

Fairer Contributions Policy

London Borough of Barnet



Adults and Health Directorate

POLICY COVER SHEET

POLICY NAME	Fairer Contributions Policy		
Document Description	This document sets out Barnet Council's policy on charging for adult social care services (non-residential services).		
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Status (Live/ Draft/ Withdrawn)	Final	Version	Final V2
Last Review Date	November 2021	Next Review Due Date	April 2023
Approval Chain:	DPR on behalf of Adults and Safeguarding Committee	Date Approved	

Version number	Date	Author	Reason for new version
1.6	February 2017	Gary Johnson	Changes to the maximum rate for home care services, the maximum rate for day care services, the sources of assessable income and how the guaranteed minimum income amount is calculated. Updates to various amounts provided annually by the Department of Health.
1.7	June 2017	Gary Johnson	Changes to take into account LAC circulars, NAFAO guidance on good practice, MIG rates remaining at previous levels. No longer assessing contributions towards Telecare. Universal credit as it is rolled out.
1.8	Sep 2021	Susan Friar/ Linea Heinonen	References to no longer applicable transition arrangement removed (pre-2017). Rates remaining at previous levels, dates updated.
1.9	Nov 2021	Sam Raffell	Addition to review (section 19) on process for agreeing changes and re-wording on the date that contributions started (section 8) to client contribution rates.
2.0	Nov 2021	Sam Raffell	Final changes reviewed and signed off by Legal.

Fairer Contributions Policy

Contributing towards the cost of social care services 2022/23

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1. Purpose

- 1.1. This document sets out Barnet Councils policy on charging for adult social care services (non-residential care services).
- 1.2. The policy is made in accordance with the legal requirements as set out in:
 - The Care Act 2014
 - The Care and Support (Charging and Assessment of Resources) Regulations 2014
 - Care Act Statutory Guidance.

2. Background

- 2.1. The Care Act 2014 introduced changes to the way social care services are delivered. The Care Act 2014 repealed much of the previous adult social care statutes as well as associated regulations and guidance. Under the Care Act 2014 the laws with regards to assessment, eligibility, and provision of care and support services as well as charging for care and support and financial assessments were consolidated into a single legal framework.
- 2.2. Councils are permitted under section 14 of the Care Act 2014 to charge for the cost they incur in meeting social care and support needs under the Act.¹ The Care Act 2014 also sets out when not to make a charge and that a financial assessment of the person's resources must be undertaken to determine what they can afford to contribute towards the cost of their care².
- 2.3. The Care Act 2014 makes provision for regulations to be made to set out the detail with regards to financial assessments and how to calculate what a person can afford to contribute towards the cost of their care and support, in particular, how different types of income and capital should be treated and the minimum amount of income a person must be left with after charging. These are set out in the Care and Support (Charging and Assessment of Resources) Regulations 2014 (the Regulations).
- 2.4. Further detailed guidance with regard to charging is set out in the Care and Support Statutory Guidance (CASSG) issued under the Care Act 2014 by the Department of Health (this guidance was last updated August 2021) Barnet Council must have regard to this guidance when assessing contributions towards the costs of care.

¹ Section 14 Care Act 2014; Section 18-20 Care Act 2014

² Section 17 Care Act 2014

- 2.5. The Fairer Contributions Policy document sets out Barnet Council's policy on charging for care and support services and how financial assessments are undertaken. Barnet Council exercises its power to charge for care and support services for residential and non-residential services. These powers are specific and follow from the legal framework as set out above.
- 2.6. Barnet Council continues to apply this Fairer Contributions Policy for non-residential services. The statutory guidance, Charging for Residential Accommodation Guide (CRAG) applicable to carrying out financial assessments for residential care accommodation charges, and to which this Policy also made some reference (for example with reference to capital limits), was superseded by the Care and Support Statutory Guidance (CASSG) from 1 April 2015 (as updated August 2021).
- 2.7. For each adult that meets the eligibility criteria³ for care and support services, a Personal Budget will be set from an assessment of care needs, at a level that should enable the adult to achieve their social care outcomes. A Personal Budget may be managed by the Council on behalf of the adult or managed directly by the adult or their financial representative. An adult can use their Personal Budget to purchase services such as homecare, or day-care, services that they require in order to meet their assessed care needs.
- 2.8. This Fairer Contributions Policy applies to those who receive support from Barnet Council to obtain non-residential care services either directly commissioned by Barnet Council or through a Direct Payment (or similar arrangement). Contributions will be assessed for everyone, regardless of whether they have chosen commissioned services, Direct Payments, or a combination of the two.

3. Policy Objectives

- 3.1. The Barnet Council's approach to charging for care and support needs is underpinned by the following key principles, these principles are also set out in the statutory guidance:
 - It is fair and equitable to all residents by ensuring there is a consistent approach to financial assessments, eligibility determinations and charging so those with similar needs or services are treated the same and anomalies between different care settings are minimised;
 - It ensures that people are not charged more than is reasonably practicable for them to pay;

³ These are the rules that the council applies to work out if an adult is entitled to have care and support arranged by the council. From April 2015, these rules are set by the Government so that they apply throughout England.

