

## **FACTSHEET – FINANCIAL ASSESSMENT FOR PERMANENT RESIDENTIAL / NURSING PLACEMENTS**

# **Frequently Asked Questions (FAQ'S)**

### **WHY DO I NEED A FINANCIAL ASSESSMENT?**

You will need to have a financial assessment carried out if you have been assessed as requiring Residential / Nursing Care to help meet your care and support needs. The financial assessment is based on Government guidance and applies set criteria to work out how much you could afford to contribute towards your Residential / Nursing placement.

### **WHAT IF I DON'T WANT A FINANCIAL ASSESSMENT OR TO DISCLOSE MY FULL FINANCIAL INFORMATION?**

You don't have to share your full financial information with us. However should you choose not to, you will be assessed as able to pay for the full cost of your residential / nursing care placement and you will be advised of payment arrangements by the council's Billing Team.

### **HOW MUCH WILL I HAVE TO CONTRIBUTE TOWARDS MY RESIDENTIAL / NURSING PLACEMENT?**

An officer from the Social Care Financial Assessment Team (SCFAT) will need to know about your financial circumstances in order to calculate any contribution you may need to pay towards the service you have been assessed to receive and whether the Council will need to assist with the cost of your care. This will be based on the following information:

- Any income and benefits you receive;
- Any capital or savings you have;
- Any property you own;
- Any expenditure you might have in the community (such as mortgage or rent);
- A disregard of the standard personal allowance rate (this is the amount of money the government says you must be left with after paying for your care).

### **Please note:**

**Your weekly contribution will be effective from the date you entered care, therefore while you are waiting for your financial assessment, you should spend no more than £24.90 from your income and benefits from the date you enter care to avoid falling into arrears. This amount is**

**called your Personal Expenses Allowance and is set by the Government each year.**

**If you have savings or capital over the upper capital limit of £23,250 or you do not wish to disclose your full financial information, then you will be assessed as able to pay the full cost of your placement.**

### **I OWN A PROPERTY HOW WILL THIS BE TREATED IN THE FINANCIAL ASSESSMENT?**

The value of any property over the upper capital limit owned by you will be included in the financial assessment (unless you are advised in the financial assessment that it is to be disregarded) and this will mean that you have been assessed as able to pay the full cost of the placement.

Your main or only property will be disregarded for the first 12 weeks of your placement.

If you need more than the first 12 weeks to make a decision on what you wish to do with your property or you would like the Council to assist you with the funding of your placement, you will be advised of the Council's Deferred Payment Scheme. This is an option that would allow you to defer or delay paying some of your care costs until a later date.

If you own a second property or land with a value over the upper capital limit, this will be included in your financial assessment from your placement start date. If this is the case then the 12 week property disregard would not be applicable in this scenario.

Individual circumstances relating to any properties or land you own including whether they are to be disregarded will be discussed during your financial assessment.

### **HOW WILL MY FINANCIAL ASSESSMENT BE CARRIED OUT?**

An officer from the SCFAT team can gather your financial information in a number of ways:

- Through shared information you have already provided to Department of Work & Pensions and Housing Benefit sections so that you do not have provide the same information again (although we may need to ask about capital as we use different rules to these sections)
- Through a telephone assessment where your financial circumstances will be discussed at a convenient time to you.
- Through a home visit where it is more appropriate that the financial assessment is carried this way or where we need to discuss more complex issues with you face to face.

## **WHAT HAPPENS WHEN THE FINANCIAL ASSESSMENT IS COMPLETED?**

You will be sent a letter confirming the Weekly Assessed Contribution towards your Residential / Nursing Care Placement following the Financial Assessment.

You will then be contacted by the council's Billing Team to discuss how you would like to pay your contribution and agree a payment arrangement with you.

You will continue to make your payment this way unless informed otherwise.

'Third Party Contributions' should be paid for by a Third Party. This cost will be in addition to any Weekly Contribution.

