

# Paying for care and support in Northern Ireland



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for everyone living with dementia



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 is for people living in Northern Ireland, as the laws in England and Wales are different. For information about the laws in England see factsheet 532, **Paying for care and support in England**, and in Wales see factsheet W532, **Paying for care and support in Wales**.

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## Contents

<b>1</b>	<b>Who pays for care and support?</b>	<b>1</b>
<b>2</b>	<b>Information and advice</b>	<b>2</b>
<b>3</b>	<b>Health and social care assessments</b>	<b>3</b>
<b>4</b>	<b>Financial assessments</b>	<b>4</b>
<b>5</b>	<b>Direct payments</b>	<b>6</b>
<b>6</b>	<b>Types of care and support that cannot be charged for</b>	<b>7</b>
<b>7</b>	<b>Paying for care and support in your own home</b>	<b>8</b>
<b>8</b>	<b>Care home fees</b>	<b>10</b>
<b>9</b>	<b>Nursing care costs</b>	<b>16</b>
<b>10</b>	<b>Complaints</b>	<b>17</b>
<b>11</b>	<b>Frequently asked questions</b>	<b>18</b>
	<b>Other useful organisations</b>	<b>20</b>

# 1 Who pays for care and support?

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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.

Usually, Health and Social Care (HSC) trusts do not charge for services provided in your home, but there are some exceptions. Whether or not you have to pay depends on what services you need, and your income and assets (such as any savings or shares you have).

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 HSC trust also contributing, or the HSC trust may pay the full cost. Again, this depends on your income and assets, and on your needs. See 'Care home fees' on page 10.

You may also be eligible to receive some financial support to help with nursing care – see 'Nursing care costs' on page 16.

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## 2 Information and advice

People with dementia, carers and families can take control and make informed choices about care and support. However, 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 20.

### Financial advice about paying for care in Northern Ireland

HSC trusts don't have to provide all the information and advice about paying for care themselves, but if they can't, then 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 HSC trust should help you to access it. You can ask for information and advice about understanding care charges, and ways to pay for them.

## 3 Health and social care assessments

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If it looks like you might need care and support, your HSC trust has a duty to carry out an assessment of your care and support needs. This 'health and social care assessment' (assessment of need) should find out specifically what you need help with, and consider the things that are important to you.

The trust may also carry out a financial assessment as part of this process (see 'Financial assessments'). However, the trust cannot refuse to assess your needs because you appear to have enough money to pay for your own care, and many people find this assessment helpful (see 'Care home fees for self-funders' on page 15).

The trust uses the assessment to decide whether you are eligible for support. They will consider the risk to you as a result of your care needs, putting it into one of four categories – low, moderate, substantial or critical. A trust must provide care to people who have been assessed as being at either substantial or critical risk. If you have moderate or low risk, the trust is not legally required to provide you with care or support, but they may choose to. Instead, they should refer you to voluntary sector organisations where support may be available.

For more information see factsheet NI418, **Assessment for care and support in Northern Ireland**.

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# 4 Financial assessments

Your HSC trust may carry out a financial assessment to help decide who will pay for your care and support. The trust may carry out a financial assessment if a person requires social care services in their own home, or a placement in a nursing home or residential care home. Depending on the outcome of the financial assessment, the trust may not make a contribution towards all the services you need.

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 trust may also visit to help you to fill in the forms, or to ask you some questions about your finances.

It can feel like an invasion of privacy when the HSC trust 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. It's worth noting that, if you refuse to answer the financial questions, you could be charged for care that would otherwise have been free.

If you have questions about the financial assessment, ask the person carrying out the interview. Alternatively, the finance department of the HSC trust will be able to help with the process.

## 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) 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 13).

Capital and income will either be:

- fully included in the assessment
- partially taken into account
- 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 11.

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.

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.

Once the assessment has been completed, the HSC trust 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 trust should follow.

## Deprivation of assets

If you have an asset that you transfer to someone else to avoid it being used to pay for your care, the trust 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 trust 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.

