

# Southampton City Council Adult Social Care Charging Policy



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## Purpose

1. The Southampton City Council Adult Social Care Charging Policy sets out how the council meets its legal requirements in relation to the determination and calculation of charges for Adult Social Care.
2. This policy should be read in conjunction with the council's Adult Social Care and Support Planning Policy, which sets out its approach to assessing and meeting unmet, eligible social care needs, by drawing wherever possible on an individual's and communities' strengths and assets to support people to meet their goals and desired outcomes.

## Legal context

3. This policy is based on appropriate legislation and Government guidance, including:
  - The Care Act 2014, associated regulations and statutory guidance
  - The Mental Capacity Act 2005
  - Mental Health Act 1983, section 117 – the duty on health and social care services to provide free aftercare to patients previously detained under certain sections of the Act
  - Equality Act 2010
  - Human Rights Act 1998

## Scope

4. This policy applies to packages of care and support funded wholly or partly by Southampton City Council, and charges in relation to making arrangements for self-funders. This policy does not apply to individuals for whom the following applies, who are exempted from charges under the Care Act Statutory Guidance 2014:
  - Intermediate care, including reablement, which must be provided free of charge for up to 6 weeks. However, local authorities must have regard to the guidance on preventative support set out in Chapter 2 of the guidance. This sets out that neither should have a strict time limit but should reflect the needs of the person. Local authorities therefore may wish to apply their discretion to offer this free of charge for longer than 6 weeks where there are clear preventative benefits, such as when a person has recently become visually impaired
  - Community equipment (aids and minor adaptations). Aids must be provided free of charge whether provided to meet or prevent/delay needs. A minor adaptation is one costing £1,000 or less
  - Care and support provided to people with Creutzfeldt-Jacob Disease
  - After-care services/support provided under section 117 of the Mental Health Act 1983, unless the needs do not arise from, or are not related to, their mental disorder then those needs fall outside the scope of S117 and can be charged for.
  - Any service or part of service which the NHS is under a duty to provide. This includes Continuing Healthcare and the NHS contribution to Registered Nursing Care
  - More broadly, any services which a local authority is under a duty to provide through other legislation may not be charged for under the Care Act 2014

- Assessment of needs and care planning may also not be charged for, since these processes do not constitute 'meeting needs'.

## Principles

5. In line with the Care Act Statutory Guidance, the overarching principle of this policy is that people should only be required to pay what they can afford. People will be entitled to financial support based on a means-test and some will be entitled to free care. The key principles that this policy supports are:
  - ensure that people are not charged more than it is reasonably practicable for them to pay
  - be comprehensive, to reduce variation in the way people are assessed and charged
  - be clear and transparent, so people know what they will be charged
  - promote wellbeing, social inclusion, and support the vision of personalisation, independence, choice and control
  - support carers to look after their own health and wellbeing and to care effectively and safely
  - be person-focused, reflecting the variety of care and caring journeys and the variety of options available to meet their needs
  - apply the charging rules equally so those with similar needs or services are treated the same and minimise anomalies between different care settings
  - encourage and enable those who wish to stay in or take up employment, education or training or plan for the future costs of meeting their needs to do so
  - be sustainable for local authorities in the long-term
6. In line with the Care Act 2014, and the principles set out in the Mental Capacity Act 2005, the council will assume that people have mental capacity and can make decisions for themselves unless it is established otherwise. If established otherwise, appropriate support will be identified.

## Eligibility and Arrangement Charges

### Non-Residential Care

7. Southampton City Council has a duty to meet the eligible, un-met care and support needs of people who require non-residential care and request the assistance of the council. The council will meet un-met needs where the client is ordinarily resident in Southampton or is present in its area but of no settled residence, and one of the following applies:
  - Following a financial assessment the person has less than £23,250 in savings and assets; or
  - Where the client has over £23,250 but the client asks the local authority to meet their needs; or
  - Where a client has over £23,250 and they lack mental capacity to make arrangements for their own care and there is no person authorised to do so under the Mental Capacity Act 2005 or otherwise (an attorney or deputy).
8. When a client has more than £23,250 in savings and assets and requests the council to assist in arranging care at home, the council may charge the client an arrangement fee of **£250** to meet the administration costs of the service.

