

Housing and care options for older people

About this factsheet and who it is for

FirstStop provides advice and information about housing and care options for older people, their families and carers.

This guide is an introduction to the different types of accommodation and support services available for older people in England.

The artwork on the front of this factsheet was done by an older artist as part of the EAC Art Awards competition



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1. Introduction

FirstStop provides advice and information about housing and care options for older people, their families and carers.

This guide is an introduction to the different types of accommodation and support services available for older people in England.

There may be a range of options available to you depending on your circumstances and your current tenure. Each section in the guide suggests some points you may like to think about before deciding what is best for you, and provides information about what is available and from whom. After having read this booklet you can contact us directly to discuss your needs and we can offer you advice specific to your own situation.

At the end of the guide are contact details for all the organisations mentioned in the text, including details of FirstStop's Advice Line and website services.

For information on other parts of the UK contact us on 0800 377 7070 or visit our website.

2. Help to stay put

If you are finding it difficult to cope with daily tasks or think you need home care,

special equipment or meals, contact your local authority's social services department, or the hospital social worker if you are in hospital, and ask for an assessment of need.

Condition or layout of your home

Home Improvement Agencies (HIAs): Also known as Care & Repair or Staying Put agencies, these are local not-for-profit organisations set up to help older or disabled home owners and private tenants arrange and pay for repairs, improvements and adaptations to their homes.

Many HIAs also offer additional services such as a handy person, help with gardening, checking home security or preparing for coming home from hospital. Find your local HIA on the FirstStop website or call FirstStop Advice.

Repairs: If your property is in poor repair and you are a home owner, or a private tenant who is responsible for certain repairs you may be able to get help from your local HIA. If you are arranging repairs yourself, you may want to use TrustMark to find a reputable builder. TrustMark is a scheme supported by the government, the building industry and consumer groups to help you find reliable trustworthy tradesmen. If you are a tenant, you should report the repair to your landlord. If you have difficulty getting your landlord to

carry out necessary repairs you should contact the Environmental Health Department of your local council.

Adaptations and equipment: Equipment or adaptations to your home can sometimes make a real difference to your ability to live independently. If you are having difficulty using the bathroom or getting to the toilet, social services may be able to provide grab rails, bath seats or portable equipment.

If these do not solve the difficulty, changes to the bathroom, a downstairs WC or a stair lift may be possibilities. A Disabled Facilities Grant (DFG) may be available if you are assessed as needing major adaptations like these. Contact your social services department for an occupational therapy assessment or your local Home Improvement Agency for advice and possible assistance.

Heating: If you are a home owner or tenant, are 60 or over and get a means-tested or disability benefit you may be eligible for help to improve your heating or insulate your home. Speak to one of our advisors for information on current grants and funding schemes that may be available.

Safety and Security

Careline system: A careline phone could be installed which would allow you to call for help 24 hours a day if you have an accident

or are unwell. Your local authority will have a service, and alarm systems are also available through charities and commercial providers.

Telecare: Other telecare equipment (assistive technology) is being developed that can help people remain independent or live more safely e.g. sensors to detect intruders, gas, carbon monoxide, smoke/fire, flooding or drops in temperature, and monitors for movement (or lack of it), falls, opening doors/ fridge, taking medication etc.

Telehealth: There is an increasing range of telehealth equipment available, which can help monitor certain aspects of your health such as blood pressure, glucose levels and weight.

Home safety check: Your Home Improvement Agency or other local agencies may also be able to carry out a home safety check to help you identify changes you could make to reduce the risk of accidents or falls.

Security: The Crime Prevention Officer (CPO) at your local police station can give advice on security if you feel unsafe in your home. There are schemes all over the UK providing and fitting home security equipment, such as locks, chains and spyholes, your CPO will have information on what is available in your area.

Social needs

Social activities: Your local Age UK or Royal Voluntary Service (RVS) can give you information about social activities, visiting schemes or information services.

Homeshare: In a few areas there are homeshare schemes. These aim to match people who need accommodation and are willing to give some help, with older or disabled people who are willing to share their home and are looking for some support or companionship. The support does not usually include personal care, such as help with dressing.

