



south ayrshire
health & social care
partnership

Social Care Charging Policy

Non-residential and residential care services 2025-26



Social Care Charging Policy Non-residential and Residential Care Services

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TABLE OF CONTENTS

1. Policy Statement	4
2. Legislation	4
3. Exemptions from Charging	5
4. What services we do not charge for.....	5
5. What services we do charge for?.....	6
6. Why is there a charge?	6
7. How are charges for non-residential social care services calculated?	6
8. How are contributions for non-residential social care services calculated?.....	6
9. How are the contributions to residential social care charges calculated?	11
10. Paying for services	14
11. Financial Hardship	14
12. Complaints.....	14
Appendix 1: Free Personal Care Services	15
Appendix 2: Non-residential allowances 2025-26	16
Appendix 3: Current non-residential charges 2025-26	17
Appendix 4: Residential allowances and charges 2025-26	18

1. Policy Statement

We want to help people live at home independently, safely, and for as long as possible. To help us to provide support to people with a range of needs, we may need to charge you for some of the social care and support you receive.

These charges might affect you if you are getting services from us now, or if you need them in the future. Charges apply whether services are provided direct by South Ayrshire Health and Social Care Partnership or purchased from an external provider or purchased through an individual service fund or direct payment.

The charges have been set in line with principles of Convention of Scottish Local Authorities (COSLA) guidance, best value framework, benchmarking against other local authorities and income generation.

The charging policy is reviewed annually and any revisions to charges and financial assessment rules are included in the annual budget setting process and are approved by South Ayrshire Council Cabinet.

Principles

We are committed to the following principles:

- we will not charge more than the cost of providing a service.
- people who use our services will be treated fairly.
- people who use our services will know how and why they are being charged for a service.
- charges are in line with national guidance and legislation.
- we will balance the need to ask people to pay towards the cost of their care with the effect this may have on their quality of life.

Aims

This policy aims to:

- help you to understand why you are contributing to the cost of your services.
- explain how we calculate your contribution and how we will let you know.
- explain which services have a charge that everyone pays.
- explain financial hardship process.
- explain our complaints policy.

2. Legislation

Residential Care Services for Adults

Residential care services provide 24-hour care and support in a homely setting. The care home must be registered with the Care Inspectorate and meet your assessed needs of either residential or nursing care or both. Care provision can be permanent, temporary, emergency or respite care.

It is a legal requirement that everyone who is permanently admitted to residential care is required to pay a contribution towards the cost of their care and accommodation. The legal basis for charging for residential care services is The National Assistance Act 1948 and the National Assistance (Assessment of Resources) Regulations 1992. The Scottish Government provide detailed [Charging for Residential Accommodation Guidance](#) on an annual basis this is the guidance adhered to when calculating residential care charging within South Ayrshire.

Under the Carers (Scotland) Act 2016, there is no longer a charge for residential respite where this service is accessed in line with eligibility criteria and accompanied by a Carers assessment. This complies with the legislation which seeks to ensure that Carers are offered the support which they require, and charges are waived where this is appropriate.

Non-Residential Care Services

Non-residential care services provide a range of services in the community to enable you to live as well and as independently as possible. These services are provided following an assessment of need and are identified to assist you to meet your identified outcomes. The legal basis for charging non-residential social care services is the Social Work (Scotland) Act 1968, (as amended) and [Community Care and Health \(Scotland\) Act 2002](#).

3. Exemptions from Charging

Who is exempt from paying for social care services?

- People who are terminally ill defined by Department for Work and Pensions “as a person who is likely to have less than 12 months to live”, this is evidenced through an SR1, DS1500 form or a Benefits Assessment for Special Rules (BASRiS) form.
- People who are subject to a Compulsion Orders under the Criminal Procedure (Scotland) Act 2003
- People subject to a Compulsory Treatment Orders introduced under the Mental Health (Care and Treatment) Scotland Act 2003
- Unpaid Carers who are eligible for support under the Carers (Scotland) Act 2016.
- Children under 19 years of age and in full time education.

