# Nursing Homes Support Scheme

Application form and support information



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# Information about the Application Form

Use this form to apply for the Nursing Homes Support Scheme.

Completed forms should be returned to your local HSE Nursing Homes Support Office. Our staff can also provide help to complete your application. Contact details for HSE Nursing Homes Support offices are at the end of this document.

As you go through this application form you will see support information to the left-hand side of the sections to be filled out.

## What is the Nursing Homes Support Scheme?

If you need care in a nursing home, you can apply for financial support to help pay for the cost of this care through the Nursing Homes Support Scheme. The scheme is also known as Fair Deal. You pay part of the nursing home fees and we pay the balance. This scheme applies to public, private and voluntary nursing homes registered with the Health Information and Quality Authority (HIQA). This is a statutory, government-funded agency which monitors the safety and quality of nursing homes.

You need to be approved for Fair Deal before you can receive funding for a nursing home. You can choose to pay privately for care while you wait for funding. Fair Deal funding can't be backdated and will only be paid from the date of funding approval.

Please note that Fair Deal does not cover:

- short-term care such as respite, convalescent or day-care

  *or*

- extra fees charged by the nursing home for services like hairdressing, therapies or activities.

You can ask your nursing home what extra fees will need to be paid for these services. An agreement of these extra costs must be in place by the time you enter the nursing home.

## Who can apply for the scheme?

Anyone who may need long-term nursing home care can apply. You must be ordinarily resident in the State, which means that you have been living here for at least 1 year or you intend to live here for at least 1 year.

## Choosing a nursing home

It's important to look at different nursing homes before choosing one. You should make an appointment to visit the nursing home before making a decision.

Contact your preferred nursing home as soon as possible. You will need to see if they have a place available and can meet your care needs. They may have a waiting list.

If the nursing home you want does not have space, you can go to a different one temporarily. You can then apply for a transfer when space becomes available in your preferred nursing home.

If you are helping someone to apply for nursing home care, involve them as much as you can in the decision. Consider their preferences and personal values before choosing a nursing home.

## Nursing home inspections

The Health Information and Quality Authority (HIQA) inspects all registered nursing homes. You can read the nursing home inspection reports on www.hiqa.ie.

## How do I apply for nursing home support?

There are 4 stages to the application process:

1. **Application form**
   You need to complete and sign this application form.
2. **Care needs assessment**
   We will contact you to arrange a care needs assessment. This will assess your need for nursing home care.
3. **Financial assessment**
   We will calculate how much you will pay towards the cost of nursing home care. The amount depends on your income and assets.

   Your income is money you receive on a regular basis and your assets include cash, investments and property. The amount that you pay for your care depends on your income and the value of your assets. No one will pay more than the cost of their care. Your contribution will stay the same and we will pay the balance.
4. **Nursing home loan (Ancillary State Support) *(optional)***
   This is an optional element of the Fair Deal scheme for people who have assets including land and property.

## What is the nursing home loan?

You can apply for a nursing home loan if you own property in the State. This is known as Ancillary State Support. This can be a house, land, business property or any other property. **The nursing home loan is optional.** If you want to apply for the loan, you should complete Part 5 of this form. Please go to page 26 for this section on the form and for more information about the nursing home loan.

Applying for a nursing home loan can sometimes take several months as you may need to gather a lot of official documents. We suggest you apply for the loan when you apply for Fair Deal funding. You do not need to accept the nursing home loan if you are approved.

# Filling in the Application Form

There are 7 Parts of the form to complete. All applicants need to fill in Parts 1 – 4. Part 5 is an optional element of the form and Parts 6 and 7 may only apply to certain people.

**Getting help with this application form**

You can get help from a friend, relative, decision-making assistant or co-decision-maker in making this application.

Please include their contact details on page 16 and the address for correspondence.

If a person is legally authorised to apply on your behalf then they can enter their details on page 18 Section 2B.

## Quick Reference Guide and Checklist

Before you start to complete the form, go to page 5 and pull out the Quick Reference Guide and Checklist to assist you in filling out the form. This guide gives you information on the documents you need to include with your application.

## Data protection notice

It is important that you read this notice on page 38. It outlines how we may use the information that you provide to us if an application is made.

## Who do I contact if I need help?

When you have gone through the booklet, you might have questions. If so, you can visit hse.ie/nhss or contact your local HSE Nursing Homes Support Office listed on page 37.

You can also contact HSELive from Monday to Friday 8am to 8pm and Saturday and Sunday 9am to 5pm on 1800 700 700 or 003531 240 8787 (from outside Ireland).

**Part 1 -** Applicant's details

**Part 2 -** Application for care needs assessment

**Part 3 -** Details of income, assets and deductions

**Part 4 -** Application for State Support

**Part 5 -** Nursing home loan (Ancillary State Support)

The nursing home loan is an optional element of the Fair Deal scheme. It is an option if the person in nursing home care has assets including land and property. With a nursing home loan, paying for care can be delayed until after the person has passed away, using these assets to secure the loan.

**Part 6 -** 3-year cap on farm and relevant business

This only applies to people with family-owned and operated farms and businesses.

**Part 7 -** Co-Decision-Making Agreements

This only applies to people who have co-decision-making agreement.

**Please send the completed application form along with the documents listed on page 11 to your local Nursing Homes Support Office. We will let you know when we have received your application.**

# Quick Reference Guide and Checklist

**Pull out this section to keep for your own information**

# What documents do I need to send with the completed application form?

Please pull out this section to use as a quick guide for Parts 1, 3, 5 and 6. You do not need to include this guide and checklist with your application - keep for your own information.

## Specified person Part 2 of the Application Form

Under the Nursing Home Support Scheme (NHSS), a "specified person" may act on behalf of another person where that other person lacks capacity to, amongst other things, make applications for a care needs assessment, State Support, a review of an assessment or to appeal a decision of the HSE. A specified person can be a spouse / partner or child over 18 of the applicant. A specified person can also be a registered doctor, nurse or social worker.

A specified person has very serious obligations. The NHSS Act (section 46A) sets out the ***Principles with regard to specified persons.*** A specified person should read the principles in full and must understand and act in accordance with the principles. The principles include always acting in good faith and for the benefit of the person, and having regard for the other person's individual circumstances and all other circumstances of which they are aware. The principles also include:

- minimising restriction of rights and freedom of action
- respecting the other person's dignity, bodily integrity, privacy, autonomy, right to control over own financial affairs and property
- giving effect to, as far as practicable, past and present will and preferences
- being proportionate and only acting for so long as is practicable
- permitting, encouraging and facilitating the other person to participate in any application under the NHSS
- taking into account the other person's beliefs and values
- considering the views of any person named by the other person as a person to be consulted
- keeping all records and information secure and only for so long as is required.

## Financial Assessment

You must send us proof of your income and assets so that we can calculate your weekly contribution towards the cost of nursing home care. There are also deductions you can subtract from your total income during the financial assessment.

**To help you navigate, we have broken down this information into six sections relating to Parts 3A, 3B, 3C, 3D, 5 and 6 of the application form.**

## Income Part 3A of the Application Form

If income is paid directly into your bank account, you need to give us bank statements for the last 6 months as well as the documents listed below.

### Pension

If your State pension is paid into your bank account we will accept bank statements showing weekly payments. If not, please give us a recent An Post receipt or a letter from the Department of Social Protection stating the pension amount.

### Non-Irish pension

If you get social security payments or a pension from another country, please give us the most recent payslip or a letter from the social security agency stating the amount paid. We can also accept bank statements showing the payment.

### Occupational pension

Please give us your most recent payslip, P60 from the Revenue Commissioners or certificate of earnings.

### Income from employment, trade, profession or vocation including part-time work

Please give us one of the following:

- a recent payslip
- a Revenue Notice of Assessment – this is the document from Revenue that shows how much tax you must pay
- a Revenue Notice of Self-Assessment and a copy of your latest tax return

## Rental income

We need a copy of the rental agreement and the latest Notice of Assessment from the Revenue Commissioners. If you have rental property outside the State, we also need this information.

If you are renting your principal private residence, this income may be assessed at a lower rate than other incomes. You must apply to be financially assessed at the reduced rate. Please complete the Principal Private Residence Rental Income Application Form and return it to your local Nursing Homes Support Office. More information is on pages 20 and 21.

## Income from a directorship

We need a statement from the company or companies giving:

- the registered name of the company or companies
- the registered number of the company or companies
- the percentage of voting rights you control
- copies of accounts of the company or companies for the previous tax year
- an end-of-year statement from Revenue if you get a salary from the company or companies

## Income from fees, commissions, dividends or interest

Please give us a statement or certificate of interest or dividends.

## Income from a settlement, covenant, estate or maintenance payment

We need proof of the income received from these items including the source and the amount. If you get maintenance payments, we also need a copy of the Maintenance Agreement by Court Order stating the amount of maintenance you receive each month.

## Income from royalties and annuities

Please give us a copy of the Notice of Assessment from the Revenue Commissioners.

## Transferred income

This is any income which you may have transferred to someone else in the past 5 years. We will need a legal document such as a signed affidavit setting out the amount of money and the date it was transferred.

