

# Social care charging policy: consultation 2019

## Overview

Leicester City Council is proposing a change to its financial assessment for people who receive non-residential care. This survey can be filled in by anyone, not just those who receive help from adult social care.

### Why is change needed?

The Department of Health changed its guidance on financial assessments alongside the Care Act 2014. We plan to bring our assessments in line with the current guidance.

### What are we proposing?

Everyone who is eligible for adult social care has a financial assessment to work out if they have to pay towards the cost of their care, and if so, how much. The assessment criteria are outlined in the council's charging policy, which can be found at [leicester.gov.uk/financial-assessment](http://leicester.gov.uk/financial-assessment)

The financial assessment takes into account any benefits that people may receive from the Department of Work & Pensions (DWP) because of their disability. These are called disability benefits and are paid in the form of:

- Attendance allowance (AA) – for over 65s
- Disability living allowance (DLA) – for under 65s
- Personal independence payments (PIP) – slowly replacing DLA.

We are proposing to change the way in which these benefits are treated, within the financial assessment, to bring it in line with the latest legislation.

**The change will not affect your entitlement or eligibility to any disability benefits, or their rates.**

## Why we are consulting

We want to hear your views on the proposed changes. No changes can be made until the city mayor and his executive team have considered the findings of the survey. The consultation will run from **2 September to 15 November 2019**. You can complete it online at [leicester.gov.uk/consultations](http://leicester.gov.uk/consultations) or fill out this questionnaire and return it using the pre-paid envelope to:

Social Care Charging Policy Consultation  
9-15 Bosworth House  
1st Floor, West Wing  
Princess Road West  
Leicester LE1 6TH

If you want to talk to someone about the survey or you need support to complete it, please call our helpline on 0116 454 4400 or email us at [asconsultations@leicester.gov.uk](mailto:asconsultations@leicester.gov.uk)

## About you

**1** Please tick the box that applies. If you are filling this in on behalf of someone else, please tick the box that applies to the individual.

*Please select all that apply*

- I get help with care and support from Leicester City Council (adult social care)
- I am the carer or representative of someone who gets help with care and support from the council (adult social care)
- I belong to an organisation that works with vulnerable adults in Leicester
- Other (please state)

## 2 What is your postcode?

Please note: we collect postcode data to gain a better understanding of which parts of the city/county respond to our consultations. We cannot identify individual properties or addresses from this information.

# Proposal

## How are these benefits treated currently?

The council carries out a financial assessment to check the money people have and whether they can afford to pay towards their services. This helps us to work out if a person has to pay for their care and support and if so, how much.

Some people receive benefits from the DWP because they require frequent help or constant supervision. These benefits are paid at different rates depending on a person's level of need, and the council takes this into consideration during the financial assessment.

Currently, for non-residential care, the council does not include the higher or enhanced disability benefit rate in a person's financial assessment. We count up to £58.70 a person receives per week from these benefits as income. If the person receives the higher or enhanced rate of up to £87.65, the difference between the rates is disregarded and not considered as income. This is in line with previous Department of Health guidance.

### Current treatment of disability benefits

Disability benefit	Lower/standard rate (Counted as income)	Middle rate (Counted as income)	Higher/enhanced Rate (Disregarded)
Attendance allowance (AA)	£58.70	-	£87.65
Disability living allowance (DLA)	£23.20	£58.70	£87.65
Personal independence payment (PIP)	£58.70	-	£87.65

## What does the council want to change?

We want to change the financial assessment and treat all disability benefits as income in full. The Care Act 2014 guidance sets out that all income (care component only, not mobility component) should be taken into account. The council would take the full income into account where we are providing a care package that involves meeting night time care needs. However, the council will continue to apply discretion and disregard part of the income where an individual is incurring costs for night time care that is not arranged by the local authority.

This means that everyone is treated the same, no matter which level of benefit they receive. It would help the council spend its money more wisely so that as many people as possible can get the help they require. It brings us in line with national guidance and we think the proposal is fairer.

## How you may be affected by the change

If this proposal is agreed, some people are unlikely to see any change at all. They will either pay nothing as they do now, or will continue to pay the same amount each week. This is because their income is either too low, or they are already paying the full cost of their services.

