

CONTRIBUTION POLICY - April 2012

Royal Borough of Windsor and Maidenhead

Policy for Calculating an Individual's Contribution to their Personal Budget

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Section 1 – Context

1.1 The Department of Health has introduced a policy known as “Self Directed Support” whereby all Councils in England are required to change how they deliver care and support to their residents. Under this policy residents will receive a Personal Budget to meet their eligible social care needs. A Personal Budget may be managed by the Council on behalf of the resident or managed directly by the resident or their financial representative.

1.2 A resident may have financial resources of their own with which they can contribute towards their Personal Budget. If the resident’s financial resources are less than their Personal Budget then the Council will fund the difference by topping-up the resident’s own resources to the level of their Personal Budget. When a resident or their representative is managing their Personal Budget, this top-up may be made by a Direct Payment to the resident.

1.3 This document sets out how the Council will assess a resident's financial resources, and calculate their ability to contribute towards or fund their Personal Budget.

1.4 A resident will use their personal budget to purchase services such as homecare, day care, overnight residential respite services of up to 42 days per annum, meals on wheels and other support services that they require in order to meet their care needs, or they may use this budget to meet their requirements in other ways that suit their individual circumstances.

1.5 This policy does not currently include residents in temporary Residential and Nursing Care who have exceeded their annual overnight residential respite allowance, or who are in permanent Residential or Nursing care. These residents are required to be financially assessed under The Department of Health’s ‘Charging for Residential Accommodation Guide’ (CRAG). For more detail regarding the financial contribution for overnight residential respite that is included in the Personal Budget please see paragraph 2.9.

1.6 This policy does not include residents who are yet to enter the “My Care, My Choice” self-directed support process, such as residents in receipt of short term rehabilitation services, or initial care packages.

Statutory Framework

1948 National Assistance Act
Local Authority Social Services Act 1970
HASSASSA 1983
Nov 2001 & Sept 2003 ‘Fairer Charging Guidance’

Consideration of

Disability Discrimination Act
Human rights Act

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Section 2 - The Financial Assessment Process

2.1 When will the Financial Assessment process commence?

2.1.1 The financial assessment process will begin once a resident's care assessment has been completed and it is confirmed that they meet the Council's eligibility criteria. At this stage the resident will be informed of the need to complete a financial assessment and provided with guidance notes explaining the Council's contribution policy and the financial assessment process. The Council's Assessment and Intervention's Team will contact the resident within 5 working days following completion of the care assessment in order to arrange for the financial assessment process to begin.

2.2 How will a Financial Assessment be carried out?

2.2.1 Residents will be offered assistance with the completion of the financial assessment form either by phone or by a home visit. Where appropriate the resident will be offered welfare benefits advice. The Assessment's and Interventions Team may help with the completion of benefit applications including Pension Credit, Income Support, Employment and Support Allowance, Attendance Allowance, Disability Living Allowance, Carers Allowance, Housing Benefit and Council Tax Benefit.

2.2.2 Following the completion of the financial assessment, the residents will be advised in writing how much they are required to contribute towards the cost of their social care Personal Budget, along with a statement of how the contribution has been calculated. In some cases residents may be required to fund in full their Personal Budget. Residents have a right to be re-assessed should their circumstances change.

2.3 The Role of the Care Manager and the Financial Assessment Team

2.3.1 The Care Manager will ensure that the resident is provided with guidance and advice when completing the Care Assessment.

2.3.2 The Assessments and Interventions Team will be responsible for ensuring that the resident is fully supported in the understanding and completion of the financial assessment form.

2.4 Waivers

2.4.1 Where a resident believes they cannot afford to pay their assessed contribution, they may contact the Council for consideration to waive part or all of their assessed contribution. Where the resident is unable to act for themselves a request to waive may come directly from carers, staff, an advocate or others involved in the support of that resident.

2.4.2 Council social care staff who consider a waiver is appropriate should contact their Head of Service/ Unit Manager. If the Head of Service/ Unit Manager considers that there are reasonable circumstances to reduce or waive the contribution then these must be recorded in writing. This decision should be reviewed on an annual basis.

2.4.3 Each agreed waiver will be recorded in an appropriate log held by the Finance team.

2.5 Annual Review

2.5.1 The financial assessment will be reviewed annually to take account of increases in benefits and other incomes which generally take place in April.

2.5.2 Where the resident is in receipt of benefits paid at standard rates the new up-rated amount will be substituted. Benefits paid at non standard rates will be increased by the same inflator used by the Department of Work and Pensions (DWP) to up-rate benefits.

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2.5.3 For other component parts of the financial assessment, such as occupational pensions, disability related expenditure, rent and council tax, a percentage increase linked to Retail Price Index (RPI) will be applied.

2.5.4 Changes resulting from the annual up-rating or the application of a revised 'buffer' will apply from the date assigned to these changes.

