

London Borough of Barnet

Residential and Nursing Care Contributions Policy

April 2025

YOUR | LIFE,
YOUR | CARE,
YOUR | CHOICE.

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1. Purpose

This document sets out Barnet Council's policy on charging for adult social care residential and nursing services and how financial assessments are undertaken, The policy is made in accordance with the legal requirements as set out in:

- The Care Act 2014
- The Care and Support (Charging and Assessment of Resources) Regulations 2014
- Care Act Statutory Guidance.

2. Background

2.1 From April 2016, Sections 14 and 17 of the Care Act 2014 give local authorities powers to charge for care and support services provided to people who draw on care and support. The Care Act 2014 repealed much of the previous adult social care statutes as well as associated regulations and guidance. Under the Care Act 2014 the laws with regards to assessment, eligibility, and provision of care and support services as well as charging for care and support and financial assessments were consolidated into a single legal framework.

2.2 Councils are permitted under section 14 of the Care Act 2014 to charge for the cost they incur in meeting social care and support needs under the Act¹. The Care Act 2014 also sets out when not to make a charge and that a financial assessment of the person's resources must be undertaken to determine what they can afford to contribute towards the cost of their care.

2.3 The Care Act 2014 makes provision for regulations to be made to set out the detail with regards to financial assessments and how to calculate what a person can afford to contribute towards the cost of their care and support, in particular, how different types of income and capital should be treated and the minimum amount of income a person must be left with after charging. These are set out in the Care and Support (Charging and Assessment of Resources) Regulations 2014 (the Regulations).¹

2.4 Further detailed guidance about charging is set out in the Care and Support Statutory Guidance (CASSG) issued under the Care Act 2014 by the Department of Health and Social Care. (This guidance was last updated August 2021). Barnet Council must have regard to this guidance when assessing contributions towards cost of care.

2.5 The Residential and Nursing Care Contributions Policy applies to those who receive support from Barnet Council to obtain residential and nursing care services.

¹ These are the rules that the council applies to work out if an adult is entitled to have care and support arranged by the council. From April 2015, these rules are set by the Government so that they apply throughout England.

3. Policy Principles

3.1 Barnet Council's approach to charging for care and support needs is underpinned by the following key principles, which are also set out in the statutory guidance:

- It is fair and equitable to all residents by ensuring there is a consistent approach to financial assessments, eligibility determinations and charging so those with similar needs or services are treated the same and anomalies between different care settings are minimised.
- It ensures that people are not charged more than is reasonably practicable for them to pay.
- Information on charging is clear and transparent. Providing information and advice in suitable formats to ensure that people or their representatives can understand what they will be charged and how that charge was calculated

3.2 These principles are universal and will apply to all individuals subject to a financial assessment.

3.3 This policy sets out how the Council will financially assess people who draw on residential and nursing care services as well as how people who draw on residential respite care will be charged.

4. Legal Framework

The Residential and Nursing Care Contributions Policy is set out in line with the following statutory and regulatory context:

- 4.1. Sections 14-17 and 69-70 of the Care Act 2014 which sets out a single legal framework for charging people drawing on care and support and carers for their Council-funded care and support. These sections of the Act covers the legislation for charging those in residential and nursing care and individuals receiving care and support provided in the resident's own home.
- 4.2. A local authority has the discretion to choose whether to charge people drawing on care and support and carers under section 14 of the Care Act 2014 following a person's needs assessment or a carer's assessment. Where a Council does charge it must follow the Care and Support (Charging and Assessment of Resources) Regulations 2014 and have regard to the Care and Support Statutory Guidance 2014.

Regulations: <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

Guidance:

[Care and support statutory guidance - GOV.UK](#)

- 4.3. Barnet Council's policy to charge for residential and nursing care services is consistent with the Care Act 2014, the Care and Support (Charging and Assessment of Resources) Regulations and Care and Support Statutory Guidance (CASSG) as referred to above.
- 4.4. Section 17 of the Care Act 2014 also imposes a duty on local authorities to carry out a financial assessment where they charge for care services.
- 4.5. The detail regarding financial assessments and how to calculate contributions, in particular the treatment of income and capital is set out in the Care and Support (Charging and Assessment of Resources) Regulations 2014. Further guidance is provided in CASSG.
- 4.6. Adults receiving social care and support will be financially assessed in accordance with this policy and will be required to make a contribution towards the cost of their care if their financial resources are above financial limits.
- 4.7. When the financial assessment is completed a written notification of the assessment will be given to the adult to whom it relates in accordance with section 17(6) of the Care Act. This notification will explain how the assessment was carried out, the charge (contribution), the frequency and if there is any change to the assessed contribution.

A review of a person's ability to meet the cost of any charges will be conducted annually or sooner if there is a change in circumstances or as requested.

