

# **DRAFT PORTFOLIO HOLDER DECISION NOTICE**

PROPOSED INDIVIDUAL DECISION BY THE LEADER AND PORTFOLIO HOLDER FOR HOUSING FOR CONSIDERATION OF A DISCRETIONARY DISABLED FACILITIES GRANT

#### PROCEDURAL INFORMATION

The Access to Information Procedure Rules – Part 4, Section 22 of the Council's Constitution provides for a decision to be made by an individual member of Cabinet.

In accordance with the Procedure Rules, the Head of Legal Services (Interim), the Chief Executive and the Strategic Director: Resources are consulted together with Chairman and Vice Chairman of The Overview and Scrutiny Committee and any other relevant overview and scrutiny committee. In addition, all Members are notified.

If five or more Members from those informed so request, the Leader may require the matter to be referred to Cabinet for determination.

If you wish to make representation on this proposed Decision please contact the relevant Portfolio Holder and the following Democratic Services Officer by 5.00pm on 4<sup>th</sup> October 2018.

<u>Contact Officers: Case Officer:</u> Lindsey Steel – PSH Occupational Therapist Tel. 01962 848 288 / Email:LSteel@winchester.gov.uk

<u>Democratic Services Officer</u>: Matthew Watson Tel. 01962 848 317 Email: MWatson@winchester.gov.uk

#### **SUMMARY**

- To approve a discretionary Disabled Facilities Grant (DFG) for an allocation of funds to a specific client. In accordance with the published DFG Policy and Procedure and the Cabinet (Housing) Committee Report CAB3051 of 4<sup>th</sup> July 2018
- The DFG amount required is £ 245,560.55 (£30,000 of which is a mandatory DFG). It is important to note that this is an exceptional case, demonstrating an overall saving to the public purse by using a housing solution to meet the applicant's needs. Allowing the applicant to remain living at home with his supportive family.
- The Better Care Fund (BFG) programme introduced in 2016/17 doubled the Council's DFG budget. The programmes intention spanning both the NHS and Local government seeks to join-up health and care services, so that people can manage their own health and wellbeing, and remain living within their home and community.

 Link to the Council Strategy. Outcome 3 Improve the health and happiness of our community

#### PROPOSED DECISION

That the Council agree to provide a £245,560.55 grant, made up of a £30,000 mandatory grant and a discretionary grant of £215,560, in line with the DFG Grant Policy.

The decision is proposed in line with the proposal on grant approval and delegated financial authority limits in CAB3051 agreed at Cabinet (Housing) Committee on 4th July 2018.

That, as provided for in the DFG Policy, the grant is awarded on condition that the family agree to a local land charge being placed on the relevant property requiring repayment of the grant on sale or transfer of the property within 10 years after completion of the works, or on the death of the applicant within that period.

# REASON FOR THE PROPOSED DECISION AND OTHER ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

# **Initial summary of needs:**

The applicant will be refereed to as TB.

TB is 21 years old and sustained a high level spinal injury which has left him paralysed from the neck down. As a result of this he has frontal lobe damage which has left him with uncontrolled epilepsy. He has been assessed as needing two carers over a 24 hour period as he is at high risk of spinal shock which could worsen his condition.

Currently, TB lives with his mother and father as well as four siblings in a privately rented home. This property doesn't have enough space to accommodate a live in carer and cannot be adapted to maximise TB's limited independence and safety.

Mother and siblings currently provide 24 hour care in addition to the limited professional care TB receives. Father works fulltime. The current situation is taking its toll both mentally and physically on the whole family unit as their housing is inadequate and does not allow for professional live in carers to support TB and the family.

#### **Grant Assessment Process**

The family have already purchased a suitably sized house with sufficient footprint that will allow for essential adaptations, although they must remain in their privately rented home until their new home is suitably adapted.

The applicant and his family have engaged a consultant architect to design the project, invite and assess bids from contractors, and oversee the project to completion. The scope of the design has been monitored and refined by the Private Sector Housing Team to ensure that all works proposed meet the requirement for the grant only to be awarded for works that are necessary and appropriate and that are reasonable and practicable to complete.

