West Kent Scrutiny Review

Review of Disabled Residents' Property Adaptations and Support Services

A resident-led review of how West Kent supports disabled residents through adaptations, repairs, communication and accessible services.

Review period: September 2025- April 2026

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Introduction

This Scrutiny Panel review examines the effectiveness of the organisation's Disabled Persons Property Adaptation Service, with a focus on how well it meets the needs of residents with disabilities and supports equitable outcomes across our housing services. The review has been undertaken to better understand resident experience, identify areas for improvement, and ensure that our approach to adaptations and associated services is fair, responsive, and inclusive.

The panel selected this topic following the performance data presentation which included analysis of Quarter 1 complaints data (2025). It highlighted a continued disparity in relation to disability. Specifically, 51.6% of residents raising complaints identified as having a disability, compared to 22.2% of all lead residents living in our homes who have disclosed a disability. This indicates that residents with disabilities are disproportionately represented in complaints, raising concerns about whether their needs are being adequately recognised and supported.

The over representation of disabled residents in the complaints data raises the question of whether reasonable adjustments and individual circumstances are being appropriately considered throughout the repairs and adaptations process.

West Kent's Complaint and Service Improvement Report April 2024- March 2025 recognised:

"We know that a driver of complaints around repairs is often that we have not taken disability or vulnerability factors into account when delivering repairs."

Considering these findings, this review seeks to explore the current adaptations process, assess how effectively the needs of disabled residents are identified and acted upon, and make recommendations to improve service delivery, communication, and outcomes. This review focuses primarily on residents with physical disabilities, as it examines the delivery of enablement services and property adaptations (categorized as repairs), which are designed to support mobility and independent living within the home.

The Scrutiny Panel has placed particular emphasis on understanding the lived experiences of residents and ensuring that their voices inform future improvements.

Key Questions for this review

1. What policies are in existence to support disabled residents and can we improve on them?
2. How do we collect disability information and record it?
3. To what extent is disability-related information accessible on CX, and how can access be improved for Brenwards and inHomes operatives?
4. What training is currently in place for staff, and what additional development opportunities could enhance customer-facing roles?
5. How effectively are current services for disabled residents promoted and communicated?
6. To what extent do current resources within the enablement team meet demand?
7. Are we building homes for the future for residents with disabilities?

To answer the key questions identified in this review, a range of research and engagement methods were used to gather relevant evidence. The findings from this work have informed the recommendations outlined later in the report.

The panel agreed the following would be out of scope for review as these services are provided by external organisations where resident's do not have influence:

- Waiting times for Occupational Therapy (OT) referrals
- Length of time for Local Authority (LA) and Kent County Council (KCC) to share funding to Housing Associations for funded works
- External help/ information for residents (i.e. OT/ Social Services/ NHS)

Method

This review was conducted over a seven-month period. The scrutiny panel conducted a desktop review of policies to understand how West Kent safeguards and supports disabled residents through internal governance. Complaints and satisfaction data was examined to identify key themes which was cross referenced with our TSM data and transactional feedback including the qualitative free text responses. West Kent's website was reviewed for accessibility and the quality of information shared about disabled person's services.

The panel shared details of their review with our Resident Inclusion Group which is made up of 8 residents who either have a disability (7/8) and or care for someone in their household (4/8). This took a qualitive approach to research, and the resident inclusion group shared their own list of recommendations for an improved approach from West Kent.

Staff presentations to the panel offered detailed information about West Kent's current approach to supporting physically disabled residents and services we offer which included a presentation from the enablement and customer services teams managers. They supported the panels understanding the work of their teams, including the current challenges, and the panel had the chance to ask questions.

As part of this review panel members were also invited to visit our new land led development of 106 new homes at Woodland Place to inspect how West Kent are building adaptable properties to suit the needs of our physically disabled residents.

Photo 1: Panel members participating in a quarterly scrutiny meeting, where they review and discuss Tenant Satisfaction Measures (TSM) data and quarterly performance reports from across West Kent.

What we found out . . .

West Kent Demographic Information

The Complaints and Service Improvement 2024-25 report stated that 22% of West Kent Residents had a disability recorded on CX. This increased in March 2026 to 31.5% and can be explained in terms of improved data collection by customer services, at tenancy sign up and the re-introduction of Tenancy Audits (every 5 years) which had paused before covid and started again in 2025. The first properties to receive the tenancy audit visit were Emerald Schemes which is West Kent older persons schemes. The highest proportion of residents with a disability recorded are over 55s (59%).

- 31.51% represents 2673 residents living with at least one disability.
- Predominantly living in General Needs homes (2040, 76%). With a quarter of those living in houses (1093).
- The majority of people living with a disability live in flats (1316, 49%), followed by houses (1111, 41.5%).
- 59% of residents with a disability are over 55.
- 10% live in schemes.

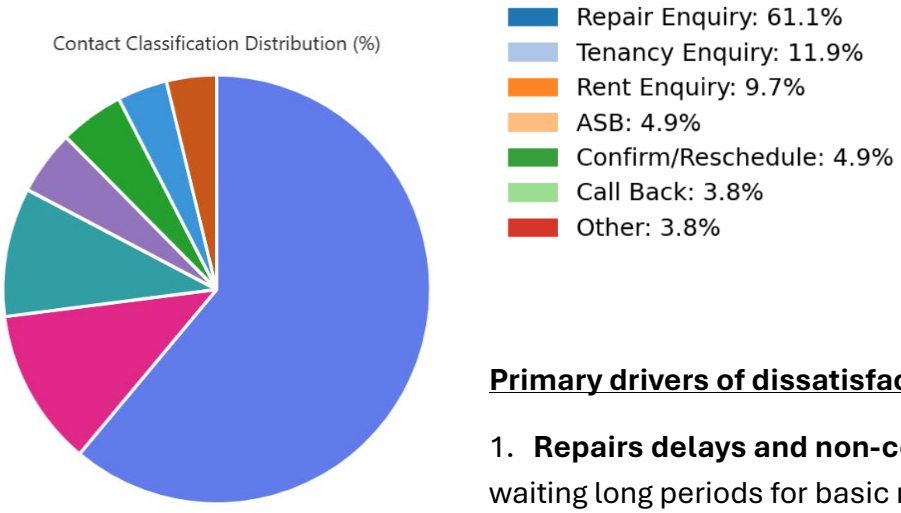
TSM Data:

