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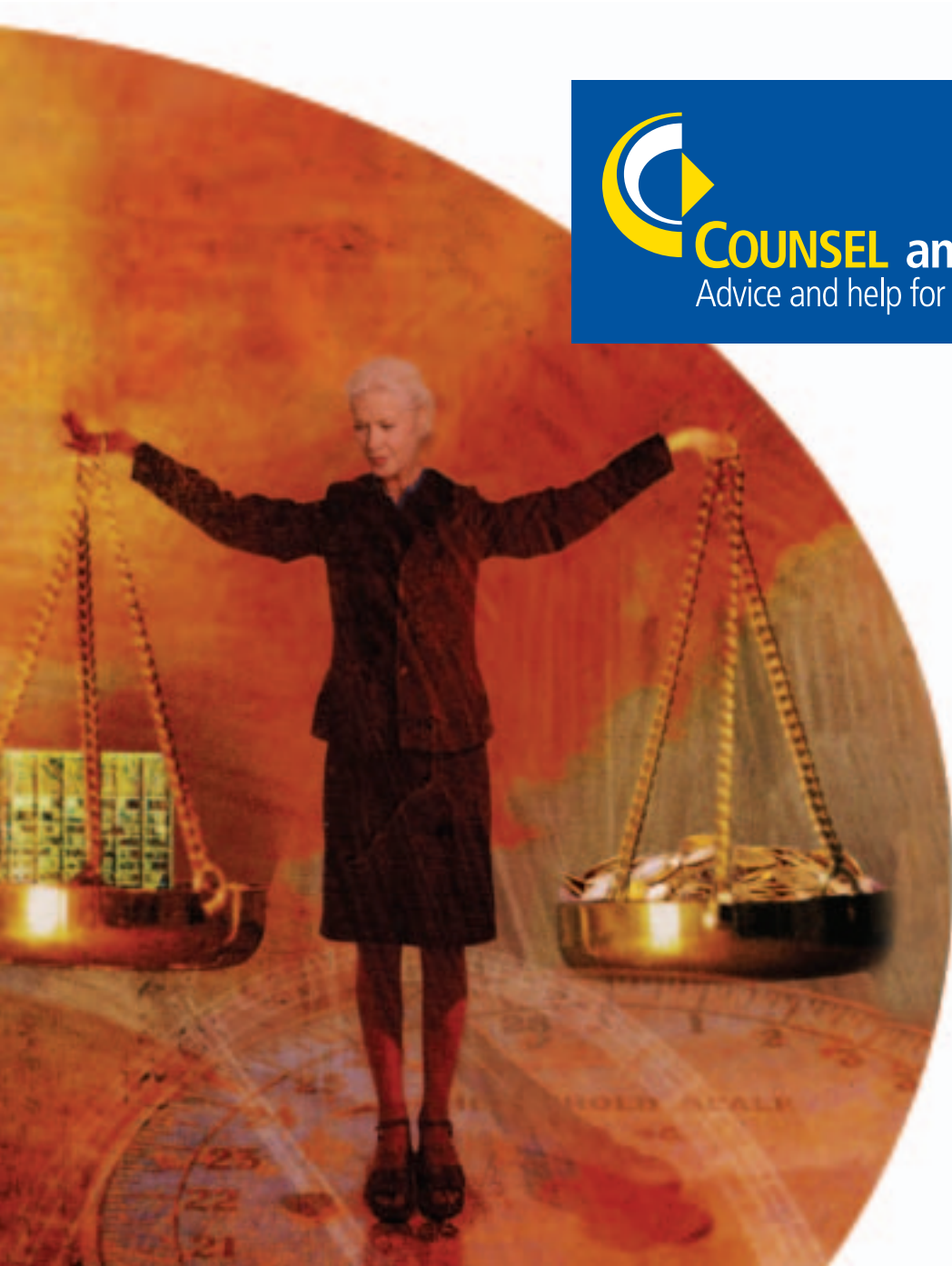
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The Complete
**CARE HOME
GUIDE**

**Including: details on how you are
assessed for the amount you will
have to pay for care in a care home**





Counsel and Care, in producing this guide (and its shorter companion, the **Brief Care Home Guide**) are building upon 50 years of expert knowledge and skill in helping older people to make those decisions about their lives that are best for them as individuals. The guide has met the challenge of cutting through extremely complex legislation and bureaucracy, daunting enough to the professional worker but surely overwhelming to many older and disabled people at a vulnerable time of life.

The processes that need to be gone through in choosing the right care home, obtaining assessments of need, working through the jungle of funding a place in a care home, are all covered in admirably clear and jargon free language, with an easy to follow step-by-step approach. The guide recognises that people's needs and financial circumstances vary enormously, and the information provided addresses these different circumstances. For example, it is very clear that people who pay their own costs of care without any funding from public sources also have clear rights to assessments of need, and meaningful contracts with care providers. Too often, the rights of "self-funders" are ignored, or given low priority in any queue for services to which they are fully entitled.

Life in the care home is well covered, and very welcome emphasis is placed on care which is provided in ways which maintain the dignity and autonomy of the resident, and which ensure genuine quality of life, rather than "tick box" adherence to standards. It is clear that the information the guide provides is indeed grounded in government standards and regulations, but its real value lies in the way these are interpreted in everyday language and give full recognition and emphasis to the aspirations and rights of residents.

The guide, with its built-in capacity to up-date the information to cover legal and administrative changes, offers a really valuable resource to all people planning their later years before some crisis makes choosing difficult. It also will be of great help to families, carers and professionals, all of whom are key players in the complex decision making processes of receiving or providing care.



Kina, Lady Avebury





The Complete Care Home Guide

For older people and other adults

section one

The Purpose of the Guide

- Who should read this guide?6
- How to use this guide7

section two

Making a Decision about Care

- Who can help me decide what is best for me?.....8
- What is a Needs Assessment?.....8
- What alternatives are there to going into a care home?10
- What if I am in hospital?12
- What services do I have a right to?12

section three

Choosing a Care Home

- What rights do I have to choose a care home?14
- What if the care home I choose is too expensive for the council? .16
- What if the care home I choose does not have a place available? .18
- What if I am in hospital?19
- What if I want to move to a different area?21
- Will there be a contract for my stay in a care home?.....22

section four

Paying for a Care Home

- Part A: Who pays for my care home fees?.....24
- Who does and doesn't have to pay for the cost of living in a care home?25
- How is my contribution to the fees decided?27

How is my charge worked out? ..28	
Is any of my care home fee paid for by the NHS?	28
What if I have savings?	30
What if I own my home?	30
What if I give away any of my capital or savings?	32
What if I need help with organising the payment of my fees?	32
What if I need to go into hospital while I am living in the home?	35
What about temporary stays and short breaks?	35
Part B: What do I pay if I am a supported client or a self-funder? ..37	
Supported Clients	37
What income is taken into account?	37
Can I claim any benefits towards the cost of the home? ..	38
What if I have savings?	39
Does my husband or wife have to pay towards my fees? ...	40
What money will I have left to spend?	41
How do I pay my fees?	42
Self-Funding Clients	43
Will the NHS contribute to my care home fees?	44
Can I claim any benefits when I am living in a care home?	44
What if my savings run down below the current limit?	44
What if I own my home?	45
What if I have no eligible savings or other assets, but a large weekly income?	46
How can I best pay my fees if I am paying them myself?	47

section five

Living in a Care Home

Your independence	48
Your home	49
Your care	50
Your room	52
Your rights as a citizen	53
At the end of life	55

section six

What if I Have a Problem?

Informal complaints	57
Formal complaints	58
Complaints about the council's Social Services Department	58
The Monitoring Officer	60
The Local Government Ombudsman	60
Health Service complaints	60
The NHS complaints procedure ..	60
Complaining about care in a care home	62
Complaints about NHS continuing care	63
Beyond complaints procedures ..	63

section seven

Addresses and Further Help ..64



The Purpose of the Guide

Who should read this guide?

We intend this guide to be of use to a wide range of people, including friends, relatives and professionals advising someone who needs help with their care.

In particular, this guide is addressed to people who are considering care in a care home – either for themselves, or for someone they advise. A care home can be either a residential care home or a nursing care home.

It aims to answer the most commonly asked questions about choosing a care home, paying for a care home and living in a care home.

It sets out the procedures you should expect and the service that should be available to you. If you find that you are not being offered your rights as they are explained in the following chapters, you can use the information given here to support your argument.

The booklet is mainly written for people living in, or thinking of moving to, England and Wales. It provides only basic information on the main differences in the care home system in Scotland and excludes Northern Ireland. People living in, or considering moving to, Scotland and Northern Ireland will find it useful to contact Age Concern Scotland or Northern Ireland for more information – contact details are at the end of this guide.

How to use this guide

Moving away from the familiar surroundings of your own home into a care home is a big step so it's important that you give it a lot of thought. There are also financial implications, as living in a care home can be costly. Although some people are able to pay their own fees, many need help to meet the cost of their care.

Many of the figures given in the following chapters increase each year. If you are reading this guide after March 2006, check with Counsel and Care to find out if a new version is available with updated financial information. You can find Counsel and Care's address at the end of this guide, or if you have access to the internet, you should be able to download the latest version of the guide or the latest figures from www.counselandcare.org.uk/guides. Your council will also have details of the latest figures.

Most of the information in the booklet applies to all readers. Where the information only applies to some readers, it is presented in a coloured box.

Information that only applies to people who receive help from the council to arrange and pay for their care is in a yellow box like this.

Information that only applies to people who are mainly or wholly paying for their care themselves is in a blue box like this.



Making a Decision about Care

Who can help me to decide what is best for me?

If you think you need help with your everyday living, you can ask your council to assess your care needs. You need to contact the Social Services Department of your local council. You will find their details in your local telephone directory, council offices, library or GP's surgery.

A social worker or care manager can come to see you at home or in hospital to carry out a Needs Assessment. You are entitled to an assessment no matter how much money you have and whether or not you can afford to pay for any services. If you have someone who looks after you, they can ask Social Services for a Carer's Assessment for themselves.

What is a Needs Assessment?

The Needs Assessment is the first stage of getting the help and support you may need with your care. A Needs Assessment must take place before any Financial Assessment is made of your ability to pay for your care. It is essential to have a Needs Assessment if you think you may need financial support from the council; and advisable even if you are paying for all or part of your care yourself (see page 43).

The purpose of the assessment is to look at your needs, what support you already have in place, and what services can be provided in order to help you live as independent and full a life as possible.



