Adult Social Care

Draft Charging Policy
‘Determining Contributions to Personal Budgets’
### Appendix 1

#### Consultation Document

This draft policy has been prepared as part of the consultation process, annotations have been added to the proposed policy to highlight key changes and to explain how the proposals differ from the current policy. Please take note of the ‘key changes’ and ‘key statement’ boxes included in the document when considering your response to the consultation questionnaire.

#### Key Change-

#### Key Statement

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### Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy</td>
<td>Is a document that explains how Wiltshire Council will make decisions about a particular area or areas. Policies are used to make it clear to everyone what they can expect from Wiltshire Council.</td>
</tr>
<tr>
<td>Consultation</td>
<td>Is when the Council shares its ideas about a proposal to gather the views of communities and people who may be affected if the changes are agreed. Wiltshire Council will consider feedback gathered during the process and may make changes before submitting the proposal to elected members who make decisions.</td>
</tr>
<tr>
<td>Care Act (2014)</td>
<td>This is the law that sets out how local authorities must deliver care and support services in England. The draft policy has been developed so as to comply with the requirements of the Care Act, the Care and Support Statutory Guidance and The Care and Support (Charging and Assessment of Resources) Regulations 2014.</td>
</tr>
<tr>
<td>Wellbeing</td>
<td>This concept is central to the Care Act and must inform all of Local authority’s activities. There is no one definition of wellbeing and it is a broad concept. Considerations of wellbeing will take the following into account;</td>
</tr>
</tbody>
</table>
|                    | • Personal dignity  
|                    | • Physical and mental health and emotion well-being  
|                    | • Protection from abuse  
|                    | • Control by the individual over day-to-day life  
|                    | • Participation in work, education, training, or recreation  
|                    | • Social and economic well-being  
|                    | • Domestic, family and personal  
|                    | • Suitability of living accommodation  
<p>|                    | • The individual's contribution to society  |
| Carer              | A carer is someone (aged 18 or over) who helps another person in their day to day life, usually a relative or friend, who could not manage without that support. This is not the same as someone who provides care professionally or through a voluntary |</p>
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Eligible Needs</td>
<td>Care and Support needs that meet the criteria set out in the Care Act and as such must be met by the Council based on your financial situation</td>
</tr>
<tr>
<td>Information</td>
<td>Means the communication of knowledge and facts regarding care and support.</td>
</tr>
<tr>
<td>Advice</td>
<td>Means helping a person to identify choices and/or providing an opinion or recommendation regarding a course of action in Relation to care and support.</td>
</tr>
<tr>
<td>Duty</td>
<td>This means that the Council is legally required to do what it sets out in the legislation.</td>
</tr>
<tr>
<td>Discretionary Power</td>
<td>These are powers Wiltshire Council can choose to use but are not legally required to do so.</td>
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**Terms included in this Policy**

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Personal Budget</td>
<td>Is the agreed amount of funding required to meet an individual’s assessed needs. The Council’s contribution to this is always paid minus the individual’s own contribution.</td>
</tr>
<tr>
<td>Financial Assessment (Means Test)</td>
<td>A meeting to establish your assets and income so as to determine how much (if anything) you will need to pay for care and support services. The purpose is to establish what it is reasonable for a person to pay towards the cost of their support.</td>
</tr>
<tr>
<td>Disposable Income</td>
<td>The amount of money you have available to spend once daily living costs have been deducted from the total income you have.</td>
</tr>
<tr>
<td>Upper Capital Limit</td>
<td>Is the maximum amount of capital a customer can have to receive financial support from Wiltshire Council. Customers with more than the upper capital limit will be required to pay the full cost of their care and support.</td>
</tr>
<tr>
<td>Lower Capital Limit</td>
<td>Is the amount of capital you must have for your savings to be considered in accordance with this policy. If you have assets below the Lower Capital limit only your income will be taken into account.</td>
</tr>
<tr>
<td>12 week property disregard</td>
<td>Is available to customers who have eligible needs with a property valued at above the upper capital limit but with savings below the upper capital limit. For a period of up to 12 weeks the Council will fund care and support services in a care home based on the rate the Council can commission care and support services. If you choose a service that charges more than the Council can buy this care for you will be required to pay a top up.</td>
</tr>
<tr>
<td>Deferred Payment</td>
<td>Is a loan from the Council secured against the equity in your home so that you can pay for Care and Support services. By entering into a deferred payment agreement, a person can ‘defer’ or delay paying the costs of their care and support until a later date. The Council will charge an administration fee for setting up the loan and interest will be charged.</td>
</tr>
<tr>
<td>Contribution</td>
<td>This is the amount of money you need to pay for your care and support service based on your assessed income and capital assets.</td>
</tr>
</tbody>
</table>
If it is identified that you have eligible care and support needs you will be informed of an amount of money which you can use to help create a support plan. Indicative budgets are just a ballpark figure and are not a guarantee of funding this is your ‘personal budget’ (see above).

