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Getting Started



Different types of care home: Residential or Nursing Homes

Nursing homes and **residential homes** provide different levels of care based on a person's level of need. Residential homes provide care for people who are more able, while nursing homes provide care to those with more complex needs.

Both residential and nursing homes provide assistance with personal care on a 24-hour basis, including help with washing, dressing, toileting, medication and mobility. They also provide help with eating and drinking and provide a range of social activities of your choice.

Residential homes can care for people with low levels of nursing needs with support from District Nurses, for example administering medication via injection, or managing complex dressings. They generally do not employ nursing staff.

Nursing homes, however, do employ nursing staff to allow them to provide medical care for people with a higher level of need. These homes are more suitable for individuals who have an illness or condition that requires frequent medical attention. They also have a range of specialist equipment available for moving and handling for those with serious mobility issues, or who are unable to get out of bed.







Assessment of need

An assessment of need is used to look at the type of care that you require, and whether this can best be met through a care home placement. It will also determine whether you need residential or nursing level support and will help you to find out if you are entitled to any financial support towards your placement. The needs assessment is normally carried out by a social worker or a occupational therapist

During the assessment, you, and your family will be able to discuss the options available to you. If you would like an advocacy worker to support you, one can be arranged for you to make sure that your views are fully taken into account during your assessment. You will be provided with a copy of your needs assessment.

The Local Authority has a duty to carry out a needs assessment if you ask for one, and you appear to be in need of social care services. Each Local Authority has an eligibility criteria for services. More information on our criteria for providing funding towards a care home placement is available in **Appendix 1.**

To arrange an assessment you, or a family member can call **01875 824 309**

Requests for a needs assessment should be made before you are admitted to a care home. If you are eligible for funding, this will only be provided from the date of the assessment and will not be backdated. Funding for a care home placement will also only be provided where the needs assessment identifies that your needs can no longer be met with a community setting.





The Local Authority is not under any statutory duty to provide funding to those in care homes who have arranged their own placement without the Local Authority's involvement.

If you enter into a care home that provides a higher level of care than you have been assessed as requiring, you will need to fund the difference of your placement from your own funds.

Where to find information on a care home

When deciding on a care home, your social worker will be able to discuss available options with you. However, you can also look at homes yourself and find out how well a home is performing by reading the **care home's inspection report** on the Care Inspectorate website.

All care homes in Scotland are registered with the Care Inspectorate, and they regularly monitor and grade the quality of care provided. Inspection reports provide information on what the home does well, and what may require improvement.

The Care Inspectorate uses the Health and Social Care Standards to grade a care home's performance. The standards outline what people should expect when using health and social care services.

They aim to ensure that services provide better outcomes for everyone, ensure that people are treated with dignity and respect, and ensure that basic human rights are upheld.

For more information, visit the Care Inspectorate website at www.careinspectorate.com

Although you can make choices about which homes you would like to be placed in, it is ultimately the decision of the home manager as to who they can accept. When assessing any new potential resident, the manager must ensure they can continue to meet the needs of all residents in the home and will consider this before accepting any new residents.



Paying for your care



Free personal and nursing care payments

If the Local Authority's assessment of need indicates that you need to live in a care home, and you live in Scotland, you are entitled to receive a weekly payment from the Scottish Government towards your care fees. This is called the Free Personal and/or Nursing Care payment.

Free Personal and/or Nursing Care payments will only begin from the date of your social work assessment and will not be backdated.

The amount you will receive will be based on whether your needs assessment determines whether you require residential or nursing care:

Your Care Home Type	Amount Received
Residential Home	£248.70 (Free Personal Care)
Nursing Home	£360.60 (Free Personal and Nursing Care)

The financial assessment

Anyone entering a care home will have to pay a contribution towards their fees.

To calculate what your contribution will be, we will ask you to fill in a financial assessment form. You can ask someone else to fill in the form, however, you, your Attorney or Financial Guardian will need to sign it to confirm the information is accurate.

When completing the form, you will need to provide us with copies of:

- bank and building society statements
- evidence of any, income, capital or investments
- the terms and conditions of any trusts.

