

Kent County Council

Charging for

Care provided in your
own home and support
in the community

April 2022 : edition 2

www.kent.gov.uk/careandsupport



About this booklet

This booklet contains information about how Kent County Council (KCC) works out charges for care provided in your own home and in the community.

We make a charge for most of the services we provide. We do this in order to continue to help as many people as possible live safe and independent lives in their own homes.

There are lots of complex rules regarding charges for care in your own home or in the community. Although this booklet covers the key information that you need to know, it doesn't contain all of the rules.

Please speak to us if you would like more information about any of the points covered in this booklet.

This booklet is available in alternative formats and can be explained in other languages.



Telephone: 03000 41 61 61 or

Text Relay: 18001 03000 41 61 61

For more copies of this guide please email:
socialservicesleaflets@kent.gov.uk

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Part 1

Which services are chargeable?

Most of the care and support services that we provide are chargeable.

This means that if you need these services, we will look at your finances to see how much you can pay, if anything, towards the cost.

These services include:

- Care workers, to provide assistance with tasks at home and away from the home like washing and dressing
- Most day care services¹
- Support in the community
- Kent Shared Lives – provides eligible individuals the opportunity to stay in the homes of recruited, trained and approved hosts and their families who live in the community. This can be for a long or short-term basis or day support depending on assessed need
- Meal services
- Care and support in extra-care housing settings.

¹ Some day care services are funded through grants, and are free of charge.

Some of the other services that we provide are not chargeable.

These services include:

- Information and advice
- Advocacy

- Assessing your needs and finances
- Equipment to help you around the house²
- A short-term intensive care service which helps you to learn or re-learn how to manage daily tasks for yourself (called Enablement)
- Intermediate care services which help you get home after a hospital stay - up to a maximum of six weeks
- Sensors that can be installed into your home, and are monitored 24 hours (called Telecare)
- Employment services funded by KCC
- Some of the services we provide are not listed here. Please speak to us if you would like more information on these.

After care services for people who have been discharged from hospital having been detained under the Mental Health Act do not pay for those services provided under Section 117 of the Mental Health Act.

A person can have some needs which do not relate to or arise from their mental health condition and might have to pay. For example, after a fall, a person develops a need requiring physical assistance

² Up to certain amounts set out by the Government.



For more information:

www.kent.gov.uk/careandsupport

Part 2

Working out how much you will need to pay

Needs assessment

We assess you to identify what your needs are, what type of support you will need and whether we can provide support for you.

Eligibility

We decide whether you are eligible for support from us based on guidelines set by the Government.

If you are not eligible for support we will tell you why and about other organisations that can support you.

STEP 1 : Needs assessment

Looking at your needs

In order to find out how we can best support you we will carry out a **needs assessment** over the telephone or face to face.

The assessment is an opportunity for you to tell us about your situation and discuss your care needs. This helps us to understand things from your point of view. It will also help us to identify if you are eligible for care and support from us. If you are not **eligible**, we will let you know about other organisations that can help you. Any assessment that we do will be free of charge.

Following your needs assessment your social care contact will ask you to read and sign a letter which tells you we will undertake a financial assessment to tell you how much you will pay towards the cost of your care if KCC provides you with assistance for the cost of your care.

STEP 2 : Personal budget

The total cost of your care

If we are able to support you, we will then work out your personal budget.

Your personal budget is the total amount that we think it will cost to buy the care services you need. Initially, this figure will be an estimate and is called your estimated personal budget. We will confirm the final amount after we agree your care and support plan.

If you are living in an extra-care housing schemes, your personal budget will always include an amount for the 24 hour a day emergency cover they provide. This will be added to the cost of any regular care and support you receive.

If you are in a Shared Lives service, we will work out the cost of the care and support you receive in a specific way. Your social care contact will be able to explain this to you.

STEP 3: Financial assessment

What happens?

Once we have agreed the total cost of your care and support, we will work out how much you will be required to contribute towards the cost of it.

Your charge will be against the total cost of your care and support (i.e. the cost of all chargeable services you receive added together). We do this by carrying out a financial assessment which is means tested.

A financial assessment looks at your **capital** and your weekly **income** to see how much you can pay towards the cost of your care.

If you give away money or capital assets to avoid paying for your care this is seen as 'Deprivation of Assets' and will mean the assessment of how much you can afford to pay will still include the value of the assets that have been given away.

We will discuss the circumstances, reasons given and timing around the giving away of the money or capital assets with you and decide if you could have reasonably foreseen your need for care and support at the time you gave away the money or capital assets and was it done for the sole or main purpose to reduce the amount you are charged towards your care or to be eligible for support from us sooner than expected.

