



# Dementia Journey

Insights to help you plan for personal and  
legal matters, in the hope of easing any  
potential and future difficulties.

Thackray Williams





# Dementia Diagnosis



At Thackray Williams, we see, all too frequently, how dementia has touched the lives of our clients, and their families, and in so many different ways.

With that in mind, we wanted to offer some gentle guidance, readily available, in case you too, need to consider planning ahead, for a loved one.

Our “Dementia Journey” brochure offers insights to help you plan for personal and legal matters, in the hope of easing any potential and future difficulties.

Whilst not all information will be relevant right now, having access to an overview of the potential challenges, available actions, and supportive organisations, beyond those of our legal team, can be incredibly helpful, when looking to the future; and we want to ensure that we continue to provide a reassuring and understanding experience.

We always tailor our legal services to individual needs, ensuring accessibility and prioritising the best interests, and rights, for our vulnerable clients, both through clear communication and careful attention to relevant legislation.

Most of our team are already Alzheimer’s Society Dementia Friends, which we hope reflects our genuine commitment to providing a compassionate, supportive and informed approach to all.

We have immersed ourselves within our communities and are actively involved in local dementia-friendly initiatives, building on close relationships with care professionals, which also enable us to offer support that goes beyond our legal advice, helping to create a more comfortable and secure journey for you and your loved ones.

We are here to help, so please reach out to any of the team on our contact page at the close of this brochure.

Warm regards

**Thackray Williams Solicitors**

## What is dementia?

The word 'dementia' describes a set of symptoms that may include memory loss and difficulties with thinking, problem-solving, co-ordination or even day to day language.

These changes are often small to start with, but for someone living with dementia, they may already have become severe enough, to impact their daily life; they may also be experiencing changes in their mood or behaviour.

Dementia itself is caused when the brain is damaged by diseases, such as Alzheimer's or a series of smaller strokes; but Alzheimer's is the most commonly recognised cause of dementia, although it's not the only one.

The specific symptoms that someone with dementia will experience depends entirely on the parts of the brain that have been damaged, and the disease that is causing the dementia.

## What are the signs?

Everyone is unique and will experience dementia in their own way.

The different types of dementia will affect people differently, more especially in the early stages, so it is really important to remember that other factors will also have an impact on how well someone can live with the condition.

Those factors will include how other people respond and interact with that individual, and the environment that surrounds them.

Dementia will invariably present with cognitive related symptoms, with one or more of the following:

- **Day-to-day memory** – difficulty recalling events that happened recently (short-term memory)
- **Concentrating, planning or organising** – difficulties making decisions, solving problems or carrying out a sequence of tasks, such as cooking a meal
- **Language** – difficulties following a conversation or finding the right word for something
- **Visuospatial skills** – problems judging distances, such as stairs and seeing objects in three dimensions
- **Orientation** – losing track of the day or date, or becoming confused about where they are

## What causes people to get dementia

There are a multitude of diseases that result in dementia, the most common of which include:

**Alzheimer's disease** is the most common cause of dementia. With Alzheimer's an abnormal protein surrounds brain cells and another protein damages the internal structure. In time, the chemical connections between brain cells are lost and cells begin to die. Problems with day-to-day memory are often the first thing to be noticed, but other symptoms may include difficulties finding the right words, solving problems, making decisions, or perceiving things in three dimensions.

**Vascular dementia** occurs if the oxygen supply to the brain is reduced. This is triggered by the narrowing or blockage of blood vessels where some of the brain cells become damaged or die. The symptoms can occur suddenly, following a severe stroke, or they can develop over time, through a series of smaller strokes. Vascular dementia can also be caused by disease affecting the small blood vessels, deep within the brain, this is known as **subcortical vascular dementia**.

The symptoms of vascular dementia will vary and may even overlap with some of the symptoms directly associated with Alzheimer's. Many people will have difficulties with their problem-solving or planning, thinking quickly or even concentration, they may also experience short periods of confusion.

**Mixed dementia** is when someone has more than one type of dementia, and a mixture of the symptoms of those conditions, so it's not uncommon for someone to have both Alzheimer's and vascular dementia together.