If you decide not to complete a financial assessment, you will be charged the full cost of your care less any Free Personal and/or Nursing Care payments.



The information you provide on the financial assessment will help us to determine if you will be Local Authority Funded or Self-Funding.

Local Authority Funded means that the Health & Social Care Partnership will fund the full cost of your placement minus your assessed personal contribution.

Self-Funding means that the Local Authority will only pay the Free Personal and/or Nursing Care Payment towards your placement. This will be deducted from the total cost and you will need to pay the remaining portion of your fees.



To determine whether you are Local Authority Funded or Self-Funded we will look at:

- · your income
- whether you own any property
- · what savings and investments you have
- how much capital you have.

Your capital, savings, investments, and any property you own will be used to measure the total funds you have available to you and compare this is thresholds that are agreed nationally.

The thresholds change yearly and are outlined on the following page.



Your savings are	Do you own property	Funding type
Below £21,500	No	You will be Local Authority Funded and will contribute all your weekly income except your personal allowance of £34.50 a week.
Between £21,500 and £35,000	No	You will be Local Authority Funded and will contribute all your weekly income except your personal allowance of £34.50 a week. You will also pay £1 a week extra for every £250 or part of £250 you have between £21,500 and £35,000. The amount you pay will reduce as your savings reduce. When your savings reach £21,500 you will no longer pay a weekly charge
		from your savings but you will still pay a contribution from your income.
Over £37,750		You will be self-funding if you have capital, including property, which in total are above the upper threshold.
	Yes	You will receive your Free Personal and/or Nursing Care payment towards the cost of your care. You will be responsible for any remaining fees due to the care home.

If you have any questions about the financial assessment process you can contact our **Financial Assessment Team on:** 01620 827901.



Temporary minimum charge

If you are Local Authority Funded, you will be invoiced for a Temporary Minimum Charge until your financial assessment has been completed. This is to ensure that you do not accrue significant debt while awaiting the result of your final contribution. The care home will invoice you for this amount and we will inform you and the home of the results of your financial assessment. The home will then adjust your bills accordingly.

The Temporary Minimum Charge amount is set by the Scottish Government. Rates for 2024/25 are:

Age 18 - 24	£79.70 per week
Age 25 - 64	£98.50 per week
Age 65+	£183.65 per week

Disregarded capital

Some capital is disregarded during the financial assessment. This includes the value of life insurance policies and personal injury compensation held in a personal injury trust. Capital held in a discretionary trust may also be disregarded as you do not have free access to it.

Couples: jointly held capital, savings and pensions

Where you are part of a couple and one person is not moving into a care home, and you have capital or savings held jointly (i.e a joint bank account), the Local Authority will assume that any joint capital is shared equally in value unless you have proof that this is not the case. It can be helpful to split any joint savings into separate accounts once one party moves into a care home.



If you are married or in a civil partnership and one person moves into a care home, the Local Authority will also disregard 50% of that person's occupational pension, personal pension or payment from an annuity and it will be passed back to the person remaining at home.

Where a couple both move into a care home at the same time, the Local Authority will assess them individually.

Your personal expenses allowance

When the Local Authority calculates your contribution, they will deduct an amount known as the Personal Expenses Allowance which you will keep to use towards your weekly living costs.

The Personal Expenses Allowance increases yearly based on average earnings and is set by the Scottish Government. In 2024/25 this amount is £34.50.

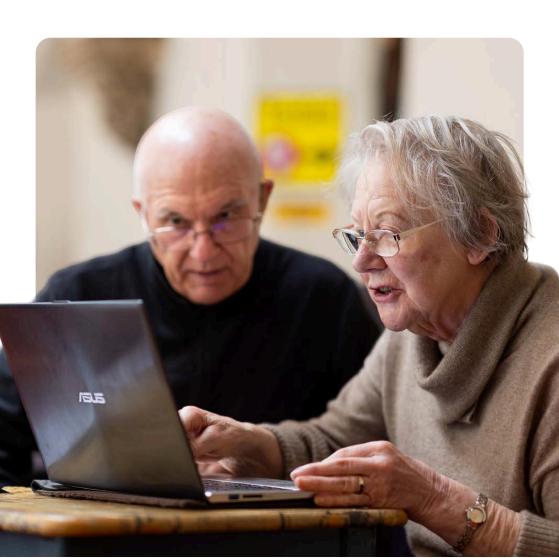
Financial re-assessments

We will review your contribution every year by completing an annual financial re-assessment which will ensure we take into account any increases in costs, or changes to your income and savings.





