

Adult Care Charging Policy

Policy reference number	
Version	Version 2.9
Issue date	9 January 2017
Review date	January 2018
Staff Affected	
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Approved by	

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1. Contents

2.	Introduction	3
3.	Policy Statement	3
4.	The Legal and regulatory Context Basis for Charging	4
5.	Chargeable and Non Chargeable Services	5
6.	Means Tested Financial Assessment.....	6
7.	Light Touch Financial Assessments	7
8.	Online Financial Assessment and online review process.....	8
9.	Self-Funders - (full cost charging)	8
10.	Support Services in the Community.....	9
11.	Carephone Home Safety Service.....	10
12.	Shared Lives	11
13.	Residential/Nursing Care	11
14.	Administration fees.....	12
15.	Property and Deferred Payment Agreements (DPA).....	13
16.	Treatment of “Top Ups” in Residential Care.....	13
17.	Deprivation of Assets and or Income.....	14
18.	Charging for short term or temporary residence (respite care).....	14
19.	Charging for Support to Carers	15
20.	Charges for services not received and refunds.....	15
21.	Collection Debt Recovery.....	16
22.	Increases to rates	16
23.	Direct Payments.....	17
24.	Review and Appeals Process.....	17
25.	Related Documents.....	18

2. Introduction

- 2.1. If you are eligible for support from the Council to meet your social care needs you will be given a Personal Budget to arrange your support. You can take your Personal Budget as a Direct Payment i.e. money payable into an account or have your support arranged on your behalf by the Council or take your Personal Budget as a mix of both (money and arranged support).
- 2.2. However support from Adult Social Care (unlike most health care) is not free. This policy explains how the Council will charge adults for care and support in order to sustain the delivery of care services such as home care to some of the most vulnerable members of society.
- 2.3. This policy covers care and support in community settings and in a residential home setting which includes nursing. Community based support includes services such as homecare, Shared Lives, day services and activities, short breaks, respite care and assistive technology

3. Policy Statement

- 3.1. This policy responds to the requirements of the Care Act 2014 and all regulations issued under the Care Act 2014, which provide a single legal framework for charging for care and support.
- 3.2. This charging policy applies to all adult social care services and support provided by the Council.
- 3.3. The policy applies from **1 February 2017** and supersedes all previous adult social care charging policies and practice before this date and for the purpose of this policy; an adult is a person aged 18 and above who is eligible for a Personal Budget from the Council.
- 3.4. In determining a charging policy that complies with the Care Act 2014 the Council must also have due regard to the Care and Support Statutory Guidance and Annexes issued under the Care Act 2014.
- 3.5. The policy provides details about:
 - I. The legal and regulatory context for charging
 - II. The key aim of the policy is to ensure that where an adult is charged for care and support (including making a contribution to a personal budget), that they are not charged more than is reasonably practicable for them to afford and pay.
 - III. To be as clear, transparent and comprehensive as possible so people know what they need to pay towards the costs of their care and support and understand (with support if necessary) any charges or contributions they are asked to make;
 - IV. How different types of services and support are charged and how these may be paid for or recovered.
 - V. To promote cost effective collection methods i.e. Direct Debit, recurring card payments

- VI. Prepayment cards for direct payment of services
- VII. The financial assessment process, including the review and appeals process;
- VIII. To apply charging rules so those with similar needs or services are treated the same way and minimise anomalies between different care settings and payment options.
- IX. For the administration of the charging policy to be cost effective and sustainable for the Council so that it can continue to provide services for those needing care and support in the future.
- X. To promote wellbeing, social inclusion, and support the vision on personalisation, independence, choice and control.
- XI. To encourage and enable those who wish to stay in or take up paid employment to do so;
- XII. To support carers to look after their own health and wellbeing effectively and safely, and recognising their valuable contribution to society;
- XIII. To be person-focussed, reflecting the variety of care journeys and the variety of options available to meet people's needs.

