

# Charging Policy for Community Based Services for Adults

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#### 1. Introduction

- 1.1 Calderdale Metropolitan Borough Council (CMBC) arrange community-based services i.e. personal care, day opportunities and enabling support for people who have been assessed as being eligible for care and support, in order for them to remain independent in their own homes.
- 1.2 The Care Act 2014 brings all community care law under one all-encompassing piece of legislation and repeals almost all of the existing provisions.
- 1.3 Calderdale Metropolitan Borough Council has a charging policy which follows Government guidelines. This takes into account a person's individual income and savings. We use a financial assessment to work out how much a person should pay towards the care and support services they receive to help them stay at home. The charging policy will be applied fairly to everyone.
- 1.4 The council will charge for support delivered in community settings including a person's home or a community facility such as a day centre. The person's home includes tenancies within Extra Care, Supported Living and Shared Lives accommodation.
- 1.5 All non-residential community-based support services fall within the scope of this policy and include (but is not limited to):
  - Home care services
  - Community Based Day Opportunities
  - Supported Living
  - Adult Shared Lives Placements
  - Direct Payments
  - Sitting Services
  - Outreach services
  - Provision of care and support in Extra Care settings
  - Community Care Alarms
  - Joint funded services –clients will be required to contribute towards the cost
    of the services provided by the Council but not those provided by the NHS as
    part of a joint package of support.
  - Other

## 2. Personal Budget

2.1 If a person has a care and support plan, an amount of money will be identified that will be enough to meet their eligible needs. This agreed amount of money is called a Personal Budget. In some circumstances, the person will be expected to contribute financially (in part or in full) to their Personal Budget, and fund part or all of their care and support.

## 3. Financial Assessment

3.1 CMBC use a financial assessment (a means test) to establish how much a person may need to pay towards the cost of their care.

- 3.2 Section 8.14 of The Care and Support Statutory Guidance instructs that local authorities are not permitted to charge for provision of the following types of care and support:
  - Community equipment (aids and minor adaptations) less than £1,000.00
  - Reablement, for a period of up to six weeks
  - Services provided to those with Creutzfeldt Jakob Disease (CJD)
  - Any service or part of service which the NHS is under duty to provide, this
    includes intermediate care, Continuing Healthcare and the NHS contribution
    to Registered Nursing Care
  - Assessment of needs and care planning, including the cost of the financial assessment
  - Services which the local authority has a duty to provide through other legislation, for example aftercare services under Section 117 of the Mental Health Act 1983. These are services which are provided to meet a need arising from, or related to, the person's mental disorder, in order to reduce the risk of a deterioration of the person's mental health condition and need for readmission for the treatment of that mental disorder.
- 3.3 Local authorities are permitted to charge for provision of the following types of care and support:
  - Care and Support Services that meet needs which are unrelated to Section 117 aftercare services as defined above at 3.2. These services will be subject to the local authority charging policy and may result in a client contribution.
  - The difference between the actual cost of preferred accommodation and the usual cost of providing or arranging for the provision of accommodation of that kind under Section 117.
- 3.4 Not everybody will be required to pay the same amount for their care and support services.
- 3.5 A person's income, savings and outgoings will be taken into account and looked at against the cost of their care and support. This will help identify the charge they are expected to pay.
- 3.6 During a financial assessment, CMBC may ask that evidence is provided. If a person refuses, or chooses not to be financially assessed, they will have to pay the full cost of the services they receive up to the maximum charge of £558 per week.
- 3.7 CMBC are duty bound to make sure we leave a person with at least a minimum amount of money each week. In doing so, CMBC will adhere to the guidance provided by the Department of Health in their Local Authority Circulars which are usually reviewed and published in April of each year. These circulars can be found at Local authority circulars GOV.UK (www.gov.uk)
- 3.8 CMBC will always undertake a financial assessment to determine how much a person should contribute, except when it is clear that they have savings in excess of the upper capital limit.

- 3.9 If a person has savings in excess of the upper capital limit, they will be expected to meet the full cost of the care services they receive up to the maximum charge of £558 per week.
- 3.10 The upper and lower capital limits are reviewed and confirmed by the Department of Health in April of each year. The current capital limits are:
  - Lower Capital Limit £14,250
  - Upper Capital Limit £23,250
- 3.11 When a person's financial assessment has been completed, they will be told the maximum weekly charge they need to pay towards the cost of the care services they have. This is called an assessed weekly charge.
- 3.12 If the financial assessment process concludes that a person needs to pay towards the cost of their care and support services, the charge will be applied from the Monday following the start of the services, unless the care and support starts on a Monday, in which case the charge will be applied from the same day. This may be subject to change upon review.

# 3.13 Minimum and Maximum Charges

3.14 The current limit on the amount CMBC ask anyone to pay towards their care for community services is £558.00 per week. This is called the maximum weekly charge. Even if the cost of the care provided is more than £558.00 per week no one currently pays above this amount. The minimum weekly charge for adult care services is £1.00 a week.

