Appendix 1

Adult Social Care Non-Residential Care Services and Personal Budgets Charging Policy

Valid from April 2015



CONTENTS

			Page
1	INTRODUCT	TION	4
2	BACKGROU	IND	4
	2.1	Legal Background	5
3	CHARGING		
	3.1	Care Act Charging Principles	5
	3.2	Financial Assessments	6
	3.3	Service Users who will not be charged	7
	3.4	 Respite Care Domiciliary / Home Care Day Care or Services Meals Transport Telecare Disabled Parking 'Blue Badges' Extra Care Carers (depending on charging decision 	7
	3.5	What counts as income?	9
	3.6	All Eligible Benefits Claimed	10
	3.7	What counts as Capital / Savings?	10
	3.8	Capital Disregards	10
	3.9	Time Disregards	11
	3.10	Tariff Income	12
	3.11	At what rates are the charges made?	12
	3.12	How are couples assessed?	13

	3.13	Working out the Charge	13
	3.14	Waiving of Charges	14
	3.15	Deprivation of Assets and Income	14
	3.16	What happens to the financial and personal information given?	15
4	KEY STANDARDS OF CHARGING POLICY		
	4.1	Assessment and Verification	16
	4.2	Assessment Parameters	17
	4.3	Disability Related Expenditure	17
	4.4	Issues for assessments carried out in the person's home	18
	4.5	Review of Policy	18
5	BILLING AND DEBT RECOVERY		18
6	REVIEW AND COMPLAINTS PROCEDURES 20		20

1 Introduction

This policy is a combination of statutory requirements and local choices based around the needs of the service and responses to consultation. The policy has been revised and updated to reflect changing circumstances and business needs, and in particular the introduction of the Care Act 2014.

The policy has been written in order to ensure that it is available and accessible to service users and social care professionals. In order to facilitate this, a summary of the policy has been produced in electronic formats for stakeholders. This updated policy comes into effect from 1st April 2015 for all service users using non-residential care services.

Recognising that inequality, disadvantage and discrimination exist in society, in redrafting this policy Swindon Borough Council accepts their responsibility to ensure that all vulnerable adults regardless of their ethnic origin, religion, language, age, sexuality, gender or disability have equal opportunity to access services and information and that the charging policy will be applied equitably.

This policy should be used in conjunction with www.mycaremysupport.co.uk, which provides information in relation to care and charges.

2. Background

The Care Act 2014 provides a single legal framework for charging for care and support. It enables Swindon 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.

When arranging care and support to meet needs, Swindon Borough Council can charge, except where required to provide care and support free of charge. The policy intends to make charging fairer and more clearly understood. The overarching principle 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.

Swindon Borough Council has a duty to arrange care and support for those with eligible needs; we have the discretion to choose whether or not to charge. This Policy sets out our intentions regarding which services to charge for or not. Where we have decided to charge, the regulations will be followed and due regard to the guidance will be taken.

This policy does not apply to charges for care homes. The delivery model for care homes is relatively uniform across the country and it is sensible to have a

single national model for charging purposes. For other models of care, there is a greater variety of approaches and innovation which the Government wishes to continue.

Consequently Swindon Borough Council has developed and will maintain this policy setting out how it will charge people in settings other than care homes.

2.1 Legal Background

The legal framework for charging is set out in the Care Act 2014 within Sections 14 and 17 and the detailed guidance in Annexes B and C.

Annex B of the Care Act 2014 guidance sets out how capital should be treated and the treatment is the same; in whichever setting the care is being given.

Annex C of the Care Act 2014 guidance sets out how income should be treated when conducting a financial assessment and is divided into Care Homes and all other settings.