4. The Legal and regulatory Context Basis for Charging

- 4.1. Sections 14 and 17 of the Care Act 2014 (as amended) (“the Act”) provide a single legal framework for charging for adult social care and support.
- 4.2. Section 14 of the Act provides a local authority with the power to charge for meeting needs under sections 18 to 20 of the Act.
- 4.3. Section 17 of the Act creates a duty for a local authority to carry out a financial assessment which would arise where the local authority thinks that if it were to meet an adult's needs for care and support, or a carer's needs for support, it would charge the adult or carer under section 14(1) of the Act.
- 4.4. The Care and Support *Charging and Assessment of Resources Regulations 2014* describe the limitations on local authority powers to make a charge for meeting needs under section 14 of the Act; and provide details about the requirements for carrying out financial assessments for the purposes of section 17 of the Act.
- 4.5. Section 2(1) of the Act requires a local authority to provide or arrange for the provision of services, facilities or resources (or take other steps) which it considers will contribute towards preventing, delaying or reducing the needs for care and support of adults or for support in relation to carers.
- 4.6. The Care and Support *Preventing Needs for Care and Support Regulations 2014* describe the rules permitting and prohibiting a local authority for making a charge for the provision of services, facilities and resources under section 2 of the Act.

- 4.7. The 'Care and Support Statutory Guidance' (CSSG), issued by the Department of Health in October 2014 and updated in March 2016 sets out how a local authority should go about performing its care and support responsibilities. This includes details about interpreting and applying the rules relating to charging and financial assessments as defined in both the Act and regulations.
- 4.8. This policy has been written in accordance with the CSSG and related primary and secondary legislation.
- 4.9. The policy will need to be revised from time to time to take into account either (i) any provisions of the Care Act 2014 that are brought into force (e.g. Cap on Costs) or new statutory instruments (e.g. the proposed increase in the capital threshold or any amending or repealing legislation).

5. Chargeable and Non Chargeable Services

- 5.1. A schedule of Kirklees adult social care fees and charges is published annually, which is approved by either Cabinet, or Council or the Director of Resources.
- 5.2. The Council operates five charging categories:-
- I. Exempt services or care and support provided free of charge
 - II. Mean tested charging and full cost service following a financial assessment
 - III. Flat rate charges, i.e. Carephones
 - IV. Full cost charge for customers who do not wish to disclose their finances
 - V. Pass on reasonable costs involved in miscellaneous services, for example providing pet care.
- 5.3. **Exempt Services** - The Council is not allowed to charge for some types of care and support. The list below sets out what these currently are:
- 5.4. Community equipment (aids and minor adaptations): this is where a person is supplied with equipment or a minor adaptation to their property, in order to support daily living so a person can stay in their home.
- i. An adaptation is minor if the cost of making the adaptation is £1,000 or less;
- 5.5. Reablement service can be provided to support service users to become as independent as possible in their homes; this can be from 1 day up to a maximum period of six weeks. This could be after a stay in hospital, an illness or to prevent a hospital admission. For support services following the Reablement service, charges will be applied based on a financial assessment.
- 5.6. Services provided to people suffering from Creutzfeldt Jakob Disease
- 5.7. 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;

5.8. Services which local authorities have a duty to provide through other legislation, including any specific services provided as After Care Services under Section 117 of the Mental Health Act 1983. There will be occasions when chargeable services are also provided to service users who are subject to Section 117 of the Mental Health Act 1983. This is usually when a service is in place that is not specifically related to their Section 117 status. If this is the case the service user will be advised of this in writing and a financial assessment will need to be undertaken in relation to such services.

6. Means Tested Financial Assessment

6.1. A financial assessment will be carried out for all care and support provided; or arranged by Kirklees Council

6.2. The purpose of the financial assessment is to assess if a person can afford to pay towards the cost of their care or support service(s); it is means tested.

6.3. The financial assessment (means test) will look at a person's financial situation to work out how much they will need to contribute to the cost of their support. It will take into account property, savings, pensions, stocks and shares.

6.4. The financial assessment will calculate how much, if anything, a person can afford to pay towards the cost of their care (or contribute towards their personal budget) on a weekly basis. This amount is referred to as the "maximum weekly assessed charge".

6.5. Charges for support will be payable from the date services or packages start; **not** the date the financial assessment is completed.

6.6. The Council will not charge more than the cost incurred in providing or arranging any care and support which is subject to means tested charging.

6.7. In the event of the person's death before a financial assessment has been completed and the person has been in receipt of services, the Council will seek full recovery of costs from the deceased's estate.

