

Healthwatch FAQs

General Questions

- **How is the council going to publicise the Care Act?**

Newsletters and updates about the Care Act in Richmond are currently available on the Council's Care Act webpage www.richmond.gov.uk/the_care_act, and are also distributed through Richmond Council for Voluntary Service's bulletins and the Council's Voluntary & Community Sector news bulletin. An engagement plan is currently under development that will map out how the council will engage with the local community and consult on specific areas of work; this will include more public workshops like that hosted by Healthwatch in July 2014. The final plan will be published on the Council's Care Act webpage.

There will also be a national public awareness campaign initiated by the Department of Health. It will consist of information for affected individuals (care and support service users, carers, care workers and people approaching point of need) and a broader programme of marketing activity to inspire behaviour change, so that it becomes more normal for people to prepare for potential care and support needs as part of their wider financial planning. This will include a toolkit of resources to be used by local councils.

- **What are the Boundaries of the Care Act? Is it user focused?**

The Care Act reforms the law relating to care and support for adults and their carers. Therefore the Act relates to all aspects of the law around adult social care. The Care Act is user focussed and aims to put people at the heart of the care and support system.

Carers

- **What happens to the carer's allowance?**

The Carer's allowance is a state benefit available for carers who provide at least 35 hours of care and it is unaffected by the Care Act. For more details, please see <https://www.gov.uk/carers-allowance/overview>

Deferred Payment Agreement – Renting

Changes in the Care Act mean that more people will have the right to a deferred payment agreement. The Department of Health consultation on the Care Act draft regulations and guidance asked what would incentivise people with a deferred payment agreement to rent out their homes. The following questions arose from our local consultation

If I rented out my home:

- **Who funds repairs for the tenant?**

- **Whose responsibility will it be to make the house rentable and fit for purpose for the new tenant?**
- **How would I know that people renting it are reliable?**

We would expect that should a person with a deferred payment agreement choose to rent out their home; the property management would be the responsibility of the home owner.

Deferred Payments – Inheritance

- **What happens with inheritance with a Deferred Payment agreement?**

A deferred payment agreement means that a person entering a care home can defer the costs of their care to be paid at a later date, by placing a charge on their property (provided it is not occupied by a spouse or dependent relative). Often, costs are deferred until after a person has died. Once the property is sold, and the care costs repaid, the remainder of the proceeds go to the service-user or their estate. Note that the Care Act places a cap of up to £72,000 on the amount that a person will have to pay towards their care and support in their lifetime and so the charge placed on a property should not be more than this amount, plus any contributions towards general living costs in a care home which are deferred.

Care Accounts

- **People are not going to understand the importance of a care account. How will you explain this?**

The Care Act places a duty on Local Authorities to ensure the provision of good information and advice about the care and support system, including access to independent financial advice. In addition to training council staff about the Care Act we will be training key representatives in the voluntary sector about Care Act changes including Care Accounts to be ambassadors for the Care Act and provide people with detailed information about Care Accounts

Additionally, the Department of Health will be initiating a national communications campaign which will cover the Care Act and include “a broader programme of marketing activity to inspire behaviour change at a societal level, so that it becomes more normal for people to prepare for potential care and support needs as part of their wider financial planning”. Please see http://www.local.gov.uk/care-support-reform/-/journal_content/56/10180/6395926/ARTICLE

- **What happens to funding and care when levels of illness, and therefore need, changes?**

A person can request a reassessment if they feel that their care and support needs have changed. The council will then review current care arrangements and make changes according to need.

- **The Care Act costs money, what do we have to give up to afford it?**

The Department of Health have allocated funding to cover the implementation of the Care Act. Nationally, this includes implementation funding of £335 million, and a revenue allocation of £130 million through the Better Care Fund (a joint health and social care budget with the NHS)

to cover some on-going additional costs. The Council is lobbying to ensure that changes of the Act are all fully funded.

- **What happens if lifelong cared for inherit a lot of money? Do they still get free care?**

Currently, when a person with care and support needs gains assets (such as inheritance) which results in them having assets above the financial threshold they will be expected to contribute towards the costs of their care and support. However, the Care Act introduces a cap on the amount an individual will have to pay towards their care and support within their lifetime. It is anticipated that the cap will be set at a lower level for those who develop care and support needs before reaching old age, and free care being given to those with ongoing needs from childhood, however this is yet to be confirmed.

- **How does power of attorney affect the rights of cared for?**

Please see the NHS website for information about Power of Attorney <http://www.nhs.uk/CarersDirect/moneyandlegal/legal/Pages/Powerofattorney.aspx>

- **Will this affect direct payments as there have already been changes to what I can spend my payments on?**

As is currently the case, a direct payment can be spent to meet eligible social care needs. From April 2015 service-users who have their care and support needs met in a care home will also be eligible for a direct payment.

The Cap

- **Is the cap at £72,000 regardless of what care you choose? - Public vs private?**

The cost of meeting a person's eligible care and support needs, as assessed by the council, will count towards the cap of £72,000. This is regardless of whether a person's care and support needs are being met by the council or funded by the individual.

- **If you're in private care and you reach the cap and run out of money, will the council take you out and choose cheaper care? Can you go into a home of your choice?**

Once a person reaches the cap of £72,000, the Council will become responsible for meeting an individual's eligible care and support needs. If the individual wishes to choose a more expensive care and support package they can choose to 'top-up' by paying for the additional costs.

Personal choice is taken into consideration when setting out how an individual's care and support needs will be met, which includes choice of accommodation.

- **How does the cap on care costs work in conjunction with the Deferred Payment Agreement?**

A deferred payment agreement means that an individual who is having their care and support needs met in a residential home can defer paying the costs of their care by placing a charge on their property. The Council is then repaid at a future point when the property is sold.

The cap on care costs means an individual will not have to contribute more than £72,000 towards their care and support within their lifetime, plus a means-tested contribution towards the general living costs in a care home. Therefore, in the case of a deferred payment agreement, a charge of no more than £72,000, plus the amount of deferred general living costs, will be placed on the property before the Council becomes responsible for meeting the individual's care and support costs.

- **What type of care counts towards the cap of £72,000?**

The cost of meeting a person's eligible care and support needs, as assessed by the council, will count towards the cap. This will not include:

- 'Extra' care costs, for example, if a person chooses a more expensive care option
- Any support not covered in the care and support package
- If a person's care and support needs are being met in a care home, 'general living costs' of around £12,000 a year will not count towards the cap