National Guidelines

For the

Standardised Implementation

of the

Nursing Home Subvention Scheme

NURSING HOMES (SUBVENTION) REGULATIONS, 1993 to 2006

February 2007
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Section 1
General Guidelines for Assessment of Subvention Applications

Nothing in these Guidelines shall operate in a way that
- Is inconsistent with the provisions of the 2008 Scheme (www.hse.ie) or
- Worsens an applicants overall position in 2007 by comparison to 2006.
In individual cases clarification may need to be sought from the Steering Group.

Under the Nursing Homes (Subvention) Regulations 1993 and subsequent amendments, the Health Service Executive can make a grant payable towards the cost of providing nursing care in a registered private nursing home. If the applicant meets the dependency and financial assessment requirements outlined in the Nursing Home Act 1990 and the subsequent Nursing Home (Subvention) Regulations, the Health Service Executive has a statutory obligation to provide the basic subvention grant to the qualified applicant regardless of other budgetary pressures.

An information leaflet (www.hse.ie) for applicants, to support these guidelines, is circulated separately.

In order to ensure a consistent approach, a number of templates for correspondence with an applicant in relation to this and other standard issues are attached (Appendix 1). Unless otherwise stated the Articles referred to are the Nursing Home Subvention Regulations 1993 and subsequent amendments.

1. Application for Subvention

Regulations state that an application for subvention should be made prior to admission, however, in the interest of the client and common sense, discretion may be exercised and the HSE should act in a reasonable manner at all times.

Articles 4.1 - 4.4

In the interest of proper administration and the timely completion of dependency and financial assessments, applications should be made to the Nursing Home Subvention office where the person is normally resident.

Article 13.3

For each application received, and before a decision is made in relation to the amount of subvention to be paid, an assessment of dependency and the financial means of the applicant must be carried out.

Articles 4.5 & 6.1
There is an onus on the applicant, or their representative, to provide all of the relevant information necessary to reach a decision on the amount of subvention payable to the applicant. Equally, there is an onus on the HSE to facilitate the applicant, in every way possible, in making an application for subvention. To achieve this, all correspondence sent to the applicant should clearly state contact details, the purpose of the correspondence and what is being requested of the applicant, if applicable. The applicant must always be informed of any decisions made in relation to their case, and the implications of such.

Articles 5.1 - 5.2

Where the applicant establishes that there was a good reason for delay in submitting the required information, payment may be backdated in line with guidelines for “Payment Start Date” set out at 4 below.

Process for ensuring timely response to applicant:

The HSE local office should assess the application to ensure that

1. The application form has been fully completed and signed by the applicant or by their representative. If the application form has not been signed by the applicant, the application form should be returned for signature. If an application form is incomplete, the procedures outlined below should be followed:

Incomplete Applications:
In processing an application for subvention where some of the required information has not been supplied by the applicant, the following administrative steps should be followed:

**Step 1**  
A letter must issue to the applicant, or their representative, acknowledging receipt of their application and detailing the information required and requesting a response to the questions, or submission of the relevant details or documentation, within 14 days (see Template 1.1)

**Step 2**  
If there is no response, a reminder must be sent to the applicant stating that processing of subvention application will be suspended (see Template 1.2)

**Step 3**  
If there is no response within a further 14 days from date of correspondence outlined in Step 2, processing of the application will be suspended

**Step 4**  
In the event that further contact is made with the Nursing Home Subvention Office by the applicant at any point after that the application will be re-activated

3. If the applicant is already residing in the nursing home, check that a Doctor’s letter detailing the need for an emergency admission is provided. If not provided, advise the applicant that they should submit a Doctor’s letter detailing emergency admission, if applicable, or subvention can only be granted from date of application. A Doctor’s letter also sets out the medical condition of the patient, for the purpose of the dependency assessment.

4. Following satisfactory assessment of the application form, the HSE local office should:

   (a) Acknowledge receipt of the application, within 5 working days of receipt.
   (b) Within 5 working days of the receipt of the Doctor’s letter, request Medical Dependency Assessment from the Consultant Geriatrician/Area Medical Officer/PHN as appropriate.
(c) **Within 10 working days** from submission of complete financial documents and the dependency assessment, complete the financial assessment.

(d) **Within 8 weeks of the receipt of the completed application** (an application is complete when all necessary financial information has been received) and following completion of financial assessment and dependency assessment, a decision regarding subvention payment (if any) must be made and a standard letter should issue to the applicant advising them of the outcome of their application (with details of how the amount of subvention was calculated) and their right to appeal. A Confirmation of Admission form must accompany the decision letter being sent to the applicant.

(e) Following notification of admission to nursing home, the agreed grant should be set up for payment as soon as possible.

(f) If the person who is awarded subvention transfers to another registered nursing home, the rate of basic subvention can be transferred without need for a further assessment. The HSE can pay subvention to registered nursing homes in Northern Ireland.

It is important to note that a policy decision has been made that no subvention application should be refused because it was not made prior to admission date and no applicant should be precluded from applying for subvention for a two-year period because the applicant did not apply prior to admission. These applications should be processed as normal and the date of payment will depend on whether the applicant was admitted in emergency circumstances.
2. Processes for Dependency and Means (Financial) Assessment on Application

In accordance with the Nursing Home (Subvention) Regulations 1993 and subsequent amendments, the HSE must carry out a dependency and means assessment of the person to whom the application refers. It is not sufficient to carry out a means assessment and disqualify for subvention on that grounds.

2.1 Dependency Assessment

The mandatory dependency assessment shall be undertaken by an appropriately trained assessor.

