

Care where you're happiest. Home.

Financing and funding care at home



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Financing and funding care at home

At Country Cousins we have over 60 years of experience in helping families to plan long term care. We know that for many the cost of care is a significant consideration. Many families will be faced with having to fund their own care (known as self-funding care), whilst others will be entitled to care funding or other support.

Types of funding care available:

- Healthcare funding
- Local authority support / social care funding
- Self-funding

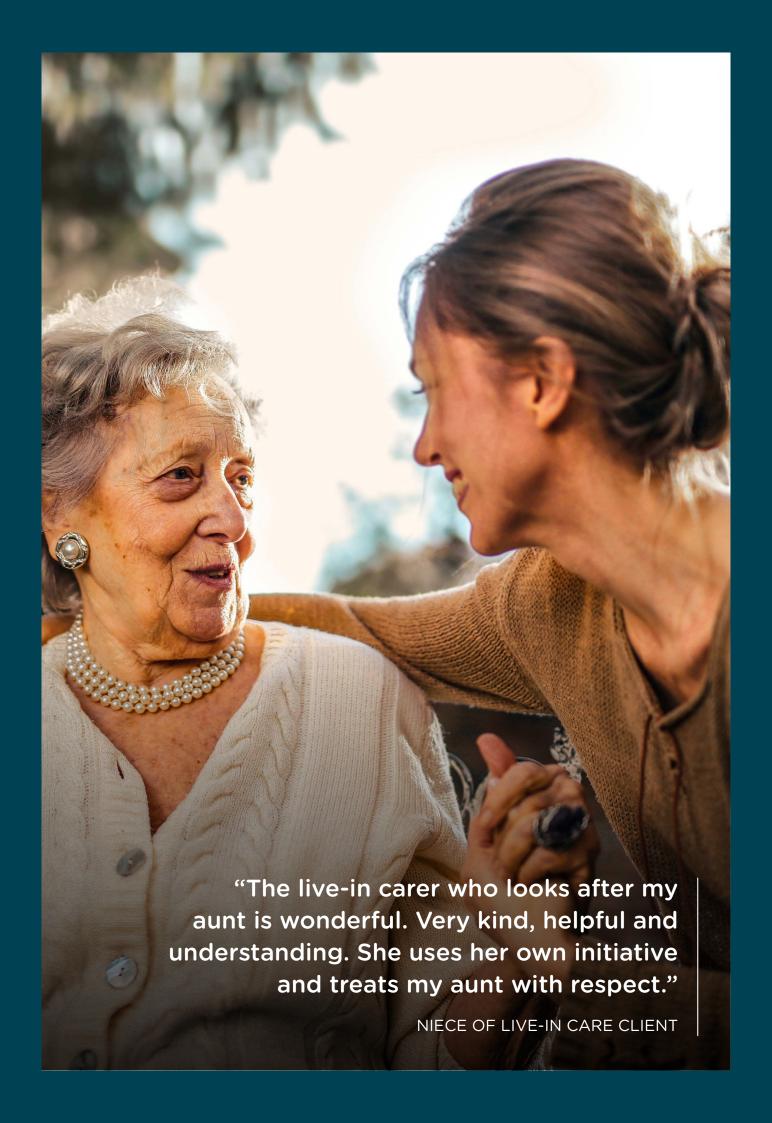
The cost of live-in care

Live-in care costs are comparable to those of a care home, and for couples, they can be particularly attractive due to potential cost savings. There are many factors that impact the cost of live-in care, including the health of the person receiving care, the conditions they are living with and the type of provider you use to receive care in your own home. The range of weekly fees will differ dramatically from provider to provider.

Live-in care costs are quoted as a weekly inclusive price based on a person's assessed needs – there are no extras. This makes it very straightforward for families to plan the annual live-in care cost for their loved one. Care homes will charge a weekly fee for care and some separate out the care and accommodation costs, in addition to charging monthly for extras like hairdressing, newspapers, therapy appointments like chiropody and social events and activities. This can make it more challenging for families to plan the total cost of care.

Once the inclusive weekly fee is agreed with you, typically there will not be an increase in live-in care costs unless there is a significant change to the care your loved one needs. Annual inflationary rises in live-care costs are usual practice with all providers in the sector and will need to be considered by families when looking at the longer term.





Self-funding care

How will i know if i need to selffund my care?