**Dementia with Lewy bodies** is a type of dementia that involves tiny abnormal structures (Lewy bodies) that form inside the brain cells. They disrupt the chemistry of the brain which ultimately leads to the death of brain cells. Early symptoms can include a fluctuation in alertness, hallucinations, and difficulties when judging distances. Day-to-day memory is usually less affected during the early stages of Alzheimer's. Dementia with Lewy bodies is closely related to Parkinson's and often has some of the same symptoms, including difficulty with movement.

**Frontotemporal dementia** (including Pick's disease) with Frontotemporal dementia, the front and side parts of the brain are damaged, where clumps of abnormal proteins form inside the brain cells, causing them to die. At first, changes in personality and behaviour may be the most obvious signs, and then depending on which areas of the brain are damaged, the person may encounter difficulties with fluency of speech or may begin to forget the meaning of words.

## Symptoms

The symptoms of these types of dementia are often different in the early stages but may become more similar, as the condition progresses. In the later stages of dementia, a person will need more support in order to carry out their everyday tasks, but it's also important to remember that many people do live well, for years, following their diagnosis.

There are many other diseases that can lead to dementia, **but these are rare** and together account for about 5% of all dementia diseases. These occurrences tend to be more common in younger people with dementia (those under the age of 65).

**Rarer causes** include Corticobasal Ganglia Degeneration, Progressive Supranuclear Palsy, HIV infection, Niemann-Pick disease type C, and Creutzfeldt-Jakob disease (CJD).

Some people with Parkinson's or Huntington's disease develop dementia as their illness progresses and those with Down's syndrome are also at risk of developing Alzheimer's as they get older.

**Mild cognitive impairment** – some people encounter problems with their memory or thinking, but not to the extent that the symptoms affect their everyday life. In these instances, a doctor may diagnose mild cognitive impairment (MCI). MCI is not a type of dementia, although research does show that people with MCI, do have an increased risk of developing dementia in the future.

It is important to note that MCI can also be caused by anxiety, depression, physical illness and the side effects of medication; because of this, some people who have MCI do not go on to develop dementia, and a small number of people will even recover from the condition.

An accurate diagnosis is important and will provide access to the right treatment, advice and support; allowing the individual time to prepare for the future and plan ahead, if dementia is in fact diagnosed.



## What to do if you are experiencing these signs – diagnosis

**Diagnosing dementia** – securing the right diagnosis is important from the outset because when someone is experiencing problems with their memory or thinking, it could also be as a result of depression or an infection, rather than dementia itself.

In some instances, a GP or specialist nurse will be able to make a diagnosis, but this will depend on their individual expertise and training. In most cases, dementia will be diagnosed by specialist doctors – a psychiatrist, a geriatrician or a neurologist.

It's also important to remember that there is no SINGLE test for dementia, diagnosis is based on a combination of presenting factors.

A common pattern is for the GP to make an initial assessment before making a referral to a memory clinic or other specialist services for a more detailed assessment.

A specialist doctor will have the necessary expertise in dementia and will be able to arrange for detailed tests and brain scans, if appropriate, with the diagnosis being communicated clearly to both the individual concerned and those closest to them.





# The Mental Capacity Act and Principles

The Mental Capacity Act (MCA) is a UK law that applies to England and Wales that protects and empowers people who may lack the mental capacity to make their own decisions about their care and treatment.

## Safeguarding and empowering

What it Does:

- Safeguards people who lack capacity to make decisions
- Empowers individuals to make their own choices whenever possible
- Sets out a framework for making decisions on someone else's behalf when they lack capacity

**The Mental Capacity Act applies to:** adults who are 16 years and over, and who lack capacity for some or all of their decisions.

In the context of the Mental Capacity Act (MCA), mental capacity refers to a person's ability to make a specific decision at a specific time. It's not a general state of being, but rather something that can fluctuate depending on the complexity of the decision and the person's current condition.

This can include, but is not limited to:

- **Understanding information:** the ability to grasp the information relevant to the decision, including the options available, potential consequences, and any risks involved
- **Retaining information:** being able to hold onto the information long enough to weigh the pros and cons and make a choice
- **Using information:** the ability to use the understood information to consider the options and their implications for making a decision
- **Communicating a choice:** being able to clearly communicate their decision, whether verbally, in writing, or through other means

It is important to remember that mental capacity can vary depending on the complexity of the decision. Someone might be able to make simple day-to-day choices but lack capacity for complex financial decisions.