9. A further charge will be levied on each occasion the customer asks the council to arrange a new or significantly changed provision of services. Minor changes to existing arrangements will not be subject to a charge.

### **Residential Care**

10. Southampton City Council has a duty to meet the eligible care and support needs of people who require residential care/ nursing care and who have less than £23,250 in savings and assets.
11. In relation to residential care, where the financial assessment identifies that the person's resources exceed savings and assets limit of £23,250, the council will not pay towards the costs of care as the council is precluded from doing so under the Care Act 2014.
12. If the person lacks the mental capacity to take part in the assessment and there is no one else who is legally able to do so, such as a deputy or attorney, the council has the discretion to pay in the interim for the costs of care pending the court of protection appointing a suitable deputy. Once a deputy has been appointed a full financial assessment will be carried out and if the person has over the savings and assets limit of £23,250 the council will seek re-imburement of the charges from the person's assets via the deputy.

### **Financial Assessment**

13. Eligible individuals will be assessed on their own finances to calculate their assessed contribution towards the cost of the care they receive, in line with relevant guidance and regulations.
14. Eligible individuals or their representatives will be required to provide all of the information required to complete the financial assessment, and to inform the council of any changes in their financial circumstances. If a person refuses to disclose their financial details they may be required to pay the full cost of the service.
15. The council has no power under the Care Act 2014 to assess couples or civil partners according to their joint resources. Each person will therefore be treated individually in line with legislation and statutory guidance.
16. If someone has deprived themselves of assets in order to reduce their contribution, this may be treated as deprivation of funds to pay for care and the contribution will be calculated as if the individual still owned the asset.
17. At the time of the assessment of care and support needs, the council must establish whether the individual has the capacity to take part in the assessment. If after a mental capacity assessment has been carried out and it is determined that the individual lacks capacity to make the relevant decisions, the council must find out if the person has any of the following an appropriate person will need to be involved:
  - Enduring power of attorney (EPA).
  - Lasting power of attorney (LPA) for property and affairs.
  - Lasting power of attorney (LPA) for health and welfare.
  - Deputyship under the Court of Protection.
  - Any other person legally dealing with that person's affairs (for example, someone who has been given appointeeship by the Department for Work and Pensions (DWP) for the purpose of benefits payments).

18. Individuals who lack mental capacity to give consent and take part in a financial assessment and who do not have any of the above people with authority to be involved in their affairs, may require the appointment of a property and affairs Deputy. Family members can apply for this to the Court of Protection or the council can apply if there is no suitable person who is willing to apply. Once the court appoints Deputy that person will be able to make decisions authorised by the court e.g. providing the council with financial information so that a full financial assessment can be undertaken.