## 3.15 What counts as income?

- 3.16 All income is taken fully into account in the financial assessment unless the regulations to the Care Act require that it should be disregarded either partially or fully. Income that is available or due to an individual but has not been sought or applied for may be taken into account as notional income in the financial assessment. Notional income may also apply where a person has reached retirement age and has a personal pension plan but has not purchased an annuity or arranged to draw down the equivalent maximum annuity income that would be available from the plan.
- 3.17 All State and Welfare benefits count as income. These could include but is not limited to:
  - Guaranteed Pension Credit
  - Employment Support Allowance (ESA)
  - Universal Credit
  - State Retirement Pension
  - Disability Living Allowance (DLA)
  - Attendance Allowance
  - Personal Independence Payment (PIP)
  - Universal Credit

All private income. These could include but is not limited to:

- Private pensions
- Works / Occupational pensions
- Tariff income
- Any other income received on a regular basis.
- 3.18 CMBC currently disregard some types of income when carrying out a financial assessment for community-based care services. These include:
  - War Pension
  - · Pension Credit Savings Credit
  - PIP mobility
  - DLA mobility
- 3.19 This list is not exhaustive. The Care and Support Statutory Guidance, Annex C: Treatment of Income provides further details on sources of income which must be disregarded. Care and support statutory guidance GOV.UK (www.gov.uk)

#### 3.20 CMBC do not take into account:

- The difference between the higher and lower rate of Attendance Allowance (AA), unless night time care is being paid for by CMBC.
- The difference between the higher and middle rate of the care component of Disability Living Allowance unless night time care is being paid for by CMBC.

## 3.21 What counts as savings?

- 3.22 For the purpose of a community care-based services financial assessment, savings can include but is not limited to:
  - Money held in a bank, building society or post office account (50% if a joint account)
  - ISAs
  - Stocks and shares
  - Premium Bonds
  - National Savings Certificates
  - Property and/or land (other than the home in which they live).

## 3.23 How we work out Tariff Income

3.24 The tariff income calculation is based on guidance issued by the Department of Health and may be subject to change. Tariff income is meant to represent an amount a person with savings between the lower and upper capital limits should be able to contribute towards their care and support and is not representative of any interest- earning capacity of those savings.

- 3.25 If a person has savings between the lower and upper capital limits, we will include tariff income in our calculations.
- 3.26 We calculate a notional income of £1 per week for each £250 (or part thereof) of any amount between the lower and upper capital limits.
- 3.27 For example, savings of £16,400 will attract a tariff income of £9 per week  $(£16,400 £14,250 \div £250 = £9)$
- 3.28 What counts as outgoings?
- 3.29 Household expenditure can be taken into account. These will include; housing costs such as mortgage, rent (net of housing benefit), council tax (net of council tax benefit), and service charges. These are called Housing Related Expenses.
- 3.30 Expenses directly related to an illness/disability can be taken into account. This may include, for example, a domestic cleaner, excessive fuel costs (gas, electric, oil), excessive water and sewerage rates (if metered), specialist clothing etc. These are called Disability Related Expenses (DRE).
- 3.31 Eligibility for Disability Related Expenses (DRE)
- 3.32 If a person has any additional expenditure due to a disability or long-term health condition, this must be supported within their needs assessment as being necessary. As the DRE is allowed on the basis of an individual's needs, CMBC officers use the support plan to make a decision on whether an allowance should be made. Appendix 1 provides further information on DRE.
- 3.33 DRE will only be considered if a person is living at home and the spend is:
  - necessary to meet any needs which are not being met by Calderdale Metropolitan Borough Council
  - not something a person would pay for if they did not have a disability or medical condition
  - not a health need that should be provided by a government agency like the NHS
  - not covered by a grant or donation
- 3.34 In order to be eligible for DRE:
  - A person must be in receipt of the care component of Disability Living Allowance, Personal Independence Payment (Care) or Attendance Allowance.
  - The costs must be reasonable and can be verified.
  - A person must be able to provide evidence for any amounts claimed. For example, with receipts, invoices, or appropriate documentation.
  - The disability related expenditure will be limited to a maximum of the disability care benefit that a person is entitled to.
- 3.35 The onus is on the person or their representative to provide all of the evidence required for consideration of DRE (Appendix 2). If the person or their representative is unable to provide this evidence during the financial assessment, they will have 4 weeks to provide it. On receipt of the evidence being provided

- within 4 weeks, any award or reduction in charge due to the DRE will be backdated to the date of the assessment.
- 3.36 Where evidence requested by the council is not provided by the person or their representative within 4 weeks, the application will be treated as withdrawn. The council will only consider evidence provided after 4 weeks if there are extenuating circumstances and any reduction will be made from the date of receipt of the last supporting evidence. If no evidence is provided, then no allowance will be made.
- 3.37 As the council takes disability-related benefits into account in the financial assessment calculation, it must also allow the person to keep enough of these benefits to pay for necessary, reasonable disability-related additional costs to meet any needs which are not being met by social services. The council will carefully consider a person's level of disability-related expenditure in the financial assessment.
- 3.38 Regular and one-off expenses are calculated differently:
  - Fuel costs and metered water charges are compared to the average usage for the type of property and household size that a person has. An allowance for above average costs is considered
  - Basic gardening costs are considered March to October (34 weeks) and are calculated on an average weekly cost
  - Regular expenses are calculated as an average weekly cost
  - One-off expenses, usually for equipment, are calculated over an approximate life span, such as 1 year, 5 years or 10 years
- 3.39 In cases where a person is asking for a larger disability related expense than is usually allowed or is requesting an unusual disability related expense this may be referred to Adult Social Care for a decision.
- 3.40 Payments to family members are not usually considered as disability related expenses unless identified in the needs assessment and support plan for exceptional circumstances, including cultural or religious reasons.
- 3.41 Appendix 3 provides examples of common items for consideration. The guidance is neither exclusive nor exhaustive but represents items referred to within the Care and Support Statutory Guidance.