3. Charging

3.1 Care Act Charging Principles

The following objectives apply throughout the policy: Charges should:

- be affordable to people
- Be comprehensive and equitable
- Be clear and transparent
- Promote wellbeing, social inclusion and support personalisation, independence, choice and control
- Support carers
- Be person focused
- Be applied equitably
- Encourage employment, education or training
- Be sustainable for local authorities
- Follow an appropriate assessment of needs and be applied where Swindon Borough Council has chosen to charge

3.2 Financial Assessments

Where the Council have decided to charge we must carry out a financial assessment of what the person can afford to pay and, once complete, we must give a written record of that assessment to the person and will require them to sign a financial consent and declaration form. It will explain how the assessment has been carried out, what the charge will be and how often it will be made and the reasons for any fluctuation in charges.

People who decline to disclose their financial circumstances will be charged for their services at the full rate.

In some circumstances a light touch financial assessment will be undertaken where we are satisfied that the person can afford and will continue to be able to afford any charges due. Main circumstances are:

- Where a person has significant financial resources, does not wish to undergo a financial assessment but wishes to access local authority support in arranging care
- Where the local authority charges a small or nominal amount for a service where a financial assessment would be disproportionate (e.g. Meals)
- Where an individual is in receipt of benefits which demonstrates they
 would not be able to contribute towards their care and support cost (e.g.
 jobseekers allowance).

When choosing to charge we will not charge more than the cost incurred in meeting the assessed needs of the person. We will not recover any administration fee relating to arranging the care and support unless the person with eligible needs has assets above the upper capital limit and asks us to arrange care and support on their behalf. In such cases we will apply an administration fee to cover our costs, but this charge will not be higher than the cost of the administrative work

At the time of assessment the person's capacity will be taken into account and appropriate action taken where necessary.

A person's savings and amount of income, is taken into account when deciding how much the Council's contribution will be. A financial assessment is made based on information supplied by the service user on a financial assessment form. Some income and capital will be disregarded as set out in this policy and a financial assessment officer will use this information to calculate the amount to be contributed by the Council to the individual's support plan.

A financial reassessment will be completed within two years of original assessment (or reassessment) unless an individual asks for a reassessment earlier or there is a change in the persons' financial circumstances.

3.3 Service Users Who Will Not Be Charged

The Council will not charge for certain types of care and support as set out in the Care Act which must be arranged free. These are:

- Intermediate Care including reablement (for up to six weeks).
- Community equipment (aids and minor adaptations). Aids will be provided free of charge whether provided to meet or prevent/delay support.
- Care and support provided to people with Creutzfeldt-Jacob Disease
- After-care services/support provided under Section 117 of the Mental Health Act 1983.
- Any service or part of service which the NHS is under duty to provide.
 This includes Continuing Health Care and the NHS contribution to Funded Nursing Care.
- More broadly any services which a local authority is under duty to provide through other legislation may not be charged for under the Care Act 2014 e.g. no recourse to public funds (Human Rights Act)

Charges will also not be made in relation to

- Individuals who are in receipt of Income Support / Pension credit Guarantee but do <u>not</u> receive Attendance Allowance (AA), Disability Living Allowance (DLA), or Personal Independence Payments (PIP).
- Individuals whose disposable income, after allowing for living and disability related expenses, is less than Pension Credit Guarantee/ Income Support/Job Seekers Allowance plus 25%.
- Services provided to a person, and anyone who is caring for them, under the age of 18 years.
- Carers who receive a service in their own right to assist them with the care needs of another service user.

3.4 Charging for Services

Details of charges are set out in Appendix A. This will be updated on an annual basis and also be available on www.mycaremysupport.co.uk

Respite Care

Any respite care/short break organised by us will be charged for at a standard weekly rate, pro rata for the length of the respite care stay. Cancellation fees will apply for respite users who cancel without good reason. Cancellation fees will not be imposed where the reason for cancelation is valid, for example

unplanned admission to hospital. If respite is cancelled within 7 days the fee will be 50% of the board and lodging element for the period of booked respite. If the respite is cancelled within 48 hours of respite commencing the fee will be the whole of the board and lodging element for the period of booked respite.