- Information on charging is clear and transparent. Providing information and advice in suitable formats to ensure that people or their representatives are able to understand what they will be charged and how that charge was calculated;
 - It promotes wellbeing, social inclusion, and supports the vision of personalisation, independence, choice and control;
 - It support carers to look after their own health and wellbeing and to care effectively and safely;
 - Is person-focused, reflecting the variety of care and caring journeys and the variety of options available to meet their needs;
 - Encourages and enables 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.
- 3.2. Where Barnet Council meets needs or arranges to meet needs, it will undertake a financial assessment to decide whether or not a contribution is payable. The exception to this is when Barnet Council is required to arrange care and support free of charge (see paragraph 5.3 below).

4. Legal Framework

- 4.1. Barnet Council's policy to charge for care and support services follows from and is consistent with the Care Act 2014, the Care and Support (Charging and Assessment of Resources) Regulations and CASSG as referred to above.
- 4.2. Section 17 of the Care Act 2014 also imposes a duty on local authorities to carry out a financial assessment where they charge for care services.
- 4.3. The detail with regard to financial assessments and how to calculate contributions, in particular the treatment of income and capital is set out in the Care and Support (Charging and Assessment of Resources) Regulations 2014. Further guidance is provided in CASSG.
- 4.4. Adults receiving social care and support will be financially assessed in accordance with this policy and will be required to make a contribution towards the cost of their care if their financial resources are above financial limits.
- 4.5. When the financial assessment is completed a written notification of the assessment will be given to the adult to whom it relates in accordance with section 17(6) of the Care Act. This notification will explain how the assessment was carried out, the charge (contribution), the frequency and if there is any change to the assessed contribution.

- 4.6 A review of a person's ability to meet the cost of any charges will be conducted annually or sooner if there is a change in circumstances or as requested.

5. Scope of policy

- 5.1. This policy covers non-residential care services, including:

- Home care – care support in the adult's own home
- Direct Payments (with the exception of those paid to carers for carers support)
- Community Outreach
- Day care activities and personal support – services provided away from the adult's home
- Transport
- Supported Living
- Supporting People (long term)
- Extra Care Housing
- Any other non-residential care service provided or funded via a Personal Budget
- Shared Lives

5.2. Relevant amount

The relevant amount against which the contribution is worked out is the weekly value of the Personal Budget. This includes Direct Payments for respite care that is not provided in a registered residential or nursing home. If there is no Personal Budget the relevant amount against which the contribution is worked out is the weekly cost of services provided.

5.3. Services excluded from this policy

Barnet Council will not charge for those care services prescribed in the Regulations which must be arranged free as well as the services set out below:⁴

- services for carers
- professional support
- occupational therapy
- information and advice
- assessment of needs and care planning services aftercare services or support provided under Section 117 of the Mental Health Act 1983
- aftercare services or support provided under Section 117 of the Mental Health Act 1983
- care and support provided to an adult, under Section 18, 19 or 20 of the Care Act, suffering from variant Creutzfeldt-Jakob disease

⁴ Regulation 3, Care and Support (Charging and Assessment of Resources) Regulations 2014

- any services which the NHS is under a duty to provide (e.g. Continuing Health Care and the NHS contribution to Registered Nursing Care)
- community equipment (aids and minor adaptations). Aids must be provided free of charge whether provided to meet or prevent or delay needs. A minor adaptation is one costing £1,000 or less.
- intermediate care and enablement support services for the first 6 weeks of the specified period or, if the specified period is less than 6 weeks, for that period

6. Capacity

- 6.1. When undertaking a financial assessment the Council will establish whether the relevant adult has capacity to take part in the financial assessment.
- 6.2. Where an adult lacks capacity (as determined on the basis of a proper assessment⁵), the Council will find out if the person has an Enduring Power of Attorney, a Lasting Power of Attorney for Property and Affairs, a Lasting Power of Attorney for Health and Welfare, a Property and Affairs Deputyship under the Court of Protection or any other person dealing with that person's affairs (for example someone given Appointeeship by the Department for Work and Pensions for the purpose of benefits payments).
- 6.3. If the person lacks capacity to give consent to a financial assessment and the person does not have any of those individuals mentioned in paragraph 6.2 above, the appointment of a Property and Affairs Deputyship may be required. A family member could apply for this to the Court of Protection. In the absence of any family members Barnet Council may make the application.

7. Financial Assessment Process

- 7.1. The financial assessment will determine the person's ability to pay; that is whether they will be required to pay all of, part of, or nothing towards the cost of care and support.
- 7.2. Ability to pay is assessed by taking into account a person's capital, income, personal allowances, eligible household and disability related expenses. The Council will consider individual circumstances and disability, including any disability related expenditure, in assessing the amount a person can afford to contribute.

