



# Home Adaptations for Disabled People

## Policy & Procedure

**September 2024**

Policy, Performance and Customer Care Team

Adult Social Care | Adults Directorate

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## Policy Summary

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<p><i>If you require this policy or any associated documents in another format (e.g. other languages, easy-read or any other format), please email details of your requirements to: <a href="mailto:ascservicedevelopment@halton.gov.uk">ascservicedevelopment@halton.gov.uk</a>.</i></p>	

## 1.0 Introduction

- 1.1 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.

## 1.2 Context

- 1.2.1 Through person-centred conversations social care practitioners can build a picture of the person's individual strengths, preferences, aspirations and needs. Housing adaptations are one approach that can facilitate people's independence and minimise the impact of a disabling home environment to help.

- 1.2.2 *'Home adaptations are changes made to the fabric and fixtures of a home to make it safer and easier to get around and to use for everyday tasks like cooking and bathing. Adapting a home environment can help restore or enable independent living, privacy, confidence and dignity for individuals and their families...*

*Adaptations give more people the choice to live independently and healthily in their own homes for longer, with fewer people staying in hospital unnecessarily or moving to residential care prematurely when that is not where they want to live. Adaptations can reduce the amount of formal care and support an individual may require, as well as often making the difference between being able to continue living in their current home or not'.<sup>i</sup>*

## 1.3 Scope

- 1.3.1 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 Policy](#)).
- 1.3.2 **Minor adaptations** are structural or non-structural works costing £1,000 or less, for example, handrails, grab rails, stair rails. These are provided free of charge.
- 1.3.3 **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 Prevention and Wellbeing Service 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 to meet their assessed needs.*

## 2.0 Legislative framework

2.1 Legislation relating to the provision of housing adaptations for disabled people is complex and cuts across several 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.*

## 2.2 Social Services

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

2.2.2 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 needs such services.

2.2.3 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, several 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).

2.2.4 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 are likely to feature strongly amongst preventative services.

2.2.5 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. Consequently, 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.*

2.2.6 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.

2.2.7 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.

2.2.8 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.

2.2.9 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.

## 2.3 Children

2.3.1 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.

2.3.2 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.

2.3.3 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.

2.3.4 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.

## 2.4 Housing

2.4.1 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.

2.4.2 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.*

2.4.3 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.

2.4.4 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.

2.4.5 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.

2.4.6 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. See the Home Assistance Policy.

## 2.5 Health

2.5.1 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.

2.5.2 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".

### 3.0 Underlying principles

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

#### 3.2 Stepped approach

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

1. 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.
2. Where it is established that major adaptations are required, the adaptation should be done within the existing footprint of the property.
3. Where extensive major adaptations are required, consider the possibility of assisting the disabled person to move to more suitable accommodation.
4. **(FOR DFG)** Should the adaptation required be beyond the scope of the existing footprint of the property and the possibility of relocating has been explored and ruled out, an extension within the boundary of the property to accommodate the required adaptation can be considered.

#### 3.3 Best value and cost effectiveness

3.3.1 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 considered, it is not the only consideration. The most cost-effective solution, that also meets the disabled person's needs, should be found,
- The stepped approach to considering the extent of adaptations will be used. If a more expensive option is available, the disabled person can pay the additional costs, provided that the adaptation is consistent with the needs of the disabled person and DFG processes.
- 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.
- For the most complex cases there is some discretion as to the level of flexibility that may be exercised in applying the processes detailed in this policy. The



Principal Manager of the Prevention and Wellbeing Service and the Home Improvement Agency Project Manager meet regularly to assess the most appropriate way forward for the most complex cases.

### 3.3.2 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 homeowner 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.

3.3.3 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, 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.

## 4.0 Procedure

### 4.1 Assessment and Eligibility

4.1.1 There are several legal avenues for the provision of home adaptations for disabled people. Assessment will take place to determine eligibility in line with the criteria under a relevant legislation described in the table below.

