

Fair Contributions Policy

For non-residential care



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1 Introduction

Somerset County Council's Adult Social Care services can contribute towards your care and support in the community as long as you meet the **Fair Access to Care Services** criteria.

This policy explains how we use a fair means to work out how much we will contribute towards your care and support for non-residential care. This is based on how much you contribute, if anything, yourself.

This policy does not apply to residential care as these charges are calculated using a different policy issued by the Department for Health, called the Charging for Residential Accommodation Guide (CRAG).

2 Why do we calculate a contribution for care and support?

Local Councils have the legal power to ask you to make a financial contribution towards the care and support or financial equivalent we provide under the Health and Social Services and Social Adjudication Act 1983. The Fairer Charging Guidance 2003 (revised in 2009 and again in 2010) provides a framework for council's to follow when working out how much someone should contribute towards their care and support.

Contributions help fund more services that we could otherwise not afford.

3 How we calculate a contribution

We use a financial assessment to work out how much you can afford to contribute based on Government guidance. We make sure this process is:

- Fairly and consistently applied
- Simple and understandable
- Based on your ability to contribute
- Takes into account best practice used in other Local Authorities.

4 Circumstances where you will not contribute anything

Assessments, information and advice are always free and are not subject to a financial assessment.

If you have less than £23,250 you will not contribute anything if you:

- Receive a short-term (maximum of six weeks) re-enablement type service to help you home from hospital or to prevent you needing residential care or to help you regain skills you may have temporarily lost. (See appendix 1)
- Are an unpaid Carer receiving a service in your own right to assist you with the personal care needs of another service user
- Are receiving services under Section 117 of the Mental Health Act 2007
- Suffer from Creutzfeldt Jacob Disease (CJD)
- Have been agreed as requiring Continuing Health Care (CHC)
- Are supported by us through a safeguarding procedure (although a contribution may later apply).
- Are in a crisis situation and we support you temporarily pending a longer-term solution, for example Help in Crisis Sitting service.

We also provide certain equipment to help you live independently, for example, chair raiser, hoist and sling, or minor adaptations like stair-rails. These are free if approved by us. We can also support minor home adaptations up to £1000 providing you meet our criteria following an assessment.

5 When do we calculate a contribution?

If you have more than the capital threshold set by Government (£23,250 in 2013/14) you will not be eligible for financial assistance from the council. If you are unable to make your own care and support arrangements, or don't have anyone who can make them for you, we can do this for you but you will pay the full private rate charged by the care provider.

If you don't meet the criteria listed in section 4 or 5 (above) and have care, support or money (Direct Payments) provided by us, an officer from the Financial Assessment and Benefits (FAB) team will arrange to visit you. They will work out

what contribution, if any, you will make based on your means. (Please see appendix 2 for more details about the financial assessment).

You can phone to re-arrange their visit, but if you cancel two appointments with the FAB officer you will pay the full cost of your care and support back-dated to the first day of your on-going care.

If you are not sure how much capital you have and we arrange support for you, or pay you money to make your own arrangements and we subsequently discover you have over the capital threshold we will ask you to make private arrangements and will back-date the full contribution to the first day of your on-going support (excluding short-term reablement care).

6 If you have had care or support before

If a FAB Officer has already worked out how much you can afford to contribute, you will be asked to contribute this amount again. If this was more than a year ago they may visit you again and your revised contribution will be backdated to the date your care or support started.

7 Disposal of assets

When the FAB officer visits you they will ask for evidence of your capital and income for the six months immediately before your care assessment. If it is discovered that you have transferred an asset to someone else within this time period with the intention of avoiding making contribution towards your care and support we may assess you as if you still had this asset. Depending on the value of this transfer it may mean we ask you, or the person that received the asset, to pay the full cost of your care and support.

8 Maximum contribution

Somerset County Council has a policy not to have a maximum “ceiling” on contributions. However, you will never contribute more than your weekly-assessed contribution. If the cost of your support is less than your assessed contribution you will only contribute the hourly cost multiplied by the number of hours of support you receive.

9 Benefits advice

If you have financial support from us, The Financial Assessment and Benefits officer will check that you are receiving all the welfare benefits that you are entitled to and will help you to complete benefit claims forms.

If you choose not to claim any benefit you are entitled to, we may decide to assess your contribution as if you were receiving this benefit.

