

DONCASTER METROPOLITAN
BOROUGH COUNCIL

CHARGING POLICY

CHARGING AND FINANCIAL ASSESSMENT
FOR ADULT CARE AND SUPPORT

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1 Introduction

- 1.1 Doncaster Metropolitan Borough Council's 'Charging and Financial Assessment for Adult Care and Support' policy has been designed to comply with The Care Act 2014. The aim of the policy is to produce a consistent and fair framework for charging and financial assessment for all adults that receive care and support following an assessment of their individual needs and their individual financial circumstances.
- 1.2 For the purposes of this policy, an adult is someone aged 18 and above.
- 1.3 This policy supports the transformation of adult social care to a personalised system with personal budgets being the mainstream delivery model. All new users of long-term adult social care support are being set up with personal budgets. Those already receiving care and support will be migrated to a personal budget when their case is reviewed. More information about personal budgets is available [here](#).

2 Legal basis for charging and financial assessment

- 2.1 The Care Act 2014 provides a single legal framework for charging for care and support. It enables local authorities to decide whether or not to charge a person when it is arranging to meet their care and support needs, or a carer's support needs.
- 2.2 Section 14 of The Care Act 2014 provides local authorities with the power to charge adults in receipt of care and support, where the local authority is permitted to charge for that care and support.
- 2.3 Section 14 of The Care Act 2014 provides local authorities with the power to charge for care and support to meet a carer's needs, by providing services directly to the carer.
- 2.4 Section 14 of The Care Act 2014 instructs that local authorities are not permitted to charge for provision of the following types of care and support:
 - Intermediate care, including re-enablement, for up to six weeks. This care may be provided free of charge for longer than six weeks where there are clear preventative benefits, such as when a person has recently become visually impaired.
 - Community equipment (aids and minor adaptations) whether provided to meet or prevent/delay needs. A minor adaptation is one costing £1,000 or less.
 - Care and support provided to people with Creutzfeldt-Jacob Disease.

- After-care services/support provided under section 117 of the Mental Health Act 1983.
 - Any service or part of service which the NHS is under a duty to provide. This includes Continuing Healthcare and the NHS contribution to Registered Nursing Care.
 - More broadly, any services which a local authority is under a duty to provide through other legislation.
 - Assessment of needs and care planning.
- 2.5 Section 17 of The Care Act 2014 permits local authorities to undertake an assessment of financial resources. The financial assessment will determine the level of a person's financial resource, and the amount (if any) which that person may be likely to be able to pay towards the cost of meeting their care and support needs.
- 2.6 The Care and Support (Charging and Assessment of Resources) Regulations 2014 provide the statutory framework for determining how much someone should contribute to their care and support costs. The Care and Support Statutory Guidance issued under The Care Act 2014, also provides specific guidance relating to charging and financial assessment, and as such, these statutory regulations and guidance form the basis of this policy, except where the Council exercises its power of discretion as set out within the regulations.
- 2.7 The Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 make provisions in relation to assessing the sustainability of Top-Up arrangements and deferred payments arrangements.

3 Key Principles

- 3.1 The overarching principle of this policy is that people should only be required to pay what they can afford towards their care and support. People will be entitled to financial support based on a means-test and some will not have to contribute anything towards their care and support.
- 3.2 A person has a right to decline a financial assessment but in this case will be assumed to be able to meet their care and support costs in full.
- 3.3 This policy reflects the Council's approach to charging for care and support needs which will:
- ensure that people are not charged more than it is reasonably practicable for them to pay;
 - be comprehensive, to reduce variation in the way people are assessed and charged;
 - be clear and transparent, so people know what they will be charged;

- promote wellbeing, social inclusion, and support the vision of personalisation, independence, choice and control;
- support carers to look after their own health and wellbeing and to care effectively and safely;
- be person-focused, reflecting the variety of care and caring journeys and the variety of options available to meet their needs;
- apply the charging rules equally so those with similar needs or services are treated the same and minimise anomalies between different care settings;
- encourage and enable those who wish to stay in or take up employment, education or training or plan for the future costs of meeting their needs to do so; and
- be sustainable for the Council in the long-term; and
- support people who lack capacity or are losing capacity in a way that considers what capacity remains and the person's rights.

3.4 All information gathered for the purposes of charging and financial assessment will be treated confidentially. Information will only be shared where the law allows this and/or where the person gives permission for their information to be shared with other individuals and organisations.

