

Disabled Facilities Grants: A system of help with home adaptations for disabled people in England- an overview

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1. Background

- 1.1. The provision of assistance for disabled people in England to modify their homes in order to restore or enable independent living, privacy, confidence and dignity is founded on a 'social model of disability'. This views disability as arising from the barriers presented by society and the built environment rather than being inherent in the person themselves¹.
- 1.2. The model recognises that whilst people have physical, sensory, learning ability and psychological differences, these do not have to result in disability unless society fails to make the necessary adjustments to ensure the inclusion of the individual, including modification of the built environment.
- 1.3. It is against this backdrop that a law was introduced in 1989 (amended in 1996²) to provide financial assistance from the state to help to meet the costs of adapting individuals' homes the Disabled Facilities Grant (DFG).

2. What is the Disabled Facilities Grant?

- 2.1. The DFG pays for essential home adaptations which can give disabled people better freedom of movement into and around their homes and providing access to essential facilities within the home. The main adaptations facilitate access to the living room, bathroom, bedroom, kitchen plus access into and out of the property.
- 2.2. The DFG also pays for adaptations to make the home safer for the disabled occupant eg. improved lighting, heating, soft surfaces eg for children with behaviour problems.
- 2.3. It is a mandatory grant ie. people have nationally defined legal rights concerning its provision.
- 2.4. It is means tested for adults but not for children. Only income and savings are taken into account in assessing financial eligibility. The value of the home is not taken into account, nor are the financial outgoings of the applicant.
- 2.5. The grant is managed by the local council which has housing responsibilities. This is not always the same council that is responsible for social care.
- 2.6. The maximum grant is £30,000. The average DFG is around £6,500.

¹ Dept for Communities & Local Govt (2006) *Delivering Adaptations for Disabled People: A good practice guide* ² s101 of the Housing and Local Government Grant 1989, updated in the Housing Grants, Construction and Regeneration Act 1996

- 2.7. Local councils do have the discretion to provide extra funds for adaptations which cost more than the DFG limit. This may be either a grant or a loan. Sometimes councils pay for adaptations which cost significantly more than the DFG £30,000 limit. This is particularly the case for very disabled children where the adaptation will enable the parents to care for the child and the alternative care costs in special institutions would be extremely high.
- 2.8. The most common adaptations are to bathrooms and for stairlifts/ ramps/ step access. Just over half of DFGs are for adaptations to the homes of older people.
- 2.9. Both home owners and tenants can apply for a DFG. In the case of the former a grant repayment charge may be placed on the property to recoup some of the grant when the property is sold. This is a matter for each local council to decide.
- 2.10. In the case of social housing tenants, there may be alternative funding arrangements to provide home adaptations.
- 2.11. Increasingly in areas of housing shortages, landlords and councils will often try to suggest that a disabled person should move to a more suitable home which requires less or no adaptation as an alternative to adapting the current property.

3. Who decides what a Disabled Facilities Grant will pay for?

- 3.1. The housing authority manages the DFG provision. It is most commonly a specialist housing practitioner (sometimes an environmental health officer) who assesses whether a particular home adaptation is *'reasonable and practicable'* and the housing authority usually asks social services (primarily occupational therapists) to assess whether an adaptation is *'necessary and appropriate'* to meet the disabled person's needs, as set out in housing law.
- 3.2. The means test for a DFG is applied by the housing authority based on nationally defined amounts and the calculation is the same across the country.
- 3.3. However, local authorities have a great deal of discretion with regard to their local systems of provision of grants for home adaptations in general. Some have simplified, fast track schemes offering non means tested grants to provide smaller adaptations and they apply DFG criteria only for larger works.

4. Financing DFG

- 4.1. National government sets a national DFG budget to assist local councils to provide DFG and makes a specific payment to each local housing authority. The national budget has been £220 million for the past three years.
- 4.2. Each local council sets its local budget based on a combination of the national grant, its own contribution plus in some instances, a contribution from social services plus occasionally from the health sector (this is in a state of transition hence not specifying which health body). It is worth noting that the DFG fund from national government is not ringfenced.
- 4.3. Around 40,000 DFGs are awarded each year. Unfortunately the amount of information collected and published nationally about DFG has declined year on year so it is difficult to be exact about the profile of DFG provision, the amount that local councils add to budgets from their funds, or even to identify how many even spend their allocation in full.

5. Scale of need and adequacy of the DFG system

- 5.1. Whilst the DFG undoubtedly results in significant improvements in quality of life and cost benefits to the state for thousands of people in England every year, the national and local budgets do not meet known need.
- 5.2. A DCLG commissioned analysis of DFG funding allocation and means testing carried out by the Building Research Establishment (BRE)³ estimated that the total amount required to cover grants for all of those who were theoretically eligible was £1.9bn at 2005 prices representing more than ten times the total amount of DFG funding allocated in England in 2009-10 (£157m).
- 5.3. Both the adequacy of the local budget and the quality of local provision is highly variable. In some areas budgets are under spent; in others they are vastly oversubscribed with reported delays in excess of two years for a DFG.
- 5.4. Some pioneering areas offer excellent integrated services, with 'Independent Living Centres', such as the highly regarded model in Knowsley, or the Bristol based Care & Repair's Centres for Independent Living.

