

Health and Social Care Scrutiny Commission

Tuesday 19 September 2023
7.00 pm
160, Tooley Street, SE1 2QH

Membership

Councillor Suzanne Abachor (Chair)
Councillor Maria Linforth-Hall (Vice-Chair)
Councillor Sam Dalton
Councillor Sunil Chopra
Councillor Esme Dobson
Councillor Sandra Rhule
Councillor Nick Johnson

Reserves

Councillor Naima Ali
Councillor Victor Chamberlain
Councillor Sabina Emmanuel
Councillor David Watson
Councillor Kath Whittam
Councillor Charlie Smith

INFORMATION FOR MEMBERS OF THE PUBLIC

Access to information You have the right to request to inspect copies of minutes and reports on this agenda as well as the background documents used in the preparation of these reports.

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Contact Julie Timbrell on 020 7525 0514 or email: Julie.Timbrell@southwark.gov.uk

Members of the committee are summoned to attend this meeting

Althea Loderick

Chief Executive

Date: 11 September 2023



Health and Social Care Scrutiny Commission

Tuesday 19 September 2023
7.00 pm
160, Tooley Street, SE1 2QH

Order of Business

Item No.	Title	Page No.
	PART A - OPEN BUSINESS	
1.	APOLOGIES	
	To receive any apologies for absence.	
2.	NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT	
	In special circumstances, an item of business may be added to an agenda within five clear working days of the meeting.	
3.	DISCLOSURE OF INTERESTS AND DISPENSATIONS	
	Members to declare any interests and dispensations in respect of any item of business to be considered at this meeting.	
4.	MINUTES	1 - 4
	To approve as a correct record the Minutes of the open section of the meeting on 20 July 2023.	
5.	REVIEW - ACCESS TO TOILETS : AGE UK LONDON LOOS	5 - 21
	John McGeachy, Campaigns Manager, Age UK London will be attending to present.	
	A document setting out the views of older Londoners on loos, along with recommendations is attached, as well as three briefing papers devised by Age UK for local authorities on developing toilet strategies, community toilet schemes and the role of planning.	

Item No.	Title	Page No.
6.	REVIEW- ACCESS TO TOILETS: THE TOILET MANIFESTO FOR LONDON	22
	John Miles, Kilburn Older Voices Exchange, will present the Toilet Manifesto for London.	
7.	HEALTHWATCH SOUTHWARK: LATIN AMERICAN COMMUNITY ENGAGEMENT	
	Rumanjeet Kallar will present.	
8.	REVIEW - ADULT SAFEGUARDING: OFFICER REPORT	
	Pauline O'Hare, Director of Adult Social Care, will present a briefing (to follow) covering the below, to support the scrutiny review:	
	<ul style="list-style-type: none"> • Definitions used in Adult Safeguarding, • How allegations are investigated, • Work with Providers and families, • The Safeguarding Adults training offer. 	
9.	REVIEW - ACCESS TO MEDICAL APPOINTMENTS: NHS AND CABINET RESPONSE	23 - 27
	Martin Wilkinson, NHS full time chief operating officer for Partnership Southwark , with assistance from Dr Nancy Kuchemann, co-chair for Partnership Southwark, will present the NHS response to the review – to follow.	
	The cabinet response to recommendation 9 is enclosed, to note.	
10.	REVIEW - CARE CONTRIBUTIONS : CABINET RESPONSE	28 - 81
	The cabinet response to the scrutiny review on Care Contributions is enclosed.	
11.	WORK PROGRAMME	
	The work programme is to follow.	
	DISCUSSION OF ANY OTHER OPEN ITEMS AS NOTIFIED AT THE START OF THE MEETING.	

Item No.

Title

Page No.

EXCLUSION OF PRESS AND PUBLIC

The following motion should be moved, seconded and approved if the sub-committee wishes to exclude the press and public to deal with reports revealing exempt information:

“That the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraphs 1-7, Access to Information Procedure rules of the Constitution.”



Health and Social Care Scrutiny Commission

MINUTES of the OPEN section of the Health and Social Care Scrutiny Commission held on Thursday 20 July 2023 at 7.00 pm at 160, Tooley Street, SE1 2QH

PRESENT: Councillor Suzanne Abachor (Chair)
Councillor Sam Dalton
Councillor Esme Dobson
Councillor Sabina Emmanuel (Reserve)

OTHER MEMBERS PRESENT: Councillor Sunil Chopra

OFFICER SUPPORT: Rachel Isted, Public Health Policy Officer for Obesity & Physical Activity
Jin Lim, Deputy Director of Public Health,
Sangeeta Leahy, Director of Public Health
Gillian Boundy, School Food Improvement Officer.
Arrthi Pangayatselvan, Consultant in Public Health (Healthy Adults)
Nick Sinclair, Public Health Head of Programme (Drug and Alcohol)
Everton Roberts, Head of Scrutiny

1. APOLOGIES

Apologies for absence were received from Councillor Maria Linforth-Hall.

2. NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT

There were no late urgent items.

3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

There were no disclosures of interests or dispensations.

4. HEALTHY WEIGHT

The commission received a presentation from Rachel Isted, Public Health Policy Officer for Obesity & Physical Activity on the council's healthy weight strategy. The commission also heard from Jin Lim, Deputy Director of Public Health, Sangeeta Leahy, Director of Public Health and Gillian Boundy, School Food Improvement Officer.

Officers in attendance answered questions of the commission. The following topics were covered:

- Councillor training and how to support low income constituents
- Referral routes given pressure on NHS appointments
- Promotion and outreach
- Affordable, healthy food
- Increasing exercise in and around schools
- Cultural enjoyment of food
- High fat, sugar and salt convenience food
- Planning's role in reducing the obesogenic environment
- Healthy Streets and increasing walking & cycling
- Evidence of the impact of healthy school meals

RESOLVED

Officers will provide:

- A research paper on the impact of universal free school meals on obesity,
- More information on work with school children to increase active travel.

5. DRUGS AND ALCOHOL

The commission received a presentation from Arrthi Pangayatselvan, Consultant in Public Health (Healthy Adults) on drugs and alcohol in terms of the health impacts and why it was an important public health issue. The commission also heard from Nick Sinclair, Public Health Head of Programme (Drug and Alcohol) and Sangeeta Leahy, Director of Public Health.

Officers in attendance answered questions of the commission. The following topics were covered:

- Vaping and young people,
- Communication , engagement & outreach to prevent harm - particularly with children and young people,
- First 1000 days and role in prevention,
- Higher mortality in 2021 from alcohol,
- Criminal justice system and multi agency work.

6. WORK PROGRAMME

The commission discussed the proposed work programme for 2023-24. The following points were made:

OSC has recommended that a joint review be carried out with the Environment and Community Engagement Scrutiny Commission looking at Healthy Streets and air pollution, including a focus on school streets.

The topic on improving access to dentists will look at the availability of NHS dentists and include a request for pricing information.

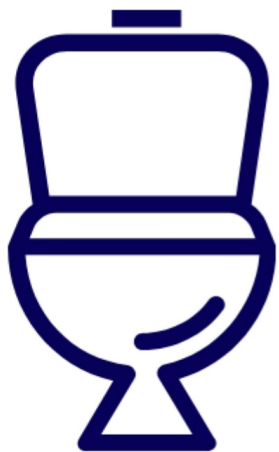
The Blue Badges topic will cover the application process - including assistance/ advocacy with form filling online, scope to reduce the time to process an application, and the award criteria.

Commission members will discuss the Care Contributions cabinet response report at the next meeting.

RESOLVED:

That the proposed work programme for 2023-24 as set out in Appendix 1 of the report be approved.

The meeting ended at 8.48pm



**London
Loos**

Public toilets in London

The views of older Londoners
September 2022

**Out and
about**



Introduction

From May to July 2022 almost 600 older Londoners told Age UK London what they thought about public toilet provision in the boroughs where they lived. This paper presents the findings of the survey and sets out our recommendations for London's local authorities about how public toilet provision can be improved.

Good provision of public toilets is a hallmark of a civilised and welcoming place to be as well as an important part of public health provision. Public toilets also have a role to play in tackling social isolation.

Too many older Londoners avoid leaving their home as much as they would like because they are not confident they will be able to access a toilet if they need one. Londoners such as those with health conditions requiring more frequent visits to the toilet are among those most affected.

Age UK London's London Loos campaigning is part of the Out and About campaign to tackle social isolation by improving community infrastructure including public toilet provision, so older Londoners feel able to get out, maintain friendships and other social connections and do the things they want to do.

Unfortunately the long-term decline in the number of public toilets has accelerated in recent years. At the latest count there were around 1,500 public toilets in London to meet the needs of more than eight million people - fewer than one per 5,000 Londoners.

Methodology

637 members of the public completed our London Loos survey from May to July 2022. This was a self-selecting survey carried out online using the Survey Monkey platform. 96% of respondents lived in London with all boroughs and the City of London represented. 93% of respondents were over the age of 50 and 86% over the age of 60.



81%

say public toilets in the borough where they live are bad

Places where toilet provisions are not good enough



70% say the high street



58% say parks



30% say residential areas

Most important when it comes to public toilets



Cleanliness 48%



Opening times 25%



Accessibility 13%

52%

over half sometimes reduce the amount they drink before going to some places



Older Londoners told us

Medical conditions for both myself and my husband mean we need access to clean toilets.

Lack of clean, accessible public toilets traps people at home and prevents them getting out and about. It affects more of us than you might imagine.

If I know there are toilets at a venue, I will be confident to be out all day.

Older people use loos more often and the demographic of London is that our population is ageing so we need adequate loo facilities to cater for an ageing population.

I have bladder issues and any journey short or long I have to consider toilet provision first. I don't go out if I feel I will be caught short. I tend not to meet anyone due to this and hence feel quite isolated.

Inadequate facilities limit the ability of older people to use the public spaces we are entitled to use and is discriminatory.



9 in 10 Londoners have considered toilet provision before making a journey to a particular place.

46% of people would not be confident directing someone to the nearest public toilet if asked.



68% said signs are the best way to inform people about the location of public toilets. Paper maps that people could put in their pockets were the second most popular option.

81%

say they would be more likely to visit shops, cafes and businesses if public toilet provision were better.



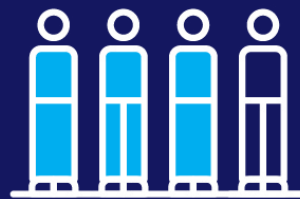
40%

of people spend less time in a place because of the lack of loos.



4 in 5 said that they would not be confident going into a shop or cafe and asking to use the toilet if they were not a paying customer.

3 in 4 said they would be somewhat or very confident asking to use the toilet in a business that was part of a Community Toilet Scheme.



Recommendations for local authorities in London

Here are our recommendations for local authorities in London based on the survey findings and existing recommendations from those campaigning for better public toilet provision.

- Develop a strategy for public toilet provision across the borough as part of the council's public health responsibilities.
- Identify a named officer responsible for developing and monitoring toilet provision (including a high standard of information about the locations of public toilets, including maps and monitoring the accessibility of toilets for disabled people) who should lead on this strategy.
- Introduce Community Toilet Schemes in designated town centres and other places of need based on meaningful consultation with older residents and learning from successful models from across the country.
- Where Community Toilet Schemes already exist, work with businesses and the wider community to strengthen provision. This should include reviewing schemes and incentivising more businesses to join schemes.
- Take steps to meet requirements set out in the London Plan where Policy S6 Public toilets requires that large-scale developments that are open to the public, such as shops, sport, leisure and health care facilities, transport hubs, cultural and civic buildings and large areas of public realm, provide and secure the future management of:
 - free publicly-accessible toilets suitable for a range of users including disabled people, families with young children, people of all gender identities; and free 'Changing Places' toilets designed in accordance with the guidance in British Standard BS8300-2:2018.

- These should be available during opening hours, or 24 hours a day where accessed from areas of public realm.
- In smaller developments, and subject to local evidence and Development Plan policy secure access to toilet facilities as part of a community toilet scheme, or secure provision of public toilets through the Community Infrastructure Levy, Section 106 agreements and other planning obligations.
- Promote public information resources, such as the [Great British Toilet Map](#) and the [Changing Places Toilet Map](#).
- Deliver a public campaign to raise awareness of toilet locations.
- Undertake a review of local signage and maps.

