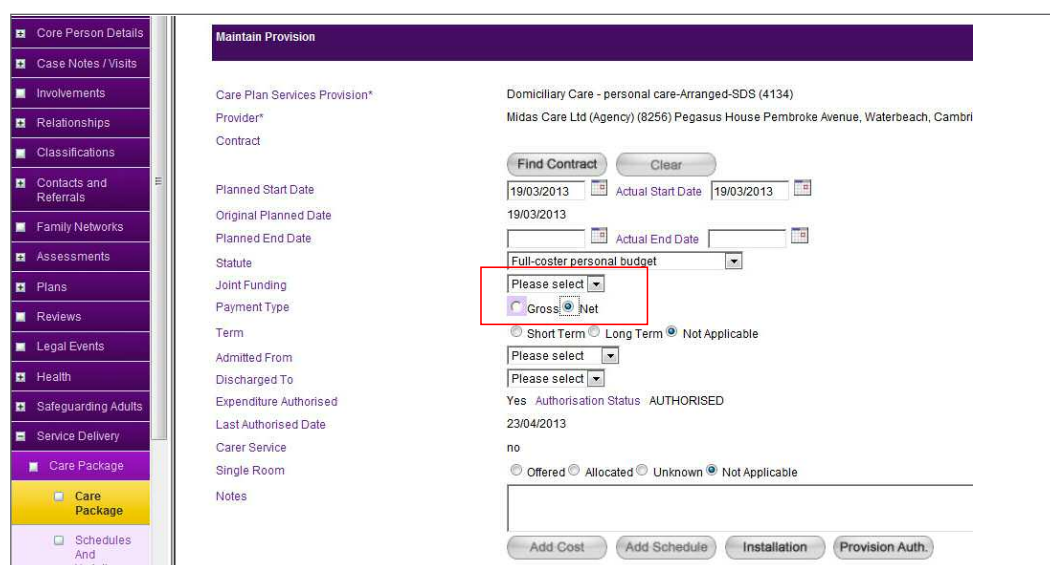


## Contributions

**This factsheet must be read in conjunction with the revised Contributions Policy.**

<b>1. Mixed Package Rule</b>	Where a service user has chosen to take their personal budget – part direct payment and part arranged support.
<b>Old policy</b>	In the past a business rule was applied to CRIP3 which resulted in netting off any service user contribution on a mixed package against the direct payment. The rule was complicated and made it difficult to explain to service users.
<b>Revised policy</b>	The mixed package business rule has been removed from CRIP3 and the decision between raising an invoice or netting off the service user contribution must be discussed between the key worker and service user. Once a decision has been made the key worker will record the conversation and inform the CPC of the outcome. The CPC load the decision in AIS/SWIFT against the provision (see screenshot).

*Service delivery menu – provisions section (AIS), provisions tab SWIFT*



<p><b>2. Crisis Intervention revised definition</b></p>	<p>The approach to be used with New Service Users and those who have been deselected from Re-ablement, services where there is a situation that requires urgent intervention to reduce risk – e.g. sudden deterioration of condition resulting in sudden loss of physical mobility, mental ill-health, informal carer hospitalised/taken ill, safeguarding issues. This approach must not be used with service users who are in receipt of a personal budget.</p>
<p><b>Change</b></p>	<p>Crisis Intervention – Support will be put in place to reduce the risk following the Crisis Intervention care process and is outside of a person's ongoing support plan. No contribution is required at the crisis stage, however the care team will undertake a reassessment at the earliest opportunity (within two weeks of crisis care) and the Contributions Policy will apply.</p> <p><b>Note to all</b> – this revised change removes what was being referred to as the admin charge for Respite, the admin charge is no longer applied.</p>
<p><b>3. Delays in providing financial assessment information or decline to share information</b></p>	<p>Currently where a service user (or their rep) does not want to share or disclose any financial information, the service user will be invoiced the full cost of any care and support from its start date, there has been no change to this under the revised policy.</p> <p>Additional to the revised policy – key workers need to familiarise themselves with what to explain to service user or their reps when requested financial information is not forthcoming.</p>
<p><b>Change</b></p>	<p>Key workers must familiarise themselves with and explain to service users (or their agent) the consequence of not disclosing all necessary financial information. The service user will be treated as a full cost payer and will be invoiced the full amount of any care and support from its start date.</p> <p>Additionally where a service user or their financial rep appears not to be forthcoming with the requested financial information within 28 days, they will be invoiced the full amount of their care/support from the start date of any care/support. This full cost will apply until all financial information has been collected and the outcome of the financial assessment known.</p>

<b>4. Interim beds</b>	Beds used by CCC when people are medically fit for discharge but who can not immediately return home or who need to be cared for in a different setting.
<b>Change</b>	Where a service user was known to the locality team prior to hospital admission and was making a contribution towards their personal budget the key worker must inform the service user that the collection of their contribution will restart from the date they are admitted into an interim bed.
<b>5. Weekly v Annual contribution</b>	<p>Service users will be clear what to do if they want to cancel care and be made aware that their contribution will not be adjusted until the cost of their care, that week, is less than their contribution. E.g. if the personal budget is £100/week and their contribution is £30/week, their contribution and the amount invoiced will not be adjusted until the cost of their care falls below £30.</p> <p>Key workers must be able to explain to service users that this could mean for example that their contribution is not adjusted if they have a short stay in hospital because the cost of their care/support on discharge may still be more than their maximum assessed weekly amount.</p> <p>However the service user will make no contribution if they are in hospital for a week (Sunday to Saturday).</p>
<b>6. Disability Related Expenditure</b>	(DRE) a reasonable amount of expenditure incurred by service users due to disability, frailty or medical condition.
<b>Change</b>	<p>Updated guidance produced in line with the national association of financial assessment officers (NAFAO) rates and local rates has been written and will support both the Financial assessor and the care teams. Where a person is in receipt of disability care benefit, attendance allowance or daily living allowance of PIP the updated guidance will be referred to and applied. The key worker must cross reference any DRE allowance with the agreed support plan to ensure we do not double fund.</p> <p>Under the revised contributions policy the DRE rates will be published and are available. Key workers must refer to Appendix A of the Contributions Policy to familiarise themselves with the rates.</p>

<b>7. Deprivation</b>	Teams need to be aware that the revised Contributions Policy makes it clear how it will treat/view cases where it appears they have deprived themselves of capital or an asset.
<b>Change</b>	The key worker must inform the service user or their financial rep that the department has a very clear policy on how it will treat situations where a person has knowingly reduced their capital in order to reduce their contributions (for example by excessive spending or gifting), this will be taken into account in the assessment and contribution may be calculated as if the person still holds the capital that has been disposed of.
<b>8. New look Invoice</b>	The original invoices brought in with CRIP3 proved very confusing for the department and for service users to understand.
<b>Change</b>	Significant changes have been made to improve the look and content of the invoices. A guidance manual has been produced to support productivity of accurate invoices. Teams are expected to apply the manual. Significant change opportunity prior to preparation of invoice are in place, teams must scrutinise draft invoices to identify exceptions that may need remedial action to suggested error and put it right.