Mental capacity can fluctuate due to illness, injury, or temporary situations like intoxication.

The MCA emphasises a presumption of capacity. This means everyone is assumed to have capacity unless there's evidence to suggest otherwise.

## The MCA Principles

The Key Principles of the MCA are:

- **Presumption of capacity:** everyone is assumed to have the ability to make decisions unless proven otherwise. A disability or diagnosis doesn't automatically mean someone lacks capacity
- **Support to make decisions:** the Act encourages providing all practical help to people so they can make their own informed decisions
- **Best interests:** when someone lacks capacity, decisions should be made in their best interests, considering their wishes, values, and what would benefit them most
- **Least restrictive option:** the MCA discourages unnecessary restrictions on someone's freedom. If multiple options achieve the same goal, the one that least limits their choices should be chosen
- **Respecting autonomy:** people have the right to make choices that others might see as unwise. The MCA emphasises respecting someone's values, beliefs, and preferences, even if they differ from the majority

These principles ensure that people who may need some assistance in decision-making are still empowered and treated with respect.







# Dementia in the workplace

Dementia can affect people of working age, it's important for employers to be aware of the signs and how to approach the situation.

## Common signs

Dementia can manifest in various ways, but some common signs to watch for in the workplace might include:

- **Memory problems:** increased forgetfulness, difficulty remembering instructions, or misplaced items
- **Concentration issues:** difficulty focusing on tasks, taking longer to complete work, or appearing easily distracted
- **Problems with communication:** difficulty finding the right words, using simpler language, or struggling to follow conversations
- **Changes in behaviour:** mood swings, irritability, difficulty making decisions, or impaired judgment
- **Organisational difficulties:** issues with time management, meeting deadlines, or keeping track of paperwork

It's important to note that these signs can also be caused by other factors like stress or lack of sleep. Performance issues alone shouldn't be solely attributed to dementia.





## Dealing with Dementia

If you suspect someone might have dementia, you should:

- **Maintain confidentiality:** respect the employee's privacy and avoid discussing concerns openly
- **Observe and document:** keep track of specific incidents without being intrusive
- **Consider an open conversation:** schedule a private meeting to discuss any concerns in a supportive and non-confrontational manner

If an employee discloses a diagnosis of dementia, or if concerns are significant, here are some steps to consider:

- **Offer support:** acknowledge the challenges and let the employee know you're there to help
- **Explore reasonable adjustments:** consider adjustments like flexible work arrangements, reduced workload, or assistive technology to help them continue working effectively
- **Involve HR and Occupational Health:** seek guidance from HR and occupational health professionals to create a personalised support plan
- **Maintain open communication:** regularly communicate with the employee and keep them involved in decision-making regarding their work

## Resources

### Alzheimer's Society:

<https://www.alzheimers.org.uk/>

### Dementia UK:

<https://www.dementiauk.org/>

### ACAS (managing dementia in the workplace):

<https://www.acas.org.uk/>

By recognising the signs and approaching the situation with empathy and support, employers can create a more inclusive workplace for employees who are living with dementia





# Treatment

The vast majority of causes of dementia, cannot be cured, although research is continuing into developing drugs, vaccines and other medical treatments, but there is a lot that can be done to enable someone to live well with the condition. Care and support should be ‘person-centred’ which means it should be focused on that person and their individual needs and preferences.

**Non-drug treatments and support** – there are a range of non-drug treatments available that can help someone to live well with dementia. These include information, advice, support, therapies and activities. The GP, memory clinics or local Alzheimer’s Society are good places to start.

Support for the person and their carer should be made available after a diagnosis has been made and will provide the opportunity to talk with a professional, ask questions about the diagnosis, and think about the future. It’s important to get information about planning ahead, where to get help and how to stay well, both physically and mentally.