## 3.42 Mental Capacity

- 3.43 The Council will follow the Care and Support Statutory Guidance (CSSG) when undertaking a financial assessment and will establish whether the relevant adult has capacity to take part in the financial assessment.
- 3.44 Where an adult lacks capacity, the council will ascertain if the person has an enduring power of attorney (EPA); lasting power of attorney (LPA) for property and affairs; lasting power of attorney (LPA) for health and welfare; property and

affairs deputyship under the Court of Protection or any other person dealing with that person's affairs (for example, someone who has been given appointeeship by the Department for Work and Pensions (DWP) for the purpose of benefits payments)

- 3.45 People who lack capacity to give consent to a financial assessment and who do not have any of the above people with authority to be involved in their affairs, may require the appointment of a property and affairs deputyship if they have assets other than benefits. A family member could apply for this to the Court of Protection. In the absence of any family members Calderdale Metropolitan Borough Council may make the application for the appointment of a deputy for property and affairs.
- 3.46 If Calderdale Metropolitan Borough Council is appointed corporate appointee by the DWP then it will only provide benefit information for the purposes of the financial assessment, in the person's best interests. If there are other assets, and in the absence of others to do so, an application will need to be made to the Court of Protection to provide CMBC with the authority to use this information for the purposes of the financial assessment and in the person's best interests, in accordance the Mental Capacity Act 2005.

## 3.47 Charging Couples

- 3.48 The Care Act 2014 requires that financial assessments are completed for clients as individuals. Where charges are related to couples who are both in receipt of services, the council will apportion these charges dependent on the cost of the individual's service charge. Charges are added together and posted to one of the couple's accounts.
- 3.49 A couple is defined (for the purposes of this charging policy) as two people living together as spouses or partners.

## 3.50 Light Touch Financial Assessments

3.51 In some circumstances, the council may decide that a full financial assessment is not necessary or appropriate. This type of financial assessment is defined as a "light touch financial assessment."

The light touch financial assessment will apply:

- If a person does not wish, or refuses, to disclose their financial information.
- If a person says they have significant financial resources and or savings above the limit of £23,250 and does not wish to go through a full financial assessment for personal reasons.
- Where the charges for the service are small and a person is able to pay and would clearly have the relevant minimum income left. Carrying out a financial assessment would be disproportionate.
- Where a person is in receipt of benefits, which show they would not be able to pay towards their care and support costs.

- 3.52 The council will inform a person when a light-touch assessment has taken place and will make it clear that the person has the right to request a full financial assessment.
- 3.53 Reviews of a person's financial assessment will be completed in accordance with Care Act guidance. These will be conducted on a regular basis, and at least annually. The review will take into account any changes to a person's financial circumstances. For example, a decrease in the level of their capital resources, or an increase in the level of their pensionable income.

## 3.54 Outcome of the financial assessment

CMBC will send the individual a letter to explain:

- How much they need to pay towards their care and support (if anything).
- How it has been calculated.
- How to pay it.
- 3.55 It is the individual's responsibility to check the letter carefully and let the Charging Assessment Team know straight away if anything is missing or incorrect.

## 4. Direct Payments

- 4.1 When an individual chooses to take their personal budget as a form of direct payment, assessed charges are deducted from the personal budget amount and a net payment is made by the Council for contribution to the personal budget.
- 4.2 If a person does not pay their assessed charge correctly into their direct payment account, CMBC will carry out an audit and send them an invoice for any underpaid charges.
- 4.3 There are regular reviews of direct payments to ensure money is spent appropriately.
- 4.4 Where direct payments are being made and the individual is not spending the direct payment for the appropriate purpose, the council will take steps to recover any payments that have been inappropriately used. In these cases, a review of the care assessment and the financial assessment will also be undertaken.
- 4.5 More information is available in CMBC's separate Direct Payments Policy.