Domiciliary Care or Home care

Domiciliary care, also known as homecare, is the delivery of a range of personal care and support services to individuals in their own homes. It is charged on the basis of the cost incurred.

Day Care or Services

This service provides opportunities for people to meet others, and take up new interests or work opportunities. It is charged for at a daily attendance rate.

Meals

Community meals and meals provided at a day care centre will be charged for at the standard rate regardless of financial circumstances. No financial assessment will take place as it would be disproportionate to the amount being charged.

Transport (Costs from home to Day Services and back)

Where service users have utilised their Mobility element of their benefits to obtain a Motability vehicle it is assumed that that vehicle will be available for transport to and from day services and transport will not be arranged or funded by the Council. If the service user requests transport then they will be charged full cost.

Service users with mobility allowance and no access to a motability vehicle will make a contribution to the cost of transport on the basis of their allowance depending upon whether they have the higher or lower rate of mobility allowance. No financial assessment will take place as it would be disproportionate to the amount being charged.

Telecare

This service helps people to live at home independently in their homes by providing technological help e.g. sensors or alarms that are linked to an emergency response service. A weekly charge is levied to cover the cost of the emergency response service which is available 24 x 7.

Disabled Parking 'Blue Badges'

Any service users who qualify for a Blue Badge will be charged a nominal fee that will be reviewed on an annual basis. Fast track applications will attract an additional charge.

Extra Care

Service users in extra care schemes (giving people assisted living with their own front door) are financially assessed and then charged towards the care that they are assessed as needing.

Self Funders

We are consulting on introducing from April 2016 the cost of administering and organising care arrangements for self funders in the unusual circumstances of this being required.

3.5 What counts as Income?

Only the income of the cared for person can be considered as part of the financial assessment unless it is disregarded under the regulations. Disregarded income will be either partially of fully disregarded. In all cases employed and self-employed earnings are disregarded. Where a cared for person receives income as one of a couple the starting presumption is that the cared for person has an equal share of the income.

Other sources of income such as benefits, pensions and payments from other products (subject to disregards) are assessed.

We will ensure that a person is left with a minimum level of income and this must be the value of Income Support or the Guaranteed Credit element of Pension Credit plus a minimum buffer of 25%. The purpose is to promote independence and social inclusion and to ensure that they have sufficient funds to meet basic needs. This must be after any housing costs and any disability related expenditure. See example in **Appendix B**

The weekly income which is taken into account in all financial assessments is net of tax and national insurance and includes:-

- All DWP (social security) benefits, allowances and pensions.
- All private and occupational pensions.
- All 'tariff income' (see 'Capital' section and Appendix A).

Some money is ignored or disregarded in part when calculating the charge

- All earnings from employment
- Armed Forces Independence Payments, War Disablement Pension or War Widows Pension (First £10)
- Carers Allowance
- Child Benefit, Child Tax Credit, Child Support maintenance Payments
- Disability Living Allowance (DLA) Mobility Component and Mobility Supplement

- Personal Independence Payment (Mobility Component) and Mobility Supplement
- The difference between middle rate and higher rate DLA care component or the difference between standard and enhanced rate for Personal Independence Payment
- The difference between lower and higher rate Attendance Allowance
- Social Fund Payments (including winter fuel payments)
- · Child Credit and Working Tax Credit.
- Christmas bonus
- Gallantry Awards
- Guardian's Allowance
- Guaranteed Income Payments made to <u>Veterans</u> under the Armed Forces Compensation Scheme
- Charitable payments received by the individual

3.6 All Eligible Benefits Claimed

When a financial assessment is carried out, checks are made to ensure that all eligible benefits are being claimed, which may result in backdating of payment of benefits to an individual. If benefits that are payable are backdated, charges are backdated accordingly. All eligible benefits are taken into account when calculating the charge for care.

3.7 What counts as Capital?

Capital includes savings, current accounts, investments, property and land other than the person's own home (the value of a person's home, where they normally live, is always disregarded.)