2.5.5 An explanation and full details of the revised assessment will be sent to the resident, who will be asked to check the figures and contact the Assessment and Intervention's Team if they are not an accurate representation of the resident's circumstances.

2.6 Reviews and Changes in a resident's circumstances

2.6.1 Changes in a resident's financial position that may affect the amount of their contribution are required to be reported to the Assessment and Intervention's Team. This specifically includes receipt of a new benefit, other changes of more than £5 a week to their income, changes of more than £5 in weekly expenditure, and changes of more than £1000 to savings.

2.6.2 Residents may inform lesser changes at any time and should do so promptly if they believe that a change will result in a reduction to their financial assessment and wish that to be applied immediately.

2.6.3 Residents who are financially assessed will be asked to complete a new statement of their financial circumstances every 2 years. At which point a further welfare benefits check can also be provided.

2.6.4 Following notification of a change or a review visit, a new financial assessment will be completed using the information provided.

2.6.5 If the revised assessment results in an increase in the weekly contribution of £5 or less, the resident will be notified of the revised charge and the charge not backdated

2.6.6 If the revised assessment results in an increase in the weekly contribution of more than £5, the resident will be notified of the revised contribution and this will be backdated to the date the change in circumstances occurred.

2.6.7 If the revised assessment results in a decrease in the contribution, this will be applied from the date of notification.

2.6.8 As a general rule decreases in contributions will not be backdated. However each case will be considered on its merits. The discretion to backdate will be exercised by the manager of the Assessments and Interventions Team with the agreement of the Adults & Communities Finance Partner.

2.7 Appeals against the Financial Assessment

2.7.1 If the resident disagrees with their financial assessment they should contact the Assessment and Intervention's Team who will explain how the contribution was calculated, and try to resolve any concerns.

2.7.2 If the resident is still dissatisfied they should use the Adult Care Services complaints procedure. If this does not resolve the complaint, residents should contact the Local Government Ombudsman.

2.7.3 More information regarding the complaints procedure can be found in the Adult Care Services leaflet 'Your Guide to making a Compliment, Comment or Complaint'

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2.8 Exempt Services

2.8.1 The following services are exempt from a contribution:

- After-care services provided under Section 117 of the Mental Health Act 1983.
- Advice and assessment.
- Services provided to sufferers of Creutzfeldt Jacob Disease (CJD).
- Occupational Therapy Equipment

For those residents requiring assessment for social care support, consideration will be given as to whether they have immediate needs, or their care needs can be met subsequent to the self-directed support process. For those who have immediate care needs there may be some uncertainty if they are entitled to intermediate care services, which are free of charge for up to 6 weeks. For simplification, all services allocated in these circumstances will be free of charge for the first 2 weeks. If the criteria for intermediate services is met the resident will continue to be exempt from charge for up to a total of 6 weeks.

2.8.2 RBWM has used its discretionary powers to not ask for contributions to the following services:

- Carer's Services provided directly to the Carer as a result of a carers assessment.
- Exceptionally, such as where a resident has refused a care assessment, services provided to the "cared for" following a carer's assessment.

2.9 Community and Overnight Residential Respite Care

- Community Care Respite and Overnight Residential Respite for up to 42 days per annum will be funded within the Personal Budget, and the weekly assessed contribution will apply.

2.10 Delays in completing the Financial Assessment

2.10.1 If a resident unreasonably delays completing the financial assessment they will be required to contribute to the full cost of their Personal Budget, until a financial assessment is completed. If a financial assessment results in a lower contribution, consideration will be given to refunding the difference depending on the circumstances of the case. A Direct Payment cannot be made unless a financial assessment is completed.

2.10.2 'Unreasonable delay' will be determined on a case by case basis, but as a general rule the Council will expect the individual or representative to be available for a visit within 2 weeks of contact by an Assessment and Intervention's Team Officer. Where the individual or representative prefers to complete the statement of financial circumstances by post then it is expected that this will be returned within 2 weeks.

2.10.3 If further information is required then it is expected that this will be provided within 2 weeks of the date it was requested.

2.11 People who refuse to claim benefits to which they are entitled.

2.11.1 There will be occasions where a resident is clearly entitled to an additional benefit. If, following advice from the Council's Assessment and intervention's Team, a resident refuses to claim a benefit within a reasonable time scale, the Council may calculate the resident's contribution as if the resident were in receipt of this benefit.

2.11.2 This will take effect from the date the resident was advised to apply for the benefit or would first become entitled to that benefit, whichever is the later.

2.12 Projected Contribution Assessments

2.12.1 Where the Assessment and Intervention's Team assists with the application for a new benefit, the Assessments and Interventions Team will complete an additional financial assessment based on the anticipated result of the new benefit application. The resident will be notified of the effect the new benefit will have on their contribution. The increased contribution will be backdated to the date the Personal Budget commenced or the date of award of the new

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benefit, which ever is later. Payment of the increased contribution will not be requested until confirmation is received that the new benefit has been awarded.