## Farm or business income

We need a copy of your accounts for the previous tax year or a Revenue Notice of Assessment. If you rent out property, land or a farm, we need documentation showing this income. We also need documentation showing Department of Agriculture grants.

## Other income

If you have income from any other source, please give us details and relevant documents showing this income.

## **Cash assets** – Part 3B of the Application Form

Cash assets include your savings, stocks and shares, transferred cash assets, bonds, securities, monies held in financial institutions or money you have lent to another person that is repayable to you.

## Savings and deposits

We need statements for each account for the last 6 months, showing the name of the financial institution, your name and the account number.

## Stocks, shares (including shares in a creamery or co-op), bonds, prize bonds, securities and other financial instruments

Please give us a statement showing the number of shares, stocks, bonds or securities and their current market value in Euro.

## Transferred cash assets

This is money or shares which you have transferred to someone in the last 5 years. Please give us a statement showing the date and the amount transferred.

## Other cash assets

This includes any other assets like a pension fund. For example, if you have an Approved Retirement Fund (ARF).

Please give us:

- the last annual benefit statement
- a copy of the ARF policy document
- a current statement of fund value, surrender or encashment value

## Deductions we can make to your cash assets

There are 2 types of deductions to cash assets – borrowings and qualifying redress payments.

## Borrowings

We need an up-to-date financial statement and loan agreement confirming the amount you still owe and the purpose for which you borrowed the money.

## Qualifying redress payments

If you received a redress payment from one of the schemes listed below, we can take this out of your list of cash assets. You must give us a statement from the relevant State body showing that your cash assets include one of the qualifying redress payments.

The relevant redress payment schemes are:

- Redress for Women in Certain Institutions Act 2015
- Health Repayments Scheme Act 2006
- the Lourdes Hospital Redress Scheme 2007
- the Lourdes Hospital Payment Scheme
- the Surgical Symphysiotomy ex-gratia scheme
- payments made to someone under the Conterganstiftung für behinderte Menschen due to a disability caused by Thalidomide
- Mother and Baby Institutions Payment Scheme Act 2023
- Hepatitis C Compensation Tribunal Acts 1997 to 2006
- Residential Institutions Redress Acts 2002 to 2011
- Stardust ex gratia Redress Scheme 2024 and otherwise referred to as the Stardust Redress Scheme

**Relevant non-cash assets –**
Part 3C of the Application Form

The financial assessment also takes into account your non-cash assets such as your home and any other property you may own.

## Principal residence

This refers to your home. If you own, part-own or have a life interest in your home, please give us a current valuation from a registered auctioneer or valuer. If you have a right of residence only, we need a legal document that states this.

If you rent your home, please give us a copy of the rental agreement.

Your principal residence will only be included in the financial assessment for the first 3 years of your time in care.

## Other properties or land

For other properties such as houses, land, buildings or overseas properties we need a current valuation from a registered auctioneer or valuer for each property or area of land.

## Farms and businesses

Please give us:

- a current valuation of the farm or business premises
- trading profit and loss account, capital account and balance sheet for the previous year

## Transferred assets

If you have sold or transferred a house, farm, business or other non-cash asset in the last 5 years, please give us proof of the:

- date of transfer
- market value at the time of transfer
- amount you received from the sale or transfer
- details of who the transfer was made to

## Deductions we can make to relevant non-cash assets

There is 1 deduction you may be able to make to your relevant non-cash assets – borrowings.

## Borrowings

If you have borrowed money to buy, repair or improve a property, please give us a statement from the financial institution confirming the purpose of the loan and the amount still owed.

If you have taken out a life loan (equity release loan) to buy, repair or improve a property, you must give us a statement from the financial institution showing the date the loan was taken out and the original amount borrowed.

If you are applying for the nursing home loan which is Ancillary State Support, you will also need to send us:

- a copy of the terms and conditions of the Life Loan
- the written consent of the loan provider to the creation of a second charge in favour of the HSE
- an up-to-date statement, within the last 6 months on the amount owing on the Life Loan

**Deductions** – Part 3D of the Application Form

We can deduct some expenses when calculating your weekly income.

## Health expenses

We can deduct a range of health expenses when calculating your weekly contribution. These expenses must meet Revenue guidelines on qualifying health expenses. The full list of allowable expenses is available in the Revenue Commissioners “Tax and Duty Manual – Health Qualifying Expenses”.

## Prescription charges

If you paid the medical card prescription charge, or part of the cost of your medicines through the Drugs Payment Scheme, please give us a statement from your pharmacist for the last 12 months*.

For all other qualifying health expenses, please provide a list of these for the last 12 months* including the following details and documentation:

1. Details of the health expenses
2. Amount spent by you and / or your spouse / partner
3. Evidence of payments (receipts)
4. Evidence of prescription by a Registered Practitioner (where applicable)

Income tax relief which may be claimed (20% is the standard rate as at January 2020). Example: Health expenses in 2019 were €100 and you deduct 20% tax relief (€20), meaning the allowable deduction will be €80 for the year.

If you are not liable for income tax, please state this. Please provide details of any refund which has been paid or is due to be paid to you from a health insurance provider.

*The HSE will consider health expenses for the previous tax year rather than the 12 months prior to application if you have claimed tax relief and wish to be assessed on that basis. If this is your preferred option you can give us an End of Year Statement (formerly P21) from Revenue.

## Interest on mortgage repayments

Please give us a current mortgage statement showing how much is left on the mortgage and your weekly or monthly repayments.

## Rent payment

If you pay rent and your partner / spouse will remain in the rented property when you enter long-term care, please give us one of the following:

- an up-to-date copy of your tenancy agreement
- rent receipts
- a copy of your rent book

If you rent a local authority property, please give us either:

- a letter from the local authority showing how much you pay each week
- copy of the rent receipt, if you pay through the post office

If your rent is reduced because either you or your spouse / partner is admitted to a nursing home, you must tell us.

## Maintenance payments

Please give us a copy of the current maintenance agreement and proof of payment (such as a letter from your former spouse confirming the amount and how often they receive it).

## Property tax

Please give us proof of payment / evidence of your liability for this.

## Dependent children

If you have a child under 21 or in full-time education, and have expenses relating to maintenance, child care or education of the child, please give us details of these expenses.

## Decision Support Arrangements

There are support arrangements for people who currently, or may shortly, face challenges when making certain decisions, including:

## Decision-making assistance agreement

If you require support to make certain decisions on your own, you can make a decision-making assistance agreement.

## Co-decision-making agreement

If you are unable to make certain decisions on your own, you can appoint a person to jointly make decisions with you under a co-decision-making agreement.

If you have a Co-decision-making agreement in place, please go to Part 7 of this application form on page 36, to jointly sign the application form.

## Decision-making representative

If you are unable to make certain decisions on your own even with someone else's support, an application can be made to the Circuit Court for the appointment of a decision-making representative.

Further information on decision support arrangements is available at the Decision Support Service website www.decisionsupportservice.ie

Information on how to apply for the appointment of a decision-making representative on www.courts.ie

## Nursing home loan (Ancillary State Support) – Part 5 of the Application Form

If you are applying for the Ancillary State Support, also known as the nursing home loan, we will need additional documents from you.

You must give us proof where you or your spouse / partner owns the property.

This can be:

- the folio number
- a copy of the deeds
- a copy of the lease if the property is leasehold

The following information will help you to get the documents we need to progress the nursing home loan application.

### Deeds and leases

You as the applicant or your spouse / partner may have the deeds and leases, as many people keep them in their home or with their bank, building society or family solicitor.

If you have problems finding your deeds or leases, contact the Registry of Deeds on 051 303000 or email registryofdeeds@prai.ie for help. Please make sure to get all documents associated with the deeds including indentures, leases, transfer orders and conveyances.

If the deeds are lost, you can get copies of a Memorials of Deeds and the associated documents from the Registry of Deeds office.

### Charges

If there is a mortgage, loan or judgement registered against the property, please give us one of the following:

- an up-to-date statement from the bank or building society
- a letter from the bank or building society confirming that the mortgage has been fully repaid
- a letter from your lender consenting to the HSE registering a charge on your property

### Death certificate

To get a copy of a death certificate, you can do one of the following:

- visit any Civil Registration Service (births, deaths and marriages offices)
- apply online at hse.ie
- call the General Register Office on 090 6632999

### Separation or divorce agreements

If you are legally separated or divorced, we will need documentary evidence of this such as a separation agreement or divorce decree.

## 3-year cap on farm and relevant business – Part 6 of the Application form

As part of the financial assessment under Fair Deal, you will contribute 7.5% of the value of certain assets each year towards the cost of your care for a maximum of 3 years.

You need to apply if you want your farm or relevant business to be included in the 3-year cap. For your application to be successful you need to meet some conditions to avail of the 3-year cap.

This includes the same information listed in Part 5. If your principal private residence or any other residential property is held in the same folio or deed as your land or business, you will need to submit a 'Land Registry Compliant' map outlining the portion of the property to be included in the 3 year cap application, and leaving out the principal private residence and other residential property. Page 35 has information on the requirements of this map.

### Schedule of Assets

A Schedule of Assets is a list of all real and personal property and assets owned by the person at the time of their death.