Community Transport: If you are finding it difficult to get around or get to the shops or local amenities, there may be community transport or a Dial-a-Ride service in your area. Community transport services are provided by local councils and others. Services vary in each area and there are often fewer services in rural areas.

Shopmobility: Shopmobility schemes hire out or lend manual wheelchairs, powered wheelchairs and powered scooters to anyone who needs help with mobility to get around. Shopmobility centres are usually located in a town centre or shopping centre, enabling people to go shopping and to visit leisure and commercial facilities. Each scheme varies, so it is important to contact the scheme

you wish to use before you go. For example, in some centres you need to book in advance. There is sometimes a charge for using the service, though some centres provide it for free.

Health

Health: Your GP can give advice on managing health conditions, or arrange for you to see a community nurse, health visitor or chiropodist. Some areas have Falls Prevention initiatives. Your health centre should have details.

Finance

Benefits: If you are finding it difficult to manage financially, the Pension Service or local CAB could check that you are claiming all the benefits to which you are entitled.

Equity Release: If you own your own home you may wish to consider releasing some of the equity to pay for adaptations or carry out necessary repairs. This is an option that is not suitable for everyone, there are a number of pros and cons to weigh up. FirstStop can introduce you to suitably qualified Independent Financial Advisers (IFAs) who are members of the Society of Later Life Advisers (SOLLA) and can advise on equity release.

Help from your local authority

The Care Act 2014 introduced a general duty on local authorities to promote an individual's 'wellbeing'. This means that councils should always have a person's wellbeing in mind when arranging care and support services.

The type of services that could be arranged, through the social services department of your local authority, in order to improve your wellbeing include:

- Arranging a handyman service to help with adaptations or repairs
- Access to independent information and advice services
- Help around the home with domestic tasks such as cleaning and shopping
- Transport services so that you are able to become involved in your community

3. Wanting or needing to move on

You may decide that you no longer wish to remain in your present home and that you want to move on. Or it may not be possible to adapt it to meet your needs, or you may need more care and support than can be provided in your present home.

The options might be:

- moving to a home that suits your needs better e.g. with no stairs or near shops, public transport or supportive relatives;
- living with family;
- moving to sheltered or retirement, extra care or assisted living housing;
- moving to a care home.

When deciding on a move, there are important issues to consider when considering whether or not it is right for you, for example:

- Think about your personality and the things that are important to you. Will you still be able to do the things you enjoy now?
- Are there good public transport links (even if you drive now, you may not be able to in the future)?
- Is there access to local amenities?
- If you decide to move to a different area, would you miss your friends and neighbours?
- If you move in with family, what would happen if the family circumstances changed?

- If you move to sheltered or retirement housing, would you be able to take your pet with you and/or would you be happy in accommodation occupied exclusively by older people?

Moving if you are a tenant

If you are a local authority or housing association tenant you can approach your landlord and ask for a transfer to a more suitable property or ask for details of mutual exchange schemes. You can also use other on-line services such as HomeSwapper.

Moving if you are a home owner

Consider all the factors that make your present accommodation unsuitable, get a valuation done on your present home and then approach estate agents in the area in which you wish to be and ask them for details of properties that match your requirements.

Living with the family

You may think about moving in with family but it is worth considering the following:

- will you still have access to friends and other relatives?
- will you have access to local or social amenities?

- will you be able to maintain your independence?
- what would happen if the family relationship broke down?
- what would happen if the family had to move?
- what is your security of tenure?
- what are the financial arrangements? If you put some of your money into the property will you be able to get your money back if the arrangement does not work, you want to move or you need to go into a care home later?

It would be advisable to take legal and financial advice before moving in with family, and to consider having a written agreement about how to address disputes, and how to end the arrangement if necessary.

Moving to sheltered or retirement accommodation

If the above options are not suitable, you may wish to consider moving to sheltered or retirement housing. The following sections in this factsheet describe the types of retirement housing and support available and give information on renting and buying.

Moving to a care home

If you feel that the above options will not meet your care needs you may wish to consider moving to a care home, or you may have been assessed as needing to move to a care home. This option is discussed later in this Guide.

4. Sheltered and retirement housing

Sheltered housing (often called retirement housing) is designed to meet the needs of older people. Most sheltered/retirement housing has a scheme manager (warden) and an emergency alarm (careline) service.

