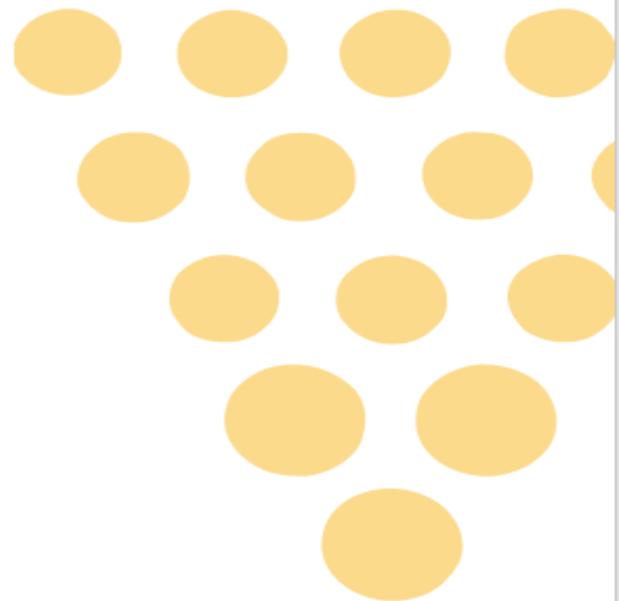




# DRAFT

## Adult Social Care Charging Policy

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## 1. Introduction

**1.1** Adult Social Care (unlike most health care) is not free. You will be charged for the full cost of your care, unless you qualify for financial assistance.

**1.2** To work out if you qualify for any financial assistance and to let you know how much you will have to pay, you need to complete an application for financial assistance (Financial Assessment). Failure to complete a valid application will mean that you have to pay the full cost of your care.

This Policy:

- Explains how the Council charges adults for care and support.
- Covers care and support in community settings and in care homes.
- Responds to the requirements of the [Care Act 2014](#) and associated regulations which set the legal framework for charging for care and support.
- Applies to all adult social care services and support provided by the Council.
- Applies from [1 February 2021] and replaces all previous adult social care charging policies and practice before this date.
- Applies to all people aged 18 and above who have eligible care and support needs.
- Ensures that where an adult is charged for care and support, that they are not charged more than they can reasonably afford.
- Is intended to be as clear, transparent and comprehensive as possible so people know what they need to pay towards the costs of their care and support.
- Is intended to ensure equitable treatment of all people with eligible needs.

## 2. The Legal and Regulatory Basis for Charging

**2.1** Part I of the Care Act 2014 sets the legal framework for charging for adult social care and support.

**2.2** [Section 14](#) gives Councils the power to charge for meeting eligible needs under sections 18 to 20 of the Act.

**2.3** [Section 17](#) requires Councils to carry out a financial assessment.

**2.4** [The Care and Support Charging and Assessment of Resources Regulations 2014](#) (the regulations) set out the requirements for carrying out financial assessments.

**2.5** The [Care and Support Statutory Guidance](#) (CSSG), includes details about interpreting and applying the rules relating to charging and financial assessments.

**2.6** The [Care and Support \(Deferred Payment\) Regulations 2014](#) set out rules for Deferred Payments.

**2.7** This policy has been written in accordance with the CSSG and related legislation.

### **3. Online Financial Assessment**

**3.1** The Council will introduce an electronic form to apply for financial assistance. This will tell you how much you are likely to be charged for care and support. This will be the same as the form used by the Council to make the calculation. It will allow you to decide if you want to proceed with the application for financial assistance from the Council.

**3.2** If you need help to complete the online form, support will be available including, webchat, phone and face to face.

**3.3** The Council will help you and your representatives/family to make informed decisions about arranging social care services at an early point and provide a transparent process regarding paying for services.

**3.4** After you have completed an online application for financial assistance, we will check this and will let you know if any further information is needed.

**3.5** It remains everyone's right to ask for a formal assessment, but the use of the online form will be encouraged to avoid people going through processes that they do not need to, to speed things up, reduce cost and help ensure more money is available for care and support services for people who need them in the future.