Having a Needs Assessment does not necessarily mean that you will move to a care home. Unless your needs are very high, you should be offered alternatives, such as increased support in your own home.

However, if your needs are assessed as being below the level suitable for care home support, you will be unlikely to find a place in a care home, unless you are able to pay the full costs yourself.

Generally, the council should make an appointment to visit you. If you prefer, you can visit the council's offices. Your family or friends, and your carer if you have one, may want to be involved in your decision. They can only be involved with your permission.

During the assessment the social worker or care manager will look with you at what you can and cannot do, your health and disabilities, your current living and care arrangements, your welfare and safety.

To help with the assessment, the council may contact other people involved in your care such as a care worker, district nurse, GP or medical specialist. You should be fully involved and able to state your preferences and choices, including any religious, spiritual or cultural issues that are important to you.

If you think you need to go into a care home, you should have what is called a "comprehensive assessment". This should include an assessment of your psychological and social needs, which might include the need to be near family and friends. You should also be assessed for any religious and cultural needs you may have.



You should only have to go through the assessment process once, because the main professionals involved in your care must collaborate on your assessment. This is known as the "Single Assessment Process" (but does not apply in Scotland).

If, following your Needs Assessment and Financial Assessment, it is decided that the council will be paying for and/or arranging your care, your assessment will result in a Care Plan, which you will be asked to sign if you are in agreement with it (see page 13 for your rights).

If, following your Needs Assessment and Financial Assessment, it is decided that you will be paying for your own care, you only receive a Care Plan if the council is either arranging or providing services for you. If it is not, you should be given a copy of your Needs Assessment.

All staff who may visit you from the council and other appropriate organisations carry identification with them, so please check this before allowing anyone into your home.

What alternatives are there to going into a care home?

Even if you are assessed as needing care in a care home, you may be able to find a way to stay at home, if that is your preference. There is a range of care and support that can be offered to help you to remain in your own home. You can discuss any of the types of help listed below with your council as part of your Needs Assessment. Services to help you remain independent in your own home include:

- Adaptations such as ramps or grab rails
- Equipment to help you to move around your home or manage in the kitchen or bathroom
- Day care in a day centre or day hospital



- Help with personal care, for example bathing and dressing
- Help with shopping or housework
- Help with transport
- Delivered meals
- Nursing and other health care
- Support for carers who look after you.

As well as services delivered to your home, you may want to think about other housing alternatives. Some examples are:

- Sheltered housing
- Very Sheltered or Extra Care housing
- Housing specially designed or adapted for older people or those with disabilities
- Adult Placements (for example, a person offers you set hours of care per week in exchange for basic accommodation).

It is a good idea to investigate these alternatives at the earliest opportunity, as there are waiting lists for specialised housing in some areas. You can ask your social worker about these, or the Elderly Accommodation Counsel (details at the end of this guide) can give a comprehensive listing of the older people's housing in any area in the UK, and have factsheets detailing what you can expect from the various kinds of housing.

You may also find useful the **Directory of Housing Advice and Information Services for Older People**, which can be obtained free of charge from Help the Aged (details at the end of this guide). The Directory lists all the specialist advice services available to support older people with housing queries in the UK.



What if I am in hospital?

Following hospital treatment, before discharge you may have important decisions to make concerning your care. Sometimes a hospital stay can be a very difficult time, particularly following surgery; and it might be tempting to see a care home as a safe option compared with returning to your own home. But if there is uncertainty about how your care needs will change as you recover, it is a good idea to delay a permanent move to a care home. It may be that you will be able to live with support in your own home after a period of recuperation.

To help you decide what to do, the NHS and your local council can arrange for you to enter a care home or similar setting for a brief while for rehabilitation and to help regain your independence.

If, after six weeks or so, you feel able to return home, the council will arrange that for you. This type of help is called "intermediate care" and it is provided free of charge to all in England and Wales for up to six weeks. You should be offered the option of intermediate care by the council if there is any doubt about your need to move to a care home permanently.

What services do I have a right to?

After the Needs Assessment, and the Financial Assessment that follows it (see page 27), the council must decide whether or not it will provide or arrange services for you. The amount of help available varies between different councils, but each council must publish information about their eligibility criteria, drawing on government guidance which is called "**Fair Access to Care Services**".



If you are paying for and arranging care yourself, the council should give you a copy of your Needs Assessment.

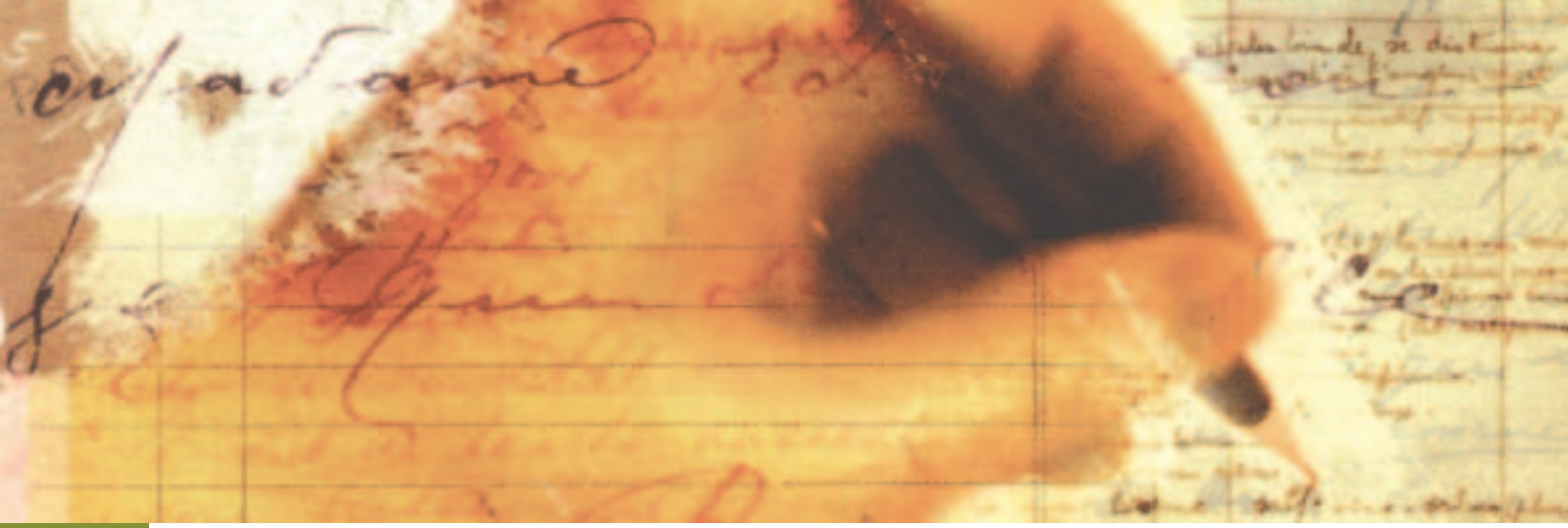
If the council are paying for or arranging your care, they should give you a copy of your Care Plan, which sets out the results of the Needs Assessment and any services to be provided. It should include the reasons for providing services to you, who is providing them, their contact details and a review date.

The council should be able to provide your Care Plan in large print, on tape or computer disk, or in different languages if that would be more helpful to you.

The Care Plan should be agreed and signed by you and a record made of the date. You are entitled to withhold your signature until you are satisfied it is a fair record of your care needs.

If the council decide that you need care in a care home, and you agree with this, they must arrange it for you. Even if you have enough money to pay for care in a care home, the council must still arrange it for you if you are not able to do so yourself and there is no-one willing to make the arrangements on your behalf.

The remainder of this guide gives information and advice on what happens when you have decided that your needs can best be met by going into a care home.



Choosing a Care Home

What rights do I have to choose a care home?

After it has been decided you should move into a care home, you need to begin the process of finding the right care home for you.

It is always a good idea for you, or someone acting on your behalf, to visit some care homes to see whether you think you will be comfortable living there.

If you are not able to pay for the whole cost of the care home fees yourself, the council will tell you the weekly amount that they will normally pay for your assessed needs. They should also give you information on care homes in their area which will meet your assessed care needs. It is important to ask which of these care homes have a vacancy at the cost the council will normally pay for someone with your assessed needs.

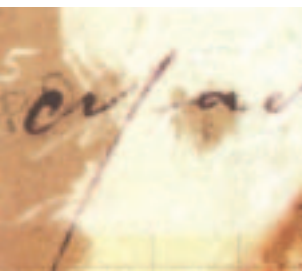
The Elderly Accommodation Counsel has lists of care homes by local area for the whole of the UK.

The Commission for Social Care Inspection (CSCI) regulates care homes, ensuring that they maintain specified national standards. They keep copies of the latest inspection reports for all care homes in England. For lists of care homes and inspection reports in Wales, contact the Care Standards Inspectorate for Wales. Reports on care homes in Scotland can be obtained from the regional offices of the Scottish Commission for Regulation of Care. It can be helpful to obtain a copy of the latest reports for the homes you are considering. Contact details for all the above are listed at the end of this guide.

When visiting a home, you may not have a lot of time to decide if it is suitable, so it can be helpful to prepare the questions you want to ask before you get there. Section Five of this guide will help you to decide what you are looking for in a care home. You can also obtain a factsheet on "What to Look for in a Care Home" from Counsel and Care and other advice organisations listed at the end of this guide.

If you are able to pay the fees yourself, you can choose any home within your budget, but the home will only accept you if they are able to care for someone with your level of needs.

If your money is likely to run down, make sure the care home placement is based on the council's assessment of your needs (see page 43).



If the council is contributing towards the cost of your home, you still have the right to choose any home you like in England and Wales, as long as the council agrees it meets four key points:

- ***It is suitable for your care needs.*** *If the council considers a home is unsuitable, they should tell you why and ask you to choose another.*
- ***There is a place available.*** *If a place is not available, the council may be able to provide extra help in your own home, or make a temporary arrangement in another home while you wait for a vacancy.*
- ***The council and the owner of the home can agree a contract to ensure that you are properly cared for.***
- ***The cost is not more than the council will normally pay for someone with your assessed needs (but see also next section, "What if the care home I choose is too expensive for the council?").***

The council should help you to find a home which meets your assessed needs and where you do not need a supplementary (top-up) payment from a third party, as explained in the following section.

What if the care home I choose is too expensive for the council?