Other people will see an increase to the cost of their care. Some people could start paying for the first time. The highest increase anyone would have to pay is £28.95 per week.

We want to understand what concerns people may have, if they were asked to pay more towards their care.

**3** If you were assessed to pay more per week towards your care, due to the change in the treatment of disability benefits, how would this affect you? If you are not a service user, please answer how you think others may be affected by the change.

*Please select all that apply*

- I would be able to manage this
- The change would affect me a little. This could affect how much I have for extras or treats
- The change would affect me a lot. This could affect how much I have for essentials
- I would think about whether I want to carry on getting help from adult social care

**4** Do you have any other comments about the proposed change?

# Equalities monitoring

The information you provide in this final section of the survey will be kept in accordance with terms of current data protection legislation and will only be used for the purpose of monitoring. Your details will not be passed on to any other individual, organisation or group. Leicester City Council is the data controller for the information on this form for the purposes of current data protection legislation.

## 5 Ethnic background:

*Please select only one item*

- Asian or Asian British: Bangladeshi
- Asian or Asian British: Indian
- Asian or Asian British: Pakistani
- Asian or Asian British: Any other Asian background
- Black or Black British: African
- Black or Black British: Caribbean
- Black or Black British: Somali
- Black or Black British: Any other Black background
- Chinese
- Chinese: Any other Chinese background
- Dual/Multiple Heritage: White & Asian
- Dual/Multiple Heritage: White & Black African
- Dual/Multiple Heritage: White & Black Caribbean
- Dual/Multiple Heritage: Any other heritage background
- White: British
- White: European
- White: Irish
- White: Any other White background
- Other ethnic group: Gypsy/Romany/Irish/Traveller
- Other ethnic group: Any other ethnic group
- Prefer not to say

If you said your ethnic group was one of the 'Other' categories, please tell us what this is:

**6** What is your gender identity?

*Please select only one item*

- Male
- Female
- Other (e.g. pangender, non-binary etc)
- Prefer not to say

If Other, please specify

Is your gender identity the same as the gender you were assigned at birth?

*Please select only one item*

- Yes
- No

**7** Age:

*Please select only one item*

- under 18
- 18 - 25
- 26 - 35
- 36 - 45
- 46 - 55
- 56 - 65
- 66+
- Prefer not to say

## 8 Disability

The Equality Act 2010 defines a person as disabled if they have a physical or mental impairment which has a substantial and long-term effect on their ability to carry out normal day-to-day activities and has lasted or is likely to last for at least 12 months. People with HIV, cancer, multiple sclerosis (MS) and severe disfigurement are also covered by the Equality Act.

Do you consider yourself to be a disabled person?

*Please select only one item*

- Yes
- No
- Prefer not to say

If you have answered **'Yes'** to the above, please state the type of impairment that applies to you. People may experience more than one type of impairment, in which case you may need to tick more than one box. If none of the categories apply, please tick 'Other' and state the type of impairment.

*Please select all that apply*

- A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
- A mental health difficulty, such as depression, schizophrenia or anxiety disorder
- A physical impairment or mobility issues, such as difficulty using your arms or using a wheelchair or crutches
- A social / communication impairment such as a speech and language impairment or Asperger's syndrome / other autistic spectrum disorder
- A specific learning difficulty or disability such as Down's syndrome, dyslexia, dyspraxia or AD(H)D
- Blind or have a visual impairment uncorrected by glasses
- Deaf or have a hearing impairment
- An impairment, health condition or learning difference that is not listed above (specify if you wish)
- Prefer not to say
- Other

If Other, please say

**9 Sexual orientation. Do you consider yourself to be...**

*Please select only one item*

- Bisexual
- Gay / lesbian
- Heterosexual / straight
- Prefer not to say
- Other (please specify)

**10 How would you define your religion or belief?**

*Please select only one item*

- Atheist
- Bahai
- Buddhist
- Christian
- Hindu
- Jain
- Jewish
- Muslim
- Sikh
- No religion
- Prefer not to say
- Any other religion or belief (please specify)

Please send us the completed questionnaire in the pre-paid envelope provided. Thank you.