5. Scope

- 5.1 This policy sets out how the Council will financially assess people drawing on care and support from residential and nursing care services as well as how people supported through residential respite or a temporary stay in a care home will be charged.
- 5.2 It specifies what types of income and capital will be included in the financial assessment and which will be disregarded, either in full or partially. It sets out how to treat property in the financial assessment, when it is appropriate to disregard and when it is necessary to include it.
- 5.3 This policy relates to the assessment and charging for residential, nursing and respite care only. Any other community-based services will be assessed in line with the Council's Community Care Contributions Policy for non-residential care services.

6. Mental Capacity

- 6.1. When undertaking a financial assessment, the Council will establish whether the relevant adult has mental capacity to take part in the financial assessment.
- 6.2. If an adult lacks capacity (as determined on the basis of a proper assessment), the Council will find out if the person has an Enduring Power of Attorney, a Lasting Power of Attorney for Property and Affairs, a Lasting Power of Attorney for Health and Welfare, a Property and Affairs Deputyship under the Court of Protection or any other person dealing with that person's affairs (for example someone given Appointeeship by the Department for Work and Pensions for the purpose of benefits payments).
- 6.3. If the person lacks capacity to give consent to a financial assessment and the person does not have any of those individuals mentioned in paragraph 6.2 above, the appointment of a Property and Affairs Deputyship may be required. A family member could apply for this to the Court of Protection. In the absence of any family members Barnet Council may make the application.

7. Financial Assessment Process

- 7.1. The financial assessment will determine the person's ability to pay; that is whether they will be required to pay all of, part of, or nothing towards the cost of care and support.
- 7.2. Ability to pay is assessed by taking into account a person's capital, income and personal allowances. The Council will consider individual circumstances in assessing the amount a person can afford to contribute.
- 7.3. The financial assessment calculates a person's contribution towards their cost of care and support in accordance with the Care and Support Statutory Guidance (CASSG). A contribution towards their Personal Budget will be 100% of their notified maximum assessed contribution, up to the value of their Personal Budget and/or the cost of the service arranged or commissioned by the council. This is reviewed annually to reflect the costs to the council of providing these services.
- 7.4. Those that have savings / capital in excess of the upper capital limit as set out in paragraph 24 of Annex B of CASSG (see link below) or have been assessed to pay for the full cost of services will pay the full cost of any care services they receive. This is reviewed at least annually to reflect the costs to the council of providing these services.

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexB>

- 7.5. Where the person with financial assets above the upper capital limit asks the Council to meet their eligible needs, and it is anticipated that their needs will be met by a care home placement, the Council is not required to make these arrangements.
- 7.6. Those assessed as paying the full cost of any care services they receive who ask the Council to arrange their care and support will be charged an annual arrangement and administration fee in addition to the cost of the care itself. This fee amount may change in future years. The Council will ensure any changes are clearly communicated to affected residents and reflected on the Council's website:

<https://www.barnet.gov.uk/adult-social-care/money-and-legal-matters/adult-social-care-financial-support-us>

- 7.7. Contributions will be assessed against the value of a Personal Budget or the value of care services purchased by Barnet Council on behalf of the person receiving care. Contributions are generally collected for the actual care delivered.
- 7.8. Contributions will not be collected where there has been unavoidable cancellation of care (e.g., through hospitalisation) that results in care not being delivered for at least a week. In other cases, contributions may not be collected where care has been cancelled if reasonable notification of cancellation has been given either by the person receiving care or their representative.
- 7.9. If a person does not pay within the period specified on the bill, the Council will seek to recover the debt following its debt recovery procedures and the Adult Social Care Debt Management and Recovery Policy. Debt recovery procedures will follow the principles as set out in the Care Act 2014 and CASSG.

7.10. Nationally set thresholds

These change each year; the 2025/26 amounts are stated here:

Social Care Charging for Care and Support Guidance update – 2025/6:

[Social care - charging for care and support 2025 to 2026: local authority circular - GOV.UK](#)

Future changes will be stated on the Council's website here:

<https://www.barnet.gov.uk/adult-social-care/money-and-legal-matters/adult-social-care-financial-support-us>

- (a) Anyone with capital in excess of the nationally set upper capital threshold will be liable to pay the full cost of their care.

- (b) Anyone with capital below the nationally set lower capital threshold will have the capital disregarded in full in the financial assessment and the assessed contribution will be based on their income.
- (c) Tariff Income – where someone has capital in excess of the lower threshold and less than the upper threshold, we will include tariff income in their assessment. This is £1 for £250, so for example if someone has capital that is £1,750 above the lower threshold their financial assessment will include £7.00 per week in tariff income.
- (d) Personal Expense Allowance (PEA) – this is the weekly amount the Care Act stipulates individuals should be left with after their financial assessment.
- (e) Where an individual chooses not to disclose any financial details, or refuses to engage with the financial assessment process, the Council will assess that individual as liable to pay the full cost of their care.
- (f) Where a property will form part of an individual's financial assessment the value of the property will be disregarded for the first 12-weeks of the placement. This is called a 12-week property disregard and during this period the individual's contribution towards the cost of their care will be based on their income and other non-property capital, such as savings or shares.
- (g) A 12-week property disregard will only apply during the first 12-weeks of care in a residential or nursing setting.

