in and out of their homes or unable to get to their gardens and upstairs rooms.

Adaptations can include putting in stairlifts to help people access upstairs rooms, widening doorways and building ramps so people can get into and around their homes, building extensions for bathrooms or downstairs sleeping accommodation, or simply adding handrails or low-level kitchen fittings.

This report highlights some of the complaints we have received when the process goes wrong, and the impact this can have on people's lives. We aim to draw attention to common issues and offer local authorities good practice guidance to ensure their grant allocation schemes run as smoothly as they can for those in need of adaptations. The report finishes by offering elected members some questions they may like to ask of their authorities to scrutinise their own grants procedures.

The cases we highlight are typical of the types of complaint we receive. In one case we saw a married couple separated for a number of weeks over Christmas because work on their home was poorly managed and carried out. In another, a man waited 18 months longer than he should have for an accessible shower because his grant was delayed and the council failed to chase it up.

Last year (2015), <u>Leonard</u>
<u>Cheshire Disability</u> found
every year almost 2,500
disabled people wait longer
than they should to receive
their Disabled Facilities Grant
(DFG). The charity's research
also found 62% of councils
surveyed were not funding
agreed adaptations within set
timescales.

Also in 2015, <u>Foundations</u>, which oversees the national network of Home Improvement Agencies, found older people were able to stay in their own homes and postpone moving into a care home by an average of four years following adaptations.

Their research suggested the average cost of a placement in residential care is around £29,000 per year whereas the average cost of providing adaptations is less than £7,000. A well-run adaptations service can not only improve the lives of disabled people, but can also result in significant savings for local councils

Disabled Facilities Grants background

Local housing authorities have been under a statutory duty to provide help for major adaptations to disabled people's homes since 1990. This is usually done by a housing authority providing a Disabled Facilities Grant (DFG).

Disabled owner-occupiers, tenants of local authorities, housing associations and private tenants, landlords and licensees can all apply to their local housing authority for a DFG to help make homes more accessible.

The grants must be used to meet the cost of adapting a property to meet specific needs.

Under normal circumstances the grants can only be spent on work not yet carried out.

What sort of adaptations can be made?

Examples of adaptations include:

- providing ramps, widening external/internal doors, shallow steps;
- adapting, or providing, suitable washing/ bathing/showering/toilet facilities;
- ensuring the disabled person can move around and access parts of the home so they can look after someone else;
- facilitating the preparation of food and cooking in the kitchen:
- installing a stair lift or a 'through the floor' lift; and
- > providing access to gardens.

If necessary, professionals may recommend an extension to the property to ensure the disabled person's needs are met.

However, housing authorities may decide it is not 'reasonable and practicable' to provide major adaptations to a person's home; this could be because it is not cost effective or it is impractical due to the layout of the property. In these cases authorities should consider the possibility of moving the person elsewhere - usually to a social or private housing tenancy.

Housing authorities should seek agreement from the person for any adaptations and properly consider their needs and those of their carers and family to avoid difficulties and disruption to their support networks.

Delivering the grants - roles and responsibilities

Local Authorities

The way councils are structured varies across the country; metropolitan boroughs, London boroughs and unitary authorities deliver housing and social services provision within the same organisation. However, in some areas where a two-tier system exists, district and borough councils provide housing services and county councils provide social services.

In this report we refer to local housing authorities and local social services authorities separately to distinguish between the various duties and powers. However in many cases services are delivered by the same authority in different departments.

The law says housing authorities shall consult social services authorities to decide whether proposed works are 'necessary and appropriate'. This is to ensure the disabled person has adequate access into and around their home and they have adequate facilities. However, housing authorities do not need to use an occupational therapist employed by a social services authority to assess need and can use private contractors instead.

Delivering the adaptations - Home Improvement Agencies (HIAs)

There are various ways in which work approved under a DFG can be provided. The way adaptations are provided will depend on the housing authority's own policies and practices.