<table>
<thead>
<tr>
<th>Welfare Benefits Check</th>
<th>A check completed as part of a financial assessment to make sure you are getting all the benefits you are entitled to.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td>All of the money you get on a regular basis (except Disability related expenditures)</td>
</tr>
<tr>
<td>Disability Related Expenses (DRE)</td>
<td>These are expenses that are disregarded from your income for the purpose of calculating your contribution. Please see the policy for details about what DRE items it is proposed will be allowed.</td>
</tr>
<tr>
<td>Arrangement fee</td>
<td>A fee charged by the Council to people with assets above the maximum threshold who ask the Council to arrange care at home on their behalf.</td>
</tr>
<tr>
<td>Third Party Top Up</td>
<td>An amount of money paid by a friend, relative or organisation to a care provider that charges more than the Council would reasonably expect to pay based on identified care and support needs. The Council will always offer people a choice of providers where no top up is required.</td>
</tr>
<tr>
<td>Non residential services</td>
<td>Care and support services provided in your own home, this includes sheltered housing and supported living.</td>
</tr>
<tr>
<td>Residential services</td>
<td>Services in a care home or care home with nursing.</td>
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Policy Cover Information

<table>
<thead>
<tr>
<th>Policy number</th>
<th>4</th>
<th>Version number</th>
<th>2</th>
<th>Status</th>
<th>Draft</th>
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<tbody>
<tr>
<td>Implementation lead</td>
<td>All adult social care managers</td>
<td>Implementation date</td>
<td>Winter 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policy approved by</td>
<td>Officers with delegated authority to approve annual fee charges and uplifts</td>
<td>Date approved</td>
<td>Autumn 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Next review date</td>
<td>April 2017</td>
<td></td>
<td></td>
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Policy Control Sheet

<table>
<thead>
<tr>
<th>Policy title</th>
<th>Charging Policy</th>
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<tbody>
<tr>
<td>Purpose of policy</td>
<td>To explain how Wiltshire Council works out how much a person should contribute towards the cost of their care and support</td>
</tr>
<tr>
<td>Policy author(s)</td>
<td>Olly Spence, Andrew Osborn and David Bowater</td>
</tr>
<tr>
<td>Lead Director</td>
<td>James Cawley, Strategy &amp; Commissioning</td>
</tr>
<tr>
<td>Target audience</td>
<td>Frontline staff and members of the public</td>
</tr>
<tr>
<td>This policy supersedes</td>
<td>Charging Policy for non residential services 2014-15.</td>
</tr>
<tr>
<td>This policy should be read alongside</td>
<td>Personalisation Policy</td>
</tr>
<tr>
<td></td>
<td>Prevention Policy</td>
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<tr>
<td></td>
<td>Deferred Payment Policy</td>
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<td></td>
<td>Provision of Social Care Policy</td>
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<tr>
<td>Related Procedures</td>
<td></td>
</tr>
<tr>
<td>Monitoring and review lead</td>
<td>Executive Office</td>
</tr>
<tr>
<td>First year review date</td>
<td>April 2017</td>
</tr>
<tr>
<td>Subsequent review date</td>
<td>April 2018</td>
</tr>
<tr>
<td>Internet link</td>
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</table>

This policy can be made available in a range of accessible formats if required.
Appendix 1

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c. Key Principles
d. National Context
e. Charging - the Process in Practice
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a) **The Charging Policy** – ‘Determining Contributions to Personal Budgets’

Following an assessment of need, Wiltshire Council may agree a care or support plan to address an individual’s unmet eligible needs in accordance with the Care Act 2014 and financial regulations issued annually. The cost of the care in the support plan forms the basis of an individual’s personal budget which can be used either to pay for council commissioned services, or managed directly by the individual themselves, in the form of a direct payment, or a combination of both. This personal budget will, from April 2020, accrue within an individual’s Care Account; which after reaching an upper limit of £72,000, the council will be responsible for meeting in its entirety.