If there are no other care home places in the local area at the price the council would normally pay for someone with your assessed needs, they should be prepared to increase the amount they will pay for your care. You, or a relative, should not be asked for a top-up fee.

In some cases, the care home you choose will be more expensive than the council will normally pay for your assessed needs, and they will be able to suggest an alternative place at the level they normally pay. If you still want to go to the home you have chosen, you have two

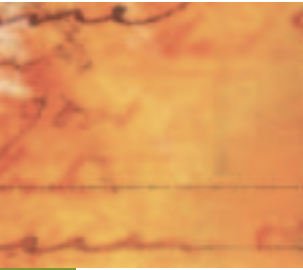


options. You will either have to make a case to the council for why the care home that charges the council's rate will not meet your specific needs as stated in your care plan. Or, alternatively, you can turn to a third party, such as a family member or friend to make up the difference. This is called a third party top-up. Even if you have some savings, you should not be asked to make up the difference yourself if you are financially supported by the council, as the contribution you are already making is based on a full and proper assessment of what you can afford to pay.

Your third party should sign an agreement with the council to meet part of the home's fees. They should not make a contract with the care home owner. The top-up is then paid directly to the council who will add it to their own contribution when paying the home's fees. In most circumstances, it would not be advisable for the third party to

pay their contribution to the fees directly to the home.

The council are likely to want to satisfy themselves that the third party is not only willing, but also able, to continue with the top-up. If, however, there comes a point when the third party can no longer afford the top-up, you can ask the council if they will make up the shortfall. They may ask to re-assess your needs. You should be aware that if there is a less expensive home available that meets your needs, the council may have to ask you to move there.



What if the care home I choose does not have a place available?

If the council are helping you to pay for your care, they may suggest that you go into a different care home while you are waiting for a place in your first choice or may arrange for other services in your own home to make sure that you are cared for while waiting for a place. Either way the council must make sure that any temporary care arrangements can meet the care needs that have been identified in your Needs Assessment.

If you are paying partly or wholly for your care home place, you can arrange a temporary placement in another home while you wait for a place to become available in the home of your choice. If you are not able to arrange this yourself, and have no-one else to help you, the council should make the arrangements on your behalf.



Whether you are paying your own fees or need support from the council, you should be able to choose a temporary care home that meets your psychological and social, as well as your physical and health care needs. If you are concerned that you are not being given a choice, refer to Section Six, "What if I Have a Problem?", or contact one of the advice agencies listed at the end of this guide.

What if I am in hospital?

Once your treatment is completed, you will not want to stay in the hospital indefinitely – and you cannot realistically expect to. The hospital will be looking for you to move on as soon as you can.

If your care needs have increased while you are in hospital, you should remember that moving to a care home may be only one of a number of options. You may be able to arrange to move home with extra support (for example, through a Home from Hospital scheme) or into intermediate care (see page 25). A small number of people may be eligible to receive NHS continuing health care (see page 26) in their own home.



If you do wish to go directly into a care home from hospital, and your fees will be paid by the council, you still have the right to choose which care home you go to. In England and Wales, the council should not delay arranging services more than three days after it has been decided with you that you are ready to leave hospital. If a place in the care home that you choose is not available, they will make arrangements for you to go into another care home while waiting for it to become free. You should

be involved in the decision about which other care home you go to and it must be a home where your assessed needs can be properly met (see also page 35, "What about temporary stays and short breaks?"). The council must not put you under pressure to go into a home that does not meet your needs.

Contact Counsel and Care or one of the other advice organisations given at the end of this guide if you need support in choosing the right care home for you after you leave hospital.

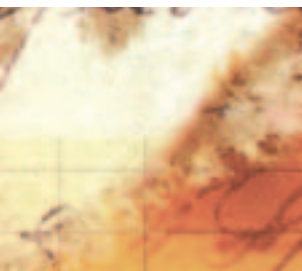


If you wish to move to a care home from hospital and are paying your own fees, you should not be put under pressure to move before you have proper arrangements in place. You are well advised to obtain a Needs Assessment from the council before you choose a care home, as explained on page 43.

If your assessed needs are high enough that you are advised to move directly from hospital to a care home, you should make sure that you look into your eligibility for full NHS continuing care funding (see page 26).

What if I want to move to a different area?

When your local council has agreed to pay for you in a care home you are free to choose a care home anywhere in England or Wales. For example, you may wish to move to be near your family or back to the area where you were brought up. If your local council is paying for you and you move to a different area you will continue to be paid for by the original council which assessed you.



There are different rules if you want to move to Scotland. The advice services listed at the end of this guide can explain this to you.

Your council can get information for you on homes in other areas and the amount that the area is prepared to pay for someone with your level of needs. If the area you are moving to is more expensive than the one you are leaving, the council may ask for a top-up if your choice of home is one of preference over the one that can meet your needs at a cheaper rate. If it is part of your assessed needs (social and psychological) that you move to this area, the council should pay the normal rate for that area. If the area you are moving to is cheaper than the one you are leaving, the council will usually only agree to pay what the local council pays.

Refer to page 15 for the names of the organisations that can provide you with details of care homes in your chosen area.

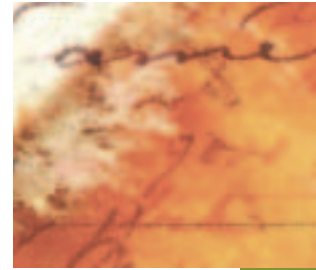
Will there be a contract for my stay in a care home?

If the council is contributing towards your care home fees, there should be a written contract between the council and the care home that sets out the services and facilities the care home will provide for you.

If you are paying the fees yourself, you should agree a contract with the care home.

Either way, the contract should include:

- the care and services covered by the fee
- fees payable and by whom (you, the council, the NHS, relative or another)



- additional services to be paid for over and above those included in the fees (see also the paragraph below)
- how often the fees might rise and the basis of any rises
- what fees are payable if you have to stay in hospital while you are living in the care home
- your rights and obligations, and the rights and obligations of the care home provider, and what happens if these are not adhered to
- terms and conditions of your occupancy, including what period of notice should be given by you or the care home owner
- any restrictions (for example, about smoking or pets)
- any permissions that may affect you (for example, if other tenants are permitted to smoke or have pets)
- the complaints procedure.

As well as the items listed in the contract, homes may charge you for extra services, such as outings, hairdressing and leisure activities. This is allowed as long as none of

the services are already itemised in the contract or are helping to meet needs that have already been paid for. You should not have to pay any extra charge for items that are already included in your Care Plan or Needs Assessment.

The Office of Fair Trading (contact details at the end of this guide) provides a guide to unfair terms in privately funded care home contracts in the factsheet entitled "Unfair Terms in Care Home Contracts". If you are unsure about any of the items in your contract, it may be a good idea to obtain a copy of this publication.

It can be worth finding out the care home's policy on the storage of valuables. People often want to bring some of their most valued possessions into the home with them, but must consider carefully how much protection the home offers them. See also Section Five, page 52, "Your room".



Paying for a Care Home

PART A – Who pays for my care home fees?

Living in a care home is expensive and most people will have to pay towards the fees. Many factors affect how much you will have to contribute, including your savings, assets, income and who you share your property with, if you are a home owner.

The first part of this section gives you information to help you decide if you are likely to be:

- a "supported client" – that is, you will be helped with the fees by the council
- a "self-funder" – that is, you will be paying the fees yourself
- "fully funded" – that is, you are among the small number of people eligible to have your fees paid in full by the NHS or another body (see next section).

There are different rules for supported clients and self-funders. These rules are explained in detail in Part B of this section (page 37). You can turn directly to this section if you already know which category you fall into.

You may also find it helpful to refer to Counsel and Care's website for diagrams and worked examples, or to request a hard copy of these from the charity (contact details given at the end of this guide).

Who does and doesn't have to pay for the cost of living in a care home?

Only people who come into one of the groups listed below are "fully funded" – in other words, they do not have to pay anything towards the cost of their care home fees. You fall into this category if:

1. you receive **intermediate care** – a short stay in a nursing or residential home for rehabilitation or recuperation. Intermediate care is normally free up to six weeks in England and Wales but will often last for only one or two weeks. Your council should have agreed a scheme with local health care providers, especially where intermediate care is to be provided in a care home. Intermediate care is different from a temporary stay or short break. To find out how these are funded, see page 35.



2. you are paid for by the NHS under **continuing health care** – this might be in a care home that provides nursing care, or more rarely, a residential care home. The NHS will pay in full for the services you need if you qualify for continuing NHS health care, although some benefits will be reduced as if you were living in hospital. You may qualify for continuing NHS health care if you need regular care by specialist health staff, for example, because your condition is especially complicated or your need for specialist health care is frequent and unpredictable. Each Strategic Health Authority has its own criteria for NHS continuing care funding. It is helpful to obtain a copy of this through your social worker or health professional, such as your GP or hospital doctor. As a rule of thumb, you may be eligible if you qualify for the top band of Registered Nursing Care Contribution (see page 29). If you think you may qualify, you should get an assessment before you leave hospital and be told about your right to appeal.
3. you are a **war pensioner**, who qualifies for help from the Veterans Agency (formerly the War Pensions Agency). A very small number of people can receive funding under the War Pensions Scheme, which should, in most cases, meet the full costs of the home providing nursing care services (contact details are at the end of this guide).
4. you are provided with care following a compulsory stay in hospital for mental health treatment under certain sections of the Mental Health Act (this is called **Section 117 Aftercare**). If you have ever been sectioned under the Mental Health Act, you should ask about receiving Section 117 Aftercare.



How is my contribution to the fees decided?

For most people, the amount they contribute to their care home fees is decided on the basis of a Financial Assessment. This is where the council collects details of your financial circumstances in order to work out how much you can afford. It should only take place after a Needs Assessment has been completed.

If there is any doubt about your ability to pay your care home fees in the short or long term, you should have a Financial Assessment. A social worker or an officer who specialises in Financial Assessments may do it and they are there to help you and guide you through the process. You should not be afraid to ask questions on anything that you are not sure about.

You may have a member of your family present, or anyone else you would like to help you, if you prefer.

The person completing the Financial Assessment may need to see a statement of any pension or benefits you receive, details of any private pension, building society books, bank statements and details of stocks, shares and any other investments that you may have. You may also be asked about any rent, council tax, water rates and insurance that you may be paying for. It would be useful if you gathered this information together before the visit.

You will be asked to sign the form used to collect the information and you will be given details of your expected contribution to the fees and how this has been worked out.

