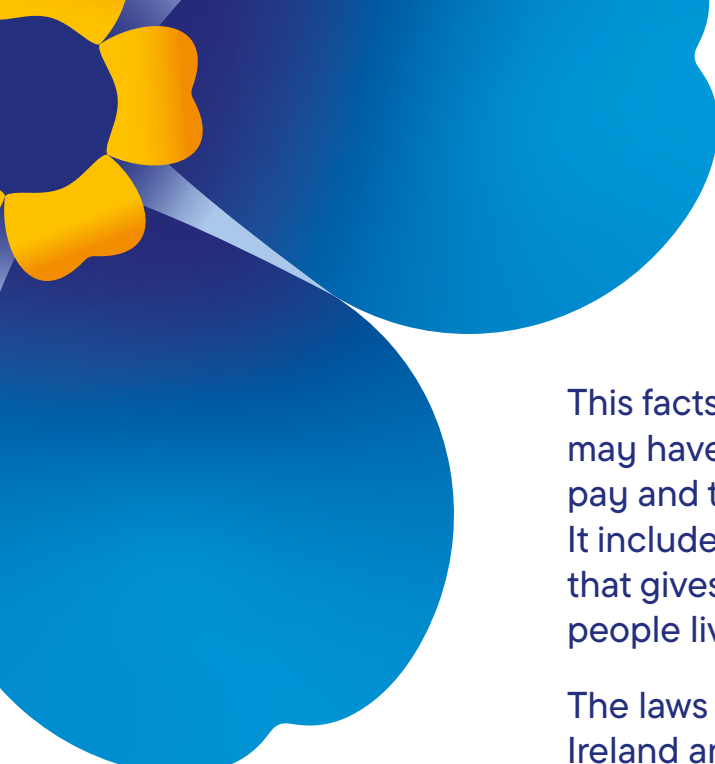


Paying for care and support **in** **Wales**



**Alzheimer's
Society**

Together we are help & hope
for everyone living with dementia



This factsheet outlines types of care and support you may have to pay for. It describes different ways to pay and the amount you might be expected to pay. It includes a section on ‘Frequently asked questions’ that gives information about common situations people living with dementia can face.

The laws on paying for care in England and Northern Ireland are different. See factsheets 532, **Paying for care and support in England**, and NI532 **Paying for care and support in Northern Ireland** for relevant information in these countries.

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1 Who pays?

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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.

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 assets (such as any savings or shares you have). 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 Social Services and Wellbeing (Wales) Act states that charges for care must be 'reasonable'. For more information see section 7 '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 section 9 'Care home fees' on page 12.

You may have all or part of your care funded by the NHS – see section 10 'Nursing care costs' on page 18.

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

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2 Information and advice

The Social Services and Wellbeing (Wales) Act 2014 aims to build on people's strengths, abilities and wellbeing, and to help people to live independently for as long as possible. In order to do this, the Act says that people must have access to good quality information and advice. This can help people with dementia, carers and families to take control and make informed choices about care and support needs now and in the future.

The information and advice that is available should include care and support-related aspects of health, housing, benefits and employment. The information supplied must be available to everyone and you have the right to ask for clear written explanations if you need them. You should also ask for extra information and advice if you need it. For more information see 'Other useful organisations' on page 23.

Financial advice about paying for care in Wales

Local authorities and local health boards don't have to provide all the information and advice 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 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 the ability (known as 'mental capacity') to make decisions 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. For more see factsheet 460, **Mental Capacity Act 2005**.

If you aren't able to understand any information, you may have someone with Enduring or Lasting power of attorney, or a deputy, who can receive the information on your behalf. For more information see factsheets 472, **Lasting power of attorney**, and 530, **Deputyship**.

Independent advocates

If you lack the mental capacity to make decisions about your care and support now, or in the future, you will need someone else to make decisions on your behalf. Often a family member or friend will make these decisions. However, not everyone has someone suitable to support them in this way. If you have substantial difficulty and no one to help, your local authority must provide you with an 'independent professional advocate'. This person will help you to have your voice heard. You may also be offered this service if you have mental capacity but are experiencing significant stress, such as a bereavement.

The Social Services and Wellbeing (Wales) Code of Practice on Advocacy says that local authorities should identify these people as early as possible in the process in case an advocate is required. If you are not able to participate fully in decisions about your care and support and you have no one to help you, the local authority is responsible for providing or arranging for an independent professional advocate to support you.

Family members, friends or volunteers can be a good source of support. However, if this support is not available or unable to help in this way, you will need formal or independent professional advocacy. The role of the advocate is to independently represent the views of the person with dementia, which may in some circumstances vary from the views of their friends and family.