In some cases a local housing authority will refer an applicant to a home improvement agency. These HIAs operate in 90% of local authority areas and are not-for-profit organisations specifically set up to help vulnerable people achieve or maintain independence in their own homes.

Nearly half of DFGs are delivered through HIAs. The HIA will usually act as the applicant's agent and manage contractors to ensure work is carried out satisfactorily. The council should still carry out regular inspections, however the responsibility for ensuring work is carried out properly lies with the HIA and the applicant.

Delay in making a referral

<u>Home adaptations for disabled people: a detailed guide to related legislation, guidance and good practice</u> recommends target timescales for each stage of the process.

There are three stages:

- Stage 1 is from the initial enquiry at first point of contact to the Occupational Therapist (OT) referral. Their recommendations are provided to the adaptation service (landlord, housing association or grant provider).
- > Stage 2 is from the OT recommendation to approval of the scheme.
- > Stage 3 is from the approval of the scheme to the completion of the works. (see appendix 1)

The timescales vary according to whether the work is classified as urgent or non-urgent. In urgent cases the target timescale from start to finish is 55 days. For non-urgent cases the process should ideally be concluded within 150 days.

Jarrod's story

Jarrod's disabled parents were unable to access their upstairs bathroom and bedroom for six months because the council could not agree on the proper adaptations they needed.

The family initially contacted the council because they were experiencing problems getting to their first floor bathroom and bedroom. Both Jarrod's parents have multiple health issues: his mother has a genetic condition which affects her growth and mobility and his father suffers from arthritis and poor balance due to an underlying chronic health condition. An occupational therapist for the council carried out an assessment and a follow up visit to consider the feasibility of adapting the home.

Jarrod's parents wanted a ground floor extension but the council wanted to see if a lift could be installed instead. This would have been a less costly option than the extension.

The family provided medical information to say Jarrod's mother had problems with her balance and had developed a significant anxiety of heights. The council did not accept this as proof that a lift was inappropriate and began to look into the cost of installing a lift. The family were adamant that an extension would better suit their needs, and despite their objections the council went ahead and referred them for a lift.

The family got another assessment which found that neither a stairlift nor a through-floor lift was appropriate. The council then drew up plans for extending the ground floor.

We found there was a delay of six months before the council agreed the adaptations that Jarrod's parents needed. We also found the council was at fault for not referring them sooner for an assessment to decide whether a lift was appropriate.

The council agreed to our recommendation to pay each of Jarrod's parents £1,000 to remedy their injustice caused by the delays.



Failure to complete an OT assessment and make clear recommendations

A housing authority must make decisions on DFG applications within six months of receiving them.

However, before it can process an application the housing authority needs an occupational therapy report to confirm adaptations are necessary and appropriate.

Government guidance says that in urgent cases councils should aim to complete this stage of the process within five working days of receiving a referral for disabled adaptations. The timescale for non-urgent cases is 20 working days.

Alice's story

Alice could not bathe properly for six months and struggled to get in and out of her home because her council did not complete an occupational therapy (OT) report in good time.

Alice, who has multiple physical disabilities, could not access her first-floor bathroom or toilet. She complained that the council took too long to carry out the assessment and make clear recommendations to her housing authority which delayed her application.

An OT and surveyor agreed to consider options to install a stair lift or a through-floor lift to Alice's home. A few months later, after a further visit and with advice from a lift installation company, the council agreed Alice needed a ground floor extension.

The council revised its OT report but did not make any immediate recommendations about the specifics of the ground floor extension. This led to some confusion about what the council would actually provide. Eventually, once the council had completed the plans and discussed them with Alice, it submitted its report to the housing authority which was then able to start the adaptations. Overall it took the council 14 months to complete an OT assessment from the date when Alice first requested adaptation.

While we did not investigate the suitability of an extension over a lift, we found the council took too long to carry out an OT assessment and then took too long to progress its enquiries about installing a lift or consider other options. This meant there was a further delay of about five months. Alice could not move forward with her grant application until this work had been completed, but the council made no effort to contact or update her.