⁵ Mental Capacity Act 1983 and Code of Practice

- 7.3. The financial assessment calculates a person's contribution towards their Personal Budget (see para 7.6 on the assessment) for care and support will be in accordance with the Care and Support Statutory Guidance (CASSG). A contribution towards their Personal Budget will be 100% of their notified maximum assessed contribution, up to the value of their Personal Budget and/or the cost of the service arranged or commissioned by the council. This is reviewed annually to reflect the costs to the council of providing these services.
- 7.4. Those that have savings / capital in excess of the upper capital limit as set out in paragraph 24 of Annex B of CASSG (£23,250 in 2022/23) or have been assessed to pay for the full cost of services will pay the full cost of any care services they receive. This full cost is the maximum amount that someone will be charged for their care. This is reviewed at least annually to reflect the costs to the council of providing these services. Those assessed as paying the full cost of any council services and ask the Council to arrange their care and support will be charged a one-off administration fee (£300 in 2022/23).
- 7.5. Where someone receives their Personal Budget as a Direct Payment, this will be paid net of the assessed contribution.
- 7.6. Contributions will be assessed against the value of a Personal Budget or the value of care services purchased by Barnet Council on behalf of the person receiving care. Contributions are generally collected for the actual care delivered.
- 7.7. Contributions will not be collected where there has been unavoidable cancellation of care (e.g., through hospitalisation) that results in care not being delivered for at least a week. In other cases, contributions may not be collected where care has been cancelled if reasonable advanced notification of cancellation has been given either by the person receiving care or their representative.
- 7.8. If a person does not pay within the period specified on the bill, the Council will seek to recover the debt following its debt recovery procedures. Debt recovery procedures will follow the principles as set out in the Care Act 2014 and CASSAG.

8. From what date the contributions are payable

- 8.1. Contributions are generally effective from the first day care is provided (or the date a Personal Budget is in place). As part of the assessment process the individual receiving social care services will be notified that they may be charged for the service, depending on the outcome of their financial assessment. The individual will also receive information on charging and example charges when they receive a request for financial information.
- 8.2. If someone has not had their financial assessment at the time their care package starts, their contribution will generally be backdated to the start of the care package. There may be circumstances where it is not appropriate to backdate, for example because of avoidable delays in the financial assessment process, this decision is at the Council's discretion.

- 8.3. If the Council becomes aware that a person is in receipt of income or savings not previously declared within their financial assessment, then the council reserves the right to backdate any amended contribution to the date the person started to receive this additional income.
- 8.4. When we review a contribution as part of the annual review process, any change to contribution will be applicable from the Monday following the re-assessment.

9. Financial assessment process and calculation of contribution

- 9.1. Ability to pay will be assessed through a Financial Assessment which will compare the total income from all relevant sources (including an assumed amount of income derived from savings and other financial assets) with normal living expenses and any additional costs arising from a person’s disabilities (Disability Related Expenditure - DRE). The net disposable income figure is the amount that the person will be expected to pay as their maximum assessed contribution (with the exception of those who pay the full cost of care).
- 9.2. The person’s net disposable income (NDI) against which a contribution will be made is calculated as follows:

Total Assessed income (including notional income)
Less
Guaranteed Minimum Income threshold
Eligible household expenses
Eligible disability related expenses
Equals net disposable income

- 9.3. How the Council works these figures out is explained in sections 10.1 onwards of this policy. Further information is available in CASSG, specifically Annex B – Treatment of capital and Annex C – Treatment of income.
- 9.4. Those asked to pay a contribution will not be expected to contribute more than the assessed amount of net disposable income (the exception being those who have been assessed to pay full cost or treated as assessed to pay for the full cost of services).
- 9.5. The minimum income guarantee amount is set by the Department of Health (this amount is generally reviewed each year and set with effect from every April).

- 9.6. If a person chooses to receive all or part of their Personal Budget through a Direct Payment they will have their contribution deducted from their Direct Payment. The Direct Payment will be paid net of the assessed contribution.
- 9.7. People will be invoiced for all other contributions in accordance with service procedures.
- 9.8. Assessed contributions of less than £2 per week will not be collected.
- 9.9. The Financial Assessment process will incorporate a benefit maximisation check to ensure that those receiving care are receiving all state benefits to which they are entitled.

10. Financial Assessment Procedure

- 10.1. Those receiving chargeable care services will be expected to complete a finance declaration form to assess contributions. Appropriate assistance to complete the declaration form will be offered to those that need help to complete the form.
- 10.2. In some cases, a home visit may be provided by a financial assessment officer or officer(s) nominated to act on behalf of Barnet Council to provide assistance to complete the finance declaration form.
- 10.3. Only the person receiving care will be assessed for contributions. Normally the Council will only take into account income, savings and capital that are in the name of the person receiving care, except when they can reasonably be considered to have access to savings or income, other than earnings, which is held in a partner's name, joint names or with someone else. Please also refer to paragraph 10.11 on 'Treatment of couples'.
- 10.4. The assessment will take into account any additional costs incurred as a result of a person's disability, this is called 'Disability Related Expenditure' (DRE).
- 10.5. Those receiving care and/or their carers, will receive appropriate welfare benefits advice at the time of their financial assessment and assistance to complete claim forms where necessary.
- 10.6. Following the financial assessment, a notification letter will be sent informing them of the amount that they have to contribute, details of how the contribution has been calculated and will be collected along with the contribution that the council is making.

- 10.7. The financial assessment team will make reasonable attempts to contact the person to undertake a financial assessment. If after 14 days the financial declaration form has not been returned, or if the financial assessment is still incomplete due to lack of information or supporting documentation being provided by the person, and no justification or explanation is provided, then they will be assessed as being required to contribute the whole amount of their Personal Budget (or cost of care received as set by the Council). If the person later provides this information, then the assessed contribution may be re-adjusted (at the Council's discretion).
- 10.8. Where a person chooses not to complete the financial assessment form and / or not disclose their finances it will be assumed that they are fully funding their own care and that the assessed financial contribution is the same as the Personal Budget or cost of care received (as set out in para 7.4).
- 10.9. Those who are assessed as having to make a contribution towards the cost of their care must pay the amount required. Where a person does not pay the amount required and does not engage with the council, then the council's debt recovery procedures will apply.

