

A Guide to improving the lives of older people across Suffolk

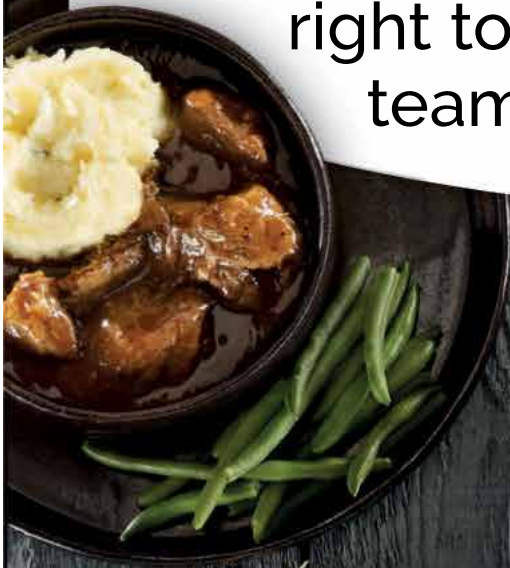




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About Age UK Suffolk

Age UK Suffolk is a local, independent charity, working with and for older people across Suffolk, ensuring that where needed, people have access to vital and sometimes life-changing services and support to make a difference to them in later life.

Everything that we do is centred around improving the lives of older people across Suffolk – we do this through a range of services and support that provide the following:

- offering free, confidential & impartial help
- a helping hand at home
- friendship to combat loneliness
- time out of the house for those living with memory problems

These core services are underpinned by a community links scheme that enables us to engage at a grass roots level with individuals, groups and organisations in the communities in which they live – making sure that everyone knows where to turn when they may need information, advice, help or support alongside giving older people a voice on the issues that are important to them.

We have a network of volunteers working across many of our service areas, ensuring that we reach and support as many older people as possible.

As an organisation, we have achieved the Age UK Charity Quality Standard, Age UK Information & Advice Quality Standard, are a Disability Confident employer and all staff are Dementia Friends.



Improving the lives of older people across Suffolk

Age UK Suffolk

A message from our Chief Executive Officer

It gives me great pleasure to share with you our first Guide to improving the lives of older people across Suffolk.

As a local, independent charity, we are committed to working with and supporting the older population of Suffolk, their families and carers to ensure that everyone can be assured of a later life that is the best that it can be. We know that everyone's circumstances are different, and that these can change very quickly and we want to be here to help and support if and when this happens. We truly believe that everyone should know where to turn and that all people should feel valued, respected and safe.

At a time of great change, both in the country and at a more local level, we are committed to talking about the issues that older people can face and what impact it can have on their daily lives. All of our teams are committed to ensuring that we provide the very best support and care in all areas of their work, always putting the older person first.

We hope that you find this Guide informative and would urge you to get in touch if you think that we may be able to help you, or someone you know.



Andrew Gardner

Chief Executive Officer – Age UK Suffolk

1:10

One in ten people aged 65+ in Suffolk say that they are often or always lonely

33%

By 2037, 1 in 3 of the population of Suffolk will be aged 65 or over

£3,008,773.00

We achieved a benefits gain for our clients

35,357

The number of hours of friendly, reliable and trusted support provided to people in their own homes

239

People benefitted from digital inclusion training through our tablet course

68

People living with dementia enjoyed support through the Chilton Club providing time out of the house and respite

It's Time to Talk

Countywide befriending service



Everyone deserves to have someone to talk to.

In Suffolk, 1 in 10 people aged 65 or over, say that they are often or always lonely. Our befriending services offer a lifeline to many older people, who without this, may not speak to anyone for days, weeks or even months.

What is the Befriending Service?

The befriending service is free and connects older people with volunteers who telephone them on a regular basis for a friendly chat. The aim of the service is to reduce social isolation and to help make life more fulfilling.



“Without my weekly calls I would be a lost soul.”

With telephone befriending, one of our volunteers will ring, usually on the same day at the same time, for about 20-30 minutes per week. We do not give our volunteer your address and telephone befrienders are not allowed to visit your home, or you theirs.

In addition, we also provide a home visiting service in certain areas. One of our volunteers will visit for approximately one hour, on the same day and the same time every week.

Who can receive this service?

The befriending service is available to people in Suffolk aged 60 and over who consider themselves to be lonely or isolated - unfortunately we cannot provide this service to older people with a diagnosis of dementia or with complex mental health needs.

Whilst many of those using the befriending service live alone, we can also provide befriending to people who live in care settings. We also provide a telephone befriending service to family carers.

Who are the Befrienders?

All our befrienders are volunteers who come from a range of backgrounds and have been carefully selected. The volunteers are supported by a team of Age UK Suffolk staff. All befrienders are covered by Age UK Suffolk's insurance.

How does the service work?

You may have referred yourself to us or had someone such as a family member, friend or health/social care professional refer you to befriending. After receiving your referral the coordinator will ring you to have a chat and explain about the service.

Using information given by you, you will be matched with a suitable befriender. We will then contact both parties to ensure that a satisfactory match has been made.

Contact will then be arranged between yourself and the befriender, who will be expected to make regular contact (usually once a week) as this helps to build friendship and trust.



“My befriender brings a ray of sunshine to my life.”

Communication & support from your co-ordinator

We will call you on a regular basis to make sure that the match is going well and to check whether you have any problems or concerns.

We ask all our befrienders to respect your confidentiality but to raise any concerns they may have with the co-ordinating team.

If we were to receive information suggesting a befriending client was being ill-treated or abused, we would liaise with the local safeguarding team to ensure their wellbeing.



If you would like to find out more about how to receive a Befriending Service, please contact **01473 353061/353071** or email **befriending@ageuksuffolk.org**

Information & Advice Service



It can be daunting not knowing where to turn for help and advice when circumstances change.

The Age UK Suffolk Information and Advice Service is a free, impartial and confidential service for older people and their family carers, wherever you live in Suffolk.

What sort of Information & Advice can you help with?

Our team of friendly, trained advisors take calls from older people and their families on a huge range of different areas including welfare rights, benefits and signposting to a range of support services to meet your needs.



“Living where I do in a small hamlet with no shops, I now feel able to have a taxi if I want to. I have no transport, have just lost my husband and son, 10 days apart and I feel that I can join things and be more independent”

Can you help with Benefits Advice?

Benefits advice is available to those over state retirement age. We have fully trained benefits advisors who can help you over the telephone with enquiries about eligibility for benefits. We can also offer face to face appointments at our Claydon office.

Can I access free legal advice?

We work with a number of Suffolk based legal practices to offer older people free legal advice for initial consultations. For full details of participating solicitors, please visit www.ageuksuffolk.org or call our Information & Advice line on 01473 351234.

How much does it cost?

Our Information & Advice service is free of charge. There are some supplementary services that may incur a small fee but this will be fully explained to you.

When can I call?

Our Information & Advice Line is open 9am – 1pm, Monday to Friday. Outside of these hours, calls are diverted to Age UK’s national helpline, who can offer you helpful information and advice too.

If you would like to speak to an Information Advisor, please contact **01473 353061/353071** or email enquiries@ageuksuffolk.org

Time out of the house



One of our core aims at Age UK Suffolk is to ensure that we can offer time out of the house for people living with memory problems.

At our specialist dementia day centre in Sudbury, The Chilton Club, we do just that, providing a lifeline to not only the person living with memory problems, but also their family carer.

Dementia can be difficult to come to terms with, whether you are affected or have a family member or friend with dementia. The key to living well with dementia is having access to the right information at the right time and this is how we can help.

What do you do at The Chilton Club?

Members of The Chilton Club in Sudbury can choose to participate in the daily leisure activities and events, doing as much or as little as they wish, meet others, make new friends and enjoy a freshly cooked meal in a friendly and welcoming atmosphere.

When is The Chilton Club open?

The Chilton Club is open Monday – Friday from 9am – 3pm.

Do you provide any support at weekends?

We also have a Saturday Club which is aimed at people who have just received a dementia diagnosis – providing support and advice to you and your family. There is a small charge for the Saturday Club.

Benefits & Funding

Our service is available to those people who self-fund and a free taster day can be arranged. Many of the people attending The Chilton Club have care needs which have been assessed by Suffolk County Council and therefore may be eligible for sponsorship by the County Council.

Our specialist Information & Advice team may be able to advise on funding options and can be contacted on 01473 351234.

Dementia Friends

All of our staff are Dementia Friends and we also have Dementia Champions within the organisation who can provide training to new staff members and to other associated groups. We believe passionately that this is something that everyone needs to be aware of and this underpins all of our work, across all our departments.

For more information about The Chilton Club and our specialist dementia services, call **01787 376990** or email **chilton.daycare@ageuksuffolk.org**

Home Help & Companion Service



Staying independent in your own home can be very important for many people and is also something that many people worry about as they get older.

We aim to help you stay independent in your own home when daily tasks such as housework and shopping may become more difficult.

What sort of jobs can your Home Helps help with?

