

Funding Care at home in Somerset

NHS Somerset and Somerset FT in partnership with St Margaret's Hospice

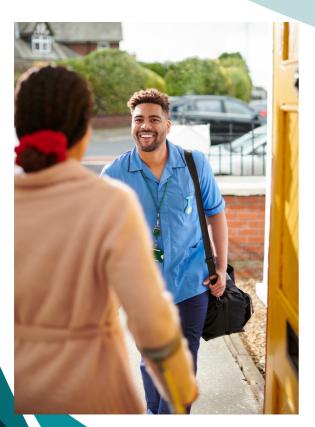


This leaflet aims to provide as much information as possible on funding care at home for yourself or loved one in Somerset. It is also giving direction on what the National Health Service does and does not provide. The NHS is responsible for meeting health care needs, but is not responsible for funding social care needs at home (carers who come to your home).

When some one has the need for carers to support them to live at home, or in a care home to meet personal care needs, sitting services or meal preparation this is classed as social care as described in The Care Act 2014. The NHS does not fund this care.

The NHS will fund free health care at the point of delivery from community services such as District Nursing, Rehabilitation services, GPs, NHS Hospital care (physical or mental health)

After a short illness or a stay in hospital, you may be eligible for up to six weeks of additional free NHS-funded care at home. This is called NHS Intermediate Care.



Page 01

There are three ways that ongoing long term care in your own home or care home may be paid for:

- The person being cared for pays the full cost of care at home this is called Self Funding
- The local authority pays part or total cost of care at home
- Continuing health care funding , of which there are two streams
 - a) CHC Funding for complex needs
 - b) **End of life CHC funding** (for rapidly deteriorating patients)



Self Funding

You or your family can contact local care agencies (via Google or Care Quality Commission) and source a package of care to meet your care needs. Alternatively, you may wish to employ a Micro Provider (via Somerset connect website: Micro Providers information and advice (somersetcommunityconnect.org.uk)). Micro providers are community based, delivering care and support. They are contracted directly by the person requiring the service (or representative of) and work under their control and direction.



In Jan 2023, the average cost of home care across Somerset is around £20 per hour. Depending on where you live, you should expect to pay between £15 to £30 per hour. Two hours of home care each day at the rate of £20 / hour means the weekly cost will be around £280.

Live-in care costs start at around £650 to £800 per week while 24-hour live-in home care can be up to £2,000 a week. How much you pay depends on your needs, what services you receive and which provider you choose.

Page 02

Local Authority Funding

Depending on your savings or assets, your local council may contribute to the cost of care you receive at home. Whether your council will pay for some of your care or not is determined by a needs assessment and a financial assessment, known as a means test. Contact Somerset Direct on 0300 123 2224

In England, if you have more than £23,250 you must pay for all the costs as you are above the threshold.

If the financial assessment, or means test, shows that an individual's capital is above the threshold, then you will be expected to fund your own social care. But if the financial assessment, or means test, shows that you are at a lower threshold, you'll be means-tested to determine how much council help you may qualify for.





Other funding support

Attendance Allowance



To be entitled to claim Attendance Allowance, you must have reached State Pension Age and have a physical and/or mental disability, including learning difficulties.

You require someone to care for you or have someone to supervise you because of your disability. You have needed that care for at least six months, unless you are terminally ill. All people in the UK are entitled to this benefit (not means tested).

There are two rates available, determined by the level of support you require. However, it does not cover mobility needs. You may need to be assessed by a healthcare professional if it is unclear how your condition affects you.

Personal Independence Payment (PIP)

PIP is a tax-free, non-means-tested benefit you can receive whether you are working or not.People aged 16 to 65 (or have not reached State Pension Age) who require long-term care at home due to a disability or illness can claim Personal Independence Payment. The amount you receive is determined by how your condition affects you, not what it is.

To be eligible, you must have had trouble with everyday living (such as eating and communicating) and/or getting around for three months and you expect the difficulties to persist for at least nine more months.





Other funding support

Carer's Allowance

Carer's Allowance is not means-tested but there is a cap on how much you can earn from work and is taxable if the carer's other combined sources of income, such as personal pensions, is above the tax threshold. If you receive State Pension you won't be paid Carer's Allowance, but if otherwise eligible you could be awarded extra Pension Credit or Housing Benefit instead.

If you care for someone at least 35 hours per week you could be entitled to Carer's Allowance, paid weekly or every four weeks. If you are under pension age, you get National Insurance credits each week towards your pension as well. The cared for person has to be in receipt of Attendance Allowance or PIP

To be eligible you must meet the following conditions:Spend at least 35 hours a week caring for someone (you do not need to live with them or be related) Not earn more than £132 per week after tax, national insurance and expenses, not be in full-time education or studying 21 hours per week or more

You do not need to live with or be related to the person you care for, but they must already receive eitherPersonal Independence Payment, Disability Living Allowance or Attendance Allowance





NHS Continuing Health Care (Continuing Health Care Funding)

Complex

This type of funding is only possible if you have complex on going health care needs. If you have been discharged from hospital into a care setting you should be offered an assessment to determine if you qualify for this funding. To be considered for NHS CHC, it must be proven that you have a primary health need, which means your care needs are mainly for healthcare. There are two stages in the assessment process to determine if you qualify.

Stage 1 is the completion of a check list. A qualified healthcare/Social care professional, such as a nurse or social worker, evaluates your care needs using the checklist covering 11 areas of care, which will determine if you are eligible for a full CHC assessment. This assessment will not be carried out in the Acute Hospital, it should be done in your usual care environment.



Stage 2, if positive this then triggers a full multidisciplinary application. If funding is granted this is regularly reviewed to ensure eligibility continues. The decision making in respect of CHC applications sits with the Somerset Integrated Care Board and not with the Health and Social Care Professionals compiling the applications

You can request an initial checklist assessment at any time, speak to your doctor or care worker if you believe you are eligible. However, the process should trigger automatically in particular situations, including if your physical or mental health deteriorates substantially or you are ready for discharge from hospital but need continued care.





End of Life

(Fast Track Continuing Health Care Funding)

Fast Track CHC Funding can be applied for to support people rapidly approaching the end of life. Can be applied for by clinical professionals who knows your circumstances the best

If you are granted CHC funding there will be an ongoing review to ensure eligibility of the need continues.

nhssomerset.nhs.uk/health/local-services/continuing-healthcare

We understand that determining the correct funding stream to support care needs at home can come at life changing and challenging times. If you are a carer, remember to look after yourself. There are support groups across Somerset with whom you can connect and talk.