10.10 **Treatment of couples**

- 10.10.1 The financial assessment will apply to the individual receiving the service. In cases where the person receiving the service is one half of a couple, then a joint financial assessment will also be carried out, taking into account joint income and savings. This joint assessment is dependent upon disclosure of both parties' financial circumstances, including details of income and capital. The assessed contribution which proves most beneficial to the person receiving care will be applied. This is known as a 'better off' calculation.
- 10.10.2 If both partners are receiving a non-residential service they have the option of an individual assessment, or of being assessed as a couple with their partner. If the couple are living separately (for example, if one person is living in full time residential care) then a couple's assessment does not apply.
- 10.10.3 In order to carry out the 'better off' calculation both parties should declare their income. Jointly held savings/income will be treated as divided equally between the owners, unless the contrary is demonstrated by, or on behalf of, the person receiving care. It is optional whether the person not receiving care discloses details of their finances. If there is no disclosure the Council will be unable to carry out a 'better off' calculation.

10.10.4 When undertaking a couple's assessment, income and expenditure of both people in the couple will be used to assess the level of charges. A check will be made that charges do not reduce the couple's income below the minimum income guarantee thresholds as set by the Department of Health.

11. Treatment of capital

11.1. In assessing what a person can afford to pay, Barnet Council will take into account the person's savings and other assets; this is known as the person's capital. There are different approaches to how capital is treated depending on whether a person is in a care home or receiving care and support in their own home. The main points are shown below; this is set out in more detail in Annex B of CASSG.

11.2. Where the person receiving care services has savings or other financial assets (capital) these will be taken into account in determining the level of income available to that person.

11.3. Capital will include all forms of cash savings. The valuation method used will be as set out in Annex B of CASSG, and the value updated annually. Savings include:

- Money in bank or building society current and deposit accounts - income which is paid into an account becomes capital once the period over which it is taken into account as income expires
- Post Office / National Savings and Premium Bonds
- Individual Savings Accounts (ISAs) or Tax Exempt Special Savings Accounts
- Shares/investments
- Money owed by third parties
- Any other cash savings/capital.

(This list is not exhaustive)

11.4. The surrender value of any life insurance or private pensions and annuities with attached life insurance will be disregarded.

11.5. The value of any ex-gratia payments from the Skipton Fund made by the Secretary of State to residents infected with Hepatitis C as a result of NHS treatment with blood or blood products will be disregarded.

11.6. Compensation from personal injuries awards are disregarded for assessment purposes for a period of 52 weeks, with the exception of any part of the award provided to meet care costs.

- 11.7. There are some specific circumstances under which these compensation payments are fully disregarded for assessment purposes. Where a person is in receipt of compensation for personal injuries, their contribution will be considered on a case by case basis.
- 11.8. The capital value of a person's home will not normally be taken into account in the financial assessment where they continue to occupy the dwelling as their main home.
- 11.9. The capital value of any other property or land owned or part owned by the person receiving care will be regarded as capital. For property jointly-owned with another person (apart from the main home), only a person's beneficial interest can be taken into account. All decisions about the treatment of property will be made in accordance with the statutory guidance. More details can be found in Annex B of CASSG.
- 11.10. Capital below a lower threshold will be disregarded (currently £14,250 in 2022/23). The lower threshold is set in statutory guidance and is updated annually.
- 11.11. Capital above the lower threshold and up to the higher threshold is used to calculate an amount of 'tariff income'. This is calculated at the rate of £1 for every £250 or part thereof per week in accordance with statutory guidance.
- 11.12. The higher threshold (currently £23,250 in 2022/23) is set by Government and reviewed annually. Those with assessed capital/savings in excess of the higher threshold will pay the full cost of their Personal Budget or services received in their support plan (as applicable).
- 11.13. In some circumstances a person may be treated as possessing a capital asset even where they do not actually possess it. This is called 'notional capital'.
- 11.14. Notional capital may be capital which:
- (a) would be available to the person if they applied for it;
 - (b) is paid to a third party in respect of the person;
 - (c) the person has deprived themselves of in order to reduce the amount of charge they have to pay for their care. The decision to treat a person as still having capital in such situations will be taken as per Annex D of CASSG (deprivation of assets). The timing of the disposal will be taken into account when considering the purpose of the disposal.

- 11.15. A person's capital should therefore be the total of both actual and notional capital. However, if a person has actual capital above the upper capital limit set in CASSG, it may not be necessary to consider notional capital.
- 11.16. Where the person receiving care is treated as having notional capital, the council will decide whether to recover the assessed contribution from the person receiving care or to recover the charges from a third party. Where the person has transferred the asset to a third party to avoid the charge, Barnet Council will follow the guidance laid down in CASSG regarding deprivation of assets.
- 11.17. Where a person has been assessed as having notional capital, the value of this must be reduced over time. Notional capital will be treated as reducing each week by the difference between the assessed contribution and the amount that would have been assessed as contribution had there been no notional capital.

