Many people with dementia will need care and support as their condition progresses – often a mix of care from family, friends and professionals. Paid care can take a number of different forms, including personal care at home, help getting dressed or at meal-times, and support to get to work or go shopping. Care may be provided in a person’s own home or in a day centre or care home. In Northern Ireland, these are provided by five Health and social care (HSC) trusts.

This factsheet looks at what services may need to be paid for, the payments the HSC trust can provide for these services, and who is entitled to them. This factsheet is for people living in Northern Ireland, and is not intended for England or Wales, where the laws are different. For information about England see factsheet 532, Paying for care and support in England. For information about Wales see factsheet W532, Paying for care and support in Wales.

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Community care assessment
Help and support services will be arranged through the social services department of an HSC trust. Each trust has a duty to assess the specific needs of people with dementia living in that area who may require support, and to meet these needs. If someone with dementia or their carer feels that they need extra help or support, they can approach the social services department of their trust and ask to have their care needs assessed. This is done by carrying out a ‘community care assessment’, which is used to tell the trust about the help a person needs (for more information see factsheet NI418, Community care assessment). The trust has to carry out this assessment when it appears someone may need services.

Social care needs
Following the community care assessment, the person’s needs are reviewed to decide whether they require social care services. The trust will have criteria that help them to decide if a person’s needs make them eligible for services the trust provides, arranges or pays for through direct payments (see ‘Direct payments’ below). The trust may also carry out a financial assessment as part of this process (see below).

If applying eligibility criteria, the trust will consider the risk to the person as a result of their care needs. The trust considers risk in four categories – low, moderate, substantial and critical. These categories are outlined in regional guidance and are available from the relevant trust upon request.

A trust must provide care to people that have been assessed as being at either substantial or critical risk. If someone has a moderate or low risk, the trust is not legally required to provide care or support but should refer the person to voluntary sector organisations where support may be available.
Financial assessment

A financial assessment is used to work out who should pay for the care and support a person needs. The trust may carry out an assessment to determine how much money they should contribute to a person’s care, and whether the person has to pay anything towards it themselves.

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 services a person may need. However, they will contribute to things like home help and residential care.

The financial assessment usually involves the person or their carer completing some forms about their finances. Someone from the HSC trust may also visit the person to ask questions about their finances and fill in the forms on their behalf.

Some people find it uncomfortable talking about their financial circumstances during this visit. However, it is important to be honest. If you don’t share information, you may end up having to pay for services that would otherwise have been free.

Some of the forms include a space for the partner or spouse of the person with dementia to include their own financial information. However, the HSC trust should only assess the person who actually needs the service. Any joint accounts, investments or savings should be divided, and only the share belonging to the person with dementia should be included on the form.

If you have questions about the financial assessment, ask the person conducting the interview. Alternatively, the finance department of the HSC trust will be able to provide assistance and support with the process.
Care and support for someone in their own home

HSC trusts can choose when to charge for care and support provided in a person's home (known as ‘domiciliary care’). Once it has been decided that a person needs care provided in their own home, the trust will decide whether or not the person will need to pay for it.

Usually, trusts do not charge for services provided in a person’s home, but there are some exceptions. These include the home help scheme and the meals on wheels service. The home help service is provided on a means-tested basis. This means that any charges are based on a person’s ability to pay. The trust will take into account a person’s savings and investments before deciding whether they pay themselves or whether they will get financial assistance to do so. People over 75 are not charged. A standard charge that is not means-tested is applied to meals on wheels.

The HSC trust will be able to provide you with further information on charges for services provided at home. If the trust decides to charge for these services, other than the home help scheme or meals on wheels, it must first conduct a financial assessment (see ‘Financial assessment’ above). Any charges must be ‘reasonable’, and if you feel they are excessive you have the right to complain.

If someone refuses to pay for care in their own home, the HSC trust cannot withdraw the service. The trust has a legal duty to care for vulnerable adults and meet their needs, so it must continue to meet these needs while resolving any disagreement.
Respite care
There are many different types of temporary care for a person with dementia (sometimes known as ‘respite care’) that can help carers to take a much-needed break. This can include day centres, home care services and residential stays for the person with dementia. Respite care can be of benefit to the person being cared for as well as the carer as it allows them to engage in new opportunities.

The need for respite can be identified as a carer’s need, or a cared-for person’s need, as part of a community care assessment. 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 services, you may find some financial help locally. It may be worth asking your HSC trust about local schemes to help fund respite care. For more information see factsheet NI462, Respite care in Northern Ireland.

Direct payments
If a person is receiving care funded by the trust, they may choose to receive the funding in the form of a direct payment. This is money that the trust gives directly to the person to spend on meeting their care needs. The money will be paid into a person’s bank account and they or their carer will need to keep a record of how they have spent the money, which can be on a wide range of products and services. This allows people to make their own choices about their care. For more information see Northern Ireland factsheet NI431, Direct payments.
Privately-funded care at home
When a trust carries out a financial assessment, it may decide that someone should fund their own care. If this is the case, the trust can provide information on local care agencies.

