

# Oxford City Council – Local authority in-house home improvement agency

## Good practice themes

- 1. Local publicity campaign to promote the existence of adaptation and related services to ensure greater equity in accessing support**
- 2. Produce service information that incorporates views of existing and potential service users**
- 3. Comprehensive Regulatory Reform Order including support for hospital discharge and falls prevention interventions**

## Context

Oxford City Council has the largest and fastest growing population (c.155,000) of any local authority area in Oxfordshire.

Until relatively recently the in house home improvement agency (HIA) was not seen as a constituent part of any corporate priority but the increase in the local DFG allocation through the Better Care Fund, coupled with a new HIA service manager wishing to operate more innovatively, has changed that perception.

Local politicians in key posts, especially the Housing lead and a member of the Health and Wellbeing Board with the disability brief, have also supported a radical change agenda with regard to provision of help with home adaptations.

# 1. Innovation in publicising local help with home modification and related services

The home improvement agency has undertaken a major local publicity campaign to raise awareness of possible home modifications and related services to enable safer, independent living.

In terms of background to development of the current local good practice one of the results of an Away Day in the County (entitled 'Huge Unbelievably Great Goals' and which involved several services) was the setting of a target that '100% of people in Oxford should live safely and independently'. It was recognised that to achieve such an ambition would require major changes in the way that individual local services worked independently and together.

The Oxford City home improvement agency service manager considered that knowledge of housing related support available to disabled people needed to be improved. Therefore a broad based campaign was put in place to raise awareness of available services both to the public and a range of organisations and services in health, care and the voluntary and community sectors.

This was a departure from the established approach because nationally there has been a reluctance to advertise Disabled Facilities Grants due to limited financial resources. However the Oxford HIA considered the increased DFG funding from the Better Care Fund sufficient to enable fairer access to adaptation services ig promoted in a managed way.

The campaign in Oxford City to encourage increased referrals to the expanded range of adaptation related services made available as a result of the revised Regulatory Reform Order, included the following:

- Appointment of a caseworker to coordinate the awareness raising programme
- A new service logo to promote community recognition and trust
- Meetings with key Social Care staff including triage staff in the Independent Living Centre
- Awareness raising with blue light services especially Fire Services
- Contact with key personnel responsible for hospital discharge and Better Care Fund planning, plus local GP Consortia g
- Use of media including local newspapers
- A series of meetings and presentations with a wide range of relevant community groups and their representative organisations
- A portable stand including a banner for promotion events in significant public spaces such as shopping centres. The banner is in a prominent place in the main council office when not used elsewhere
- Presence of an OT at events and meetings who can directly respond to queries, demonstrate simple items of equipment and initiate referrals immediately

## Impact of Publicity Campaign

The publicity campaign commenced in Autumn 2017. Prior to the campaign the rate of DFG referrals to the HIA was 38 in quarters 1 and 2 in 2017/18 but as the campaign gained momentum this increased to 53 in quarter 3 and 64 in quarter 4.

This level of enhanced activity has continued into 2018/19. There has also been a similar increase in referrals for the handyperson service (where the main beneficiaries are older people). The service manager is confident that this increase is attributable to the campaign rather than other factors. Currently the in-house HIA has sufficient resources to manage demand without compromising quality of the service user experience.

### Key Learning

- The awareness raising campaign had a very limited budget but a wide range of non-traditional approaches have been used to maximise impact often on a low or no cost basis
- Older people particularly reported wanting good quality, easily understandable information in hard copy form
- Having a caseworker leading on delivering the programme of events was of critical importance in being effective as is a visual logo for the home improvement agency
- Being viewed as a rapid, reliable problem solver for other services especially in the health and care sectors was a key to success (for example in falls prevention and hospital discharge)
- Operating on a basis of accepting self-referrals as well as referrals from a range of partner organisations and services has successfully increased the number of enquiries for assistance
- Local political support can be very useful
- Maintaining a long term commitment to engage with local people and organisations to identify and respond to existing and emerging priorities in the area is important
- Whilst there is a risk that increased demand could exceed local resources, especially for discretionary services, including appropriate phrasing in the adopted Regulatory Reform Order policy to protect mandatory assistance helps to manage that risk and avoids ambiguity and disappointment for service users.