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# 5 Direct payments

If your care is being funded by the HSC trust, you can choose to receive this funding in the form of a direct payment. A direct payment is an amount of money the HSC trust gives to someone to spend on meeting their own eligible care and support needs. This is intended to give you greater choice and control over how your eligible needs are met.

Direct payments 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, but these must be things that you have been assessed as needing. The money will be paid into your bank account, and you will then need to keep a record of how the money has been spent.

If someone has been able to consent to receiving direct payments but is not able to manage them because they lose the ability (known as 'mental capacity') to do so, then the trust may continue to make direct payments. This is only if an 'authorised person' is prepared to manage the payments instead.

An authorised person must be prepared to manage the money and the care package on a day-to-day basis on behalf of the person and in their best interests. They must also have the legal authority to do so – for example, if they are the person's attorney under an Enduring power of attorney.

For more information see factsheet NI431, **Direct payments**.



## 6 Types of care and support that cannot be charged for

The trust may charge people for some care and support services, but some types of care and support must be free of charge.

These include:

- reablement (care that can help to restore a person's independence by providing support or helping them relearn daily living skills) for up to six weeks
- NHS services
- any services that a trust has a duty to provide based on other legislation.

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## 7 Paying for your own care and support

HSC trusts can choose when to charge for care and support provided in your own home. If the trust has decided that you need care provided at home, they will then decide whether or not you need to pay for it. How much you pay will depend on the financial assessment and the type of care you need.

Usually, trusts don't charge for services provided in a person's home, but there are some exceptions. These include home help and 'meals on wheels'. The home help service is provided on a means-tested basis. This means that any charges are based on your ability to pay. The trust will take into account your savings and investments before deciding whether you need to pay for the service yourself. People over 75 are not charged, and so they don't need to be financially assessed. A standard charge that is not means-tested is applied to meals on wheels.

The HSC trust can give you further information on charges for services provided at home. If the trust decides to charge for these services, other than home help or meals on wheels, it must first conduct a financial assessment. Any charges must be reasonable, and if you feel they are too high you have the right to complain. See 'Complaints' on page 17.

Your HSC trust has a legal duty to meet your eligible care needs. If you refuse to pay for home care, the trust cannot withdraw the service. They would be expected to continue to meet your needs while attempting to resolve the dispute.

## Respite care

Respite care is temporary care for a person with dementia, which also allows carers to take a break from their responsibilities – it could be just a few hours or for a longer period of time.

Types of respite care include day centres, homecare services, residential stays and breaks for carers to attend a social function or appointment.

The need for respite can be identified as a carer's need, or a person with dementia's need, as part of an assessment of need. HSC trusts must charge for care in some settings (such as residential stays), whereas other types of respite care (such as respite provided in a person's own home) may be free.

If you are charged for respite care services, you may find some financial help locally. Ask your HSC trust about local schemes or charitable organisations to help you pay for respite care.

For more information see factsheet NI462, **Respite care in Northern Ireland**.

## Privately-funded care at home

When a trust carries out a financial assessment, it may decide that you should fund your own care. If this is the case, the trust should give you information on local care agencies you can talk to.

You may already be planning to fund your own care. If so, social services should still carry out an assessment of need if you want them to, to help you understand what kinds of care and support you need.

Local community groups and charities may also be able to help, or provide information about where to go for support or care. Some specialist charities and foundations, especially occupational ones such as those serving in the armed forces, may offer grants.

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# 8 Care home fees

If you need care provided in a residential or nursing home, you may have to contribute towards the cost of your care. This will depend on the value of your assets. They must follow regulations that are explained in the Charging for Residential Accommodation Guide (CRAG), which is available at <https://www.health-ni.gov.uk/publications/guidance-charging-residential-accommodation>

In Northern Ireland, there are two 'capital thresholds' (limits for a person's assets):

- **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 home fees.
- **Lower threshold** – if your capital is below the lower threshold (£14,250), the trust will pay all of your care home fees.
- **If your capital is above the lower threshold but below the upper threshold**, the trust will part-fund your care. This is done on a sliding scale, so the closer to the upper threshold you are, the less the trust will fund.