In response to our recommendations the council apologised to Alice for its failure to communicate properly with her during the process and paid her £1,500 to reflect her injustice. It also agreed to review its procedures for reviewing occupational therapy referrals to ensure future DFG applications are not delayed.

Failure to consult other professionals

The responsibility for administering DFGs lies with the local housing authority. However, there is a duty to consult with adult social services on the adaptation needs of those seeking DFGs. The housing authority must then decide what action to take on the advice of adult social services.

Edward and Ben's story

Despite getting some work done on his house, Edward was left with a home that might not meet his disabled son's needs because the right professionals were not properly consulted.

Edward's adult son Ben has severe learning disabilities and autism. He has received support from the council since he was a child. Edward contacted the council and asked for a new assessment when Ben turned 22 because an adapted bathroom provided for the family when Ben was seven no longer met his needs. Edward said Ben's behaviour was so unmanageable that the only way he was able to bathe him safely was to use a garden hose and bucket in the back garden.

The council refused to carry out a new assessment because Ben had already been provided with the adapted bathroom 15 years earlier.

We found the council at fault for not considering that Ben's needs might have changed. We said the council should have consulted with social workers and other health professionals involved in Ben's care but it did not do so. The council agreed to pay the family a significant financial remedy and re-assess Ben's need for adaptations.

Eighteen months later Edward complained to us again. He had asked for further adaptations for his son but the council had not completed all the work and instead had carried out other work which he had not requested.

We found the council had not consulted with social workers and other health professionals involved in Ben's care for a second time. The council had lost Ben's file so it was difficult to understand what work had been agreed and much of the work, such as rendering an extension, could not be described as disabled adaptations to meet Ben's needs. This meant the pot of money available to complete adaptations had been significantly reduced and the family were left unsure whether their house met Ben's needs.

We recommended the council carry out a full assessment of adaptations in the family's home with input from Ben's social worker and any other relevant healthcare professionals. Despite our recommendations it took the council eight months to carry out the assessment and when it finally did, it found that he needed a number of minor adaptations, some of which it had previously refused to provide.

We recommended the council pay Ben's family £850 for further delays and said if further adaptations were not completed within three months of our decision that figure would rise.

In total the council has spent almost £80,000 providing adaptations and financial remedies to the family. Had the council worked more closely with those involved in Ben's care it is likely this figure would have been significantly lower.

Delay in provision of disabled adaptations

Social services authorities have a duty to ensure a disabled person's assessed eligible needs are met. This duty cannot be passed on to another organisation.

Richard's Story

Richard was forced to strip wash in his kitchen for 18 months longer than necessary because the council did not act when it found out how long his landlord would take to carry out the adaptations he needed.

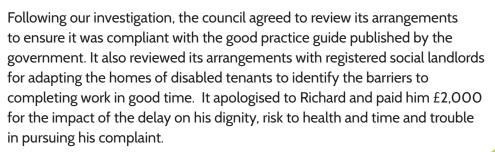
Richard is a housing association tenant and was unable to use a bath due to arthritis of his spine, pelvis and hands. He also has a medical condition that makes it especially important for him to maintain his personal hygiene. A council occupational therapist said he needed a level access shower.

The housing association was responsible for providing the adaptations under an agreement it had with the council. The agreement meant the landlord should have completed the work within 60 days of receiving the occupational therapist's report. Instead, his landlord said it could take up to three years to provide the adaptations he needed.

Richard heard nothing for a year and when he contacted his landlord he was told the work would be done as part of a wider home improvement plan due take place in the next two years. The landlord told Richard to go back to the council if his condition got worse.

When Richard complained to the council, it simply repeated what the landlord had already told him about the timescale for completing the work.