Choosing a Care Home



Local authority funded residents

If you are Local Authority Funded, you can choose a care home from a list of the providers who accept the Council's standard rates. The majority of care homes in East Lothian accept Local Authority Funded residents, although some private homes only accept Self-Funding residents.

For 2024/25, the standard rates are:

Your Care Home Type	Amount Received
Residential Home	£825.94
Nursing Home	£948.59

You can choose a home that charges more than these rates, but you will need someone other than yourself who is willing to pay the extra costs. These extra costs are often called **top ups.** The person willing to pay the extra costs will need to sign a written agreement confirming this.

Once you have chosen your home, the Local Authority will pay the care home the standard rate which includes your Free Personal and/or Nursing Care payment. You will pay the home directly for any contribution you are assessed as being required to make.

Self-funding residents

People who are Self-Funding can choose any care home they want to go to. If you are self-funding, the Local Authority will pay any free personal and/or nursing care contributions to the care home, if you are assessed as being eligible for this.



You will be responsible for paying the remaining cost of the care home placement and the home will invoice you, your Power of Attorney or Guardian the remaining amount due.

When deciding on a care home, you should check the total cost of the weekly care home placement before accepting it to ensure you can afford to move there. The cost of a self-funding placement can vary widely between homes.

You should also work out how long you will be able to afford to stay in the home with the amount of savings you have. Some private care homes ask self-funding residents to provide proof that they have sufficient money to cover care fees for three to five years.



Resident agreements

Prior to any placement starting, your chosen care home will provide you with a contract for your placement, also known as a resident's agreement.

The agreement should outline:

- the aims and objectives of the service
- information on your accommodation
- the gross cost of your placement



- the terms and conditions of your placement, including what is expected of you, and what you can expect from your care home provider
- periods of notice if you wish to leave the placement
- · any extra services not covered by the agreed fee
- details of how to make a complaint to the provider should you be dissatisfied.

If you are self-funding, the agreement should also explain how the provider will deduct your Free Personal and Nursing Care payments from the total placement cost.

As a self-funder your contract with the care home is a private contract. If you believe the provider is not keeping to the terms of your contract, you can report your concerns to Advice Direct Scotland using their website: www.consumeradvice.scot. Advice Direct Scotland offers various types of advice including consumer advice. Information logged on their database can be accessed by Trading Standards who can monitor this and they may decide to take further action with the provider.

You can also seek help from your local Citizens Advice Bureau and can also contact the Local Authority who may be able to support you with your concerns.



Additional Information for Self-Funding Residents



Reassessing your finances

If you are a self-funding resident and the total value of your savings and investments approaches £35,000, you must ask the Local Authority for a financial review in order for us to consider your eligibility for Local Authority Funding, and therefore help towards your care home fees.

At the financial review we will ask you for evidence of all the capital you held at the date of your admission to care, the income you have received since being in care, and all the care fees you have paid. We will also ask for details of personal expenditure.

From the date we determine that you are eligible for help with funding, we will calculate your weekly contribution based on your income and savings, and we will pay the balance of the fees up to our standard rate only.

If you are in a more expensive home that does not accept our standard rate, you will need someone who is willing to pay the extra costs for as long as you are there. In some circumstances, you may have to move to a different home.

Selling your home

If you need to sell your home and have savings of less than £35,000, the Local Authority can contribute towards the cost of your fees for up to 12 weeks or until you sell your home, whichever is sooner. This is known as a **12-week disregard.** You will have to repay the fess paid by the Local Authority in this period.

After the 12-week period you will be due to pay the full cost of your care home placement, even if your home has not been sold. You will continue to receive your Free Personal and Nursing Care Payment.