The HSE is in the process of drawing up a national assessment tool (or suite of tools). In the meantime, each area must adopt, as an interim measure, or continue to use, existing assessment tools in the determination of dependency levels, for the purpose of the Nursing Home Subvention Scheme.

It is recommended that:

a) Home Care should be considered as an alternative to a Nursing Home admission, where appropriate

b) The Folstein and Barthel assessment tools form the basis of each dependency assessment, along with the HSE social and medical assessment tool

In carrying out an assessment, an individual must act within their current scope of practice, particularly in relation to inspection of medical records.

Articles 7.1 – 7.4

The outcome of the dependency assessment must indicate if the applicant is sufficiently dependent to require maintenance in a nursing home. While the regulations no longer require assessment under the categories medium, high and maximum dependency it is intended to continue to record this information for statistical and planning purposes, for the time being.


2.2 Assessment of Means

In order to ensure a standard approach to the implementation of the Nursing Home Subvention Regulations across the Health Service Executive, assessment of means must be carried out using the financial assessment method set out in Section 2 of these Guidelines

2.3 Amount of Subvention Payable

The maximum amount of basic subvention payable in respect of a person assessed as requiring maintenance in a nursing home is €300 per week


A person whose assessed income is no more than the rate of Non-Contributory Old Age Pension (NCOAP) plus a spending allowance equivalent to 1/5th of the weekly rate of NCOAP, will qualify for the maximum rate of basic subvention. Any assessed means in excess of the NCOAP (having allowed the personal spending allowance) will result in a corresponding reduction in the amount of basic subvention payable.

Article 10.3
In addition to basic subvention Article 10.6 payments should be applied to all qualifying applicants up to a maximum allowance equivalent to 1/5th of the applicable weekly rate of NCOAP. A qualifying applicant is a person

- whose assessed means are equal to or less than the applicable weekly rate of Non-Contributory Old Age Pension (having allowed for the personal spending allowance) and
- where the payment of an additional amount of subvention under Article 10.6 is required in addition to basic subvention in order to contribute towards the relevant nursing home fee for the area.

If a further shortfall remains the case may be considered through the enhanced subvention scheme.

The amount of subvention payable to an applicant must be calculated at a daily rate.

Templates for the calculation of the amount of subvention payable are attached (Section 4) Articles 10.4 – 10.10

All new applicants for basic subvention should then be advised that they may apply to be assessed for any additional support that may be available through the Enhanced Scheme subject to the limit of the funding available for the scheme (Section 3 of Guidelines). This includes those applicants who are refused basic subvention because of their means.

All persons in receipt of basic subvention or basic plus enhanced subvention at 31st December 2006 should have their payment reviewed to conform to these Guidelines. (Enhanced subventions in payment at 31.12.2006 may decrease relative to the amount of any increase in basic subvention. Each case must be examined on its merits and having regard to provisions of the 2008 Scheme).

Minimum Payment to Eligible Applicants
Where an applicant qualifies for a payment of a basic subvention at a rate greater than zero but less than €10.00 per week, a minimum basic subvention of €10.00 per week should be applied in such cases.

3 Decisions and Appeals

Where a decision has been made in relation to a subvention application, it should be communicated by letter to the applicant or representative, outlining the reasons for the decision, including the financial calculations, as well as clearly outlining the appeals process.

Articles 11.1 – 11.3

Payment should not issue without the Confirmation of Admission document being received from the proprietor of the Nursing Home.

Subventions must be paid directly to a Nursing Home, which must be registered under the 1990 Nursing Homes Act and the proprietor must notify the Subvention Office to confirm that they have accepted the admission of the applicant (Section 4).

Articles 12.1 – 12.3

People have the right to transfer to another registered Nursing Home and the basic subvention paid to the person must be transferred to the new Nursing Home. Where this
takes place, a confirmation of admission form should be completed and submitted from the new Nursing Home.

4 Payment Start Date
Subventions should generally be paid in respect of qualified applicants from the date that the application for subvention was made or date of admission if later.

Where an application is made after the date of admission to a Nursing Home, generally the subvention is paid from the date of application. However, payment may be backdated up to a maximum of 3 months from date of application, where it can be established that there was good cause for a delay in making the application e.g. emergency admission. In such cases, a letter from the applicant’s Gp will be required confirming the reasons for the emergency admission and payment shall not be backdated for a period greater than 3 months from the date of application except in very exceptional circumstances.

Articles 13.1 – 13.3

Payment of invoices to nursing homes will continue to be made 1 month in arrears.

5 Review of Subvention

Reviews of means in respect of persons in receipt of subvention should take place at least annually. If review is not completed subvention rate cannot be adjusted. Dependency reviews should take place as required.

Saver: In the case of subventions being paid in respect of a client resident in a Nursing Home in the North of Ireland, reviews should take place after the first six months, in view of the funding arrangements for residents of Nursing Homes in the North of Ireland.

Articles 14.1 – 14.5

Notwithstanding the above, reviews of means and dependency level can be undertaken at any time, when the means and dependency level of the client warrant a review.

Reviews are subject to the same procedures for financial and dependency assessments as those for the original subvention application see saver above in relation to reviews of subventions paid to people in Nursing Homes in Northern Ireland.

A review of circumstances may have a number of outcomes, such as
- increase or decrease amount of subvention
- withdrawal of subvention
- offer of alternative accommodation, including care at home

Articles 14.6 – 14.13

Applicants must be informed in writing of the outcome of the review (see Section 4) and must be advised of their right and the procedures to appeal the decision. Applicants must be given 28 days (or such number as set out in legislation) in which to appeal this decision.

No changes to the original amount of subvention payable can be implemented until the completion of a review and any changes cannot be applied until 28 days after the notification to the applicant.

