

Policy and Sustainability Committee

10.00am, Thursday 22 August 2024

Contributing to your care - social care charging policies

Executive/routine
Wards

1. Recommendations

- 1.1 It is recommended that the committee agree the two policies attached as appendices 1 (non-residential) and 2 (residential). Noting that some further amendments to the formatting and look of the documents are planned. This is intended to make the policies easier to read and these alterations will not change the policy intent in any way.

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Contributing to your care - social care charging policies

2. Executive Summary

- 2.1 This report proposes two updated social care charging policies – ‘contributing to your care’. One policy is for non-residential care and the other for residential care, both are attached as appendices to this report.
- 2.2 The updated policies have been developed in consultation with the social care transactions and the finance teams.

3. Background

- 3.1 Although charges are updated each year as part of the City of Edinburgh Council’s (the Council’s) budget setting process, the policies themselves were last updated in September 2021. These have now been reviewed by key stakeholders and several changes to the extant policies are proposed. These are highlighted in section 4 of this report below.
- 3.2 The Convention of Scottish Local Authorities (COSLA) produce annual guidance which defines a set of principles to underpin the development of local charging policies for social care support for people at home. The proposed non-residential policy aligns to this guidance.
- 3.3 Similarly, the proposed residential policy is consistent with the relevant Scottish Government legislation and guidance from the Health and Social Care Department’s Charging for Residential Accommodation Guidance (CRAG).

4. Main report

- 4.1 The Council is responsible for setting charges for social care services and the policies which govern their application. Currently there are 2 relevant policies – one for charging for non-residential services and the other for residential. As described above these policies have now been reviewed, in line with relevant legislation and guidance and the following changes proposed:
 - The overall ‘style’ of the documents has been changed to make them easier read and more accessible for members of the public.

- Any content which will change on an annual basis (for example, the actual charges, capital limits, personal allowances) has been removed from the policy documents. Similarly the worked examples have also been removed from the policies themselves. Links are included in the policy documents to this information to ensure it remains accessible.
- The introduction of 'interim charging' for residential services. This in effect means that people will be charged at a rate equal to the minimum contribution they will be required to make whilst a financial assessment is being carried out. Once the assessment has been completed the contribution will be adjusted. The process to implement this will ensure that the level of any interim contribution will always be less than or equal to the final contribution.
- A waiving of charges for people admitted to care home beds commissioned as part of a specified palliative care pathway. To qualify for this people will have to meet tightly defined criteria as set out in the policy. The older people's pathways programme commissioned by the Edinburgh Integration Joint Board (IJB) has recognised that the city needs a pathway that incorporates end-of-life care in a care home. Accordingly, officers are working on an end-of-life care home service specification, and a procurement from willing independent homes that will cover parts of the city where the Council has no suitable home. The associated finances are covered in the direction issued by the Integration Joint Board to the Council and NHS Lothian on date. This change will bring the residential policy in line with the non-residential one.

4.2 If agreed by the committee, the new policies would go live on 1st September 2024. It is recognised that some further work on the formatting and accessibility of the documents would be beneficial. Any such work would be focused on improving the readability of the policies, aimed at making them easier to interpret from members of the public. Clearly there would be no changes to the content of the policies themselves without committee approval.

5. Next Steps

5.1 On approval from Policy and Sustainability Committee the updated policies will be published on the Council's policy hub on the website and also stored on the Council's intranet site.

6. Financial impact

6.1 The updated policies ensure that the correct charges are allocated for services. They also provide people and their families guidance on how contributions will be calculated and charges applied.

6.2 Alongside recent changes in operational practice, introducing interim charging would improve the Council's cash flow position. The financial impact of waiving

charges for people on an end-of-life pathway has been provided in the financial model which supports the closure of Liberton Hospital. Associated funding is included in the direction issued by the IJB so there will no financial exposure for the Council.

7. Equality and poverty impact

- 7.1 An integrated impact assessment was undertaken on 25th July with a follow up on 1st August 2024. This is available via this [link](#).

8. Climate and nature emergency implications

- 8.1 There are no specific implications as a result of this paper.

9. Risk, policy, compliance, governance and community impact

- 9.1 Without clear policies, supported by strong operational procedures, on contributions to the cost of social care services there is a risk of inconsistent treatment of people who require care.
- 9.2 The proposed policies have been co-produced with relevant stakeholders and are aligned with all relevant legislation and guidance.

10. Background reading/external references

- 10.1 None

11. Appendices

- | | |
|------------|--|
| Appendix 1 | Contributing to your care policy – non-residential social care |
| Appendix 2 | Contributing to your care policy – residential social care |
| Appendix 3 | Supplementary website information |

Contributing to your care – non residential services

Implementation date - 1 September 2024

Control schedule

Version control

Approved by	Policy and Sustainability Committee		
Senior Responsible Officer	Moira Pringle, Chief Finance Officer		
Author	Moira Pringle, Chief Finance Officer		
Scheduled for review	Every two years		
Version	Date	Author	Comment
0.1			
0.2			

Subsequent committee decisions affecting this policy.

Date	Committee	Link to report	Link to minute
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Contributing to your care – non residential services

Policy statement

The Edinburgh Health and Social Care Partnership (the Partnership) will support you to ensure you are able to live as well and independently as possible. To help us provide services which meet people's identified outcomes, we may ask you to contribute to the cost of your care.

This policy explains how the contribution to your care is calculated. It sets out which elements of your income and/or capital are included and which are not and is based on the following principles:

- You will only be charged for the hours of care and support that you receive.
- You will not be charged more than it costs to provide the service for which your charge has been assessed.
- Where the charge is subject to a financial assessment, this will be based on your ability to pay, following an income maximisation assessment.
- You will know how and why you are being charged.
- You will be treated in a fair, transparent, and equitable manner.
- Assistance can be offered to complete the financial form and/or benefit form.

Charges apply regardless of whether services are provided by the Partnership or purchased from an external provider or purchased through a direct payment or individual service fund.