6.8. The technical rules for the financial assessment differ between care and support provided in a residential care setting ('care home') and care and support provided in all other settings ('non-residential'). Assessment will be carried out in accordance with Chapter 8 and Annexes B and C of the [Care and Support Statutory Guidance](#)

6.9. All documentary evidence requested by the Council to complete the financial assessment **must** be provided. The Council will only ask for documentary evidence that is necessary to complete the financial assessment accurately and comprehensively. **Where evidence is requested but not provided the Council may pass on the full cost of the service(s), an assessment may also be based on notional income.**

- 6.10. The Council will publish a list of the different types of care and support services subject to means tested charging on the annual schedule of adult social care fees and charges.
- 6.11. Communications are sent to clients informing them of the new approved fees and charges and how it affects their assessed weekly contribution. This communication gives details on how charges have changed as a result of inflationary increases, changes to services and/or how changes in benefit rules and amounts issued by the Department of Work and Pensions (DWP) affect their assessed weekly contribution.
- 6.12. Financial assessments will be completed for people as individuals and not as couples. Where capital is held and income is received on a joint basis, then it will be assumed that each party is entitled to 50% of that capital/income. The same is assumed for assets such as second properties.
- 6.13. The Council will review on a case by case basis where an individual states they can demonstrate their share is more or less of the asset and amend the assessment appropriately
- The financial assessment will make sure a person (or both people, in the case of a couple) has money left after charges are applied for themselves in line with statutory amounts, these are known as 'Personal Expenditure Allowance' (PEA) for care in a care home and 'Minimum Income Guarantee' (MIG) for care at home. These amounts are set and reviewed annually by the [Department of Health Social Care Charging for Care and Support](#)
- 6.14. The financial assessment process will normally include a welfare benefits check to ensure the person is claiming all the benefits they are entitlement to claim; or customers may be signposted to "BetterOff" Kirklees.
- 6.15. The amount a person pays towards their care will be reviewed on an annual basis. This will be in line with the increase in state pensions/benefits at the beginning of April each year, or as soon as practicable. An assessment may also be based on notional income.
- 6.16. Reviews for older cases will be dealt with as new cases under the Care Act, this will mean that charges may change in some cases as income will be individual rather than couple based.
- 6.17. A review may be requested by the client at any time where their circumstances have changed, or for people who are self-funding, if their total savings/capital has fallen to, or below the upper capital threshold.

7. Light Touch Financial Assessments

- 7.1. 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."

7.2. The light touch financial assessment will apply:

- I. If a person does not wish, or refuses, to disclose their financial information.
- II. 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.
- III. 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.
- IV. Where a person is in receipt of benefits which show they would not be able to pay towards their care and support costs.

7.3. In circumstances where the person has refused a financial assessment but is eligible for support the Council will assume the person can meet the full cost of the support needed and will charge accordingly. The Council will inform the person to help them to understand that they will have to pay the full cost of any support service and what that cost will be; the Council will remind them of their right to request a full financial assessment.

7.4. In circumstances where the person states they have sufficient financial resources to meet the cost of their support, the Council will advise the person to take independent financial advice regarding their options for meeting the cost of their care and support. The Council may offer support to enable the person to identify what support they need and how to arrange support services.

7.5. 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.

8. Online Financial Assessment and online review process

8.1. The Council is currently working towards using an electronic form accessible from our website to enable anyone to process their own financial assessment.

8.2. This platform will be the same as that used by the teams to make the calculation and will enable customers to enter their relevant financial information to find out the maximum they will be expected to pay for social care.

8.3. The Council will assist service users and their families to make informed decisions about arranging social care services at an early point and provide a transparent process regarding paying for services.

8.4. Service users will be informed when the new arrangements are in place

9. Self-Funders - (full cost charging)

9.1. 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

9.2. The Council will treat a person as being a “Self-funder - full cost” financial assessment where they:

- I. Have savings and other financial resources above the national upper limit, currently £23,250, it is likely they will need to pay for the full cost of support. The Council calls this “self-funding”.
- II. choose not to disclose their financial information to enable a full financial assessment;
- III. fail to co-operate and/or do not provide a completed financial assessment form within 28 days (14 days for Carephones) of agreeing a support plan or the commencement of chargeable services (whichever is sooner);
- IV. sign a declaration that they are happy to pay the full cost of services received;
- V. Receive a full financial assessment that deems they are assessed to contribute the full cost for their care and support.