As resources are limited, Wiltshire Council undertakes a financial assessment to determine the individual’s (and the council’s) contribution to their personal budget before the cap on care is reached. This is undertaken in line with national guidance on charging. Financial Assessment shall only be completed after an eligibility determination has identified a customer has unmet eligible needs.

In accordance with the Prevention Policy some support services will be provided to reduce, delay or prevent customers developing eligible needs. In these cases the Council may also conduct a proportionate financial assessment to establish a customers’ ability to pay for preventative services.

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**Key Statement-** The Care Act requires that all Local authorities make sure everyone who gets care and support services is given a personal budget. Personal budgets are the cost of an individual’s care and support service. Personal budgets can be managed by the Council on behalf of a person, provided through direct payments, or a combination of both. The amount an individual needs to contribute to care and support is based on an individual’s personal budget.

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b) **What Does It Cover?**

This policy applies to all people who have been assessed as having an eligible need. This Policy is designed to provide everyone with care and support needs and those without needs with information regarding charging that will help them to make decisions regarding care and support.

**All services will be subject to normal charges in accordance with this policy**

**Exceptions: Individuals will NOT be charged for:**

1) Assessment of needs and care planning will not be charged for, since these processes do not constitute “meeting needs”.

2) Services identified in the Care Act including community equipment aids adaptations under the value of £1000
3) After-care services and support provided under section 117 of the Mental Health Act 1983
4) Care and support provided to people with Creutzfeldt-Jacob Disease.
5) Carers: ‘carers services’ that have been provided after a carer’s assessment has identified a carer has eligible needs for support
6) Preventative Services: The Prevention Policy outlines preventative services that may not be charged for based on the likelihood a service will prevent the following.
   - a person from being admitted to hospital
   - a person from needing to move into residential care
   - a need from developing and/ or escalating; and so supporting a person to remain independent at home
7) Intermediate care services will also be provided through the Councils Prevention approach. These services shall not be means tested and support will be free for a period of up to six weeks. If a customer remains in intermediate care services over six weeks then a financial assessment may be required to determine charges in accordance with this policy.

c) Key Principles

The principles for this policy sit alongside the overarching principles set out in the Personalisation Policy. The details specific to the Charging Policy are as follows:

- Individuals will be asked to complete a financial assessment to enable the Council to calculate their contribution.
- The contributions will be calculated openly and transparently with individuals treated in a fair and consistent manner.
- Contributions will not exceed the full cost of the care.
- Contributions will be calculated on the basis of current income and savings and the charge will initially be based on that amount. If after a welfare benefits check it is identified that the customer may be entitled to more benefits, charges will be recalculated and backdated on the basis of the additional income.
- Individuals will be offered a welfare benefits check to ensure that they are receiving all of the benefits to which they are entitled.
- A reassessment of contributions will be carried out annually for residential care or following a request arising from a change of circumstances, such as moving address or significant change in financial circumstances.
- A reassessment of contributions will be carried out for customers in receipt of non residential care services whenever there is a significant change in financial circumstances or following a request arising from a change in circumstances or annually if this is deemed to be appropriate and proportionate.
• If a person does not wish to, or refuses, to disclose financial information they will be required to pay the full cost of the service.

Key Statement- The overarching principle behind the development of this policy is that people who need care and support should contribute what they can reasonably afford to pay. The proposed policy explains how the Council will calculate what is reasonable, based on a person’s income and capital assets such as property.

d) National Context

This policy is written in accordance with the statutory regulations and guidance set out in the Care Act (2014). The principles behind the legislation have informed the development of this policy.

Local authorities have discretionary powers to charge adults who receive care and support services and have been assessed as having capital and/or property assets below the national minimum thresholds.

The Care Act gives Local Authorities the discretionary legal power to charge for care and support services based on an individual’s assets and income.

e) Charging - the Process in Practice

Wiltshire Council will exercise the discretionary powers set out in the Care Act and will charge for care and support services (excluding services for carers, some prevention services, intermediate care services and other exceptions set out above)

The amount Wiltshire Council will charge shall be in accordance with this policy and all applicable legislation.

1. Information

Information will be provided to all individuals required to pay towards their care and support, explaining this policy. The appropriate rates of contributions and allowances for all individuals will be updated annually to reflect changes.