## 5. Self-Funders - (full cost charging)

- 5.1 A "Self-Funder" financial assessment means that the person is required to pay the full amount of all qualifying charges for any means tested care and support they receive up to the maximum charge of £558.00 per week.
- 5.2 The council will treat a person as being a "Self-funder full cost" financial assessment where they:

- Have savings and other financial resources above the national upper limit, currently £23,250, it is expected they will need to pay for the full cost of support. The Council calls this "self-funding".
- Choose not to disclose their financial information to enable a full financial assessment;
- Fail to co-operate and/or do not provide a completed financial assessment form, within 1 month (30 days) (14 days for Care Alarms) of agreeing a Calderdale Metropolitan Borough Council Social Care Charging Policy support plan or the commencement of chargeable services (whichever is sooner);
- Where possible the council will use other information sources available to complete the financial assessment, however, where this is not possible and the client (or their representative) fails to provide all of the information requested within 1 calendar month; the council will be deemed to have undertaken a financial assessment in accordance with regulation 10 of the "The Care and Support (Charging and Assessment of Resources) Regulations 2014 (as amended), and the client/representative will be charged the full cost of the care and support service(s).
- Receive a declaration (including electronic declaration) that they are happy to pay the full cost of services received;
- Receive a full financial assessment that deems they are assessed to contribute the full cost for their care and support.
- 5.3 Where a person is self-funding their support, they are still entitled to ask that the council help them arrange their services. There are a number of people who have either been assessed as being able to afford the full weekly cost of social care or have not disclosed their financial information to the council and as such are required to pay the full charge. These people have the choice to have the council arrange a suitable social care package for them.

## 5.4 Former self funders

- 5.5 Former self funders are those individuals whose assets fall below the threshold to become eligible for council funding (below the £23,250 asset threshold). Former self funders may become eligible for social care funding once their resources have depleted below the statutory thresholds and will need Care Act and financial assessments to determine eligibility.
- 5.6 The council will have to make a determination following a Care Act assessment, to confirm that an individual has eligible care needs. Following this, a financial assessment will be undertaken to determine the date the former self funder became eligible for council funding.
- 5.7 Calderdale Metropolitan Borough Council will not be responsible for debts incurred before the former self funder or their representative has completed a

financial assessment. Calderdale Metropolitan Borough Council will become responsible for paying for care:

If the council assesses there that there are eligible care needs

#### **AND**

- a financial assessment has been completed and confirmed the individual is below the financial limit
- 5.8 The date that Calderdale Metropolitan Borough Council will assume responsibility for payment will be the date of the submission of the financial assessment, or the date at which the funds become depleted if it is after this.
- 5.9 The financial assessment will identify the former self funders contribution towards the cost of meeting their eligible care needs.

## 6. Services not provided as planned

- 6.1 Managed packages of care
- 6.2 For services where CMBC are given less than 24 hours' notice of a cancellation, charges will typically still apply and therefore there will be no reduction to the weekly charge (with the exception of unavoidable emergencies, such as emergency hospital admissions).
- 6.3 When the council are given more than 24 hours' notice or if there is an emergency, charges will not apply for this element of the service and the individuals account will be adjusted accordingly. However, because the council charge against the agreed weekly rate, cancellations will not necessarily result in a reduced overall charge.
- 6.4 There may be a number of reasons why services are cancelled in advance, such as hospital admissions, holidays or health appointments.
- 6.5 Direct Payments
- 6.6 If there is a period of no care, for example if person does not receive care because they are away with family or in hospital, and there are no costs paid to the provider or Personal Assistant (PA) for this period, the care charge payable will be reduced by the appropriate number of weeks (full weeks only).
- 6.7 If the person does not receive care and a retainer is paid to the provider or the PA, the care charge due will also be reduced by the appropriate number of weeks (full weeks only).
- 6.8 If the period of no care includes a part week, the person will be charged only for the cost of care delivered in that week. If the cost of care in the week is less than the assessed care charge, a reduction of the difference will be made for that week.

## 6.9 Mixed package

- 6.10 If there is a period of no care, for example if the person is away with family or in hospital, and the provider payable through the Direct Payment charges a retainer, the care charge due will be reduced by the number of weeks that the person was in hospital or away for both elements of the package.
- 6.11 If the period of no care includes a part week, the assessing CMBC Officer will calculate the charge due for the managed element and use the guidelines above for the Direct Payment element of the charge.

## 7. Duty to notify changes of circumstances

- 7.1 A new financial assessment needs to be completed when there is any change in the person's financial circumstances, for example where their income goes up or down or there is a change in their savings. Individuals must tell the Charging Assessment Team about any change within one month of the change happening who will then complete a new financial assessment from the date of the change.
- 7.2 If a person does not tell the Charging Assessment Team about any change within a month and the change means that they have been paying too much for their care, the assessing CMBC officer will only complete the financial assessment from the week CMBC are told about the change.
- 7.3 If a person does not tell the Charging Assessment Team about any change within a month and the change means they haven't been charged enough they will have to pay the extra charges going back to when the change happened or a maximum of 12 months if an annual review of finances has not been carried by the Charging Assessment Team since their last financial assessment.

## 8. Carers

- 8.1 The Care Act 2014 provides councils with the power to charge for support for carers, where they have an eligible support need in their own right.
- 8.2 The support which the council can charge the carer for must not be provided directly to the adult being cared for. The council does not presently routinely charge carers but can exercise its discretionary power to only provide funding the council feels is appropriate to the "cared for" persons eligible care and support needs.
- 8.3 In some circumstances the council may not agree to fund certain support requested by a carer, in which case they would be expected to pay for this support themselves.