9.3. Where a person is self-funding their support they are still entitled to ask that the Council help them arrange their services. Currently the Council do not charge service users for arranging a care package. 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. The proposal is to implement a charge (including a setup cost and/or a regular administration charge) to reduce the cost to the Council to arrange these optional services.

9.4. Self-funders who own their own home may want to consider arranging a Deferred Payment Agreement in order to put towards the cost of their care. For more information on Deferred Payment Agreements, see section 15 below.

10. Support Services in the Community

10.1. 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.

10.2. All non-residential community based support services fall within the scope of this policy and include:

- I. Personal Care Support delivered to the person in their home
- II. Sitting Services
- III. Day Services and activities, both building based and in the community
- IV. Respite breaks that are not in a residential care home
- V. Daily living support such as shopping, laundry, cleaning delivered to the person living at home

- VI. Joint funded services – service users 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.
- 10.3. Services not included within charging for care services in the community.
 - I. Meals in Day Centres
 - II. Cost of their transport to Day Centres
- 10.4. A charge will be made for meals and transport on a 'Pay as you use' basis as meals and transport are not included in the unit cost of a day centre session unless otherwise stated. This ensures people only pay for the activity and support provided at the centre.
- 10.5. Should the person receive more than one service per week, charges will be calculated up to the disposable income threshold. Where possible charges for services will be listed on the same invoice for customer ease and efficiency.

11. Carephone Home Safety Service

- 11.1. The Council provides a home safety service through the provision of a personal alarm system linked to a carephone. The personal alarm can be worn as a pendant or clip on. The basic carephone can be enhanced to meet a range of potential risks to the person within the home such as escaping gas, flooding caused by taps being left on, falls. There are no charges for the provision, installation and maintenance of the equipment. Charges for this service are purely for the monitoring support. Calls are monitored and responded to by a team of officers who in turn can alert carers, the Mobile Response Team or the ambulance service. They make regular calls to users to ensure the carephone is working and to check that the person is safe and well.
- 11.2. Carephone charges will normally be recovered by regular direct debit; this information should be collected from the customer at the earliest opportunity i.e. first point of contact.
- 11.3. Individuals can apply for the service without the necessity of meeting the national eligibility criteria and having an assessment but they are offered a financial assessment.
- 11.4. For those who receive the service following an assessment and as part of their support plan a full financial assessment is undertaken unless the person chooses not to have a financial assessment.
- 11.5. There are two levels of charges depending on the type of package a person receives; this reflects the additional monitoring required for multiple applications.
- 11.6. The Council currently invoice for Carephone services on a quarterly basis whether or not on a Direct Debit. The period for invoicing will be reviewed in 2016-17 and may result in less frequent invoices. i.e. moved to yearly and payment by direct debit will be promoted.

12. Shared Lives

- 12.1. This is a scheme (similar to Fostering) whereby adults with support needs are able to live with a family who provide board, lodgings and support. The Shared Lives person is responsible for making payments in respect of board and lodgings directly to the accommodation provider. They may be able to get some help with the lodgings element through the Housing Benefit system but will need to make payments in respect of food and utilities from their income.
- 12.2. The Shared Lives person will be financially assessed for the cost of the placement. If the person uses other support services such as day care, home care or respite then there will be no additional charge for this. However in all instances the person will only pay the maximum they are financially assessed as able to contribute, even if they receive more than one service.

13. Residential/Nursing Care

- 13.1. Where the Council carries out a financial assessment for care and support provided in a care home, information and advice will be provided to enable the person to identify options of how best to pay a charge. This may include offering the person a deferred payment agreement. The Council operates a deferred payments policy where further details can be found in the attached appendix, see also section 15 below.
- 13.2. As with support delivered within the community the Council will charge for support provided in a residential/nursing home. The financial assessment will take account of the person's property, income and savings. In these circumstances as the residential home will become their main place of residence providing board and lodgings in addition to care and support.
- 13.3. If a person receives community support services in addition to their placement at a residential home such as attending a day service with another provider the person will be financially assessed for charges towards the cost of the placement but will only pay the overall maximum they are able to afford.
- 13.4. The Council can only pay towards the cost of residential/nursing care once a person has been assessed as having needs that mean moving into residential/nursing care is the best option for them. If the person needs nursing care as part of their support within a residential home this will be delivered and/or paid for by the NHS and is excluded from the Council's charges.
- 13.5. If a person arranges to move into a residential home without having an assessment by the Council, and later asks for financial help with charges, the Council will determine whether the person meets the national eligibility for social care support. If the person does meet the criteria it will carry out assessments, both financial and personal, to establish if financial support can be provided. If financially eligible for financial support in residential care, the Council will contribute towards the cost of care from the date of the referral to the Council and not from the date the person moved themselves into the residential home.