Legal avenue	Adaptations provided
<p>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).</p>	<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>
<p>Mandatory assistance (subject to eligibility) from local authority housing departments through a DFG in line with the Housing Grants, Construction and Regeneration Act 1996.</p>	<ul style="list-style-type: none"> <li>• Major adaptations funded through DFGs either using or not the Home Improvement Agency route</li> </ul>
<p>Discretionary assistance from local authority housing departments through local policies developed under the Regulatory Reform (Housing Assistance) Order 2002.</p>	<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>

## 4.2 The assessment process

4.2.1 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 Prevention and Assessment Service.

4.2.2 During the initial assessment process staff will gather information about the person's condition, consider which/how adaptations could enable them to maximise their independence in carrying out daily tasks using a balanced risk-taking approach, and explore whether all appropriate treatments, including rehabilitation, have been received.

4.2.3 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.

4.2.4 In considering solutions to improving a person's independence, in line with a stepped, strengths based approach, alternative methods of meeting people's needs (other than the provision of major adaptations) will always be considered first.

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

4.3.1 The disabled person and their family/carers will be fully involved in the assessment process and their views will be considered.

4.3.2 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.

4.3.3 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.

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

### 4.4 Deteriorating conditions

4.4.1 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.

4.4.2 Age and/or prognosis alone should not be a barrier to the provision of adaptations.

4.4.3 Due to the length of time required for building works, each case in which there is a deteriorating condition will be triaged by the Prevention and Wellbeing Service Principal Manager and Home Improvement Agency Project Manager. Where appropriate, and subject to clinical agreement, they can recommend that those with any condition that is likely to result in rapid deterioration, is highly debilitating or where the care is considered palliative and adaptations remain appropriate, follow the priority fast-track process. Such circumstances where it is appropriate for the fast-track process may include conditions such as MND or cancers, for example.

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

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

4.5.2 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.

4.5.3 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. In relation to behaviours of concern, understanding the purpose of the behaviour, the impact of the environment on the senses and understanding what happens in other environments and situations is needed. [Developing best practice principals for Children and Others referred for adaptations where behaviours of concern have been identified. Foundations 2024.](#)

4.5.4 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.

## 4.6 Minor Adaptations

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

4.6.2 It is accepted practice that minor adaptations costing £1,000 or less will be provided free of charge to the individual. HBC social services will fund minor adaptations for owner occupiers *and* private tenants.

4.6.3 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.

### 4.6.4 **Structural minor adaptations:**

- Handrails – external
- Half steps
- Extra paving to widen pathways
- Re-siting of sockets
- Additional sockets
- Re-location of light switches
- 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

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

- Grab rails
- Stair rails – not the primary rail
- Lever taps
- Drop down rails
- Floor fixing of toilet frames
- 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

4.6.6 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.

#### 4.7 Major Adaptations

4.7.1 Major adaptations are more substantial items ranging from level access showers to ground floor extensions. See the Major Adaptations Practice Guidance at appendix 2.

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

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 ceiling hoists;
4. Non-DFG route via Panel (Discretionary Support Loan).

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

#### 4.8 Major Adaptations – DFG route

4.8.1 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.). 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.

4.8.2 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.

*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.*

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

4.8.4 To be '**necessary & appropriate**', adaptations recommended by Occupational Therapist / Community Care Workers must be required to enable the disabled person to remain in the dwelling with a great degree of independence or 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.

4.8.5 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.

4.8.6 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**

- 4.8.7 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.
- 4.8.8 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.
- 4.8.9 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)**

- 4.8.10 The Council's Home Improvement Agency (HIA) 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. *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.*
- 4.8.11 **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)**

- 4.8.12 In Halton, land charges are placed on all owner-occupied properties where the DFG exceeds £5k, 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.
- 4.8.13 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 more than £5,000 up to a maximum of £10,000. However, repayment can be waived in some circumstances and at the discretion of HBC.