Some people may already be planning to fund their own care. Social services should still provide a community care assessment for these people as this can help them understand what level of support they need.

Local community groups and charities may offer 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.

Care home fees
If a person needs care provided in a residential or nursing home, they may have to contribute to the cost of their care. This will depend on the value of their assets (ie their income and capital – see below for more details on what assets are included). When a person’s capital (eg their savings) falls below a lower limit, the HSC trust will pay for their care in full. If the person has capital or savings above the upper limit, they will have to fund all of their care themselves. If they have capital or savings above the lower limit but below the upper limit, the trust will part-fund their care. This is done on a sliding scale, so the closer to the upper limit a person is, the less the trust will fund. Where a person does not have enough capital to fund the total cost of their care, the trust will also assess their income to decide whether they should contribute towards or pay for their care.
Financial assessment for care home fees
The trust must carry out a financial assessment in order to work out how much someone should pay for care home fees. They must follow regulations that are explained in the Charging for residential accommodation guide (CRAG), which is available at www.dhsspsni.gov.uk/ec-residentialaccommodation

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 the resident passes 50 per cent on to their spouse or civil partner
- personal possessions, including cars, furniture, paintings and ornaments
- life assurance policies
- the resident’s home, if it is occupied by a spouse or civil partner, a relative (as defined in CRAG) who is over 60, or a relative who is incapacitated
- the value of the resident’s home for the first 12 weeks of a permanent move to a care home.

Price limits for care home places
There is usually an upper limit on how much the trust will spend on a person’s care home fees. This is referred to as the ‘standard rate’. The trust will normally tell you what their standard rate is. Often 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 that is within the trust’s budget. For more information and advice on this see factsheet 476, Moving into a care home.

The HSC trust has a duty to meet the assessed care needs of the person with dementia. Therefore, if someone has needs that can only be met in a more expensive care home than the trust would normally pay for, the trust is obliged to fund the person in that home.
Top-up fees
The HSC trust may agree to part-fund a place in a more expensive care home, as long as a third party – such as a relative or a friend – agrees to pay the difference. This difference is between what the HSC trust would usually expect to pay, based on the person’s care needs, and the cost of the more expensive care home. This is often referred to as a ‘top-up fee’. 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 with the HSC trust, the home and the resident. The agreement should include information about weekly care fees, what will happen should any fees change or if fees are not paid, and about any other charges you may incur – for example, for hairdressing, podiatry or optometry.

If, for any reason, the top-up fee stops being paid, the HSC trust may move the person with dementia to a care home within their budget. This new home must still meet the person’s assessed needs. In addition, the trust must consider whether there would be a physical or psychological impact on the resident if a decision is made to move them to a new home. If you are thinking of paying top-up fees, this is something to bear in mind. To avoid this disruption, it is important to consider whether you will be able to continue to pay the fees for as long as is needed.

No one can be forced into paying a top-up fee, so HSC trusts can only seek top-up payments when there is a genuine alternative of a cheaper home that can meet the person’s assessed needs within their budget, but where the person or their carer prefers a more expensive home.
Benefits and care home fees
When the trust is contributing to the cost of someone’s care because they do not have enough capital or income to cover the cost on their own, any benefits that they are entitled to, including their state pension, will be used towards the cost of their care. The resident will be left with some spending money, known as a Personal expenses allowance. This cannot be used to pay for care. It is for the person to spend, or to be spent on the person, for additional things such as having their hair cut, toiletries, treats and presents.

If someone has savings over the trust’s upper limit, and so is funding all of their care themselves, they will still get their pension and their Attendance allowance or Disability living allowance. These can be used to help pay their care home fees. For information on all savings limits visit alzheimers.org.uk/benefitrates

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 the resident may see this reflected in their fees. If the home continues to charge a full fee, they should pass the contribution on to the resident. If neither a reduction in fees nor a payment is offered, you should ask the home for a breakdown of the costs.

The HSC trust has a duty to meet the assessed care needs of the person with dementia. Therefore, if someone has needs that can only be met in a more expensive care home than the trust would normally pay for, the trust is obliged to fund the person in that home.
Private funders
If someone is classed as a private funder and is assessed by the trust as being liable to pay for all of their care home fees, they can approach the care home directly and sort out the financial arrangements themselves. However, they may still wish to have a community care assessment by the HSC trust for a number of reasons.

- The trust can only help with future fees if it has assessed the person as needing care in a care home.
- The assessment will provide information about the type of care needed and the services available. This information may help people who are privately funding decide whether the care home they are considering is appropriate.
- If the person is assessed as needing to be in a care home and is unable to make the necessary arrangements, the HSC trust has a duty to make arrangements for them.

There are other things to note when paying privately for a care home.

