

Paying for care and support in England

Factsheet 532LP
March 2019



Many people with dementia will need care and support from their carer, family, friends or professionals as their condition progresses. All care – including any you pay for – should help you to live well with dementia. The types of care put in place will be different for everyone, because everyone's needs are different.

Paying for care can be worrying to think about. With the right information and support, you can better understand your options and make the right decisions for you. This factsheet outlines the different ways to pay for care, and the amount you might be expected to pay.

This factsheet refers to The Care Act 2014. The Act sets out the legal responsibilities of English local authorities (councils) for adults who need care, as well as their carers. It aims to make sure that every decision about a person's care takes into account and builds on their strengths, capabilities and wellbeing, to help them to live independently for as long as possible.

This factsheet is for people living in England, as the laws in Wales and Northern Ireland are different. For information about the laws in Wales see factsheet W532, **Paying for care and support in Wales**, and in Northern Ireland see factsheet NI532, **Paying for care and support in Northern Ireland**.

Contents

- Who pays?
- Information and advice
- Financial advice about paying for care in England
 - Independent advocates
- Meeting your needs
 - Personal budgets
- Financial assessment
 - The financial assessment form
 - Light-touch financial assessments
- Types of care and support that cannot be charged for
- Paying for care and support in your own home
 - Capital
 - Income
- Replacement (respite) care
- Care home fees
 - Deprivation of assets
 - Property and the financial assessment for care home fees
 - Deferred payment agreements
 - Price limits and top-up fees for care home places
 - Personal expenses allowance (PEA)
- Benefits and care home fees
- Care home fees for self-funders
- Care fees and the Mental Health Act 1983
- Nursing care costs
- Complaints
- Frequently asked questions
- Other useful organisations

Paying for care and support in England

Who pays?

There are national rules about who has to pay for care and support, although these can vary locally. It mainly depends on the type of care and support that you need, where you live and what is available.

If you are still living at home, you will usually pay for the costs of your own care and support. The local authority (council) may also contribute, but this depends on your income and your assets (such as savings or shares). You may be assessed by your local authority as having to pay for all your own care and support at home. This is sometimes called being a 'self-funder'.

If you are receiving care and support in your own home, you are entitled to keep a basic level of income (money you receive regularly), however much your care costs. The Care Act states that charges for care must be 'reasonable'. For more information see 'Paying for care and support in your own home' on page 9.

If you are living in a care home, you might pay for all of your care and support costs which means you are a 'self-funder'. Or, you may make a contribution, with the local authority and/or the NHS also contributing. Again, this depends on your income and assets, and on your needs – see 'Care home fees' on page 13.

You may have all or part of your care funded by the NHS – see 'Nursing care costs' on page 20.

Information and advice

People with dementia, carers and families can take control and make informed choices about care and support. The Care Act says that you have the right to ask for clear, written explanations, and the right to be provided with clear information from your local authority.

Even so, paying for care can be complicated, and it's best to speak to an adviser in your area. Ask for extra information and advice if you need it. For more information see 'Other useful organisations' on page 24.

Financial advice about paying for care in England

Local authorities do not have to provide all of the information and advice about paying for care in England themselves, although they are expected to signpost (tell you about) or refer you to independent and impartial sources of information and advice.

If you need independent financial advice so that you can make informed decisions, the local authority must help you to access it. You can ask for information and advice about understanding care charges, and ways to pay for them.

The local authority should know (or find out) whether you have decision-making capacity before giving you advice. This means you are able to understand the information that is relevant to that decision, and to choose what to do next. You may have a deputy of the Court of Protection or a person with Enduring power of attorney or Lasting power of attorney who is acting on your behalf. For more information see factsheets 472, **Lasting power of attorney** and 530, **Deputyship**.

Independent advocates

You may have difficulty being involved in, and making decisions about, your care and support. Not everyone has a family member or friend to support them, so if you have substantial difficulty and no one to help, a local authority must provide an independent advocate. This person will enable you to have your voice heard.

Meeting your needs

Your local authority has a duty to carry out an assessment of your care and support needs. This 'needs assessment' should consider the things that are important to you. The local authority uses it to decide whether you are eligible for support. If so, you are considered to have 'eligible care needs'. For more information see factsheet 418, **Assessment for care and support in England**.

