



**Community Care Services
Financial Assistance towards Care Home Fees
and Hospital Discharge**

PART A

Community care services are care services that are arranged or provided by the local authority social services department, mainly to adults who have care needs. Community care is a complex area and this paper provides a broad outline of the services.

What services are available?

There is a wide range of community care services that you may be entitled to:

- A place in a care home
- Home care services
- Home help
- Adaptations to the home
- Meals
- Recreational and occupational activities

Care Homes

If you need long-term care and you cannot manage in your own home anymore, one option may be moving into a care home.

The Age UK website has a wide range of guides and fact sheets which can help you to choose the right care home. The website also has information about paying for residential care and any help that may be available.

www.ageuk.org.uk or you can call the Age UK advice-line on 0800 169 6565.

Home Care Services

Home care services cover help with personal tasks, such as bathing, washing, getting up and going to bed, shopping and managing finances. Providing home care involves someone coming to your home at agreed times, which could be two or three times a day or, where necessary, 24 hour care.

Home Help

Home helps provide assistance with general domestic tasks including cleaning and cooking.

Adaptations to the home

Adaptations can be minor or major depending on your need, and may be particularly important in allowing you to remain at home. Major adaptations can include the installation of a downstairs toilet, a fully adapted bathroom, or a stair-lift. Minor adaptations include handrails in the bathroom.

Meals

This may involve the daily delivery of a meal or in some areas the delivery of a weekly or monthly supply of frozen food. It can also mean the provision of meals at a day centre or a lunch club.

Recreational and Occupational activities

The local authority social services department can provide a range of recreational, occupational, educational and cultural activities, for example at a day centre. The social services department may also provide transport to enable you to make use of these facilities.

How to get a community care service

You will need to have your needs assessed by the local authority social services department before they can provide a service for you. The assessment is called a community care assessment and must be carried out for anyone who appears to need a community care service because, for example, they are elderly, disabled or suffering from a physical or mental illness. If you require a community care service you can contact the social services department of the local authority yourself, or your family, friend or carer can ask for an assessment on your behalf.

How the assessment is carried out

An assessment will be carried out by someone and on behalf of the social services department. More than one person may be involved in carrying out the assessment including a social worker, occupational therapist and physiotherapist. The assessment may involve filling in a form, this will vary from area to area.

The assessment should take into account of:

- Your wishes
- Whether you have any particular physical difficulties; for example walking difficulties
- Whether you have any particular health or housing needs
- What sources of help you have access to, such as family, friends or carers
- Any needs of the people who are providing you with care

What happens after the assessment

Once the assessment has been completed the local authority has to decide if you are entitled to services to meet your needs. This will be based on the level of your need not how much money you have.

If the local authority says that you are not entitled to community care services, you should get advice in the first instance from the Citizens Advice Bureau.

If the local authority is going to provide services, this must be set out in a care plan, and you can request for this care plan in writing should you wish.

Paying for community care services

The rules about which community care services must be paid for and how much can be charged is quite complex. The local authority social services department can

charge for the provision of some community care services, some local authorities charge for all community care services.

Direct Payments

Direct payments are payments of money by the local authority social services department to people to arrange their own community care services, instead of the local authority arranging the services on their behalf. If you are entitled to get community care services your local authority social services department must give you the option of receiving direct payments, providing you are able to manage a direct payment.

Regulation of Care Services

In England, the Care Quality Commission inspects care homes and home care services; inspections are unannounced and happen on a regular basis.

In Wales, the care and Social Services Inspectorate Wales regularly inspects care homes and home care services.

In Scotland all care homes and agencies providing support services can be inspected once in every 12 months by the Care Inspectorate.

Complaints

If you are not satisfied with the standard of the community care services offered by your local authority you can make a complaint using their complaints procedure.

NHS Continuing Healthcare

This is a package of health and social care funded solely by the NHS when your need for care is primarily due to your need for healthcare. Your needs may be such that you demonstrate a “primary health need” and require the quantity and/or quality of care to manage your needs.

NHS-Funded Nursing Care

This is the financial contribution paid by the local Clinical Commissioning Group (CCG) towards the cost of meeting your nursing care needs if you live in a care home. It is paid directly to the care home.