4. What Services we do not Charge for?

- Criminal Justice Social Work Services
- Children’s care and support
- Information and Advice
- Needs Assessment
- Care Management
- Personal Care for all adults and children (See Appendix 1 for list)
- Reablement Home Care Services for 42 days on discharge from hospital
- Respite Care if required to give your carer a break from caring duties.
- Aids and Equipment

5. What services we do Charge for?

- Care at Home/ Community Support (if **not** personal care)
- Community Alarms/ Telecare
- Hot Meals Service
- Corporate Appointee Charge
- Respite Care (if **not** for Carer's Support)
- Blue Badges

6. Why is there a Charge?

Local Authorities don't have to but are allowed by law to charge adult users of care and support services provided or arranged under the Social Work (Scotland) Act 1968 and the Mental Health (Care and Treatment) (Scotland) Act.

Consideration is made of the funding available to provide care and support to meet the needs of the local population. Charging provides a contribution to service delivery; charges are set at a reasonable level and rarely will cover the full economic cost of the service provided. The charge will never exceed the full cost of the service.

7. How are charges for non-residential social care services calculated?

Charges are calculated based on benchmarking with other local authorities and reviewing the costs to the Health and Social Care Partnership to deliver the service.

The following services are subject to a flat rate charge; therefore you pay for the service regardless of your income:

- Administration of Blue Badge scheme <https://www.mygov.scot/apply-blue-badge>
- Meals at Home
- Community Alarm /Telecare
- Corporate Appointee Charge – administration of service users finances

The following services are subject to a financial assessment and based on your ability to pay:

- Care at Home/Community Support (if NOT personal care)

8. How are the contributions for non-residential social care services calculated?

The services you receive will always be based on your assessed needs. Any charges for these services will be based on your ability to pay. A financial assessment will be carried out if you receive a service that is chargeable. We will look at your income, capital and some of your expenses to find out how much you can pay.

Through Self-Directed Support Option 1 – Direct Payment and Option 2 – Individual Service Fund, you may choose a service that costs more than the one we would organise to meet your needs. In this case the amount of funding you will get will be no more than the cost of the service we would organise to meet your needs. When you organise your care through Option 1 and Option 2 you will need to pay any costs more than we would pay.

What happens during a financial assessment?

Your care manager will complete a Financial Assessment form with you and will forward the information to the Council's Social Care Support (SCS) Finance Team to complete the assessment and calculate your maximum weekly charge.

The SCS Finance Team will complete the financial assessment using the information you have provided, and where required by checking income details held by Department for Work and Pensions (DWP) and local authority systems. We may request supporting evidence from you if required.

If you require a benefits maximisation check you or your care manager can complete an online referral form using the link [Council's Information and Advice Hub](#).

Once the maximum weekly charge has been calculated, the SCS Finance team will then determine the actual charge for you depending on the level of services received; the charge will always be the lesser of the two amounts. You will receive a letter detailing your charge, see Section 10 on how to pay.

Financial Assessments following the annual [COSLA Social Care Charging Guidance](#).

Minimum Charging Threshold

Included in the COSLA annual guidance is the minimum charging threshold, this is updated each financial year in line with DWP benefit increases. The minimum charging threshold, (or minimum income threshold) is the weekly income which you need to meet daily living expenses. A person who has income below the charging threshold will not pay towards their social care support if they have been assessed as eligible. **Appendix 2 – Current Allowances 2025-26.**

Buffer

A buffer, endorsed by Scottish Government is applied to the minimum charging threshold, to recognise that not all of a person's income should be taken into account when calculating charges for people on low incomes or who may incur additional living costs due to their impairment to support frailty. The buffer is currently set at 25%. The minimum charging threshold is worked out by adding the buffer (25%) to the appropriate DWP rate(s) for people, as set out in **Appendix 2 Non-Residential Allowances 2025-26.**

Max Weekly Charge

We set a maximum weekly charge each year. No-one will pay above this maximum weekly charge regardless of the cost of the service or the outcome of the financial assessment. This included in the table of charges, see **Appendix 3 – Current non-residential service charges**.

