

Home adaptations for disabled people

Home adaptations can increase independence, help to prevent falls, reduce length of stay in hospital and delay care home admission.

But many older and disabled people are waiting years for the adaptations that could improve their lives and make the job of a carer more manageable.



Is it so much to ask?

- *To sleep in your own bedroom?*
- *To wash in your own bathroom and use a toilet?*
- *To cook your own meals?*

Is it acceptable for disabled and older people to:

- *Be 'strip washed' in the kitchen?*
- *Use a commode in the same room in which they eat, live and sleep?*

These are the real life consequences of a lack of help with home adaptations...

Help with home adaptations

Disability and older age often coincide with reduced income. A national system of financial help for home adaptations has evolved dating back to the 1970s.

Disabled facilities grants (DFG) are the main source of financial help with home adaptations. These are national, mandatory, means tested grants administered by all local housing authorities. Social Services

also have obligations to help people with adaptations.

Unfortunately, being able to get help with home adaptations is a postcode lottery. People are waiting years for help in some areas.

Charities and the Social Fund are increasingly being asked to pay for adaptations that are a statutory responsibility.

'When they return home after a fall or a stroke many people say that all they want is to be able to regain their independence. Without home adaptations we reduce them to depending on others, costing the state money and the person lacking choice and control in their lives'

Occupational Therapist

The impact of delays



Human misery

- Some disabled and older people are facing the undignified situation of living, sleeping, eating and using a commode in a single room. Others are crawling up the stairs on their hands and knees.
- Carers are left trying to look after a disabled person in ways that are difficult and demeaning.

Higher costs to health and social care

- There is a growing body of evidence demonstrating that installing home adaptations can cut health costs eg. by reducing accidents and speeding up hospital discharge.
- Adaptations can reduce social care costs eg. by reducing the cost of a care package or delaying admission to residential care.

"Under-investment in DFGs is leading to a waste of public resources. The Audit Commission has calculated that one year's delay in providing an adaptation to an older person costs up to £4,000 in extra home-care hours." OPDM, Reviewing the DFG Programme, 2005

'My nephew, who is my carer, does not have to help me so much'
Mr M (level shower)

'Because of the adaptations I can continue to live independently and feel safe in my own home near my family and friends. You can't believe how much this means to me.' Mrs H, 78 yrs



Why is this happening?

Rising need, reducing budgets and, in some cases, shortcomings in administration are the main reasons for adaptation delays.¹

In some places fast, effective systems and a high priority for funding mean that home adaptations are installed rapidly and efficiently.² In other areas the money that is allocated for adaptations is not enough to meet local need.



¹ *Care & Repair England (2009) Time to Adapt*

² *Foundations (2010) Adapting for a Lifetime*

Because local authorities are no longer legally obliged to match the DFG funding that they receive from central government, some local adaptations budgets have been cut.

Funding changes mean that more housing associations are advising tenants to apply for a DFG whereas in the past they may have done the adaptations themselves.

A serious problem is that money for adaptations comes from a housing budget but the main financial gains are in health and social care, hence lower priority is given than might otherwise be the case.



Still waiting ...

Mr Green is 78 and has lived in the same home for 30 years. Since a stroke 18 months ago he has been a wheelchair user. His wife was his full time carer until her death 6 months ago.

After the stroke he was referred for a grant (DFG) for adaptations in the kitchen and a downstairs bathroom. He is currently living in one room with a commode and being strip washed.

Two carers come to his home three times a day. With the right adaptations he could significantly reduce the number of visits by carers – in his opinion reducing to twice a week.

Life transforming ...

John is one of four children. He is 14 and has a degenerative muscular condition necessitating wheelchair use and full time care by his parents. He is the size of a large adult and his father was having to 'manhandle' him up and down the stairs. The only downstairs space that he could access in his wheelchair was an old lean-to.

A DFG of £31,000 paid for a ground floor bedroom and bathroom, a ramp to the garden and access to the main living room. The family says that this has transformed all of their lives. If the care situation had broken down (as was looking likely without the adaptations) a residential placement would have cost more than £1,000 per week.

In our own words – the impact of home adaptations

'I don't struggle so much, my breathing gets very bad, but I'm not taking so much medication or going to the Doctors so much and I don't get so depressed. It's helped me so much.' Mr G, (stairlift)

'I live on my own, but it's given me a new lease of life,' Mrs P, (stairlift)

'It has improved my life so much. I can get out my front door without help.' Mr A (front door ramp)

'No one will ever really understand how much this adaptation has helped us with looking after our son.' Mr & Mrs D

'... it has changed my whole life for the better and given me back my independence.

For the first time in 12 years we sit downstairs as a family and I am not stuck up in the bedroom.'

Mrs L (through floor lift)

Action needed to improve home adaptations



By National Government

- Create a new national adaptations system fully integrated into national care and health provision
- Set an 'honest contract' between the state and individuals concerning help with home adaptations
- Make it clear to disabled people living anywhere, in any tenure, how to get this help
- Promote replication of local models of excellence in adaptations provision

By Local Authorities, Health & Social Services

- Housing authorities, health, social services and housing providers take a holistic look at the need for home adaptations and adopt radical new systems, and even pooled budgets, to enable rapid, integrated provision
- Local authorities grasp the opportunity to adopt new models of excellence to provide fast, efficient help with home adaptations
- Local authorities set realistic adaptations budgets to enable them to meet their legal obligations and responsibilities to disabled and older people

"The District Council had not allocated enough funding to meet the demand for DFGs. It should have identified the problem and considered transferring money into the DFG budget sooner than it did. Mr J was one of many disabled service users who waited many months due to inadequate funding." Local Government Ombudsman, 2009