12. Treatment of Income

- 12.1.1 In assessing what a person can afford to pay, Barnet Council will take into account the person's income and expenditure. The main points are shown in the following sections; this is set out in more detail in Annex C of CASSG.
- 12.1.2 Income from many different sources is used to calculate a person's assessable income, which is used as the basis to determine the assessed contribution (this list is not exhaustive).
- Daily Living Component of Personal Independence Payment (PIP)
 - Attendance Allowance (AA)
 - Severe Disability Premium/Addition
 - Income Support
 - Pension Credit
 - Occupational/ private pension
 - State Retirement Pension
 - Incapacity Benefit
 - Employment Support Allowance (ESA) – both income and contribution based
 - Industrial injuries disablement benefit
 - Carer's allowance/Premiums
 - Widow's benefit
 - War disability pension (less £10 disregard with the exception of constant attendance allowance)*
 - Bereavement allowances

- Disability working allowance
- War disability pension (constant attendance allowance)
- War widows pension (less £10 disregard)
- War restitution pension (less £10 disregard)
- Severe disablement allowance
- Exceptional Severe Disablement allowance
- Disability working allowance
- Jobseekers allowance
- Universal Credit
- Notional Income (Tariff Income) from savings above lower capital threshold (currently £14,250 for 2022/23; £1 tariff income per £250 in accordance with statutory guidance)

12.1.3 The following benefits paid to meet care needs will be taken into account in full as income; the care component of Disability Living Allowance; Attendance Allowance; the daily living component of Personal Independence Payments.

12.1.4 The following types of income are disregarded for assessment purposes:

- Income from employment, including sick pay
- Mobility component of Personal Independence Payment (PIP)
- War Widows Payment
- War Pensioner's mobility supplement
- 100% of Gallantry Awards
- Working Tax Credit
- Child Tax Credit
- Pension Credit – savings element only (amount reviewed annually)
- War pensions and Guaranteed Income Payments under the War Pensions and Armed Forces Compensation schemes are disregarded in full apart from Constant Attendance Allowance

12.1.5 Those receiving care are expected to claim their full benefit entitlement. They will be assessed as receiving a benefit if they have a clear entitlement to receive and choose not to claim that benefit. For example, notional income can also be applied to those who as appointees decide not to claim a benefit on behalf of someone or where a person is entitled to benefit in their own right and chooses not to claim. This will be treated as a notional income from the date when it is reasonable to expect that benefit would become payable.

13 Treatment of Expenditure

- 13.1 Because a person who receives care and support outside a care home will need to pay for daily living costs such as rent, food and utilities, the charging rules must ensure people have enough money to meet these costs. The purpose of the minimum income guarantee is to promote independence and social inclusion and ensure that they have sufficient funds to meet basic needs such as purchasing food, utility costs or insurance. The Government sets the minimum sum (minimum income guarantee) an individual or a couple needs to live on.
- 13.2 This minimum income guarantee amount is deducted as an amount from a person's assessable income when assessing a contribution. The minimum income guarantee amount as set by the Department of Health and Social Care and varies depending upon: a person's age; benefits received. Under the Councils Fairer Contributions Policy, the guaranteed minimum income is the same as the Department of Health and Social Care's minimum income guarantee amount for the purposes of assessing contributions towards care. The terms guaranteed minimum income and minimum income guarantee are interchangeable.
- 13.3 The minimum income guarantee is the minimum income amount that a person's income is not reduced below after contributions have been assessed. This is an amount intended to pay for day to day living costs including: food; utilities; leisure; insurances and other miscellaneous living costs which are not disability related expenses.
- 13.4 The minimum income guarantee must be considered after any housing costs such as rent and council tax net of any benefits provided to support these costs – and after any disability related expenditure
- 13.5 The council will allow certain items of expenditure to be offset against income, providing that satisfactory evidence is provided for the assessment. These include:
- Rent net of Housing Benefit where liability to pay rent is clearly established. (Liability will be assessed using Housing Benefit/ Social Security Regulations)
 - Council Tax net of Council Tax Support. (Liability will be assessed using Council Tax Benefit/Social Security Regulations)
 - Service charges not covered by benefits (Income Support/ESA or Pension Credit)
 - Mortgage Payments (net of Income Support/ ESA or Pension Credit MI)
 - Child Support Agency Payments
 - Court Imposed maintenance
 - House Insurance – buildings
 - Boiler and Heating Insurance
 - Payments in respect of County Court Judgements (CCJs).

(This list is not exhaustive)

- 13.6 Any additional costs due to disability related expenses will be considered during the financial assessment process (see section 14).

14 Treatment of Disability Related Expenses

14.1 Disability Related Expenses (DRE) is an allowance made in the financial assessment process for additional expenses a person may have due to a disability or ill health.

14.2 Claims for DRE will be considered on a case-by-case basis. DRE will generally be considered when:

- The extra cost is needed to meet a person's specific need due to a condition or disability as identified in the person's support plan; and
- The cost is reasonable (where the total amount of DDE exceeds £20 per week, agreements are made by exception) and can be verified; and
- Receipts/Evidence of expenditure have been provided; and
- It is not reasonable for a lower cost alternative item or service to be used.

