



28.12.18

Reference number

Approved by

Date approved

Version

Last revised

Review date

Category

Owner

Target audience:

Director for Adults and Communities

December 2018

1.10

December 2019

Adult Social Care

Self-funders, Social Care professionals, Finance, Welfare & Financial Assessment Staff, Contracts & Commissioning (Adults), Charging team, Social Care providers.

Adult and Communities Care and Support Self Funder Policy

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1. Introduction and statement of purpose

- 1.1 The purpose of this policy is to make clear the council's responsibilities towards self-funders, providers and social care professionals in a consistent and coherent manner, so to promote best practice.
- 1.2 The policy is intended to make it clear to self-funders how the council can assist with making arrangements for care and support at the time when it is first required or at a later date when a self-funders capital assets reduce and they require the council to provide financial support.
- 1.3 The overarching principle is to assist people to make well informed decisions by ensuring they have knowledge to consider all of their options and the awareness of the impact any decisions they take now, will have on funding their care in the future. This is balanced within the principles of a strength based approach, enabling people to stay well and independent for as long as possible with preventative interventions.
- 1.4 The Care Act 2014 places a duty upon the council to carry out a needs assessment regardless of the council's view of:
 - (a) The level of the adult's needs for care and support; or
 - (b) The level of the adult's financial resources.
- 1.5 This policy applies to self-funders in the first instance, and following a social care assessment, if the person has eligible social care needs then may be eligible for additional support beyond information, advice and signposting.
- 1.6 Where a person requires care other than that of a care home, including other types of accommodation and support to which the right to a choice applies, the council **must** purchase the service on behalf of the self-funder if asked to do so, but will charge administration fees for doing so, in addition to the cost of the service.
- 1.7 Normally, if a self-funder requires care in a care home they will pay the care home provider directly themselves. The council may use **discretion** to directly commission a care home placement; and recharge the self-funder the full cost. For example when a person doesn't have capacity to make arrangements themselves and there is nobody else that can support them.
- 1.8 Where a self-funder requests a placement in a care home which the council block funds, the council will make a decision on a case by case basis to release a place from the block. If this is agreed then the provider will invoice the individual direct, and the provider will credit the council.

2. Legislative framework

- 2.1 Section 4 of the Care Act 2014 places a duty on the council to provide information and advice that is accessible, including financial information.
- 2.2 Sections 14.7 and 69-70 of the Care Act 2014 provides a framework that enables a council to charge a person when it is arranging to meet care and support needs.
- 2.3 The Care and Support (Charging and Assessment of Resources) Regulations 2014; and the Care and Support and Aftercare (Choice of Accommodation) Regulations 2014 set out the legal framework and the councils' responsibilities in greater detail.
- 2.4 Sections 34-36 of the Care Act 2014 requires the council to offer Deferred Payments Agreements to people who meet the qualifying criteria below who are able to provide adequate security.
- 2.5 The Care and Support (Deferred Payment) Regulations 2014 set out the legal framework and the councils' responsibilities in greater detail.
- 2.6 Care Act 2014 –Annex A (Choice of accommodation and additional payments) requires that where the council 'is responsible for meeting an individual's care and support needs and their needs have been assessed as requiring a particular type of accommodation in order to ensure that they are met' the individual must have the right to choose between different providers of that type of accommodation, providing certain conditions are met.
- 2.7 Human Rights Act (1998) and Equality Act 2010. The council is required to treat everyone with fairness, equality, dignity, respect and autonomy. Of particular significance is the (qualified) right to respect for private and family life, home and correspondence.
- 2.8 Sections 9-13 of the Care Act 2014 sets out the national eligibility criteria for adults with care and support needs. The Care and Support (Assessment) Regulations 2014 provide further detail.
- 2.9 Mental Capacity Act 2005 provides a legal framework for acting and making decisions on behalf of adults who lack the capacity to make particular decisions for themselves.