We would like to thank The Mercers' Company for their support.



[Age UK London](#)

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London Loos in-focus: Local authorities and toilet strategies

About this information sheet

This information sheet has been produced by Age UK London as part of the [London Loos](#) campaign for better public toilet provision in London. Along with other information sheets produced by Age UK London it has been written for anyone interested in actions London's local authorities can take to improve the provision of public toilets in their borough. It is recommended in particular for council officers and council directors as well as councillors.

Toilet strategies

Age UK London has recommended that local authorities in London develop and implement a toilet strategy based on local population needs as part of their broader public health work. Toilet strategies have also been called for by the [Toilet Manifesto for London](#) group, the [London Assembly's Health Committee](#) and as part of research in to public toilet provision in the [Royal Borough of Greenwich](#).

The importance of toilet strategies

Toilet strategies provide an important framework for local authorities to coordinate the actions needed to improve public toilet provision locally. Public toilet provision can feature in the plans of many different council departments and strategies can offer a more joined-up approach for auditing and evaluating current provision, listening to residents and making decisions based on population needs. It is recommended that a named officer has the responsibility to lead on and report on the strategy.

A good toilet strategy should include:

- Meaningful ongoing community engagement with residents. This should be a diverse group, including older residents, representative of the wider community. It is important that meaningful consultation is inclusive and that people without the internet are included.
- A needs assessment based on mapping existing toilets available for public use, identifying gaps by working with communities and other partners to identify solutions.
- An action plan to review and improve public information about provision. Consideration should be given to the quality of signage, maps, website information, and the use of newsletters, media, posters and leaflets to raise awareness about toilet locations.
- Aim to mainstream public toilet provision into strategic policy such as urban planning policy.

The Welsh Government has produced [guidance to support local authorities](#) in Wales to develop and implement toilet strategies. The guidance includes 'do's and don'ts'; a flowchart outlining the process for developing and implementing a toilet strategy; and advice on taking a long-term approach.

London Loos in-focus: Local authorities and toilet strategies

Case study: Cardiff (population 362,000)

Cardiff Council published their Toilet Strategy in December 2019. In February 2022 they published a progress statement covering the period between December 2019 and December 2021. Key developments during this period included:

- Rollout of new accessible signage to tackle discrimination.
- Increase in available toilet provision.
- Improvements and enhancements to existing toilet provision.
- Progress on visible signposting of public toilet availability.
- Approach to City Centre business in relation to participation in community toilet scheme.
- Alignment with Cardiff working towards an Age Friendly City agenda as well as Dementia Friendly Cardiff.
- Progress against a communications plan to increase awareness of toilet mapping within the city.
- Changing Places mapping, with approaches made to add them to the community toilet scheme as well as ensuring these facilities are also promoted on Changing Places Toilets (changing-places.org).

The full progress statement can be found [here](#).

Useful information

- Public toilets: Recommendations for local authorities by Age UK London and public toilets survey results. [Read here](#).
- In-focus information sheets on Community Toilet Schemes and planning and public information can be found at bit.ly/LondonLoosCampaign.
- The Toilet Paper by the London Assembly Health Committee. [Read here](#).
- The Toilet Manifesto for London. [Read here](#).
- Taking the P***: the decline of the great British public toilet by the Royal Society for Public Health. [Read here](#).

Acknowledgements

We would like to thank public health researcher Margit Physant for her research and other contributions to this information sheet.

London Loos in-focus: Local authorities. Community Toilet Schemes

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Community Toilet Schemes

Community Toilet Schemes (CTS) enable members of the public to use toilet facilities in a range of approved local businesses and other organisations during their opening hours. Effective Community Toilet Schemes can play an important part of public toilet provision when implemented alongside other projects aimed at improving provision.

In [research by Age UK London](#) (2022) with nearly 600 older Londoners, four in five survey respondents said that they would not be confident going into a shop or café and asking to use the toilet if the business was not part of a Community Toilet Scheme. In contrast three in four survey respondents said that they would be confident asking to use the toilet in a business that they knew was part of a Community Toilet Scheme.

In 2008 the Department for Communities and Local Government produced a [step-by-step guide](#) to setting up and operating a CTS. It was based on practice in the Royal Borough of Richmond upon Thames.

13 active Community Toilet Schemes in London (September 2022)

Research for Age UK London (2022) found evidence of at least 13 active CTSs in London with a further four boroughs in the process of setting up a scheme (information up to date as of September 2022). The size of the schemes ranged from six to 70 local businesses participating.

Characteristics of a successful Community Toilet Scheme

Public Toilets UK have [outlined](#) the following characteristics of successful Community Toilet Schemes.

- Active management by the local authority with careful selection and monitoring of the selected sites.
- The CTS receives full support from the local authority from inception and on a long-term basis.
- The CTS has an agreed budget.
- The local authority maintains a high level of public toilet provision in addition to that offered by the scheme. This allows for closures, holidays and the night time economy.

London Loos in-focus:

Local authorities. Community Toilet Schemes

- The local authority proactively raises awareness of the scheme through community toilet maps (offline and online), other online information, signage, community noticeboards, newsletters and information in public buildings such as libraries and community centres
- The local authority provides additional toilet provision when there are major events that might cause problems with increased demand provided.

Management

[Research](#) on Community Toilet Schemes in London (2022) has found that in the majority of boroughs with schemes businesses are invited to apply. Some boroughs undertake an annual inspection of participating venues and some proactively gather service-user feedback for example by using ‘mystery shoppers’.

Payments to participating businesses

Research on Community Toilet Schemes in London (2022) found that across all the schemes participating businesses were paid between £500 and £1,200 per year in order to make their toilets available to the public. Most boroughs had a sliding scale of fees according to the facilities on offer with venues that could offer baby-changing facilities or an accessible toilet being paid the highest rate. Some boroughs pay according to the number of days the facility is open.

Monitoring

As part of a scheme operating in one outer London borough participants must pass an annual inspection. The following check-list for participants is used to ascertain that the premises meet satisfactory standards.

1	The Community Toilet Scheme sticker should be visible from the street and therefore displayed in a front window
2	Users should be free to use your toilets without being asked to make a purchase
3	Access to and from your toilets should be free of obstructions or risks from slips, trips or falls
4	Toilets should be clean, well maintained, and in good working order
5	The wash area should be clean and tidy
6	There should be a suitable supply of soap and hygienic hand drying facilities provided
7	The wash hand basins should be provided with constant cold and warm water
8	Where disabled toilets are provided, the handrails should be in good working order
9	If disabled toilets provided, an emergency pull cord is installed and is in working order
10	Where baby changing facilities are provided, the drop-down trays should be clean and in good working order
11	Where there is a fire escape, this should be clearly marked and free from obstruction

London Loos in-focus:

Local authorities. Community Toilet Schemes

12	There should be suitable natural / artificial lighting and ventilation in toilet compartments
13	There should be no obvious health and safety concerns e.g. loose electrical fittings, exposed connections, broken plugs etc.

Accessibility

Both in terms of having regard to the [Public Sector Equality Duty](#) and ensuring value for money, it is important that ‘accessible’ means genuinely wheel-chair accessible. The toilet cubicle may in itself comply with regulations but every wheel-chair user will testify that this does not guarantee that they can actually use it. There have been reports of accessible toilets not having enough space for a wheel-chair because they are being used as a store-room for floor buckets. The corridor leading to the toilet may be obstructed by the recent deliveries of goods or freezers.

The only way to ascertain whether an accessible toilet lives up to the standard in reality is to have a wheel-chair user testing it out. It is suggested that members of local disability and older people’s organisations are recruited to carry out ‘mystery shopping’ and report back. It is important to note that some people that need to use accessible toilets will have non-visible disabilities. It is important that staff are aware of this.

Information for the public about Community Toilet Schemes

A Community Toilet Scheme can only be of benefit if the public are aware that it exists and that they can use these facilities without feeling obliged to make a purchase.

Many London boroughs provide information about their Community Toilet Schemes on their website either as a list or a map. Many require community toilet providers to put a sticker in their windows. Some boroughs have street signs with directions to a nearby toilet.

It is important that information about Community Toilet Schemes is available to members of the public who do not use or have access to the internet.

Local toilet maps in both online and hard-copy format are particularly useful. A good example of an online map is [The Great British Public Toilet Map](#) which is well established and widely used. Members of the public can add a toilet or edit an existing entry. There is a filter function to make it easier to find particular facilities such as an accessible toilet. Camden, Lambeth and Merton are among those that provide links on their websites to The Great British Public Toilet Map.

List: Community Toilet Schemes in London

Across London 13 local authorities have Community Toilet Schemes (as of September 2022). It is understood that at least four boroughs plan to introduce or reintroduce Community Toilet Schemes.

London Loos in-focus:

Local authorities. Community Toilet Schemes

Borough with a Community Toilet Scheme	Number local businesses participating in the scheme	Online information
Barnet	12	Barnet community toilets Barnet Council
Bromley	40	Community toilet scheme Community and public toilets London Borough of Bromley
Camden	7	Public toilets - Camden Council
City of London	65	Community Toilet Scheme (CTS) - City of London
Ealing	6	Community toilet scheme Public toilets Ealing Council
Enfield	19	Community toilet scheme · Enfield Council
Lambeth	Unknown	Community toilet scheme - Find a public toilet Lambeth Council
Lewisham	51	Lewisham Community Toilets
Merton	6	Community Toilet Scheme (merton.gov.uk)
Newham	14	Public toilets in Newham – Newham Council
Richmond	70	Community Toilet Scheme - London Borough of Richmond upon Thames
Southwark	Unknown	Southwark Public Toilets
Waltham Forest	38	Waltham Forest Public Toilets

London Loos in-focus: Local authorities. Community Toilet Schemes

Useful information

- Public toilets: Recommendations for local authorities by Age UK London and public toilets survey results. [Read here.](#)
- In-focus information sheets on Planning, development and public information and toilet strategies for local authorities can be found at <https://bit.ly/LondonLoosCampaign>.
- The Toilet Paper by the London Assembly Health Committee. [Read here.](#)
- The Toilet Manifesto for London. [Read here.](#)
- Taking the P***: the decline of the great British public toilets by the Royal Society for Public Health. [Read here.](#)

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London Loos in-focus:

Local authorities. Planning, development and public information

About this information sheet

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The London Plan

The [London Plan](#) is the Mayor of London's Spatial Development Strategy for Greater London. It is part of the statutory development plan for London and policies should inform decisions on planning applications across London and borough's Local Plans must be in 'general conformity' with the London Plan.

Large-scale developments - Policy S6 Public toilets

Policy S6 Public toilets requires that large-scale developmentsⁱ that are open to the public, such as shops, sport, leisure and health care facilities, transport hubs, cultural and civic buildings and large areas of public realm, provide and secure the future management of:

- free publicly-accessible toilets suitable for a range of users including disabled people, families with young children and people of all gender identities; and
- free 'Changing Places' toilets designed in accordance with the guidance in British Standard BS8300-2:2018.ⁱⁱ

These should be available during opening hours, or 24 hours a day where accessed from areas of public realm.

Smaller developments

In smaller developments, and subject to local evidence and Development Plan policy, boroughs may secure access to toilet facilities as part of a community toilet scheme, or secure provision of public toilets through Community Infrastructure Levy or planning obligations.

In these developments a range of toilet facilities should be provided, including: unisex disabled persons' toilets; a separate accessible baby change/family toilets; cubicles for people with ambulant mobility impairments.

Where gender-specific toilets are provided, a gender-neutral option should also be provided wherever possible (in addition to unisex disabled persons toilets).

Consideration should be given to the capacity of facilities in order to minimise queuing, particularly where female gender-specific toilets are provided.

Maintaining public toilets

Public toilet facilities, whether provided inside buildings or externally, should be

London Loos in-focus:

Local authorities. Planning, development and public information

safe, well-lit and clean. Surveillance of entrances is an important consideration when planning facilities. Ongoing management and cleaning of facilities should be secured and agreed at the planning stage to ensure long-term provision is achievable.