If you do not wish to disclose your financial information, you will be asked to sign a declaration agreeing to pay the full fee (see also page 40, "Does my husband or wife have to pay towards my fees?").



How is my charge worked out?

Your charge is worked out using rules set by the government and explained in the Charging for Residential Accommodation Guide (CRAG). These rules are reviewed every year and are changed from time to time. If you are reading this guide after March 2006, check with Counsel and Care to find out if the CRAG rules have changed and if so, whether this will affect your situation.

There are a number of types of income that are not counted or a part of which is not counted when assessing what you can pay (see page 37, "What income is taken into account?"). The person who is carrying out your Financial Assessment will be able to tell you whether any of your income will be ignored.

If your income is less than the care home fee, a simple way of looking at how your charge is worked out is:

All of your relevant income
MINUS: the Personal Expenses
Allowance (see page 41)
EQUALS: the charge.

Is any of my care home fee paid for by the NHS?

Unless you are eligible for full NHS continuing health care (see page 26, point 2), the NHS only contributes to your fees if you receive nursing care from a registered nurse in your care home. This is known as a Registered Nursing Care Contribution (RNCC).



Your local Primary Care Trust will arrange for a registered nurse to assess your nursing needs and place you in one of a choice of RNCC bands. The assessment will affect the amount you have to pay for care in a home. You should insist that it takes place before you move in. In England, the bands in 2005/6 are:

£129.00 per week for those with high nursing needs

£80.00 per week for those with medium nursing needs

£40.00 per week for those with low nursing needs.

Although you will normally be awarded an amount in one of these bands, it is possible to be awarded at a rate above the top band, and in between the two lower bands. At 2005/6 rates, Wales pays £107.63 per week for those assessed as needing nursing care. Scotland pays a flat fee of £145 per week for personal care, plus £65 per week for nursing care. If you are reading this guide after March 2006, find out the new bands by contacting Counsel and Care or the other advice agencies listed at the end of this guide.

The amount is paid direct to the care home, who should reduce their fees by the amount you are awarded. The Nursing Care fee should be set out separately in the care home's contract with you, if you are self-funding; and in the home's contract with the council if you are a supported client.

If you need to go into nursing care for a stay of less than six weeks (and plan to move back to other accommodation at the end of this period) the NHS will pay for some of your fees, but you will not have a full nursing assessment. The NHS will decide which band is appropriate based on what is already known about your nursing needs.



What if I have savings?

If you have savings and capital above a certain limit you will be a "self-funder" and will be expected to pay the full fees of the home. The limit for April 2005/6 is £20,500. If you are reading this booklet after March 2006, check with Counsel and Care to find out the latest limits. You can also find these out from your local council or the other advice agencies listed.

What if I own my home?

The value of your home is ignored for the first 12 weeks that you live in a care home. After that period, unless it is ignored permanently for the reasons explained below, the value of your home is taken into account in calculating your contribution to your care home fees.

The value of your own home is always ignored if your stay in the care home is temporary (see also pages 35/36, "What about temporary stays and short breaks?"). It will also be ignored if one of the following people is still living there:

- your husband or wife, or a partner who lived with you as if you were married;
- a close relative who is 60 or over, or incapacitated (this could be a son or daughter with a physical or learning disability, for example);
- a close relative who is under 16 and whom you are legally liable to support;
- your ex-husband, wife or partner, if he or she is a lone parent.



The council also have discretion to ignore the value of your home in other circumstances, for example, if your former carer lives there.

If your partner wants to sell your property after you have moved into a care home (for example, if they need to move to a different area or to a smaller property), you can give some or all of your share of the value to help them buy somewhere else. If there is any of your share of the capital left, some councils will count it as shared between you and your partner, others will regard it as yours. If it is counted as yours, it will be included in a new assessment of your finances.

If you jointly own your home with someone else, for example, a son or daughter, the council will work out the value of your share and count it as your capital when working out how much you must pay towards your fees. The value of your share depends upon your ability to sell your share, not the value of the whole house. The council cannot make a joint owner sell the part of the house they own and it may be very difficult to sell a share in a house, particularly if a joint owner still lives there. Therefore, if the other owner(s) do not agree to sell the whole house or buy your share, your share in the house might be worth very little or even nothing.

However, if it appears that you made someone a joint owner of your property to avoid paying care home fees, the council can treat you as if you own the home and reduce the financial help they give you (see next section for more details).



What if I give away any of my capital or savings?

If you deliberately give away your property or savings or spend the money on expensive possessions, holidays or gifts, the council may still take that property or savings into account if they think you are trying to avoid paying your proper contribution to your care home fee. They can treat you as if you still have the capital and can reduce the financial help they give you.

The council must look at your reasons for giving the capital away and when you gave it away. Even if you gave away capital a long time ago, they will look very carefully at the timing and reasons in order to determine if the main reason was to avoid paying a care home fee.

If the council concludes that you have given away your assets to avoid paying for the home they will pursue this through the courts, if necessary. But they cannot refuse

to provide the care that they have assessed you as needing if it comes within their criteria (see page 12, Fair Access to Care criteria).

What if I need help with organising the payment of my fees?

While you are living in a care home you are entitled to control your own finances. However, you may decide to hand over some or all responsibility for organising your money to a relative or friend.

If you do not have a relative or friend who can manage your affairs, the home should not automatically take over. They should ensure that you have control over your own money unless you do not wish to manage, or you are incapable of managing, your money. The home should only have responsibility for organising your money as a last resort.



If you are finding it difficult to organise the fee payment, you should be able to set up electronic systems of payment, such as standing orders, as long as you have a bank account. Whether you are self-funding or are supported by the council, it may be possible to arrange for your family to handle your money for you and deal with your fees.

There are different ways in which you can give permission for another person to handle your money, and some ways in which someone may be given this permission by another authority. In all the cases listed below, the person only has the power to handle your financial affairs. They do not have the power to make decisions on your behalf about other issues, such as your care or medical treatment.

Power of Attorney: you can give permission for another person (or more than one person) to handle your finances by signing a Power of Attorney. You can decide how much or how little responsibility you want to give up. A Power of Attorney only lasts while you are capable of giving instructions about your finances or supervising the actions of the people who have your Power of Attorney.

Enduring Power of Attorney: if you want someone to manage your finances now and/or in the future should you lose mental capacity, you can sign an Enduring Power of Attorney. An Enduring Power of Attorney is a very powerful document which will give the person wide powers over your finances. It is important to choose the person with care and it may be advisable to appoint more than one person to make sure that your interests are protected. It is a good idea to get legal advice before signing an Enduring Power of Attorney.

Lasting Power of Attorney

The Mental Capacity Act 2005, covering England and Wales, introduced a new type of power of attorney called a Lasting Power of Attorney (LPA). People will be able to choose someone to make decisions on their behalf about personal welfare decisions as well as financial matters. Lasting Powers of Attorney will replace Enduring Powers of Attorney but any EPAs that were made before the Mental Capacity Act comes into force (in 2007) will continue to be valid. Check with Counsel and Care or the Public Guardianship office (contact details at the end of this guide) if you would like to find out more about the forthcoming changes.

Court of Protection: if you become incapable of managing your money and have not signed an Enduring Power of Attorney, an application for Receivership may be made to the Court of Protection on your behalf. The Court exists to protect the property and financial affairs of people who lack the mental capacity to deal with their

own affairs. The Court can appoint someone to deal with your financial affairs. This person is called the Receiver. In England and Wales, a friend or relative can look into applying for a Receivership on your behalf by contacting the Public Guardianship Office (details at the end of this guide). Separate arrangements exist for Scotland and Northern Ireland.

Appointee: if you only need someone to deal with claiming, collecting and spending your benefits, the local benefits office can appoint someone to do this for you, often your closest relative. This person is called an Appointee. This power should only be used if you are physically unable to manage your own benefits. If a Receiver is appointed by the Court of Protection, or an Enduring Power of Attorney has been registered, that person would automatically take over from an Appointee in dealing with any benefits.



What if I need to go into hospital while I am living in the home?

From April 2005, you will continue to receive Pension Guarantee Credit, Incapacity Benefit, Severe Disablement Allowance and Income Support, in full, regardless of the length of time you spend in hospital.

If you are supported by the council you should have been informed as to how long the council will continue to pay for your room in the care home. Until your benefits change and as long as the council are paying for your room you will continue to pay your assessed contribution.

If you are self-funding, the care home should advise you of the charging arrangements during your absence. There should also be a record of these arrangements in the terms and conditions that you received when you moved into the home.

What about temporary stays and short breaks?

You might move into a care home for a short period, perhaps to give a break to yourself or a carer, or for a trial period if you have not yet decided if you want to make a permanent move. The rules for paying for a temporary stay of this kind are different from those for intermediate care, which only applies if your short stay is for rehabilitation and recuperation. The way temporary stays are paid for varies between different councils, so it is worth finding out what your council's position is on this.

If you are not entitled to free care, the council may charge you for temporary stays by applying the same means test as if the move were permanent. However, if your stay is for less than eight weeks, the council is not obliged to use these rules. Instead, they can choose to ask you to pay what they think is a reasonable amount.



After eight weeks the council must apply the normal rules and help with the care home costs if your savings are less than £20,500 (in 2005/6). However, if you are still responsible for your home the council should ignore some of your income so you can pay your bills. If you are a home-owner, the value of your home will also be ignored if you intend to move back there.

If you are in a care home for a short break or temporary care, you can now continue to receive Income Support/Pension Credit, Housing Benefit and Council Tax benefit for up to 52 weeks.

For temporary stays, the amount of Income Support and Pension Credit are worked out differently where the resident is one of a couple. For more information contact your local benefits office.

Some people go into care homes as a temporary resident and then after a few weeks decide to stay in the home permanently. The council will re-assess your finances when you become a permanent resident. The changed assessment should only apply from the time when you became permanent – not from when you entered the care home.

PART B – What do I pay if I am a supported client or a self-funder?

The second part of this section is divided into information that applies to supported clients (people who are eligible for financial support from the council) and self-funders (people who are not eligible for council support and have to pay the fees themselves). As throughout this guide, the information for supported clients is in yellow boxes, and for self-funders, in blue boxes.

Supported Clients

A supported client is someone who cannot afford to pay the full care home fees. They will need to make a contribution to their fees that is based on a Financial Assessment (see page 27). The council will pay the rest as long as the total falls within what it would normally expect to pay for the care being purchased.

What income is taken into account?