2.13 Self - Deprivation

2.13.1 If a resident knowingly reduces their capital by, for example excess spending or gifting, in order to avoid paying their contribution, this will be taken into account when carrying out the assessment. The contribution may be calculated as if the resident still holds the capital that had been given away or disposed of.

Section 3 – The Financial Assessment

3.1 Overview

3.1.1 The financial assessment compares income against specified weekly expenditure allowances to determine the income available to contribute towards social care costs. See table.

Capital & Savings*		+ Income
Individuals Income& Benefits		+ <u>Income</u>
Total		+Total Income
Less:	Allowances	- Allowance
	Disability Related Expenses	- Allowance
	Allowable Housing costs	- <u>Allowance</u>
		= Max Weekly Contribution

Capital Limits and Savings tariffs are shown on Appendix B

3.2 Capital and Savings

3.2.1 General

3.2.1.1 A resident who has capital/ savings in excess of the maximum figure as set out in the Charges for Residential Accommodation Guidance (CRAG) will not be eligible for financial support from the Council. Please see Section 3 'Eligibility for financial support' for more details.

3.2.1.2 For couples, twice the CRAG maximum capital limit will be applied to determine if the resident is above the CRAG limits and not eligible for financial support

3.2.1.3 There is no requirement to ascertain additional details of the resident's financial circumstances once it is established that their capital/savings exceed CRAG limits.

(See Appendix B for the current CRAG limits).

3.2.1.4 When the CRAG capital limits change, the Assessments and Intervention's Team will write to all people whose services are arranged by the Council and who have capital over the CRAG limit, to advise them of the new limits.

3.2.1.5 Capital and savings can include cash, funds held in a bank, building society and Post Office accounts, saving bonds, premium bonds, stocks and shares, ISAs, Peps, and the value of land or property (other than the resident's main residence). This list is not exhaustive.

3.2.1.6 Ex-gratia payments made to former Far Eastern prisoners of war and payments made under the Vaccine Damage Payment scheme will be disregarded entirely as per guidance in CRAG.

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3.2.1.7 The treatment of different types of capital/savings will be in strict accordance with the guidance set out in CRAG.

3.2.2 Property

3.2.2.1 The value of property not deemed the resident's main residence (For example, if they own two properties) will generally be counted as capital. However it may be disregarded in certain circumstances as defined in CRAG.

3.2.2.2 Where a resident moves out of a property that they own, into alternative accommodation, the owned property will no longer be regarded as the main residence, and will be considered as a capital asset for the purposes of the financial assessment.

3.2.2.3 Where the resident's contribution towards the cost of their social care increases due to the inclusion of this asset within the financial assessment, the increased contribution may be deferred until the property is sold, or for 6 months from the date of the change of address, whichever is sooner.

3.2.2.4 If the resident moved into the alternative accommodation on a trial basis, and returns to their owned property within 6 months of moving out, then the Council may waive this increased contributions if requested by the resident.

3.2.3 Home Reversion Schemes (HRS)

3.2.3.1 Under these schemes a home-owner will transfer the ownership of all or part of their home to a commercial or 'not for profit' organisation. Depending on the terms of the HRS, the funds released may be paid to the home-owner in full on the date of the transfer, or may be translated into an annuity, or a combination of these.

3.2.3.2 Where an HRS results in the home owner receiving an annuity or where payments are made by instalments be they for life or for a fixed period then all such payments will be treated as income, unless any of the following provisions set out in this paragraph apply.

3.2.3.3 Where certain detailed conditions set out in CRAG relating to annuities are met, then specified amounts comprised within the gross income from the annuity can be disregarded, namely, the component of the gross income which represents the weekly amount of interest on the loan (net or gross of income tax, where applicable).

3.2.3.4 Where any part of the income or capital derived from an HRS plan is used to fund capital developments or disability related works to the property in question, the income so used may be disregarded from the financial assessment. The resident must produce evidence to this effect in order to claim such a disregard.

3.2.3.5 Where the released funds are paid in instalments the total value of all the instalments outstanding will be added to the total value of all other savings held by the resident.

3.2.3.6 If this total exceeds the current CRAG upper capital limit, the instalments will be treated as income and taken into account over a period equivalent to that which it represents, e.g. a payment due to be made calendar monthly is taken into account for a calendar month.

3.2.3.7 If this total is less than the current CRAG upper capital limited, each instalment will be treated as capital.

3.2.3.8 In exceptional circumstances a resident's capital may be fully or partly disregarded where they have a particular need for their savings. This discretion is with the Director of Adult and Community Services and the Head of Finance, and is delegated to the relevant service manager and the Resources Directorate Chief Services Accountant.

3.3 Calculating an individual's Income

3.3.1 Periodical payments and income accruing from personal injury compensation capital, including where personal injury capital is held in trust or administered by a Court, will be taken

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fully into account in the financial assessment. This will also apply to periodical payments or income accruing from personal injury compensation capital resulting from an injury at birth.

