

“Long term care for the elderly of Ireland in 2010,

The Nursing Home Subvention Scheme

V’s

The Nursing Home Support Scheme 2009 (“A Fair Deal”).

Is it really “A Fair Deal”?”

By David Beegan

**This dissertation is submitted in partial fulfilment for BA (Hons) in
Business Management.**

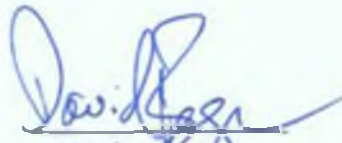
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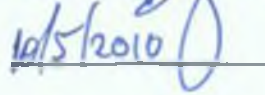
AUTHORSHIP DECLARATION

I hereby certify that this material, which I now submit for assessment of the programme of study leading to the award of BA (Hons) in Business Management is entirely my own work and has not been taken from the work of others save and to the extent that such work has been cited and acknowledged within the text of my work.

Signed:

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ABSTRACT

The Health Service Executive (HSE) is the government provider of public health care in the Republic of Ireland. It is responsible for the provision of long term care in state own and run nursing homes (public), but, also provides financial support to those who may wish to avail of services in private nursing homes.

Amongst its responsibility is a requirement to assess in the main, elderly people who wish to avail of financial support towards the cost of long term care in nursing homes (public or private).

The name of the scheme that has been in place to financially assist those who wish to avail of care in private nursing homes, has been the Nursing Home Subvention scheme, which was in place from 1993 to 2009.

However in October 2009, the Irish Government introduced a new scheme via the Nursing Homes Support Scheme Act 2009 (NHSS). Under this scheme, those who wish to avail of long term care in a private or a public facility, will be medically assessed and financially assessed, to establish if they are eligible for financial assistance, towards the cost of long term care in private nursing homes and also in public or voluntary facilities.

The following dissertation will provide an understanding of these schemes and analyse the workings of both schemes using three example case's.

The impact of both schemes will be considered, from the financial viewpoint of the Health Service Executive and also that of the elderly person, entering long term care in Ireland 2010.

A commentary will be provided to outline if in the view of the author the NHSS is in reality a Fair Deal, compared to the Nursing Home Subvention scheme.

DEDICATION

I wish to dedicate this work, to the following people who have helped me cross this academic finish line ;

To myself, for the long evenings spent travelling to and from the NCIRL, it has been at times, a challenging and demanding journey.

To my partner for her infinite calmness, support and understanding of the time required to complete this degree programme and indeed this dissertation.

To my parents, brother and sister for their continuous patience, support and encouragement during my studies.

To my class mates for the knowledge, experience, assistance and many fond memories which have been shared over the past four years.

Go raibh maith agaibh go leir

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To my employer, for the opportunity to attend this honours degree programme.

Thank you all

ABBREVIATIONS

CSAR	Common Summary Assessment Report
DOHC	Department of Health and Children
HSE	Health Service Executive
NGSINHSS	National Guidelines For the Standardised Implementation of the Nursing Home Subvention Scheme
NHSR	Nursing Home Subvention Regulations
NHSS	Nursing Home Support Scheme Act 2009 (also referred to as “A Fair Deal”)
NTPF	National Treatment Purchase Fund

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CHAPTER ONE

1.0 Introduction

1.1 Background

The Department of Health and Children is the sector of Irish government, which is responsible for the strategic development of policy and legislation, pertaining to the Irish health care system. The Department of Health is headed up by the Minister for Health, at this time the Minister is Ms Mary Harney TD.

The mission of the Department of Health and Children (DOHC) is : “To improve the health and well-being of people in Ireland in a manner that promotes better health for everyone, fair access, responsive and appropriate care delivery, and high performance”. (www.dohc.ie)

The implementation of health policy set by DOHC, is the remit of the Health Service Executive (HSE). The HSE is the government provider of health care within the Irish State. The HSE was established on 1st January 2005 as part of the provisions of the Health Act (2004). The purpose of the HSE is to provide a single organisation, responsible for the provision of health care, within the Irish state. This single organisation replaced the then eleven separate, individual health boards that existed, covering different geographical areas of the country. (www.hse.ie)

It is estimated that about 5% of all older people ever need residential or nursing home care. Such care is usually needed after a spell in hospital, but a patient is not quite well enough to manage at home alone. For some it can also be an option when an older person becomes unable to live alone, through illness or disability. (www.hse.ie)

The Irish Government enacted the Nursing Homes Support Scheme Act 2009 (NHSS), on the 27th October 2009. The main purpose of this primary legislation is to financially assist, individuals and the families of individuals who will enter long term care in the republic of Ireland.

The NHSS replaced the previous scheme, which was the Nursing Home Subvention scheme. The Nursing Home Act of 1990, subvention scheme regulation enacted in 1993 and the Health (Nursing Homes) (Amendment) Act 2007 are replaced by the NHSS Act (2009), with respect to new applications for long term care. The intention of both schemes is to provide financial assistance, to clients that enter private nursing homes in mainly the Republic of Ireland.

Both schemes are currently in operation but the Nursing Home Subvention scheme is closed to new applicants, since the introduction of the NHSS. However any financial support that was in place under the old scheme, will continue to be honoured. Funding via the Nursing Home Subvention scheme will be phased out over time, most likely as clients move across to the NHSS, or, if a client's circumstances change, resulting funding no longer being required.

Financial support under the Nursing Home Subvention scheme, was only applicable to private nursing homes that were not registered with the HSE in their area. It should also be noted that subvention was not available to HSE run facilities i.e. those that are run by the state.

All applicants to the NHSS, have to be assessed not just financially but also medically.

The purpose of a medical assessment in the context of the nursing home subvention scheme is to establish if an applicant, actually requires long term or does not.

The Nursing Home Subvention scheme, permits the HSE to make payments directly to private nursing homes. Payment would be a contribution towards the cost of care for a client, it does not cover the full cost of care.

However the NHSS permits the HSE to make payments to a private nursing, paying the difference between the client's contribution and the cost of care, which in effect removes the shortfall that would exist under the Nursing Home Subvention Scheme. Under the NHSS there is a requirement to also assesses the contribution to be made by an applicant should they admit to a HSE unit.

The National Treatment Purchase Fund (NTPF) is charged with the responsibility of negotiating and agreeing the cost of care in long term care facilities. This task was completed for private nursing homes and also HSE facilities. In effect it means that a price has been agreed and set for all those who provide long term care, within the Irish health care system, once the provider has applied and been accepted as part of the NHSS.

To ensure consistency in the example cases used for both schemes, the only differentiating factors are the schemes themselves, depending on the circumstances of the applicant in each case.

An outline of both schemes will be provided to assist readers understanding of the how the schemes operate and the resulting different outcomes to the client and the HSE.

A commentary will be provided, based on the details of the dissertation and related documents to establish if, in the view of the author the NHSS (“A Fair Deal”) is actually “A Fair Deal”, compared to the Nursing Home Subvention Scheme it has replaced. Consideration will be given from a financially perspective for the client and that of the HSE

CHAPTER TWO

2.0 Literature Review

2.1 Introduction

The literature review process used for this topic is in the main secondary research i.e. information that is already available and published in the respective areas. Stewart and Kamins (1993) have defined secondary information as putting together sources of data and knowledge which has been composed by others, documented and stored in an acceptable format.

Due to the sensitive nature of the information required to complete this work, the dynamics of the care group involved, data protection etc; the author deemed it inappropriate and unnecessary to have interviews, surveys or direct involvement of older persons in this process. The ethical considerations in section 3.7 provide a greater explanation of these concerns.

The author has established the facts of three different example cases, with diverse circumstances, relating to the schemes which are being compared, the Nursing Home Subvention Scheme and the NHSS. The names or other unique identifying details which these cases are based upon have been removed; any similarities to the actual cases are coincidence.

The purpose of this literature review is to provide an outline of the main schemes available from the state, to financially assist elderly people requiring long term care.

Both schemes that are currently in operation will be explained using real life examples. A comparison will then be made between, the historic nursing home subvention scheme and the current NHSS.

The literature review is based upon legislation, guidelines, articles, internet sources and access to relevant information of both schemes. The details of these sources, is provided within the main body of the text of each chapter and summarises the bibliography.

2.2 Why Do People Require Long Term Care

The placement of an elderly relative, in many cases a mother or father into long term care can be a difficult experience, not just for the client but for their family. The term long term care relates to the need for patients, to be cared for over an extended period of time. In many cases it implies that a person will reside in a facility that is not their own home but, a unit that can cater for their care needs, such as nursing care whilst providing bed, board and other required facilities and services.

The majority of people who enter long term care do so as they can no longer manage themselves at home or their family is unable to care for them. There are a number of reasons why this maybe the case, for example, a person who suffers from dementia and wanders, they cannot be left alone in case they wander out onto a busy road or fall into a local river.

Irish society including the family unit has changed in the last thirty years, people appear to have busier lives. Often both members of a couple work or need to work to maintain a lifestyle which they have come accustomed to. As both work, should any of the parents of these couples become unwell, the couple are unable to give up their jobs to care for their

parents nor do they have the facilities in their homes to care for their elderly relatives. For many, the only option is to place parents or elderly relative into care in either a public nursing home, or private nursing home.

There are of course facilities that provide care for others who may not be elderly such as young people with mental or physical disabilities. However the purpose of this dissertation is to examine the circumstances that refer to those that are over sixty five years of age and require long term care.

2.3 What Is Nursing Home Subvention

Subvention is outlined as a payment payable by a health board (now HSE) towards the cost of a person's care, in a private nursing home, provided that person has been deemed as medically requiring care in a private nursing home. (NHSR 1993, s. 7)

Under the Nursing Homes Act, (1990), clients who reside in private nursing homes may be entitled to apply to have the cost of their maintenance subvented by Health Boards, now HSE (Comptroller & Auditor Special Report 2001,p 1)

Within the Nursing Homes Subvention Regulations (1993) and subsequent amendments, the HSE can make a grant payable towards the cost of providing nursing care in a registered private nursing home. If the applicant meets the assessment requirements outlined, the HSE has a statutory obligation to provide the basic subvention grant to those that qualify regardless of other budgetary pressures. NGSINHSS (February 2007), Section 1.

The Nursing Home Subvention Scheme is now closed to new applicants, since the introduction of the NHSS. Any financial support that is in place under the Nursing Home Subvention Scheme is being honoured, for the duration a client requires such assistance. It is anticipated this scheme will be phased out in the coming years.

2.4 Who May Receive Nursing Home Subvention

A person who has applied for the scheme, or, a person who has had an application made for the scheme on their behalf e.g. the patient who is going into care or a family member may apply for them. The funds payable, are not paid to the client or the person who has applied on their clients behalf, funds are paid to the registered nursing home directly.

2.5 Why Is Nursing Home Subvention Required

The cost of long term care in a private nursing home can vary depending on many factors such as the staffing levels, care needs or dependency catered for, insurance costs of the nursing home.

The average cost of care is €1,000 per week (appendix XII), equates about €52,000 per year. A state pension for a person under 70 years of age is €219 per week, about €1388 per annum, as can be seen in this quick comparison the cost is many times a basic income for an elderly person. Given the average industrial wage in Ireland, of a person who is actually working is estimated to be €30,000 per annum (CSO 2006), many clients entering care require financial assistance to help meet care costs. It is important to remember most people who enter nursing homes are over 65 years of age and are no longer employed so they rely on their pension(s) and savings if they have any.

2.6 Where Does Nursing Home Subvention Scheme Apply

The scheme applies to private nursing homes within the Republic of Ireland that are registered with the HSE. A nursing home means a nursing home registered in accordance with Section 4 of the 1990 Act (Health Act, 1990)

The HSE may pay a subvention for a person whom it has decided qualifies for a subvention, in a nursing home in Northern Ireland, which is a nursing home registered by a health and social services board. Nursing home subvention regulations)1993), s 13.

A service which is considered to be essential to the maintenance of a person in a nursing home and common practice in most nursing homes shall include bed and board, nursing care appropriate to the level of dependency of the person, incontinence wear and bedding, laundry service and aids and appliances necessary to assist a dependent person with the activities of daily living” Articles 16.1 – 16.2 (1993 Regulations). Payments to Northern Ireland are not necessary for the example cases provided in this work.

2.7 How Is An Application Made For the Subvention Scheme

To apply for the subvention scheme an application form must be completed in full and submitted to the relevant local office i.e. the office nearest to where the applicant normally resides.

All relevant documentation must be supplied e.g. bank statements, failure to supply required documentation could lead to suspension of the application. On receipt of requires information a decision is made and communicated to the applicant. A template application form is included in appendix IX

2.8 Why Is An Applicant Medically Assessed In The Nursing Home Subvention Scheme

The mandatory dependency assessment shall be undertaken by an appropriately trained assessor. The Folstein and Barthel assessment tools form the basis of each dependency assessment, along with the HSE social and medical assessment tool. The outcome of the dependency assessment must indicate if the applicant is sufficiently dependent to require maintenance in a nursing home. NGSINHSS, (February 2007), Section 2.1

2.9 Enhanced Nursing Home Subvention

An 'enhanced' subvention payment / grant is a discretionary top-up payment which may be approved by the HSE where the applicant's means and the level of basic subvention approved are insufficient to meet the cost of nursing home care.

Such a payment is discretionary; there is no entitlement to such a contribution. However, there may be individual circumstances where such financial assistance may be provided, considering all of the factors pertaining to the case in question. NGSINHSS, (February 2007), Section 2.3.

For the purpose of this dissertation, enhanced subvention will not be considered, as the HSE is not obliged to provide such funding.

2.10 How Is A Calculation Made In The Nursing Home Subvention Scheme

Following an assessment of medical dependency, a means test is conducted. This means test determines whether a subvention is payable or not, considering the income and assets of the applicant. The maximum rate of subvention payable is €300 per week, plus one fifth of the appropriate State Pension rate (formerly Old Age Pension).