Scope

This policy deals with contributions towards **non-residential care services for adults**. These are services which will support you to ensure you are able to live as independently as possible. They are provided, following an assessment of need. The legal basis of charging non-residential social care services is the Social Work (Scotland) Act 1968 (as amended) and Community Care and Health (Scotland) Act 2002.

Definitions

All terms and abbreviations used have been clearly defined and explained.

Policy content

The policy content is contained in the appendix.

Implementation

Implementation of the policy will be undertaken through communication with the relevant teams who undertake charging on behalf of the Edinburgh Health and Social Care Partnership.

Roles and Responsibilities

The policy has been developed by the Edinburgh Health and Social Care Partnership in consultation with a range of internal key stakeholders.

Related documents

Not applicable.

Integrated impact assessment

An integrated impact assessment (IIA) was undertaken in 2 sessions (on 25th July and 1st August 2024) and can be found [link](#).

Risk assessment

The policy for charging for services are underpinned by legislation (Social Work (Scotland) Act 1968 (as amended) and Community Care and Health (Scotland) Act 2002.

The risks of not implementing this policy includes:

- Reputational damage if undercharging or overcharging occurs because of non-compliance with the policy.
- Failure to collect appropriately assessed contributions causing unnecessary financial pressures in the wider social care budget.

Review

The policy document will be reviewed bi-annually, with the charges updated annually as part of the budget setting process within the City of Edinburgh of Council. Feedback on this policy from key stakeholders and interested parties will be considered at review and amendments, enhancements made to the policy as appropriate.

CONTRIBUTING TO YOUR CARE POLICY: NON-RESIDENTIAL SOCIAL CARE

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CONTRIBUTING TO YOUR CARE POLICY: NON-RESIDENTIAL SOCIAL CARE

Scope

1. Non-residential care services are those which will support you to live as independently as possible. These services are provided following an assessment of need and will help you to meet your identified outcomes.

Policy statement

2. The Edinburgh Health and Social Care Partnership (the Partnership) will support you to ensure you are able to live as well and independently as possible. To help us provide services which meet people's identified outcomes, we will ask you to contribute to the cost of your care.
3. This policy explains how the Partnership considers and calculates the contribution to care that you will be expected to make towards your care and support.
4. Charges apply regardless of whether services are provided by the Partnership or purchased from an external provider or purchased through a direct payment or individual service fund. The charges have been set in line with principles of Convention of Scottish Local Authorities (COSLA) guidance, best value framework, and benchmarking against other local authorities.
5. The charging policy will be reviewed annually and any revisions to charges and financial assessment rules are approved by the City of Edinburgh Council as part of the annual budget setting process.
6. The policy is based on the following principles:
 - a) you will only be charged for the care you receive.
 - b) we never charge more for a service than it costs us to deliver, in most cases, the charges we raise are much less than the cost of the service.
 - c) all charges are based on your ability to pay.
 - d) you will know how and why you are being charged.
 - e) you will be treated in a fair, transparent, and equitable manner.
7. Assistance can be offered to complete the necessary paperwork.

Services we charge for

8. We will charge for the following services, following a financial assessment of your ability to pay:
 - a) access to social support in your own home or the community (including meals provided in day centres for the over 65s, and any transport required to get there)
 - b) support with managing bills, correspondence and budgeting
 - c) domestic assistance including support with shopping, laundry and cleaning services
 - d) maintaining safety and security
9. All charges are based on a person's ability to pay. The only exception to this is for meals and transport to day centres for the over 65s. These charges are not subject to a financial assessment of an individual's ability to pay because the costs are classed as normal living expenses.

Charging exceptions

10. In some instances, due to specific circumstances, you may be exempt from charging:
 - a) If you are subject to a Compulsory Treatment Order under the Mental Health (Care and Treatment) (Scotland) Act 2003 or a Compulsion Order under the Criminal Procedure (Scotland) Act 2003.
 - b) If you are receiving reablement services, following a stay in hospital, up to a period of up to for 6 weeks.
 - c) If you are receiving end of life care, where a DS1500/SR1/BASRiS forms (whichever is applicable) has been completed by a doctor, consultant, or other health specialist.
 - d) Services provided to meet your carer's needs are exempt from charging, as per the Carers (Waiving of Charges for Support) (Scotland) Regulations 2014. Services provided to you to meet your carer's needs are also exempt from charges under the Carers (Scotland) Act 2016. For example, Section 25 of the Act suggests a break for the carer is an option to enable them to continue in their caring role, details should be identified in an adult carer support plan or a young carer statement. This break could be respite care in a residential setting or community support. The charge waived would be the care element for the cared for person.
 - e) If you already pay charges to the independent living fund (<https://ilf.scot/>).

How contributions for non-residential services are calculated

11. Contributions to services are determined on an individual basis. The calculations are based on the level of capital, savings and income you have.
12. If you have savings above an upper limit (which can be found in appendix 3) you will contribute the full cost of the service(s) you receive. If your capital and savings is below this amount then you will be asked to complete a financial assessment to determine how much you have to pay. Edinburgh Council has set a maximum weekly amount which someone is required to contribute to their eligible care and support costs. This is calculated by applying a 'taper rate', the details of which are shown in the box below.
13. The **assessed maximum contribution** (ie how much you will contribute) is based on the following calculation:

capital tariff income
PLUS
weekly assessed income
MINUS
allowable weekly expenses
EQUALS
weekly available income

a 'taper' will then be applied to your weekly available income which is calculated as follows

30% of the first £20 of available income
PLUS
50% of the second £20
PLUS
70% of any remainder.
EQUALS
assessed maximum contribution

14. More information on each of these steps is provided in the following pages of this policy. Some worked examples can be found in appendix 3.

