

Understanding Care contributions

Will I have pay towards my care?

Many people are expected to contribute towards the cost of their care and support although there are some exceptions:

- Re-ablement (is not chargeable for up to 6 weeks) This service is where support is provided initially to try and assist in helping people back to independence.
- Aids, and minor adaptations of less than £1,000 are not charged for
- Care and support provided to people with Cruetzfeldt-jakob disease (CJD) is not charged for.
- Aftercare / support provided under the Mental Health Act 1983 section 117 are not charged for.
- NHS including continuing healthcare (CHC) Services are not chargeable.

The amount you pay will depend on your financial circumstances and will be decided following a financial assessment.

What is a Financial Assessment?

We will ask you to complete an initial financial assessment form. This will ask about your income and capital/savings. This information you give is used to calculate how much you need to contribute towards your care package. Financial assessments are carried out annually or sooner if your circumstances change (e.g. You must notify us if you receive an inheritance or if you cease receiving a pension or benefit). It is not always necessary to conduct a full financial assessment (for example: if you have significant financial resources and do not wish to undergo a full financial assessment for personal reasons or if your only income is from benefits.) In these cases a light touch financial assessment will be sufficient.

If you do not complete the financial assessment then you will be deemed eligible to pay for the full cost of your service and will be charged accordingly. Please let us know if you need help with completing or understanding the form.

Information you need to provide for a financial assessment:

We require you to provide paperwork to support the information you have given in the financial assessment. We will need to see copies of:

- Bank statements for the past 3 months (including savings, investments and other income e.g. from renting property)
- Proof of benefits and or pensions (public & private)
- Utility bills
- Proof of any disability related expenditure

How is my contribution calculated?

The amount you contribute will depend on your assessed income and your level of capital:

1. **Your assessed income** -this is the amount of income you would have left after we have allowed you enough money to cover:

- An amount that is equal to income support or pension credit plus 25% (Non-residential care only)
- An extra 20% of your disposable income – to make sure you are not left with a very low income (non-residential care only)
- Enough money to cover housing costs such as rent or mortgage payments, council tax, electricity, gas, maintenance or service charges, buildings and contents insurance, & sewerage costs
- Enough money to cover agreed expenses related to your disability.
- Personal expenses allowance (residential care only). This rate is set annually by ministers: it is a minimum amount of income that you must be left with after charges so that you have enough money to spend on personal items such as clothes and other items which are not part of your care.

Not all income is taken into account when we work out how much you need to pay. The following is a list of disregarded income.

- The mobility element of Disability Living Allowance
- Housing or Council Tax Benefit (non-residential only)
- War pension or war widows pension
- Earnings from current employment.

2. **Your level of capital:** - If you have capital such as savings or a property, then this will be reviewed in line with The Care and Support (Charging and assessment of resources) regulations 2014
The value of your home will be disregarded if you are receiving care in a setting that is not a care home or where a qualifying relative occupies this property as their main or only home.

If you are in residential care and have more than the upper limit in capital, which is currently £23,250 (after any disregards) you will be asked to pay for the full cost of your care.

If you are receiving care in another setting and have more than the upper limit of £34,875 in capital (after any disregards) you will be asked to pay for the full cost of your care.

If you have less than £14,250 (lower limit) you will not need to contribute towards the cost of your care package

If you have between the lower and upper limits, we will add £1 per week to your assessable income for every £250 that you have above £14,250 (eg if you have savings of £17,750, you would contribute £14 towards the cost of your care from your capital

What if I do not agree with the amount I am asked to pay?

If you do not agree with your assessed contribution you should speak to either your social worker or by calling the Adult Social Care Team on **020 7332 1224**. They can arrange for your financial assessment to be rechecked

How will I pay my contribution?

This depends on whether you have direct payments or we are arranging care for you.

- Direct Payments: If you are receiving a direct payment you will need to pay your contribution into your direct payment account monthly. For more information on direct payments, see Direct Payment Leaflet.
- Council managed personal budgets: Your contributions are paid by us and you will be invoiced for this monthly. Details of how to pay are on the back of the invoice
- Deferred Payment Arrangement (DPA): If care is being funded by a deferred payment arrangement then the cost of care is added to the amount owed. For more details on DPA's – See leaflet concerning Deferred Payments.

If you receive Telecare that does not form part of a personal budget you will be billed monthly for your contribution

Residential or Nursing Care Only:

We will work with you to identify a residential or nursing home to meet your needs, however you may wish to choose a home which is more expensive, in such cases someone else must pay the difference, known as the 'top-up'. This means that you can still move into the home that you have chosen as long as someone agrees to continue to pay the top-up for you. However please consider this option carefully in case the third party's financial situation changes. If you have a deferred payment agreement, the cost of the top-up will be added to the deferred amount owed to us. The person paying the top up must be willing and able to meet the additional cost and will enter into an agreement with us, agreeing to meet that cost. The top-up will be invoiced monthly and ways to pay are stated on the back of the invoice. See leaflet regarding "Third Party Top ups".

Benefits and financial advice

If you are receiving social care services, you may be able to apply for certain benefits and should seek advice to make sure that you are receiving all of the income that you are entitled to for example attendance allowance. City Advice on 0207 392 2919. Some organisations that may help are:

- Care Quality Commission
- Society of Later Life Advisers
- Age UK
- Saga Care Money Advice
- My Care My Home

(N.B. These are suggestions and not recommendations of their quality)

What if I want to make a complaint?

Any concerns, complaints or comments should be directed in the first instance to:

The complaints manager

City of London

Dept of Community & Children's Services

North Wing, Guildhall

PO BOX 270

London EC2P 2EJ

Email: Sharon.maclaughlin@cityoflondon.gov.uk Tel: 0207 332 3498