## 2. Provision of home modification and related service information

The publicity campaign resulted in contact being made with older people and groups representing older and disabled people and carers. As older and disabled people constituted the majority of households receiving home modifications and other support services their views on preferences for information formats, content and style were recorded very carefully.

There was a clear message that older people in particular wanted good quality, relatively succinct, easily understandable information in hard copy form. Consequently a range of colourful leaflets have been designed and produced that reflect the services that were important to older people.

Specifically these leaflets represent components of the services set out in the revised Regulatory Reform Order, namely adaptations via the Disabled Facilities Grant, small repairs via the HIA's handyperson service, home improvement loan and energy efficiency assistance. Each leaflet has a different identifying colour signature but the service logo is consistent in each. Feedback from existing and potential service users has been very positive.

### **3. Introducing a Comprehensive Regulatory Reform Order**

The increased Better Care Fund DFG allocation to the city was the catalyst to diversify the local service offer and review the associated Regulatory Reform Order (see below).

However it was recognised that to provide a broader good quality service the HIA staff needed to have a more flexible skill base. Consequently all caseworkers and technical officers received training on dementia and home safety. There has been a conscious effort to focus on falls prevention and the HIA is now an integral part of the Oxford Falls pathway.

In addition, due to the publicity and because of the very open approach adopted in respect of accepted referral pathways into the service, it was anticipated that there would be an increased demand for adaptations assistance. Consequently an occupational therapist was employed by the HIA and housing grant administration processes were reviewed and speeded up. The OT, by agreement with Oxford County Council Adult Care, assumed responsibility for the majority of referrals for DFG assessment including self-referrals and those from the local hospital relating to hospital discharge or terminal illness. The handyperson service can in these cases provide key safes on the same day and deliver simple adaptation or associated works within 48 hours.

This new working relationship with the hospital discharge teams was a fundamental part of the publicity campaign in which the HIA consciously wanted to be viewed as a problem solver for NHS staff often struggling with delayed transfers of care associated with housing condition and facilities. In circumstances where the HIA cannot directly meet the assessed housing related needs of a patient they agreed to refer people to other community based services or raise funds through charitable sources.

The adopted home modifications policy for 2018/19 directly reflects the feedback from existing and potential service users generated during the local publicity campaign.

Full details on eligibility and conditions are set out in [www.oxford.gov.uk/downloads/download/934/housing\\_assistance\\_and\\_disabled\\_adaptations\\_policy](http://www.oxford.gov.uk/downloads/download/934/housing_assistance_and_disabled_adaptations_policy)

**Key features include:**

#### **Discretionary adaptation assistance**

Discretionary services related directly to disability are all funded by the Better Care Fund home adaptations allocation and in summary form comprise:

- **Adapted Homes Grant** – mandatory DFG works up to £8,000 which are not means tested (limited to one application per year).
- **Relocation Grant** – maximum £15,000 in cases where the existing home cannot be realistically adapted for long term occupation.
- **Discretionary Disabled Facilities Grant** – maximum £10,000 considered in exceptional circumstances as top up in cases involving scheme costs above the mandatory grant limit, financial hardship, adapting or providing a room for receiving specialist care or medical treatment at home.
- **Safe and Secure Grant** – delivered by the handyperson service. Maximum £1,000 in cases involving older disabled people, to meet cost of minor works that enable independent living, falls prevention and/ or, reduce hazards in the home. Also helps in cases involving hospital discharge or preventing hospital admission for works that cannot be funded from elsewhere. Examples include utility defects, repairs and some forms of adaptations.