If financial support was provided at any time in respect of a deceased person or their partner, a Schedule of Assets must be submitted by the Estate or Legal Personal Representative to HSE.

The Schedule of Assets allows the HSE to check that the correct level of State Support funding was provided for the period of nursing home care of the deceased. This process involves comparing details from the completed Application Form to the Schedule of Assets at time of passing.

In the majority of cases, all funding provided is found to be correct and no further action is required from estate.

In a small number of cases a discrepancy may arise which will be reviewed. In these cases a legal personal representative must ensure that sufficient assets of the estate are retained to repay to the HSE overpayment of State Support funding made to the deceased.

# Checklist

## Supporting documents required

You must send us proof of your income and assets so that we can calculate your weekly contribution towards the cost of nursing home care.

There are also deductions you can subtract from your total income during the financial assessment.

Please use this checklist as a way to make sure you are including all of the documents needed for your application.

More information about these documents is included in the relevant sections of the application form.

### Income – Part 3A of the Application Form

- ☐ Bank statements for the last 6 months
- ☐ Pension – bank statement, An Post receipt or letter from the Department of Social Protection stating the amount paid
- ☐ Non-Irish pension – bank statement, most recent payslip or a letter from the social security agency stating the amount paid
- ☐ Occupational pension – most recent payslip or certificate of earnings
- ☐ Employment – recent payslip, a Revenue Notice of Assessment
- ☐ Rental income – copy of the rental agreement
- ☐ Income from a directorship – statement from the company or companies
- ☐ Income from fees, commissions, dividends or interest – statement or certificate of interest or dividends
- ☐ Income from a settlement, covenant, estate or maintenance payment
- ☐ Income from royalties and annuities
- ☐ Transferred income – legal document such as a signed affidavit
- ☐ Farm or business income – copy of your accounts
- ☐ Other income

### Cash assets – Part 3B of the Application Form

- ☐ Savings and deposits – statements for each account for the last 6 months
- ☐ Stocks, shares (including shares in a creamery or co-op), bonds, prize bonds, securities and other financial instruments – statements
- ☐ Beneficial interest - more info on page 23
- ☐ Transferred cash assets – statements
- ☐ Other cash assets – such as last annual benefit statement

### Documents to support deductions to your cash assets

- ☐ Borrowings – up-to-date financial statement and loan agreement
- ☐ Qualifying redress payments – statement from the relevant State body

### Relevant non-cash assets – Part 3C of the Application Form

- ☐ Principal residence – legal document
- ☐ Other properties or land – current valuation from a registered auctioneer or valuer
- ☐ Farms and businesses – current valuation and account details
- ☐ Transferred non-cash assets – proof of transfer

### Deductions – Part 3D of the Application Form

- ☐ Health expenses – records of expenses
- ☐ Prescription charges – copies of prescription charges or receipts
- ☐ Interest on mortgage repayments – current mortgage statement
- ☐ Rent payment – rent receipts
- ☐ Maintenance payments – current maintenance agreement and proof of payment
- ☐ Property tax – proof of payment
- ☐ Dependent children – details of expenses such as maintenance and education

### Documents to support deductions to your non-cash assets

- ☐ Borrowings – statements

### Nursing home loan (Ancillary State Support) – Part 5 of the Application Form

- ☐ Proof that you own the property

### The following information will help you to get the documents we need to progress the nursing home loan application:

- ☐ Deeds and leases
- ☐ Charges on the property
- ☐ Death certificate
- ☐ Documentary evidence of separation or divorce

### 3-year cap on farm and relevant business – Part 6 of the Application form

- ☐ All documents listed in Part 5 of this checklist.
- ☐ If PPR or other residential property is held within the same folio/deed as land/ business – original land registry compliant maps outlining land/business portion only

# After you have sent your application form

## What do I do if I do not qualify for long-term nursing home care?

If you do not qualify for long-term nursing home care, you must wait 6 months before you can apply again. If there is a change in your health or circumstances you can apply before the 6-month waiting period ends.

## What do I do if my circumstances change while I am in care?

You must tell us if you or your partner / spouse's circumstances change. Changes in circumstances include:

- the death of partner / spouse
- an increase in income for you or your spouse / partner
- an increase in dividends from shares
- any extra rental income or rental of your home or properties
- the sale of an asset
- legal settlement / receipt of compensation
- an increase in cash assets
- an addition to relevant assets such as an inheritance or beneficiary in a will
- legal separation

If you do not inform your local Nursing Homes Support Office of changes in circumstances within 10 working days, this may affect your funding received. You can also be fined if you don't notify your Nursing Homes Support Office of any changes.

## Can I appeal decisions on my application for the Nursing Home Support Scheme?

Certain decisions of the HSE may be appealed within 40 working days of the original decision being given to you.

Decisions which may be appealed include:

- the result of your care needs assessment
- the HSE's decision not to consider an application for State Support
- the HSE's decision not to carry out a financial assessment
- the result of an application for State Support
- the result of an application for the nursing home loan
- the result of a review

Appeals will be considered by suitable people who are appointed by the HSE with the consent of the Minister. The outcome of an appeal may be further appealed to the High Court on a point of law. You may also take your case to the Office of the Ombudsman.

## Who do I contact if I need help?

If you have read the information in this booklet and need further help, please visit hse.ie/nhss or contact your local HSE Nursing Homes Support Office listed on page 37.



You have completed your application form and sent it to one of the Nursing Homes Support Offices on page 37.



Your application is received by our offices.



Our staff will ensure your form is processed. We understand this is a difficult time and we will review your application as soon as we can.



Processing forms can take some time depending on your individual circumstances but will be treated with compassion and support.

# Part 1 – Applicant's details

## Notes to help you to complete Part 1

### People who lack capacity to make decisions in relation to this application form

If you are unable to apply for nursing home support yourself, the following may apply on your behalf:

- your spouse or partner
- your child, if over 18 (including a step-child)
- a registered medical practitioner
- a registered nurse
- a registered social worker
- the Committee of a Ward of Court
- a person(s) appointed under a Registered Enduring Power of Attorney
- a Decision-Making Representative appointed by Court Order

Please use BLOCK CAPITALS and tick the boxes that apply

(The applicant is the person who may need care)

First name:

Surname:

Other names:

Date of Birth: D D M M Y Y Y Y

Daytime Phone:

Gender: Male: ☐ Female: ☐ Other: ☐

PPS Number (mandatory):

Email address:

Birth surname: (If different from above)

If in hospital / nursing home please state date of admission:

**Date received**

*(For Official Use Only)*

Are you ordinarily resident in Ireland? (for at least a year) Yes ☐ No ☐

Home Address: (Please include Eircode)

Eircode:

Current address if different from home address: (living with relative, or in hospital / nursing home) (Please include Eircode)

Eircode:

Have you and/or your spouse/ partner ever lived abroad Yes ☐ No ☐

**Relationship Status – Please choose only one of the following:**

Couple ☐ You are married and living together / co-habiting

If co-habiting, please state the number of years you have been co-habiting with your partner

Single ☐ Not married / not living as part of a couple / share a home with another adult, e.g. a sibling or a friend

Widow/er ☐ If "yes" please include a copy Death Certificate of spouse if applying for the nursing home loan under Part 5A

Separated / Divorced ☐ You were married but are now separated or divorced and living apart from your former spouse

Spouse / partner's Full Name:

PPSN: (mandatory) Date of Birth: (mandatory)

If you are in a couple, is your spouse / partner in long-term care? Yes ☐ No ☐

If yes, please provide the following information:

Name of Residential/Nursing Home:

Weekly Contribution for Care: €

Type of Care:

- ☐ NHSS
- ☐ Public nursing home
- ☐ Private nursing home
- ☐ Other

Please specify:

## Part 1

Have you or your partner (living or deceased) previously applied for support under the State Support scheme? Yes No

If yes, when (if known)

Do you currently hold a Medical Card, GP Visit Card, Health Amendment Card*, Long Term Illness Card or a Drugs Payment Scheme Card? Yes No

If yes, please supply the Number (if known)

***If you have a Health Amendment Card, please contact your local Liaison Officer before proceeding with this application**

Do you have a co-decision-making agreement registered with the Decision Support Service? Yes No

Does your spouse/partner have a co-decision-making agreement registered with the Decision Support Service? Yes No

**If you have answered "yes" to either of the last two questions, then the co-decision-maker will need to complete Part 7 of this application form.**

We understand that you may wish to have some help or support from a friend, relative, decision-making assistant or co-decision-maker in making this application and gathering documentation. If you do, please provide contact details for them here:

| | | | |
|---|---|---|---|
| Name: | | | |
| Address: | | | |
| | | Eircode: | |
| Relationship to Applicant: | | Tel No: | |
| Mobile No: | | Email Address: | |

Please note that in nominating a friend, relative (or you have a decision-making assistant/co-decision-maker or a decision making representative), you consent to them receiving documentation on your care needs and financial assessments.

If you wish we can send the correspondence directly to you, the applicant, at the address provided in this application form. Or if you prefer, we can send the correspondence to your nominated person at the address provided.