14.3 Claims of DRE paid to close relatives will only be allowed in exceptional circumstances, where these payments are for care needs/services identified in the support plan. Only reasonable expenses will be allowed and will be decided on a case-by-case basis ('close relatives', as defined within social security regulations).

14.4 A framework for deciding DRE is set out in Appendix A. The list of recognised DRE items, and associated costs is a guide to assist in calculating DRE allowances. The amounts listed will be reviewed in accordance with guidance from the National Association of Financial Assessment Officers (NAFAO). DRE is also discussed in Annex C of CASSG, at paragraphs 37 through to 39.

15 Disability Related Expenses (DRE) Exclusions

A DRE allowance will not be made for the following expenditure:

- General items or services required for daily living as 'day to day' living expenses, which would be used by the general population;
- Costs arising simply from a matter of personal choice, where a reasonable alternative is available at lesser charge, will not normally be allowed.
- Any item or service met by a payment from a Community Care Grant (e.g., Disability Facilities Grant) or where another funding source has been provided or could be provided.

16 Pension reforms

- 16.1 For the purposes of charging, Barnet Council will follow the guidance set out on the treatment of income and capital in Annexes B and C of CASSG and treat a person's assets accordingly. Where a person has chosen to withdraw funds from their pension and manage it directly, for example combining it with other assets rather than through a pension's product, this may be treated as capital under the rules laid out in CASSG Annex B.

17 Reviews / appeals / complaints

If a person believes that:

- there has been a mistake in the assessment; or
- the assessment has not taken full account of their circumstances;

they can lodge an appeal under the council's Fairer Contributions Appeals procedure. (See Appendix B)

18 "Light-touch" financial assessments

- 18.1 In some circumstances, Barnet Council may choose to treat a person as if a financial assessment had been carried out. In order to do so, Barnet Council must be satisfied on the basis of evidence provided by the person that they can afford, and will continue to be able to afford, any charges due. This is known as a "light-touch" financial assessment.
- 18.2 The main circumstances in which Barnet Council may consider carrying out a light-touch financial assessment are:
- (a) Where a person has significant financial resources and does not wish to undergo a full financial assessment for personal reasons but wishes nonetheless to access Barnet Council support in meeting their needs. In these situations, Barnet Council may accept other evidence in lieu of carrying out the financial assessment and consider the person to have financial resources above the upper limit.
 - (b) Where Barnet Council charges a small or nominal amount for a particular service (e.g., for Community Lifeline) which a person is clearly able to meet and would clearly have the relevant minimum income left and carrying out a financial assessment would be disproportionate.

- 18.3 The Council may under some circumstances be satisfied that a person is able to afford any charges, this might include evidence that a person has:
- (a) Property, which is not their main home, that is clearly worth more than the upper capital limit set in CASSG, where they are the sole owner, or it is clear what their share is;
 - (b) savings clearly worth more than the upper capital limit set in CASSG; or,
 - (c) sufficient income left following the charge due.
- 18.4 Where Barnet Council is going to meet the person's needs, and it proposes to undertake a light-touch financial assessment, it will take steps to assure itself that the person concerned is willing, and will continue to be willing, to pay all charges due. It must also remember that it is responsible for ensuring that people are not charged more than it is reasonable for them to pay. Where a person does not agree to the charges that they have been assessed as being able to afford to pay under this route, a full financial assessment may be needed.
- 18.5 When deciding whether or not to undertake a light-touch financial assessment, Barnet Council will consider both the level of the charge it proposes to make, as well as the evidence the person is able to provide. It should also inform the person when a light-touch assessment has taken place and make clear that the person has the right to request a full financial assessment should they so wish, as well as making sure they have access to sufficient information and advice, including the option of independent financial information and advice.

19 Deprivation of assets and debts

- 19.1 Where Barnet Council believes it has evidence to support the contention that a person has deliberately tried to avoid paying for care and support costs through depriving themselves of assets (capital or income) the guidance in Annex E of CASSG will apply. In such cases Barnet Council may either charge the person as if they still possessed the asset or, if the asset has been transferred to someone else, seek to recover the lost income from that person. The council cannot recover more than the person gained from the transfer.
- 19.2 Where a person has accrued a debt, Barnet Council may use its powers under the Care Act to recover that debt having regard to all the circumstances of the case. County Court proceedings could be initiated if other reasonable alternatives have been exhausted without success.

20 Review

- 20.1 This Fairer Contributions Policy will be reviewed annually or earlier as required by policy or legislation changes. Minor amendments will be agreed by the Director of Adults and Communities (or designated senior manager). Any major amendments to this policy will be subject to consultation.

- 20.2 Client contributions will be reviewed on an annual basis and will be uplifted in line with the cost of care paid by the Council, subject to Committee approval as outlined in 19.3.
- 20.3 Any significant increase or changes to contributions above CPI Inflation by 2% or more will be subject to approval through Adults and Safeguarding Committee before implementation. Any increases to contributions below this level will go through the Councils business planning process and be approved by Policy and Resources Committee.
- 20.4 Adults and Health will update the charge rates each April and ensure these updated alongside any changes to the policy.

21 Contact Information / Further Guidance

Further advice and guidance is available from the Customer Finance Team on 020 8359 2238.