10 Couples

We will normally assess the person who is receiving the care as an individual, so we will only take account of **your** income and capital when working out how much you should pay (joint capital will be split equally). However, sometimes you would contribute less if we were to assess you as a couple, so we will do this if you want us to. This means that we would take account of all income and spending, and divide the assessable income by two. You will contribute whichever way works out better for you.

If the care is provided for more than one person in the house, we will assess you as a couple anyway, unless the second person is being assessed as your carer.

11 Carers

Carers will not contribute to services provided to them, following an assessment of their own needs, under the Carers and Disabled Children Act 2000. Examples of the sorts of services that might be provided under this legislation include:

- A mobile phone; so that the carer can keep in touch with the person they care for when they are out
- Driving lessons for the carer, so that they can take the person they care for to work, appointments, etc.
- Domestic care; if the carer needs to be relieved of domestic duties in order so that they can provide personal care to the person they care for.

Please note, services such as sitting and respite are provided to the person being cared for under the NHS and Community Care Act 1990. Any charge for these services would be made to the person being cared for and not the carer.

Assessments, information and advice we offer is always free.

12 Hospital Discharge

If you had a care and support before going into hospital and this is resumed when you come out of hospital, your contributions will re-start immediately, unless you have support through the short-term reablement team.

13 Services

13.1 Day Services

Day services have been free for all service users since 31 March 2003. Day services provide:

- Rehabilitation
- The opportunity for people to get back skills they had before
- Occupation
- Opportunities
- Learning or companionship in a range of community settings.

Sometimes day services provide respite for family carers.

A definition of day services is:

“Support [provided or arranged by Social Care Services] away from the person’s own home that enables them to engage in planned activities, achieve social contact and/or provides a break for carers.”

This support can take place at any time, on any day of the week, but does not include overnight stays.

For us to contribute towards this support, it must be:

- Part of the person’s care plan, following an assessment of their needs
- Needed as a priority
- Something that is right for Social Care Services to provide

13.2 Transport

We will not normally provide transport and expect you to make your own arrangements. Public transport will normally be free after 9am to people who are over 60 or have disabilities and community transport is available with a 50% discount.

We recognise for some people this is not possible. We will provide subsidised transport if:

No accessible public or community transport is available at the appropriate time **and** no other method of transport is available, for example access to a family car

Or

No accessible public or community transport is available at the appropriate time **and** not providing transport would place an unreasonable additional responsibility on your carer or other family member.

Or

You are unable to walk or ride on public or community transport because of a disability, behaviour or poor health **and** no other method of transport is available, for example access to a family car.

If we arrange transport for you, we will ask you to contribute the following:

£2.30 per single journey (2013/14 rate) This will apply to people using any transport provided or arranged by Social Care Services, who are unable to use public transport or make their own travel arrangements.

This means that someone travelling to day care on Social Care Services transport will pay for their journey from home to day care **and** for the journey home.

This also applies to Mini Day Centres. The charge for transport to Mini Day Centres is £2.30 for each journey

13.3 Preventative services (was Supporting People)

This policy repeals the previous Supporting People charging policy to make contributions for SCC services fully consistent and fair.

The policy will cover all categories of housing related support, for example, long-term such as sheltered housing, short-term such as supported housing, and floating support.

Short term or Reablement type services will be free for the first six weeks but you will then make a contribution based on your means.

Existing service users in long-term services, or who have been in a short-term service for more than two years, will be reviewed to see if there has been any change in their financial circumstances.

Services supplied under safeguarding will always be free, for example refugees, but a contribution may apply later

13.4 Respite care in a care home

Contributions towards care in a care home falls outside this policy. Charges are applied using the Charging for Residential Accommodation Guidance (CRAG).

If you have a personal budget this will be adjusted to take account of any planned respite breaks.

13.5 The Sitting Service

Contributions to this are based on the cared for person's means. If you are in receipt of other support, your contribution will cover this as well. The maximum hourly contribution towards the sitting service is currently £6.00 (2013/14 rate)

13.6 Shared Lives

This service is provided by individuals and families in local communities.

Placements are made within the Adult Placement Schemes that is regulated by the Adult Placements Regulations 2004. Department of Health guidance states that Fairer Charging is the appropriate charging mechanism.

You will be issued with a licence agreement and are responsible for the following costs: (these are still 2011/12 figures, currently awaiting confirmation of 13/14)

- Rent - £65 per week to be covered by Housing Benefit if there is entitlement
- Keep - £53 per week to cover food and utilities
- Care/support charge – assessed under Fairer Charging rules

13.7 Meals

There will be a flat rate contribution for meals at day centres, luncheon clubs, mini day centres, extra care housing and meals on wheels, if the service user has them. For 2013/14 the contribution is £3.75 for each meal.