If you are entitled to help from the council towards the fees of the care home, you will have to contribute most of your income, including your state retirement pension and any benefits you get. The first £10 of War Injury, War Disablement, War Widows and Widowers Pensions is not counted. There are a few types of income which are completely excluded when your income is assessed, including the Christmas Bonus, Council Tax Benefit, the mobility component of Disability Living Allowance, the Mobility supplement, Social Fund Payments (including Winter Fuel Payments), some or part of some charitable payments. Attendance Allowance and the care component of Disability Living Allowance will usually stop after you have been in the care home for four weeks, (or sooner if you have been in hospital) if the council are helping you with the cost. The council will make up the difference in the care home fee.

The council will ignore half of your occupational or private pension as long as you use at least half of it to support your husband or wife who still lives at home. The same rule applies if you have income from a retirement annuity contract. The rule applies to married couples, but if you are not married you can ask the council to use their discretion to allow you to use some of your pension to support your partner at home. This could affect the Income Support or Pension Credit that your partner may get and the council will advise you whether it is a good idea. You may also wish to seek independent financial advice.

You may ask for a larger Personal Expenses Allowance (see page 41) if your spouse or partner at home is unable to pay the bills from their own income when you move into the home.

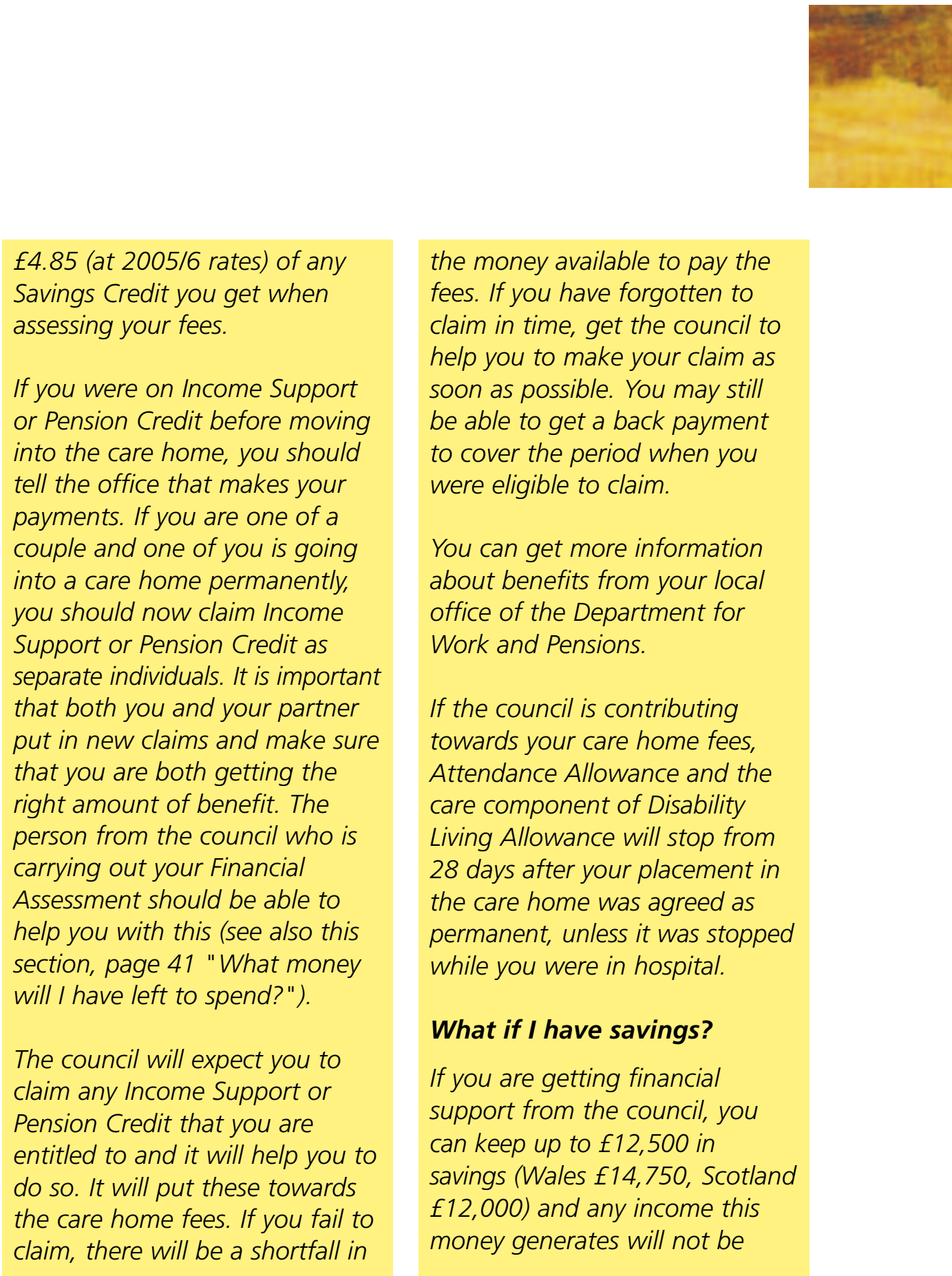
Can I claim any benefits towards the cost of the home?

If you are under the age of 60

the main benefit that you can claim is Income Support. It can be paid if your savings and capital are worth no more than £16,000 at 2005/6 rates (this limit is lower if your stay in the care home is temporary) and your income is below set amounts.

If you own your home, its value will usually take you above the capital limit for Income Support of £16,000, but if it is up for sale, its value will be ignored for up to six months or longer, if necessary.

If you are over 60, the main benefit that you can claim is Pension Credit. This includes a guaranteed credit to make sure that you have an income of at least £109.45 per week (at 2005/6 rates) after taking into account all of your income and savings. It will also include a Savings Credit Reward for those over 65, which will give extra for people who have second pensions and savings. The council only disregard up to



£4.85 (at 2005/6 rates) of any Savings Credit you get when assessing your fees.

If you were on Income Support or Pension Credit before moving into the care home, you should tell the office that makes your payments. If you are one of a couple and one of you is going into a care home permanently, you should now claim Income Support or Pension Credit as separate individuals. It is important that both you and your partner put in new claims and make sure that you are both getting the right amount of benefit. The person from the council who is carrying out your Financial Assessment should be able to help you with this (see also this section, page 41 "What money will I have left to spend?").

The council will expect you to claim any Income Support or Pension Credit that you are entitled to and it will help you to do so. It will put these towards the care home fees. If you fail to claim, there will be a shortfall in

the money available to pay the fees. If you have forgotten to claim in time, get the council to help you to make your claim as soon as possible. You may still be able to get a back payment to cover the period when you were eligible to claim.

You can get more information about benefits from your local office of the Department for Work and Pensions.

If the council is contributing towards your care home fees, Attendance Allowance and the care component of Disability Living Allowance will stop from 28 days after your placement in the care home was agreed as permanent, unless it was stopped while you were in hospital.

What if I have savings?

If you are getting financial support from the council, you can keep up to £12,500 in savings (Wales £14,750, Scotland £12,000) and any income this money generates will not be

counted. This is the April 2005/6 figure – for figures after March 2006, check with your council or with Counsel and Care. If your savings and capital are worth between £12,500 and £20,500 the council will help with paying the fees but they will assume that you have a set amount of income from your savings and add it to your other weekly income when calculating your contribution. Currently, for every £250 you have between £12,500 and £20,500, you are assumed to have a £1 a week income. This assumed income is called tariff income. In most cases, unless you spend it, the actual income you receive from savings and investments is counted as capital. It can increase the amount of tariff income you pay, and push you over the £20,000 upper limit.


Does my husband or wife have to pay towards my fees?

It is you who is means-tested as an individual, so your partner's income and savings are not

counted when the council look at how much you can pay towards the cost of your home. If you have savings in a joint account with your partner (or anyone else), the council will assume half belongs to you.

If you and your partner are both moving into a home you should still be assessed as separate individuals and your resources looked at separately, even if you share a room. This means you can each have savings up to limits of £20,500 each, at 2005/6 rates, and still get council help.

*The council can ask your spouse to pay some money towards the cost of your care home. This is called a **liable relative payment**. The council cannot insist that your spouse gives details of their income and savings. Unless the council takes your husband or wife to court, any payment from them is voluntary and not legally binding. The contribution should not cause your spouse financial hardship. Only a court can enforce a liable*



relative payment and the council can refer cases to a magistrate's court. The court will decide if your spouse has to pay to maintain you in the home and, if so, how much.

At the time of writing, the rules governing the liable relative payment are under review. If you are reading this guide after March 2006, check with Counsel and Care to find out if the rules have changed, and if so, how this will affect your situation.

What money will I have left to spend?

*When assessing how much you can pay, the council must make sure that you are left with an amount for your personal expenses. This is called the **Personal Expenses Allowance**, and is £18.80 a week in 2005/6 (Wales £19.10). You need to consider carefully before moving into a home how this compares with your current disposable income after you have paid for your household bills, food, care and services you need. You may*

find that there is little difference, but it is likely that this will be a reduction in your income. It is important to start thinking about what you will be able to afford once you have moved into the home, and what you may need to give up.

The council have discretion to leave you with more than £18+ a week. For example, if you are in a home for a temporary stay, they should ensure that you have enough to pay for any bills that you still have to pay in your own home, such as gas and electricity standing charges. Or you may have special circumstances that mean you need more than £18+ a week for your expenses. For example, you might have a financial commitment for essential repairs to a property you jointly share with a spouse.

*If you were getting Savings Credit as part of your Pension Credit when you lived at home, this continues when you move into the care home, where it becomes known as **Savings***

Disregard. This is added to your Personal Expenses Allowance and is currently paid at a rate of 60 pence for every pound above the starting point, with a ceiling of £4.85 per week. Check with your council, or with Counsel and Care, for the current rates.

The Personal Expenses Allowance and Savings Disregard are for your personal use. They should not be spent on any aspects of board, lodging and care that have been contracted for by the council and/or assessed as necessary to meet your needs by the council and the NHS. If you need chiropody or continence supplies, this should be reflected in your Care Plan as an assessed need. Neither councils nor care homes can ask people to spend their Personal Expenses Allowance in particular ways and pressure of any kind to the contrary is considered extremely poor practice.

How do I pay my fees?

If the council contributes to your care home fees, the contract

that it has with the home should give details of how the fees are to be paid. There are two main options:

- you pay your contribution directly to the council and the council will pay the whole fee directly to the care home; or
- if you, the care home and the council all agree, you can pay your contribution directly to the care home and the council will pay the remainder. This arrangement should not be made without your consent or agreement.