Interim funding

If you can't sell your home within 12 weeks and your savings drop below £5,000, you may qualify for Interim Funding—a short-term loan from the Local Authority to help with care costs until your home sells.

Eligibility requires your property to be for sale, ownership verification, and suitability for lending. A Charging Order will secure the loan, with associated legal costs being your responsibility. You'll contribute to care costs based on your finances, while the Local Authority covers the rest up to the standard rate. Any excess fees must be negotiated with the care home. The loan is repaid once the property sells or from your estate.

Deferred payment agreement

If you do not wish to sell your property immediately and your savings are below £21,500, you may be able to apply for a loan from the Local Authority to fund part of your care costs. This is known as a **Deferred Payment Agreement**. The money loaned to you will be repaid from the eventual sale of your property or from your estate.

To be considered for this:

- you must make an application to us in writing through your solicitor
- you must be the legal owner of the property
- the Local Authority must be satisfied that the property is suitable for lending purposes
- you must provide us with a survey of the property (mortgage valuation)
- you must arrange for your solicitor to set up a legal agreement called a Standard Security
- you must pay legal costs associated with this.

During the Deferred Payment term, you will pay an assessed contribution towards your care based on your income and savings. The Partnership will pay the balance of the fees up to our standard rate.



If the care home charges more than our standard rate you will have to make your own arrangement with the care home to meet the extra costs.

Depriving yourself of capital

It is common to want to pass on savings and other capital such as your home to your children or others. However, before deciding to transfer your home or capital you should consider that moving an asset out of your name does not mean you will receive financial help from the Local Authority.

Before providing financial help we:

- will look at whether you have ever owned property
- will look at your spending levels and any extravagant purchases
- will undertake checks on transfers and consider the timing of these
- may ask the people who received it to pay for your care
- may consider any transfer as "notional" capital, and still require you to fund your care fees until it falls below a certain level.

We will consider each case individually and on its own merit.

We will decide if paying care fees was a significant factor in your decision to transfer capital and if it was your intention to **deliberately** deprive yourself of the capital to get help with care fees.

We will also consider the **timing** of any transfers of capital and the circumstances leading up to the transfer including looking at:

- how healthy you were at the time of the transfer and any medical evidence
- whether the need for care or the move to a care home was foreseeable at the time of the transfer of the capital
- what explanation you can give for the transfer of the capital other than to intentionally deprive yourself of available capital to pay for care.



If you disagree with us

Where we have made a decision not to fund your care home placement and you disagree with this decision you should raise your concern with your social worker initially and ask them to review the decision.

You can challenge our decision not to fund care home fees due to deliberate deprivation of capital. We will make every effort to communicate with you and we will meet with you to explain our decisions.

If, after the review, you remain dissatisfied, a request for an appeal should be made by the relevant worker to the appropriate service manager. The request will include the context of the appeal and any additional information you wish to provide.

You will be notified of the outcome of the appeal within seven days of the service manager viewing it.

If you remain dissatisfied, you are entitled to pursue your complaint through the Council's normal complaints procedure.

Department for work and pensions information

When you move into a care home, you or your financial representative must advise the Department of Work and Pensions (DWP) or Social Security Scotland (SSC) of the date of admission. You should also let the DWP/Social Security Scotland know if you have been in Hospital longer than 4 weeks prior to admission to a care home.

The DWP and SSC will assess whether you are still entitled to the benefits that you are currently receiving, and whether you are entitled to receive any additional benefits.

If you do not update DWP or SSC and you receive payment for benefits that you are not entitled to, you may be required to repay them any overpayments made.



The Local Authority also assesses your financial contribution to your care home costs based on you receiving the appropriate benefits; therefore you should ensure that you claim the benefits you are entitled to. The Local Authority is unable to do this on your behalf.

If you have a spouse or partner remaining at home, they should also contact the DWP to discuss eligibility of benefits in their own right.

Additional care home charges

The fees paid to the care home should cover all of your care needs but you should discuss with the care home whether you will have to pay any other charges such as outings, hairdressing and activities.

The personal expenses allowance is set by the Scottish Government and cannot be increased to cover additional expenditure for example to buy cigarettes or alcohol.