Appendix A – Disability Related Expenses

Verification of expenses

For most items, people will be expected to keep receipts such as proof of purchase, or bills for services such as utilities (eg. water, gas, electricity). People do not have to provide the Council with original documents - photocopies are acceptable.

Special equipment items and maintenance

The DRE Guide includes allowances for special equipment items (eg. wheelchair, stair lift, powered bed) where the person receiving care has incurred an expense to make the purchase. Special equipment items will be allowed where they meet someone's specific need due to a disability or medical condition.

The amount allowed in the financial assessment will be based on the life span of the equipment and either the purchase price paid by the person receiving care or a lower cost alternative if that was reasonable to meet that need. Life spans for special equipment items will be calculated in accordance with guidance from accounting standards used by Local Authorities (NAFAO) Guidance).

Where special equipment items require maintenance, and the person receiving care pays for such maintenance, the council will also make an allowance for these costs.

Sharing costs

Where a person shares a household and costs with others, any additional costs relating to a disability or condition will be shared between those whose needs contribute to the additional costs. For example, if private domestic help is provided, and this was assessed as an allowable DRE, this cost may be attributed to all of the adult occupants of the home/household.

DRE items

It is not possible to provide a completely comprehensive list of disability related expenditure, which can be taken into account in the assessment, but paragraph 38 of Annex C of CASSG gives a list of some items which will be included.

The following provides guidance on specific disability expenses. The list is based on NAFAO guidance and will be reviewed in accordance with that guidance. The list may be subject to amendment in accordance with point 20 Reviews.

These allowances should align with information gathered during the care assessment and identified in the support plan.

NAFAO GUIDE TO DISABILITY RELATED EXPENDITURE 2022/23**HEATING ALLOWANCES**

Annual inflationary update based on RPI Fuel index at November 2021. At this date fuel prices had **increased** by 24.1 % in the last 12 months.

The figures are obtained from www.statistics.gov.uk from the download "consumer price inflation detailed reference tables". The figures are found in Table 41 detailed reference tables - % change over 12 months.

Figures for 2022/2023	Standard	N East / E Midlands	N West / W Midlands
Single person - Flat/Terrace	£1,438.41	£1,559.22	£1,741.69
Couple – Flat/Terrace	£1,897.75	£2,055.05	£2,295.42
Single person – Semi Detached	£1,527.77	£1,656.11	£1,849.93
Couples – Semi Detached	£2,016.90	£2,180.90	£2,436.37
Single – Detached	£1,858.73	£2,013.54	£2,252.63
Couples – Detached	£2,450.21	£2,654.08	£2,966.18

INCOME / DISREGARDS

Mandatory minimum income disregards for non-residential care and support are published in the Care and Support (Charging and Assessment of Resources) Regulations 2014, replacing fairer charging allowances. Rates for 2022/23 can be found <https://www.gov.uk/government/publications/social-care-charging-for-local-authorities-2022-to-2023/social-care-charging-for-care-and-support-local-authority-circular-lacdhsc20231>

Residential Care

Personal Expenses Allowance: £25.65

Single Adults

Allowance	18 – 24	25 – Pension Age	Pension Age	Lone Parent
Not entitled to any premium	£74.60	£94.15	£194.70	£94.15
Entitled to CP	£119.15	£138.70	£239.25	£138.70
Entitled to DP	£116.15	£135.70	N/A	£135.70
Entitled to DP + CP	£160.70	£180.25	N/A	£180.25
Entitled to DP + EDP	£136.45	£156.00	N/A	£156.00
Entitled to DP + EDP + CP	£181.00	£200.55	N/A	£200.55

Couples

Allowance	Under Pension Age	Pension Age*
Not entitled to any premium	£73.95	£148.65
Entitled to CP	£118.50	£193.20
Entitled to DP	£103.55	N/A
Entitled to DP + CP	£148.10	N/A
Entitled to DP + EDP	£118.15	N/A
Entitled to DP + EDP + CP	£162.70	N/A

** Where one partner is over state pension credit age the Pension Age MIG applies whether the person being assessed is under or over that age.

Children

For each child the adult is responsible for that is a member of the same household an additional allowance of £86.20.

Non means tested disability benefits

Attendance Allowance	-	High £92.40	Lower £61.85	
DLA Care	-	High £92.40	Middle £61.85	Lower £24.45
PiP (Daily Living Costs)	-	Enhanced £92.40	Standard £61.85	

If local policy on DLA/AA disregard applies on higher rate DLA/AA, disregard difference between higher and lower rate £30.55, unless in receipt of both day and night care.

DLA or PiP Mobility Components - Disregard fully

Armed forces and war pension payments to veterans

War pensions and Guaranteed Income Payments under the War Pensions and Armed Forces Compensation schemes are disregarded in full apart from constant attendance allowance.

Armed forces and war pension payments to war widows and widowers

£10 a week disregard of War Widows and War Widowers pension, survivors Guaranteed Income Payments from the Armed Forces Compensation Scheme, Civilian War Injury pension, any War Disablement pension paid to non-veterans and payments to victims of National Socialist persecution (paid under German or Austrian law).

ASSETS

Capital below £14,250 fully disregarded.

Tariff Income of: £1 per week for every £250 (or part of £250) above £14,250 and up to £23,250 (if the upper capital limit is applied.). N.B. These are the minimum limits required by guidance and councils can set higher.