Please indicate below where you would like your correspondence posted to by ticking the relevant box below:

Applicant ☐

**or**

Nominated person ☐

If you wish to change the contact for correspondence address in the future please contact your local HSE Nursing Homes Support Office.

Please provide details of your legal representative / solicitor (if you have one) if known

| | | |
|---|---|---|
| | | |
| | | |
| | Tel No: | |

## Part 1

# Part 2 – Application for care needs assessment

## Notes to help you to complete Part 2

### What is a care needs assessment?

The care needs assessment helps us to see if you need long-term nursing home care. When we receive your completed application form we will arrange for a care needs assessment. This assessment could be in a hospital or in your home.

A healthcare professional, such as a doctor, public health nurse or occupational therapist, will do your assessment.

They will look at:

- your ability to do everyday activities like bathing, shopping, dressing and moving around
- how you use any health and personal care services such as a home care assistant or nurse
- the family and community support available to you
- your own wishes and preferences

The assessment may include a physical examination by a healthcare professional.

The person doing the assessment writes a report. We will use this report to decide if long-term nursing home care is the best option for you. You may be asked for more information to complete the care needs assessment, such as a referral from your GP. It is important you provide this as soon as possible to complete your application.

We will write to you when a decision has been made on your care needs. You will also receive a copy of the report and the reasons for the decision.

### What is a specified person?

If you have a lack of capacity to make certain decisions, a specified person may act on your behalf in relation to the following items under the Nursing Homes Support Scheme Act 2009:

(a) an application for a care needs assessment
(b) a further application for a care needs assessment
(c) an application for State Support
(d) notifying the HSE of a material change in circumstances of the person provided with financial support
(e) a request for a review under section 30 of the Act
(f) an appeal under section 32 of the Act against a decision of the HSE
(g) to supply any information that the HSE may request, and communicate with the HSE, in relation to any of the matters referred to in points (a) to (f) above

A specified person under the Nursing Homes Support Scheme is:

- your spouse or partner
- your child, if over 18 (including a step-child)
- a registered medical practitioner
- a registered nurse
- a registered social worker

Please note that the HSE may refuse to deal with a specified person if it is not satisfied that the specified person is acting in the best interests of the applicant

## Part 2A – To be completed by the person who may need care services

I, (insert full name)

hereby apply for a care needs assessment under the Nursing Homes Support Scheme.

I have read the data protection notice on page 38.

Signed: Dated: D D M M Y Y Y Y

## Part 2B – To be completed when a person needing care is unable to apply for a care needs assessment on their own behalf

I, (insert full name)

hereby apply for a care needs assessment under the Nursing Homes Support Scheme on behalf of the applicant who it appears may need care services and is unable to make an application on his/her own behalf by reason of ill-health, physical disability or a mental health condition. I understand and undertake to act in accordance with the principles, powers, obligations and duties imposed on me by the Nursing Homes Support Scheme Act, 2009.

I make this application as (tick correct box):

- ☐ spouse or partner
- ☐ child of applicant, if over 18 (including a step-child)
- ☐ a registered medical practitioner
- ☐ a registered nurse
- ☐ a registered social worker
- ☐ the Committee of a Ward of Court*
- ☐ a person(s) appointed under a Registered Enduring Power of Attorney*
- ☐ a Decision-Making Representative appointed by Court Order*

Signed:

Dated: D D M M Y Y Y Y

Address:

Eircode:

Tel:

Email:

**(*Please enclose documentary evidence)**

**Part 2**

# Part 3 – Details of income, assets and deductions

## Notes to help you to complete Part 3

### Financial assessment: Your payment towards care

The amount you pay towards your nursing home fees depends on your:

- income – money you receive on a regular basis
- assets – your savings, investments and property

If you have little income and assets, you pay less. If you have more, you pay more.

You must send us proof of your income and assets so that we can calculate your weekly contribution towards the cost of nursing home care.

For example:

- bank statements
- pension statements
- proof of social welfare payments
- deeds of property, including full copy of lease, if applicable

There are also deductions you can subtract from your total income during the financial assessment.

The amount your nursing home charges does not matter. Your contribution will stay the same and we will pay the balance.

If you own assets such as property or land, 7.5% of their value will go towards the cost of your care each year. If you are part of a couple then 3.75% of their value will go towards the cost of your care each year.

## Part 3A – Details of income

If you are part of a couple please supply details for your spouse / partner. Please include documentary evidence of all income, for example pension payslip. Your net weekly income should be provided, which means your weekly income after tax, PRSI or other deductions have been deducted.

| **Income** | **Amount per week** Applicant | Spouse / partner |
|---|---|---|
| Department of Social Protection pension/allowance/benefit | € | € |
| Any other non-Irish pension | € | € |
| Occupational pension. *Please include a copy of your pension slip* | € | € |
| Employment, trade, profession or vocation (including for part time work) *Please include a copy of a payslip, P60 or P21* | € | € |
| Income from rentals (in the State or otherwise) | € | € |
| Income from holding an office or directorship | € | € |
| Income from fees, commissions, dividends, interest or income of a similar nature | € | € |
| Rental income from Principal Private Residence (PPR) | € | € |
| Rental Income from non-PPR | € | € |
| Payments under a settlement, covenant, estate or a payment in respect of maintenance | € | € |
| Income from royalties and annuities | € | € |
| Income that was transferred from you to another person within the last 5 years | € | € |
| Farming/Business Income. *If income arises from a Farm or Business please attach tax assessment from Revenue, accounts in respect of same for the previous tax year and details of any Department of Agriculture payments* | € | € |

## Income, assets and deductions

You will need to tell us about regular income and any property you own. If we don't have all this information your application will be delayed.

## Income

We look at both you and your partner / spouse's income. This includes:

- earnings
- pension
- social welfare benefits and allowances
- rental income
- income from holding an office or directorship
- income from fees, commissions, dividends or interest
- income you deprived yourself of in the 5 years before your application

You will pay 80% of your assessable income (or 40% if you are part of a couple) towards the cost of your care. Assessable income is your total income minus allowable deductions. See page 22 for more information on what you will pay.

The assessment won't include your relatives' or children's income. It will include your partner / spouse's income.

## Rental Income - Principal Private Residence

Anyone who is in nursing home care through the Nursing Home Support Scheme and is renting their principal private residence may be eligible for assessment of this income at a lower rate.

There are certain criteria that must be met including the principal residence must be registered with the Residential Tenancies Board (RTB). To apply for this reduction you must complete the Principal Private Residence Rental

Part 3

Please list any other income:

| | | |
|---|---|---|
| | € | € |
| | € | € |
| | € | € |

| **Please supply:** | Applicant | Spouse / partner |
|---|---|---|
| PPS number (mandatory) | | |
| Residential Tenancies Board reference number | | |

## Part 3B – Details of cash assets

Please give details of all cash assets, giving the total balance amounts for you and your spouse or partner. Please provide documentary evidence of cash assets, for example recent bank statements.

| **Savings, Deposits and Current Accounts** (please give total balance amount) | Applicant | Spouse / partner |
|---|---|---|
| Bank | € | € |
| Online Bank account | € | € |
| Credit Union | € | € |
| Post Office | € | € |
| Other (please specify) | € | € |

**Approved Retirement Funds (ARFs), Approved Minimum Retirement Fund (AMRFs), shares, bonds, securities, life insurance/life assurance policies etc. that have an encashment value / surrender value at date of application which is assessed.**

| | | |
|---|---|---|
| | € | € |
| | € | € |
| | € | € |
| | € | € |
| Money loaned to another person which is repayable | € | € |

Income application form. For further details and the applcation form see hse.ie/rentalincomeforyourhome

## Assets

Assets include, but are not limited to, cash, property, investments, and money owed to another person which is repayable. This includes assets outside Ireland. You will also pay 7.5% (3.75% if you are part of a couple) of your assets such as land or property. See page 22 for more information.

Two types of assets are considered:

- cash assets
- non-cash assets

Total cash assets transferred to another person within 5 years of your first Nursing Homes Support Scheme application (cash, savings, deposits, shares, bonds, securities, life insurance, life assurance policy etc.)

| | | |
|---|---|---|
| | € | € |

If any of the transferred assets have been returned, please state the total amount returned

| | | |
|---|---|---|
| | € | € |
| | € | € |

Other cash assets

| | | |
|---|---|---|
| | € | € |

## Part 3C – Details of non-cash assets

Non-cash assets means all forms of property, land or valuables owned by you and your spouse or partner, whether within the State or outside. Please include documentary evidence of assets, values and any outstanding balances on loans.