- You have capital worth over £23,250
- You own a property (this only applies to those moving into a care home)
- Your weekly income is higher than the cost of your care that you require
- You want to enhance your level of care

For families who are required to fund the cost of their care, there are options as to how they can cover the cost of care over the longer term.

Care fees annuity

A care fees or immediate needs annuity is a type of insurance policy also known as a 'care fees plan'. An individual will be assessed to understand their health and care needs now with a projected outcome for what is required in the future. Following an assessment, a fee is payable based on the outcome of the assessment with a view to covering weekly care fees, whether in a residential care home or through a live-in care service for as long as it is needed.

A care fees plan can be purchased as soon as the need for care provision arises and, as the name suggests, benefits the recipient immediately. If the income from an immediate needs annuity is paid directly to you or your loved one's registered care provider, it is tax exempt under current HMRC policy. The annuity can also be index-linked in order to protect against the effects of fluctuating inflation.



How much to pay upfront for immediate needs annuity

The payment required to pay your insurance company will depend on several factors:

- Your age
- Current annuity rates
- How much on an income you have
- Whether your income can stay the same or may need to increase
- Your health and life expectancy

Advantages

- Peace of mind that a payment will be paid for life towards your care costs
- Currently there is no tax to pay on the payments if they are paid to a UK registered care provider
- Reserving a portion of your wealth so that you can protect your remaining assets
- Flexibility around who the payment is paid to if you change care providers or no longer need care

Disadvantages

- You or your loved one could get back less than what has been paid in
- If you or your loved one no longer requires care, or become eligible for NHS funding, it might not be possible to cancel the annuity
- Receiving payments from a care needs annuity may affect your ability to claim for means-tested state benefits

Equity release

Equity release schemes enable homeowners aged 55 years or older to access capital from their property without having to move house or sell their home. Equity release provides either a tax-free cash lump sum or the opportunity to draw down smaller amounts of money against the value of the property.

This enables you to use the value of your house to pay for your care fees, or to purchase a care fees annuity. Therefore you do not have to sell your house and you can receive live-in care in your own home.

How much you can release depends on several factors such as:

- Age
- Health
- Lifestyle
- The type of equity release plan you choose
- How much your home is worth







"As my sister became too ill to look after herself, Country Cousins organised round-the-clock home care for her.

Because her condition was changing all the time, this was a difficult task without perfect solutions. The carers treated my sister with great humanity and did their best to ensure her safety and make her comfortable. I do not think anyone could have done more and I am grateful to them all."

MARK, BROTHER TO LIVE-IN CARE CLIENT

Healthcare funding

Healthcare in the UK is free at the point of delivery. Therefore, if you have an identified healthcare need and you are receiving live-in care in your own home, you may be eligible for NHS Continuing Healthcare funding, which is arranged and funded by your local Clinical Commissioning Group (CCG).

A healthcare need relates to the treatment, control or prevention of a disease, illness, injury or disability and the after care of a person living with these conditions.

Having a disability or having been diagnosed with a long-term illness may not, on its own, qualify you or your loved one for NHS Continuing Healthcare funding.

The assessment undertaken by the CCG must conclude that the individual has a primary health need. This means that the main need is health-related, as opposed to being considered a social care need.

NHS Continuing Healthcare is nonmeans tested and funding can be used to receive care in your own home. The level of healthcare funding available will be determined not just by your health needs, but also by the location of your CCG in the country, as this impacts the availability of funding. Each of your needs will be categorised as low, moderate, high, severe, or priority. If you have at least one priority need or more than one severe need, you will be eligible for the support you require.

If it has been decided that you are eligible, you will be invited to speak to the healthcare professional to discuss how and where you wish to receive the care you need, as well as the organisation you would prefer to provide your care.

Unfortunately, dementia care is typically not considered a healthcare need so will not always be funded through this type of funding.

Your care needs will be assessed and related to the following:

- What help you need
- How complex your needs are
- How intense your needs can be
- How unpredictable your needs can be

The following needs will be considered:

- Breathing
- Nutrition (food and drink)
- Continence
- Skin (including wounds and ulcers)
- Mobility
- Communication
- Psychological and emotional needs
- Cognition (understanding)
- Behaviour
- Drugs, therapies and medicine
- Altered states of consciousness



Local authority funding

If you are looking to receive live-in care, you may be eligible for some funding from your local authority.