The local authority will then talk to you and your carer (if appropriate) to produce a care and support plan. This is a joint effort and you will have ideas and preferences about what you want to be in place to support you best. After that, it will consider whether you are entitled to financial support to meet your needs. The local authority cannot refuse to assess your needs because you appear to have enough money to pay for your own care, and some people find this assessment helpful (see 'Care home fees for self-funders' on page 19).

Personal budgets

A personal budget is an amount of money the local authority will pay for your care and support. It's intended to give you greater choice and control over how your eligible needs are met. It can cover care costs or one-off items such as paying for a computer to help you to stay in touch with people who are important to you.

Your local authority will work out how much money you need to meet your eligible care needs. You will have a financial assessment (see 'Financial assessment' on page 6) which will include assessing what you can already afford to pay for. If you do receive a personal budget, the local authority will then provide regular statements to make it clear how much money is being paid towards meeting your needs.

There are several ways that a personal budget can be paid to you and managed. One way is direct payments, where the money is managed by you (or someone else on your behalf) and used to pay for care and support. Many people choose to have the local authority or a care agency manage their budget instead (sometimes called self-directed support or managed care). For more information see factsheet 473, **Personal budgets**.

Financial assessment

Your local authority will carry out a financial assessment to help decide who will pay for your care and support. The financial assessment varies slightly depending on the type of care and support you need. For example, if you are living at home, the assessment will be carried out slightly differently to if you are living in a care home.

The person doing the financial assessment is likely to ask you (or your carer or relative) to complete some forms about your finances and declare that this information is true. Someone from the local authority may also visit to help you to fill in the forms. The Care Act states that if a person is going to receive care and support at a low cost, it may not always be necessary to do a full detailed financial assessment. See 'Light-touch financial assessments' on page 8 for more information.

It can feel like an invasion of privacy when the local authority or its representative is looking over something as personal as your finances. However, it is important to make sure that you are charged the right amount for your care. Remember, if you refuse to answer the financial questions, you could automatically be charged for your care.

The financial assessment form

When completing financial assessment forms, ‘income’ refers to any money you receive regularly, for example, benefits or a pension. ‘Capital’ refers to any other assets you have. This includes savings, investments and in some cases (for residential care) may include the value of your home. You will always be allowed to keep a certain amount of income known as a Personal expenses allowance (PEA) (see ‘Personal expenses allowance’ on page 17).

Capital and income will either be:

- fully included in the assessment
- partially taken into account
- or ignored completely (fully disregarded).

For example, the value of your home might be fully disregarded in certain circumstances. For more information see ‘Property and the financial assessment for care home fees’ on page 14.

If you have a partner, the forms may ask about their finances too. However, once it is decided what belongs to you and what belongs to your partner, the assessment should only take into account the finances of the person who needs care, and no one else’s. See ‘Property and the financial assessment for care home fees’ on page 14 for information on whose finances should be taken into consideration.

If you have joint bank accounts or other assets held jointly, the assessment can only take into account the share belonging to you. It will be assumed that your share is 50% of these joint assets, unless you can show otherwise.

The local authority must provide clear, written information about how much you will pay for your care. This should show clearly what has been taken into account, and regular statements from the local authority should follow.

Light-touch financial assessments

In some circumstances, a local authority may choose to treat you as if you have had a full financial assessment, even if you haven't. This often happens when the local authority is confident the costs of the care or service will be met, based on the evidence they have. This is called a 'light-touch financial assessment'.

The main circumstances in which a local authority might consider carrying out a light-touch financial assessment are:

- if you have significant financial resources, and do not wish to undergo a full financial assessment, but want the local authority to arrange your care. You will then be self-funding, but the local authority must be satisfied that you can afford, and will continue to be able to afford, any charges due. The local authority will usually make a charge for this service
- where the local authority charges a small or token amount for a particular service that you are clearly able to afford, and carrying out a financial assessment would be disproportionate (for example if it requires more resource to do the financial assessment than to provide the service)
- if you receive means-tested benefits which demonstrate that you would not be able to contribute towards your care and support costs.

If the local authority decides to do this it must tell you that a light-touch assessment has taken place, and make it clear that you still have the right to request a full financial assessment if you want to. You might feel this is necessary if there is a dispute about the charges.

Types of care and support that cannot be charged for

The local authority may charge you for care and support services, and for arranging them, but some types of care and support must be free of charge.