#### 9. Careline

9.1 Calderdale Metropolitan Borough Council, in partnership with Progress Lifelines, offer a community care alarm service which offers direct access to a Contact Centre from an individual's home. The Centre provides emergency personal assistance 24 hours a day in a person's own home, 365 days a year.

- 9.2 There is a weekly charge for the Community Care Alarm Service and invoices will be sent annually. However, if the person has a careline installed midyear the invoice would start from that date up to April of the following year.
- 9.3 If the person is in receipt of any of the following, they will have to pay for their community care alarm:
  - Have over £23,250 in capital
  - Attendance Allowance, Disability Living Allowance (DLA) or Personal Independence Allowance (PIP) (High rate)
  - If they are pension age with total income of more than £194.00 per week
  - If they are working age with total income of more than £156.45 per week
- 9.4 It may be that the person is entitled to this service free of charge. The criteria for possible exemption are listed below:
  - They are in receipt of Universal Credit (and if they are in work and earning less than £7,400 net earned income)
  - They in are receipt of Pension Credit Guaranteed
  - They are in receipt of Employment and Support Allowance
  - They are in receipt of Job Seekers Allowance
  - They are in receipt of Income Support
  - They are in receipt of DLA or PIP (Low rate only)
  - They are a Section 117 client or CJD sufferer
  - They have under £23,250 in capital

## 10. In house day services

10.1 When an individual is assessed to attend day services, this includes a hot meal at lunchtime and transport if required. The charge is incorporated into what the individual pays to attend the day centre.

## 11. Recovery of debt

- 11.1 The Care Act 2014 consolidates the Council's powers to recover money owed for arranging care and support for people. These powers can be exercised where someone refuses to pay the amount they have been assessed as being able to pay.
- 11.2 The powers granted to the Council for the recovery of debt also extends to the person or their representative, where they have misrepresented or have failed to disclose (whether fraudulently or otherwise), information relevant to the financial assessment of what they can afford to pay.
- 11.3 Calderdale Metropolitan Borough Council will approach the recovery of debt in line with its Debt Recovery Policy which sets out the approach to debt recovery for Adult Social Care.

## 12. Review and appeals process

12.1 If an individual believes the result of their financial assessment is incorrect, due to inaccurate information being used, or if they wish to claim additional expenses, they can ask for a review of their assessed weekly charge by contacting the Charging Assessment Team below who will look at the calculation again and let them know the outcome.

Charging Assessment Team
Calderdale Council Adult Services and Wellbeing
PO Box 51
Halifax
HX1 1TP
charging.assessmentteam@calderdale.gov.uk

- 12.2 If the individual still disagrees, they can appeal the decision by email or in writing. The appeal will be acknowledged within ten working days. As soon as the appeal has been investigated, they will receive a response in writing.
- 12.3 If the individual is still not satisfied, they can make a complaint. The complaint can be made online, by email or by letter. They can do this themselves or they can ask someone to do it for them. Individuals should contact the complaints team below directly if they need help to do this

FREEPOST RTGL-EXHR-SRLH
Complaints and Compliments Team
Town Hall
Crossley Street
Halifax
HX1 1ZS

complaintsandcompliments@calderdale.gov.uk

01422 288001

www.calderdale.gov.uk/v2/council/consultation-and-feedback compliments-and-complaints

12.4 If the individual is still not satisfied with the outcome of the complaint, the complaints team will provide them with contact details of the Health and Social Care Ombudsman.

# Appendix 1



# Disability Related Expenditure . . . . . if you are living at home

"Is your life more expensive because of a disability or medical condition?"

## What is Disability Related Expenditure (DRE)?

DRE are the extra costs you may have to pay because of your disability or medical condition. These expenses will be considered in your financial assessment for social care and support. You will need to provide proof of payment.

DRE will only be considered if you are living at home and the spend is:

- necessary to meet any needs which are not being met by Calderdale Council
- not something you would pay for if you did not have a disability or medical condition
- not a health need that should be provided by a government agency like the NHS
- not covered by a grant or donation

## What might be considered as DRE?

Things that you have to spend money on each week, month or year because of your disability or medical condition.

Below is a list of some items we consider as DRE. We recognise that everyone's situation is different, and you may have other expenses you want to tell us about.

DRE	Description
Bedding	If you need to use special bedding, such as specialist continence sheets, or if you frequently have to replace bedding due to continence or wear and tear issues, we will take into account your additional costs.
Care Alarm System	If you pay for things like personal alarms and telecare so that you can contact someone in an emergency.
Clothing and footwear	If you have to buy clothing and/or footwear more often because of your disability or medical condition, we will consider this expense. This might be due to excessive wear and tear, continence issues, or the cost of alterations.
Disability related equipment	We will consider costs for such items including purchase, maintenance, and insurance costs if they cannot be supplied free of charge by Calderdale Council or the NHS.
Domestic help/cleaning or basic garden maintenance	If you pay someone privately to do your housework/cleaning or basic garden maintenance, because you and other people in your household are unable to do these tasks, we will take the reasonable costs into account.