All care and support plans will cover financial matters and the charges that a customer may need to pay. This will include to an explanation of personal budgets and the ways in which a personal budget can be taken. All customers will be informed that the Council can arrange care on their behalf but that there will be a charge for this service for customers who are assessed as having assets above the maximum threshold.

After the eligibility determination people will be given an indicative budget. Indicative budgets are a ‘ball park’ figure and provide a range within which it is estimated an individual’s personal budget is likely to be. An indicative budget is not a guarantee of funding but is intended to help a person plan their care and support in the context of
the money that is likely to be available to them.

**Key Statement** - The way in which the Council calculates personal budgets explained in this policy has been agreed in the Council’s personal budget policy which was subject to a period of consultation and has been formally adopted by the Council. This does not constitute a change to current policy. More information about personal budgets and the personal budget policy can be found at

http://www.yourcareyoursupportwiltshire.org.uk/paying-for-care/personal-budgets.aspx

### 2. Financial Assessment

A financial assessment (means test) will be undertaken for all individuals who need care at home or residential care and request financial help or direct payments (when applicable) from Wiltshire Council or other services to meet that need.

The financial assessment will be carried out by specialist financial assessment officers as soon as possible following the completion of the care and support plan. This will usually be a personal visit if care at home is required, and a provisional indication of the level of contribution will be indicated immediately where possible. This will be confirmed in writing as soon as possible following the completion of the financial assessment and any checks that may be necessary.

For residential care the financial assessment would normally be completed by post and a provisional contribution will apply until a confirmed contribution is calculated.

The assessed contribution shall then be backdated to the start date of the service or placement.

In assessing what a person can afford to contribute Wiltshire Council will apply the upper and lower capital limits as set out in the regulations. These limits will change over time in accordance with legislation. In these instances Wiltshire Council will apply the revised lower and upper capital limits.

An individual’s contribution can be known as the client contribution and shall mean the amount the person has been assessed as needing to pay for their care and support.

Individuals will be advised that they can be supported by a relative, friend or other representative during any financial assessment visit.

### 3. Welfare Benefits

All individuals who are subject to a financial assessment will be offered a welfare benefits check and where appropriate will be assisted in completing a claim for benefits to which they appear to be entitled.
A financial re-assessment will be undertaken following the award of benefits to re-calculate the contribution payable.

4. Date of Commencement of Charges

For care at home a charge will start from the date of commencement of service, the individual having been informed of the potential full cost beforehand (unless specifically informed that a period of free care applies).

Any subsequent financial assessment that then indicates a customer has assets above the maximum threshold shall mean that the customer will be required to pay the full cost of the care backdated to the commencement of service.

If an individual is eligible for additional welfare benefits, there may initially be a provisional charge that will be adjusted to reflect any increase in benefits. The revised contribution would be backdated to the date of the award of the benefits or commencement of service which ever was appropriate. For residential care any charge will apply from the date the placement begins.

5. Calculating the Charge

**Personal Budgets**

As set out in this policy and the personalisation policy a personal budget is the agreed amount of funding required to meet an individual’s assessed needs. The amount an individual has to contribute towards care and support services is based on their personal budget. Personal budgets include the costs of any care and support services that have been agreed to meet an individual’s needs including day care, respite and any other services. Personal budgets do not include services that are excluded by this policy such as intermediate care services.

All contributions are calculated based on an individual’s agreed personal budget amount in accordance with this policy.

**Direct Payments**

Direct Payments are a way in which a person can receive their personal budget when they are given the personal budget amount and are able to arrange care and support services independently. This charging policy will apply to individuals who choose to receive a direct payment as well as those that use services commissioned by Wiltshire Council. The individual’s contribution will be deducted from the direct payment.

Current legislation does not allow people to use Direct Payments to pay for residential care services. If legislation changes to allow this the Council will apply the same standards set out in this policy for all Direct Payments.
Intermediate Care Services

This section applies to all bed based and home intermediate care services.

Intermediate Care services are short term periods of support provided to prevent an admission to an acute (hospital/health) service or to facilitate a quick discharge from hospital.

These services are not means tested and no charges shall be made for these services for a period of up to six weeks. If intermediate care services are provided for a period of more than six weeks Wiltshire Council may exercise its right to charge for this support. The decision to charge for intermediate care services extending beyond six weeks shall be in accordance with the Prevention Policy. It will be based on the preventative benefits and the likelihood the service will prevent admission to hospital, permanent residential care or significant impact on a customer’s independence at home.