These include:

- intermediate care, including reablement for up to six weeks. Reablement is a short period of care where someone is supported to recover after illness or hospital discharge. The purpose is to help people relearn the skills necessary to keep them safe and independent at home
- aids and minor adaptations to the home costing less than £1,000
- after-care or support provided under the Mental Health Act 1983 section 117
- NHS services
- any services that an authority has a duty to provide based on other legislation.

Paying for care and support in your own home

Capital

Most local authorities will charge for care provided in your own home. The amount you pay will depend on the financial assessment, and what a care service costs.

Depending on the financial assessment, a local authority may ask you to contribute a certain amount towards the cost of care, with the local authority paying the rest. A copy of the local authority's charging policy should be available online, or you can ask for it. It will include upper and lower limits for savings and income – known as thresholds. Anyone with savings or income above these amounts is expected to pay for their own care. If your savings or income are below the thresholds, the local authority may contribute to your care.

Importantly, when receiving care at home, the value of your home is disregarded in assessing your contribution towards the cost of this type of care.

In England, there are two threshold limits:

- upper threshold – if the financial assessment shows that your capital is above the upper threshold (£23,250), you will be expected to pay all your own care fees
- lower threshold – if your capital is below the lower threshold (£14,250), this amount will be disregarded and the local authority will pay some of your care fees.

If your capital drops below the threshold, the local authority may start paying for your care, but your income will continue to be used towards it. If you or your carer feel that your savings have dropped below the limit, or are about to, you should contact the local authority to ask for a review of your finances.

Income

The Care Act states that any charges for care must be ‘reasonable’. It says that people receiving care at home should not be expected to live on an income lower than a ‘basic level’.

This basic level is calculated as the income received on Income support or the guarantee credit element of Pension credit, plus an extra 25%. If your income does not exceed this basic level, you should not be charged for care at home, unless you have savings or other assets above the threshold.

Local authorities can decide whether or not to count the following benefits as income in the financial assessment:

- severe disability premium
- Disability living allowance
- Personal independence payment
- Attendance allowance.

If your needs assessment identifies that you need a service during the day, the local authority should not count benefits that you receive for care at night.

For example, if you receive higher rate Attendance allowance, because you need supervision at night, the local authority cannot include this extra amount in the financial assessment if support is only provided during the day.

For more information see factsheet 413, **Benefits for people affected by dementia**.

Your local authority has a legal duty to meet your eligible care needs. If you refuse to pay for homecare, the local authority cannot withdraw the service if you are deemed not to have the mental capacity to make this decision. They would therefore be expected to continue to meet your needs, while attempting to resolve any dispute. However, if you do have the mental capacity to make this decision, and understand its consequences, the local authority is not required to continue to meet your needs if you refuse to pay.

If you feel you have been excessively charged for care by the local authority, you (or your carer) have a right to complain – see ‘Complaints’ on page 21.

Replacement (respite) care

There are many different types of replacement (or respite) care. The aim of replacement care is to meet the needs of the person with dementia, but it can also give rest or relief to unpaid carers.

Types of replacement care include day centres, homecare services, residential stays and breaks for carers to attend a social function or appointment. If you are putting together the support plan jointly with your carer and the local authority, you can discuss these options. Local authorities can choose to charge you for this care, and many do on a means-tested basis.

If you are charged for replacement care services, you may find some financial help locally. It may be worth asking your local authority about local schemes or charitable organisations to help pay for replacement care. Carer break vouchers may be available. These are sometimes given by some local authorities and can be used to pay towards replacement care.

The Care Act makes it very clear that replacement care is to meet your needs, not your carer's needs. You may be financially assessed and it is usually you who pays for the replacement care, even if it is the carer who appears to take the break. For more information see factsheet 462, **Replacement care (respite care) in England**.

Care home fees

The Care Act sets the national rules for paying for care home fees.

In England, there are two capital threshold limits:

- upper threshold (limit) – if the financial assessment shows that your capital is above the upper threshold (£23,250), you will be expected to pay all your own care home fees
- lower threshold – if your capital is below the lower threshold (£14,250), the local authority will pay some of your care home fees.

If your capital is under the lower threshold, then your income will be used to pay for your care, provided you are left with a minimum amount, known as a 'personal expenses allowance' (PEA). For more information see 'Personal expenses allowance' on page 17.

If your capital is between the two thresholds, the local authority may start to contribute towards the care home fees, depending on your income. You must still be left with your PEA.

