



Request a Minor Adaptation form

Who is this form for?

It is for anyone who is:

- having difficulty due to a long-term illness or disability
- a permanent resident of Aberdeenshire (living in their own home or rented accommodation)

If you are living in a property owned by a Registered Social Landlord you should contact your landlord to discuss your options.

Will I have to pay?

There is no charge for the service.

How do I make a request?

Read the information contained in the form. Decide what minor adaptations you require and complete all the details requested.

Post:

You can request a form to be posted to your home by telephoning 0345 608 1206.

Please send the completed form to: Aberdeenshire Council, Joint Equipment Centre, Burghmuir Place, Inverurie, AB51 4FW.

If you require the information in a different format please ask, and our member of staff will assist you. Telephone: 0345 608 1206.

What happens next?

Your request will be processed by a member of staff who will then arrange for the adaptation to be supplied and fitted.

Adaptations require permission from the property owner. If you are living in a local authority property your form will be passed to the Housing Department.

We may contact you for additional information.

Request a Minor Adaptation Form

Are you completing this request for? Yourself Someone else*

**If you are completing this form for someone else, please provide your contact details in case we need to speak to you*

| | |
|---|---------|
| Name: | Tel No: |
| Relationship to the person you are requesting the minor adaptation for: | |

About the person who requires an adaptation

| | |
|----------|----------------|
| Name: | Date of Birth: |
| Address: | Tel No: |
| | GP Practice: |
| | |

PLEASE TICK THE BOXES AND COMPLETE EACH SECTION

Do you have a long-term illness or disability? YES NO

Are you having difficulty due to your long-term illness or disability? YES NO

Does the applicant have a visual impairment? YES NO

Have you had adaptations provided through self-assessment before? YES NO

Please specify:

Have you had adaptations provided by Occupational Therapy before? Please specify:
YES NO

Do you use any of the following?

| | | | |
|--|---|--|-------------------------------------|
| Walking Stick <input type="checkbox"/> | Elbow Crutches <input type="checkbox"/> | Walking Frame <input type="checkbox"/> | Wheelchair <input type="checkbox"/> |
| Indoors <input type="checkbox"/> | Indoors <input type="checkbox"/> | Indoors <input type="checkbox"/> | Indoors <input type="checkbox"/> |
| Outdoors <input type="checkbox"/> | Outdoors <input type="checkbox"/> | Outdoors <input type="checkbox"/> | Outdoors <input type="checkbox"/> |




ABOUT THE PROPERTY



Who owns the house?
 Owner Occupier Council (Local Authority Housing) Privately Rented* **In privately rented accommodation you must obtain written permission from the property owner detailing the adaptation you are requesting and provide us with a copy*

Is the house in a conservation area? YES NO

Will the minor adaptation be in an area shared with neighbours? YES* NO

**If you ticked YES and you are living in privately rented accommodation you will need to get a signed letter of agreement from all affected neighbours and provide us with copies before any adaptation will be arranged*

| | | | | |
|--|--------------------------|--------------------------|---|--|
| <p>EXTERNAL GRAB RAIL</p> <p>Short plastic or epoxy coated steel rail providing a raised grab area (style may vary). Can be placed on the doorframe or on a wall at the side of the door. You will need to tell the technician where you want it to be positioned. This item is usually only provided at one door to the property.</p> <p>Purpose: To assist with negotiating steps and doorways. Can be used for single steps instead of a handrail.</p> | | |  | |
| | Right Side | Left Side | Number of Steps | Are your steps in a good state of repair? |
| External grab rail at side of front door | <input type="checkbox"/> | <input type="checkbox"/> | | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| External grab rail at side of back door | <input type="checkbox"/> | <input type="checkbox"/> | | |
| <p>EXTERNAL METAL HANDRAIL</p> <p>Tubular metal rail fixed to wall and path to cover length of steps. Height approx. 900mm from ground or steps. This item will be made from galvanized steel and is usually only provided at one door to the property to cover no more than three steps.</p> <p>Usually the rail is installed at the same side as the door handle and at the door you use as the main access. If you have difficulty at more than one access or if you have more than three steps or your steps are an unusual shape, please request an occupational therapy assessment</p> <p>Purpose: To assist with negotiating steps at a front or back door</p> | | |  | |
| | Right Side | Left Side | Number of Steps | Please describe your steps in the space below |
| External metal handrail over front doorsteps | <input type="checkbox"/> | <input type="checkbox"/> | | |
| External metal handrail over back doorsteps | <input type="checkbox"/> | <input type="checkbox"/> | | |
| <p>INTERNAL BANNISTER RAIL</p> <p>Wooden rail running the length of a staircase, fixed to the wall with metal brackets. Can be cut to a specific length. Fitted at a height approximately 900mm from the ground/ steps. This item is unpainted.</p> <p>Purpose: To assist with negotiating a staircase</p> | | |  | |

| | Right Side | Left Side | Number of Steps | |
|--|--------------------------|--------------------------|--------------------------|--|
| Internal banister | <input type="checkbox"/> | <input type="checkbox"/> | | |
| INTERNAL GRAB RAIL A plastic grab rail for internal use only Grab rails can be fitted beside the bath, shower and toilet <i>You will need to tell the technician where you want the grab rail to be positioned</i> <i>Tip: When deciding where you require a grab rail think about if you will be using it while seated or standing</i> Purpose: To assist with transfers and balance | | | |  |
| | Beside toilet | Beside bath | Beside shower | |
| Internal grab rail | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| REFLECTIVE LINES PAINTED ON OUTDOOR STEPS Yellow or white reflective lines painted on the edge of a step Purpose: To provide a visual prompt showing the edge of the steps to aid people who have a visual impairment | | | |  |
| | Number of steps | Yellow | White | |
| Reflective lines on outdoor steps | | <input type="checkbox"/> | <input type="checkbox"/> | |
| By signing this form, I confirm that I understand the above will be provided without an assessment of need and that all information provided by me is correct. I agree that the information provided by me will be used in accordance with the requirements of the Data Protection Act 1998 and may be shared with my landlord and/or contractor in order to progress the provision of an adaptation or with health professionals if necessary. | | | | |
| Signature: _____ | | Date: _____ | | |

Depending on the information provided we may contact you for further details or advise you that a home visit will be required.

Please return this form to either:

Aberdeenshire Council, Joint Equipment Centre, Burghmuir Place, Inverurie, AB51 4FW

or

Email: jointequipmentcentre@aberdeenshire.gov.uk