Tenant Satisfaction Measure (TSM) results (2025–2026) Q1 reinforce these findings and mirror the dissatisfaction expressed through complaints with 42% satisfaction for Low Cost Rental Accommodation (LCRA), which continues to be the lowest-performing measure. Satisfaction among Low Cost Home Ownership (LCHO) residents is even lower at 35%, representing a 10% decrease in Q1. Satisfaction with the repairs service is in the median quartile for Quarter 1 results showing a 9% dip. These figures are consistent with the concerns raised through complaints data and point to systemic issues in service delivery, particularly in how the needs of residents with disabilities are addressed.

Transactional Feedback: Customer Services

Between April 2025- July 2025 West Kent received 921 transactional survey responses for their customer service experience. Of these responses, 164 (6%) dissatisfied (score 1-3). Of the dissatisfied resident respondents 79 have a recorded disability, accounting for 48% of residents who reported dissatisfaction (of which 60 of respondents identify as having a physical disability). Many comments explicitly reference mobility issues, long-term conditions, or vulnerability.

Repair enquiries remain the highest area for dissatisfaction for residents contacting customer services which is consistent with complaint data.



Primary drivers of dissatisfaction:

1. **Repairs delays and non-completion:** Residents report waiting long periods for basic repairs, with many issues remaining unresolved despite repeated contact. In addition, there are frequent concerns about incorrect or incomplete work being carried out, leading to problems recurring shortly after repairs are attempted.
2. **Poor communication and follow-up:** Residents frequently report not receiving callbacks or updates, experiencing missed or changed appointments without clear explanation, and being given conflicting information, all of which contribute to frustration and a lack of confidence in the service.
3. **Staff attitude and empathy gaps:** Residents frequently report experiences of rudeness, dismissive behaviour, and feeling unsupported during interactions. Many feel blamed or not believed when raising concerns, with feedback highlighting that staff were "not helpful or understanding," made residents "feel stupid," and showed "no empathy."
4. **Failure to recognise vulnerability:** Residents with disabilities or long-term health conditions often feel unsupported, with their needs not prioritised despite clear risks. Feedback highlights situations where vulnerable residents are left without essential facilities, such as a disabled tenant unable to use a sink or being left without a cooker, which residents describe as unacceptable.

Transactional Feedback: Repairs

Between April 2025- July 2025 West Kent received 537 transactional survey responses for their repairs service experience. Of these responses, 73 (14%) dissatisfied (score 1-3). Of the dissatisfied resident respondents 31 have a recorded physical disability, accounting for 42% of residents who reported dissatisfaction. The high proportion of disabled residents accounted for in the response data for

repairs reflects the significant proportion of customer services dissatisfaction data amongst disabled residents (61.1% as seen above).

Resident feedback shows systemic service failure across the repairs journey, with major issues in:

1. **Completion of repairs:** Residents reported that jobs are not carried out at all, are only partially completed, or remain unresolved even after multiple visits.

2. **Communication and coordination:** Residents reported issues around appointment timing and notification, a lack of updates, and poor coordination between teams. Feedback highlights that residents often do not receive advance notice of visits, such as not being informed when an engineer is on the way and are required to make repeated contact to chase progress. There are also frequent issues with appointments not being managed effectively, including engineers arriving outside of the agreed time slots, which causes inconvenience and frustration.

3. **Accuracy of job allocation:** Residents reported that the wrong repairs are often identified and engineers are sometimes sent for the wrong issue or even the wrong property. In addition, operatives frequently arrive without the correct tools or materials, meaning repairs cannot be completed during the visit, resulting in further delays and repeat appointments.

4. **Quality and safety of work:** Residents questioned the durability and standards of repairs being carried out. Many report repeat failures of installations, leading to ongoing disruption and frustration. Feedback suggests a perception that work is completed to a low standard or as cheaply as possible, with issues such as installations not working properly even after being fitted.

Summary of impact to residents:

These negative experiences across both customer services and repairs have a significant impact on residents, leading to a clear breakdown in trust and overall customer experience. Delays in repairs, repeated non-completion, and poor-quality work result in ongoing inconvenience and repeat demand, with residents feeling they must continually chase for issues to be resolved. Poor communication, missed appointments, and lack of follow-up further contribute to time loss, frustration, and disruption to daily life.

In addition, negative interactions with staff, including a lack of empathy and feeling dismissed or blamed, lead to a loss of confidence in the organisation. These issues are compounded by poor coordination, inaccurate job allocation, and failures to resolve problems at the first attempt. For vulnerable residents, this can result in increased distress, financial strain, and potential risks to health and wellbeing.