The value of the asset (other than National Saving certificates which are valued by NS & I) will be the current market or surrender value of the capital asset minus any outstanding debts secured on the asset and 10% of the asset if there are selling expenses.

Capital held by the service user, who receives the service, is taken into account. If savings are held jointly, and the other person does not receive a service, the amount of capital taken into account is usually halved.

A person with capital below the upper threshold will receive a financial assessment. The charge made for the services they receive will depend on their assessed level of income. If someone has capital between the lower and upper thresholds, then a 'tariff income' calculation will be applied. This calculation will take into account the amount being paid for care and the savings held.

If someone has savings above the upper threshold for capital **(see appendix C)**, the full cost of the service will be charged. They may still need to complete a financial assistance form.

People who decline to disclose their financial circumstances will also be charged for their services at the full rate.

3.8 Capital Disregards

There are a number of capital assets which must be disregarded including:

- Property in specified circumstances
- Surrender value of any Life insurance policy or Annuity
- Payments in kind from a charity

3.9 Time Disregards

The following capital assets should be disregarded for the first 26 weeks:

- (a) Assets of any business owned or part-owned by the person in which they were a self-employed worker and has stopped work due to some disease or disablement but intends to take up work again when they are fit to do so.
- (b) Money acquired specifically for repairs to or replacement of the person's home or personal possessions provided it is used for that purpose. This should apply from the date the funds were received.
- (c) Premises which the person intends to occupy as their home where they have started legal proceedings to obtain possession. This should be from the date legal advice was first sought or proceedings first commenced.
- (d) Premises which the person intends to occupy as their home where essential repairs or alterations are required. This should apply from the date the person takes action to effect the repairs.
- (e) Capital received from the sale of a former home where the capital is to be used by the person to buy another home. This should apply from the date of completion of the sale.
- (f) Money deposited with a Housing Association which is to be used by the person to purchase another home. This should apply from the date on which the money was deposited.

(g) Grant made under a Housing Act which is to be used by the person to purchase a home or pay for repairs to make the home habitable. This should apply from the date the grant is received.

The following payments of capital must be disregarded for a maximum of 52 weeks from the date they are received.

- (a) The balance of any arrears of or any compensation due to non-payment of:
- (i) Mobility supplement
- (ii) Attendance Allowance
- (iii) Constant Attendance Allowance
- (iv) Exceptionally Severe Disablement Allowance
- (v) Severe Disablement Occupational Allowance
- (vi) Armed forces service pension based on need for attendance
- (vii) Pension under the Personal Injuries (Civilians) Scheme 1983, based on the need for attendance
- (viii) Income Support/Pension Credit
- (ix) Minimum Income Guarantee
- (x) Working Tax Credit
- (xi) Child Tax Credit
- (xii) Housing Benefit
- (xiii) Special payments to pre-1973 war widows.
- (b)Payments or refunds for:
- (i) NHS glasses, dental treatment or patient's travelling expenses;
- (ii) Cash equivalent of free milk and vitamins;
- (iii) Expenses in connection with prison visits.

Payments made under a trust established out of funds by the Secretary of State for Health in respect of CJD to:

- (a) The victim's parent (or guardian) for 2 years from the date of death of the victim (or from the date of payment from the trust if later); or
- (b) A dependent child or young person until they turn 18.

3.10 Tariff Income.

In assessing what a person can afford the upper and lower capital limits must be applied (currently rates as per **Appendix 1**). Those above the limit (subject to local authority discretion will pay full cost, those between the upper and lower limits will make a contribution (tariff income) and any capital below will be disregarded.

On savings of between the upper and lower capital thresholds, £1 per week tariff income is assumed when calculating the person's total income for every block of £250, (or part of) between those two thresholds.

3.11 At what rates are the charges made?

The charges are reviewed and usually increased each year. Details for current charges can be found in Appendix 1 and on www.mycaremysupport.co.uk. Because a person's ability to pay is taken into account when they are assessed, the actual amount paid by the service user may be lower than the actual cost of care, in some cases there may be no charge. However there is no maximum charge, the amount levied is based on the individual's circumstances and the full cost of the care service.

