CHOOSING LIVE-IN CARE

Arranging care urgently: what to do when care is needed now

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IN BRIEF

When care is needed tomorrow, start with safety: NHS 111, the GP, an NHS urgent community response team and the council's adult social care team, which can meet urgent needs before any assessment, can all act quickly. Private care can sometimes start within a day or two, but it depends on local carers being free, and live-in care also needs a spare room, so put an interim plan in place too. Even in a hurry, check CQC registration, get the care plan, risk assessment and every charge in writing, and leave long-term decisions until things are calmer.



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What is realistic in the first 24 to 72 hours

Help	How fast	Good to know
NHS urgent community response	Aims to reach people within two hours, at least 8am to 8pm, seven days a week	For a health crisis at home, such as a fall without serious injury or sudden confusion; ask the GP or NHS 111
Council urgent help	Can start before any assessment	Ring adult social care, or the emergency duty team out of hours
NHS Continuing Healthcare Fast Track	Care in place as soon as possible, usually within 48 hours	For people whose health is deteriorating quickly and who may be nearing the end of life
Private visiting care	Often days; sometimes sooner	Depends on carers being free locally; the first visits may not be at ideal times
Private live-in care	Sometimes a day or two	Depends on a suitable carer and a spare bedroom
Short stay in a care home	Sometimes within days	Can be quickest when home cannot be made safe in time

The honest message: something safe can usually be arranged quickly, but the ideal long-term arrangement may take longer. Plan in two steps: safe now, right later.

The NHS and council help that can act fast

- **NHS 111 and the GP:** for urgent health problems, day or night. Call 999 in an emergency.
- **Urgent community response:** NHS teams that see people at home to prevent a hospital admission, including when a family carer's breakdown puts someone's health at immediate risk. Many accept calls from carers as well as referrals from the GP and NHS 111.
- **The council:** under the Care Act 2014, a council can meet needs that appear urgent before doing a needs or financial assessment, and statutory guidance says it should give an immediate response. In Oxfordshire, call 01865 519800 (Monday to Thursday 8.30am to 5pm, Friday 8.30am to 4pm) or the emergency duty team on 0800 833 408 out of hours. Elsewhere, find your council at gov.uk/find-local-council.
- **Free reablement:** after an illness, fall or hospital stay, short-term reablement is free for up to six weeks. See reablement and intermediate care.

Interim options while longer-term care is arranged

- A family rota for the first few nights, written down so everyone knows their turn.
- Visiting carers at key times, with a key safe and a personal alarm in between. See technology and telecare.
- A sleep-in carer overnight, if the main worry is being alone at night.
- Short-term live-in care, which can later become long-term or stop once the person recovers.
- A respite stay in a care home. See respite options.

If the person is in hospital



Ask the ward for the expected discharge date, the discharge pathway and who will pay for any care, and until when. National guidance says no one should be discharged until it is safe, but also that people cannot stay in hospital only to wait for their preferred care. Contact private providers as soon as a date is likely, and tell the discharge team what you are arranging. Our guides to leaving hospital, Discharge to Assess and questions to ask before discharge cover the detail. For live-in care at the point of discharge, see care after a hospital stay.

What to tell a provider on the first call

Have this ready, and the provider can tell you quickly whether it can help:

- [ ] Where the person lives, and the date and time care must start.
- [ ] What has happened: a fall, a hospital stay, a family carer taken ill.
- [ ] Help needed: washing, dressing, toilet, meals, medicines, moving around.
- [ ] Whether one or two people are needed to help them move, and any equipment.
- [ ] Nights: how often help is needed.
- [ ] Memory, confusion or behaviour that a carer should know about.
- [ ] Medicines, and who will collect them.
- [ ] For live-in care: a spare bedroom, pets, smoking, parking and Wi-Fi.
- [ ] Who is paying: the person, the council, the NHS, or not yet known.

Words you can use

To a provider: “My mother, who is 88 and lives in [town], needs care from [day] because [reason]. She needs help with [tasks] and [one or two] people to help her move. She wakes [once / several times] most nights. We would like [visits / live-in

care]. Please can you tell me honestly whether you can start by then, how you will assess her, what it will cost each week with every extra, and that you are registered with CQC."

To the council: "My father, [name, date of birth, address], is not safe at home without help from [day] because [reason]. I'm asking you to meet his needs urgently under section 19 of the Care Act while his assessment is arranged. Who is dealing with this, and when will we hear back?"

What to check, even in a hurry

- ☐ **CQC registration:** search the provider on the CQC website or call CQC on 03000 616161 (Monday to Friday, 8.30am to 5.30pm). Note the rating and the inspection date. See CQC ratings explained.
- ☐ **Who is responsible:** whether the provider employs or manages the carer, or only introduces a self-employed carer. See managed or introductory live-in care.
- ☐ **Checks and training:** an enhanced DBS check, references, and training for the person's needs, such as moving and handling, medicines and dementia.
- ☐ **An assessment before or on the first day,** and a written care plan and risk assessment from the start.
- ☐ **Medicines:** who orders, stores and gives them, and how doses are recorded.
- ☐ **The price in writing:** the weekly or hourly rate and every extra, including travel, break cover, nights and bank holidays.
- ☐ **The contract:** the notice period, any deposit and how it is refunded. See care contracts.
- ☐ **Out-of-hours contact:** a number answered by a person.

If you agree a contract at home, or by phone or email, you usually have 14 days to cancel. To start care inside that time you need to ask for it expressly (for a contract agreed at home, in writing); if you then cancel, you pay only for the care already given.