### **4. Eligibility to apply for Financial Assistance**

**4.1** The Council will not usually provide any financial assistance unless we have confirmed that you have eligible needs, following an assessment or review of needs. If you were assessed as having eligible needs in the past but you are not currently receiving services that are financially supported by the Council, you will need to contact the Council's Access Team to ask them to arrange a new needs assessment.

### **5. Chargeable and Non- Chargeable Services**

**5.1** A schedule of Cornwall adult social care fees and charges will be published annually.

**5.2** The Council operates three charging categories.

- I. Exempt Services
- II. Statutory Services
- III. Non-Statutory Services

**5.3** The Council will usually charge the full cost of services to people who do not wish to disclose their finances or do not qualify for financial assistance.

**5.4** The Council will pass on reasonable costs involved in miscellaneous services. Examples include pet care and deep clean services.

### **I. Exempt Services**

The Council will not charge for some types of care and support. The list below sets out what these currently are:

**5.5** Community equipment (aids and minor adaptations): this is where a person is supplied with equipment or a minor adaptation (less than £1,000 in value) to their property to support daily living so they can stay at home;

**5.6** Short Term Enablement and Planning Service (STEPS). This can be provided to help people become as independent as possible in their homes; this can be from 1 day up to a maximum period of six weeks. This could be after a stay in hospital, an illness or to prevent a hospital admission. Charges are payable for any support services required after STEPS.

**5.7** Services provided to people with variant Creutzfeldt-Jakob Disease.

**5.8** Any service or part of service which the NHS is under duty to provide. This includes Intermediate Care, Continuing Healthcare and the NHS contribution to Registered Nursing Care.

**5.9** After Care Services under [Section 117 of the Mental Health Act 1983](#). There may be occasions when chargeable services are also provided. If this is the case we will write to the person and an application for financial assistance will need to be made in respect of those services.

### **II Statutory Services**

**5.10** An application for financial assistance will need to be made for all care and support provided or arranged by Cornwall Council to check if you can afford to pay towards the cost of your care or support.

**5.11** The rules differ between care and support provided in a care home (residential or nursing) and care and support provided in all other settings (non-residential).

**5.12** The application will be considered in accordance with the regulations and Chapter 8 of the [Care and Support Statutory Guidance](#).

**5.13** If you give information which is false, incomplete or inaccurate, the Council will usually recover any funding provided that would not have been due and may also take action against you. This could include court action.

**5.14** Charges for support will be payable from the date services or packages start; not the date the application for financial assistance is completed. The Council will make this clear to you at the beginning.

**5.15** Charges will not exceed the cost of the services provided.

**5.16** If you die before completing an application for financial assistance and you were receiving services, the Council will usually seek recovery of costs from your estate.

**5.17** All documentary evidence requested by the Council to complete the financial assessment should be provided within 2 weeks of the request. The Council will only ask for documentary evidence that is necessary to assess the application for financial assistance accurately and comprehensively.

**5.18** Where evidence is requested but not provided the Council will charge the full cost of services.

**5.19** An assessment may also be based on notional income or capital.

**5.20** Financial assessment will be completed for people as individuals and not as couples, although some allowances within the assessment vary dependent on whether you are single or are part of a couple. Where capital is held on a joint basis, we will assume that each party is entitled to 50% of that capital, unless evidence is provided to the contrary.

**5.21** The application for financial assistance will normally include a welfare benefits check to help you identify other benefits you may be entitled to.

**5.22** The amount you pay towards your care will be reviewed annually.

**5.23** You can request a review or apply for financial assistance at any time. This may be where:

- Your circumstances have changed.
- You were funding all your care costs, but your total savings/capital has fallen below the upper capital threshold.
- You have not previously had an assessment.

### **Care at Home**

**5.24** We will charge you for support provided in your home or the community. This includes:

- I. Personal Care Support in your home (“home” includes Extra Care, Supported Living and Shared Lives accommodation)
- II. Sitting Services
- III. Day Services and activities, both building based and in the community
- IV. Respite breaks that are not in a residential care home
- V. Daily living support such as shopping, laundry, cleaning provided in your home
- VI. Joint funded services – you will have to pay a charge for any adult social care services but not health services provided by the NHS as part of a joint package of support.