These schemes often have communal facilities such as a lounge, laundry, guest flat and garden. Meals are not normally provided but a few schemes include a restaurant or can arrange a hot meal.

There are many different types of sheltered /retirement housing both to rent and to buy. Schemes usually consist of between 15 and 60 self-contained homes which may be bedsits (studios), flats, bungalows or luxury apartments.

There is a minimum age for residents, usually 60, sometimes 55 and very occasionally 50. This type of housing appeals to people who like living independently but want the reassurance of

knowing that assistance is on hand if there is an emergency, or who want the possibility of socialising in a community of people in the same age range.

Over recent years there have been many changes to the way the scheme manager service is delivered, and the role varies considerably between schemes. Generally, the scheme manager is expected to:

- manage the scheme and respond to the emergency alarm when on site;
- get to know the residents and make sure they know about local services;
- encourage residents to ask for additional support from statutory and voluntary organisations when appropriate.

Scheme managers generally do not provide personal care for residents, or carry out tasks like shopping or housework. Some scheme managers live on-site; most do not. Even if they live on-site they are usually only on duty during normal office hours.

However the availability of a careline alarm service offers reassurance that help is at hand round the clock if needed. By pressing a button on a pendant or pulling a cord, a message is relayed to the scheme manager (if on duty) or to a monitoring centre, staffed 24 hours a day. If help is needed, the scheme manager will attend or the

centre will alert relatives or friends, or contact your GP or the emergency services.

Housing-with-Care

Housing-with-care is housing designed with the needs of frailer older people in mind and with higher levels of care and support on site. It is a newer form of specialist housing for older people, and is still relatively uncommon in many parts of the country. It is also known as extra-care housing, assisted living or very sheltered housing.

Retirement villages are larger complexes and generally offer more leisure and care facilities than mainstream housing-with-care schemes.

There are also **close care schemes** which usually comprise a small group of bungalows or flats built on the same site as a care home and whose residents can access some of the home's services.

Housing-with-care properties can be rented, owned or occasionally part owned/part rented. They are fully self-contained homes, usually with one or two bedrooms. The services and facilities provided may vary considerably but typically they may include 24 hour staffing, some personal care, domestic help, an assisted bathroom, a restaurant or dining room and a residents' lounge.

If you are considering a move to housing-with-care, check what care services are available, whether they meet your needs, how they are organised, how they are paid for and whether you are eligible for financial help.

Choosing retirement housing or housing-with-care

Once you have decided to move to some form of specialist housing, you will want to consider which features are important to you. If possible, visit several schemes and meet the scheme manager and residents.

Location: Are there shops, banks, parks, doctors, pubs nearby? Are there hills to climb or busy roads to negotiate?

Transport: How good are public transport links? Is parking available?

Communal facilities: Are there communal areas for you to meet other residents? Are social events organised?

Are pets allowed?

Facilities: Is there a lift? Are doorways and corridors wide enough for walking frames and wheelchairs? Are doors and windows easy to operate and light switches and electric sockets easy to reach? Is there space and a charging facility for mobility scooters?

How good is the insulation? Is there noise from the lift, communal lounge, laundry or neighbours?

How secure is the main entrance (if there is one) and your own front door? Are there security locks on the windows?

Is there a residents'/tenants' association?

What are the rent, service & support charges and what do they cover?

Are any furnishings or appliances provided?

What type of heating system is there and how is it controlled?

What happens if you become frail or develop dementia and begin to need more help than the scheme provides?

5. Renting retirement housing

Renting from Local Authorities and Housing Associations

Most retirement housing and housing-with-care for rent is provided by local authorities and housing associations, but there are charitable and private sector providers.

Landlords generally aim to offer their housing to people in the greatest housing need, at rents which are affordable-

perhaps with the help of Housing Benefit. They set criteria describing who qualifies for their housing and which applicants have the highest priority. In most parts of the country they receive applications from more people than they can assist.

The cost of renting is made up of rent plus a charge to cover the services and support provided. Rents vary significantly between landlords and around the country. Many landlords will now consider applications from owner-occupiers, depending on their circumstances. A lower priority may be given to those who have the resources to buy sheltered housing, particularly where rented accommodation is in short supply. You will need to check the local policy if you own your property and want to rent sheltered housing.