3.3.2 The following income will always be disregarded in the contribution assessment;

- Earnings
- Statutory Sick Pay, Statutory Adoption Pay and Statutory Maternity Pay or Allowance
- the mobility component of Disability Living Allowance
- the night time element of the care component of Disability Living Allowance and Attendance Allowance unless night time care is provided by Adult Care Services
- War disablement pension and War Widows Pension in line with local Housing Benefit scheme, however any Constant Attendance Allowance paid will be included
- Charitable Income and Voluntary Payments
- Savings Credit element of Pension Credit
- Working Tax Credit
- A partner's disability related benefits
- Sub tenants – apply disregards as per CRAG
- Boarders - apply disregards as per CRAG
- Winter Fuel and Cold Weather payments

NB – carers allowance paid to a carer will not be taken into account in the resident's financial assessment.

3.3.3 Individuals whose capital/ savings are less than the maximum figure as set out in CRAG (See Appendix B) but above the CRAG lower limit (See Appendix B) will have a tariff income assumed calculated in accordance with the rules specified in CRAG. The capital limits will be doubled where the resident applying for social care financial support is a member of a couple.

3.3.4 Currently income of £1 a week is assumed for every £250 of capital above the CRAG lower limit.

3.3.5 All other income will be taken into account within the assessment along with any tariff income from savings/capital and unless stated otherwise in this document, the treatment of such income will follow the Department of Health's CRAG.

3.4 Allowances

3.4.1 To calculate a weekly allowance figure the following should be allowed according to the residents circumstances.

- Basic Income Support or Pension Guarantee Credit (Applicable amount plus most premiums but not including Severe Disability Premium), plus a percentage buffer on this sum of not less than 25%.
- Assessed levels of disability-related expenditure
- Housing Costs

3.5 Disability Related Expenditure

3.5.1 Allowances will be made for disability-related expenditure in accordance with the Disability Related Expenditure scheme, attached at Appendix C.

3.5.2 The overall aim is to allow for reasonable expenditure needed for independent living by the disabled resident. Items where the user has little or no choice other than to incur the expenditure, in order to maintain independence of life will normally be allowed.

3.5.3 Costs arising simply from a matter of personal choice, where a reasonable alternative is available at lesser cost, will not normally be allowed.

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3.5.4 The care manager or other professional may be required to confirm the need for disability-related expenditure.

3.5.5 Evidence of expenditure will be requested and there will be a requirement for evidence to be provided at each review.

3.5.6 Items for which a Social Fund Community Care Grant has been paid will not be allowed in the assessment.

3.5.7 In some cases only a percentage of expenditure may be allowed if it is joint expenditure. If the expenditure is due to the fact that a carer is not able to undertake the task due to the amount of time they are caring then 100% of the expenditure will be allowed.

3.6 Allowable Housing Costs

3.6.1 The following may be allowed depending on the resident's circumstances.

- **Rent** (Net of Housing Benefit) where a resident is paying rent to a relative, an allowance for this amount will not automatically be allowed. This situation could arise when a resident is living in a relative's house and is being charged rent, or where a relative rents a house to the resident. Housing Benefit principles will be followed to determine whether a commercial arrangement is in place, in which case an allowance for housing costs will be considered.
- **Council Tax** (Net of Council Tax Benefit)
- **Mortgage** (Net of amounts paid through Income Support or Pension Credit). The insurance element of an endowment mortgage will be allowed. If the resident is repaying arrears as part of their regular mortgage payment or is making an increased payment to reduce the length of their mortgage, then the additional amount will not be allowed except where the resident has no choice but to make these payments. Where the resident is receiving payment for their mortgage via their Income Support or Pension credit, but are required to make additional payments to their lender, these additional amounts are allowable as housing costs.
- **Service Charges** - An allowance may be made for service charges that must be paid for under the terms of the lease and which relate to the provision of adequate accommodation. Accordingly an allowance may be made for items such as management fees, insurance, repairs and cleaning of communal areas.

Allowances will not be made for items that are considered normal day to day living expenses e.g. heating, laundry or meals. An allowance for eligible service charges will only be considered if they are not already covered by Housing Benefit, Income Support, Pension Credit, or Supporting People.

Where allowances are made they will be made in line with Housing Benefit regulations.