### **Financial Assessments**

19. Individuals will be assessed on their own finances to calculate their assessed contribution towards the cost of the care they receive. It is the individual's responsibility or their legally appointed representative to provide all of the information required to complete the financial assessment.
20. A full financial assessment involves the assessor gathering comprehensive information about every element of assets and income of the client before making a determination about the level of financial support they may be entitled to from the council.
21. In some circumstances, the council can do a shorter financial assessment, this is called a 'light touch assessment', if the person agrees to this. The person is allowed to give the council much less financial information and it can be mean an easier and quicker assessment. However, the council must be satisfied that the person can afford the assessed contribution and will continue to be able to afford this.
22. If a 'light touch' approach is taken, the council will make sure that the client is willing to pay the charges and will continue to do so. If the client does not agree with the assessed charges assessed under this route, then a full financial assessment may be needed.
23. The main circumstances where a light-touch assessment will be considered are:
- Where a person has significant financial resources and does not want to have a financial assessment.
  - Where the council is satisfied that the person can afford the charges due because their savings are clearly above the upper limit, any property taken into account is above the savings or assets limit of £23,250, or they would have sufficient income to pay the full cost.
  - Where there is a small or nominal charge for a service which the person can clearly meet.
  - When an individual is in receipt of benefits which demonstrate that they would not be able to contribute towards their care and support costs. This might include income from Jobseeker's Allowance.
  - Where a person requests a direct payment and consents to a light-touch assessment.
24. If a light-touch assessment is carried out for the purposes of an application for a direct payment, a full financial assessment may be carried out at a later date.
25. In order for the light-touch assessment to be carried out the person must consent to the assessment, if they refuse, a full financial assessment may be required. The person has a right to request a full assessment at any time even if they have had a light-touch assessment.
26. The council will calculate the person's contribution to the cost of care and support based on the light-touch assessment. If a full assessment is carried out at a later stage and the contributions vary the person will need to pay the amended amount after them being notified of the outcome of the full assessment.



27. If an individual disagrees with their financial assessment they can request a reassessment of their finances.

### **Calculating the contribution**

28. The financial assessment process gathers information about income first. This includes most types of benefits as well as savings, shares, bonds, premium bonds and other assets.
29. In line with the Care Act 2014, savings and assets are taken into account to calculate the charges or contributions that will be applied in relation to an eligible individual's care. The council will take into account all relevant income, savings or assets including benefits (unless required to be disregarded). The mobility element of disability related benefits (including Disability Living Allowance, Personal Independence Payments, Attendance Allowance and Constant Attendance Allowance) will not be taken into account in line with legislation and guidance.
30. In cases where an individual is terminally ill and has been issued with a DS 1500 form by a medical practitioner, disability related benefits (including Disability Living Allowance, Personal Independence Payments, Attendance Allowance and Constant Attendance Allowance) will be disregarded for the purpose of financial assessment.
31. At current levels, savings up to £14,250 will not be taken into account, but for any savings between £14,250 and £23,250 an amount of £1 for every £250 (called the tariff income) will be added to the client's weekly income within the financial assessment.
32. Some types of personal injury claims or compensation awards may be taken into account in the financial assessment. This will be dependent on the nature of the award.
33. The council will consider whether to recover the cost of care from a trust fund, where reasonable to do so, having regard for the terms of the trust.

### **Disability Related Expenses**

34. Disability Related Expenses relate to the reasonable additional costs that an individual receiving non-residential care may incur due to their age or disability, in order to live independently. The costs may vary from individual to individual.
35. Allowance will be made for disability related expenditure (DRE) for care and support at home, and the equivalent amount of these costs will be disregarded when calculating an individual's income.
36. The aim is to allow for reasonable expenditure needed for independent living by the person. The council will not include items that could be considered as normal living costs, which are covered by the allowance made in the Minimum Income Guarantee (MIG).
37. The council will take all reasonable DRE into account that has been incurred to meet the individual's needs for care and support. An illustration of the types of DRE is set out in Appendix 1, but this is not meant to be an exhaustive list. DRE will be assessed on a case by case basis.

### **Living Expenses**

38. Southampton City Council will ensure that individuals receiving non-residential care services retain Minimum Income Guarantee amount.

39. In addition to the Minimum Income Guarantee further allowance may be made for other expenses for individuals receiving non-residential care services such as:
- Rent not covered by Housing Benefit or Universal Credit (including rent payable for 'under occupancy').
  - Council Tax not covered by Council Tax Reduction.
  - Mortgage repayments.
  - Some service charges (other than service charges which are ineligible under Schedule 1 to the Housing Benefit Regulations 2006).
40. Where an individual is cared for within a residential care setting, and charges are applicable, the council will ensure the individual retains the Personal Expenses Allowance, in order to meet personal costs not covered by the care home. In certain circumstances the council may consider increasing the Personal Expenses Allowance to cover other exceptional living costs as set out in the Care Act 2014.