Residential Services

In accordance with the Care Act, individuals are expected to pay for this type of service (residential care), in line with their ability to pay as determined under Regulations.

The calculation to identify the charge that will apply will be as follows for residential services:

Savings

If an individual has more than the upper capital limit defined in the regulations in savings and capital (including the value of their home or other property) they will normally be required to pay the full cost of their care, and will not be entitled to financial assistance from the council (see below regarding property). Individuals will be advised of the options available for arranging their care including requesting Wiltshire Council to arrange if for them.

If you have saving/capital below the lower capital limit this will be disregarded (i.e. you will be assessed on the basis of your income alone) but if you have savings between the Lower Capital Limit and Upper Capital Limit the council will add £1.00 per week to your income (called tariff income) for each £250.00 or part thereof between these amounts (i.e. £15,000 savings would attract a tariff income of £3.00 per week as this is £750 over the disregarded savings presuming the Lower Capital Limit is £14,250).

Income that accrues to any sum of capital derived from an award of damages for personal injury that is administered by the High Court, a County Court or the Court of Protection or that can only be disposed of by order or direction of any such court and any income that accrues to such capital shall not be included in tariff income calculations in accordance with the Care Act.
Tariff Income will be revised if there are any changes to the lower or upper capital limits.

**Income**

All of an individual’s income (including benefits) is included in a financial assessment in accordance with the charging regulations to determine the contribution they will be asked to make towards their care home fees. Some income is disregarded from the financial assessment, as set out in the Care Act and associated regulations such as mobility allowance, and a figure for their personal allowance, presently £24.90 per week.

**Key Statement** - There is no change to the way in which contributions are calculated for customers who are supported in residential care homes (with or without nursing) on a permanent basis.

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**Deferred Payments**

A Deferred Payment is a loan from the Council secured against the equity in an individual’s home so that they can pay for care and support services. By entering into a deferred payment agreement, an individual can ‘defer’ or delay paying the costs of their care and support until a later date.

The Council will offer deferred payments to all eligible individuals in accordance with the deferred payments policy. The policy will charge an administration fee for setting up the loan and interest charges will be incurred against the loan.

**Key Statement** - Deferred Payments were introduced by the Care Act 2014. The Council has a responsibility to offer deferred payments to everyone who is eligible. The Council has consulted on a separate deferred payment policy which explains the Council will exercise its power to charge interest on any money borrowed from the Council and an administration fee to cover the costs of setting up the payment.

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**Temporary Residents**

**Respite Care**

Respite care is often provided to allow a carer a break from their caring role. Respite care means that the person who needs care and support services is supported in a care home or at home for a short period. The calculations for contributions for respite are based on the cared for persons personal budget.

**Key Change** - The current policy applies a standard contribution for respite care. The revised policy proposes that contributions for respite care will be based on an individual’s personal budget and the calculations based on a full...
Temporary Placements

Temporary placements are short term residential or nursing care home placements. Individuals in receipt of a temporary placement shall be subject to a full assessment and charged in accordance with this policy.

A financial assessment will be undertaken taking an individual’s income and savings between the lower capital limit and upper capital limit into account; but allowances to maintain their home will be included in any assessment.

Arrangement Fees

Individuals who have capital above the threshold and have assessed eligible needs can ask the Council to arrange their care and support services at home. Wiltshire Council will arrange care on their behalf but will charge an arrangement fee for doing this. Every time an individual asks the Council to arrange or revise their care and support services the fee will be charged.

Key Change- The Care Act introduced a legal responsibility for Councils to arrange care and support services for people with assets above the maximum threshold who have care and support needs that meet the national eligibility criteria and want care at home services. The Council is proposing that in meeting this responsibility they will exercise the optional power to charge an arrangement fee for providing this service. The fee is based on the actual costs the Council would incur in delivering this service. The fee is currently set at £56.00 and will apply each time an individual asks the Council to arrange a care package for them. The fee will be reviewed based on any changes to costs.

Choice

If an individual qualifies for financial assistance from the council they will be given details of care homes that provide care able to meet their needs in order for them to choose a care home that suits them.

Individuals have a right to choose accommodation in line with the council’s policy on the provision of social care. However, if the care home they choose charges a fee above the rate the Council can commission their care and support for, they will need to arrange a top up or deferred payment agreement to meet the shortfall.

Any contribution that an individual is asked to make towards their care will form an aspect of their total personal budget for example if their personal budget is £600 per week and they have been assessed to contribute £240 per week, the individual will pay £240 and the Council will pay £360 per week. Any top ups an individual chooses
to pay shall not form a part of their personal budget.