Articles 19.1 – 19.4
**Saver Clause**
Where on review a recipient's assessed income has been found to have increased due to a minor increase (i.e. up to €10.00pw) in their Social Welfare payment (or an equivalent payment), other than the annual budgetary increase, no reduction in the amount of their subvention will result from the assessment of that additional income.

**6 Deaths of Subvented Residents**
The private nursing home must advise the HSE within 48 hours of all deaths of persons resident in their nursing home using the form supplied for this purpose. (Section 4).

The HSE can recoup over-payments of subvention after the person has deceased.

**7 Temporary Absences / Discharges from Nursing Homes**
The private nursing home should advise the HSE of any temporary absences or discharges of patients in receipt of subvention from their nursing home. The HSE can continue to pay subvention to cover temporary absences. However if this period of absence continues for more than one month, the HSE should investigate the matter further to establish the likelihood of the person returning to the nursing home.

Staff in subvention offices should be aware that, in many cases, the bed is held at the request of the HSE. Due regard should therefore be given to the fact that this may be the residents home and decisions to suspend or cease subvention should not be taken lightly in these cases.

Where arrangements have been made between the HSE and a Nursing Home in relation to an approved temporary absence of a person, payment should be reviewed on a monthly basis at a minimum.

*Article 15.5*

**8. Service Covered by Subvention**
In general, the services considered to be inclusive and provided as part of standard care in a Nursing Home are set out in Article 16.1 of the Regulations as follows:

A registered proprietor or person in charge shall not seek any payment in addition to the amount of the subvention determined by a health board and the contribution of the person in receipt of a subvention payable under article 13.1 of these Regulations for any service which is considered to be essential to the maintenance of a person in a nursing home and common practice in nursing homes.

“..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*

Only in the most exceptional circumstances, will items or services on an individual client basis, be subject to a separate arrangement between the HSE and the Nursing Home.

*Article 16.4*
9. **Alternative Care**  
An applicant cannot be refused subvention solely on the grounds that they refused an offer by the HSE of a bed in an alternative facility or home care.  
*Articles 17.1 – 17.2*

10. **Misleading Information**  
It is possible to reduce, cease or recoup (including after the person’s death) a subvention if the HSE believes that false information in relation to the application has been provided. At all times, however, in such cases, the HSE must consider the best interest of the client in changing the amount of subvention paid.  
*Articles 18 & 21*

11. **Saver**  
Notwithstanding the above guidelines, no-one should be put at a disadvantage relative to their 2006 position as a result of the revisions to the scheme or as a direct result of the implementation of these guidelines. All reviews will therefore need to be considered on a case by case basis.
Section 2 – Assessment of Means

1. General
2. Principal Residence
3. Assessment of Assets other than the Principal Residence
4. Transfer of Assets
5. Assessment of Farms, Land or Businesses
Section 2 – Assessment of Means

1. General

Sources of Income
In calculating the means of a person in respect of whom a subvention has been sought, the HSE must take all sources of income into account including wages, salary, pension, allowances, and payments for part time and seasonal work, income from rentals, investments and savings. Assessment of means should be net of PRSI, Tax and Government levies. It is important that documentary evidence is obtained to verify information provided on the application form.

Assessment of Couples
When assessing a married/cohabiting couple, the HSE must assess half of the “combined income and imputed income” of the couple. However in carrying out this assessment, care must be taken to ensure that the spouse residing at home is not left with less than the current Non-Contributory Old Age Pension rate as a weekly income. Where there are dependant children an additional allowance should be made of the Adult Dependant Allowance in respect of each dependant child.

Assets Disregard
The HSE must disregard the first €11,000 of assets owned by the person for whom the subvention is being sought. If assessing property and savings, the disregard only applies once and to whichever is most beneficial to the patient.

Personal Spending Allowance
In assessing the means of an applicant for subvention the HSE shall disregard income equivalent to 1/5th of the weekly rate of the applicable Non-Contributory Old Age Pension (over 80 or under 80 depending on age of applicant) payable at the time. Such sum is to be retained by the applicant as a personal spending allowance.

Interviews by Designated Officers
Where it is necessary to clarify information provided in an application, in order that a financial assessment can be speedily concluded, a designated officer may conduct further interviews with the applicant or their representative. Such interviews must be conducted in the best interest of the client and respect their right to privacy. It is unlikely that such requests or interviews would be necessary in all cases. An investigation officer’s report is attached (Section 4).

Articles 8.1 – 8.3

2. Assessment of Principal Residence

The legislation clearly states “a Health Board may” impute an annual income from a principal residence and the circumstances surrounding any disregard of the principal residence, are defined in terms of when it is appropriate to assess or not. The following procedures will be applied in the determination of any income from principal residence. These are employed in the interests of fairness and reasonableness.

Income may be imputed in respect of the principal residence for a period of three years from the date of admission to the Nursing Home so no more than 15% of the value of the asset will be depleted. In the case of couples where one partner enters long term residential care and the other is residing in the principal residence, the principal residence will be exempt. In the case of couples where both partners enter long term residential care
the imputed income will be 5% per annum of the total value of the asset. Half of the imputed income will be assigned to each person and will be capped at 15% in total over 3 years.

“The HSE may impute an annual income equivalent to 5% of the estimated market value of the principal residence of the person … for the first three years of the person’s stay in Nursing Home care, from the date of admission”. 2006 Amendment

**The principal residence will be assessed in the following circumstances:**

- Where the residence is solely owned by the applicant (and is not exempted - as outlined below - at the time of making the application).

