



Funding Guide

Introduction

We understand that navigating care funding can feel overwhelming so this guide aims to help you understand the key options available and who to contact for advice.

Funding Routes Overview

There are several ways care can be funded, depending on financial and care needs:

- Self-Funding – what to do if funds are depleting
- Local Authority Funding
- Local Authority Funding- Discharge to Assess (D2A)
- NHS Continuing Healthcare
- NHS Continuing Healthcare – Discharge to Assess (D2A)
- NHS-Funded Nursing Care
- Financial Assessments
- Client Contributions
- Top-Up Fees
- Deferred Payment Agreements

Self-Funding

For funds depleting / dropping below the threshold £23,250

If your money is starting to run out and you are paying for the full cost of your care home fees you may be entitled to get financial help from the Council.

We recommend contacting your local council social services department at least 12 weeks before savings drop below the threshold (currently £23,250) to request a financial assessment. This will allow them enough time for your needs to be assessed and your case considered by the Council before your savings drop below the threshold.

They will be able to guide you through the eligibility process for local authority funding.

The council will arrange for a social worker to visit your loved one to carry out a Care Needs Assessment and if eligible a Financial Assessment will follow to determine any contributions.

Where appropriate they will also coordinate with Liberata who manage the financial assessment and contribution process on behalf of the council.

In the first instance speak to Bromley Council's Adult Social Care on:

020 8461 7777 or email: **adultsocialcare@bromley.gov.uk**

Please drop us a line to: **businesssupportteam@missioncare.org.uk** to advise us of your situation and so that we can offer any assistance if needed.

Local Authority Funding

A Care Needs Assessment is the first step in getting help from your local authority to arrange care and support. This will involve a social worker assessment.

Once a care needs assessment has been completed and your loved one has been approved for local authority funding a care and support plan is drawn up and a Financial Assessment will follow to determine what they can contribute.

The council will provide you with information about the total cost of your care and how much they will contribute.

If the amount the local authority can pay is not enough to cover the weekly fee in one of our care homes then a top-up fee may be required. Please see Top-Ups.

In some instances someone may be placed into our care before the financial assessment has been completed. If the financial assessment shows that your loved one has assets over the current threshold of £23,250 they will usually be classed as a self-funder and they must pay our care fees themselves.

To get in touch with the adult social services department:

Adult Social Care Group

Telephone: **020 8461 7777**

Email: [**adultsocialcare@bromley.gov.uk**](mailto:adultsocialcare@bromley.gov.uk)

Local Authority D2A (Discharge to Assess)

Discharge to Assess is a system used when someone is ready to leave hospital but still needs care and support.

Instead of carrying out full assessments in hospital they are discharged quickly so that the assessments can be carried out in a more suitable environment i.e. a care home.

The council will fully fund those that have been discharged from hospital and are in a care home for up to six weeks for the purpose of assessing to see if they are able to return home or if they need to live permanently in a care home.

A Care Needs Assessment and a Financial Assessment will then take place.

If your loved one qualifies for long term funding then the council will contribute towards the care fees. If not, then they may have to pay for the care themselves.

NHS Continuing Healthcare (CHC)

NHS Continuing Healthcare is the name given to services which are arranged and funded free of charge by the NHS.

This is a package of care arranged and funded by the NHS for individuals with complex medical needs. Eligibility is determined by an assessment, and if approved, the NHS covers the full care costs.

Your loved one, a family member or the care provider can request a Continuing Healthcare (CHC) assessment if they believe the care needs have changed and there is a deterioration in their condition.

A trained professional will carry out an NHS checklist for potential eligibility. If eligible then a full assessment called a Decision Support Tool (DST) is used as a scoring method and a recommendation to the NHS Integrated Care Board (ICB) will then decide on eligibility for CHC funding.

To request a Continuing Healthcare (CHC) assessment please contact:

South East London ICS

Tel: **020 8176 5644**

Email: **Bromley.chc@selondonics.nhs.uk**

NHS Continuing Healthcare (CHC D2A)

To discharge patients from hospital safely and quickly while assessments happen in a more appropriate setting, usually up to 6 weeks.

Instead of assessing in hospital the NHS can fund short term care in a care home setting while the full CHC assessment is completed. It is fully funded by the NHS.

Once the outcome of the assessment is completed it can result in fully funded care (CHC) or move to local authority funding/self-funding if not.

NHS Funded Nursing Care (FNC)

NHS Funded Nursing Care is available to people living in a care home with nursing who do not qualify for full NHS Continuing Healthcare but still need care from a registered nurse.

FNC is a weekly payment made by the NHS direct to the nursing home to help cover the cost of the nursing element of care.

The standard rate in England is £254.06 per week and is paid directly to the care home and not the individual.

To be eligible for FNC a healthcare professional will assess if nursing care is required. A financial assessment is not required for FNC as it is based on clinical needs only.

For residents who are self-funding their care, if FNC is awarded, the payment will be deducted from their fees and will generally be backdated to the date of admission or from the date we have been advised by the NHS.

If for any reason the NHS have concluded that your loved one is not eligible for FNC then please ask us for advice and we will be able to assist accordingly.

Financial Assessments

Please note that although we're happy to guide families through the process we do not handle financial assessments and this is dealt directly by the local authority. Decisions about what someone pays (or whether they receive funding) are made by the council's finance team and not the care home.

The local authority will usually request information and documents such as:

Bank Statements

Income from Pensions /Welfare benefits

Capital from Savings / Investments / Value of your property

Only the resident's income and capital is looked at and not their partners/relative.

It may include the value of their home but this isn't always taken into consideration. This could be because your partner still lives there, for example.

Deferred Payment Agreements

This is a long term loan from the Council. If you have savings under £23,250 and you do not want to sell your home to pay for your care then you can apply for a Deferred Payment Agreement. It allows you to borrow money from the local authority to cover care home costs using their property as security.

The local authority will pay the care home fees on your behalf and the loan is repaid when the property is sold.

To apply for a DPA please contact Bromley Council's Adult Social Care Team to request a needs assessment.

Telephone: **020 8461 7777**

Email: **adultsocialcare@bromley.gov.uk**

12 week property disregard

For someone who moves into a care home but has a property to sell.

The local council will disregard the value of their home for the first 12 weeks of permanent care.

This gives them time to decide how they want to manage their property and finances.

Once the 12 week period ends the property's value will be included in any financial assessments. If you sell your home within 12 weeks of admission the disregard ends from the completion of sale.

Client Contributions

When someone receives local authority funding for their care, they are still expected to pay what they can afford towards the cost. This is called a Client Contribution.

During the financial assessment (means test) they will take into account their income, pensions, savings and assets.

The council must allow you to keep a small amount from your weekly income to spend as you wish. This is called the Personal Expenses Allowance.

The council will work out the contribution you need to make towards the cost of your care and tell you how much you have to pay.

Top Ups

If you choose a home that costs more than Bromley Council will fund then a Third Party Top Up can be arranged.

A top up by a third party usually a relative or friend must meet the extra cost from their own money and is voluntary but once agreed must be paid regularly.

The person receiving care cannot usually pay their own top up.

Further help and advice:

Age UK: www.ageuk.org.uk

London Borough of Bromley: www.bromley.gov.uk/PayingForCare

Care Home UK: www.carehome.co.uk/advice/who-pays-what

Citizens Advice Bromley: www.citizensadvice.org.uk