8. Date from which Contributions are payable

- 8.1 Contributions are effective from the **first day care is provided**. The council will always endeavour to bill for services as close to the start date as possible. As part of the assessment process the individual receiving social care services will be notified that they may be charged for the service, depending on the outcome of their financial assessment. The individual will also receive information on charging and example charges when they receive a request for financial information.
- 8.2. If the Council becomes aware that a person is in receipt of income or savings not previously declared within their financial assessment, then the council reserves the right to backdate any amended contribution to the date the person started to receive this additional income.
- 8.3. When we review a contribution as part of the annual review process, any change to contribution will be applicable from the Monday following the Review.

9. Financial Assessment Procedure and Calculation of Contribution

9.1 Those receiving chargeable care services will be expected to complete a finance declaration form to assess contributions. Appropriate assistance to complete the declaration form will be offered to those that need help to complete the form.

9.2 Only the person receiving care will be assessed for contributions. Normally the Council will only take into account income, savings and capital that are in the name of the person receiving care, except when they can reasonably be considered to have access to savings or income, other than earnings, which is held in a partner's name, joint names or with someone else.

9.3 Following the financial assessment, a notification letter will be sent informing the person receiving care and/or their carers of the amount that they have to contribute, details of how the contribution has been calculated and will be collected along with the contribution that the council is making.

9.4 The financial assessment team will make reasonable attempts to contact the person to undertake a financial assessment. If after 14 days the financial declaration form has not been returned, or if the financial assessment is still incomplete due to lack of information or supporting documentation being provided by the person, and no justification or explanation is provided, then they will be assessed as being required to contribute the whole amount of their Personal Budget (or cost of care received as set by the Council). If the person later provides this information, then the assessed contribution may be re-adjusted (at the Council's discretion).

9.5 Where a person chooses **not** to complete the financial assessment form and / or **not** disclose their finances it will be assumed that they are fully funding their own care and that the assessed financial contribution is the same as the Personal Budget or cost of care received (as set out in para 7.4).

9.6 Where the person chooses **not** to complete the financial assessment form and / or **not** disclose their finances it will be assumed that they have assets above the upper capital limit. As set out in para 7.5, if this person asks the Council to meet their eligible needs, and it is anticipated that their needs will be met in a residential or nursing home setting, then the Council is not required to make these arrangements.

9.7 Those who are assessed as having to make a contribution towards the cost of their care must pay the amount required. Where a person does not pay the amount required and does not engage with the council, then the council's debt recovery procedures and Adult Social Care Debt Management and Recovery Policy will apply.

10. Light Touch Financial Assessments

- 10.1. In some circumstances, Barnet Council may choose to treat a person as if a financial assessment had been carried out. In order to do so, Barnet Council must be satisfied on the basis of evidence provided by the person that they can afford, and will continue to be able to afford, any charges due. This is known as a "light-touch" financial assessment.

- 10.2. The main circumstances in which Barnet Council may consider carrying out a light-touch financial assessment are:
- Where a person has significant financial resources and does not wish to undergo a full financial assessment for personal reasons but wishes nonetheless to access Barnet Council support in meeting their needs. In these situations, Barnet Council may accept other evidence in lieu of carrying out the financial assessment and consider the person to have financial resources above the upper limit.
 - Residential Respite or a temporary stay at a care home – see section 11 for more information.
- 10.3. The Council may under some circumstances be satisfied that a person is able to afford any charges, this might include evidence that a person has:
- (a) Property, which is not their main home, that is clearly worth more than the upper capital limit set in CASSG, where they are the sole owner, or it is clear what their share is;
 - (b) Savings clearly worth more than the upper capital limit set in CASSG; or,
 - (c) Sufficient income left following the charge due.
- 10.4. Where Barnet Council is going to meet the person's needs, and it proposes to undertake a light-touch financial assessment, it will take steps to assure itself that the person concerned is willing, and will continue to be willing, to pay all charges due. It must also remember that it is responsible for ensuring that people are not charged more than it is reasonable for them to pay. Where a person does not agree to the charges that they have been assessed as being able to afford to pay under this route, a full financial assessment may be needed.
- 10.5. When deciding whether or not to undertake a light-touch financial assessment, Barnet Council will consider both the level of the charge it proposes to make, as well as the evidence the person is able to provide. It should also inform the person when a light touch assessment has taken place and make clear that the person has the right to request a full financial assessment should they so wish, as well as making sure they have access to sufficient information and advice, including the option of independent financial information and advice.
- 10.6. The Council will only seek formal valuations of properties, or shares of property, when the valuation we set in our assessment is queried by the people who draw on care and support or their financial representatives. In these instances, the Council will use the District Valuer Service to undertake these valuations.
- 10.7. As per section 8 paragraph 28 of the Care & Support Statutory guidance, (see link in Appendix 1 to view), the Council will assess individuals as possessing notional income, or capital, if we deem that an individual has wilfully disposed of those assets for purposes of fee avoidance.