Higher than average fuel and metered water costs	If your fuel bills are higher, because of your disability or medical condition, we will compare what you are paying with average costs for your house type and number of occupants.
Laundry	If you have additional laundry to do every week, because of managing your continence needs or risk of infection.
Special dietary needs	If you have a condition that means you have to eat or drink special foods, we will consider the additional cost over the average food price.

## How is DRE included as part of my financial assessment?

You need to tell us about your DRE by completing the DRE application form, which your social care assessor will give you.

# How do we calculate DRE in your financial assessment?

Regular and one-off expenses are calculated differently.

- Fuel costs and metered water charges are compared to the average usage for the type of property and household size that you have. An allowance for above average costs is considered
- Basic gardening costs are considered March to October (34 weeks) and are calculated on an average weekly cost
- Regular expenses are calculated as an average weekly cost
- One-off expenses, usually for equipment, are calculated over an approximate equipment life span, such as 1 year, 5 years or 10 years

## Are all DRE costs allowed in the financial assessment?

Not all costs will be considered as DRE, the table below gives some guidance.

Service / Item	Allowance		
Care and support services purchased privately in addition to those agreed in your care and support needs assessment	Unless there are special circumstances why you have to pay for them privately in addition to the care and support you receive from Calderdale Council		
Cash payments	Unless you provide proof of payment for it to be considered as DRE		
Chiropody	Not usually allowed unless there are special circumstances, as this should be provided by the NHS.		
Daily living costs	Standard costs should be paid from your Minimum Income Guarantee. For example, food, clothing, utility bills,		

	entertainment/ recreational costs/hobbies and other costs not linked to your disability or medical condition
	The Department of Health and Social Care sets a 'Minimum Income Guarantee' for daily living costs dependent on individual circumstances.
Expensive items	If you buy more expensive items/services instead of a cheaper alternative, we will usually only allow the basic cost as DRE
Holidays	The standard cost of holidays is not covered by DRE but additional costs, because of your disability or illness, may be.

# **Appendix 2**

Name:

Address:



Date of Birth:

## **Disability Related Expenditure Form**

If you live at home and receive care and support services, please use this form to tell us about any expenses arising from your disability or medical condition.

Do not fill this form in if you live, or will be going to live, in a care home.

Postcode:			
	Please provide proof of payment for all expenditure cla		
	For on-going costs that you must pay, please provide proof of expenditure.	a <u>minimum of 3</u>	<u>montns'</u>
•	If you need help to complete this form, please speak to	o your social car	e assessor.
Type of exp	penditure	Amount you have paid in the last year	Evidence that we need
	need to buy clothing more frequently or have ns made?	£	Receipts
•	hich items of clothing do you need to replace (and hove bility or medical condition? Please can you explain why	,	aitereu, pecause
Type of exp	penditure	Amount you have paid in the last year	Evidence that we need
	frequently need to buy footwear or have ns made?	£	Receipts
Per year - he	ow many pairs of shoes do you need to replace, or hav	ve altered, becau	use of your

disability or medical condition? Please can you explain why this is?

Type of expenditure	Amount you have paid in the last year	Evidence that we need
B. Do you need to buy specialist bedding or frequently replace bedding?	£	Receipts
Per year - please can you tell us what specialist bedding you not replace it because of your disability or medical condition?	eed to buy, and how	v often you nee
Type of expenditure	Total amount	Evidence
Do you have high fuel costs because of your disability or medical condition?	paid each year £	requirement Annual Bill
4. Do you have high fuel costs because of your disability or medical condition? Please can you provide a copy of your gas/electric/metered wa	paid each year £ ter bill showing wha	requirement Annual Bill
I. Do you have high fuel costs because of your disability or medical condition?  Please can you provide a copy of your gas/electric/metered wabilled over the last 12 months or provide a forecast for the next	paid each year £ ter bill showing wha 12 months?  Total amount	requirement Annual Bill t you have bee
I. Do you have high fuel costs because of your disability or medical condition?  Please can you provide a copy of your gas/electric/metered wabilled over the last 12 months or provide a forecast for the next	paid each year £ ter bill showing wha 12 months?	requirement Annual Bill It you have bee
Please can you provide a copy of your gas/electric/metered was billed over the last 12 months or provide a forecast for the next.  Type of expenditure  5. Do you pay for a Care Alarm System because of your	paid each year £ ter bill showing wha 12 months?  Total amount paid each week	requirement Annual Bill t you have bee  Evidence requirement Invoice/
4. Do you have high fuel costs because of your disability or medical condition?  Please can you provide a copy of your gas/electric/metered was oilled over the last 12 months or provide a forecast for the next.  Type of expenditure  5. Do you pay for a Care Alarm System because of your disability or medical condition?	paid each year £ ter bill showing wha 12 months?  Total amount paid each week	requirement Annual Bill t you have bee  Evidence requirement Invoice/

