



## A – Z Introductory Guide to Health and Social Care

### Free Personal and Nursing Care

#### Brief description

Free Personal Care is the term for the Scottish Executive's policy that provides personal care services without charge to everybody over the age of 65 who is assessed as requiring them. People at home receive either the services direct from their local authority, or receive a payment allowing them to purchase the services elsewhere, and people in care homes receive a payment of £145 towards the cost of their overall care.

People at home who require nursing care continue to receive it from the NHS while those in care homes receive a further £65. This is provided to everyone who requires it irrespective of age.

#### The National Picture

##### Reason for/background to the service

**March 1999:** The Report of the Royal Commission on Long Term Care for the Elderly, which had been chaired by Professor Sir Stewart Sutherland and was published. It recommended that *“The costs of long-term care should be split between living costs, housing costs and personal care. Personal care should be available after assessment, according to need and paid for from general taxation: the rest should be subject to a co-payment according to means.”*

**October 2000:** The Scottish Executive's initial response to the Royal Commission report, in line with the Westminster response, agreed that nursing care, as opposed to personal care, should be provided free of charge in all settings. Subsequently, the Scottish Executive determined that personal care should also be free and established the Care Development Group, comprised of professionals and representatives from relevant organisations in 2001. The Group's remit was to make proposals for the implementation of both elements of the new policy.

**July 2002:** The [Community Care and Health \(Scotland\) Act 2002](#) established the statutory basis for free personal and nursing care and the policy was implemented from 1 July 2002.

## **Definitions**

The Care Development Group's report "**Fair Care for Older People**" (September 2001) agreed with the Royal Commission that the costs of care break down into roughly three components – nursing care, personal care and hotel or living costs, and that it was reasonable to expect individuals to continue to pay out of their own resources for their hotel or living costs if they had the means to do so, whether that was in their own home or in a care home. The Group felt it was particularly important that it should be clearly understood that living costs and domestic care costs do not come within the scope of personal care and that people will still be required to pay a proportion of their care costs.

The Care Development Group determined that the definition of personal care should include tasks related to the following areas:

### **Personal Hygiene**

Bathing, showering, hair washing, shaving, oral hygiene, nail care

### **Continence Management**

Toileting, catheter/stoma care, skin care, incontinence laundry, bed changing

### **Food and Diet**

Assistance with eating and assistance with special diets. Assistance to manage different types of meal services. Assistance with preparation of food.

### **Problems of immobility**

Dealing with the consequences of not being able to move

### **Counselling and support**

Behaviour management, psychological support, reminding devices and safety devices

### **Simple treatments**

Assistance with medication (including eye drops), application of creams and lotions, simple dressings, oxygen therapy

### **Personal Assistance**

Assistance with dressing, surgical appliances, prostheses, mechanical and manual aids. Assistance to get up and to go to bed. Transfers including use of a hoist.

## **Assessment and Eligibility**

Eligibility for providing personal and nursing care services is determined by the local authority, which is required to assess the overall needs of the individual. This should not take for granted care being provided by an unpaid carer. The Community Care and Health (Scotland) Act 2002 requires local authorities, following this assessment of needs, to take account of the views of individuals and their carers, as well as the care the carer is willing and able to provide, before deciding what services to provide to the individual. Actions are required to determine the personal care element individuals will be receiving, either to ensure they are not charged for it or to make arrangements for a payment towards their

care. Home Care (or Domiciliary Care) continues to be available to provide services that extend beyond definitions of Personal Care (such as help with cleaning, shopping and other domestic tasks). These services usually carry a charge within a 'means testing' framework. Supporting People grants may also be available to assist people to maintain their independence.

### **Effect on Attendance Allowance**

*People over 65 and living in their own home* who are eligible for free personal care are still entitled to receive Attendance Allowance and should be advised of this.

*People over 65 who live in care homes* and who are considered able to afford to pay their own care costs (known as self funders) have payments made on their behalf to the care providers by the local authorities. They are expected to pay the remainder of their own costs, often described as living or accommodation costs. Attendance Allowance will cease to be paid 28 days after a person starts to receive this assistance from local authorities. Self funders are expected to notify the Department for Work and Pensions (DWP) when this begins.

### **Key recent/current issues and developments**

In June 2004, over 40,000 older people received free personal care at home and more than 8,000 received funding toward free care in a care home. The number of people receiving the service at home rose by 74% between 2002, when the policy was introduced, and 2004.

From 1 April 2002, the Executive made £125m available for each of the following two years to fund the policy. This was distributed between local authorities on the basis of existing demand and population factors. During financial year 2002/03, after the 1 July 2002 implementation date, local authority expenditure on this policy was £71.8m for people at home, and £12.1m for people in care homes.

The Executive has now begun research which looks in detail at the implementation of the policy and the benefits it has brought. The research is expected to be completed by late summer 2006.

### **Implications for Joint Working**

The implications for the NHS include the need to make staff aware of the free personal care policy and that joint resourcing/joint management of services and Single Shared Assessment need to encompass not only the advice about and implementation of the policy, but also its financial requirements, both currently and in future. The funding should feature in local discussions on aligned/pooled budgets where these exist.

Local services need to have in place agreed eligibility criteria for assessments of need, and priorities for the provision of and access to services based on need. It is important that people receive services on the basis of prioritising the care needs of older people, rather than on the basis of individuals' ability to pay.

## How can I find out more?

The first point of contact for professionals seeking further information on the Free Personal and Nursing Care policy should be the Scottish Executive website at [www.scotland.gov.uk/health/freepersonalcare](http://www.scotland.gov.uk/health/freepersonalcare)

The website includes guidance for professionals, background information on the work of the Care Development Group and links to statistical releases. It also contains contact details should you have any enquiries or requests for more information.

## Scottish Executive Research papers that may be useful

Health and Community Care Research Findings No. 3 **Public Attitudes to the Provision of Free Personal Care** NFO System Three Social Research & MORI Scotland  
<http://www.scotland.gov.uk/cru/resfinds/hcc3-00.asp>

Lyn Jones, Julie Ridley, Anne **Public Attitudes to the Provision of Free Personal Care: Focus Group Research** Scottish Health Feedback Robson Health and Community Care Research Findings No. 4  
<http://www.scotland.gov.uk/cru/resfinds/hcc4-00.asp>

Belinda Dewar, Fiona O'May, Esther Walker **Public Attitudes to the Provision of Free Personal Care: Older People's Focus Group Research** Centre for Advances in Care of Older People, Queen Margaret University College, Edinburgh Health and Community Care Research Findings No. 5  
<http://www.scotland.gov.uk/cru/resfinds/hcc5-00.asp>

Dinah Mathew **Providing Personal Care to Older People in Scotland: The Perspective of Independent Home Care Providers** Health and Community Care Research Findings 6.  
<http://www.scotland.gov.uk/cru/resfinds/hcc6-00.asp>

Sally C. Stearns and Suzanne Butterworth **Demand For, And Utilisation Of, Personal-Care Services For The Elderly** Health Economics Research Unit, University of Aberdeen Health and Community Care Research Findings No. 7  
<http://www.scotland.gov.uk/cru/resfinds/hcc7-00.asp>

Rannia Leontaridi with David Bell **Informal Care of the Elderly in Scotland and the UK** Department of Economics, University of Stirling Health and Community Care Research Findings No. 8  
<http://www.scotland.gov.uk/cru/resfinds/hcc8-00.asp>