A person with assets between the two capital limits will pay what they can afford from their income, plus a means-tested contribution from their assets (calculated as £1 per week for every £250 of capital between the capital limits).

Deprivation of assets

If you have an asset that you transfer to someone else to avoid it being used to pay for your care, this is a deliberate deprivation of assets. The local authority can assess you as if you still own the asset. Any attempt not to include an asset in the financial assessment may be seen by the local authority as a deliberate deprivation of assets. Examples of this are transferring money into someone else's bank account, or transferring ownership of a property into someone else's name.

Property and the financial assessment for care home fees

If you own your own home, this may be included in the financial assessment to determine who pays your care home fees.

However, your home will not be taken into account if one of the following people also lives in the property, and will continue to live there after you have moved into a care home:

- a husband, wife, civil partner or partner
- a close relative over the age of 60
- a dependent child
- a relative who is disabled or incapacitated.

If your house is also the permanent home of someone who has been caring for you, for as long as they are living there, your local authority has discretion to decide whether or not to include the value of the home in the assessment. This applies especially in cases where the carer has given up their own home to care for you.

The local authority may also allow the carer to continue to occupy the home while charging the care fees against the home. This is known as a deferred payment agreement (DPA) and it means the fees can be recovered by the local authority when the property is sold.

Where the value of your home is included in a financial assessment, it should not be taken into account for the first 12 weeks of you living in the care home. This is called the '12-week property disregard'. This may mean that, during this time, the local authority will pay or contribute towards the fees. This grace period can enable the family to arrange to sell the home, or speak to the local authority about other options. If the home is not sold after 12 weeks, the local authority can continue to pay the care home fees via a DPA. This means the local authority will claim back the money it has paid in care fees once the home is sold.

Deferred payment agreements

By taking out a deferred payment agreement (DPA), you can ‘defer’ paying the costs of your care home until a later date. The local authority provides funding as a loan but it must be repaid when the property is sold.

An important change brought in by the Care Act is that local authorities can now charge arrangement fees to set up the loan. They can also charge interest on the loan from the day it is set up.

The Care Act states that all local authorities must operate a deferred payment scheme and offer deferred payments to people meeting the criteria for the scheme. A DPA must be offered to you if your property offers adequate security and if:

- your needs are to be met in a care home
- you have less than the upper capital limit (£23,250), excluding the value of your home
- your home is not occupied by a spouse or dependent relative.

It may also be possible to have a DPA to pay for your care and support if you live in a supported living environment (such as sheltered care or extra care housing). If you intend to keep your original home, you may be able to pay for your supported living (care and accommodation rental) from your deferred payment scheme. Permission may be refused in certain circumstances, for example if the value or equity in the property is not enough to cover the loan.

DPAs are a complicated financial transaction, and the local authority should tell you about the scheme and how it works. They should signpost or tell you about written sources of information, advice and advocacy if necessary, and if they feel you might benefit from having a DPA.

In particular, the local authority should:

- consider your potential options if you lose capacity to make decisions, and offer forward planning advice on making arrangements for deputyship, Lasting power of attorney, and help from advocacy
- discuss the importance of planning how to use, maintain and insure your property
- keep you informed about the DPA as it continues with regular written financial statements, and provide necessary information on termination of the agreement.

For more information see factsheet 472, **Lasting power of attorney** and factsheet 530, **Deputyship**.

Price limits and top-up fees for care home places

There is usually an upper limit on how much a local authority will spend on your care home fees. This is referred to as the usual, or standard, rate.

The local authority will normally tell you what their price limit is. Sometimes they will provide a list of care homes in the area within this budget and you can choose from this list. You may find a different care home in the area yourself that is within its budget. For more information see factsheet 476, **Care homes: when is the right time and who decides?**

Under the Care Act, the local authority must offer at least one care home option that meets your needs, but they should offer more than one. If it is not possible to meet your needs within their price limit, they must fund your care in a more expensive care home. No one should be asked to pay a top-up fee, unless the local authority has offered a suitable care home place within its budget that meets your needs, but you (or your carer, deputy or attorney) choose for you to stay in another, more expensive, care home.

They may agree to part-fund your place in a more expensive care home, as long as a third party (such as a relative or a charity) agrees to pay the difference. This difference is between what the local authority would usually expect to pay (based on your care needs and the local authority's price limit) and the extra cost of the more expensive care home. This difference is often referred to as a top-up fee. In some cases this can now be paid by the person with dementia themselves for example, if they are receiving section 117 aftercare under the Mental Health Act.