‘First party Top ups’ where an individual pays additional amount for their care and support fees are currently not allowed under the regulations, apart from for 12 week property disregards. If the regulations in the future change to allow first party top ups, the Council will permit them to be made

**Property**

If an individual only owns the home they live in, this is normally regarded as an asset but can be disregarded in the following circumstances if it is occupied by a:

- spouse
- relative aged over 60
- disabled relative
- dependent child under 16

If an individual own their home only (or has an interest in it valued at more than the upper capital limit) but they have savings of less than the upper capital limit, they may be entitled to financial assistance from the council for up to 12 weeks called a ‘12 week property disregard’ to assist with their care home fees. At the end of the 12 weeks, although the individual will then be liable to meet the full cost of their care, they can ask the council for a deferred payment to help meet care fees pending the sale of their property (see the Deferred Payment Agreement policy).

If an individual does not wish to sell their property immediately, the council can still offer a loan which is termed ‘a deferred payment’. This is when the council will place a legal charge against an individuals’ property to secure the loan. In both instances they will have to make a contribution towards the full fee based on a financial assessment of their income as indicated under ‘INCOME/ SAVINGS’ above and the council will loan the difference to make up the full cost of the care fee

Deferred Payments shall only be offered in accordance with the deferred payment policy after a valuation of the property has been completed. An administration charge and interest charges will be made against deferred payment loans in line with the deferred payment policy.

- **Paying for residential or nursing care where people own their property.**

**Payment/Contract Arrangements**

Once a care home has been identified, placement date agreed and contributions determined, the council will draw up a contract for an individual’s care with the care home provider. Any third party arrangement will need to be subject to formal agreement between the third party and the Council. The individual’s contribution should be paid direct to the care home and the council will pay its share direct to the
Calculating the Charge

Calculating the Charge for Non-Residential Services

Personal budget amounts will be used as the basis for all calculations of contributions to care and support.

If the council considers an individual can afford to pay in full for these services, it will in general not provide them without charging an arrangement fee as well as the cost of care.

In deciding if you can afford to pay the council applies the following rules to your capital (including savings) and income:

Capital

The council will not take into account the value of an individual’s interest in their only or principal home – but it will take into account the value of their interest in any other property.

In addition the council will not take into account:

- capital the total value of which is below the upper capital limit

- any other capital that the Department of Health’s guidance on Charging for Residential Accommodation, requires it not to take into account - unless there is good reason to take it into account, for example where you have received personal injury compensation (held now in trust or administered by the courts) for the same services that you ask the council to provide.

The council will take into account all other capital.

Income

The council will, to begin with, take into account all income, including pension income, and any other income.

The council will then make deductions from this income (see below) and treat the remaining income as disposable income. Disposable income is the amount of money you have available including any tariff income after all deductions for essential living costs and disability related expenditures (see appendix 1) have been deducted.

The Council will take into account one hundred percent of an individual’s disposable income when calculating how much they will have to contribute for Care and Support services.
The Council will take into account the full amount of any benefits when calculating contributions including the full rate of Attendance allowance received.

The council will then take all disposable income as income that you can be expected to use to pay for any services it provides for you, or to use to contribute to their cost.

**Key Change** The Council currently takes into account eighty percent of an individual’s disposable income when calculating how much people need to pay for care. As described above disposable income is the amount of money left over after all essential living expenses and disability related expenses (DRE) have been paid for. The policy proposes that Wiltshire Council will increase the amount of disposable income it takes into account from eighty to one hundred percent. This will mean that people who receive care and support services at home will need to contribute more for these services.

The current policy states that the Council will only take into account the lower rate of attendance allowance. The proposal means that the Council would take into account all of a person’s attendance allowance when calculating contributions. For individuals who receive the lower amount this would not represent a change but individuals who receive the higher amount would be required to contribute more for their care and support services.

**Savings**

If an individual has more than the upper capital limit defined in the regulations in savings they will normally be required to pay the full cost of their care, and will not be entitled to financial assistance from the council. Individuals will be advised of the options available to them for their care arrangements, including requesting Wiltshire Council to arrange it on their behalf.