**Principal Residence**
Home Address

Eircode:

Please indicate if you are the owner / joint owner / tenant / lodger / local authority tenant purchaser / other *(please specify)*

If you own or partly own your property, please provide the current market value of your home.
*(Please supply a Certificate of Market Value from an auctioneer or a valuer)*

€

| | Monthly loan repayment | Outstanding balance on loan |
|---|---|---|
| Indicate loan repayments (amount per month) and outstanding balance on same *(include latest available statement of loan)* | € | € |
| Please specify loan type of outstanding balance for example mortgage, life loan, credit union, other | | |

| **Other non-cash assets (property, land, farm, business etc.)** *Please provide details (including address if appropriate)* | Value in € for applicant and spouse / partner | Outstanding balance on loan |
|---|---|---|
| | € | € |
| | € | € |
| | € | € |

*Please supply a Certificate of Market Value from an auctioneer or a valuer.*
*Please supply details of any mortgage*

## Cash assets include:

- savings and deposits including those with banks, credit unions or post offices, singly or jointly held as applicable
- stocks, shares, bonds, securities and other financial instruments
- approved retirement funds (value of fund at date of application)
- money loaned by you to another person
- cash assets transferred to another person within the last 5 years

## Non-cash assets include:

- your home, if you own or part-own it (included for 3 years only)
- any property you own
- any land you own
- businesses
- overseas land and property

## Transferred assets

The financial assessment includes any assets you have transferred:

- in the 5 years before the date of your first application
- on or after the date of your first application

If you have given any land, property or money to another person in the last 5 years or 5 years prior to your first application, you will need to tell us. You will also need to tell us if you transfer any property, money or land after you make an application, and also provide the date of transfer.

**3-year cap farm and business assets:**
If you wish to apply for the 3-year cap on a farm or business asset see Part 6 for information and application details

**Transferred assets**
*Please supply details of any non-cash assets (property/land) sold or transferred to another person within 5 years of your first Nursing Homes Support Scheme application*

| Asset details | Date of transfer | Value at time of sale or transfer € | Amount received from sale / transfer € | If transferred, to whom? |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

*Please supply documentary evidence of the amount received or the market value of asset at the time of sale / transfer*

## Part 3D – Allowable deductions

Some expenses may be deducted from your income for this assessment. Please give details of allowable deductions.

| | Amount per year | |
|---|---|---|
| | Applicant | Spouse / partner |
| Health expenses (such as. doctors' fees, pharmacy costs, prescription charges) | € | € |
| Interest on loans related to your principal residence | € | € |
| Rent payments (If you live in rented accommodation) | € | € |
| Maintenance payments to another person | € | € |
| Levies required by law to be paid, for example, property tax | € | € |

## Deductions

You can subtract allowable deductions from your total income during the financial assessment to get what is called your assessable income:

- income tax, PAYE, Universal Social Charge and PRSI
- health expenses (GP visits, prescription charges, medicines and medical expenses after tax refund)
- maintenance payments to other people
- interest on loans on your home
- levies required by law to pay such as property tax
- a dependent child in full-time education

## Beneficial interest

You must provide details, including a valuation, of all assets in which you have a beneficial interest. You might enjoy the benefit of a property or other asset even if you are not the "registered owner". For example, you might have a life interest in an asset or you might be a person who enjoys or is entitled to the benefit of property (on your own right rather than on behalf of someone else). If so, then you have a beneficial interest in the property. The details of a beneficial interest must be included in the application. A beneficial interest is an asset and will be assessed when a financial assessment is carried out.

Please note that if a person knowingly gives false or misleading information in connection with an application for State support, he/she is guilty of an offence and is liable on summary conviction to a fine not exceeding €5,000 or imprisonment for a term not exceeding 3 months or both. In cases where a person does not disclose or makes a misstatement in respect of the amount or value of income / assets and receives a greater amount of State Support than would have been the case if there had been disclosure or no misstatement, the overpayment must be repaid by the person on demand and may be recovered by the HSE as a simple contract debt from the person or estate of that person.

Please note that the personal representative of a deceased person is legally obliged as soon as practical but in any case not less than 3 months before any distribution of assets of the estate of the person, to give the HSE (a) a schedule of assets that is applicable to the estate of the deceased person and (b) notice in writing of the representatives intention to distribute the assets.

Please note that it is necessary to submit a **schedule of assets** to the HSE where a deceased person received financial support under the Nursing Homes Support Scheme. A schedule of assets is a list of all property and assets owned by the person at the time of their death. Under the Nursing Homes Support Scheme Act 2009, the personal representative is legally obliged to send the HSE a copy of this schedule of assets document.

Please note that the schedule of assets is used to review income and asset application details declared to ensure the correct amount of State Support was paid. A personal representative who does not retain sufficient assets of the estate to repay any amount due and payable to the HSE will be held personally liable for that amount.

**The amounts on page 22, part 3D should be provided annually, net of Tax Relief.**

**The HSE will require evidence of these deductions during your assessment.**

Borrowings in respect of your principal residence (where you also choose to avail of this deduction, you cannot offset the same borrowings against the value of the asset)

| € | € |
|---|---|

Please provide documentary evidence of borrowings.

**Do you wish to claim an allowable deduction in respect of a dependent child / children under 21 or in full-time education**

Yes ☐ No ☐

Please provide documentation for verification on your dependant's name(s), date(s) of birth and full-time education status.

# Part 4 – Application for State Support

## Notes to help you to complete Part 4

### How much you will need to pay

Having looked at your income and assets, the financial assessment will work out your contribution towards your care. You will contribute 80% of your assessable income (or 40% if you are part of a couple) and 7.5% of the value of any assets (or 3.75% if you are part of a couple) per annum. However, the first €36,000 of your assets, or €72,000 for a couple, will not be counted at all in the financial assessment.

If your assets include your land and property, you can defer paying the 7.5% contribution based on this by applying for an optional nursing home loan.

If you sell an asset, such as your home, while you are in care, the net proceeds of the sale become a cash asset and this will qualify for the 3-year cap. You will need to pay a contribution of 7.5% based on this cash asset. See page 30 for more information about the 3-year cap.

You can request another financial review 12 months after your last review. However, the HSE may review a financial assessment at any stage.

You must tell the Nursing Homes Support Scheme Office about any sale. You must do this within 10 working days of the sale. This is so we can carry out a new assessment of the amount you pay. Please see contact details for local Nursing Homes Support Offices on page 37.

### Client contribution

As well as your completed application form, you must send us proof of your income and assets so that we can calculate your weekly contribution towards the cost of nursing home care. This is called a financial assessment.

The financial assessment looks at your income and assets in order to work out what your contribution towards your care will be. The HSE will then pay the balance of the cost of your care. For example, if the cost of your care was €1,000 and your weekly contribution was €300, the HSE will pay the weekly balance of €700.

There are important safeguards built in to the financial assessment which are worth noting:

(a) Nobody will pay more than the actual cost of care

(b) You will keep a personal allowance of 20% of your income or 20% of the maximum rate of the State Pension (Non-Contributory), whichever is the greater

**Please read the following and then sign either Part 4A or 4B as appropriate**

As part of this application, the HSE will make arrangements for a care needs assessment and a financial assessment to be carried out. Any organisation with information relevant to the applicant's care needs may provide the HSE with this information. The content of the care needs assessment report may be provided to, or shared with, relevant health professionals, if required. All required information which the HSE may request in connection with the consideration of this application will be provided. To process this application the HSE may seek limited access to social welfare data to confirm details of the applicant, their spouse / partner and any dependants. The signature below indicates consent to this access. The applicant must report to the HSE, within 10 working days, any changes in his / her or their spouse / partner's circumstances which may affect entitlement to financial support.

The signature below also indicates your consent to the terms of the data protection notice at page 38.

Where a client is in receipt of State Support, a schedule of assets list must be provided to the HSE as per Section 27 of the Nursing Homes Support Scheme Act 2009. This requirement is only provided after the State Support funding is no longer required.

## Part 4

(c) If you have a spouse / partner remaining at home, he/she will be left with 50% of the couple's income or the maximum rate of the State Pension (Non-Contributory), whichever is the greater

(d) If both members of a couple enter nursing home care, they each retain at least 20% of their income, or 20% of the maximum rate of the State Pension (Non-Contributory), whichever is the greater

## Couples and the financial assessment

If you have a spouse or partner, the financial assessment will look at both your incomes and assets.

A couple is:

- a married couple
- an opposite or same-sex couple who are living together as life partners for at least 3 years

When you are part of a couple applying for the Nursing Homes Support Scheme, half of the couple's total income will be assessed.

## Couples and applying for a nursing home loan

If either spouse or partner has a lack of capacity to make decisions in relation to an application under the Nursing Homes Support Scheme, the other spouse or partner will need to be one of the following:

- the Committee of a Ward of Court
- a Person(s) appointed under a Registered Enduring Power of Attorney
- a Decision-Making Representative appointed by Court Order

## Part 4A – To be completed by the person who needs care services

I hereby apply for State Support under the Nursing Homes Support Scheme. I have read Part 4 above, and the data protection notice on page 38 and I say that the information given by me on this form is correct to the best of my knowledge and belief.

Signed:

Dated: D D M M Y Y Y Y

## Part 4B – To be completed only where the person who may need care services does not have capacity to make decisions in relation to the application

I, (insert name)

hereby apply for State Support under the Nursing Homes Support Scheme

on behalf of (persons name)

I make this application as (tick correct box):

- ☐ spouse or partner
- ☐ applicant's child, over 18 years of age (including a step-child)
- ☐ a registered medical practitioner
- ☐ a registered nurse
- ☐ a registered social worker
- ☐ the Committee of a Ward of Court*
- ☐ a Person(s) appointed under a Registered Enduring Power of Attorney*
- ☐ a Decision-Making Representative appointed by Court Order*

I have read Part 4 of this form and I say that the information given by me on this form is correct to the best of my knowledge and belief.