- 10.8. The Council will not be setting a maximum percentage of disposable income to be used in the financial assessment as allowed in Section 8 Paragraph 47 of the Guidance. The only allowances provided in the financial assessment will be the PEA and, where appropriate, the savings disregard.

11. Respite and temporary stays at care home

11.1 Following an assessment of a person's eligible care and support needs, a decision may be taken that the person would benefit from a short-term or temporary stay in a care home (either residential or nursing). This could be for many reasons such as providing respite care to a carer or to provide a period of more intense support owing to an additional, but temporary, care need.

11.2 A short-term resident is defined as a person whose need to stay in a care home is not expected to exceed an 8-week period. A temporary resident is defined as a person whose need to stay in a care home is intended to last for a limited period and where there is a plan to return home. The person's stay should not exceed 52 weeks. A decision to treat a person as a temporary resident must be agreed with the person and/or their representative and written into their care plan.

11.3 The financial assessment of what they can afford to contribute to the cost of their care will be based on the individual resources of the person. However, the authority will give regard to any partner or spouse remaining at home and ensure they are left with at least a basic level of income or pension credit to which they may be entitled.

11.4 In some cases, a person may enter a care home with the intention of a permanent stay but a change in circumstances could result in it being temporary. In such cases the person will be considered as temporary from the date of admission for the purposes of charging.

11.5 In some cases, a stay which was initially intended to be temporary could become permanent. If this applies, the financial assessment of the person as a permanent resident will be from the date that their care plan is amended and agreed with the person and/or their representative/s.

11.6 Charging

11.6.1 Residential Respite care services will be subject to a light-touch assessment rather than a full assessment or a non-residential care assessment. This means that there are set weekly rates for this care). This amount may change in future years. Where individuals declare that they have capital in excess of the upper capital threshold they will be charged the full cost of their respite care service, not the flat weekly rate.

11.6.2 There is a standard minimum charge for everyone for temporary stays in Residential care.

12. Pension Reforms

For the purposes of charging, Barnet Council will follow the guidance set out on the treatment of income and capital in Annexes B and C of CASSG and treat a person's assets accordingly. Where a person has chosen to withdraw funds from their pension and manage it directly, for example combining it with other assets rather than through a pension's product, this may be treated as capital under the rules laid out in CASSG Annex B.

13. Deferred Payment Scheme

13.1 Deferred Payments are where individuals with savings below the upper capital threshold but who own property worth in excess of the upper capital threshold can receive funding assistance from the Council as opposed to selling their property. This involves entering into a legally binding agreement which allows the Council to place a legal charge on the property to secure our interest while deferring a portion of the care fees against this charge.

13.2 Under the Care Act 2014, Deferred Payments must be offered to individuals who meet the criteria. Should an individual choose not to enter into a Deferred Payment agreement then the Council will cease funding after the 12-week property disregard and the individual will be liable to self-fund privately.

13.3 Deferred Payments will only be available to individuals in permanent residential care and property is the only acceptable form of security.

13.4 Entering into a Deferred Payment will incur an administration fee and interest throughout the life of the agreement. Details of these are available on request.

13.5 Further information can be found at: **Age UK - Paying for Care**
<https://www.ageuk.org.uk/information-advice/care/paying-for-care/>

14 Choice of Accommodation

14.1. The Council is required to ensure that there is choice and this means that, as a minimum, there is at least one option available, which is affordable within the person's personal budget. This however does not prevent the person's choice of alternative options where a top-up may be required. Usually, top-ups are to be paid by a third party but there are instances under which a first party top-up is allowed.

14.2. The Council will look to provide for a person's preferred accommodation, including within shared lives, supported living and extra care housing settings if appropriate subject to the

budget available. The most appropriate type of accommodation will be decided as part of the care and support planning process, and the choices available will only apply between providers of the same type.

- 14.3. The person's preferred accommodation must be available and the provider must be willing to enter into a contract with the Council to provide care within the individual's personal budget (unless a top-up fee is agreed with the Council and a top-up agreement is in place) on the Council's terms and conditions.

15 Top- Ups

- 15.1. Your care and support plan must include a personal budget if you are going to receive financial support from the local authority. This specifies the overall cost of meeting your needs, how much you must pay based on a financial assessment, and the remaining amount paid by the local authority, usually on a weekly basis. Your personal budget must be sufficient to meet all your eligible needs.
- 15.2. The Council must show there is at least one suitable care home available at your personal budget level that meets your care and support needs.
- 15.3. Additional payments, known as 'top-ups', must not be requested unless the local authority has shown your personal budget is sufficient to pay for at least one care home that can meet your care and support needs.
- 15.4. If a top up is required, then please contact the Customer Finance Team to request an application (Customer Finance Team Telephone Number: 020 8359 2238). In summary:
- (a) Top-ups will be allowed when the cost of an individual's preferred placement exceeds the weekly personal budget required to meet an individual's care needs, but only after the Council has carried out necessary checks to establish a third party's ability to make, and sustain, this payment, and after the customer has been advised to seek independent advice and guidance.
 - (b) If it is established that the third party is not in a financial position to make payment of the required top-up then the Council would assume responsibility for the full fee, net of the assessed client contribution, but only if another suitable placement whose cost does not exceed the weekly personal budget cannot be found.
 - (c) The preferred position on top-ups is that they are to be paid direct to the care home by the third party, if all parties agree to this.
 - (d) The Council will implement top-ups under alternative arrangements where circumstances warrant it or where a person, or service provider, has specifically requested such an arrangement. This would normally involve the top-up payments being paid to the Council.

