Leicester City Council: Funding for people who live or stay in care homes

March 2021

Practice Implementation Lead



Contents

[A. Residential Care Homes 3](#_Toc65744682)

[BAND 1 3](#_Toc65744683)

[BAND 2 3](#_Toc65744684)

[BAND 3 3](#_Toc65744685)

[BAND 4 3](#_Toc65744686)

[BAND 5 3](#_Toc65744687)

[B. Nursing Care Homes (Funded Nursing Care) 4](#_Toc65744688)

[C. Additional Needs Allowances 4](#_Toc65744689)

[1. 1:1 or 2:1 hours 5](#_Toc65744690)

[2. Sensory Needs 5](#_Toc65744691)

[3. Cultural Needs 5](#_Toc65744692)

[4. Other Additional Support Needs 5](#_Toc65744693)

[5. Other Local Authority Rate 6](#_Toc65744694)

[6. Market Rate 6](#_Toc65744695)

# Residential Care Homes

When it is assessed that someone has needs over a 24 hour period and they will live or stay in a residential home, we have agreed 5 levels of funding, which we call bandings. You will agree which one applies as follows:

## BAND 1

* People requiring this funding will be able to carry out the majority of self care tasks independently and require some degree of reassurance and assistance during the day and night
* It is likely that these needs could be managed with a support package in the person own home but the person requires reassurance outside of planned visits
* NB: this banding is used very rarely

## BAND 2

* People requiring this funding usually have underlying **mental health issues or substance use** and are aged 64 and under.
* They are likely to be able to complete self-care tasks but will require support and supervision to do so consistently.
* They are likely to require support in the maintenance of treatment and/or therapeutic regimes in respect of their mental health or substance misuse to stop their mental health declining or the substance use worsening.

## BAND 3

* This can apply to people of any age or with living with any condition.
* People requiring this funding may be able to carry out some self-care tasks independently but are in need of general assistance in order to maintain a range of daily living functions, including some supervision and/or assistance with mobility during the day **and** night from **one** member of staff.
* It is unlikely that these needs could be managed in a planned way with carers at home.
* Also includes people who require regular reassurance to enable them to feel psychologically safe.

## BAND 4

* People requiring this funding will have **learning disabilities** and require support or assistance in performing most self-care tasks over a 24-hour period.
* It is likely that physical assistance will be needed as opposed to just supervision and may include management of some challenging behaviour.
* It also includes advice, supervision and/or attention for social, educational and/or recreational skills and support from staff and community nursing services in the maintenance of treatment and/or therapeutic regimes.

## BAND 5

* This applies to people of any age and any condition, where they have some of the needs described above and one or more of the following will be present:
* The need for the **support of two** members of staff for physical tasks with or without equipment
* The need for **support due to behaviors requiring staffing above that provided in the funding bandings above**- i.e. active support needs including psychological support during the night
* The need for a specialist registration to meet their equipment needs that cannot be provided at any other banding level
* Any nursing needs will be able to be managed by advice, supervision, or attention from community nursing and/or community psychiatric nursing services.

# Nursing Care Homes (Funded Nursing Care)

When it is assessed that someone has needs over a 24 hour period and they will live or stay in a nursing home, they will have received an assessment from the NHS that determines they are entitled to Funded Nursing Care. This assessment is part of the Decision Support Tool

Nursing care means any services provided by a registered nurse and involving; -

(a) the provision of care, or

(b) the planning, supervision, or delegation of the provision of care, other than any services which, having regard to their nature and the circumstances in which they are provided, do not need to be provided by a registered nurse.

* Many people who require support from a nurse live in residential homes with their health and nursing needs being appropriately met by advice, supervision or attention from the community nursing services.
* When peoples nursing needs are beyond that which can be met in a planned way by community nursing services, it is likely that they will be assessed as requiring the level of support that can be provided in a nursing care home.
* These people will require attention and care under constant supervision and availability of a qualified nurse

# Additional Needs Allowances

There will be occasions where the standard bandings we pay are not enough and we agree to pay an additional needs allowance. Our decision for agreeing these payments should be clear, defensible, and clearly documented. Details of what exactly the payment is for and at what rate/amount (if applicable) are needed i.e. 10 hours of 1:1 support at a rate of £14 an hour They will be kept under regular review to ensure that they remain the case.

Before we consider paying an additional allowance or a payment over and above the banded rate, consideration should always be given as to whether health funding/Shared Care would be appropriate.

These are sometimes inaccurately referred to as ‘Top Up’s but are different to that. It is not possible for people to use their own savings to pay their own top-up unless they have entered into a 12-week property disregard or a deferred payments agreement. We have a separate Deferred Payment Policy that covers this.

People are individual and whether their needs can be met without additional support (so within standard bandings) will vary from person to person. Some situations that would be over and above those considered to be managed without extra support are:

* + people with Korsakoff’s combined with substance use who have outbursts when unable to access substances
	+ people with memory loss/dementia who require a high or persistent level of reassurance/intervention to manage distress and avoid them leaving the building unsafely
	+ people with memory or understanding needs who display sexually inappropriate behaviour affecting others in communal areas

This list is not exclusive or exhaustive

Additional Needs Allowances can be paid under a number of situations:

## 1:1 or 2:1 hours

* Paid where someone requires either additional direct support from 1 (or two) members of staff, in way that is not usual for others.
* A person in receipt of 1:1/2 staffing must have a dedicated member of staff working only with him/her for the specified period and not shared with others.
* The member of staff will be additional to the core staffing complement of the home and have a defined role or task in relation to the person for a specified period of the day.
* The number of extra hours will be specifically agreed to ensure that the person’s needs are met in the least restrictive way.
* Details will be included in the person’s assessment/review/support plan so we can be assured that the person is receiving the support they need.

## Sensory Needs

* Paid where we have an agreement with a home that the person requires additional support due to their sensory needs.
* Details will be included in the person assessment/review/support plan so we can be assured that the person is receiving the support they need

## Cultural Needs

* We would expect that providers will offer a standard of personal care appropriate to each person which will include religious and cultural needs.
* An additional needs allowance for cultural needs would be paid if it is agreed that the person’s particular needs can only be met through an additional payment on top of the banding.
* An example would be any circumstance where culturally appropriate meals are required to be bought in or interpretation support is required, because neither can be provided directly by the home.
* Details will be included in the person’s assessment/review/support plan so we can be assured that the person is receiving the support they need.

## Other Additional Support Needs

Paid where it is agreed that the person has needs that require support above the level of the banded rate but are not requiring 1:1 support. These needs could be due to particular behaviours requiring additional levels of support.

## Other Local Authority Rate

* Different Local Authorities have different banded rates agreed with homes in their areas. Sometimes these are more than those we have agreed.
* Where people’s needs **can only be met in a specific home outside** of Leicester city then the cost that the home would usually receive from their own local Authority will be paid.
* Examples might be people who require a specialist home, or their wellbeing is best met living closer to their family who live elsewhere in the country.
* Details will be included in the person’s assessment/review/support plan so we can be assured that they are receiving the support they need

## Market Rate

* Rather than being related to the person’s needs, sometimes we agree to pay extra because there are no other options available to us.
* This should only be agreed following negotiation with the home, and with management approval that no other options are suitable.
* An example might be a person who moved to a care home following their discharge from hospital, is settled, and moving them would be detrimental to them but the cost that the NHS paid is higher than that we would normally pay
* Details will be included in the person’s support plan so we can be assured that the person is receiving the support they require.