### **Treatment of Property**

41. For non-residential adult social care financial assessments, the value of a property owned and occupied by the client as their main residence will not be taken into account in assessing contributions but the value of any other properties, land or assets owned in this country or abroad will be included.
42. For long term residential care financial assessments, the value of a property owned and occupied by the client may be taken into account in the financial assessment. The home will not be taken into account if one of the following people also lives in the home, and will continue to live there after you have moved into a care home:
- a husband, wife or civil partner;
  - a close relative over the age of 60;
  - a dependent child;
  - a relative who is disabled or incapacitated.
43. For long term residential care financial assessments, if a property which is owned and occupied by the client is taken into account, the council will ignore its value for the first 12 weeks starting from the date when the person enters permanent residential care. This is referred to as a 12 week property disregard. The aim of this period is to give the client time to decide what to do with their former home. During this period the client will be expected to contribute towards their care from their income and other assets.
44. The disregard will end if the property is sold within 12-weeks and the resulting funds will be included in the person's assessment.
45. The council may use its discretion in appropriate cases to disregard the value of a person's property from the financial assessment, if a qualifying third-party lives there. For example, this may be where it is the sole residence of someone who has given up their own home to care for the resident, or someone who is an elderly companion of the resident (particularly if they have given up their own home).

### **Payment of contributions**

46. Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.



47. The council will undertake financial assessments as swiftly as possible, and relevant individuals are expected to cooperate in the financial assessment in line with Care Act Regulations. In cases of lengthy financial assessments, charges will not apply to a period any longer than 8 weeks prior to the notification date of the completed financial assessment.
48. In cases where an individual is admitted to hospital or for any other reason is not making full use of their care provision for a short period of time, but their care arrangement remains in place, they will need to continue paying the contribution charge. This is because the care package needs to be kept in place, to ensure that it is still available when the individual is released from hospital. Therefore, during this period, there is still a cost of keeping the service in place, even though it is not being used for that period of time. This will be subject to regular review, and charges will cease if the hospital stay becomes more permanent and the care arrangement ceases.
49. In some cases when services are temporarily cancelled or missed, the level of contribution for that period may be adjusted. This may include but is not limited to the following examples:
- A contribution will not be payable for care that is cancelled for a period of more than 7 days.
  - If care is cancelled by the individual receiving a service for periods of up to and including 7 days, the usual contribution will still be payable.
  - A contribution will not be payable where the care provider cancels the care or a carer fails to attend, as long as the council is informed about this by the service user or their representative.
50. The council will not charge for services provided directly to carers to support them. All forms of respite or replacement care that involve personal care to the client will be treated as services for the client rather than for the carer. This means that respite that includes the provision of personal care will be seen as part of the client's personal budget and will therefore be subject to financial assessment and charging.

### **Changes in an individual's financial circumstances**

51. Individuals are responsible for notifying the council of any changes to their personal and financial circumstances as these can affect their financial assessment. A change in a contribution may be triggered either by a range of factors, including (but not limited to) changes to:
- The type or level of service.
  - The accommodation of the eligible individual.
  - The financial circumstances of the individual (income or savings/assets).
  - Membership of the household.
52. Changes to contributions may be backdated to the actual date of any change.
53. The council will usually review an individual's financial situation annually but reserves the right to carry out a financial review at any time, for example in the event of the Department of Works and Pensions making a policy change or regulation changes. These may include annual increases to standard benefit payments such as the State Retirement Pension, occupational or other private pensions (except fixed rate annuities) or service cost increases. This may require individuals to provide new or additional information and evidence where necessary. Where individuals fail to provide information following written requests, contributions may be recalculated, which may result in the client paying the full cost of their care and support package.