**5.25** When you make an application for financial assistance with the costs of care in your home, we will consider your:

- Income (See [Appendix 1](#))
- Capital (See [Appendix 2](#))
- Relevant Housing related expenditure (if costs are not covered by DWP benefits, Housing Benefit or Council Tax support)
- Disability related expenditure

**5.26** When assessing your application, we will make sure you have money left to cover usual daily living costs, after charges are applied. The Department of Health sets [weekly amounts](#) which the Council will apply. This is known as the ‘Minimum Income Guarantee’ (MIG). Separate MIG rates are applied if you are part of a couple.

**5.27** After we have assessed your application, we will calculate a weekly charge that you will have to pay. The approach to calculating the charge is set out below:



**5.28** Shared Lives is a scheme where adults with support needs live with a family who provide board, lodgings and support.

**5.29** If you are supported through Shared Lives, you are responsible for the cost of rent, food and utilities. You will pay these costs directly to Shared Lives South West. You may be entitled to [Housing Benefit](#) for help with rent, but will need to pay for food and utilities from your own income. These costs will be set out in the Shared Lives agreement.

**5.30** Any help with the cost of support provided to meet your eligible care needs will be assessed following an application for financial assistance.

### **Care Homes**

**5.31** We will charge for support provided in a care home.

**5.32** When you make an application for financial assistance for the cost of care in a care home, we will consider your:

- Income (See [Appendix 1](#))
- Capital (See [Appendix 2](#))

**5.33** When assessing your application, we will make sure you have money left to meet costs not covered by care home fees, after charges are applied. The Department of Health sets [weekly amounts](#) which the Council will usually apply. This is known as 'Personal Expenses Allowance' (PEA).

**5.34** After we have assessed your application, we will calculate a weekly charge that you will have to pay. The approach to calculating the charge is set out below:



**5.35** When you apply for financial assistance for the costs of care provided in a care home, we will provide information and advice to help you identify options for paying the charge. This may include a [deferred payment agreement](#).

**5.36** We will only pay towards the cost of a care home if you have been assessed as having needs that mean this is the best option for you. If you have been assessed as needing nursing care as part of your support within a care home, this part of your care costs will be met directly by the NHS. This is known as Funded Nursing Care or FNC. You will still have to pay for the social care part of your support.

**5.37** If we assess that you do meet eligibility criteria you will need to make an application for financial assistance. If you are eligible for financial assistance, we will contribute towards the cost of care from the date of the referral to the Council (or the date at which you became eligible for financial assistance if this is later), and not from the date you moved into the care home.

**5.38** We will not usually backdate financial assistance towards your care costs to the date you started living in the care home, or the date your capital dropped below the capital threshold, where this was before we received an application for financial assistance.

**5.39** If you become eligible for financial assistance and live in a care home that is more expensive than the Council would normally pay for, somebody, such as a family member or other person, would need to either “top up” the cost difference or will need to consider alternative arrangements such as moving to a care home that is affordable. The only time you can pay the top up from your own money is during the 12-week property disregard or where a deferred payment has been agreed.

**5.40** To avoid the possibility of needing to change care homes, if you are paying for your own care, we strongly advise that you take independent financial advice to ensure that you are able to afford the care home you choose if your circumstances change.

### III Non-Statutory Services

**5.41** The following fees and charges will not be financially assessed, and the Council will charge full cost:

- Fees and charges for setting up a [Deferred Payment](#)
- [Transport Services in accordance with the transport policy](#)
- Meals (excluding care homes)
- Telecare services
- [Top Ups](#)

### 6. Short term Residential Care (e.g. respite care)

**6.1** During periods of short-term care, the financial assessment can take into account some costs of running your home, such as some household bills.

**6.2** If you are eligible for financial assistance, the Council will contribute up to the cost of short term care that it could usually arrange.

**6.3** If you choose short term care that is a higher cost than the Council would normally pay, someone on your behalf can pay a [top-up](#).

**6.4** As with other charges, if you do not complete an application for financial assistance, you will have to pay the full charge for short term care.