## Treatment

Other types of treatment include:

- **Talking therapies:** such as counselling, can help someone come to terms with their diagnosis and discuss their feelings
- **Cognitive behavioural therapy (CBT):** may be offered if the person develops depression or anxiety
- **Cognitive stimulation therapy:** is a popular way to help keep someone's mind active and involves participating in activity sessions over several weeks
- **Cognitive rehabilitation:** can enable an individual to retain their skills and cope better. Lots can be done at home to help someone with dementia remain independent and live well with memory loss. Support ranges from devices such as pill boxes or calendar clocks to practical tips on how to develop routines or break tasks into simpler steps

Many people with dementia enjoy 'life story work'. This is where the individual is encouraged to share their life experiences and memories. As a person's dementia progresses, they may enjoy reminiscence work. These activities may help improve mood, wellbeing and mental abilities. Other popular activities include music, singing or art.

It is vital that those with who are living with dementia stay as active as they can – physically, mentally and socially and taking part in meaningful activities which are enjoyable will lead to increased confidence and self-esteem.

**Medication** – there are various medications that can help with the symptoms of dementia, or in some cases may stop the condition progressing for a while. Someone with mild to moderate Alzheimer's or mixed dementia, for which Alzheimer's is the main cause, may be prescribed one of three types of medication: Donepezil, Rivastigmine or Galantamine. These may give temporary help with memory, motivation, concentration and help to support daily living.

In the **moderate or severe stages** of Alzheimer's someone maybe offered a different medication called Memantine. This may help with attention, daily living and possibly ease distressing or challenging behaviours.

Donepezil, Rivastigmine and Galantamine can also be helpful for someone with dementia with Lewy bodies, where distressing hallucinations or delusions are present or where behaviour is challenging, for instance agitation or aggression.



## Medication

For a person with vascular dementia, medication will be offered to treat the underlying medical conditions that cause dementia. These conditions often include high blood pressure, high cholesterol, diabetes or heart problems.

A wide range of other medication(s) may be prescribed at different times. These include medication for depression or anxiety, sleeping tablets or antipsychotics.

It is important to note that some of these medications can have severe side effects and not all are recommended for all types of dementia.

Health professionals will generally recommend that a non-mediated approach is tried first, before prescribing medication unless a person's symptoms are very severe.

“I have been very happy with my recent work with Thackray Williams. My solicitor was kind, supportive and efficient. I would happily recommend Thackray Williams to anyone.”

Private Client testimonial





# Power of Attorney

A Lasting Power of Attorney (LPA) is a legal document in England and Wales that lets an individual (the “donor”) appoint one or more trusted people (the “attorneys”) to make decisions on their behalf.

What it Does:

- **Provides decision-making power:** the LPA allows the appointed attorneys to make decisions for the individual in specific situations, depending on the type of LPA created
- **Prepares for future incapacity:** an LPA is created while the individual still has mental capacity, ensuring their wishes are considered if they lose the ability to make decisions themselves in the future, due to illness, injury, or another reason

## Lasting Power of Attorney

There are two main types of LPAs, each granting decision-making authority in different areas:

**Property and Financial Affairs:** this LPA empowers the attorneys to manage the individual's financial affairs, including:

- Paying bills
- Collecting income
- Managing investments
- Buying, selling, and managing property (restrictions can be set by the donor)

**Health and Welfare:** this LPA allows the attorneys to make decisions about the individual's health and well-being, such as:

- Daily routine (washing, dressing, eating)
- Medical treatment
- Moving to a care home
- Life-sustaining treatment (restrictions can be set by the individual)

## Important Points

- **Registration required:** an LPA needs to be registered with a government body before it can be used
- **Individual's wishes prioritised:** Attorneys must always act in the individual's best interests and follow any specific instructions included in the LPA
- **Revocable:** the individual can revoke an LPA at any time as long as they have mental capacity

## Benefits of an LPA

- **Peace of mind:** provides peace of mind for the individual knowing someone they trust can make decisions on their behalf if needed
- **Reduces burden on family:** alleviates the burden on family members who might otherwise have to make difficult decisions without clear guidance
- **Ensures wishes are upheld:** helps ensure the individual's wishes are respected regarding their finances, healthcare, and well-being

You don't need to register the LPA if you don't plan to use it immediately, but the LPA will only become effective once registered. Even after registration, the individual who made the LPA (the donor) can still make their own decisions unless they lack capacity.