## Personal Budgets

54. Everyone whose needs are met by the council, whether those needs are eligible or if the council has chosen to meet other needs, will receive a Personal Budget. A Personal Budget is the amount of money allocated to an individual to provide the support they require, based on an assessment of needs. For more information about Personal Budgets, please see the Southampton City Council Adult Social Care and Support Planning Policy.
55. An individual will make a single contribution towards the cost of their care based on an assessment of their financial circumstances. They will then pay whichever is the lesser amount of either the full cost of the care they require to meet their needs, or their maximum assessed contribution. If the assessed contribution is less than the full cost of the care they require to meet their needs, the council will fund the difference. Individuals may choose to purchase additional care at their own expense.

## 'Top up' payments and purchasing additional services

56. If a person chooses to receive care that is more expensive than the council has assessed they require to meet their eligible needs, a third party and, in very limited circumstances, the individual (see 57 below) can 'top-up' the costs to purchase the care of their choice. The amount of the 'top up' is the difference between the actual costs of the preferred home and the amount that the council have set in the persons Personal Budget or Mental Health After Care Limit.

### Example:

The council assesses that the cost for meeting a client's eligible needs at is £80 per week.

The client chooses a home care provider which costs £100 per week. This is £20 amount more than the council has assessed as the cost of the client's needs.

So, a top-up payment of £20 per week may need to be paid if the client chooses to use the more expensive provider.

57. If a person is receiving funding from the council and they are in a care home they cannot 'top-up' their own care funding unless they have a 12-week property disregard or receive funding via Section 117 of the Mental Health Act 1983. They would instead require top-up from a third party, e.g. family or charity.
58. The council will at all times ensure that Personal Budgets are sufficient to meet the person's eligible care needs. Any 'top ups' will be the individual's choice, and can only be made once they are aware of their right to have all their eligible care needs met without the requirement for a 'top up'.
59. The person paying the 'top up' will be expected to sign an agreement, which sets out the conditions of making a 'top up'.
60. In the event the 'top up' ceases, the council is under no obligation to increase its contribution to cover the difference in cost. This may result, for example, in the person having to move to other accommodation and being given a number of alternative options to choose from, unless, after an assessment of need, it is shown that their assessed eligible needs can only be met in the current accommodation.

## Deferred Payments

61. Deferred payment agreements are designed to prevent people from being forced to sell their home in their lifetime to meet the cost of their care. This can help people who have been assessed to pay for the cost of their care home fees, but cannot afford to pay the full contribution immediately because their funds are tied up in their home.
62. The Deferred Payment Scheme is designed to help "defer" or delay paying the costs of care and support until a later date. Typically, this means that a land registry charge is attached to their property and the council will recover the cost of care after the property is sold or from the person's estate. The Deferred Payment Scheme is considered by the council to be a potential lower cost alternative to other lending options.

### Loan eligibility

63. Southampton City Council will offer a deferred payment, in line with the Care Act 2014, where the person;
- Is ordinarily resident in Southampton, or present in the area but has no settled resident or ordinary resident elsewhere but the council has determined that they will or would meet the person's needs.
  - Has been assessed as having eligible unmet needs for care and support and those needs are to be met in a care home placement.
  - Has savings or assets excluding the value of their main or only home, of less than or equal to £23,250.
  - Own or has part legal ownership of a property (which is not benefitting from a property disregard).
  - Has mental capacity to agree to a deferred payment agreement or has a legally appointed agent willing to agree to this.
64. The property against which the loan is to be secured must be registered with the Land Registry. If the property is not, you must arrange for it to be registered at your own expense.
65. There should be no other beneficial or legal interests on the property e.g. mortgages, equity release schemes, or secured legal charges.
66. Individuals can only defer the cost of care up to a maximum equivalent of 70% of the equity in their property. The council will undertake annual reviews of any loan arrangements to ensure that this limit is not reached. The council will refuse to defer care costs beyond this limit, although administration and interest can continue to be deferred. In such cases, the council will signpost individuals to financial and welfare advice.
67. The council has discretion to approve a Deferred Payment Agreement in other circumstances even if the above criteria have not been met, for example, by considering alternative security to the property. Any additional costs that may be incurred by the council as a result of investigating or agreeing to alternative security, including any legal or valuation costs must be met by the person and cannot be added to the deferred debt.
68. Whilst in the agreement the eligible individual will also need to:
- Have a responsible person willing and able to ensure that necessary maintenance is carried out on the property to retain its value. The client or their representatives will be liable for such expenses.