3. Definition

- 3.1 **Social Care eligibility** - An adult's needs meet the eligibility criteria if they meet all three of the criteria below:

- a) The **adults needs arise from, or are related to, a physical or mental impairment or illness** (includes conditions such as physical, mental, sensory, learning or cognitive disabilities or illness and brain injuries)
PLUS
- b) As a result of the adult's needs, the adult is **unable to achieve two or more of the outcomes** specified (see Care and Support- Meeting your needs Policy - appendix 2);
PLUS
- c) As a consequence there is, or is likely to be, a **significant impact on the adult's wellbeing** .

3.2 **Self-Funder-** If a person is paying for the full cost of the services they receive to live independently at home or in a care home, they are known as a self-funder.

If any of the following criteria are met then the definition of a self-funder applies:

- The person who is in receipt or soon to receive services has chosen not to approach the council for help;
- The person who is in receipt of or soon to receive services has chosen not to be financially assessed by the council;
- The persons care needs have been assessed and they are not currently eligible for adult social care services;
- The persons care needs have been assessed and they are eligible for social care support but their savings or assets are above the capital funding limit https://www.herefordshire.gov.uk/info/200147/social_care_and_support/407/paying_for_care/2 or their weekly income exceeds the amount the council will fund.

3.3 **Mental Capacity-** means the ability to use and understand information to make a decision, and communicate any decision made. A person lacks **capacity** if their mind is impaired or disturbed in some way and this means the person is unable to make a decision at that time.

3.4 **Care Home-** Residential accommodation with board, lodging and personal care for persons in need of personal care by reason of old age, disablement, past or present dependence on alcohol or drugs, or past or present mental disorder.

3.5 **Care Home without Nursing** - The care home as defined by the Health and Social Care Act 2008 that is providing the care to the Service User.

3.6 **Care Home with Nursing** - A care home with qualified nurses permanently on site registered to provide nursing care.

3.7 **Attendance Allowance** – Attendance allowance helps with extra costs if you have a disability severe enough that you need someone to help look after you. It's paid at 2 different rates and how much you get depends on the level of care that you need because of your disability. <https://www.gov.uk/attendance-allowance>.

3.8 **Funded Nursing Care (FNC)** - NHS-funded nursing care is when the NHS pays for the nursing care component of nursing home fees. The NHS pays a flat rate directly to the care home towards the cost of this nursing care.

<https://www.nhs.uk/conditions/social-care-and-support-guide/money-work-and-benefits/nhs-funded-nursing-care/>

- 3.9 Personal Independence Payment (PIP) - Personal Independence Payment (PIP) can help you with some of the extra costs if you have a long term ill-health or disability. <https://www.gov.uk/pip>
- 3.10 Direct Payment (DP) - If you or someone you care for get help from social services, you can apply for direct payments. These let you choose and buy the services you need yourself, instead of getting them from your council. <https://www.gov.uk/apply-direct-payments>

4. When charges apply

- 4.1 The council charges for all care and support services (excluding those exempt from charging, and services for carers) on a full cost recovery basis. Charges are made in accordance with the Care and Support (Charging and Assessment of Resources) 2014 regulations which determine the maximum amount the council can charge a person.
- 4.2 The council charges for the following services:
- a) **Day services**, attending a day centre or activities arranged during the day (various charges per day/session dependent upon the provider).
 - b) **Home care** (also referred to as **domiciliary care**), supportive care provided in the home.
 - c) **Extra care** (also referred to as sheltered or assisted housing) self-contained homes where the occupier has a legal right to occupy, with varying levels of care and support available on site.
 - d) **Supported accommodation**, a combination of suitable or adapted accommodation which can be a person's own home – with some forms of personal care (like help with washing or cooking). Some supported living homes are shared by 2 or 3 people with similar support needs.
 - e) **Shared lives (previously known as adult placement)** accommodation, care and support that is provided in ordinary family homes of carefully selected, trained and supported Shared Lives carers.
 - f) **Transport** (where transport is required to meet eligible social care needs).
 - g) **Direct payments**, for those people buying their own care.
- 4.3 The council will do a financial assessment (sometimes called a means-test) to work out whether a person should self-fund their care or whether they can get financial support from the council. Where the financial assessment identifies that a person's resources exceed the financial limit known as the "upper capital limit" the person is not entitled to receive any financial assistance from the council.