## Existing Enduring Power of Attorney

EPAs were the legal instrument used before Lasting Power of Attorney ("LPAs") were introduced in 2007 and gave someone authority to make property and financial decisions for someone else.

Existing EPAs can still be used, although you can no longer make a new one. Unlike LPAs, EPAs can be used without being registered if the 'donor' (the person who made the EPA) still has mental capacity.

If the individual has lost mental capacity, the EPA must either:

- Be registered by the Office of the Public Guardian (OPG)
- Have already been registered by the Public Guardianship Office – the body that replaced OPG

You can tell if the EPA is registered by looking at the front page of the document, where you'll find:

- A perforated stamp at the bottom saying 'Validated'
- A stamp at the top with the date of registration

If the EPA is unregistered it won't have these stamps, but must still have been signed inside by all of the following:

- The individual
- One or more 'attorneys'

It is important to always look through the complete EPA, as details within it might describe specific powers it gives the 'attorney(s)' beyond the general authority a standard EPA provides.

Each EPA might also impose limits on what an attorney(s) can do.

To be valid, the EPA must have been signed **before October 2007**, which is the date when EPAs were replaced by LPAs.

If the EPA was signed after October 2007, it is **invalid**.

If the EPA is invalid, the individual can create an LPA, if they still have mental capacity.

If the individual now lacks mental capacity, their attorney(s) could apply **to the Court of Protection** for a Deputy Order to make decisions on their behalf.

## Advance healthcare directive (Living Will)

An advanced healthcare directive, often referred to as a Living Will, is a legal document that allows you to express your wishes for medical care in advance, specifically in situations where you are no longer able to make decisions for yourself due to illness or injury.

What it Does:

- **Specifies treatment preferences:** you can outline the types of medical treatments you would or wouldn't want to receive if you are terminally ill, in a coma, or in a permanently unconscious state
- **Provides guidance for loved ones:** the document helps your family, healthcare providers, and any appointed healthcare decision-maker understand your wishes, easing decision-making during a difficult time
- **Promotes autonomy:** it allows you to have a say in your medical care, even if you can't communicate your wishes at the time

Benefits of having a Living Will:

- **Peace of mind:** knowing your wishes are documented can provide peace of mind for you and your loved ones
- **Reduces family burden:** it can lessen the burden on your family during a stressful time by providing clear direction for your care
- **Ensures respect for your wishes:** it helps ensure your healthcare decisions are made according to your values and preferences

What it Typically Covers

- **Use of life-sustaining treatments:** this might include decisions on artificial respiration, CPR, or dialysis
- **Pain management and comfort care:** you can specify your preferences for pain medication and comfort measures
- **Organ donation:** you can indicate your wishes for organ donation after death

Important Considerations:

- **Legal requirements:** Living Will laws vary by geography. It is important to check the specific requirements in your area to ensure your document is legally valid
- **Complementary documents:** a Living Will often works in conjunction with a healthcare power of attorney, which appoints someone you trust to make medical decisions on your behalf if you are incapacitated
- **Review and update:** it is advisable to review and update your Living Will periodically, especially after significant life events or changes in your health

## Resources

### **GOV.UK – Lasting Power of Attorney:**

<https://www.gov.uk/power-of-attorney>

### **Office of the Public Guardian:**

<https://www.gov.uk/government/organisations/>

### **National Hospice and Palliative Care Organization:**

<https://www.nhpco.org/>

### **Caring Info:**

<https://www.caringinfo.org/planning/advance-directives/>

### **Age UK:**

[https://www.ageuk.org.uk/globalassets/age-uk/documents/factsheets/fs72\\_advance\\_decisions\\_advance\\_statements\\_and\\_living\\_wills\\_fcs.pdf](https://www.ageuk.org.uk/globalassets/age-uk/documents/factsheets/fs72_advance_decisions_advance_statements_and_living_wills_fcs.pdf)

Remember, a Living Will is an important part of advance care planning. Discussing your wishes with your loved ones and doctor is crucial to ensure everyone understands your preferences.