- Insure the property (at the expense of the client or their representative), and supply the council with a copy of the certificate. Please note that the policy must show that the property is insured as unoccupied if there is no one living in it.
  - Pay any administrative charges relating to the Deferred Payment Loan in a timely and regular manner. If charges are not paid the council reserves the right to add this debt to the loan amount.
  - Pay the assessed financial contribution to the care provision in a timely and regular manner. If financial contributions are not paid the council reserves the right to add this debt to the loan amount.
69. The council will provide relevant information and advice to applicants prior to them entering into any Deferred Payment Agreement. This will include:
- Setting out clearly all the fees and charges that will be made during the lifetime of the agreement.
  - Offer and facilitate access to appropriate independent financial advice.
70. The council will not offer a deferred payment where any one of the following apply:
- If the council cannot secure a first charge on the person's property and no other adequate security can be provided.
  - If the person is seeking a top-up for a more expensive placement than the council would usually fund and the amount of the top-up does not seem sustainable for the duration of the placement.
  - Where the person does not agree to the terms and conditions of the agreement.
  - In the case of jointly-owned property, if all owners or those people with a beneficial interest in the property refuse to consent to a legal charge against the property.

### **Charges for Deferred Payments**

71. Southampton City Council will make an administration charge for the initial set-up and arrangement of the Deferred Payment Agreement and interest on the amount of the loan.
72. The administrative charge is set at £730, and covers the council's costs to set up and administer the Deferred Payment Agreement. This charge can be paid upfront or be included in the deferred loan where funds are unavailable to pay the charge upfront.
73. The charges reflect the actual administration costs of the scheme, as included at appendix 2.
74. The council will charge interest on the deferred amount for the whole period that the agreement is in place. The interest will form part of the total overall amount owed to the council.
75. The council charges interest at the maximum government approved standard interest rate as set out in the Care Act 2014. The rate of interest is updated twice yearly in Government Office of Budgetary Responsibility reports. Updated rates will be applied to the debt from the following 1 January and 1 July as appropriate. The rate of interest may therefore change between starting discussions with the council and the time when the agreement is signed, and the applicant will be notified of the rate at the start of the loan and at any point at which it changes.
76. The council will calculate the interest on the deferred amount including any administration charges that the applicant has asked to be deferred; the interest will be compounded on a daily basis.

77. The Deferred Payment Agreement can be terminated at any time, when the full amount is due is repaid to the council or where there is a breach of the Agreement. The council can also in some circumstances refuse to defer or loan any more charges for a person who has an active agreement for example where the person total assets fall below the level of the means test or where the person no longer has need for care in a care home. This will be decided on a case by case basis.

### **Debt Recovery**

78. Where an individual fails to make payment of invoices for care services provided by the council, action may be taken in accordance with the council's policy. This may result in legal action being taken and extra cost to the individual.

79. Non-payment of a deferred charge, or otherwise not following the terms of a deferred payment agreement, may result in debt recovery processes being instigated.

### **Waivers**

80. In exceptional circumstances, the council will consider options to defer, suspend or remove charges for the provision of care.

81. Waivers will only be considered in exceptional circumstances, for example when incurring the full assessed contribution would cause exceptional financial hardship or place the individual at risk or the council assess that the charges are not affordable for that person. This will be determined on a case by case basis.

82. Waivers will be considered and approved by the relevant delegated senior officer in the council. All waivers will be documented and reviewed at an agreed frequency.