Financial assessment

15. To work out how much you can afford to pay towards the costs of the services you receive you will be asked to complete a **financial assessment form**. This collects information on your income, savings, and other capital. Part of this assessment process will ensure your income is maximised and you are receiving all the benefits you are entitled to.
16. Financial assessment forms can be completed by a spouse, partner, an agent (e.g., a lawyer) or with the assistance of the support worker and staff will help support where possible.
17. If you do not complete the financial assessment form, it will be assumed that you have enough income to meet the full cost of the services you receive. There is a section on the form whereby you can choose not to complete the form and by signing this section you accept responsibility for paying the full costs of services.

Capital/tariff income

18. We will ignore the capital value of your main residence when assessing contributions for non-residential services. The value of second and subsequent properties will be considered as capital.
19. All savings, investments, bonds, assets, and property owned by the supported person are also classed as **capital**. There is an assumed income derived from capital over a certain limit. Both the limit which applies to you and the level of your assumed income will depend on whether you are under or over pension credit age. This is summarised in the table below:

	Over pension credit age	Under pension credit age
Capital limit	£6,000	£10,000
Assumed income	£1 per every £500	£1 per every £250

20. If you dispose of capital to avoid charges, this will be deliberate deprivation and a notional capital calculation will apply.

Income

21. All your income and that of any spouse or partner will be considered when calculating your maximum charge including:

- a) all benefits from the Department of Work and Pensions (DWP) and Social Security Scotland Agency (SSSA) benefits and allowances, including pension credit
 - b) earned income
 - c) occupational/private pension(s)
 - d) rental income
 - e) income from capital/savings
 - f) any other earned or unearned income
22. The total of a to f above is called your **assessed weekly income**.
23. Certain types of income are **disregarded** and not considered when assessing an individual's ability to contribute. This includes:
- a) the mobility component of Disability Living Allowance or Personal Independence Payment (PIP)
 - b) first £20 of earned income (such as salary) and then 20% over £100 or any monies earned through permitted work in line with DWP assessment
 - c) payments from war disablement pension or made under the Armed Forces Compensation Scheme
 - d) Bereavement Allowance
 - e) fifty per cent of a spouse/partner's earned income or occupational pension
 - f) all a spouse/partner's DLA/PIP/Attendance Allowance (AA)
 - g) If you are in receipt of high rates of DLA care component, AA or PIP enhanced daily living component, we will only consider the middle rate of DLA or the standard rate of PIP or lower rate of Attendance Allowance, provided you are not in receipt of overnight care.
 - h) Independent Living Fund payment
 - i) Carer's allowance
 - j) benefits paid for or on behalf of your children or your partner (e.g. elements within Universal Credit, child benefits)
 - k) all interest from savings (tariff income considered instead, detailed below)
 - l) partner's earnings where they are under state pension age

Minimum income threshold

24. To ensure you are not forced below recognised subsistence levels, an income protection threshold is applied. This ensures that the person will always be left with enough money to pay household expenditure items and general living

expenses. This is known as the minimum income threshold and is updated every financial year, in line with the DWP benefits uplift. See here for current non-residential allowances.

Expenses

25. Some **allowable expenses** will then be deducted from your assessed weekly income:
- a) Rent - this is the amount you pay after any deductions of housing benefit. If the tenancy is not in your name, the rent contribution is the actual rent paid divided by the number of adults in the household.
 - b) Mortgage payments on first homes, not second homes. This is the amount you pay. If the property is not owned by you, your contribution is the amount of mortgage paid divided by the number of adults in the household.
 - c) Council tax including water and sewerage charges.
 - d) Child maintenance payments.
 - e) Exceptional costs associated with a disability can also be considered (e.g., extra heating, special diet etc.).

Charge taper

26. The decision to apply taper rates to contributions or charges is at the discretion of individual local authorities. Our Council has decided that the maximum weekly contribution that someone will be required to contribute to their eligible care and support costs is as follows:
- 30% of the first £20 of excess income, plus
 - 50% of the second £20, plus
 - 70% of any remaining

Maximum weekly charge

27. The Partnership sets a maximum weekly charge each year. No-one will pay above this maximum weekly charge regardless of the cost of the service or the outcome of their financial assessment. This is included in the current non-residential allowances.

Some general points

Reassessments

28. Annual financial re-assessments will be undertaken each year in line with the DWP/SSSA uprating of benefits and the annual review of national guidance.

Change in financial circumstances

29. If your financial circumstances change, please let us know as soon as practical to ensure that your charges are accurate and up to date. You can contact us on Sfc.community@edinburgh.gov.uk.

Non-disclosure

30. If you fail to respond to information required to complete a financial assessment or choose not to disclose information then you will be assessed as being able to afford the maximum weekly charge or the actual cost of your care, whichever is the lesser amount.

Non-payment

31. If you have been assessed as requiring a service and refuse to pay, the service should not be withheld where the service is essential to your well-being. If you refuse to pay for a service that has been assessed as not being essential to your well-being, the service may be withdrawn.
32. Debts will be pursued through the City of Edinburgh Council's normal debt recovery process.

Appeals and complaints

33. If you are unhappy with the outcome of your financial assessment, you can appeal our decision and ask for your assessment to be reviewed. Please submit your appeal to SCF.Community@edinburgh.gov.uk.
34. If you remain dissatisfied and you wish to make a complaint, you can do by submitting a complaint through our complaints process. This can be accessed [here](#).

Contributing to your care - residential services

Implementation date - 1st September 2024

Control schedule

Version control

Approved by	Policy and Sustainability Committee		
Senior Responsible Officer	Maira Pringle, Chief Finance Officer		
Author	Maira Pringle, Chief Finance Officer		
Scheduled for review	Every two years		
Version	Date	Author	Comment
0.1			
0.2			

Subsequent committee decisions affecting this policy.

Date	Committee	Link to report	Link to minute
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Contributing to your care - residential services

Policy statement

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This policy explains how the contribution to your care is calculated. It sets out which elements of your income and/or capital are included and which are not.