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

- 5.1 A Joint Funding Agreement is in place with most 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. *See the Process for Major Adaptations in Housing Association Properties at appendix 10 and the HBC/Housing Association Joint Funding Agreement at appendix 11.*

5.2 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.

### 5.3 Major adaptations – non-DFG route for ceiling hoists

5.3.1 Those who are assessed to need a ceiling hoist will have one provided via the Council's contract with the supplier. There is no means testing. The hoists are provided with a 5-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 5-year warranty.

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

5.4.1 A Discretionary Support Loan may be granted in exceptional circumstances to fund a shortfall in contributions due to financial hardship, this would be subject to a land charge. *See appendix 15 for more information on the Discretionary Support Loan / Panel process.*

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.
- The major adaptations are more than £30,000 (current DFG ceiling) and they report an inability to pay.

### 5.5 Major adaptations – VAT, warranties, maintenance and removal

5.5.1 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.

5.5.2 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.



5.5.3 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:

5.5.4 HBC are ineligible to claim back the VAT on these works, as although we are installing the equipment, ownership is then passed onto the client. HBC staff should arrange with the supplier to receive a copy of their zero VAT declaration documents and ensure that these are completed by the end user when the adaption works are agreed and prior to the invoices being raised. This will ensure that no VAT element is charged to HBC. Without this the supplier will continue to charge VAT to HBC resulting in higher costs being paid for the works.

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.

5.5.4 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.

5.5.5 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.

- 5.5.6. 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.
- 5.5.7 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.
- 5.5.8 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.

## 6.0 Complaints and feedback



- 6.1 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. More information on the complaints procedure is available on HBC's website:


[Adult Social Care](#)

[Children's Social Care](#)

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

## Appendices

Appendix	Document Name	Date of last update
<b>1</b>  IR9b Home Adaptations Policy Ap	Minor Adaptations Criteria and Guidance	April 2024
<b>2</b>  IR9b Home Adaptations Policy Ap	Major Adaptations Practice Guidance	April 2024

<b>Appendix</b>	<b>Document Name</b>	<b>Date of last update</b>
<b>3</b>  IR9b Home Adaptations Policy Ap	Purposes for which a DFG may be given – Guidance Notes (2015)	2015
<b>4</b>  IR9b Home Adaptations Policy Ap	DFG leaflet	July 2019
<b>5</b>  IR9b Home Adaptations Policy Ap	DFG process – HIA route	January 2018
<b>6</b>  IR9b Home Adaptations Policy Ap	Major Adaptations process flow chart (DFG route using HIA)	January 2018
<b>7</b>  IR9b Home Adaptations Policy Ap	HIA DFG process – forms, letters, leaflets, memos	November 2017
<b>8</b>  IR9b Home Adaptations Policy Ap	DFG using HIA leaflet	July 2019
<b>9</b>  IR9b Home Adaptations Policy Ap	DFG process non-HIA (private) route	November 2017
<b>10</b>  IR9b Home Adaptations Policy Ap	HBC process for major adaptations – RSL (housing association) properties	April 2019
<b>11</b>  IR9b Home Adaptations Policy Ap	RSL Joint Funding Agreement 2019-20 (agreement between the council and housing associations)	April 2019

Appendix	Document Name	Date of last update
<b>12</b>  IR9b Home Adaptations Policy Ap	Stair lift grant process	April 2019
<b>13</b>  IR9b Home Adaptations Policy Ap	Stair lift process flow chart	April 2024
<b>14</b>  IR9b Home Adaptations Policy Ap	Stair lift leaflet	July 2019
<b>15</b>  IR9b Home Adaptations Policy Ap	Discretionary Support Loan Process for Major Adaptations	August 2019

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<sup>i</sup> [Disabled Facilities Grant \(DFG\) delivery: Guidance for local authorities in England](#)  
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