- Where the principal residence is owned by the applicant and occupied by a non-dependent relative, i.e. son or daughter who is not solely dependent on a Social Welfare or other benefit, or equivalent income regardless of source.

- Where the principal residence is co-owned, (not with spouse/partner), an imputed income based on half the estimated market value may be assessed.

- If jointly owned with a spouse, and the spouse is residing in the home, the principal residence is not assessable. If jointly owned with a spouse, and the spouse is not residing in the property (for example, in long-term care), an imputed income based on the estimated market value of the principal residence may be assessed and ½ of the imputed income assigned in respect of each person.

- The value of the principal residence may be assessed where it was transferred from the ownership of the person in the five years prior to the application. The value used to impute the income will be the value of the property at the time of the transfer and the imputed income should normally be taken into consideration subject to the following:
  - Transferred within 2 years prior to application – assessed for 3 years from date of admission
  - Transferred between 2 & 4 years prior to application – assessed for 2 years from date of admission
  - Transferred between 4 & 5 years prior to application - assessed for 1 year from date of admission
  - Transferred 5 years or more prior to application - not assessed.

- Where the applicant has rented the residence to a third party, the rental income is to be assessed as means provided the value of the rental equates to normal letting values for the area. Where rental income is assessed an allowance may be made of 10% of the rental income or verified expenditure in relation to maintenance and insurance.

- Whereas imputed income may be assessed for three years from date of admission, rental income is to be assessed on an ongoing basis, in line with the Regulations (“income from all sources shall…”).
The principal residence should be disregarded in the following circumstances:

- Where the residence was occupied immediately prior to or at the time of application, by a dependent relative, i.e. spouse, son or daughter less than 21 years of age or in full time education or a relative who is dependent on a Social Welfare payment or benefit, or on an equivalent income regardless of source.
- Where it can be established by a professional valuer that the principal residence has no realisable capital or rental value it can be disregarded.
- The value of the principal residence may be temporarily disregarded, where medical opinion indicates that nursing home accommodation will only be required for short term respite, convalescent or post-operative care period, and prior to transfer to alternative accommodation or home again. This period of disregard should not exceed six months.
- Where it is established that the person in receipt of subvention returns home to reside in their Principal Residence on a very regular and frequent basis (for example, every weekend).

Note: The onus of proof in regard to any exemption of the principal residence lies with the applicant and documentary evidence of reason for exemption should be obtained and a copy retained on file.

Applicant unable to conduct their own affairs:

- An income may be imputed in relation to the value of the principal residence, where the applicant is non-compos mentis or similar, and is unable to conduct their own affairs. There are options open to the family/legal representative regarding the property, including invoking the legal facility of “ward of court” in order to take care of the applicant’s affairs. Options available to the family/legal representative may then be to let or sell the property. Any monies raised may then be used to fund nursing home care. The principal residence may be disregarded for an initial period of six months to allow the family time to take care of the applicant’s affairs. However if this disregard is applied, the family/legal representative must be made aware that the disregard is only for six months and that a review will be carried out after six months which will include all assets/income.
- If a person is non compos mentis and there is no family member or person that can act on his/her behalf, then the HSE could consider invoking the facility of a “ward of court” where there are substantial assets available to take care of his/her care needs.

How to calculate the imputed income from the main residence

The imputed income is defined in the legislation (Paragraph 13, Second Schedule Nursing Home Regulations, 1993) as “equivalent to 5% of the estimated market value”, expressed as an annual figure. Where the house is assessable this formula is to be applied. The current market value of the property should be established. Any cost resulting from this should be borne by the applicant. The HSE may obtain a valuation of the property where the figure submitted is disputed.

Paragraph 9, Second Schedule, Nursing Home Regulations allows for a disregard of €11,000 of assets and this includes principal residence. Where the applicant holds assets
in addition to the principal residence this disregard shall be applied on the combined value of assets.

| Example 1: |
|-------------------|------------------|
| Value of principal residence | € 400,000 |
| Less Disregard       | (€11,000) |
|                       | €389,000 |

Assess 5% x 389,000 = €19,450 ÷ 52 = €373.04 imputed income per week for 3 years

The HSE may impute an income from the assessment of a principal residence only for the first 3 years of the person's stay in a nursing home from the date of admission. However, income derived from renting the PR may continue to be assessed on an on-going basis.

This amendment is of particular importance in relation to reviews of cases being undertaken.

**Principal Residence Exceeding Specified Values:**
In accordance with the Regulations applications for subvention may be refused where the value of the Principal Residence exceeds specified values and the person’s income exceeds a specified amount. The Health Service Executive is of the view that no application should be refused solely on the grounds of the house value alone but that relevant applications should be processed in full, an income imputed as per the guidelines and if appropriate refuse on basis of excess means. The effect of this will be that the imputed income will only be assessed for the maximum of 3 years from date of admission to the nursing home as per the Regulations and applicant may proceed to apply/be considered for an enhanced subvention contribution.

**Additional Property**
The formula above, using 5% of market value for 3 years from date of admission, is only applied in the case of the principal residence. Any additional property, which may include housing, farm etc, is assessed in accordance with the savings/assets guidelines below.

### 3. Assessment of Assets other than Principal Residence

The regulations state that all income must be assessed and that assets may be assessed. Therefore, the capital value of an asset should only be assessed as set out below where there is no reasonable income from that asset.

Only the assets owned by the person applying for subvention can be assessed. (Any portion of assets owned jointly by the person should be assessed proportionately).