Our Home Helps support older people with a range of services from housework and shopping to companionship, both in and outside the home. This could include general housework, food preparation, laundry, ironing, shopping and prescription collection.

Do you provide personal care?

We do not provide personal care.

What does your companionship service provide?

Our Companionship Service provides companionship in the home, assistance outside your home to attend appointments, or to just get out and about.

How much does your Home Help service cost?

Our Home Help & indoor companionship charge is £16.50 per hour with outdoor companionship at £17.50 per hour*. Our Information & Advice team may be able to assist with claiming benefits that could help you to pay for additional support.

Never Walk Away

What makes our service different is our unique Never Walk Away safety policy.

Should any of our clients be in difficulty, or fail to answer the door, our fully trained Home Help will follow an agreed emergency plan and will not leave until we know that the client is safe.

The health and wellbeing of our clients is at the heart of everything we do, giving reassurance to both clients and their families.

* Prices correct at the time of print and are subject to an annual price review.



“Justine is a home help in the widest sense of the words – she notices things and helps with them, and her contribution helps a lot with running mum’s house and enabling her to remain at home”.

**For more information about our Home Help service,
call 01473 357070 or email home.help@ageuksuffolk.org**

Community Links



Age UK Suffolk in your community - Community Links

We are committed to working with older people in their own community.

When circumstances change, it's important to know where to turn for help and advice. By working within our communities, the services and support that we can offer to individuals and their families will be more visible and accessible, enabling us to be there to support people when they need it.

Our community projects include:

Pop Up Chinwags - Pop Up Chinwags are monthly social groups in community settings, providing friendship, entertainment and refreshments. They usually run for two hours either in the morning or afternoon, depending on the location and are free of charge to attend. The groups are open to anyone aged 65+, and are all dementia friendly. There are always plenty of people to chat to, lots of cups of tea, refreshments and entertainment. The groups also offer people the opportunity to

chat to our team members and find out about other activities, support and services that may be of benefit.

“On that first Chinwag afternoon in April, I remember walking in feeling very anxious and nervous. This was the first time I'd joined anything in Ipswich on my own. No sooner had I got in the door and was looking around for somewhere to sit, then I spotted Geri. I asked if I could join her. She said ‘yes’ and we hit it off straight away. It's the banter which I love so much; I had missed that. We talked and talked, and the time sped by. I haven't looked back. It's been brilliant.”

Tablet Courses - Through a partnership with Realise Futures, we deliver regular ten-week courses (two hours per week), to help older people to get to grips with tablet technology – learning how to use email, shop and bank online and keep in touch with family who may be further afield. These courses include the provision of a free* tablet in a variety of locations across the county.

* £25 donation to Age UK Suffolk

Community Links Volunteers

With an ageing population, we are more aware than ever that our rurality can create barriers to social inclusion. We are committed to ensuring that every older person should know where to turn, or have someone to talk to, if and when they need to. Our Community Link volunteers work with us to spread the word of Age UK Suffolk, tell older people about the services and support that may be available to them, chat to people- at groups that are within their communities, and importantly, to tell Age UK Suffolk about the issues and topics that are important to older people.

To find out more about our Community Links work, call **01473 298683**
or email community.links@ageuksuffolk.org

Staying physically active

Keeping physically active improves your health and quality of life, and can also help you to live longer. It's never too late to start doing some exercise.

Health benefits

Physical activity means anything from everyday tasks, like cleaning the house, heavy gardening or walking the dog. Or specific exercise like keep fit, swimming, golf, football, gym-based activity or tennis. The best type of activity is one that makes you feel slightly warmer and breathe a bit heavier, getting your heart and pulse pumping faster than usual.

Some of the benefits of keeping active include:

- a reduced risk of developing a life-threatening disease
- a greater likelihood of maintaining or reaching a healthy weight
- a greater sense of well-being
- improved sleep and increased day-time vitality
- stay independent
- have a healthy heart
- reduce falls
- keep up with children you know
- meet people and share the company of others
- feel happier and keep your brain sharp
- age better

If you stay physically active, you're also likely to stay independent longer. Exercise can make you stronger. You'll feel more confident and involved in life.

Remember, before beginning a new exercise regime, it's a good idea to talk to your doctor first. Your GP is also a good place to start to learn about exercise for your health.

The risks of physical inactivity Inactivity puts you at greater risk of:

- heart disease
- some cancers
- diabetes

- osteoporosis, leading to fractures (half the number of hip fractures could be avoided with regular physical activity)
- obesity and related health problems

Getting started

If you haven't done any exercise for years - and it's estimated that four out of 10 people over 50 do little or no exercise - then start gently and build up gradually.

If you're exercising for the first time or are unsure if you should try a particular activity, talk to your GP.

Experts recommend thirty minutes of moderate exercise a day at least five times a week. It can be all in one half-hour, or split into three periods of ten minutes or in smaller bouts of

activity throughout your day.

A good starting point may be to begin with a short five-minute brisk walk in your local park. Then build up gradually, increasing slowly to the full 30 minutes over a number of weeks. Walking is great for your health. There are walking groups open to different ages around the country.

Age guidelines

There is no reason to give up a sport or exercise you enjoy just because you are getting older. You should aim to do at least 30 minutes of moderate physical activity five or more times a week. Even if you haven't been particularly athletic at a younger age, there are many benefits of improved fitness as you get older. Remember to keep moving and retain your mobility and flexibility through daily activity as well.

If you're in your 80s or 90s, regular, gentle exercise can help retain muscle strength and improve mobility. Through daily activity you can retain mobility and flexibility.

There is no reason to give up a sport or exercise you enjoy just because you are getting older. You should aim to do at least 30 minutes of moderate physical activity five or more times a week.



Daily activities

It's easy to boost your physical activity without making huge changes to your lifestyle. You can begin by incorporating it into your everyday life with little effort or planning. You can:

- walk upstairs - don't use the lift or escalator
- get off the bus or train a stop or two earlier to walk home or to work
- spend more time enjoying active interests, like gardening or golf
- leave the car at home more
- clean the car by hand
- vacuum the house
- use email less and walk to talk to people in your office
- play movement games with children you know – children can always come up with great ideas
- take a walk with friends rather than sitting with them for a chat
- move around the house, for example every time you make a cup of tea, walk up the stairs while the kettle boils or the tea brews

Organised activities

There are lots of other ways to stay fit. You could take up a weekly Tai Chi class, play bowls, go swimming, ramble or cycle.

In some areas, your local council might offer free or cut-price gym-based exercise at the local sports or leisure centre.

How much activity is enough?

Try to be active for 2 hours each week and do activities to improve muscle strength at least twice a week." A little activity every day (a 'daily dose') can make a big difference.

Remember:

- routine activities like carrying the washing or shopping can help improve muscle strength
- regular walking can improve your health
- go at your own pace
- listen to your body
- Little and often, preferably in short periods of at least 10 minutes - all the little periods of activity add up

Physical activity guidelines for older adults

How much physical activity do older adults aged 65 and over need to do to keep healthy?

To stay healthy or to improve health, older adults need to do two types of physical activity each week: aerobic and strength exercises.

Guidelines for older adults aged 65 and over

Older adults aged 65 or older, who are generally fit and have no health conditions that limit their mobility, should try to be active daily and should do:

- At least 150 minutes of moderate aerobic activity such as cycling or walking every week, and strength exercises on two or more days a week that work all the major muscles (legs, hips, back, abdomen, chest, shoulders and arms).
- 75 minutes of vigorous aerobic activity such as running or a game of singles tennis every week, and strength exercises on two or more days a week that work all the major muscles (legs, hips, back, abdomen, chest, shoulders and arms).

OR

- A mix of moderate and vigorous aerobic activity every week. For example, two 30 minute runs, plus 30 minutes of fast walking, equates to 150 minutes of moderate aerobic activity, and strength exercises on two or more days a week that work all the major muscles (legs, hips, back, abdomen, chest, shoulders and arms).

A rule of thumb is that one minute of vigorous activity provides the same health benefits as two minutes of moderate activity.

You should also try to break up long periods of sitting with light activity, as sedentary behaviour is now considered an independent risk factor for ill health, no matter how much exercise you do. Find out why sitting is bad for your health. Older adults at risk of falls, such as people with weak legs, poor balance and some medical

conditions, should do exercises to improve balance and co-ordination on at least two days a week. Examples include yoga, tai chi and dancing.

What counts as moderate aerobic activity?

Examples of activities that require moderate effort for most people include:

- walking
- water aerobics
- ballroom and line dancing
- riding a bike on level ground or with few hills
- playing doubles tennis
- pushing a lawn mower
- canoeing
- volleyball

Try the aerobic video workouts in the NHS Fitness Studio.

Moderate activity will raise your heart rate and make you breathe faster and feel warmer. One way to tell if you're exercising at a moderate level is if you can still talk, but you can't sing the words to a song.

Daily chores such as shopping, cooking or housework don't count towards your 150 minutes, because the effort isn't enough to raise your heart rate, but they are important nonetheless, as they break up periods of sitting.

What counts as vigorous aerobic activity?

There is good evidence that vigorous activity can bring health benefits over and above that of moderate activity.