Receiving Care in Care Homes

The local authority has a duty to provide or arrange permanent care in a home for you if you have been assessed as requiring this care:

- If you cannot pay the full cost of the care home because the fees are higher than your income, and your capital is below the upper limit of £23,250, for England and Wales
- Where your income is high enough to pay for care in full and/or your capital is above the upper limit but you are not able to make the arrangements yourself, and there is no one who is willing and able to do this on your behalf.

Self-funding

If you have more than £23,250 you may decide to make your own arrangements with a care home. If you subsequently become eligible for financial support because, for example, your capital has reduced as fees for the care have been paid, you should again approach your local authority social services department for help. Even while you are “self-funding” the NHS is responsible for meeting the cost of any care you require from a Registered Nurse. You should be assessed to establish the level of your nursing need and the NHS will make a payment directly to the home, which should then be taken into account in the calculation of your fees.

Adults who fund their own residential care have access to an independent complaints review service provided by the Local Government Ombudsman.

A comprehensive guide to Care Homes is available from Age UK together with a factsheet about paying for residential care which covers the means test, savings and capital and state benefits.

PART B

Financial Assistance by a Charity

In the even that the fees in the care home increase to above the assessed level, a charity may be able to consider assistance to a Third Party.

Each case would be considered on its own merits and a Third Party (on behalf of the applicant) would be required to complete an application form detailing personal and financial details with supporting documentation.

Although every case would be considered on its own merits a charity would be looking at the following guidelines:

- a. Applicants should be in receipt of the maximum Pension Credit and Local Authority funding available.
- b. A charity cannot sign a Third Party Agreement since the use of charitable monies requires regular reviews and approval. The Third Party Agreement is usually signed by a family member or a friend with either an Enduring Power of Attorney or a Lasting Power of Attorney. A copy of the Local Authority's Contract and Third Party Agreement should be forwarded to the charity as part of the application.
- c. When an applicant for charitable assistance has a spouse/partner "at home" the resources of both partners will be taken into account by the Charity when considering a case, in order to assess the level of the spouse/partner's capital savings and income which might be available towards total Third Party contribution.
- d. It should be recognised that due to limited resources and reliance on voluntary donations, benevolence charities' guidelines are usually lower than the state's. A charity will require next of kin, Enduring Power of Attorney or Lasting Power of Attorney contributions where there are savings above £23,250 or when the shortfall is exceptionally high. A shortfall of £100 per week is often considered a maximum weekly amount when considering help towards meeting this shortfall.
- e. In the cases where the applicant has family members, who have independent incomes and are not themselves in receipt of means tested benefits, a charity would expect some contribution from them towards the applicant's fees, at a level which would be negotiated/discussed with the charity.
- f. The fees must be reasonable. It should be noted that help towards excessive fees is unlikely unless there are strong mitigating circumstances.
- g. Where there is a considerable third part contribution to be considered a charity may seek further assistance from another relevant charity. Income from charities towards the third party contribution is fully disregarded by the Local Authority.

- h. Applicants should be aware that a case may take some time to set up and they should make provision to cover part of the shortfall for several months.
- i. Grants are generally reviewed regularly and those undertaking responsibility for a beneficiary's affairs must keep the charity informed of any changes in circumstance, both financial and health.

Future Increase in Fees – Charitable Help

Whilst future increases in fees may be met by the periodic uprating of statutory benefits there is no undertaking that a charity can meet any increase in the shortfall between fees and income. In cases where charitable help is already being provided the charity should be informed as soon as details of a future increase (or any other changes in financial circumstances) is known, so that consideration can be given on whether any increase in charitable help can be provided.

PART C

Hospital Discharge Arrangements

For many people going into a hospital can be a difficult time both for the person and for their family. It is important to know what should happen to ensure that the right support is provided when you are ready to leave.

Whether it is a planned or emergency admission, the quality of care and support that you should receive is provided in the following guides and fact sheets which are available from Age UK:

Age UK Going into hospital information guide

Age UK Hospital discharge arrangements factsheet

Useful telephone numbers

Age UK Tel: 0800 169 6565 www.ageuk.org.uk

Counsel and Care Tel: 0845 300 7585 (Monday to Friday 10:00 hrs to
16:00 hrs) www.counselandcare.org.uk