- (e) Where the arrangement is for the top-up to be paid direct to the Council rather than the care home, the Council will insist on direct debit arrangements being entered into for payment of the top-up fees.
- (f) The Council will allow a resident to pay a top-up themselves (“a first party top-up”) where there is sufficient equity in the property to enable payment of both the deferred fees and the top-up for the foreseeable future, and one of the following circumstances applies;
- where they have a deferred payment agreement in place with the local authority.
 - where they are subject to a 12-week property disregard.
 - where they are receiving accommodation provided under S117 for mental health aftercare.
- (g) Where a person is benefiting from the 12-week property disregard and has chosen to pay a top-up fee from their capital resources between the upper and lower capital limits, the level of tariff income that applies during those 12 weeks is the same as it would be if the person were not using the capital to top-up.

15.5. Additional top-up information

The following points relate to how the Council administers top-ups;

- Top-up arrangements can only be put in place when the top-up fee is agreed between the person paying the top-up and the Council and there is a formal top-up agreement in place, signed by the person paying the top-up and a nominated representative of the Council, and top ups must be deemed as affordable;
- Top-up agreements must be in place before the person moves to their residential care home unless there are exceptional and urgent circumstances; and
- If top-up fees are not paid in accordance with the top-up agreement the individual could need to move to another residential home that would be suitable to meet their needs within their Personal Budget. As with any change of circumstances the Council will need to undertake a new assessment before considering this course of action, this will include assessment of the individual’s health needs and the person’s wellbeing.

16 Treatment of Capital and Income

16.1 In assessing what a person can afford to pay, Barnet Council will take into account the person's savings and other assets; this is known as the person's capital. There are different approaches to how capital is treated depending on whether a person is in a care home or receiving care and support in their own home. The main points are shown below; this is set out in more detail in Annex B of CASSG.

16.2 Where the person receiving care services has savings or other financial assets (capital) these will be taken into account in determining the level of income available to that person.

16.3 Property i.e. Buildings and Land are capital, whether in the UK or abroad.

16.4 Capital will include all forms of cash savings. The valuation method used will be as set out in Annex B of CASSG, and the value updated annually. Savings include:

- Money in bank or building society current and deposit accounts; income which is paid into an account becomes capital once the period over which it is taken into account as income expires
- Post Office / National Savings and Premium Bonds
- Individual Savings Accounts (ISAs) or Tax Exempt Special Savings Accounts
- Shares/investments
- Money owed by third parties
- Any other cash savings/capital.

(This list is not exhaustive)

16.5. Jointly held savings are divided equally in the financial assessment, unless evidence shows your share is unequal. Another exception is jointly owned property, where your actual share or beneficial interest must be taken into account.

16.6 The capital value of any other property or land owned or part owned by the person receiving care will be regarded as capital. For property jointly-owned with another person (apart from the main home), only a person's beneficial interest can be taken into account. All decisions about the treatment of property will be made in accordance with the statutory guidance. More details can be found in Annex B of CASSG:

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexB>

16.7 Residents whose savings (capital) are less than the lower capital limit as set by the Care Act 2014 are not expected to contribute from these savings but may need to contribute from their income. The lower threshold is set in statutory guidance and is updated annually. Capital above the lower threshold and up to the higher threshold is used to calculate an amount of 'tariff income'. This is calculated at the rate of £1 for every £250 or part thereof per week in accordance with statutory guidance.

16.8 The higher threshold is set by Government and reviewed annually.

16.9 Assessed capital/savings in excess of the higher threshold will pay the full cost of their Personal Budget or services received in their support plan (as applicable). 16.10 In some circumstances a person may be treated as possessing a capital asset even where they do not actually possess it. This is called 'notional capital'. Notional capital may be capital which:

- (a) would be available to the person if they applied for it;
- (b) is paid to a third party in respect of the person;
- (c) the person has deprived themselves of capital in order to reduce the amount of charge they have to pay for their care. The decision to treat a person as still having capital in such situations will be taken as per Annex D of CASSG (deprivation of assets). The timing of the disposal will be taken into account when considering the purpose of the disposal.

16.11 A person's capital should therefore be the total of both actual and notional capital. However, if a person has actual capital above the upper capital limit set in CASSG, it may not be necessary to consider notional capital.

16.12 Where the person receiving care is treated as having notional capital, the council will decide whether to recover the assessed contribution from the person receiving care or to recover the charges from a third party. Where the person has transferred the asset to a third party to avoid the charge, Barnet Council will follow the guidance laid down in CASSG regarding deprivation of assets.