Applying for rented retirement housing can appear complicated. Many councils and housing associations have changed the way they allocate properties, and now operate joint application procedures; most have also introduced a system called 'choice based lettings', which involves 'bidding' for properties advertised weekly or fortnightly.

For housing-with-care you may have to apply via social services, rather than the housing department. But start with your local council housing department and ask them to explain how the local arrangements work.

Other options for renting

Abbeyfield houses are run by voluntary organisations and offer supported housing for between 5 and 12 older people. Each house has a paid house manager and provides at least two meals a day, and support from local volunteers. Residents have their own rooms, often with en-suite facilities. Newer Abbeyfield developments provide self-contained flats.

Almshouses are independent local charitable trusts that provide affordable housing. Most almshouses have rules as to who they can house. As an almshouse resident you will be the beneficiary of the trust rather than a tenant and will have less security. If you are offered an almshouse property it is advisable to check the requirements of the trust, and what would happen if your needs or circumstances changed.

Private renting is available for a limited amount of sheltered or retirement housing. Most of the properties are in leasehold schemes which accept tenants over the minimum age (55 or 60). You need to check what services are included in the rent and the terms of the tenancy.

6. Buying retirement housing

Prices and types of property vary enormously. A small second-hand flat can be found for under £100,000 in most parts of the country. New properties cost more. Luxurious homes on sites with every amenity, swimming pools, golf courses, restaurants, may cost £350,000 upwards.

Once all the properties in a new sheltered/retirement housing scheme have been sold, the ongoing management of the scheme is often transferred to a management company, which may be either commercial or non-profit making. The management company employs the scheme manager and organises the maintenance and cleaning of all the facilities.

There is usually a minimum age for people living in sheltered or retirement housing (55 or 60) but younger people can often buy properties on behalf of someone who has reached the minimum age.

The scheme manager and communal facilities are paid for through service and support charges. These can range from a few pounds a week to £100 or more a week dependent on the services and amenities provided. In addition you will have to pay ground rent, council tax, water charges,

contents insurance, and telephone and fuel bills. Optional home care and meal services will normally be charged for separately.

The majority of properties are sold on a long lease (typically between 125 and 999 years). The lease sets out in a legal and binding form the duties and obligations of both the management company and residents, including any restrictions on the use of the property. It is very important that you understand the implications of all the clauses of the lease. Most management companies are members of The Association of Retirement Housing Managers (AHRM) and are bound by its Code of Practice.

Other tenure and product options

Most leasehold sheltered or retirement housing is purchased at full price on the open market. However, a few organisations operate special arrangements for older people with limited income and insufficient capital to buy at market prices. Typically these are:

Shared ownership: A small number of housing associations offer the option of buying a part share in a property and paying rent on the balance. The proportion you can buy varies. The rent element may be eligible for Housing Benefit. There will normally also be service and support charges to pay.

Leasehold Schemes for the Elderly (LSE):

These are run by a small number of housing associations and require you to buy 70% of the equity, the remaining portion being owned by the housing association. When you sell, you receive 70% of the market value.

A Lifetime Lease: This product offers an arrangement whereby you buy the right to live in a retirement property for the rest of your life (or lives in the case of a couple). The price is well below the normal purchase price but once you leave the property it reverts back to the company. Lifetime leases are available to people aged 60 and over and may also be available for non-retirement properties. We are currently only aware of one organisation offering lifetime leases, Homewise.

Part exchange: A few developers may offer part exchange deals, especially on new properties. These can be very useful but you are advised to compare the price offered with the full market value.

7. Care homes

It is often a sudden crisis that sparks off thinking about whether a move to a care home might be necessary. Decisions may have to be made in a hurry and there can often be strong, and sometimes conflicting, advice offered by family, friends and professionals. It can be difficult for the older person involved and for those who care about them to arrive at the best decisions in these circumstances.

Is a care home right for you?