The income of the applicant is assessed as a weekly figure. The assets of the applicant are also assessed as weekly figure however there is a disregard of the first €11,000. It is also possible that some assets may not be included in an assessment if certain criteria is met e.g. principal private residence of single applicant is not assessed after three years in care.

An applicant's weekly income, imputes weekly incomes from assets that are greater than €11,000 are added to give a total weekly means. 1/5th of the state pension is deducted as a personal allowance, to provide an assessable weekly means. Depending if this figure is greater or less than the state pension amount, the applicant may receive the maximum €300 per week subvention. However if the applicants assessed income is greater than the state pension rate, the subvention amount of €300 per week is deducted accordingly and may not receive any subvention. However if there income is less equal to the state pension then they will receive the maximum €300 per week subvention but not exceed the maximum rate.

The Second Schedule of the 1993 Regulations and also Section 2 of the NGSINHSS (2007) provide a more detailed outline of the assessment criteria. Also provided is a template in appendix I to assist understand the calculation and a number of example cases.

2.11 What is the NHSS

The DOHC states on its website that the NHSS which is also referred to as A Fair Deal, grants financial assistance to people who need long-term nursing home care. This scheme is administered by the HSE and replaces the NHSS from 27 October 2009. Under the NHSS scheme, an applicant will make a contribution towards the cost of their care, the remaining balance if any, is paid by the HSE. The scheme will only provide financial assistance to approved private nursing homes, approved voluntary nursing homes and approved public nursing homes. (www.dohc.ie)

2.12 Who May Receive Nursing Home Support

Any person who is ordinarily resident in the State and is assessed as needing long-term nursing home care can apply for this scheme. Ordinarily resident means that you have been living in the State for at least a year or that you intend to live in the state for at least a year (DOHC & HSE NHSS Booklet 2009, p2).

The scheme is budget capped, as a result waiting lists may apply if funds are exhausted.

2.13 Why Is Financial Support Under The NHSS Required?

The scheme provides financial support to those who apply and qualify for the scheme after a medical and financial assessment are finalised. Many people are not aware of the cost of care prior to their initial queries with care providers, the average cost of private nursing home care in the geographical area that is being considered for this dissertation is €1,000 per week. This figure is based upon currently agreed rates care with the NTPF and each private nursing home, appendix XII provides a summary of how this average figure was calculated.

2.14 Where Does The NHSS Apply

As outlined in NHSS Act (2009) Part 1, 3 and s.41, this scheme applies to care facilities that have been designated as predominately for the care of older people and have entered into an agreement with the NTPF, regarding the agreed cost of care. Public and private facilities can be included in this scheme. This is a significant change from the subvention scheme which provided assistance to private nursing homes only, resulting there is a more equitable and universal financial assessment. The scheme applies to facilities within the state of Ireland and does not include those care facilities within the North of Ireland, UK or the rest of Europe.

2.15 How Is An Application Made For the NHSS

Applications are made to your local Nursing Home Support Office on the standard application form, a copy is provided in appendix X. There are three steps to the application process;

Step 1 is an application for a Care Needs Assessment.

The Care Needs Assessment identifies whether or not you need long-term nursing home care, it forms part of a medical assessment using a common summary assessment record a copy of such a record is on appendix XI.

Step 2 is an application for State Support.

This will be used to complete the Financial Assessment which determines your contribution to your care and your corresponding level of financial assistance ("State Support").

Step 3 is an optional step.

This option should only be requested if an applicant wished to apply for the Nursing Home Loan, this is also termed "Ancillary State Support". (DOHC & HSE Nursing Homes Support Scheme Information Booklet 2009, p3) Ancillary state support is further explained in section 2.18 of this literature review

2.16 Why Is An Applicant Medically Assessed For The NHSS

The intention of this scheme is that those who require long term care are and apply for the scheme are assessed, to establish if they will receive any financial support towards the cost of their care. It is a natural progression and condition of the NHSS scheme, that only those who actually require long term care, will be considered for financial support. The medical

assessment of an applicant is referred to as a “care needs assessment”. Nursing Homes Support Scheme Act (2009) s.7. A common summary assessment record (CSAR) is required to be completed for those entering care after commencement of scheme. Those who were already in care, in an approved facility do not require a CSAR to be completed

2.17 Care Representative for the NHSS

Considering the age profile of those applying for the scheme, frequently there are individuals who have a difficulty in making decisions regarding care and management of their affairs, in many cases there is diminished mental capacity.

For the purpose of the scheme a care representative can act on behalf of an applicant in relation to, an Ancillary State Support (a loan) application and the subsequent actions that are necessary to be performed regarding the loan. A Care Representative can also act on behalf of the person in relation to making an application for a Care Needs Assessment, State Support, or any other matter relating to the scheme.

The Care Representative is appointed by the Circuit Court not the HSE, some examples of people who can apply to be a Care Representative are; spouse/partner, parent, child, brother sister. Specific criteria must be met to be appointed as a Care Representative such as medical reports confirming the applicant does not have capacity, sworn affidavits, consent and so on. The County Registrar decides upon applications and issues decisions accordingly

More details are available regarding necessary information to become a Care Representative on the courts website (www.courts.ie)

2.18 NHSS Ancillary State Support

A unique aspect of this scheme, that relates to land and property based assets within the state, referred to as relevant assets, for example a person's principal residence or land.

Should your assets include land and property, the 5% contribution based on such assets may be deferred and repaid after your death. This is known as the nursing home loan.

Your principal residence will only be included in the financial assessment for the first 3 years of your time in care. This is known as the 15% or three-year cap'. It means that you will pay a 5% contribution based on your principal residence for a maximum of three years regardless of the length of time you spend in nursing home care. In the case of a couple, the contribution based on the principal residence will be capped at 7.5% where one partner remains in the home, while the other enters long-term nursing home care, the three-year cap applies. If you opt for the Nursing Home Loan in respect of your principal residence, your spouse or partner can also apply to have the repayment of the Loan deferred for their lifetime, once certain criteria is satisfied.

After 3 years, even if you are still receiving long-term nursing home care, you will not pay any further contribution based on the principal residence. This three-year cap applies regardless of whether you choose to opt for the Nursing Home Loan or not. If you have already been in a nursing home for 3 years, before applying for the scheme then you do not pay the 5% on your principal residence. The three-year cap also extends to farms and businesses in certain circumstances.

All other assets, land based or cash based will be taken into account for as long as you are in care in accordance with schedule 1 of the NHSS.

(www.dohc.ie) , DOHC & HSE Nursing Homes Support Scheme Information Booklet (2009), p8, NHSS Act, (2009) s.15 – s.20.

2.19 How Is A Calculation Made In The NHSS

The Financial Assessment considers an applicant's income and assets in order to work out what your contribution to care will be. The HSE will then pay the balance of the difference between the client's contribution up to but not exceeding the cost of care.

For example, if the cost of your care was €1,000 and your weekly contribution was €300, the HSE will pay the weekly balance of €700. This payment by the HSE is called State Support.

In the case of a couple or a member of a couple, the assessment will be based on half of the couple's combined income and assets. For example, if a couple's income was €800 per week, the assessment of the person needing care would be based on 50% of €800 per week i.e. €400 per week. In other words, the person needing care is considered to have a total income of €400 per week to contribute towards the cost of their care.

NHSS Act, (2009) Schedule 1, Schedule 2. DOHC & HSE NHSS Information Booklet (2009), p5 – p7.

2.20 Summary of Financial Assessments

Nursing Home Subvention

NHSS

Establishes how much income is greater than or less than state pension per week.	Establishes how much income is per week.
Min. subvention is zero, max. amount is €300 per week plus 1/5 th of state pension.	Min. support is zero, max. is weekly cost of care.
Disregard €11,000 per applicant.	Disregard €36,000 per applicant.
Principal residence subject to 3 year cap.	Principal residence, farm or relevant business can be subject to 3 year cap.
Principal residence disregarded in some other circumstances e.g. spouse resides.	Principal residence not disregarded in some other circumstances e.g. spouse resides.
Loan is not available from HSE.	Loan can be availed of from HSE.
Only assist those entering private nursing homes.	Assists those entering private, public and voluntary nursing homes.
Client makes up difference between subvention and agreed cost of care.	HSE pays difference between client contribution and agreed cost of care.
No care representative option.	Care representative option.

CHAPTER THREE

3.0 Research Methodology

3.1 Introduction

The purpose of this chapter is to provide an overview of the methods and techniques that were used to research the contents of this dissertation, the methods of research adopted will be outlined also.

To ensure clarity and an elimination of any ambiguity, the schemes that are being discussed by the author are the Nursing Home Subvention Scheme and the NHSS. This is done in the context of a financial assessment within the remit of the individual schemes. Example cases will be provided to help understand the schemes impact. The example cases are Example Case A, Example Case B and Example Case C, which will be outlined in greater detail in sections 3.9 to 3.11. What will be established during and as a result of this process is the financial impact on the applicant but also the HSE. It is not the intention of the author to discuss in detail other aspects of the schemes, for example medical assessments or why a certain care facility may be preferred over another.

The researcher will also outline the rationale for utilizing a type of research as well as conveying the benefits and limitations of the chosen method. There are in the main two types of research, quantitative and qualitative.

Quantitative research can be defined as research into an already identified topic, based on testing theory, measured with numbers, and analysed using statistical techniques. A main quantitative research method could be a survey.

Qualitative research is performed via mainly open-ended questions and is expressed in non numerical terms. Both approaches have their individual strengths and weaknesses. It seems that many researchers agree that both of these research methods require each other, more often than not.

In many circumstances, researchers fall into one or other category, either relying exclusively on upon survey questionnaires or statistical analysis quantitative approach or using only qualitative, non numerical methodologies. Increasingly however, researchers recognise that each approach has positive attributes and that combining both methods can result in the benefits of both methods.

3.2 Method of Collection

When collecting research data, there are two main types to consider. The researcher will need to consider if it is necessary to collect new information, known as primary data, or whether information already identified, known as secondary data will suffice. Primary data can be depicted as data collected by the researcher themselves using methods such as surveys or interviews.

Secondary data is data that is collected from external sources such as internet, books, legislation or articles. There is obviously much secondary information, however it is possible that some questions maybe asked of the accuracy and reliability of certain data via this process.

3.3 Secondary Research

The secondary research completed by the researcher in relation to the nursing home subvention scheme and the NHSS discovered a vast volume of information. Research was conducted primarily within the knowledge bank of the HSE, where the researcher discovered many articles, internet sources, legislation, regulations, guidelines and actual documents used for each scheme. This data provided a significant insight and understanding as to the operation of both schemes.

3.4 Limitations of Secondary Research

While secondary data can be very beneficial to a research project there are a number of limitations of its use. According to Sunders, Lewis and Thornhill (2007) these include;

- It may have been collected for a purpose that does not match your need.
- Access may be difficult or costly.
- Aggregations and definitions may be unsuitable.
- No real control over quality.
- Initial purpose may affect how data is presented.

As a result of these limitations the researcher chose to adopt a method of case analysis to gain an insight into how the example Case's A, B and C would be assessed financially under the schemes that are in place. "There is growing confidence in the case study as a rigorous research strategy in its own right" (Cassell C. & Symon G 2004 p.323)

3.5 Primary Research

According to Bryman A. & Bell B.,(200, p28) the qualitative is a research strategy emphasising words rather than quantification in the collection and analysis of data that:

- Predominantly emphasises and inductive to the relationship between theory and research, in which the emphasis is placed on the generation of theories.
- Has rejected the practices and norms of the natural scientific model and of positivism in particular in preference for an emphasis on the ways in which individuals interpret their social world
- Embodies a view of social reality as a constantly shifting emergent property of individuals' creation

The primary research information was obtained by the observing of a sample of case files within the HSE.

3.6 Limitations of Primary Research

The relatively small sample size could be seen as a limitation, this was due to the individual circumstances of cases being unique to each applicant for both schemes. In effect no two cases would be the same. Further sampling is not within the scope of this dissertation due to the need to keep within set guidelines such as word count.

3.7 Ethical Consideration

According to Saunders, Lewis and Thornhill (2007) p28 there are a number of general ethical issues a researcher must consider;

- Privacy of possible and actual participants.

- Voluntary nature of participation and the right to withdraw partially or completely from the process.
- Consent and possible deception of participants.
- Maintenance of the confidentiality of data provided by individuals or identifiable participants and their anonymity.
- Reactions of participants to the way in which you seek to collect data, including embarrassment, stress, discomfort, pain and harm.
- Effects on participants of the way in which you use, analyse and report your data, in particular the avoidance of embarrassment, stress, discomfort, pain and harm.
- Behaviour and objectivity of you as a researcher.

The researcher decided to keep details of the individuals in question anonymous, due to the circumstances outlined above. It has also been noted by the researcher that a copy of the research piece should not be catalogued in the National College of Ireland, Norma Smurfit Library.

As mentioned previously in the introduction of this chapter, case analysis is being used, as it is considered by the author the most appropriate manner to explain the differences that may exist between both schemes. Case analysis will paint a very clear and real picture of the facts, of the cases, that have been chosen.

There are a total of three case's provided as examples, these three case's are sourced from actual circumstances, however the names have been changed to protect those involved.

3.8 Limitations

This dissertation will, outline the main elements and context of the nursing home subvention scheme from 1993 to present day, there will also be an outline of the main elements of the most recent NHSS 2009.

The focus of this study is within the Eastern part of Ireland, the most populated area of the country. Within that Eastern area, the concentration of this work will be on South Dublin and the counties that immediately surround it, Co Kildare and Co Wicklow. The same financial assessment will apply throughout the country irrespective of a clients address, however the author has a greater familiarity, understanding and access to the required data of the area's mentioned.

There will be three example cases which will provide a further understanding as to how the scheme works in theory and practice. Each case will have the basic details outlined, the details will be sufficient to apply the means test of the Nursing Home Subvention Scheme and also the NHSS.