3.5 Charges will not be made for providing advice about the availability of care and support.

3.6 Charges will not be made for arranging care and support including in respect of a person with assets above the upper capital limit who asks the Council to arrange their care and support on their behalf.

3.7 The financial assessment will include a benefits check to ensure people are getting all the benefits and allowances to which they are entitled, to assist them in meeting their contribution to care and support costs.

3.8 The policy supports the view that the maximum contribution for any non-residential care package provided by the Council should not exceed an amount equivalent to 85% of the current gross cost of funding a placement in a residential care home. This will ensure that there is no disincentive for people to remain in the community.

4 Charging and financial assessment for care and support in care homes on a permanent basis

4.1 The Council will charge for care and support delivered in a care home on a permanent basis.

4.2 A person requiring permanent care and support in a care home must initially satisfy an eligibility assessment. Only where a person has an

eligible care and support need will a financial assessment be required.

- 4.3 All persons with an eligible need who require permanent care and support in a care home will be offered a financial assessment. The financial circumstances of the person will determine how much they have to contribute towards the cost of their care and support.
- 4.4 Contributions will normally be payable from the date care starts.
- 4.5 Subject to paragraphs 4.7 – 4.10, the Financial Assessment will take into account eligible care needs, income, capital and the value of any assets including any mandatory disregards as prescribed in the 'Charging for Care and Support' Statutory Guidance available [here](#).
- 4.6 The financial assessment will also take into account statutory amounts required to be retained by the person from their income. These are known as 'Personal Expenditure Allowance' (PEA) and 'Disposable Income Allowance' (DIA). These amounts are dependent upon the person's financial circumstances, and are reviewed annually by the Department of Health. The current rates are available on the Council's website [here](#).
- 4.7 Persons with eligible care needs will be made aware at the outset of the maximum amount of funding the Council makes available towards care and support provided by private sector care homes. This is known as 'The Local Authority Rate'. This rate is inclusive of any assessed contribution of the person and, in the case of nursing care, includes the free nursing care element (FNC) paid by the NHS.
- 4.8 Where a person is eligible to receive local authority funded support, but **chooses** to reside in another local authority area, the Council will pay up to the local authority rate for Doncaster or the rate for the local authority the resident has chosen to live in whichever is lower.
- 4.9 Persons who would like to live in accommodation that costs more than the local authority rate can do so providing the person or a third party meets the additional cost. This additional cost (known as a 'top-up') must be sustainable and the Council has the right to refuse a person using their assets for this purpose if the costs cannot be met over a sustained length of time.
- 4.10 Where a person chooses accommodation that is more expensive than the local authority rate and the top-up is to be paid by a third party, the third party must confirm that they are able to meet the top-up for the duration of the agreement, including any price changes that may occur. Both the third party and the person receiving care will be made aware of the top-up amount, to whom the payment is to be made, and the provision for reviewing the agreement on an annual basis. Both parties will also be made aware of the consequences of failing to maintain top-up payments and the effect changes in any parties' financial circumstances will have on the agreement. The third

party will be asked to enter into an agreement covering all of these points.

- 4.11 Persons who own a property over which security can be taken may be eligible to defer paying some or all of their care costs by signing up to a Deferred Payment Agreement. Doncaster Council will make deferred payment agreements available under the national 'Universal Deferred Payment Agreement Scheme' and the Council's local Deferred Payment Agreement Scheme providing the eligibility criteria has been met. More information about the Council's Deferred Payment Agreement Scheme is available on the Financial Assessment Fact Sheet. You can see the Fact Sheet [here](#).

5 Charging and financial assessment for care and support in non care home settings

- 5.1 The Council will charge for care and support delivered in other non care home settings including a person's own home.
- 5.2 Persons who require care and support in their own home or other non care home settings must initially satisfy an eligibility assessment for care and support. Only where a person has unmet eligible care and support needs will a financial assessment be required.
- 5.3 All persons with an unmet eligible need who require care and support in a non care home setting will be offered a financial assessment. The financial circumstances of the person will determine how much they have to contribute towards the cost of their care and support.
- 5.4 Contributions will normally be payable from the start date of the Personal Budget.
- 5.5 The Financial Assessment will take into account the cost of eligible care needs, the person's income, capital, value of any assets including any mandatory disregards as prescribed in the Charging for Care and Support Statutory Guidance which is available [here](#).
- 5.6 The financial assessment will also take into account any housing costs and disability related expenditure incurred by the person. Section 11 and Appendix 1 of this policy gives more information about disability-related expenditure.
- 5.7 Persons with capital in excess of the upper capital limit will be responsible for meeting all of their care and support costs subject to the maximum contribution (see paragraph 3.8). Details of the upper capital limit are available on the Financial Assessment Fact Sheet.
- 5.8 The Council will ensure that persons retain at least the 'Minimum Income Guarantee'. This retained income level is designed to