Means test

The provision of adult social care funding is means tested. Means testing is the method by which your financial eligibility to receive funding for your care is assessed. It takes into consideration any regular income you may receive and any capital assets you own, which includes savings, investment and property.

Your home will not be counted as an asset if it remains occupied by your partner or spouse, a close relative who is either over the age of 60 or incapacitated, a relative younger than 16 whom you are legally obliged to support, or an ex-partner if they are deemed a single parent.

Several factors that affect the outcome of means testing for care funding in the uk:

- A person's age
- Location within the UK
- Type of care provision sought for example moving to a care home or receiving live-in care at home
- The discretion of the awarding local authority

Your capital and what you will need to pay



Over £23,250

You must pay the full amount of care yourself.



Between £14,250 - £23,250

The local authority will fund part of your care, and you will be expected to pay the rest of the fees.



Less than £14,250

The local authority will provide full social care funding, which will not be included in the means test.



Care needs assessment

You will also need to have a care needs assessment to work out what type of help or support you need with your care, and how you may receive that type of care. The assessment will be provided by the social services department of your local council. Regardless of your income, savings, or whether the local authority think you are eligible, the council must give you a care needs assessment.

Having the assessment gives you or your loved one the opportunity the discuss in detail what type of support you need with a healthcare professional. No matter what level of care you need to receive, the healthcare professional will help you find the right support.

If you or your loved one is being cared by a close relative or family friend as an unpaid carer, they will be able to have a carers assessment, to see whether they can receive any support to continue caring for their loved one.

What will be considered during a care needs assessment?

- Your health, and what you can, can't, or struggle to do
- Your cultural and religious background and support network
- Your current living arrangements
- How you'd like to be supported
- Information about your needs from your carer, if you want them to be involved in your assessment

What steps do i take to see if i can access funding from my local authority?

There are a series of steps involved in securing social care funding.

- You will need to discuss your care needs with your local GP or health consultant. If you are eligible for funding, you will be recommended to contact the adult services department
- Adult services will arrange an assessment for your care needs and request a GP report to feed into this process
- They will produce a detailed report based on your care and health needs
- A financial assessment (means test)
 will be undertaken to determine your
 ability to pay the cost of the care you
 need. Savings, income and assets are
 all considered in the process
- Depending upon your means test and how it aligns with social funding thresholds, you will be deemed eligible either for full or part social care funding, or ineligible for any financial assistance from the local authority



Personal budgets and direct payments

If you're eligible for adult social care funding, you can either ask the local authority to manage your budget and find the suitable care you need, or you can opt to receive a personal budget with direct payments of funds to yourself for you to make your own care arrangements.

A personal budget refers to the overall cost of care and support that your local authority has determined, through means testing, to be available to you.

Direct payments are a funding choice in personal budgets, whereby you receive the payment to manage and organise your own care arrangements, whether that is in your own home or from moving into residential care.

Direct payments can be used to pay for care services, equipment or activities that meet your social care needs either from an individual or an organisation.

If you manage your own personal budget, you can choose the provider you wish to receive care from, whereas if the local authority manages it you will be restricted to using a provider from their preferred list.







"I was faced with the heart wrenching decision to look into 'live-in care' for my mum, who has Alzheimer's. Country Cousins have been so caring and attentive to my mum's needs and have sourced the most appropriate carers to look after her challenging needs. The weight has been lifted off my shoulders and I no longer feel alone. I cannot recommend Country Cousins highly enough."

JACQUELINE, DAUGHTER OF LIVE-IN CLIENT

Benefit entitlements

There are several benefits you may be eligible for to help fund your care.

Attendance allowance

Individuals over the age of 65 can claim attendance allowance. This will be a payment of £68.10 or £101.75 a week. If you are both physically and mentally disabled, the rates will vary. Attendance allowance does not cover mobility needs.

Guaranteed credit

Guaranteed credit is a benefit that tops up your weekly income to a guaranteed minimum level. As of 2023/24 the rates are £201.05 if you are single and £306.85 if you are a couple.

Savings credit

Savings credit is for those over the age of 65 (for couples, only one needs to be over 65) with a modest income or savings. If you have already applied for savings credit, you will not be able to apply for the payment again.