Other research options, as an alternative to case analysis were considered by the author. Some options considered were questionnaires, interviews and also surveys. Having considered these options and reflected on them, it was decided not to proceed with them, as they were not suitable to the individuals concerned. Some of the ethical issues which can arise have been mentioned earlier in this chapter. To further assist in understanding such issues, many of the actual issues that arose in the course of this work are outlined in the following paragraphs of this chapter.

The individuals concerned are all older people, who are pensioners. Many of these individuals could be of unsound mind, have a mental illness, be physically disabled or unable to communicate in general.

Some individuals could also be unwilling to discuss their financial and personal business with a person they are unacquainted with, such as the author. Difficulty would arise in regards to obtaining informed consent, for those who may have certain conditions e.g. dementia. The author did not want there to be any misplaced perception regarding invasion of privacy or any concerns raised, relating to other insensitivity towards potential interviewees. These are just some of the factors, which could cause unnecessary and unintended stress on already ill patients in care.

It should also be acknowledged that possible data protection concerns may have been raised if contact was made with the individuals based on data collected by a state body.

It is not the intention of this dissertation to provide, a detailed line by line account of the workings of either scheme. It is not stated or claimed by the author that the three example cases provided are the only combinations that may apply, this is not the case. The author accepts and understands there are significant and varying combinations of circumstances that could apply. The author is clearly stating that, the details provided in this dissertation are to provide an appreciation for the reader as to how both schemes operate, how the financial assessment is applied to each of the three cases. Should additional details be required on the

operation of either scheme the necessary source details have been listed in the bibliography and referenced during the text.

One can also look to Scotland as a comparative scheme, regarding financial support provided by the state towards long term care. Funding of long term care for the elderly has been the responsibility of the local authorities since 1993. Within the Scottish scheme, funding for accommodation and living costs by the council towards an applicant's long term care, will be determined following an assessment of the individual's capital and income. There are circumstances which permit the council to create a charge over relevant property, following an application to the scheme. An option also exists to offer a deferred payment opportunity, whereby the Local Authority pays the costs of care of a client. In the meantime debt accumulates and is recovered at a later date from the estate of the applicant, for example, on the sale of the property or on the death of the individual. (scotland.gov.uk), (willpeople.co.uk)

Due to the necessary ethical compliance, which has been outlined earlier in this chapter, the author was unable to provide copies of the actual application forms completed in each of the example cases. However a copy of the application template that is used for each scheme is included in the appendices as mentioned earlier. It can be seen clearly from these templates what data is necessary to be supplied with an application, to enable the finalising of a decision for financial support.

Both application forms provide the criteria necessary to process an application and make a decision whether financial support is payable or not. Some of the necessary information is detail such as, if the applicant is single, what income, cash assets, property or land based

assets they may have. The answer to these questions has been included in the details provided for each of the example case's A to C.

A summary of each example case is outlined in tandem with the details provided on the original completed application forms for each scheme.

3.9 Example Case A

The information supplied in this example case, is a summary of the case, due to the limitations provided in section 3.8.

Ms A is a single lady, sixty six years of age, who lives alone in rented council accommodation. Ms A has resided in this property for the last forty years. Ms A does not have an interest in any other property. Ms A receives a non contributory state pension (formerly the Old Age Pension) of €219 per week as her only source of income, there are no additional occupational pensions, no additional income from investments such as stocks, shares etc. Ms A has a total life savings of six thousand euro in a post office account, and, does not have any other savings with financial institutions. Unfortunately due to deteriorating physical infirmity, it is no longer safe for Ms A to remain at home. Ms A now needs to enter long term care, mentally Ms A is able to make her own decisions. A subsequent medical assessment (CSAR) confirms nursing home care is required.

In summary, long term care is required for Ms A who is single and has the following financial means, a weekly state pension of €219 per week, lives in rented accommodation, savings of €6,000. Does not have any other financial interests.

3.10 Example Case B

The information supplied in this example case is a summary of the case, due to the limitations provided in section 3.8.

Mr B is a retired gentleman of 67 years of age, who is widowed and lives in his family home, which he owns i.e. not rented accommodation. Following a fall at home recently, admission took place to the local accident and emergency department. It has been suggested that long term care is required, which a medical assessment (CSAR) supports, there no mental capacity issues or concerns regarding Mr B. Mr B is currently receiving a state pension of €219 per week but also receives an occupational pension of €340 per week from his past employer. The value of Mr B's property (principal private residence) has recently been valued by a certified auctioneer as €720,000, there are no other interests in land or property.

Mr B has savings in a bank account and building society which total €2400,000, there are also stocks and shares held by an investment firm which are valued at €11,000. There are no other interests in investments.

3.11 Example Case C

The information supplied in this example case is a summary of the case, due to the limitations provided in section 3.8. Ms C aged 68 years of age and Mr C aged 69 years of age are a married couple who do not have any children. Due to deterioration in Mr C's health it has become increasingly difficult for Ms C to care for her husband at home. As a result nursing home care is being considered by the couple, both have the mental capacity to make the necessary decisions. The financial circumstances of the couple are, Mr C has a state pension of €219 per week, occupational pension of €285 per week. Ms C has a state pension of €219 per week. They own their home which they have lived in for the past 35 years i.e. property is

not rented, a recent valuation of the property by a registered professional has stated the property is valued at €450,000. They do not have an interest in any other property.

The couple have a joint savings account with a current balance of €94,000, in addition Ms C has a current account of €28,000 while Mr C has a current account of €19,000, and there are no other savings.

They have a joint shares investment which totals €5,000, there are no other investments.

In assessing the details using the Subvention 2009 Mr C the figures are added then divided by 2 to get Mr C's share, a couple are assessed jointly.

Property is not assessed in subvention as spouse resides. The couple may consider applying for Ancillary State Support (the loan) available in the NHSS.

CHAPTER FOUR

4.0 Findings

4.1 Introduction

This chapter will illustrate the outcome of financial assessments under the Nursing Home Subvention scheme on each of the individual example cases A, B and C. Also illustrated will be the financial outcome of the NHSS on each of the individual example cases. The detail of these cases has been provided in chapter three. The details and principles of the calculations used have been discussed in chapter two, including a quick summary in section 2.20.

There will be a very clear distinction between both schemes, which the outcomes of the financial assessments will support. To assist with an understanding of the differences and similarities of both schemes, the findings from each example case will be segmented into the findings of the Nursing Home Subvention Scheme and also the NHSS. The author's findings relating to the example cases are outlined in the rest of this chapter.

4.2 Example Case A

4.2.1 The Nursing Home Subvention Scheme

The actual calculation and breakdown of figures used in this example are provided in appendix II.

Ms A's income per week total's €219.00 less the 1/5th disregard of €43.80 per week which results in a total assessable income of €175.20 per week. As this scheme allows for €11,000 disregard on assets, the savings of €6,000 are not considered in the calculation.

The principal private residence is rented, as Ms A does not own this property; therefore it is not included in the assessment.

As an applicant can receive as maximum of €300 per week, plus 1/5th state pension, the deciding factor is how much an applicant's weekly income is greater than the state pension. An income greater than the state pension will result in a decrease of subvention, from €300 per week by the corresponding amount.

It can be seen that Ms A's weekly income equals the state pension. In this case the maximum subvention will be paid i.e. €343.80 per week.

What should be observed in this case, is that Ms A has a pension of €219 per week, receives a subvention of €343.80 per week but the average cost of care is €1000 per week. This leaves a shortfall of €437.20 per week ($€1000 - (€219.00 + €343.80)$), which is not paid by the state.

4.2.2 The NHSS

The actual calculation and breakdown of figures used in this example are provided in appendix VI.

Ms A's income total's €219.00 per week less the minimum retained threshold which is 20 %, equates to €43.80 per week, and results in a total assessable income of €175.20 per. This scheme allows for €36,000 disregard, the savings of €6,000 are not considered in the calculation. The principal private residence is rented, as Ms A does not own this property, therefore it is not included in the assessment.

It is clear from the calculations that Ms A's contribution towards the cost of her care is calculated at €175.20 per week. This results in Ms A paying her assessed weekly contribution of €175.20 per week directly to the nursing home. The balance of the cost of care €824.80 per week ($€1000 \text{ per week} - €175.20 \text{ per week}$) is paid by the HSE directly to the nursing home. There is no shortfall to be addressed in this case by Ms A.

4.3 Example Case B

4.3.1 The Nursing Home Subvention Scheme

The actual calculation and breakdown of figures used in this example are provided in appendix III.

Ms B's income per week total's €1482.08 per week less the 1/5th disregard of €43.80 per week which results in a total assessable income of €1438.28 per week.

As the this scheme allows for €11,000 disregard the savings of €251,000 are reduced accordingly to €240,000, and considered in the calculation at a rate of 5%, providing an imputed income on assets of €230.77 per week.

The principal private residence which Mr B owns is valued at €720,000, assessed at 5%, providing a weekly assessment of €692.31 per week, therefore it is included in the assessment.

It can be seen that Ms B's weekly income is greater than the state pension by more than €300 per week, indeed it is many times greater. In this case a subvention will not be paid. It is deemed Mr B has sufficient funds to meet the cost of care, €1000 per week from his own resources, most likely savings.

4.3.2 The NHSS

The actual calculation and breakdown of figures used in this example are provided in appendix VII.

Mr B's income per week total's €559.00 per week less the minimum retained threshold percentage of €111.80 per week which results in a total assessable income of €447.20 per week.

As the this scheme allows for €36,000 disregard the savings of €251,000 are reduced accordingly to €215,000 and considered in the calculation at a rate of 5%, providing an imputed income from cash assets of €206.73 per week.

The principal private residence which Mr B owns is valued at €720,000, assessed at 5%, providing a weekly assessment of €692.31 per week, therefore it is included in the assessment. The NHSS allows for a loan to be provided on land or property within the state, up to but not exceeding the cost of care after considering the income of the applicant. Should this option be taken up the loan provided would be €346.07 per week (€1000 per week) - (€447.20 per week + €206.73 per week). It is unlikely Mr B will obtain a loan from the HSE as there is sufficient savings to meet the loan amount that could be provided. It is clear from the calculations that Mr B's contribution towards the cost of his care is calculated at €1346.24 per week. This means Mr B will pay for the cost of care (€1,000 per week) himself directly to the nursing home.

As the loan amount can be paid from savings, Mr B does not wish to avail of the loan option (Ancillary State Support).

4.4 Example Case C

4.4.1 The Nursing Home Subvention Scheme

The actual calculation and breakdown of figures used in this example are provided in appendix IV.

This case involves a couple which will in general; result in half of the combined income and assets being assessed, as one member of the couple will be entering care, it is not a single assessment as in the previous examples.

Mr C & Ms C have a combined total means of €421.12 per week less the 1/5th disregard of €43.80 per week which results in a total assessable income €377.32 per week.

As the this scheme allows for €11,000 disregard per applicant, the savings of €70,5000 and shares of €2,500 are reduced accordingly to €62,000, and considered in the calculation at a rate of 5%, providing an imputed income on assets of €59.62 per week.

The principal private residence which Mr C & Ms C own is valued at €450,000, is exempt from assessment, therefore it is not included in the calculations.

As can be seen in the calculation Mr C's means is €377.32 per week which is €158.32 per week greater than the state pension rate. This results in the maximum subvention amount of €300 per week reduced by this corresponding amount to €141.68 per week.

This couple will receive a subvention of €141.68 per week towards the €1,000 per week cost of private nursing home care. This will most likely require the couple to use their assessed means and savings to bridge the shortfall which in this case is €858.32 per week (1000 per week – 141.68 per week)

4.4.2. The NHSS

The actual calculation and breakdown of figures used in this example are provided in appendix VIII.

Mr C and Ms C's combined income total's €713.00 per week less the minimum retained threshold percentage of €427.80 per week, which results in a total assessable income of €285.20 per week.

This case involves a couple which will in general; result in half of the combined income and assets being assessed, as one member of the couple will be entering care, it is not a single assessment as in the previous examples.

As the this scheme allows for €72,000 disregard for a couple, the savings of €141,000 and shares of €5000 are reduced accordingly to €74,000, and considered in the calculation at a rate of 2.5% (half of 5% as a couple), providing an imputed income on assets of €35.58 per week. The principal private residence which Mr C and Ms C own is valued at €450,000, assessed at 2.5% (half of 5% as a couple), providing a weekly assessment relevant asset of €216.35 per week, therefore it is included in the assessment.

The NHSS allows for a loan to be provided on land or property within the state, up to but not exceeding the cost of care, after considering the income of the applicant.

A decision has been made by the couple in this example to apply for the loan (Ancillary State Support) they have made an independent decision, as they do not have any children to will the house to. In this case the couple wish to avail of their savings and investments to live comfortably with their remaining years. Should this option be applied for and approved by the HSE Mr C and Ms C would receive a loan of €216.35 per week (€1000 per week) - (€320.78 per week + €285.20 per week + €35.58) per week). The loan is capped at 7.5% per member of the couple based on the full value of the property, which would equate to the 15% of a half share of each member of the couple. The loan provided does not have to be repaid until a later date.

CHAPTER FIVE

5.0 Conclusion

5.1 Introduction

The purpose of this chapter is to finalise the exercise based on content which has been outlined in the previous chapters and considered in the context of the independent schemes that have been discussed regarding financial support for long term care in Ireland 2010. To complete this task a summary will be outlined of each of the example case's A to C.

5.2 Example Case A

The amount of subvention payable, a maximum €300 per week, plus 1/5th of the state pension, has some but not a significant impact on today's cost of care. Although the HSE is required to provide funding once an application is made for basic subvention, it is not compelled to make up any additional shortfalls towards the cost of care that may exist for Ms A. In contrast the NHSS will provide the difference between Ms A's contribution and the cost of care, which may assist in relieving any financial burden. A disregard of €11,000 in the Nursing Home Subvention scheme is not a significant ceiling to have in place, compared to the more generous amount of €36,000 in the NHSS. Financial exposure to the HSE has greatly increased as it now will make pay the difference between the client's contribution and the cost of care.