promote independence and social inclusion and is intended to cover basic needs such as purchasing food, after housing costs have been taken into consideration. Direct housing costs will only be considered where the person is liable for such costs, i.e. holds the tenancy agreement or is party to the mortgage. The 'Minimum Income Guarantee' ensures that the person retains income to the equivalent of Income Support or Guaranteed Credit element of Pension Credit, plus a minimum buffer of 25%.

- 5.9 Only the income and assets of the person requiring care and support will normally be taken into account. Where this person receives income as one of a couple, or has joint assets, the starting presumption will be that they have an equal share of the income and assets. However, they will also be offered a 'better-off' assessment taking account of the partner's income and circumstances.
- 5.10 Where temporary 'respite' care forms part of a person's Personal Budget the financial assessment will treat income and capital in the same way as if the person was receiving care in a non care home setting. This applies even if the respite care is provided in a care home setting.

6 Charging and financial assessments for carers

- 6.1 Where a carer is also receiving care and support arranged by the Council to meet their own personal needs, the Council will not charge for this care and support. This is to reflect the value the Council places on carers and recognise the significant contribution carers make in maintaining the health and wellbeing of the person they care for, supporting this person's independence and enabling them to stay in their own homes for longer.

7 "Light-Touch" financial assessments

- 7.1 In some circumstances, the Council may choose to treat a person as if a financial assessment had been carried out. In order to do so, the Council must be satisfied on the basis of evidence provided by the person that they can afford, and will continue to be able to afford, any charges due. The main circumstances in which the Council may consider carrying out a light-touch financial assessment are:
- Where a person has significant financial resources and does not wish to undergo a full financial assessment for personal reasons, but wishes nonetheless to access support from the Council in meeting their needs. In these situations the Council may accept other evidence in lieu of carrying out the financial assessment and consider the person to have financial resources above the upper capital limit.

- Where the Council charges a small or nominal amount for care and support which a person is clearly able to meet and would clearly have the relevant minimum income left, and carrying out a financial assessment would be disproportionate.
 - When an individual is in receipt of benefits which demonstrate that they would not be able to contribute towards their care and support costs.
- 7.2 Where a person does not agree to the charges that they have been assessed as being able to afford following a light-touch financial assessment, a full financial assessment may be carried out.
- 7.3 In all circumstances where a light-touch financial assessment has been carried out, the person will have the right to request a full financial assessment.

8 Deprivation of income and assets

- 8.1 Whilst the Council accepts that people should be able to spend the money they have saved as they wish, it is important that people pay the contribution to their care and support costs they are responsible for. This is key to the overall affordability of the care and support system. By ensuring everyone pays their contribution, the Council is in a better position to ensure that care and support is provided to those that need it.
- 8.2 In cases where a person has tried to deliberately avoid paying for care and support costs through depriving themselves of assets – either capital or income, the Council may charge the person as if they still possessed the asset. If the asset has been transferred to another person, for example a relative, the council has the power to recover charges from that person using Section 70 of the Care Act.

9 Reassessments

- 9.1 All financial assessments will be reassessed at least once a year following the Government's annual uprating to benefits and allowances and changes in the Council's care and support charges. Reassessments will also take place at other times during the year to take account of any changes in circumstances of the person being assessed that may affect how much they have to pay towards the cost of their care and support.
- 9.2 Regular reassessments will also be made on cases where a person has been assessed as having to pay the full cost of their care due to having capital above the upper limit. This is to identify where the person's capital may have reduced to such a level where they may be liable to pay less towards their care and support.

