



# MEDICAL ADAPTATIONS POLICY

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## **1. Medical Adaptations Policy Statement**

The purpose of this policy is to ensure that our homes is responsive to the particular needs of applicants for our homes and the changing needs of our existing tenants. Medical adaptations to homes can have many benefits, including allowing residents to live independently and remain in their home for longer.

This policy supports a 'person-centred' approach to assisting tenants to remain in their own home for as long as possible. Adaptations are paid for by the Association but are subject to the availability of funding.

The Housing (Scotland) Act 2006, further amended by the 2008 Act, the Equalities Act 2010 and the Public Bodies (Joint Working) (Scotland) Act 2014 and the Social Work Act of 1968 Section 4 are the statutory requirements which underpin this policy.

## **2. Achieving Good Practice**

To ensure good practice in the provision of medical adaptations, the Association will endeavour to:

- Ensure effective communication and maximum consultation with the tenants involved.
- Comply with relevant legislation and planning regulations.
- Comply with health and safety guidance and regulations.

## **3. Identifying Needs**

There are various parties who may identify the need for a particular adaptation to a property.

- The tenant (or their family and friends) – may report a difficulty experienced with a physical aspect of his/her home life.

- The General Practitioner/Social Services/Occupational Therapist or other professionals may report on a health-related matter.
- A member of staff may identify a medical adaptation required in the tenant's home.

#### **4. Applications for Medical Adaptations**

Most requests for medical adaptations will be referred to an Occupational Therapist with a request for a report with recommendations. We can however ask for support from a variety of health care professionals upon receipt of the Occupational Therapist's/health care professional's report. Requests for medical adaptations will be prioritised as follows:

##### **Priority 1** Tenant or Carer at immediate risk.

- Tenant unable to carry out essential daily activities without the adaptation.
- High probability of requiring admission to care if adaptation not provided.
- Adaptation essential to enable hospital discharge.

##### **Priority 2** Tenant or Carer imminently at risk of injury.

- Tenant has difficulty in carrying out essential daily activities.
- Probability of breakdown in living arrangements if adaptation not provided.
- Adaptation required to prevent deterioration in health.
- Adaptation required to enable normal development of children.

##### **Priority 3** Safety and well-being is potentially at risk in normal daily activities.

- Tenant has difficulty carrying out essential daily activities but has suitable support.
- Adaptation required to promote independence of disabled, vulnerable and elderly persons.
- Adaptation required to prevent needs for more costly alternatives.

**Priority 4** Adaptations to promote quality of life.

- An adaptation that is additional to essential requirements.

## **5. Approval for Applications**

In most circumstances, medical adaptations involving major works, shower installations, wet room installations etc, will only be approved for properties situated on the ground floor, on the first floor or an upper floor of a property served by a common mechanical passenger elevator.

In the case of Priority 1 and Priority 2 applications, Senior Managers within the Association may at their discretion vary this guideline subject to:

- A full case review of the application.
- Receipt of professional advice and recommendations.
- Receipt of a technical report regarding the property's suitability for adaptation.

In all circumstances, where an application has been received and the Association concludes that the property is not suitable for adaptation, the Association will write to the applicant and clearly explain why the application has been refused.

## **6. Priority Criteria**

The Occupational Therapist will indicate the level of priority on all referral forms returned to the Association. The level of priority will be binding on all applications.

The referral forms will be grouped by level of priority and sorted in date order within their priority group.

Unless otherwise directed by the Occupational Therapist or some other health professional, adaptations will be delivered in the following order:

- 1<sup>st</sup> Priority 1 Applications in date order
- 2<sup>nd</sup> Priority 2 Applications in date order
- 3<sup>rd</sup> Priority 3 Applications in date order
- 4<sup>th</sup> Priority 4 Applications in date order

Priority 3 and Priority 4 applications that comprise of minor works that do not require any formal, regulatory or statutory approval may be delivered in tandem or ahead of sequence, subject to the Association having the capacity to accelerate or vary these repairs without detriment to the overall delivery of Priority 1 and Priority 2 applications.