The Nursing Home Regulations 1993 lay down the types of assets, whose value may be assessed:

(i) house property, excluding normal household chattels
(ii) stocks, shares or securities
(iii) money on hands, in trust, lodged, deposited or invested
(iv) interests in a company or business of any kind, including a farm
(v) interest in land
(vi) life assurance or endowment policies  
(vii) valuables held as investments  
(viii) current value of equipment of a business or machinery, excluding a car, not covered under a previous heading.

Imputed income in relation to assets other than the principal residence will be assessed at 5% of the market value of the asset per annum. There is no time limit in relation to the assessment of assets other than the principal residence.

### Example 2:

Applicant is a single person and has assets valued at €60,000 and does not have an assessable principal residence. The imputed income from these assets will be as follows:

<table>
<thead>
<tr>
<th>Assets</th>
<th>€60,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less Disregard</td>
<td>€11,000 - if not already availed of</td>
</tr>
<tr>
<td>Balance</td>
<td>€49,000 @ 5% = €2450 / 52 weeks = €47.12 imputed income p.w.</td>
</tr>
</tbody>
</table>

### Transfer of assets:

The value of assets may be assessed where the assets were transferred from the ownership of the person in the five years prior to the application. The value at the time of transfer should normally be taken into consideration subject to the following:

<table>
<thead>
<tr>
<th>Year</th>
<th>Date of Transfer</th>
<th>Assessed for</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Within the year prior to application</td>
<td>Five years</td>
</tr>
<tr>
<td>2</td>
<td>More than one year but less than two years prior to application</td>
<td>Four years</td>
</tr>
<tr>
<td>3</td>
<td>More than two years but less than three years prior to application</td>
<td>Three years</td>
</tr>
<tr>
<td>4</td>
<td>More than three years but less than four years prior to application</td>
<td>Two years</td>
</tr>
<tr>
<td>5</td>
<td>More than four years but less than five years prior to application</td>
<td>One year</td>
</tr>
<tr>
<td></td>
<td>Five years or more prior to application</td>
<td>not assessed</td>
</tr>
</tbody>
</table>

The HSE may assess the value of any asset or assets transferred from ownership of the person in the five years prior to the application in assessing the means of the person. If assessed, value attached is value at time of transfer. If subvention is refused or abated, applicant should be advised to reapply after the 5 year period has expired.

The HSE may include any benefit or privilege to the person arising from the transfer of an asset to another person when assessing the means of the person. However this only applies if the benefit/privilege is tangible and of monetary value to the person seeking subvention. Where a right of residence to a property is retained by the person seeking subvention, it should only be assessed where it has a realisable value e.g. realisable letting value/income.

### Assessment of Farms/Business/Land

Where accounts are available the assessment of the income from the farm or business must be based on those accounts.

The assessment should be based on the accounts for the previous financial year.
In the case of a farm where there is an income but where accounts are not available for the previous financial year, a notional assessment of income may be made. The total farm income, including headage payments, grants, rental income, etc. should be assessed, less current farm expenditure.

Where the farm or business is not being used, a notional income may be assessed, as set out in the assessment of assets above, which takes account of the capital value of the land/business.

Farm, Land or a Business is assessed where the applicant for subvention owns or has legal interest in the Farm, Land or Business.

**Assessment of assets (excluding principal residence) exceeding €36,000**

While the Regulations allow the Health Service Executive to refuse a subvention where the value of his/her assets (excluding principal residence) exceed €36,000 the HSE takes the view that such applications should be processed in full in line with these guidelines for both basic and enhanced subvention.

**Note:** The onus of proof in regard to any exemption lies with the applicant and documentary evidence of reason for exemption should be obtained and a copy retained on file.

**4. Calculation of amount of Basic Subvention Payable**

The maximum basic subvention is €300.00 per week. Any assessed means (having allowed for a personal spending allowance – page 13) in excess of the applicable weekly rate of non-contributory old age pension (NCOAP) will result in a corresponding reduction in the amount of the weekly basic subvention.

<table>
<thead>
<tr>
<th>Example 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant (under 80 years) has total assessed weekly means of €300 per week</td>
</tr>
<tr>
<td>Less personal spending allowance</td>
</tr>
<tr>
<td>Available income</td>
</tr>
<tr>
<td>Amount of income greater than current NCOAP (€200pw)</td>
</tr>
<tr>
<td>Amount of basic subvention payable (€300 less €60)</td>
</tr>
</tbody>
</table>

In this case applicant would be approved for €240.00 per week basic subvention.
Section 3 – Guidelines for Payment of Enhanced Subvention

1. General
2. Objectives of the Guidelines
3. Principles
4. Criteria for Enhanced Subvention
Section 3 : Guidelines for Payment of Enhanced Subvention

1. General
An ‘enhanced’ subvention contribution is a discretionary top-up payment which may be approved by the Health Service Executive where the applicant’s means and the level of subvention approved are insufficient to meet the cost of nursing home care. The means assessment for basic subvention is applicable.

As enhanced subvention is discretionary there is no entitlement to an ‘enhanced’ subvention contribution but may be paid in individual circumstances taking account of cost of care in the area, availability of public beds, the means of the applicant and any funds or assets that may be available to the applicant together with the funding available for the scheme.

The availability of enhanced subvention is limited by the amount of the resource allocated for this scheme; applicants may need to join a waiting list for enhanced subvention contributions.

2. Objectives of the Guidelines
- To develop a consistency between the payment of subvention in 2007 and the new nursing home support scheme for 2008  A Fair Deal.
- To work towards equalisation of the level of support paid to people in different areas (taking the local prices, a person’s means and the overall funding available to the scheme into account).