If you are having difficulty with handling your finances, refer to page 32, "What if I need help with organising the payment of my fees?".

Self-Funding Clients

A self-funder is someone who has sufficient weekly income, savings, investments or assets, such as a property, to have to pay the full fees of the care home. Self-funders have to arrange their own contract with the home to cover such things as the care to be provided and how often the fees might rise (see pages 22/23). However, if they are not able to arrange the contract and have no-one to do it for them, they can ask the council to do this.

It is always a good idea for people who are paying their own fees to get a Needs Assessment from the council before they go about deciding on a care home. There are three main reasons:

- The Needs Assessment in itself is a useful tool for presenting your needs clearly to any prospective care home. Showing them your Needs Assessment will help them to decide if they can accommodate your level of needs.*

- Once the council has assessed your needs, you can find out what care home fee they would normally pay for someone with your level of needs. This information can be obtained from your social worker or from the contracts department of your local Social Services.*
- You could use this information to try to negotiate a reduction in the care home fees that are being proposed to you by the home of your choice.*
- If you think your money will soon run down to below the capital limit of £20,500 while you are in the care home, you can make sure you choose a home with fees that are at the level the council would normally pay. This puts you in a stronger position when your savings run down to below the limit and you need the council to take over your payments.*



Will the NHS contribute to my care home fees?

If you are a self-funder receiving nursing care in a care home, you are entitled to exactly the same support from the NHS with your nursing care as a supported client. You must ask the NHS to carry out an assessment of your nursing needs and inform you of the contribution they will make to the nursing care element of your fees. The amount they pay will usually be within one of the bands listed on page 29. You should insist that this assessment takes place before you move into the care home and that the NHS contribution is set out separately on your contract.

Can I claim any benefits when I am living in a care home?

If you are paying the full fees of the care home, or if you will be repaying the council because you have a property which was taken into account in calculating your contribution, you can carry on claiming Attendance Allowance and the care component of the Disability Living Allowance. You

can find out the current values of these benefits by contacting Counsel and Care or the other advice agencies listed at the back of this guide.

If your Attendance Allowance or Disability Living Allowance has stopped during the first 12 weeks of your stay in the care home, then it is important to ask for it to be put back in payment once you are paying the full cost of your care, or know that you will have to reimburse the council.

What if my savings run down below the current limit?

The limit for 2005/6, below which you can receive help from the council with your care home fees is £20,500. If you are reading this guide after March 2006, check the new limits by contacting Counsel and Care, your council, or one of the other advice agencies listed at the back of this guide. You should watch your capital carefully and get in touch with your council well before it goes down to the current limit. You should try to



give the council three months' notice that you will need help with paying the care home fees. The council will assess you to make sure that you meet their criteria for care in a care home. If you have moved to a different area and were paying your own fees but now need help, you should get in touch with the council in the area you now live. If you have already taken the precaution of making sure that you meet the council's criteria by choosing a care home on the basis of what the council will normally pay for your assessed needs, you will be in a strong position to ask the council to take over the payment of your fees so that you can stay in the same care home. If you did not choose your care home on this basis, you may be asked to move to a home that will meet your assessed needs at the price the council are prepared to pay (see pages 16/17).

See pages 39/40, "What if I have savings?" for the way the council will treat your income from

savings once they have fallen below £20,500.

What if I own my home?

If you have a property worth more than £20,500 (minus selling costs and outstanding mortgage) you will have to use it to pay the fees of the home (exceptions to this rule are given on page 30/31). You should be given the choice of selling it immediately or deferring the payment.

The value of your home is always ignored for 12 weeks, starting from the date you moved into the care home permanently. If you have less than £20,500 in other savings and assets then you will get financial assistance from the council for those 12 weeks. If you sell your home within the 12 weeks, its value will be taken into account from the date of sale. After 12 weeks, the contract with the council will end and you, or your representative, will have to make your own contract with the care home.

If you are a home owner with other assets below £20,500, you may therefore expect the fee you pay to go up at the end of the 12 week period.


*If you don't wish to or can't sell your home immediately you can ask the council for a **deferred payment**. If the council agrees to a deferred payment they will pay part of your fees and you can repay them later. You will still have to contribute to the fees from your weekly income, but you don't have to sell your home in your lifetime if you don't want to. You will not have to pay any interest on the fees that the council have paid for you while you are alive and the property is unsold. But in the event of your death, your estate would begin to be charged interest if the property remained unsold after 56 days. If you are considering keeping ownership of your home, it is a good idea to make sure you have looked into the potential hidden costs of renting it out or leaving it empty. Some of the agencies listed at the end*

of this guide will be able to advise you on this.

Selling your home can be quite complicated and stressful in itself. The Nursing Home Fees Agency, whose details are listed at the back of this guide can advise you on the practicalities of selling your home.

What if I have no eligible savings or other assets, but a large weekly income?

If you are not eligible for council support because, although you have no eligible savings or assets, you have a high income, for example from a pension scheme or annuity, you will be expected to pay for the care home fee from your income. As long as you have at least the current Personal Expenses Allowance (see page 41) remaining to you after you have paid the fee, you will not be eligible for council support. You may still, however, retain the Savings Credit Reward of up to £4.85 per week. However, if your income dwindles in value against



inflation, or your care home fees go up so that you no longer have enough to set aside the amount of the Personal Expenses Allowance, you should be eligible for support from the council and can apply to them for assessment (see pages 8 and 27).

How can I best pay my fees if I am paying them myself?

If you are paying your own care fees and not getting any help from the council, you may want to give yourself the best guarantee you can that your money will not run out, no matter how long you live. You will also want to be sure that you can meet any increases in the cost of your care. Some people will want to explore ways of doing this which protect, as far as possible, their legacy to their family.

For more information, you can consult the Financial Services Authority (FSA), whose leaflet, "Paying for Long-Term Care", outlines the main options,

and you may wish to consult an Independent Financial Adviser (IFA).

The government is increasing protection for the consumer in this area and all Long-Term Care financial products and advice are now regulated by the FSA.

From October 2004, all Independent Financial Advisers who give advice on Long-Term Care are required to pass a specialised examination. (Those advisers who have already been deemed competent to advise on Long-Term Care have until October 2006 to pass this exam). If your existing adviser is not a specialist, they should be able to contact a specialist on your behalf to make sure they are giving you the best advice. The Financial Services Authority can provide you with a list of questions to ask your IFA, and a list of IFAs in your area can be provided by IFA Promotion (contact details at the end of this guide).



Living in a Care Home

Your independence

Once you are living in a care home, there will be further important matters for you to think about. In particular, you still have the right to exercise choice and control over your life – for example, how you spend your time, what you eat and the time you get up or go to bed.

In the care home, you should be supported to do as much as you can do and want to do. Staff should do all that they can to help you to be as independent as possible, for as long as possible, even where that means that some tasks take longer when you do them rather than having them done for you. The home should work with you to draw up a care plan specific to your life in the home, based on the council's Needs Assessment or Care Plan, if one exists, which includes your care needs, but also your goals and aspirations for your life in the home (see also page 50, "*Your Care*"). To help you to be as independent as possible, staff should carry out what is called a risk assessment, which should be recorded in your care plan. This will show your wishes about what you want to do for yourself and the staffs' assessment on the risk of this causing harm to you or to others.



The types of things that you may want to think about in relation to independence include:

- going out
- taking a bath unsupervised
- locking the door to your room during the day or at night
- having the opportunity to be alone or to join in with activities
- being able to continue with your interests and hobbies
- choosing your meals and which of your clothes you wear
- handling your financial affairs or choosing to allow your family to do so
- choosing who visits you and when and seeing them in private
- the right of access to any records kept about you
- how to get in touch with someone independent if you need help or advice
- having privacy and dignity
- helping to make your care plan to suit your needs
- how to access free NHS services
- being registered with a GP from the area in which you live
- keeping and controlling your own medicines
- having your religion or cultural differences respected.

Your home

The Commission for Social Care Inspection in England, and the parallel bodies in Wales and Scotland (see page 15), check that the care home meets good physical, and other, standards. This will include the number and location of toilets, ramps, lifts and grab rails and special facilities for those who are hard of hearing or have impaired eyesight. There should be separate spaces for those who wish to smoke, and of course those who do not.

It is important that where you live, both inside and outside the home, is safe and well-looked after and somewhere that you will feel comfortable and safe.

You may choose a care home because it can meet your religious needs. There are homes which are run by religious organisations or which have an on-site place of worship.



Your care

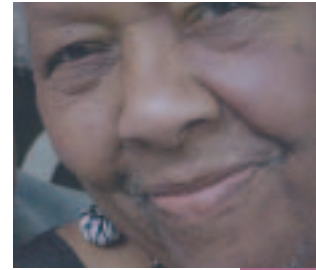
When you move into a care home, the care home staff should work to the council's assessment of your needs or Care Plan if one exists. As explained in Section Two you have a right to a Needs Assessment by the council no matter how much money you may have, and this is strongly advised.

Whether or not you have a Needs Assessment, once you have taken up residence, the care home staff should work with you to make a care plan specific to your life in the care home. It should set out your needs and what you want to achieve in the future and should be agreed and signed by you and the date recorded. This plan could involve your family or friends but only if that is what you want. You should also be able to use the plan to nominate a friend or relative to contribute to decisions on your behalf should you become unable to explain your needs and preferences at any point (this might be temporary, due to illness, or permanent, if your health

declines). The care plan should be updated regularly to make sure that your changing needs are being looked after.

If the council is paying for your care, they must, at least once a year, carry out a review of your needs and how the care home is meeting them.

Some people may suffer continence problems or may be at risk of developing pressure sores. Staff will provide care and equipment to help with these problems or will be able to put you in touch with specialist services that offer help. It is useful to get this recorded in your care plan as soon as it arises. The NHS should provide help such as continence pads free of charge. Each Health Authority should have continence advisers, so if you are not satisfied with how the home supports you with this issue, you can request a referral to the continence adviser.



The care home is there to help care for you and you should not feel intimidated or be subjected to abuse of any kind. This includes physical, mental, emotional, financial, sexual and racial abuse, or being given any medication or drugs that you, or the person that you have asked to represent you, has not agreed to.

You should be supported by staff to maintain a good quality of life. This may include help with taking medicines, with maintaining your appearance to your satisfaction, help with eating as much as you need, and help with moving between the different rooms in the building and outside the building. Remember you have chosen to make the care home your home, and you are entitled to proper consideration and treatment. If you do not receive it, you have every right to complain.