Before deciding to move to a care home, have you:

- **considered** whether it is possible for you to stay in your own home, with care, support and adaptations? Perhaps sheltered, retirement or extra care housing would be able to meet your needs?
- **contacted** your local social services department and asked for a needs assessment for services such as meals, home or respite care.
- contacted your GP to make sure a medical assessment of your needs has been carried out?
- been in touch with organisations such as your local Age UK, British Red Cross or

Royal Voluntary Service (RVS) to see if there is any way they can support you?

- asked your social services department if they can provide useful equipment if you are finding the stairs, bath or toilet difficult?
- asked your local home improvement agency or local council whether repairs or adaptations would make your home more suitable, and explored whether you would be eligible for a Disabled Facilities Grant (DFG) or other financial help?
- contacted the Pensions Service, Housing Benefit section or organisations such as CAB to see if you are getting all the benefits to which you are entitled?

Types of care home

Care homes may be owned and operated by private individuals, companies, not for profit organisations and (some) social services departments. All care homes in England are registered and inspected by the Care Quality Commission (CQC). Since April 2015 care homes must display their CQC rating throughout the home and also, where applicable, on their website. Full inspection reports are available from the home or the registration authority.

Care homes providing personal care: These are often called residential homes. They vary in size and facilities. All are expected to provide a room, possibly with en-suite facilities, communal areas, meals, help with personal care such as dressing, supervision of medication, companionship and someone on call at night. Care homes providing personal care give care during normal short illnesses but do not provide constant nursing care.

Care homes providing nursing care: These are often called nursing homes. They also vary in size and facilities but all provide personal and nursing care 24 hours a day for people who are bedridden, very frail or have a medical condition or illness that means they need regular attention from a nurse. There is always a qualified nurse on duty.

Care homes for dementia: Older people with dementia may need a care home with an additional category of registration. These were previously known as EMI homes and some people still use this term.

Respite care

A stay in a care home does not have to be permanent. You might want to stay in a care home for a short period to give your carer a break, or to build up your strength after an illness. This is called respite care. Some care homes allocate specific beds for

respite care; others accept residents for respite if they have a vacancy. Each social services department will have a charging policy for respite care that may differ from the national charging scheme for permanent care. If you think you, or your carer, would benefit from you having some respite care, ask your local social services department for a needs assessment.

Paying for care yourself

Care homes vary in cost, depending on the location and services provided. Fees may range from £400 per week to more than £1,000 for a home providing nursing care.

People with very high nursing or medical needs may qualify to have their care fully funded by the NHS under the Continuing Care criteria.

If you are paying your own fees you can choose a home and make your own arrangements. Before doing this, we suggest you ask your social services department for a needs assessment, particularly if you may need help with the fees in the future. The care home must provide a written contract at the time you move into the home. If possible, try and arrange a trial stay in a home before making a final decision.

If you are paying your own fees in a care home providing nursing care, the NHS will

make a financial contribution subject to assessment. It is paid directly to the home.

If you are paying your own care home fees, you should be eligible for Attendance Allowance, and should make an application if you are not already receiving it or any other disability benefits. Contact the Attendance Allowance helpline for a claim pack, or download a form from the Gov.uk website.

You may also want advice on the best ways of investing your capital to pay for future care, as there are ways of meeting care costs using only part of your capital. For example, an *Immediate Need Care Fee Payment Plan* can provide a regular increasing income for as long as you need care and potentially cap the cost of care from the outset. However it is important to seek independent advice specific to your circumstances. See Section 10 about FirstStop Financial Advice.

Paying for your care with local authority help

Local authority needs assessment and financial assessment: If you need help towards the cost of a care home you should first contact your local social services department and ask for a needs assessment. This will provide you with information as to whether you meet the council's criteria for a care home and how

much they will normally pay for someone with your assessed care needs. If you are unhappy with any aspect of the assessment, call FirstStop's Adviceline.

Treatment of Capital: The means test capital thresholds for state assistance with care fees are set each year by Government. They are currently £23,250 in England but vary slightly in Wales, Scotland and Northern Ireland. Anyone with capital or savings in excess of the threshold will not normally get any financial help toward the costs of care from their social services department.

Treatment of your own home: If you have less than £23,250 in capital assets when you first move into a care home on a permanent basis, then the value of your former home will be ignored for up to 12 weeks. Social services will help with the fees for this period, but after that your home will be included in the financial assessment, unless:

- your husband, wife or partner still lives in the house, or
- a relative over 60, or under 60 but incapacitated, lives in the house.