### Discretionary Added Value Services

The HIA fully recognises that providing a DFG as a single intervention will not necessarily optimise outcomes for service users. Hence a range of additional assistance options have been included in the revised Regulatory Reform Order policy. The options available to older people include:

- **Essential Repairs Assistance** – maximum £5,000 per application to address security issues, heating defects and breakdowns, major hazards, dangerous structural elements, disrepair affecting health and adjoining properties, disrepair likely to involve rehousing from enforcement notices, very poor SAP ratings
- **Flexible Home Improvement Loans** – accessing funding from the city council's own resources of up to £1,000 per case from the South East Regional Housing Board to assist older owner occupiers to maintain their homes in a safe and warm condition
- **Small Repairs Scheme** – funded by the County Council but directly provided by the Oxford City HIA handyperson service for older and disabled people to maintain independent living. It is a chargeable service at £19 per hour plus the cost of materials. The list of eligible works is not prescriptive but mainly relate to small scale repairs and maintenance and does include falls and accident prevention checks and remedial actions. It is intended to give peace of mind to older people when they need a reliable contractor for smaller works.
- **Property MOT** – available to older home owners eligible for the Essential Repairs Assistance or the Small Repairs Scheme. The purpose is to identify anticipated repairs/ replacements or other property shortcomings to help householders' prioritisation of work and aid financial planning, including the possibility of loan options
- **House Boats** – maximum of £5,000 in any three year period to help cover essential repairs to meet the Canal and River Trust Boat Safety Scheme and energy efficiency measures. This assistance is in response to the significant increase in people living

in house boats as their primary residence in part attributed to the exceptionally high property costs in the city.

- **Mobile Homes** – similar to house boats above

### Impacts from RRO Policy

There have been various outcomes but the most notable have been;

- the virtual elimination of major adaptation cases not progressing due to financial hardship
- a more rounded suite of assistance services directly contributing to very positive outcomes, often from very modest cost interventions
- a significant increase in demand for handyman services

The following case study illustrates how a comprehensive system of assistance can help deliver outcomes greater than solely the delivery of a Disabled Facilities Grant.



Oxford City Home Improvement Agency received a phone call from Social Services staff based at the John Radcliff Hospital in December 2017. They had an 86 year old client, Mrs M, who owned her own house, was widowed and living on a low income. She had had surgery but was not being discharged as hospital staff had concerns about the habitability of her home resulting in delayed transfer of care (DTCO). Her home was cold, damp and unsafe, presenting a significant risk to her health and safety.

### How did we help?

- HIA staff met Mrs M in hospital to discuss necessary works to her home and to look into funding options
- Sourced contractors and obtained quotes
- Organised and supervised the building works
- Liaised with social services to arrange adequate respite for Mrs M whilst initial emergency building works took place

### Since the initial call the Mrs M has received funding for:

- Supply and installation of a new boiler with room thermostats
- Supply and installation of 7 new energy efficient radiators
- Removed unsafe gas fire and capped oven (oven has since been removed as client no longer uses it)
- Removal of Asbestos in kitchen
- New carpets
- New kitchen flooring
- New hallway tiles

- Obtained new equipment to reduce falls risk
- Removed trip hazards and replaced lightbulbs using Handyperson service

#### The grants used to help Mrs M were:

- Essential Repairs Grant
- Small repairs service
- Gas Safe
- Winter Warmth
- Minor Works
- Discretionary Disabled Facilities Grant
- Safe and Secure
- Mandatory Disabled Facilities Grant

#### Further help

- Mrs M has been allocated a social worker and a care package has been put in place
- Dementia advisors are helping explore community options including wellbeing centres and daybreaks
- Money Management are helping with her finances
- Support from a GP practice care navigator at OxFed [OxFed is wholly owned by Oxford's NHS GP practices and enables GPs across Oxford to work together to improve people's health and care throughout the city. Services are designed to free up GPs' time to focus on the earlier treatment and more proactive care that can help keep people out of hospital.]
- Mrs M is now settled she has accepted help with bathing and we are installing a wet room with associated works using a Disabled Facilities Grant (DFG)

After completion of works the 86 year old service user remarked that 'I did not think it [the repairs and adaptations] was going to make a difference, I really wasn't sure but it has and I am really happy'.

---

## Contact

Rebecca Bell, Home Improvement Agency Service Manager [RBell@oxford.gov.uk](mailto:RBell@oxford.gov.uk)

---

[Read the full report](#)