

Paying for Adult Social Care

1. Will I have to pay for adult social care support?

When we arrange care and support for you, you may have to pay towards the costs.

We will ask about your individual circumstances. This is to work out how much you might need to pay towards the cost of your care.

We follow the government rules about how much people have to pay. As a general guide, the more money you have as savings or income the more you will pay. Some people will pay the full cost of their care, but some people do not have to pay anything. The rules we follow mean that you will always be left with enough money to live on.

We work out how much people have to pay by doing a financial assessment.

2. What does a financial assessment involve?

The financial assessment takes up to 40 minutes and is completed either on a paper form, or by a telephone or video call appointment arranged with a member of the Financial Assessments and Benefits Advice team.

We will ask you to provide us with information about your income, your spending and any savings and assets that you have. Assets are things you own that have a financial value such as shares and investments. This will help us to work out how much you are able to contribute towards your care.

The government sets an amount of money which you can keep. This is called the Minimum Income Guarantee.

We can talk to you about some expenses you may have because of your condition or disabilities. We call these '**disability-related expenses**' and they may include things like exceptional laundry costs or paying for certain equipment. These do not include what we consider to be normal daily living costs.

We will consider these items and may discuss them with you before we decide what amounts can or cannot be included as expenses that relate to your disability or care needs.



If you need care in your own home, we **won't** include the value of your property.

If you move into a care home, we **may** include the value of your property and to find out more about this please see section 4 below.

As part of the financial assessment, we may also offer you advice on welfare benefits. This could help increase your income by claiming any benefits you might be entitled to.

3. How we work out your contribution

The financial assessment will look at:

- Your regular income such as pensions, benefits or earnings. You'll normally be expected to use part of your income to help pay for care, although some income will not be considered, such as your earnings from any paid work you do.
- Your capital such as cash savings and investments, land and property (including overseas property), and business assets. If your capital is above a certain threshold, you'll have to pay the full costs of your care yourself. If your capital is below that threshold but above a lower limit, it's taken into account by assuming it produces an income (called the 'tariff income') at a set rate. Any income from the capital is ignored.

Savings	Contribution
Below £14,250	We will not take these savings into account in the assessment
Between £14,250	For every £250 (or part of £250) of savings you have we will add
and £23,250	an extra £1.00 to the income we use in your assessment.
Above £23,250	We will assess you as being able to pay the maximum contribution,
ADOVE £23,250	no matter what other income and disability costs you may have.

As part of the assessment, we will consider any savings you have, as follows:

4. What is self-funding?

If you are paying the full cost of your care, you are known as a 'self-funder'.

People are usually self-funders if

- they choose not to approach the council for help, or
- they have had an assessment of need, but are not currently eligible for services, or
- they are eligible for services, but their savings are above the threshold of £23,250.

If you have been told that you do not currently meet the <u>eligibility criteria</u> for services or are simply arranging your own support, you can find a list of voluntary or independent organisations who provide services on our <u>SearchOut Warwickshire</u> directory. This means that you can choose and pay for the kind of services you feel you need.

Self-funders can still ask the council to assess their care and support needs and can ask the council to arrange their care even though they are paying for it in full.

5. Paying for residential care

If your needs are met within a residential care home, you can find more information on the Warwickshire County Council website or in our leaflet on <u>Residential Care</u> <u>Homes</u>.

If you are assessed as needing to contribute to the cost, you can choose to pay this from your income and savings, or you may be eligible for the '<u>deferred payment</u> <u>scheme</u>'.

A deferred payment agreement is a form of loan. It is an arrangement with the council that enables you to use the value of your home to help pay care home costs. If you are eligible, we will pay your care home bills on your behalf. You can delay repaying us until you choose to sell your home, or until after your death. Deferred payment agreements will suit some people's circumstances better than others.

You may be eligible for a deferred payment agreement if:

- you are receiving care in a care home (or you are going to move into one soon)
- you own your own home (unless your partner or certain others live there)
- you have savings and investments of less than £23,250 (not including the value of your home or your pension).

For those living in residential care, the Personal Expenses Allowance applies rather than the Minimum Income Guarantee. The allowance which is set by the government is often used by those living in residential care to purchase personal items such as toiletries, newspapers, clothing etc.

Disability related expenses do not apply to those people who live in residential care homes.

6. Independent financial advice

When do I need independent financial advice?

Knowing the best way to fund your care can be complicated and confusing. There will be times when you need to get financial advice which is impartial and independent of the council, so that you make the right decisions.

For example:

- Where there are several options available, and you need advice on which to choose: often the council is not allowed to recommend one
- When there is a potential conflict between the council's interests and yours, such as advice on how assets are taken into consideration as part of your financial assessment
- When you are about to enter into a legal agreement. For example, we can provide information about the consequences of entering into a deferred payment agreement, but cannot advise you on whether you should enter into it
- Where you want advice on specific financial products to get the most out of your assets; this would probably need *regulated* advice.

