A guide to paying for ADULT SOCIAL CARE SERVICES
arranged by Suffolk County Council 2018/19.
Unlike services provided by the NHS, most adult social care services are not free of charge. This means that when Suffolk County Council help you to arrange care and support services, or give you money to arrange your own services (a direct payment), you will have a financial assessment to work out how much you will have to pay towards the cost of your services. This is worked out using your income and any savings or capital that you have.

Suffolk County Council arranges a wide variety of care services including:

- Care in a residential or nursing care home
- Care in your own home
- Short term care from a reablement service (this may be free of charge for a maximum of six weeks)
- Care in a day care centre
- A direct payment so you can arrange your own care
- An individual service fund
- Special equipment to make your life easier (this is normally free of charge)
- Community based support services
Before we can arrange services for you, you will be assessed by a member of our Adult and Community Services staff. You can ask for this by ringing Customer First on 0808 800 4005. The person doing the care assessment will work out how much money you will have available to spend on your care and support. This is called a personal budget. If you are not in a residential or nursing care home, you can normally choose to have your personal budget as a direct payment or an individual service fund or you can ask for the services you need to be arranged on your behalf by the Council. If you are living in care home then the Council will need to arrange this for you.

The person from the Council who is arranging a care will give you a financial assessment form AF1. The information you give us on this form allows us to work out how much you will have to pay towards the cost of your personal budget.

We ask you to return your AF1 form within 21 days of it being given to you.

You will also need to send us proof of some of your income, and your bank statements for the past twelve months.
What is the Homefirst reablement service?

Reablement is a short term, intensive programme of support which aims to help you to keep and/or regain independent living skills that you may have lost after a period of time in hospital, or due to a significant loss of confidence or a significant reduction in your ability to self-manage day to day living.

Home First reablement support can last for a very short period of time, or for some customers for up to six weeks. The length of reablement will vary according to a plan which will be agreed with you. This plan will be reviewed weekly as a minimum, and often daily. The reablement period may last for up to a maximum of two weeks but may be shorter depending on your individual circumstances. Reablement services are free of charge for a maximum of six weeks, but your services will become subject to a charge as soon as they end if sooner than this.

How much you pay towards the cost of the service will be worked out in your financial assessment.

The financial assessment form AF1

If you are unable to fill in your financial assessment form and do not have any one who can help you to do this, you can phone us on 01473 264544 to ask for help, or you can ask for a visit from one of our specialist officers who will help you. The visiting officer will also check that you (and your family carer if you have one) are getting all of the welfare benefits that you are able to get, and they can help you to make a claim for any benefits that you are missing out on.

They will ask to see copies of things like bank statements and council tax and rent bills so it is helpful if you could have these ready for them.

The visiting officer should also be able to tell you approximately how much you will have to pay towards the cost of your care at the visit if they have all the information from you that they need to work this out.
SECTION ONE:
How we work out how much you have to pay towards the cost of your care and support services?

If you are going into a residential or nursing care home you need to read the information in section two of this booklet.

We ask you for information about your income, savings and capital. We use this information to work out how much you have to pay towards your personal budget.

You have the right to decide not to tell us about your income and savings, but if you do not we will assume that you have savings over £23,250 (2018/19 rate) and you will be charged for the full cost of your care and support services.

If you have savings or capital over £23,250 you will have to pay the full cost of your personal budget. The value of the home that you normally live in is ignored when we work out how much you have to pay towards the cost of your care and support services unless you are living in a residential or nursing care home.

Some income is ignored when we work out how much you have to pay – for instance any earnings that you may have or Disability Living Allowance or Personal Independence Payment mobility component.

Please give us details of all your income and savings and capital even though we may ignore some of these.

