



Report of: Executive Member for Health and Wellbeing

Meeting of:	Date	Ward(s)
Executive	12 March 2015	All

Delete as appropriate	Exempt	Non-exempt
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SUBJECT: Charging for Care and Support in accordance with the Care Act 2014

1. Synopsis

- 1.1 The purpose of this report is to propose the council's approach to charging for care and support in accordance with the Care Act 2014.
- 1.2 The Care Act provides a single legal framework for charging for care and support under sections 14 and 17. It enables a local authority to decide whether or not to charge a person when it is arranging to meet a person's care and support needs or a carer's support needs.

2. Recommendations

- 2.1 To continue to charge for care and support in care homes.
- 2.2 To continue to charge for care and support of people in their own homes and in the community.
- 2.3 To continue not to charge for support to carers.
- 2.4 To provide delegated authority to the Corporate Director of Housing and Adult Social Services in consultation with the Executive Member for Health and Adult Social Care to approve the detailed policy covering the discretionary areas of charging for care and support.

3. Background

Residential and Domiciliary Care

- 3.1 Under the current law, Councils have a statutory duty under section 22 (1) of the National Assistance Act 1948 to charge for care and support in care homes, and a power to charge for care and support of people in their own homes and in the community under section 17 of the Health Services and Social Security Adjudications Act 1983. Under the Care Act, Councils will have a power to charge for both of these types of service. Support to carers was not charged for.
- 3.2 The Care Act introduces a lifetime cap on care costs, currently set at £72,000 from April 2016. Islington

Council is working closely with the NHS locally to provide better integrated care at home, which reduces the need for people to go into residential services. In cases of hardship, the council does exercise discretion. Payments can be deferred until the service user's home is sold, which is often after they have died in care.

3.3 Currently the council's income from service users receiving care and support in residential care homes and in their own homes is £9m per year. This is likely to increase as people who previously funded their own care approach the council to take advantage of the lifetime cap.

3.4 Therefore the proposal is that the council will maintain the current position in respect of which types of care and support it charges for via a means test to calculate how much the person can afford to contribute.

Carers costs

3.5 The burden on carers has been comprehensively scrutinised by the Health and Social Care Committee, and recently the subject of a discussion at full council. It is widely acknowledged that the burden of caring can have a negative impact on well-being, earnings and health outcomes.

3.6 It is also acknowledged, locally and nationally, that the extensive support provided by carers reduces the financial burden on local authorities and other public services.

3.7 Therefore the proposal is that the council continues not to charge for support for carers.

Detailed Charging Policy

3.8 The Government has issued over 500 pages of statutory guidance to accompany the Care Act. Detailed implementation discussions are taking place with the Local Government Association, London Councils, the NHS, service users, carers and voluntary organisations nationally and locally. Statutory and informal guidance is likely to change at a detailed level. It is therefore recommended that the detail of charging policy, subject to recommendations 2.1 and 2.2 being adhered to, is delegated to the Corporate Director of Housing and Adult Social Services in consultation with the Executive Member for Health and Adult Social Care.

4. Implications

4.1 Financial implications

The amount the council collects as income for charging for care and support will remain as currently budgeted at circa £9m for 2015/16.

4.2 Legal Implications

The Care Act 2014 which comes into force on 1 April 2015, sets out a single overarching charging system which will replace the current charging framework.

Under the existing legal framework, local authorities have a duty to charge for residential and nursing accommodation under section 22(1) of the National Assistance Act 1948, and a power to charge for non-residential care services under section 17 of the Health Services and Social Security Adjudications Act 1983. Detailed provision in terms of charging for residential and nursing care is contained in the National Assistance (Assessment of Resources) Regulations 1992 and CRAG (Charging For Residential Accommodation Guide). Charges for non-residential care services are governed by the Fairer Contributions Guidance issued by the Department of Health which required local authorities to set their own individual policies on charging for non-residential care services.

The Care Act sets out local authorities' duties and powers to meet adults' and carers' needs for care and support/support in sections 18-20 of the Act. Section 8 of the Care Act gives a broad list of services that may be provided to meet the needs of adults and carers under sections 18-20 of the Act as follows:

- (a) Accommodation in a care home or in premises of some other type;
- (b) Care and support at home or in the community;
- (c) Counselling and other types of social work;

- (d) Goods and facilities;
- (e) Advice information and advocacy

Section 14 of the Care Act gives local authorities a general power to make a charge for meeting needs for care and support under sections 18 – 20 of the Act. Detailed provisions in respect of charging and the assessment of resources are set out in section 19 of the Care Act, the Care and Support (Charging and Assessment of Resources) Regulations 2014 and relevant chapters of the Care and Support Statutory Guidance.

The new charging provisions represent a change in the law and Council is therefore required to record a formal decision that it will continue to charge individuals for care and support under the powers set out in the Care Act, as respects care home accommodation and care and support at home or in the community. The updating of existing policies and procedures will also be required to ensure that they reflect the requirements set out in the new legislation.

4.3 **Environmental Implications**

None

4.4 **Equality Impact Assessment**

The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

A resident impact assessment has not been completed. The recommendations in this report propose no changes to what types of care and support are charged for.

5. **Conclusion and reasons for recommendations**

- 5.1 The proposal is that the council will continue to charge for care and support in care homes and care and support of people in their own homes and in the community.
- 5.2 Carers make a significant contribution to the local community; they help to maintain the health and wellbeing of the person they care for, supporting their independence and helping them to stay in their own homes for longer. In recognising this, the proposal is to continue not to charge for support to carers.
- 5.3 The council will update the charging policies for care and support in accordance with the regulations laid down in the Care Act 2014. It is recommended that delegated authority be given to the Corporate Director of Housing and Adult Social Services, in consultation with the Executive member for Health and Social Care, to agree a detailed policy.

Background papers: None

Final report clearance:

Janet Burgess

Signed by: Executive Member for Health and Wellbeing

Date: 18 February 2015

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