Examples of activities that may require vigorous effort for most people include:

- jogging or running
- aerobics
- swimming
- riding a bike fast or on hills
- tennis
- football
- hiking uphill
- energetic dancing
- martial arts

Try the aerobic workout videos in the NHS Fitness Studio.

Vigorous activity makes you breathe hard and fast. If you're working at this level, you won't be able to say more than a few words without pausing for breath.

In general, 75 minutes of vigorous activity can

give similar health benefits to 150 minutes of moderate activity.

What activities strengthen muscles?

Muscle strength is necessary for:

- all daily movement
- building and maintaining strong bones
- regulating blood sugar and blood pressure
- maintaining a healthy weight

Muscle-strengthening exercises are counted in repetitions and sets. A repetition is one complete movement of an activity, like a bicep curl or a sit-up. A set is a group of repetitions.

For each strength exercise, try to do:

- at least one set
- eight to 12 repetitions in each set

To gain health benefits from strength exercises, you should do them to the point where you find it hard to complete another repetition.

There are many ways you can strengthen your muscles, whether at home or in the gym. Examples of muscle-strengthening activities include:

- carrying or moving heavy loads, such as groceries
- activities that involve stepping and jumping, such as dancing
- heavy gardening, such as digging or shovelling
- exercises that use your body weight for resistance, such as push-ups or sit-ups
- yoga
- lifting weights

You can do activities that strengthen your muscles on the same day or on different days as your aerobic activity – whatever's best for you.

Muscle-strengthening exercises are not an aerobic activity, so you'll need to do them in addition to your 150 minutes of aerobic activity.

Some vigorous activities count as both an aerobic activity and a muscle-strengthening activity.

Examples include:

- circuit training
- running
- rugby
- hockey
- aerobics
- football
- netball

It is always best to discuss your options with your GP or health profession when planning to engage in any exercise regime.

Keeping mobile and preventing falls

There's a lot you can do to maintain your mobility and independence as you age. You can take steps to improve safety and prevent falls.

Who is at risk?

About one third of people over 65 fall each year, with higher rates for over 75s.

Up to 20 per cent of falls require medical attention. Falls make up half of the hospital admissions for accidental injury, especially hip fractures.

Half of the falls reported by older people follow a trip or an accident. Some 90 per cent of hip fractures are caused by a fall.

Around 50 per cent of falls are preventable.

Assessing your level of risk

There are things to look out for that can help you, your family or carers know whether you are at risk of having a fall. To find out what the risks are, you can ask for a falls risk assessment at your GP's surgery or at a specialist clinic.

The falls assessment aims to discover anything that might cause you to fall and highlights specific things that can be done to help.

Following the assessment, the doctor or nurse will prepare a plan for you to help reduce your risk of falling in future.

You should ask your GP for more information if you think you need an assessment.

Make your home safer

There are changes you can make at home that will help you to prevent falls, like installing hand rails to keep you steady in the bathroom or out in the garden.

Exercise is one of the best ways to prevent falls, as well as making you more confident and able to enjoy life.

Some organisations, for example, your local Council, Housing association or a local private community alarm provider may offer a 24-hour community alarm service.

The service provides help and reassurance in an emergency to people who are elderly and at risk of falls. You can keep your alarm with you at all times as a pendant around your neck or on your wrist.

If you fall you press the button on the pendant to activate a separate alarm unit. This alarm unit has a powerful microphone and loud speaker, letting you talk to a member of staff who will get help.

You might also consider the option of sheltered housing, where you maintain your independence but have background support when you need it.

Keeping yourself steady

To stay firmly on your feet, a few simple changes - like making sure stairs are kept clear and well lit - can make all the difference and keep you mobile.

What to do if you have a fall

Try not to panic, but get help by making a noise like banging or shouting, using your personal alarm or dialling 999.

- make sure you keep warm, even just by tensing your arm and leg muscles
- wrap yourself with anything warm to hand

Afterwards, it's important to tell your doctor what's happened - that way you can receive the correct medical assistance.

Volunteering may boost mental wellbeing in older adults

“Giving up time for charity work found to boost mental wellbeing as people get older,” the Mail Online reports. A new UK-based study found that volunteering was associated with increased mental wellbeing; but mainly in adults aged between 40 and 70.

Researchers found that, generally, people’s health and mental wellbeing score got worse as they got older. However, when people got over the age of 40-45, while scores generally continued to get worse for those who never volunteered, they got better for those who did any volunteering.

The study’s main limitation is that this can’t prove cause and effect, or tell the direction of the relationship. People who volunteer may have better health scores because those who feel healthy, active and in a good state of wellbeing are more likely to go out and volunteer to help others than those who feel in poor health. It’s not necessarily the case that the reverse is true; that volunteering has caused the good health state.

It could be that the association works both ways – better wellbeing probably makes you more inclined to help others, and helping others probably boosts your sense of wellbeing.

The demand for volunteers remains high and there is always somebody you can help or something you can do to make the world a better place. Read more about options for volunteering, whatever your age.

Where did the story come from?

The study was carried out by three researchers from the University of Southampton and University of Birmingham, and was funded by the Economic and Social Research Council, the Office for the Third Sector, and the Barrow Cadbury Trust through the Third Sector Research Centre.

The study was published in the peer-reviewed BMJ Open journal, which as the name suggests, is openly available for access to all.

The media generally takes quite a simplistic view on these findings which do not prove that volunteering boosts wellbeing. The Mail includes messages such as “if you want to get the most out of charity work wait until you are at least 40”, “younger people view helping others as a duty and a chore” and “as people get older, volunteering really boosts their mental wellbeing” – not one of which is demonstrated by the findings of this study.

Similarly, The Daily Telegraph reports that “Volunteering is not beneficial until you hit 40, study finds.” The implication that you should only do charitable work if you are guaranteed to benefit from it seems a little, well, uncharitable.

What kind of research was this?

This was a cohort study based on data collected during the British Household Panel Survey which aimed to see whether volunteering was associated with mental wellbeing among British people across the course of life.

Researchers used data from the British Household Panel Survey, which is an ongoing survey designed to track social and public health trends.

Previous research has suggested that freely giving to benefit another person, group or organisation can boost a person’s self-rated health, though most studies have looked at older adults. This study aimed to see whether it affects all age groups.

What did the research involve?

The British Household Panel Survey started in 1991, selecting a nationally representative sample of 5,000 households. Those aged 15 or over were interviewed annually until 2008. The study captures 18 waves of data covering various age groups followed up over time. The survey collected data on various areas of the participants’ life, including occupation, education, health, household consumption, and social life. Information on volunteering was collected in alternative years starting from wave 6 (1996). This was assessed by asking if people “do unpaid voluntary work”.

Response categories were:

- at least once a week
- once a month
- several times a year
- once a year or less
- never

For the purpose of this analysis the researchers combined groups 2 and 3 to give four overall groups – frequent, infrequent, rare or never.

The outcome of interest was the General Health Questionnaire (GHQ) response, which includes 12 questions covering happiness, mental distress (anguish or depression) and well-being to give a total score of between 0 and 36. The lower the GHQ score, the better a person's health is judged to be.

Researchers adjusted for potential confounding factors including income, marital status, educational level and social group.

What were the basic results?

After excluding those with missing exposure or outcome data, the researchers had data for 66,343 people (47% male).

Most people (80%) did not do any volunteer work each survey year. About a quarter of those aged 60-74 volunteered compared with 17% in the youngest 15-29 age group. Also, more women (22%) volunteered than men (19.5%).

Those who did any volunteering had slightly better (lower) GHQ scores than those who did none (10.7 vs. 11.4). Scores were lowest among those who frequently volunteered.

When looking at the interaction between volunteering, GHQ score and age, they found that generally, regardless of volunteer status, all people's GHQ score got worse (higher) as they aged. However, when you got above the age of 40-45, scores generally continued to rise for those who never volunteered, but went down again for all those who volunteered – rarely, infrequently or frequently.

How did the researchers interpret the results?

The researchers conclude: "volunteering may be more meaningful for mental well-being at some points of time in the life course".

Conclusion

This research doesn't prove that volunteering will improve your sense of health and wellbeing.

The study does have several strengths in that it is a high quality nationally representative survey

that collected regular and comprehensive data for a large number of UK citizens.

However, the main limitation is that it's unable to prove cause and effect, or suggest the direction of the relationship. Those who volunteered had better (lower) GHQ scores than those who didn't – and this was most marked in middle aged to older adults. But this may mean that those who feel healthy, active and in a good state of wellbeing are more likely to go out and volunteer to help others than those who feel in poor health. Not necessarily the reverse, that volunteering has caused the good health state.

The score difference was also marginal – on average 11.4 for those who never volunteered compared with 10.7 for those who did. How much of a meaningful difference this small difference would make to the person's everyday life is not possible to say. These are also of course subjective scores – not confirmed diagnoses of depression.

When looking at the volunteer work, the survey did not prompt respondents with examples of what might be meant by "unpaid voluntary work". Neither did it look into the types of work they did. Therefore, it isn't certain that this is a reliable estimate of the frequency of volunteering in Britain.