The council had a statutory duty as a social services authority to meet Richard's need for a level access shower and cannot pass this duty to another organisation. We found the council failed to meet Richard's assessed needs within a reasonable time, failed to establish whether Richard was eligible for a disabled facilities grant and did not take any action when it found out how long it would take to provide the adaptations. The delay compromised his dignity and independence and jeopardised his health because of the importance of good hygiene for his condition.





Poor workmanship and delay in completing works

There are various ways in which work approved under a DFG can be provided depending on the housing authority's own policies and practices.

Housing authorities can require an applicant to arrange for a contractor to carry out the work. In this case, applicants will need to select a contractor from an approved list and will usually be asked for more than one quote to ensure value for money. In these instances the applicant or their agent is responsible for managing contractors and ensuring work is carried out correctly. However statutory guidance says the council should visit the site at least once (or more often if the work continues beyond a week) to check work is progressing as agreed.

Some housing authorities will carry out work under DFG on behalf of the applicant. In these cases the authority will manage contractors and is responsible for making sure work is carried out correctly. As the housing authority is acting on behalf of the applicant it is important it ensures they are satisfied with the standard of work.

Housing authorities must ensure that adaptations work has been completed to the agreed specification.

However housing authorities are only responsible for the quality of work when they arrange contractors on behalf of the applicant.

Jeff and Joan's story

Jeff and Joan missed out on spending birthdays and Christmas together because the council did not check the quality of work being done to their home.

The married couple moved to a bungalow because Joan's disabilities meant she could no longer climb stairs. An OT completed an assessment and made recommendations for adaptations to meet her needs.

Builders began work and Joan decided to move in with family until the work had been finished while Jeff stayed in the bungalow.

The council told Jeff the work would take four weeks to complete. But after three weeks of slow progress and unhappiness with the workmanship, Jeff told the council he did not want the builders to return. The council said he could not refuse access to the builders and told him they should be given another opportunity to complete the job.

A few weeks later Jeff asked an independent builder to inspect the work and reported further problems to the council. The council agreed the quality of workmanship was poor and replaced the builder.

Altogether the work took more than 11 weeks to complete - seven and a half weeks longer than it should. During that time Jeff suffered considerable stress; he and Joan only saw each another at weekends due to the long distance and they missed out on celebrating Joan's birthday and Christmas together.

The council agreed to pay £2,500 to the couple for the considerable distress they experienced from the delay and poor quality of workmanship by the original builder.

Poor joint working between local social services and housing authorities

The Care Act Statutory Guidance 2014 stresses the importance of joint working between local social services and housing authorities. Therefore it is vital that clear procedures exist to ensure people who require adaptations receive a continuous service. This is especially important where these services are delivered by two separate bodies but still applies for departments of the same council.

Peter's story

Peter has acute haemophilia and severe arthritis. Knocks and bumps cause internal bleeding into his muscles and joints that are often swollen and extremely painful. He has severely restricted mobility but it took three years to get the bathroom extension he needed.

Peter asked the county council's social services department for a DFG to extend his small bathroom so he could move around in his wheelchair without knocking against the fittings, shower when he could not safely get into his bath during a bleed, and keep the bath so that he could, at other times, soak his joints to relieve pain.

The county council wrote to Peter to explain that he had been placed on a waiting list due to the high volume of applications. After three months an OT visited to carry out an assessment. The council then wrote to Peter's medical consultants for information about his condition.

The OT recommended taking space from his small dining room to extend the bathroom. Peter used the dining room for taking the medication that he needed and also to access his garden. The proposed scheme would have made the dining room too small for any practical use and prevented Peter from getting to his garden.

After another three months the county council referred Peter to the district council recommending a DFG to extend the bathroom. It did not provide any information about how the bathroom should be enlarged nor did it specify the amount of space Peter needed. The application was classed as 'moderate' priority.

The district council placed Peter on a waiting list but it had no policy for operating the waiting list. It did not tell Peter about the list or how long it would take to deal with his application.

Peter complained about the way both councils dealt with his grant application and the way the county council assessed his needs.