Non-disclosure

If you fail to provide information required to complete a financial assessment or choose not to disclose information, then you will be assessed as being able to afford the maximum weekly charge or the actual cost of your care, whichever is the lesser amount.

Income

All income sources should be considered including: -

- All Benefits
- Income from Earnings
- Rental Income
- Occupational/Private Pensions
- Income from Capital
- Any Other Income

Income Disregards and allowable expenditure

Certain types of income and expenditure are disregarded and not taken into account when assessing your ability to make a contribution including: -

- Mobility component of the Disability Living Allowance/Personal Independence Payment or Disability Assistance
- War Disablement Pension
- Armed Forces Compensation Scheme
- Net Rent payable (less any Housing Benefit/Universal Credit Housing Costs)
- Council Tax (less any Council Tax Reduction) & Water and Sewerage Charges
- Interest and Insurance Payments made by owner-occupiers towards mortgages.
- Interest and insurance payments made towards an endowment mortgage.
- First £20 of earned income per week.
- Independent Living Fund Payments
- Partner's earnings
- Dependent Children benefits paid for, or on behalf of a dependent child.
- If you are in receipt of high rates of Disability Living Allowance care component, Adult Disability Payment enhanced component, Attendance Allowance or PIP enhanced daily living component, we will only take into account the middle rate of DLA or the standard rate of PIP, standard rate of Adult Disability Payment or lower rate of Attendance Allowance, provided you are not in receipt of overnight care.

Compensation Payments

Where compensation has been paid or held in Trust to address future care needs. We will request a breakdown of any compensation award and consider whether some elements of compensation payments should be included when assessing your ability to pay a charge. Any charges will be dependent on the settlement information that relates to future care needs, and where necessary informed by relevant legal input.

Capital & Tariff Income

Capital can be considered a source of income. However, there can be no upper capital limit at which people would be refused support, as the provision of social care support at home will always be based legally on need rather than the ability to pay.

Only available capital will be taken into account for non-residential charging purposes, this precludes taking into account the value of your home.

The approach taken in consideration of capital is the same as used by DWP for means testing income-based benefits. This disregards income received against capital held up to a level of £6,000 for people below state pension qualifying age, or £10,000 for people of state pension qualifying age or above. For any capital held above those levels, a weekly income is assumed, and this is added as income in the financial assessment, as per the rates set out in the table below.

	Disregard Capital Below	Weekly Tariff Income
Below state pension qualifying age	£6,000	£1 per £250
State pension qualifying age or above	£10,000	£1 per £500

Taper

If your financial assessment calculates a sufficient level of available income for a charge. A percentage taper is applied to the available income to determine a maximum contribution. The contribution will not exceed the cost of providing the care and support. Set out in **Appendix 2 Non-Residential Allowances 2025-26**.

Example of how a Maximum Weekly Charge is Calculated

Single person, 51 years old, with no capital, living in local authority housing, receiving maximum housing benefit and exempt from Council Tax. In receipt of 8 hours social care support consisting of 4 hours personal care and 4 hours non-personal care. Maximum charge is 25% of the residual income available £3.58 per week.

INCOME	Client
DLA CARE/PIP CARE/ADP CARE	£73.90
ESA OR UC	£110.40
TOTAL ASSESSABLE INCOME	£184.30
less Threshold	£170.00
RESIDUAL INCOME	£14.30
Maximum Charge	
<i>Under State Qualifying Age 25% of residual income</i>	£3.58

The table below shows the actual cost of 4 hours non-personal care, personal care is free of charge, total cost of service provided is £57.56 per week. The charge is the lesser amount of the maximum charge or cost of service provision, therefore £3.58 per week.