6. Do you need to pay for domestic help/cleani	ng?	£		Invoice/ receipts
If you need extra help around the house because of	of your disabi	ility or me	dical condi	
you say what this and how often?				
		Total ar	nount	Evidence
Type of expenditure		paid ea		requirement
7. Do you need to pay for garden maintenance	?	£		Invoice/ receipts
If you need a gardener because of your disability o			ease can y	l
is, as well as how much you spend on gardening a	nd how often	າ?		
8. Do you have to buy disability related equipment of the second			P 1	
If you have had to buy any equipment because the item(s) below showing, how much each cos replacing.				
Please provide proof of purchase(s).				
Item	Cost		How often	n is it replaced?
	£			<u> </u>
	£			
	0			
	£			
9. Do you have to insure disability related equi	pment?			
If you have to insure any specialist equipment beca	ause of vour	disability	or medical	condition.
please can you say how much it costs and how often				
Please provide a copy of the policy agreement	showing the	e cost an	d period o	f cover.
Itom	Coot		How offers	v io the
Item	Cost		How often insurance	n is the renewed?
	£			
	£			

			these costs	s?
	£			
	£			
	£			
11.Do you need to wash your clothing/bedding or medical condition?	more 1	requently b	ecause of you	ur disability
How many loads of washing do you need to do for week?	yourse	lf every	Loads per week:	
Do you have any other costs in your daily living medical condition?	g that	are caused I	oy your disab	ility or
Type of expenditure		Amount paid	How often paid?	Invoice/ Receipt
12.		£		
Please tell us what it is and why you need to buy it	t			
13.		£		
Please tell us what it is and why you need to buy it	t			
		0		
14.	1	£		
Please tell us what it is and why you need to buy it	Į			

If you have to maintain any specialist equipment because of your disability or medical condition,

Cost

10. Do you have to maintain disability related equipment?

Please provide proof of payment.

Item

please can you say how much it costs and how often you need to pay this?

How often do you have

Please write on a separate sheet if you need more space, and if you can provide the question number next to your response that would be most helpful to us. Please return the completed form to:

Email: <a href="mailto:charging.assessmentteam@calderdale.gov.uk">charging.assessmentteam@calderdale.gov.uk</a>

Post: Charging Assessment Team

Calderdale Council

Adult Services & Wellbeing

PO Box 51

Halifax HX1 1TP

# **Appendix 3**

# Disability Related Expenditure 2023-2024

#### Fuel

- based on RPI Fuel index at November 2021. At this date fuel prices had increased by 92% in the last 12 months.
- The figures are obtained from <u>Consumer price inflation tables Office for National Statistics</u> from the download "consumer price inflation detailed reference tables".
   The figures are found in Table 41 detailed reference tables % change over 12 months.
- 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 10.7 % uplift has been applied based on the November 2022 CPI rate.

## **Community Alarm**

Calder Care Line will remain the same for 2023/24 as it was for 2022/23.

 Allowable if declared - £4.51 per week. To use 'Community Alarm' as the description.

#### Private Alarm

- To allow the actual cost of the alarm (converting the charge to a weekly amount)
- Proof of expense required, such as contract, bill or receipts

## **Privately arranged Care (Not Personal Care)**

Cleaning, Shopping, Odd Jobs, Ironing, Washing up, etc.

- To allow up to £21.61 per hour for a maximum of 3 hours per week. (LA spot urban rate)
- Any expenses exceeding this to be referred to the Team Leader or Team Manager

## **Decorating**

- · Generally not allowable
- If there are exceptional circumstances to refer to Team Leader or Team Manager if agreed to allow, we can only allow labour costs not materials.

## Laundry

2023	2022
(10.7% increase)	(5.1% increase)

Laundry cost	£4.56	£4.12

If there is excessive use (which should be on the Care Plan) check with Team Leader or Team Manager to see if allowable.

## **Special Dietary Requirements**

- Average weekly expenditure (from the Family Expenditure Survey) and to allow extra expense due to special foods.
- Vitamins (related to a disability need not to allow general vitamin supplements)
- To allow the actual cost of vitamins & supplements as long as not considered excessive and relevant to the needs of the individual.

# Clothing/ Footwear

- Including specialised clothing or footwear, frequent replacement of clothing due to extra wear and tear, replacement due to weight loss/ gain etc. (link to Family Expenditure Survey)
- Evidence receipts where possible.
- NB War Disablement sometimes has an allowance for clothing. If this is the case then do not allow extra expense.

## **Bedding**

Such as wear and tear, frequent replacement due to medical conditions etc

- Sheets/ quilt/ pillow case, to allow up to £27.00 for set over 1 year
- Mattress, to allow actual cost over 5 years
- Evidence receipts where possible.

## **Heating Allowances**

Annual inflationary update based on RPI Fuel index increase of 92% at November 2022

Standard Rate	2023	2023/24		2/23
	Annual	Weekly	Annual	Weekly
Single Person – Flat/ Terrace	£2,761.73	£53.11	£1,438.41	£27.66
Couple - Flat/ Terrace	£3,643.68	£70.07	£1,897.75	£36.50
Single Person – Semi Detached	£2,933.32	£56.41	£1,527.77	£29.38
Couples - Semi Detached	£3,872.45	£74.47	£2,016.90	£38.79
Single - Detached	£3,568.76	£68.63	£1,858.73	£35.74
Couples - Detached	£4,704.40	£90.47	£2,450.21	£47.12

Accommodation type	1 Occupant	2 Occupants	Each additional adult occupant
Flat or Terraced house	£2,761.73	£3,643.68	£881.95
Semi-detached house	£2,933.32	£3,872.45	£939.13
Detached house	£3,568.76	£4,704.40	£1,135.64

To allow any excess heating expense if above the costing in the table above.