In some circumstances, we can legally ask the person who was given the money or capital assets to pay some or all of your care costs.

Your **capital** includes most savings and investments including the value of any second properties/land but not the home that you live in (see step 4).

Your **income** includes most **pensions and benefits**, and any other money you may have coming in, and an assumed level of income from any savings and investments (see step 4).

The financial assessment is carried out by one of our Finance Assessment Officers and may take place in your home or over the telephone.

If we already hold your financial information from a previous financial assessment or where your income and capital has already been verified by the Department for Work and Pensions, we can complete the financial assessment without needing to contact you or your representative.

Your Finance Assessment Officer will also tell you about the kinds of benefits you are able to claim. You will need to claim all of these benefits. When we work out your contribution, we will assume you have this income and take it into account. After we have completed your financial assessment, we will write to you to give you information about what you need to pay.

All charges are reviewed on an annual basis. If your income, benefits, pension, savings or investments change you will need to tell us as soon as possible.

If you do not tell us about changes in your financial circumstances, which meant we were undercharging you, we may backdate to the date the charge increase would have applied.

STEP 4: Financial assessment

How much do I need to pay?

First, we will look at how much capital (savings, investments etc.) you have. If you have over £23,250 in capital or you choose not to disclose your financial information you will not qualify for any financial assistance and then you will need to pay the full cost of your care directly to your chosen provider.

Please note: When we look at your capital we do not include the value of the home that you live in.

However, if you have over £23,250 in capital or you choose not to disclose your financial information you can ask us to arrange the delivery of your care and contract with the provider on your behalf. We will charge an annual arrangement fee of £119.51 in order to pay for the administration associated with accessing care through us. This will be paid in weekly instalments (£2.29 per week) and will be added to the cost of any regular care and support you receive.

If you have less than £23,250 in capital, then we will look at your weekly income to see how much you can afford to contribute to the cost of your care and support. Your weekly income includes most pensions and benefits.

In addition to your weekly income, if you have capital between £14,250 and £23,250, we will add your weekly income to an assumed income of £1 per week for every £250 (or part of £250) over £14,250. (This is called a tariff income).

For example, if you have £17,250 in savings this means that:

Your savings	£17,250
Minus Lower Capital Limit	£14,250
	= £3,000

£3,000 ÷ £250 = **£12**. This means we would take into account an additional £12 on your weekly income based on your savings.

We will add up all the income that we are allowed to take into account. However, there will be certain parts of your income that we will not take into account. These include:

- An amount called the Minimum Income Guarantee (MIG) (this is an amount specified by the Department of Health in order to meet daily living costs such as food and utilities)
- Income used to pay certain housing costs
- A standard amount of £17 a week for disability related expenditure (see page 20 for more information).

We will then be left with an amount of income which you can use to pay towards your support. We call this your maximum ability to pay. In some cases, this amount will be zero - which means that you will not have to pay anything towards the cost of your support.

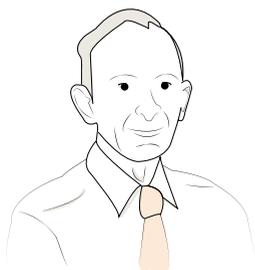
Once we have worked out your income, we will then charge you whichever is less out of the following two amounts:

- Your maximum ability to pay 100 per cent of your available income or
- The total cost of your care and support: the value of your Personal Budget

If you are assessed as able to pay the full cost of your care then you may be asked to pay for your care directly to the provider.

Part 3

Examples of how we work out the charge



John

Following a fall John has broken his hip.

He is assessed and needs two carers to visit twice a day to help him manage his daily tasks.

These visits cost £250 a week

Financial Assessment:

John has savings of £47,000

If someone has savings over £23,250 we will not be able to give them a contribution.

This means John will need to fund the cost of his support himself. We can offer him advice and guidance if he would like us to.

John contributes

£252.29

This includes the £2.29 per week arrangement fee.



Iris

Iris has been assessed as needing care. She has a carer who visits her twice a day to support her to get washed and dressed.

These visits cost £190 a week.

Financial Assessment:

Iris has savings of £17,000

This is less than £23,250 which means we will look at her weekly income to work out her contribution towards her support costs.

Her income	Retirement Pension	£141.85
	Occupational Pension	£12.45
	Attendance Allowance	£61.85
	Guaranteed Credit	£83.70
	Savings Credit ¹	£5.90
	Income from savings	£11
	Total income	£316.75
What KCC disregards from income	Minimum Income Guarantee ²	£194.70
	Disability related expenditure	£17
	Savings Credit	£5.90
	Total disregards	£217.60
	Total income	£316.75
	Total disregards	£217.60
	What's left	£99.15
Summary	Visits cost a week	£190.00
	Iris contributes	£99.15
	KCC contributes	£90.85



Martin

Martin has been assessed as needing care.