Additionally, while this study has data for more than 66,000 people, this still only represents two-thirds of those taking part in the surveys, the rest had incomplete data. Those with missing data tended to be younger, female, of lower education and occupational level. The researchers say that GHQ scores did not differ between drop-outs and those analysed, but the full data-set may still have had some difference.

The relationship between a person's self-rated health and wellbeing and whether or not they volunteer is likely to be a complex relationship influenced by many other factors and personal characteristics. It most probably works both ways – better wellbeing probably makes you more inclined to help others, and helping others probably boosts your sense of wellbeing.

There are lots of opportunities to volunteer with Age UK Suffolk and make a difference to the lives of older people across Suffolk.

If you would like to find out about volunteering opportunities with Age UK Suffolk, contact **01473 298684** or email volunteer@ageuksuffolk.org

Your right to social care and support

If you think you need social care support, you'll need to think about what types of support you need – be it homecare workers, equipment or respite breaks.

Your first step to getting this sort of help should be to ask your local authority social services department for an assessment of your needs. This assessment will help you decide on the type of services you may want, as well as helping the local authority understand which services you need.

Your local authority may be able to offer you some care services for free. It's worth finding out if you can get free services from your local authority because the cost of buying care services is likely to be high if you have long-term care needs, and they could increase as you get older.

As part of the **CARE ACT** Your local authority now has an obligation to assess anyone who appears to care & support needs.

The authority should:

- Make an assessment of your needs regardless of your personal financial circumstances.
- Provide you with information about services and options available to you in your area.
- Offer you a carer's assessment if you are an unpaid informal/family carer.

The assessment by the local authority is important because it helps them work out what your difficulties are and what services will help you most. Often, only minor assistance is needed – such as meals on wheels and help with washing or dressing, yet these services could make a big difference to your life.

If your local authority decides you are eligible for social care support, they will carry out a financial assessment to determine how much you will need to pay towards your care, if anything.



After this, if you are eligible for care and support, social services or an independent adviser will work with you to create a care and support plan.

If you feel that your needs have changed over time, you can request a review of your care plan, or a re-assessment if you were not originally eligible for care and support. Contact the social care team at your local authority to discuss this.

Assessing your care and support needs

If you have care and support needs and find it difficult to look after yourself, your local authority may be able to advise you and provide you with some help.

The best way to get help from your local authority is to ask for a care and support needs assessment. You can do this by contacting the local authority adult social services department.

When you get assessed by the local authority, as a minimum you may be given information and signposting to other services, and ways that you might find funding to pay for them. However, if your needs meet the national eligibility criteria, your local authority will have to meet these needs.



The local authority will involve you throughout the assessment to identify what your needs are and how these impact on your wellbeing. They will also discuss with you how you wish to live your life and whether there are certain aims you would like to achieve but you are unable to do so because of your care and support needs.

The assessment will start to consider how your care needs might be met. This could include identifying how preventative services like simple aids (such as devices to open jars and tins more easily), adaptations to your home (such as handrails) or information about support available in the community might meet your need. It will also identify if you have a higher level of need where you may need help in your own home or care in a care home.

The assessment should be carried out in a way that ensures your involvement and that takes the right amount of time to capture all of your needs.

If you have a friend or family member looking after you as an unpaid carer, they can have a carer's assessment to see if they need support to carry on their caring role.

The local authority must give you a copy of your needs assessment or carer's assessment.

What are the national eligibility criteria for care and support?

The eligibility threshold for adults with care and support needs is based on identifying how a person's needs affect their ability to achieve relevant outcomes, and how this impacts on their wellbeing.

Local authorities must consider whether the person's needs:

- arise from or are related to a physical or mental impairment or illness
- make them unable to achieve two or more specified outcomes
- as a result of being unable to meet these outcomes, there is likely to be a significant impact on the adult's wellbeing

An adult's needs are only eligible where they meet all three of these conditions.

The specified outcomes measured include:

- managing and maintaining nutrition, such as being able to prepare and eat food and drink
- maintaining personal hygiene, such as being able to wash themselves and their clothes
- managing toilet needs
- being able to dress appropriately, for example during cold weather
- being able to move around the home safely, including accessing the home from outside
- keeping the home sufficiently clean and safe
- being able to develop and maintain family or other personal relationships, in order to avoid loneliness or isolation
- accessing and engaging in work, training, education or volunteering, including physical access
- being able to safely use necessary facilities or services in the local community including public transport and recreational facilities or services
- carrying out any caring responsibilities, such as for a child

Local authorities do not have responsibility for providing NHS services such as patient transport, but they should consider needs for support when the adult is attending healthcare appointments.

Planning for your future care needs

There may be times in your life when you think about the consequences of becoming seriously ill or disabled.

This may be at a time of ill health or as a result of a life-changing event. It may simply be because you are the sort of person who likes to plan ahead.

You may want to take the opportunity to think about what living with a serious illness might mean to you, your partner or your relatives, particularly if you become unable to make decisions for yourself. You may wish to record what your preferences and wishes for future care and treatment might be.

The costs of long-term care

Care has never been free and everyone should think about the care they might need in the future. The long-term costs of care can be significant, and while none of us like to think that we will become old, ill or disabled, it does happen.

Just like your pension, it is never too early to start thinking and planning your care and support needs and their costs.

Even if you're generally fit and healthy and of working age, don't ignore your future care. If you're making long-term financial arrangements, you may want to take into account the potential costs of your future care needs.

The Care Act 2014 creates new provisions that will come into force from April 2020.



It will introduce a “cap on care costs” that, for the first time ever, will offer you protection from the risk of losing everything you have to meet your care costs.

It does this by setting a maximum amount that you will have to pay towards your eligible care needs. This amount will be set nationally, but if you are eligible for local authority support to meet your costs, you will pay much less. Once you reach the cap, your local authority will take over meeting the cost. However, this only applies directly to care services you are eligible for, and you will still have to pay other costs such as a contribution towards your accommodation.

Alongside this, the point at which you may be eligible for financial help from your local authority with your care costs is being extended. Currently, if you have more than £23,250 in assets, such as your home or savings, you will need to meet the full cost of your care. From April 2020 this will increase so that more people benefit from financial help.

How your local authority can help with planning your care

The Care Act 2014 makes clear that local authorities must provide or arrange services that help to prevent people developing care and support needs, or delay people deteriorating to the point where they would need ongoing care and support.

Even if you don't want or need financial assistance with your care, your local authority can still help you plan your care, so it is worth contacting the adult social services of your local council to find out the options available to you and your family.

Local authorities must work with people in their areas to provide or arrange services that help to keep people well and independent. This should include identifying the local support and resources already available, and helping people to access them. They should make clear:

- what types of care and support are available – such as specialised dementia care, befriending services, reablement (short-term care time, for example, to get someone safe, happy and able to live independently in their home after they have been discharged from hospital), personal assistance and residential care

- the range of care and support services available to local people – in other words, what local providers offer certain types of services
- what process local people need to use to get care and support that is available
- where local people can find independent financial advice about care and support and help them to access it
- how people can raise concerns about the safety or wellbeing of someone who has care and support needs

If you think you need care now, or in the very near future, the best way to plan your care and find out about your care needs is to ask your local authority for an assessment.

The sooner you ask for an assessment, the sooner that plans for your care can be made. These plans should include what should be done in the event of an emergency.

Peace of mind in later life for you and your family

Making a Will is advisable for everyone, even those who feel they don't have much to leave. Administering an estate without a Will can cause family upset at an already difficult time. Your Will can deal with:

- Your funeral wishes
- Arranging gifts to friends, charities and family
- Preparing for the future by appointing guardians and arranging trusts for young children and grandchildren
- Putting in place arrangements that will protect inheritance for vulnerable beneficiaries
- Ensuring you are taking full advantage of tax exemptions, allowances and reliefs
- Succession planning for business owners

Lasting Powers of Attorney can also give you and your family peace of mind. They allow individuals (usually close family members or your family solicitor) to make decisions about health, welfare, property and financial affairs on your behalf if you are unable to do so because of ill health or incapacity.



For further information, please contact a member of the Gotelee team. Home visits can be arranged if required.



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... 'individuals who excel in their fields, thus elevating this firm above others.' Legal 500 [UK] 2020

Financial planning for future care needs

Local authorities have to help people get independent financial advice, to enable planning and preparation for future care costs.

This encompasses a range of services from generic sources of information and advice, such as websites or helplines, to tailored advice relating to specific financial products, which can only be provided by a regulated financial advisor. Some of these services may charge a fee.

The Money Advice Service website has tips on planning ahead for a time when you can't manage your own finances.

Making decisions about your future care needs and wishes

If you are nearing retirement age, it's important that you take account of your likely care needs and plan accordingly. You may wish to consider setting up a Power of Attorney or an advanced decision (living will).

These will help people to take account of your preferences if you lose the capacity to make decisions. You will also want to ensure that you have thought about how you might pay for the care you need.

