

Charging Policy Non-Residential Care

Adult Social Care – Prevention and Wellbeing

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Introduction

1. This policy complies with the Care Act 2014 which provides a single legal framework for charging for care and support in Adult Care Services. It describes the principles and procedures used by Cheshire West and Chester Council (the Council) when assessing service users' contribution towards the cost of their non residential community care services.
2. The main aim of this policy is to provide a consistent and fair framework for charging for all services users who receive care and support services, following an assessment of their individual needs, and their individual financial circumstances, and replaces existing provisions.
3. Section 14 (1) of the Care Act 2014 permits the Council to undertake a financial assessment which will determine the level of a service user's financial resources, and the amount (if any) which the service user is assessed able to pay towards the cost of meeting their care and support needs..
4. The Care and Support Regulations (Statutory Instruments) and Care and Support Statutory Guidance and Annexes issued under the Care Act 2014 inform this policy.

Further information relating to the Care Act 2014 can be found by following the links below to the Department of Health website :

www.careandsupportregs.dh.gov.uk

www.gov.uk/government/publications/care-act-2014-part-1-factsheets

When do any changes take effect?

5. This policy applies to charges for all non-residential community care services from 1 January 2017.

Core Principles of the Policy

6. The Charging framework is intended to make charging fairer and more clearly understood by everyone and the overarching principle is that people should only be required to pay what they can reasonably afford.
7. Net disposable income will not be reduced below minimum income guarantee (MIG) equivalent to defined basic levels of Income Support or the guaranteed credit of Pension Credit plus 25%.
8. The policy will not place people's independence at risk.
9. Where people can provide a service themselves they should be encouraged to do so in order to support their sense of independence.

Services covered by the Policy

10. All non-residential community care services are covered by the Charging policy irrespective of whether they are commissioned and / or provided by the Council or partner agencies of the Council.
11. Charges apply whether service users choose to take their personal budgets as direct payments or if they ask the Council to manage their personal budget on their behalf.
12. Non-residential community care services are those social care services provided as a result of a community care assessment undertaken in accordance with the Care Act 2014 requirements and include:

Home Care
Day Care
Extra Care Housing
Telecare

Night Care
24-hour Care
Direct Payments
Transport

Note: Respite Care is a charged for service. Charges are set in accordance with the Care Act 2014 residential care charging arrangements.

13. Standard charges for these services are listed in the Council's Delegated Scheme of Charges and are available from the Corporate Assessment Client Finance team. Charges will be reviewed annually in line with inflation.
14. The Council may also undertake periodic reviews to ensure charges continue to reflect the cost to the Council of providing care. Any material changes to charges resulting from such reviews will be subject to public consultation.
15. Where a service user is assessed to require a transport service to meet a critical or substantial social care need and transport cannot be delivered in any other way, than via transport commissioned by the Council, any contribution to the cost of transport will be determined by a non-residential care financial assessment.

Services not currently charged for

16. The Council does not currently charge for
 - 16.1. services provided directly to carers
 - 16.2. professional support and care arrangement services
 - 16.3. assertive outreach services for mental health service users
17. The range of services not currently subject to a charge may vary, please ensure you refer to the latest version of this charging policy.
18. The Council currently provides reablement services free of charge for up to six weeks from date of commencement. If eligible care needs continue after that date, charges will be levied in accordance with this charging policy. Service users will be notified by their designated social worker if they are eligible to receive reablement services and when these will commence.

19. Services provided under continuing health care arrangements are NHS services and are not, therefore, chargeable. The designated social worker and the NHS officer concerned will determine whether there is a continuing health care agreement. If both social care services and NHS services are provided the designated social worker and the NHS officer will agree the apportioned costs in line with any funding frameworks in force between the Council and its NHS partners.

Legal Exemptions from Charging

20. Exemptions listed in this section are identified as exempt in the legislation identified in the Introduction to this policy.

- 20.1. After-care services provided under section 117 of the Mental Health Act 1983.
- 20.2. Councils may not charge for providing advice about the availability of services or for assessment, including assessment of community care needs.
- 20.3. No charge will be payable by any service user or carer who has contracted any form of Creutzfeldt - Jakob disease (CJD).
- 20.4. No charge will be payable by any service user or carer who has been infected with hepatitis C as a result of NHS treatment with blood or blood products.
- 20.5. No charge will be made for services provided under Intermediate Care arrangements. Where these services are provided in addition to an established (albeit in some cases interrupted) package of care, the established package continues to be chargeable.
- 20.6. Intermediate care is normally only expected to last for up to six weeks and will often be for a shorter time. The service user's assessment will identify those services provided under Intermediate Care arrangements and the length of time that those services are provided for.
- 20.7. No charge will be payable for minor adaptations and equipment costing up a total of £1,000.
- 20.8. Children and young people under 18 years will not be assessed and charged under the non-residential charging policy.