To qualify for savings credit, you should have a minimum income of £140.67 a week if you are single, and £223.82 a week if you are in a couple. If you pay mortgage interest, other housing costs, caring responsibilities, or are severely disabled, you may be entitled to even more pension credit.

Council tax discount

If you have savings that equate to less £16,000 you may be able to receive a council tax reduction, this will be confirmed once you have undergone an assessment. For those that are claiming as a single occupant, you will still be able to claim if you have a live-in carer. With a formal diagnosis of dementia, you may be exempt from council tax payments, or will be offered a discount depending on the severity of your condition.



Funded nursing care

If you need nursing care as well as personal care, the cost of your nursing care will be met by the NHS. The funded nursing care contribution rate depends on where you live in the UK.

From 1 April 2023, the rates for funded nursing care across England, Scotland and Wales are shown below.

When does nhs-funded nursing care stop?

There are a few reasons as to why the NHS funded nursing care will stop contributing towards your nursing care fees:

- You have to go into hospital you will then receive free nursing care
- You no longer require nursing care
- You become entitled to NHS Continuing Healthcare

If you live in England you will only receive the higher rate if you qualified for the highest funded nursing care rate before October 2007 and continue to do so.

Scotland

£95.80 per week for nursing care and/or £212.85 for personal care.

Wales

£179.97 per week

England

Standard rate: £219.71 per week Higher rate: £302.25 per week

Support from Country Cousins

At Country Cousins, we specialise in connecting clients with exceptional live-in care professionals across the UK. Leveraging our extensive experience since 1959, we ensure rapid, personalised matching with qualified carers suited to individual needs and circumstances.

Our nationwide service, affordable pricing, and dedicated support, all overseen by the rigorous standards, ensure we provide an unparalleled platform for care, prioritising the wellbeing and peace of mind of our clients and their families.

Unmatched since 1959

We are the longest-serving home care agency in the UK, offering an unparalleled breadth of experience. For over 60 years, we've matched clients with various conditions and situations to carers with precision, empathy, and skill. With decades of service, you can trust we will make the right choice of carer for your love one.

Rapid and reliable

We understand that timely care is crucial. Our smooth processes enable us to arrange a carer for your loved one in less than 24 hours. This swift placement of experienced carers provides immediate assistance, delivering peace of mind when it's needed most.

Trusted by hundreds

Our track record of excellence has built trust with hundreds of clients. Each relationship we forge reflects our commitment to dependable, high-quality care. Your trust is our greatest achievement, and we continually strive to maintain it.

Experienced carers

The carers who work with us are seasoned professionals committed to developing their skills. Through mandatory annual training, they stay updated on the latest care practices. This culture of continuous learning ensures that our care remains cutting-edge and empathetic.



The perfect match

With thousands of carers registered with us, we provide truly personalised service. We meticulously match each client with a carer suited to their needs and lifestyle, ensuring that your loved one receives the best possible care.

Rigorous standards

Our registration with the Homecare Association, a distinction many agencies lack, underscores our commitment to high-quality service and rigorous industry standards. We uphold their Code of Practice with utmost dedication, ensuring consistent excellence.

Well led

As a part of Trinity Homecare Group, we draw from a pool of industry experts, who help guide our services and decisions. This collective knowledge continually refines our service, ensuring we remain a leader in home care provision.

Dedicated care executive

Each client is assigned a dedicated Care Relationship Executive. This friendly face will provide a direct line for your questions and concerns, ensuring you have a personalised and responsive point of contact.

Nationwide

Our reach spans the UK, enabling us to provide care wherever you are, including island locations. We ensure that distance is never a barrier to exceptional care, offering peace of mind no matter your location.

Affordable

We offer competitive pricing, without compromising the quality of our care. We provide exceptional value for money, offering a cost-effective solution to families seeking top-tier, personalised home care.

What's next?

Get in touch today

Call us

Our friendly team of experts are available to talk through your care needs 7.30am to 6pm, seven days a week.

Call us on **0808 169 8996**.

Enquire online

If you are looking outside of our core office hours, then you can enquire online by visiting **country-cousins.co.uk/contact/enquire-online** we will then be in touch with you as soon as possible to discuss your care needs.





"We have dealt with various care providers in recent years but non have come close to the professionalism and attention to detail received from Country Cousins"

MARGARET, LIVE-IN CARE CLIENT





Care where you're happiest. Home.

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