If your savings and capital are under £23,250 we will work out how much you have to pay towards the cost of your personal budget based on your income. We also use an assumed income of £1 for every £250 in savings that you have over £14,250 (2018/19 rates).
This is how we work out how much you have to pay towards the cost of your care and support services

If you are under the age where you would be able to claim Pension Credit and your weekly income is under £138.44, or if you are over the Pension Credit eligibility age (currently between age 63-64) and your weekly income is under £203.75, you will not have to pay anything towards the cost of your care and support services. If your income is over these amounts please go to the calculator below.

If you think that you have extra expenses that are directly related to your illness or disability that are more than £25 per week, please tell us about these on the AF1 form, as we may be able to ignore these when we work out how much your assessed charge will be.

<table>
<thead>
<tr>
<th></th>
<th>Under pension age</th>
<th>Over pension age</th>
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<tbody>
<tr>
<td>Total weekly income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>minus</td>
<td>£138.44</td>
<td>£203.75</td>
</tr>
<tr>
<td>minus</td>
<td>£25.00</td>
<td>£25.00</td>
</tr>
<tr>
<td>Minus any council tax/rent/mortgage costs not paid by benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>= weekly assessed charge</td>
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After the financial assessment has been done you will be sent a letter telling you how much, if anything, you will have to pay towards the cost of your care and support services, and about how and when charges will be collected.

We will normally expect you to pay us your charge by direct debit. The AF1 contains a form for you to use. If you choose to take your care and support services as a direct payment or an individual service fund (ISF) we will deduct your contribution from the money that we pay you, and you are responsible for paying this money into the bank account that you use for your direct payment or to your ISF provider.
What will happen if I need to cancel my care service for a short time. Will I still have to pay?

You will normally be expected to pay your assessed weekly charge unless you have given the person who provides your care at least **14 days** notice that you will not be needing the service **except** in the following circumstances:

- Your service provider does not provide you with a service, or arrives over one hour after the arranged time and you have had to make alternative arrangements for your care or

- You are admitted to hospital in an emergency or

- You are admitted to a residential care home for temporary respite care in an emergency or

- You are away from home or unable to attend day care services due to the death of a close family member or

- Other exceptional circumstances where we agree with you that it would be unreasonable to charge you for the service.

If you give your service provider 14 or more days notice, or any of the other circumstances shown above apply, please let the financial assessment and charging team know. Their phone number is **01473 264544**.

If none of the other circumstances apply you will be expected to pay your normal weekly charge. This is because the Council still has to pay your service provider.
If I have given away money or property is this counted in my financial assessment?

Money or property that you have given away or passed ownership to another person will normally be treated as though you still own it if it appears that this was done in order to improve your position with regard to getting help with the cost of care & support services. This could also apply to money that has been invested in such a way that it will be ignored in the financial assessment.

I believe that the NHS should be paying for my care under a ‘continuing healthcare’ arrangement.

Do I still have to pay?

If you are in dispute with the NHS about a ‘continuing healthcare’ decision you must still pay the money for your care that is provided by the Council. We will have worked out how much you have to pay based on an assessment of your income and savings. If you are successful in your case you should be able to get back the money that you have paid to us from the NHS.

What happens if I cannot afford to pay towards the cost of my care?

Under certain exceptional circumstances, we may be able to reduce or waive charges if you cannot afford to pay them. Ask the person arranging your care for further information or write to the Adult and Community Services team manager and explain why you cannot afford to pay.

What will I pay for equipment?

Equipment for daily living

We do not usually supply simple low cost items below a total value of £10 as we expect you to buy them yourself. However, if you need more complex equipment we will normally loan it to you. There is no charge for these loans. You may also be able to get a one off direct payment to help you purchase some simple equipment such as grab rails. We do not charge you for this service for items that have a value of less than £1000.
Paying for your care in a residential or nursing home

Do I have to pay for a short term/respite stay in a residential or nursing care home?

If your stay in a residential or nursing care home is definitely only for a short period of time (normally less than 14 days), for example while your normal carer is on holiday or in hospital, you will still have a financial assessment to see if you need to pay anything towards the cost of this care. Your contribution towards the cost of your short stay in a care home will be worked out in the way described in this section.