4.4 Self-Funders- in a care home setting.

- a) People who have assets above the upper capital threshold will be required to make their own arrangements to meet their care and support needs.
- b) The council has no legal duty to provide or directly commission care for a self-funder. However, if requested the council may use **discretion** to do so, and will consider requests on a case by case basis.

4.5 Self-funders – other settings.

- a) People with financial assets above the upper capital limit are not entitled to financial support from the council, but if they have eligible care needs, they can ask the council to arrange the care on their behalf. The council must meet those needs if asked to do so but it will charge the person the full cost of the care and support and administration fees.
- b) A flat rate fee will apply to cover the council's costs of finding a care provider and negotiating a rate on behalf of the self-funder; the provider will charge the self-funder directly for the services they receive.
- c) If a self-funder asks the council to arrange their care by entering into a contract with a care provider, the council we will charge an administration fee to cover the cost of making payments to the care provider and sending invoices to the self-funder for care charges. These charges are in addition to any care fees. More information about the fees the council charges can be found in the council's service charge leaflet available on the council's website Herefordshire.gov.uk.

5. When charges do not apply

5.1 The council's care and support charging policy provides more information including when **exemptions from charging** apply. The council will not charge for providing the following services (although some may require an eligibility threshold):

- a) Information and advice
- b) Social care assessment
- c) Carers assessment
- d) Financial assessments
- e) Light touch financial assessments
- f) Capacity assessments
- g) Carers services, where the service is provided directly to the carer
- h) Intermediate care (rehabilitation or reablement services) up to a maximum of six weeks
- i) Community equipment or aids and minor adaptations to daily living recommended by an occupational therapist, such as bath aids or grab rails. A minor adaptation is one costing £1,000 or less
- j) Delivery, loan and installation of telecare equipment (monitoring is charged for)

- k) Administration of appeals, and waivers for exceptional circumstances
- l) Recovery of care and support charges debt

6. When a person lacks mental capacity

6.1 At the time of the assessment of care and support needs, the council will establish whether the individual has the mental capacity to determine decisions over their own financial affairs, care needs and residency.

(i) Where an individual lacks mental capacity they may still be assessed as being able to contribute towards their care. If the person lacks capacity, the council will find out if they have any of the following as the appropriate individual will need to be involved in the financial assessment:

- a) Enduring Power of Attorney (EPA);
- b) Lasting Power of Attorney (LPA) for Property and Affairs;
- c) Lasting Power of Attorney(LPA) for Health and Welfare;
- d) Property and Affairs Deputyship under the Court of Protection; or;
- e) Any other person dealing with that individual's affairs (e.g. someone who has been given appointee-ship by the Department for Work and Pensions for the purpose of benefit payments).
- f) Family members may be involved with but they may not have any legal right to access the person's bank accounts or pay care charges.

6.2 People who lack mental capacity to give consent to a financial assessment, and who do not have any of the above with authority to be involved in their affairs, may require the appointment of a Property and Affairs Deputyship. Family members can apply for this and the council will provide them with information and advice on Lasting Power of Attorney and Deputyships. In the event of no family involvement then the council can apply.

7. Deferred payments

7.1 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. The council **must** offer a deferred payment to people if they meet all of the following criteria at the point of application; broadly, that the person:

- a) Is ordinarily resident in the council area or present in the area but of no settled residence or, ordinarily resident in another council area but the council has determined that they will or would meet the individual's care needs under section 19 of the Care Act if asked to do so.
- b) Has needs which are to be met by the provision of care in a care home. This is determined when someone is having care and support needs which the council considers should be met through a care home placement.

- c) Has less than (or equal to) the capital threshold in assets excluding the value of their main or only home (for example in savings, other non-housing assets and housing assets other than their main or only home).
- d) The person's home is not disregarded, for example it is not occupied by a spouse or dependant relative as defined in regulations on charging for care and support.

7.1 Changes to the (Deferred Payment) regulations 2014, that came into force on the 5 February 2018 mean that councils must offer a deferred payment agreement to people who meet the qualifying criteria for a deferred payment agreement but who don't need the council to arrange care on their behalf.