16.13 Where a person has been assessed as having notional capital, the value of this must be reduced over time. Notional capital will be treated as reducing each week by the difference between the assessed contribution and the amount that would have been assessed as contribution had there been no notional capital.

16.14 Where support is requested on the grounds of capital funds depletion, the Council will only consider funding packages/placements from the point after both a financial assessment and needs assessment have been completed.

16.15 This means the Council will not automatically apply retrospective capital depletion dates once the care need alone has been assessed; the Financial Assessment must also have been completed. The date of capital depletion – when the Council starts to fund the care – will be the date of the final assessment (whether that be the care or financial assessment).

16.16 If someone's funds have depleted this potentially puts them at risk, therefore they would be a priority allocation for each assessment.

16.17 If the care home you reside in is no longer affordable within your Personal Budget, and you do not have someone who can pay third party top-ups on your behalf (see Section 14), you may need to move to another home.

16.18 The following types of Capital **will be disregarded** in full in financial assessments:

- a) Property in specified circumstances (see paragraph 34 of Annex B of Care and Support (Charging and Assessment of Resources) Regulations 2014 – Appendix 4);
- b) The surrender value of any: (i) Life insurance policy; (ii) Annuity.
- c) Payments of training bonuses of up to £200;
- d) Payments in kind from a charity;
- e) Any personal possessions such as paintings or antiques, unless they were purchased with the intention of reducing capital in order to avoid care and support charges (see Schedule 2 Paragraph 13 of Annex B of the Care and Support (Charging and Assessment of Resources) Regulations 2014 – Appendix 4);
- f) Any capital which is to be treated as income or student loans;
- g) Any payment that may be derived from:
 - (i) The Macfarlane Trust;
 - (ii) The Macfarlane (Special Payments) Trust;
 - (iii) The Macfarlane (Special Payment) (No 2) Trust;
 - (iv) The Caxton Foundation;
 - (v) The Fund (payments to non-haemophiliacs infected with HIV);
 - (vi) The Eileen Trust;
 - (vii) The MFET Trust;
 - (viii) The Independent Living Fund (2006);
 - (ix) The Skipton Fund;
 - (x) The London Bombings Relief Charitable Fund;
 - (xi) Scottish Infected Blood Support Scheme
 - (xii) An approved blood scheme (this is a scheme approved by the Secretary of State, or trust established with funds provided by the Secretary of State, to provide compensation in respect of a person having been infected from contaminated blood products)
 - (xiii) London Emergencies Trust
 - (xiv) We Love Manchester Emergency Fund
 - (xv) any payment made under or by a trust, established for the purpose of giving relief and assistance to disabled persons whose disabilities were caused by the fact that during their mother's pregnancy she had taken a preparation containing the drug known as Thalidomide, and which is approved by the Secretary of State (the Thalidomide Trust)
 - (xvi) the scheme established by the government for former British child migrants in response to the Investigation Report on Child Migration Programmes by the Independent Inquiry into Child Sexual Abuse published on 1 March 2018, made to a former child migrant
 - (xvii) any payment made for the purpose of providing compensation or support in respect of the fire on 14 June 2017 at Grenfell Tower
 - (xviii) any payment made by the Post Office or the Secretary of State for the purpose of providing compensation or support which is in connection with the failings

of the Horizon system, or otherwise payable following the judgment in Bates and Others v Post Office Ltd ((No. 3) “Common Issues”)

(xix) any payment made under the Windrush Compensation Scheme (Expenditure) Act 2020

(xx) any payment from a scheme established or approved by the Secretary of State for the purpose of providing compensation in respect of historic institutional child abuse in the UK

(xxi) any payment from the Victims of Overseas Terrorism Compensation Scheme established by the Ministry of Justice in 2012 under section 47 of the Crime and Security Act 2010

(xxii) any payment made under the Vaccine Damage Payments Act 1979

(xxiii) Lesbian, Gay, Bisexual and Transgender Financial Recognition Scheme

h) The value of funds held in trust or administered by a court which derive from a payment for personal injury to the person. For example, the vaccine damage and criminal injuries compensation funds;

(i) The value of a right to receive:

(ii) Income under an annuity;

(iii) Outstanding instalments under an agreement to repay a capital sum;

(iv) Payment under a trust where the funds derive from a personal injury;

(v) Income under a life interest or a life-rent;

(vi) Income (including earnings) payable in a country outside the UK which cannot be transferred to the UK;

(vii) An occupational pension;

(viii) Any rent. Please note however that this does not necessarily mean the income is disregarded. Please see Annex C for guidance on the treatment of income.