A suitable scheme was not agreed until three years later after further OT assessments.

Our investigation found the county council did not make comprehensive and accurate assessments that could be translated into appropriate recommendations for adaptations; it recommended adaptations that could not meet Peter's need and delayed in providing an independent occupational therapist.

We also found the district council was too slow to identify it had not allocated enough funding to meet the demand for DFGs. A council cannot refuse to provide a DFG because it lacks the funds to do so. It should have identified the problem and considered transferring money into the DFG budget sooner than it did.

Both councils did not fulfil their responsibilities within a reasonable time or communicate effectively with Peter and each other.

The councils apologised to Peter and paid him a total of £4,500. They also demonstrated to us they had introduced new joint policies and procedures for dealing with disputes about DFGs and that staff were trained accordingly.



Providing adaptations in private sector tenancies

The legislation does not prevent housing authorities from providing DFGs in private sector tenancies. However the owner of the property must agree to the adaptations being carried out and the tenant must confirm their intention to live in the property as their only or main residence for at least five years. This is confirmed by the tenant and owner submitting a 'tenant's certificate' and 'owner's certificate' respectively.

Hanif's story

Hanif and his family had lived in the same private sector rented property for more than 20 years. Hanif was diagnosed with a degenerative medical condition and applied to the council for help with bathing facilities.

The council's assessment said Hanif's home needed an extension so he could be bathed and cared for. The council went so far as to help Hanif and the property owner apply for planning permission for the extension and this was granted. But the council then said it would not grant a DFG to pay for the extension as Hanif lived in a private sector tenancy.

The council provided Hanif with a stair lift and wet room; this left the property cramped and meant the rest of the household had to live in cramped conditions too. The wet room was shared with the rest of the family so access to bathing and toileting facilities was severely limited.

The council offered to provide Hanif and his family with alternative accommodation in a council tenancy, but the family were reluctant to move from the home where they had lived for more than 20 years.

We contacted the owner of the property who confirmed he had no intention of asking the family to leave and was happy to agree to plans for the extension and associated adaptations. The family also confirmed they had no intention of moving within the next five years.

We criticised the council for refusing to grant the DFG because the family were living in a private sector tenancy. The law does not permit councils to refuse an application on this basis. We found the delay in providing Hanif with adaptations had caused him significant distress and left the family living in very difficult circumstances.

As a result of our recommendations the council agreed to pay Hanif and his family £5,250 and to provide the adaptations without delay. The council also agreed to provide and pay for respite care for Hanif while work twas carried out to his home.

Minor adaptations

The law says any community care equipment and minor adaptations for the purpose of helping a disabled person with their daily living should be provided free of charge.

The regulations say an adaptation is classed as being 'minor' if the cost of providing and fitting the adaptation is £1,000 or less.

Social services authorities have discretion to charge for adaptations costing more than £1,000. In most cases the social services authority will advise the disabled person to apply for a DFG if the cost of any adaptations is likely to be more than £1,000.

Where there is doubt as to the cost of adaptations authorities may start to assess a disabled person for a DFG in order to consider the costs of providing adaptations properly.

Nikola's story

Nikola is 83 and suffered from diabetes and dementia and is visited by carers four times a day to help him with washing, dressing, eating and cleaning. He is frail, regularly unable to walk and often dependent on a wheelchair with help from his daughter and carers.

Nikola's daughter contacted the council to ask for a ramp for her father's property as he was having trouble negotiating the doorstep in his wheelchair. The council installed a temporary ramp within a month.

Nikola made an application for a DFG for a permanent ramp for the property. The council's surveyor found the cost would be less than £1,000 so this could be provided free under social care legislation. However the council's housing department, which was dealing with the DFG application, did not tell its social care department this.

Nikola's daughter raised the issue of the permanent ramp with the council's social services department on several occasions over the next two years but she was told this was a matter for the housing department.