If you don't have enough capital to fund the total cost of your care, the trust will also assess your income to decide whether you should contribute towards or pay for your care.

Some assets are not included in the financial assessment. These might include:

- half of an occupational or personal pension, so that it can be given to a spouse or civil partner if they are not living in the same care home (provided that it is given to them)
- personal possessions, including jewellery, furniture and ornaments
- life assurance policies
- your home, in certain circumstances (see 'Property and the financial assessment for care home fees').

## 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 people in the following list also lives, and will continue to live, in the property after you have moved into a care home:

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

Who is classed as a relative or close relative is defined in the CRAG document.

If your house is also the permanent home of someone who does not fall into this group but who has been caring for you, your HSC trust has discretion to decide whether or not to include the value of the home in the assessment while they are living there. This applies especially in cases where the carer has given up their own home to care for you.

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 trust will pay or contribute towards the fees. This grace period can enable the family to arrange to sell the home, or speak to the trust about other options.

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### Price limits and top-up fees for care home places

There is usually an upper limit on how much the trust will spend on an individual's care home fees. This is referred to as the 'usual' or 'standard' rate.

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

The HSC trust has a duty to meet your assessed care needs. If it is not possible to meet your needs within their price limit, they must fund your care in a more expensive care home.

If you want to stay in a more expensive care home than the HSC trust would usually fund, they may agree to part-fund a place, as long as a third party (such as a relative, friend or a charity) agrees to pay the difference. This difference is between what the HSC trust would usually expect to pay (based on your care needs and the trust's price limit), and the cost of the more expensive care home. This difference is often referred to as a 'top-up fee'.

No one should be asked to pay a top-up fee, unless the HSC trust 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 home.

The CRAG states that the person with dementia cannot pay the top-up fee themselves. The HSC trust can ask the third party to pay the top-up fee to them, or to the care home directly.

If you agree to a top-up fee arrangement, it is essential to get written agreement from the HSC trust and the care home. The agreement should include information about:

- weekly care fees
- what will happen if any fees change
- what will happen if fees are not paid
- any other charges you may incur – for example, for hairdressing, podiatry or an optician.

If the top-up fee stops being paid, the HSC trust 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, which is protected so you have money available to live on.

There are some circumstances where the trust can increase the amount of the PEA, for example if you are receiving certain benefits.

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### 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, your benefits may be affected. If you are fully self-funding, you can still receive some benefits (such as Attendance allowance), which can help towards paying care home fees.

If the trust is contributing towards these fees, then other 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).

It may help to speak to your local Citizen's Advice or Age NI 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**. For current rates and amounts go to [alzheimers.org.uk/benefitrates](http://alzheimers.org.uk/benefitrates). This page is updated every year.



## 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 might still want to have an assessment of needs by the HSC trust.

An assessment of needs will provide information about the type of care you need and what options are available. This can help you decide whether the care home you 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. This is especially important if it looks as though your savings will go down over time to below the threshold.

If this happens, it could mean you'll need HSC trust funding. The trust 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 make sure that you are given a contract that sets out 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 trust 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 you are entitled to. Your carer or a family member may be able to help you with this.

If you need nursing care in a home, you will need to have your nursing needs assessed. The HSC trust can often fund care provided by a registered nurse (see 'Nursing care costs' on page 16). You can ask the care home manager or your GP to help you arrange this.

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## 9 Nursing care costs

Anyone who moves into a nursing home (a care home that has a registered nurse) should be assessed to see if they qualify for a 'nursing care contribution' from the HSC trust. This is a payment of up to £100 a week that a person who has been assessed as needing nursing care in a care home, and is capable of paying for the cost of their own care, may be eligible for.