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3 Needs assessments

If it looks like you might need care and support, your local authority has a duty to carry out an assessment of your needs. This 'needs assessment' should find out specifically what you need help with, and 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 W418, **Assessment for care and support in Wales**.

The local authority will then talk to you and your carer (if appropriate) to produce a care and support plan. This will normally be done by a social worker or a care coordinator (they may be referred to as an assessor). They may organise for other professionals to be involved, for example the person's doctor or a nurse. 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 (see section 4 'Financial assessments' on page 5).

The local authority cannot refuse to assess your needs because you appear to have enough money to pay for your own care. You may find this assessment useful as it can help you to work out what type of care you need and what options are available. This can help you to decide whether the services you are considering are appropriate.

4 Financial assessments

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Once your needs have been assessed, 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 slightly different 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. You can ask for help to fill in these forms if needed.

The Social Services and Wellbeing (Wales) Act says that, where a local authority has decided to charge for care and support, it must carry out a financial assessment and determine what the person can afford to reasonably pay, except where a flat rate charge is to be applied. Once the financial assessment is complete, the local authority must provide a written statement.

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 care that would otherwise have been free.

The financial assessment form

When completing financial assessment forms, 'income' refers to 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. 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 12.

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.

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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 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.

You will always be allowed to keep a certain amount of income known as a 'minimum income amount' (MIA) (see 'Minimum income amount (MIA)' on page 15).

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 local authority can still assess you as if you 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.

5 Direct payments

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If your care is being funded by the local authority, you can choose to receive this funding in the form of a direct payment. A direct payment is money that a local authority gives to someone to spend on meeting their own eligible care and support needs. The money can be spent on a wide range of products and services, and is intended to give you greater choice and control over how your eligible needs are met.

Your local authority will work out how much money you need to meet your eligible care needs. You will have a financial assessment (see section 4 'Financial assessments' on page 5) which will include assessing what you can afford to pay yourself. If you do receive a direct payment from the local authority, they will provide regular statements to make it clear how much money is being paid towards meeting your needs.

The local authority cannot refuse to give you a direct payment on the basis that you are unable or unsure about managing one. They must make sure you have the correct level of support that you need to manage your direct payment.

The Social Services and Wellbeing (Wales) Act 2014 allows people to use direct payments to pay for long-term residential care as well as other services. For more information on direct payments see factsheet 473, **Personal budgets**. This mainly deals with the system in place in England, but the information on direct payments is still relevant for Wales.

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6 Types of care and support that cannot be charged for

The local authority may charge people for some care and support services, but some types of care and support must be free of charge. These include, but are not restricted to:

- intermediate care, including 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
- after-care/support provided under the Mental Health Act 1983 section 117 (see 'Care fees and the Mental Health Act 1983' below)
- transport to a day service where the transport is provided as part of meeting a person's needs
- independent professional advocacy where a local authority has arranged it
- any services that an authority has a duty to provide based on other legislation.

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 paying for any related aftercare. This aftercare is provided under section 117 (usually pronounced 'one, one, seven') of the Act. 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**.

7 Paying for care and support in your own home

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Most local authorities will charge for care provided in your own home. How much you pay will depend on the financial assessment and the cost of the care you need.

Capital

The local authority may ask you to contribute a certain amount towards the cost of your care, with the local authority paying the rest. A copy of the local authority's charging policy should be available online – if not, you can ask for it. It will include 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.

In Wales, the threshold for people who are being cared for at home is £24,000 (for 2020/21). If you have more than this in your savings or other capital you will pay for your own care and be completely self-funding, regardless of your income. There is a maximum weekly charge for care services at home in Wales of £100 (2020/21).

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.

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 Social Services and Wellbeing (Wales) Act states that any charges for care must be 'reasonable', and that people receiving care at home should not be expected to live on an income lower than a 'basic level'.

People who receive care and support outside a care home will need to pay their daily living and housing-related costs such as rent, food and utilities, so they must be left with enough money to pay for these things.

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A person paying for their own care at home must be left with a minimum income amount (MIA). It is not a benefit, but your own money which is protected so you have money available to live on. This amount is made up of:

- a 'basic entitlement' (which will be different for each person depending on their circumstances. Your local authority will be able to tell you how much your entitlement is)
- a 'buffer' of 35% on top of the basic entitlement
- an extra 10% of the basic entitlement to pay for any 'disability-related expenditure'.

If your income does not exceed this level once these amounts are added up, 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, but they are usually taken fully or partially into account:

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

If you are assessed as needing 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 they only provide support during the day.

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. In this case, they would be expected to continue to meet your needs while attempting to resolve the 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 charged too much for care by the local authority, you (or your carer) have a right to complain. See section 11 'Complaints' on page 19.