The policy is based on the following principles:

- You will only be charged for the hours of care and support that you receive.
- You will not be charged more than it costs to provide the service you are receiving.
- Where the charge is subject to a financial assessment, this will be based on your ability to pay, following an income maximisation assessment.
- You will know how and why you are being charged.
- You will be treated in a fair, transparent, and equitable manner.
- Assistance can be offered to complete the financial form and/or benefit form.

Charges apply regardless of whether services are provided by the Partnership or purchased from an external provider or purchased through a direct payment or individual service fund.

Scope

This policy deals with contributions towards **residential care services for adults**, the 24-hour care and support provided in a care home setting. The care home must be a registered service with the Care Inspectorate and meet your assessed needs of either residential or nursing basis or both. Care provision can be on a permanent, temporary or respite basis.

The legal basis for charging residential services is the National Assistance Act 1948 and the National Assistance (Assessment of Resources) Regulations 1992.

This contribution policy is based on Scottish Government’s guidance on the above legislation and the Department of Health’s Charging for Residential Accommodation Guide (CRAG).

Definitions

All terms and abbreviations used have been clearly defined and explained.

Policy content

The policy content is contained in the appendix.

Implementation

Implementation of the policy will be undertaken through communication with the relevant teams who undertake charging on behalf of the Edinburgh Health and Social Care Partnership.

Roles and Responsibilities

The policy has been developed by the Edinburgh Health and Social Care Partnership in consultation with a range of internal key stakeholders.

Related documents

Not applicable.

Integrated impact assessment

An integrated impact assessment (IIA) was undertaken in 2 sessions (on 25th July and 1st August 2024) and can be found [link](#).

Risk assessment

The policy for charging for services are underpinned by legislation (Social Work (Scotland) Act 1968 (as amended) and Community Care and Health (Scotland) Act 2002.

Risks of not implementing this policy include:

- Reputational damage if undercharging or overcharging occurs because of non-compliance with the policy.
- Failure to collect appropriately assessed contributions causing unnecessary financial pressures in the wider social care budget.

Review

The policy document will be reviewed bi-annually, with the charges updated annually as part of the budget setting process within the City of Edinburgh of Council. Feedback on this policy from key stakeholders and interested parties will be considered at review and amendments, enhancements made to the policy as appropriate.

CONTRIBUTING TO YOUR CARE POLICY: RESIDENTIAL SOCIAL CARE

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CONTRIBUTING TO YOUR CARE POLICY: RESIDENTIAL SOCIAL CARE

Scope

1. Residential care services for adults refers to the 24-hour care and support provided in a care home setting. The care home must be registered with the Care Inspectorate and meet your assessed needs. Care provision can be on a permanent, temporary or respite basis.

Care home assessment

2. In Edinburgh there are 2 types of care homes - nursing and residential, each offering distinct levels of support. Nursing homes have trained nurses on site and additional equipment if you need it. Residential care homes do not employ nursing staff but you can ask a community nurse to visit you if needed.
3. We will assess your care needs and agree with you and your family which type of care home will best meet your needs. The next section of this policy covers the cost of care homes.
4. If, as part of your assessment, we think that you do not require a care home place, you can still choose to move into a care home. In these circumstances you will not be entitled to funding from us and you will have to pay the full cost of your care home placement.
5. You can request a review of your needs at any time, through Social Care Direct (0131 200 2324).

Care home costs

6. The cost to you of moving to a care home depends on 2 things:
 - a) the cost charged by the home; and
 - b) the amount you will be asked to contribute towards your care.

7. You can choose a care home from a list of the providers who accept our standard care home rates or one of the homes operated by the City of Edinburgh Council. This is subject to the home having an available place for you.
8. Where you chose one of the privately run care homes we will pay them our standard rate including any free personal care or free personal and nursing care payments. These standard rates are agreed nationally as part of the national care home contract. There are separate rates for residential and nursing care, the nursing rate being slightly higher. Current rates can be found in appendix 3.
9. We will only pay the rate appropriate for the type of accommodation for which you have been assessed. For example, if you have been assessed as requiring a residential care home and you choose to move to a care home that only accepts the nursing rate, we will only pay the lower residential rate. You will be liable to pay the difference plus any assessed contribution.

Care homes which do not accept our standard rates

10. You can also choose to reside in any care home of your choice. However, if the cost exceeds the national care home contract rate you will have to pay the difference between these two amounts. In these circumstances we always recommend you check the cost of the care home before accepting a place to ensure that you can afford to move there. You will need to work out how long you will be able to afford to stay in the home. Some care homes need you to prove that you have enough money to cover the care fees for three to five years.
11. The fees you pay should cover all your care needs, but you should check with the care home if you will have to pay any other charges such as outings, hairdressing, and activities.
12. The care home will ask you to sign a contract agreeing to their terms and conditions. This agreement is solely between you and the care home. In other words, the City of Edinburgh Council is in no way party to this agreement.

Free personal and nursing care

13. You may be entitled to free personal care or free personal and nursing care. Current rates can be found in appendix 3.
14. The Council will pay these amounts to the care home and not directly to you. You will not be entitled to free personal care or free personal and nursing care payments if we have not assessed you or if we assess that you are not eligible. Payments of free personal care or free personal and nursing care only begin from the date of assessment or date of admission to the care home, whichever is later.

Who needs to pay?

15. Everyone makes a contribution towards their care and accommodation. Your contribution will be based on your income, savings, and investments.
16. To apply for the City of Edinburgh Council to pay all or part of your care home fees you will need to complete a financial assessment. This treats all your income as either **income** or **capital**. It may not always be obvious whether a payment should be treated as capital or income, but generally, a payment of capital is one which is:
 - a) not in respect of a specified period; and
 - b) not intended to form part of a series of payments.
17. If you have capital over an agreed limit and/or you own a property, the only funding you will receive from us will be the allowance for free personal and nursing care (assuming you have been assessed as eligible).
18. If your capital is below this level, your contribution will be based on a combination of your income and capital.