3. Principles
The following principles apply in relation to enhanced subvention:
- The revised subvention rate, effective from 1st January 2007, brings the maximum subvention rate for dependent persons requiring nursing home care, to €300 per week. This revised rate will serve to improve the position for many applicants for subvention particularly those in receipt of basic subvention. In addition the revised rate will improve the position of many applicants who are in receipt of low levels of enhanced subvention.
- Taking account of an applicant’s means & the average cost of private nursing home care in the area, the funding available for enhanced subvention should be used to equalise the level of support paid, relative to the cost of care, to applicants in different areas of the country.
- Enhanced subvention should be targeted in the first instances towards those whose income & imputed income, including subvention, is insufficient to meet the cost of care and who possess no assets or alternative means on which to rely.
- The level of subvention payable should never be greater than the local price of care less 80% of income (income includes a 5% annual imputed income from assets). More precisely, the maximum level of subvention payable should not be greater than the average price of care or the actual care cost if lower, less the person’s contribution under the new scheme.

4. Criteria for enhanced subvention
- It is not necessary to qualify for a basic subvention payment in order to apply for an enhanced subvention contribution. However an applicant for enhanced subvention will be subject to the means assessment as it applies to basic subvention.
- Applicant’s means and the level of subvention approved are insufficient to meet the cost of nursing home care.
- The means assessment for basic subvention is applicable.
- Funding available for enhanced subvention should be used to equalise the level of support paid, relative to the cost of care, to applicants in different areas of the country.
- Enhanced subvention may also be approved by virtue of a crisis arising in relation to an individual, requiring immediate intervention by the HSE.
- The option to transfer a person to a public bed may be considered if appropriate.
Section 4 – Appendices

1. SUBVENTION APPLICATIONS

1.1 Acknowledge receipt of application and request for further information
1.2 14 days notice for return of requested information
1.3 Requests for Dependency Assessment
1.4 “Request for Transfer” letter
1.5 Transfer of Subvention Form

2. SUBVENTION DECISIONS

2.1 Subvention Approved – Basic, Basic and Enhanced
2.2 Application refused - Means Grounds
2.3 Application refused - Dependency Grounds
2.4 Subvention Enhancement Approved

3. NUSRING HOME/SUBVENTION OFFICE CORRESPONDENCE

4.1 Inform Proprietor of Subvention Approval
4.2 Confirmation of Admission of Subvented Person
4.3 Temporary Absence or Discharge Notification
4.4 Notification of Death

4. FINANCIAL ASSESSMENT TOOLS

4.1 CWO Full Financial Report
RE: (Name) – Nursing Home Subvention Application

Dear Name

(Office use- Delete any items that do not apply)

I wish to acknowledge receipt of a Nursing Home Subvention application in respect of Name and address. In order to proceed with this application for Nursing Home Subvention, could you please submit the following information to the above office, within the next 14 days.

- The current amount of all pensions that the applicant is in receipt of with supporting documentation (e.g. copy pension book/P.60. showing name, amount and period to which it refers).

- The current amount of the applicant’s savings and investments with supporting documentation (e.g. post office statement, bank/Credit Union statement).

- Letter from a local auctioneer stating the current market value of the Applicant’s residence.

- Should the applicant have transferred/sold any property within the last 5 years, please advise this office with supporting documentation e.g. Transfer deeds/Proceeds from sale.

- Details of any other Income or Assets.

- Please provide a letter from your / the applicant’s GP, setting out the medical needs of the applicant. If the applicant is already resident in a nursing home at the time of application, the letter should detail the need for emergency admission.

As soon as the requested information is received the application will be processed and you will be advised of the outcome of your application following completion of the Dependency and Financial Assessments.

Should you have any queries, please contact this Subvention Office, details listed above.

Yours sincerely,

Name
Title
Dear Name,

I am at present reviewing applications for nursing home subvention.

I have not received a reply to my correspondence of date relating to Applicant Name and Address in relation to information requested.

As soon as the requested information is received, the application process can continue and you will be advised of the outcome following completion of the Dependency and Financial Assessments.

If I do not hear from you within 14 days of this correspondence, it will be assumed that you no longer wish to pursue the Subvention application and it will be suspended, but can be re-opened on request.

Should you have any queries, please contact the above listed office.

Yours sincerely,

Name and title

date
Dear PHN/Clinician

I refer to the above named client who has applied for Nursing Home Subvention under the Nursing Homes(Subvention) Regulations 1993.

I would be grateful if you could complete the attached assessment(s) and return to me as soon as possible.

Thanking you for your cooperation in this matter.

Yours sincerely

Name & title

NB If, for any reason, you are unable to complete this Assessment please contact this office immediately.
Dear name

Please arrange to have the attached Subvention Transfer Form completed and returned to:

As soon as we receive the Subvention Transfer Form we can continue to process your request.

Should you have any queries, please contact the above listed Office.

Yours sincerely,

Name (title)
TRANSFER OF SUBVENTION

Persons wishing to transfer their Subvention from one Nursing Home to another must complete this form and receive approval prior to any transfer.

Name:  ________________________________________________________________

Present Nursing Home  __________________________________________________

Address:  ____________________________________________________________

______________________________________________________________

Weekly Charge:   ___  ________________________________________________

New Nursing Home:  ____________________________________________________

Address:  ____________________________________________________________

______________________________________________________________

Weekly Charge:   ___  ________________________________________________

Proposed date of Transfer:  ____________________________________________

Reason for Transfer:  _________________________________________________

Signature:  ____________________________________________________________

_____________________________________________Date:____________

This form to be returned to

Nursing Home Section
Address
Address
Address

Phone ___________________ Fax _______________________
Re: NAME – Nursing Home Subvention.

Dear

I refer to the application for Nursing Home Subvention made on behalf of the above named.