If you have a change in financial circumstances (i.e. if your income increases/decreases or capital changes), you should notify the Social Care Financial Assessment Team immediately

## **WILL MY FINANCIAL ASSESSMENT BE REVIEWED?**

Yes, if you have no change in financial circumstances earlier then we will contact you around the anniversary of your last completed financial assessment to recalculate your contribution based on your current circumstances at that time.

Any new contribution you are assessed to pay should apply from your review date, however there may be circumstances where you may have to pay your new contribution from an earlier for example if you have not informed us of a new benefit award.

## **WHAT HAPPENS IF I GO INTO HOSPITAL, DO I STOP MY PAYMENTS?**

No, you will need to continue to pay your assessed contribution to keep your placement within the care home for when you come out of hospital; similar to if you were in your own home when you would have to continue paying your rent, mortgage and utility bills for example. If the council is assisting with the funding of your placement they also will need to continue to pay their contribution each week.

## **ARE ANY OF MY BENEFITS AFFECTED IF I GO INTO HOSPITAL?**

Yes, if you are in receipt of any disability benefits such as Attendance Allowance, Disability Living Allowance Care Component or Personal Independence Payment Daily Living Component, these will be suspended after 28 days of being in hospital.

If you receive a Severe Disability Premium in your Income Support, Income Based Employment & Support Allowance or Pension Credit, then this element of your benefit will also be suspended after 28 days of being in hospital.

If you receive Carers Allowance, this will be suspended after 12 weeks of being in hospital.

If you go into hospital and your stay is likely to be longer than 28 days then you should inform the relevant benefit department paying your benefit to ensure it is suspended from the correct date and prevent any overpayment.

### **WHAT IF I AM UNHAPPY WITH THE OUTCOME OF THE FINANCIAL ASSESSMENT?**

You would need to contact the officer in the SCFAT team who completed the financial assessment if you think a mistake was made in calculating your contribution. They can talk through and explain the financial assessment with you.

If you are still not happy you can ask for a review of your financial assessment, the officer will provide you with a Review Form to complete with details of why you think the decision is incorrect and provide any evidence to support your request.

If you are not happy with the outcome of the review request then you have the right to appeal this decision, the SCFAT officer will advise you of this procedure.

### **WHAT SHOULD I DO IF I AM NOT ABLE TO DEAL WITH MY OWN FINANCES?**

If you are not able to deal with your own finances you could ask the (DWP) Pension Service to consider appointing a friend or family member to deal with your benefits and retirement pension.

Some banks or building societies may allow for a friend or family member to become a third party signatory on your accounts. You should discuss this with your bank or building society for further details.

If you have other income or capital, then a friend or family member may need to apply for Lasting Power of Attorney or Deputyship. If this is the case, then advice should be sought from a Solicitor.

If you have no one else that could or is willing to take this responsibility then the council can take this up on your behalf.

### **WHAT HAPPENS IF I AM ASSESSED AS SELF FUNDING FOR MY CARE?**

If you are financially assessed as Self-Funding, i.e. if you have total capital over the upper limit, then you are required to pay for the full cost of your care.

Whilst you are Self-Funding you may be entitled to further benefits such as Attendance Allowance, Disability Living Allowance Care Component and Personal Independence Payment Daily Living Component. You should contact the Pension Service for further information. Once your capital falls

below the upper limit, you should contact the Duty Social Worker from the relevant People Services office.

As a self-funding resident, it is important to understand that your financial assets are to be administered in your best interest. This is to ensure that any monies, property, capital or assets that you give away or dispose of, are not interpreted as deprivation to avoid paying charges. Should this occur the Council will consider whether the purpose of the gift or disposal was to avoid paying care charges.

### **CAN A CARE HOME CHARGE FOR ADDITIONAL COSTS?**

Families should be aware that some residential and nursing homes may charge for additional services. You should ask to see these before making any final decision about a placement in case you would not be able to pay these. For example, some care homes charge for supporting a resident to go to a routine medical appointment as well as in some cases, urgent visits to hospital. These may be charged at £15 per hour but will vary depending on your care home.

### **WHAT IF THE CARE HOME CHARGES A TOP-UP FEE?**

Please refer to the Council's "Residential Top-Ups" leaflet or ask your social care worker for a copy.

