

RIBBLE VALLEY BOROUGH COUNCIL REPORT TO HEALTH & HOUSING COMMITTEE

Agenda Item No.

meeting date: 4 SEPTEMBER 2014
title: DFG FUNDING UPDATE
submitted by: CHIEF EXECUTIVE
principal author: RACHAEL STOTT

1 PURPOSE

1.1 To keep Committee updated with the LCC consultation and proposed changes to the DFG process.

1.2 Relevance to the Council's ambitions and priorities

- Community Objectives – To meet the identified housing needs of households in the borough.
- Corporate Priorities - N/A
- Other Considerations – N/A

2 BACKGROUND

2.1 For over 12 months there has been various consultation events considering how to improve the delivery of disabled facilities across the country.

2.2 This was first prompted by the introduction of Better Care Fund and NHS England planning guidance to allocate DFG funding to upper tier (LCC) rather than directly to local authorities.

3 INFORMATION

3.1 Please find attached presentation for the most recent event on 25 July 2014 which was attended by Councillor Hilton and myself.

4 RISK ASSESSMENT

4.1 The approval of this report may have the following implications

- Resources - Provision of DFG is a statutory duty that the LA are required to deliver. Therefore funding must be provided to the districts. However, there is a risk that some of the funding may be used to support improvements to the process across the county.
- Technical, Environmental and Legal - RV have always provided a DFG service with no waiting lists or delay to provision.
- Political - Across the county other boroughs have significant waiting times for DFG approval of over 12 months due to lack of funding.

- Reputation – RV have always maintained the position of no waiting list and it is important to applicants this is maintained.
- Equality & Diversity – No implications identified.

5 **CONCLUSION**

- 5.1 Important that Ribble Valley officers and Members are included in any consultation. There are only two districts across the County that have no waiting lists and therefore the majority of boroughs would like to see changes to the process.

RACHAEL STOTT
HOUSING STRATEGY OFFICER

MARSHAL SCOTT
CHIEF EXECUTIVE

For further information please ask for Rachael Stott, extension 4567.

