LIVING SAFELY AND WELL AT HOME

Care glossary: UK care terms explained in plain English

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IN BRIEF

Care in England comes with its own language of acronyms and legal terms, which can make a hard time feel harder. This glossary explains more than 80 of the words families meet most often, each in one plain sentence, so you can follow every conversation with social workers, nurses and care providers.



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A

- **Administering medicines:** when a trained care worker selects and gives a person their medicines and records each dose, as agreed in the care plan.
- **Advance care planning:** talking about, and writing down, the care someone would want if they later cannot decide; see our advance care planning guide.
- **Advance decision to refuse treatment (ADRT):** a legally binding decision to refuse specific treatments in future, which must be written, signed and witnessed if it covers life-sustaining treatment.
- **Advance statement:** a written record of someone's wishes and preferences for future care, not legally binding but to be taken into account.
- **Advocate (Care Act advocate):** an independent person the council must provide when someone has substantial difficulty taking part in assessments and has no suitable friend or relative to help.
- **Attendance Allowance:** a benefit, not means-tested, for people over State Pension age who need help with care, at £76.70 or £114.60 a week in 2026/27; see our Attendance Allowance guide.

B

- **Best interests:** the legal test for decisions made for someone who lacks capacity, weighing their wishes, beliefs and values and the views of people close to them.
- **Blister pack (monitored dosage system):** a pharmacy-filled pack separating tablets by day and time, best used only when an assessment shows it helps.

C

- **Capacity (mental capacity):** the ability to understand, remember and weigh up information to make a particular decision at the time, and to communicate it.
- **Capital limits:** the savings thresholds in the council's means test in England, currently £23,250 (upper) and £14,250 (lower).

- **Care Act 2014:** the main law in England setting out councils' duties to assess and meet the care and support needs of adults and carers.
- **Care and support plan:** the written plan, agreed with the person, setting out their needs, how they will be met and their personal budget.
- **Care Certificate:** an agreed set of standards that new care workers in England should meet during their induction.
- **Care package:** the combination of services arranged to meet someone's needs, such as home care visits, equipment and day care.
- **Care Quality Commission (CQC):** the independent regulator that registers, inspects and rates health and social care services in England; see our CQC ratings guide.
- **Carer's assessment:** a free assessment, by right under the Care Act 2014, of the support an unpaid carer needs; see our carer's assessment guide.
- **Carer's Allowance:** £86.45 a week in 2026/27 for people caring at least 35 hours a week for someone on a qualifying disability benefit, if they earn £204 a week or less after deductions.
- **Checklist (CHC Checklist):** the short screening tool used to decide whether someone should have a full assessment for NHS Continuing Healthcare.
- **Community equipment service:** the joint council and NHS service that lends equipment such as commodes, hoists and hospital beds free of charge after assessment.
- **Continence care:** respectful help with bladder and bowel needs, including using the toilet, pads, catheters and skin care; see our continence care guide.
- **Continuing Healthcare (CHC):** care fully funded by the NHS for adults whose main need is a health need; see our NHS Continuing Healthcare guide.
- **Court of Protection:** the court that makes decisions, and appoints deputies, for people who lack capacity to make certain decisions themselves.
- **Covert medication:** hiding medicine in food or drink, lawful only after a best interests decision for someone who lacks capacity.

D

- **Day centre:** a place offering company, activities and meals by day, which also gives family carers a break.
- **Deferred payment agreement:** an arrangement with the council to delay paying care home fees from the value of the home until later, usually when it is sold.

- **Deprivation of assets:** deliberately giving away money or property to avoid care charges, which the council can treat as still owned.
- **Deprivation of Liberty Safeguards (DoLS):** the legal process for authorising restrictive care for someone who lacks capacity in a care home or hospital; at home, the Court of Protection authorises it.
- **Deputy:** a person appointed by the Court of Protection to make decisions for someone who lacks capacity and has no valid Lasting Power of Attorney.
- **Direct payments:** council money paid to the person or their representative so they can arrange their own care; see our direct payments guide.
- **Disability-related expenditure (DRE):** extra costs caused by disability, such as a community alarm, which the council should allow for when charging for care at home.
- **Disabled Facilities Grant (DFG):** a means-tested council grant of up to £30,000 in England for adaptations such as stairlifts, ramps and level-access showers; see our equipment and adaptations guide.
- **Discharge to Assess (D2A):** leaving hospital once medically ready and having longer-term needs assessed at home or elsewhere; see our Discharge to Assess guide.
- **DNACPR:** a doctor's decision that CPR will not be attempted if the heart stops; it does not affect other treatment.
- **Domiciliary care (home care):** care workers visiting at set times to help with personal care, meals and medicines; see our types of care at home guide.
- **Double-up call:** a home care visit that needs two care workers at once, often for hoisting or other moving and handling.
- **DST (Decision Support Tool):** the tool professionals use to score needs across 12 areas, called domains, and recommend whether someone is eligible for NHS Continuing Healthcare.