5.3 Example Case B

In both schemes it is deemed Mr B has sufficient funds to meet the cost of care himself. It should be noted that Mr B could obtain a loan on property, to an amount that equates to the weekly cost of care less his assessed weekly income. The HSE would be exposed if it

provided this funding, until the loan is repaid at a later date. The loan could be of assistance, should Mr B wish to use his savings for other purposes. Mr B does not want to obtain a loan and has sufficient savings to pay for his care currently. An application could be made for state support or Ancillary State Support at a later date if desired.

5.4 Example Case C

The amount to be paid by the couple via the subvention scheme is much greater than that of the NHSS. Although the subvention calculation does not assess the property there is a much lesser amount available compared to the NHSS. As a loan has been applied for the funds provided by the HSE are payable at a later date. This will increase the funds to be paid by the HSE under the NHSS compared to the Nursing Home Subvention scheme. Such a facility reduces the financial pressure on the couple and allows them use their savings for other purposes other than paying the equivalent funds directly to a nursing home. This may be beneficial to the spouse who is remaining at home.

5.5 Summary

The NHSS is the most recent and modern legislation pertaining to financially supporting long term care of elderly people in Ireland in 2010. Although a budget capped scheme, it assists the vast majority of clients in bridging the difference between the cost of care, and, how much the client is to contribute from their own resources. The HSE now meets the difference between an applicant's assessed contribution and the cost of care. The heavy financial burden for patients and their families, which many struggled to meet each month, is now consumed by the state.

The cost of care in a long term care facility is set and agreed with the NTPF, this will help bring certainty to applicants as the published lists are available on the HSE website. This will act a disincentive for providers to increase rates charged to clients without agreement of the NTPF. Under subvention prices were set and adjusted as when a provider decided.

A legal requirement for a care representative (or suitably qualified person) to be appointed for those who do not have capacity to make their own decisions and require a loan. This is an added safe guard against elder abuse and misappropriation of older people property. Such legal protection was not available within the Nursing Home Subvention Scheme.

There is a significantly higher disregard of €36,000 single person or €72,000 for a couple compared to €11,000 per person in the Subvention Scheme.

Patient choice of care facility is increased under the NHSS for most applicants as the contribution to be paid by the client will be the same no matter what choice of home they make.

A loan (Ancillary State Support) can be obtained on land or property based within the state. Often applicants are asset rich but cash poor, as the main asset most posses is their home which is assessed but not an actual cash asset to draw upon. The loan provided does not have to be paid back until a later date, in most cases when the applicant or their partner passes away. This is a unique opportunity that was unavailable with subvention.

In summary, the author is of the opinion that in considering the details outlined in this dissertation, the NHSS ("A Fair Deal") compared to the Nursing Home Subvention Scheme is

really “A Fair Deal” for the vast majority of applicants. However there is a significant increase of funding and financial exposure to be managed by the HSE, given the current economic climate this will no doubt prove very challenging for those involved.

APPENDICES

Subvention Calculator Template	Appendix	I
Subvention Calculator Example Case A	Appendix	II
Subvention Calculator Example Case B	Appendix	III
Subvention Calculator Example Case C	Appendix	IV
NHSS Calculator Template	Appendix	V
NHSS Calculator Example Case A	Appendix	VI
NHSS Calculator Example Case B	Appendix	VII
NHSS Calculator Example Case C	Appendix	VIII
Nursing Home Subvention Application Form	Appendix	IX
NHSS Application Form	Appendix	X
CSAR	Appendix	XI

BASIC NURSING HOME SUBVENTION CALCULATOR

Applicant's Name
Reference Number
Name of Nursing Home

Date of Birth
Date of Assessment
Age at Date of Assessment

Type of Assessment
Type of Admission Continuing Care
Dependency Level

Assessment of Means

Disposable Income (Weekly Net Income)

- 1. State Pension
- 2. Other (Enter Description)
- 3. Other (Enter Description)
- 4. Other (Enter Description)

Total Income per Week

Assets other than principal residence

Assess Value @ 5% on-going

- 1. Savings
- 2. Other (Enter Description)
- 3. Other (Enter Description)
- 4. Other (Enter Description)

Total Assessable Assets

Savings disregard, if applicable

Imputed income on Assets per week

Principal Residence

Value at date of Assessment (Only insert value if assessable)

11,000.00 Less Disregard if applicable

Assessable Value

Weekly Assessment/Years Assessed

NOTE: Record of Years Assessed NOT TO exceed 3

Other Means

1. Weekly Rental / Farm Income (Assess per Guidelines)

Allow 10% for maintenance

2. Other (Enter Description)

Total Other Means

Total Means

Calculation of Subvention

Weekly Allowance 43.80 1/5 NCOAP Rate 2009 (under 80 €43.80, over 80 €45.80)

Assessed Means -43.80

NCOAP rate applicabe 219.00 NCOAP Rate 2009 (under 80 €219, over 80 €229)

Article 10.6 Payable 43.80

Excess Means nil If Excess is €300 or greater NO basic subvention is payable.

Basic Subvention Rate €300.00 Consider all cases for Enhancement

Basic Subvention Approved €343.80

Daily Rate €49.11

Payable from: Prepared by:

Checked By:

ate Approval Letter Issued to Applicant/Nursing Home:

BASIC NURSING HOME SUBVENTION CALCULATOR

Applicant's Name Ms A

Reference Number 1

Name of Nursing Home Average Cost €1,000 per week

Date of Birth 01/03/1944

Date of Assessment 29/04/2010

Age at Date of Assessment 66

Type of Assessment Single

Type of Admission Continuing Care

Dependency Level Maximum

Assessment of Means

Disposable Income (Weekly Net Income)

- 219.00 1. State Pension
2. Other (Enter Description)
3. Other (Enter Description)
4. Other (Enter Description)

219.00 Total Income per Week

Assets other than principal residence Assess Value @ 5% on-going

- 6000.00 1. Savings
2. Other (Enter Description)
3. Other (Enter Description)
4. Other (Enter Description)

6000.00 Total Assessable Assets

6000.00 Savings disregard, if applicable

Imputed income on Assets per week

Principal Residence

Value at date of Assessment (Only insert value if assessable)

5,000.00 Less Disregard if applicable

Assessable Value

Weekly Assessment/Years Assessed

NOTE: Record of Years Assessed NOT TO exceed 3

Other Means

1. Weekly Rental / Farm Income (Assess per Guidelines)

Allow 10% for maintenance

2. Other (Enter Description)

Total Other Means

219.00 Total Means

Calculation of Subvention

Weekly Allowance 43.80 1/5 NCOAP Rate 2009 (under 80 €43.80, over 80 €45.80)

Assessed Means 175.20

NCOAP rate applicabe 219.00 NCOAP Rate 2009 (under 80 €219, over 80 €229)

Article 10.6 Payable 43.80

Excess Means nil

If Excess is €300 or greater NO basic subvention is payable.

Basic Subvention Rate €300.00

Consider all cases for Enhancement

Basic Subvention Approved €343.80

Daily Rate €49.11

Payable from: _____ Prepared by:

Checked By:

ate Approval Letter Issued to Applicant/Nursing Home:

BASIC NURSING HOME SUBVENTION CALCULATOR

Applicant's Name Mr B

Reference Number 2

Name of Nursing Home Average Cost €1,000 per week

Date of Birth 15/01/1943

Date of Assessment 29/04/2010

Age at Date of Assessment 67

Type of Assessment Single

Type of Admission Continuing Care

Dependency Level Maximum

Assessment of Means

Disposable Income (Weekly Net Income)

- 219.00 1. State Pension
- 340.00 2. Other (Enter Description)
- 3. Other (Enter Description)
- 4. Other (Enter Description)

559.00 Total Income per Week

Assets other than principal residence

Assess Value @ 5% on-going

- 240000.00 1. Savings
- 11000.00 Shares & Investments
- 3. Other (Enter Description)
- 4. Other (Enter Description)

251000.00 Total Assessable Assets

11000.00 Savings disregard, if applicable

230.77 Imputed income on Assets per week

Principal Residence

720,000.00 Value at date of Assessment (Only insert value if assessable)
Less Disregard if applicable

720,000.00 Assessable Value

692.31 Weekly Assessment/Years Assessed

NOTE: Record of Years Assessed NOT TO exceed 3

Other Means

- 1. Weekly Rental / Farm Income (Assess per Guidelines)
Allow 10% for maintenance
- 2. Other (Enter Description)
- Total Other Means

1482.08 Total Means

Calculation of Subvention

Weekly Allowance 43.80 1/5 NCOAP Rate 2009 (under 80 €43.80, over 80 €45.80)

Assessed Means 1438.28

NCOAP rate applicabe 219.00 NCOAP Rate 2009 (under 80 €219, over 80 €229)

Article 10.6 Payable nil

Excess Means 1219.28

If Excess is €300 or greater NO basic subvention is payable.

Basic Subvention Rate n/a Consider all cases for Enhancement

Basic Subvention Approved **nil**

Daily Rate

Payable from: _____ Prepared by:

Checked By:

ate Approval Letter Issued to Applicant/Nursing Home:

BASIC NURSING HOME SUBVENTION CALCULATOR

Applicant's Name Mr C
Reference Number 3
Name of Nursing Home Average Cost €1,000 per week

Date of Birth 26/04/1941
Date of Assessment 29/04/2010
Age at Date of Assessment 69

Type of Assessment Joint
Type of Admission Continuing Care
Dependency Level Maximum

Assessment of Means

Disposable Income (Weekly Net Income)

219.00 1. State Pension (219.00+219.00) / 2
142.50 Occupational Pension (285 / 2)
3. Other (Enter Description)
4. Other (Enter Description)

361.50 Total Income per Week

Assets other than principal residence

Assess Value @ 5% on-going
70500.00 1. Savings
(94000+28000+19000) / 2
2500.00 Shares (5000 / 2)
4. Other (Enter Description)
73000.00 Total Assessable Assets
11000.00 Savings disregard, if applicable

59.62 Imputed income on Assets per week

Principal Residence

Value at date of Assessment (Only insert value if assessable)
Less Disregard if applicable
Assessable Value

Weekly Assessment/Years Assessed

NOTE: Record of Years Assessed NOT TO exceed 3

Other Means

1. Weekly Rental / Farm Income (Assess per Guidelines)
Allow 10% for maintenance
2. Other (Enter Description)
Total Other Means

421.12 Total Means

Calculation of Subvention

Weekly Allowance	43.80	1/5 NCOAP Rate 2009 (under 80 €43.80, over 80 €45.80)
Assessed Means	377.32	
NCOAP rate applicabe	219.00	NCOAP Rate 2009 (under 80 €219, over 80 €229)
Article 10.6 Payable	nil	
Excess Means	158.32	If Excess is €300 or greater NO basic subvention is payable.
Basic Subvention Rate	€300.00	Consider all cases for Enhancement
Basic Subvention Approved	€141.68	
Daily Rate	€20.24	

Payable from: _____ Prepared by:

Checked By:

ate Approval Letter Issued to Applicant/Nursing Home:

Nursing Homes Support Scheme Financial Assessment

Nursing Home Support Scheme No. Review Date

Applicant's Name

Applicant's Date of Birth Age

Date of Assessment

Type of Assessment

Has applicant resided in an approved nursing home for over 3 years?

Applying for Ancillary State Support

Client / HSE Contributions				
Name of Nursing Home	<input type="text"/>			
Agreed Nursing Home Fee	<input type="text"/>	Enter Fee	€0.00	Daily Rate
Current Weekly Rate of Subvention if any	<input type="text"/>	Enter Rate	€0.00	Old Subvention No
Weekly Assessed Income	€0.00			
Weekly Assessed Cash Assets	€0.00			
Weekly Assessed Relevant Assets	€0.00			
Client's Weekly Contribution	€0.00		€0.00	
Ancillary State Support (Deferred Charge)	€0.00		€0.00	
HSE Weekly Contribution			€0.00	€0.00
Transfer from Subvention Scheme Adjustment				
Enter Adjustment Date From		Enter Adjustment Date To		
HSE Contribution Payable From	Enter Date	01/01/2010		

Weekly Assessed Income	Value	Cash Assets	Estimated Market Value	Allowable deductions	Net Value
OSFA Pension/Assurance/Benefit	€0.00	Bank Deposits	€0.00	€0.00	€0.00
Any other non Irish Pension	€0.00	Repayable Loans Lend	€0.00	€0.00	€0.00
Occupational Pension	€0.00	Shares	€0.00	€0.00	€0.00
Employment, Trade, Profession or Vocation	€0.00	Transferred Cash Assets	€0.00	€0.00	€0.00
Income from Real Estate	€0.00	Credit Union Shares	€0.00	€0.00	€0.00
Holding of an Office or Directorship	€0.00	Bonds	€0.00	€0.00	€0.00
Fees, Commissions, Dividends, Interest	€0.00		€0.00	€0.00	€0.00
Payments under a settlement, covenant, estate or a payment in respect of maintenance	€0.00		€0.00	€0.00	€0.00
Royalties and Annuities	€0.00		€0.00		€0.00
Transferred Income	€0.00	Total Cash Assets Assessable			€0.00
Farming/Business Income	€0.00	General Assets Deductible Amount Single			€30,000.00
Allowable deductions	€0.00				
Total Applicants' Weekly Income	€0.00	Total Cash Assets Assessable			€0.00
Minimum Retained Income Threshold	€43.00	Allowable deduction remainder			-€30,000.00
Weekly Assessed Income (Single App)	€0.00	Weekly Assessed Cash Assets			€0.00