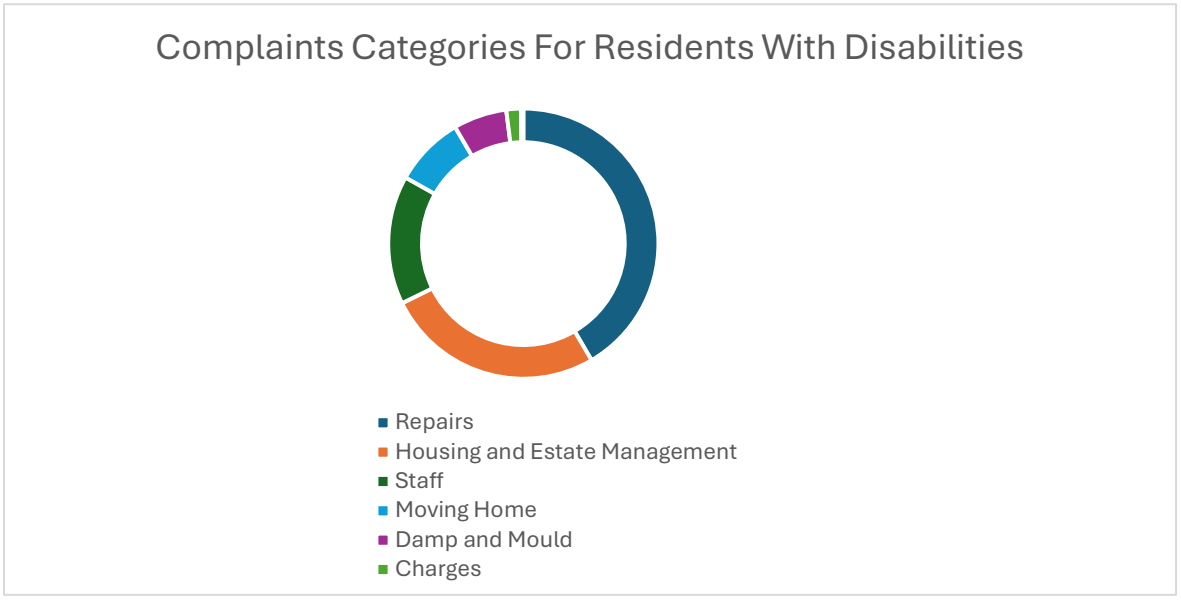
Overall, these combined factors are driving high levels of dissatisfaction, damaging the organisation's reputation, and significantly eroding trust, with some cases escalating into safety concerns and potential regulatory risk.

Photo 2: Customer Services staff responding to customer enquiries.

Complaints Data:

Analysis of complaints closed between 1 February 2025, and 31 January 2026 shows that residents with recorded disabilities are significantly represented within the organisation's complaints data. Of the 660 complaints closed during this period, 351 (53.2%) were from residents with disabilities. These complaints were raised by 215 unique residents, indicating a notable level of repeat complaining behaviour, which suggests that issues are not always resolved effectively at the first point of contact.

Of the 351 complaints, 260 were handled at Stage 1 and 91 progressed to Stage 2, demonstrating a relatively high level of escalation. Outcomes show that 64.1% of complaints were upheld overall, increasing to 76.9% at Stage 2, compared to 59.6% at Stage 1. This pattern indicates that a substantial proportion of complaints are only fully recognised or resolved after escalation, suggesting opportunities to improve early resolution and complaint handling at the initial stage.



In terms of complaint types, the largest category (collectively when contractor complaints combined) was repair-related issues (40.73%) followed by Housing and Estate Management (25.6%). Across these repairs' complaints, the most prominent issues relate to delays (length of time), quality of work, and ongoing or repeat problems, reinforcing concerns about the organisation's ability to deliver timely and effective repair services.

Repairs with Brenwards	63	17.95%
Repairs with iNHomes	41	11.68%
Repairs Other	24	6.84%
Repairs with Other Contractor	15	4.27%
Total	**143**	**40.74%**

A further key theme is staff behaviour, communication, and information, which accounts for over 15% of complaints. Within this category, staff attitude is the largest sub-category, alongside complaints regarding incorrect information and a lack of clear communication. This highlights that the quality of interactions between residents and staff is a significant driver of dissatisfaction, with poor communication and perceived lack of empathy contributing directly to complaints.

Issues relating to moving home and property suitability (8.3%) also feature prominently. Complaints in this area focus on property condition, decant processes, and housing allocation processes, indicating that residents with disabilities experience challenges in accessing suitable housing and receiving appropriate support during moves.

Across all categories, two recurring and cross-cutting themes are communication and timeliness. “Length of time” appears consistently as a key driver in multiple complaint areas, including repairs, damp and mould, and contractor performance. Similarly, communication failures are evident across service areas, pointing to a system-wide weakness in responsiveness, coordination, and customer journey management.

Overall, the complaints data highlights several consistent and interconnected issues affecting residents with disabilities. These include delays and non-resolution of services, poor communication and lack of timely updates, negative staff interactions, and repeat contact leading to escalation. In addition, concerns relating to the living environment, such as anti-social behaviour, damp and mould, and estate management, continue to impact residents’ quality of life.

Taken together, this analysis demonstrates that residents with disabilities experience disproportionate challenges in accessing effective, timely, and empathetic services. The high proportion of upheld complaints and repeat complainants suggest systemic issues in service delivery, particularly in repairs, communication, and early resolution, which require targeted improvement to better meet the needs of vulnerable resident

Policy Reviews and what we found:

Policy Name	Effective date	What we found	What this means for residents	What needs to change?
Aids and Adaptions	**Dec-25**	The policy is not easy to locate through the website navigation and there is no direct link to the policy from the main information page. Finding the policy often requires specific search terms or multiple navigation steps. While the website information pages are clear, accessible and written in plain English, the policy document itself is difficult to navigate, uses small text, has a corporate-style layout, and lacks accessible features such as hyperlinks within the contents page and links to related documents or regulations. The policy contains comprehensive information, including responsibilities, processes, and examples of adaptations.	Residents may struggle to find the policy and access the information they need, particularly those with limited IT skills, visual impairments, or lower confidence in reading formal documents. Although the website pages provide useful and easy-to-understand information, some residents may find the full policy difficult to read and navigate, potentially reducing understanding of available support and the adaptations process.	Improve the visibility of the policy by adding direct links from relevant website pages and simplifying navigation. Enhance the accessibility of the policy document by increasing font size, using more user-friendly formatting, adding clickable contents links, and including links to related policies, supporting documents and regulations. Consider developing a resident-friendly guide or brochure alongside the formal policy to make information easier to access and understand.
Maintaining Your Home	**10/2025**	The policy is easy to find on the website. It's written in clear, plain English. It includes clear information on responsibilities, repair priorities, timescales, access requirements and links to further advice.	Residents can easily find and understand the information they need, know who is responsible for repairs, understand expected response times and access additional support when required.	Consider adding pictograms or other visual aids to improve accessibility for residents with dyslexia or those whose first language is not English. Continue to keep linked guidance and policy information up to date.