Locating public toilets

It is important that as well as providing more public toilets, people can find where they are and know what facilities are available. Boroughs are encouraged to use and promote public information resources, such as:

- [Great British Toilet Map](#)
- [AccessAble](#)
- [Changing Places Toilet Map](#)

All local authorities in London are encouraged to supply open data on public conveniences.

[This TfL webpage](#) also has information on public toilets in London.

Good Growth Fund

The Mayor's Good Growth investment is creating or refurbishing more than 250 toilet units, including more than 180 which are fully accessible in key locations across London. [Find out more.](#)

Useful information

- Public toilets: Recommendations for local authorities by Age UK London and public toilets survey results. [Read here.](#)
- In-focus information sheets on Community Toilet Schemes and toilet strategies are available at bit.ly/LondonLoosCampaign.
- The Toilet Paper by the London Assembly Health Committee. [Read here.](#)
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Acknowledgements

We would like to thank Natalie Gordon of The London Plan team at the Greater London Authority for contributing to this information sheet.

ⁱ Boroughs should define 'large-scale' for their local circumstances. Where no local definition is given, 'large-scale' should be taken to mean developments that come under Category 1B, Part 1 of The Town and Country Planning (Mayor of London) Order 2008 i.e. Development (a) in the City of London and with a total floorspace of more than 100,000 square metres; (b) in Central London (other than the City of London) and with a total floorspace of more than 20,000 square metres; or (c) outside Central London and with a total floorspace of more than 15,000 square metres.

ⁱⁱ Changing Places toilets are not designed for independent use and should be provided in addition to standard unisex disabled persons' toilets, baby change and family facilities, not as a substitution.

It's time for relief – let's do something about London's public toilet crisis!

We all use toilets several times a day. Young children, pregnant women and people with bladder or bowel problems need them more frequently. One in five of the population experience the 'loo leash'¹ – we don't leave the house as often as we would like to. More than half of us reduce our fluid intake when we go out, risking dehydration. If you are unable to walk far or fast, the need for easy access becomes ever more acute. This requirement increases with age. More than half of the people who experience urinary incontinence in the UK are over 65.

Yet public toilets have been closing at an alarming rate¹ – one in five across the UK since 2010. Three-quarters of the population say there are not enough toilets in their area. The lack of toilets has a serious impact on the behaviour of older people. It impedes our ability to go about our daily business. We believe adequate public toilet provision is an essential feature of an age-friendly city.

THE FIVE POINT TOILET MANIFESTO FOR LONDON

In the London Plan (in accordance with World Health Organisation age-friendly principles²) the Greater London Authority (GLA) should make explicit the need to provide and maintain free accessible public and community toilet facilities and support the obligations specified below:

- 1 **Community toilet provision is a public health responsibility** which all London councils must acknowledge, and engage with, those protected under the Public Sector Equality Duty (PSED).
- 2 **Boroughs should produce an annual toilet strategy** to cover all community-based provision and identify a named lead officer to develop and monitor all aspects of provision.
- 3 **There should be coordinated provision of information** about toilets in digital, hard copy and accessible formats – the GLA should research how the older public use such information, paying particular attention to minority views and experience.
- 4 **The GLA should make the provision of community toilets** a planning condition for all new developments of more than five hundred dwellings and audit the provision of public and community toilets in all London town centres.
- 5 **London's older citizens and campaigners should monitor** and scrutinise toilet provision where they live and identify neighbourhoods in need of investment and improvement.

Why something must be done

This is a matter that needs addressing now – and for the future as London's older population grows. The number of Londoners over 85 – those of us most affected by barriers to participation – is projected to increase by nearly 40 percent³ during the period from 2018 until 2024.

So as London prepares to become an age-friendly city and reorganises itself in response to the COVID-19 pandemic it's time for something to be done. Poor toilet provision is affecting our health and morale and limiting many people's lives.

How the law can help

Toilets are not a statutory requirement – local authorities don't have to provide them. But nor are they just optional. Under the Equality Act (2010) older people, people with disabilities such as bladder and bowel problems, and pregnant women are recognised as *protected groups*. Public bodies, like the local council, must have due regard for their obligations under the Public Sector Equality Duty (PSED – Section 149 of the Equality Act).⁴ In this case the PSED obliges public organisations to:

- **Remove or minimise disadvantages** suffered by people due to their protected characteristics.
- **Take steps to meet the needs** of people from protected groups where these are different from the needs of other people.
- **Encourage people from protected groups** to participate in public life or in other activities where their participation is disproportionately low.

Who we are

Positive Ageing in London (PAiL) and Kilburn Older Voices Exchange (KOVE) are working together to demand change. We've been inspired by Jane Hopkins whose innovative research⁵ in the Royal Borough of Greenwich gets to grips with the problem and points the way forward for older people to take decisive action. We're launching the Toilet Manifesto for London today on World Toilet Day.

The Toilet Manifesto for London Group



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Item No. 17.	Classification: Open	Date: 12 September 2023	Meeting Name: Cabinet
Report title		Response to Health and Social Care Scrutiny Review: Access to Medical Appointments (key worker homes)	
Ward(s) or groups affected:		Borough wide	
Cabinet Member:		Councillor Helen Dennis, New Homes and Sustainable Development	

FOREWORD – COUNCILLOR HELEN DENNIS, NEW HOMES AND SUSTAINABLE DEVELOPMENT

The council is more mindful than ever of the need to retain and support sustainable communities in the borough, and to ensure it is a place where front line workers will choose to live. The challenges that we are currently seeing in the Private Rented Sector (PRS) in particular, underline the need for the council to secure genuinely affordable housing for residents – both social housing and other “intermediate” forms of housing that meet the needs of individuals and families. This is why our council plan includes a target to see 500 Key Worker Homes (KWH) started in the next 4 years. Given the state of the housing market, build-cost inflation and the wider difficulties in the construction industry, this will not be without challenge. However it is an area that we are determined to prioritise and we will be working closely with our health partners, as well as those in social care and other vital sectors, to ensure the pipeline does its best to support the health & social care system in Southwark.

RECOMMENDATION

1. That cabinet note the response to the recommendation.

BACKGROUND INFORMATION

2. This report sets out a response to recommendation 9 to the Health and Social Care Commission’s scrutiny review report on access to medical appointments submitted to cabinet on 13 June 2023.
3. The response deals specifically with recommendation 9 of the report, to do with taking forward the council’s 2022 commitment to deliver 500 Key Worker Homes in the next 4 years. (Whilst there are a number of recommendations contained in the scrutiny report, the only recommendation that cabinet is required to respond to is recommendation 9; hence only recommendation 9 is addressed in this paper).

KEY ISSUES FOR CONSIDERATION

Response to report Recommendation 9

Recommendation 9: The Commission recommends that:

- the cabinet member for council homes and homelessness work with the cabinet member for health and wellbeing to link the council ambition to build 500 homes for key workers to the housing needs of GPs and other local Primary Care practitioners; and also
- calls for the council's commitment on the number of new key worker homes to be increased in future years.

Response

4. We thank the Commission for this recommendation and agree with the need to deliver Key Worker Housing (KWH) which is linked to the housing needs of GPs and other local Primary Care practitioners, as well as those working in social care and other vital sectors.
5. The Cabinet Member for New Homes and Sustainable Development will have responsibility for taking the Key Worker Housing programme forward, working across two directorates: Planning & Growth (P&G) and Housing.
6. The focus of the housing directorate is to establish a list of potential KWH tenants; the focus of planning and growth is to progress Supplementary Planning guidance specifically for KWH and to progress emerging KWH developments with potential development partners. As of the current date, all work-streams are at a stage of work-in-progress.
7. The Planning Policy team (within P&G) is currently developing a new Supplementary Planning Document (SPD) for Affordable Housing and this will include KWH. It is expected that this SPD will set out a definition for KWH in Southwark, provide guidance on what the council means by KWH in terms of the housing model and set out the eligibility criteria including priority jobs.
8. The Housing and Modernisation team (within Housing) has developed its tenancy strategy and the tenancy policy for KWH, as set out in its Housing Intermediate Rent policy cabinet paper in March 2021. The paper sets out the intention to develop a list of eligible tenants, how the list would be applied, its eligibility criteria and the proposed priority system. The primary function of the eligible tenant list would be for any landlord delivering KWH schemes in the borough to draw upon. Within the five professions cited in the eligibility criteria table, are those related to the health sector: *'Nurses, doctors, and other clinical staff employed by NHS'*.
9. The Sustainable Growth Team (within P&G) has concluded the feasibility stage a pilot KWH scheme on General Fund land; this scheme is serving to spearhead a number of considerations for KWH partnership-led developments, including viability stress testing, grant allocation and tenure mix options. In parallel, the Sustainable Growth Team is in discussions with potential development partners,

including Guys and St Thomas' Trust (GSTT). Discussions with GSTT have focussed on nominations opportunities for its employees to KWH, given that GSTT already has a pipeline of eligible health practitioners who meet the eligibility criteria. So far GSTT has expressed interest in the possibilities of a 'soft-nominations' agreement to the council's pilot scheme (in close proximity to Guy's Hospital) and also to potential opportunities via developer British Land at Canada Water.

10. The Sustainable Growth Team regularly attends the Southwark Local Estates Forum, NHS SE London Clinical Commissioning Group; it is envisaged that, once the Affordable Housing SPD is formalised, KWH will be a regular agenda item on that forum and, through this, further connections can be made with the council KWH delivery programme and nominations from the health sector. It is also envisaged that future discussions will address where health partners may consider mixed-sector KWH within the Health estate portfolio. The Sustainable Growth Team is making good progress in identifying a potential delivery pipeline to meet our council plan target of starting 500 keyworker homes by 2026. It is anticipated that once the Affordable Housing SPD is published, even more developers will come forward with proposals for KWH.

Policy framework implications

11. As above, further detailed policy guidance will be enshrined in the Affordable Housing SPD to the Southwark Plan 2022. The SPD does not set new policy but, rather, expands on existing policy; accordingly, the KWH guidance will come under existing Policy as an Intermediate tenure at rent levels equivalent to London Living Rent (LLR).

Community, equalities (including socio-economic) and health impacts

Community impact statement

12. KWH for health-sector workers within the borough and near to their place of work, is in line with the objective of fostering community in local neighbourhoods.

Equalities (including socio-economic) impact statement

13. KWH for capped-level income health-sector workers, is in line with equalities objectives.

Health impact statement

14. KWH, with one of its characteristics being to enable key workers to live near to their place of work, supports a model of live/work balance and the implicit health benefits associated.

Climate change implications

15. KWH, with one of its characteristics being to enable key workers to live near to their place of work, facilitates walking and travelling from home to work and a consequential reduction of car and transport usage.

Resource implications

16. None

Legal implications

17. None

Financial implications

18. None

Consultation

19. Non applicable.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS**Assistant Chief Executive, Governance and Assurance**

20. Non applicable.

Strategic Director of Finance

21. Non applicable.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Health and social care commission report to cabinet 13 June 2023	Online	
Link (please copy and paste into browser):		
modern.gov.southwark.gov.uk/documents/s114677/Appendix A Access to medical appointment scrutiny review report.pdf		

APPENDICES

No.	Title
None	

AUDIT TRAIL

Cabinet Member	Councillor Helen Dennis, New Homes and Sustainable Development	
Lead Officer	Stephen Platts, Director of Planning and Growth	
Report Author	Catherine Brownell, Programme Manager	
Version	Final	
Dated	31 August 2023	
Key Decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments Included
Assistant Chief Executive, Governance and Assurance	No	No
Strategic Director of Finance	No	No
Cabinet Member	Yes	No
Date final report sent to Constitutional Team		31 August 2023

Item No. 16.	Classification: Open	Date: 12 September 2023	Meeting Name: Cabinet
Report title:		Response to Health and Social Care Scrutiny Review: Care Contributions	
Ward(s) or groups affected:		All	
Cabinet Member:		Councillor Evelyn Akoto, Health and Wellbeing	

FOREWORD - COUNCILLOR EVELYN AKOTO, CABINET MEMBER FOR HEALTH AND WELLBEING

The number of people requiring support to manage their social care needs is increasing year on year and the financial cost of meeting the social care needs of residents continues to rise.

