



GATESHEAD COUNCIL

ADULT SOCIAL CARE

**CHARGING AND FINANCIAL ASSESSMENT FOR ADULT CARE
AND SUPPORT SERVICES**

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1 Introduction

- 1.1 Gateshead Council, Adult Social Care provides a range of services for vulnerable people but is reliant on income from charges to help pay for them. Without this income, service levels may not be maintained.
- 1.2. Gateshead Council has decided to charge for services as, any authority which recovers less revenue than its discretionary powers allow is placing an extra burden on its population or is foregoing resources which could be used to the benefit of the service.
- 1.3 This policy aims to produce a transparent, consistent and fair framework for charging and financial assessment for all adults that receive care and support services following an assessment of their needs, and taking account of their individual financial circumstances.
- 1.4 Charges for care services are reviewed annually and are defined in the Adult Social Care Fees and Charges Schedule.
- 1.5 For the purposes of this policy, an 'adult' in relation to a financial assessment carried out by the council means a person over 18 needing care and support or, as the case may be, a carer in respect of whom the council is carrying out the financial assessment.
- 1.6 For the purposes of this policy, a 'carer' is a person who proposes to provide necessary care and support for an adult.

2 Legal Framework

- 2.1 The Act and guidance underpinning this policy are:
 - * The Care Act 2014 (the Act) – in particular sections 14, 17 and 69-70
 - * *The Care and Support (Charging and Assessment of Resources) Regulations 2014 (the Regulations) and*
 - * *The Care and Support and Aftercare (Choice of Accommodation) Regulations 2014.*
 - * *The Care and Support (Deferred Payment) Regulations 2014*
 - * *The Care and Support (Personal Budget Exclusion of costs) regulations 2014*
 - * *The Care and Support Statutory Guidance 2014 (the Guidance)*
- 2.2 The Care Act 2014 and the regulations made under it provides a legal framework for charging for care and support and it will be applied by the council as required. It enables the Council to decide whether or not to charge an adult when it is arranging to meet an adult's care and support needs or a carer's support needs.
- 2.22 Gateshead Council will apply the following principles when calculating the contribution an adult must make towards care:
 - Promote wellbeing.

- The adult will not pay more than the cost of their care package, so for example that will include the full cost of 2:1 care in the cost of care package'
- Charging will be clear and transparent so adults will know what they will be charged.
- Our policy on charging will support carers to look after their own health and wellbeing and to care effectively and safely
- Our charging rules will apply equally so those with similar needs or services are treated the same and minimise anomalies between different care settings or adults with protected characteristics.
- The contribution does not undermine the adult's independence of living by reducing their income to unsustainable levels and the amount charged will not reduce a person's disposable income below the Minimum Income Guarantee (MIG) as defined in regulations.
- The financial assessment process will include a comprehensive benefit maximisation and uptake service to ensure that an adult is in receipt of any benefits to which they are entitled
- A disability related expenditure allowance will be given to cover additional expenditure an adult may have due to their disability e.g. specialist clothing or dietary needs. Any individual who believes that their own Disability Related Expenditure averaged over a 3 month period exceeds this weekly allowance should ask for an individual assessment in this regard and provide supporting evidence of the existence, level and necessity of the expenditure.
- All adults who are assessed as being able to make a financial contribution to their care and support costs must pay the contribution. Any unpaid contribution will give rise to a debt and lawful enforcement procedures will be taken.
- Any debt will be recovered where appropriate in line with the Councils Debt Recovery protocols.
- Where the council, under this policy, makes a charge, the contribution payable is due from the start of any service or the first date of payment of a direct payment
- All customers, clients, service users and adults will be treated in a professional manner, with dignity and respect.
- This policy and provision of services reflects, and is appropriate to, the needs of the diverse communities within the Borough and is consistent with the Public Sector Equality Duty under the Equalities Act 2010.
- Will 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
- Will be sustainable for the Council in the long term

- The Council will challenge and remove discrimination to ensure that those wishing to access care and support or support from the Council will not be treated any less favourably on the grounds of gender, sexual orientation, race, nationality, ethnic origin, disability, marital status, age, religion or belief, or any other conditions or requirements which cannot be shown to be justified.