Relevant Assets (Assets benefiting from 3 Year Cap on assessment should be entered at numbers 1 to 3 as appropriate)	Estimated Market Value	Residing more than 3 Years in Approved Nursing Home Deduction	Allowable deductions	Net Value	Defer Charge	Ancillary State Support
1 Principal Residence	€0	€0	€0	€0.00	Yes	€0.00
2 Farm	€0	€0	€0	€0.00	Yes	€0.00
3 Relevant Business	€0	€0	€0	€0.00	Yes	€0.00
Relevant Assets above not benefiting from 3 year cap on assessment should be entered below						
Other	€0			€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Total Relevant Assets Assessable				€0.00		€0.00
General Assets Deductible Amount Single C/P				-€30,000.00		€0.00
Total Relevant Assets Assessed				€0.00		€0.00
Allowable deduction remainder				-€30,000.00		
Weekly Assessed Relevant Assets				€0.00		€0.00

Prepared By: _____ Checked By: _____

Approved By: _____

Date: _____

Date: _____

Date: _____

Comments:

Nursing Homes Support Scheme Financial Assessment

Nursing Home Support Scheme No.	123	Review Date	29/04/2011
Applicant's Name	Mr A		
Applicant's Date of Birth	01/03/1944	Age	66
Date of Assessment	29/04/2010		
Type of Assessment	Single		
Has applicant resided in an approved nursing home for over 3 years?	No		
Applying for Ancillary State Support	No		

Client / HSE contribution				
Name of Nursing Home	Average Cost of Care			
Agreed Nursing Home Fee	Enter Fee ▶	€1,800.00	Daily Rate	Old Subvention Rate
Current Weekly Rate of Subvention if any	Enter Rate ▶	€343.88	€48.19	
Weekly Assessing Income	€175.20			
Weekly Assets and Cash Assets	€0.00			
Weekly Assessed Resource Amount	€0.00			
Client's Weekly Contribution	€175.20	€175.20		
Ancillary State Support (Deferred Charge)	€0.00	€0.00		
HSE Weekly Contribution		€824.88	€117.83	
Transfer to HSE Client Fundraising			€38.71	
Enter Adjustment Date From ▶	Enter Adjustment Date To ▶			
HSE Contribution Payable From:	Enter Date ▶	27/10/2009		

Weekly Assessed Income	Value	Cash Assets	Estimated Market Value	Allowable Deductions	Net Value
CSFA Pension/Allowance/Benefit	€219.00	Bank Deposits	€8,000.00	€0.00	€8,000.00
Any other non Irish-Pension	€0.00	Repayable Loans Lent	€0.00	€0.00	€0.00
Occupational Pension	€0.00	Shares	€0.00	€0.00	€0.00
Employment, Trade, Profession or Vocation	€0.00	Transferred Cash Assets	€0.00	€0.00	€0.00
Income from Rentals	€0.00	Credit Union Shares	€0.00	€0.00	€0.00
Holding of an Office or Directorship	€0.00	Bonds	€0.00	€0.00	€0.00
Fees, Commissions, Dividends, Interest	€0.00		€0.00	€0.00	€0.00
Payments under a settlement, covenant, estate or a payment in respect of maintenance	€0.00		€0.00	€0.00	€0.00
Royalties and Annuities	€0.00		€0.00		€0.00
Transferred Income	€0.00	Total Cash Assets Assessable			€8,000.00
Farming/Business Income	€0.00	General Assets Deductible Amount Single			
Allowable deductions	€0.00				€36,000.00
Total Applicants' Weekly Income	€219.00	Total Cash Assets Assessable			€0.00
Minimum Retained Income Threshold	€43.80	Allowable deduction remainder			-€36,000.00
Weekly Assessed Income (Single App)	€175.20	Weekly Assessed Cash Assets			€0.00

Relevant Assets (Assets benefiting from 3 Year Cap on assessment should be entered at numbers 1 to 3 as appropriate)	Estimated Market Value	Residing more than 3 Years in Approved Nursing Home Deduction	Allowable deductions	Net Value	Defer Charge	Auxiliary State Support
1 Principal Residence	€0	€0	€0	€0.00	Yes	€0.00
2 Farm	€0	€0	€0	€0.00	Yes	€0.00
3 Relevant Business	€0	€0	€0	€0.00	Yes	€0.00
Relevant Assets above not benefiting from 3 year cap on assessment should be entered below						
Other	€0			€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Total Relevant Assets Assessable				€0.00		€0.00
General Assets Deductible Amount Single C/F				-€30,000.00		€0.00
Total Relevant Assets Assessed				€0.00		€0.00
Allowable deduction maximum				-€30,000.00		
Weekly Assessed Relevant Assets				€0.00		€0.00

Prepared By: _____ Checked By: _____

Approved By: _____

Date: _____ Date: _____Date: _____

Comments:

Nursing Homes Support Scheme Financial Assessment

Nursing Home Support Scheme No. **124** Review Date **29/04/2011**

Applicant's Name **Mr B**

Applicant's Date of Birth **15/01/1943** Age **67**

Date of Assessment **29/04/2010**

Type of Assessment **Single**

Has applicant resided in an approved nursing home for over 3 years? **No**

Applying for Ancillary State Support **No**

Client / HSE Contributions				
Name of Nursing Home	Average Cost of Care			
Agreed Nursing Home Fee	Enter Fee	€1,000.00	Daily Rate	€100.00
Current Weekly Rate of Subvention If Any	Enter Rate	€0.00		
Weekly Assessed Income	€447.20			
Weekly Assessed Cash Assets	€206.73			
Weekly Assessed Relevant Assets	€692.31			
Clients Weekly Contribution	€1,348.24		€1,348.24	
Ancillary State Support (Deferred Charge)	€0.00		€0.00	
Monthly Contribution		€0.00	€0.00	No State Support Payable
Transfer of Subvention Scheme Approved			€0.00	
Enter Adjustment Date From		Enter Adjustment Date To		
Contribution Payable From	Enter Date	27/10/2009		

Weekly Assessed Income	Value	Cash Assets	Estimated Market Value	Allowable deductions	Net Value
DSPA Pension/Allowance/Benefit	€219.00	Bank Deposits	€240,000.00	€0.00	€240,000.00
Any other non Irish Pension	€0.00	Repayable Loans Lent	€0.00	€0.00	€0.00
Occupational Pension	€340.00	Shares	€11,000.00	€0.00	€11,000.00
Employment, Trade, Profession or Vocation	€0.00	Transferred Cash Assets	€0.00	€0.00	€0.00
Income from Rentals	€0.00	Credit Union Shares	€0.00	€0.00	€0.00
Holding of an Office or Directorship	€0.00	Bonds	€0.00	€0.00	€0.00
Fees, Commissions, Dividends, Interest	€0.00		€0.00	€0.00	€0.00
Payments under a settlement, covenant, estate or a payment in respect of maintenance	€0.00		€0.00	€0.00	€0.00
Royalties and Annuities	€0.00		€0.00		€0.00
Transferred Income	€0.00	Total Cash Assets Assessable			€251,000.00
Fluctuating business income	€0.00	General Assets Deductible Amount Single			€36,000.00
Allowable deductions	€68.00	Total Cash Assets Assessed			€215,000.00
Total Applicant's Weekly Income	€559.00				€0.00
Minimum Retained Income Threshold	€111.80				
Weekly Assessed Income (Single App)	€447.20	Weekly Assessed Cash Assets			€206.73

Relevant Assets (Assets benefiting from 3 Year Cap on assessment should be entered at numbers 1 to 3 as appropriate)	Estimated Market Value	Residing more than 3 Years in Approved Nursing Home Deduction	Allowable deductions	Net Value	Deferred Charge	Ancillary State Support
1 Principal Residence	€720,000.00	€0	€0	€720,000.00	Yes	€0.00
2 Farm	€0	€0	€0	€0.00	Yes	€0.00
3 Relevant Business	€0	€0	€0	€0.00	Yes	€0.00
Relevant Assets above not benefiting from 3 year cap on assessment should be entered below						
Other	€0			€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Other				€0.00	Yes	€0.00
Total Relevant Assets Assessable				€720,000.00		€0.00
General Assets Deductible Amount Single				€0.00		€0.00
Total Relevant Assets Assessed				€720,000.00		€0.00
				€0.00		
Weekly Assessed Relevant Assets				€692.31		€0.00

Prepared By: _____ Checked By: _____

Date: _____ Date: _____

Approved By: _____

Date: _____

Comments:

Nursing Homes Support Scheme Financial Assessment

Nursing Home Support Scheme No.	128	Review Date	29/04/2011
Applicant's Name	Mr C		
Applicant's Date of Birth	28/04/1941	Age	69
Date of Assessment	29/04/2010		
Type of Assessment	Joint		
Has applicant resided in an approved nursing home for over 3 years?	No		
Applying for Ancillary State Support	Yes		

Client / HSE Contributions					
Average Cost of Care					
Agreed Nursing Home Fee		Enter Fee ▶	€1,900.00	Daily Rate	Old Subvention No.
Weekly Assessment Income		Enter Rate ▶	€141.50	€20.20	
Weekly Assessment Income	€285.20				
Weekly Assessment Cost Allow	€30.00				
Weekly Assessment Relevant Asses	€0.00				
Client's Weekly Contribution	€320.70		€320.70		
Supplementary State Support (Deferred Charge)	€210.35		€210.30		
Net Weekly Contribution			€870.20	€87.03	
Transfer from Subvention Scheme Adjustment				€75.70	
Enter Adjustment Date From ▶		Enter Adjustment Date To ▶			
HSE Contribution Payable From	Enter Date ▶	27/10/2000			

Weekly Assessed Income	Value	Cash Assets	Estimated Market Value	Allowable deductions	Net Value	Relevant Assets (Assets benefiting from 3 Year Cap on assessment should be entered at numbers 1 to 3 as appropriate)	Estimated Market Value	Residing more than 3 Years in Approved Nursing Home Deduction	Allowable deductions	Net Value	Defer Charge	Ancillary State Support
DSF A Pension/Allowance/Benefit	€428.00	Bank Deposits	€141,000.00	€0.00	€141,000.00	1 Principal Residence	€450,000	€0	€0	€0.00	Yes	€450,000.00
Any other non Irish Pension	€0.00	Repayable Loans Lent	€0.00	€0.00	€0.00	2 Farm	€0	€0	€0	€0.00	Yes	€0.00
Occupational Pension	€285.00	Shares	€5,000.00	€0.00	€5,000.00	3 Relevant Business	€0	€0	€0	€0.00	Yes	€0.00
Employment, Trade, Profession or Vocation	€0.00	Transferred Cash Assets	€0.00	€0.00	€0.00	Relevant Assets above not benefiting from 3 year cap on assessment should be entered below						
Income from Rentals	€0.00	Credit Union Shares	€0.00	€0.00	€0.00	Other	€0			€0.00	Yes	€0.00
Holding of an Office or Directorship	€0.00	Bonds	€0.00	€0.00	€0.00	Other				€0.00	Yes	€0.00
Pots, Commissions, Dividends, Interest	€0.00		€0.00	€0.00	€0.00	Other				€0.00	Yes	€0.00
Payments under a settlement, covenant, annuity or a payment in respect of maintenance	€0.00		€0.00	€0.00	€0.00	Other				€0.00	Yes	€0.00
Pensions and Annuities	€0.00		€0.00		€0.00	Other				€0.00	Yes	€0.00
Transferred Income	€0.00	Total Cash Assets Assessable			€146,000.00	Total Relevant Assets Assessable (inc. A.S.S. Assets)						€450,000.00
Farming/Business Income	€0.00	General Assets Deductible Amount Joint			€72,000.00	General Assets Deductible Amount Joint						€0.00
Allowance deductions	€0.00	Total Cash Assets Assessed			€74,000.00	Total Relevant Assets Assessed						€0.00
Total Applicants' Weekly Income	€713.86				€0.00	Weekly Assessed Relevant Assets						€0.00
Minimum Retained Income Threshold	€427.80	Weekly Assessed Cash Assets			€31.94							€216.30

Prepared By: _____ Checked By: _____

Approved By: _____

Date: _____ Date: _____

Order: _____

Comments:

APPLICATION FORM

FOR

NURSING

HOME

SUBVENTION

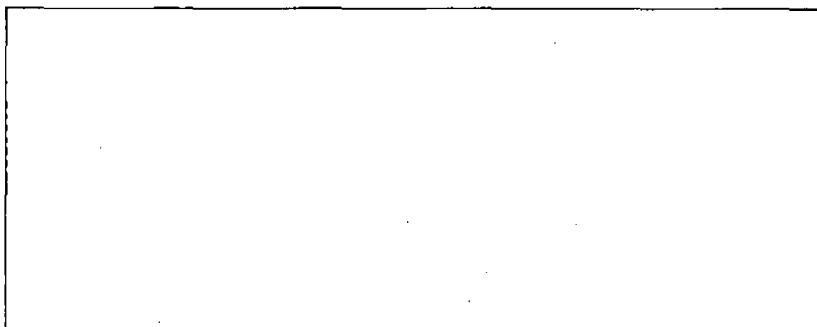


Application For Nursing Home Subvention

Please read carefully before completion.

Instructions

1. Please note that this application should be submitted to the health board prior to admission. Failure to do so could disqualify from subvention.
2. Please supply all the information requested. A health board may refuse to consider an application for a subvention if the relevant information has not been provided or if false or misleading information has been given. Forms with unanswered questions will be returned for completion. This will cause unnecessary delays so please ensure that all questions are answered.
3. A letter from the applicant's GP should accompany this application outlining the nature of his/her illness and the need for nursing home care. Please note that if you are already resident in a nursing home this letter is not necessary.
4. The following should be returned with this application:
 - If the person seeking a subvention is in receipt of income other than a pension paid by the Department of Social, Community and Family Affairs, please enclose a recent payslip or a P60 certificate.
 - Verification from appropriate financial institutions of annuities, cash assets and investments.
 - An official verification of sale of house, farm or business and amount realised from such sale.
5. Nursing Home Subventions will only be paid in respect of care in nursing homes registered by a health board under the Health (Nursing Homes) Act, 1990.
6. If a person qualifies for a subvention, arrangements will be made to have the subvention paid directly to the nursing home of the person's choice on his/her behalf.
7. All information given by or on behalf of persons seeking a subvention will be treated in the strictest confidence.
8. This form should be returned, together with the necessary documentation to:



North Eastern Health Board

Application for Nursing Home Subvention

To be completed in BLOCK CAPITALS throughout and boxes should be ticked where appropriate

Person seeking subvention

Surname				Title				
Forename								
Home address								
Current address if different from above (eg residing with a relative or in hospital)								
Date of birth			Sex	Male		Female		
Marital Status	Single		Married		Widowed		Other	
Name of next of kin								
Relationship								
Address								
Telephone number								

If the application is made by a person other than the person seeking a subvention please complete the next four questions.

