



Lancashire & Cumbria Consortium
of Local Medical Committees

QUICK GUIDE:

COUNCIL TAX SMI FORM GUIDANCE

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About us

The Consortium of Lancashire and Cumbria Local Medical Committees is the only body that has a statutory duty to represent GPs at a local level. Whilst recognised by statute and having statutory functions, unlike ICBs, LMCs are NOT themselves statutory bodies, they are independent. It is this unique status as independent representative bodies recognised by statute that allows them to be so effective in standing up for and supporting their GPs and practices. They are accountable to the GPs and those working in general practice they represent, leaving LMCs free to speak up on behalf of GPs, practices and their patients when others cannot.

The Consortium of LMCs comprises of five autonomous LMCs within Lancashire and Cumbria:

- Lancashire Coastal LMC
- Lancashire Pennine LMC
- Central Lancashire LMC
- Morecambe Bay LMC
- Cumbria LMC

As an umbrella organisation we provide representation and services to 227 practices, covering a patient population of approximately 2.15 million, across two ICBs – Lancashire & South Cumbria ICB and North East North Cumbria ICB. This enables a critical mass of support, specialisation, and expertise to be provided to the five LMCs, their GPs and Practices. This is of benefit in dealing with high level negotiations with NHS England Area Teams, ICBs and other statutory bodies. It is also vital in providing the necessary level of support to individual GPs and practices.

The LMC engages in ongoing discussions and negotiations with our local ICBs as well as the Area Team of NHSE on the development and interpretation of contractual issues and on major policies and strategies affecting General Practice. The LMC also actively supports individual GPs regarding their remuneration, helping deal with complaints, premises and partnership issues and any disputes between the GP and the Area Team or the ICB.

Section 1: SMI Council Tax Exemption Forms

The Severe Mental Impairment (SMI) Council Tax Discount/Exemption scheme is a Local Authority benefit scheme. GP practices cannot charge for completing SMI forms.

For council tax purposes “Severe Mental Impairment (SMI)” is defined in legislation, but importantly when completing the form, GPs are not determining eligibility. GPs are only certifying that the patient has a condition that results in severe mental impairment.

Therefore, as a GP/clinician you are not deciding if they qualify for the exemption. The council decides that, and they also need evidence of qualifying benefits.

Statutory definition (Local Government Finance Act 1992 regulations)

For the purposes of the Local Government Finance Act 1992 a person is Severely Mentally Impaired if he/she has a severe impairment of intelligence and social functioning (however caused) which appears to be permanent. Some examples of severe mental impairment include:

- Dementia (all types)
- Alzheimer’s disease
- Severe learning disability
- Severe mental illness such as schizophrenia
- Other organic brain disorders
- Other condition where intelligence and social functioning are permanently and severely impaired

It does not include milder conditions such as mild cognitive impairment or borderline forgetfulness. Likewise vascular dementia that is mild will very often not meet SMI threshold. The patient must also be in receipt of certain disability benefits, otherwise the council will refuse regardless of what box that is ticked when the GP signs the form.

The GPs/Clinicians role:

When completing your section you are not deciding benefit eligibility. You are only confirming medical diagnosis and that the impairment is permanent and severe enough to meet the statutory description (above).

If the clinician does not feel that the evidence in the medical records is sufficient to meet the criteria of “severe impairment of intelligence and social functioning” you should tick the box stating that the patient “is not severely mentally impaired”

As a rule of thumb and a quick mental filter, if the answer to any one of the following questions is yes:

- handling their own finances
- driving
- living independently without significant supervision
- functioning socially without major impairment

then they generally do not meet the threshold for being severely mentally impaired.

We have created a questionnaire for practices to use where the patient, or their representative, answers a set of questions to help you decide if the criteria is met before you sign the exemption form. This is an optional guide to help you gather more information to help with your assessment. If you opt to use this form, please remember that it will be a subjective set of answers so caution must be taken in its interpretation.

Lastly, remember that this is an official document that is being signed by yourself, so utmost care should be taken to ensure that the person is eligible for the discount on offer. Ethically, ask yourself, would I be comfortable describing this person in a GP letter or tribunal as having “severe impairment of intelligence and social functioning that is permanent”? You should only be guided by the objective medical evidence and not by any subjective factors outside of your control.

Practices are free to use and/or amend the enclosed practice policy, forms and letters contained within this guide.

Section 2: Sample Practice Policy

Practice Policy:

Severe Mental Impairment (SMI) Council Tax Exemption Forms

Purpose:

To provide a standardised internal approach for handling SMI Council Tax Exemption requests to support clinical consistency, reduce administrative burden and ensure a zero-tolerance approach to coercive or pressurising behaviour from relatives.

Background:

The Severe Mental Impairment (SMI) Council Tax Discount/Exemption scheme is a Local Authority benefit scheme. GP practices cannot charge for completing SMI forms.

Completion of the medical declaration section is solely dependent on clinical judgement that the qualifying criteria for SMI have genuinely been met.

Practice Position/Policy:

1. Forms must be completed free of charge.
2. If the GP believes the criteria are not met, the GP should not decline to sign the form. They must instead tick the box that states that the patient does not meet the criteria and then sign the form.
3. This clinical judgement is not open to challenge by relatives, carers or third parties.
4. Requests that involve pressure, coercion, intimidation or harassment towards clinical or admin team members fall under the Practice Zero Tolerance Policy and will be managed accordingly.
5. Patients may re-apply in future if condition materially worsens clinically.

