

## Factsheet 58

# Paying for temporary care in a care home

May 2017

### About this factsheet

This factsheet covers short-term care homes placements, which can be for various reasons. It could, for example, be for a respite break for you or your carer, a trial period in a care home before deciding whether to live there permanently or short-term rehabilitation provided in a care home post-hospital discharge.

This factsheet explains how a local authority financial assessment for a temporary stay in a care home differs from a permanent placement. The financial assessment is also called a means test. For information about the permanent charging rules, see factsheet 10, *Paying for permanent residential care*.

Factsheet 41, *How to get care and support*, has further information on the social care system.

The information in this factsheet is correct for the period May 2017 to April 2018.

The information in this factsheet is applicable to England. Please contact Age Cymru, Age Scotland or Age NI for their version of this factsheet. Contact details are at the back of this factsheet.

Contact details for any organisation mentioned in this factsheet can be found in the Useful organisations section.

# Contents

<b>1</b>	<b>Recent developments</b>	<b>3</b>
<b>2</b>	<b>Terms and sources used in this text</b>	<b>3</b>
<b>3</b>	<b>Charging choice for temporary residential care</b>	<b>4</b>
<b>4</b>	<b>Assessing your ability to pay for a service</b>	<b>4</b>
4.1	Capital excluding your main property	4
4.2	Income, earnings and on-going expenses	5
4.3	How benefits should be treated	5
4.4	On-going independent living costs	6
<b>5</b>	<b>If temporary becomes permanent</b>	<b>7</b>
<b>6</b>	<b>Short-term rehabilitation in a care home</b>	<b>7</b>
<b>7</b>	<b>Information, advice and advocacy</b>	<b>8</b>
7.1	Complaints, rights and equality	8
	Useful organisations	9
	Age UK	10
	Support our work	10

## 1 Recent developments

This factsheet is based on the *Care Act 2014* and supporting regulations and statutory guidance, introduced in April 2015.

*Local Authority Circular (DH)(2017) 1*, published in January 2017, kept all rates and financial thresholds for care and support charges at the same levels as the previous financial year.

## 2 Terms and sources used in this text

### Care homes

This factsheet provides information about '*care homes*' and '*nursing homes*'. These are two standard terms used by the Care Quality Commission, the industry standards regulator. Nursing homes are care homes where a nurse must be present to provide or supervise medical-type care alongside basic care.

### Guidance and regulations

There are references to the charging regulations and statutory guidance that support the *Care Act 2014* throughout this text ('*the Act*') in this factsheet. These set out how a local authority must administer adult social care. The most relevant regulations are the *Care and Support (Charging and Assessment of Resources) Regulations 2014* ('*the charging regulations*'). The other reference source is the *Care and Support Statutory Guidance 2014* ('*the statutory guidance*'), with Annex F titled '*Temporary and short-term residents in care homes*'.

### Short-term and temporary

The charging regulations state that:

- '**short-term resident**' means a person who is provided with accommodation in a care home for a period not exceeding 8 weeks
- '**temporary resident**' means a resident whose stay is unlikely to exceed 52 weeks.

### Local authority

In this factsheet, references to a '*local authority*' refer to the adult social services department of the local authority or council. It is used to describe similar departments within: a county council, a district council for an area in which there is no county council, a London borough council, or the Common Council of the City of London.

### 3 Charging choice for temporary residential care

If you are placed in a care home by your local authority following an assessment of your needs, it is either on a temporary or permanent basis. This, in turn, affects how you are charged for the service, so you should be informed of your status as early as possible. It should be discussed with you and recorded in your agreed care and support plan.

Local authorities must follow the charging regulations and statutory guidance. These state that if your stay is temporary, they can choose whether to charge you based on the charging rules for permanent care home residents or as if you are still living at home. Annex F of the statutory guidance states that:

*for the first eight weeks a local authority may choose to charge based on its approach to charging for those receiving care and support in other settings or in their own home.*

This is because your stay is intended to last for a limited period of time and the plan is for you to return home.

### 4 Assessing your ability to pay for a service

If you are treated as a temporary or short-term resident and the local authority decides to charge you, it must carry out a financial assessment ('*means test*') in accordance with the charging regulations and statutory guidance.

#### 4.1 Capital excluding your main property

Your main or only home must be disregarded where you:

- intend to return to that property as your main or only home and it remains available to you, or
- have taken steps to sell your home in order to buy one that is more suitable and you intend to return to that property.

Only one property can be disregarded as your main or only home so, in the second point, this would relate to the home being sold or the new, more suitable, home that has been purchased.