- 13.6. For people who have funded their own care and support within a residential home and their financial resources have reached the financial threshold for support, the Council will consider payments from the date a referral is made to the Council subject to a financial assessment
- 13.7. The Council will not backdate contributions to a person's care costs to the date they entered the residential home or the date their capital dropped below the capital threshold.
- 13.8. If a person cannot afford their chosen residential home and do not qualify for help from the Council, or for a deferred payment agreement then the person will need to seek alternative arrangements such as moving to a residential home that is affordable.
- 13.9. If customers are paying for their own care, the Council strongly advises seeking independent financial advice to ensure that customers will be able to afford the care they choose for the foreseeable future.

14. Administration fees

- 14.1. The Council will charge administration fees for work which it undertakes on behalf of people who are either funding their own care and have asked the Council to make arrangements on their behalf or when the Council is administering a person's finances.

14.2. Appointeeship

Where the Council becomes the legal appointee for managing a person's finances (as there is no other person or legal representative to do so) the Council will use its power to charge an administration fee for the set up costs and an annual fee. This will be paid for from the person's financial account. This is in line with recommendation by audit and national practice by other Councils.

14.3. Deferred Payment Agreements (DPA)

A deferred payment agreement is in essence an interest bearing secured loan that self-funding eligible persons can apply for from the council for the purposes of paying residential care costs.

The loan is secured on the self-funder's house and the council releases the loan by instalments on a periodic basis each instalment being the same sum as the residential care fees that are due and payable by the person (less any personal contribution that the council shall require to be made by the person).

The Council will charge the person for the costs of setting and running the deferred payment agreement. The adult can either pay for the administration costs separately when the costs are incurred on an "as and when basis" or the adult can ask for the costs to be added to the loan and the Council's costs along with the loan will be then recouped upon completion of the sale of the home. Interest will though be charged on the costs during the term of the deferred

payment agreement if the costs are added to the loan. Follow this link for more information:

14.4. Rate Setting

The rates for the above charges can be viewed in the schedule of Kirklees adult social care fees and charges.

15. Property and Deferred Payment Agreements (DPA), (see also the attached Appendix for the DPA Policy)

15.1. Property owned by a person is included in the financial assessment. It will not be taken into account (disregarded) when a spouse or partner continues to live there after a person moves permanently into residential care.

15.2. Where the property is to be included in the financial assessment, the Council will exclude from the assessed charge, its value for the first twelve weeks of a person's stay. This period is called the twelve week property disregard period and gives people time to seek financial advice and consider the options available to them to fund their support costs.

15.3. Providing a person and their property meet eligibility criteria, the person may be entitled to enter into a Deferred Payment Agreement with the Council. As required under the Care Act 2014 the Council can offer a Deferred Payment Agreement (DPA), which is in essence an interest bearing secured loan to enable people to pay their residential care charges without the need to sell their home. The intention of a DPA is to enable a person to get the support they need without them having to sell their home within their lifetime.

15.4. A DPA is a loan provided by the Council and is not a free service. The Council will charge set up costs, interest on the loan, an annual monitoring and administration fee, termination costs on all DPA's that are set up from and including the date this policy comes into effect. The loan monies, any interest (not paid by the person as it accrues) and any administration costs (that are not discharged on an as and when basis) that are at any time secured under the deferred payment agreement is known as the "Deferred Amount".

16. Treatment of "Top Ups" in Residential Care

16.1. In some cases, a person may choose a home that is more expensive than the residential or nursing fees the Council has set for residential or nursing care arranged on behalf of the person who is eligible for support from the Council.