How will you work out what I have to pay for my residential or nursing home?

The contribution that you pay towards the cost of your residential or nursing care home is worked out using the information that you give us in form AF1.

If you have capital or savings over £23,250 you will have to make arrangements to pay the care home yourself until your savings fall below this figure. This figure normally includes the value of any property that you own.

When is the value of my home ignored?

- When you are only in a care home temporarily
- For the first twelve weeks that you are living in a care home
- If your spouse, civil partner or long term partner is still living in the property that you jointly occupied before you moved in to a care home
- If a close relative who is aged over 60 or incapacitated is living in the property and they did not move in in order to get the value of the property ignored
Other exceptional circumstances by agreement with the Director of Adult Social Care.

The value of property that you own that does not fall in to these categories will be treated as capital, and will normally mean that your savings/capital will be over £23,250 and you will have to pay for your care home as a private customer. If you do not wish to sell your property to pay for your care service, ask the person who is helping you to arrange your care to give you some information about how we might be able to help you using a deferred payment arrangement.

Some income such as earnings and Disability Living Allowance or Personal Independence Payment mobility component are ignored. If you have an occupational pension and you are married or in a civil partnership with someone who is staying in your normal home, we ignore 50% of your occupational pension when we work out how much you will have to pay towards the cost of your care home.

You should tell the Department of Work and Pensions (DWP) if you get Attendance Allowance; Disability Living Allowance care component or Personal Independence Payment daily living component and you go into hospital or move in to a care home. These benefits will stop after 28 days if we are helping with the cost of your care home.

When we work out how much you have to pay towards the cost of your care home, you are normally left with £24.90 per week (2018/19 rate) of your income as a personal allowance. The rest of your income becomes your contribution towards the cost of your care home.

You should pay this money direct to your care home. They will agree with you how you should do this.
Will Suffolk County Council pay for the care home that I choose to live in?

If we have decided that you need to live in residential or nursing care home, but you choose to live in a home which costs more than the amount that the Council would normally pay, and we can show that there are suitable homes that are reasonable for you to move to that cost less than the home that you are choosing, then you will need to find a friend, relative or charity who are able to pay the additional cost for you. This is called a ‘third party top-up’.

If you cannot find someone to help you to meet the extra cost, you may have to move. You cannot top up out of your own income and/or savings unless you own a property and are within the 12 week property disregard period or enter into a ‘deferred payment arrangement’.

Please ask the person who is arranging your care to give you a copy of our factsheets about 12 week property disregards and deferred payment agreements.

The Council will normally try to find a care home that will accept their contract rates. These are given in the table below:

**Adult and Community Services standard weekly contract rates 2018/19**

<table>
<thead>
<tr>
<th>Private (independent) homes</th>
<th>£</th>
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</thead>
<tbody>
<tr>
<td>Residential care – standard rate</td>
<td>£510</td>
</tr>
<tr>
<td>Residential care – special needs</td>
<td>£605</td>
</tr>
<tr>
<td>Nursing care – standard rate</td>
<td>£510</td>
</tr>
<tr>
<td>Nursing care – special needs</td>
<td>£605</td>
</tr>
</tbody>
</table>

Any free nursing care component of your care (called the FNC) will be met by the NHS, and will be paid direct to the Care Home. The figures quoted above do not include this contribution from the NHS.
What if I have a query about my charges?

If you have a query about the money that you are being asked to pay towards your personal budget contact the direct payment and charging team on 01473 264544, if your query is about charges for residential or nursing care contact the financial assessment team on 01502 674530.

If you are not satisfied with the explanation that you are given you can ask for the decision to be looked at again. The person that you speak to will explain how to do this.

This information is for general guidance only and is not a full statement of Suffolk County Council’s charging policy for Adult and Community Services.

You should not make any financial decision solely on the basis of information contained in this booklet.

For further information, please contact Customer First on 0808 800 4005.