Two years later the council's social services department agreed it should have provided a permanent ramp. It carried out a further assessment but because of increases in the cost of materials the ramp could no longer be classed as a minor adaptation as the cost came to more than £1,000. When the council assessed Nikola for a DFG it found he would have to contribute almost £1,500 to the cost of the ramp.

We found there was a significant and unacceptable delay providing a permanent ramp to Nikola. Although Nikola had a temporary ramp installed there was still a four-inch drop from the threshold of the property to the ramp. This caused Nikola a great deal of distress and he would scream every time he used it due to the drop.

The council apologised and provided a permanent ramp to the property without Nikola having to pay any financial contribution.

Getting things right first time

From our investigations we have identified the following examples of good practice:

- Developing and implementing a policy which:
 - > Sets out how assessments and applications for disabled adaptations will be prioritised. This should show how the council decides what is urgent or non-urgent and the timescales within which it expects different stages of the process to be completed.
 - > Ensures local procedures for inspecting disabled adaptations up to the point of completion meet the standards set out in "Home adaptations for disabled people: a detailed guide to related legislation, guidance and good practice". Where councils choose to inspect more regularly they should publish their own service standards so applicants know what to expect.
 - > Sets out the circumstances in which the council might withhold payment of a grant to a contractor. This

- should also explain the factors the council will consider when it decides to pay a contractor where the applicant has requested the payment be withheld.
- Developing and implementing protocols between social services departments and housing departments as well as with social landlords. These should set out the key responsibilities of each party and the timescales for meeting these responsibilities including handling and responding to complaints.
- Developing links with the voluntary and independent sector to explore alternative funding. This may be particularly helpful in cases where an application has been unsuccessful or where the cost of the works exceeds the maximum limit for a grant.
- Having robust procurement processes in place where the council sources contractors to provide adaptations. This should ensure that performance of contractors is monitored over multiple contracts to avoid repeated problems.
- > Having a system for

- recording feedback and complaints about contractors on the councils approved list. The approved list should be reviewed regularly in line with any feedback and complaints received.
- Clearly explaining the nature and duration of any guarantees or warranties that come with disabled adaptations and who has responsibility for any ongoing maintenance costs. This should be put to the applicant in writing so they can refer to it in future.

Scrutiny and the role of councillors

Councils and all other bodies providing local public services should be accountable to the people who use them. The LGO was established by Parliament to support this. We recommend a number of key questions that councillors, who have a democratic mandate to scrutinise the way councils carry out their functions, can consider asking.

Does your council:



follow our good practice?



consistently meet legislative deadlines for determining DFG applications and completing work?



have input into how the Better Care Fund is used in its area?



have the ability to help people where the cost of work needed exceeds the maximum grant available?



have strong links with its partners to ensure adaptations are delivered quickly and effectively?

The role of the Ombudsman - dealing with complaints

We consider DFG complaints about a number of areas including:

- > provision of advice;
- delay in assessing a disabled person for adaptations;
- failure to properly consider the disabled person's needs/eligibility when assessing;
- delay in processing/approving the DFG application;
- > preparation of schedule of works;
- poor supervision of DFG works before payment of the grant; and issues with defects and poor workmanship

In 2013/14 we received 125 complaints about DFGs and this rose to 130 2014/15.

Landlords and the Housing Ombudsman

Adaptations to social housing are often delivered by the landlord. Social housing tenants are entitled to apply for a DFG however the work is often funded by other means. Complaints about work funded by the social housing provider (including council housing), rather than by a DFG or social services, are dealt with by the Housing Ombudsman.

We deal with complaints about recommendations made by a social services authority's occupational therapist and the general duty of those authorities to ensure a disabled person is living in appropriate accommodation. Both ombudsmen are able to carry out joint investigations

About the Ombudsman

For more than 40 years the Ombudsman has independently and impartially investigated complaints about councils and other bodies within our jurisdiction. Our services are free of charge.