Financial assessment

19. If you are assessed as needing residential care, a financial assessment will be undertaken to identify the contribution you are required to pay to the care home towards your care costs.
20. To enable us to carry out this assessment we will ask you to fill in a financial data collection form. You can ask someone else to fill in the form but either you, your attorney or financial representative will need to sign it to confirm the information is accurate. We will ask for copies of the following documents:
 - a) bank and/or building society statements
 - b) Department for Work and Pensions (DWP) and/or Social Security Scotland Agency (SSSA) letter
 - c) war pension letter, detailing war pension breakdown (if applicable)
 - d) evidence of any investments and the terms and conditions of any trusts
 - e) documents about any power of attorney or financial guardian
 - f) any further information we require to assess your financial contribution.
21. You should contact us if you have any difficulty with the form as we can offer support.
22. If you decide not to fill in the form, you will be charged the full cost of your care, less any free personal care or free personal and nursing care payments.

23. On completion of the assessment we will ask you to sign a written agreement which shows the cost of the care home and the amount you have been assessed to contribute.

INCOME

24. In general, all income you receive will be considered to assess what you need to pay towards your care home. The assessment is summarised in the box below and further information is included in the following sections. Some worked examples are included on our website and are available in appendix 3.

<p style="text-align: center;">Income assessment</p> <p style="text-align: center;">weekly assessed income</p> <p style="text-align: center;">LESS</p> <p style="text-align: center;">personal allowance</p>
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25. We assess you on an individual basis and include income from:
- a) **state pension, pension credit** (guaranteed and savings) and **any other benefits** you receive
 - b) **occupational pension, personal pension, and widows/widowers pension**
 - c) **attendance allowance** and **personal independent payment/disability living allowance** (care component) for the first four weeks of your stay in the care home. If you receive any of these payments they will cease after being in hospital or a care home for four consecutive weeks. It is your responsibility (or your representatives) to notify the DWP and/or SSSA as soon as possible of any change in circumstances. Any overpayments will require to be repaid.
 - d) any **other income**.
26. We do not include:
- a) half of your occupational or personal pension if your spouse/partner continues to live at home (but you must ask us to do this in writing or tick the relevant box in section C of the financial data collection form). Please note, this does not apply to your state pension.
 - b) your husband, wife, or partner's pension
 - c) the mobility component of personal independent payment/disability living allowance

- d) up to £6.75 if your weekly income is more than £208.67 a week or if you receive pension savings credit. We will add this to your weekly personal allowance
- e) up to a maximum of £6.00 for life insurance
- f) £10.00 of a war pension or a civilian injury pension.
- g) a personal weekly allowance (see appendix 3 for current rates).

War pensions

- 27. We may be able to ignore more than £10.00 of your war pension from the assessment. If you receive a war pension, please send us a photocopy of the war pension entitlement document.

Occupational or personal pension disregard

- 28. If you are married or have a partner and they are remaining at home, you can ask us to disregard 50% of your occupational or personal pension as being paid to your spouse/partner. This may affect your spouse/partner's eligibility for certain benefits. Your spouse/partner can contact the Department for Work and Pensions to discuss this.
- 29. We cannot advise whether you should give 50% of your occupational or personal pension to your spouse/partner or how this is managed.

Department for Work and Pensions/Social Security Scotland Agency

- 30. If you are moving to a care home then either you or your financial representative should contact. They will give you advice on eligibility for the benefits you are currently receiving and applying for additional benefits you are entitled to. If you have a spouse or partner remaining at home, they should also contact the DWP and/or SSSA to discuss eligibility for benefits.
- 31. We assess you based on you receiving the appropriate benefits which may include pension credit. If you are not receiving the benefits included in your assessment it is your responsibility to make a claim. We will not refund you if you fail to claim. The Council is unable to advise the DWP and/or SSSA on your behalf.

PERSONAL EXPENSES ALLOWANCE

- 32. You are entitled to a weekly personal expenses allowance. This is deducted from your income and the amount is set annually by the Scottish Government.
- 33. The personal expenses allowance is to enable you to have money to spend as you wish, for example, stationery, personal toiletries, small presents for friends and other minor items. It cannot be increased to cover additional expenditure, for example to buy cigarettes or alcohol. See appendix 3 for current allowances.

CAPITAL

34. Capital from all sources can be considered, including savings held in a bank, building society, post office or other savings account, stocks and shares, values of PEPs and ISAs. We will also consider the value of any property you own in assessing charges for residential services.
35. Capital thresholds are set each year by the Scottish Government, there is both an upper and lower funding threshold.
36. The lower threshold is the amount of capital disregarded in your financial assessment. If your total capital is below the lower limit, it will not be taken into account when assessing how much you have to pay.
37. If the capital falls between lower and upper thresholds, you will have a tariff income applied. This is calculated as £1 for each band of £250 or part £250 above the lower threshold level.
38. If your capital is above the higher threshold, you will be assessed as having to meet the full cost of your care, with the exception of the allowance for free personal and/or nursing care.

Savings and investments

39. We include savings and investments from:
 - a) money in bank, building society, Post Office, and savings accounts
 - b) half of any jointly held accounts. If the joint account is with someone other than your spouse or partner, that person will need to show that they have paid money into the account
 - c) premium bonds (at purchase price)
 - d) shares (at the current market rate)
 - e) National savings certificates
 - f) any other savings and investments
40. We may include:
 - a) savings or income bonds (full details will need to be provided)
 - b) money held in trust (we will need to see a copy of the trust deed)
41. We may be able to ignore your investment capital in the assessment provided you can prove that the investment includes an element of life insurance. If you have such a product, please send us a photocopy of the policy documents showing that life insurance is included. You should clarify this with us as soon as possible, as inclusion/exclusion of this product in our assessment may affect the funding status and/or care home choice.

42. We will check the date the investment was bought and only disregard this if it is not seen as deprivation of capital. This is discussed later on in the policy.

