

# THE HEALTH AND SOCIAL CARE SYSTEM IN SCOTLAND

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The integration of health and social care has been a long-term policy objective of successive Scottish Governments. In contrast to the NHS in England, since 2004 Scottish health commissioning and provision has been integrated under the management of NHS Boards. The NHS Reform (Scotland) Act 2004 also required NHS Boards to set up community health partnerships as a means of achieving greater integration within the NHS and between health and social care.

This summary sheet is intended to give a general overview of how this integrated system works.

## LEGISLATIVE CHANGES

The Scottish Government introduced significant legislative changes to deepen the integration of health and social care, via the Public Bodies (Joint Working) (Scotland) Act 2014. Under the 2014 Act, local authorities and NHS Boards are required to delegate a wide range of functions to an “integration authority”. The overall aim of the integration model is to create a single system for the joint commissioning of health and social care services

## DOMICILIARY CARE

Someone who is over 65, living in Scotland and has been assessed by the Social Work Service department of their Local Authority as needing care at home, will have this care provided free of charge. However they will still need to pay for their own non-personal care such as cleaning, laundry, meals on wheels etc.

Someone needing care who is under 65 will be means tested to determine what the local authority will pay for. Each local authority applies different criteria as to who they will help, dependent on need.

## RESIDENTIAL CARE (IN A CARE HOME)

In Scotland the cost of care in a care home is broken down into three constituent parts:

1. "Hotel" or accommodation costs
2. Personal Care
3. Nursing care

Once someone's needs have been assessed and agreed by their local Social Works Department, the local authority will make flat rate contributions towards any personal and, if necessary, nursing care required, based purely on the person's physical/care needs and regardless of their financial situation. The current rates are:

- £171 per week for personal care
- An additional £78 per week if Nursing Care is required (2017/18)

A financial means test is only carried out to determine whether they must pay for their own "Hotel" or accommodation costs.

However, the personal care contribution is only made for those who are over 65, and if they take this payment they lose any entitlement to Attendance Allowance or to the care component of the Disability Living Allowance which they may have previously been receiving. These allowances are currently worth £83.10 per week at the higher

rate or £55.65 per week at the lower rate (for Attendance Allowance) or middle rate (for the Disability Living Allowance). These rates apply in the 2017/18 financial year.

## **LOCAL AUTHORITY FINANCIAL ASSESSMENT (RESIDENTIAL CARE)**

Once it has been established that someone requires residential care, the local authority will carry out a financial assessment, called a means test, which looks at the individual's income and savings. This will establish whether they are deemed able to pay for some or all of their own accommodation costs and whether they are eligible for any financial help from the council. The outcome will mean the local authority will do one of the following:

- Agree to meet the full cost of the individual's needs.
- Agree to meet some of the cost (and the person will need to top up the rest).
- Decide that the person being assessed must meet the full cost of the accommodation element of their own care.

### **Savings and capital**

Those with personal capital assessable assets exceeding £26,250 (2017/18) must pay for all their own accommodation costs.

Currently only those whose assets are below £16,250 (2017/18) qualify for the maximum local authority budget, often known as the standard rate or contract rate. Unlike in England, this rate doesn't vary from one local authority to another as there is a National Care Home Contract (NCHC) which standardises terms and conditions for local authority funded residents.

During 2017/18 this rate is set at:

- £667.09 p.w. for nursing care.
- £574.41 p.w. without nursing care.

A care home which charges above this standard rate for "Hotel" costs can be selected, but the resident or a third party will have to pay the difference.

Those whose capital assets are worth more than £16,250 but less than £26,250 will not be asked to pay for their accommodation costs in full, but *will* be asked to make a contribution, known as a capital tariff, of £1 per week for every £250 (or part thereof) over £16,250 that they have.

### **Income**

If the individual's income (including some benefit entitlements) is more than the cost of their accommodation fees, they will have to pay their own fees. Some types of income (such as certain disability benefits and certain types of pension) are not counted in the means test. If their income is less than the cost of their fees, they may be asked to make a contribution towards the cost of care, depending on their other circumstances.

## **THE 12- WEEK PROPERTY DISREGARD**

The local authority must disregard the value of a care home resident's former home for the first 12 weeks of a permanent stay in a care home if the value of any of their other capital assets is below the capital limit of £23,250. Any fees accumulated during this 12 week disregard period do *not* have to be repaid later, even if the value of the resident's former home then causes them to be regarded as a "self-funder".

## **DISREGARDED CAPITAL**

Some capital is disregarded or ignored. Capital which is completely disregarded includes the surrender value of life insurance policies, the value of personal injury compensation which is in a trust or administered by a court, and personal possessions (if they were not bought deliberately with the intention of avoiding care costs).

## **DELIBERATE DEPRIVATION OF ASSETS**

If it is clear that someone has given away their assets or otherwise disposed of them specifically to make themselves more likely to get local authority assistance with care home fees, the local authority may decide that this is “deliberate deprivation of assets” and could make their financial assessment as though the person still had those assets.

## **PERSONAL EXPENSE ALLOWANCE**

Once the council has full details regarding income and savings, it can calculate how much the person requiring care should contribute towards the costs involved. After the assessment the care-home resident must always be left with a weekly amount of at least £26.40 - their personal expenses allowance.

## **NHS CONTINUING HEALTHCARE AND HOSPITAL BASED COMPLEX CLINICAL CARE**

NHS continuing healthcare in Scotland was replaced on 1<sup>st</sup> June 2015 by a scheme called Hospital Based Complex Clinical Care. This scheme is only available to people in hospital. If someone needs long-term, complex clinical care, their needs will be assessed based on one question – can their care needs be properly met in a setting other than hospital.

If it is possible to provide the necessary care outside of hospital, they will receive that care in the setting which is agreed is the best option for them. This could be their own home, a care home or supported accommodation.

If they have a health need, the NHS will still be responsible for meeting that need, free of charge. If they are already receiving free NHS continuing healthcare under the old scheme, they will continue to receive it for as long as they are eligible.

However, if they are going into a care home, they will be asked to contribute towards social care and accommodation costs, subject to their financial circumstances. Only those who need to be in hospital will be exempt from charges relating to their accommodation. Everyone else - whatever their age or disability will be expected to contribute to the funding of their accommodation costs, following a financial assessment.

## **REGULATION IN SCOTLAND**

The health care regulator is the Care Inspectorate, while the regulation of the independent health care sector sits with Healthcare Improvement Scotland. Further information can be found at <http://www.careinspectorate.com/> and <http://www.healthcareimprovementscotland.org/>

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