



0300 126 1000 (General Enquiries)



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Paying for Care and Support in your Own Home

care and
support
& you



Unlike NHS Services, social care support services are not automatically free of charge for everyone. You will be expected to pay a contribution towards your care and support, including in a case of emergency, unless your circumstances show that you cannot afford to do so. A financial assessment of your circumstances is carried out to work out what you can afford to pay. The assessment will consider your income and any assets you own, for example a house you do not live in or other financial investments.

This leaflet explains the financial assessment process and how your contribution is worked out, based on the legislation set out in the [Care Act 2014](#), once you have been assessed as having eligible needs that can be met while you are living in your own home. Below are some examples of home care support:

- Help washing and dressing
- Help getting up and going to bed
- Meal preparation and help with feeding

For more information on the assessment and eligibility for adult social care services, please visit <http://www3.northamptonshire.gov.uk/councilservices/adult-social-care/assessment-and-eligibility/Pages/default.aspx> or contact Adult Social Care using the contact details later in this leaflet.

Transport costs (for example to and from a day centre) are not covered by this leaflet.

This leaflet applies to people who receive care and support in their own home. It does not apply to people in residential care or carers.

The Council recommends that you seek independent financial advice.

For further information on benefits you might be entitled to, you can visit <https://www.gov.uk/benefits-calculators>

If you would like an alternative format of this leaflet (e.g. larger print, easy read, audio or a different language), please contact us on any of the Council's contact details in this leaflet.

Are you eligible for Social Care Funding?

Everyone is entitled to an assessment of their social care needs, which is free of charge, regardless of financial circumstances. The financial assessment works out whether you are eligible for social care funding from the Council or whether you have to make a contribution towards the cost of your care.

- If your savings and investments (capital) are more than £23,250, you will have to pay **in full** for the services you receive
- If your savings and investments (capital) are more than £14,250 but less than £23,250, and you need the Council to help pay towards the cost of your care and support, then you will need to go through the financial assessment process. This can be done online or during a pre-arranged telephone call. In some circumstances, you may be able to have a face-to-face assessment. The assessment allows us to review your circumstances and make sure you make the correct financial contribution towards your care and support.
- You can choose not to tell us about your finances but this means that the Council cannot help with payments towards the services you receive and you will have to pay **in full** for the services you receive

If you have been paying for your care and support and find you are no longer able to meet the cost of your care, please contact the Council for assistance. It is important to contact us before your savings or capital falls below £23,250 – ideally 1-2 months before.

When we talk about capital, we mean investments and savings that you hold. Examples are:

- Shares
- Savings held in banks, building societies etc
- Trust Funds
- Premium Bonds
- National Savings Certificates
- Land
- Buildings (other than the home that you live in)

The home that you live in is **not** included in the assessment of your finances, but any additional properties you own, are included.

What happens once the need for Social Care support is agreed?

Working out your contribution

Once we have assessed you as eligible for social care, we apply our Fair Contributions Policy for community-based care. This means that customers needing care are financially assessed and expected to contribute towards their care costs, where they are able to.

The financial assessment will take into account your income and savings, as well as expenses associated with disabilities and / or your housing situation.

All earnings from paid employment are disregarded and are not considered as income for calculation purposes.

If you are one half of a couple, then we will base your financial assessment on your income entitlement only. Your partner's income/savings does not affect the charge applied to you and the Care Act requires us to treat you individually. Where you hold savings and investments (capital) or receive income jointly, we will assume that you are each entitled to 50% of that income and assess you accordingly.

If you have parental responsibility for a child who lives with you, in some circumstances we can disregard more of your weekly income (depending upon the amount of Child Benefit or Child Tax Credits you receive).

If you do not provide your financial information, you will be charged the full cost of any service provided.

It is very important that you complete the assessment and provide us with any documentation we need to work out your contribution as soon as possible and **within 21 days**. If we do not receive your assessment and supporting information by then, you will be charged the full cost of your care, unless there is a good reason for the delay. If you are charged the full cost of your care because you did not complete the assessment on time, but are then assessed as needing to contribute less, the difference will be credited to your account.

Provisional charge

If you have not received notification of your contribution at the point your service starts, we will apply a provisional charge from the start date of your care. The provisional charge is set at £20 per week for community-based services. You will still need to undergo a financial assessment to allow us to work out your contribution towards the cost of your care services based on your financial circumstances. Once we have completed your financial assessment, any adjustments to your contribution will be applied from the date the provisional charge started (i.e. the date that your service started).

Personal budget, direct payments and your contribution

Once your needs assessment has been completed and we have assessed you as eligible to receive help from the Council with paying for your care and support, we will calculate your personal budget (the amount of money used to create your care and support plan).

As social care is not a free service, the Council's financial assessment will work out how much – if anything – you need to pay towards your care and support (this is called your contribution).

Then you have a choice to make:

Option 1: You can ask the Council to arrange the services for you. In this case, we will pay the service providers (for example your day centre) and you will pay your contribution to the Council through a direct debit every four weeks, which is the Council's preferred method of payment.