### 7. Top Ups

**7.1** If you are eligible for financial assistance and choose a care home that is more expensive than the Council would usually pay, somebody, such as a family member would need to meet the difference in cost. This is known as a ‘top-up’ payment. This

payment can only be made by a person who is prepared to make the payment for you.

**7.2** The only time you can pay the top-up from your own money is during the 12-week property disregard or where a deferred payment has been agreed.

**7.3** Where another person has agreed to pay the top-up for you, we must ensure that they are willing and able to pay the top-up and understand the terms of the agreement they will need to sign. Should the fees in the top-up agreement change, the person will need to sign a new agreement.

**7.4** It is essential that you take independent advice before choosing a care and support arrangement that is more expensive than the Council would pay.

**7.5** If the person paying the top-up stops making payments, the Council may need to make alternative arrangements for your care and support needs. This could mean you moving to another care home that can meet your needs.

**7.6** More information is in the Council's [Choice and Top Up Policy](#).

## **8. Disability Related Expenditures (DRE)**

**8.1** If you receive disability benefits, the Council must leave you with enough of these benefits to pay for necessary disability related expenditure to meet needs which are not being met by the Council.

**8.2** We will NOT consider DRE if you are being cared for in a care home.

**8.3** We will consider DRE if you are entitled to disability benefits and are receiving support at home. We will consider how much should be taken into account as allowable expenditure from your income.

**8.4** Your Care and Support plan will identify disabilities which should be covered by DRE. Your plan should also describe existing private and informal care arrangements that we may also consider as DRE.

**8.5** We will then look into the details of expenses and ask for evidence to confirm the cost. When this has been done any agreed costs will be included in our assessment of your application for financial assistance.

**8.6** Further information on the types of expenses that may be considered is set out in [Appendix 3](#).

## 9. Light Touch Assessment for Financial Assistance

**9.1** In some circumstances, we will use a light touch assessment for financial assistance. This will apply:

- I. If you do not wish, or refuse, to disclose your financial information.
- II. If you say you have significant financial resources and or savings above the upper capital limit of £23,250, and do not wish to complete a full application for financial assistance.
- III. Where the charges for the service are small and you are able to pay and would clearly have the relevant minimum income left.
- IV. Where your income clearly shows that you would not be able to afford any charges.

**9.2** If you refuse to complete an application for financial assistance but do have eligible needs, we will charge for the full cost of the support needed.

**9.3** If you tell us you have enough money to meet the cost of your support, we will charge the full cost of services. You should take independent financial advice about options for meeting the cost of your care and support.

**9.4** We will tell you if a light-touch assessment has taken place and that you have the right to make a full application for financial assistance.

**9.5** If you do want to make a full application for financial assistance at a later stage, you may be asked for information backdated to the date that care services started, or in some cases earlier to ensure that there has not been any [deprivation of assets/income](#).

## 10. Self- Funders – (Full Cost Charging)

**10.1** If you need to pay the full cost of support you are known as a “self-funder”. We will consider you to be a self-funder if you:

- i. Have savings and other financial resources above the upper capital limit for England, currently £23,250.
- ii. Choose not to disclose your financial information to enable an assessment of an application for financial assistance;
- iii. Do not co-operate and/or do not complete an application for financial assistance, within 1 month (30 days) of agreeing a support plan or from the date chargeable services started (whichever is sooner);
- iv. Tell us you are happy to pay the full cost of services received;

- v. Completed an application for financial assistance and were assessed as being able to pay the full cost of your care and support.

If you are a self-funder you can still ask that the Council to help you arrange services, whilst you remain liable for the cost of those services. We will charge an annual fee for arranging services on your behalf.

## **11. Payments of Charges**

**11.1** The Council's preferred method of payment is Direct Debit. Direct Debit is easy to use, is the most cost-effective way for the Council to collect income and provides a guarantee which protects you against payment errors. If you are a Direct Payment holder, you will need to pay your assessed charge into your Direct Payment account by standing order.

**11.2** When an application for financial assistance is completed, you will be asked to complete a Direct Debit mandate to enable assessed charges to be collected.