E

- **Eligibility criteria:** the national Care Act rules deciding whether needs are "eligible", meaning the council must make sure they are met.
- **Enduring power of attorney (EPA):** the older form, made before October 2007, covering property and finances only, which must be registered once the person loses capacity.

- **Extra care housing:** self-contained flats with care staff on site, combining a home of your own with care when needed.

F

- **Fast Track Pathway Tool:** the form a clinician uses to arrange NHS Continuing Healthcare quickly for someone who is rapidly deteriorating and may be nearing the end of life.
- **Financial assessment (means test):** the council's assessment of a person's income and savings to work out how much they must pay towards their care.
- **Frailty:** low reserves of strength and resilience, so a minor illness can have a big effect; see our frailty guide.

H

- **Hoist:** a lifting device, with a fitted sling, used to move someone safely when they cannot stand or bear weight.

I

- **Independent Mental Capacity Advocate (IMCA):** an advocate for someone lacking capacity who faces serious medical treatment or a long-term move and has no family or friends to consult.
- **Integrated care board (ICB):** the local NHS body that plans and pays for health services in an area, including deciding NHS Continuing Healthcare.
- **Intermediate care:** short-term health and care support, usually for up to six weeks, to help someone recover after illness or a hospital stay, or avoid going into hospital.

K

- **Key safe:** a small, coded box fixed outside the home that holds a key, so carers and emergency services can get in.

L

- **Lasting Power of Attorney (LPA):** a legal document appointing trusted people to decide about money and property, health and welfare, or both; see our LPA guide.

- **Liberty Protection Safeguards (LPS):** a planned replacement for DoLS, set out in law in 2019 but not yet brought into force.
- **Light-touch financial assessment:** a simpler means test used when it is clear someone will pay the full cost, for example with savings well above the upper limit.
- **Live-in care:** a carer who lives in the home, giving care and company day and night, with their own bedroom and agreed breaks; see live-in care.
- **Local Government and Social Care Ombudsman (LGSCO):** the free, independent service investigating complaints about councils and care providers after their own process.

M

- **Managed live-in care:** live-in care from a CQC-registered provider that manages the carers and is responsible for training, supervision and cover; see managed or introductory live-in care.
- **MAR (medicines administration record):** the chart on which care workers record each dose of medicine given or declined; see our medication guide.
- **Minimum Income Guarantee (MIG):** the amount of weekly income the council must leave someone with after charging them for care at home.
- **Moving and handling:** the safe techniques and equipment used to help someone move, stand, transfer or change position without injury to them or the carer.

N

- **Needs assessment:** the council's assessment, under the Care Act 2014, of an adult's care and support needs and the outcomes they want to achieve.
- **NHS-funded nursing care (FNC):** a weekly NHS payment towards the cost of nursing care for eligible residents of nursing homes.

O

- **Occupational therapist (OT):** a professional who assesses how someone manages daily tasks and recommends equipment, adaptations or new ways of doing things.
- **Ordinary residence:** the legal test for which council is responsible for someone's care, usually the area where they normally live.

P

- **Palliative care:** care focused on comfort and quality of life when an illness cannot be cured; see planning end of life care at home.
- **Personal budget:** the amount of money the council works out it will cost to meet someone's eligible needs, shown in their care and support plan.
- **Personal care:** help with intimate everyday tasks such as washing, dressing, using the toilet, eating and drinking.
- **Personal expenses allowance:** the minimum amount a care home resident whose care is council-arranged keeps each week for personal spending.
- **Personal health budget:** an amount of NHS money to meet someone's health and wellbeing needs, which adults receiving NHS Continuing Healthcare at home have a right to have.
- **Pressure area care:** regular checks, repositioning and equipment to prevent pressure ulcers, the skin damage caused by staying in one position too long.
- **Prompting:** reminding someone to take their medicines or do a task, which they then do themselves.
- **PRN ("when required") medicine:** a medicine taken only when needed, such as a painkiller, with written instructions on the dose and how often.
- **Property disregard (12-week disregard):** the home's value is ignored in the council's means test for the first 12 weeks after a permanent move into a care home.

R

- **Reablement:** short-term support at home, free for up to six weeks, to help someone regain skills and confidence after illness or a hospital stay; see our reablement guide.
- **Registered Manager:** the person registered with the CQC as responsible for running a care service day to day.
- **ReSPECT form:** a "Recommended Summary Plan for Emergency Care and Treatment", a short form recording a person's wishes and clinical recommendations for an emergency.
- **Respite care:** short-term care that gives a family carer a break, at home or elsewhere; see our respite options guide.