Details of Service Provision	Weekly Charge
4 Hours Non Personal Care @ £14.39 per hour	£57.56
4 Hours Personal Care	Free
Total Cost of Service Provision	£57.56
Total Charge <i>lesser amount of Max Charge an Cost of Service</i>	£3.58

Notional income and capital

If you dispose of capital in an effort to avoid charges this will be deliberate deprivation and notional capital will be calculated and applied to your financial assessment.

Annual Financial Reassessment

Annual financial re-assessment will be undertaken each year in line with DWP uprating of benefits and review of COSLA's annual guidance. New annual charge will reflect any new approved increases to charges.

Change in Financial Circumstances

Any changes in financial circumstances contact your care manager or email financesocial.work@south-ayrshire.gov.uk who will calculate an accurate and up to date financial assessment and calculate your charge accordingly.

Disability Related Expenditure

Disability Related Expenditure are extra costs that you may incur compared to non-disabled people to enable you to live as independently as possible. These extra costs may be recognised as an 'outgoing' when we do a financial assessment to calculate how much you can afford to pay towards your care.

Additional disability related expenditure may relate to: -

- Purchase, maintenance and repair of disability related equipment.
- Specialist dietary requirements
- Specialist clothing
- Help with cleaning or other domestic tasks e.g. gardening
- Extra laundry

- Additional bedding
- Additional heating costs

The Financial Assessment will capture any additional costs and these will be taken into account when calculating how much you can afford to pay towards the cost of your care. The additional costs will vary dependent on individual circumstances.

9. How are the contributions to residential social care charges calculated?

Financial Assessments

If you are assessed as needing residential care, a financial assessment will be undertaken to identify the contribution you are required to pay to the care home towards your care costs. This information will be requested and collected by the SCS Finance Team who will calculate your contribution to your care home.

If you are placed in a care home and the financial assessment has still to be completed by the SCS Finance Team, the care home may charge an interim client contribution until the full financial assessment has been carried out based on the information requested. The interim client contribution may well change depending on the outcome of the financial assessment and could result in backdated fees being owed to the care home. Any additional charges from the care home above the assessed client contribution will be required to be met by the resident/financial representative. On admission the care home should inform you of any additional charges above the National Care Home Contract weekly rate.

Benefits

When you have been placed in a care home, your benefits for Attendance Allowance and the care components of Disability Living Allowance and Personal Independence Payments must cease after being in hospital or a care home for four consecutive weeks. It is the responsibility of you or your financial representative to notify the Department for Work and Pensions as soon as possible of any changes in circumstances. Any overpayments will require to be paid back.

Income

In general, all income you receive will be taken into account. If an occupational pension is paid, you can opt to give 50% of the amount paid to your spouse if you are married or in a civil partnership if they live in the community. This must be declared on the financial assessment form.

Personal expenses allowance

You are entitled to a weekly personal expense allowance, from income. This amount is set annually by the Scottish Government. The personal expenses allowance is to enable you to have money to spend as you wish, for example on stationery, personal toiletries, small presents for friends and relatives and other minor items. See **Appendix 4 Residential allowances and charges for current allowances.**

Capital

Capital from all sources can be taken into account, including savings held in a bank, building society, post office or other savings account, stocks and shares, values of Personal Equity Plans (PEPs) and Individual Savings Accounts (ISAs). We will also consider the value of any property you own in assessing charges for residential services.

Disregards

The value of the property can be disregarded where:

- Your partner is continuing to reside in the property.
- A relative, over 60 years old, will continue to reside in the property.
- A relative, aged under 16 years, who is dependent on being maintained by you is continuing to reside in the property.
- A relative who resides in the property is incapacitated.
- In certain circumstances, discretion may be applied if a carer has given up their own home in order to care for you.

