



SUMMARY OF THE REPORT:



**For presentation to Rotherham Metropolitan
Borough Council
November 2020**

This is a summary of the fourth report of the Rotherham Federation Tenant Scrutiny panel resulting from an investigation into the Aids and Adaptations service provided by Rotherham MBC for Council tenants. 'Aids and Adaptations' was chosen by the tenant scrutiny panel following consideration of the Rotherham Council housing performance information for 2018/19 quarter four. The data showed that despite better performance than the previous year for adaptation works completed on time (96.16%), the annual target of 98% was not being met. Panel members were also keen to investigate this topic due to their own experiences and other evidence from their conversations with their neighbours and friends.

The summary includes the findings of the investigation, the recommendations made by the panel, and the evidence leading to these conclusions being drawn.

Terms of reference

Aim: To investigate the customer journey for tenants using the 'Adaptations and Aids' service in terms of accessibility, clarity and fairness

Objectives, to:

- Consider Adaptations customer journeys including accessing the service, time taken and the number of different services involved
- Ascertain whether the publicity around adaptations and aids services is available to all tenants, including hard to reach groups
- Use mystery shopping and other methods to explore access routes for the Adaptations service
- Consider the current policy in terms of accessibility for tenants
- Benchmark against other housing providers to check for any learning from their systems and policies
- Examine the charging policy and how clear it is
- Explore links between Adaptations and different services e.g. NHS, Occupational Therapists and Assistive Technology
- Ascertain how cases are prioritised

Scope

It was agreed that the panel would *not* fully investigate:

- ✘ The quality of aids and adaptations made
- ✘ The financial elements of the service as regards removal of adaptations from voids etc.

Methodology:

The investigation included:

- The panel interviewed representatives of the services including senior managers from Housing options (Rotherham Council) and Community Occupational Therapy (NHS Foundation Trust) and officers based in the Housing adaptations team
- A mystery shopping exercise – a telephone survey of 22 tenants who had experienced the major adaptations process recently or were currently in the system
- Panel members contacting the Council via various routes to ask about adaptations for a friend or family member via email, telephone and face to face
- Benchmarking Rotherham Council's Aids and Adaptations service against other similar housing providers and through the Northern Adaptations group

PLEASE NOTE THAT UNDER THE CURRENT CIRCUMSTANCES AS REGARDS COVID-19, THE PANEL ARE EXPECTING AN ACTION PLAN WITH EXTENDED TIMESCALES FOR RESPONDING TO THE FOLLOWING RECOMMENDATIONS. TIMESCALES SHOULD ALLOW FOR THE RELEVANT TEAMS TO BE OPERATING AT FULL CAPACITY AGAIN.

KEY FINDINGS

The panel has prioritised its recommendations in order of importance. The supporting evidence for each recommendation is listed:

Recommendation A: Team resources to meet demand

Ensure that the Adaptations team resources are up to full complement to meet the needs of the work demand received.

The Evidence:

- There has been a vacancy for a technical officer in the Aids and Adaptations team for over two years. Consideration is being given to replacing this post with a surveyor role due to the increasing number of assessments for extensions. This proposal was supported by the Tenant Scrutiny panel.
- The primary reason for the investigation of this topic was that the annual target of completing 98% of aids and adaptations on time was not being met (18/19 performance) and this was confirmed by panel members who had numerous examples of how speed of service varied vastly for different tenants.
- Half of the works from the mystery shopping exercise exceeded the 40 working days target for major adaptations, some by several months, and 50% of the respondents said that the service could be improve with shorter waiting times.
- One of the respondents from the major adaptations survey in 18/19 said: *'I was told it would be three weeks and it was in fact ten'*
- When interviewed, officers assessed the service as good but agreed that it had performed better in previous years i.e. The average time for assessment to works commenced was only five weeks between April and July 2019 but had previously been as short as three weeks in 2015/16.
- Although only a few complaints were received each year about the Aids and Adaptations service, the largest percentage referred to delays in service, which could be potentially be reduced if the team was up to full capacity.
- The demand for aids and adaptations rose by 16.5% between 18/19 and 19/20, putting additional pressure on the reduced team. The Rotherham COT team has capacity to handle 3,500 referrals per year; 4,300 referrals were received in 2018/19.
- The national shortage of Occupational Therapists had led to delays in the assessment of adaptations applications; however, it was anticipated that the COT team would reach full capacity in early 2020.

- During July 2019, the backlog for referral to approval had extended to nine weeks exceeding the eight-week target for Rotherham Council. By January 2020 this had further increased to 13 weeks.