The council spends close to £142m on adult social care. The council receives £9.4m in means-tested contributions from 35% of residents in receipt of care and support, who have been deemed liable for contributions under the council’s Fairer Contributions policy. Whilst we wish adult social care was funded from general taxation, like the NHS, sadly it isn’t, and the gap between what the council receives from Government and what it costs to provide safe, high quality care and support is significant.

This means the council has had to use adult social care precept powers and means-tested charging powers to cover the gap in Government grant. The fact that 65% of our residents in receipt of care and support pay NIL contributions towards their care demonstrates that we take means-testing seriously and are committed to ensuring residents have sufficient funds via Minimum Income Guarantee (MIG) and that disability related costs are disregarded as part of means-testing.

The 35% of residents in receipt of care and support who do make contributions towards their care costs have been means-tested and they have sufficient income, savings and assets to do so. The Government reforms which were due to be introduced in 2023 have been delayed, again, until 2025 and we await the detail from Government to fully understand what their reforms will mean for our residents. In the interim, we are committed to being ethical and fair in our approach, and to supporting our residents as best we can.

The responses to the five recommendations made by the Health and Social Care Scrutiny Commission to cabinet on 13 June 2023, are listed in paragraphs 17-29 of this report are consistent with Southwark Council’s Fairer Contributions Policy.

RECOMMENDATION

1. That the Cabinet note the response of the Lead Member to the recommendations of the Health and Social Care Scrutiny Commission cabinet report, 13 June 2023 in paragraphs 17-29 of this report.

BACKGROUND INFORMATION

2. Local authorities provide and fund adult social care services under the Care Act 2014. Section 9 of the Care Act 2014 provides local authorities with a duty to complete an “assessment of an adult’s needs for care and support” and Section 14 of the Care Act gives local authorities a power “to make a charge for meeting needs”.
3. Southwark Council adopted a Fairer Contributions Policy in 2015, which outlines the way the Council uses the powers granted to local authorities under the Care Act 2014 to financially assess recipients of social care services. The Fairer Contributions Policy was further reviewed in 2021.
4. The principle of fairer contributions is that all services, with the exception of reablement services and services provided to people subject to Section 117 of the Mental Health Act 1983 or to people experiencing Creutzfeldt-Jakob disease (CJD), are included within a “personal budget” calculation. This means that previously ‘flat-rate’ charged services (such as a day centre, and respite care) are now included within the personal budget and not charged separately.
5. A financial assessment is undertaken to determine the ability of the client to contribute towards the cost. The financial assessment of a person’s circumstances review the income, capital and savings of those receiving support in the community and in care placements.
6. The Health and Social Care Scrutiny Commission is a sub-committee of the Overview and Scrutiny Committee. It was established in July 2021 to examine and monitor the performance of services provided by the council and other agencies in matters regarding health and social care. In addition to examining matters regarding the council, the Commission’s responsibilities include the local NHS and health provision in Southwark.
7. The Health and Social Care Scrutiny Commission undertook a review of the Council’s policies towards charging for services for people with disabilities and presented a report to Cabinet on 13 June 2023. The report’s recommendations were as follows:

Recommendation 1

“Raise the Minimum Income Guarantee by increasing the Government mandated buffer of 25% with an additional local buffer of 25%, to make a total of 50%. In addition it is recommended that officers produce an impact assessment to understand the cost to the council and benefit to disabled people and carers”.

Recommendation 2

“To explore, as part of this year’s budget process, the removal of disabled adults from the assessment for Care Contributions”.

Recommendation 3

“Provide better information, advice and support to enable disabled people and carers to understand care contributions generally, and their right to have adequate Disability Related Expenditure taken into account in financial assessments. This ought to include a variety of engagement approaches including outreach, information on websites, and leaflets”.

Recommendation 4

“Take steps to reduce the adverse impact of Care Contributions on the incomes of people reaching pension age, both disabled people and their carers. In particular take action to mitigate the steep increases that can be incurred once a) a disabled person reaches pension age and their employment related pension becomes assessed b) carers facing reductions in income as they reach pension age and lose Care Allowances and income from paid work”.

Recommendation 5

“Cabinet revisit the Fairer Contributions Policy Cabinet agreed in 2015, and revised in 2020, and report back to the Commission on the outcome”.

8. At its meeting on 13 June 2023, Cabinet was resolved that:
- I. *That the recommendations of the Health and Social Care Scrutiny Commission: care contributions scrutiny review report, Appendix A, as set out on Page 3 of the report be noted.*
 - II. *That the recommendations from the commission be considered and that the relevant cabinet member reports to cabinet on the recommendations, as set out in the report.*
 - III. *That it be noted that overview and scrutiny procedure rule 15.3 requires Cabinet to consider and provide a written response to the report within two months.*
 - IV. *That it be noted that it is for cabinet to decide whether or not to accept the Scrutiny Commission’s recommendation.*

KEY ISSUES FOR CONSIDERATION

9. The number of people requiring support to manage their social care needs is increasing year on year. The financial cost for local authorities to meet the social care needs of their residents continues to increase. These cost increases locally have been exacerbated by the increase in the London Living Wage and the rate of inflation experienced in both 2022-23 and 2023-24.
10. Southwark council is proudly a member of the Ethical Care Charter and is committed to ensuring that carers are paid at least the London Living Wage.
11. The council spends close to £142m on adult social care and in 2022-23 raised £9.4m in client contributions income. Were the Council not to receive this income, it would have a direct impact on the affordability of services which have been assessed as necessary to meet need, and to ensure safe, high quality care and support for our most vulnerable residents. In 2021/2022, Southwark council raised 6.1% income from client contributions as a proportion of gross expenditure on Adult Social Care, in comparisons to 9.3% as the London average and 11.9% for the national average for England. (See Appendix 1)
12. In Southwark, 35% of people in receipt of statutory adult social care services have been assessed as liable for a contribution towards the cost of their care and support. The mean average charge for community care services is £16 per week, and the mean average charge for residential care services is £212 per week. The average cost of a residential placement for an older person is £960 per week.
13. To ensure that the council can meet the needs of adults who are eligible to receive statutory support, the Adult Social Care Directorate works with individuals to identify what their needs are, how they would like their needs met, and how much if anything, they can afford to contribute towards the costs their care. In order to determine whether the adult is able to make a contribution towards their care costs, a financial assessment is undertaken.
14. Following their financial assessment, the adult is left with sufficient funds (the Minimum Income Guarantee MIG) to meet their housing (rent, council tax etc.), and other basic needs, such as food, and utility costs. Minimum Income Guarantee (MIG) thresholds are set by Government but local authorities are able to set higher MIGs if they wish. The council reviews its MIG figure at least annually to ensure that any adjustments to the nationally set MIG are reflected in the Council's practices. The UK Government has raised the rates of the MIG in response to inflation for this financial year 2023 to 2024.
15. The council reviews the person's income and savings, but will also consider whether the person is encountering "Disability Related Expenditure (DRE)". The person's "Disability Related Expenditure" will be deducted from the person's maximum ability to pay and the Council must ensure that each

person has a Minimum Income Guarantee [MIG]. This ensures that the person has sufficient funds available to meet their daily needs.

16. Southwark council is a member of the National Association of Financial Assessment Officers and follows its national guidelines when it comes to the assessment and application of disability related expenditure. In doing so, the council considers a broad range expenses in the context of disability related expenditure and are open to exploring expenses outside of national guidelines, which are unique to a person's needs and disabilities.
17. To view comparisons with other Local Authorities, Disability Related Expenditure (DRE), disregards, please see Appendix 2, which is an extract from analysis of Freedom of Information requests, undertaken by Inclusion London, referred to as the Barnet Analysis.
18. The UK Government's, Adult Social Care Charging Reforms scheduled for October 2023 have been delayed until 2025. Under the reforms many more residents will be eligible for council support towards the cost of their care, with the proposed upper limit in savings being lifted to £100k from £23k. These reforms will likely bring an increase in the number of residents who have previously, or would otherwise, meet the full cost of their care, seeking to have social care and associated financial assessments. This will further increase the council's spend on adult social care.

Response to recommendation 1

19. Whilst the council recognises the financial pressures being faced by residents, means-tested contributions are a central part of the funding model for adult social care delivery in England so any increase in the MIG would lead to a reduction in the income received by the council to fund adult social care services. To increase the MIG by 50 per cent would result in an approximate reduction in the Adult Social Care Directorate's budget of £3.million. Given the budget impact, any change to the council's MIG would need to be considered through the council's Policy and Resources Strategy process, which is being developed for the next three years in the context of continuing pressures on council budgets
20. The Adult Social Care Charging Reforms, which are now planned for 2025, will see an increase in the number of residents requesting contributions from the Council to adult social care services. Therefore, any proposed changes to the MIG, should be considered in the context of UK Government reforms, when the detail of these reforms become available and the impact can be fully assessed.
21. To support residents facing financial pressures, the council continues to support residents to maximise benefit income. The council's "Local Support" team provides support to residents with benefit applications, including benefits that are allocated to fund care and travel.

Response to recommendation 2

22. The council provides social care services to adults with a range of needs, from mental health needs, adults with learning disabilities, adults with physical disabilities and to older adults.
23. The council assesses adults on the basis of their needs and aims to ensure equal access to council resources for all adult social care service users. Similarly, trained officers financially assess adults in a fair and transparent way by ensuring that all service users are assessed on their levels of income, savings and assets.
24. The impact of removing care contributions from disabled adults would not be fair, ethical or legal. The Council would be considered discriminatory if it prioritised financial support to one cohort of adult social care users over another and would be at risk of legal challenge.

Response to recommendation 3

25. Yes, it is accepted that the communication with service users and families in regards to the financial assessments process has not been as clear as it might have been. This is in partly due to the complexity and changing eligibility criteria of the welfare benefits system. Adult social care has upgraded and improved the pages relating to financial assessments on the council's website and the Adult Social Care Directorate has updated information online and in print.
26. The council has produced refreshed guidance leaflets, explaining the financial assessment process and is providing in-person consultations to services users and their carers. Copies of Southwark's leaflets can be found in Appendices 3 to 5 of the report.
27. As part of this review, the council has introduced a new online financial assessment calculator and assessment form. The online financial assessment calculator enables service users and their carers to understand their possible care contributions based on their unique circumstances. <https://southwark.mycostofcare.com/OFA/>
28. The council is working with local voluntary and community sector organisations to help increase the understanding of adult social care contributions. For example, officers met with staff at Bede Café to provide information about the contributions process and has subsequently met with service users and family carers to provide advice and support with person-centered and accurate completion of financial assessments.
29. In-person support for financial assessments is now offered on a fortnightly basis at the council's offices at Queens Road, which once embedded, will be advertised widely. Since undertaking this work carers have reported feeling far more confident and reassured about the financial process.

Response to recommendation 4

30. The Government sets different rates of Minimum Income Guarantee (MIG), dependent on age, entitlements and calculated needs. Further details of how this is calculated can be found in Appendix 6 of the report.
31. The council considers it to be fair that if a service-users' income increases then they have their client contributions reassessed to ensure that those with higher incomes contribute more. This approach is also followed if a client's income decreases.
32. The Department of Work and Pensions varies benefit entitlement in the context that claimants will need to fund elements of their care. Therefore it is important that service users who are concerned that assessed contributions will place them in financial difficulty, are encouraged to contact the council so that they can be supported to obtain their maximum benefit entitlement.

Response to recommendation 5

33. The council welcomes this recommendation and agrees to work with stakeholders, service users and carers on any future review of the Council's Fairer Contributions Policy. The council engages widely on policies in this area and will continue to do so.

Policy framework implications

34. Southwark Council adopted a Fairer Contributions Policy in 2015, which outlines the way the Council uses the powers granted to local authorities under the Care Act 2014 to financially assess recipients of social care services. The Fairer Contributions Policy was further reviewed in 2021.
35. The responses to the five recommendations made by the Health and Social Care Scrutiny Commission to Cabinet on 13 June 2023, are listed above and are consistent with Southwark Council's Fairer Contributions Policy.