Signed:

Dated: D D M M Y Y Y Y

***(*Please enclose documentary evidence)***

# Part 5 – Nursing home loan (Ancillary State Support)

## Notes to help you to complete Part 5

### What is the nursing home loan?

The nursing home loan is an optional element of the Nursing Homes Support Scheme for people who own property / land-based assets in the State. Instead of paying your full weekly contribution for your care from your own means, you can choose to apply for a Nursing Home Loan, to cover the portion of your contribution which is based on your property / land-based assets within the State. With a nursing home loan, paying for care can be deferred until after the person is deceased, using these assets to secure the loan.

The nursing home loan can be applied for during the initial application stage or anytime when you become a resident in a nursing home. Applying for the optional nursing home loan during initial application will ensure that your loan and Fair Deal funding are approved from the same date. You can apply for the optional nursing home loan and if you are approved, you do not have to avail of it if you change your mind.

You may therefore wish to seek **independent legal advice** before you apply for a nursing home loan (Ancillary State Support). However, please note that there is no requirement on you to do so.

**Repaying the nursing home loan**

The nursing home loan will need to be repaid to the Revenue Commissioners within 18 months after the death.

**Part 5**

## Part 5A – Application for a nursing home loan (Ancillary State Support)

*To be completed by the person needing care or their representative*

I / We hereby apply for and request payment of the Ancillary State Support (nursing home loan) under the Nursing Homes Support Scheme Act, 2009 ("the Act") in respect of the following property / land-based asset(s) within the State. I / We acknowledge that payment of Ancillary State Support results in the creation of a charge in favour of the HSE (which by virtue of the Act is deemed to be a mortgage made by deed) against the interest of the person to whom payment relates and of the partner of that person in such land as is specified in the request for payment of the Ancillary State Support (nursing home loan). I / We consent to the creation of a charge in favour of the HSE over the asset(s) listed below.

| | 1st Property | | 2nd Property |
|---|---|---|---|
| Details of Asset: | | Details of Asset: | |
| House No./Name: | | House No./Name: | |
| Street: | | Street: | |
| Town/City: | | Town/City: | |
| County: | | County: | |
| Folio Number (if known): | | Folio Number (if known): | |
| Eircode: | | Eircode: | |

*(Please provide documentary evidence of the title to the property, such as copy land registry Folio / copy Title Deeds / copy lease / copy conveyance. If the property is leasehold a copy of the lease must be provided)*

| | | | |
|---|---|---|---|
| Signed: | *(Applicant)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |
| Signed: | *(Partner / Spouse)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |
| Signed: | *(Person signing on behalf of Applicant)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |
| Signed: | *(Person signing on behalf of Partner / Spouse)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |

**If you are signing as a Committee of a Ward of Court, an Attorney under a registered Enduring Power of Attorney, or a Decision-Making Representative appointed by the Court, please provide evidence of your appointment.**

You will need to repay the loan immediately if:

- you sell or transfer your property. You must notify your local Nursing Homes Support Office within 10 working days of the sale or transfer
- you or your spouse or partner declare bankruptcy
- you provide false information in the application

**You can voluntarily repay this any time before death.**

The nursing home loan is repayable to the Revenue Commissioners and not the HSE.

Further information is available on how to make payments can be found on Revenue's website.

If a client wishes to voluntarily repay the nursing home loan (Ancillary State Support) provided under the Nursing Homes Support Scheme Act 2009 before the occurrence of a Relevant Event, they should contact their local Nursing Homes Support Office. The office details are on page 37.

We will notify the relevant person when the loan repayment is due. The final loan amount will have the relevant Consumer Price index (CPI) number applied to it to take account of the time value of money since the loan was made. This is required by law and may increase in line with inflation or decrease in line with deflation. The **Consumer Price Index** is applied to the amount due.

After the death of the person in care, the loan must be repaid within 18 months to the Revenue Commissioners. If the loan is not repaid within 18 months, interest will be applied. The interest will start from the date of death.

If the property is sold or transferred when a person is still in care, the loan must be repaid within 6 months of the date of sale or transfer. If the loan is not repaid within 6 months interest will be charged.

The person who is responsible for repayment of the nursing home loan to the Revenue Commissioners is called the **"relevant accountable person"**. The relevant accountable person may be a different person to the applicant, depending on the circumstances as set out in the following examples:

**Example 1:** Where you transfer or sell part or all of your property, during your lifetime, you and your spouse / partner will be the relevant accountable persons.

**Example 2:** Where the loan is repayable after the applicant's death the personal representative of the deceased person is the relevant accountable person. A person who inherits or has an interest in the property or any part of it can also be held accountable for repayment of the loan.

Name(s) of any other person(s) residing at the applicant's principal residence at date of application

| | | | |
|---|---|---|---|
| | *Number of years residing at applicant's principal residence* | | |
| | *Number of years residing at applicant's principal residence* | | |
| | *Number of years residing at applicant's principal residence* | | |
| | *Number of years residing at applicant's principal residence* | | |
| | *Number of years residing at applicant's principal residence* | | |
| | *Number of years residing at applicant's principal residence* | | |

Relevant Accountable Person Details

| | |
|---|---|
| Name: | |
| Address: | |
| | |
| Tel No: | |
| Eircode: | |

PPSN:

The Revenue Commissioners require the above details of the Relevant Accountable Person for the repayment of the nursing home loan.

A person who knowingly or recklessly gives the HSE information which is false or misleading in connection with an application for financial support is liable on conviction to a fine and / or imprisonment.

**Part 5**

### Deferring repayment of the nursing home loan

Repayment of the nursing home loan can be deferred in certain cases. An application will need to be made to the National Nursing Homes Support Office.

People who may apply for a deferral include:

- your spouse or partner
- your child under the age of 21 (or your spouse / partner's child)
- your child if their assets do not exceed €36,000
- your sibling if their assets do not exceed €36,000
- a relative in receipt of a disability or similar allowance, blind person's pension, or the State pension (non-contributory), or whose income doesn't exceed the State pension (contributory)
- a relative who is in receipt of a foreign pension or allowance similar to those outlined above
- a relative who owns a building to which the principal residence is attached (for example 'a granny flat')
- any person who cared for the person in care prior to the latter entering the nursing home (this is defined by relevant social welfare payments such as carer's allowance)

## Part 5B – Consent of joint owner(s)

**Any person(s) who jointly owns a property with the applicant is requested to sign this section.**

| | |
|---|---|
| I / we (insert full name) | |
| and | |
| and | |
| and | |
| and | |

(the joint owner(s) of the asset(s) listed below), hereby give my / our prior written consent to the creation of a charge in favour of the HSE under the Nursing Homes Support Scheme Act, 2009 ("the Act") in respect of the following property / land-based asset(s) within the State. I / we acknowledge that payment of Ancillary State Support results in the creation of a charge in favour of the HSE (which by virtue of the Act is deemed to be a mortgage made by deed) against the interest of the person to whom payment relates and of the partner of that person in such land as is specified in this request for payment of Ancillary State Support.

| | 1st Property | | 2nd Property |
|---|---|---|---|
| Details of Asset: | | Details of Asset: | |
| House No./Name: | | House No./Name: | |
| Street: | | Street: | |
| Town/City: | | Town/City: | |
| County: | | County: | |
| Folio Number (if known): | | Folio Number (if known): | |
| Eircode: | | Eircode: | |

Individuals other than a spouse or partner are termed ‘connected persons’. They must satisfy the following conditions:

- the house must be their only residence
- they must have lived in the house for not less than 3 years preceding the original application for the nursing home loan
- they must not have an interest in any other property

The deferred loan must be repaid within 18 months of the date of death of the person who was approved for the deferral of the loan.

If circumstances of the connected person change, the loan must be repaid. For example, if the property is sold or they no longer live in the house, the loan must be repaid within 6 months.

The connected person must notify the National Nursing Homes Support Office of any change in circumstance on 057 931 8404 or email relevant.eventNHSS@hse.ie

Where the home, farm, business or other asset is owned by more than one person, the HSE requests all joint owners to fill in Part 5B of this form.

| | | | |
|---|---|---|---|
| Signed: | *(Joint owner)* | Dated: | D D M M Y Y Y Y |
| Signed: | *(Joint owner)* | Dated: | D D M M Y Y Y Y |
| Signed: | *(Joint owner)* | Dated: | D D M M Y Y Y Y |
| Signed: | *(Joint owner)* | Dated: | D D M M Y Y Y Y |
| Signed: | *(Applicant)* | Dated: | D D M M Y Y Y Y |

**The absence of prior consent in writing of a joint owner does not render void the making of a charge in favour of the HSE.**

# Part 6 – 3 Year Cap on farms and relevant business

## Notes to help you to complete Part 6

### The 3-year cap

As part of the financial assessment under Fair Deal, you will contribute 7.5% of the value of certain assets each year towards the cost of your care for a maximum of 3 years.

This is known as the 3-year cap.