The type of deferred payment agreement can be either:

- The council pays the care home directly and defers the charges due to it from the individual (traditional style deferred payment)
- The individual pays the care provider for their care and the council loans them the cost of the care instalments less any contributions the individual contributes from other sources (loan-type).

7.2 For more information about deferred payment agreements refer to the deferred payment agreements policy.

https://www.herefordshire.gov.uk/directory_record/4799/deferred_payment_agreements_policy

8. Self-funder pathways

Two pathways have been developed to help illustrate the decision pathways to consider before deciding which care and support option suits each individual best and the steps that needs to be considered. This will allow the self-funder to consider all the options available to them and the sources of help which may apply to them.

Please note that the capital threshold figure of £23,250 is correct at the time of publication of this policy, but is subject to change.

8.1 OTHER SETTINGS (NONE CARE HOME)

Do you have capital or savings in excess of £23,250?

(Capital includes the value of your former home unless it is occupied by your partner, a relative who is aged over 60 or is incapacitated, or a child under 16 who you or a former partner who is a lone parent is liable to maintain)

NO

1. The council may assist with your care costs.

2. There will be an assessment of social care needs and you will be involved in creating a support to meet those needs if you are eligible for social care.

3. You will be offered a choice of a directly commissioned service (the council pays direct and arranges for you) or a Direct Payment which means the council gives you or your support the money so you can arrange and purchase services yourself.

4. There may be a financial contribution which you may be required to pay. This amount will be based on your financial assessment.

YES

1. Obtain an assessment of your eligible care needs from your council.

2. You can arrange your care directly yourself, or you can ask the council to arrange it on your behalf. You will pay the full cost of the service plus a set-up fee and/or admin fee if you choose to ask the council to pay the provider and invoice you for the charges.

3. Depending on your other capital, you may be eligible for benefits.

4. Seek independent financial advice.

5. You may be able to claim Attendance Allowance or Personal Independence Payment (PIP) whether you self-fund your care or ask the council to provide it.

Note 1. If you have health related needs you may be eligible for NHS continuing healthcare funding (CHC), you must be assessed by healthcare professionals <https://www.nhs.uk/conditions/social-care-and-support/nhs-continuing-care/>

8.2 MOVING INTO A CARE HOME

Ensure talk to the council to explore all your options. Also read section 9 and consider all your options, before making a decision.

Do you have capital or savings in excess of £23,250?

(Capital includes the value of your former home unless it is occupied by your partner, a relative who is aged over 60 or is incapacitated, or a child under 16 who you or a former partner who is a lone parent is liable to maintain)

NO

1. The council may assist with your care costs.
2. Arrange an assessment of your (eligible) social care needs with the council.
3. You must have eligible social care needs in order to get financial support from the council.
4. You will be able to choose which care home you prefer subject to it meeting your assessed needs and being within the price the council is prepared to pay.
5. If you wish to live in more expensive accommodation than the council will fund, you must find a third party 'top-up' to the council funding.
6. You are not allowed to fund this yourself from capital below £23,250.
7. An exception to the top up requirement applies if you are receiving section 117 Mental Health Aftercare Services or during the first 12 weeks when your property is being disregarded or if you have asked for a deferred payment.

YES

1. Obtain an assessment of your eligible care needs from your council if you are moving into permanent care for the first time then the council can help you with the first 12 weeks care costs if apart from your property your other savings are below £23,250. Any help beyond this period maybe through a deferred payment agreement.

2. Before making a decision talk to the council to make sure you have explored all options.

3. Depending on your other capital, you may be eligible for benefits.

4. Seek independent financial advice.

5. You may want to consider a deferred payment if you don't want to sell your home.

6. As a self-funder, you can claim Attendance Allowance or Personal Independence Payment (PIP)

7. If you are moving into a nursing home, claim the NHS Nursing Care Contribution – known as FNC. This is a weekly payment paid directly to the home.

8. Make sure you can afford your chosen care over the long term – seek advice.

Note 1. If you need short term care in a care home, then the amount of financial support you get from the council will be based on your financial assessment.