16.2. Where they have chosen a setting that costs more than this, an arrangement will need to be made as to how the difference will be met. This is known as an additional cost or 'top-up' payment. If the person is part or fully funded by the Council, **the 'top up' must be paid for by a third party i.e. not the person or the Council.**

- 16.3. The Council must ensure that the third party is willing and able to meet the cost for the person's care and support. This includes ensuring the person has sufficient information and advice to understand the terms and conditions of the 'top up' agreement. Should the fees in the top up agreement change, the person will need to pay to the new fees. *The Council should advocate and encourage the third party payee to get independent financial advice.*
- 16.4. In the event the 'top up' arrangements fail the Council must either pay the top up, re-negotiate the fees with the home or make alternative arrangements for the person's care and support needs including moving the person to an alternative home that can meet the person's needs and is within the fees the Council has set.
- 16.5. All parties including the Provider will need to agree on the top-up prior to the person moving into the care home and sign the Placement Agreement. Failure to do so can lead to top-ups being imposed later by the home and the Council not having a signed Placement Agreement by all parties leaves the Service User in a vulnerable position.

17. Deprivation of Assets and or Income

- 17.1. Deprivation of income and/or assets means a person reduces or tries to hide how much capital they have in order to avoid paying towards the cost of their care. Examples of this are signing property, investments, or assets over to relatives or giving large monetary gifts.
- 17.2. The Council will decide whether to conduct an investigation to ascertain if deprivation of income or assets has occurred where there are indicators as noted above are present. Where the Council determines that someone has deliberately deprived themselves of an asset or income in order to reduce or avoid a charge for care and support, the Council will charge services as though they still owned the asset or income.
- 17.3. The Council will take legal action against the customer or the third party where appropriate to recover monies owed for charges. This is in line with national guidance.

18. Charging for short term or temporary residence (respite care)

- 18.1. Short term care, such as respite care will be charged at the standard residential care rate. During periods of respite, the financial assessment will take into account costs from the service user's home, such as household bills.
- 18.2. As with all social care costs, the charges will be based on the amount a person has been assessed as being able to pay. If a person refused or opted out of a financial assessment they will need to pay the full cost of their stay.
- 18.3. Charges for respite care will be based on a full financial assessment, (*this replaces the £20 per night fees for the first 7 nights of a stay*).

19. Charging for Support to Carers

- 19.1. Where a carer has eligible support needs of their own that are not met through support arrangements for the cared for person, the Council is required to undertake a financial assessment in order to provide a Personal Budget to the Carer. Under the Care Act the Council has the power to charge carers for support provided via a Personal Budget direct to the carer.
- 19.2. Informal or family carers are an invaluable source of support for many people. Through their support carers indirectly save the Council significant money as without their care and support the Council would need to provide the support at a cost.

The Council therefore will not charge carers in 2016/2017 but may need to consider introducing charges in future years. This policy will be amended to reflect any necessary changes to charging for support to carers.

20. Charges for services not received and refunds

- 20.1. A key principle of the Council's charging policy is that having carried out its duties to ensure charges for support are affordable and fair that payment should be made accordingly.
- 20.2. The Council also has a duty to ensure that consistent, high quality services are maintained and in order to do this, we operate certain guarantees to providers so they can effectively maintain the service for all. This may mean that people are charged for services they did not receive, even if the absence is planned or unavoidable (such as a medical appointment).
- 20.3. If the Council incurs costs where planned services were not used or, in the case of Home Care, not cancelled in advance, these costs will be deemed to be services delivered in accordance with the person's support plan, and therefore subject to normal charging rules.
- 20.4. Adjustments to charges will only be considered when the following conditions are met:
- I. A person pays the full cost of their care, as per their financial assessment. Anyone who receives financial assistance from the Council is deemed to receive a service above and beyond their contribution and will be required to contribute the full amount as per their financial assessment.
 - II. The Service provider has failed to deliver the service. Examples of this are the emergency closure of a Day Centre or when a Home Care provider does not attend for planned support calls.
 - III. The person does not receive any service in their support package for a sustained period of time (28 days) due to holiday/hospital admission etc. In this case, the person's benefits will change and will affect what the person could afford to pay. At this point we will look to review the case to

determine whether it is appropriate for the service to continue or if the person's needs should be reviewed.