10 Recovery of contributions to care and support costs

- 10.1 The Care Act 2014 consolidates the Council's powers to recover money owed for arranging care and support. These powers can be exercised where a person refuses to pay the amount they have been assessed as being able to pay, or have been asked to pay (where the cost of care and support is less than their assessed contribution).
- 10.2 The powers granted to the Council for the recovery of debt also extends to the person receiving care and support or their representative, where they have misrepresented or have failed to disclose (whether fraudulently or otherwise), information relevant to the financial assessment of what they can afford to pay.
- 10.3 The initial stages of debt recovery will involve discussing the debt with the person or their representative. Social workers will be advised of the debt and will become involved as appropriate. In all cases the desired outcome is to prevent debt escalating and for the person receiving care and support or their representative to enter into affordable repayments of the debt as well as being able to pay ongoing costs as they arise.
- 10.4 The Council will approach the recovery of contributions to care and support costs reasonably and sensitively and will only proceed with Court action where all alternatives have been exhausted. At this stage the Council will proceed with action through the County Court.

11 Disability-related expenditure

- 11.1 If a person receiving care and support other than permanently in a care home receives a disability benefit such as Disability Living Allowance (Care or Mobility) Personal Independence Payment or Attendance Allowance, the Council will allow the person to keep enough income to pay for any necessary disability-related expenditure to meet any needs which are not being met as part of their care and support plan.
- 11.2 The Council has the right not to allow expenses that should be met by other agencies, such as the NHS. This applies to therapies such as physiotherapy, chiropody and incontinence pads.
- 11.3 A list of disability-related expenditure the Council will include in the financial assessment is at Appendix 1 to this policy.

12 Disputes and Complaints

12.1 A person may dispute or make a complaint about any aspect of the financial assessment or how the Council has chosen to charge for care and support.

12.2 The first stage is to ensure that the financial assessment has been conducted and calculated correctly. Requests for a financial reassessment should be direct to:

The Financial Assessments Team
Doncaster Council
Civic Office
Waterdale
Doncaster
DN1 3BU

12.3 A senior Financial Assessments Officer who was not involved in the original assessment will carry out a reassessment. They will check whether the information provided in the original assessment was treated correctly and consider any new information provided that may affect the assessment.

12.4 Complaints about the Council's charging policy are subject to the Care and Support Complaints Procedure as set out in The Local Authority Social Services and NHS Complaints Regulations 2009. Complaints should be addressed in the first instance to.

The Complaints Manager
Civic Office
Waterdale
Doncaster
DN1 3BU

Complaints can also be made using the online complaints form on the Council's website at www.doncaster.gov.uk or by e mailing SocialCareComplaints@doncaster.gov.uk

The Council will include the following disability-related expenditure within the financial assessment for people receiving care and support other than on a permanent basis in a care home.

- (a) Payment for any community alarm system.
- (b) Costs of any privately arranged care services required, including respite care.
- (c) Costs of any specialist items needed to meet the person's disability needs, for example:
 - Day or night care for which the customer has an eligible need but is not being arranged by the Council;
 - specialist washing powders or laundry;
 - additional costs of special dietary needs due to illness or disability (evidence from the person's GP may be required);
 - special clothing or footwear, for example, where this needs to be specially made; or additional wear and tear to clothing and footwear caused by disability;
 - additional costs of bedding, for example, because of incontinence;
 - any heating costs, or metered costs of water, above the average levels for the area and housing type occasioned by age, medical condition or disability;
 - reasonable costs of basic garden maintenance, cleaning or domestic help, if necessitated by the person's disability and is not met by the Council;
 - purchase, maintenance, and repair of disability-related equipment, including equipment or transport needed to enter or remain in work; this may include IT costs, where necessitated by the disability; reasonable hire costs of equipment may be included if due to the waiting for supply of equipment from the Council;
 - personal assistance costs, including any household or other necessary costs arising for the person;
 - internet access for example for blind and partially sighted people;
 - other transport costs necessitated by illness or disability, including costs of transport to day centres over and above the mobility component of DLA or PIP if in payment and available for these costs. Where the Council provides transport and the person wishes to use alternative transport at a higher cost, the cost of Council provision will be used to determine any allowance.

This list is not exhaustive and the Council will allow for any other reasonable additional costs directly related to a person's disability.

The Council will not allow for items where a reasonable alternative is available at no cost or at a reduced cost, for example, where incontinence pads are available on the NHS but the person decides to purchase them privately.

All other expenditure will be assessed as either an everyday living cost, or will be reviewed as a specific need against the persons' care and support plan.