This application has been assessed/reviewed in accordance with the Health (Nursing Homes) Act 1990 and under the Nursing Home Subvention Regulations 1993 (& subsequent amendments) as follows:

<table>
<thead>
<tr>
<th>Income</th>
<th>Sub-Totals</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Old Age Pension</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupational Pension</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income/Imputed income from Assets*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income/Imputed income from principal residence*</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total assessed means per week</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less Personal Allowance**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less NCOAP</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Assessable Excess Means</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum Subvention Rate</td>
<td></td>
<td>€300.00</td>
</tr>
<tr>
<td>Less Assessable Excess Means</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Weekly Basic Subvention</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plus Article 10.6 if applicable (delete if not applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Weekly Basic Subvention</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Daily Rate of Basic Subvention</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Delete from letter if not applicable

(Office use: Reminder only: this note is to be deleted from letter:)

2.1 Subvention Approved

Subvention office details
**Where the assessed means is equivalent to or less than the current rate of NCOAP the applicant may qualify for an additional payment of 1/5th of the applicable NCOAP rate if such payment is required in order to meet the average fee in the area.)**

Following assessment of this case, the amount shown above has been approved. Payment will commence from (insert date refer to guidelines)

**Enhanced Subvention**

(Delete as appropriate)

(Applicant not in a nursing home)

If the above named chooses to admit to a nursing home they may be considered for and Enhanced Subvention payment. Prior to admission please contact this office with the nursing home details and approximate date of admission and a review will be carried out.

(Applicant in a nursing Home)

As the above named is resident in a nursing home I am pleased to inform you an Enhanced Subvention has been considered and approved in this case

Accordingly the total subvention payment approved is €xx per week (€per day).

This subvention will be paid directly to the nursing home of your choice on your behalf. Payment will commence from (insert date refer to guidelines)

(Delete appeals process if awarded maximum basic)

You have the right to appeal this decision to the designated Appeals Officer at the address listed below: -

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>e-mail:</th>
<th>Tel:</th>
<th>Fax:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

The decision of the HSE must be appealed within 28 days of notification. The appeal decision will be issued within 28 days of receipt.

It is a condition of the payment of a Subvention Grant that a person who qualifies for the Subvention Grant, or a person acting on his/her behalf, shall inform this office if there is any change in the financial means of the applicant.

If you require further clarification on this matter please do not hesitate to contact me.

Yours sincerely,

_____________________

Name
Title
Ref:

Date

Name
Address
Address
Address

Re: Name – Nursing Home Subvention.

Dear

I refer to the application for Nursing Home Subvention made on behalf of the above named.

This application has been assessed in accordance with the Health (Nursing Homes) Act 1990 and under the Nursing Home Subvention Regulations 1993 (& subsequent amendments) as follows:

<table>
<thead>
<tr>
<th>Income</th>
<th>Sub-Totals</th>
<th>Totals</th>
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</thead>
<tbody>
<tr>
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<tr>
<td>Income/Imputed income from Assets*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income/Imputed income from Principal Residence*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Assessed Means per week**

<table>
<thead>
<tr>
<th>Less Personal Allowance (1/5 of Non contributory OAP)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Less NCOAP</td>
<td></td>
</tr>
</tbody>
</table>

**Assessed Weekly Excess Means**

<table>
<thead>
<tr>
<th>Maximum Basic Subvention Rate</th>
<th>300.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less Assessed Excess Income</td>
<td></td>
</tr>
</tbody>
</table>

**Weekly Entitlement to Basic Subvention**

*Delete if not applicable*

I regret to inform you that as the assessed excess weekly means is greater than the maximum weekly rate of subvention the applicant does not qualify for subvention at this time. Subvention may be re-applied for if the applicant’s circumstances alter.

**Enhanced Subvention**
(To be inserted only if applicant has been refused on income)

The above named assessed weekly means is greater than the maximum weekly rate of subvention the applicant does not qualify for subvention at this time. However, if the applicant chooses to admit to a nursing home they may be considered for and Enhanced Subvention payment. Prior to admission please contact this office with the nursing home details and approximate date of admission and a review will be carried out.

You have the right to appeal this decision to the designated Appeals Officer at the address listed below: -

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
</tr>
<tr>
<td>Address</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>e-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tel:</td>
</tr>
<tr>
<td>Fax:</td>
</tr>
</tbody>
</table>

The decision of the HSE must be appealed within 28 days of notification. The appeal decision will be issued within 28 days of receipt.

If you require further clarification on this matter please do not hesitate to contact me.

Yours sincerely,

______________________
Name,
Title
Ref:

Date

Name
Address
Address
Address

Re: Name – Nursing Home Subvention.

Dear

I refer to the application for Nursing Home Subvention made by you / on behalf of the above named and I regret to inform you that you / the applicant have been assessed as not sufficiently dependent so as to require residential Nursing Home Care at present and therefore do/does not qualify for subvention at this time.

Please contact your Public Health Nurse or General Practitioner should the Medical Condition, Care Needs or Dependency of Applicant Name change in the future.

Yours sincerely,

_____________________
Name,
Title
Re: _Name - Nursing Home Subvention_

Dear,

I am pleased to inform you that the above named person has been approved for Enhanced Nursing Home Subvention contribution following assessment of the application in accordance with the Health (Nursing Homes) Act 1990 and the Nursing Home (Subvention) Regulations 1993.

In assessing the amount of enhanced subvention payable in this case the Health Service Executive has taken into account the following:

- Average nursing home fee in the area
- The current basic subvention approved (€ per week)
- The applicants assessed means (less spending allowance)
- The funding available for the scheme

Accordingly the total amount of subvention (including basic subvention) approved in this case is €xx per week (€ per day).