If an individual has savings/capital below the lower capital limit this will be disregarded (i.e. they will be assessed on the basis of their income alone) but if they have savings between the Lower Capital Limit and Upper Capital Limit the council will add £1.00 per week to their income (called tariff income) for each £250.00 or part thereof between these amounts (i.e. £15,000 savings would attract a tariff income of £3.00 per week as this is £750 over the disregarded savings presuming the Lower Capital Limit is £14,250).

Income that accrues to any sum of capital derived from an award of damages for personal injury that is administered by the High Court, a County Court or the Court of Protection or that can only be disposed of by order or direction of any such court and any income that accrues to such capital shall not be included in tariff income calculations in accordance with the Care Act.

Tariff Income will be revised if there are any changes to the lower or upper capital limits.
Deductions

The following deductions will be made from income.

- For people under 60 years a sum equal to basic Income Support Personal Allowance plus premiums for age, level of disability or family status (but not Severe Disability Premium) plus 25% buffer. This is the General Living Allowance.

- For people over 60 years a sum equal to the Pension Credit Guaranteed Credit (but not Severe Disability addition) plus 25% buffer. This is the General Living Allowance.

- The Savings Credit Reward.

- Any housing costs such as mortgage and rent that is net of any housing benefit.

- Any council tax payable net of council tax benefit.

- The additional expenditure incurred as a result of a disability (Disability Related Expenditure) NB – appropriate evidence will be required to confirm expenditure and qualify for an allowance. Payments to family members will not be allowed as DRE unless there are exceptional circumstances Please see Appendix a details all disability related expenditure that will be disregarded and the evidence required.

- Any support provided by family members to a client in their own home will be expected to be provided free of charge.

Key statement- this section explains what essential living expenses such as housing costs will be deducted from an individuals’ income so that they never have to contribute more than they can afford to pay. Contributions will always be calculated so as to leave an individual enough income to pay for all their essential items.

Minimum and Maximum Charges

The minimum charge is £2 a week, i.e. an individual will not have to pay anything unless the council considers they can afford to pay at least £2 a week.

There is no maximum charge; an individual may be required to pay in full for the services provided.

Treatment of Couples

A partner’s income/savings does not affect the charge applied to an individual. However the council does seek information from a partner in order to apportion ‘housing costs’ incurred by the couple. If a partner chooses not to disclose, housing
costs will not be allowed. If a partner has more than the upper capital limit, no housing costs will be allowed. The Council will also ensure that both individual and their partner have at least the appropriate General Living Allowance rate plus 25% buffer, before any contributions are applied.

Payment/Contract Arrangements

Any contribution an individual is asked to make should be paid direct to the Provider and the council will pay its share direct to them as well. If an individual requests a direct payment, any contribution will be deducted from the direct payment and they will be expected to enter into a formal direct payment agreement and pay any assessed contribution into the direct payment account.

Intermediate Care/ Reablement

Charges will be waived for a period of up to 6 weeks or longer in accordance with the Prevention Policy where the specific eligibility criteria are met for intermediate care/reablement. If an individual remains in a service after intermediate care services have been concluded and an assessment of need has identified care and support needs the terms of this policy shall apply in terms of charges and choice.

Respite Care

Contributions for respite care will be based on an individual’s personal budget in accordance with the terms described in this policy.

Day Care Services

If an individual has more than the upper capital limit they are expected to meet the full cost of day care. If an individual has assets below the Upper Capital limit contributions for day care will be based on an individual’s agreed personal budget. If transport is arranged and provided by the Council then the cost of the transport is calculated on the basis of the cost of travel to the nearest suitable facility. Transport costs can include the costs of any transport assistants. If the day centre provides meals the individual will be asked to make a contribution towards the meal.

Pet Care

The Council will arrange for suitable care for pets if due to an unforeseen event an individual is not able to look after a pet. In the first instance the Council will identify family, friends or local charities that may be able to care for the animal. If this is not possible or appropriate the Council will arrange for pet care. The individual will be charged for all pet care costs incurred.
The individual is at the centre of everything we do. We will regularly ask people for their views about the services they receive and respond by shaping those services accordingly.

Individuals may wish to challenge various decisions, such as: the amount of their contribution or decisions regarding community or residential care. In such cases, they will be provided with a full and clear audit trail to explain why decisions were made. First of all, individuals should discuss and negotiate the decisions with the financial assessment team while the decisions are still being made. If an individual is still unhappy their case can be referred to the team manager for further discussion and negotiation.

Our complaints procedure can also be used at any time. Advocacy and support on complaints is available from SWAN advocacy services (http://swanadvocacy.org.uk / 01722 341851).