8 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. If you are putting together the support plan jointly with your carer and the local authority, you can discuss what options are available.

Some respite care services may be provided free of charge by the local authority, but many are means-tested. The Social Services and Wellbeing (Wales) Act says that respite care is provided as a service for you rather than your carer, so you may have to contribute towards the cost. The local authority will calculate the cost of the services to be provided and then do a financial assessment to see how much you should contribute to the cost of these services. For more information see factsheet W462, **Respite care in Wales**.

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

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9 Care home fees

The Social Services and Wellbeing (Wales) Act sets the rules in Wales for paying for care home fees.

It sets a capital threshold for people who are in residential care of £50,000. If you have capital above this threshold, you will be required to pay for all of your own care home fees. If you have capital below this threshold, the local authority will pay for your care home fees, though your income may still be used to contribute.

Go to alzheimers.org.uk/benefitrates

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 does not fall into this group but who has been caring for you, your local authority 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.

Another option is for the local authority to allow the carer to continue to occupy the home while charging the care fees against the home. This is done through a deferred payment agreement (DPA), which allows the local authority to recover the fees when the property is sold. For more see 'Deferred payment agreements' on page 13.

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

A deferred payment agreement (DPA) allows a person to defer paying the costs of their care home until a later date. Payment is not written off but it is delayed. The local authority provides funding as a loan against a person's home, which is repaid when the property is sold.

An important change brought in by the Social Services and Wellbeing (Wales) 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 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 capital threshold limit excluding the value of your home
- your home is not occupied by a spouse or dependent relative.

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 complicated, and the local authority should tell you about the scheme and how it works. They should point you to written sources of information, advocacy and independent financial advice, if they feel you might benefit from having a DPA.

In particular, the local authority should:

- consider your options if you lose capacity to make decisions, and offer advice on deputyship, Lasting power of attorney and 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 the information you need when the agreement ends.

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

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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 an individual's care home fees. This is referred to as the 'usual' or 'standard' rate.

The local authority will normally tell you what their 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 also find a different home in the area yourself that is within the local authority's budget. For more information see factsheet 476,

Care homes: when is the right time and who decides?

Under the Social Services and Wellbeing (Wales) 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.

If you want to stay in a more expensive home than the local authority would usually fund, they may agree to part-fund your place, 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'. This is different to top-up fees for additional services.

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 home.

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 if fees change, or circumstances change and fees cannot be paid.

In some cases, a top-up fee can be paid by the person with dementia themselves – for example, if they are receiving section 117 aftercare under the Mental Health Act.

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.

Top-up fees for additional services

Sometimes charges for additional services can also be referred to as 'top-up fees', but they are not the same. Additional costs can be charged to you by the care home for services such as magazine subscriptions, haircuts and manicures. These payments are not to cover the costs of your basic care and are voluntary. You should not be asked to pay for the costs of your basic care using your minimum income amount (MIA), but you can choose to use it for additional services.

Minimum income amount (MIA)

The minimum income amount (MIA – previously the 'personal expense allowance') is the minimum amount of money you must be left with each week when you are contributing towards your care costs in a care home. 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 local authority can increase how much money you are left with. If you have an occupational pension being paid to you while you are 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 threshold amounts at [alzheimers.org.uk/benefitrates](https://www.alzheimers.org.uk/benefitrates). This page is updated every year.

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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 your financial assessment for care home fees. 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.

However, some of these benefits will stop after 28 days if you go into a care home and if the local authority is contributing towards your care costs. Other benefits you are entitled to will go towards the cost of care (including your state pension and other income). In these cases, you must still be left with your minimum income amount.

Go to [alzheimers.org.uk/benefitrates](https://www.alzheimers.org.uk/benefitrates)

It may help to speak to your local Citizens Advice or Age Cymru 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 your own care home fees, you can approach a care home directly and agree the financial arrangements together. If you are a self-funder living at home, you can approach a care provider or agency directly and agree the financial arrangements together for care in your own home. However, you might still want to have a needs assessment from the local authority.

A needs assessment will help you to work out what 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 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 for you, 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 the fees increase.

If they are assessed as needing to be in a care home, self-funders can now ask local authorities to arrange their placement for them. This is not dependent on whether they have mental capacity to make this decision or not.

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 NHS can often fund care provided by a registered nurse (see section 10 'Nursing care costs' on page 18). You can ask the care home manager or your GP to help you arrange this assessment.

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10 Nursing care costs

Some people may be entitled to receive NHS continuing healthcare (CHC) funding. This is funding from the NHS that 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 eligibility criteria because they are often assessed as having social care needs rather than healthcare needs. This is a complex area, particularly for people with dementia, because telling the difference 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 need nursing care but you don't qualify for NHS continuing healthcare, you might still be able to receive the NHS-funded nursing care (FNC) contribution. This is only paid if you are assessed as needing nursing care in a care home that is registered to provide nursing care.