Three contractors were initially approached, following which the design was revised to reduce and limit its scope and the invitation to bid was re-issued. One contractor withdrew from the process, and of the remaining two, THS Building Ltd provided the most competitive quotation at £ 245,560.55.

In order to seek a further comparison, and to apply a test of reasonableness to the bids, Osborne, the council's in-house contractor were invited to provide a quotation and the price submitted was £297,190.97.

Determination of the amount of grant being offered has been carried out in accordance with the stated policy and in this case the grant being offered is based on the bid from THS Building Ltd.

The Council's Contract Procedure Rules do not apply to Grants (see Contract Procedure Rules 2.2), and in accordance with the DFG Policy, the final choice of contractor rests with the applicant, provided their bid also meets the conditions for the grant.

The contract for works will be between the applicant and their chosen contractor and for services between the applicant and their consultant. The Council will release monies in stage payments on satisfactory completion of stages of works in consultation with the applicant's consultant.

#### Alternative options considered and rejected:

#### 1. HCC Residential care home placement

TB's expressive wish is to live at home. To move TB to a residential care home would be against his and his families' wishes and would be very costly to the public purse. It is also contrary to the expected outcomes of the BCF and local authority joint funding programme.

A residential or nursing home placement would cost the public approximately £2000 per week. Over just three years this would equate to £312,000. In comparison the current costs to adapt the family home is £245,560.55 with the DFG spend recouped within less then two years. This example does not take into account the total spend for a lifetime of residential care or that accessible housing provision also enables further savings with professional care being carried out at home.

#### 2. Independent living with 24 hour carer support

TB has uncontrolled epilepsy and needs support and care from more than one carer, which is currently enhanced by family members. TB is also emotionally younger than

birth years and unable to sustain independent living. This option would be very detrimental to his wellbeing and puts his life at risk should he be left without care or supervision for any periods of time.

#### 3. Social Housing

Explored with the Council's housing panel and Registered Housing Providers which determined there is no existing housing stock to suit TB's needs which could also accommodate the whole family. The New Homes teams have provided an estimate of costs to build a new bespoke council property to accommodate the whole family and TB's carers. It is estimated that the cost to the Council would be in the region of £400K- £500k prior to customising. This would not be financially viable compared to the cost of the DFG request to adapt the family's current owner occupied property.

#### 4. Duty of Care discharged back to HCC and NHS

To refer the case back to HCC Adult Health and Social Care team to secure alternative housing and care options to meet TB's needs. A meeting with the Assistant Director of Adult Health and Social Care and HCC Commissioners confirmed that a DFG aided housing solution is the most viable option. It was also agreed that the purpose of the "Better Care Funding" being devolved to local housing authorities was to secure housing solutions as proposed within this PHD.

The only alternative for HCC and Health services is a long term residential care home placement. (Rejected in point 1)

#### 5. Adapt existing temporary housing

The family do not have security of tenure and only intended to move to their current rented property as a stop gap while the family relocated to Winchester due to a new job opportunity and prior to TB's life changing accident. This is not a long term solution or best use of the DFG and BCF programme and is not reasonable or practicable to expect of the landlord.

**6.** Buy new property suitable to support TB's needs with minimal adaptation. There is a lack of suitable sized properties in the Winchester area and these are beyond the families' finances.

The remaining alternative was to find a property suitable for major adaptation and within the family's budget in its current size and condition. The family were successful in finding a suitably sized house with sufficient footprint that will allow for essential adaptations and it is this to which the grant will apply.

#### **RESOURCE IMPLICATIONS:**

- There is a risk that the DFG and BCF programme is underspent with funds reallocated to better performing Hampshire authorities.
- The Council receives a BCF grant annually of over £1m (£1,005,453 for 2018/19) for the purpose of funding disabled facilities works in accordance with the local BCF spending plan. This aims to fund mandatory grants and

also additional discretionary assistance that enables residents to remain in their homes and sustain independence and importantly facilitating early discharge from hospital. In addition, there is £472,000 of unapplied grant available from underspend in prior years.

• The budget for 2018/19 is £1.2m.