Top-up fees may be paid to the local authority or to the care home directly. The local authority must ensure that the person paying the top-up is willing and able to meet the additional cost, and enters into a written agreement with the local authority. The agreement should include information about what will happen should fees change, or if circumstances change and fees cannot be paid.

If the top-up fee stops being paid, the local authority may move you to a care home within its budget. This new home must meet your assessed needs. To avoid this disruption, it is important to consider whether it is possible to continue to pay the extra amount for as long as is needed, bearing in mind that this might go up over time.

Personal expenses allowance (PEA)

The personal expenses allowance (PEA) is the minimum amount of money you must be left with each week when you are contributing towards your care costs. You can't be charged so much that you have less than this amount left, to spend as you wish. It is not a benefit, but your own money, made available to you.

There are some circumstances where the local authority can increase the amount of the PEA. If you have an occupational pension being paid to you whilst in a care home, it is possible to pass up to half of this to your spouse or civil partner who remains at home.

You can find out about benefits rates and amounts at alzheimers.org.uk/benefitrates

Benefits and care home fees

Certain benefits, such as the mobility part of Disability living allowance, or Personal independence payment, must not be taken into account in a financial assessment for paying for care. Some other benefits, for example the War widow's pension, should only be partially counted.

Depending on the outcome of the financial assessment, benefits may be affected. If you are fully self-funding, you can still receive some benefits (such as Attendance allowance) – these can help towards paying care home fees. If the local authority is contributing towards these fees, then any benefits you are entitled to will go towards the cost of care (including your state pension, and any other income). In these cases you must be left with your Personal expenses allowance (PEA).

For current rates and amounts go to **alzheimers.org.uk/benefitrates**

It may help to speak to your local Citizen's Advice or Age UK for a benefits check to find out whether financial help is available. Your carer may also find this useful – in areas such as protecting their pension rights, for example.

For more information see factsheet 413, **Benefits for people affected by dementia**.

Care home fees for self-funders

If you are classed as a self-funder and are paying for your own care home fees, you can approach a care home directly and agree the financial arrangements together. However, you may still wish to have a needs assessment by the local authority.

A needs assessment will provide information about the type of care you need, and the options available. This information may help self-funders to decide whether the care home they are considering is appropriate.

If you did not have your needs assessed when you moved into a care home, it is important to make sure an assessment is arranged if it looks as though your savings will reduce so that you reach the financial thresholds. This could mean you'll need local authority funding. The local authority will only help with future care home fees if your money runs out, and if it has assessed you as needing care in a care home. You can ask the care home manager or a carer for help with arranging a needs assessment.

If you are making your own arrangements with the care home, or if a relative is doing this, you need to ensure that you are given a contract detailing the home's obligations and fees. You should be clear about:

- the services that are included in the fees
- what may be charged as 'extras'
- how much notice will be given if fees increase.

If you are assessed as needing to be in a care home and are unable to make the necessary arrangements yourself, the local authority has a duty to make arrangements for you. There will be a cost for this if you are a self-funder.

If you are paying part or all of your own fees, it is important that you are claiming all the benefits to which you are entitled. Your carer or a family member may be able to help you with this.

If the home provides nursing care, you will need to have your nursing needs assessed. The NHS can often fund care provided by a registered nurse (see 'Nursing care costs' below). The care home manager or GP could be asked to arrange this assessment.

Care fees and the Mental Health Act 1983

If you have been in hospital for treatment under section 3 of the Mental Health Act 1983, the local authority and NHS are responsible for providing and funding any related aftercare (section 117 aftercare). This can include any care you need in your own home or in a care home. The purpose of this is to try to prevent readmission to hospital. For more information see factsheet 459, **The Mental Health Act 1983**.

Nursing care costs

In some cases, you may be entitled to receive NHS continuing healthcare funding. This funding from the NHS will cover the full cost of your care, if you are deemed to have a healthcare need, whether in your own home, or in a care home. It is difficult for people with dementia to meet the criteria for eligibility because they are often assessed as having social care needs rather than healthcare needs. This is a complex area, often particularly so for people with dementia, where distinguishing between these two types of care can be very difficult. For more detailed information see booklet 813, **When does the NHS pay for care?**

If you do not qualify for NHS continuing healthcare, you might still be able to receive NHS-funded nursing care contribution because you do have some level of nursing care need. This is only paid if you are assessed as needing nursing care in a care home registered to provide nursing care. The nursing care contribution is a flat weekly amount paid directly to the care home. For the current rate go to **alzheimers.org.uk/benefitrates**

It is also possible to have a higher level of nursing care paid for by the NHS, if you have a joint package of care (joint between the local authority and the NHS). Under these circumstances, some care is assessed as healthcare, therefore NHS-funded, and some is social care and therefore means-tested.