Note 2. Where you have moved into a care home on a short term basis and later decide to remain on permanent basis, then this will affect how much the council can contribute towards your care.

Note 3. If you have health related needs you may be eligible for NHS continuing healthcare funding (CHC), you must be assessed by healthcare professionals <https://www.nhs.uk/conditions/social-care-and-support/nhs-continuing-care/>

9. What happens when a self-funder's assets fall and they require council funded care in a care home?

- 9.1 The council can only make a contribution towards care home fees for people who are assessed by the council as meeting the eligibility criteria for residential or nursing care, and who meet the criteria for financial support. This applies even if an individual is already living in a care home which they have been paying for under a private arrangement.
- 9.2 The council has the right to refuse to fund the current cost of the home if it is not affordable and a suitable alternative home can be offered to meet the persons eligible social care needs.
- 9.3 If a person fails to pay a care provider the care home fees, they may be required to leave the care home and it is likely that the care home will seek to recover costs by taking legal action if appropriate.
- 9.4 If council funded care is required because a person's capital assets are likely to fall below the upper capital limit, it is important that an early request be made to the council for a care assessment. This can be requested up to 6 months in advance to ensure arrangements are put in place by the time the funding limit is reached.
- 9.5 The care and support planning process identifies how best to meet an individual's eligible needs and how much funding they will get towards their care cost. As part of this process, the council must provide the individual with a personal budget and inform them how much they will have to contribute towards it.
- 9.6 If an individual has chosen a care home that is more expensive than the council's usual rate, the council should ensure that the person, and any other person responsible for paying towards the care, fully understands the implications of their choice upon affordability and sustainability, and the potential impact when funds fall below the capital threshold.
- 9.7 A top-up contribution will be required when an individual chooses an accommodation setting that is more expensive than the amount identified for the provision of accommodation within their personal budget, and the needs can be met elsewhere at the council rate.
- 9.8 Therefore the Council will consider in its decision making:
- a) Consider and formally decide whether 'a' home at the Councils standard rate would meet the self-funder's assessed eligible needs.
 - b) Consider the impact of any move on the self-funder and their right to a family life.

- c) Negotiate with the current home provider to ascertain the best rate available to the council.
- d) Weigh up the impact of any move on the self-funder versus the cost saving the Council would achieve by the person moving to a home at its standard rate.
- e) Decide whether the cost saving justifies the impact of moving the self-funder, and decide whether a move, to achieve a saving, is proportionate.
- f) Once the Council has concluded that a home at the standard rate would meet the assessed eligible needs the council should explain to the self-funder and their relatives the options and the decision making process.
- g) The option should be made available for the third party to pay something to reduce the funding gap as a top up.
- h) The council should adopt a transparent approach to the sequential decision making process and its rational.

9.9 The council has the right to refuse to fund a home where eligible needs can be met in a home at the council funded rate. **Where this is the case this will result in the person moving home.**

9.10 Only when there is no suitable accommodation available to meet the assessed needs of the individual within their personal budget, the council will fund the cost of the care, subject to any client contribution, at the higher rate and a top-up will not be required.

10. Information and advice

10.1 The council has a duty to help self-funders and their families by providing information and advice, including where to get access to independent financial advice. Individuals should be provided with sufficient information and advice to ensure they understand the implications, including signposting them to independent advisors.

10.2 Sources of information include; WISH (Wellbeing, Information and Signposting for Herefordshire) is an online service which can help people find information, local services and activities to support their assessed needs. A person can access WISH themselves at www.wisherefordshire.

10.3 To get telephone assistance to find the most appropriate social care information and services contact social care advice and referral team (ART) telephone line 01432 260101.