# DATA PROTECTION IMPACT ASSESSMENT (If none, state "None required")

None required as the DFG Agreement Authority and Terms and Conditions form incorporates GDPR requirements.

# CONSULTATION UNDERTAKEN ON THE PROPOSED DECISION

Officers consulted with Hampshire County Council Adult Health and Social Care, Foundations (the organisation appointed by MHCLG to provide advice on DFGs to local government), Chief Housing Officer, WCC Property Services and local Registered Providers.

# FURTHER ALTERNATIVE OPTIONS CONSIDERED AND REJECTED FOLLOWING PUBLICATION OF THE DRAFT PORTFOLIO HOLDER DECISION NOTICE

DECLARATION OF INTERESTS BY THE DECISION MAKER OR A MEMBER (	ЭR
OFFICER CONSULTED	

N/A

#### **DISPENSATION GRANTED BY THE STANDARDS COMMITTEE**

N/A

Approved by: (signature) Date of Decision

Councillor Horrill – Leader and Portfolio Holder For Housing

#### **APPENDICES:**

Appendix 1- Supporting commentary on why each element of the proposed work is required

#### Appendix 1

#### **Supporting Commentary and Proposed Plans:**

The principle on which it is proposed to make this award has already been addressed. It has been accepted that the most appropriate solution to meeting the client's needs is to adapt the house that the family have bought to both accommodate the client and his necessary professional carers and to accommodate the remainder of the family on whom he relies for additional care and support. Other solutions have been considered and rejected for reasons of lack of available suitable properties or for reasons of practicality.

Under s24 of the Housing Grants Construction and Regeneration Act 1996 ('the Act'), in respect of DFG applications Officers are required to determine what is "necessary and appropriate" to cater for the client's needs and to ensure that what is proposed is both "reasonable and practicable" to achieve. While not being an exhaustive list, s23 of the Act, the underpinning legislation for DFGs, provides a range of purposes for which a grant must be awarded. The key elements of the works proposed under the award will be considered with this in mind.

The property as it stands is a 1960s built chalet style property with living room, dining room, small kitchen and small bathroom, and small bedroom on the ground floor and two bedrooms on the first floor which occupies one side of the footprint only in the chalet roof.

The family comprises of the client, his parents, and his 4 brothers (2 adult and 2 teenage), plus there is a need for a dedicated room to accommodate the 24hr carer, so clearly there is considerable reconfiguration work required to make it usable for the family and for the client's needs in particular.

#### **Key elements:**

# **Ground floor extension**

# Provision of bedroom and bathroom for the client

S23 (1) (d) (e) (f) of the Act covers the provision of a room suitable for sleeping, a lavatory, and a bath or shower. The client is a wheelchair user so, practicably, this is best provided on the ground floor. The existing room sizes on the ground floor would be insufficient to reasonably adapt to meet this need and hence construction of a ground floor extension is necessary and appropriate to meet this need and must include a bedroom and bathroom of sufficient floor area to enable full access by wheelchair.

#### Provision of accommodation for live-in professional carers

S23 (2) allows for the provision of necessary adaptations to make the dwelling suitable for the welfare of the client. The client has funding for live in carers and it is clearly necessary and appropriate to provide such carers with accommodation

immediately adjacent to the client and ideally reasonably separable from the rest of the family for reasons of each others privacy and practicality. It is therefore necessary and appropriate that the ground floor extension be of sufficient size to also accommodate the carer's accommodation of bedroom and bathroom.

# **Accessibility**

# Provision of level access both to and within the dwelling

S23(1)(a)(c)(h) cover the provision of access to and from the dwelling and to a room used as a family room and to facilitate preparation and cooking of food by the client. s23 (1) (d) also concerns making the dwelling safe for the client and any persons living with them.

It is necessary and appropriate to provide level access from the driveway by the provision of a level surfaced parking area and suitable pathways leading to access doors to the property. For practicality of access when with the carer the scheme includes direct level access from outside into the client's bedroom without entering the main family accommodation as well as level access to the front and rear doors of the main accommodation. All entrance doors will need to be wheelchair accessible.