Capital Thresholds

Capital thresholds are set each year by the Scottish Government, there is both an upper and lower funding threshold. The upper threshold is the amount of assessable capital that you have, above which you are required to meet the full cost of your care. You would therefore be classed as a self-funder. **See Appendix 4 – Residential allowances and charges.**

If you have capital in excess of the upper funding threshold, there is an entitlement to a Free Personal/ Nursing Care payment to the residential or nursing care you receive. **See Appendix 4 –Residential allowances and charges.**

This amount is paid direct to the care home by South Ayrshire Council. You, or your financial representative, pay the balance due to the care home, based on their charging rates for self-funders.

The lower threshold is the amount of capital disregarded in your financial assessment. If your capital falls between the upper and lower thresholds you will have a tariff income applied. This is currently £1 for each band of £250 or part £250 above the lower threshold level.

12-week property disregard

If you do not have savings in excess of the upper funding threshold, but you do own a property, the value of this will be taken into account in the financial assessment. For up to the first 12 weeks following admission to a care home, the value of the property will be disregarded. This disregard must be requested in the financial assessment. This is called a 12-week property disregard (ends sooner if the property is sold within the 12-week property disregard period) and allows time for you to decide if you wish to remain in a care home setting. If you decide to stay this allows time to make arrangements for the sale of the property. Any additional charges from the care home above the assessed client contribution will be required to be met by the resident/financial

representative. On admission the care home should inform you of any additional charges above the National Care Home Contract weekly rate.

Charging order

After the disregard period, the value of the property will be taken into account in the financial assessment. If you or your financial representative makes the decision to sell the property and the property is not sold within the 12-week period, the Council can assist with interim funding of the care home fees up to the National Care Home Contract Rate by placing a charging order on the property. The Council will then recoup the costs of interim funding once the property is sold. The care home may also recoup any sums owed to them for the difference in the self-funding rate and National Care Home Contract Rate, you would need to discuss this with the care home direct. More detailed information regarding the use of a charging order can be provided by the SCS Finance Team.

Notional Income and capital

SCS Finance Team will seek legal advice if it appears that income or capital assets have been deliberately disposed of in anticipation of admission to a care home. This known as decided as deprivation of capital and if this is established, we will include the capital assets in the financial assessment - i.e. We will calculate your contribution to care home fees as if you still own the asset, this is termed as notional capital.

Annual Reassessments

Annual financial reassessment will be undertaken in line with the DWP uprating of benefits and the annual review of national guidance.

Change in financial circumstances

If you are a self-funder in receipt of free personal/nursing care and your capital is depleting, you are advised to contact SCS Finance Team when capital reaches £10,000 above the upper threshold which changes annually (**see Appendix 4 – Residential allowances and charges**). This enables a new financial assessment to be completed, in respect of additional funding potentially being required from the Council. Any other changes in financial circumstances - e.g. sale of property, capital receipts from gifts, including inheriting money from others - will be included.

Respite Charges

If you are cared for at home by family or friend, they are your carer. Your carer takes responsibility for your care. Respite is provided to give your carer a break from their caring duties. The care charge will be waived if respite is to give the carer a break, to a maximum of 4 weeks per year from the date of the carer's assessment. The weekly charge will be a flat rate charge based on DWP age- related Benefits, as noted in Appendix 4.

Emergency admission to a care home will be free for the first 4 weeks, this is an assessment period to understand your future care needs.

Where residential care is required and this is for your assessed care need, there will be a charge in line with guidance in Charging for Residential Accommodation Guidance.

10. Paying for services

Non-Residential

If you are in receipt of a chargeable service, you will receive a regular bill (currently 4-weekly). Details of how to pay will be noted on the invoice.

Blue Badge Scheme is paid directly with your application.

If you receive a direct payment, your personal contribution will be deducted from your 4 weekly direct payment you receive into your dedicated direct payment bank account. You must pay your contribution into your account to ensure you have the total available funds to meet the costs of your care.