3.12 How are couples assessed?

Household expenditure will be split in line with household income, where a service user is part of a couple.

If both members of a couple receive a service they will be assessed as a couple, with the appropriate disregards for a couple. Where only one member of the couple receives services, the Council's policy is to ask for details of income and capital for both partners. However, a spouse is under no obligation to provide this unless they are in receipt of Income support / pension credit as a couple.) Where a cared for person receives income as one of a couple the starting assumption is that the cared for person has an equal share of the income.

Where a person indicates that they wish to be assessed as an individual, their income will be assessed according to the following criteria:

- 100% of all benefits provided in the service user's name alone, (e.g. Attendance Allowance, Disability Living Allowance, Retirement Pension) subject to disregards
- 100% of capital / savings held in the service users name alone.
- 50% of capital/savings held jointly
- Income support / Pension credit is always assessed as a couple (50%)

3.13 Working out the Charge

Initially the assessed cost of care which is called the Personal Budget is calculated. The Personal Budget depends on the amount and type of support a person requires to meet their eligible needs and outcomes. A person's weekly income is totalled according to "What counts as income" (see 3.5). All income that can be ignored or disregarded is totalled and the individual's living costs (to

ensure that a person is left with a minimum level of income),¹ is added to the total disregards.

This sum is then taken away from the person's actual weekly income.

If the total disregards are higher than the weekly income, the person will **not** be asked to contribute towards their care, as it is clear all their income is used to live on. If there is income left this becomes the **affordable weekly amount** that is available to put towards the cost of the services provided.

The Financial Assessment Officer now has 2 figures:

- The assessed cost of the service or value of the Personal Budget and
- The affordable weekly amount the service user is regarded as having available towards the cost of the service.

The Service User will be asked to pay the **LOWER** of these two amounts,

Contributions are due from the date that care commences. However, this will only be levied after the financial assessment has been carried out to ensure that no service user is charged more than he/she is able to pay. Therefore there may be some backdated contributions to be paid by the service user.

3.14 Waiving of Charges

It is recognised that many people have additional costs related to their illness or disability. To allow for this extra cost, service users are encouraged to have a financial assessment if there are any special reasons that result in them having exceptional and/or additional costs compared with others using the same service. Each application will be looked at on an individual basis to decide whether it will be appropriate to reduce the assessed charge or decide there should be no charge at all. Each case is different, but unless the individual case merits a higher cost due to the nature of illness, a maximum amount applies for deductions which are shown in **Appendix C**

If a service user thinks that there are exceptional circumstances to be taken into account in their case they should contact the financial assessment officer whose name and phone number will be on all correspondence sent to them.

There is also a Waiving of Charges Panel which has been set up to look at individual cases where the individual feels they have been unreasonably

¹ If the individual has any dependent relatives less than 18 years of age, then any reasonable costs associated with looking after them will be taken into account within the overall living expenses figure.

treated. Any decision of this Panel will be made known to the service user. Service users can expect their requests to be handled promptly.

Once the decision has been made, if the decision is that the charge should be reduced, then any overpayment will be repaid to the service user; if the decision is that the charge should stay as it is and the service-user has not been paying, then the Council will expect the arrears to be paid.

3.15 Deprivation of Assets and Income

Deprivation of assets has occurred where a person has intentionally deprived or decreased their overall assets (capital or income) in order to reduce their overall assets in order to reduce the amount they are charged towards their care.

It is up to the person to prove to us that they no longer have the asset. If not we must assess them as if they still have the asset. For capital assets acceptable evidence of their disposal would be:

- A trust deed
- · Deed of gift
- Receipts for expenditure
- Proof that the debt has been repaid

Questions of deprivation will only be considered where the person ceases to possess assets that would have otherwise been taken into account for the purposes of the financial assessment or has turned the asset into one that is now disregarded.