You should not be subjected to physical restraints in any way without your consent and you should be encouraged and supported to take appropriate risks, if you so choose. Your family, the Social Services Department, the Commission for Social Care Inspection in England (and the Wales and Scotland equivalents, see page 15) and national organisations like Action on Elder Abuse are all there to help you if you want to make a complaint about the way that you are treated. (See also Section Six, "What if I Have a Problem?").



Eating well is an important part of your care and is essential to maintaining your health. The home should make sure that you receive a wholesome, appealing and well-balanced diet, in pleasing surroundings and at times convenient to you. You should be able to get snacks and regular drinks as well as main meals, and any special dietary needs that you have should be considered.

Residents have a right to be treated with respect by staff, but staff also have the right to be treated with respect by residents.

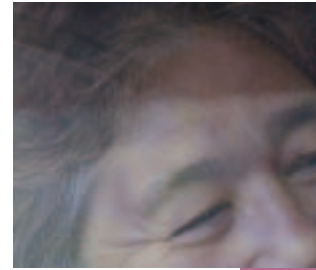
Your room

Most people who live in care homes have their own private room. If you are supported by the council in paying for your care home place, you may be asked to share your room. The council is not allowed to insist that you share your room. If you do share, it should only be because you and the other resident choose to, and you should never be asked to

share with more than one other person. If you share a room the staff should use privacy curtains to protect your dignity while assisting you with any personal care needs. What you do in your own room is up to you, but you should show consideration to other residents.

You should be able to invite visitors into your room and the home should be able to make arrangements for the person you choose, such as a spouse, partner or friend, to stay the night with you if you want them to.

There must also be a lockable space in your room, like a drawer or bedside locker, for you to keep any personal items, like medicine, money or other valuables. You should be able to put some of your own furniture and possessions in your room. You will need to consider whether it is worth the risk to bring an item of high value with you into the care home. If you have not already done so, you should check the care home's policy on the storage of valuables.



You should be able to control the heating and lighting in your own room, and there should be windows that can be opened to give you natural light and to let in fresh air.

Staff should knock on your door and wait to be invited into your room. Your bedroom door should be fitted with a lock that you can use and, unless it is thought too dangerous, you should be given a key. If you are not given a key, this decision and the reason for it must be recorded in your care plan. If you aren't able to have a key, but you want to be able to lock your bedroom door, a member of staff should be available to lock and unlock the door when you want. The staff will also have to have a key to your room in case of emergency.

Your rights as a citizen

Living in a care home does not mean that you lose any of the rights you had living in your own home, for example, voting in elections. You can ask the manager to arrange for your name to be added to the register of electors. This can be done at any time of the year.

An important aspect of respecting your rights in the home is your right to confidentiality and your right to access any information that is held about you.

You may have moved into your new home in the belief that it will be your home for the rest of your life, and that ought to be possible. Sometimes people become very ill and the home staff find it difficult to go on providing the level of support they need, but mostly staff will try to help you remain where you are.



However, there may sometimes be circumstances under which it is not possible for that to happen. Although the Government is working with councils and care home providers to make sure that good homes prosper, many homes are businesses and from time to time, businesses close. In such situations your individual legal rights are quite limited. Residents of care homes do not have the legal protection of a tenancy, as is the case in other rented accommodation. The only form of tenure available in care homes is called a licence and a licence gives little protection if the management of the home decides that it is unable to continue to offer you a place, for whatever reason.

Your council Social Services Department must help you to make arrangements to move to another home, should that be necessary. This also applies to people who are paying for themselves if they have no-one else to help them; and should apply if you decide that you want to move for any reason at all. Ideally, your needs should be re-assessed before moving, in order to identify the most suitable home. You should be able to get an assessment even if the council is not supporting you financially, to help make sure that you move into a home that is suitable to your needs. If the home gives very short notice of closure, local authorities can make emergency arrangements for care in other homes without having carried out an assessment. But they must assess your care needs as soon as possible after a move has taken place.



At the end of life

Most of us will want to make at least some preparation for the time of our death. This might be by making or updating a will or making detailed funeral arrangements. It might include naming a friend or relative you would like to contribute to decisions on your behalf, should you no longer be able to speak for yourself. It might also include medical and religious preferences about end-of-life care. Staff of the care home will be very sympathetic and helpful should you want to plan everything in advance. Your wishes for the future can be recorded in your care plan. If you prefer, a member of your family or a friend could let the home know how you feel. If you have any worries about how your death will be handled, talk to the home about your concerns.

Unless there are medical reasons why not, you should be able to stay in your own room for your final days. It should be possible for people close to you to stay with you and for you to see staff or residents who are important to you. But, at the same time, your privacy should always be respected.

What if I Have a Problem?

Although many people have a very positive experience of living in a care home, the process around choosing the right home, moving in and paying the fees is complicated. Things can and do go wrong both before and after a move to a care home. If you do have a problem at any stage in the process, the best advice is always to speak to the person or people most directly concerned with the issue that is causing you a problem, if this is possible. It can also help to ask someone outside the situation – a friend or relative, or one of the advice services listed at the end of this guide – for advice on how to proceed.

If you receive or need care or help from Social Services or the NHS, you might not be satisfied with the type, amount or standard of service. Making a formal complaint can feel intimidating. However, in certain circumstances it is a necessary and essential step to take.

This section looks at when you can complain, how to go about it and also looks in some detail at Social Services and Health Service complaints procedures.

Informal complaints

In some circumstances, complaints may be resolved simply and informally. You might want to give the organisation an opportunity to give you an explanation about what has happened and to reconsider their decision. But you should not allow the organisation to delay the process or to put you off from making a formal complaint if you want to.

Ensure that the organisation is provided with all the relevant information about you that they may need to reconsider their decision. They may not have taken all your circumstances into account when they made the decision that you are not satisfied with. Put your concerns in writing (keeping copies for your reference) and ask for a reply within 10 working days.

If progress is made or some of your concerns are resolved, you may decide not to go ahead with a formal complaint or you may wish to acknowledge that part of your complaint has been resolved, but you wish to further your complaint about the part that has not been.

If you are dissatisfied with the way that your concerns have been dealt with, you may still want to complain about the way you were treated, or the way the complaints procedure operated.

Formal complaints

If you are not satisfied with the way your concerns have been dealt with, you can make a formal complaint using the official complaints procedure. Local councils and the NHS must have complaints procedures in place as directed by the government. These procedures should be set out in a complaints leaflet that explains how to make your complaint and what to expect as the process goes on.

There will be set time-scales within which you should receive a reply to your complaint. You should find out what they are if they are not made explicit in the complaints leaflet. It is important to remember that anything said in person or on the telephone may not be able to be confirmed after the event, if it is not confirmed by letter. So if you initially complain verbally, you should ask the name of the person you speak to and make a note of this and the date. You can then follow this up with a letter.

The letter should concentrate on the main facts of your complaint – including times, dates and short summaries of the issues – and you should make it clear that you want a response in writing as soon as possible, within 10 working days, unless the complaints leaflet leads you to expect a different time frame.

Complaints about the council's Social Services Department

The leaflet explaining your council's complaints procedure should give the name and address of their Complaints Officer. The complaints procedure should cover complaints about:

- assessment for services in your own home or a care home
- inappropriate refusal of services
- assessment for care in a home
- the financial assessment for charges for care
- the standard and quality of services provided.



There are three stages to the council's complaints procedure:

1. **The informal stage**

This is where you contact the person concerned with your care, or their manager to see if the problem can be sorted out satisfactorily. You should ask for their response to be put into writing.

2. **Formal registration and response**

If you are not satisfied with the outcome of the informal stage of your complaint, you should register your complaint formally in a letter. You can ask Social Services for help to do this, or you can ask a friend or relative to complain on your behalf.

The council should write to you within 28 days of receiving your complaint letter. You should either get a response to your complaint or an explanation as to why there is a delay in responding. Whatever happens, you must receive a response to your complaint within three months.

In some cases, the council may wish to organise a meeting with you. If so, you are entitled to take someone along with you to be your representative.

This could be a friend, a relative or a representative from an advice agency.

3. **Review panel meeting**

You can ask for your complaint to be taken to the third stage, a review panel meeting, if you are not satisfied with the response to the formal registration of your complaint. You must request this review within 28 days of receiving the full response or explanation regarding your complaint. You should be given 10 days' notice of the meeting and at this stage it is often advisable to bring along a representative as above.

The review panel should record its conclusion within 24 hours or ask for a formal extension. The report of its recommendation will then be forwarded to the Director of Social Services, who will make a decision based on its recommendation.

The Monitoring Officer

All councils must have a Monitoring Officer, who has the duty to investigate any decision made within the council that may be illegal. If you think a decision made by Social Services might be against the law, you can ask your council Monitoring Officer to investigate. You may wish to seek the advice of one of the agencies listed at the end of this guide.

The Local Government Ombudsman

The Local Government Ombudsman can look into complaints about failures in the administration systems and processes of the Social Services Department that have led to any complaints against them. There are strict rules about the type of complaint that an ombudsman can investigate. The ombudsman will not generally investigate your complaint unless you have been through the council's complaints procedure first.

A complaint to the Local Government Ombudsman must usually be made within 12 months of the problem originally arising unless there are special reasons for a longer delay.

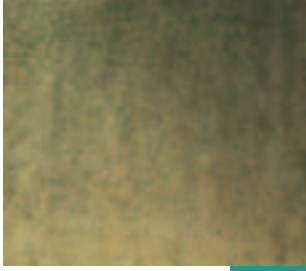
Health Service complaints

All Primary and Secondary Care Trusts must have a Patient Advice and Liaison Service (PALS) which can advise you who is responsible for the service you wish to complain about. You can obtain details of your local PALS from your library, the GP surgery or local hospital.

The NHS complaints procedure

Complaints about services or treatments from the NHS using the NHS complaints procedure must be made within certain time limits:

- within six months of the event you wish to complain about; or
- within six months of finding out about the right to complain, providing it is within 12 months of the event.



A complaint made outside these time limits will only be accepted if you have a good reason for not complaining sooner. Complaints can be made to any member of NHS staff by you or by a friend or relative, (as long as you have given your permission for them to complain on your behalf).