Any other capital assets that you own, such as savings, are treated in the same way as for permanent residents. So, for example, the upper capital limit is £23,250. You are deemed to be able to pay the full amount for your care home stay if your capital is above this figure.

For further information see factsheet 10, *Paying for permanent residential care*.

## 4.2 Income, earnings and on-going expenses

Income and earnings are treated in the same way as for permanent residents. This may allow you access to related disregards such as passing on 50 per cent of your private pension to your partner remaining at home.

Any additional amounts you need to maintain your home during your temporary or short-term stay, so that it is in a fit condition for you to return home to, must be disregarded. Such expenses may include: ground rent, service charges, water rates, and insurance premiums.

If the local authority does not ignore enough income to allow you to continue to pay your bills and other unavoidable expenses at home, you can ask for a review assessment or make a complaint to the local authority using its complaints procedure.

### Income protection

If your local authority treats you as if you still live at home for your short-term or temporary care financial assessment, it must follow the non-residential care income protection principles. The main one is that, after applying your charge, your weekly income must not fall below a nationally set level called the '*minimum income guarantee*'.

This figure is significantly higher than the weekly income protection principle that must be applied in permanent residential care, known as the '*personal expenses allowance*'. The local authority decision about how to treat you can therefore have a substantial impact on the income part of your financial assessment.

For more information on the minimum income guarantee, see factsheet 46, *Paying for care and support at home*. For more information on the personal expenses allowance, see factsheet 10, *Paying for permanent residential care*.

## 4.3 How benefits should be treated

If you receive Attendance Allowance (AA), Disability Living Allowance (DLA) care component, or Personal Independence Payment (PIP) daily living component, these should be completely disregarded in the means test. Your local authority should note payment of these benefits is suspended after four weeks of receiving local authority funded residential care. Payments of the mobility components of DLA and PIP should always be disregarded for the means test.

Once you return home, payments of AA, DLA or PIP should resume. However, if you return to a care home within 28 days of your last stay, AA, DLA, or PIP may be affected again. Make sure you tell the office handling your claim if you are going in or out of a care home.

If your stay in a care home is temporary or short-term, any Income Support or Pension Credit you receive should be unchanged, as you are treated as normally living in your own home. However, the severe disability premium or enhanced disability premium is no longer paid if AA, DLA or PIP is been suspended.

Local authorities should ensure a partner at home receives an amount equal to the basic level of Pension Credit *'to which they may be entitled in their own right'* and any additional amounts they are entitled to, according to the statutory guidance. Annex C states that:

*Only the income of the cared-for person can be taken into account in the financial assessment of what they can afford to pay for their care and support. Where this person receives income as one of a couple, the starting presumption is that the cared-for person has an equal share of the income. A local authority should also consider the implications for the cared-for person's partner.*

For temporary or short-term stays, normal Pension Credit rules apply if you are a couple. An example of this is the tariff income rules for any capital you may have as a couple over £10,000. For more information on Pension Credit see factsheet 48, *Pension Credit*.

There are special rules for Income Support and income-related Employment and Support Allowance where one member of a couple enters a care home for a temporary or short-term stay. Annex F states that these should be taken into account in considering what a person can afford to pay. However, it provides no further explanation.

If you receive Housing Benefit, it should be disregarded from your means test because you are still responsible for meeting costs associated with your main or only home.

#### **Note**

DLA is being replaced by PIP. New claimants who would previously have claimed DLA must now apply for PIP. If you presently receive DLA, this continues but you may be re-assessed for PIP in the future. For more information see factsheet 87, *Personal Independence Payment and Disability Living Allowance*.

## **4.4 On-going independent living costs**

Your local authority should disregard other payments you receive to meet the cost of housing and to support independent living when calculating what to charge you. For example, this may include payments to provide warden support, emergency alarms or meeting cleaning costs where you or someone else in your household is unable to manage this.

They should consider whether these payments are sufficient to cover your commitments during a temporary stay. This might be because costs were met from earnings (which are disregarded) that cannot be accrued during the temporary stay. In such cases, the local authority should calculate the additional cost and disregard this amount.

## 5 If temporary becomes permanent

Sometimes residential care is arranged on a temporary or short-term basis, but it then becomes apparent that the person needs to stay there permanently.

If this happens to you, the local authority should apply the financial assessment for a permanent resident from the date your stay becomes permanent. Your care and support plan must be amended to reflect your new status. From this moment, the value of any property you own must be disregarded for 12 weeks, but other capital and income can be taken into account.

Similarly, a stay which was initially assessed as permanent may turn out to be temporary because, for example, you are able to leave the home to return to your own home, to move in with friends or family, or to enter sheltered housing. If so, statutory guidance states you should be treated as temporary from the date of admission for the purposes of charging.