Option 2: You arrange and pay the service providers directly (for example a service provider helping you with personal care). In this case, the Council will deposit your direct payment into a nominated bank account used only for your direct payments. This amount is your personal budget less your contribution – we take off this amount from your personal budget before paying it into your direct payment bank account.

$$\begin{aligned} &\text{YOUR PERSONAL BUDGET minus YOUR CONTRIBUTION} \\ &= \\ &\text{YOUR DIRECT PAYMENT} \\ &\text{(if you pay your service providers directly)} \end{aligned}$$

Does everyone need a financial assessment?

There are certain circumstances where a financial assessment is not needed.

If you:

- Have substantial and ongoing health needs, which means you may be eligible for NHS Continuing Healthcare funding towards the cost of your health needs
- Are currently registered under section 117 of the Mental Health Act, and the social care and support services you need are related to the original cause of your registration
- Are in receipt of a DS1500 certificate (for non-residential care only)

then you are entitled to free care and support services and are therefore not required to complete a financial assessment.

We will, however, continue to review your care as your circumstances may change.

In some circumstances, we can choose to treat you as if a financial assessment had been carried out – for instance where you are in receipt of benefits which demonstrate that you would not be able to contribute towards your care and support costs. In such cases, the provisional charge would not be applied.

Short-term support

Short-term support services such as Reablement and Enablement which are designed to help you regain your independence or maintain independent living skills are free of charge up to a maximum of 6 weeks for Reablement and 12 weeks for Enablement. However, if within the 6 or 12 week period, the Care Manager discusses and agrees with you that you need ongoing care support, you will be expected to pay for care from the agreed date of your ongoing support. If your Reablement or Enablement care service extends

beyond 6 or 12 weeks, it will automatically become chargeable from then onwards. You will then need to complete a financial assessment to work out how much you may need to contribute.

Protected income

We will always make sure that you are left with enough money to live on after paying your contribution. This is known as protected income and is based on the Government-advised amount that a person needs to live on. We would expect you to use your protected income to cover everyday living costs such as:

- Food and drink
- Board and lodge
- Hairdressing and hygiene
- Bedding
- Clothes
- Spectacles
- Dentistry
- Alternative therapies or treatments
- Prescription items
- Insurances including building, contents, mortgage protection, life etc
- Utility bills such as water, gas, electricity and telephone
- Domestic cleaners, gardeners (other than basic costs allowable as disability-related expenses) and window cleaners
- Transport costs
- TV licence and subscriptions to satellite or digital TV companies
- Repairs and maintenance of buildings
- Other expenditure such as personal debts and arrears

This list is not exhaustive.

Disability-related expenditure

The protected income will not need to cover expenses you may have that are related to a disability, illness or because you are physically or mentally frail – these are known as disability-related expenditure (DRE) and allowances may be made within the financial assessment for these too. To qualify for a DRE allowance, you will need to be in receipt of Attendance Allowance, Disability Living Allowance or Personal Independence Payment.

Examples of disability-related expenditure items that will be considered in the financial assessment are:

- Payment for any community alarm system
- Costs of any privately arranged care services required, including respite care
- Costs of any speciality items needed to meet your disability needs, for example:
 - Day or night care which is not being arranged by the Council
 - Specialist washing powders or laundry
 - Additional costs of special dietary needs due to illness or disability (you may be asked for permission to approach your GP in cases of doubt)
 - Special clothing or footwear, for example, where this needs to be specially made, or where there is additional wear and tear to clothing and footwear caused by disability
 - Additional costs of bedding, for example because of incontinence
 - Any heating costs, or metered costs of water, above the average levels for the area and housing type, required because of age, medical condition or disability
 - Reasonable costs of basic garden maintenance, cleaning or domestic help, if needed due to your disability and not met by social services
 - Purchase, maintenance and repair of disability-related equipment, including equipment or transport needed to enter or remain in work – this may include IT costs where needed due to your disability; reasonable hire costs of equipment may be included if you are waiting for supply of equipment from the Council
 - Personal assistance costs including any household or other necessary costs arising for you
 - Internet access, for example if you are blind or partially sighted
 - Other transport costs incurred as a result of your illness or disability, including cost of transport to day centre, over and above the mobility component of DLA or PIP, if in payment and available for these costs. In some cases, it may be reasonable for us not to take account of claimed transport costs – if, for example, a suitable, cheaper form of transport, for example council-provided transport to day centres is available, but has not been used

Welfare benefits

There are benefits available to help you pay for any care and support. These are known as Attendance Allowance, Disability Living Allowance and Personal Independence Payment (which will gradually replace Disability Living Allowance). If you are not receiving any of these benefits, we would encourage you to make a claim.

As part of the financial assessment, we will offer you a welfare benefits review. If the review shows you are entitled to additional benefits, you will be expected to claim these. We can support you with this.

What if I cannot meet my agreed contributions?

Please get in touch with Adult Social Care to let us know, and we will review your circumstances again to see what has changed and, if necessary, carry out a new financial assessment.

It is important you do not stop your payments without having contacted us to discuss your situation. If payments are stopped without notice, this could result in legal action being taken to recover the outstanding amount. Any outstanding debt would accrue interest or a charge registered against your

home. We may also consider stopping your services so it is important that you discuss your situation with us as soon as possible.