Martin requires support in some daily living tasks and needs a carer to visit every morning and two evenings a week to support him.

These visits cost £180 a week

Financial Assessment:

Martin has savings of £3000

This is less than £23,250 which means we will look at his weekly income to work out his contribution to his support costs.

His income	Employment Support Allowance	£204.75
	Personal Independence Payment	£61.85
	Total	£266.60
What KCC disregards from income	Minimum Income Guarantee	£156.00
	Disability related expenditure	£17
	Total disregards	£173.00
	Total income	£266.60
	Total disregards	£173.00
	What's left	£93.60
Summary	Visits cost a week	£180.00
	Martin contributes	£93.60
	KCC contributes	£86.40

Explanations

1 Assumed income from savings

If you have capital between £14,250 and £23,250 we will apply a tariff income. This assumes that for every **£250** of capital or part thereof you are able to afford to contribute £1 per week towards the cost of your care. This will be added to your weekly income when assessing your weekly charge.

In example 2 Iris has £17,000 in savings this means that:

Iris' savings	£17,000
Minus Lower Capital Limit	£14,250
	= £2,750

£2,750 is 11 x £250, so the assumed income from savings is £11.

This means that we would add an additional £11 to her weekly income based on her savings.

2 For more information about disability related expenditure see page 20.

Part 4

Organising your support with a direct payment

If your financial assessment shows that you need us to help you to pay towards the cost of your care and support you can take this money as a direct payment.

Direct payments are regular payments that we make to you (or your carer) so that you can arrange, manage and pay for your care and support yourself.

Direct payments mean you will have more freedom in choosing how your support is provided, who provides your support and when it is provided. This gives you greater freedom, flexibility, and control. We will need to agree with you what you would like to spend the money on, but we aim to give you as much choice as possible.

If you decide to receive a direct payment we will deduct the amount that you have been assessed to contribute towards your care from the amount of money we will pay you.

For example, we have worked out that the support you need will cost £60 per week.

Our financial assessment shows that you can afford to pay £40 towards the cost of your support based on your income and capital. KCC will pay the remaining £20. If you chose to receive a direct payment, we would pay you the £20 directly.

You would then be free to arrange your support yourself using your £40 and our £20 contribution and to pay your care providers directly. You will be required to pay your contribution into your Direct Payment bank account or into the Kent Card account.

The best way to receive your direct payment is through the Kent Card. The Kent Card works in the same way as a debit card. You can use the card to pay for your care to the provider online or over the phone. To set up direct payments, speak to your social care contact.

There is a Direct Payment factsheet on www.kent.gov.uk



Or email: direct.payments@kent.gov.uk
or phone the Direct Payments Team:
03000 41 36 00

Part 5

Paying for support services organised by us

If you choose not to take a direct payment we can organise your support for you. If we arrange your support you will pay us directly for the services you receive. The amount that you pay will depend on your finances, as explained in part 2. We will work this out during your financial assessment.

You will be sent a Kentcare invoice every four weeks for the care and support you have received. Your first invoice could be for longer than four weeks as there could be a delay in getting your details entered onto the invoice system, or working out how much you can pay towards the costs. You will be expected to pay for your support within 10 days of receiving your invoice.

How do I pay?

We would prefer that you set up a direct debit. To set up a direct debit, call the Cashiers Team on 03301 65 00 06. If the amount to be paid or the payment date changes, we will let you know via your invoice. We will notify you of the amount and payment date on the invoice that we send you.

You can also pay:

- **Online with your debit card** through Santander's Bill Pay. If you haven't used Bill Pay before, you will need to register
- **Online by transferring money** from your own online bank account to KCC. The sort code is 60-60-08 and account number is 00100013. Please give your invoice number as a reference with the Giro slip at a post office or bank
- **By post** - send cheques made payable to "Kent County Council" to the address on the back of your invoice. Please send the counterfoil from the bottom of your invoice with your cheque. Please do not send us cash through the post
- **By telephone** - Pay with a credit or debit card by telephoning the Cashiers Team on 03301 65 00 06, between the hours of 9am and 5pm, Monday to Friday. Please have your card and invoice number ready.



If you have any questions about your invoice, please telephone us on 03000 416 464.

Part 6

Disability related expenditure

Sometimes, a person with a disability or illness may find that because of their disability they need to spend more money each week than a person without a disability.