Not all deprivations will be deliberate and we will consider the following to ascertain whether a deprivation has occurred:

- Was avoiding a care and support charge a significant motivation?
- At the point the capital was disposed of, could the person have a reasonable expectation of the need for care and support?
- Did the person have a reasonable expectation of needing to contribute to the cost of their eligible care needs?

For income we will also need to decide whether a deliberate deprivation of income has occurred and the following will be considered:

- Was it the person's income?
- What was the purpose of the disposal of the income?

• Did the person have a reasonable expectation of needing to contribute to the cost of their eligible care needs?

It is up to the person to prove they no longer have the asset and or income, if they are unable to the local authority will assess as if they have it.

3.16 What happens to the Financial and Personal information given?

The Council will ensure confidentiality and will collect, store and use the information in accordance with the Data Protection Act. It will use any financial information it obtains for the purpose of calculating the expected contribution towards charges or personal budgets. It may share the information if there are safeguarding or well-being issues and data may be shared with other Council Departments, where there is a legal requirement or a legitimate need, which will improve the services it provides residents. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

Under the Data Protection Act, individuals can request to see their own personal information. The Council has published the 'Access to your Personal Information' leaflet for individuals who wish to know more about this. Alternatively, individuals can contact the Council's Data Protection Officer at Swindon Borough Council, Civic Offices, Euclid Street, Swindon SN1 2JH. Further information can be found on the council's website www.swindon.gov.uk

4 Key Standards of Charging Policy

4.1 Assessment and Verification

The assessment and verification process will apply to both residential and non-residential assessments. Each service user may be asked to provide details and evidence of their income, expenditure and assets, to enable a financial assessment to be undertaken accurately. This is to determine what their contribution towards the cost of their care package will be.

They may also be asked to supply appropriate independent supporting documentation² in order that their financial circumstances can be verified. Evidence of expenditure such as receipts may also be requested.

² There are no strict rules concerning appropriate documentation. However, where an individual has a bank or savings account, supporting statements should be available. There should also be some form of documentation to support other intangible assets or income such as share certificates, remittance advices etc. The assessing officer should obtain copies wherever practicable. Otherwise, they should keep a note on the assessment form of which supporting documents they have seen, or which have been seen by other assessing officers and which are still relevant.

Individuals will be given due notice that they will need to supply appropriate supporting documentation if an assessment visit is arranged. A second meeting may be arranged where these are not made available at the first meeting or a request may be made in writing to the individual or their representatives for the information requested. If the documentation is not available at the second meeting or following any letter, the individual will be deemed to have withheld their consent. Individuals do have the right to withhold consent however, we will write and advise that the failure to provide the documentation means that they will be assessed as having to meet the full cost, from the date their care commences until the documentation is made available to the Assessment Officer (The Assessment Officer will take into account the vulnerability of the individual and raise any safeguarding issues as appropriate). Individuals may be required to provide their written consent in order that a full benefits check can be carried out, and to allow the assessor to have access to previously verified documents held by Swindon Borough Council and the Department of Works and Pensions.

A welfare benefits check and provision of information and/or assistance to maximise income from state benefits will be provided at the point of financial assessment.

Where it may appear appropriate for a couple to be assessed jointly, but one member of the couple does not consent to their financial information being shared with the other, then each member of the couple will be assessed separately.

Following an assessment, details of the amount the service user will need to pay before the Council will consider a contribution will be provided in writing. The letter will indicate that the individual has the right of appeal, where they feel special circumstances apply.

4.2 Assessment Parameters

Contributions will not be levied for those periods where a person does not receive the designated services, for example, hospital breaks or respite care. However, a variation in care is still likely to result in a contribution being levied for any particular week.

4.3 Disability Related Expenditure

The overall aim of Disability Related Expenditure (DRE) should be to allow for reasonable expenditure needed for independent living for the disabled person. Items where the user has little or no choice other than to incur the expenditure in order to maintain independence of life will normally be allowed.