Benefits Advice

21. A benefits check will be offered to all service users who are subject to a financial assessment under the non-residential charging policy. The benefits check may be undertaken during a phone call, by post, by a visit or by any other means deemed appropriate and effective by the Council.

22. The benefits check will consider the service user's actual income and calculate whether the service user may be entitled to any means tested or non-means tested benefits based on their individual circumstances. The benefits check will only consider the service user's circumstances at the time of the benefits check; the accuracy of the advice given will be dependent on the information given by the service user.

23. Where entitlement to income support / pension credit is not identified a further benefits check will be completed to establish whether the service user is entitled to other means-tested benefits, i.e. Council Tax Reduction Scheme (CTRS).

24. Service users will be advised of their possible entitlement to benefits and encouraged to complete the appropriate claim forms. Information on how to complete the claim forms will be offered to the service user along with information on organisations who may be able to assist with form completion.
25. Where service users have been advised that they are entitled to receive benefits they may be deemed to be in receipt of those benefits from four weeks after the benefits check was completed.
26. If a benefit overpayment is identified the service user will be advised of the probable overpayment. Information on organisations who may be able to assist with resolving the overpayment and agreeing any repayment figures will be offered and the service user will be advised to contact the relevant Benefits office to correct the overpayment.
27. Service users must notify the Corporate Assessment Client Finance team of any changes in benefit income as soon as they occur. The service user's financial assessment will then be reviewed to take into account the changes in benefit income; the revised calculation will be backdated to the start of the benefit payment or the date of the first financial assessment, whichever is the later.

Consent to share financial information

28. The Council has a data sharing agreement with the Department of Work and Pensions which enables service user / carer personal and financial information to be shared for the purpose of:
 - 28.1. Supporting any application for DWP benefits.
 - 28.2. Helping to ensure an accurate assessment of charges for care.
 - 28.3. Reducing the time taken to complete a financial assessment and benefit check.
 - 28.4. Referring the service user for further assistance with benefit claims where the service user is over pensionable age.
29. In order to improve the quality and timeliness of social care financial assessments and in some cases carry out a light touch financial assessment, the Council will share information within its own systems regarding service users who are also in receipt of housing benefit or council tax reduction.
30. The Council is under a duty to protect the public funds it administers and may use the information provided from the financial assessment for the prevention and detection of fraud. We may share this information across the Council services and also other bodies responsible for auditing and administering public funds.

Financial Assessment

31. A financial assessment will be undertaken for all service users in receipt of chargeable services. The financial assessment will ensure that the service user:
 - 31.1. Has sufficient money to meet their housing costs and any disability related expenditure.

- 31.2. Retain their basic MIG, Income Support or Pension Credit level plus 25% as “Protected Income”. The “Protected Income” level of 25% above the basic MIG, Income Support or Pension Credit level is in line with Care Act 2014 guidance.
32. The financial assessment will be calculated on the basis that the service user is receiving all the benefits that they have been identified as being entitled to, i.e. if the service user is entitled to receive welfare benefits but is not claiming those benefits, the financial assessment will assume that those benefits are in payment at the correct amount.
33. The financial assessment takes into account income from the following disability benefits:
- 33.1. Severe Disability Premium of Income Support,
 - 33.2. Attendance Allowance (AA)
 - 33.3. Disability Living Allowance (DLA) Care Component,
 - 33.4. Constant Attendance Allowance (CAA) and
 - 33.5. Exceptionally Severe Disablement Allowance (ESDA)
 - 33.6. Personal Independence Payment (PIP) daily living component
34. The higher rate of AA or DLA Care is only taken into account when care services are provided either
- 34.1. on a 24 hour basis or
 - 34.2. during the day and during the night
35. If higher rate of AA or DLA care is in payment and services are provided only during the day, the difference between the higher rate and the middle rate is disregarded.
36. If PIP is in payment no distinction is made between day and night care therefore PIP is taken fully into account in the financial assessment. Where PIP is in payment and day or night care is not being arranged by the Council this may be considered as part of the disability related expenditure.
37. The Mobility Component of DLA and PIP is not included in the financial assessment. This also applies to the Mobility Supplement of a War Pension.
38. Income is assessed net of any Income Tax and net of any Housing Costs or Council Tax less any Housing Benefit or Council Tax reduction.
39. Service Users in receipt of War Disability Pension or War Widows pension have a further £10 disregarded. War Widows Special Pension is disregarded completely.
40. The assessment calculation is represented as:
- Chargeable Income =
Actual income less (basic MIG / Income Support level x 125%)
Less Housing Costs
Less Disability Related Expenditure.
41. No amount of earned income is included in the financial assessment.

42. The financial assessment may be undertaken by phone, by post, by a visit or by any other means deemed appropriate or effective by the Council.
43. Financial assessments will be reviewed at regular intervals (at least annually) as directed by the Council or when significant variations arise in service users' financial situations.