Community, equalities (including socio-economic) and health impacts

Community impact statement

36. Section 149 of the Equalities Act 2010 lays out the Public Sector Equality Duty (PSED) which requires public bodies to consider all individuals when carry out their day to day work - shaping policy, in delivering services and in relation to their own employees. It requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when carrying out their activities. The council's Approach to Equality commits the council to ensuring that equality is an integral part of our day to day business.

37. The Equalities Act 2010 defines the following as protective: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race religion or believe and sex and sexual orientation,
38. Adult Social Care works closely with all relevant stakeholders and partners across the sector and collectively are committed to upholding the responsibilities towards advocating the PSED and complying with the Equalities Act 2010.

Equalities (including socio-economic) impact statement

39. It is acknowledged that there is a disproportionate (unequal) impact on the health of those who have a lower socio-economic status and often for those who have a social care need. Through all of our work, we aim to achieve equality of outcomes for those supported by Adult Social Care.

Health impact statement

40. Adult Social Care works closely with the NHS and Public Health colleagues to roll out initiatives and campaigns that relate to vulnerable adults.

Climate change implications

41. There are no climate change implications for consideration.

Resource implications

42. The number of people requiring support for their social care needs is increasing year on year. The financial cost for Local Authorities to meet the social care needs of their residents continues to increase. These rising costs have been exacerbated locally by the increase in the London Living Wage and the rate of inflation in 2022-23 and 2023-24.

Legal implications

43. There are no legal implications for consideration.

Financial implications

44. There are no financial implications for consideration.

Consultation

45. There were no consultation matters for consideration.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

46. No supplementary advice from other officers were required.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Cabinet Agenda and Minutes dated 13 June 2023 see Item 16 Report of the Health and Social Care Scrutiny - Care Contributions	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link (copy and paste into browser): https://moderngov.southwark.gov.uk/ieListDocuments.aspx?CId=302&MId=7676&Ver=4		
Southwark's Health and Social Care Scrutiny Commission	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://moderngov.southwark.gov.uk/mgCommitteeDetails.aspx?ID=519		
Care Act 2014	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://www.legislation.gov.uk/ukpga/2014/23/contents/enacted		
Mental Health Act 1983	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://www.legislation.gov.uk/ukpga/1983/20/contents		
Creutzfeldt-Jakob disease (CJD)	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://www.nhs.uk/conditions/creutzfeldt-jakob-disease-cjd/		
Personal budget calculation	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582

Background Papers	Held At	Contact
Link (copy and paste into browser): https://www.nhs.uk/conditions/social-care-and-support-guide/money-work-and-benefits/personal-budgets/		
Financial Assessment (means tested) for social care	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link (copy and paste into browser): https://www.nhs.uk/conditions/social-care-and-support-guide/help-from-social-services-and-charities/financial-assessment-means-test/		
London Living Wage	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://www.gov.uk/national-minimum-wage-rates		
Southwark's Ethical Care Charter	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link (copy and paste into browser): https://modern.gov.southwark.gov.uk/documents/s52528/Appendix%201%20Southwark%20Ethical%20Care%20Charter.pdf		
Disability Rated Expenditure (DRE)	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://www.gov.uk/financial-help-disabled		
National Association of Financial Assessment Officers	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://www.nafao.org.uk/		

Background Papers	Held At	Contact
Adult Social Care Charging Reforms	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link (copy and paste into browser): https://www.gov.uk/government/consultations/adult-social-care-charging-reform-distribution-of-funding-2023-to-2024		
Southwark's Policy and Resources Strategy	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link (copy and paste into browser): https://moderngov.southwark.gov.uk/mgDelegatedDecisions.aspx?XXR=0&&DR=22%2f08%2f2008-22%2f08%2f2023&ACT=Find&RP=0&K=0&V=0&DM=0&HD=0&DS=0&Next=true&T=9227822&NOW=22082023112937&META=mgdelegateddecisions		
Southwark's Local Support	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://myforms.southwark.gov.uk/localsupport/launch		
See For Yourself - Contribution Calculator	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://southwark.mycostofcare.com/OFA/		
Bede Café	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://bedehouse.org.uk/programmes/learning-disabilities/		
Department of Work and Pensions	Adult Social Care Directorate 4 th Floor	Pauline O'Hare 020 7525 0582

Background Papers	Held At	Contact
	160 Tooley Street, London, SE1 2QH	
Link: https://www.gov.uk/government/organisations/department-for-work-pensions		
Equalities Act 2010	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link: https://www.legislation.gov.uk/ukpga/2010/15/contents		
Public Sector Equality Duty	Adult Social Care Directorate 4 th Floor 160 Tooley Street, London, SE1 2QH	Pauline O'Hare 020 7525 0582
Link (copy and paste into browser): https://www.equalityhumanrights.com/en/advice-and-guidance/public-sector-equality-duty		

APPENDICES

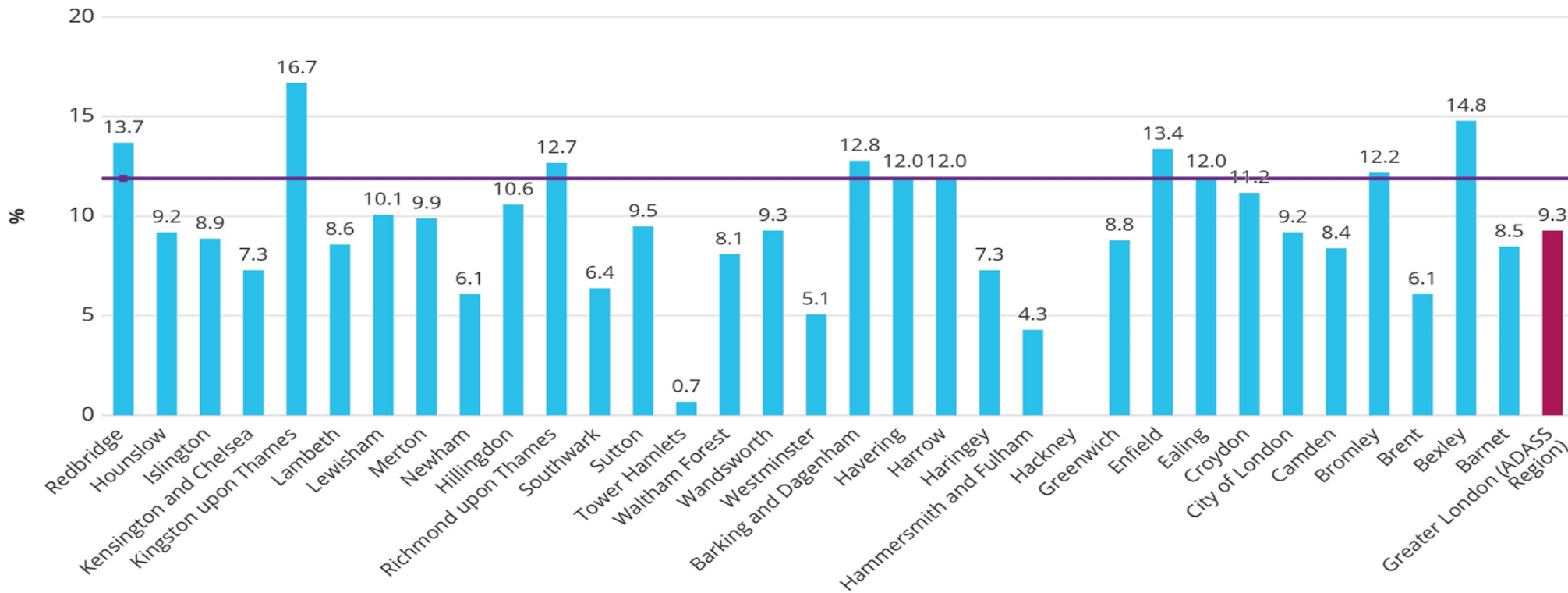
No.	Title
Appendix 1	Care contributions as a percentage of gross expenditure – Greater London ADASS comparison
Appendix 2	Local Authorities which allow Disability Related Expenditure (DRE) Disregards (Barnet Analysis)
Appendix 3	Charging and paying for your social care – Non-Residential Care
Appendix 4	Charging and paying for your social Care – Residential Care
Appendix 5	Paying for your care and support (Easy Read)
Appendix 6	Minimum Income Guarantee

AUDIT TRAIL

Cabinet Member	Councillor Evelyn Akoto, Health and Wellbeing	
Lead Officer	David Quirke-Thornton, Strategic Director of Children and Adult Services	
Report Author	Pauline O'Hare, Director of Adult Social Care	
Version	Final	
Dated	31 August 2023	
Key Decision?	Yes	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments Included
Assistant Chief Executive – Governance and Assurance	No	No
Strategic Director of Finance	No	No
List other officers here	N/a	N/a
Cabinet Member	Yes	Yes
Date final report sent to Constitutional Team		31 August 2023

Appendix 1

Income from client contributions as a proportion of revised gross current expenditure on adult social care for Greater London (ADASS Region)



- Client contributions as % of revised spend on adult social care 2021/22
- Total for England: Client contributions as % of revised spend on adult social care 2021/22
- Greater London (ADASS Region) (Lead area)

APPENDIX 2**Local Authorities which allow Disability Related Expenditure (DRE) Disregards**

Local Authorities which allow Disability Related Expenditure (DRE) Disregards (Extract from Barnet Analysis 07/06/23 data collected from a Freedom of Information Request)	
Barnet	No
Camden	No
Ealing	Yes
Greenwich	Yes
Hackney	Yes
Islington	No
Kensington & Chelsea	No
Merton	Yes
Southwark	Yes
Tower Hamlets	No

Charging and paying for your social care

Non-Residential care

Who this is for

The information in this leaflet is for adults who receive non-residential care and support from the council's Adult Social Care services.

Examples of non-residential care include (but are not limited to) –

- [Home care](#) (also known as domiciliary care) includes support around the home with tasks, personal care and/or any other activity that enables you to maintain both your independence and quality of life.
- Care and Support in Extra Care Housing.
- Day care services.
- [Telecare services](#) (sensors and pendent alarms that can be fitted in your home.

These sensors can alert your family or emergency services if you are hurt and/or fall).

Do I receive non-residential care & support?	
I receive care and support and -	
Live in my own home	✓
Live in Extra-Care/Flexi-Care accommodation	✓
Live in shared living accommodation	✓
Live in a nursing home	✗
Live in residential Care home	✗
If you live in a nursing or residential care home you should read our 'Charging and Paying for Your Social Care, Residential Care' leaflet	

Services that need to be paid for (chargeable services)

The below table provides examples of care and support that must be paid for, and care and support that is free –

Chargeable Non-Residential services	Free services
Homecare Extra Care Shared lives accommodation Supported accommodation Day care services Telecare Transport	Information and advice Needs Assessments and Care and Support Planning Services of the following advocates- <ul style="list-style-type: none"> ▪ Independent Advocates ▪ Independent Mental Capacity Advocates ▪ Independent Mental Health Advocates Services provided to Carers Minor Equipment and gadgets to help you in your home (up to value of £1,000)

We also do not charge for the following care and support:

- **Rehabilitation and reablement** support if you are in hospital or at home and require support to:
 - help recover from illness or injury at home so that you do not go into hospital unless you really need to
 - settle back into living in your home if you have recently left hospital
 - improve functionality, remain independent, safe and well at home and prevent the need for you to require longer term care

Rehabilitation and reablement support generally lasts up to six weeks but may be ended earlier or even in some circumstances extended. You can find more information on the council's [Rehabilitation and reablement](#) webpages.

- **Aftercare services.** If you have been detained in hospital under the Mental Health Act for treatment or sent to hospital by a court or from prison we will not charge you for Aftercare services related to your mental disorder when you are discharged. However, we will charge you for the cost of meeting needs which arise from your physical health or for reasons unrelated to your mental disorder if we assess that these needs must be met. You can find more information on Aftercare services in our [s117 Aftercare](#) leaflet

Calculating the Cost of meeting your care and support needs

Personal budget

If we assess that you have [Care Act Eligible needs](#) that the Local Authority needs to meet we will develop a [Care and Support plan](#) with you.

We will use your Care and Support Plan to understand how much it will cost to meet your needs. The cost of meeting your needs is called a personal budget.