10.4 The council leaflets, moving into a care home, charging for care and support, and Deferred Payment Agreements
https://www.herefordshire.gov.uk/download/downloads/id/13235/helping_you_pay_for_social_care_-_deferred_payment_agreements.pdf

10.5 The council website Herefordshire.gov.uk also provides information about paying for care
https://www.herefordshire.gov.uk/info/200147/social_care_and_support/407/paying_for_care

11. Independent help and advice

- 11.1 Paying for care can be an expensive and open-ended commitment. It is important that people are aware that they may not have to sell their home or use up all of their financial assets to fund their care.
- 11.2 If a person is paying the full cost of care themselves, they should seek independent financial advice. Looking for a financial advisor with specialist qualifications on advising for the funding of long-term care is recommended as they will be able to explain all the costs and risks involved and should be able to help with other things such as setting up Lasting Power of Attorney.
- 11.3 If a person is currently receiving care it is still advisable to seek specialist information and advice as there may be options available to them to protect their interests and those of their family.
- 11.4 There are a range of sources of independent financial advice. The council would strongly recommend that individual's also discuss their situation with an Independent Financial Advisor and explore all the options available to them.
- 11.5 The council's webpages contain information about where to access information and advice. Use the link below to find out more..
- https://www.herefordshire.gov.uk/info/200147/social_care_and_support/407/paying_for_care/7

12. What the council expects from Care Providers

- 12.1 The council expects all care providers to make self-funders aware of their rights and risks in relation to funding a placement over and above the council rate. Also the risks of people falling below the capital limit and the implications in relation to the risk of having to move home.
- 12.2 The care provider has a duty of care to provide good information and advice to the customer. This should result in the self-funder being better informed prior to making a decision and will better understand the impact of the decisions they make before moving towards formal care services. This will mean that self-funders will:
- a) Be more aware of the full range of care and support options.
 - b) Be more aware of the need to plan early for care and support needs
 - c) Avoid making decisions at crisis point
 - d) Be more likely to make early contact with the council to help inform options
- 12.3 The provider will work with the council in offering the right advice and information. The council can offer:

- a) An assessment of social care needs to help the self-funder determine their eligibility and also advice on which care homes can meet their social care needs.
- b) Carry out a financial assessment which will assist the person to maximise their financial options. It will also help the self-funder understand the obligations of the council should their capital fall below the financial threshold, and this may inform decisions about which care home the person moves into based on longevity of their own finances.

- 12.4 The provider will work within the assessment process which will also allow the council to reschedule a further financial assessment based on the persons financial situation, which will mean the council can be more responsive in meeting people needs when funds fall below the capital threshold and when the council will have a duty to fund eligible needs.
- 12.5 It will also build a better picture of the overall self-funding market and will assist the council to manage the market better and predict is financial obligations in advance.
- 12.6 In addition the provider will be clear about future plans and aid business continuity, and avoid delays in payments.
- 12.7 The Councils contract with care homes **also sets out its intentions in regard to private fee payers, also known as self-funders as follows:**
- a) Where the Provider accepts a private fee payer into the Care Home, the Provider will make reasonable endeavours to assess the financial position of the private fee payer and advise the private fee payer of the consequences of income falling below the threshold, including making it clear that the private fee payer may be required to leave the Care Home.
 - b) In the event of the private fee payer's assets and/or income falling below the threshold an assessment of needs shall be carried out by the council to identify both the social care and financial eligibility of the individual for public funding.
 - c) The self-funder will be required to continue paying the private fee rate to the provider whilst the assessment is conducted by the Council. It is important to contact the council in advance of funds falling below the capital threshold, to allow the council time to carry out its assessments and make the necessary arrangements. This should be a minimum of 3 months in advance to allow for a timely response.

13. What the Council expects from Self – Funders

- 13.1 Seek information and advice early from the council. It is in the self-funders own interests to ensure they are making informed decisions, taking into account the advice and information available to them.
- 13.2 It is recognised that to accept formal care is a life changing decision, and often it is made in times of crisis, and by planning early will allow opportunity to consider all the options, which will be more likely to have positive outcomes, e.g. enabling people to remain at home longer.
- 13.3 It is the responsibility of the individual to engage with the offers of support available to them.
- 13.4 By having a social care assessment this will provide information about eligibility for social care support. This will mean the self-funder can make well informed decisions and be aware of the consequences of those decisions (e.g. awareness that by selling a house and moving to a care home for social reasons without eligible social care needs means that , the council cannot offer financial support to pay for care if/when they fall below they capital limit).
- 13.5 A social care assessment can also make sure care needs can be met in the home of choice and provide information about care providers to meet individual's eligible needs.
- 13.6 The council's financial assessment will help to work out if a person is eligible for financial support from other sources. It will also help to understand the other ways the council can provide help and what options will be available in the future if your circumstances change.
- 13.7 The council can reschedule a financial review when it carries out an assessment and work out when people will need financial support from the council in the future. This will help the individual; the council and the provider meet your long term needs quickly in a planned way.