S

- **Safeguarding:** protecting adults with care and support needs from abuse and neglect, including reporting concerns to the council; see our safeguarding guide.
- **Section 42 enquiry:** the enquiry a council must make when it suspects an adult with care needs is at risk of abuse or neglect.
- **Section 117 aftercare:** free aftercare services for people who have been detained in hospital under certain sections of the Mental Health Act 1983.
- **Self-funder:** someone who pays the full cost of their own care, usually because their savings or income are above the council's limits.
- **Shared Lives:** an arrangement in which an adult with care needs lives with, or regularly visits, an approved Shared Lives carer and their family.
- **Sleep-in:** a carer who sleeps at the person's home overnight and gets up to help if needed; see our page on night care.
- **Structured medication review:** a full review of all a person's medicines, usually with a clinical pharmacist at the GP practice.

T

- **Tariff income:** the weekly income the council assumes from savings between the lower and upper capital limits, £1 for every £250.
- **Telecare:** sensors and alarms linked to a response centre, such as fall detectors and smoke or door sensors, that call for help automatically; see our technology and telecare guide.
- **Third-party top-up:** an extra payment by a relative or friend for a care home costing more than the council's personal budget.

U

- **Urgent community response:** NHS community teams that aim to reach someone at home within two hours in a crisis, to avoid a hospital admission.

V

- **Virtual ward (hospital at home):** hospital-level care and monitoring given in a person's own home, usually for a short time instead of a hospital stay.

W

- **Waking night:** a carer who stays awake throughout the night to give help whenever it is needed.
- **Wellbeing principle:** the Care Act duty on councils to promote each person's wellbeing, including dignity, control over daily life and health.

How we can help

If a term is still unclear, just ask us. Day and Nightcare is a CQC-registered provider, rated Good; call 01865 715780 for a free initial assessment.

Common questions

What is the difference between a care home and a nursing home?
Both provide accommodation and personal care, but a nursing home also has registered nurses on duty around the clock to provide nursing care. People with complex health needs often need a nursing home, while a residential care home suits people who need help with daily living but not regular nursing. The NHS pays a contribution towards the nursing part of the cost, called NHS-funded nursing care, for eligible residents.

Is live-in care the same as 24-hour care?
Not quite. With live-in care, one carer lives in the home, sleeps there and has agreed breaks, so they are on hand day and night but are not awake all night. 24-hour care usually means carers working in shifts so that someone is awake and working at all times. If someone needs help several times every night, waking night care or shift-based 24-hour care may be needed.

What does 'eligible needs' mean?
It means care needs that meet the national eligibility criteria under the Care Act 2014. For an adult needing care, the needs must arise from a physical or mental impairment or illness, mean they cannot achieve two or more specified outcomes, such as washing, eating or using the toilet, and have a significant impact on their wellbeing. If needs are eligible, the council has a duty to make sure they are met.

Who do I ask if a term is not in this glossary?

Ask the person who used it to explain it in plain words; professionals should be happy to. You can also call the Age UK Advice Line on 0800 678 1602, Independent Age on 0800 319 6789 or the Carers UK helpline on 0808 808 7777. Our guides explain many of these subjects in more detail.

Sources and further information

- GOV.UK: Care and support statutory guidance
- legislation.gov.uk: Care and Support (Charging and Assessment of Resources) Regulations 2014, regulation 3
- NICE: Managing medicines for adults receiving social care in the community (NG67)
- GOV.UK: Make, register or end a lasting power of attorney
- NHS England: Urgent community response services
- NHS: Carer's assessments

Read next

CHOOSING LIVE-IN CARE

Types of care at home: live-in, visiting, night and respite care

The types of care at home in England explained simply: live-in care, visiting home care, sitting and companionship, waking nights and sleep-ins, 24-hour care, respite, reablement, Discharge to Assess and palliative care, who each suits and how to combine them.

Read the guide →

PAYING FOR CARE AND REDUCING THE COST

NHS Continuing Healthcare: a guide for families

A plain-English guide to NHS Continuing Healthcare in England: who qualifies, the Checklist, the Decision Support Tool and its 12 domains, Fast Track, care at home including live-in care, reviews, appeals with template letters, retrospective claims and how to prepare evidence.

Read the guide →

PAYING FOR CARE AND REDUCING THE COST

Council funding for care: assessments, means test and charges

How council funding for care works in England in 2026/27: the free care needs assessment, who is eligible, the financial assessment for care at home (£23,250 and £14,250 limits, minimum income guarantee, disability-related expenditure), what is ignored, top-ups and how to challenge.

Read the guide →

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

Talk to our care team: 01865 715780
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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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