- IV. For home care there will be no refunds unless the service has been cancelled in advance with at least 24 hours' notice.

21. Collection Debt Recovery

- 21.1. To ensure our income stream is protected and to enable us to meet our legal and financial obligations to our customers, we maintain a robust debt recovery process. This means that if necessary, we will use all measures available to recoup the charges as explained in this document.
- 21.2. Our preferred payment method is by Direct Debit and you may be asked at the initial meeting to complete a DD form, this will be used to clear all the debts you owe the council.
- 21.3. Invoices can be paid by debit card by the following methods:
- a. On the internet at www.kirklees.gov.uk/payments
 - b. Automated Telephone 01484 414818
 - c. Post Office (there may be a charge);
- 21.4. If payment is not made for an invoice a reminder process is initiated. If payment is still not forthcoming then this can result in legal action to recover the debt outstanding, using all of the recovery powers available under regulations and common law. (**see the attached appendix for debt recovery policy**)
- 21.5. We will work with all of our customers to help them to understand the charges and to be able to make regular payments in line with their own financial circumstances. However, if payments for care are not forthcoming through the use of these steps, legal proceedings will begin and all legal costs incurred by the Council will also be claimed from the service user.

22. Increases to rates

- 22.1. In line with the Council's Corporate Charging Policy – Fees and Charges, all charges and the scope for charging will be reviewed at least annually within the service area. The review will include those services which could be charged for but which are currently provided free of charge.

Amendments are delegated to appropriate officers and should be approved following the completion of an appropriate business case. Where new fees or charges are to be introduced they are to be approved by Cabinet. As explained above, all changes in fees or charges are subject to individual financial assessments and all service users will only be charged what they have assessed as being able to afford.

View the [Corporate Charging Policy – Fees and Charges](#).

23. Direct Payments

23.1. When an individual chooses to take their personal budget as a form of direct payment, assessed contributions are deducted from the personal budget amount and a net payment is made by the Council for contribution to the personal budget.

There are regular reviews of direct payments to ensure money is spent appropriately.

23.2. Where direct payments are being made and the service user is not spending the direct payment for the appropriate purpose, the council will take steps to recover or clawback any payments that have been inappropriately used. In these cases a review of the care assessment and the financial assessment will also be undertaken.

23.3. When an individual chooses for the council to provide or arrange services using their personal budget, either a 4 weekly invoice is sent to clients requesting the payment of their personal contribution or in some cases, providers may be paid net of the clients contribution. This will include any charges associated with any other financially assessed services and/or any flat-rate charges where applicable.

23.4. Where a client has entered a deferred payment agreement the agreed level of weekly contribution will be paid by the client directly to the care provider, unless otherwise agreed. The agreed level of deferred fees will be secured and collected in accordance with Council's deferred payments policy. **See the attached Appendix.**

24. Review and Appeals Process

24.1. If an individual is unhappy about the outcome of their financial assessment, they may start the review and appeals process which is described below.

24.2. Stage 1 - Review

At the review stage a different Financial Assessment Officer will review the issue(s) raised by the individual and consider any new financial information provided. The Officer will also check to ensure the Charging Policy has been applied correctly.

24.3. Stage 2 – Appeal

If the individual is still unhappy with their reviewed charge or personal contribution, an appeal can be requested.

At the appeal stage the Council will organise for an independent person to look at the case.

The appeal process can take up to 28 days from the time the completed appeals form is received, to the time the individual is informed of the outcome.

24.4. About the review and appeal process

Confirmation of the outcome at each stage of this process is communicated with the individual.

The individual will continue to be charged the original assessed contribution during the review and appeal process.

If after the review and appeal the Council asks the person to pay a different weekly charge or personal contribution, the difference will be backdated. Any overpaid charges or contributions will be refunded.

If an independent adjudicator makes a recommendation to waive the assessed charge, this will need to be ratified by the Executive Director responsible for Adult Social Care

25. Related Documents

Internal

- Kirklees Council Financial Procedure Rules
- [Adult Social Care Policies and Procedures](#)

External

- The Care Act 2014
- Equality Act 2010
- Disability Discrimination Act 2005
- Data Protection Act 1998
- Human Rights Act 1998
- Mental Capacity Act 2005
- Kirklees website Adult social care and support