Property

43. Any property, land, and buildings you own are types of capital and their value is included with your savings and investments when we work out your contribution. If you own a part share in a property, only the value of your share is included when we work out your contribution. In some circumstances part shares of property may not be included as capital.
44. We may decide not to include the value of your home if there is someone still living in your home. This is called a disregard and could include:
- a) your husband, wife, or partner
 - b) a relative over 60
 - c) a relative under 16 who you support financially
 - d) relative who is disabled
 - e) a divorced or estranged partner who is a single parent with a dependent child
 - f) the person who looked after you before you moved into the care home if they had given up their own home to move in and care for you.
45. In these instances we will request evidence of the above including how long someone has been living in your home. If we have disregarded your property or your share in a property, you must advise us if you are planning to sell the property or change the title.
46. We would expect you to receive your share of the net proceeds from the property sale and therefore a financial reassessment may be required. We would expect that if your property were sold and another property is purchased, you would still own the same share and any residual funds will be split accordingly.
47. If property maintenance/renovation is unmanageable it is your responsibility to consider other options e.g., sell the property. We cannot subsidise the maintenance or renovation of the property.

Disregards

48. The value of the property can be disregarded where:
- a) Your partner is continuing to reside in the property.
 - b) A relative, over 60 years old, will continue to reside in the property.
 - c) A relative, aged under 16 years who is dependent on the property being maintained by you and continuing to reside in the property.

- d) A relative who resides in the property is incapacitated.
- e) In certain circumstances, discretion may be applied if a carer has given up their own home to care for you.

TARIFF INCOME

- 49. If your total savings and investments are between an upper and lower limit (see here for current limits) you will contribute all your weekly income except your personal allowance.
- 50. You will also pay £1 a week extra for every £250 or part of £250 you have between these 2 limits. This is called tariff income.

Assessment

Interim assessment

- 51. If you have savings and investments above the upper capital threshold and/or own a property you will meet the full costs of your care (after allowing for any free personal and/or nursing care payments). If you don't fall into this category then we will do an interim assessment when you first move to the care home. This allows us to work out the minimum amount you will be asked to contribute whilst the financial assessment is completed.
- 52. We will confirm the outcome of this interim assessment in writing, making clear what you will pay.

Final assessment

53. Your contribution will be calculated depending on your own unique circumstances. As a rule of thumb, the table below summarises the level of contribution you will be asked to make, based on the level of your income and capital.

Assessment	Contribution based on
Savings and investments below a lower limit but do not own a property	total assessed income LESS personal allowance
Savings and investments between a lower and upper limit but do not own a property	total assessed income LESS personal allowance PLUS tariff income
Savings and investments above upper limit and/or own a property	full cost of care home fees LESS any entitlement to free personal and nursing care

54. The amount you pay will reduce as your savings reduce, provided they are spent on acceptable expenditure. For information on expenditure that we do not accept to reduce your savings please see depriving yourself of capital section. When your savings reach the lower limit you will no longer pay a weekly charge from your savings, but you will still pay a contribution from your income.

12-week funding

55. If you have savings and investments of less than the upper limit and own a property, you may be entitled to 12-week funding. The information required to complete this assessment is included in the financial data collection form (see above).
56. For the first 12 weeks of your stay, we will pay the care home up to the national care home rate, including any free personal care or free personal and nursing care payments, and you will pay an assessed client contribution based on your income and savings, excluding the value of your home.
57. 12-week funding is subject to a financial assessment, and we can only pay up to the national care home rate less a client contribution. This funding is only available for the first 12 weeks of your stay.

58. If you sell your home within the 12-week funding period, you will be responsible for the full cost of your care, less any free personal care or free personal and nursing care payments, from the date of the sale.
59. From week 13 your home will be taken into account when determining your contribution, whether or not your it has been sold.

Interim funding definition

60. Interim funding is a short-term loan from the Council to fund part of your care costs until your property is sold. You can apply for interim funding of your care home fees when your capital (excluding the value of your home) falls below £8,000 and any 12-week funding has ended.
61. You are not automatically entitled to interim funding. To be considered for this you must make an application to us in writing. Your property must be on the market for sale, you must be the legal owner of the property and the Council must be satisfied that the property is suitable for lending purposes.
62. You will need to provide us with a copy of the home report. We will place a charging order on the property as security for the loan and you will be responsible for the legal costs associated with this. Under interim funding, you will pay an assessed contribution towards your care based on your income and savings. The Council will pay the balance of the fees up to the national care home rate. If the care home charges more than the national care home rate, you will have to make your own arrangements with the care home to meet the extra costs.
63. You must supply financial information to allow a financial assessment to be completed. The interim funding loan will be repaid from the sale of your property or from your estate.

Deferred payment agreement definition

64. A deferred payment agreement is a loan from the Council to fund part of your care costs. You can apply for a deferred payment agreement when your capital (excluding the value of your home) is below the lower capital threshold and any 12-week funding has ended. This type of loan is usually requested if you do not wish to sell your property immediately.
65. You are not automatically entitled to a deferred payment agreement. To be considered for this you must make an application to us in writing. You must be the legal owner of the property and the Council must be satisfied that the property is suitable for lending purposes.
66. You will need to provide us with confirmation of the valuation of the property. We will place a Charging Order on the property as security for the loan and you will be responsible for the legal costs associated with this (around £600). During the Deferred Payment term, you will pay an assessed contribution towards your care

based on your income and savings. The Council will pay the balance of the fees up to the national care home rate. If the care home charges more than the national care home rate, you will have to make your own arrangement with the care home to meet the extra costs.

67. You must supply financial information to allow a financial assessment to be completed. The deferred payment loan will be repaid from the sale of your property or from your estate.
68. It is up to you to advise the private care home that you are applying for interim funding or a deferred payment. You should also discuss with the private care home regarding deferring the difference between your agreed rate and the national care home rate if applicable.

