CHOOSING LIVE-IN CARE

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

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IN BRIEF

Start with safety today, then information, then decisions. In a crisis, call 999 or NHS 111 and the council's adult social care team (its emergency duty team out of hours), which can arrange urgent help before any assessment. When there is time, ask for a free care needs assessment, check what help could pay for care, and compare the options, from visiting care and live-in care to a care home, with the person at the centre of every decision.



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Is this a crisis, or is there time to plan?

The first question decides which route to take.

What is happening	Route
A fall, sudden confusion, a hospital admission, the family carer taken ill, or the person is not safe tonight	**Crisis:** safety first, then urgent help from the NHS and the council
Things have been getting harder for weeks or months: missed meals, missed tablets, a messy house, near-misses	**Planned:** assessments, money checks and choosing care calmly

Many families start in a crisis and move to planning within a few days. Both routes end in the same place: a written plan built around what the person wants.

In a crisis: the first few hours

- **999** if someone is seriously ill or injured, cannot be woken, is struggling to breathe, or shows signs of a stroke.
- **NHS 111**, by phone or at 111.nhs.uk, day or night, for urgent medical advice. In working hours, ask the GP practice for an urgent call back.

- **An urgent community response team.** Across England, NHS urgent community response teams aim to reach people at home within two hours, at least 8am to 8pm, seven days a week, to prevent a hospital admission: for example after a fall without serious injury, with new or worsening confusion, a blocked catheter, or when a family carer's breakdown puts someone's health at risk. Ask the GP or NHS 111; many teams also accept calls from carers.
- **The council's adult social care team.** By law (Care Act 2014, section 19), a council can meet needs that appear urgent before it has done any assessment. Out of hours, ring its emergency duty team. In Oxfordshire: 01865 519800 (Monday to Thursday 8.30am to 5pm, Friday 8.30am to 4pm) and, out of hours, 0800 833 408. Elsewhere, find your council at gov.uk/find-local-council.
- **If the person is in hospital,** ask the nurse in charge for the expected discharge date and to meet the discharge team. National guidance says no one should be discharged until it is safe to do so. See leaving hospital and questions to ask before discharge.

If care is needed by tomorrow, our guide to arranging care urgently covers what is realistic and what to check even in a hurry.

The first 72 hours: a step-by-step plan

Day 1: safe tonight

1. Decide who will be with the person tonight, or how they will call for help (phone, personal alarm, a neighbour with a key).
2. Make a "who's who" list: GP practice, pharmacy, neighbours, key holder, family members and their numbers.
3. Find the medicines. Ask the pharmacy or GP practice for a printed list of current prescriptions.
4. Start a notebook: dates, who you spoke to, what was agreed and what happens next.

Day 2: bring in the right people

5. Ask the council for a free care needs assessment for the person, and a carer's assessment for yourself if you help them.

6. Speak to the GP: ask for a review, and referrals as needed to the district nurses, an occupational therapist or a falls service. If health needs are complex or changing fast, ask for an NHS Continuing Healthcare Checklist; if the person may be nearing the end of life, ask about the Fast Track, which aims to put care in place usually within 48 hours.
7. Sit down with the person, if they are able, and ask what matters most to them: home, routines, pets, people. Adults are presumed able to make their own decisions unless shown otherwise; see mental capacity and best interests.
8. Check whether a Lasting Power of Attorney exists. If not, and the person can still make one, start now: registration takes 8 to 10 weeks.
9. If you work, tell your employer. Employees can take up to one week of unpaid carer's leave every 12 months from their first day, and a reasonable amount of time off to deal with an emergency involving a dependant.

Day 3: money and options

10. Use our funding and cost checker to see which help applies.
11. Read about the types of care at home and talk through the options together.
12. Shortlist two or three CQC-registered providers and ask each for an assessment and a written quote. See how to choose a care provider.

Who to call: numbers and opening hours



Checked on the official pages on 30 October 2026.

Who	Number	Open
Emergency services	999	Always

Who	Number	Open
NHS 111 (urgent medical advice)	111	Always
Age UK Advice Line	0800 678 1602	8am to 7pm, every day of the year
Independent Age	0800 319 6789	Mon to Fri, 8.30am to 5.30pm
Carers UK Helpline	0808 808 7777	Mon to Fri, 9am to 6pm
Alzheimer's Society Dementia Support Line	0333 150 3456	Mon to Wed 9am to 8pm, Thu and Fri 9am to 5pm, weekends 10am to 4pm
Attendance Allowance helpline	0800 731 0122	Mon to Fri, 8am to 6pm
Care Quality Commission (CQC)	03000 616161	Mon to Fri, 8.30am to 5.30pm

Documents to gather

- [ ] Full name, date of birth, address and NHS number.
- [ ] Current medicines list, allergies, and recent hospital or clinic letters.
- [ ] GP practice, pharmacy and any specialist teams.
- [ ] Any Lasting Power of Attorney, advance care plan or emergency treatment plan.
- [ ] Recent bank and savings statements, pension and benefit letters (for the financial assessment).
- [ ] A short note of the person's routine, likes, dislikes and worries.

Words you can use when you call the council

"I'm calling about my mother, [full name, date of birth, address]. She [fell yesterday / came home from hospital today / has become confused] and I don't think she is safe on her own tonight. I'd like to ask for a care needs assessment under the Care

Act, and I'm asking you to consider meeting her needs urgently while that is arranged. I help look after her and would also like a carer's assessment. Who will contact us, and when? Can I have a reference number?"