These assets can include:

- your home
- the proceeds of the sale of your home
- your farm or relevant business

The 3-year cap applies whether you choose to take out a nursing home loan or not. You can find out more at hse.ie/nhss

Your home will automatically be removed from your financial assessment after you have been in care for 3 years. You do not need to do anything.

**If you sell your home while in care**

If you sell your home while you are in care, the net proceeds of sale will also qualify for the 3-year cap.

- You need to contact your local Nursing Homes Support Office if you sell your home. Contact details are provided on page 37.

### Farms and relevant business

You need to apply if you want your farm or relevant business to be included in the 3-year cap. For your application to be successful you need to meet certain conditions listed on page 31.

## Part 6A – Application for appointment of family successor: Farm / relevant business

*To be completed by the person needing care or their representative*

I / we (insert full name)

and

apply for and request the appointment of the person named below as a family successor under the Nursing Homes Support Scheme (Amendment) Act 2021 in respect of the property and land-based assets listed in Part 6B.

**Note:** If you have more than one asset and wish to appoint more than one family successor in respect of your assets you will need to complete a separate application for each.

Name:

Address:

Eircode:

Tel No:

Mobile No:

Email:

Date of Birth: D D M M Y Y Y Y

PPSN:

Relationship to person in care:

Please sign your consent on the next page.

Part 6

These conditions include:

- you must apply to us to appoint your family successor who will commit to running the farm or business for at least 6 years
- your farm or relevant business must have been actively run by you, your spouse / partner or your proposed family successor for at least 3 of the last 5 years prior to entering long-term care.
- a charge in favour of the HSE will be placed on the chargeable property of a business or farm

## Appointing a family successor

You need to apply to us using this application form to appoint your family successor. Your family successor must be aged 18 or older and be either your spouse / partner, your relative or your spouse / partner's relative.

A relative is either a:

- child
- grandchild
- brother or step-brother
- sister or step-sister
- uncle
- aunt
- nephew or niece
- son-in-law or daughter-in-law
- parent or step-parent
- great-nephews and great-nieces
- great-grandchildren,
- first cousins, or a child, grandchild or great-grandchild of a first cousin

of either the person going in care or their partner

The person named on the previous page has provided a statutory declaration that if appointed as a family successor a substantial part of their working time will regularly and consistently be applied to running the family asset for a period of 6 years beginning on the date of appointment.

| | | | |
|---|---|---|---|
| Signed: | *(Applicant)* | Dated: D D M M Y Y Y Y | PPSN: |
| Signed: | *(Partner / Spouse)* | Dated: D D M M Y Y Y Y | PPSN: |
| Signed: | *(Person signing on behalf of Applicant)* | Dated: D D M M Y Y Y Y | PPSN: |
| Signed: | *(Person signing on behalf of Partner / Spouse)* | Dated: D D M M Y Y Y Y | PPSN: |

If you are signing on behalf of the applicant or the applicant's partner or spouse, please supply documentary evidence of your appointment.

**If the asset is a transferred asset the following must be completed by each owner of the transferred asset.**

I / we (insert full name)

of (first line of address)

in the County / City of Eircode:

the owner(s) of the asset(s) referred to in Part 6B hereby consent to:

(a) the making of the application for the appointment of a family successor, and

(b) the creation of a charge over the asset(s) specified in Part 6B.

| | | |
|---|---|---|
| Signed: | | Dated: D D M M Y Y Y Y |
| Signed: | | Dated: D D M M Y Y Y Y |

Part 6

**How to appoint your family successor**

You will need to complete Part 6 of this application form.

You will need to provide supporting documents, including signed statutory declarations (affidavits). Statutory declarations are available on hse.ie/nhss

Apply to appoint your family successor as soon as you can. This is so your family successor can begin the 6-year period they must commit to running your farm or relevant business. This commitment begins from the day that they are formally appointed by us. Your family successor cannot be appointed until you are in care.

We will review your appointed family successor to make sure that they comply with the conditions of the scheme. This review can be done at any time, over the 6-year period.

You can appeal any decisions that we make. To make an appeal, please contact the National Appeals Office, email nationalappeals@hse.ie

## If you've legally transferred your farm or relevant business to a family successor

You still need to apply to the HSE to appoint a family successor through the scheme. Do this even if you have legally transferred your farm or business to your successor in the 5 years before your first application or at any time after your first application.

## Farm or relevant business must be actively worked

The farm or business must have been actively worked by either you, your spouse / partner or your family successor for at least 3 of the last 5 years.

This is up to the day in which you enter care.

You will need to provide proof of this.

**Part 6**

## Part 6B – Consent to the creation of a charge

I / we acknowledge that the approval of the 3-year cap results in the creation of a charge in favour of the HSE (which by virtue of the Nursing Homes Support Scheme Act, 2009, as amended, is deemed to be a mortgage made by deed) against the interest of the person to whom payment relates and of the partner of that person in such land as is specified in this application and in the case of a transferred asset against the interest of the owners of that transferred asset.

I/we consent to the creation of a charge in favour of the HSE over the assets listed below.

| | 1st Property | | 2nd Property |
|---|---|---|---|
| Details of Asset: | | Details of Asset: | |
| House No. / Name: | | House No. / Name: | |
| Street: | | Street: | |
| Town/City: | | Town/City: | |
| County: | | County: | |
| Folio Number (if known): | | Folio Number (if known): | |
| Eircode: | | Eircode: | |

*Please provide documentary evidence of the title to the property, for example copy of land registry folio, lease, conveyance.If the property is leasehold a copy of the lease must be provided.*

| | | | |
|---|---|---|---|
| Signed: | *(Applicant)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |
| Signed: | *(Partner / Spouse)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |
| Signed: | *(Person signing on behalf of Applicant)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |
| Signed: | *(Person signing on behalf of Partner / Spouse)* | Dated: | D D M M Y Y Y Y |
| | | PPSN: | |

**You cannot be considered for the 3-year cap if you do not meet this condition.**

## Farm - how to prove your farm is actively worked

You must provide proof that your farm has been actively worked by your spouse / partner or your family successor. This proof is usually an active Department of Agriculture, Food and Marine (DAFM) identifier.

DAFM identifiers we will accept are an active:

- registered herd number with herd owner status for each year since the family successor was appointed. Herd keeper status is acceptable for the family successor
- registered farm partnership number
- poultry flock number with poultry flock owner status
- sheep flock number
- equine premises number (EPRN)
- pig herd number with herd owner status
- non-animal or cereal number
- fishing vessel registration number included on the Registrar of Sea Fishing boats maintained by DAFM

We will accept this proof on a valid BISS/BPS application for the current scheme year or a copy of a herd test within the last year.

If you cannot provide one of the above, we may accept other proof that you or your family successor are an active farmer.

You and your successor must also present 1 of the following:

- BISS/BPS applications for all land that the relief is claimed under the same DAFM identifier – we will

## Part 6C – Consent of joint owners

**Complete this section if you jointly own the property referred to below.**

I / we (insert full name) _____

and _____

the joint owners of the assets listed below give my / our consent to the creation of a charge in favour of the HSE under the Nursing Homes Support Scheme Act 2009, as amended (the "Act") in respect of the following property/land based assets within the State.

I / we acknowledge that payment of increased State Support as a result of the 3-year cap on relevant farm and/or business assets results in the creation of a charge in favour of the HSE which by virtue of the Act is deemed to be a mortgage made by deed against the interest of the person to whom payment relates and of the partner of that person and in the case of a transferred asset, the interest of the family successor to whom the asset was transferred.

| | 1st Property | | 2nd Property |
|---|---|---|---|
| Details of Asset: | | Details of Asset: | |
| House No./Name: | | House No./Name: | |
| Street: | | Street: | |
| Town/City: | | Town/City: | |
| County: | | County: | |
| Folio Number (if known): | | Folio Number (if known): | |
| Eircode: | | Eircode: | |

Signed: _____ *(Applicant)* Dated: D D M M Y Y Y Y

Signed: _____ *(Applicant)* Dated: D D M M Y Y Y Y

**The absence of prior consent in writing of a joint owner does not render void the making of a charge in favour of the HSE.**

***See the next page for more information on the 3-year cap.***

accept a declaration of the forestry parcels on a BISS/BPS application

- a certificate of participation in a Bord Bia Quality Assurance Scheme
- proof of membership in the Irish Grain Assurance Scheme
- proof that you are producing and delivering milk to a registered milk purchaser
- proof that you submit annual census data for all sheep, goats, pigs and equines kept
- certified farm accounts and documents that show sales of horticultural produce
- certified farm accounts and documentation of sales of hay and silage
- a copy of the DAFM AIM system animal profile within the last year
- any other documents that might be accepted as proof that you are an active farmer

We may need copies of the above documents for different years. We will let you know if this is the case.

Your documents must be for the same land or assets that you are applying for Fair Deal on.

## Business – how to prove your business is actively worked

You or your family successor must provide proof that you have been actively working the business for at least 3 of the 5 years before you go into care.

Your family successor must also be able to provide proof over the coming 6 years that they are actively working the business. We may ask for this proof at any time.