Policy	Effective date	What we found	What this means for residents	What needs to change?
Mobility Scooter Policy	**Apr-25**	The policy is easy to find through the website search function. It's written in clear, plain English. It provides comprehensive information on permissions, storage, charging, insurance requirements, use within communal areas, and legal considerations before purchasing a scooter. Navigation is more difficult when accessing the policy through the policy pages rather than the search function.	Residents can easily understand the steps they need to take before buying, storing and using a mobility scooter. The policy helps residents understand their responsibilities, safety requirements and the permissions needed, reducing the risk of non-compliance and safety issues.	Improve navigation to the policy within the policy section of the website. Clarify how often insurance documentation is reviewed, who is responsible for insurance and how this is updated, particularly for residents living in communal properties without a warden or regular on-site supervision.
Vulnerability	**Oct-24**	The policy is difficult to find unless residents search using the exact policy title. Commonly used terms within the policy, such as *cuckooing* and *ASB*, do not return the policy in website searches. The document is difficult to read, containing jargon, numbered policy references and a formal structure that may be confusing for residents. The policy does provide some sources of further information, although these are located towards the end of the document. The policy is also approaching two years old and appears less aligned with the format and style of more recent policies.	Residents may struggle to locate the policy when looking for information about anti-social behaviour or related issues. Those who do find it may find the language and format difficult to understand, which could reduce awareness of available support and the actions that can be taken.	Improve website search functionality so that key terms and commonly used phrases direct residents to the policy. Review and update the policy to ensure it reflects current practice and aligns with the format of newer policies. Simplify the language, reduce jargon and make further sources of information easier to find throughout the do

Staff Presentations:

Understanding the role of the Enablement Team (Lynn Toogood: Enablement Manager)

The panel found that the Enablement Team, is responsible for managing the full adaptations service, including assessing needs, coordinating works e.g. project manage the DFG (Disabled Facilities Grant) process, and ensuring completion to required standards. Residents access the service through referrals from Occupational Therapists (OTs), professionals, family members, or direct requests, with a clear service journey from initial contact through assessment, approval, delivery, and sign-off.

OT referrals are a key part of the process, providing clinical evidence and detailed recommendations to ensure adaptations are appropriate, necessary, and based on long-term need. OT's play a key role in linking the principles of the Care Act 2014 with the Disabled Facilities Grant (DFG) process which is primarily governed by the Housing Grants, Construction and Regeneration Act 1996. DFG funding enables these recommendations to be implemented, supporting the Care Act's emphasis on prevention and helping people remain living safely and independently in their own homes for longer.

For minor adaptations (up to £1,000), works such as handrails, grab rails, small ramps, and specialist seating or bathroom aids are delivered quickly following either an OT recommendation or a Trusted Assessor visit. The panel noted that DFGs fund major adaptations, with the Enablement Team project managing applications and works with our internal contractors on behalf of residents. Local authorities are responsible for assessing eligibility, approving funding, and meeting statutory duties, while working in partnership with the Enablement Team.

During the 2024/25 period (31 March 2024 to 1 April 2025), the panel noted that 63 Disabled Facilities Grant cases were completed, with a total invoiced value of £700,531.83. In addition, there where cases currently awaiting approval with an estimated value of £428,047.35. Historical data shows a consistent increase in expenditure, with average annual spend recorded at £644,792.57 in 2022/23, £457,769 in 2021/22. The panel also found that 345 minor adaptations were completed during this period, at a total cost of £97,874.58, demonstrating a sustained demand for both minor and major adaptations services.

Key for table below:

OT = Occupational Therapist

EO: Enablement Officer

DFG: Disabled Facilities Grant

CX: Civica CX- this is the data base system used by West Kent

LA: Local Authority

NHO: Neighborhood Housing Officer

KCC: Kent County Council

Resident Journey Map

This map below is intended as a guide and everyone's situation to accessing their support is unique.

Information and Advice	Assessment and Decision	Minor Pathway	Major Pathway	Works and Completion
24-hour information is available on the website. Customer Services number shared. Initial contact. Explain service, pathways and eligibility criteria Resident needs discussed. Signposted to the most appropriate service.	Referrals: self-referral, family, WK staff e.g. NHO, health care e.g. OT, adult social services. Trusted Assessor visit-assessment of needs and eligibility. Minor/ major aids and adaptions decision If major likely; share contact details for KCC/ Community OT for self-referral. Timescales and expectations communicated Gather Evidence. Individual LA's quote requirements are different. For those residents with sensory needs, i.e. sight and hearing loss, we can refer to KCC support teams and assist in delivery of equipment.	Minor Works - Unlike major works which can only be recommended by an Occupational Therapist. Minor work can be requested by the tenant, family, friends, internal staff, OT (wide range). If referrals are not from OT, then WK carries out a Trusted Assessor visit to assess and discuss the needs of the tenant. Funded by West Kent. (e.g. grab rails, steps, shower stools, toilet frames, etc.) OT recommendation or Trusted Assessor visit. As Trusted Assessors, WK can order equipment from Medequip (KCC Contractor). (OT will order complex equipment) for example: Bath Boards, perching stools, toilet equipment. Initial survey for work. Agree scope of work with residents. Contractors are scheduled.	Works fall within WK's Aids and Adaptations Policy exceeding £1000. (e.g. flush Floor Showers, Kitchen Adaptations, Stairlift.) The Enablement Team project manages the DFG process - Major Works – WK receive OT Recommendations and Support Letter. Standardised Forms that all LAs require. Contact tenants to ascertain financial viability. Logged on CX and Assett Team - are notified through CX of all adaptations. Local authority (LA) funding decision following income investigation within 6 months (legal requirement). LAs adaption approvals vary and what they'll agree to grant West Kent. No grant- EO supports the resident to explore alternative funding. Partial award- EO and LA assessment of works Order PLAN of work from Brenward and get OT approval of PLAN with Brenwards/contractor. OT approval decision 2-3 quotes (including OT quotes)- most cost effective selected.	Design and specifications Confirm funding (DFG) On completion of works Brenwards signs off and raises Final Invoice. EO final inspections sign off. Resident satisfaction form is completed. OT signs off Case closed and logged on database and CX Asset Team notified regarding lift warranty and servicing – uploaded to CX