Many of us will put off planning for care and support arrangements until the last possible moment. Having an urgent need for care and support after a crisis may mean that we and our families feel pressured into making decisions quickly.

Under such pressure, asking the right questions, thinking and planning for your future needs – including options for meeting the cost of care – are vital. It is important that you seek good advice on these subjects so that you can consider your best short-term and long-term options.

There are several factors to consider when planning social care. These include:

- the type of condition you have, and the best ways for you to stay healthy and independent
- the type of care you would prefer, and whether it would meet your needs
- where you would like to be cared for – in your own home, in a residential care setting such as a care home, or in the community while you are living at home

- how much your care is likely to cost and whether you may be entitled to free care or financial help
- who you want to care for you, and whether, if you want friends or family to be your carers, they are able and willing to do so

You will need to weigh up the pros and cons of each care option against these factors.

For more information read, "**Choosing Care Services**" (page 26).

One of the common decisions people are faced with is whether they should sell their home to pay for their care.

If you are thinking about moving into a residential care home and are worried about meeting the costs, ask your council for information about a "deferred payment agreement". This is an arrangement whereby the person agrees, with their local authority, to pay some of their care fees at a later date. This means they should not be forced to sell their home during their lifetime to pay for their care.

A person or their estate usually repays the local authority from the sale of their property at a later date. The Care Act 2014 introduces rules that mean councils have to offer deferred payments to people.

Independent advice on planning your care

If you are making plans for your future care – at whatever stage – it is worth getting advice. You may want to get specific care advice from a charity, general advice from Citizens Advice or specialist legal, financial or welfare rights advice. If you have difficulty communicating or exerting your rights, you may want to have an advocate to deal with these issues on your behalf. Your local authority social services department should have information about organisations in your area that help people who have social care needs. They may offer an advocacy service.

If you have a specific condition, you may want to get in touch with a national organisation that supports people with this condition. Your GP surgery should have information on the relevant groups and organisations.

Are you a Carer?

Carers' assessments

What to do when you first become a carer

If you provide care and support to an adult friend or family member, you may be eligible for support from your local council.

This support could include being offered money to pay for things that make caring easier. Or the local council might offer practical support, such as arranging for someone to step in when you need a short break. It could also put you in touch with local support groups so you have people to talk to.

The Care Act 2014 makes carer's assessments more widely available to people in caring roles.

Local councils now have a legal duty to assess any carer who requests one or who appears to need support.

If you are a carer and you need some support, get in touch with the council covering the area where the person you care for lives. The council will be able to give you information and advice about how the assessment will work.

A carer's assessment is a discussion between you and a trained person either from the council or another organisation that the council works.

The assessment will consider the impact the care and support you provide is having on your own wellbeing, as well as important aspects of the rest of your life, including the things you want to achieve day-to-day. It must also consider other important issues, such as whether you are able or willing to carry on caring, whether you work or want to work, and whether you want to study or do more socially.

The assessment could be done face-to-face, over the telephone or online.

The council will use the assessment to identify your support needs, and to discuss how these could be met. This might mean that the council will give you help or put you in touch with other organisations, such as local charities, that you can talk to.

Eligibility for care and support services

A carer's assessment looks at the different ways caring affects your life, and works out how you can carry on doing the things that are important to you and your family. It covers your caring role, your feelings about caring, your physical, mental and emotional health, and how caring affects your work, leisure, education, wider family and relationships.

Your physical, mental and emotional wellbeing should be at the heart of this assessment. This means that you can tell the council how caring for someone is affecting your life and what you want to be able to do in your day-to-day life.

When the assessment is complete, the local council will decide whether your needs are "eligible" for support from them. After the assessment, your council will write to you about their decision and give you reasons to explain what they have decided.

If you have eligible needs, your council will contact you to discuss what help might be available. This will be based on the information you gave them during your assessment.

If you do not have needs that are eligible, your council will give you information and advice, including what local care and support is available. This could include, for example, help from local voluntary organisations.



Before your carer's assessment

If you have arranged to have a carer's assessment of your needs, give yourself plenty of time to think about your role as a carer and note your thoughts down. You might consider:

- whether you want to continue being a carer
- if you were prepared to continue, what changes would make your life easier
- if there is any risk that you will not be able to continue as a carer without support
- whether you have any physical or mental health problems, including stress or depression, which make your role as a carer more difficult
- whether being a carer affects your relationships with other people, including family and friends
- if you are in paid work, whether being a carer causes problems at your work (such as often being late)
- if you like more time to yourself so that you can have a rest or enjoy some leisure activity
- if you like to do some training, voluntary work or paid work

Your decision to be a carer

When your carer's assessment is done, no assumptions should be made about your willingness to be a carer. This can be a very sensitive area, because many of us feel that we have a duty to those we care for. We sometimes rule out other options because we feel we have no choice. You have the right to choose:

- whether to be a carer at all
- how much care you are willing to provide
- the type of care you are willing to provide

There may be some parts of the role that you find more difficult than others.

Take a step back and think about your role as a carer. This can be useful in the discussion you have during a carer's assessment. You may wish to ask in advance for the assessment to happen in private, so that you can speak freely.

It is vital that it considers whether the role of a carer is affecting your health or safety.

Carers sometimes take on physical tasks, such as lifting and carrying, which can cause long-term health problems. Others can find that the stress of the role can lead to depression or other mental health problems. In some cases, safety can be an issue; for instance, because of the behaviour of the person they look after.

During your assessment, explain any mental or physical health problems you are experiencing. Social services will consider all aspects of your health and safety, including caring tasks that might put your health or wellbeing at risk.

Some of the things you might need help with include:

- support to ensure you're able to attend any medical appointments
- support if you need to go into hospital for an operation (including recovery after surgery) that you might have been putting off because of your caring commitment.
- training for you, such as safely lifting

A carer's assessment should also look at your own interests and commitments to see if and how they are disrupted by your role as a carer. If they are disrupted, a social worker could discuss with you whether some support could improve matters for you.

The assessment should look at:

- marriage or other such relationships
- friendships and community role
- paid employment or voluntary work
- interests, sport, leisure and hobbies
- time for yourself

One of the most important parts of your carer's assessment will be a discussion about your wishes concerning paid work, training or leisure activities.

The local council must consider the support you may need if you want to stay in your paid job or return to paid work. They must also consider the support you may need if you want to continue or start studying or training.

During and after a carer's assessment

If you are looking after someone, the local council will consider a broad range of issues that can affect your ability to provide care as part of their assessment of your needs.

When assessing your needs, social services must consider whether your role as a carer is sustainable. The assessment is about your needs and therefore you should:

- have a reasonably detailed discussion about all the matters relevant to you
- have the assessment in private if you want to, at a convenient time and place for you
- get relevant information, including about welfare benefits you could claim and details of other services
- have a chance to identify the outcomes that you want; any services should be appropriate for you and meet your needs
- be given flexibility and innovation in identifying services that may meet your needs
- have an opportunity to give feedback about the assessment
- be told about any charges before services are arranged

Support planning for carers

After your assessment, you and the local council will agree a support plan, which sets out how your needs will be met. This might include help with housework, buying a laptop to keep in touch with family and friends, or becoming a member of a gym so you can look after their own health.

It may be that the best way to meet a carer's needs is to provide care and support directly to the person that they care for, for example, by providing replacement care to allow the carer to take a break. It is possible to do this as long as the person needing care agrees.

Your support plan should consider whether your situation is likely to change, but you may want to contact social services and ask them to reassess you if this happens.

Carer's assessments and hospital discharge

You might have a carer's assessment or a review of your support plan if the person you care for has been in hospital and is being discharged.

Carer's assessments and NHS continuing care

As well as care and support organised by the council, some people are also eligible to receive help from the NHS.

This help may be a nursing service for people who are ill or recovering at home after leaving hospital. It could include things like changing the dressings on wounds or giving medication. If you are eligible for this kind of help, a health professional such as your GP or community nurse should be able to tell you.

In exceptional circumstances, where an adult has a complex medical condition and substantial ongoing care needs, the NHS provides a service called NHS continuing healthcare. NHS continuing healthcare provides care and support in a person's home, care home or hospice.

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Choosing care services

Choosing your care services can be a daunting prospect. There are many care options available, but which kind of support is right for you?

Think about what you get most out of in life. You may have particular interests that you want to keep up, or you may simply want to spend time with your family or friends. You may have a job that you want to keep on doing, or a social activity, sport, religion or a political group that you want to keep up with.

Your social care support should – as much as possible – help you to continue to do these things, and may help you find new things to do. When choosing the type of care, you also need to think about:

- location
- services
- standards and quality
- price

Location of your care

Your own home is often the best place for you to get care services. At home is where you may have family and friends and you'll be in a familiar and hopefully safe environment.

You may want to get help at home, perhaps through having home help come in to help you with daily tasks.

To stay independently at home, you may need to have care services in the form of adaptations to your home (to help with mobility, for example) or perhaps just equipment to help you out.

However, your home may not always be the best environment if you have care needs. It may not be safe for you, particularly if you do not have a friend or relative around to help (if you live in an isolated rural area, for example). Or you may have particular needs that cannot be easily met in your home.