- If the person with dementia has not been assessed when they enter a home, make sure an assessment is arranged before their savings get too low.
- If the person is making their own arrangements with the care home, make sure that they are given a contract detailing the home’s obligations and fees. It is important to be sure what services are included in the fees, what may be charged as ‘extras’ (eg podiatry services), and how much notice is given if fees are going to be increased.
- If a person is paying their own fees, make sure they are claiming all the benefits they are entitled to.
- If the home chosen provides nursing care, there should be an assessment of any nursing care needs (see ‘Nursing care costs’ above).
- Some people choose to take financial advice to help them look through their various options.
Complaints

If you have a complaint, try to settle it with the HSC trust or care home first. They should have a published complaints procedure that you can ask to see. If this is not successful, talk the matter through with someone who can advise you on the best way to proceed because funding decisions can be complicated. Some of the organisations listed in ‘Other useful organisations’ at the end of this factsheet may be able to help.

Frequently asked questions

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 spouse 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 wish to advise the trust of your intention to split the assets in advance to ensure that the reasons for doing so are documented. While you still live in the property, the trust should not suggest that you move to free up some cash.

I sold my own home to live with and care for my mum, who is now going into residential accommodation. What will happen to my mum’s house now?

Your mother’s house may automatically be disregarded by the HSC trust when it assesses her financial situation (for instance, if your father still lives there). However, even if the property is not automatically disregarded, the HSC trust can still decide to disregard it, since you have given up your own home to live there and be a carer.
I own half the property in which my grandmother resides, but she is going into care now. What will happen to my share of the property?

This is very complex and will depend upon your individual circumstances. For some, the whole property will not be considered in the financial assessments, whereas for others, half of the property will. In carrying out the financial assessment, the HSC trust will need to consider whether your grandmother can legally sell her share of the property, whether there is a willing buyer for it, and how much they would pay for her share. If the property is sold, you will get half of the proceeds, less the cost of the sale and any outstanding money owed on the mortgage. The HSC trust will then reassess your grandmother, taking into account her half of the money. As this is complex, you may wish to get independent legal advice about your rights (see ‘Other useful organisations’ below).

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.
Other useful organisations

Advice NI
1 Rushfield Avenue
Belfast
County Antrim BT7 3FP

028 9064 5919
info@adviceni.net
www.adviceni.net

Provides independent advice and information on a range of issues including care, support and benefits.

Age NI
3 Lower Crescent
Belfast BT7 1NR

0808 808 7575 (Age NI Advice Service)
info@ageni.org
www.ageuk.org.uk/northern-ireland

Provides information and advice for older people in Northern Ireland.

Health and social care trusts
Belfast HSC trust
Administration Floor
Belfast City Hospital
Lisburn Road
Belfast BT9 7AB

028 9504 0100
info@belfasttrust.hscni.net
www.belfasttrust.hscni.net
Northern HSC trust
Bretten Hall
Bush Road
Antrim BT41 2RL

info@northerntrust.hscni.net
www.northerntrust.hscni.net

South Eastern HSC trust
Ulster Hospital
Upper Newtownards Road
Dundonald
Belfast BT16 1RH

028 9055 3100
public.relations@setrust.hscni.net
www.setrust.hscni.net

Southern HSC trust
College of Nursing
Craigavon Area Hospital
68 Lurgan Road
Portadown BT63 5QQ

corporate.hq@southerntrust.hscni.net
www.southerntrust.hscni.net

Western HSC trust
MDEC Building
Altnagelvin Area Hospital Site
Glenshane Road
Londonderry BT47 6SB

028 7134 5171
info.enquiry@westerntrust.hscni.net
www.westerntrust.hscni.net
The Law Centre
Belfast Office
124 Donegall Street
Belfast BT1 2GY

028 9024 4401
028 9023 9938 (textphone)
admin.belfast@lawcentreni.org
www.lawcentreni.org

Western Area Office
9 Clarendon Street
Derry BT48 7EP

028 7 126 2433
admin.derry@lawcentreniwest.org

The Law Centre provides a legal service in specific areas of law to people on low incomes who live or work in Northern Ireland.

Patient and Client Council
1st Floor, Ormeau Baths
Belfast BT2 8HS

0800 917 0222
info.pcc@hscni.net
www.patientclientcouncil.hscni.net

Offers help and advice to someone making a complaint about health or social care services in Northern Ireland.
Solicitors for the Elderly
Studio 209
Mill Studio Business Centre
Crane Mead
Ware
Hertfordshire SG12 9PY

0844 567 6173
admin@sfe.legal
www.sfe.legal

Independent, national organisation of lawyers who provide legal advice to older people. They can also help you to find a solicitor.

Alzheimer’s Society National Dementia Helpline
England, Wales and Northern Ireland:
0300 222 1122
9am–8pm Monday–Wednesday
9am–5pm Thursday–Friday
10am–4pm Saturday–Sunday

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