How a personal budget is paid for depends on your financial or personal circumstances. If you have sufficient capital, you will need to pay for all of the cost of your personal budget. Most people, however, are assessed by the council as only having to pay for part of their personal budget with the Council covering the rest of the cost. In some circumstances, the council pays the total amount of your personal budget.

Your personal budget amount will change over time. This is because –

- We may not be able to immediately provide you with an accurate personal budget. We will only be able to provide you with our best guess of how much it will cost to meet your needs. This best guess is called an indicative budget. We may not be able to provide you with an exact personal budget until we -
 - Identify available and suitable care and support providers to meet your specific needs
 - Agree with the care and support provider how much support you need and how much this will cost
 - Determine how much you should pay towards the cost of your personal budget
- Your needs may change over time. If your needs worsen you may need additional care. If your needs reduce we may be able to purchase less care.
- The providers of care services may increase or lower the cost of the services they provide.
- Alternative means for meeting your needs may become available, for example –
 - Suitable free services may become available
 - We may arrange for you to access equipment or gadgets which mean you are able to manage your needs without additional support
 - An alternative provider may offer more cost effective services
 - Your carer may take on additional responsibilities
- Your contribution towards the personal budget changes.

Arranging and purchasing your care and support

Council purchased care

The council has expertise in purchasing care and support and long standing relationships with providers of care and support services. Because of this many people ask us to arrange and purchase care and support on their behalf.

If you decide that you would like the council to arrange your care and support we will arrange and pay for your care and support upfront. If we assess that you must pay for some or all of the care and support you receive we will invoice you on a 4 weekly basis. You can pay your contribution using a range of methods (see ***Paying your Contribution***).

Direct payments

You may decide that you (or a trusted party acting on your behalf) would prefer to arrange and pay for your own care and support.

We can pay you the value of your personal budget through a Direct Payment. If for example we calculate that it will cost £500 a week to meet your care needs (your personal budget), we will make a direct payment to you of £500 per week less the value of your contribution (see **Paying your Contribution**). If your contribution is £30 per week, we will pay £470 and you will pay £30.

If you opt for a direct payment we will create a pre-paid card account for you and credit our payments to this account. You can then use your pre-paid card to purchase services.

You are responsible for paying your contribution to the care provider. If you fall behind in your contributions we may terminate your direct payment.

Mixed option (council purchased care and direct payments)

If you decide that you would like us to purchase some of the services you need, but you would like a direct payment to arrange certain care and support this is also possible. If we assess that you must contribute towards your personal budget we will pay you the direct payment minus

Direct payments

Direct payments can be paid to you or someone you consent to manage the payment on your behalf (a family member, friend, carer or even some care providers). We will not be able to provide you with a direct payment in some circumstances (for example, you are an offender and subject to court orders or you have been detained under mental health legislation). We can advise you on this

Direct Payments can be used to pay for services to meet your eligible needs, such as care and support to help you live in your own home, to employ a personal assistant to help you with activities, or short breaks and leisure activities.

Direct Payments cannot be used to pay for household bills, residential care, health services, gambling or anything illegal.

Mixed Option Personal Budgets

You have a personal budget of £500 per week. We assess that you must contribute £30 towards your personal budget.

You arrange care that costs £200 per week. You pay for this using a direct payment. Because you must pay £30 towards your personal budget we make a weekly payment of £170 to you. You top this payment up by £30 per week to bring the total payment to the provider up to £200 per week.

Meanwhile the council arranges and pays for care that costs £300 per week using the remainder of your personal budget.

your contribution (as with the above example, if your contribution is £30 per week, we will pay £470 to you).

Third Party Managed Service

A third party managed service may benefit you if you want the benefits of receiving a direct payment but you do not want to take on all the responsibilities of administering the account. If you opt for a third party managed service we will make the direct payment to a Third party who will manage the account on your behalf.

Using your direct payment

If you purchase care and support using a direct payment you must keep up to date records of the services you purchase. On occasion we will ask you to provide proof that you are using the direct payment to purchase the care and support set out in your care and support plan.

If you are not using your direct payment to pay for appropriate services we may terminate your direct payments and opt to arrange/purchase care on your behalf. We may also refer any misuse of direct payments to the council's Anti-Fraud and Internal Audit Service to investigate, this could result in the council taking legal action against you to recover any misused funds.

Self Funders

If you are responsible for fully funding your care and support we can still support you in identifying care providers and negotiating care packages on your behalf. Alternatively you can make your own arrangements. We do not need to be involved at all if you prefer.

If we arrange care and support on your behalf you will need to pay an arrangement fee of £200 for the service. You will need to pay another arrangement fee if we need to arrange new services for you at a later date as a result of a significant change in your circumstances.

You will need to pay for your own care and support if you have access to capital in excess of the upper capital limit (currently £23,250). Over time the value of your capital may fall below the upper capital limit. If the value of your capital falls below this threshold we can assess your income to determine how much the council should pay for meeting your needs and how much you must contribute.

You are responsible for letting us know when the value of your capital has fallen to close to the upper capital limit of £23,250. The sooner you let us know the sooner we can arrange to assess how much we can pay towards meeting your care and support. We will only pay towards the cost of meeting your care and support at the point we complete the financial assessment with you. If you approach us when your capital falls below the capital limit (for example you approach us when the value of your capital falls to £15,000) we will not consider how much we would have paid for your care if you had approached us earlier.

For more information see *Income and Capital*.

Calculating how much you will need to pay for your care and support

Financial assessment

You must complete a financial assessment to determine if you need to pay for some or all of your assessed care and support.

You should complete the financial assessment as soon as possible. This is to ensure that you know if you need to contribute to meeting the costs of your care and support, and if so, how much you must pay. If we are unable to calculate your contribution in a timely fashion we will backdate any money that you owe us to the time that you first received the care and support. This may mean that you are owed money for costs going back weeks or months.

We will ask you to complete a full financial assessment if it appears that you may not have to pay for any of your care and support or you may be required to make a contribution.

If it is likely that you will need to pay for all of your care and support (because your income and capital clearly exceeds the thresholds set by the government) we may conduct a light touch assessment with you. This is so that we do not ask you unnecessary additional questions and have on record information about your finances that we do not need to have.

You will need to pay for all of your care and support if you do not complete a financial assessment or if we cannot complete a light touch financial assessment with you.

It is important that you provide accurate information about your income and capital so that we are able to correctly calculate if – and how much – you must pay for your

assessed care and support. We will increase your charges retrospectively if we learn that we have undercharged you because –

- You provided us with incorrect information.
- Your circumstances change and you do not tell us.
- You gave your assets to other parties in order that the assets are not included in your financial assessment. For example you transfer the title deeds of your property to a family member or make significant financial gift or purchase for a friend.

Capital and Income

Capital refers to most types of savings and investments. For the purpose of the financial assessment for non-residential care the home you live in is not counted as capital. However, other properties and land that you own will be included.

Income refers to money that comes to you on a regular basis, for example benefits and pensions. If you earn a wage/salary, this is not included as income in your financial assessment. Any wages you earn are yours to keep.

You will need to fully fund the care and support that you need if you own capital in excess of £23,250 (the upper capital limit. This figure is set by the government).

It is likely that you will need to contribute towards the cost of your care and support if the value of the capital that you own is less than £23,250. We will consider your income levels to determine how much you must contribute. We will also apply a tariff income of £1 for every £250 worth of capital you own between £14,250 (the lower capital limit threshold, also set by the government) and £23,250. We won't apply a tariff income if you own capital worth less than the lower capital limit, but will still assess your income.

Examples of income and capital

Capital includes (but is not limited to):

- Property (but not the home you live in).
- Bank, building society and post office savings
- Savings certificates
- Stocks, bonds and shares
- Premium bonds
- Trust funds
- ISAs

Income includes (but is not limited to):

- Employment and Support Allowance
- Universal Credit
- Attendance Allowance
- Disability Living Allowance (care)
- Personal Independence Payment (daily living)
- Pension Credit
- State Retirement pension
- Severe Disablement Allowance
- Rental income from property

The below table provides an example of how we calculate the tariff income:

You receive benefits of £100 per week (your income), and own capital worth £16,000. This means that you own capital of £1,750 above the lower capital limit of £14,250.

Value of capital in excess of the lower capital limit		Tariff charge
£250		£1
£250		£1
£250		£1
£250	equal to	£1
£250		£1
£250		£1
£250		£1
Total £1,750		£7

We will apply a tariff charge of £7 against your capital, giving you an income of £107 per week.

When considering your income we will not include income from the following sources in your financial assessment –

<ul style="list-style-type: none"> ▪ Wages ▪ Savings Credit of Pension Credit ▪ Working Tax Credits ▪ Child Tax Credits and Child Benefit ▪ Disability Living Allowance (mobility) ▪ Personal Independence Payment (mobility) 	<ul style="list-style-type: none"> ▪ Armed forces Independence Payment (mobility component) ▪ War Disablement Pensions ▪ War Reparations Payments (the first £10 is disregarded) ▪ War Widows Supplementary payments ▪ Certain charitable and voluntary payments ▪ Christmas bonus and Winter Fuel Payments
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Protected income – the Minimum Income Guarantee

You will always be left with a certain level of income. This figure is referred to as the Minimum Income Guarantee. The Minimum Income Guarantee is the amount that the government says you can live on.

How much you are left with depends on your circumstances and could range anywhere between £72.40 per week and £232.25 per week if you are single and have no children.

Your Minimum Income Guarantee is calculated using figures provided by the Department of Health and Social Care and takes account of:

- Your age
- What benefits you get or could get
- If you are single or part of a couple
- If you live alone or with somebody else
- If you get, or could get, certain premiums in your state benefits such as Enhanced Disability Premium and Carers Premium
- If you care for a child who lives with you

Disability related expenditure

Disability related expenditure refers to the additional money that you need to spend on items/services that are specifically related to your disability. For example your electricity costs are higher because you charge an electric scooter, you pay someone for domestic tasks that you are unable to do yourself, or you need to buy specific foods/supplements due to your dietary requirements.

You will need to provide information about your Disability Related Expenditure (if you have any) in your financial assessment. How we calculate your Disability Related Expenditure depends on the need/cost in question:

Cost	Such as	How we calculate it
Regular ongoing costs	Domestic help or window cleaning	These costs are converted to weekly amounts, and usually allowed in full. Some expenses may be capped if cheaper alternatives are available.
One-off equipment purchases	Wheelchairs, disability aids, adaptations to your home	We will spread the cost of the equipment over its expected lifetime. If the equipment is expected to last one year, we will spread the allowance over 52 weeks (one year). So if the equipment cost £520 we will allow £10 per week in the financial assessment ($£520 \div 52 \text{ weeks} = £10 \text{ per week}$). If cheaper alternatives are available we will only make an allowance for the lower cost.

Cost	Such as	How we calculate it
Utility costs	Gas, electricity and water charges above what is considered 'normal' usage.	<p>Electricity and gas costs</p> <p>We compare how much you spend over a whole year with the average cost for your type of property. If you spend more than the average cost we will allow the difference between what you spend and the average cost.</p> <p>Water charges</p> <p>Excess water costs, perhaps because you have to do more loads of laundry, can be taken into account if you are on a metered water connection. If you are on a metered connection, this means you pay for water you use and the amount you spend can go up or down. We will compare how much you are charged with the average for your household and allow the difference between the two.</p> <p>If you are not on a meter, you are charged a standard amount and the amount of water you use does not affect how much you pay. Normal water costs are an everyday expense and are not allowed as disability related costs.</p> <p>If there is more than one adult receiving care living in the same property, the excess amount is usually shared equally between each adult. If there is a cheaper tariff available to you, the council will calculate the excess based on the cheaper tariff and not on what you are paying.</p>
Future costs	Plans to replace a piece of equipment at some point in the future	<p>An example of a future cost is if you want to replace your wheelchair next year, you have not incurred any costs yet, so nothing can be allowed in your financial assessment.</p> <p>We will not make an allowance for future costs (items or services that have not yet been paid for) unless there are exceptional circumstances. These costs will only be allowed as part of the appeals process.</p>

Paying your contribution

We recommend that you pay your contributions by **direct debit** (this is often the preferred and easiest method of payment), however you can also pay using the following methods:

- **Debit or credit card** either over the phone or online at our website. Please see the back of your invoices for information on how to pay.
- **Standing order** which you set up with your bank. You are responsible for changing the amount of your standing order if your charge changes. This method of payment is not recommended unless you have online banking and are being charged the same amount each month.
- A **swipe card** is similar to a gas or electric card or key. You must contact us to request this method of payment. We can only agree to this method if you meet certain criteria (for example you must have a Post Office account).
- **Cheque** payments should be crossed and made payable to Southwark Council.