Workflow for Practice Staff:

Step 1 – Initial Request Received

- Admin team accepts form request and logs request date.
- (Optional) A pre-assessment information form is issued and subsequently returned.
- Patient notes flagged for GP review.
- Inform the requester: “This will be reviewed by the GP. Completion depends on whether clinical criteria are met.”

Step 2 – GP Review

- GP reviews clinical history / records / diagnosis / functional impact.
- GP records simple statement in notes:
“SMI Council Tax Exemption reviewed – (meets criteria / does not meet criteria).”

Step 3 – Outcome Communication

- Form completed and returned to patient.

If criteria not met:

- Form completed and returned to patient.
- Admin sends standard letter to relative/patient (use the template you created above).
- Admin records communication sent.

If Relatives Challenge / Attempt to Pressure Staff:

Reception / Admin Script:

“The GP’s clinical decision regarding whether the medical criteria are met is final. We are not able to discuss or change clinical decisions. Continued attempts to pressure staff may result in communication restrictions being applied under our Zero Tolerance Policy.”

If behaviour persists → escalate to PM → PM issues formal zero tolerance warning letter.

Review Cycle:

This SOP should be reviewed annually or earlier if updated guidance is published.

GP clinical note - Suggested record text entry where criteria is not met:

“Review of medical records for the Severe mental Impairment Council Tax Exemption form – at present the patient does not meet SMI criteria for council tax exemption”

This is a short entry sufficient for clinical audit and complaint defence.

Section 3: Optional data collection form

PRE-ASSESSMENT INFORMATION FORM

Severe Mental Impairment (Council Tax Exemption) – Clinical Triage Questionnaire

Before the GP can consider completing the Severe Mental Impairment certification section for Council Tax purposes, we require the following information.

This form should be completed by the person applying, or the next of kin/main carer if the patient lacks capacity to complete themselves.

Completing this form does **not** guarantee that the GP will be able to certify Severe Mental Impairment. The GP is required to apply a strict legal definition and clinical judgement.

Patient Name:	
DOB:	
Address:	
Contact Telephone:	
Name of person completing form (if not patient):	
Relationship to patient (if applicable):	

A. Diagnosis

1. What is the primary medical diagnosis affecting mental capacity?

2. Who made this diagnosis?
(GP / Memory Clinic / Psychiatrist / Geriatrician / Other)
3. Approximate date of diagnosis:
4. Is the condition considered permanent?
(Yes / No / Unsure)

B. Functional Impact

Please answer the following to the best of your knowledge:

Question

- Does the patient require supervision for daily living tasks (washing, dressing, eating, medication)?
 - **Yes**
 - **No**
 - **Unsure**

- Is the patient able to manage their own finances and paperwork independently?
 - **Yes**
 - **No**
 - **Unsure**

- Does the patient leave the house independently without risk?
 - **Yes**
 - **No**
 - **Unsure**

- Is the patient currently driving / able to drive safely?
 - **Yes**
 - **No**
 - **Unsure**

- Does the patient have significant impairment of judgement / reasoning?
 - **Yes**
 - **No**
 - **Unsure**

- Does the patient require frequent guidance or support due to cognitive impairment?
 - **Yes**
 - **No**
 - **Unsure**

- Is there severe impairment in social functioning (e.g. communication, appropriate behaviour, safety awareness)?
 - **Yes**
 - **No**
 - **Unsure**

Any brief extra comments (optional):

C. Benefit Evidence (this is mandatory for Council)

Which qualifying benefits are currently being received?

(you may tick more than one)

- ☐ Attendance Allowance
- ☐ Disability Living Allowance (middle or higher rate care component)
- ☐ Personal Independence Payment (daily living component)
- ☐ Armed Forces Independence Payment
- ☐ Other qualifying benefit (please state): _____
- ☐ No qualifying benefit (please be aware council may decline automatically)

D. Additional Information

Please provide any further details you feel are relevant:

Declaration

I confirm this information is accurate to the best of my knowledge.

Name:

Signature:

Date:

Next Steps

Once this form is returned, the GP will review the information alongside the medical record to determine whether the statutory definition of **Severe Mental Impairment** is clinically met.

If the GP is unable to certify based on clinical judgement, you will be informed in writing.

Section 4: Letter Template

Template Letter for patients not meeting threshold or in case of any complaints about decision

Dear [Name],

Thank you for your recent enquiry regarding the Severe Mental Impairment Council Tax Exemption form.

Following a full clinical review of [Patient Name], the GP has assessed that the medical criteria for Severe Mental Impairment required under the Council Tax Exemption scheme are not met at this time.

The Council Tax Exemption scheme has very specific threshold criteria that must be satisfied before a clinician is able to complete the declaration. As clinicians, we have a professional responsibility to only confirm eligibility where those criteria are clearly met, and we cannot sign forms where this is not clinically appropriate.

We appreciate that this may be disappointing news; however, this decision is based on clinical judgement and cannot be influenced by requests from family members or relatives.

(Optional Text) We would politely request that all parties refrain from applying pressure to any member of the practice team regarding this matter. Any further contact about this issue will not alter the clinical decision already made.

Should the patient's clinical condition change significantly in the future, this can be reviewed again at that stage.

Yours sincerely,
[Practice Name]

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