EXPENSES

Mortgage payments/Rent: allow full amount less any means tested benefit paid

Council Tax: allow full amount less any Local Council Tax reduction applied

COSTS OF DISABILITY

Figures were only attached to fuel costs in the FC Guidance and the following are recommended allowances for possible identified items and examples of reasonable evidence requirements prepared by NAFAO. A 5.1 % uplift has been applied based on the November 2021 CPI rate.

ITEM	AMOUNT	EVIDENCE
Community Alarm System	Actual cost, if reasonable	Bills from or payments to provider
Privately arranged care Private domestic support	Actual cost where this is not provided as part of the care plan but the amount is reasonable and necessary for their care and support	Evidence of employment arrangement and/or legally correct payments to an employee under UK employment and tax law. Where agency arranged evidence of billing and payment.

Specialist washing powder or laundry	£4.12 per week	The assessment or care and support plan may identify a need. If not evidence from other sources and consideration of the nature and impact of any health problem or disability may provide a guide. Identify more than 4 loads per week
Special clothing or footwear/additional wear and tear to clothing and footwear. Additional cost for bedding	Reasonable amount for extra cost caused by disability	The assessment or care and support plan may identify a need. If not evidence from other sources, which may include medical evidence, and consideration of the nature and the impact of any health problem or disability may provide a guide. Evidence of purchase and payment.
Internet access	Reasonable amount for additional cost due to disability	Evidence that costs are higher due to disability. Evidence of purchase and payment.
Transport costs necessitated by illness or disability	Reasonable amounts over and above the mobility component of PiP or DLA. Where support with costs is available from other sources but have not been used this can be taken into account in considering reasonableness. For example, transport to hospital appointments or council provided transport to a day centre.	Evidence of payment and purchase
Special dietary needs	Reasonable amount where demonstrated above average dietary costs	The assessment or care and support plan may identify a need. If not evidence from other sources, which may include medical evidence, and consideration of the nature and the impact of any health problem or disability may provide a guide. Details of special purchases, including evidence of payment
Gardening	Based on individual costs of garden maintenance	As privately arranged care
Wheelchair	£4.29 per week manual £10.43 per week powered	Evidence of purchase. No allowance if equipment provided free of charge

Powered bed	Actual cost divided by 500 (10 yr life) up to a maximum of £4.74 per week	Evidence of purchase if available
Turning bed	Actual cost divided by 500 up to a maximum of £8.30 per week	Evidence of purchase if available
Powered reclining chair	Actual cost divided by 500 up to a maximum of £3.76 per week	Evidence of purchase if available
Stair-lift	Actual cost divided by 500 up to a maximum of £6.70 per week	Evidence of purchase without DFG input
Hoist	Actual cost divided by 500 up to a maximum of £3.29 per week	Evidence of purchase without DFG input

Appendix B – Review and Appeals Procedure

You can request a review of your assessed contribution for any of the following reasons:

- The council have used incorrect dates or amounts.
- The council have incorrectly calculated the contribution.
- You have additional expenditure which you did not previously state on the financial declaration form.
- There are exceptional personal circumstances concerning your financial situation, which means that you believe it is unreasonable for you to pay the assessed contribution.

Reasons that are not directly related to your financial circumstances will not generally be considered as grounds for review.

Requests for a review should be made within 20 working day days of being notified of the outcome of the financial assessment. This period can be extended if there are exceptional circumstances.

The Team Manager (Financial Assessments) or nominated officer will review your case and take into account the issues you have raised. The Team Manager will write to you with the outcome of the review within 10 working days, they will also explain what to do next if you remain unsatisfied with this response. Where the Team Manager is unable to respond within this time period you will be advised accordingly.

If you are dissatisfied with the Team Manager's (or nominated officer's) review of your assessed charge, you can appeal to the Customer Finance Manager (or nominated senior manager). Appeals should be made within 20 working days of being notified of the outcome of your review. This period can be extended if there are special reasons.

If you believe that your assessment has been calculated correctly and that all the information contained in it is correct, but that the assessed contribution is still unreasonable, then you can Appeal directly to the Director of Adults and Communities (or nominated senior manager). Appeals should be made to the Director of Adults and Communities (or nominated senior manager), who will respond to you within 14 working days.

If you are dissatisfied with the decision on your appeal by the Director of Adults and Communities (or nominated senior manager), you can make a written request to have the matter considered as a formal complaint under the department's complaints procedure.

Please note: The London Borough of Barnet retains overall discretion to waive or reduce the amount of the assessed contribution. Discretion will be exercised on a case-by-case basis and subject to local service procedures.

Activity	Reason	Lead Officer	Targeted Working Days
Review	Incorrectly calculated Exceptional personal circumstances Additional expenditure, etc. Appeals Procedure – where the financial assessment is wholly correct, but the person receiving care still believes it unreasonable	Team Manager (Financial Assessments) or nominated officer	Review within 20 working days of financial assessment notification or of date of relevant decision
Appeal	Dissatisfied with outcome of Review	Appeal to Customer Finance Manager (or nominated senior manager)	Appeal within 20 working days of date of review decision
Complaints	Dissatisfied with outcome of Appeal	Adults and Communities Complaints and Representations Lead	