The internal ground floor circulation space needs to be wheelchair accessible from the client's accommodation to the family kitchen and living room. The existing timber flooring is to be retained but thresholds will need to be removed and doors widened to be wheelchair accessible. Access from the client's ground floor accommodation in the new extension requires reconfiguration of the existing ground floor layout resulting in the loss of most of the floor area of the existing ground floor bedroom.

The existing kitchen is not currently of sufficient size to provide safe access for a wheelchair user, and is also significantly undersized for a family of 7. Reconfiguration of the ground floor is therefore necessary and appropriate to both facilitate the preparation and cooking of food by the client and to make the building safe for use by the client and the family.

To provide a kitchen of sufficient size and at the same time retain a family living room of sufficient size, this reconfiguration reasonably requires a ground floor extension to the rear of the property. Running this extension across the full width of the rear of the property recovers the lost floor space of the ground floor bedroom when providing access from the client's accommodation.

#### Services and amenities

#### Heating system

S23 (1) (i) covers the provision of a heating system either by improvement of an existing system or the replacement of an existing system with one suitable for the

property and the needs of the client. The existing system is both old and of insufficient output for the extended property. It is therefore necessary and appropriate to replace it.

#### Electrical installation

S23 (1) (b) covers making the dwelling safe for the client and those living with them. The existing installation is largely the original installation and is considerably insufficient both for the extended building and for the additional modern day electrical supply demands of a large family and the equipment associated with the client's needs. It would be impractical to modify the existing installation and more reasonable and appropriate to replace it.

#### Sanitary amenity

S23 (1) (b) covers making the dwelling safe for the client and those living with them. The only current bathroom is small. It is also located between the existing kitchen and the ground floor bedroom, both of which will be within the proposed rear extension, and it is therefore reasonable and practicable to relocate the ground floor bathroom within this extended area. The main house will be occupied by the remainder of the client's family, 4 adults and 2 teenagers, and one full bathroom would be considered insufficient under our own standards as applied to HMOs. Provision of a second full amenity (bath/WC/WHB) on the first floor is therefore reasonable for the heath and welfare of the occupants. To provide suitable falls to the mains, the foul drainage will need to feed to a new manhole chamber built on the site.

#### Utility space

S23 (2) allows for adaptations to protect the welfare of the client. The reconfiguration of the downstairs bathroom amenity allows for the provision of a small utility space. The client will have high laundry demands and the provision of this space enables a dedicated laundry facility for the client's welfare needs.

Summary – the above items are all necessary and appropriate for the client's needs and can be demonstrated to meet the criteria of s23 of the Act. The following do not specifically fit the s23 criteria but in reality are necessary for the purpose of the award and are therefore discretionary matters.

#### Family accommodation and general building works

# Provision of bedrooms spaces

The remainder of the family need to be accommodated and the existing property has a current dining room and ground floor bedroom (reconfigured by above works) and 2 first floor bedrooms. The family needs 1 double room for the parents and 4 single rooms for the 4 brothers. Two of these single rooms are provided by the existing dining room and reconfigured bedroom, providing two bedrooms of approx. 3.5m x3.2m.

The existing upstairs bedrooms will also need to be reconfigured – the rear one because of the ground floor rear extension to the kitchen, bathroom and bedroom

adjusting the roofline, the front one because of the installation of the second bathroom. A further bedroom can then be created in the re-constructed roof over the living room and kitchen.

To accommodate the changes in internal configuration there are necessary building works involved to the existing structure including changing the roof line due to the new rear extension and to meet with the new side extension. Many existing internal walls need to be removed and/or repositioned and this has a knock on effect on flooring, doors and frames, ceilings etc. Where possible, existing doors and windows will be retained.

There are necessary preparatory works including the removal of existing structures and surfaces to enable building works to commence.

The proposed grant is specifically not making allowance for carpets or flooring, except for those areas specifically required to be accessible to the client. It is not making allowance for anything more than basic white/magnolia paint finishes throughout or more than basic white tiling in bathrooms. Room lighting will be provided by simple lighting pendants. The kitchen fittings will be provided and installed by the client to their own choice.