If we find something wrong, we ask the council to take action to put it right. What we ask the council to do will depend on the particular complaint, how serious the fault was and how the person was affected.

We have no legal power to force councils to follow our recommendations, but they almost always do.

How we remedy injustice

Any failure to provide adaptations will cause a great deal of distress. Our key principle is that any remedy we recommend should, as far as possible, put the complainant back in the position he or she would have been if there had been no fault.

Remedies we may recommend include:

- > Carrying out a new assessment of need.
- Carrying out agreed adaptations within a set timescale.

- Inspecting the quality of work done and arranging any remedial work needed.
- Exploring ways of helping complainants to meet a shortfall in funding for the required work.
- Pay any expenses incurred as a result of a delay in carrying out adaptations (e.g. additional care charges).
- > Apologise

We will also consider whether a payment is necessary to remedy the distress caused by a failure to provide adequate adaptations.

A disability or health condition may make a complainant less able to cope with the impact of any fault and so these payments may be higher than we would recommend in other circumstances.

Others, particularly close family carers, and siblings may also have been affected by the fault. We will also consider the impact fault has had on them and may recommend a payment for distress.

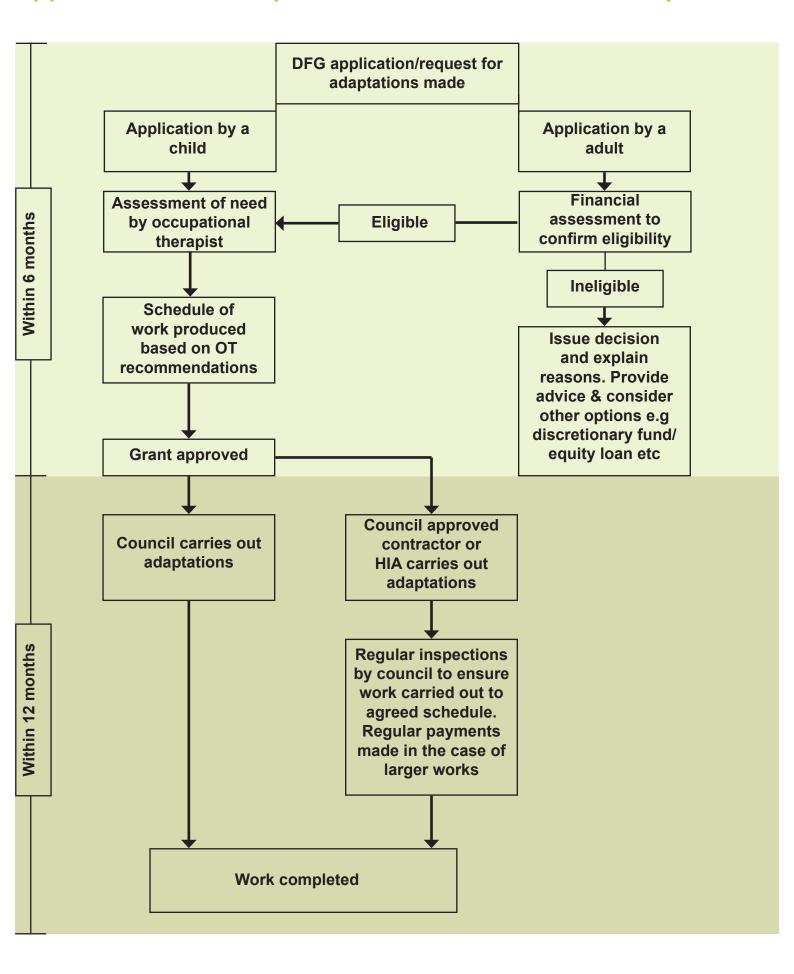
Local Government Ombudsman

PO Box 4771 Coventry CV4 OEH Visit our website at www.lgo.org.uk
If you have a complaint you would like to
make about a council you can contact us
on: 0300 061 0614

Phone: 0300 061 0614 Web: www.lgo.org.uk

Twitter: <u>@LGOmbudsman</u>

Appendix 1 - summary of the Disabled Facilities Grant process



Appendix 2 - who pays? Grants and funding

Grants for adults are 'means tested' so the amount to which a person may be entitled depends on their financial circumstances. Grants for children are not 'means tested'.