This subvention will be paid directly to the nursing home of your choice on your behalf. Payment will commence from (insert date refer to guidelines) or from date of admission whichever is later.

You should contact this office if you have any query regarding the rate of enhanced subvention payable in your case.

It is a condition of the payment of a Subvention that a person who qualifies for Subvention/Enhanced Subvention, or a person acting on their behalf, shall inform this office if there is any change in the financial means of the person.

Yours sincerely,

_________________________
Name
Title
Re: (NAME) - Nursing Home Subvention

Dear

I write to inform you that Name and Address has been approved as requiring nursing home care and granted €…… subvention per week, with effect from ------------.

Please arrange to claim this amount from your HSE area in the normal manner.

Should you have any queries, please contact the above listed office.

Yours sincerely,

Name
Title
CONFIRMATION OF ADMISSION OF SUBVENTED CLIENT

NAME OF NURSING HOME: ______________________________

NAME OF CLIENT: _________________________________

DATE OF BIRTH: ____ / ____ / __________

HOME ADDRESS OF CLIENT: ______________________________
_________________________________
_________________________________
_________________________________

DATE OF ADMISSION: ____ / ____ / __________

Cost of Bed on Admission: ______________

As Proprietor of this Nursing Home, I agree to accept the above named as a Subvented Client, at the approved Subvented Rate, as approved by the above Subvention Office.

Signed: ___________________________ Date: ____ / ____ / __________

Registered Proprietor/Person in Charge
NOTIFICATION OF
TEMPORARY ABSENCE / DISCHARGE
(Not to be used for Death Notifications)

NAME OF NURSING HOME: _____________________________________________

NAME OF CLIENT:   _____________________________________________

DATE of BIRTH:   ____ / ____ / __________

HOME ADDRESS OF CLIENT: ______________________________________________

DATE OF TEMPORARY ABSENCE: ____ / ____ / __________

OR

DATE OF DISCHARGE:              ____ / ____ / __________

REASON FOR TEMPORARY ABSENCE/DISCHARGE:

☐ Home / Family at _______________________________________________________

☐ Hospital at ____________________________________________________________

☐ Transfer to Alternative Nursing Home at ____________________________________

☐ HSE Residential Unit at _________________________________________________

☐ Boarding Out at _________________________________________________________

☐ Other (give details) ______________________________________________________

IF DISCHARGE IS TEMPORARY,
ESTIMATE LENGTH OF TIME: ______________________________________________

In accordance with The Nursing Home (Subvention) Regulation, 1993, (Section 15.1, 15.2, 15.3, 15.4, 15.5), the Proprietor of the Nursing Home is obliged to notify the Health Board of the discharge date of a person in receipt of a Subvention Grant.

Signed: ___________________________  Date: ____ / ____ / __________

Registered Proprietor/Person in Charge

3.3 Notification of Temporary Absence / Discharge

Please Fax or Post this form to the above address within 48 hours of patient discharge. Thank You.
Notification of Death

Health (Nursing Homes) Act 1990
Nursing Homes (Care & Welfare) Regulations 1993 SI No 226 of 1993 Art. 22

Name of Home:________________________________________________________
Address of Home:_____________________________________________________

Name of Resident:_____________________________________________________
Home Address of Resident: _____________________________________________

Date of birth: _____________                         Date of admission: ____________
Date of Death:______________  Time of Death: ________________
Place of death: _________________    If in hospital, date of transfer: __________

Was cause of Death Certified by GP:   Yes  No
Date Certified/time__________ The cause of death: ________________

Coroners Office notified: Yes   No
Resident in receipt of Subvention Payment? : Yes  No     Subvention No: ______

Signed by Registered Proprietor or Person in Charge: ________________
Date __________

To: Senior Medical Officer  __________________
HSE Address ______________________________________________
                        ___________________________

This notice should reach the above address not later than 48 hours after a death occurs.

For Office Use Only
Please copy/inform to :

Area Administrator, (GMS, Appliance/Incontinence)
Nursing Home Inspection Team
Nursing Home Subvention Section in HSE
Director of Public Health
INVESTIGATION OFFICER FINANCIAL REPORT REGARDING NURSING HOME SUBVENTION

Nursing Home (Subvention) Regulations 1993 and Nursing Home (Subvention) (Amendment) Regulations 2005.

To be completed where a Full Financial Report is required

Applicant Name: ________________________
Address____________________________________________

<table>
<thead>
<tr>
<th>Details of income/Means</th>
<th>Applicant’s details</th>
<th>Spouse’s details</th>
<th>Date information Requested from applicant</th>
<th>Date Received from applicant</th>
<th>Not Submitted by Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pension rate and Pension no.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other pension i.e. Occupational, DSS, Farm Retirement, other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confirmation of savings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide copies of recent statements from all financial institutions in which applicant(s) hold accounts or joint accounts, savings, investments, saving certificates, bonds, stocks, shares.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Details of Income from farm or business.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copy of Business/Farm accounts, verification of income from rent of land, forestry premia Or other payments.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Certificate of market value of properties and lands, completed by Auctioneer, where applicant is the owner.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Separate valuation for house and land is required.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Applicant must meet any costs involved in valuing the properties or lands).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If the applicant has transferred any property or land in the last 5 years, copy of deeds confirming date and value of property or land at time of transfer.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If the applicant has sold any property or land in the last 5 years, documents confirming the date of sale and amount realised from this sale.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Details of applicant’s income from any other sources – with supporting documentation.</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Any other information</td>
<td></td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

Processed by ________________________ Date ________________________

Approved by ________________________ Date ________________________