The council has the discretion to disregard the property in other circumstances, such as where the property is considered as the main home of a family member who was

also your carer. Once your local social services department has agreed you need a care home, you should have some choice as to the area and the home to which you move.

Deferring payment

If you do not wish to sell your home, and have been assessed as needing care in a care home by your local authority, then you should be offered a Deferred Payments Agreement if you have capital assets, outside the value of your property, of under £23,250.

This must be offered if you meet the criteria and is effectively a loan whereby your local authority can help with the cost of your care fees in return for setting up a legal charge against your home so that the amount paid can be recovered when your home is eventually sold. Authorities may also charge reasonable 'arrangement costs' when setting up the agreement and can charge interest on the payments.

Choosing a care home

If you envisage funding your care yourself, now and into the future, you are fully free to choose your care home. If you need help with the fees, or envisage you might in the future, you still have a right to some choice as to which home you move to, though

there will be a limit on what the local authority is willing to pay.

In choosing a care home that will suit you, apart from checking the charges and the contract, you may want to think about:

- **Trial period:** Most homes will be happy to accept potential residents on a trial basis, to see whether they can meet your needs, and for you to see if life in a care home is what you expected.
- **Level of care:** Is the home able to provide the care you need?
- **Personal needs:** Can the home cater for any cultural, spiritual or dietary needs you have? If you are a smoker, what is the smoking policy?
- **What about your personality:** Do you like a routine and a setting where a lot of things are done for you; or would you prefer to be encouraged to be as independent as possible, and expect to be consulted about most decisions?
- **Location:** Is the home near enough to family and friends so you will be able to have visitors?
- **Social activities:** What activities are organised, and how often? Will you be able to keep up any hobbies you have?

- **Meals:** What are the meals like, can you try one? How much choice is there?
- **Facilities:** If the communal lounge has a television how/by whom are the programmes chosen? Is there a separate room where there is no television, for those who want to be quiet, or to be able to have conversation with visitors?
- **Pets:** Can you bring your pet if you have one? Does the home have a pet?
- **Is there** a residents'/relatives' association or committee?
- **What happens** if you become more frail or your needs change?

National variations

The information in this section about Care Homes relates primarily to England. For further advice on choosing and funding care, including the regulations in other parts of the UK contact FirstStop's Advice Line.

8. Your rights

Sometimes you may be concerned about the quality of a service you or a friend or relative is receiving or things do not go as you would wish, and you may want to challenge a decision made by a council or health authority or make a complaint.

Most organisations have a formal complaints procedure, but it may be possible to resolve things informally by initially raising your concerns with the relevant department or member of staff. You can do this in person, by telephone or in writing.

You should keep a note of the person you speak to or make a copy of your letter, and ask that they write to you confirming that your complaint has been received and detailing who is dealing with it.

If you are still not satisfied you can make a formal complaint using the official complaints procedure of the organisation.

If you would like to talk it over with an advisor at any stage contact the FirstStop Advice Line.

Care funding from April 2020

The following changes to the way in which care and support is funded was due to be implemented in April 2016, but has now been postponed until 2020 by Government.

Note: The figures given below are based on those proposed for the postponed 2016 reforms; these figures may therefore change before the introduction of these reforms in 2020.

A £72,000 cap on care costs

This will come into effect from April 2020 and effectively ‘caps’ the amount you should spend on *care* in your lifetime.

Every person receiving care will have a ‘care account’ managed through social services which will ensure that contributions you make towards your care from April 2020 are counted towards the cap. It is important to be aware that only care you have been assessed as needing, up to the cost of what the local authority would usually pay for this service, will contribute to the £72,000.

For care home residents, it is important to note that only the ‘care’ element of your bill will contribute towards this cap. You will always be expected to pay towards the care home’s ‘hotel costs’ (such as bed & board), which do not

count towards the £72,000 cap. These costs are likely to be set at a figure of £12,000 per year (£230 a week).

An increase in the upper capital limit from £23,250 to £118,000

This will come into effect from April 2020 and effectively means you may be entitled to financial assistance from your local authority sooner than you would be under the current system.