Savings upper limit

69. When the total value of your savings and investments is approaching the upper limit you must ask us for a financial review. This is known as a new threshold and you can request a review by emailing hsc.financialassessment@edinburgh.gov.uk or by phoning 0131 529 5900.
70. During the financial review we will ask you for evidence of all the capital you held at the date of your admission to the care home, all the income you have received since being in care and all the care fees paid. We will also ask for details of personal expenditure. If we are satisfied that you have spent your income (excluding mobility benefits) and capital on care home fees and up to £3,500 a year on personal expenditure, then we will help you with your care home fees.
71. From the date we calculate that you are eligible for help, you will pay an assessed contribution based on your income and savings and we will pay the balance of the fees up to national care home rate. If you are in a more expensive home that does not accept our national care home rates then you will need someone who is willing and able to pay the extra costs for as long as you stay there, or in some circumstances, you may have to move to a different home.
72. If we are not satisfied that you have used your income and capital on care home fees we will investigate further. We will accept that half of your occupational or personal pension is given to your husband, wife, or partner if they continue to live at home. Please note, this does not apply to your state pension. If you own a property, you will not be eligible for help unless we disregard the property from the financial assessment.

OUTGOINGS

73. As part of our financial assessment process most of your income will go towards paying for your care, therefore you should review any outgoings you have to ensure that you are able to pay your assessed contribution towards your care home fees. This means you will need to consider your current outgoings such as direct debits for rent, council tax and TV/phone packages etc, as many of

these may need to be cancelled or have a period of notice given. If you have an outstanding debt from living in the community, such as a store card or loan, you may need to contact the creditor and reduce your debt repayments to a manageable amount as these repayments will need to come from your personal allowance. The council cannot support repayment of these debts by offering a disregard of your income in your financial assessment.

74. You will be able to keep a specified amount for personal expenses. This is called the personal allowance. This allowance is to cover any day-to-day personal expenses, such as cigarettes, clothing, newspapers etc. as all other costs regarding food, gas and electricity will be met by the care home.

Other relevant points

Respite

75. If you are cared for at home by family or friends, they are your carer. Your carer takes responsibility for your care. Respite is provided to give your carer a break from caring duties. The care charge will be waived if respite is to give the carer a break.
76. Where respite is required and this is for your care needs, there will be a charge. The charge for adult respite provision within a care home setting is a standard charge based on the minimum income guarantee minus a weekly personal allowance.

Palliative care

77. Under certain and very specific circumstances, charges may be waived for end-of-life care in a care home. To qualify for this the following criteria must **all** be met:
- a) over 65 years of age
 - b) malignancy with life expectancy less than 12 weeks
 - c) non-complex health care needs that can be fully managed by community services
 - d) in hospital and unable to go home
 - e) discharged from hospital to specifically commissioned end of life beds
78. If the acute palliative care service determine that all the criteria above are met then charges can be waived for a maximum of 12 weeks.

Reassessment

79. We will review your charges every year to include any increases in costs or any changes to your income or savings. You can ask us to review your charges at any time.

Change in financial circumstances

80. If you are a self-funder in receipt of free personal/nursing care and your capital is depleting, you are advised to contact the Partnership when capital reaches £10,000 above the upper threshold (see appendix 3 – residential allowances and charges).
81. We will then complete a new financial assessment to ensure you are still contributing the right amount towards your care. This assessment will take all changes in financial circumstances into account.

Paying your bills

82. If you are a resident in a private care home (ie one not owned and operated by the City of Edinburgh Council), they will talk you through your payment options including any third-party contribution, if/where applicable.
83. We will make any payments free, including for free personal and nursing care you are entitled to directly to the care home.
84. If you are a resident in a City of Edinburgh Council owned care home, we will send you an invoice for the care home cost less any free personal care or free personal and nursing care payments you are entitled to. We will also send you information on our invoicing process.

Any periods you are not living in a care home

85. You will continue to be charged for any period(s) you are not living in a care home. This includes any stays in a hospital. Your free personal care or free personal and nursing care payments stop after 14 days, and you will be expected to pay the full costs. Payments will start again when you return to the care home. Please discuss with the care home and come to an agreement on a permanent discharge date as the care home may charge a notice period.

Depriving yourself of capital

86. It is common to want to pass on savings and other capital such as your home to your children or others. However, before deciding to transfer your home or capital you should consider the following points:
- a) If you have moved an asset or capital out of your name it does not necessarily mean that you will receive financial help from us. When deciding if you are entitled to financial help, we will ask you if you have ever owned property.

- b) We do checks on transfers, and we will regard a transfer of capital as deliberate if you have transferred it to someone else so that you are more likely to qualify for financial help.
 - c) If we find that you have deliberately deprived yourself of capital to avoid paying care home fees (including to reduce tariff income), we will assess you as if you still own it; we call this 'notional capital'. We will include the value of this capital when we work out your contribution and we will not fund your care costs until your notional capital plus your actual capital falls below the upper limit (see appendix 3).
 - d) There are no time limits on how far we can go back when considering if you have deliberately deprived yourself of capital. However, we usually consider transfers that have taken place up to seven years before you move to a care home.
 - e) If you gave away capital within six months of you needing residential care, or whilst you were in care, we can ask the people who received it to pay for your care.
87. We will also look for other ways you might have deliberately deprived yourself of capital, such as:
- a) a lump-sum payment has been made to someone else (for example, as a gift or to repay a debt for someone else)
 - b) a lot of money has been spent on something (for example on an expensive holiday)
 - c) money has been spent on third party top-up care home costs
 - d) the title deeds of a property have been transferred to someone else
 - e) money has been put into a trust which cannot be revoked
 - f) money has been changed into another form that we would normally disregard (for example, personal possessions)
 - g) capital has been reduced by living extravagantly (for example, following a much higher standard of living than you could normally afford)
 - h) capital has been used to buy an investment bond with life insurance
88. We consider each case individually and on its own merit. There may be several reasons why you transferred capital assets and we will consider each of them. We will decide if paying care fees was a significant factor in your decision to transfer capital and if it was your intention to deliberately deprive yourself of the capital to get help with care fees. We will also consider the timing of any transfers of capital and the circumstances leading up to the transfer.