REF: ES/EL/040914/H&H

Disabled Facilities Grants

Context

Clare Platt
Specialist in Public Health

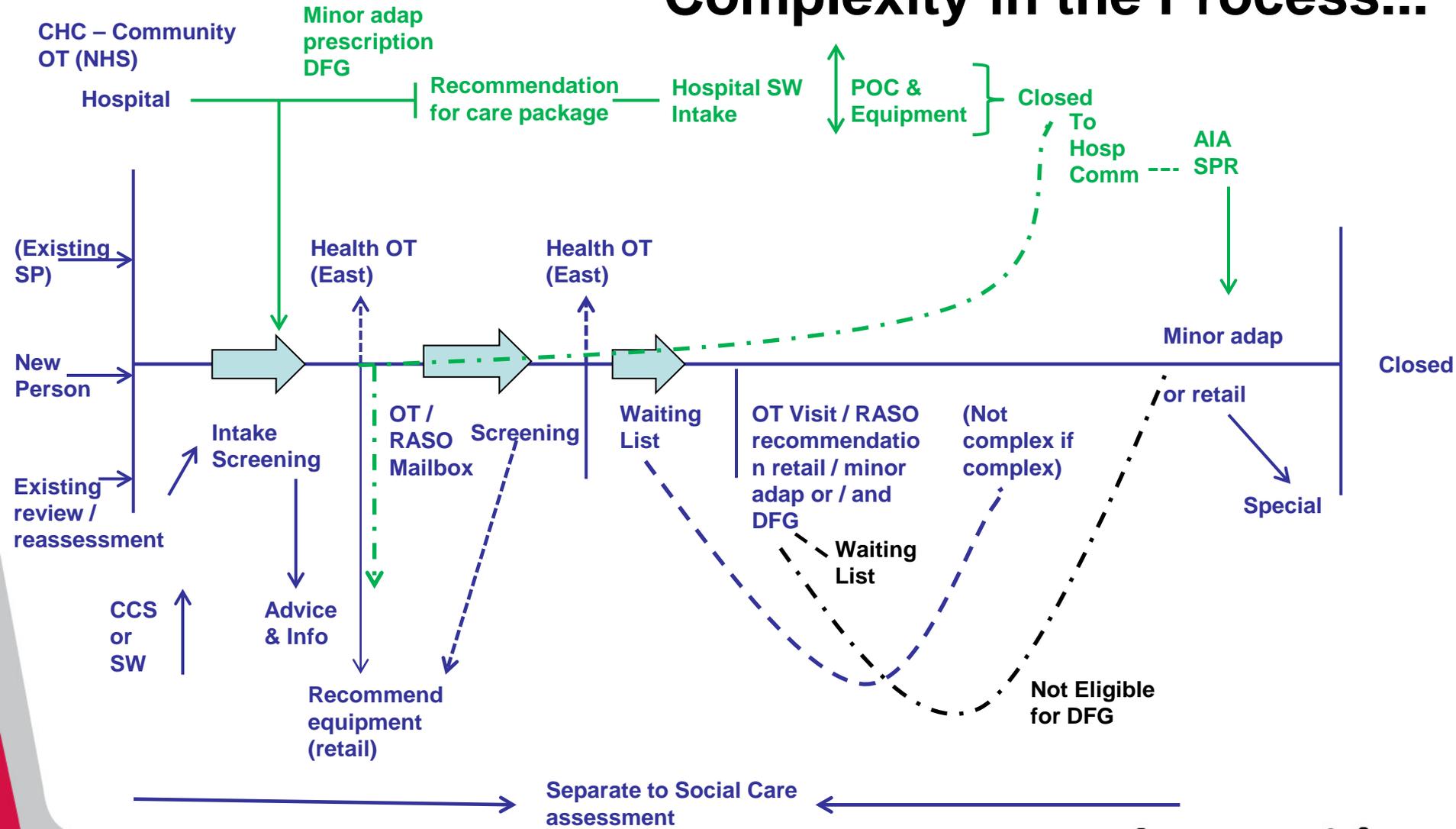
Capital Funding Allocations

Local Authority	2013/14 Initial Allocation	2014/15 Initial Allocation
Burnley	£855,717	£868,943
Chorley	£273,717	£285,619
Fylde	£370,717	£382,794
Hyndburn	£357,717	£369,041
Lancaster	£657,717	£673,344
Pendle	£360,717	£372,385
Preston	£515,717	£529,350
Ribble Valley	£113,717	£119,536
Rossendale	£357,717	£365,949
South Ribble	£237,717	£249,715
West Lancs	£441,717	£454,299
Wyre	£635,717	£655,125
Total	£5,178,604	£5,326,100

Future Funding

- via Better Care Fund from April 2015
- NHS England Planning Guidance
 - Funding to upper tier (LCC) to allocate to housing authorities
 - timely cascade of funding
 - indicative allocations
 - can top up

Complexity in the Process...



Possible Areas for Action

Include:

- Standardise approach to DFG funding & policy – scope & conditions
- Improve & standardise information & advice to clients re. access, process & options, including self-funding
- Pilot active waiting list management including the threshold for holistic assessment and provisional means testing

Possible Areas for Action Include:

- Standardise approach to minor adaptations
- Standardise processes for different adaptation including maintenance and charging criteria
- Work towards standardised approach to allocation of adapted properties through choice based letting processes; and funding of removals to adapted properties

East Lancashire CCG – DFG Pilot

Ann Smith
Area Commissioning Manager

Overview of the Pilot

- Business case presented to ELCCG Local delivery Group – request for £500k
- Rationale
 - Funding needed to meet demand in East Lancashire 3 x current allocation
 - Long waiting lists for DFG up to 18 months
 - 300 people waiting
 - Demonstrate that DFG can support savings for health and social care
 - Measurable impact of a persons wellbeing once adaptation completed

Process for allocating funding

- Occupational Therapist dedicated to the project
- Screened each of the waiting lists – 20% of people removed because they had either died or gone into residential care whilst waiting for the DFG
- Identified people who were at
 - high risk of falls – therefore at potential risk of admission to hospital
 - Risk of skin breakdown, infection
 - Unable to access the community or other parts of their home
 - Asked each identified person to complete a wellbeing assessment before and after

Case Study – Mrs A

- Mrs A is 76 years old, and lives in her own home with her 77 year old husband.
- Mrs A has previously been diagnosed with COPD, Diverticular disease, Osteoporosis, and has been having falls.
- Mrs A is mobile outdoors with a 4 wheeled walker She is mobile within the home with elbow crutches.
- recently been admitted to hospital for 1 week following a fall. unable to use bath equipment to get into the bath, and has had falls in the bathroom
- Her husband has recently had a stroke and has also had falls. He is mobile with a walking stick.

- A shower was recommended in January 2014, and she was placed on the DFG waiting list with the Borough Council.
- The couple were visited in April, by the OT working on the pilot, extra work was recommended
- They scored their level of satisfaction with how they were managing at this time as an average of **1.75** on a scale of 1 (not satisfied at all) – 10 (extremely satisfied).
- The therapists functional rating was scored at **2.5** on a scale of 1 (not able to do it) – 10 (able to do it extremely well).

- All Work was completed in July 2014 and the couple were visited to review their goals.
- Both are now able to shower independently and safely, and are able to safely step in and out of their home.
- Both scored their satisfaction levels at **10** on a scale of 1 (not satisfied at all) – 10 (extremely satisfied).
- The therapist functional rating was averaged at **9.9** on a scale of 1 (not able to do it) – 10 (able to do it extremely well).

The cost of works was £4868

Funding Allocations

Local Authority	2013/14 Initial Allocation	2014/15 Initial Allocation	2015/16 Anticipated Allocation
Burnley	£855,717	£868,943	£961,000
Chorley	£273,717	£285,619	£370,000
Fylde	£370,717	£382,794	£468,000
Hyndburn	£357,717	£369,041	£449,000
Lancaster	£657,717	£673,344	£783,000
Pendle	£360,717	£372,385	£455,000
Preston	£515,717	£529,350	£625,000
Ribble Valley	£113,717	£119,536	£161,000
Rossendale	£357,717	£365,949	£424,000
South Ribble	£237,717	£249,715	£334,000
West Lancs	£441,717	£454,299	£543,000
Wyre	£635,717	£655,125	£792,000
Total	£5,178,604	£5,326,100	£6,365,000