3. **Charges for Care and Support**

3.1 Services to be provided free of charge:

The council will provide the following services free of charge:

- Provision of community equipment (aids and minor adaptations a total of £1000 or less)
- Intermediate care and reablement support services (**but not including urgent response services**) up to the first 6 weeks (the council have the discretion to provide these services for longer when having regard to the guidance on preventative services) (see Appendix 3)
- Care and support provided to adults with variant Creutzfeldt-Jakob disease
- S117 – after-care services/support provided under s117 of the Mental Health Act 1983
- Any service or part of service which the NHS is under a duty to provide including Continuing Healthcare and the NHS contribution to Registered Nursing Care.
- More broadly, any services which the council is under a duty to provide through other legislation may not be charged for under the Care Act 2014.
- A financial assessment, a needs assessment or the preparation of a care and support plan.
- Providing advice about the availability of services or assessment of need.
- Cost of putting in place arrangements to meet needs (except as detailed below)

3.2 Services we will charge for:

- Any Care and support provided to meet a person's assessed needs unless specifically exempted by law or this Policy.
- Where an adult is able to meet the full cost of their care, the council will make a charge for putting in place arrangements to meet need, when requested to do so, however the council will only recover the actual costs incurred in accordance with section 18 of the Care Act.

- 3.3 Charges will be made after a full or light touch financial assessment has been undertaken to ensure the adult is not charged more than it is reasonably practicable for them to pay.
- 3.4 The amount charged for care and support in a non-residential setting will not reduce a person's disposable income below Minimum Income Guarantee amount (MIG)
- 3.5 For residents or temporary residents provided with accommodation in a care home, a weekly personal expenses allowance (PEA), set annually by the Government is allowed when the charge for care and support is calculated.
- 3.6 Short term residents
Means a person who is provided with accommodation in a care home for a period not exceeding 8 weeks

A standard charge will be made for a short term placement and the amount of the charge is detailed in the council's Fees and Charges Booklet. The local authority has discretion to assess and charge as if the person were having needs met other than by the provision of accommodation in a care home i.e. at the same rate as if their needs were being met in the community.

Temporary Residents

A temporary resident is defined as a person whose need to stay in a care home is *intended* to last for a limited period of time and where there is a plan to return home. The person's stay should be unlikely to exceed 52 weeks, or in exceptional circumstances, unlikely to substantially exceed 52 weeks and this should be recognised and written into their care plan. The Council will assess and charge a temporary resident in accordance with the Regulations

- 3.7 Other services
- A reasonable flat rate fee will apply for the cost of meals.
 - A flat rate fee will be charged for transport where it is not included as part of the care and support plan.
 - An administrative charge and interest will be made for a deferred payment agreement
 - A charge will be made for arranging to meet need for self-funders.
 - A charge will be made for Car badges for disabled people
 - A charge will be made for Care Call service

Where the Council makes a charge under this section the amount of the charge will be set out in the Council's Fees and Charges Booklet and the amount of any such charge will be included in any consultation carried out for that Booklet.

4. **Support for Carers**

- 4.1 Where a carer has eligible support needs of their own, the Council will carry out an assessment of those needs and identify how those needs will be met.
- 4.2 Where those needs are met by providing a service directly to the carer, the council will not charge for those services.

- 4.3 Where those needs are met by providing a service directly to the cared for adult, the Council will not charge the carer for that service, however, it may result in a charge to the cared for adult.

5. Non-Payment and Deprivation

- 5.1 Deprivation of income and/or capital is where the adult has spent or given away any of their capital or failed to claim an income in order to reduce the charges they would otherwise be liable to pay.

5.1.1 Notional Income

An adult will be treated as having income they do not have (notional income) where that income would be available on application but where the adult has not applied or deliberately deprived themselves of for the purpose of reducing the amount they are liable to pay for care and support.