14 Cancelling your care and support

If for any reason you need to cancel your care and support you must provide at least 24 hours notice to whoever provides your care, unless the reasons are unavoidable, for example, admission to hospital. Failure to do this will mean they will still charge you for your visit (although, if you are contributing a weekly assessed amount, one cancellation may not have an affect on what you contribute.)

15 Reviewing your contribution

When the FAB officer visits you they will leave you a form that you can complete and send to us if you would like to request a review of your contribution. The form is attached at Appendix C. You should request a review if:

- You disagree with the contribution you are asked to pay, or
- Your financial circumstances change

If you not are satisfied with the outcome of the re-assessment we will follow the complaints procedure as listed in Appendix 4

16 Annual Reviews

We aim to carry out annual financial reviews for everyone who pays a contribution for care and support and other non-residential services.

Reablement

Any service that helps enable or support independence and regain life skills is free for up to six weeks. In addition we are developing a reablement service in Somerset that will provide the right support at the right time for people who may have temporarily lost life skills.

This service is:

- Fully funded jointly between health and social care
- Not restricted by FACS
- Free to people who use it
- Available for up-to six weeks.

This policy will apply for people who require support once their period of enablement is complete if they require on-going (or further) support and are FACS eligible.

Assessing your contribution:

What is included in your financial assessment?

1 Savings and Capital

Savings will be taken into account to calculate a tariff income on the same basis as set out in the **Charges for Residential Accommodation Guidance (CRAG)** (see Appendix 3). If you have savings above the upper limit you will be asked to make your own care arrangements and pay the full cost of your care. The upper savings limit will be set in line with CRAG, and is now £23,250 for an individual.

The table below shows which types of capital will be included in assessments and which will be disregarded:

If you have savings above the upper limit or choose not to be financially assessed you will be asked to make your own care arrangements and pay the full costs of your care.

Jointly held savings will be split equally between the two holders for the purposes of the financial assessment if you are being assessed as an individual.

Included in Assessment (not exhaustive)	Disregarded Indefinitely	Disregarded for a Fixed Period
Building Society Account	Property occupied by the Service User as their sole or main dwelling	Balance of benefit arrears 52 weeks
Bank Accounts	Surrender value of a life insurance policy	
Unit Trusts	Training Bonus up to £200	
National Savings Certificates	Personal possession e.g. antiques	
Premium Bonds	Student loans	
Stocks and Shares	Payments from the Macfarlane Fund, ILF	
ISAs	Social Fund payments	
PEPs/TESSAs	Capital resource which the user has no right to yet but will in the future	

Included in Assessment (not exhaustive)	Disregarded Indefinitely	Disregarded for a Fixed Period
Cash	Payments to jurors or witnesses for court Attendance	
Trust Funds	Council Tax rebate	
Capital held by the Court of Protection or a Receiver appointed by the Court	Money deposited with a housing Association as a condition of occupying a property	
Some bonds	Ex-gratia payments made on or after 1st Feb 2001 relating to imprisonment by the Japanese during World War 2	
Co-operative share accounts	VCJD compensation	
Personal injury compensation	Payment from the Skipton fund	
	Deferred State Pension	

2 Setting the Level of contributions

For details of how contributions are calculated, see the financial assessment form. However, basic principles are:

- Your income will not be reduced to below basic Income Support/Pension Credit levels, plus a buffer of 25% (general living expenses allowance – see Appendix A)
- You will be assessed as an individual, less general living expenses for a single person, half the housing related costs for the household and your own disability related expenditure.
- If you receive income support/pension credit as a couple, but are being assessed individually, your income should be calculated as 50% of the income support/pension credit payment.
- You can ask to be assessed as a couple, if you wish. We will work out your joint income, less general living expenses for a couple, housing related costs for the household, disability related expenditure for both of you and divide the result by two.
- The difference between the lower rate of Attendance Allowance or Disability Living Allowance and the higher rate, which is paid if you have both day and night care needs, is only considered as income if you are actually receiving night care.
- Income is assessed excluding housing and council tax costs. Housing costs include rent or mortgage interest and Council Tax only (if not covered by Housing Benefit or Council Tax Benefit) and do not include water rates, insurance or maintenance.
- If the cost of your care is less than your assessed charge, you will contribute the lower amount.
- You will only contribute for the services actually received, that is, if the care provider is unable to deliver the service, or you cancel the service with reasonable notice, you should not contribute.