The nursing care contribution is a flat weekly amount paid directly to the care home to cover the additional cost of having a nurse at the home. It will not cover the majority of your fees. 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 (meaning it is paid for jointly by the local authority and the NHS). In this case, some care is assessed as healthcare and is funded by the NHS, and some is social care and therefore means-tested. This may happen if your nursing care need is more than the basic nursing care contribution can provide but you are not eligible for NHS continuing healthcare funding.

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

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 haven't been given one.

11 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 health board, 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.

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 how decisions have been made.

Funding decisions can be complicated. Some of the organisations listed in 'Other useful organisations' on page 23 may be able to help you understand the decisions and the process of challenging them.

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12 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**. 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. See also booklet 1510, **Planning ahead with information about how to plan ahead**, such as appointing a Lasting power of attorney, and telling people what you want to happen in 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'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 local authority or one of the organisations listed on pages 23–24.

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 arranging cover if the care 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. 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. There can sometimes be disagreements between local authorities following a move regarding who should be the funding care. The best way to avoid this is to plan ahead prior to the move. He should tell his current local authority of his plans to move beforehand allowing plenty of time. They should then send over any relevant information from his care and support plan to the new local authority so they can arrange an assessment. If the new local authority has not carried out an assessment by the time your dad moves, they should meet the needs set out in his current care and support plan as far as reasonably possible until an assessment is completed.

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, insurance, maintenance and any income loss for periods when the property is not let.

If you take out a deferred payment agreement 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 13 for more information.

The organisations on pages 23–24 can help you with information and advice on the best option for you.

Space for
your notes

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My husband has been happily living in his care home for two years and self-funds his care home fees. If his savings drop below £50,000 and the local authority has to contribute to his fees, can they move him to a cheaper care home?

Yes, this is possible. Local authorities (LA) have a 'standard rate' they will usually pay to meet someone's care needs. If his current home is above this rate the local authority can ask for a third party top-up fee so that he can remain there (see 'Price limits and top-up fees for care home places' on page 14). You should seek financial advice prior to entering a top-up agreement as they can be unaffordable for many in the long term. Another home would need to be available and be able to meet his needs. He cannot be placed in a home which can't meet his needs just because it is cheaper.

If the LA can't find an alternative home to meet his needs within their 'standard rate', they must pay the top-up amount for a more expensive home. If you or another third party cannot pay the top-up fee, the local authority should carry out a full assessment of your husband's needs.

The local authority must have 'due regard' to the UN Principles for Older Persons when considering a move. They should consider his social and cultural needs and how a move may impact on his health and wellbeing. As he has been there for some time, they should also consider his 'Right to a private and family life' under Article 8 of the Human Rights Act, as he may have developed important relationships within the home. If they still propose a move and you disagree, you could consider making a complaint in writing (see section 11 'Complaints' on page 19). Highlight any issues and where possible include any evidence from professionals involved in his care.

Other useful organisations

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Age Cymru

0300 303 44 98 (advice line, 9am–4pm Monday–Friday)

advice@agecymru.org.uk

www.ageuk.org.uk/cymru

Age Cymru provides information and advice for older people in Wales.

Care Inspectorate Wales

0300 790 0126

ciw@gov.wales

www.careinspectorate.wales

Care Inspectorate Wales regulates, inspects and reviews all adult social care services in Wales.

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, including information on paying for care.

Citizens Advice

www.citizensadvice.org.uk/wales

Your local Citizens Advice can provide information and advice, including on benefits. To find your nearest Citizens Advice, look in the phone book, ask at your local library or look on the website.

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)

www.eac.org.uk

www.housingcare.org

The EAC is a national charity that aims to help older people make informed choices about meeting their housing and care needs. Their housingcare.org site enables people to search for care homes and home care services in their area.

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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 (advice line, 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.

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.

Older People's Commissioner for Wales **03442 640 670** **ask@olderpeoplewales.com** **www.olderpeoplewales.com/en/assistance.aspx**

The Older People's Commissioner for Wales protects and promotes the rights of older people throughout Wales, scrutinising and influencing a wide range of policy and practice to improve their lives.

Society of Later Life Advisers (SOLLA) **0333 2020 454** **admin@societyoflaterlifeadvisers.co.uk** **www.societyoflaterlifeadvisers.co.uk**

SOLLA is a not-for-profit organisation which provides information on accredited financial advisers who specialise in later life matters.



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

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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 **Practical arrangements after diagnosis**.

For advice and support on this, or any other aspect of dementia, call us on **0333 150 3456** or visit **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**



Together we are help & hope
for everyone living with dementia

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