Any additional charges should be detailed in your Residents Agreement.



Paying your bills

The Local Authority will pay our portion of your care home fees to the care home every 4 weeks. The care home will invoice you for your assessed contribution and you should pay this directly to the home.

Any periods you are not living in the home

You will continue to be charged for any periods you are not living in the care home. This includes any stays in a hospital.

If you are Self-Funding, your Free Personal and/or Nursing Care contributions will stop after 14 days and you will be expected to pay the full costs. Payments will start again when you return to the care home.

Acting on someone's behalf



Some people who enter care homes may not have the capacity to make decisions for themselves. There are various legal measures that you, or others, can put in place to support you to make important decisions and to manage your finances.

Welfare power of attorney

You can grant Welfare Power of Attorney to someone you trust to make decisions for you regarding your welfare. It can grant the person you nominate the power to decide where you live, and what type of support you receive.

This can only be put in place while you still have the capacity to nominate someone to do this.

The document is normally drafted by a lawyer and must be registered with the Office of the Public Guardian.

Although Welfare Power of Attorney may be put in place some time before it is needed, your nominated person will only be able to act on your behalf once you are no longer able to make decisions for yourself. It will detail what powers you wish the nominated person to have and how your incapacity will be established.

Welfare guardianship

If a person has lost the capacity to make decisions for themselves and has no Welfare Power of Attorney in place, family or trusted individuals can instead apply for Welfare Guardianship. This, again, gives authority for other people to make decisions on your behalf.

Private applications must be made through the Sheriff Court. Any application must be accompanied by reports from doctors and a Mental Health Officer.

Legal Aid is available for Welfare Guardianship applications, whatever your financial circumstances.



Financial power of attorney

Financial Power of Attorney can be put in place to allow a trusted individual to manage your finances on your behalf. This can only be put in place if you still have the capacity to nominate someone to do this for you.

The document is normally drafted by a solicitor and registered with the Office of the Public Guardian. You can outline the range of powers available to the nominated person and decide when they can begin to act on your behalf.

Financial guardianship

If a person is no longer able to make decisions for themselves, financial guardianship can be applied for. Applications must be made to the Sheriff Court and require medical certificates confirming the adult lacks capacity.

If there is no one available to act on your behalf, the Local Authority will nominate someone else, usually a solicitor, to do this.

The Office of the Public Guardian, who oversee financial guardianships, require the person managing the finances to:

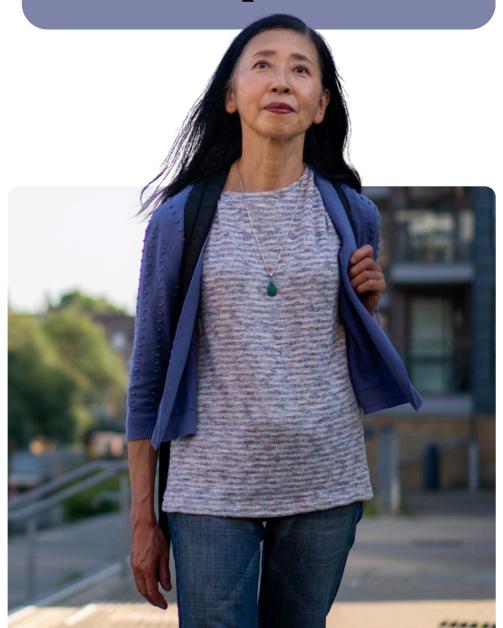
- submit an inventory of the adult's affairs
- draft a management plan
- keep extensive financial records
- submit account on an annual basis
- seek approval for large transactions.



Guardians can claim remuneration from the adults' estate.



Frequently Asked Questions



How much will I need to pay towards the care home fees?

There is a minimum charge for living in a care home which all residents need to pay. This is currently £183.65 per week. This amount is based on income from state pensions and is set by the Scottish Government annually. People who have more income or capital will be asked to pay more than this. Different care homes have different fees, so the maximum amount you will need to pay will depend on which care home you go to.

How is the amount I need to pay worked out?