## Evidence – latest bills

## **Metered Water Charges (Annual Rates)**

If Water is charged through normal mains supply:

not allowable

If Water is charged via a meter:

to allow excess over the Average Usage

Average usage:

# 2023/24 Rates

	Number in house	1	2	3	4	5
Consumer Usage	Average	£310	£450	£589	£728	£797
2023/24	Rates published by Yorkshire Water	£240-£380	£380-£519	£519-£658	£658-£797	£727-£866

Yorkshire Water - Could I save with a water meter?

## 2022/23 Rates

	Number in house	1	2	3	4	5
Consumer Usage	Average £'s	286	417	547	677	743
2022/23	Rates published by Yorkshire Water (£'s)	221 - 351	351 - 482	482 - 612	612 - 742	677 - 808

## **Basic Gardening Costs**

Generally, gardening expenses are incurred between March and October (34 weeks). The allowance is based on individual costs, within reason. Only allow 'basic gardening' costs, i.e. general maintenance costs.

Evidence - bill or receipts

**Disability Related Equipment** (increased by 10.7% as per NAFAO model based on November 2020 CPI rate)

• Evidence of purchase required.

Disability Item		2023/24 (per week)	2022/23 (per week)
Wheelchair – manual	Evidence of purchase. No allowance if equipment provided free. Actual rate to allow -	£4.75	£4.29
Wheelchair – powered	Evidence of purchase. No allowance if equipment provided free. Actual rate to allow -	£11.55	£10.43
Powered Bed	Actual cost divided by 500 (10 yr life) up to a maximum of -	£5.25	£4.74
Turning bed	Actual cost divided by 500 (10 yr life) up to a maximum of -	£9.19	£8.30
Powered reclining chair	Actual cost divided by 500 (10 yr life) up to a maximum of -	£4.16	£3.76
Stair-lift	Actual cost divided by 500 (10 yr life) up to a maximum of -	£7.42	£6.70
Hoist	Actual cost divided by 500 (10 yr life) up to a maximum of -	£3.64	£3.29

## **Powered Scooters**

#### Calculation

- Scooter price based over 5 years Please check receipt. If bought more than 5
  years ago CMBC will not allow any expenses for the purchase.
- Maintenance costs (servicing agreement), actual cost over 12-month period

## **Transport costs**

If the client receives DLA (Mobility), only allow costs over and above the amount of DLA (Mob) are allowed.

- Bus Fares not allowable for the client
- Taxi Fares will only be allowed if reasonable, but to bear in mind the number of journeys taken and consider if this is reasonable
- Petrol/ Bus Fares/ Taxi Fares of relatives to be allowed only if they are being incurred
  to enable the relative to <u>provide care</u> or do tasks for the client. Petrol costs given to
  family who live away, for example, to enable the relative to come and "visit" the client,
  would not be allowable, whereas petrol costs given to relatives to enable the relative
  to take the client out would be allowable if the costs seem reasonable.

## **Holidays**

	2023 (10.7% increase)	2022 (5.1% increase)
Maximum Holiday Allowance	£892	£806

To calculate what the normal holiday cost would be and then look at the extra being paid due to illness/ disability. Treat the extra expense as DRE. If the client spends more than this, they will have to pay the rest from their normal income – this includes the cost of a

carer and the cost to the client. Costs of "family" are not allowable under any circumstances – "family" for holiday purposes is defined as Parents, Children or siblings.

#### **Personal Assistance Costs & Personal Care Costs**

To allow costs, providing they are required – refer to care plan. Evidence of expense should be provided where possible. Includes any household or other necessary costs if a personal assistant is needed. It can include:

- Private Operations
- Paying for meals for carers up to a limit of £5 per week
- Transport costs for carers fuel cost/ mileage
- Bathing/ Washing Services where privately arranged and required
- Chiropody Costs only allowable under special circumstances (ie it would be detrimental to mobility if regular chiropody not received)

#### Communications & Entertainment

#### Flat rate allowance:

	<b>2023/24</b> (10.7% increase)	<b>2022/23</b> (5.1% increase)
Communications & Entertainment	£6.17	£5.57

Use the set rate unless exceptional circumstances – see Team leader

## **Prescription & Medical Charges**

 Cost of annual season ticket divided by 52 weeks or actual cost of prescription whichever is less.

Also, allow:

• Supplements & Creams if required – to check with care plan or Social Worker.

## **Housing Maintenance**

	<b>2023/24</b> (10.7% increase)	<b>2022/23</b> (5.1% increase)
Housing Maintenance – Single	£14.28	£12.90
Housing Maintenance - Couple	£7.14	£6.45

#### Other DRE

To consider allowing other identified DRE that doesn't fit into a category above. Provided you feel it's a reasonable expense, to check with Group Leader or Team Manager before allowing.