- If you fail to cancel a visit or don't give adequate notice (except in exceptional circumstances, for example, unplanned admission to hospital) then the cost of the care must be paid in full.
- An assessed contribution is a fixed weekly contribution based on how much you can afford. This will not change if the amount of care reduces unless the assessed charge would be more than the hourly rate. If this is the case you will contribute the full hourly rate. Contributions will be rounded down to the nearest fifty pence.
- If the contribution works out at less than £2, no contribution should be made.

3 Income

The table below shows which types of income are included in financial assessments and which will be disregarded.

Taken Fully Into Account	Fully Disregarded	Partially Disregarded
Annuity Income	Carers Allowance	Annuity Income from a Home Income Plan – various
Attendance Allowance	Christmas Bonus	Charitable payments not intended for a specific purpose - £20
Constant Attendance Allowance	Council Tax Benefit	Civilian war injury pension - £10
Disability Working Allowance	Charitable payments intended and used for specific items	Lodgers Income. Disregard £20 + 50% of the balance.
DLA Care Component	Child Benefit	Mortgage Protection Insurance Policies – various
Incapacity Benefit	Child Maintenance	Payments to Victims of National Socialist Persecution - £10
Income from Insurance Policies	Child Tax Credit	War disablement pension/war widows pension/war widowers pension - £10
Income Support	Disabled Persons Tax Credit	The amount of AA/DLA that is paid in respect of night care if no night care is being provided by Social Services i.e. the difference between the higher and lower rates
Industrial Death Benefit	DLA Mobility Component	
Industrial Injuries Disablement Benefit	Earnings	
Jobseekers Allowance	Expenses paid to Voluntary Workers	
Maternity Allowance	Gallantry Awards	
Occupational Pension	Housing Benefit	
Pension Credit (Guarantee Credit)	ILF Payments	
Pneumoconiosis, byssinosis and miscellaneous diseases benefit scheme payments	Income Frozen Abroad	
Property Rental Income	Payments from the Macfarlane Trust, the Eileen Trust.	
Severe Disablement Allowance	Pension Credit (Savings Credit Element)	
State Retirement Pension	Social Fund Payments	
Trust Income	War Widows/Widowers Pension Special Payment	
War orphan's pension	Winter Fuel Payments	
Widow's Benefit	Working Tax Credit	
Workman's Compensation		

Tariff Income from Capital (Use in Box I)			
Table 1			
Savings	Charge	Savings	Charge
£14,250.01 - £14,500	£1	£18,750.01 - £19,000	£19
£14,500.01 - £14,750	£2	£19,000.01 - £19,250	£20
£14,750.01 - £15,000	£3	£19,250.01 - £19,500	£21
£15,000.01 - £15,250	£4	£19,500.01 - £19,750	£22
£15,250.01 - £15,500	£5	£19,750.01 - £20,000	£23
£15,500.01 - £15,750	£6	£20,000.01 - £20,250	£24
£15,750.01 - £16,000	£7	£20,250.01 - £20,500	£25
£16,000.01 - £16,250	£8	£20,500.01 - £20,750	£26
£16,250.01 - £16,500	£9	£20,750.01 - £21,000	£27
£16,500.01 - £16,750	£10	£21,000.01 - £21,250	£28
£16,750.01 - £17,000	£11	£21,250.01 - £21,500	£29
£17,000.01 - £17,250	£12	£21,500.01 - £21,750	£30
£17,250.01 - £17,500	£13	£21,750.01 - £22,000	£31
£17,500.01 - £17,750	£14	£22,000.01 - £22,250	£32
£17,750.01 - £18,000	£15	£22,250.01 - £22,500	£33
£18,000.01 - £18,250	£16	£22,500.01 - £22,750	£34
£18,250.01 - £18,500	£17	£22,750.01 - £23,000	£35
£18,500.01 - £18,750	£18	£23,000.01 - £23,250	£36