You will be asked to fill in a financial assessment form. The Local Authority will then work out how much you need to pay based on your income and capital, e.g. savings, investments or property. We will write to you to let you know what you will need to pay.

When will I find out how much I need to pay?

The financial assessment process can take a few weeks to complete and it may be that you have already moved into a care home before you are notified of your final contribution. In the meantime you will be asked to pay the minimum contribution of £183.65 per week. Once the final amount is calculated this will then be backdated to when you moved in.

Will the local authority pay anything towards my care home fees?

If a social worker has assessed you as needing to go to a care home, we will pay at least the nationally set amounts for free personal and / or free nursing care. If you do not have savings over the threshold of £35,000, East Lothian Council will pay most of the rest of your care home fees, minus your own contribution which will be at least £183.65 per week. If you choose to go into a care home without an assessment from social work, you will need to pay the full amount of the fees.



What will happen to my pension when I move into a care home?

Your pension will continue to be paid to you and will not go straight to the care home or the Local Authority. It will be up to you to arrange to pay your care home fees to the care home.

What will happen to my house?

If your spouse lives in your joint home, the value of your home will not be taken into account, meaning your spouse can continue to live there. There are different rules for non married partners and other people who live in your house which will need to be looked at on an individual basis.

Will my family have to pay the care home fees?

Your family's finances are not taken into account when working out how much you need to pay towards your care home fees.

Will I have any money left once I have paid the care home fees?

When the Local Authority calculates the amount you need to pay towards your fees, they will leave you with an amount each week for your own expenses. The minimum amount you will be left with is set nationally by the Scottish Government each year, and in 2024/25 this is £34.50 per week. This is called the Personal Expenses Allowance.

What happens to Attendance Allowance / Carer's Allowance / Disability Payments?

Attendance Allowance and Carer's Allowance will stop 4 weeks after moving into a care home, or 4 weeks into a hospital admission. Disability Living Allowance/Personal Independence Payments (care component) will also stop after 4 weeks, but the Mobility component should continue to be paid going forward, as this part is not affected by living in a care home. It is your responsibility to notify the DWP about your change in circumstances.



What happens if I don't keep up with the care home fees?

Care Homes run by private companies will refer cases to the Local Authority where Care Home fees are not being paid and arrears start to accumulate. It may be that Adult Support and Protection Procedures are required as non payment could put your placement at risk.

Appendix 1 - Eligibility for care home funding

The needs assessment completed by your worker must clearly determine that you require a care home placement, and that this is the most appropriate setting to meet your needs in order for you to be eligible for funding.

During the assessment we will make sure that:

- Alternatives to the need for social care assistance are explored and will include any contribution from family/wider community/voluntary sector or other agencies in our assessment.
- Your needs are above the threshold eligible for services and that there is no one else willing or able to assist.
- Your needs must be at the threshold of critical or substantial:
 - Critical: There is a risk of major harm/danger to a person or major risks to independence.
 - Substantial: There is a risk of significant impairment to the health and wellbeing of a person, or significant risk to independence.



When assessing whether your needs require a placement within a care home, the assessor will take into account the level and frequency of your personal and nursing care needs.

If your nursing needs could be readily met by a district nurse, the Local Authority will need to be satisfied that the nursing need would be best met within a care home, rather than by a community-based nurse before deciding that a nursing home is required.

As part of the needs assessment, we will focus on:

- your needs in terms of living and care arrangements.
- whether these needs can be met outside of a care home.
- the appropriateness of any care or support already in place.
- your strengths and opportunities to maximise independence and draw on local sources of support.
- any risks to you in relation to your physical health and safety, mental health and wellbeing and your ability to care for yourself.
- we will also consider whether your needs in a care home are at the Residential or Nursing Level.

Residential level needs may include:

- the adult requires care more frequently than 4 times per day, e.g. repositioning, frequent toileting / pad changes, assistance with medication more than 4 times a day.
- the adult would be unsafe without 24-hour supervision, e.g. risk of leaving the home unsafely, high risk of falls / injury.
- the adult has overnight needs which cannot be met at home e.g. requires personal care or help to mobilise through the night.
- the adult has mental health needs which require frequent intervention, e.g. reassurance and reorientation, low mood due to social isolation leading to risky behaviours which cannot be met within a package of care.



the adult is likely to refuse care at times, without which they
would be at risk of harm such as risks to skin from incontinence,
but will accept care if the carers persist e.g. different time of day,
different approach.