If you do need to move out of your home for care reasons, there is a variety of accommodation options that you may want to consider. These include sheltered housing, extra care housing and residential care homes or nursing homes.

If you are thinking about moving, it's worth considering whether it is best to stay in the area you are in now, which you will be familiar with, or whether you should move elsewhere to be nearer family or friends. You may also want to think about the location from a practical perspective (whether it's on a bus route, for example) or for more personal reasons (such as whether you like the surroundings).



CareQuality
Commission

We are the independent regulator of health and social care services in England

We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.

www.cqc.org.uk



The kinds of care services on offer

If you are choosing a care service – particularly if it's an ongoing service such as home care or a place in a care home, you should think about the particular things you want from the service (this will often be referred to as your “outcomes”).

For more information visit:
www.cqc.org.uk

Use the services search to find out about the location, services, facilities, staff and performance of a Care Quality Commission (CQC) registered care home or homecare provider. Your search results should tell you whether a service can support you if you have particular needs, such as a sensory impairment or a learning disability.

If the service is not registered with the CQC, you may have to ask them directly for information about the services, and you may want to get independent verification, if any is available. Your local council may have a list of local support providers, with information on each.

Standards and quality of care

Everyone has a right to expect certain standards in their care. Your care services should help keep you safe and well, but also treat you with dignity and respect. You should always be able to express a choice in your care.



The standards for social care providers, such as care homes, are set out by the CQC. The CQC's inspection reports will tell you which services are meeting the minimum requirements. If you do not think the service is meeting these requirements, you may want to make a complaint.

Good quality services, in whatever form they take, will treat you as an individual and attend to your personal needs. If you have homecare, for instance, the care workers who come into your home should listen to your wishes and include you and your family in decisions and care.

When choosing care, you might want to look out for services that are signed up to the social care commitment. Check how well your local council social services are performing.

The price of your care

When choosing social care services, you will have to consider how much the services may cost. The cost of your care may reflect each of the aspects listed above: location, quality and the kinds of services offered.

If you have had an assessment from your local council, you may get services for free. However, many people have to pay for their own care services (self-funders), and even people who have care funded by the local council will need to know about the costs of care if they are using a personal budget or a direct payment.

More information

The Money Advice Service has more information on choosing the right sort of care services.



**the Money
Advice Service**

Free and impartial money advice,
set up by Government

Tel: 0300 500 5000

www.moneyadvice.org.uk

Funding care

Care and support services in England have never been free. Most people have to pay something towards their own care and some will have to pay for all of the costs.

Your local authority (council) may cover some or all of the cost of care in some circumstances, but its help is “means-tested”. This means that who pays depends on what your needs are, how much money you have, and what level and type of care and support you require.

For most people needing social care services, the first place to start is by asking your local authority for an assessment of your social care (care and support) needs.

If the local authority considers that you need support that it can provide, it may also carry out an assessment of your finances. This assessment will determine whether the local authority will meet all the cost of your care, or whether you will need to contribute towards your care cost or whether you will have to meet the full costs yourself.



Find out about support paid for by your local authority. Currently, local authorities won't provide care services if you have more than £23,250 in savings and property (your “capital”). However, from April 2020, this threshold will rise alongside the introduction of the cap on care costs, so more people will be eligible for help sooner.

Alternatives to care funded by the local authority

NHS care

The NHS is responsible for funding certain types of healthcare equipment you may need. In some situations, the NHS is also responsible for meeting care needs. This is usually when your need is mainly for healthcare rather than social care

NHS care could be provided in hospital, but it could be in someone's own home or elsewhere in the community.

NHS continuing healthcare

If the person you care for has very severe and complex health needs, they may qualify for NHS continuing healthcare. This is an ongoing package of care that's fully funded by the NHS.

In some areas of the country, you can arrange your NHS Continuing Healthcare using a personal health budget – similar to the personal budgets for social care outlined above.

NHS-funded nursing care

You should receive NHS-funded nursing care if:

- you live in a care home registered to provide nursing care, and
- you don't qualify for NHS continuing healthcare but have been assessed as needing care from a registered nurse

The NHS will make a payment directly to the care home to fund care from registered nurses who are usually employed by the care home.

NHS aftercare

People who were previously detained in hospital under certain sections of the Mental Health Act will have their aftercare services provided for free.

Help from charities and funds

There are other sources of funding you might be able to access to help you with funding care. Some charities can help with funding care needs. For example, the Family Fund is a government-backed charity that can help with grants if you care for a severely disabled child aged 17 or under. You can get an application pack from the Family Fund website.

Get personal advice on care funding

The cost of care and support is likely to be a long-term commitment and may be substantial, particularly if you choose to go into a care home, or if you have care needs at an early age. If you or a member of the family need to pay for care at home or in a care home, it's important to understand the alternatives. This makes advice tailored to your individual needs vital. You can get advice from:

- your local authority – through an assessment of your care and support needs, as well as advice on which services are available locally
- financial advice from a qualified, independent source – there are independent financial advisers who specialise in care funding advice; they are regulated by the Financial Conduct Authority and must stick to a code of conduct and ethics, and take shared responsibility for the suitability of any product they recommend

Paying for your own care and support

Many people who use care and support services will pay for all of the costs. This is known as being a “self-funder”.

The cost of your care will vary depending on its type, intensity, specialisation, location and duration. For example, a place in a residential care home will cost hundreds of pounds a week.

To make decisions that have such major financial implications, you may want to seek independent financial advice and it's always worth researching the costs of alternatives first. For example, if you are considering a care home place, the cost should be weighed against the cost of care and support that may help you remain in your current home, such as homecare.

How much will care cost?

If you are thinking about your future care needs or are facing immediate decisions about care options, it can be helpful to get an idea how much care can cost.

Inevitably, the price you would pay will depend on your particular circumstances and needs. The costs also vary depending on where you live. Unfortunately, care homes and homecare agencies tend not to provide this information publicly but you may find it helpful to search for and contact care services in your area to get some idea of likely costs.

The ‘cap on care costs’

Currently, it is not easy to plan for your future care needs, as it's hard to estimate how long you will need care for and how your circumstances may change. From April 2020, a “cap” on the costs of meeting your eligible care needs (but not accommodation associated with care or nursing costs) is being introduced. The cap means that, once reached, the local authority will take over paying the cost of their eligible care needs.

The cap will not cover your daily living costs. These costs include expenses such as rent, food and utilities and the costs you would face even if you did not have care needs. It is important to note that daily living costs will be a nationally set figure.

This figure will be a “notional” amount rather than the actual costs. This is designed to support consistency and enable people to plan.



Richard Haste — Suffolk's Equity Release Specialist



For a FREE GUIDE and a no-obligation consultation, contact Richard Haste

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To benefit from the cap once it comes in, you will need to contact your local authority to see if your needs are eligible. If you are seen to have eligible care needs, the local authority will open a “care account” for you. This account records your progress (the amount of costs you have incurred) towards the cap. The cap does not begin until April 2020 and any costs incurred before this will not count towards the cap.

The BBC’s care calculator can estimate how much you may have to pay for care services depending on where you live in England, once the new rules are in place. This will give you an idea of how the cap will work for you, but actual costs will vary to reflect your individual circumstances and needs and how they change over time.

For more information on how paying for care is changing from 2020, read about the changes in the Care Act.

Ask for help from your local authority

It’s worth checking whether you’re eligible for means-tested support from your local authority or other financial support – for example, through a care needs assessment and a financial assessment.

Few of us will have the income or ready access to the cash to pay for our ongoing care needs, and you may need to look at selling or re-mortgaging any property you may own.

The new Care Act 2014 means more people may be able to benefit from “deferred payments”.

Deferred payments can help people avoid being forced to sell their home in a crisis in order to pay for their care by having the council temporarily cover the cost – usually until you sell your property. Following the Care Act, every local authority in England has to make deferred payment agreements available.

As an alternative, you may be able to enter an “equity release scheme” with a financial organisation. Equity release can pay for the fees from the value of property you own. However, you should consider which of these options best meets your needs, and what the overall costs to you will be.

Before taking such significant financial steps as equity release, you might want to get independent financial advice. You can find

information on equity release for care at home from Which? Elderly Care or the Money Advice Service’s equity release information.

If you’re planning ahead, you may consider arranging an investment or insurance plan to fund your care. Again, it may be worth taking independent advice on financial arrangements before making major changes. Because of the new rules, there are likely to be more financial products emerging that are designed to help people pay for care.

You may also want to explore whether the NHS would meet some or all of your care and support costs, or you may have entitlement to benefits that may help you meet costs. Read about other ways of funding care.

Advice on paying for care

Even if your local authority is not able to help fund your care, it will be able to make an assessment of your care and support needs. From this, the local authority can provide you with access to a range of information and advice available locally.