## **Appeals and Complaints**

83. Clients/ client representatives with legal power can appeal the outcome of their financial assessment for non-residential or residential care via the appeals process. The outcome of a financial assessment can be and is not limited to: treatment of a property; treatment of deprivation; how allowances and income have been taken into account; start and end dates of financial assessments; disability related expenses.

84. Complaints about the conduct of officers and concerns that the policy has not been properly enforced should be made via the council's corporate complaints procedure.

## **Governance**

85. This policy will be reviewed annually or when there is any significant change in legislation or other circumstances that affect its effectiveness and validity. Charges may be reviewed and amended in line with inflation or changes in actual cost under appropriate delegated powers.

86. In line with the council's [Scheme of Delegation](#), authority has been delegated to the relevant Service Director to review the format and content of this policy and to make textual, formatting, administrative or minor changes to ensure that it is fit for purpose.

87. In line with the council's [Scheme of Delegation](#), authority has been delegated to the relevant Service Director to determine which 'one off' services should be included within the policy as chargeable and the determination of the scale of fees and charges to be applied to the services.

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## Appendix 1: Examples of Disability Related Expenditure

This list is neither exclusive nor exhaustive. This list has been compiled to taking into account the disability related expenditure items set out in Annex C of the Care Act 2014 statutory guidance.

The level of cost will be determined on a case by case basis, into account an individual's particular circumstances. Evidence of necessity for the expenditure may be required from an expert or medical practitioner and actual costs may be requested and required as part of the assessment or review process. The council will have regard to guidance issued by the National Association of Financial Assessment Officers (NAFAO) in determining reasonable eligible disability related expenditure.

### Disability-related expenditure

- Community alarm system.
- Privately arranged care services that meet an assessed need but are not provided by the Local Authority.
- Private domestic care (day and/or night).
- Additional laundry costs and replacement bedding costs (wear and tear) and specialist laundry products.
- Additional costs of specialist dietary needs.
- Incontinence products may be considered if there is an assessed need and use is above free NHS provision.
- Specialist clothing or footwear - where this needs to be specially made or additional wear and tear which is caused by disability.
- Household items e.g. because of excessive wear & tear
- Heating or metered water costs that exceed average levels for the area and housing type.
- Basic garden maintenance.
- Purchase, maintenance, and repair of disability-related equipment e.g. wheelchair, Powered bed, Turning bed, Powered reclining chair, stairlift, hoist recent expenditure may be considered if the product is for an assessed need and it is not available free e.g. from either the Local Authority, NHS, etc.
- Chiropody costs may be considered if you are unable to access NHS free service
- Transport costs if there is an assessed need but service is not provided by the Local Authority or NHS and the costs are in excess of the mobility component of DLA or PIP.
- Personal assistance costs
- IT equipment and maintenance costs e.g. internet access for blind and partially sighted people
- Any other relevant disability related costs on a case by case basis necessitated by illness or disability.

## Appendix 2: Deferred Payments administration costs\*

\*Costs as calculated by Southampton City Council reflecting the actual administrative costs of the Deferred Payment Scheme as at September 2018.

First year charges	Cost (£)
<i>Averaged costs of printing, postage, copying, staff time and overhead apportionment:</i>	
List of charges linked to legal elements of set up	160
Processing administration	186
Financial elements of set up	75
Adult services elements of set up	66
Property valuation fee	200 <sup>1</sup>
Land registry charges	43 <sup>2</sup>
<b>Total</b>	<b>730</b>

<sup>1</sup> Property Valuation is charged at cost, and £200 is therefore only an indicative fee based on average value of property in the city.

The flat rate valuation fee will be applied for straight forward valuations. More complex valuations, including appeals, are likely to be referred for independent valuation and would be charged on a sliding scale for the property value. The council will accept a recent (within 3 months) written professional market valuation from the applicant. In this case, the valuation fee would not be applied as part of administration costs. Any extra valuations, appeals or revaluations may incur additional costs, which may be charged back to the applicant.

<sup>2</sup> This includes the land registry charge of £40. The remaining £3 is for the land registry search.