Name							
Address							

Do you wish correspondence to be forwarded to this address?

Yes	
-----	--

No	
----	--

Telephone number

--

Has prospective subvented person been informed of this application?

Yes	
-----	--

No	
----	--

Name of GP of person seeking a subvention

--

Address

Telephone number

--

Name of Public Health Nurse

--

Are you a resident in a nursing home?

Yes	
-----	--

No	
----	--

Was the admission an emergency?*

Yes	
-----	--

No	
----	--

If yes, date of admission to nursing home

--

*if yes, please include a GP's report stating details of emergency and reasons why admission to the nursing home was necessary.

Name and address of nursing home

Do you have a current medical card?

Yes

No

Medical card number

Have you made a previous application for subvention?

Yes

No

If yes, when?

Assessment of income and assets in accordance with
the second schedule of The Health (Nursing Homes) Regulations, 1993

INCOME (Amount per week to be shown)

Sources of income of applicant and spouse:	Applicant	Spouse
Department of Social, Community and Family Affairs pension/allowance(excluding allowances such as fuel etc.)	£	£
Occupational pension	£	£
Wages/salary (including for part time work)	£	£
Income from rentals	£	£
Income from savings/investments	£	£
Other income not included above	£	£
Total income	£	£

If income arises from a farm or business please attach accounts in respect of same for the previous tax year

Have you transferred any income prior to date of application?

Yes

No

Date of transfer of income

If yes, what is the value per week

£

	Applicant	Spouse
Claim number		
Pension book number		
RSI number		

LIST VALUE OF ASSETS OF PERSON SEEKING A SUBVENTION (Amount per week to be shown)

Principal residence address

Please indicate the estimated current market value of your home

£

Please indicate if you are the owner/tenant/lodger/other

Indicate loan repayments on same (amount per month)

£

£

Other property (inc. land)

£

Savings and deposits
(Please state where savings and deposits are held)

£

Financial assets: stocks, shares and securities

£

Other assets (please specify)

£

Total assets

£

If you have transferred a house, farm or business are you in receipt of a continuous income from this house, farm or business?

Yes	
-----	--

No	
----	--

Date of transfer of house, farm or business

To whom was the house, farm or business transferred?

If you have sold your house, farm or business in the last 5 years please state the date of sale

Amount realised from the sale

Who lives at the applicants residence?

Spouse

Yes	
-----	--

No	
----	--

Sons/daughters under 21 or in full time education

Yes	
-----	--

No	
----	--

Other (please specify)

Relatives in receipt of disabled persons maintenance allowance or social welfare allowance or social welfare disability benefit, invalidity pension or blind pension

RESIDENTS OF NURSING HOMES

What is the weekly maintenance charge of the nursing home?

£	
---	--

Are you a member of the VHI/BUPA or any other medical insurance scheme?

Yes	
-----	--

No	
----	--

If so, are you in receipt of a contribution from the VHI/BUPA or other insurance scheme towards the cost of the nursing home

Yes	
-----	--

No	
----	--

If you were resident in a nursing home on 1st September, 1993 please specify contributions per week paid to the nursing home prior to that date

Applicant's income/assets

£	
---	--

Family contributions

£	
---	--

Subvention

£	
---	--

DECLARATION

I hereby apply for a nursing home subvention under the Health (Nursing Homes) Act, 1990 for myself, or on behalf of , my (state relationship). I have read the notice below and I declare that the information given by me on this form is correct to the best of my knowledge. I agree that the Health Board may make any inquiries they think fit for the purposes of considering this application and I further agree to report, forthwith, any change in circumstances which may render me/my ineligible.

SIGNATURE OF APPLICANT

Date

NOTE:

- (a) A person who knowingly makes a false statement, conceals any material fact or produces a false document is liable to a fine up to £100 or to imprisonment for up to three months or both a fine and imprisonment – Section 75 Health Act 1970.
- (b) A person who fails to notify the Board of a change of circumstances which would affect their eligibility for a nursing home subvention is liable to a fine of up to £50 – Section 49 of Health Act 1970.

ASSESSMENT OF DEPENDENCY OF PERSON SEEKING A NURSING HOME SUBVENTION IN ACCORDANCE WITH THE FIRST SCHEDULE OF THE HEALTH (NURSING HOMES) REGULATIONS 1993.

FOR OFFICIAL USE ONLY TO BE COMPLETED BY DESIGNATED OFFICER

Name of person seeking a subvention

Date of birth

Ability to carry out activities of daily living as per paragraph 6 of the first schedule

Housing conditions

Number of persons in the household

Ability of household to cope

Extent of community support for the applicant

Health and welfare services which the applicant is receiving

Medical condition of person seeking a subvention

Can care needs of person be met other than by admission to nursing home?

Yes

No

If yes, please specify

Signed: (Designated officer)

Date

TO BE COMPLETED BY ASSESSMENT TEAM

Does the person on the basis of dependency require nursing home care?

Yes

No

If yes, should the person be offered care in a Health Board institution?

Yes

No

What is the level of dependency of the person

Maximum

High

Medium

Signed (Chairperson, assessment team)

Date

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Date application received

Date on which all necessary information was received

Does the person qualify for subvention

Yes

No

Recommendation of assessment of dependency level

Maximum

High

Medium

Assessed weekly income of applicant

£

Net weekly value of assets

£

Date

Amount which an applicant, who was resident in a nursing home on 1st September 1993 was paying per week to the home prior to that date

£

Amount of subvention to be paid per week

£

Date on which applicant was notified of Board's decision to grant Subvention



Nursing Homes Support Scheme Information and Application Form

Use this form to apply for the Nursing Homes Support Scheme. Completed forms should be returned to your HSE Nursing Homes Support Office, who can also provide help to complete your application. Contact details for HSE Nursing Homes Support Offices are on the back page of this form. Before completing this form, you can read more detailed information on this scheme in the Nursing Homes Support Scheme Information Booklet.

■ What is the Nursing Homes Support Scheme?

The Nursing Homes Support Scheme provides financial support towards the cost of long-term nursing home care. It replaces the Nursing Home Subvention Scheme. Under the scheme, people who need nursing home care have their income and assets assessed, and then make a contribution towards the cost of their care based on their assessment. The HSE will pay the rest, if any, of the costs of their care in public and registered private nursing homes covered under the scheme. As the budget for this scheme is fixed each year, at times a waiting list for financial support may be in place.

■ Who can apply for the scheme?

Anyone who may need long-term nursing home care can apply. You must be ordinarily resident in the State, which means that you have been living here for at least 1 year or you intend to live here for at least 1 year.

■ How does the application process work?

There are 2 parts to the application process: a Care Needs Assessment and a Financial Assessment. The Care Needs Assessment is carried out by healthcare staff e.g. Doctors, Nurses, Social Workers, and looks at your healthcare needs and your family and social supports. The results will show if you need long-term nursing home care.

If the Care Needs Assessment shows that you need long-term nursing home care, the Financial Assessment will work out the amount that you will pay towards the cost of your care and the amount that the HSE will pay. The amount that you pay for your care depends on your income and the value of your assets. People who have less income/assets pay less and people who have more income/assets pay more. No-one will pay more than the cost of their care.

■ What financial support does the HSE offer?

There are two types of financial support available under this scheme: State Support and a Nursing Home Loan (Ancillary State Support).

State Support: Your income and assets are assessed and your weekly contribution is worked out. The HSE will pay the rest of the weekly cost of your care, this is called State Support.

Nursing Home Loan (Ancillary State Support): This is an optional extra feature of the Nursing Homes Support Scheme for people who own property or assets in the State. Instead of paying your full weekly contribution for your care from your own means, you can choose to apply for a Nursing Home Loan, to cover the portion of your contribution which is based on property or land-based assets within the State. The HSE will then pay that portion of your cost of care on top of your State Support payment. The loan is paid back to the State after the sale of the asset or your death, whichever occurs first. Repayment of the loan is made to the Revenue Commissioners. In certain cases, repayment of the loan can be deferred, and you can read more about this in the Information Booklet. This part of the scheme is designed to protect people from having to sell their home during their lifetime to pay for nursing home care.

The HSE has a fixed budget for the scheme each year, so at times a waiting list for support may be in place.

■ Do you assess a couple's income jointly?

People not living as part of a couple are assessed singly, and people who are living together as part of couple are assessed jointly. A couple includes:

- Married couples living together
- Co-habiting couples (living together for 3 years or more)
- Same sex couples (living together for 3 years or more)

It does not include siblings who live together, or two adults living together but not as life partners. Where a member of a couple is applying for the nursing home loan, their spouse or partner must sign that part of the application.

■ Who should fill in this form?

The form should be completed by and must be signed by the person applying for nursing home care. Help and advice is available from health care workers and from the HSE Nursing Homes Support Offices. If a person applying for nursing home care has reduced ability to make decisions, a specified person can apply for State Support on their behalf. If the person has reduced ability to make decisions and is applying for the Nursing Home Loan, a Care Representative must make the application. A person appointed under Enduring Power of Attorney or the Committee of a Ward of Court can also make an application in such circumstances. You can read more about this in the Information Booklet.

■ What do I need to include with my application form?

Your application must include documentary evidence to support any information you have provided. Details of what is required are given in each section.

■ If my circumstances change?

You must advise the HSE within 10 working days if you or your partner's circumstances change, as your financial support may be affected.

OFFICE USE ONLY

Date Received _ _ _ _ _ Ref No. _ _ _ _ _

Part 1A – Applicant's Details – Please use BLOCK CAPITALS

(The applicant is the person who may need care)

Surname:		Are you ordinarily resident in Ireland? Yes <input type="checkbox"/> No <input type="checkbox"/>	
First Name(s):		Home address:	
Date of Birth:			
Daytime Phone: 0			
Gender:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Current address if different from home address: (living with relative, or in hospital/nursing home)	
PPS Number:			
E-mail address:			
Birth surname: (if different from above)		Town:	
		County:	
		If in hospital/nursing home please state date of admission:	

Relationship Status – Please choose only one of the following:

Couple	Tick <input type="checkbox"/>	You are married and living together/co-habiting/co-habiting in a same-sex life partnership
Single	Tick <input type="checkbox"/>	Not married/Not living as part of a couple/widow(er)/Share a home with another adult, e.g. a sibling or friend.

If co-habiting, please state the number of years you have been co-habiting with your partner Years

Nursing Homes Support Scheme Application Form

Have you or your partner (living or deceased) previously applied for State Support or Subvention?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, when (if known)		

Do you currently hold a Medical Card, GP Visit Card, or a Drugs Payments Scheme Card?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please supply the Number (if known)		

We understand that you may wish to have some help or support from a relative or friend in making this application and gathering documentation. If you do, please provide contact details for this person here:

Name: _____

Address: _____

Tel No.: _____

Please note that in nominating a contact person you consent to that person receiving copies of documentation on your care needs and financial assessments.

Part 2 – Application for Care Needs Assessment

Part 2 A – To be completed by a person who may need care services.

I, _____ hereby apply for a Care Needs Assessment under the Nursing Homes Support Scheme.

Signed: _____

Dated:

--	--	--	--	--	--	--	--	--	--

Part 2 B – To be completed where a person is unable to make application for Care Needs Assessment on their own behalf.

I, _____ hereby apply for a Care Needs Assessment under the Nursing Homes Support Scheme on behalf of _____ who it appears may need care services and is unable to make application on his/her own behalf by reason of ill-health, physical disability or a mental condition.

I make this application as: (Tick correct box)

(a) spouse/partner; <input type="checkbox"/>	(f) registered social worker; <input type="checkbox"/>
(b) a relative over 18 years of age; <input type="checkbox"/>	(g) Committee of Ward of Court*; <input type="checkbox"/>
(c) legal representative; <input type="checkbox"/>	(h) next friend appointed by the Court*; <input type="checkbox"/>
(d) registered medical practitioner; <input type="checkbox"/>	(i) Attorney under Enduring Power of Attorney*; <input type="checkbox"/>
(e) registered nurse; <input type="checkbox"/>	(j) Care Representative appointed by the Court* <input type="checkbox"/>

Signed: _____

Dated:

--	--	--	--	--	--	--	--	--	--

Address: _____

Tel: _____ Email: _____

(* Please enclose documentary evidence)

Part 3A – Details of income

If you are part of a couple please supply details for your spouse/partner. Please include documentary evidence of all income. Net Weekly Income should be provided, i.e. your weekly income after Tax, PRSI etc. have been deducted.

Income	Applicant	Spouse/Partner
Department of Social and Family Affairs pension/allowance/benefit	€	€
Any other non-Irish pension	€	€
Occupational pension <i>Please include a copy of your pension slip</i>	€	€
Employment, trade, profession or vocation (including for part time work) <i>Please include a copy of a pay slip, P60 or P21</i>	€	€
Income from rentals (in the State or otherwise)	€	€
Income from holding an office or directorship	€	€
Income from fees, commissions, dividends, interest, or income of a similar nature	€	€
Payments under a settlement, covenant, estate or a payment in respect of maintenance	€	€
Income from royalties and annuities	€	€
Income that was transferred from you to another person within the last 5 years.	€	€
Farming/Business Income <i>If income arises from a Farm or Business please attach accounts in respect of same for the previous tax year</i>	€	€
Any other income:		
	€	€
	€	€

Please supply	Applicant	Spouse/Partner
Department of Social and Family Affairs Pension claim number or		
Department of Social and Family Affairs Pension book number or		
PPS number		

Part 3B – Allowable Deductions

Some expenses may be deducted from your income for this assessment. Please give details of allowable deductions.