(i) Capital derived from an award of damages for personal injury which is administered by a court or which can only be disposed of by a court order or direction;

(j) The value of the right to receive any income under an annuity purchased pursuant to any agreement or court order to make payments in consequence of personal injury or from funds derived from a payment in consequence of a personal injury and any surrender value of such an annuity;

(k) Periodic payments in consequence of personal injury pursuant to a court order or agreement to the extent that they are not a payment of income and are treated as income (and disregarded in the calculation of income)

(l) Any Social Fund payment;

(m) Refund of tax on interest on a loan which was obtained to acquire an interest in a home or for repairs or improvements to the home;

- (n) Any capital resources which the person has no rights to as yet, but which will come into his possession at a later date, for example on reaching a certain age;
- (o) Payments from the Department of Work and Pensions to compensate for the loss of entitlement to Housing Benefit or Housing Benefit Supplement;
- (p) The amount of any bank charges or commission paid to convert capital from foreign currency to sterling;
- (q) Payments to jurors or witnesses for court attendance (but not compensation for loss of earnings or benefit);
- (r) Community charge rebate/council tax rebate;
- (s) Money deposited with a Housing Association as a condition of occupying a dwelling;
- (t) Any Child Support Maintenance Payment;
- (u) The value of any ex-gratia payments made on or after 1st February 2001 by the Secretary of State in consequence of a person's, or person's spouse or civil partner's imprisonment or internment by the Japanese during the Second World War;
- (v) Any payment made by a local authority under the Adoption and Children Act 2002 (under section 2(b)(b) or 3 of this act);
- (w) The value of any ex-gratia payments from the Skipton Fund made by the Secretary of State for Health to people infected with Hepatitis C as a result of NHS treatment with blood or blood products;
- (x) Payments made under a trust established out of funds provided by the Secretary of State for Health in respect of persons suffering from variant Creutzfeldt-Jakob disease to the victim or their partner (at the time of death of the victim);
- (y) Any payments under Section 2, 3 or 7 of the Age-Related Payments Act 2004 Age Related Payments Regulations 2005 (SI No 1983);
- (z) Any payments made under section 63(6)(b) of the Health Services and Public Health Act 1968 to a person to meet childcare costs where he or she is undertaking instruction connected with the health service by virtue of arrangements made under that section;
- (aa) Any payment made in accordance with regulations under Section 14F of the Children Act 1989 to a resident who is a prospective special guardian or special guardian, whether income or capital.

- (bb) All compensation received by Armed Forces or formers (e.g. Armed Force Independent Payments, Mobility Supplement, and Survivors Guaranteed Income Payments (GIPs)) is disregarded in full.

Treatment of Income

16.19 The following types of Income **will be taken into account** in full in financial assessments:

- (a) Attendance Allowance, including Constant Attendance Allowance and Exceptionally Severe Disablement Allowance
- (b) Bereavement Allowance
- (c) Carers Allowance
- (d) Disability Living Allowance (Care component)
- (e) Employment and Support Allowance or the benefits this replaces such as Severe Disablement Allowance and Incapacity Benefit
- (f) Income Support
- (g) Industrial Injuries Disablement Benefit or equivalent benefits
- (h) Jobseeker's Allowance
- (i) Maternity Allowance
- (j) Pension Credit
- (k) Personal Independence Payment (Daily Living component)
- (l) State Pension (m) Universal Credit (n) Working Tax Credit.

16.20 Some types of Income **will be disregarded** in full in financial assessments.

16.21 Examples include:

- a) Disability Living Allowance or Personal Independence Payment mobility components (although not care or daily living components)
- b) War Widows' and Widowers' special payments
- c) Regular charitable and voluntary payments (e.g. by a relative)
- d) Child Tax Credit or Guardian's Allowance
- e) Personal injury trust payments
- f) Awards of certain damages
- g) Discretionary payments made to people infected with hepatitis C by contaminated blood products
- h) Any earnings
- i) War Pension Scheme payments paid to injured veterans with the exception of any allowance for constant attendance allowance which is awarded in cases of significant disability.

16.22. Some types of income are **partly disregarded**. Examples include:

- a) £10 a week of War Widow's, War Widower's, War Disablement Pension paid to non-veterans
- b) 50 per cent of your private/occupational pension or retirement annuity that is paid to a spouse or civil partner and they do not live in the same care home
- c) if you receive, or your income is too high for, Pension Credit Savings Credit, up to a maximum of £6.95 a week (amount is set by Department of Health and Social Care each year)

These amounts may change and will be updated in CASSG Annex C:

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexC>

17. Deprivation of Assets and Debts

17.1 Where Barnet Council believes it has evidence to support the contention that a person has deliberately tried to avoid paying for care and support costs through depriving themselves of assets (capital or income) the guidance in Annex E of CASSG will apply. In such cases Barnet Council may either charge the person as if they still possessed the asset or, if the asset has been transferred to someone else, seek to recover the lost income from that person. The council cannot recover more than the person gained from the transfer.

17.2 Where a person has accrued a debt, the Council will seek to recover the debt following its debt recovery procedures and the Adult Social Care Debt Management and Recovery Policy. Barnet Council may use its powers under the Care Act to recover that debt having regard to all the circumstances of the case. County Court proceedings could be initiated if other reasonable alternatives have been exhausted without success.

18. Reviews, Appeals and complaints

If a person believes that:

- there has been a mistake in the assessment; or
- the assessment has not taken full account of their circumstances

they can lodge a request for a review under the Council's procedure set out in Appendix 9.