- **House Building Insurance** for owner occupiers - an allowance will be made for building insurance. No allowance can be made for contents insurance.
- **Home Maintenance Allowance** for owner-occupiers - (£11.00 per week for 2009/10). This will not be reduced proportionately for joint-owner occupiers except where an individual assessment is made for a resident who is a member of a couple.
- **Non –Dependant Deductions** - A Non-dependant is someone who lives in another person's home on a non-commercial basis. If the householder claims Housing Benefit or Council Tax Benefit, a non dependant deduction is made against these benefits, the amount of which depends on the non-dependant's financial circumstances. It is expected that the non dependant

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will make a contribution equal to the amount of the non dependant deduction to the householder towards the rent and/or council tax. Where a resident is living as a non-dependant and a non-dependant deduction has been made, then on application an allowance equal to the non dependant deduction(s) should be allowed as a Housing Cost for that non-dependant.
(effective from 26/07/10)

3.6.2 NB: Where any housing cost includes items which are considered normal living costs e.g. water charges, fuel costs, food etc, and then this element should not be treated as a housing cost. Housing Benefits guidance should be followed.

3.7 The Maximum & Minimum Weekly Contribution

3.7.1 The assessment will compare the calculated weekly income against the specific weekly expenditure allowances to determine the income available to contribute towards the social care costs. This identifies the maximum weekly contribution the resident can make.

3.7.2 The Council also sets a minimum weekly contribution below which a contribution will not be collected. Effective from 27/09/10, the minimum weekly contribution that will be collected will be £1.50

3.8 Eligibility for financial support

3.8.1 National guidance states that a Council may refuse financial support in respect of social care to any individual with savings above the capital limit set out in the Charging for Residential Accommodation Guidance. The CRAG capital limit is shown in Appendix B

3.8.2 People with savings above the CRAG capital limit will be responsible for funding their care and support in full without financial support from the council

3.8.3 Where a resident is deemed not able to manage their own social care arrangements, the Council will arrange and commission services on their behalf. The individual will be required to contribute the full cost of these services.

3.9 Assessment of Couples

3.9.1 Where the resident requiring social care is living as a member of a couple, the Council is entitled to consider in individual cases whether each spouse has an equitable right to the capital/savings and income of their partner. RBWM will consider in each case whether one partner has an equitable right to their partner's resources. Where they live together as part of a household then this will be an indication that they have such an equitable right. For the purposes of the financial assessment the Council's starting point will be the assumption that half of the couple's total capital and income is available to each partner and a declaration of the total capital and income of both members of the couple will be required. If either partner can show evidence of a different intention the Council will consider this in assessing liability to contribute.

3.9.2 An Individual Assessment for a member of a couple

3.9.2.1 Under this assessment half of the couple's total income is taken to be available to the person. A declaration of the total income of both members of a couple will be required in line with the equitable rights principles described above.

3.9.2.2 Disability Related Benefits e.g. Attendance Allowance, Disability Living Allowance and the Severe Disability component of Income Support and Pension Credit are payable specifically to cover extra expenses incurred by the person to whom they are payable. Consequently a partner's Disability Related Benefits will not be considered available to the resident applying for social care financial support.

3.9.2.3 Allowances will be based on:

- The appropriate single person's basic income support or pension guarantee credit,
- The resident's disability related expenditure
- Half of any housing costs.

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3.9.2.4 If treating the resident as single person results in a nil contribution, no further assessments will be necessary.

3.9.3 A Joint Assessment for a couple

3.9.3.1 This assessment takes account of the income of both members of the couple, excluding the partner's Disability Related Benefits.

3.9.3.2 Allowances will be based on:

- Basic income support or pension guarantee credit for a couple,
- The resident's disability related expenditure
- Their joint housing costs.

3.9.3.3 The financial assessment, which results in the lowest contribution, will become the resident's contribution.

3.10 Where both partners are receiving Social Care support

3.10.1 Where the above assessments result in a contribution a further assessment is required if both partners are receiving social care. In this scenario the couple will be treated as one entity and a single contribution for both services calculated.

3.10.2 This assessment differs from the joint assessment as account will be taken of both partner's disability related benefits and disability related expenditure.

3.10.3 The contribution calculation most favourable to the resident will be the one applied

3.11 Financial Assessment of families that include dependant children

3.11.1 Where the resident's family includes dependant children a comparative assessment is necessary.

3.11.2 Where income is received in respect of the child(ren) which equals or exceeds the child(ren)'s basic Income Support allowances plus the appropriate buffer percentage, the child(ren) will not be included in the financial assessment.

3.11.3 Where the income received in respect of the child(ren) is less than the income support allowances appropriate to the child(ren) plus the buffer, then the child(ren) and any income paid in respect of them will be included in the financial assessment.

3.11.4 This ensures that the family as a whole is not left with less than basic income support plus the percentage buffer appropriate at the time.

Section 4 – The calculation of the contribution towards a Personal Budget

4.1 Calculation of resident's contribution to their Personal Budget

4.1.1 Where the financial assessment shows

- a) The resident is not able to contribute; the Personal Budget will be entirely funded by Adult Care Services.
- b) The Maximum annual contribution (maximum weekly x 52 weeks) is more than the Personal Budget, the resident will contribute the full cost of the Personal Budget e.g. the Personal Budget will be entirely funded by them.

