

REQUEST	16000	RESPONSE
	<p>Trusted Assessors can be accredited or unaccredited; there are national qualifications at level three (minor adaptations) and four (major adaptations). A recent DFG (Disabled Facilities Grants) Summit suggested that awareness of these national qualifications was patchy.</p> <ol style="list-style-type: none"> 1) How many equipment-based assessments did you carry out in the last FY? 2) What is the current average wait time for this type of assessment? 3) Is it your organisation's current policy to use Trusted Assessors within your equipment assessments pathways? 4) How many staff do you employ as Trusted Assessors? <ol style="list-style-type: none"> a. What percentage are accredited / unaccredited? b. If accredited, how many are accredited at level three? At level four? 5) Which roles and services are they based in? 6) What is your policy on refreshing their training? 7) Is the number expected to grow? 8) What percentage of equipment assessments are carried out face to face / remotely? <ol style="list-style-type: none"> a. What percentage of assessments that are remote are telephone based / video based? 9) Can people access a DFG funded home adaptation without the involvement of an OT? 10) Is any of your Trusted Assessor provision outsourced? 11) Do you accept prescriptions or recommendations for equipment from external organisations such as care and nursing homes, housing associations, supported living providers or domiciliary care providers if the 	<ol style="list-style-type: none"> 1) 3085 assessments completed between 01.04.22 to 31.03.23 by Trusted Assessors resulting in equipment, adaptations or info and advice. 2) Timescales vary according to priority and request type 3) yes 4) 28 <ol style="list-style-type: none"> a, b: 26 are accredited at level 3 and 2 staff at level 4. 5) Primary assessors and Early Intervention Coordinators. 6) We refresh internally via our in-house equipment and adaptation training 7) Unable to predict at this time 8) The majority are face to face with a very small proportion remote, we are unable to report on percentage proportion <ol style="list-style-type: none"> a. As above 9) Primary assessors are able to access DFG for less complex majors under the supervision of an OT 10) We outsource low level equipment requests to a local retailer 11) Health staff in the NHS are able to prescribe directly to the equipment store.

case handler is an OT (Occupational Therapist) or
Trusted Assessor?

a. How many cases were handled of this type in the
last FY?

12) Is your community equipment service managed in-
house or via an external contract?

a. 369 recommendations received from
Health staff into EI (predominantly from
OTs) for major adaptations or AT
equipment

12) Our equipment service is managed in-
house.