Night Care Allowance (use in Box I)		Table 2
Benefits received	Do NOT Receive Night Care Services	Receive Night Care Services
Higher Rate DLA	£79.15- £53.00 = £26.15	Nil
Higher Rate AA	£79.15 - £53.00 = £26.15	Nil
Constant Attendance Allowance Exceptional and Exceptionally Severe Disablement Allowance 24 hrs	12 / 24 x (£129.40+ £64.70) = £97.05 12 of 24 hrs relates to night care	Nil
Constant Attendance Allowance Intermediate and Exceptionally Severe Disablement Allowance 16 hrs	*./ 16ths x (£97.05 + £64.70) = £ * How many of the 16 hrs relate to night care	Nil
Constant Attendance Allowance Normal Max rate 8 hrs	*...../ 8ths x £64.70 = £ * How many of the 8 hrs relate to night care	Nil
Constant Attendance Allowance Part-time rate 4 hrs	*...../ 4ths x £32.35 = £..... *How many of the 4 hrs relate to night care	Nil

General Living Expenses (Use in Box I)		Table 4	
	Basic Income Support	25% Buffer	Total
Single, Receiving High Rate DLA, 18 – 24			
Personal Allowance, 18 – 24	56.80	14.20	71.00
Disability Premium	31.00	7.75	38.75
Enhanced Disability Premium	15.15	3.79	18.94
		Total	128.69
Single, 18 – 24			
Personal Allowance, 18 – 24	56.80	14.20	71.00
Disability Premium	31.00	7.75	38.75
		Total	109.75
Single, Receiving High Rate DLA, 25 – 59			
Personal Allowance, 25 – 59	71.70	17.93	89.63
Disability Premium	31.00	7.75	38.75
Enhanced Disability Premium	15.15	3.79	18.94
		Total	147.31
Single, 25 – 59			
Personal Allowance, 25 – 59	71.70	17.93	89.63
Disability Premium	31.00	7.75	38.75
		Total	128.38
Single, Pensioner, 60+			
Pension Credit Standard Amount	145.40	36.35	181.75
Couple, Pensioners 60+			
Pension Credit Standard Amount	222.05	55.51	277.56
Single, Pensioner, 60+, receiving Carer's Premium			
Pension Credit Standard Amount	145.40	36.35	181.75
Carer's Premium	33.30	8.33	41.63
		Total	223.38
Couple, Pensioners 60+, both receiving Carer's premium			
Pension Credit Standard Amount	222.05	55.51	277.56
Carer's Premium	66.60	16.65	83.25
		Total	360.81
Family (under 60)			
Personal Allowance (couple)	112.55	28.14	140.69
Do not include family premium or child Allowances. Disregard child tax credit. Include DP/EDP/CP as necessary.			

Max Weekly Charge	N/A
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Min Weekly Charge	£2
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Appendix 4

Reassessment and complaints procedure. Contribution for non-residential services

1. Initial assessment

FAB officer will explain a reassessment is available if:

- a) you are unhappy with the level of charge

- b) there is a change in your circumstances:
 - Increase to above £14,250, or £23,250/decrease in savings below £23,250 or £14,250
 - Increase/decrease in income or expenses

If a new/increased benefit is applied for, FAB officer will flag a reassessment visit once the outcome is known.

Copy of Reassessment Request Form and SCC Complaints Procedure will given to you by FAB Officer when they visit. (See attached.)

2. Reassessment request form received

You should send this directly to the local FAB Team using the address at the bottom of the letter.

They will arrange to visit you within twelve working days.

3. Complaints procedure

If you are not happy with the outcome of the reassessment:

Step 1: Informal Complaint

Write to the FAB Manager who will talk with the FAB Officer to obtain details of assessment.

They will carry out checks on:

- The information you provided
- Calculations
- Correct implementation of the Contributions Policy

The outcome of this will be reported to you within 20 working days.

Step 2: Formal Complaint (as per SCC complaints procedure)

This should be in writing and sent to the Complaints Manager at County Hall, Taunton

The Complaints manager will write to you to confirm receipt and inform you of action to be taken.

A senior officer, not involved in the service, will be appointed to investigate
You will normally be informed of the outcome within 65 working days of receiving the complaint.

You will receive a copy of the report and a senior manager will explain anything we intend to do about the complaint.

Step 3: Review Panel

This will be held within 30 days of receiving the request.

The panel chairman will be an independent person (not a County Councillor or employed by Somerset County Council). Two other people will also be on the panel, another independent person and a county councillor. You should attend the panel (accompanied by another person if you wish.) with the investigating officer
A written recommendation will be sent to you within 5 working days.

Step 4: Local Government Ombudsman

Local Government Ombudsman

The Oaks No 2

Westwood Way

Westwood Business Park

Coventry CV4 8JB

Phone: 024 7682 0000 (or advice line 0845 602 1983)

Fax; 024 7682 0001

Email: enquiries@lgo.org.uk

Website: www.lgo.org.uk