Useful contacts

If you require further information about how to pay your assessed charges, contact the **Collections Team** on **020 7525 1111** or by email at collections@southwark.gov.uk.

If you have questions about the financial assessment process or the amount you are asked to pay, contact the **Charging Team** on **0800 358 0228** or by email at ChargingTeam.adultsocialcare@southwark.gov.uk.

The below table includes the details of independent financial advisors or organisations that you might find helpful.

Organisation	Contact details
Age UK	Tel: 020 7701 9700 Website: https://www.ageuk.org.uk/lewishamandsouthwark/
The Money Advice Service (now called Money Helper)	Tel no: 0800 138 7777 Typetalk: 18001 0800 915 4622 Website: https://www.moneyhelper.org.uk/en
Citizens Advice Southwark	Tel: 0344 499 4134 Website: https://www.citizensadvice.org.uk/southwark/
Southwark Disablement Association (for adults with physical disabilities)	Tel no: 020 7358 7744 Website: www.sdail.org
Southwark Wellbeing Hub (for adults with a mental illness)	Tel no: 020 3751 9684 Website: https://www.together-uk.org/southwark-wellbeing-hub/directory
Society of Later Life Advisors	Tel no: 0333 2020 454 Website: https://societyoflaterlifeadvisers.co.uk/
Southwark Information and Advice Team (for adults with special educational needs and disabilities)	Tel no: 020 7525 3104 Website: https://localoffer.southwark.gov.uk
Department for Work and Pensions	Website: https://www.gov.uk/government/organisations/department-for-work-pensions

Charging and paying for your social care

Residential care

Who this leaflet is for

The information in this leaflet is for adults who receive residential care and support from the council's Adult Social Care services. This includes care and support in a residential care home or nursing home.

How we decide who we support

If you are entitled to receive care and support from the council it is most likely you will need to contribute to the cost of your care. We will complete a financial assessment with you to find out if you need to make a contribution, and if so how much. **If you do not provide information to allow us to complete the financial assessment you will need to pay the full cost of your care.**

A social worker will assess your needs to see whether you are eligible to receive care and support from the council. In order to receive support from the council you must meet the criteria set out in the Care Act 2014. You can find more information about eligibility criteria by going to the following website:

<https://www.southwark.gov.uk/social-care-and-support/adult-social-care/care-and-support-from-the-council/adults-with-care-needs/can-we-help-with-your-care-and-support-needs>

Temporary and permanent care home placements

If your stay is intended to be less than a year and you have a set date to return home, your placement will be treated as temporary. If your home is empty, we will normally make allowances for you to continue to pay certain costs. If you make long term arrangements, your placement will be considered to be permanent. This matters because your charge can differ depending on the type of placement.

Who can get financial support

Once your needs have been identified we will carry out a financial assessment to work out what you need to pay towards the cost of your care. You will not be asked to pay more than you can afford. If you do not qualify for help from us, we will provide you with information and advice and tell you about other help available to you.

If you have eligible needs and meet the capital and income requirements (see below) you will be entitled to financial support to pay for care.

Capital limits

The first stage in a financial assessment involves looking at how much money or other assets you have. Collectively, this is called Capital. If you have capital valued at over £23,250 you will not be entitled to financial support from the Council and you will need to make your own arrangements with the care home. We will still assist you with this process by providing you with information, sourcing a care home and telling you the things you need to take into account.

If your capital gets near to or falls below £23,250, you will need to apply for financial assistance. You are advised to make contact four months before your capital drops below the limit, as it can take this long to assess (or reassess) your eligibility for care services and to conduct a financial assessment. If you make contact after your capital drops below the limit, we will not put your capital back up to the limit. Once your capital drops below the capital limit, you will still need to make a contribution towards your care.

If your total amount of capital is valued at under £14,250, it is ignored for financial assessment purposes. We still need to know how much capital you have even if it is under £14,250. Please note that you will still be assessed to pay towards your care based on the amount of income you have.

Disposing of your savings, capital or income

If you have disposed of savings, capital or income in order to avoid or reduce your charge for care, we can by law still treat you as having that asset, or in some cases ask the recipient of the asset to make payment instead.

This means that you may be charged up to the full cost of your care. We reserve the right to take civil legal action against anyone who has disposed of their asset or received the asset.

Disposing of assets can include, but is not limited to:

- Transferring the title deeds of a property to another person or into a trust
- Spending money on a valuable possession such as jewellery or art
- Making large or unusual gifts to relatives
- Paying off a debt that is not due to be paid by you

When deciding whether you have deprived yourself of assets in order to avoid or reduce care home charges, we will take into account your circumstances.

This includes:

- The reason for the disposal
- The date it took place
- Whether the person could reasonably foresee the need to move into a care home

It will be for the person to prove that they no longer own the asset and to satisfy the council that the disposal of the asset was not done to avoid or reduce care charges.

Paying for residential or nursing care services where we arrange your placement

If following a social care assessment we agree that residential care is needed to support you, we will help you find suitable accommodation.

Nursing Care

If you get Funded Nursing Care, the NHS pays the contribution directly to the care home.

Third Party payments

If the accommodation you choose costs more than the amount we usually pay for someone with similar care needs, a third party (or more than one) will be asked to pay the difference. This additional payment is usually referred to as a Top Up arrangement or a Third Party Top Up. This will require entering into a legal agreement, and failure to fund could put your placement at risk.

You are not allowed to top up your own care fees, except in very limited circumstances. For more information, please see further information about top up payments which is included within this pack.

Using your property to help pay for care

If you own or partly own your property and if that property is being considered in your financial assessment, you will be responsible for the full cost of your care (after any disregard, such as the 12 week property disregard described on page 8).

If you do not want to sell your property or are unable to sell your property straight away we offer a Deferred Payments scheme to help you pay for your care.

This is a loan from us, using your home as security. They are different to conventional loans and you do not receive a lump sum of money when you join the scheme. We pay part of your care bills for as long as necessary. You will need to repay all of the funds paid on your behalf.

Please be aware that interest is charged from the start of the loan

Before you can get financial support under this scheme a social care worker will need to assess your eligibility for the service. We will also need to carry out a financial assessment of your ability to contribute towards your care. You will still need to make a contribution towards your care costs. We will lend you the weekly fee (less any NHS contribution) less your charge. The money borrowed under the Deferred Payment Agreement is then repaid when the money tied up in your home is released or if you find another source of funds to pay back the debt.

Deferred Payment Scheme

You can apply to join this scheme if you do not want to sell your home during your lifetime. You are able to rent out your home to generate income to help pay your care fees, but you must tell us before you do this as there are some conditions to be met. You will be expected to use most of the rental income to help pay your ongoing care fees, which means the amount we lend you under the scheme is reduced. Please be advised that tenancies must be made under an Assured Shorthold Tenancy.

Please note there are certain conditions which must be met before you can join the Deferred Payment Scheme. We will tell you if you qualify when we have completed a financial assessment. Nobody is entitled to join the scheme if we cannot register a legal charge with HM Land Registry.

Important information to note before applying for funding assistance

Please ensure you seek independent legal and financial advice before applying for funding assistance from the council under the deferred payment scheme. The council is not responsible for any fees you incur as a result of obtaining this advice.

Interest is charged on a daily rate and is compounded monthly. The rate changes every January and July and is based on the cost of government borrowing. If you join one of the schemes, we will notify you of the interest rates whenever they are due to change.

If you use either of these schemes then Attendance Allowance or the care element of DLA or the daily living element of PIP can become payable again.

How we calculate your contribution

The Financial Assessment

We will need to confirm your income, outgoings and assets (including savings). We ask for evidence such as bank statements, pension payslips and letters from the Department for Work and Pensions (DWP) or Jobcentre Plus to support your assessment.

It is important that we get correct information as soon as possible. Any delay can result in you being required to pay the full cost of your care. Once we receive the information we need, we will make any adjustments needed.

When completing a financial assessment, we will make sure you are left with the statutory Personal Expenses Allowance which is **£24.90** per week.

The capital we take into account includes the value of your share in buildings and land in this country and abroad. In certain circumstances the value of your main home (if you own it) will be disregarded.

Capital - including savings, shares and premium bonds

The amount of capital we take into account is added together:

- If the total amount of your capital is less than **£14,250**, your capital will not affect your financial assessment
- If your capital is valued at more than **£14,250**, but less than **£23,250**, the national charging rules allow the council to include £1 per week for every £250 of savings you have above £14,250 - but less than £23,250 - when it works out the weekly contribution you will have to pay towards the cost of your care. This is called tariff income
- If your capital is valued above **£23,250**, you will need to pay the full cost of your care.

Tariff Income is meant to represent an amount a resident with capital over a certain limit should pay towards their care, not the interest earning capacity of that capital.

An example – Thomas

Thomas is 71 and has savings of £15,000. This is £750 above the £14,250 limit – or 3 x the £250 levels of savings.

So the council will include £3.00 per week as income when working out Thomas' assessed charge.

The income we take into account when working out your charge includes:

- Most state benefits, including the State Retirement Pension
- Widowed parent's allowance
- Occupational (works) personal pensions or retirement annuity contracts (see below)
- Most annuity incomes
- Property rental income (we do make some allowances so that you can pay any tax on the income and keep the property maintained)
- Other income not specifically disregarded by regulations

Occupational (works) or personal pensions or retirement annuity contracts

If you move into a care home without your partner, spouse or civil partner and if they are not better off claiming benefits in their own right, you can choose to pass on half of your occupational pension, personal pension or retirement annuity to them. If you do so, we will disregard that amount from your assessment when working out your charge. We are only able to disregard exactly 50% of this income and not more or less than this amount. We are unable to disregard any other income (such as State Retirement Pension) for these purposes.

Income not included:

Most charitable or voluntary payments

- Child Tax Credits
- Guardians allowance
- Christmas Bonus and Winter Fuel Payments
- Disability Living Allowance (Mobility Component)
- Personal Independence Payment (Mobility Component)
- Gallantry awards
- War Disablement Pensions
- War Widows supplementary payments

Income we include in part:

- War widow's or widower's pensions
- The Savings Credit element of Pension Credit (we only take into account amounts above £5.75 per week)

How the charge is worked out:

- We add up the amount of income we can take into account (this includes Tariff Income described above)
- We deduct certain household allowances (in limited circumstances)
- We deduct certain allowances on rental income you receive
- We deduct Personal Expenses Allowance of £24.90
- We deduct up to £5.75 per week if you have savings credit

The amount that is left over is your Maximum Assessed Contribution

The value of your home (if you own it)

The value of your share of your main home will not normally be taken into account for the first 12 weeks of your permanent placement in a care home. This period is called the 12 week property disregard. The disregard may not apply in certain circumstances. For instance, it does not apply where you have already been paying the full cost of your care for more than 12 weeks or for property that you own but were not living in prior to going into care.

Additionally, the value of your property will continue to be ignored for as long as it is occupied by:

- Your partner / a relative or a member of your family who is aged 60 or over, or who is incapacitated (someone who receives an incapacity or disability benefit or would qualify for such benefits) or who is a child under 18 who you are required to maintain.

In these circumstances, it must be clearly evidenced that the relative was living at your home before residential care was considered and you did not foresee the need for a move to residential accommodation when they moved in.

If your main residence is or becomes unoccupied or is occupied by someone who is not listed above the value of your share of that property will normally be taken into account when we work out your charge. You may need to contact your insurance provider to check that your policy still covers a vacant property.

If your total assets, **excluding** the value of your home, are more than £23,250, you will have to pay the full cost of your care home placement.

When the financial assessment has been completed, we will tell you in writing how we worked out your charge and you will be advised on what you can do if you think the charge is wrong.