19. Contact information

Further advice and guidance is available from the Customer Finance Team on 020 8359 2238 or via email: financial.assessments@barnet.gov.uk.

20. Review of Policy

- 20.1. This Residential and Nursing Care Contributions Policy will be reviewed by the Executive Director for Communities, Adults and Health in consultation with the Cabinet Member for Adult Social Care every 2 years or as required by policy or legislation changes.
- 20.2. Minor amendments will be agreed by the Executive Director of Communities, Adults and Health, for example changes to nationally set thresholds.
- 20.3. Individual client contributions will be reviewed on an annual basis and will be uplifted in line with the cost of care paid by the Council, subject to approval as part of the annual budget report to Cabinet.
- 20.4. The Council will update the charge rates each April and will ensure any changes are clearly reflected on the Council's website.

Appendix 1

APPENDIX 1 – Section 8 Care and Support (Charging and Assessment of Resources) Regulations 2014 - Charging and financial assessment

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#Chapter8>

Appendix 2

APPENDIX 2 – Section 9 Care and Support (Charging and Assessment of Resources) Regulations 2014 - Deferred Payment Agreements

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#Chapter9>

Appendix 3

APPENDIX 3 – Section 20 Care and Support (Charging and Assessment of Resources) Regulations 2014 - Continuity of Care

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

Appendix 4

APPENDIX 4 – Annex B Care and Support – Treatment of Capital (Charging and Assessment of Resources) Regulations 2014

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexB>

Appendix 5

APPENDIX 5 – Annex C Care and Support – Treatment of Income (Charging and Assessment of Resources) Regulations 2014

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexC>

Appendix 6

APPENDIX 6 – Annex D Care and Support – Recovery of Debts (Charging and Assessment of Resources) Regulations 2014

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexD>

Appendix 7

APPENDIX 7 – Annex E Care and Support – Deprivation of Assets (Charging and Assessment of Resources) Regulations 2014

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexE>

Appendix 8

APPENDIX 8 – Annex F Care and Support - Temporary and short-term residents in care homes (Charging and Assessment of Resources) Regulations 2014

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#AnnexF>

Appendix 9

Review, Appeals and Complaints Procedure

You can request a review of your assessed contribution for any of the following reasons:

- The council have used incorrect dates or amounts.
- The council have incorrectly calculated the contribution.
- There are exceptional personal circumstances concerning your financial situation, which means that you believe it is unreasonable for you to pay the assessed contribution.

Reasons that are not directly related to your financial circumstances will not generally be considered as grounds for review.

Requests for a review should be made **within 20 working days** of being notified of the outcome of the financial assessment. This period can be extended if there are exceptional circumstances.

The Team Manager (Financial Assessments) or nominated officer will review your case and take into account the issues you have raised. The Team Manager will write to you with the outcome of the review within 20 working days, they will also explain what to do next if you remain unsatisfied with this response. Where the Team Manager is unable to respond within this time period you will be advised accordingly.

If you are dissatisfied with the Team Manager's (or nominated officer's) review of your assessed charge, you can appeal to the Head of Customer Finance (or nominated senior manager). Appeals should be made within 20 working days of being notified of the outcome of your review. This period can be extended if there are special reasons.

If you believe that your assessment has been calculated correctly and that all the information contained in it is correct, but that the assessed contribution is still unreasonable, then you can Appeal directly to the Executive Director of Communities, Adults and Health (or nominated senior manager). Appeals should be made to the Executive Director of Communities, Adults and Health (or nominated senior manager), who will respond to you within 14 working days.

Complaints

If you are dissatisfied with the decision on your appeal by the Executive Director of Communities, Adults and Health (or nominated senior manager), you can make a written request to have the matter considered as a formal complaint under the department's complaints procedure.

A person may wish to make a complaint about any aspect of the financial assessment or the fact that the local authority has chosen to charge. The authority will provide information regarding their complaint's procedure along with advice on how to lodge a complaint.

In circumstances whereby the authority has failed to provide a suitable remedy for a complaint, the person is entitled to refer their complaint to the Local Government and Social Care Ombudsman for

investigation (<https://www.lgo.org.uk/adult-social-care/>). The Ombudsman has no legal power to force the local authority to follow its recommendations, however it is good practice for the authority to carefully consider any recommendations made.

Complaints about the level of charge levied by a local authority are subject to the Care and Support complaints procedure as set out in The Local Authority Social Services and NHS Complaints (England) Regulations 2009.

Activity	Reason	Lead Officer	Target Working Days
Review	Incorrectly calculated Exceptional personal circumstances Additional expenditure, etc.	Team Manager (Financial Assessments) or nominated officer	Review within 20 working days of financial assessment notification or of date of relevant decision
Appeal	Dissatisfied with outcome of Review <i>Appeals Procedure – where the financial assessment is wholly correct, but the person receiving care still believes it unreasonable</i>	Appeal to Head of Customer Finance (or nominated senior manager)	Appeal within 20 working days of date of review decision
Complaints	Dissatisfied with outcome of Appeal	Communities, Adults and Health Complaints Lead	Response within 25 working days