Nursing level needs may include:

- the adult has nursing needs which require frequent intervention, e.g. wound care, epilepsy, diabetes management, or recurrent infections.
- the adult requires a higher level of staff supervision and support than can be met within a residential care home, e.g. frequent transfers / position changes requiring use of 2 or more staff, high level of supervision due to risk of falls.
- the adult experiences frequent stress/distress behaviours posing a risk to themselves or others.
- the adult requires a secure, locked environment

Appendix 2 - Care homes in East Lothian

East Lothian has 15 care homes for older people, 11 of these are nursing homes and 4 are residential homes.

East Lothian Health and Social Care Partnership owns one residential home – Crookston in Tranent.

All of the other homes in the county are run by private organisations.



Nursing homes

Astley House	14-16 Dirleton Avenue, North Berwick Tel: 01620 892037	Standard Rate & Self-Funding
Drummohr	47a Drummohr Gardens, Wallyford Tel: 031 653 3737	Standard Rate & Self-Funding
Fidra	67a Dirleton Avenue, North Berwick Tel: 01620 897600	Standard Rate & Self-Funding
Haddington Care Home	Mill Wynd, Haddington Tel: 01620 674880	Standard Rate & Self-Funding
Harbour House	131 New Street, Musselburgh Tel: 0131 374 2070	Standard Rate & Self-Funding
Hilton Lodge	60 Court Street, Haddington Tel: 01620 822291	Self-Funding
Lammermuir House	East Links Road, Dunbar Tel: 01368 862999	Standard Rate & Self-Funding
Muirfield	Main Street, Gullane EH31 2AA Tel: 01620 566019	Standard Rate & Self-Funding



Tantallon House	7 Tantallon Road, North Berwick Tel: 01620 566019	Standard Rate & Self-Funding
Tranent Care Home	l Coal Neuk Court, Tranent, EH33 lDR Tel: 01875 616560	Standard Rate & Self-Funding
Tyneholm Stables	Pencaitland, EH34 5DJ Tel: 01875 616560	Standard Rate & Self-Funding

Residential home

Carberry	Whitecraig, EH21 8PY Tel: 0131 665 2882	Standard Rate & Self-Funding
Crookston	Sanderson's Wynd, Tranent Tel: 01875 824170	Standard Rate & Self-Funding (ELC Owned)
Florabank	18 Florabank Road, Haddington Tel: 01620 823259	Standard Rate & Self-Funding
St Anne's Care Home	Windsor Gardens, Musselburgh Tel: 0131 665 5591	Standard Rate & Self-Funding



Appendix 3 - Useful organisations

Advice Direct Scotland	Website: www.consumeradvice.scot
Age Scotland	Tel: 0800 12 44 222 Website: www.ageuk.org.uk/scotland
Care Inspectorate	Website: www.careinspectorate.com
Carers of East Lothian	Tel: 0131 665 0135
Department of Work and Pensions (DWP)	Attendance Allowance: 0800 731 0122 Carers Allowance: 0800 731 0297 Disability Living Allowance: 0800 731 0122 PIP: 0800 121 4433 Pensions Credit: 0800 731 0469 Severe Disability Allowance: 0800 169 0190 State Pension: 0800 731 0469
EARS Advocacy	Website: www.ears-advocacy.org.uk Tel: 0131 478 8866
East Lothian Health and Social Care Partnership Contact Centre	Tel: 01875 824 309
ELC Financial Assessment Team	Tel: 01620 827901
Office of the Public Guardian	Website: www.publicguardian- scotland.gov.uk
Social Security Scotland (SSC)	Tel: 0800 182 2222



Versions of this leaflet can be provided in Braille, large print, audiotape, or your own language.

For assistance please call: 01620 827827.

British Sign Language (BSL) users can contact us via www.contactscotland-bsl.org



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