You can also get independent advice from:

- The Money Advice Service website: offers information on paying for care or the option to speak to an online adviser. You can call the Money Advice Service on 0300 500 5000.
- The Society of Later Life Advisers: the society can also help you find advice on how to make financial plans for care in your old age.
- Find Me Good Care: a website of the Social Care Institute for Excellence. It has advice on all aspects of planning and funding social care.
- Age UK: has great advice for older people and those planning for their later years.
- Carers UK: an excellent resource of advice for carers who need to help someone else.
- Which? Elderly Care has a guide to financing care.

Deferred payments if you are unable to pay for care services

Care home fees are a big financial commitment, and the decision to go into a care home is often made at a moment of crisis or urgency, such as when being discharged from hospital. This can make finding the money to pay for fees (usually several hundred pounds a week) challenging for people funding their own care.

In particular, if you own property outright but have little in the way of savings, you may be expected to fund your own care but have little immediately available money to pay for it. Some people going to stay in a care home for a long time find that they have no option but to sell their property to pay the care home fees.

Your council may be able to help you if you are at risk of having to sell your home. Where there is a delay in selling the property, or you don't want to sell the property immediately, you may be eligible to have your care fee payment "deferred". This is where the local authority helps you to pay your care fees temporarily, and you repay the costs to the local authority at a later date.

If the local authority agrees to the deferred payment and pays the care home fees, it will take payment from the money raised once the property is sold. This can be:

- during your lifetime if you choose to sell your home
- once you die, the local authority can be repaid from your estate

All councils must offer people the chance to defer payment if they meet a set of eligibility criteria.

A deferred payment scheme is only available if you don't have enough income to cover your care home fees, and you have less in savings than £23,250. In these circumstances, the savings don't include the value of your property, but does include money in bank accounts. The local authority will put a "legal charge" (similar to a mortgage) on the property and will then pay the remaining care fees in full. You will then be assessed to see whether they are able to pay a weekly charge to the authority. Your ability to pay is based on your income less a set "disposable income allowance" (currently £144 per week).

Before considering deferred payments, you should look into whether the property will or won't be counted in how your capital is calculated. For instance, it may be disregarded because your partner still lives there, and if it is a deferred payment agreement wouldn't be necessary.

It's wise to get independent financial advice before agreeing to a deferred payment, and it's worth bearing in mind that choosing deferred payments can impact on some welfare benefits.

Protection for self-funders

While you may have the savings in place to afford care services, if you lack the capacity to make the arrangements, the local authority can step in to help.

The local authority can also help people who lack capacity by negotiating fees with a care provider and paying them directly. The local authority will need to be reimbursed.

Anyone entering into a contract for care services should be given adequate information about the fees. Care providers should supply:

- information about the fees charged for various services provided
- arrangements for paying the fees
- the fees charged for any additional services

If your capital falls below the set levels for local authority funding (currently £23,250), you will be eligible for reassessment for help with funding your care.

Concerned about Care Fees?

Some self-funding options can be quite straightforward, whilst others are much more complicated.

As a specialist care fees adviser I can help you to decide which one is the right one for you and your family.



CONTACT

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Care and support plans

If you are assessed by social services and are found to be eligible for support, the next stage is to draw up a care and support plan, or in the case of a carer with eligible needs, a support plan.

What is a care plan?

A care plan (sometimes called a care and support plan, or support plan if you're a carer) sets out how your care and support needs will be met.

You should be fully involved in the preparation of your care plan, and you and anyone else you request should also get a written copy. The care plan must set out:

- the needs identified by the assessment whether, and to what extent, the needs meet the eligibility criteria the needs that the authority is going to meet, and how it intends to do so for a person needing care, for which of the desired outcomes care and support could be relevant for a carer, the outcomes the carer wishes to achieve, and their wishes around providing care, work, education and recreation where support could be relevant
- the personal budget information and advice on what can be done to reduce the needs in question, and to prevent or delay the development of needs in the future where needs are being met via a direct payment, the needs to be met via the direct payment and the amount and frequency of the payments.

Your care plan should be individual to you, and you should be allowed to have as much involvement in the development of your plan as you wish.

Care and support should help you to:

- live independently
- have as much control over your life as possible
- participate in society on an equal level, with access to employment and a family life
- have the best possible quality of life

- keep as much dignity and respect as possible It's worth remembering that if there are different options that would meet your assessed needs equally well, the local authority can choose what it believes are the most cost-effective options.

Reviews of your care plan Your care plan should be reviewed by social services within the first three months, and then at least annually. The review looks at whether the outcomes identified in the care plan are being met. It should also review these goals to make sure they're still appropriate (and for instance, that your care and support needs haven't changed), and check that any risk assessments are up to date. If, after the review, it is clear that things have changed that affect the detail within the care plan, then the local authority will conduct a revision of the plan. This may also involve a needs assessment and financial assessment.

If it's decided that you no longer qualify for local authority support, you should receive written reasons for this, with information about other help available, including funding your own care.

Challenging your care plan

If you're not happy with a care plan, the services provided, or the way an assessment was carried out, you will need to use the local authority's complaints process. It can sometimes be helpful to get support when you're making a complaint. Sources of help can include an advocacy organisation.

Care services in your home

If you need help around the home, a good option is to have a care worker come in to your home to help you.

Types of homecare

Homecare comes in many forms and has many names used to describe it, including home help, care attendants and “carers” (not to be confused with unpaid family or friends who care for you).

Homecare can suit you if you need:

- personal care, such as washing or dressing
- housekeeping or domestic work, such as vacuuming
- cooking or preparing meals
- nursing and health care
- companionship

Homecare can be very flexible, in order to meet your needs, and the same person or agency may be able to provide some or all of these options for the duration of your care:

- long-term 24-hour care
- short breaks for an unpaid family carer
- emergency care
- day care
- sessions ranging from 15-minute visits to 24-hour assistance and everything in between

If you already know what you want, you can search NHS Choices directories for:

- local homecare services and agencies
- a list of national homecare organisations
- services that can help you stay safe and well in your home on a long-term basis; these services, often known as “supported living services”, can include financial, help with medication, advocacy, social and practical support
- a place to live in a family who will care for you, known as “shared lives services” or adult placement services

If you believe that you might benefit from some help at home, the first thing to do is to contact your social services department to ask for an assessment of your care and support needs. To contact social services, go to GOV.UK: find your local authority.

If you are eligible for homecare services, the local authority may provide or arrange the help themselves. Alternatively, you can arrange your own care, funded by the local authority, through direct payments or a personal budget.

If you have chosen direct payments or a personal budget, or you aren’t eligible for local authority help and want to get care privately, you can arrange it in several different ways.

Independent homecare agencies

If you use an independent homecare agency, you or the person you’re looking after has to find the care agency and pay them.

The agency will provide a service through a trained team of care workers, which means you may not always have the same person visiting your home, although the agency will do its best to take your choices into account. Independent homecare providers are regulated by the Care Quality Commission (CQC). Homecare agencies must meet CQC’s national minimum standards and regulations in areas such as training and record-keeping.



The CQC has the power to inspect agencies and enforce standards.

Homecare agencies must vet homecare workers before engaging them by taking up references and carrying out Disclosure and Barring Service (DBS) checks on potential employees. Homecare agencies can also:

- take over the burden of being an employer – for example, payroll, training, disciplinary issues and insurance
- train their homecare workers through national qualifications and service-specific training
- replace workers when they are ill, on holiday or resign
- put things right when they go wrong

An agency will want to see you and the person you're looking after so that they can assess your needs. This also means that a joint decision can be made about the most appropriate type of care and support.

You can find out more from the UK Homecare Association.

What are the disadvantages of using a homecare agency?

The main disadvantage is the cost of using an agency. The agency will charge a fee on top of the payment made to the care worker to cover their running costs and profit. You normally have to make a regular payment to the agency, which includes both the worker's earnings and the agency's fee.

Questions to ask when using a homecare agency

The fees some agencies charge can be quite high. Before deciding to go ahead with an agency, you should ask questions about the fee and what it covers, including:

- Does the agency check references?
- What training and supervision do they provide?
- What is their complaints policy?
- Who will be responsible for insurance?
- Is there any out-of-hours or emergency contact if needed?

- Will they be able to provide staff if your own care worker is ill or away? (If an agency contracts to provide care every day, it must ensure that it does.)

Hiring a personal assistant (P.A.)

You can hire a "personal assistant" to act as a homecare worker for you. Personal assistants can offer you all that you'll get from an agency worker, but you'll also get the continuity, familiarity and ongoing relationship with your assistant. However, if you employ a personal assistant, you will then have the legal responsibility of an employer. This will include arranging cover for their illness and holidays.

GOV.UK has more information on becoming an employer, while Which? Elderly Care also has advice on employing private individuals.

Homecare from charities

Charities such as Age UK and Carers Trust can provide home help and domestic assistance services. The Carers Trust supports carers by giving them a break from their caring responsibilities through homecare services.

Marie Curie Nurses can provide practical and emotional support for people near the end of their lives in their own homes.

Safeguarding vulnerable groups

The DBS makes decisions about who is unsuitable to work or volunteer with vulnerable adults or children. It makes this decision based on information held by various agencies and government departments. The service decides who is unsuitable to work or volunteer with vulnerable adults or children.