Photo 3: Photo of work completed at a West Kent Property with the assistance of the Enablement team.

Understanding of the Vulnerability Policy and How we collect EDI information (Ellen Salkeld: Head of Voids and Lettings and Customer Services)

The panel were involved in discussions on the proposed Reasonable Adjustment Policy and reviewed the existing Vulnerability Policy, recognising their importance in supporting residents with additional needs. They noted that the Vulnerability Policy covers a wide range of circumstances and includes practical examples to guide staff in identifying and responding to different situations. The panel also recognised that the policy reinforces the importance of early identification, proactive engagement, and tailored support to help residents sustain their tenancies and access services effectively.

The panel found that resident Equality, Diversity and Inclusion (EDI) information is collected through a range of touchpoints, this included a census carried out in 2021, with systems updated in 2022 to

establish a clear understanding of resident demographics and individual needs. This data is now maintained through continuous updates whenever residents are in contact with West Kent. Customer Services play a key role at first contact and during ongoing interactions, asking residents about any additional needs and recording this information on the CX system, with an emphasis on keeping records accurate and up to date. Housing Officers also contribute through tenancy audits, which provide further opportunities for residents to disclose disabilities, vulnerabilities, or support requirements.

The maintaining of accurate EDI data is a challenge due to changing resident circumstances and reliance on residents or staff to update information during contact. Additional challenges include engaging "silent customers," ensuring consistent data recording, and overcoming barriers such as trust, communication needs, and digital exclusion.

The panel noted proactive approaches to identifying "silent customers," including phone calls, gas safety visits, tenancy audits, and reviewing previous engagement. It was highlighted that communication methods must be thoughtful and adaptable to suit different needs, particularly for those who may not engage digitally. The importance of community connections and informal advocates in supporting residents to share their needs was also recognised. The panel were informed of ongoing work to strengthen how EDI data is captured and maintained, and they acknowledged that this requires a whole-organisation approach embedded across all roles.

Unified Communications presentation (Mark Lordon: IT Director)

Mark Lordon information to the panel about the upcoming Unified Communications project, outlining the procurement process of new systems and what benefits they would have for our disabled residents.

The panel heard how the unified communications (due 2026) will contain additional digital accessibility functions for residents with additional needs which include video calling, natural language processing on the telephony systems. The intention is also to use a 24-hour chat bot powered by AI technology to automate routine tasks, retrieve internal data and efficiently route complex enquiries. Resident queries can be answered and resolved quicker, shortening waiting times and providing support 24/7. Some members of the panel attended demonstrations of the proposed new systems and will continue to be part of discussion forums to support the needs of our residents.

Website testing:

The initial website testing in November 2025 found there was very little information about services available for those with disabilities and other needs. The website offer felt more promotional rather than practical. More simplified information should be available about our processes and service. Also include signpost information to OT and social services. A second website testing was agreed in 2026 following the website updates planned by the communications and marketing team.

2026 Website testing:

Search Functionality and Accessibility

Searching for information related to disabilities and adaptations produced mixed results. A search for **"disability"** returned several unrelated results, including Hate Crime, the Resident Inclusion Group, Diversity, Threats of Violence and Help With Water Costs, making it difficult to quickly find relevant information. Searching for **"disabilities"** was more successful and returned the Aids and Adaptations Policy, highlighting that search results can depend heavily on the exact wording used.

A search for **"adaptations"** provided much more relevant results, with the Aids and Adaptations Policy appearing first, followed by information about adaptations. It may be worth considering whether the general information page should appear before the policy document, as this could help residents understand the service before accessing the full policy.

Constructive Feedback

- Review the website search function to ensure that common search terms such as *disability*, *disabled*, *adaptation* and *adaptations* return consistent and relevant results.
- Consider adding related keywords and synonyms to improve search accuracy and help residents find information more easily.
- Explore whether a short guide or tips on effective searching could be added to the website to support residents who may be unfamiliar with the search function.
- Review the order of search results so that resident-friendly information pages appear before detailed policy documents where appropriate.

Staff Awareness

It may also be beneficial to ensure that staff have a shared understanding of disability, both from a legal and practical perspective. Regular training or awareness sessions could help ensure services, policies and website content are developed with accessibility and inclusion in mind. This would support West Kent's commitment to providing information and services that are accessible to all residents.

Resident Voices

Resident Inclusion Group Feedback

The Resident Inclusion Group reviewed issues relating to disability, vulnerability and accessibility and identified themes that closely align with the scrutiny findings and recommendations for this review.

The feedback from the group provides further resident evidence supporting the scrutiny findings. Key themes identified by both groups include:

- Better recording and visibility of disabilities and vulnerabilities.
- Improved communication and accessibility.
- Consistent application of reasonable adjustments.
- Staff awareness and training.
- A whole-organisation approach to supporting vulnerable residents.