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- c) The Maximum annual contribution (maximum weekly x 52 weeks) is less than the Personal Budget, the resident will contribute the maximum annual contribution and the council will fund the remainder of the Personal Budget.

4.1.2 Where the resident is in receipt of a Personal Budget but elects not to complete a financial assessment they will be required to contribute the full amount of their Personal Budget.

4.1.3 Since the full Personal Budget is liable for contribution then services that are exempt, as detailed above in Section 2 will not be included in the Personal Budget

- If the resident has savings over the CRAG limits, and they are able to arrange their own services, they will be provided with information that will assist them in making their own arrangements.
- If the resident has savings over the CRAG limits but is not able to arrange their own services, Adult Care Services will organize the service, but as the resident is not eligible for financial support they will be required to contribute the full cost of the services provided.

Section 5 – How the Contribution will be collected

5.1 The method of collection will be determined by which means the resident chooses to deploy their Personal Budget.

5.1.1 Direct Payments

If the resident chooses to deploy some or all of their Personal Budget via a Direct Payment and the Direct Payment amount is greater than the contribution amount, the contribution will be netted from the Direct Payment amount. E.g. the 4 weekly Direct Payment amounts will be paid less the calculated 4 weekly contribution amount.

5.1.2 Personal Budget managed by the Council

Those residents who choose for the council to manage their Personal Budget including the commissioning and paying for the services will be invoiced over 13 four weekly periods in arrears. The 4 weekly sum is calculated by dividing the residents agreed annual contribution by 13 periods

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Appendix A: Contribution Collection for Personal Budgets

Example 1

- Annual Personal Budget = £5,000
- Annual contribution is £2,000 so Adult Services fund £3,000
- As part of their support plan the resident requests commissioned services of £2,500 and a Direct Payment of £2,500.
- The resident's contribution of £2000 will be offset against the Direct Payment.
- The Council funds and commissions services of £2,500 and a Direct Payment of £500 which on a standard basis would be paid equally over the year or as per a payment schedule agreed with the individual.

Example 2

- Annual Personal Budget = £5,000
- Annual contribution is £2,000 so Adult Services fund £3,000
- As part of their support plan the resident requests commissioned services of £4,000 and a Direct Payment of £1000.
- The resident is required to fund the £1,000 Direct Payment through their contribution and no Direct Payment amount is paid
- In addition a contribution of £1000 per annum towards the cost of their commissioned services of £4,000 is required. The Council will raise an invoice for every 4 week period to collect the £1000 ($\frac{£1000}{52} \times 4$ every 4 weeks), unless an alternative contributions collection schedule has been agreed
- The Council funds £3000 of commissioned services.

Example 3

- Annual Personal Budget = £4000
- Annual contribution from Resident assessed as £1,000 so Adult Services will contribute the £3,000 balance.
- The support plan agreed with the resident states that respite care and homecare are required to meet the resident's outcomes. The resident decides to have 4 weeks' respite care per annum, to be taken throughout the year, and commissioned by Adult Care Services. This is charged to the Personal Budget at £470 per week, and totals £1,880 for a year. The resident decides to use remainder of the Annual Personal Budget, £2,120 for homecare.
- The resident will be invoiced for £76.92 every 4 week's, this is equivalent to £19.23 per week. In this way the resident will contribute £1,000 over the year towards their Annual budget.
- The Council funds £3000 of commissioned services.

Example 4

- Annual Personal Budget = £4,000
- Annual contribution is £2,000 so Social Services fund £2,000
- As part of their support plan resident requests a Direct Payment for all of their Personal Budgets
- The resident receives their Direct Payments net of their contribution. No other contribution is collected e.g. Payments totalling £2000 to the resident , paid 4 weekly

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Appendix B - CRAG Capital limits

These capital limits are applicable for both traditional packages of care and Personal Budgets.

ITEM	2010/11, 2011/12, 2012/13	Review Process
Upper capital limit	£23,250	Department of Health
Lower capital limit	£14,250	Department of Health

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Appendix C - Disability Related Expenditure (with effect from w/c 09/04/12)

This guidance on Disability Related Expenditure is equally applicable for both traditional packages of care and Personal Budgets.

Disability Related Expenditure (with effect from w/c 09/04/12)

The following items are headings into which disability related expenditure would normally be expected to fall Expenditure will only be considered if it is incurred by the service user and not a 3rd party (i.e. a friend or relative)