You should also let us know if you are paying in full for your care and support, and find you are no longer able to meet the cost of your care. It is important that you contact us before your savings or capital falls below £23,250 (ideally 1-2 months before).

What if I am unhappy with the financial assessment process?

At any time, you or someone acting on your behalf can make a complaint under our Corporate Complaints Procedure if you are not happy with the amount we have said you should contribute.

In the first instance, this will be reviewed by the Financial Assessment Team together with the Adult Social Care team, if appropriate. If you are not satisfied with the outcome of the review, you can lodge a formal appeal request where you will be invited to present your appeal to a panel, made up of an Independent Chair and two County Councillors.

After this, if you are still not happy with the outcome, you can refer your complaint to the Local Government Ombudsman.

Further information

If you need further information about **financial assessments or help in completing your financial assessment form**, please contact:

The Financial Assessment Team

☎ 0300 126 3001 option 1 or @ financialassessments@northamptonshire.gcsx.gov.uk

If you need further information about **care**, please contact:

Adult Social Care

☎ 0300 126 1000 or @ adultcarenc@northamptonshire.gcsx.gov.uk

📍 You can also contact either team (Financial Assessments – LGSS Transactions or Adult Social Care) at the following address:

Northamptonshire County Council
One Angel Square
4 Angel Street
Northampton
NN1 1ED

Frequently Asked Questions

What if I find the financial assessment process confusing?

Staff from the Financial Assessment Team will be able to explain the process to you and also advise you if you might be entitled to benefits you are not yet claiming. They can also tell you how to make the claim. Family and friends can also help to support you through the financial assessment process.

What evidence will I need to provide?

You will be asked to produce up-to-date documents to evidence all of your income, including all state-related benefits, entitlements and allowances, as well as any other income received. You will also need to provide us with receipts for disability-related expenditure. In some cases, we may need to contact your GP.

Do I have to pay for my services?

Yes, in most instances you will have to pay something towards the cost of the services provided to you.

My Care Manager says my care will be funded by the Council. Do I still have to pay?

Yes you do. This means we will pay the provider the whole cost of the service you are receiving, but you will still need to pay your contribution towards this. We will collect the amount you have been assessed to pay by direct debit. You will not have to pay the provider directly, unless you receive a Direct Payment.

How much will I have to pay?

Normally before your service starts, we will ask you for information about your financial circumstances. As soon as we have all the information needed, we will carry out a financial assessment and give you written details of exactly how much you are asked to pay. We will indicate any benefits you may be entitled to when we have completed a welfare benefit check.

This example shows how contributions are worked out based on information about income and savings:

- Mrs A has a total assessable income from various sources of £250.00
- She has £16,500 in savings (capital)
- She has been assessed as having £21 disability-related expenditure (DRE)
- She has allowable housing costs of £22.40 per week

Her contribution is calculated as follows:

Assessable income	250.00	+
<u>Income from capital</u>	<u>9.00*</u>	
Total assessable income	259.00	-
Protected income	194.50	-
DRE	21.00	-
<u>Housing costs</u>	<u>22.40</u>	=
Maximum weekly contribution	21.10	

*£1 income from capital for every £250 over £14,250

What will happen if I'm asked to make a contribution and I don't pay it?

If there is no valid reason for non-payment, then we will begin the process of recovering the money owed, or we may consider stopping your service.

When you complete the welfare benefit check on my behalf, how will I know if I am entitled to more benefits and who will let me know?

We will tell you if we think you should get more benefits, or if there should be a change to your benefits. We will advise you of how these can be claimed and who to speak to for information to help with your claim. One of our Welfare Benefit Advisers will contact you to offer any support with any potential claims.

What happens if I don't get the benefits from the Department for Work and Pensions (DWP) that you say I should pay towards my weekly charge?

First of all, you will need to make a claim to the DWP for the benefits we think you are entitled to. If you are unsuccessful in your claim for any benefits we think you are entitled to, please let the Financial Assessment Team know, and we will be able to advise you further. You will need to provide us with a copy of the letter from the DWP.

Will my weekly contributions change?

The amount you pay may change due to:

- Changes in the law
- Changes in your financial circumstances e.g. benefit increases
- Changes in the amount charged by the provider

We usually review your charges each year but you can request a review at any time if your financial circumstances change.

What happens if I don't receive a service, for example if I go on holiday?

If you need to cancel a service, you are expected to follow the agreement with the service provider who will tell us about the cancellation. If you do not receive a service in a particular week, you will not be asked to contribute the cost of that service. However, if you still receive the service for part of the week and the cost of the service is more than your weekly assessed contribution, you will pay the actual cost of the service received.

Can I give my money to members of my family?

Reasonable gifts to family members in line with previously established custom and practice, for instance birthday or wedding gifts, can still be made. However, capital or assets given away (transferred) with the intention of reducing or avoiding the need for you to pay for care will be taken into account during the financial assessment. If we believe, after investigation, that you have given away assets in order to avoid paying care fees, you will have to pay your care provider directly for the cost of your support.

The Financial Assessment Process