### **WHAT IS NHS CONTINUING HEALTH CARE?**

National Health Service Continuing Health Care is a package of care funded by the National Health Service for people whose needs meet the particular eligibility criteria of the Sunderland Clinical Commissioning Group. This care could be provided in a hospital setting, in a nursing registered care home that is chosen by the National Health Service or at times in the person's own home.

National Health Service Continuing Health Care is allocated to eligibility criteria set by individual Strategic Health Authorities, based on national guidelines and which is used by the Sunderland Clinical Commissioning Group, in order to decide whether a Service User is entitled to this funding.

In order to identify whether you meet the criteria, a Continuing Care Assessment needs to be completed by a Health Professional.

If you are assessed as being eligible for National Health Service Continuing Health Care, the following outlines whether a financial assessment will be completed.

- If National Health Service Continuing Health Care are **Fully Funding** the Care Home Fees, no financial assessment will be completed as you will not be expected to pay for any of the costs charged by the Care Home. You should contact the Department of Work and Pensions as there may be changes or further entitlement to your benefits.

- If National Health Service Continuing Health Care are **Part Funding** the Care Home Fees, a financial assessment will need to be completed to calculate your weekly contribution.
- If following a review by a Health Professional your circumstances change and you no longer meet the criteria for fully funded National Health Service Continuing Health Care, you should contact People Services immediately so that a Financial Assessment can be completed to calculate your weekly contribution.

Further information regarding National Health Service Continuing Health Care can be obtained from the Sunderland Clinical Commissioning Group.

### **WHAT HAPPENS IF I AM DISCHARGED FROM HOSPITAL PENDING A FUNDING MEETING?**

If you are discharged from hospital with NHS funding, this means that the NHS will cover the costs of your placement until the outcome of the Multidisciplinary Team Meeting (MDT), this will normally take place within 28 days.

If the outcome is that you qualify for Fully Funded Continuing Health Care then the NHS will continue to pay for your placement following the MDT meeting.

If the outcome is that you do not qualify for Fully Funded Continuing Health Care then the NHS will stop paying for your placement from the date of the MDT meeting. You will be referred for a financial assessment and once your client contribution has been calculated, this will need to be paid from the date of the MDT meeting and not from the date the financial assessment takes place.

### **CONTACT US**

For more information on the financial assessment process:

Write            Social Care Financial Assessment Team  
                     People Services  
                     Civic Centre  
                     Burdon Road  
                     Sunderland  
                     SR2 7DN

Telephone    0191 520 5552

E-mail            [FinancialAssessmentEnquiries@sunderland.gov.uk](mailto:FinancialAssessmentEnquiries@sunderland.gov.uk)

## **USEFUL WEBSITES:**

**DEPARTMENT OF HEALTH:** [www.dh.gov.uk](http://www.dh.gov.uk)

**Care Act 2014:**

<https://www.gov.uk/government/publications/care-act-2014-statutory-guidance-for-implementation>

**Age UK:** [www.ageuk.org.uk](http://www.ageuk.org.uk)

**Housing Care / First Stop:** <http://www.housingcare.org/>

**Elderly Accommodation Counsel (EAC):** <http://www.eac.org.uk/>

## **USEFUL TELEPHONE NUMBERS**

### **DEPARTMENT FOR WORK AND PENSIONS:**

**Pension Service:** 0800 731 0469

**Income Support & Employment Support Allowance:** 0800 169 0310

**Disability Living Allowance (65+) and Attendance Allowance Helpline:**  
0800 731 0122

**Disability Living Allowance (Under 65)** 0800 916 0647

### **SUNDERLAND CITY COUNCIL:**

**Customer Service Network Switchboard:** 0191 520 5555

**Housing and Council Tax Benefits:** 0191 520 5551

**Council Tax:** 0191 520 5551

**Health & Wellbeing:** 0191 520 5552

### **DEPARTMENT OF HEALTH:**

**Sunderland Clinical Commissioning Group:** 0191 512 8484