	Item	Amount	Evidence
1	Community Alarm system	Actual weekly costs unless included in Housing Benefit or Supporting People Grant. (Lifeline alarm free to certain Maidenhead and Windsor Housing Association tenants, reduced cost to others.)	Bill from Provider
2	Privately arranged care services An allowance will not normally be made where the relationship between the service user and the service provider is primarily personal rather than contractual. (See note 1)	Actual weekly average cost based on previous 4 visits, or 4 weeks whichever is the greater.	Signed receipts for at least four visits using a proper Receipt Book. Care Manager to confirm requirement as part of the Care Plan and Council supported care reduced accordingly. Maximum hourly rate £12.10 (see Note 2)
3	Additional laundry costs Higher costs due to incontinence or problem with personal cleanliness	Where laundry is done at home, for each additional load over 3 loads a week for a single person, allow £1.37 per load to a maximum of £4.11 weekly. Where service user uses a launderette and incurs additional laundry costs due to disability, allow the additional weekly cost over and above 3 loads a week, averaged over previous 4 weeks Where the service user is required to use a commercial laundry due to disability allow actual costs of commercial laundry averaged over previous 4 weeks.	The Care Plan will have identified a continence problem. actual cost of launderette or laundry receipts
4	Continence	Where items are not provided by NHS the cost of privately purchased items should be allowed. Actual weekly cost averaged over previous 4 weeks	The Care Plan will have identified a continence problem. Receipts
5	Additional costs of special dietary needs	Weekly actual additional cost of any special foods averaged over previous 4 weeks.	May seek permission to approach GP. Detail and verification of costs of special purchases to be supplied. Receipts

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	Item	Amount	Evidence
6	Special clothing or footwear,	Discretionary depending on an individual's circumstances. Some items provided on NHS. As replacement of clothing & foot ware is normally relatively infrequent allow actual expenditure. Weekly average based on previous year's expenditure	Reference within the Care Plan to abnormal wear and tear of clothing. Receipts
7	Additional costs of bedding;	Bed linen is not provided by NHS continence Service. As replacement of bedding is normally relatively infrequent allow actual expenditure. Weekly average based on previous year's expenditure	The Care Plan will have identified a continence problem. Receipts.
8	Any additional heating or fuel costs, Where appropriate take into account any contributions to fuel bills from other members of the household.	Single in flat and terraced.....£ 1,101 Couple in flat and terraced..... £ 1,451 Single in semi-detached..... £ 1,169 Couple in semi-detached..... £ 1,539 Single in detached..... £1,422 Couple in detached..... £1,873 Difference between actual and average (above) to be divided by 52. Average to be increased each year by RPI. For new services first chargeable from 11/04/05 onwards the maximum allowance for fuel will be 50% above the average fuel figure for the appropriate band.	Last 4 bills for all types of fuel
9	Reasonable costs of basic garden maintenance Will need to consider the circumstances of others living in the household. An allowance will not normally be made where the relationship between the service user and the service provider is primarily personal rather than contractual. (See note 1)	Discretionary based on individual costs of garden maintenance. A very basic grass cutting & hedge trimming service is available free to MDHA tenants who are unable to maintain their gardens. Actual cost over previous year divided by 52	Signed receipts for at least four visits using a proper Receipt Book Maximum hourly rate £12.10 (See Note 2)

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	Item	Amount	Evidence
10	<p>Cleaning, or domestic help Consideration should be given to higher needs for cleaning as a consequence of disability and to the circumstances of others living in the household.</p> <p>An allowance will not normally be made where the relationship between the service user and the service provider is primarily personal rather than contractual. (See note 1)</p>	<p>Actual weekly cost averaged over previous 4 weeks. If 'blitz' cleans are purchased irregularly the cost should be based on past expenditure over a year divided by 52.</p> <p>Where no housework allowed in care package up to 2 hours weekly to be allowed at WBT VO's discretion taking into consideration accommodation size, s/u disability and other members of household. At care managers discretion if more than 2 hours.</p>	<p>Requirement confirmed in the Care Plan and Council supported care reduced accordingly. Signed receipts for at least four weeks using a proper Receipt Book.</p> <p>Receipts for 'blitz' cleans Maximum hourly rate £12.10 (See Note 2)</p>
11	<p>Purchase, maintenance, and repair of disability-related equipment, if privately purchased</p>		
	<p>Powered bed</p>	Actual cost divided by 500 (10-year useful life).	Evidence of purchase
	<p><i>Turning bed</i></p>	Actual cost divided by 500 (10-year useful life).	Evidence of purchase
	<p>Powered reclining chair</p>	Actual cost divided by 500 (10-year useful life).	Evidence of purchase
	<p>Stair-lift</p>	Actual cost divided by 500 (10-year useful life). Allow actual amount of repayments of any DFG loans	Evidence of purchase - less Disabled Facilities Grant. Evidence of DFG loan repayment amounts
	<p>Hoist</p>	Actual cost divided by 500 (10 year useful life) Allow actual amount of repayments of any DFG loans	Evidence of purchase - less Disabled Facilities Grant. Evidence of DFG loan repayment amounts
	<p>Wheelchair</p>	Outdoor use only - Actual cost divided by 500 (10 year useful life). Indoor and outdoor use - Actual cost divided by 250 (5 year useful life).	Evidence of purchase if available. No allowance if equipment provided free of charge.
	<p>Other equipment or aids</p>	Actual cost divided by useful life	Evidence of purchase
12	<p>Costs associated with privately purchased equipment, e.g. insurance and servicing</p>	Actual cost over previous year divided by 52	Receipts