## **12. Duty to notify changes of circumstances**

**12.1** If you have applied for financial assistance, you must promptly (within a period of no longer than 21 days from the day the change occurs) tell us in writing about any change of circumstances which might affect the assessment. This includes relevant changes that happen:

- Between completing the application for financial assistance and a decision being made on it, or
- After the decision is made where you have been assessed as being entitled to financial assistance.

**12.2** If you do not tell us about any relevant changes, we may take action against you. This could include court action.

**12.3** Examples of changes include

- Increase or decrease in income and/or capital.
- Change of property ownership.
- Death of a spouse or partner
- Receiving money or assets through gift or inheritance.
- Receiving or ceasing to receive a benefit.
- Moving address or a person who used to live in your property no longer living there.
- Someone else moving into your home.

**12.4** These examples are not exhaustive. You should tell us about any changes that may affect your entitlement to financial assistance from the Council.

**12.5** Any increase or decrease in charges will apply from the date of the change of circumstances.

### **13. Data Sharing**

**13.1** The Council is registered with the Information Commissioner's Office under the Data Protection Act 2018 and information provided by you for the purposes of Financial Assessments will be used in accordance with the Act.

**13.2** Cornwall Council, as the Data Controller is committed to protecting your privacy and any personal data you provide, or we collect about you, will be stored securely. It will only be used to assess your application for financial assistance, or otherwise in accordance with our Privacy Policy. We will not use your information for other purposes or give it to anyone else unless we are required to do so by law, for example we have a duty to protect public funds so we may use the information held about you for the prevention and detection of fraud and this may require us to share it with other Council Services or organisations responsible for auditing or administering public funds.

**13.3** We may use information obtained from other Council Services, or organisations such as the Department for Work and Pensions, to enable us to accurately assess your application for financial assistance.

### **14. Appointeeship**

**14.1** An [Appointee](#) is a person who has been appointed by the Department for Work & Pensions (DWP) to receive welfare benefits on your behalf if you are unable to manage your own affairs, such as household bills, food, personal items and residential accommodation charges. This would usually be because of mental incapacity.

**14.2** Where an Appointeeship is already in place and you are a self-funder, the Appointee will be responsible for contracting direct with the care home and paying fees.

**14.3** Where the Appointeeship is not in place at the time you start to live in the care home, we will pay the care home direct for up to 6 weeks to allow the Appointeeship to be granted. The Appointee will need to pay back fees the Council has made during this period in full within 28 days of the Appointeeship being granted.

## **15. Lasting Power of Attorney and Deputyship**

**15.1** If you have mental capacity, you can appoint an attorney to deal with your affairs. This is called a Lasting Power of Attorney (LPA). Separate LPAs are required to cover:

- Property & Financial matters
- Health & Welfare matters

**15.2** The person you appoint as your LPA for property and financial matters can make decisions on your behalf and manage your property and financial affairs, even if you do not have capacity at a later date.

**15.3** However, if you no longer have capacity and do not have a valid LPA in place then the only legal way in which another person can make decisions on your behalf is through an application to the Court of Protection for [Deputyship](#).

**15.4** Where a Deputyship for property and financial affairs is granted and you are a self-funder, the Deputy is responsible for contracting directly with the care home and paying all future charges.

**15.5** Where the Deputyship is not in place at the time you start to live in the care home, we may pay the care home direct for up to 6 months to allow the deputyship to be granted.

**15.6** The Deputy will need to repay the Council in full for any fees it has paid during this period in full within 28 days of the Deputyship being granted.

**15.7** The Council reserves the right to take legal action where the Court of Protection Deputyship has not been granted in a reasonable period of time. In these circumstances the Council may cease funding the care and refer the matter to the Court of Protection to appoint an alternative deputy to manage the customer's property and financial affairs.

**15.8** The Council will need to see documentary evidence of these Appointeeship and Court of Protection applications within the timescale outlined below in order to set up and maintain arrangements for payment of care fees.