5.1.2 Notional Capital

An adult will be treated as having capital they do not have (notional capital) where the adult has intentionally deprived or decreased their overall assets in order to reduce the amount they are charged towards their care

5.1.3 Diminishing notional capital

In the same way as it would be accepted that any other capital would reduce over time, the council will calculate a weekly amount by which notional capital would reduce by calculating the difference between the higher rate the adult has been assessed to pay and the rate that would have been payable had the adult not been assessed as possessing notional capital. The council will tell you when you will become eligible for funding towards your care costs

- 5.2 Where care fees remain unpaid, or deprivation has occurred, the Council will have due regard to the vulnerable nature of the client group and the Councils responsibility for meeting need when deciding on debt recovery action and the type of action to be taken.

- 5.3 The Council will take all reasonable steps and act reasonably when approaching the recovery of debts and court action will normally only be considered after all other avenues have been exhausted. The Council will take action in the County Court to recover debts due to it in accordance with section 69 of the Care Act 2014. Any interest and additional costs payable will be set by the County Court.

Where an asset or income has been transferred to a third party to avoid or reduce a charge the third party will be liable to pay the council the difference in accordance with section 70 of the Care Act 2014.

- 5.5 The Council may use the Regulation of Investigatory Powers Act 2000 to investigate allegations of deprivation.

- 5.6 The Council will always offer a Deferred Payment Agreement (DPA) as an option to repay debt where an adult is in a care home or extra care property and has sufficient equity to cover the DPA.
- 5.8 The council will seek to recover the costs incurred in recovering any amounts due to it as detailed in the council's Fees and Charges Booklet.

6. What Happens if an Adult's Financial Circumstances Change?

If an adult has any change in financial circumstances they (or their legally appointed financial representative) must notify the council's Financial Assessment team who will review and revise the financial assessment as necessary.

Items that should be reported to the council immediately will include for example any additional benefits received since the initial financial assessment such as Attendance Allowance/Personal Independence Payment, an increase or reduction in capital or other income etc.

7. Re-Assessment

- 7.1 The adult's contribution will be reassessed every year in April, to take account of the annual increases in benefits, private pensions and the cost of living and any changes in the Council's fees and charges.

If the adult is in receipt of Pension Credit / Income Support the Financial Assessment team will revise the charge automatically. If an adult does not receive these benefits the adult may be asked to undergo a revised financial assessment.

8. Reviews and Appeals

- 8.1 The council have in place a process to look again at the level of the adults assessed contribution if the adult or carer believes that it is not reasonable for them to pay the contribution for which they have been assessed to pay. The adult can ask the financial assessment team to look again at their assessment – this is called a review. Any evidence, usually in the form of documents, should be submitted when requesting a review.
- 8.2.1 The financial assessment officer will carry out a more detailed financial assessment that will take into account all disability related expenditure instead of giving a fixed rate amount.
- 8.2.2 The adult must first contact the Principal Officer – Financial Assessment Team either themselves or through their representative/advocate to explain why they feel that it is not reasonably practicable for them to pay the assessed contribution or why they think the calculation is wrong. However it would be necessary for a financial assessment to have been undertaken prior to such a review being considered.
- 8.3 The review process is detailed below:

Stage 1

- The adult will write to the financial assessment team within 20 working days of the date of the outcome letter explaining why they think the financial assessment is wrong.
- The Principal Officer – Financial Assessment Team The manager will review the financial assessment within 20 working days of receipt of the request for a review. There can only be two outcomes from stage 1:
 - I The Council will change the decision of the original financial assessment

Or

- II The Council will uphold the decision of the original financial assessment

The adult will be notified of the decision in writing.