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	Item	Amount	Evidence
13	<p>Personal assistance costs, An allowance will not normally be made where the relationship between the service user and the service provider is primarily personal rather than contractual. (See note 1)</p>	<p>E.g. having to pay for meals or transport costs for personal assistants or carers Actual average weekly cost based on previous 3 months.</p>	<p>Receipts where possible Maximum hourly rate £12.10 (See Note 2)</p>
14	<p>Other transport costs</p>	<p>Discretionary based on costs that are greater than those incurred by an able bodied person, e.g. taxi to go shopping, People to Places membership and charges. Actual weekly costs averaged over previous 4 weeks (over and above the mobility component of DLA where this is in payment and taking into account concessions provided by RBWM e.g. Taxi vouchers.)</p>	<p>Bills & Receipts Evidence in Care plan for the need for special transport.</p>
15	<p>Opticians & Dentist's home call charges</p>	<p>Where home visit is required as user is unable to access dentist's surgery or opticians. Actual weekly costs averaged over previous year.</p>	<p>Receipts. Allow additional costs of home visits over a year</p>
16	<p>Prescription charges (those 60 or over and on Income Support do not pay these charges)</p>	<p>Cost of an annual season ticket divided by 52 or actual cost of prescription, whichever is less.</p>	<p>Receipts</p>
17	<p>Holidays An allowance will not normally be made where the relationship between the service user and the service provider is primarily personal rather than contractual. (See note 1)</p>	<p>Disability related supplements, additional cost of a companion. Any calculation of costs will assume a UK based holiday. Aggregate allowable costs for previous year divided by 52. For holidays organized specifically for people with disabilities where it is not possible to identify additional costs incurred due to disability allow excess over £514.75 per week.</p>	<p>Receipts Maximum of 14 days a year. Additional costs divided by 52 for the year following the holiday</p>
18	<p>Communications: Discretionary based on costs that would not usually be incurred. Telephone line rental, mobile phone costs, and internet access are now part of everyday life and would not normally be considered as disability related expenditure.</p>	<p>Actual average weekly costs of communications specifically related to disability</p>	<p>Receipts</p>

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	Item	Amount	Evidence
19	Podiatry: Where there is a genuine need that is not being met by NHS.	Actual average weekly costs	Receipts VO to confirm why not met by NHS
20	Osteopathy, physiotherapy, etc: Where there is a genuine need that is not being met by NHS.	Actual average weekly costs	Receipts VO to confirm why not met by NHS
21	Chemist/Medical Items: where need arises from disability and not available under prescription.	Actual average weekly costs	Receipts
	Item	Amount	Evidence
22	Privately arranged Respite Care: to be allowed only where care manager agrees that this could be not funded from the Residential Respite Budget. AAbrahamson must be sent details of care manager's agreement.	To a maximum of what would have been funded by RBWM divided by 52 weeks.	Receipts.
23	Hairdressing: Where service user is unable to wash own hair, and hair wash is not part of care package.	Actual average weekly costs	Receipts Maximum of £6.48 per hair wash
24	Other costs caused by illness or disability or that help the Service User to live independently but only where additional costs are incurred over and above those that an able bodied person of the same age would reasonably incur	Actual average weekly costs	Receipts

Note 1

DRE will not be allowed in respect of services provided by family members which would be considered normal expenditure for Pension Credit and Income Support purposes such as personal care, gardening and cleaning. This differs to Direct Payments where payments may be made in respect of relatives who do not live in the same household, as the services provided are greater than that which would be considered basic living costs for Income Support and Pension Credit. See also Judicial Review Stephenson v. Stockton-On-Tees, 12/10/04, which confirms that it is reasonable for councils not to make a disability related expenditure allowance in respect of care provided by family members.

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Note 2

Amount to be increased in line with the normal hourly rate for direct payments.

Each April as part of the annual reassessment the total amount awarded for Disability Related expenditure will be increased by the same RPI inflator used by the DWP to calculate benefit increases. Following a full review, normally at 2 yearly intervals, the Disability Related Expenditure will be recalculated and reset to confirm actual expenditure.

When amendments are made to this DRE scheme that would have the effect of increasing charges for service users already assessed it is not expected that these service users will need to be identified & reassessed. Instead the DRE originally awarded should stand, but not be increased until it is in line with the current DRE scheme.

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Appendix D

Record of amendments

Date	Paragraph	Description
22/09/10	3.6	To allow an amount equal to a non dependant deduction to be treated as a housing cost
22/09/10	3.7.3	Minimum Charges
01/04/12	2.9	To include Residential Respite of up to 42 days per annum in Personal Budgets
09/04/12	Appx C	Update Disability Related Expenditure