In both of these cases, any social care element may be funded by the local authority and/or yourself, depending on your financial assessment. If you are paying for your own care in a nursing home, you can still be eligible for NHS-funded nursing care contribution. This does not affect your benefits, and should reduce the cost of the care home placement.

The care home should give you a written statement with a clear breakdown of how much of the costs are covered by the NHS, the local authority and yourself. You can ask them for a statement if you have not received one.

Complaints

If you have a complaint, you must try to resolve it with the local authority, NHS body, care home or care company first.

Ask for the local authority, the local NHS clinical commissioning group, or care provider's complaints procedure. If you can't resolve your complaint locally, you may be able to take it to the relevant ombudsman. Funding decisions can be complicated to unravel but your complaint may also relate to delays or omission of information. Some of the organisations listed in 'Other useful organisations' at the end of this factsheet may be able to help.

It can really help to have written records of all your communication. Try to keep written confirmation from your local authority, care provider or NHS body of how agreements have been reached and decisions made.

Frequently asked questions

I was diagnosed with Alzheimer's disease almost a year ago, and it has been difficult to adjust to my diagnosis. At the moment I am managing with most aspects of my life with help from my partner, but I worry that in the future we'd struggle to cope and I'd like to be prepared. How can we know what problems might lie ahead for us?

Receiving a diagnosis is difficult and usually unexpected. It takes time to adjust. You are doing the right thing by trying to plan for the future. We have some helpful information to start this process, including booklet 872, **The dementia guide**. This has information about dementia and the treatments, support and services that are available. You'll find information about how you can live as well as possible with dementia and about making plans for the future. We also have booklet 1510, **Planning ahead** with information about how the law can help you to plan ahead, and how you can express your preferences for the future.

Can I employ a care worker or support worker directly for my mum – who is self-funding – in her own home?

Yes. You can employ a care worker directly for a relative, and this can enable you to choose who you and your mum want and what they will do and when. You will take on responsibilities as an employer. You will need to consider matters such as an employment contract and paying tax and national insurance, as well as pension enrolment and liability insurance. It's also important that you consider cover for holidays or periods of sickness. There are local organisations that can help with these matters and guide you through the process. It might be worth talking about your options with your local authority or one of the organisations listed from page 24.

If you choose to use a company or homecare provider (including for live-in care) you can still take a greater part in deciding on who will be working with your mum and what is needed. The company will manage the employment including things like cover if the worker is ill or on holiday for example.

My dad is moving into a care home and his local authority will be paying for his care. But he now wants to move to a care home near me in a different local authority. What happens now?

It is possible for him to move to a care home near you. His current local authority will still be responsible for paying his care home fees in the new area, up to the point at which the new local authority assumes responsibility. However, it is only obliged to pay for his care home fees up to the limit set for its own area, or for the area he moves to – whichever is lower.

It is important that the local authority he hopes to move to is told about this beforehand and they will then contact the local authority where he currently lives.

Since your father is moving to another area voluntarily, the new local authority will be responsible for meeting his needs and paying for his care once he is considered to be ‘ordinarily resident’ there. The intention is that once everyone agrees about the move, there will be no gaps in the care when the move takes place. The Care Act gives local authorities guidance on how to arrange such moves and avoid disputes about which local authority is responsible.

My mother owns her home and is moving into a care home. We don’t want to sell the house. Can we let it out instead?

Yes. It is possible to let out a person’s house to avoid selling it to pay for care. Your mother would still be classed as self-funding, because the value of the home is still included in the financial assessment. Therefore, it is important that the rental income covers the cost of care, or – if it does not – that there are sufficient funds to cover the difference or an arrangement made with the local authority. Also, be aware that income from rental may be taxable and there will be expenses to consider, such as letting and management costs, insurances, maintenance and income loss when the property is not let. If a deferred payment agreement is used so that the house can be rented out, then extra costs related to the deferred payment will be incurred. The local authority may impose conditions related to the rental arrangements such as tenancy agreements and maintenance. See ‘Deferred payment agreements’ on page 15 for more information.