The Resident Inclusion Group raised concerns that some of the language used to on West Kents website to communicate disabled services information was not as inclusive as it could be and they felt that the wording suggested the service was specifically for older residents rather than an inclusive service. This links to the scrutiny findings on inclusive communication and access to information. The perception from the Resident Inclusion Group was that the disabled services could only be accessed if you were a disabled and vulnerable resident within a scheme.

Residents expressed concerns that information about disabilities and vulnerabilities may not be visible or consistently used by staff and contractors. This supports the scrutiny panels question: *To what extent is disability-related information accessible on CX, and how can access be improved for Brenwards and inHomes operatives?* The Residents where informed by the Head of Customer Services that improvements are being made within CX and that future portal developments will allow residents to update their own information.

The resident inclusion group also reviewed the Vulnerability Policy- members welcomed the aim of creating a whole-organisation approach to supporting vulnerable residents but emphasised that success will be measured by residents' experiences rather than policy documents alone. This supports the scrutiny recommendations around staff training, culture change and consistent application of policies.

Residents highlighted examples where individual communication needs were not fully accommodated, including situations where alternative contact methods or scheduled call-back times were not offered. This supports the scrutiny opinion to ensure communication methods are tailored to residents' needs and offering alternative ways to contact West Kent. The panel have been made aware during their discussion with the Head of Customers Services that the new Reasonable Adjustments policy, which is under development, will include the underpinning principles of treating people as induvial and meeting their unique needs. The panel found it helpful to hear from the

resident inclusion group and the lived experiences and the challenges they faced as the induvial living with mobility, deafness, visual impairment and wheelchair users.

Residents where informed that the Unified Communications project is exploring additional contact options, including live chat and other digital channels which will improve communications with residents.

The residents' discussions and review of the Vulnerability Policy provide additional assurance that the scrutiny recommendations reflect resident priorities, experiences and concerns. The findings and feedback from the Resident Inclusion Group were shared with the Scrutiny Panel and helped to validate the themes and recommendations identified through the scrutiny review.

Visit to adapted property at Woodland Place:

Picture 4: Photo showing the through-floor lift installed in the purpose- built, fully accessible home at Woodlands Place.

A member of the panel found that their visit to West Kent's new development at Woodland Place in Maidstone, provided a strong example of how accessibility can be effectively integrated into new housing schemes. Emphasis was placed on the delivery of adapted ground-floor properties, including wider doorways and wet rooms, which was positively recognised as supporting accessible living. The visit also highlighted the value of resident involvement in shaping and understanding how inclusive housing is delivered, although it was noted that communication around available adaptations and services could be further strengthened.

The Development Team shared that West Kent has exceeded expectations in delivering adapted homes within the scheme, At Woodland Place we significantly overdelivered in terms of accessible homes:

- There was a planning obligation to provide x3 M4(2) homes (Accessible and adaptable homes). West Kent delivered 4 x M4(2) homes and x4 2-bedroom ground floor flats.
- There was no planning obligation to provide any M4(3) homes (Wheelchair user dwellings) - West Kent provided 3 x M4(3) 3-bedroom houses.

One of the challenges with M4(3) homes is that building regulations do not require a permanent solution for wheelchair access to upper floors—only future provision for equipment such as stair or through-floor lifts. At Woodland Place, a home was purpose-built in collaboration with the tenant's Occupational Therapist, with bespoke design changes made from the outset and supported by a Disabled Facilities Grant (DFG) to install key features such as a through-floor lift and specialist equipment. This proactive approach ensures the home is genuinely fit for purpose, providing a safe, accessible, and tailored living environment that fully meets the family's needs.

The image (top right) demonstrates a clear commitment to inclusive design and meeting a wide range of resident needs. Many wheelchair-adapted homes are allocated to residents who may not currently use a wheelchair but have conditions expected to deteriorate over time, ensuring homes remain suitable for future needs. Overall, the development reflects positive progress in embedding accessibility into new homes, supported by continued resident engagement and opportunities to improve awareness of available support.