14. Related policies and leaflets

- 14.1 Adult and Wellbeing care and support charging policy
https://www.herefordshire.gov.uk/downloads/file/7002/care_and_support_charging_policy_2016
- 14.2 Deferred Payment Agreements Policy
https://www.herefordshire.gov.uk/directory_record/4799/deferred_payment_agreements_policy

- 14.3 Adult and Wellbeing Care and Support and Meeting your Needs Policy
https://www.herefordshire.gov.uk/downloads/download/246/care_and_support_and_meeting_your_needs_policy
- 14.4 Third Party Contributions (Top-up's) Policy
https://www.herefordshire.gov.uk/info/200147/social_care_and_support/407/paying_for_care/5
- 14.5 Direct Payments Policy
https://www.herefordshire.gov.uk/directory_record/4798/direct_payments_policy
- 14.6 Debt Recovery Policy
<http://councillors.herefordshire.gov.uk/documents/s50035301/Appx%20A%20Debt%20Recovery%20Policy.pdf>
- 14.7 The council has a separate policy in relation to residential and nursing third party contributions (tops ups);
https://www.herefordshire.gov.uk/download/downloads/id/4913/third_party_contributions_policy_june_2015.pdf
- 14.8 The current council rates are contained within the “moving into a care home” leaflet;
https://www.herefordshire.gov.uk/info/200147/social_care_and_support/407/paying_for_care/4

15. Monitoring and review

- 15.1. This policy is in line with current care act legislation.
- 15.2 It will be reviewed in light of any updated statutory guidance.
- 15.3 Non-compliance with this policy may result in individual choice being unfairly restricted and may also result in the council being in breach of national legislation. It may also leave the council open to legal challenge.
- 15.4 The effectiveness of this policy will be determined by ongoing engagement with the people this policy affects and the timeliness of the council's application of the policy. The main channels through which this will be established are feedback through appeals and complaints, service user contact with welfare and financial assessment staff, social work practitioners, and care and accommodation provider contact with commercial services and commissioning teams.

Document Classification

<i>Author Name and Role</i>	Laura Ferguson Senior Commissioning Officer
<i>Date Created</i>	October 2018
<i>Date Issued</i>	March 2019
<i>Description</i>	Self-Funders Policy
<i>File Name</i>	Adult and Communities Self-Funding Policy
<i>Format</i>	Microsoft Word / 2010
<i>FOI/EIR Disclosure</i>	Yes
<i>Geographic Coverage</i>	Herefordshire
<i>Group Access</i>	Public
<i>Language</i>	English
<i>Master Location</i>	<Intranet Info Library>
<i>Publisher</i>	Herefordshire Council
<i>Rights Copyright</i>	Copyright of Herefordshire Council
<i>Security Classification</i>	Public
<i>Status</i>	Draft
<i>Subject</i>	Self-Funders Adult Social Care Services.
<i>Title</i>	Adult and Communities Self-Funding Policy
<i>Type</i>	Policy

Consultation Log

<i>Date sent for consultation</i>	
<i>Consultees</i>	<u>a. Herefordshire Council</u> <ul style="list-style-type: none"> • Legal • Directorate Leadership Team • AWB Operations • AWB Commissioning

Approval Log

		Date
<i>Impact assessment completed by</i>	September 2018	
<i>To be agreed by</i>	Director of Adults Communities	
<i>To be approved by</i>	Cabinet Member	
<i>Finally to be ratified by</i>		
<i>To be reviewed by:</i>	Welfare and Financial Assessment Team	

Version Log

<i>Version</i>	<i>Status</i>	<i>Date</i>	<i>Description of Change</i>	<i>Reason For Change</i>	<i>Pages affected</i>
	Draft				All

FINAL DRAFT