# Your children's future

**Intestacy** – refers to what happens to someone's assets (belongings) when they die without a valid Will. In this situation, the law steps in and distributes the estate according to a predetermined formula, typically prioritising spouses, children, and other close relatives. This can lead to unintended consequences if the deceased had specific wishes for their belongings. To avoid this, creating a Will is highly recommended and legal advice should certainly be sought if a person lacking mental capacity to make a Will has never made a Will and there are concerns about how their estate will be disposed of when they die.

**Making a Will** – having a Will is crucial for ensuring that your wishes are followed after you're gone. It grants you control over how your assets are distributed, whether it's money, property, or cherished belongings. Without a Will, the state dictates how things are divided, which might not align with your intentions. A Will can minimise stress for loved ones during a difficult time, by providing clear direction. It can prevent family arguments by eliminating any guesswork about your desires. Ultimately, a Will offers peace of mind, knowing your legacy is handled according to your plan.

**Estate planning** – estate planning isn't just about Wills. It is about safeguarding your loved ones' future and ensuring that your wishes are met. By creating an estate plan, you can designate who inherits your assets, minimising confusion and potential conflict. It allows you to appoint trusted individuals to manage your finances and healthcare in case of incapacity. Estate planning can even help reduce your tax burden, leaving more for your beneficiaries. Ultimately, it is an act of love and responsibility, giving you peace of mind knowing your family is protected.







# Court of Protection

**Deputyship** – is a legal process that empowers someone to make decisions on another individual's behalf. This becomes necessary when a person lacks the mental capacity to manage their own affairs, often due to dementia or illness. Unlike a Lasting Power of Attorney (LPA), Deputyship is used when there is no LPA in place. The court appoints a Deputy, typically a family member, or close friend, to make decisions regarding the individual's finances, property, or personal well-being, or potentially both. This ensures the individual receives proper care and their wishes are considered as much as possible

**Statutory Will** – is a legal document created for someone who lacks the mental capacity to make their own Will. This typically occurs due to Alzheimer's or other conditions affecting mental competence. The Court, through the Court of Protection, grants permission and oversees the creation of the Statutory Will. This ensures the individual's wishes are still honoured as much as possible, even if they can't directly participate in the process. While not as ideal as a self-made Will, a Statutory Will offers peace of mind by ensuring a loved one's estate is handled according to their likely desires.

**Gifting** – Wills aren't just about dividing your entire estate. You can use them to distribute specific gifts to loved ones or causes you care about. This could be a cherished family heirloom for a grandchild, a set amount of money for a niece's education, or a donation to a favourite charity. There are different ways to structure these gifts in your Will, such as leaving a specific item, a fixed sum of money, or even a percentage of your remaining estate after debts and other gifts are settled. Through thoughtful gifting in your Will, you can ensure meaningful items or financial support go to the people or organisations you value most, creating a lasting impact beyond your lifetime.









# Safeguarding

**OPG** – supervision, annual report – The Office of the Public Guardian (OPG) acts as a safeguard for individuals lacking mental capacity to manage their own affairs. They fulfil a crucial role by supervising court-appointed deputies, ensuring these deputies make decisions in the best interests of the person they are caring for. This supervision involves reviewing annual reports submitted by deputies, which detail financial management and important decisions made. Additionally, the OPG may conduct visits to assess how the deputyship is functioning. This oversight helps prevent misuse of funds and ensures the well-being of the vulnerable individual. The OPG also can supervise and investigate attorneys if a concern is raised.

**DOLS** – stands for Deprivation of Liberty Safeguards, is a legal framework in England and Wales for protecting the rights of people in care homes or hospitals who lack the capacity to consent to their care. It ensures any restrictions on their freedom, even for their own safety, are absolutely necessary and implemented in the least restrictive way possible. This involves a rigorous assessment process where a supervisory body authorises limitations, only if deemed essential, for the person's well-being. DOLS safeguards the rights and dignity of vulnerable individuals, promoting proportionate care that prioritises their best interests.