- I. Evidence must be provided within 6 weeks of starting an application for financial assistance.
- II. Or within 1 month (30 days) following any written request by the Council

**15.9** Failure to comply with any of the requests above may result in the Council withdrawing the funding and taking action to recover the full amount outstanding.

**15.10** The Council reserves the right to take legal proceedings to recovery any accrued debt that remains unpaid or where representatives are not complying with the requirements as set out in the Charging Policy.

## **16. Property and Deferred Payment Agreements (DPA)**

**16.1** If you are receiving care in your own home, your property will not usually be considered when you apply for financial assistance.

**16.2** If you are receiving care in a care home, your property will usually be considered when you apply for financial assistance. It will not be considered when your spouse or partner continues to live there if you move permanently into a care home.

**16.3** However, we will not take the value of your property into account for the first twelve weeks of you living in a care home. This is called the “twelve-week property disregard”. It is intended to give you time to seek independent financial advice and consider the options for funding the care home fees.

**16.4** A deferred payment agreement (DPA) is an interest-bearing secured loan. If you are a self-funder and own your house, you can apply for a DPA so you can pay care home fees without having to sell your home immediately.

**16.5** The loan is secured on your house and the Council releases the loan by instalments on a periodic basis. Each instalment is the same sum as the care home fees you are responsible for (less any personal contribution that we have asked you to make).

**16.6** We will charge you for the costs of setting up and running the deferred payment. These costs can be paid separately or added to the loan. We will also charge:

- Interest on the loan.
- Annual administration fees.
- Termination costs.

**16.7** The loan will then be repaid when you sell your home.

**16.8** Further information is set out in the [Deferred Payment Agreements policy](#).

## 17. Deprivation of Assets/Income

**17.1** Deprivation of income and/or capital is where you reduce or dispose of income and/or capital to avoid paying towards the cost of your care. Examples of this are:

- Gifting property, investments, or assets to another person
- Giving large monetary gifts.
- Placing a property in Trust - Trusts are legal devices designed to hold assets on behalf of named beneficiaries.

**17.2** If the Council determines that you have deprived yourself of capital and/or income to reduce or avoid a charge for care and support, we will charge you as if you still have the capital and/or income.

**17.3** The Council will also consider taking legal action, including action to recover any money owed for charges. Such action could be taken against you and/or the person(s) who received the capital and/or income.

## 18. Gaps in Service

**18.1** If there is a period of time where you do not have any service provided e.g. when in hospital:

- If less than 3 months gap, it will be assumed that your financial circumstances have not changed and we will continue to charge based on your current application for financial assistance.
- If more than 3 months, we will contact you to check if there has been a change in circumstances (unless an annual review has already been scheduled). If circumstances have changed a new application for financial assistance will need to be completed.
- If more than 12 months a new application for financial assistance will need to be made.

## 19. NHS Continuing Health Care

**19.1** If you have a care package and become eligible for [NHS Continuing Health Care](#), this will usually cover your social care needs and we will not charge you from the date eligibility is confirmed.

**19.2** If your entitlement to NHS Continuing Health Care (CHC) is stopped, you will need to make an application for financial assistance and pay any charges that are assessed for services arranged or provided by the Council.

**19.3** If we have already assessed an application for financial assistance, we will apply the principles in paragraph 18 above.

**19.4** If you are not eligible for CHC and challenge that decision, charges for adult social care remain payable and are not put on hold. You will need to complete an application for financial assistance and pay any charges for services arranged by the Council. If you do not pay assessed charges, the Council will take any action necessary to recover the costs.

## **20. Charging Informal Carers**

**20.1** Where an informal carer (a person who supports your care needs without cost) has eligible support needs of their own that are not met through your support arrangements, the Council will undertake a carer's assessment to establish needs and where needed arrange support for the Carer.

**20.2** The Council has the power to charge carers for any support provided. However, we recognise that informal carers are an invaluable source of support for many people. Through their support, carers save the Council significant money as without their care and support the Council would need to provide the support at a cost.

**20.3** The Council has therefore decided not to charge carers.

## **21. Charges for services not received and refunds**

**21.1** Where planned care services are not used, or not cancelled in advance, the services may be deemed to be delivered in accordance with your support plan, and therefore subject to normal charging rules.