Disability Related Expenditure will be offset against income as part of the financial assessment

Where disability related benefits are taken into account an assessment will be made to allow the person to keep enough benefit to pay for necessary disability related expenditure to meet any reasonable needs not being met by the Council.

The costs of the following disability related expenditure will be included:

- Payment for any community alarm system
- Costs of any privately arranged care services required, including respite
- Costs of any specialist items needed to meet the person's disability needs

Swindon Borough Council will ensure that the process of assessment and claiming for items of DRE will not be unduly complex. The Council may require verification of any disability related expenditure and will use the statutory guidance issued by the Department of Health will be used to assist in the assessment of what is reasonable and necessary for independent living where this is not self-evident from the individual's receipts, invoices and other documentation

4.4 Issues for assessments carried out in the person's home

Financial assessors conducting personal interviews in a service user's home will conduct themselves in a professional manner, but in such a way as to put the assessed individual at their ease.

Financial assessments will be reviewed according to a risk-based programme of reviews. Assessments will be carried out regularly.

If a service user experiences a change in their financial circumstances they should contact the Financial Assessment and Benefits team so that they can be reassessed accordingly.

4.5 Review of Policy

The policy will be reviewed as changes in legislation dictate or annually whichever is more frequent.

5 BILLING AND DEBT RECOVERY

Swindon Borough Council aims to send an invoice to service users on Personal Budgets within 6 weeks of the period to which the charge relates.

The charge period is every four weeks.

Principles for debt recovery will be:

- Acting reasonably
- Taking Court Action to recover debt will be a last resort
- Possible debts being discussed with the person receiving care
- Arrangements for debt repayments will be agreed, if possible with the person receiving care or their representative
- Repayments should be affordable for the person receiving care

The Council will pursue outstanding arrears effectively but sensitively ensuring our approach and procedures reflect the vulnerability of the service user group while ensuring that income due to Swindon Borough Council is paid.

From the date of the invoice, service users have 14 days to pay. If no payment is made within this time scale an automatic reminder is generated requesting immediate payment or an explanation for the delay. The contact number of Credit Control will be provided.

If the invoice remains unpaid after a further 14 days a second reminder is sent to the service user requesting payment or a satisfactory explanation for the delay.

If no payment is received within 7 days thereafter then the service user is contacted by telephone to discuss the reason for non- payment. Options for payment will be discussed and a timescale for settlement of the debt will be agreed.

Service users may be offered the opportunity to pay outstanding arrears by instalments but will be reminded of the need to ensure on going charges will be paid.

Care Managers will also be contacted at this time to discuss any reason for non-payment and/or to recommend whether the service user can or should be subject to further recovery procedures.

If payment is not made or the service user defaults on payment of agreed instalments a letter will be sent notifying the service user that payment is required. The service user is notified that failure to pay within 7 days will result in the debt being referred to an external collection agency for further recovery action.

Care Managers are notified at this stage and should contact the Income Collection Team as a matter of urgency if they wish to stop the debt recovery action. Care Managers must provide full reasons as to why the recovery action should not proceed.

If no such request is received and no payment is made within 7 days then the debt will be referred to the external agency for further action. In exceptional circumstances debt will be referred to our legal department for recovery action to be pursued via the County Court.

Swindon Borough Council reserves the right to vary debt collection procedures where appropriate.

5. REVIEW AND COMPLAINTS PROCEDURES.

The service user or their representative has a right to request a review of their charge, if the service user considers that they cannot afford to pay it.

Visiting Officers are required to inform all service users of their right to review and correspondence notifying the service user of the assessed charge will also inform the service user of this right.

If the service user believes they are unable to pay the assessed charge, they should write to the Head of Finance – Children and Adults, explaining their circumstances and the reason why they believe they cannot pay. This may be referred to the Waiving of Charges Panel if circumstances indicate that this is appropriate.