**Finding the right carer/care home** – involves careful consideration of your loved one's needs and preferences. Start by assessing the level of care required, whether it's in-home assistance with daily tasks or specialised care for a medical condition(s). Location is also key, somewhere that is ideally close to family, for regular visits, and maintaining social connections is important. Research care options online, using Government resources or care provider websites. Don't forget to check the inspection reports to ensure Quality Standards are met. Finally, schedule visits to shortlisted carers or care homes to get a feel for the environment, staff interaction, and overall atmosphere. This personal touch will help you choose the most comfortable and supportive setting for your loved one

**Funding care – CRAG** – when it comes to funding care for yourself or a loved one, CRAG (Charging for Residential Accommodation Guide) plays a crucial role in the UK. This government-issued guide provides local authorities with the framework for assessing an individual's financial situation and determining their contribution towards the cost of residential care. CRAG helps ensure a fair system by considering factors like income, savings, and property ownership. However, it is important to note that CRAG does not dictate the final cost, which can vary depending on the specific care home and level of care required. Understanding CRAG is a helpful first step in navigating the financial aspects of residential care.

## Care

**Equity release** – allows homeowners aged 55 or over to access some of the cash tied up in their property's value, without having to move. There are two main types: a lifetime mortgage and a home reversion plan. Lifetime mortgages are more common, letting you take out a lump sum or smaller amounts over time, with the interest accruing on the loan. This means that the debt grows over time, reducing the inheritance left for any beneficiaries. Home reversion plans involve selling all or a share of your home, to a provider at a discounted price, with the right to remain living there for life. While equity release offers access to cash for retirement needs or home improvements, it's a complex financial decision with significant drawbacks. It is crucial to seek professional financial advice to understand the long-term implications before considering equity release.

**State benefits for the elderly** – State benefits play a vital role in supporting the financial well-being of many elderly individuals in the UK. These benefits come in various forms, offering assistance with everyday living costs. One key benefit is Pension Credit, a top-up for those over State Pension age with low income. Other benefits can help with housing costs (Housing Benefit), heating bills (Winter Fuel Payment), and even transportation (Older Person's Bus Pass). Additionally, Attendance Allowances provide financial support for those needing help with daily activities due to disability. By utilising these and other available benefits, older adults can maintain financial security and independence for longer.

**NHS CHC** – stands for NHS Continuing Healthcare and is a program funded by the National Health Service (NHS) in England and provides comprehensive care for adults aged 18 and over with complex health needs. Unlike standard NHS care that focuses on specific illnesses, NHS CHC takes a holistic approach. Eligibility is determined through an assessment by a healthcare team, focusing on the intensity, complexity, and unpredictability of a person's health needs. If deemed eligible, NHS CHC will cover a wide range of care services, including nursing, therapy, personal care, and equipment, all delivered at home, in a care home, or a hospital setting. This program ensures individuals with significant ongoing health needs receive the necessary support to live comfortably and with dignity.

## Notes

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# Key Contacts



**Andrea Kershaw**

Partner, Private Client

01732 496 451

[andrea.kershaw@thackraywilliams.com](mailto:andrea.kershaw@thackraywilliams.com)

Member of the Association of Lifetime Lawyers



**Claire Lovis**

Partner, Private Client

020 8461 6115

[claire.lovis@thackraywilliams.com](mailto:claire.lovis@thackraywilliams.com)

Member of the Association of Lifetime Lawyers



**Elliot Lewis**

Head of Private Client

020 8461 6199

[elliot.lewis@thackraywilliams.com](mailto:elliot.lewis@thackraywilliams.com)



**Nima Stepney**

Partner, Private Client

020 8461 6184

[nima.stepney@thackraywilliams.com](mailto:nima.stepney@thackraywilliams.com)

Member of the Association of Lifetime Lawyers





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[thackraywilliams.com](http://thackraywilliams.com)

**Bromley**

T Bromley  
15-17 London Road  
Bromley, Kent BR1 1DE  
020 8290 0440

**London**

125 Old Broad Street  
London  
EC2N 1AR  
020 8290 0440

**Sevenoaks**

15 Pembroke Road  
Sevenoaks  
Kent TN13 1XR  
01732 496 496

**West Wickham**

73 Station Road  
West Wickham  
Kent BR4 0QG  
020 8777 6698