The maximum amount of grant available in England is currently £30,000; so if the cost of work exceeds this amount housing authorities have a general discretion to provide further help in the form of grants, loans or equity release.

However housing authorities are not under a duty to help applicants meet costs above the level of grant to which they are entitled. Social care and health bodies may also be able to provide additional grants.

Paying the grant

The law allows housing authorities to make payments either:

- in full once work has been completed; or
- by instalments as work progresses and the balance once work has been completed. Instalments can only be paid for up to 90% of the grant amount until work has been completed.

Work must be carried out within 12 months of the date a DFG is approved. In exceptional circumstances housing authorities can delay the start of work by up to 12 months. However work must be completed within 12 months of the date given in the housing authority's decision.

Housing authorities can allow further time for work to be completed if it is satisfied work cannot or could not be carried out within the time allowed.

Authorities must be satisfied that works have been completed satisfactorily before making a payment. Payment can only be made on receipt of an "acceptable invoice, demand or receipt for payment for the works".

In some cases payments are made to applicants or their representatives (including HIAs). However a housing authority can make payments direct to a contractor if the applicant has been informed.

Housing authorities can withhold payment from the contractor if an applicant is unhappy with the work. However it must be satisfied

that it would be appropriate to do so. In such cases they can make the payment to the applicant instead.

Statutory guidance says care must be taken when making payments direct to contractors especially where there is a difference of view about whether work has been carried out properly. Most housing authorities ask applicants to sign a form to say they are happy with the work and for payment to be made. This reduces the risk of disputes arising at a later stage. However housing authorities can still pay a contractor if they are satisfied the work has been carried out correctly even if the applicant does not agree.

The Care Act 2014

The Care Act 2014 has reformed the provision of adult social care, and social care authorities' legal obligations to meet the care and support needs of adults.

Appendix 2 - who pays? Grants and funding

Under the Care Act local social services authorities are under a duty to promote "wellbeing" and this includes the suitability of living accommodation. We consider the provision of adaptations to meet the assessed needs of a disabled person is a social care duty. Disabled facilities grants are just one way in which adaptations can be delivered. The duty to ensure a disabled person's needs are met remains with the social services authority.

Under the terms of the Care Act 2014 a needs assessment must be carried out where it appears to the social services authority that a person may be in need of care and support. The Care and Support Statutory Guidance (issued under the Care Act 2014) states that "an assessment must seek to establish the total extent of needs before the local authority considers the person's eligibility for care and support and what types of care and support can help to meet those needs".

The Care Act recognises that suitable accommodation is one way of meeting care and support needs. Preventing the deterioration of a person's health and preventing new

needs from arising is seen as critical to the Care Act and home adaptations are given as an example of how this can be achieved.

The guidance underlines the key role of housing in delivering care and support. Section 23 of the Care Act clarifies the existing boundary in law between care and support and general housing. Where housing legislation requires housing services to be provided, then a local housing authority must provide those services under housing legislation. However this is not intended to prevent joint working between councils and other bodies. The guidance says:

"... community equipment, along with telecare, aids and adaptations can support reablement, promote independence contributing to preventing the needs for care and support. A local [social care] authority may wish to draw on the assistance of the housing authority and local housing services."

Better Care Fund

Since April 2015 central government stopped paying DFG funding directly to local housing authorities. Instead the government pays money into a fund managed jointly by social services and NHS Clinical Commissioning Groups. This is known as the Better Care Fund. The Fund is designed to provide opportunities for better integration of health and social care services. Health and Well Being Boards, which are made up of representatives from local health and care services, decide on local spending. Housing authorities still have an obligation to consider DFG applications.