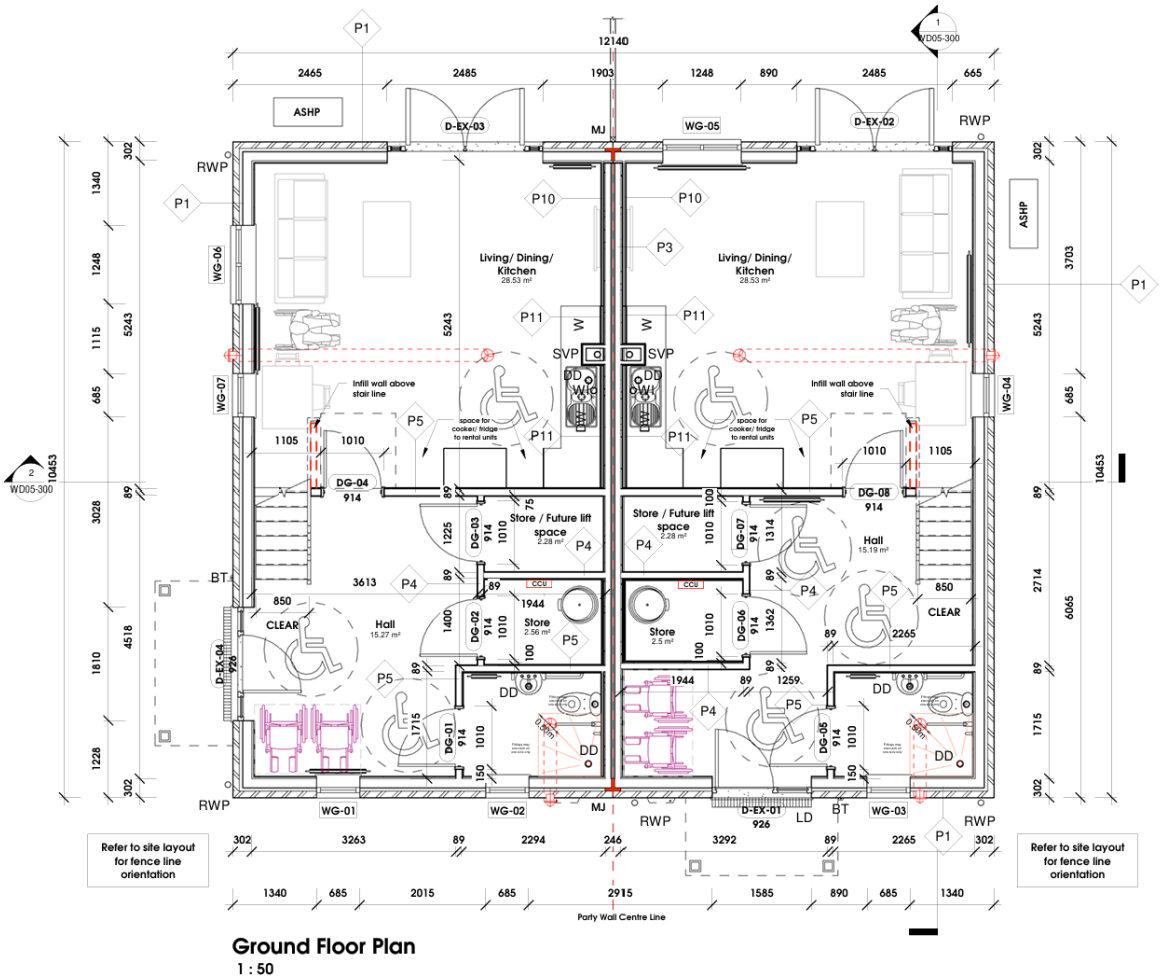


Photo 5: This ground floor plan is an example of a property that has been designed to provide an accessible living space. The downstairs bathroom has been enlarged to accommodate a shower stretcher, while the upstairs bathroom has been made slightly larger to allow for the potential installation of a specialist bath in the future. The ground floor plan also includes a designated store/future lift space, providing flexibility for additional accessibility adaptations if required.

What's going well?

Recognition

Policies play an important role in ensuring residents receive consistent, fair and transparent services. It is essential that these policies are robust, up to date and reflective of residents' needs and experiences. Equally important is ensuring that residents can easily find, access and understand policy information so they are aware of the support available to them, their rights and responsibilities, and how decisions are made. Accessible policies help promote trust, improve transparency and enable residents to make informed choices about their homes and services. As part of this review the panel considered not only the content of the policies but also how easy they are for residents to locate, understand and use in practice.

The policy review table identified several positive practices already in place. Policies are generally comprehensive and provide residents with clear information about services, responsibilities and available support. Website content is often written in plain English and is easy to understand, helping residents access key information quickly. The review also found evidence of a strong commitment to resident safety, accessibility and wellbeing through policies such as Maintaining Your Home, Aids and Adaptations and Mobility Scooters. While opportunities for improvement were identified, the overall review highlights a solid foundation of resident-focused policies that can be built upon through further accessibility and navigation enhancements.

The panel agreed that West Kent are working to understand the additional needs of our residents and recognise the hard work that is going into the Vulnerability Policy and the considerations currently being given to reasonable adjustments for residents with disabilities and vulnerabilities. The new Reasonable Adjustments Policy is in draft and should be ready for resident review in July/ August 2026.

West Kent has a dedicated Enablement Team who project manage residents' aids and adaptations. The panel found there to be strong coordination between the team, local authorities and internal contractors, helping to ensure that cases progress as effectively as possible through often complex processes. Residents benefit from receiving regular updates from the Enablement Team, and communication is strengthened through having a single point of contact within West Kent. The panel also noted that requests for aids and adaptations under £1,000 are generally managed efficiently, enabling residents to access support more quickly.

It was recognised that the team manages a significant and complex caseload, whilst also supporting residents through what can often be lengthy and challenging adaptation processes. This includes managing residents' expectations where delays occur because of processes involving local authorities, county councils and external partners. The panel highlighted the complexity of the work undertaken and expressed concerns that the team may be under-resourced given the volume and nature of cases they are managing. Members noted that demand for aids and adaptations is likely to continue increasing year on year, this has been shown within data showing increase demand in these

adaptations. The panel delt that the current staffing levels will be able to meet future demand while maintaining service quality and resident satisfaction.

The panel are aware of the work being carried out for the new Resident Portal and the Unified Comms project – both of which will contain additional digital accessibility functions for residents with additional needs. Some members of the panel have attended demonstrations of the proposed new systems and will continue to be part of discussion forums to support the needs of our residents. The panel recognised resident involvement in discussions around the new Resident Portal and Unified Comms integration as a positive step. Engaging residents in the design and implementation of system changes helps ensure services remain accessible, user-friendly and reflective of customer needs. It also demonstrates a commitment to co-production, giving residents an opportunity to influence improvements that will directly affect their experience of West Kent's services.

In 2025, following the 2024–25 focus on dignity and respect within West Kent's learning programme, Dignity and Respect training was rolled out to all staff and contractors. Members of the Scrutiny Panel also completed the training. This demonstrates West Kent's commitment to helping staff understand the impact that their interactions can have on residents, particularly those with additional needs, and highlights the importance of adapting services to meet individual circumstances and requirements.