	Amount per year	
	Applicant	Spouse/Partner
Health Expenses (e.g. doctors' fees, pharmacy costs)	€	€
Interest on loans related to your principal residence	€	€
Rent Payments (If you live in rented accommodation)	€	€
Maintenance Payments to another person	€	€

Amounts in Part 3B should be provided annually, net of Tax Relief. The HSE may request evidence of these deductions during your assessment.

Part 4A – Details of Cash Assets

Please give details of all Cash Assets, giving the total balance amounts for you and your spouse or partner. Please provide documentary evidence of cash assets.

	Applicant	Spouse/Partner
Savings and Deposits (please give a total amount)		
Bank	€	€
Credit Union	€	€
Post Office	€	€
Other (please specify)	€	€

Stocks, shares, bonds, securities etc.		
	€	€
	€	€
	€	€

Money loaned to another person which is repayable	€	€
---	---	---

Total Cash Assets transferred to another person within the last 5 years (cash, savings/deposits, shares, bonds, securities etc.)	€	€
--	---	---

If any of the transferred assets have been returned, please state the total amount returned	€	€
---	---	---

Other Cash Assets	€	€
	€	€

Part 4B – Details of Non-Cash Assets

Non-Cash Assets means all forms of property, land or valuables owned by you and your spouse or partner, whether within the State or outside. Please include documentary evidence of assets and values.

Principal Residence

Home Address

Please indicate if you are the owner/joint owner/tenant/lodger/local authority tenant purchaser/other (please specify)

If you own or partly own your property please provide current market value of your home. (Please furnish a Certificate of Market Value from an Auctioneer or a Valuer)

€

Indicate loan repayments (amount per month) and outstanding balance on same

Loan Repayment

Outstanding Balance on Loan

€

€

Transferred Assets

Please supply details of any non-cash assets (property/land) sold or transferred to another person in the last 5 years.

Asset Details	Date of Transfer	Value at time of Sale or Transfer €	Amount Received from Sale/Transfer €	If transferred, to whom?

Please supply documentary evidence of the amount received or the market value of asset at the time of sale/transfer

Other Non-Cash Assets (property or valuables)
Please provide details (including address if appropriate)

Value in € for applicant and spouse

Outstanding Balance on Loan

€

€

€

€

Please furnish a Certificate of Market Value from an Auctioneer or a Valuer.

Please supply details of any mortgage or charge on the Non-Cash Assets listed above.

Part 5 – Application for State Support

Please read the following and then sign either Part 5A or 5B as appropriate

As part of this application, the HSE will make arrangements for a Care Needs Assessment and a Financial Assessment to be carried out. Any organisation with information relevant to the applicant's care needs may provide the HSE with this information. The content of the care needs assessment report may be provided to, or shared with, relevant health professionals, if required. All required information which the HSE may request in connection with the consideration of this application will be provided. To process this application the HSE may seek limited access to social welfare data to confirm details of the applicant, their spouse/partner and dependants. The signature below indicates consent to this access. The HSE will treat all information and personal data provided to them as confidential. The HSE will only disclose information or personal data to other people or bodies according to law. The applicant must report to the HSE, within 10 working days, any changes in his/her or their partner's circumstances which may affect entitlement to financial support.

Part 5A To be completed by the person who needs care services:

I hereby apply for State Support under the Nursing Homes Support Scheme. I have read Part 5 above and I say that the information given by me on this form is correct to the best of my knowledge and belief.

Signed: _____
Dated:

--	--	--	--	--	--	--	--	--	--

Part 5B To be completed only where the person who may need care services has reduced capacity to make decisions and is unable to make the application

I, _____ hereby apply for State Support under the Nursing Homes Support Scheme on behalf of _____
(persons name)

- I make this application as: (Tick correct box)
- (a) Committee of Ward of Court**
 - (b) Attorney under Enduring Power of Attorney**
 - (c) Care Representative appointed by the Court**
 - (d) spouse/partner;
 - (e) a relative over 18 years of age;
 - (f) next friend appointed by the Court**;
 - (g) legal representative;
 - (h) registered medical practitioner;
 - (i) registered nurse;
 - (j) registered social worker;

Categories (a) to (c) above have priority over those at (d) to (j). Please refer to the Information Booklet for further information.

I have read Part 5 above and I say that the information given by me on this form is correct to the best of my knowledge and belief. No person has priority to make this application before me / All persons with higher priority have consented in writing (copy/copies attached) to my making this application (delete as applicable). (See Information Booklet)

Signed: _____
Dated:

--	--	--	--	--	--	--	--	--	--

(**Please enclose documentary evidence)

Part 6 – Nursing Home Loan (Ancillary State Support)

The Nursing Home Loan (Ancillary State Support) is an additional support designed to ensure that people do not have to sell assets such as their home during their lifetime in order to meet their care costs.

This is an optional extra feature of the Nursing Homes Support Scheme for people who own property or assets in the State. It is a loan advanced by the HSE to you. It is paid to help you meet the portion of your contribution to the cost of care that is based on Irish land-based assets (i.e. land and property within the Irish State).

Payment of the Nursing Home Loan (Ancillary State Support) by the HSE results in the creation of a charge (a simple type of mortgage) in favour of the HSE against the interest of the applicant and his/her partner in the asset(s) set out in this application. The HSE will notify the Property Registration Authority of the charge who will register it against the asset(s) specified in this application.

You may therefore wish to seek **independent legal advice** before you apply for a Nursing Home Loan (Ancillary State Support).

The Nursing Home Loan (Ancillary State Support) together with interest is repayable

- (a) when the applicant dies, or
- (b) when any part of the charged asset is transferred, or
- (c) if the applicant or his/her partner is made a bankrupt, or
- (d) if the HSE determines that it has been given false/misleading information relating to this loan application

Where the home, farm, business or other asset is owned by more than one person, the HSE requests all joint owners to fill in Part 6B of this form.

The Nursing Home Loan (Ancillary State Support) may be applied for at any time, not just when entering into long-term nursing home care. Applications for the Nursing Home Loan may be granted by the HSE subject to the overall budget available to it.

Part 6A – Application for a Nursing Home Loan
(Ancillary State Support)

I/We hereby apply for and request payment of the Ancillary State Support (Nursing Home Loan) under the Nursing Homes Support Scheme Act, 2009 ("the Act") in respect of the following land-based asset(s) within the State. I/We acknowledge that payment of Ancillary State Support results in the creation of a Charge in favour of the Health Service Executive (which by virtue of the Act is deemed to be a mortgage made by deed) against the interest of the person to whom payment relates and of the partner of that person in such land as is specified in the request for payment of the Ancillary State Support (Nursing Home Loan). I/We consent to the creation of a Charge in favour of the Health Service Executive over the asset(s) listed below.

1st Property	2nd Property
Details of Asset:	Details of Asset:
House No./Name:	House No./Name:
Street:	Street:
Town/City:	Town/City:
Townland:	Townland:
County:	County:
Folio Number (if known):	Folio Number (if known):

(Please provide documentary evidence if available of the title to property e.g. copy land registry folio or copy lease or conveyance to applicant)

Signed: _____
(Applicant)

Dated:	D	D	/	M	M	/	Y	Y	Y	Y
--------	---	---	---	---	---	---	---	---	---	---

Signed: _____
(Partner/Spouse)

Dated:	D	D	/	M	M	/	Y	Y	Y	Y
--------	---	---	---	---	---	---	---	---	---	---

Signed: _____
(Representative of Applicant)

Dated:	D	D	/	M	M	/	Y	Y	Y	Y
--------	---	---	---	---	---	---	---	---	---	---

Signed: _____
(Representative of Partner)

Dated:	D	D	/	M	M	/	Y	Y	Y	Y
--------	---	---	---	---	---	---	---	---	---	---

If you are signing as a representative, please provide evidence of your appointment as a Care Representative/ Attorney under Enduring Power of Attorney/Committee of a Ward of Court.

A person who knowingly or recklessly gives the HSE information which is false or misleading in connection with an application for financial support is liable on conviction to a fine and/or imprisonment.

Part 6B – Consent of Joint Owner(s)

Any person(s) who jointly owns a property with the applicant is requested to sign this section.

I/we _____ and _____, (the joint owner(s) of the asset(s) listed below), hereby give my/our prior written consent to the creation of a Charge in favour of HSE under the Nursing Homes Support Scheme Act, 2009 ("the Act") in respect of the following land-based asset(s) within the State. I/we acknowledge that payment of Ancillary State Support results in the creation of a Charge in favour of the Health Service Executive (which by virtue of the Act is deemed to be a mortgage made by deed) against the interest of the person to whom payment relates and of the partner of that person in such land as is specified in this request for payment of Ancillary State Support.

1st Property	2nd Property
Details of Asset:	Details of Asset:
House No./Name:	House No./Name:
Street:	Street:
Town/City:	Town/City:
Townland:	Townland:
County:	County:
Folio Number (if known):	Folio Number (if known):

Signed: _____
(Joint Owner)

Dated:	D	D	/	M	M	/	Y	Y	Y	Y
--------	---	---	---	---	---	---	---	---	---	---

Signed: _____
(Joint Owner)

Dated:	D	D	/	M	M	/	Y	Y	Y	Y
--------	---	---	---	---	---	---	---	---	---	---

The absence of prior consent in writing of a joint owner does not render void the making of a charge in favour of the HSE.

Checklist

Where documentary evidence is being sent with this application, photocopies are acceptable - you do not need to send original documents

Have you provided proof of income from

- ☐ Department of Social & Family Affairs pension/allowance/benefit
- ☐ Occupational Pension – recent payslip, P60 or P21
- ☐ Non-Irish pension
- ☐ Employment trade, profession or vocation
- ☐ Rentals – in the state or otherwise
- ☐ Holding an Office or Directorship
- ☐ Fees, commissions, dividends, interest or income of a similar nature
- ☐ Payments under a settlement, covenant, estate or a payment in respect of maintenance
- ☐ Royalties and annuities
- ☐ Transferred income
- ☐ Farming/business – please attach accounts in respect of previous year
- ☐ Any other income

Have you provided details of Cash Assets?

- ☐ Savings and Deposits – please provide copies of full statements from banks, credit union, post office etc.
- ☐ Stocks, Shares, Bonds, Securities and other financial instruments – please provide statements of value
- ☐ Money loaned by you to another person which is repayable – please provide details
- ☐ Details of any cash assets transferred in the past five years
- ☐ Details of any other cash assets

Have you provided details of Non-Cash Assets – Property and Land?

- ☐ If you own your home provide details of current valuation
- ☐ Details and valuations of interest in other houses/land/business in the State
- ☐ Details and valuations of interest in overseas houses/land/business
- ☐ Details of any non-cash assets transferred in the past five years
- ☐ Details of any other non-cash assets
- ☐ Details of any mortgage or charge on Non-Cash Assets

Have you provided information if applying for a Nursing Home Loan (Ancillary State Support)?

- ☐ Details of Property and Folio Numbers – if known
- ☐ Have you considered taking independent legal advice?

Additional Information

- ☐ Have you signed the application for Care Needs Assessment in Part 2?
- ☐ Have you signed the application for State Support at Part 5?
- ☐ If you are applying for the Nursing Home Loan, have you read and signed Part 6?
- ☐ If you are applying on behalf of another person, have you provided the requested details of your entitlement to do so?
- ☐ If you are currently in a nursing home/hospital please supply a letter stating date of admission.

HSE Nursing Home Support Offices

Your Nursing Homes Support Office is available to help you fill in the form or answer questions about your application. When you have completed this form, send it to the Nursing Homes Support Office for your area:

Carlow/Kilkenny	HSE Nursing Homes Support Office, Community Services, James's Green, Kilkenny. Tel: 056 7784761 & 056 7784633
Cavan/Monaghan	HSE Nursing Homes Support Office, St. Felim's Hospital, Cavan. Tel: 049 436 0446/451/456
Cork/Kerry	HSE Nursing Homes Support Office, Floor 5, 26 South Mall, Cork. Tel: 021 492 1842/43/44/45
Donegal	HSE Nursing Homes Support Office, Navenny House, Navenny Street, Ballybofey. Tel: 074 9189172
Dublin South, Wicklow and Kildare	HSE Nursing Homes Support Office, Oak House, Millennium Park, Naas, Co. Kildare. Tel: 045 880 400
Dublin North City and County	HSE Nursing Homes Support Office, Civic Office, Main Street, Ballymun, Dublin 9. Tel: 01 8467148
Galway	HSE Nursing Homes Support Office, Community Services, West City Centre, Seamus Quirke Road, Galway. Tel: 091 548427/28/26
Laois/Offaly	HSE Nursing Homes Support Office, Health Centre, Arden Road, Tullamore, Co. Offaly. Tel: 057 9359625
Limerick, Clare and North Tipperary	HSE Nursing Homes Support Office, St. Joseph's Hospital, Mulgrave Street, Limerick. Tel: 061 461499
Longford/Westmeath	HSE Nursing Homes Support Office, Health Centre, Longford Road, Mullingar, Co. Westmeath. Tel: 044 9394995
Louth	HSE Nursing Homes Support Office, Community Care, Dublin Road, Dundalk. Tel: 042 9381344
Mayo	HSE Nursing Homes Support Office, County Clinic, Castlebar. Tel: 094 9042261
Meath	HSE Nursing Homes Support Office, An Tealach, Commons Road, Navan. Tel: 046 9066272
Roscommon	HSE Nursing Homes Support Office, Community Services, Lanesboro Road, Roscommon. Tel: 0906 637561
Sligo/Leitrim	HSE Nursing Homes Support Office, Markievicz House, Barrack St, Sligo. Tel: 071 9155193
Tipperary South	HSE Nursing Homes Support Office, Community Care Centre, Western Road, Clonmel. Tel: 052 6177283
Waterford	HSE Nursing Homes Support Office, Waterford Community Services, Cork Road, Waterford. Tel: 051 842963
Wexford	HSE Nursing Homes Support Office, Wexford Community Services, Grogan's Road, Wexford. Tel: 053 9123522