What to do if you think your charge is wrong

We calculate your charges based on information in the Care Act 2014, *Care and Support Statutory Guidelines*, and charging regulations. The rules behind calculating charges can sometimes be complex, so if you feel your charge is incorrect, please call the charging team on 0800 358 0228 or email us at ChargingTeam.AdultSocialCare@southwark.gov.uk.

Your initial financial assessment

Your very first financial assessment will be conducted by the charging team, you will need to return the financial assessment form to them. When you return the form you will need to provide documentary evidence to support your claim. Please note that if you are unable to supply evidence, and if we cannot obtain evidence elsewhere (for instance from the DWP), then you will be charged for the full cost of your care.

Annual reassessment

Each year we reassess the amount you will have to pay and let you know of any change to your charge. This is a good time to check your assessment and see if your details are up to date.

Changes in circumstances

You must tell us of any changes to your circumstances that may affect your charge. This includes changes to your income, savings or other capital. If your property is being disregarded, we need to know of any changes that will affect that disregard. For instance, if the property is being disregarded because your spouse is living there and your spouse subsequently leaves the property, this will affect your disregard and we must therefore be told about it. If you are unsure, please let us know anyway.

Reviews

You can ask us to review your financial assessment at any time by writing to the charging team giving reasons for your request.

Please note that if we have applied a Tariff Income in your financial assessment, we will usually only review the tariff income amount once a year unless there are special circumstances, such as an unavoidable expense you have incurred.

What care home fees cover

Care home fees should cover all the normal things a care home would be expected to provide, including your meals, laundry and heating. The care home should not ask you for more money, except to pay for any extras you may choose, such as buying

newspapers, going for outings or hairdressing.

Please note that if you go into hospital while in residential care, you will normally be expected to continue paying towards your placement. We will be paying to keep your room available to you in your absence, so you will need to continue contributing towards that fee, even while in hospital. Your charges will continue for as long as your room is kept open for you. If you are getting Attendance Allowance or the care element of DLA or the daily living element of PIP because you are self-funding, these will stop after 28 days in hospital.

State Benefits and care home accommodation

Going into a care home, whether temporarily or permanently, may affect your entitlement to certain state benefits. You should seek advice to ensure you, your partner or your carer are claiming all the benefits you / they are entitled to.

If you pay for your care home yourself

If you lived with a partner before you moved into permanent residential care, your state benefits will be reassessed as though you were both single. Both you and your partner will need to claim benefits in your own rights, as single people, even if you are still married, were living together as a couple or in a civil partnership.

If you pay the full cost of your accommodation without help from us or if you receive help under the Deferred Payment Scheme or the Letter of Undertaking Scheme, then your benefits will be paid at the same rates as if you were still living at home but as a single person. You should let the DWP or Jobcentre Plus know of your change of address and circumstances. If you were not already getting one of the benefits listed below, you should apply for them as soon as possible:

- Attendance Allowance (for those who are over pension age if not getting either of the below benefits) Disability Living Allowance (care component) - please note that you cannot make new claims for DLA, so if you were not already receiving

DLA or PIP (see below), then you should apply for PIP.

- Personal Independence Payment (daily living component)
- The mobility element of DLA and PIP can be paid even if we are paying care costs.

If you do not pay for the full cost of your care

If we pay towards your placement (regardless of whether the placement is temporary or permanent), Attendance Allowance, Disability Living Allowance (Care Component) and Personal Independence Payment (Daily Living Component) will all stop. They will also stop being paid 28 days after a hospital stay, a care home placement, or a combination of hospital and care home placement. If the DWP are not informed of your change in circumstances, these benefits will be overpaid and you will be expected to return the overpaid amounts.

If these benefits stop being paid, it may lead to a reduction in the amount of Income Support, Employment Support Allowance, Pension Credit or Universal Credit you receive. If this happens, your charge for care will also reduce.

If your carer is paid Carer's Allowance

If someone who looks after you is paid Carer's Allowance or the Carer's Premium of some means tested benefits, they should inform the relevant benefits office of your move to a care home. Their own entitlement to benefits may be affected if you lose Attendance Allowance, Disability Living Allowance or Personal Independence Payment, or if they stop being your carer (except for temporary periods).

If you give half your Occupational (works) pension, personal pension or retirement annuity contract to your spouse

If this is given to your spouse and if they get means tested benefits in their own right (such as Income Support, Employment Support Allowance, Pension Credit, Universal Credit, Housing Benefit or Council Tax reduction), they may wish to seek independent advice as their benefit entitlement will be affected. The DWP must be informed of this

extra income if they are in receipt of a means tested benefit.

If you rent as a tenant

Permanent admission to a care home may lead to immediate loss of entitlement to housing benefit or the housing costs element of Universal Credit. If your move to a care home is temporary and you intend to return to live in your home (and if it is not being sublet in your absence), you may continue to be entitled to help with your housing costs for some or all of your absence. You should speak to your local district or borough council for advice on housing benefit and to the DWP about universal credit.

Useful Contacts

If you require further information about how to pay your assessed charges, contact the Collections Team on 020 7525 1111 or by email at collections@southwark.gov.uk.

If you have questions about the financial assessment or the amount you are asked to pay, contact the Charging Team on 0800 358 0228 or by email at ChargingTeam.AdultSocialCare@southwark.gov.uk.

Disablement Association (for adults with physical disabilities)

Tel no: 020 7358 7744

Website: <https://www.sdail.org> (*Internet Explorer not supported - use different browser*)

Southwark Wellbeing Hub (for adults with a mental illness)

Tel no: 020 3751 9684

Website: www.together-uk.org/southwark-wellbeing-hub

Lewisham and Southwark Age UK (for older people)

Tel no: 020 7701 9700

Website: <https://www.ageuk.org.uk/lewishamandsouthwark>

Southwark Information and Advice Team (for adults with special educational needs and disabilities)

Tel no: 020 7525 3104

Website: <https://localoffer.southwark.gov.uk> (*Internet Explorer not supported*)

Citizens Advice Southwark

Tel no: 0344 499 4134

Address: 8 Market Place, London SE16 3UQ

Website: <https://www.citizensadvice.org.uk>

Money Helper (formerly called Money Advice Service)

Tel no: 0800 138 7777

Typetalk: 18001 0800 915 4622

Open: Monday to Friday, 8am to 6pm

Website: <https://www.moneyhelper.org.uk/en>

Department for Work and Pensions

Advice and contact details for the Pension Service and Jobcentre Plus

<https://www.gov.uk/government/organisations/department-for-work-pensions>

Paying for your care and support





This page explains how we work out how much you could pay for your care.



Click here to download a leaflet about organisations providing independent advice: [Independent Financial Advisors](#)



Financial assessments

To find out if you need pay for your care, we will carry out a **financial assessment**.



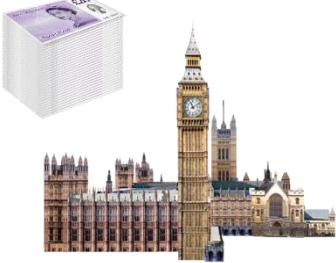






We will work out what you can afford to pay by finding out:









- how much it costs to provide care and support to meet your needs



- what your **personal expenses allowance** or **guaranteed minimum income** is.

	<p>The government sets the personal expenses allowance.</p>
	<p>This allowance is the money everyone needs to spend on other things every week.</p>
	<p>If you give us information about your money quickly,</p>
	<p>we can decide what you need to pay quickly too.</p>
	<p>Working out what you need to pay</p>
	<p>So that you only pay for the care you can afford, the charge is based on your income.</p>
	<p>The financial assessment tells us:</p> <ul style="list-style-type: none"> • your income • your capital <p>We explain these terms on the next page.</p>

	<ul style="list-style-type: none"> any costs you have because of your disability.
	<p>Income</p> <p>Your income includes benefits such as:</p> <ul style="list-style-type: none"> Personal Independence Payments
	<ul style="list-style-type: none"> Attendance Allowance
	<ul style="list-style-type: none"> Income Support.
	<p>If you have a job, we do not include your salary in the financial assessment.</p>
	<p>Capital</p> <p>Your capital includes: Property – houses, flats and offices</p>



- stocks and shares



- premium bonds



- savings



- land.









You will have to pay the total cost of your care and support if your **capital** is more than **£23,250**.








You will have to pay towards your care and support if your **capital** is from **£23,250** to **£14,250**.



To work out your income we add a tariff of **£1** for every **£250** of capital you have that is **more than £14,250**.

	<p>We do not add a tariff of £1 if your capital is less than £14,250.</p>
	<p>Here is an example of how we work out the tariff:</p>
	<ul style="list-style-type: none"> Your benefits are £100 per week
	<ul style="list-style-type: none"> Your capital is worth £16,000.
	<ul style="list-style-type: none"> So your capital is £1,750 more than £14,250.
	<p>This means your tariff will be £7 giving you an income of £107 per week.</p>

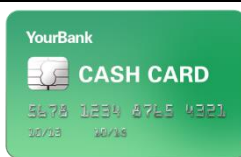
	<p>Other care and support</p> <p>You will not pay for other types of care and support, such as home care, if your income is less than the Minimum Income Guarantee.</p>
	<p>If your income is more than the Minimum Income Guarantee you will pay for your care and support.</p>
	<p>You will not pay for your care and support if your weekly charge is less than £3.</p>
	<p>Financial assessments are carried out,</p>
	<p>using the guidelines in the Care Act 2014 Statutory Guidance.</p>



Paying for care and support

If you have to pay for your care and support you can use:

- a cheque.



- a swipe card.



You can use **deferred payments** if you get care and support at a care home.



The best and easiest way to pay for your care and support is Direct Debit.



Deferred payments



If you move into a care home or a nursing care home, and you qualify for **deferred payments** you can pay the costs later on.



For more information go to the [Deferred payments](#) page.



Reviewing what you pay

We will carry out a **financial assessment** every year to check that you are paying the right money.



If your income or savings change, you should tell us as soon as possible.

Useful information








Click this link to download our leaflet about paying for care and support:

[Fairer contributions policy summary and FAQ](#)



Get in touch

	<p>If you have questions about the financial assessments, you can.</p>
	<p>Call 0800 358 0228</p>
	<p>or email ChargingTeam.adultsocialcare@southwark.gov.uk</p>
	<p>We use the income we collect to carry on providing services for people with support needs,</p>
	<p>so it is important that your payments are made on time.</p>
	<p>Call 020 7525 1111 for information about making payments</p>
	<p>Email collections@southwark.gov.uk .</p>

Appendix 4

**Minimum income Guarantee (MIG)
(Extract from Government Guidelines)**

People receiving local authority-arranged care and support other than in a care home need to retain a certain level of income to cover their living costs. Under the Care Act 2014, charges must not reduce people's income below a certain amount, but local authorities can allow people to keep more of their income if they wish.

This is a weekly amount and is known as the MIG.

For the next financial year (2023 to 2024), the rates of the MIG will increase in line with inflation as follows, where the adult concerned is:

- responsible for, and a member of, the same household as a child, the amount of £94.90 in respect of each child
- a single person and—
 - is aged 18 or older but less than 25, the amount of £82.15
 - is aged 25 or older but less than pension credit age, the amount of £103.65
 - has attained pension credit age, the amount of £214.35
 - is a lone parent aged 18 or over, the amount of £103.65
- is a member of a couple and—
 - one or both are aged 18 or over, the amount of £81.40
 - one or both have attained pension credit age, the amount of £163.65
- is a single person who is in receipt of, or the local authority considers would, if in receipt of income support, be in receipt of—
 - disability premium, the amount of the applicable premium is £45.75
 - enhanced disability premium, the amount of the applicable premium is £22.35
- is a member of a couple and one member of that couple is in receipt of, or the local authority considers would, if in receipt of income support, be in receipt of—
 - disability premium, the amount of the applicable premium is £32.60
 - enhanced disability premium, the amount of the applicable premium is £16.05
- is in receipt of, or the local authority considers would, if in receipt of income support be in receipt of, carer premium, the amount of the applicable premium is £49.05

Full Government Guidelines - [Social care - charging for care and support: local authority circular - LAC\(DHSC\)\(2023\)1 - GOV.UK \(www.gov.uk\)](#)

Health & Social Care Scrutiny Commission

MUNICIPAL YEAR 2023-24

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