This money will be paid directly to the nursing home, so you may see this reflected in your fees. If the home continues to charge a full fee, they should pass the contribution on to you. If neither a reduction in fees nor a payment is offered, ask the home for a breakdown of the costs.

# 10 Complaints

If you have a complaint, you must try to resolve it with the HSC trust, care home or care company first. Ask for the trust or care provider's complaints procedure. If you can't resolve your complaint locally, you may be able to take it to the Northern Ireland Ombudsman (see 'Other useful organisations' on page 20).

It can really help to have written records of all your communication. Try to keep written confirmation from your HSC trust or care provider of how agreements have been reached and how decisions have been made.

Funding decisions can be complicated. Some of the organisations listed in 'Other useful organisations' on page 20 may be able to help you understand the decisions and the process of challenging them.

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# 11 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 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 it can take time for you to adjust to it. However, 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: Living well after diagnosis**. 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.



**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, what they'll do and when. You will take on responsibilities as an employer. You will need to consider things like an employment contract and paying tax and national insurance, as well as pension enrolment and liability insurance. It's also important that you think about what you'll do to cover the care worker's 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 HSC trust or one of the organisations listed on page 20.

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 arranging cover if the care worker is ill or on holiday, for example.



**My husband is going into a home. We have savings in a joint account and own our own property. What should we do?**

When you complete the financial assessment form, remember that the HSC trust is assessing your husband for care, not you. Split the savings in two and set up separate bank accounts. This is because the HSC trust may keep dividing the money in the joint account for assessment purposes, regardless of how much of it has been spent on your partner's care, leaving you with less than your original half. You may want to tell the trust in advance that you intend to split the assets so that your reasons for doing so are documented. While you still live in the property, the trust shouldn't suggest that you move to free up some cash.



**My dad is going into care and they say he needs to sell his house. Can we buy it from him for less than it is worth?**

A sale for less than the property is worth may be treated as a 'deprivation of capital'. This means that the HSC trust may think that your father has deliberately tried to reduce the value of his assets so that he qualifies for care funded by the HSC trust. However, you could rent the property out if the rent meets the cost of the weekly care home bills. Many carers prefer to do this if they want to keep the property in the family.

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# Other useful organisations

**Advice NI**  
**0800 915 4604**  
**advice@adviceni.net**  
**www.adviceni.net**

Advice NI provides independent advice and information on a range of issues including care, support and benefits.

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

Age NI provides information and advice for older people in Northern Ireland.

**Northern Ireland Ombudsman**  
**0800 34 34 24**  
**nipso@nipso.org.uk**

The Northern Ireland Ombudsman is an independent organisation that investigates complaints about government departments, agencies or public bodies and looks for a resolution.

**Patient and Client Council**  
**0800 917 0222 (helpline, 9am–4pm Monday–Friday)**  
**info.pcc@pcc-ni.net**  
**www.patientclientcouncil.hscni.net**

Patient and Client Council offers help and advice to someone making a complaint about health or social care services in Northern Ireland.

**Solicitors for the Elderly**  
**0844 567 6173 (9am–5pm Monday–Friday)**  
**admin@sfe.legal**  
**www.sfe.legal**

Solicitors for the Elderly is a national association of solicitors, barristers and legal executives who are committed to providing legal advice for older people, their families and carers.



Factsheet NI532

Last reviewed: August 2020

Next review due: August 2023

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At Alzheimer's Society we're working towards a world where dementia no longer devastates lives. We do this by giving help to everyone who needs it today, and hope for everyone in the future.

We have more information on **Needing greater support with care.**

For advice and support on this, or any other aspect of dementia, call us on **0333 150 3456** or visit **[alzheimers.org.uk](http://alzheimers.org.uk)**

Thanks to your donations, we're able to be a vital source of support and a powerful force for change for everyone living with dementia. Help us do even more, call **0330 333 0804** or visit **[alzheimers.org.uk/donate](http://alzheimers.org.uk/donate)**



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