Residential

If you are paying for respite care you will receive an invoice for your charge following your period of respite.

If you are residing in one of the Local Authority care homes, you will receive a 4-weekly bill based on your assessed contribution to your care home fees.

If you are residing in a private care home, commissioned by the local authority your contribution will be paid direct to the care home. The care home will provide you details on how to make this payment.

11. Financial Hardship – Non-Residential Care

In cases of financial hardship or in other exceptional circumstances consideration may be given to charges being waived or abated. This will be assessed on a case-by-case basis and approved by the relevant Head of Service. To request a waiver or abatement service users should contact their Care Manager in the first instance.

12. Complaints Process

If you wish to make a complaint in relation to the processes detailed in this policy, please follow South Ayrshire Council's complaint process, this can be found at [Complaints](#).

Appendix 1 – Free Personal Care Services

The following are classed as personal care and are not charged for: -

Personal hygiene – bathing, showering, hair washing, shaving, oral hygiene, nail care.

Continence management – toileting, catheter/stoma care, skin care, incontinence laundry, bed changing.

Food and diet – help with preparing food and help with any dietary needs.

Mobility problems – dealing with the effects of being immobile or substantially immobile.

Personal support – counselling, or other help, provided as part of a planned programme of care.

Behaviour management and psychological support - This applies where there is an identified risk, and support is needed to prevent or minimise physical or emotional harm to the person or to others.
to the person or to others.

Simple treatments – help with medication (including eye drops), applying creams and lotions, simple dressings, oxygen therapy.

Personal assistance – help with dressing, surgical appliances, prostheses, mechanical and manual aids. Help to get up and go to bed. Transfers including using a hoist.

Appendix 2 – Non-Residential Allowances 2025-26

Minimum Charging Thresholds 2025-26

For People below state qualifying age:

	Personal Allowance	Disability Premium	Buffer 25%	Minimum Charging Threshold
Single Person	£92.05	£43.20	£33.81	£170.00
Couple	£144.65	£61.65	£51.57	£258.00

Taper for 2025-26 is 25% of any available income over and above the weekly charging threshold can be used towards social care charges.

Minimum Charging Thresholds 2025-26

For People of state qualifying age or above:

	Pension Credit - Guarantee Credit	Buffer 25%	Minimum Charging Threshold
Single Person	£227.10	£56.78	£284.00
Couple	£346.60	£86.65	£434.00

Taper for 2025-26 is 50% of any available income over and above the weekly charging threshold can be used towards social care charges.

Appendix 3 – Non-Residential Charges 2025-26

Charge	25-26 Approved Charge	Per
Meals at Home	£5.64	Meal
Community Alarms	£5.10	Week
Community Support (Non Personal Care)	£14.39	Hour
Blue Badge	£20.00	Badge
Corporate Apointee Charge - <i>(admin fee Community based service users)</i>	£8.00	Week
Corporate Apointee Charge - <i>(admin fee care home service users)</i>	£3.00	Week
Max Weekly Charge	£102.00	Week

Appendix 4 – Residential allowances and charges

Allowances	2025-26	Per
Personal Allowance	£35.90	Per Week
Capital threshold Lower Thershold	£22,000	
Capital threshold Upper Thershold	£35,500	
Free Personal Care Residential	£254.60	Per Week
Free Personal Nursing Care	£369.15	Per Week

Respite Charges *	2025-26	Per
Respite Care - 18 to 24 years	£106.70	Per Week
Respite Care - 25 to Pension Age	£125.85	Per Week
Respite Care -Pension Age and over	£191.20	Per Week
*Where respite is for the individual' care and not to give the carer a break		

Residential Care	2025-26	Per
South Lodge Care Home	£815.13	Per Week
Hillcrest Care Home	£815.13	Per Week
*Local authority care home charges (annual uplift in line with NCHC residential increase)		