Whilst the panel welcomed the introduction of this training, members identified several considerations to support its ongoing development and effectiveness. The panel noted the importance of ensuring that content reflects the real experiences of residents. Members suggested that, where possible, training should be delivered or informed by people with lived experience to provide greater authenticity and understanding. The panel also recommended incorporating more scenario-based learning and facilitated team discussions to help staff apply learning in practical situations. Finally, members highlighted the importance of ensuring that the training does not become a "tick-box exercise" and that there are mechanisms in place to measure how learning is embedded into practice and influences day-to-day interactions with residents.

West Kent’s planning and development team demonstrate a conscious and responsible approach to balance high demand for housing against building homes which meet disabled resident’s need. They exceeded expectation in the number of adapted homes delivered at Woodland Place in Allington and continue improve on this. One of the panel members is also a member of the New Homes Advisory Group and continues to advocate for vulnerable and disabled residents with regards to planning for the future. This report will be shared with the planning and development team to assist with future planning decisions around building adapted properties for West Kent residents.

Photo 6: Development process at Woodlands Place- A key priority has been ensuring properties can adapt to residents' changing accessibility needs, while continuing to deliver high-quality homes that meet the needs of the wider community.

Recommendations

Recommendation	The best methods of communication – More simplified information should be available about our processes and service.	Ensure website content is accessible.	When a resident calls into customer services disability and vulnerability information should be checked with the resident to make sure this is up to date and if anything should be added.	Offer alternative ways for residents with a disability (such as deafness) to contact West Kent.	In house training to better understand how to tailor our services for disabled residents.
Rational	There is little information on the website about services available for those with disabilities and other needs. Our website offer is currently promotional rather than practical. Useful information for residents include signpost information to OT and social services.	Offer audible policy and process guidance. Ensure that residents are testing the new website and portal.	West Kent can capture any changes in residents' needs and vulnerabilities and adapt WK services.	More accessible and inclusive ways for residents to communicate. This could include a 'live chat' section on the website or future portal.	Resident /scrutiny/ review of new training packages for staff with customer facing roles which aim to improve better understanding of disabled residents. (rationale: staff attitude, empathy gaps and failure to recognise vulnerability highlighted in customer service transactional feedback despite clear policies and dignity and respect training. It's about good quality training not just box ticking and include scenario-based training.

Recommendation	Sign off with tenant with enablement and the contractor on completion of works.	Train more Trusted assessors and an OT professional to be employed by WK.	Emblement Officer to act as an advocate for the resident	Improve out collection of EDI information. Provide draft document of collection of information. E.G. Adding feature on website for residents to make us aware of their needs/disabilities.
Rational	Ensure that the works recommended by OT have been sufficiently completed and are fit for purpose.	To manage caseload which are more complex, management times and assessment has grown substantially. The enablement team will also be taking over the role of managing home improvement requests, placing additional pressure on a small team.	Providing regular updates and guidance. Minimise frustration and complaints going forward.	Recommend another data collection campaign with our residents may assist in recovering any lost information from change to CX. supporting better understanding of needs of residents.

Recommendation	Requirement for staff to evaluate impact of training in PDRs.	Resident Scrutiny of new proposed staff code of conduct and professionalism policy	Future Proofing new developments for potential families and individuals with additional needs	CX/other systems improvements to share information with contractors.	To consider the current interview procedure of new employees for resident facing roles and add in an informal element to face to face interviews.
Rational	To help assess the quality and effectiveness of staff training packages by asking staff to reflect on how they have developed their practice, increasing personal and professional accountability	To ensure West Kent have considered the resident voice and experience when setting out formal staff expectations	This factor should be continuous , design of properties to save time and money in the future. A member of the SP has been working with the New Homes Advisory Group and has been very impressed with the consideration that has been given for future disabilities in family homes.	Attending contractors do not have information about residents' disabilities or vulnerabilities when attending the address. Ensure that the information is being shared correctly with contractors ensure that they are aware of access, communication needs and any other vulnerabilities.	Professionalism, attitudes and behaviour of a candidate are important to understand to ascertain whether candidates will embrace West Kent values. An informal, unstructured task would allow interviewers to observe candidate's professional integrity

Closing statement

The role of the scrutiny panel is to scrutinise West Kent Services and offer recommendations for improvements, ensuring the organisation is held accountable for delivering on their strategic priorities. The panel's the deep-dive review and the subsequent recommendations made in this report can be used to inform and support the strategic plan for delivering on Excellent Services with a view to strengthen services for disabled and vulnerable residents, in line with the new Vulnerability Policy. The priority of "Grow and re-shape" commits to delivering 180 new homes in 2026-27. This report highlights the importance of West Kent committing to the provision of adapted homes within this quota, alongside the existing approach to home adaptions, to address the rising number of disabled residents and meet their needs.

Next Steps

Our recommendations have been added to a recommendation table and shared with the relevant business areas for consideration. The Scrutiny Panel will receive a progress update on the implementation of these recommendations in February 2027, providing an opportunity to review progress made, outstanding actions, and confirmation is the recommendation has been accepted by the Lead in the business.

A resident-friendly copy of this report will also be published on the West Kent website to ensure the findings and proposed improvements are accessible to a wider audience. We will also explore a range of communication methods to share the findings of the review with as many residents as possible, with a particular focus on reaching residents who may be most affected by the issues raised in this report, including disabled and vulnerable residents. This may include digital communications, resident newsletters, website updates and other resident engagement channels to maximise awareness and understanding of the review outcomes. The Scrutiny Panel hopes this will encourage wider resident involvement and demonstrate how resident feedback directly contributes to service improvement.

In addition to the six-month review where the panel will review the progress against recommendations, the completed actions, the outstanding actions and the impact on residents. The panel may wish to undertake a twelve-month review to assess longer-term outcomes. This could include revisiting complaints data and Tenant Satisfaction Measures (TSMs), measuring progress against the recommendations, reviewing completed and outstanding actions, and evaluating whether service improvements have had a positive impact on the experiences of disabled residents.