Stage 2

- If an adult is still not happy with the decision, they have the right to appeal that decision, An appeal should be submitted within 20 working days of the date of the review outcome letter.
- Appeals will be heard by the Council's appeal panel as soon as practicably possible. The adult will be notified in writing of the outcome of the appeal.
- If the adult remains unhappy with the appeal, then they can make a complaint under the Adult Social Care's complaints procedure (visit the complaints page on the Councils website www.gateshead.gov.uk)

9 Privacy

Information will be collected to enable the calculation of contributions relating to services provided and assessment of welfare benefit entitlement. In accordance with the Data Protection Act 1998 this information will only be shared with other relevant people and agencies in accordance with the data protection principles or with the written consent of the individual or their legally appointed representative. The Council will use other information available to it to facilitate an accurate financial assessment only with the express permission of the adult or their legally appointed representative.

What is enablement?

'Intermediate care and reablement support services' means care and support provided to an adult under sections 18, 19 and 20 or S2 (1) of the Care ACT 2014 which:

- a) Consists of a programme of (services, facilities or resources)
- b) Is for a specialised period of time ('the specified period'); and
- c) Has as its purpose the provision of assistance to an adult to enable the adult to maintain or regain the ability needed to live independently in their own home

Within Gateshead Council there are two types of delivery

Enablement – a home based service provided by domiciliary care to enable people to live independently, this is provided in a person's own home

Intermediate care – a bed based service for people, staying for short stay in a residential setting based at Eastwood Promoting Independence Centre. This will include

- Service users requiring a 'step down' rehabilitative approach from acute hospital wards, to encourage physical recovery, further independence, and build confidence, as a prelude to returning home
- Service user requiring a representative 'step-up' approach from community setting, receiving appropriate interventions to maximise functional ability and independence – preventing acute admission to hospital or an inappropriate long term residential care placement.
- Service users whose physical functioning; overall confidence and self-esteem can be enhanced from a multi-disciplinary approach. Consequently, reducing the level of risk posed to the individual following discharge from the centre.

Both services will assist people to accommodate their illness or condition by learning or relearning the skills necessary, this is an eligibility decision service; its purpose is to provide assistance to an adult to enable the adult to maintain or regain the ability needed to live independently in their own home. The function of the services is for a specific period of time (up to six weeks). However, both services should not have a strict time limit since the period of time for which the support is provided should depend on the needs and outcomes of the individual. In some cases for instance a period of enablement for a visual impaired person (a specific form of enablement) may be expected to last longer than six weeks.

Charging

Both 'enablement' and 'intermediate' care services are free for up to six weeks. Gateshead Council does have the authority to charge for this where it is provided beyond six weeks, but will consider continuing to provide it free of charge beyond this time when clear preventative benefits to the individual has been identified and it has been agreed by the appropriate Service / Team Manager for a further specified period.

The service users progress is monitored on a weekly basis, if identified that long term services will be required they will be referred for an assessment, this assessment will also include a financial assessment

Admission criteria

Enablement service (home based)

- This service is available to Gateshead residents and support carers
- The service is an inclusive mainstream intake model being accessible to all people form 18+ (including people in transition from children's to adults services)
- People who are in need of a new, continued or increased level of services because of either changes in their personal / domestic or social activity by experiencing a deterioration in functional abilities.
- The service user must be medically stable to participate without acute health issues and have the potential and motivation to achieve identified goals within an allocated timescale, with the predominant objective to remain independent at home

Intermediate care services (bed based)

- A service user who must possess motivation and commitment and have the potential to be rehabilitated (identified through assessment by a Therapist ie Physiotherapist or Occupational Therapist)
- A service user who must be medically stable and not require any further 'in patient care' – though may be requiring rehabilitation from trauma or acute exacerbation of existing illness / condition. Admission Is not for any service users with unstable acute medical conditions (e.g. requiring more than once a week medical support)
- The service user must be registered with a Gateshead GP
- The service user must not require further nursing needs, beyond that which can be met by the support / treatment provided by the District Nursing service or Community Matron
- The service user is usually aged 55 years and above
- The service user must only require support from one staff member for moving and handling tasks. Associated risk assessment must be completed prior to admission by the admitting professional
- The service users' needs can't be met within a domiciliary care setting

Exceptions

A person should not receive further enablement within 3 months of a previous episode unless there has been a significant change of circumstances ie hospital admission