## 6 Short-term rehabilitation in a care home

If your place in a care home is arranged by your local authority as part of a package of short-term rehabilitation, it must be provided free for at least the first six weeks. This is called '*re-ablement*'.

Social care re-ablement can sometimes be confused with a similar NHS service called '*intermediate care*', which is always free of charge because it is a healthcare service. It is therefore important there is no confusion about which body is responsible for your service.

Both these services are not generally designed to last more than 6 weeks, with the average re-ablement time being around two weeks. They are usually provided on discharge from hospital, but can be for other reasons, for example, to avoid hospital admission.

Although it has similarities with NHS intermediate care, re-ablement is generally focussed on lower level or less complex social care-type needs. It aims to increasing confidence, function ability and reduce risks.

For further information see factsheet 76, *Intermediate care and re-ablement*.

## 7 Information, advice and advocacy

Your local authority must deliver information and advice to everyone who needs it under the Act. This must cover the following areas:

- the local care and support system and how it operates
- the choice of types of care and support and the choice of providers available to those in the authority's area
- how to access the care and support that is available
- how to access independent financial advice on matters relevant to the meeting of needs for care and support
- how to raise concerns about the safety or well-being of an adult who has needs for care and support.

### Your right to independent advocacy

You should be assisted to play as active a role as possible in your assessment, identification of needs and the care planning procedure. If you have difficulty engaging with the process and have no one to help you, you may have a right to have an independent advocate to assist you. The statutory guidance states that this right is triggered if you have substantial difficulty:

- understanding the relevant information
- retaining that information
- using or weighing that information as part of the process of being involved
- communicating your views, wishes or feelings (whether by talking, using sign language or any other means).

An appropriate person must be provided by the local authority to fulfil this role.

### 7.1 Complaints, rights and equality

Your local authority must promote your human rights and equality under legislation. It must also work to maximise your wellbeing and dignity under the Act and act in your '*best interest*' under the *Mental Capacity 2005* if you have lost mental capacity.

You should be provided with information and advice about how to complain if you are not satisfied with any element of the service that you are provided with. For more information see factsheet 59, *How to resolve problems and complain about social care*. See factsheet 78, *Safeguarding older people from abuse and neglect*, if you have any concerns about this during your care home placement.



## Useful organisations

### Care Quality Commission

[www.cqc.org.uk](http://www.cqc.org.uk)

Telephone 03000 616 161 (free call)

Independent regulator of adult health and social care services in England, covering NHS, local authorities, private companies or voluntary organisations and people detained under the *Mental Health Act*.

### Carers UK

[www.carersuk.org](http://www.carersuk.org)

Telephone 020 7378 4999

Provides information and support for carers, including information about benefits.

### EAC FirstStop Advice

[www.firststopcareadvice.org.uk](http://www.firststopcareadvice.org.uk)

Telephone helpline 0800 377 7070 Mon 8am–7pm, Tues– Fri 8am–6pm

Provide information on housing options for older people and signposts to relevant advice organisations.

### Equality Advisory Support Service

[www.equalityadvisoryservice.com](http://www.equalityadvisoryservice.com)

Telephone helpline 0808 800 0082 Mon-Fri 9am-7pm, Sat 10am-2pm

Funded by the Equality and Human Rights Commission, the EASS Helpline provides information and advice about the *Equality Act 2010*.

### Independent Age

[www.independentage.org](http://www.independentage.org)

Telephone helpline 0800 319 6789 Mon-Fri 8am-8pm, Sat-Sun 9am-5pm

A charity providing free impartial advice on benefits, home care, care homes and NHS services for older people, their families and professionals.

## Age UK

Age UK provides advice and information for people in later life through our Age UK Advice line, publications and online. Call Age UK Advice to find out whether there is a local Age UK near you, and to order free copies of our information guides and factsheets.

### Age UK Advice

[www.ageuk.org.uk](http://www.ageuk.org.uk)

0800 169 65 65

Lines are open seven days a week from 8.00am to 7.00pm

### In Wales contact

#### Age Cymru

[www.agecymru.org.uk](http://www.agecymru.org.uk)

0800 022 3444

### In Northern Ireland contact

#### Age NI

[www.ageni.org](http://www.ageni.org)

0808 808 7575

### In Scotland contact

#### Age Scotland

[www.agescotland.org.uk](http://www.agescotland.org.uk)

0800 124 4222

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### Next update May 2018

The evidence sources used to create this factsheet are available on request. Contact [resources@ageuk.org.uk](mailto:resources@ageuk.org.uk)

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