The NHS procedure has the following stages:

1. Local resolution

This is where you try to resolve your complaint with the member of staff who has been caring for you. Your local Patient Advice and Liaison Service will help you to try to resolve the complaint on the spot, so that you do not have to complain unnecessarily. PALS should also act as one of the gateways to independent advice and representation for you if you wish to make a formal complaint, because you are not satisfied with the response at the local resolution stage.

2. Complaints manager

You can make your complaint to the named complaints manager (usually found on the Formal Complaints form) employed by the Primary Care Trust or Health Authority. They deal with written complaints on behalf of the Chief Executive of the Care Trust. They should make sure your complaint is properly investigated in situations where you do not want to discuss your complaint with the people directly involved in your care, or where the front line staff feel unable to deal with your complaint.

3. Independent review panel

You do not have an automatic right to have your complaint heard by an independent review panel. A member of the Health Authority, known as the Convenor, will decide whether it is appropriate, and if you disagree with the decision you can complain to the Health Service Ombudsman. There is a target time of six months for the whole review process to be completed.

4. **Health Service Ombudsman**

If you disagree with the findings of the review panel, you can complain to the Health Service Ombudsman. The Health Service Ombudsman is able to investigate complaints about 'maladministration' i.e. poor administration or wrong application of the rules; and 'clinical judgment' i.e. an inappropriate action/decision made by health personnel. The Health Service Ombudsman will not investigate your complaint until you have been through the NHS complaints procedure first.

Complaining about care in a care home

All care homes are required to have a complaints procedure in accordance with the Care Standards Act, a copy of which should be freely available to you. If you are a resident you, or a representative such as a friend or relative, can begin with making your concerns known to the care home manager or matron. You could also ask another member of staff to speak to them on your behalf.

If you are not satisfied with the response you get or you do not want to discuss the complaint with the staff at the home, you can make a complaint to an inspection officer at the Commission for Social Care Inspection in England (or equivalent bodies for Wales and Scotland, see page 15), whose addresses are at the back of this guide. These organisations can investigate your complaint and ensure the home complies with the National Minimum Standards for care homes for older people. You can write or speak to the inspectors in confidence, but confidentiality may be difficult to maintain if they are to investigate particular events or circumstances to a full resolution. You do not have to tell the home that you have made a complaint to these organisations.

If some of your fees in the home are being paid by the council, they are required to carry out a review of your care annually. You can also discuss any difficulties or complaints about the home with the person who reviews your care or with a manager at the Social Services Department.



Complaints about NHS continuing care

If you have been refused free NHS continuing care, you can ask for a review of the NHS decision. This review process is a separate process from the NHS complaints procedure. The review process is only for people requesting a review of a decision by the Health Authority not to pay for continuing NHS care needs. For more information, request Counsel and Care's factsheet on "Hospital Discharge and Free Health Care in England" or contact one of the advice agencies listed at the end of this guide.

Beyond complaints procedures

There are a variety of other approaches that can be taken if you are not satisfied with the outcome of your complaint. Contact one of the advice services listed at the end of this guide for further information.

Addresses and Further Help

There are a number of national organisations, some with local branches or offices, that can provide you with further information on a range of matters connected with your health and welfare. Many of them produce factsheets outlining matters described in this guide.

Action on Elder Abuse

Astral House, 1268 London Road,
London SW16 4ER

Telephone Helpline:
0808 808 8141

Website: www.elderabuse.org.uk

They provide advice and support to older people experiencing abuse or neglect.

Age Concern England

Astral House, 1268 London Road,
London SW16 4ER

National Telephone Information
Line: 0800 009966

Website: www.ageconcern.org.uk

This agency offers advice and factsheets on a wide range of topics and can provide information on the conditions pertaining in England.

Age Concern Cymru (Wales)

Ty John Pathy,
13/14 Neptune Court,
Vanguard Way,
Cardiff CF24 5PJ

Telephone: 029 2043 1555

Website: www.accymru.org.uk

This agency offers advice and factsheets on a wide range of topics and can provide information on the conditions pertaining in Wales.

Age Concern Scotland

Causewayside House,
160 Causewayside,
Edinburgh EH9 1PR

Tel.: 0845 833 0200

E-Mail: enquiries@acscot.org.uk

Website:

www.ageconcernscotland.org.uk.

This agency offers advice and factsheets on a wide range of topics and can provide information on the conditions pertaining in Scotland.

Age Concern Northern Ireland

3 Lower Crescent, Belfast BT7 1NR
Telephone: 028 9024 5729
Website: www.ageconcernni.org

This agency offers advice and factsheets on a wide range of topics and can provide information on the conditions pertaining in Northern Ireland.

Alzheimer's Society

Gordon House,
10 Greencoat Place,
London SW1P 1PH
Telephone Helpline:
0845 300 0336
E-Mail: info@alzheimers.org.uk
Website: www.alzheimers.org.uk

They produce factsheets and there is a network of branches covering much of the country.

Care Standards Inspectorate for Wales

1 Alexander Gate, Rover Way,
Tremorfa, Cardiff CF24 2SA
Telephone: 029 2047 8600
Website: www.csiw.wales.gov.uk

This organisation can provide a list of care homes in your local area. It can also make available their most recent inspection reports.

Commission for Social Care Inspection

33 Greycoat Street,
London SW1P 2QF
Telephone: 0845 015 0120
Website: www.csci.org.uk

This organisation can provide a list of care homes in England. It can also make available their most recent inspection reports.

Counsel and Care

Twyman House, 16 Bonny Street,
London NW1 9PG
Telephone Advice Line:
0845 300 7585
E-Mail: advice@counselandcare.org.uk
Website:
www.counselandcare.org.uk

Provides advice, produces factsheets on a wide range of topics connected with care at home, care homes and welfare benefits and is responsible for producing this guide and the shorter version of it, **The Brief Care Home Guide**.

Department for Work and Pensions (DWP)

DWP run a general benefits enquiry line for people with disabilities:

Telephone: 0800 882 200

Minicom: 0800 243 355

Website: www.dwp.gov.uk

The Department for Work and Pensions are responsible for administering Social Security benefits. The address and telephone numbers for your local DWP office are in the phone book. They can give you contact details for any office dealing with particular benefits.

Directgov

Website: www.direct.gov.uk

Directgov is a website which gives easy access to information on government services for different groups of people, including disabled people, over 50s and carers.

Elderly Accommodation Counsel

Third Floor,
89 Albert Embankment,
London SE1 7TP

Telephone Advice Line:
020 7820 1343

E-Mail:
enquiries@e-a-c.demon.co.uk
Website: www.HousingCare.org

They provide factsheets and detailed information on care homes and other special accommodation for older people throughout the UK, including sheltered housing. They can provide lists of accommodation by postcode, area name, provider name or current vacancies.

The Financial Services Authority

Telephone Consumer Helpline:
0845 606 1234 (rates may vary)
Website: www.fsa.gov.uk

This is the independent watchdog set up by the government to regulate financial services and protect the rights of consumers. The Firm and Person Check service on the website, and helpline can be consulted to find out if the firm or person you may be going to for advice is authorised. A wide range of consumer publications and factsheets can be looked at on the website, including the FSA factsheet "Paying for Long-Term Care".

IFA Promotion

Telephone: 0800 085 3520
Website: www.unbiased.co.uk
They can provide a list of Independent Financial Advisers in your local area.

Help the Aged

207-221 Pentonville Road,
London N1 9UZ
Telephone Care Fees Advisory
Service: 0500 76 74 76
Seniorline: 0808 800 6565
E-Mail: info@helptheaged.org.uk
Website: www.helptheaged.org.uk

Offer advice and information for older people through advice lines and a wide range of free advice leaflets.

National Association for Providers of Activities for Older People (NAPA)

Bondway Commercial Centre,
5th Floor Unit 5.12,
71 Bondway,
London SW8 1SQ
Tel.: 020 7831 3320
Website: www.napa-web.co.uk

This organisation promotes an active life in homes for older people through research, publications and links with member providers.

Nursing Home Fees Agency (NHFA)

St Leonards House, Mill Street,
Eynsham, Oxford OX29 4JX

Telephone Care Advice Line:
0800 99 88 33

E-Mail: enquiries@nhfa.co.uk

Website: www.nhfa.co.uk

Provides advice and information on obtaining and paying for care. Aims to enable older people to meet the cost of their chosen care for life while preserving their independence, dignity and choice.

Office of Fair Trading

Fleetbank House,
2-6 Salisbury Square
London EC4Y 8JX.

Telephone: 08457 22 44 99

E-Mail: enquiries@oft.gsi.gov.uk

Website: www.oft.gov.uk

The OFT's goal is to make markets work well for consumers. Their activities in pursuit of this goal involve enforcement of competition and consumer protection rules; market studies; and communication with producers and consumers about fair and unfair trading. They produce useful factsheets including: "Guidance on Unfair Terms in Care Home Contracts".

Public Guardianship Office

Archway Tower, 2 Junction Road,
London N19 5SZ
Telephone Customer Service Unit:
0845 330 2900
E-Mail:
custserv@guardianship.gov.uk
Website: www.guardianship.gov.uk

Founded in 2001, the Public Guardianship Office is responsible for providing services which promote the financial and social well-being of people with mental incapacity. They are based in North London, and have responsibilities that extend across the whole of England and Wales (separate arrangements exist for Scotland and Northern Ireland).

Relatives and Residents Association

24 The Ivories,
6-18 Northampton Street,
London N1 2HY
Telephone Advice Line:
020 7359 8136
Telephone: 020 7359 8148
E-Mail: advice@relres.org
Website: www.relres.org.uk

They provide information and support to residents of care homes and their relatives and provide support to set up groups in homes.

Scottish Commission for the Regulation of Care

Compass House,
11 Riverside Drive,
Dundee DD1 4NY
Telephone: 0845 600 8331
Website:
www.carecommission.com

This organisation can provide a list of care homes in your local area. It can also make available their most recent inspection reports.

Veterans Agency

Norcross, Blackpool FY5 3WP
Telephone Advice Helpline:
0800 169 2277
Textphone: 0800 169 3458
E-Mail:
help@veteransagency.gsi.gov.uk
Website:
www.veteransagency.mod.uk

Point of contact for war veterans and their dependants seeking help, information and advice.

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If you are reading this guide after March 2006, check with Counsel and Care or your local council to find out the latest allowances, benefits and savings thresholds. You will be advised if an updated version of this guide is available.

Alternatively, to find out the latest savings allowances and benefit figures, log on to the government's website at:

<http://www.direct.gov.uk/MoneyTaxAndBenefits/fs/en>