The organisations listed on page 24 can help with information and advice.

Other useful organisations

Age UK

0800 678 1602 (advice line, 8am–7pm)
www.ageuk.org.uk

Wales – Age Cymru

0300 303 44 98 (advice line, 9am–4pm Monday–Friday)
advice@agecymru.org.uk
www.agecymru.org.uk

Northern Ireland – Age NI

0808 808 7575 (advice line, 9am–5pm Monday–Friday)
advice@ageni.org
www.ageuk.org.uk/northern-ireland

Age UK, Age Cymru and Age NI provide information and advice for older people in the UK.

Carers UK

0808 808 7777 (helpline, 9am–6pm Monday–Friday)
advice@carersuk.org
www.carersuk.org

Carers UK gives advice, information and support about caring. This includes information on paying for care.

Citizens Advice

0800 144 8848 (for England)
0800 702 2020 (for Wales)
www.citizensadvice.org.uk

Citizens Advice provides free, independent, confidential and impartial advice to everyone on their rights and responsibilities. Trained advisers offer information on finances in a way that is easy to understand. To find your nearest Citizens Advice, look in the phone book, ask at your local library or look on the website. Local opening times vary.

Disability Rights UK

0330 995 0400 (general enquiries line)

www.disabilityrightsuk.org

Disability Rights UK is an organisation of disabled people working for equal participation for all.

Elderly Accommodation Counsel (EAC)

0800 377 7070 (advice line)

info@firststopadvice.org.uk

www.eac.org.uk

www.housingcare.org

hoop.eac.org.uk/hooptool

Elderly Accommodation Counsel is a national charity that aims to help older people make informed choices about housing and care. They offer two services. The EAC FirstStop Advice service uses an online questionnaire to help people with housing. This questionnaire is known as the Housing Options for Older People ('HOOP') tool. The EAC also provide advice and guidance via their website HousingCare.org – the site includes a search tool for people to find care homes in their area.

GOV.UK

www.gov.uk

GOV.UK is the website for finding information and services from the UK government, including information about paying for care.

Independent Age

0800 319 6789 (helpline, 8.30am–6.30pm Monday–Friday)

advice@independentage.org

www.independentage.org

Independent Age provides an information and advice service for older people, their families and carers, focusing on social care, welfare benefits and befriending services. They also offer local support, including one-to-one and group befriending schemes.

NHS Help with health costs

www.nhs.uk/using-the-nhs/help-with-health-costs

The NHS website provides information on how you can get help with health costs, including the different phone numbers you can call.

Society of Later Life Advisers (SOLLA)

0333 2020 454

admin@societyoflaterlifeadvisers.co.uk

www.societyoflaterlifeadvisers.co.uk

The Society of Later Life Advisers (SOLLA) is a not-for-profit organisation which can provide information on accredited financial advisers who specialise in later life matters.

This publication contains information and general advice. It should not be used as a substitute for personalised advice from a qualified professional. Alzheimer's Society does not accept any liability arising from its use. We strive to ensure that the content is accurate and up to date, but information can change over time. Please refer to our website for the latest version and for full terms and conditions.

© Alzheimer's Society, 2021. All rights reserved. Except for personal use, no part of this work may be distributed, reproduced, downloaded, transmitted or stored in any form without the written permission of Alzheimer's Society.

Factsheet 532LP

Last reviewed: March 2019

Next review due: March 2022

Our information is based on evidence and need, and is regularly updated using quality-controlled processes. It is reviewed by experts in health and social care and people affected by dementia.

Reviewed by: Jill Manthorpe, Professor of Social Work, Director of the Social Care Workforce Research Unit, King's College London

This factsheet has also been reviewed by people affected by dementia.

To give feedback on this factsheet, or for a list of sources, please email publications@alzheimers.org.uk

People affected by dementia need our support more than ever. With your help we can continue to provide the vital services, information and advice they need.

To make a single or monthly donation, please call us on **0330 333 0804** or go to alzheimers.org.uk/donate

Alzheimer's Society is the UK's leading dementia charity. We provide information and support, improve care, fund research, and create lasting change for people affected by dementia.

For support and advice, call us on **0333 150 3456** or visit alzheimers.org.uk



Alzheimer's Society operates in England, Wales and Northern Ireland. Registered charity number 296645.