You and your family successor will need to provide:

- proof of registration of the business with the Revenue Commissioners
- business registration documents or personal tax records showing that you, your spouse / partner or your family successor have been a director, employee, sole proprietor or partner of the business
- personal tax records or bank statements showing an income paid to you, your spouse / partner or your family successor from the business

You should also provide 1 of the following:

- evidence of a commercial transaction, bill or insurance policy, naming you, your spouse / partner or your family successor
- a letter from an accountant or solicitor confirming that you, your spouse / partner or your family successor meet the terms of the Statutory Declaration
- registration of a legal or professional body related to the business in either your name, your spouse / partner's name or your family successors name

Registration of a legal or professional body can include:

- registration with a professional body, such as a legal, accountancy or medical practice
- food business registration with the HSE
- auctioneer's licence
- waste brokers and dealers registration
- publican's licence
- bookmaker's licence
- National Register of Tobacco Retailers

We may also accept any documents that prove that your family successor is actively working the business.

## Charge on your farm or business

You must agree to us placing a charge in favour of the HSE on your farm or business. This must be agreed by you, your spouse / partner and any other owners of the farm or business.

A charge is a type of mortgage that will be placed on the property of your farm or business.

The charge will be removed once:

1. Your family successor's commitment period of 6 years has ended.
2. All other conditions of the 3-year cap have been followed.

**You may need to repay money to us if your family successor does not comply with the conditions of the scheme.**

## You cannot 'backdate' payments

You cannot 'backdate' payments or get a refund for any payments made before the 3-year cap.

For example, if you have spent 5 years in care, you may qualify for the 3-year cap. But this is only from the date we appoint your family successor.

You won't be repaid any payments already made.

## If you sell your farm or business

If you sell your farm or business at any stage, the money from the sale will be assessed as part of

your cash assets. This happens even if the 3-year cap has passed.

You must tell the Nursing Homes Support Scheme Office about any sale. You must do this within 10 working days of the date of the sale.

This is so we can carry out a new assessment of your weekly contribution.

## Verification of title

We will carry out a verification of title on the property included in the application for the 3 year cap. We will also carry out checks to identify other properties you may have a beneficial interest in. For example all properties registered in the name of the client, their spouse, deceased spouse or transferred from the applicant to the family successor within 5 years prior to application. All of these properties will be considered by us for inclusion in the financial assessment for State Support and should be considered by the applicant for inclusion in the application for the 3 year cap.

## Documents required

A land registry compliant map is needed if the principal private residence or any other residential property is contained within the folio incorporating the Land. There are specific requirements on these maps by Tailte Eireann, such as:

- Only a land registry complaint map is acceptable.
- The map must be an original, not a colour copy
- It must be certified by an Engineer/Architect
- It must outline in red the portion (Land) on the folio to be included for the 3 year cap, leaving out the principal private residence or any residential property.

# Part 7 – Co-Decision-Making Agreements

This section should only be completed if the applicant (or the applicant's spouse/partner) has appointed a co-decision-maker in writing in a co-decision-making agreement which has been registered with the Decision Support Service.

I, (insert full name)

the registered co-decision-maker of the applicant*

I, (insert full name)

the registered co-decision-maker of the applicant's spouse/partner*

hereby jointly make the within application(s) with the applicant (or the applicant's spouse/partner, as the case may be).

*delete as appropriate

Signed: *(Applicant)* Dated: D D M M Y Y Y Y

Name:

Address:

Eircode: Tel No:

Mobile No: Email Address:

# HSE Nursing Homes Support Offices

Your Nursing Homes Support Office is available to help you fill in the form or answer questions about your application. When you have completed this form, send it to the Nursing Homes Support Office in your area.

**Carlow / Kilkenny** HSE Nursing Homes Support Office, Community Services, James Green, Co. Kilkenny, R95RP26.

**Tel:** 056 77 84761 / 056 77 84763 / 056 77 84709
**Email:** NHSO.carlowkilkenny@hse.ie

**Cavan / Monaghan** HSE Nursing Homes Support Office, HSE, 15 Townhall St, Co. Cavan, H12W3R2.

**Tel:** 049 437 7114 / 049 437 7113 / 049 437 7115 / 049 437 7119

**Cork / Kerry** HSE Nursing Homes Support Office, Floor 1, Áras Sláinte, Wilton Road, Co. Cork, T12XRR0.

**Tel:** 021 4923536 / 021 4923527 / 021 4923540 / 021 4923744
**Email:** nhsocork@hse.ie

**Donegal** HSE Nursing Homes Support Office, Donegal PCCC HQ, St Joseph's Hospital, Stranorlar, Lifford, Co. Donegal, F93FCR6.

**Tel:** 074 9191734 / 074 9191740 / 074 9191737
**Email:** nhss.donegal@hse.ie

**Dublin South, Wicklow and Kildare** HSE Nursing Homes Support Office, Hawthorn House, Millennium Park, Naas, Co. Kildare, W91 FY53

**Tel:** 045 920 000
**Email:** naas.nhss@hse.ie

**Dublin North City and County** Nursing Homes Support Office, Older Person Services, Nexus Building, Units 4 & 5, Blanchardstown Corporate Park, Dublin 15, D15CF9K.

**Tel:** 01 897 6121
**Email:** nhss.dncc@hse.ie

**Galway** HSE Nursing Homes Support Office, Community Services, Lá Nua, Ballybane Neighbourhood Village, Castlepark Road, Ballybane, Co. Galway, H91VE03.

**Tel:** 091 748490
**Email:** FairDeal.Galway@hse.ie

**Laois / Offaly** HSE Nursing Homes Support Office, Older Person Services, Beside Riada House, Arden Road, Tullamore, Co. Offaly, R35NF29.

**Tel:** 057 93 59734 / 057 93 27832
**Email:** RegionalNHSS.Tullamore@hse.ie

**Limerick, Clare and North Tipperary** HSE Nursing Homes Support Office, St Joseph's Hospital, Mulgrave Street, Co. Limerick, V94C8DV.

**Tel:** 061 461499
**Email:** nursinghomessupport@hse.ie

**Longford / Westmeath** HSE Regional Nursing Homes Support Office, Bury Quay, Tullamore, Co. Offaly, R35W611.

**Tel:** 044 9394995
**Email:** LPF.RespiteLW@hse.ie

**Louth / Meath** HSE Nursing Homes Support Office, Unit 3 Ardee Business Park, Hale Street, Ardee, Co. Louth, A92C7RW .

**Tel:** 041 6871515 / 041 6871525

**Mayo** HSE Nursing Homes Support Office, St Mary's Headquarters, Castlebar, Co. Mayo, F23HP58.

**Tel:** 094 9049176 / 094 9042437
**Email:** fairdeal.mayo@hse.ie

**Roscommon** HSE Nursing Homes Support Office, Government Buildings, Convent Road, Co. Roscommon, F42VX53.

**Tel:** 090 6637561 / 090 6637546

**Sligo / Leitrim** HSE Nursing Homes Support Office, Markievicz House, Barrack Street, Co. Sligo, F91XC84.

**Tel:** 071 9321337

**Tipperary South** HSE Nursing Homes Support Office, Community Care Centre, Western Road, Clonmel, Co. Tipperary, E91HT96.

**Tel:** 052 6177283
**Email:** NHSO.southtipperary@hse.ie

**Waterford** HSE Nursing Homes Support Office, Waterford Community Services, Cork Road, Co. Waterford, X91VX09.

**Tel:** 051 842963
**Email:** NHSO.waterford@hse.ie

**Wexford** HSE Nursing Homes Support Office, Wexford Community Services, Georges Street, Co. Wexford, Y35AW96.

**Tel:** 053 91 14316 / 053 91 14315
**Email:** NHSO.wexford@hse.ie

# Data protection notice

The HSE will treat all personal information you provide as part of this application as confidential and will store it securely. When the HSE receives your application form and any supporting documents, it will make a digital record in the name of the person for whose benefit the application has been made ("the applicant"). This record will contain the relevant personal information you or the person assisting you or appointed to act on your behalf. This record will be used and retained by the HSE for any of the following purposes:

To process your application under the Nursing Homes Support Scheme Act 2009, including to contact you or your the person specified to act on your behalf to request missing information or verify information provided by you;

To operate and administer in respect of the applicant the Nursing Homes Support Scheme in accordance with the Nursing Homes Support Scheme Act 2009 and any other statutory obligations and functions of the HSE;

To exercise any of the HSE's rights arising from

i. any financial assessment of the applicant made or reviewed in accordance with the Nursing Homes Support Scheme Act 2009 or
ii. any payment to the applicant of State Support or Ancillary State Support or
iii. any debt due to the HSE by or in respect of the applicant in connection with the Nursing Homes Support Scheme.

The HSE will not disclose to or share with other people or organisations the personal information you have given unless

i. it is necessary for any of the above purposes or
ii. permission has been given by the person to whom the information relates or
iii. the HSE is required to do so by law.

Submitting your application to the HSE means you consent to the terms of this Data Protection Notice.

The HSE's privacy statement is available to review at www.hse.ie

**The information in this application form is correct at the time of printing.**
**Any changes to the Nursing Homes Support Scheme will be updated on www.hse.ie**