**21.2** This may mean that you are charged for services you do not receive, even if the absence is planned or unavoidable (such as a medical appointment).

**21.3** If you are living in a care home and are admitted to hospital, charges will still be payable. Charges would not be payable if the care home can no longer offer the place or they are unable to meet your needs.

## **22. Debt Recovery**

**22.1** The Council has the power to recover money for arranging care and support services and will exercise this power if you do not pay charges you have been assessed as needing to pay.

**22.2** If payment is not made this can result in legal action to recover the debt outstanding, using all of the recovery powers available under regulations and common law.

### **23. Increases to Charges**

**23.1** All non-statutory fees and charges will be increased annually in accordance with legislation, inflation and other factors that affect specific charges e.g. interest rates for Deferred Payment agreements.

**23.2** The Council will also review services which could be charged for, but which are currently provided free of charge.

### **24. Direct Payments**

**24.1** If you choose to take your personal budget as a Direct Payment, assessed charges are deducted and you receive a net payment as your budget. To make up the difference, you should set up a Standing Order to pay assessed charges into the Direct Payment account.

**24.2** There are regular reviews of direct payments to ensure money is spent appropriately.

**24.3** If Direct Payments have been misused, have not been spent or you have not paid assessed charges, the Council may take action in accordance with this policy, the [Direct Payment policy](#) and [Direct Payment agreement](#).

### **25. Review and Appeals Process**

**25.1** If you disagree with our decision on your application for financial assistance you can do one of the following:

- Request an explanation of our decision
- Appeal against the decision.

#### **Explanations**

**25.2** You can ask for an explanation of our decision. You should make this request within one month of the date of the letter telling you about our decision. Your request can be made in writing or by phone by contacting the Charging Assessment Team.

### **Making an Appeal**

**25.3** You can appeal against our decision if you feel it is not correct.

**25.4** Your appeal can be made either in writing or by phone to the Charging Assessment Team. This can be done by you or a person acting on your behalf.

**25.5** You should make the appeal within 1 month of receiving the outcome of our application for financial assistance or your letter of explanation.

**25.6** We will contact you to make sure we have understood your reasons for appeal.

**25.7** We will write to you to confirm the outcome of your appeal

### **Review**

**25.8** If you think the charge you are paying is no longer correct because your circumstances have changed, you can ask us to review your financial assessment by contacting the Charging and Assessment Team.

## Appendix 1 – Income Considered

### **Income Considered in the Financial Assessment (not an exhaustive list)**

- Attendance Allowance, including Constant Attendance Allowance
- Bereavement Allowance
- Carers Allowance
- Disability Living Allowance (Care component)
- Employment and Support Allowance or the benefits this replaces such as Severe Disablement Allowance and Incapacity Benefit
- Income Support
- Industrial Injuries Disablement Benefit or equivalent benefits
- Jobseeker’s Allowance
- Maternity Allowance
- Pension Credit
- Personal Independence Payment (Daily Living component)
- State Pension
- Universal Credit
- War Pension (where not paid to the veteran)
- Working Tax Credit.
- Income from certain types of investment where the capital value has been ignored from the financial assessment
- Tariff Income (\*£1 for every £250 or part £250 on savings between the lower capital threshold (£14,250 as at January 2020) and the upper capital threshold (£23,250 as at January 2020).

### **Income Ignored from Financial Assessment (not an exhaustive list)**

- Mobility component of Disability Living Allowance/ Personal Independence Payment
- Earned income from employment
- Child Support Maintenance Payments and Child Benefit
- Child Tax Credit
- Guardians Allowance
- War Pension Scheme payments to veterans; War Pensioners Mobility Supplement
- War Widows Supplementary Pension
- Guaranteed Income Payments (but not Survivor Guaranteed Income Payments)
- Armed Force Independent Payments and Mobility Supplement
- Council Tax Reduction Schemes
- Student Loan and grant income