If someone who is barred from working with children or vulnerable adults is working, volunteering or trying to work or volunteer with these groups, they are breaking the law. They could face a fine and up to five years in prison.

Employers must apply for an enhanced DBS check (formerly known as a CRB check) when taking on new employees or volunteers to work with vulnerable adults or children.

This includes a check of the barred lists. If an organisation fails to make the relevant checks, they can be penalised.

If an organisation dismisses an employee or volunteer for harming a child or vulnerable adult, they must tell the DBS.

The DBS must also be notified if any employee or volunteer harms a child or vulnerable adult, but isn't dismissed because they leave voluntarily. If their organisation does not tell DBS, they will be acting illegally. Questions can be answered by the DBS call centre on 0870 909 0811.

Employing a care worker on a private basis

If you employ a care worker privately, you will not be obliged to use the DBS scheme, but you can use it if you choose to. You need to ask social services or the police to make the checks on your behalf. The care worker must have already applied to be vetted, and must consent to the check.

If you have concerns about the suitability of someone you employ privately to work with a vulnerable adult or child, you can ask social services to investigate the matter. They can refer the worker to the ISA on your behalf.

Manual handling

If you need help to move, or you need someone to lift you (such as getting out of bed or getting on to the toilet), this can put the person doing the lifting at risk of injury.

This "manual handling" can result in back pain and in the most serious cases, permanent disability if not done correctly.

The law says that employers must take reasonable precautions to ensure their employees don't do any manual handling that carries a risk of them being injured. This applies to you if you directly employ a personal assistant to care for you (but most likely will not if you hire someone through an agency). It is particularly important to consider insurance in this situation. This would cover any risk of the care worker injuring themselves, as well as any risk of them causing an injury.

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Care homes

If you're looking for a residential care home, there's a huge variety of options available. There are permanent care homes for older people, homes for younger adults with disabilities, and homes for children. Care homes may be privately owned or run by charities or councils. Some will be small care homes based in home-like domestic dwellings, while others will be based in large communal centres.

One of the first options you have to consider when choosing residential care is whether you need the care home to provide nursing care, or just standard personal care.

Consider other options for care first

Going into a care home is a major commitment for your future – it involves changing where you live and potentially committing to paying a considerable amount of money for your ongoing accommodation and care needs.

Before you opt for a move to a care home, you should think about other less disruptive – and potentially less costly – options, including:

- home care
- help to live independently at home

You should also consider whether you really need the amount of care on offer at a care home, and look at alternatives such as "extra care" housing schemes or warden-controlled sheltered accommodation. These options offer independence with an increased level of care and support.

Personal care or nursing care?

Care homes for older people may provide personal care or nursing care. A care home registered to provide personal care will offer support, ensuring basic personal needs are taken care of. A care home providing personal care only can assist you with meals, bathing, going to the toilet and taking medication, if you need this sort of help. Find care homes without nursing.

Some residents may need nursing care, and some care homes are registered to provide this. These are often referred to as nursing homes. For example, a care home might specialise in certain types of disability or conditions such as dementia. Find care homes with nursing.

Choice of care home

The law says that where the local authority is funding accommodation, it must allow a person entering residential care to choose which care home they would prefer, within reason.

Social services must first agree the home is suitable for your needs and it would not cost more than you would normally pay for a home that would meet those needs.

Local authority help with the cost of residential care is means-tested. You are free to make your own arrangements if you can afford the long-term cost. However, it is worth asking the local authority for a financial assessment, because it might pay some or all of your care costs.

In the financial assessment, the local authority can only take into account income and assets you own. The local authority cannot ask members of your family to pay for the basic cost of your care. Read more about local authority funding for care and funding your own care.

If you choose a care home that costs more than the local authority usually expects to pay for a person with your needs, you may still be able to live in the care home if a relative or friend is willing and able to pay the difference between what the local authority pays and the amount the care home charges – this is known as a "top-up" fee.

However, if their situation changes and they are no longer able to pay the top-up, the local authority may have no obligation to continue to fund the more expensive care home place and you may have to move out. It is worth thinking about this potentially difficult situation when deciding on care home options.

Do not cancel your tenancy or sell your home until the final decision has been made by the local authority. The value of your home must not be included in the local authority's means-testing until 12 weeks after you've confirmed that the care home placement will be permanent.

The Care Act 2014 is changing how people are able to pay for their own care, introducing the right for you to ask for the local authority to pay for the cost of your care while you try to sell your home. This is known as a "deferred payment scheme".

Choosing a care home if you're funding your own care

If you are funding your own care, you have a great deal of options, and you will need to do a lot of research on which care home provides the best options for you in terms of its cost, location, services, and a host of other potential factors. Read on for tips on choosing your care home.

Choosing a care home if you're having care provided by the local authority

After a needs assessment from social services, you will be provided with a care plan, which should make clear whether you need residential care and what other options, if any, might be available and most appropriate based on your needs.

Even if you're unlikely to be eligible for financial help with residential care home fees, it could still be worth involving social services. The needs assessment, and information they provide, are likely to be very helpful in making decisions about care.

Tips on choosing a care home

- Check the most recent inspection report to see how well the care home is doing and if there is anything of concern. You can get inspection reports by searching for the care home on the Care Quality Commission website
- Consider the location of a care home. Is the care home near family and friends? Are there shops, leisure or educational facilities in the area? Is the area noisy?
- Is the care home focused on the residents' individual needs, or do they insist that residents adapt to their routine?
- What arrangements are there for visitors? Can residents come and go as they please, as far as it is safe to do so? Are staff able to help residents to go out? Are outings arranged?



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- What involvement would you have in the care home? How would you communicate with staff? Are there any support groups or regular meetings?
- If safety and security are issues, what arrangements or supervision can the care home provide?
- Will the care home meet your specific religious, ethnic, cultural or social needs?
- Will the correct diet be provided? Will the right language be spoken? Will there be opportunities to participate in religious activities? Do they allow pets?
- When you are choosing accommodation it may be a lifelong decision, so you may want to think about planning for end of life care at the same time.
- You might also want to check what people who have used the care home say about it from online feedback and review services, such as those put together on NHS Choices Website.
- Ask for a temporary stay in the care home before you decide. Temporary stays in care homes can also be arranged in certain circumstances, such as after a stay in hospital.

A good care home will:

- offer new residents and their families or carers a guide (in a variety of accessible formats) describing what they can expect while they're living there
- have staff who have worked there for a long time, know the residents well, and are friendly, supportive and respectful
- employ well-trained staff, particularly where specialist care such as dementia nursing is required
- involve residents, carers and their families in decision-making
- support residents in doing things for themselves and maximising their independence
- offer a choice of tasty and nutritious food, and provide a variety of leisure and social activities taking residents' needs into account
- be a clean, bright and hygienic environment that's adapted appropriately for residents, with single bedrooms available

- respect residents' privacy, modesty, dignity and choices
- be accredited under the Gold Standards Framework for end of life care

An unsatisfactory care home might:

- have a code of practice, but not adhere to it
- fail to take into account residents' needs and wishes, with most decisions made by staff
- let residents' care plans become out of date, or fail to reflect their needs accurately
- have staff who enter residents' rooms without knocking, and talk about residents within earshot of other people
- deny residents their independence – for example, by not allowing someone to feed themselves because it "takes too long"
- have staff who don't make an effort to interact with residents and leave them sitting in front of the TV all day
- be in a poorly maintained building, with rooms that all look the same and have little choice in furnishings
- need cleaning, with shared bathrooms that aren't cleaned regularly

If you move into a care home

When you go into a care home, make sure the management and staff of the home know about your condition, disability and other needs. They may have some of this information already – for example, if the local authority has set up the placement after a care needs assessment.

Moving home can be unsettling at the best of times, so when you move into a care home, it's good to have it planned in advance and have family or friends around you when you move to make you feel more comfortable.

You should also:

- contact the benefits office, if you have one (including disability benefits, as these can be affected by care home stays)
- make sure other services at your previous address have been notified



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- let friends and family know your know contact details and when you might feel up to receiving visitors

Rights of care home residents

The Care Quality Commission (CQC) is the regulator of health and adult social care in England, whether it's provided by the NHS, local authorities, private companies or voluntary organisations. Under existing rules, independent healthcare and adult social services must be registered with the CQC. NHS providers, such as hospitals and ambulance services, must also be registered.

The registration of organisations reassures the public when they receive a care service or treatment. It also enables the CQC to check that organisations are continuing to meet CQC standards. Standards for care homes are outlined on the CQC website. These standards are underpinned by regulations governing the quality and safety of services.

The regulations are enforceable by law – the CQC can enforce fines, public warnings, or even suspend or close a service if they believe people's basic rights or safety are at risk.

Care home closures

Care homes will sometimes close. This can be because the owner decides not to carry on providing the service in that location (for instance, if they retire), or because the home has been sold or failed to meet legal standards. Proposals to close a care home can obviously cause great distress. If the care home is operated by the local authority, it has to follow a consultation process with residents and families.

It may be best to get specialist legal advice in this situation. You can find an appropriate solicitor through the Law Society.

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