## **7. Delivering Medical Adaptations**

Medical adaptations will be delivered using the Medical Adaptations Application Procedure, see separate document.

When an Adaptation Application is received, ng homes' Repairs Officer will review the asbestos register to confirm if a suitable asbestos report is available. If no relevant asbestos report is available, the Repairs Officer will instruct a Refurbishment Survey to clarify if Asbestos Containing Materials (ACMs) are present.

The contractor carrying out the medical adaptation will review the report and confirm they are satisfied they have the necessary asbestos information prior to commencing work on site.

## **8. Customer Satisfaction**

Upon completion of a new medical adaptation, the Repairs/Technical Officer will:

- Complete a post inspection of the work in conjunction with the referring body, tenant and contractor.
- Invite the tenant to complete the post inspection satisfaction survey.

- Resolve any outstanding snagging or defect before authorising the payment to the contractor.
- Retain an electronic copy of the post inspection including satisfaction survey form in the Housing Management System.

## **9. Medical Adaptations During Construction or Major Refurbishment**

Where allocations are made to families or individuals with particular needs, during the early stages of construction or major refurbishment work, the Association will seek to prevent disruptive work at a later stage by incorporating adaptations into the construction or major refurbishment works. This will be subject to the agreement of all parties and the appropriate technical suitability of the property.

## **10. Temporary Adaptations to Decant Properties**

Where a tenant moves to a decant property during a period of major refurbishment, the Association will consider providing temporary adaptations, subject to:

- The recommendations of an Occupational Therapist.
- The decant property's suitability for adaptation.

## **11. Allocations**

The Association will seek to match applicants with particular needs to suitable medically adapted properties that are available. We will always strive to let medically adapted properties sensitively, so that previous investment in adaptations is protected and preserved for the benefit of the wider community.

## **12. Funding and Priorities**

Funding for adaptations to ng homes stock comes to the Association through the Scottish Government Affordable Housing Supply Programme (AHSP). In Glasgow, it is administered by Glasgow City Council Neighbourhood and Regeneration Services (GCC NRS) from the Transfer of the Management of Development Funding (TMDF) budget.

Ng homes will make an application to GCC NRS on an annual basis for funding for adaptations. The funding allocation for adaptations will be agreed annually and included within the Association's Grant Planning Target (GPT) ng homes will seek to maximise opportunities for additional funding where this becomes available.

Funding from the above budget is only available for tenanted properties and not for shared ownership/shared equity or owner-occupiers.

## **13. Other Related Strategies, Policies and Procedures**

- Allocations Policy and Procedures
- Alterations, Improvements and Compensation Policy
- Asbestos Management Plan
- Asbestos Management Policy and Process
- Asset Management Strategy
- Complaints Policy
- Customer Care Policy
- Data Protection Policy
- Electrical Safety Policy and Procedures
- Estate Management Policy
- Fire Safety Policy and Procedures
- Gas Safety Policy and Procedures
- No Access Policy
- Repairs and Maintenance Policy
- Tenants Right to Repair Policy
- Water Systems and Legionella Policy

## **14. UK General Data Protection Regulation 2021 (UK GDPR)**

The ng group will treat your personal data in line with our obligations under the UK General Data Protection Regulation 2021 (UK GDPR) and our own Data Protection Policy. Information regarding how your data will be used and the basis for processing your data is provided in our Fair Processing Notices. The organisation will treat your personal data in line with our obligations under the UK General Data Protection Regulation and our own Data Protection Policy. Information regarding how your data will be used and the basis for processing your data is provided in our Fair Processing Notices.

## **15. Equality Impact Assessment**

This Policy is equally applicable to all. It is recognised that in applying this Policy any necessary action will be taken where appropriate, including making reasonable adjustments, to ensure that there is no detrimental impact to protected characteristics groups.

## **16. Review**

This Policy will be reviewed every five years or earlier in line with regulatory or legislative guidance/changes or good practice guidelines.