What is an independent or 'regulated' financial adviser?

Independent financial advice is available from several sources. Some services are free and provided by not-for-profit organisations, such as:

- <u>Money Helper</u> (www.moneyhelper.org.uk)
- <u>Citizens Advice</u> (www.citizensadvice.org.uk)
- <u>Age UK (</u>www.ageuk.org.uk)

There are also more formal 'independent financial advisers' (IFAs), who you may need to pay for their advice. They can give you advice on financial matters and recommend suitable financial products. You can find independent advice by contacting one of the not-for-profit organisations listed above, or through the Society of Later Life Advisers <u>https://societyoflaterlifeadvisers.co.uk/</u>.

The council cannot recommend specific IFAs or provide a list of them, but you can search online for 'IFAs in Warwickshire' or 'independent financial advisers in Warwickshire'.

Can I get help if I have difficulties getting or understanding advice?

If you don't have family or friends to help you and you find getting or understanding independent financial advice difficult, we may be able to provide you with a free *independent advocate*.

They can support or advocate on your behalf to ensure you have thought about the best way of supporting and representing yourself, regarding your well-being and interests. This will help you to get the most out of any independent financial advice.

Other situations may mean you should have an independent advocate, such as when you need a long stay in a hospital or care home, or if what matters to you most about your care is different to those who would normally advocate for you.

If you have an allocated Social Care worker, they can tell you about independent advocacy and how they may be able to help you.

7. What else will I be charged?

As well as charges for care in your own home and for residential care, there are other services for which you may be charged. These charges are subject to change from year to year.

Transport

If you need transport to access your care, the council will arrange this and you may need to pay for this yourself. The amount you must pay depends on the number of journeys you make, and how far you travel. The cost per journey is set out in the table below:

Transport distance	Rate per journey
Up to 5 miles	£5.69
5 to 10 miles	£9.49
Over 10 miles	£13.45

Deferred payment administration and interest

Deferred payments carry additional charges, as well as the cost of services being received (see paragraph 5 above). These are described in the separate leaflet on <u>Residential Care Homes</u>.

Other charges for services

Other charges for services are set out in the table and explained below.

Maximum charge for services	Charging rate from April 2023
Telecare (per week) is equipment which detects if there's a problem or an emergency in the home and sends a warning to a call centre or a carer. The amount you pay for telecare is based on the actual number of weeks or part-weeks that you receive a telecare service.	£1.53

Maximum charge for services	Charging rate from April 2023
Day care (per day or part day) i.e., care outside your own home. The amount you pay is based on the actual number of days or part-days you attend the day care service.	£41.56
Home care (per hour) is when you receive help from professionals to live independently in your own home. The amount you pay is based on the actual number of home care hours that you receive.	£21.76
Residential care means long-term care provided in a care home. All residents have to pay for residential care, but the amount is assessed according to your income and savings through your financial assessment.	Based on Financial Assessment
Respite residential care is when someone stays in a care home on a temporary, short-term basis. Charges are based on the actual individual daily cost of each service.	Based on actual cost
Personal Assistant (PA) services help look after you in your own home, for example, providing personal care, preparing meals and doing household tasks. The amount you pay is based on the full cost of paying and employing personal assistants. This is calculated on an hourly rate and managed via a direct payment.	Based on actual cost
Take A Break service (per hour) provides community- based short-breaks for adults aged 18 to 65. Charges are based on an hourly rate which will be determined through your financial assessment.	£19.22
24-hour live-in support is charged at the full actual cost of the service. If more than one person in a household uses this service, the cost is shared between customers.	Based on actual cost
Night support – sleeping night (per hour) when a carer sleeps in your home through the night but is on	£10.34

Maximum charge for services	Charging rate from April 2023
hand if you need support. Support is charged at full cost. If more than one person in a household uses this service, the cost is shared between customers.	
Night support – waking night (per hour) when a carer stays awake for the night and provides specialist care whenever you require. Waking night support is charged at full cost. If more than one person in a household uses this service, the cost is shared between customers.	£18.36

Other chargeable services

You will be required to pay the full cost of other chargeable services and support, such as laundry services.

Paying an invoice

When we have completed the financial assessment, we will tell you what your contribution will be, depending on the type of care you receive. If any of the details are incorrect, or have changed, you must contact our Financial Assessments and Benefits Advice Team. The assessment letter will give you a telephone number to contact if you have any queries.

We will send you a statement on a four-weekly basis for services you've already received detailing the weekly contribution and the date any outstanding sums are due for payment. How to make payments will be detailed on your payments invoice.

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