Full report pages 19-22

Recommendation B1: Re-draft the policy

Redraft the policy document as soon as possible. This should include drafting a summary version for the general public, working with tenant representatives. The policy should include clear guidance on the re-housing of tenants to previously adapted homes.

The Evidence:

- The current policy and procedures used by Rotherham Council for Aids and Adaptations were written in December 2015. There is no review date mentioned in the documents but all officers agreed that they were overdue for review and refresh.
- The policy is accessible only to officers, which was confirmed by the *Learning from Customers forum* who found it to *'include out of date information'* and *'too many abbreviations/ too much information'*.
- The Tenant Scrutiny panel found the policy misleading concerning financial assessments for Council tenants and the re-housing of tenants to previously adapted accommodation.
- Panel members could see both the benefits and disadvantages of moving people from their own home into a previously adapted property. It would usually be best for the tenant to stay in their own neighbourhood and for the Council to save on removal costs; however, this was offset by the feasibility of adapting their own home, the cost of adaptations and the cost of potential removal in the future.
- It was disappointing that officers did not have time to review the policy with the Tenant Scrutiny panel's input during the investigation as originally intended, but the panel hoped that the contents of the report and their views could be included in the next draft of the policy.

Full report pages 10 and 11

Recommendation B2: Five-year rule

Consider reviewing the policy to state that tenants must stay in their home for five years following adaptations unless there are unforeseen circumstances, in line with the policy for private households.

The Evidence:

- There is no requirement for a Council tenant to stay in their adapted property for five years, unlike private customers receiving the Disabled Facilities Grant. If the tenant does move on, the property is advertised as an adapted home. If the home is still on the housing stock list after a few months, the adaptations will be removed at a significant cost to the Council.
- There was a strong feeling from the panel that the cost of both the installation and removal of adaptations (if required) should make it imperative that tenants commit to stay five years in an adapted home, except in extenuating circumstances.

Full report page 11

Recommendation C: Improve publicity of the service

Develop a strategy for targeted publicity of the service which is accessible for hard to reach and vulnerable people, including those people without access to the internet.

The Evidence:

- The only publicity for the adaptations service is via word of mouth or from the Rotherham Council website. There are no leaflets advertising the service for people to decide if it is appropriate for them.
- Panel members were happy to see that numerous people taking part in the mystery shopping exercise had heard about the service from other Council officers or Occupational Therapists (65% of people responding to the mystery shopping exercise heard about the service through OTs and Social Care). However, this relied on the person first approaching other services and wouldn't cater for someone who was struggling to access any help.
- The panel were concerned about how people, particularly hard to reach groups, hear about the service, unless they have access to the internet or have a family or GP to help with the referral.
- The COT survey found that the majority of referrals received by the team were from family/ friend / carer and by self-referral, accounting for 45% of the total. Very few referrals were received from the housing department (3-7%), secondary health (hospitals) (3-4%) or voluntary organisations (2-3%).

<p>➤ It was disappointing that only 3-7% of referrals are from housing teams when the current housing verification visits include questions relating to the need for adaptations; <i>'How are you managing within your home (identify slips, trips, falls, floods or mental health impact)'</i> and <i>'Would you like any further information or support in relation to your health and wellbeing? (includes falls and frailty)'</i>. The panel wondered if this was because these visits only take place every four years.</p>
<p>➤ One panel member said <i>'When I came out of hospital, I didn't receive any information on the adaptations that may be available to me to be able to use my home safely or to be able to go out'</i>. This was supported by only 3-4% of referrals being received from hospitals.</p>
<p>➤ Voluntary Action Rotherham do work with some GPs as link workers and may signpost the adaptations service if appropriate. However, the panel thought that there is clearly an opportunity for further targeted publicity through voluntary organisations (including Rotherham Federation) as only 2-3% of referrals were received that way.</p>
<p>➤ It was noted that Hull City Council produce a leaflet for service users that details how to access the service, the Council's policy and the timescales for the service. The leaflet was found to be really helpful, in particular if used with health professionals and voluntary groups to promote the service to those most in need.</p>
<p>➤ Panel members agreed with senior officers that any leaflet should focus on people having access to an assessment process rather than making promises about the provision of aids and adaptations. This approach may well make sure that those most appropriate for the service receive it and that inappropriate demand is reduced.</p>
<p>➤ The Customer Service Centre on two occasions just gave out a phone number to ring when enquiring about aids and adaptations. It was felt that some people would prefer to receive a leaflet to decide whether it was appropriate for them to self-refer, particularly if face to face discussion was not an option and if they didn't have access to the internet.</p>
<p>Full report pages 12-14 and 17</p>

<p>Recommendation D: Publicise service expectations</p> <p>Develop a leaflet to hand to tenants when using the adaptations service that provides a summary of what they can expect from the service. This should also include the expectations on the tenant in receipt of the service.</p>
<p>The Evidence:</p> <p>➤ There is no written communication with customers that lets them know the timescales and expectations of the service.</p> <p>➤ It was noted by the panel that some delays are caused by customers not being available when the assessments/works are due to take place. It would helpful if these people are</p>

notified of the service expectations and that the lack of access to their homes will cause delays to the works.