Disability Related Expenditure (DRE)

44. Disability Related Expenditure (DRE) is expenditure which service users incur in addition to their day to day living costs where the cost is more than normal expenditure and incurred due to disability rather than choice.
45. The amount of DRE is deducted from the financial assessment when determining the service users charge.
46. From 1 January 2017, the Council will award a standard weekly DRE allowance based on a service user's disability related benefit income as follows:

No disability related benefits	£0.00
Lower or middle rate care component of DLA, standard daily living component of PIP or lower rate AA	£7.00
Higher rate care component of DLA enhanced daily living component of PIP or higher rate AA	£25.00

Service users who have already been assessed for DRE prior to 1 January 2017 will not be affected by the changes.

47. These standard allowances will be reviewed and revised if necessary on an annual basis as actual disability related expenditure information is gathered and may increase or decrease as a result.
48. Should a service user feel that the standard allowance they have been awarded as part of a light touch financial assessment does not accurately reflect their disability related expenditure allowed under this policy, they may request an individual assessment which will involve a visit by a member of staff from our Corporate Assessment Client Finance team, who will require supporting evidence of such expenditure. It should be considered that any individual assessment of DRE may be lower or higher than the standard award as a result of such assessment.
49. Types of expenditure made necessary by any disability might include:
- payment for community alarm system
 - privately arranged care or domestic help
 - higher than usual fuel bills
 - additional costs due to a special diet

- purchase of equipment such as a stair lift or electric wheelchair
- additional laundry costs
- additional cost of clothing, bedding and footwear
- basic garden maintenance

The above list is not exhaustive and any disability related expenditure will be considered in light of individual needs.

Calculation of Actual Contribution

50. The actual contribution due from each service user will be the outcome of the individual assessed weekly amount calculated from the financial assessment or the actual cost of care, whichever is the lower.

51. There is no set maximum weekly charge.

52. Where it is considered appropriate, with the Council's legal advice, debt will be pursued through the Civil Courts.

53. Where a service user chooses to take their personal budget as a direct payment. The direct payment will be made net of the service user's financial contribution determined in accordance with this policy.

54. The Council will not normally commission care for service users with capital and savings above the upper capital limit, as defined in the Care Act 2014 as they will be deemed capable of making their own care arrangements. If the service user requires the Council to arrange their care; they will be required to pay the standard charge for the service.

Exceptional Circumstances

55. If a service user feels that they are unfairly disadvantaged by the application of the non-residential charging policy because of their exceptional circumstances they can request that their individual circumstances are reviewed by contacting the Corporate Assessment Client Finance team on 01244 972685.

Refusal to co-operate with a financial assessment

56. If a service user or their representative refuses to co-operate with a financial assessment they will be required to pay the maximum charge applicable from the date chargeable services commenced unless information as to their capital and income is already available to the Council in which case those figures may be used to inform the assessment.

Non-Disclosure of Financial Details

57. Service users have the right to choose not to disclose their financial details. If this right is exercised they will be required to pay the maximum charge applicable at the time that the service was delivered.

Where a financial assessment would be detrimental to the service users' health

58. Although the financial assessment process aims to ensure that service users are charged only what they can afford to pay, there may be cases when it is believed that a financial assessment would be detrimental to the service user's health.
59. In these circumstances, following agreement by an Adult Social Care Senior Manager, the requirement to contribute towards the cost of care may be varied.

Deprivation of Assets

60. The Council may feel that a service user has deprived themselves of a capital asset in order to reduce their charges. If this is the case the Council may treat the service user as still possessing the asset.
61. The Council will consider questions of deprivation of capital when :
- 61.1. The service user ceases to possess capital which would otherwise have been taken into account for the purpose of assessing their contribution towards their care services.
 - 61.2. The service user / carer purposely deprives themselves of capital which would otherwise have been available to them, i.e. ownership of a property is transferred to another person or the beneficiary of an insurance policy is changed so that the monies are not available to the service user.
62. It is for the service user or their representative to prove that they no longer possess the capital asset. Failure to do so will result in the Council treating the resident as though the service user still possesses the actual capital.

Cancellation of service due to the charging policy

63. If a service user / carer wishes to cancel their service due to the level of the charge the Corporate Assessment Client Finance team will advise the designated social worker.

Right to appeal

64. If the service user or their appointed representative disagrees with their assessed contribution calculation, or feels that they have insufficient funds to pay the charge, they have the right to appeal against the amount of their assessed contribution.
65. The service user / carer or their authorised representative have 30 days from the date that the charge is advised to them in which to start the appeal. They can start the appeal process by contacting the Corporate Assessment Client Finance team or their designated social worker and request for the matter to be dealt with under the Council Complaints Procedure.

Contact Us

For more information please contact your designated social worker or

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