## **Appendix 2 – Capital Considered**

### **Capital Considered in the Financial Assessment (not an exhaustive list)**

- Buildings
- Land
- National Savings Certificates and Ulster Savings Certificates
- Premium Bonds
- Stocks and shares
- Capital held by the Court of Protection or Deputy appointed by that Court
- Any savings held in:
  - Building society accounts.
  - Bank current accounts, deposit accounts or special investment accounts.
  - SAYE schemes.
  - Unit Trusts.
  - Co-operatives share accounts.
  - Cash.
  - Trust funds

### **Capital Ignored from the Financial Assessment (not an exhaustive list)**

- The house in which the person lives in (non-residential assessment only)
- Personal possessions (e.g. art work or antiques)
- Payments in kind from a charity
- Surrender value of life insurance policies

### **Payments made or derived from:**

- The MacFarlane Trust
- The MacFarlane (Special Payments) Trust
- The MacFarlane (Special Payments) (No. 2) Trust
- The Fund (payments to non- haemophiliacs infected with HIV)
- The Caxton Foundation
- The capital value and payments from a Trust Funds which are from a payment for personal injury
- The Eileen Trust
- The MFET Limited
- The Independent Living Fund
- The Skipton Fund
- The London Bombings Relief Charitable Fund

### **Appendix 3 – Assessing Disability Related Expenditure (DRE)**

Disability Related Expenditures are those costs that you incur as a direct result of your disability.

If you have eligible DRE, the Council can take this into account when calculating the charge for support to meet eligible needs.

To qualify for DRE, you must be in receipt of:

- The care component of Disability Living Allowance
- Personal Independence Payment (Care) or
- Attendance Allowance.

The Care and Support Plan should also identify disabilities or medical conditions which demonstrate the need for DRE.

The following extracts from the [Care and Support Statutory Guidance](#) Annex C (P363 – 372) show what should be considered in relation to Disability Related Expenditure :

**Annex C 39** Where disability-related benefits are taken into account, the local authority should make an assessment and allow the person to keep enough benefit to pay for necessary disability-related expenditure to meet any needs which are not being met by the local authority.

**Annex C 40** In assessing disability-related expenditure, local authorities should include the following. However, it should also be noted that this list is not intended to be exhaustive and any reasonable additional costs directly related to a person's disability should be included:

- Payment for any community alarm system
- Costs of any privately arranged care services required, including respite care
- Costs of any specialist items needed to meet the person's disability needs, for example:
  - Day or night care which is not being arranged by the local authority
  - Specialist washing powders or laundry
  - Additional costs of special dietary needs due to illness or disability (the person may be asked for permission to approach their GP in cases of doubt)
  - 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 individual's disability and not met by social services
- 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 waiting for supply of equipment from the local 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. In some cases, it may be reasonable for a council not to take account of claimed transport costs – if, for example, a suitable, cheaper form of transport, for example, council provided transport to day centres is available, but has not been used.
- In other cases, it may be reasonable for a council not to allow for items where a reasonable alternative is available at lesser cost. For example, a council might adopt a policy not to allow for the private purchase cost of continence pads, where these are available from the NHS

**Annex C 41** The care plan may be a good starting point for considering what is necessary disability-related expenditure. However, flexibility is needed. What is disability-related expenditure should not be limited to what is necessary for care and support. For example, above average heating costs should be considered

Evidence of spend will be required, such as receipts and invoices. If this is not provided at the time of the financial assessment:

- If provided within 28 days, any reduction in charge due to the DRE will be backdated to the date of the assessment.
- If evidence is provided after 28 days, any reduction will be made from the date of receipt of the last supporting evidence.
- Where evidence is not provided no DRE will be allowed.

## **Appeals, Complaints and Compliments**

You can appeal against decisions made by the Council in relation to your care by emailing [ascfeedback@cornwall.gov.uk](mailto:ascfeedback@cornwall.gov.uk)

A link to the Council's online complaints process can be found here: [www.cornwall.gov.uk/complaints](http://www.cornwall.gov.uk/complaints) or your complaint can be submitted in writing to:

Cornwall Council, New County Hall, Treyew Road, Truro TR1 3AY or by email to [ascfeedback@cornwall.gov.uk](mailto:ascfeedback@cornwall.gov.uk).

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