- Officers agreed that publicity could be used to manage the expectations of people who may be considering the service i.e. that an assessment may not always lead to adaptations being approved; the anticipated timescales for completion of assessment processes.

Full report pages 18 and 28

Recommendation E: Written communication on the process

Ensure that written communication on the process is sent out once a referral has been made.

The Evidence:

- It was reassuring that people are being told roughly how long the adaptations will take; but there did seem to be large differences in the times promised (range of two weeks to 12 months for similar works when mystery shopping exercise was carried out). However, this information is given verbally.
- A previous pathway and quality standards document were available in 2011 on the Connect2Support website, which was useful to confirm timelines for customers to refer to for the adaptations service: However, customers are no longer referred to these web pages.
- The COT survey in 2018/19 quarter four received some negative comments about the time taken for referral – one person stating that three months was too long to wait for independence and another stating that it had taken eight weeks for an assessment after leaving hospital.
- The perception of time taken from referral to assessment differed considerably for most people, with some people thinking it had taken up to 32 weeks longer than it had.
- There was some disappointment that there is no written confirmation of when the referral was made and how long before an assessment visit/works would take place. It was thought that written communication soon after referral may well overcome issues with people thinking that the process was taking longer than it should.

Full report pages 18, 20 and 26-27

Recommendation F: Regular contact intervals

Agree, implement and monitor regular contact intervals to keep customers up to date with progress and works scheduling. A key contact approach would help with this.

The Evidence:

- The panel felt that one of the biggest issues for disappointment with the adaptations service was not being kept informed of progress and timescales. This could be overcome by the introduction of a key worker arrangement.
- Comments received from the Adaptations team survey 2018/19 included: *'They were unable to tell me when a decision would be made and how long it would take overall'*; *'We didn't know when the builders would turn up to do the work'*; *'Too long to wait in getting installed and had to get in touch by telephone'*

Full report pages 22 - 24

Recommendation G: Budget for urgent work

Make sure that some of the budget each year is kept aside for urgent work.

The Evidence:

- The adaptations budget does not include a contingency budget for urgent work, meaning that other routine works are delayed once an urgent case is referred to the adaptations team.
- The tenant Scrutiny panel found it unfair that works already ordered and in the adaptations' system were being delayed each time an urgent referral was received.
- By November 2019, the full year's allowance for Council owned homes adaptations in 2019/20 had been spent. No alternative funding could be found and this led to a long waiting list of work to be carried forward to the following year (13-14 weeks waiting list had already accumulated by January 2020). The panel were particularly concerned that the funding for adaptations had been spent five months earlier than planned, leading to a long list of adaptations waiting for the new financial year. The list could potentially include urgent works.

Full report pages 29-30

Recommendation H: Balance spending on minor and major adaptations

Assess the spending each year between minor and major adaptations to allow for separate budgetary monitoring for each.

The Evidence:

- The adaptations budget is not divided between types of work; major and minor adaptations are funded from the same budget; this could mean that excessive numbers of minor adaptations could lead to fewer major works being carried out and vice versa.
- The panel was worried about the increasing number of referrals and the lack of capacity to handle these. This supported the need for improved prioritisation to ensure that those most in need were receiving services first.

Full report pages 29-30

Recommendation I: Minor adaptations survey

Design, use and monitor a simple customer satisfaction survey for minor adaptations.

The Evidence:

- During the investigation the panel were able to view customer survey results for the COT team survey and also for the Adaptations team survey for major adaptations. However, it was confirmed that a customer satisfaction survey is not issued for minor adaptations.
- The panel felt that it would be useful to receive periodic feedback from people who had received minor adaptations in their homes.

Full report pages 31-33

The full report includes further detail of each recommendation and the related evidence, incorporating 'Panel Views' sections for ease of reading.

Suggested improvements

The following suggestions were considered to be outside the scope of this investigation but to be important improvements that could be made to RMBC services:

1.	Performance Monitoring - Consider splitting the ROKI indicator between minor aids/ minor adaptations and major adaptations?
2.	Assess savings - Test out how much money is saved across adult services by the adaptations service and request an increase in the current budget for this service.

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