Feedback on the Council’s policies in general is welcome. Please email the document author.

Together with individual feedback, complaints information and feedback from staff, the information will be used to improve the Council’s policies and procedures in future.

**A review of this policy will take place in April 2017.**
Appendix A - Disability Related Expenditure (DRE)

The following sums may be disregarded from an individual’s income based on the provision of the required evidence.

<table>
<thead>
<tr>
<th>Expense</th>
<th>Maximum weekly allowance</th>
<th>Evidence Required</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal care arranged privately</td>
<td>£0</td>
<td>Personal care costs to meet eligible needs form part of a personal budget, so are not included in the DRE list. Cost to meet needs not considered eligible are also excluded</td>
<td>Included on list only to make clear that we do not disregard costs on this area</td>
</tr>
<tr>
<td>Domestic help</td>
<td>Actual Cost up to 2 hours</td>
<td>No change to current policy – split per household if appropriate</td>
<td>Only included if in support of an assessed eligible need and replaces need for funded support</td>
</tr>
<tr>
<td>Day or night care that is part of supported living accommodation</td>
<td>Actual Cost up to £25.00 per week</td>
<td>Evidence that the requirement for day or night care support, included in the costs of supported living accommodation, is required to address eligible needs</td>
<td></td>
</tr>
<tr>
<td>Specialist Items</td>
<td>N/A</td>
<td>Evidence of Purchase</td>
<td>Items of specialist equipment are listed below, but if agreed other items can be considered</td>
</tr>
<tr>
<td>a) Bed (Powered)</td>
<td>£4.20</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>b) Turning Bed</td>
<td>£7.20</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>c) Hoist</td>
<td>£2.88</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>d) Reclining chair (powered)</td>
<td>£3.30</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>e) Stair lift</td>
<td>£5.88</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>f) Wheelchair (Manual)</td>
<td>£3.75</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>g) Wheelchair (powered)</td>
<td>£9.12</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>-------------------------</td>
<td>--------</td>
<td>----------------------</td>
<td></td>
</tr>
<tr>
<td>Community Alarm system/lifeline</td>
<td>£4.20</td>
<td>Social worker confirms requirement as part of care plan, supported Care is reduced accordingly</td>
<td></td>
</tr>
<tr>
<td>Laundry/ Specialist washing powder</td>
<td>£3.65</td>
<td>Care plan will have identified incontinence problem. Identify more than four loads per week</td>
<td></td>
</tr>
<tr>
<td>Gardening</td>
<td>Actual cost up to £10.00 per household</td>
<td>Signed receipts for at least four weeks.</td>
<td></td>
</tr>
<tr>
<td>Additional household costs related to provision of personal care</td>
<td>Actual costs up to £3.00 per week</td>
<td>Evidence of Purchase</td>
<td></td>
</tr>
<tr>
<td>Heating- extra heating for medical reasons- check average costs against heating bills</td>
<td>£9.10</td>
<td>Annual fuel bills</td>
<td></td>
</tr>
<tr>
<td>Medication</td>
<td>Actual Cost</td>
<td>Letter from doctor confirming</td>
<td></td>
</tr>
<tr>
<td>Food or special diet for medical reasons e.g. diabetic</td>
<td>Actual cost up to £8.39</td>
<td>Shopping receipts</td>
<td></td>
</tr>
<tr>
<td>Home Maintenance</td>
<td>Up to £5.49</td>
<td>Receipts from contractors</td>
<td></td>
</tr>
<tr>
<td>Additional transport costs necessitated by illness or disability</td>
<td>Reasonable cost</td>
<td>Travel Receipts</td>
<td></td>
</tr>
<tr>
<td>Clothing( Heavy wear and tear)</td>
<td>Up to £5.60 per week</td>
<td>Receipt of purchase</td>
<td></td>
</tr>
<tr>
<td>Metered Water- above the average for their area and</td>
<td>Actual cost above local average</td>
<td>One years’ worth of bills from provider and related to eligible need</td>
<td></td>
</tr>
</tbody>
</table>
### Key Change

The list above details essential expenses that are related to a disability. These expenses will be considered on a case by case basis and will require evidence of the expenditure so that they are considered. The proposal includes a number of changes including removing continence products over and above those supplied by health and medication products.

The revised list proposes that the Council will take into account the actual amount of attendance allowance received (if any) currently only the lower rate of attendance allowance is considered.