For example, this could be because they use extra electricity to charge an electric wheelchair, special clothing or footwear, or have extra dietary needs.

Disability related expenditure is the extra money that you need to spend each week, on costs that are specifically related to your disability.

When working out how much you can afford to pay, we will make a standard allowance of £17 to cover any disability related expenditure you may have.

If you believe you have disability-related costs of more than £17 you can ask for an individual assessment, provided you receive a disability benefit.⁵

This is a more detailed assessment, which works out how much extra money you need to spend because of your disability. We call this a Disability Related Expenditure Assessment. You will need to provide us with evidence, for example bills, invoices, receipts, contracts, bank statements of the extra expense.

If the assessment shows that you need more than £17 a week for disability related expenditure, we will be able to make this extra allowance. If the assessment shows that you need less than £17 a week for disability related expenditure, we will still make the standard allowance amount of £17 per week and ignore from your weekly income.

⁵ Disability benefits include: Attendance Allowance, Disability Living Allowance Care Component, Constant Attendance Allowance, Exceptionally Severe Disablement Allowance or Personal Independence Payment.

As you have been assessed as eligible for care and support from us you may be entitled to receive one of these benefits.

For more information visit:



www.gov.uk/disability-benefits-helpline

Part 7

Your questions answered

Will my partner's income be used in my charge calculation?

When we look at your finances we will only include your income and capital and half of any capital held jointly.

Will I have to sell my home to pay for my support?

No you won't. If you have care provided in your own home or support in the community, we do not include the value of the home you live in when we look at your capital. However, if you own or have a beneficial interest in second or more properties or land, the value will be included as capital in your financial assessment.

What happens if I refuse to tell you how much money I have?

If you do not wish to discuss your financial situation with us you will have to pay the full cost of your care.

What if I have a change in financial circumstances?

You must report any change in financial circumstances to the Client Financial Services Team (contact details below) as it may affect the level of financial assistance you qualify for.

What happens if I refuse to pay?

We will take legal action to get back any money you owe us.

How often will I receive an invoice?

Kentcare Invoices are sent out every four weeks in arrears.

What happens if I receive more/less than my usual service?

If you are paying less than the full cost of your care, then the amount that you need to pay will only reduce if the total cost of your support service falls below what you pay. If you are paying the full cost of your care, then your charge will reduce if your service is reduced⁶. If your service increases your charge will rise in line with this.

What happens if I need to suspend my usual service?

If you or your representative need to suspend your service, for example, because you are going on holiday or admitted to hospital, you or your representative must tell the care provider and your social care contact as soon as possible. If this is not done you may still be charged for the period of time you are away.

Will my charge ever be backdated?

You will be expected to pay for your care from the date you start to receive it.

If you receive backdated payments of a benefit (for example Attendance Allowance/Personal Independence Payment Daily Living Component), this will affect your contribution, and any increase will also be backdated. You will still be better off by claiming.

Can I give money or capital assets away?

If you give money or capital assets away to avoid paying care fees this is seen as 'deprivation of assets'. This will mean that the assessment of how much you will have to pay may still include the value of the assets that have been given away.

What happens if I am struggling to pay?

If you are in serious financial hardship please speak to your social care contact to discuss what options are available to you.

What if I do not agree with the outcome of the assessment or the services offered?

If you disagree with the results of your needs assessment or financial assessment you should first speak to the person who completed the assessments.

If this does not resolve the problem you can challenge the decision by using our complaints procedure.

Our leaflet 'Have your say - comments, complaints and compliments' describes how to do this.

For a copy, please call 03000 410 410 or go to our website www.kent.gov.uk

Who can I speak to if I have a question about the financial assessment?

If you have any questions about the financial assessment please speak to the Client Financial Services on the telephone number below:



03000 41 28 00



Client Financial Services
St Peter's House
Dane Valley Road
Broadstairs
CT10 3FD

Kent County Council Adult Social Care

Charging for care provided in your own home and support in the community

How to get in touch with us

If you would like more information on any of the topics covered in this booklet, or you would like to have your needs assessed or report abuse, you can contact us in the following ways:

-  **03000 41 61 61** (if you live in Kent)
-  **01634 33 44 66** (if you live in Medway)
-  Kent and Medway **out of hours** service: **03000 41 91 91**
-  Text relay service: **18001 03000 41 61 61**

A text relay service is available for deaf, hard of hearing and speech impaired customers and is available 24 hours a day, 7 days a week.

-  www.kent.gov.uk/careandsupport
-  social.services@kent.gov.uk

Visit your local gateway (www.kent.gov.uk/gateways)

For more copies of this guide please email:
socialservicesleaflets@kent.gov.uk