You can read more about this scheme on www.hse.ie. Information is also available from the HSE infoline on 1850 24 1850, Monday to Saturday, 8am to 8pm

COMMON SUMMARY ASSESSMENT REPORT

Please complete all sections clearly in block capitals. Read guidance notes before completing


 Feidhmeannacht na Seirbhíse Sláinte
 Health Service Executive
1. SOURCE OF REFERRAL (PLEASE TICK):Community Hospital ☐Acute Hospital ☐GP ☐Mental Health ☐Community ☐Nursing Home ☐

Name of Location: _____

Date of Referral: _____

2. PERSONAL DETAILS:

PPS No. of person who may need care: _____

First Name: _____

Surname(s): _____

Preferred Name: _____

Current Address: _____

Past Address (if relevant): _____

Tel No(s): _____

Date of Birth (DD/MM/YYYY) _____

Medical Card No: _____

Hospital Number: _____

3. PERSONAL CIRCUMSTANCES:Marital Status: ☐ Single☐ Married☐ Widowed☐ Separated☐ Divorced☐ OtherLiving: ☐ Alone☐ With Spouse☐ With partner☐ With family☐ With carer☐ With Other

Housing situation (see guidance document): _____

Who is principal carer and what level of support do they provide? (Please include contact details): _____

Assessment of Carer's needs completed? Yes ☐ No ☐ (Please attach if available)

Identify any family members, neighbours, friends who provide support: _____

Contact Person/Specified Person/Care Rep: _____

Relationship to applicant? _____

(contact details address/phone/mobile): _____

GP: _____

Contact Details: _____

PHN &/or CMHN: _____

Contact Details: _____

4. WHAT OPTIONS OF CARE HAVE BEEN DISCUSSED WITH THIS PERSON AND WHAT IS HIS/HER PREFERRED OPTION?Completed by: NAME: _____
(PRINT)

Role: _____

Date: _____

Signature: _____

5. RECORD OF CURRENT COMMUNITY/HOME SUPPORT SERVICES
(SEE GUIDANCE DOCUMENT BEFORE COMPLETING):

SERVICE (Tick)	Home Help/Support <input type="checkbox"/>	Day Care <input type="checkbox"/>	Respite <input type="checkbox"/>	Meals Supply <input type="checkbox"/>	Laundry <input type="checkbox"/>	Day Hospital <input type="checkbox"/>
Hours/Times p/w or relevant time or if refused services						
SERVICE (Tick)	PHN/CMHN <input type="checkbox"/>	Family support/ Private Carer <input type="checkbox"/>	Therapy or other discipline <input type="checkbox"/>	Other (Spec.) <input type="checkbox"/>	Services Refused <input type="checkbox"/>	
Hours/Times p/w or relevant time or if refused services						

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

6. CURRENT DIAGNOSIS AND MEDICAL/MENTAL HEALTH SUMMARY:
(please include only relevant conditions)

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

7. CURRENT MEDICATIONS
(NOT FOR PURPOSE OF DISPENSING)

Name of Drug	Dosage	Frequency	Name of Drug	Dosage	Frequency

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

8 (A): ASSESSMENTS

BARTHEL INDEX	DATE	SCORE
Bowels (preceding week)	Continent (2) Occasional Accident (1 per week) (1) Incontinent (needs enema) (0)	
Bladder (preceding 24-48 hours)	Continent (2) Occasional Accident (1) Incontinent or Catheterised & Unable to manage (0)	
Grooming	Independent (1) Needs Help (with aids) (0)	
Toilet Use	Independent (2) Needs Help (1) Dependent (0)	
Feeding	Independent (2) Needs help (1) Unable (0)	
Transfer (From bed to chair & back)	Independent (3) Needs minimal help (2) Needs 1-2 persons (1) Unable (0)	
Mobility	Independent (3) Walks with help of one person (2) Wheelchair independent (1) Immobile (0)	
Dressing	Independent (including buttons, zips and laces) (2) Needs Help (can do half unaided) (1) Dependent (0)	
Stairs	Independent up & down (must carry walking aid) (3) Needs help (verbal, physical, carrying aid) (2) Unable (1)	
Bathing	Independent (must get in & out unaided and wash self) (1) Dependent (0)	
Independent (20) Low Dependency (16-19) Medium Dependency (11-15) High Dependency (6-10) Maximum Dependency (0-5)		TOTAL
Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____ (PRINT)		

8 (B): COMMUNICATION

	Tick
No problems	<input type="checkbox"/>
Retains most information and can indicate needs verbally	<input type="checkbox"/>
Difficulty speaking but retains information and indicates needs non-verbally	<input type="checkbox"/>
Can speak but cannot indicate needs or retain information	<input type="checkbox"/>
No effective means of communication	<input type="checkbox"/>
Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____ (PRINT)	

8 (C): OTHER ASSESSMENTS

TYPE	SUMMARY (PRINT NAME, ROLE, DATE AND SIGN, OR APPEND SIGNED REPORT)	
Cognitive assessment (Specify)	Date:	Outcome:
Pressure sore risk assessment		
Falls risk assessment		
Nutritional		
Other (specify)		
Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____ (PRINT)		

8 (D): PLEASE INCLUDE DETAILS OF THE PERSON'S MENTAL HEALTH STATUS
(PLEASE ATTACH ANY SUPPORTING DOCUMENTATION IF AVAILABLE):

8 (E): ADDITIONAL COMMENTS E.G. EMPLOYMENT, RECREATIONAL OR SOCIAL NEEDS
(ATTACH SUPPORTING DOCUMENTATION):

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

9. PLEASE IDENTIFY ANY OTHER SIGNIFICANT MEDICAL/SOCIAL/ RISK FACTORS THAT INDICATE THIS PERSON WOULD BE BEST CARED FOR WITHIN A LONG TERM RESIDENTIAL CARE SETTING

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

10. HEALTH PROFESSIONAL REPORTS.

(Please attach if relevant. Tick to indicate a report is appended)

Nursing ☐ Dietician ☐ Occupational Therapy ☐ Speech and Language ☐ Other ☐
Physiotherapy ☐ Psychology ☐ Podiatry ☐ Social Work ☐

11. SPECIALIST ASSESSMENT

(Best practice recommends that all older people should have either a consultant geriatrician assessment or consultant old age psychiatry assessment prior to the decision being made that they should enter long term residential care setting.)

Geriatric Medicine	Completed	Date: _____
Old Age Psychiatry	Completed	Date: _____
Rehabilitation Consultant	Completed	Date: _____
Neurologist	Completed	Date: _____
Other(Specify)	Completed	Date: _____
Specialist Comment: (or append report)		

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

This section should be completed by the person co-ordinating the completion of the CSAR

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

12. This section should be completed by the multidisciplinary decision making team (MDT)

It is the recommendation of this multidisciplinary decision making team that this person's overall needs are currently best met: (Please tick):

Within a Long Term Residential Care Setting	<input type="checkbox"/>
Sheltered Housing	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>
At Home with Community Supports (please complete SERVICES RECOMMENDED below, if applicable)	<input type="checkbox"/>
Likelihood of change in personal circumstances	Low Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> High Risk <input type="checkbox"/>

SERVICES RECOMMENDED (Tick)

	Home Help/Support <input type="checkbox"/>	Day Care <input type="checkbox"/>	Respite <input type="checkbox"/>	Meals Supply <input type="checkbox"/>	Laundry <input type="checkbox"/>	Day Hospital <input type="checkbox"/>
Comment(s)						
SERVICE (Tick)	PHN/CMHN <input type="checkbox"/>	Therapy or other discipline <input type="checkbox"/>	Other (Specify) <input type="checkbox"/>	Other (Specify) <input type="checkbox"/>	Other (Specify) <input type="checkbox"/>	Other (Specify) <input type="checkbox"/>
Comment(s)						

CONFIRMATION OF DECISION

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

Completed by: NAME: _____ Role: _____ Date: _____ Signature: _____
(PRINT)

NURSING HOMES THAT HAVE AGREED PRICES WITH NTPF

NTPF Reference	Nursing Home Name	Price Agreed (€ per week)	
		Single Room	Shared Room
		€	€
09-D-01	Glebe House Nursing Home	1225	1225
09-D-02	Griffioen Valley Nursing Home	1040	1040
09-D-03	Lisheen Nursing Home	1100	1100
09-D-04	Lucan Lodge Nursing Home	1200	1200
09-D-05	Marymount Nursing Home	1150	1150
09-D-06	Aclara Nursing Home	1070	1070
09-D-07	Altadore Nursing Home	1250	1250
09-D-08	Annabeg House Nursing Home	900	900
09-D-09	Ashbury Private Nursing Home	1160	1160
09-D-10	Ashford House Nursing Home	1075	1075
09-D-11	Beechfield Manor Nursing Home	1200	1200
09-D-12	Belmont House Nursing Home	1200	1200
09-D-13	Carysfort Nursing Home	1120	1120
09-D-14	Cedar House Nursing Home	1225	1225
09-D-15	Dalkey Lodge Nursing Home	1215	1215
09-D-16	Glengara Park Nursing Home	1250	1250
09-D-17	Harvey Nursing and Convalescent Home	1000	1000
09-D-18	Killiney Grove Nursing Home	1250	1250
09-D-20	Our Lady's Manor	865	830
09-D-21	Rickard House	1110	1110
09-D-22	St Joseph's Centre	1335	1335
09-D-34	Marian House Nursing Home	825	795
09-D-35	Glenaulin Nursing Home	1140	1140
09-D-36	Croft Nursing Home	1010	1010
09-D-41	New Lodge Nursing Home	1225	1225
09-D-42	Holy Family Residence	950	950
09-D-43	The Marlay Nursing Home	1275	1275
09-D-44	Simpson's Hospital	825	795
09-D-46	Calm Hill Nursing Home	1130	1130
09-D-48	Maryfield Nursing Home	1035	1035
09-D-49	St Joseph's Nursing Home	870	835
09-D-50	Padre Pio Nursing Home	1015	1015
09-D-52	Glencarrig Nursing Home	925	890
09-D-53	Killipper Woods Nursing Home	1210	1210
09-D-54	Sally Park Nursing Home	980	910
09-D-58	Ailesbury Private Nursing Home	1190	1190
09-D-59	Brabazon House Nursing Home	915	915
09-D-60	Mount Tabor Care Centre	1120	1120
09-D-61	St John's House of Rest	915	915
09-D-62	St Mary's Nursing Home	705	680
09-D-63	St Oliver's Nursing Home	825	795
09-D-67	Orwell House Nursing Home	1200	1200
09-D-68	Queen of Peace Nursing Home	825	795
09-D-69	Rostrevor Nursing Home	825	795
09-D-70	Cherryfield Lodge Nursing Home	825	795
09-D-71	Gascolgne House Nursing Home	1225	1225
09-D-72	Loeson Park House Nursing Home	1250	1250
09-D-73	Missionary Sisters of the Holy Rosary	915	915
09-D-74	Molyneux Nursing Home	365	365
09-D-75	Northbrook House Nursing Home	1070	1070
09-D-76	Harvey Nursing and Convalescent Home	1050	1050

NURSING HOMES THAT HAVE AGREED PRICES WITH NTPF

NTPF Reference	Nursing Home Name	Price Agreed (€ per week)	
		Single Room	Shared Room
		€	€
09-D-86	TLC Centre	1200	1200
09-D-87	St. Gladys Nursing Home	1150	1150
09-D-90	Clondalkin Nursing Home	860	860
09-KE-01	Ashley Lodge Nursing Home	825	795
09-KE-02	Beech Park Nursing Home	790	755
09-KE-03	Cloverlodge Nursing Home	800	800
09-KE-04	Craddock House Nursing Home	975	975
09-KE-05	Curragh Lawns Nursing Home	850	850
09-KE-06	Elm Hall Nursing Home	950	950
09-KE-07	Glenashling Nursing Home	946	946
09-KE-08	Hazel Hall Nursing Home	865	830
09-KE-09	Larchfield Nursing Home	960	960
09-KE-10	Lourdesville Nursing Home	800	800
09-KE-11	Mill Lane Manor Nursing Home	995	995
09-KE-12	Moyglare Nursing Home	960	960
09-KE-13	Oghill Nursing Home	737	710
09-KE-14	Parke House Nursing Home	1011	1011
09-KE-15	Ryevale Nursing Home	1260	1140
09-KE-16	Shalom Nursing Home	765	735
09-KE-17	Suncroft Lodge Nursing Home	975	975
09-KE-18	Willowbrook Nursing Home	785	750
09-KE-19	TLC Centre	1200	1200
09-KE-20	Mountpleasant Lodge	1000	1000
09-WW-01	Aisling House Nursing Home	825	825
09-WW-02	Asgard Lodge Nursing Home	840	840
09-WW-03	Allanta House Nursing Home	840	805
09-WW-04	Blainroe Lodge Nursing Home	985	985
09-WW-05	Bray Manor Nursing Home	835	805
09-WW-06	Dargle Valley Nursing Home	990	990
09-WW-07	Donora Nursing Home	865	865
09-WW-08	Earlsbrook House Nursing Home	965	965
09-WW-09	Eyrefield Manor Nursing Home	935	900
09-WW-10	Glenbervie Nursing Home	825	825
09-WW-11	Greystones Nursing Home	930	930
10-WW-12	Kinvara Nursing Home	1250	1250
09-WW-13	Kylemore House Nursing Home	995	955
09-WW-14	Roseville Nursing Home	945	800
09-WW-15	San Remo Nursing Home	1100	1100
09-WW-16	Shannagh Bay Nursing Home	1200	1200
09-WW-17	St Columban's Nursing Home	915	880
09-WW-18	Tara Care Centre	960	960
	Average Cost per week (Rounded)	1000	1000

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