89. Our decision will be based on the available evidence including:
- a) How healthy you were at the time of the transfer and any medical evidence.
 - b) Whether the need for care or the move to a care home was foreseeable at the time of the transfer of the capital.
 - c) What explanation you can give for the transfer of the capital other than to intentionally deprive yourself of available capital to pay for care. If you gift capital to a family member or a long-term carer then we look for the reasons behind the gift.
90. As we treat each case individually, we cannot make a statement about what you can spend your capital on before you can receive assistance with care fees. However, we will make every effort to be reasonable.

If you disagree with our decision

91. You can challenge our assessment or our decision not to fund care home fees due to deliberate deprivation of capital by contacting us.
92. We will make every effort to communicate with you and we will meet with you to explain our decision(s). You have the right to ask for a meeting with us at any stage in this process and we will make every attempt to resolve your complaint.
93. If you remain unsatisfied you can make a formal complaint to our complaints team, which we must investigate and respond to within 28 days. You can get information about making a complaint [here](#).
94. While your complaint is being investigated, we will charge you based on your income and your capital, excluding any capital transfers that are under challenge. However, if your complaint is not upheld or supported then we will charge you based on your income and capital including capital transfers from the date you requested funding.
95. If you are not satisfied with the outcome of the complaint procedure, you can contact the Scottish Public Services Ombudsman.
96. If you think that a decision was made without us properly following the law, you can apply to the courts for a judicial review using the help of a solicitor.

CONTRIBUTING TO YOUR CARE

Website information:

1. Non-residential charges and allowances
2. Examples of non-residential contribution calculations
3. Residential charges and allowances
4. Examples of residential contribution calculations

NON-RESIDENTIAL CARE

Non-residential charges with effect from 1 st April 2024	
Service	Charge
Community alarm	1 pendant - £6.39 per week 2 pendants - £8.31 per week Enhanced Alarm - £9.26 per week
Homecare, care at home and care and support	£22.94 per hour
Day centre for over 65s	£10.50 per day towards lunch and transport
Day centre for under 65s	£3.86 per meal

Personal Allowances
with effect from 1st April 2024

Single person	£273 per week
Couple	£417 per week

Minimum Income thresholds
with effect from 1st April 2024

	Income support personal allowance	disability premium	Buffer 25%	Minimum income charging threshold
Single person	£84.80	£39.85	£31.16	£156.00
Couple	£133.50	£56.80	£47.52	£238.00

Taper is:
 30% of the first £20 of excess income, plus
 50% of the second £20, plus
 70% of any remaining

To help you work out your contribution we have included some worked examples

Example 1

Mark is over 65 and lives on his own. He has £14,000 in savings and each week he receives £195.60 from his state pension and guarantee credit.

Mark receives 10 hours per week care at home, 4 of which are non-personal care.

His service costs 4 x £22.94 = £91.76 per week.

Income	
State pension	£159.30
Guarantee credit	£36.30
Sub total	£195.60
Savings (add £1 for every £500 of capital over £10,000)	£8.00
Total assessed income (A)	£203.60
Allowable weekly expenses	
Council tax	£4.58
Available income (A)	£199.02
Allowances	
Personal allowance	£273.00
Total (B)	£273.00
Weekly income which is subject to charge (A)-(B)	-£73.98
Assessed weekly charge	£0.00

As Mark's assessed weekly charge is zero, he will not pay anything towards the four hours of chargeable service.

Example 2

Louise is over 65 and lives on her own. She has £11,468.90 in savings and receives £365.45 from benefit income each week.

Louise receives 28 hours per week care at home, 10.5 of which are non-personal care. Her service costs $10.5 \times £22.94 = £240.87$ per week.

Income			
Guarantee credit			£164.45
Severe disability allowance			£106.00
Disability living allowance care (middle)			£68.10
Disability living allowance care (low) - disregarded			£26.90
Sub total			£338.55
Savings (add £1 for every £500 of capital over £10,000)			£3.00
Available income (A)			£341.55
Allowances			
Single personal allowance			£273.00
Total (B)			£273.00
Weekly income which is subject to charge (A)-(B)			£68.55
Apply taper (30% of the first £20 plus 50% of the second £20 and 70% of the remainder)			
30% of first	£20.00 =	£6.00	
50% of second £20	£20.00 =	£10.00	
70% of balance	£28.55 =	£19.98	
Total	£68.55	£35.98	
Assessed weekly charge			£35.98

Louise pays £35.98 because the actual cost of £240.87 is higher than her assessed weekly charge of £35.98 per week.

RESIDENTIAL CARE

Residential allowances and charges with effect from April 2024	
Personal allowance	£34.50 per week
Capital threshold	lower threshold - £18,500 upper threshold - £29,750
Free personal care (residential)	£248.70 per week
Free personal care (nursing)	£111.90 per week

To help you work out your contribution we have included some worked examples

Example 1

George is over 65, has £10,250 in savings and has an income of £201.05 from his pension and pension credit.

He will pay £168.40 per week towards his care home costs.

Income	
State pension	£156.20
Pension credit (guaranteed)	£44.85
Total (A)	£201.05
Allowances	
Personal allowance	£34.50
Total (B)	£34.50
George's contribution is (A-B)	£166.55

Example 2

Elizabeth is over 65 and has an income of £155.62 from her pension and pension credit.

She has savings of £20,500. Her tariff income from capital is calculated as the amount of capital she has over the lower threshold, divided by £250.

Elizabeth will pay £134.00 per week towards her care home costs.

Income	
State pension	£134.25
Pension credit (guaranteed)	£18.50
Pension credit (savings)	£2.87
Sub total	£155.62
Tariff income from capital of £22,250 ($£22,250 - £20,250 = £2,000$ divided by £250)	£8.00
Total (A)	£165.62
Allowances	
Personal allowance	£34.50
Savings credit disregard	£2.87
Total (B)	£36.37
Elizabeth's contribution is (A-B)	£129.25