Money: check this before paying for anything

- **The NHS first.** Free reablement after an illness or hospital stay can last up to six weeks, and NHS Continuing Healthcare pays for all care, without a means test, when needs are mainly health needs.
- **Attendance Allowance:** £76.70 or £114.60 a week in 2026/27 for people over State Pension age who need help. It is not means-tested. See Attendance Allowance.
- **The council:** for care at home, the person's home is not counted, and the council contributes only when savings and other capital are below £23,250. See council funding for care.
- **Everything else,** from council tax discounts to carers' benefits, is in how to reduce the cost of care.

Choosing the kind of care

Care can be built up step by step: occasional visits, daily visits, help at night, a live-in carer, a live-in carer with night support, or a care home. For many people who need help at different times through the day, live-in care lets them stay at home with one familiar person close by. Whether one carer is enough depends mostly on nights: see live-in care or 24-hour care. For some people a care home is the kinder choice, and our guide to when a care home may be right says so honestly.

Common mistakes in the first days

- Agreeing to a permanent care home straight from a hospital bed. Guidance says this route should be used only in exceptional circumstances; recovery at home often comes first.
- Selling the home, giving away money or signing a long contract under pressure.
- Paying privately before checking free reablement and NHS funding.
- Planning around the person instead of with them.
- Trying to do everything yourself. Accept help early.

Your guide map

- **Leaving hospital:** Discharge to Assess explained, reablement and intermediate care.
- **Live-in care:** what a live-in carer can and cannot do, breaks and handovers, managed or introductory.
- **Conditions:** dementia care at home, falls prevention.
- **Safety and medicines:** home safety checklist, managing medication at home.
- **The paperwork:** care assessments and care plans, care contracts, CQC ratings explained.
- **For you:** respite options, looking after yourself as a carer.

What to do next

1. Make sure the person is safe tonight; use the crisis numbers above if not.
2. Ring the council for a care needs assessment and a carer's assessment.
3. Speak to the GP about health, referrals and NHS funding.
4. Check the money with our funding and cost checker.
5. Talk through the options with the person, then ask two or three providers for an assessment.
6. Write everything down, and book a review a few weeks after care starts.

How we can help

Day and Nightcare has supported people at home since 2008. 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, and we work with people who fund their own care, councils (including direct payments) and NHS Continuing Healthcare. If you are not sure where to start, call us on 01865 715780; we can talk it through and arrange a free initial assessment.

Common questions

Who do I call first when an elderly parent suddenly cannot cope?

If anyone is in danger or seriously unwell, call 999. For urgent medical advice, call NHS 111 or the GP. For help with care, call the adult social care team at the council where the person lives, or its emergency duty team out of hours: councils can put urgent care in place before any assessment is done. If your parent is in hospital, speak to the ward nurse in charge and ask to meet the discharge team.

Do we have to go through the council to arrange care?

No. If your relative pays for their own care, you can contact a care provider directly, and many families do both at once. A council care needs assessment is still worth asking for: it is free whatever someone's savings, it gives a clear written picture of needs, and you will need it if the council is to contribute. The council can also arrange care at home for people who have savings above £23,250 if they ask.

What if my parent refuses help?

An adult who can make their own decisions has the right to refuse care, even if the family is worried. Listen to the reasons, which are often fear of losing control, cost or strangers in the home, and offer small, trial steps. If you think they may lack capacity for the decision, a capacity assessment is needed, and any decision must then be made in their best interests. Our guide to mental capacity explains how this works.

How quickly can care at home start?

It varies with where the person lives, how complex their needs are and how many carers are free locally. Private visiting care and live-in care can sometimes start within days, occasionally sooner. Council assessments take longer, but councils can meet urgent needs straight away. In a crisis, say clearly that it is urgent on every call, and keep a short-term plan in place while the longer-term care is arranged.

Should we sell the house to pay for care?

Not in a hurry, and not before getting advice. For care at home, the home the person lives in is not counted in the council's means test at all. For a care home, there are rules that protect the home in some situations, a 12-week disregard and deferred payment agreements. The NHS advises not selling a home or giving up a tenancy before the council has made a decision. Speak to a regulated adviser who specialises in later-life care first.

Sources and further information

- Legislation.gov.uk: Care Act 2014, section 19 (meeting urgent needs)
- GOV.UK: Care and support statutory guidance
- NHS England: Urgent community response services
- GOV.UK: Hospital discharge and community support guidance
- NHS: NHS continuing healthcare
- GOV.UK: Attendance Allowance
- GOV.UK: Carer's leave
- Oxfordshire County Council: Contact Adult Social and Health Care

Read next

CHOOSING LIVE-IN CARE

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

When care is needed tomorrow in England: what is realistic in the first 24 to 72 hours, the NHS and council help that can act fast, interim options while longer-term care is arranged, what to tell a provider, and the checks to make even in a hurry.

Read the guide →

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

How to reduce the cost of care: a guide for families in England

The main legitimate ways to reduce what you pay for care at home in England in 2026/27: NHS Continuing Healthcare, council funding and the means test, benefits, Pension Credit, council tax discounts, free reablement and equipment, grants, carers' support and direct payments.

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
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Information, not advice: please check anything important with the organisation named.