6. Evidence of the benefits of DFG

- 6.1. In recent years there has been limited academic research into the impacts, fiscal or social benefits of DFG provision. The best comprehensive summary of the literature analysing their value is 'Better Outcomes, Lower Costs: Implications for health and social care budgets of investment in housing adaptation, improvements and equipment: A review of evidence ⁴.
- 6.2. This analysis was commissioned by a section of the Dept for Work and Pensions (DWP) in 2006 and concluded that home adaptations save public money in four key ways:
 - 1. Saving by reducing or removing completely an existing outlay eg. residential care or home care.
 - 2. Saving through prevention of an outlay that would otherwise have been incurred eg. prevention of accidents such as falls that result in hospital costs.
 - 3. Savings through prevention of waste eg. providing additional hours of home care whilst a person is waiting for an adaptation that will remove the need for that care package.
 - 4. Savings through achieving better outcomes for the same expenditure eg. adaptations improve the quality of life for 90% of recipients and have the added value of improving the quality of life for carers and other family members.
- 6.3. In the light of the need for more research in the field the national housing charity, Care & Repair England, is attempting to encourage more academic researchers to take an interest in this field and develop new proposals. It is simultaneously looking at how to encourage the research councils and government departments to prioritise such research and also aiming to make it easier for researchers to access beneficiaries and service providers. It has called this initiative 'Catch 22' and more information can be found on the website.

³ CLG (2011) Disabled Facilities Grant allocation methodology and means test: Final report

⁴ Heywood F & Turner L (2006) Better Outcomes, lower costs: Implications for health and social care budgets of investment in housing adaptation, improvements and equipment: A review of evidence, Office for Disability Issues and the University of Bristol

- 6.4. To date a group of researchers at the University of the West of England have developed a proposal for RCT based research into DFG (so far unsuccessful in securing research grant). The Building Research Establishment are working on a system of modelling the cost benefits of particular adaptations it is hoped that a report will be published in the late summer.
- 6.5. Further ideas and plans are at an earlier stage of development. Care & Repair England is managing a virtual network of academics and stakeholders following an initial sandpit which took place in 2014.

7. DFG - the future

- 7.1. In the face of austerity in the UK, every area of public expenditure is under close scrutiny. So far DFG has to some extent survived the reductions in national government funding for housing and local government activity more generally.
- 7.2. The amount that the national government provides for the funding of DFG has actually been maintained and even moderately increased over the past 5 years, largely in recognition of its very good cost benefit profile and the strength of the case put forward that DFG expenditure results in savings to health and social care.
- 7.3. Whilst the national government Dept responsible for DFG payments to local authorities (DCLG) has cut all of the DFG capital funding from its departmental budget, the Dept of Health stepped in and provided the national budget of £220m in 2014-15 and 2015-16.
- 7.4. The DFG money from national government is not ring-fenced and there are few 'checks and balances' with regard to implementation of statutory duties such as provision of DFG.
- 7.5. At a local level many DFG budgets have either remained static or been reduced despite increasing needs (eg. arising from factors such as population ageing, more disabled people living in mainstream housing, rising numbers of very disabled children surviving longer, often into adulthood, as a result of medical advances etc.).
- 7.6. Local government has experienced a 100% cut to its private sector housing budget from national government (total cessation of this grant stream took place in 2010). This was the main source of 'matched' or top up funds for local DFG budgets. Funding for social services has also been under considerable pressure.
- 7.7. The future of DFG funding is under national review (at July 2015). There is no national government funding allocated for DFG beyond March 2016 and provision will come under close scrutiny in the run up to the budget statement (Autumn 2015) and CSR.

8. Conclusion

- 8.1. Home Adaptations have an important role to play in delivering a policy vision which includes continued extension of independent living, delivery of health and care services at or closer to home, better management of long term conditions and prevention of high cost incidents such as falls in the home.
- 8.2. The need for an improved evidence base with regard to the value & impact of DFG is greater than ever in the new landscape of integrated health and social care and a pressing demand for efficiency savings in the NHS.

Sources of further information

Overview Documents & Resources

Heywood F & Turner L (2006) Better Outcomes, lower costs: Implications for health and social care budgets of investment in housing adaptation, improvements and equipment: A review of evidence, Office for Disability Issues and the University of Bristol

Adams S & Ellison M (2010) <u>Time to Adapt? Home adaptations for older people: The increase in need and future of state provision</u> Care & Repair England, Nottingham

Home Adaptations for Disabled People: A detailed guide to related legislation, guidance and good practice (2013)

This <u>report</u> published in October 2013 by the Home Adaptations Consortium sets out the legislation, guidance and good practice concerning Disabled Facilities Grant (DFG). The last pages include many key references and documents about DFG and adaptations law, research and good practice.

Home Adaptations Consortium DFG Good Practice Examples

Parliamentary Briefing about Disabled Facilities Grant (2013) The House of Commons Library See <u>Disabled Facilities Grant sn03011-1</u>

Miscellaneous

DCLG (Annual) English Housing Survey

Nicol S, et al (2010) Quantifying the Costs of Poor Housing BRE Information Paper 16/10: BRE Oswald F, et al. *Relationships between housing and healthy aging in very old age*. Gerontologist 2007;47:96--107

Lawrence RJ *Housing and health promotion: moving forward* Int J Public Health 2010;55:145-6 Chartered Institute of Housing, UK Housing Review, 2014, Table 17a

ONS Census 2011 data

Leonard Cheshire (2014) Home Sweet Home

English Longitudinal Study of Ageing (various) http://www.elsa-project.ac.uk/

Heywood F (2001) *Money Well Spent: The effectiveness of housing adaptations* Joseph Rowntree Foundation

Lloyd J (2014) *The Bigger Picture: Policy insights and recommendations* The Strategic Society & Independent Age

Alzheimer's Society (2012) *Home Truths: Housing services and support for people with dementia* DCLG (2012) EHS: Profile of English Housing

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