Paying when there is no time to plan

- Check NHS help first: free reablement and, where health is deteriorating quickly at the end of life, the Continuing Healthcare Fast Track.
- Claim Attendance Allowance as soon as possible. If a doctor or nurse has said someone may have 12 months or less to live, ask them for form SR1: under the special rules the claim is dealt with more quickly and paid at the higher rate, £114.60 a week.
- Avoid paying several weeks in advance for care that has not started.
- Use our funding and cost checker once the first days are over.

Common mistakes made in a hurry

- Signing a long contract, or paying a large deposit, before reading the terms.
- Choosing a provider without checking its CQC registration.
- Agreeing to a permanent care home before the person has had time to recover.
- Forgetting to ask the council for a care needs assessment, which is still needed for any longer-term help.

After the first week: making it right

Once care is in place, step back. Ask the council for a full care needs assessment and a carer's assessment for you. Check the care plan matches what is happening. Book a review after a few weeks, and decide calmly whether the interim arrangement should become the long-term plan. Our start-here guide sets out the next steps.

What to do next

1. Make sure the person is safe tonight, using NHS and council help if needed.
2. Ring two or three CQC-registered providers with the first-call checklist.
3. Make the checks above, even briefly, before agreeing to anything.
4. Put the interim plan in writing and share it with family.
5. Ask the council for a full assessment, and review the care within a few weeks.

How we can help

Day and Nightcare has supported people at home since 2008. Since 2014 we have provided Discharge to Assess care, and for several years we ran Oxfordshire's Urgent Response service, so we know how much the first days matter. We provide fully managed live-in care anywhere in England, from £1,550 a week, and home care visits, waking nights and sleep-ins across Oxfordshire, and 24-hour care with carers working in shifts anywhere in England. We are registered with CQC and rated Good. If care is needed urgently, call us on 01865 715780 to talk through what is possible; the initial assessment is free. We can often start within 24 to 48 hours of the assessment, depending on carer availability, and we confirm the start date once a carer is arranged.

Common questions

Can live-in care start tomorrow?

Sometimes, but it cannot be guaranteed. It depends on finding a suitable carer who is free, the person's needs, where they live and whether there is a spare bedroom. Most providers need to assess the person first, which can begin by phone or video and be followed by a home visit. Say clearly on the first call that it is urgent and when care must start, and ask for an honest answer rather than a hopeful one.

Will the council arrange care if my father has savings?

The council can meet urgent needs straight away, before it has assessed his needs or his finances. For longer-term care at home, if he has eligible needs and savings above £23,250, he will pay the full cost, but he can still ask the council to arrange the care for him, and it must do so. The council may charge an arrangement fee. Many self-funding families also contact providers directly to save time.

What if the hospital wants to discharge before care is ready?

National guidance says no one should be discharged until it is safe to do so, but people cannot stay in a hospital bed only to wait for their preferred option. If the care you want is not ready, an alternative suitable for short-term recovery should be offered meanwhile. Ask the discharge team what interim support is planned, who pays and until when, and raise concerns with the nurse in charge, the ward manager or the hospital's patient advice and liaison service (PALS).

Should we pay a deposit to secure a carer quickly?

Be cautious. Some providers ask for payment in advance, which can be reasonable, but a large deposit for care that has not started is a risk. Ask how much, what it covers, and when and how it is refunded, all in writing. Check the provider's CQC registration first. If you agree the contract at home or by phone or email, you usually have 14 days to cancel, paying only for care already given if you asked for it to start sooner.

Sources and further information

- Legislation.gov.uk: Care Act 2014, section 19 (meeting urgent needs)
- GOV.UK: Care and support statutory guidance (paragraphs 6.26, 8.56 and 8.58)
- NHS England: Urgent community response services
- GOV.UK: Hospital discharge and community support guidance
- NHS: NHS continuing healthcare
- GOV.UK: Claiming Attendance Allowance if you're nearing the end of life
- Legislation.gov.uk: Consumer Contracts Regulations 2013, regulation 36
- Oxfordshire County Council: Contact Adult Social and Health Care

Read next

CHOOSING LIVE-IN CARE

First steps when someone needs care: a start-here guide

What to do when you, or someone close to you, need care in England, suddenly or gradually: the first 72 hours step by step, who to call and when, crisis and planned routes, documents to gather, the money to check first and every guide you will need next.

Read the guide →

LEAVING HOSPITAL AND RECOVERY

Leaving hospital: what to expect and how to prepare

How hospital discharge works in England today: the discharge pathways, who the discharge team are, timing, transport, medicines and equipment, what families can do, and how to arrange private or live-in care quickly.

Read the guide →

CHOOSING LIVE-IN CARE

How to choose a care provider: checklist and questions to ask

A practical checklist for choosing a home care or live-in care provider in England: the questions to ask about training, continuity, out-of-hours support, care plans, reviews, complaints, prices and notice, the red flags to watch for, and how to use CQC reports and reviews.

Read the guide →

All guides in the information centre **Check what help you could get**

Talk to our care team: 01865 715780
enquiries@dayandnightcare.co.uk · Out of hours: 07775 686272
Day and Nightcare Live In Limited, 9 Hollow Way, Cowley, Oxford OX4 2NA
CQC overall rating: Good (report published 20 April 2018)

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This PDF was made on 1 November 2026.
Information, not advice: please check anything important with the organisation named.