The current lower capital limit of £14,250 is also rising in April 2020 to £17,000. This is the minimum figure that must be disregarded when calculating your assets.

However, it is important to remember that your capital between £118,000 and £17,000 is still taken into account to form an ‘income’ at a rate of £1 for every £250 that you have (this is equal to £404 per week for those with assets of £118,000); this is then combined with your actual income from pensions and state benefits. If this total income figure is higher than the council’s personal budget for you, then you may not be entitled to any financial support.

10. Further reading

The following FirstStop publications can help to provide you with further information on your housing and care options. All the documents can be ordered free of charge by contacting our advice line on 0800 377 7070 or you can view them at www.firststopcareadvice.org.uk

FirstStop factsheets

Care and support at home

(Factsheet 6)

Equity release

(Factsheet 29)

Extra Care Housing

(Factsheet 10)

Funding care and support at home

(Factsheet 7)

Help with the costs of moving

(Factsheet 20)

Homesharing

(Factsheet 27)

Living longer – remaining independent

(Factsheet 24)

Mutual exchange

(Factsheet 31)

Points to consider when moving in with family (Factsheet 25)

FirstStop guides

Choosing and paying for a care home

(Guide)

11. Useful contacts

- Accessible Property Register
<http://accessible-property.org.uk>
- Age UK
0800 678 1174
www.ageuk.org.uk
- Association of Retirement Housing Managers (ARHM)
020 7463 0660
www.arhm.org
- Attendance Allowance Helpline
0345 605 6055
- Citizens' Advice Bureaux (CAB)
Find details of your local CAB in your phone book or call:
03444 111 444
www.adviceguide.org.uk
- Care Quality Commission (CQC)
03000 61 61 61
www.cqc.org.uk
- GOV.UK
<https://www.gov.uk>
- Disabled Living Foundation
0300 999 0004
www.dlf.org.uk
- Foundations (find your local Home Improvement Agency)
0300 124 0315
www-foundations.uk.com/home

- Homeshare
Contact FirstStop for details or:
www.homeshareuk.org
- HomeSwapper
www.homeswapper.co.uk
- Homewise
0800 043 4488
www.homewise.co.uk
- National Federation of Shopmobility
01933 229644
<http://nfsuk.org/>
- Pension Service
0845 606 0265
or via <https://www.gov.uk>
- Private renting
Girling Retirement Rentals
0800 525 184
www.girlings.co.uk
- Royal Voluntary Service
0845 608 0122
www.royalvoluntaryservice.org.uk
- TrustMark
0333 555 1234
www.trustmark.org.uk

About FirstStop Advice

FirstStop is a free information and advice service designed to help older people decide how best to meet their needs for support, care and suitable housing. It is provided jointly by a growing number of national and local organisations and it is led by the charity, Elderly Accommodation Counsel (EAC).

About FirstStop Financial Advice

Working together, EAC and its partners in FirstStop Advice provide comprehensive information and guidance to help you afford the care, accommodation or services you need.

FirstStop's national Advisors are trained to advise on:

- What you may be entitled to in state benefits and financial help from your local authority;
- Whether you may be entitled to help with your care costs;
- Ways of making your income and capital go further;
- Services that are provided free by local and national voluntary organisations;
- Homesharing, co-housing and other mutual support networks.

A key FirstStop partner organisation is the *Society of Later Life Advisers (SOLLA)*.

SOLLA's members are regulated Financial

Advisers who specialise in providing financial advice to older people, they also adhere to the Society's Code of Best Practice.

If you decide, after speaking to us, that you would like advice from a SOLLA member, we can provide local details to you.

(Neither EAC or FirstStop has any financial interest in SOLLA or its member IFAs)

Contact us

- Visit us online:
www.firststopadvice.org.uk
- Call our Advice Line: 0800 377 7070
- From mobiles or from overseas call: +44 20 3519 6002
- Email: info@firststopadvice.org.uk
- Open: Monday – Friday, 9am – 5pm

The information contained in this factsheet is intended to be, and should be regarded as, a brief summary and is based on our understanding of present legislation, regulations and guidance. No responsibility can be accepted for action based on this information.

April 2017

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